



L.A. Care
Medicare Plus[™]
(HMO D-SNP)

L.A. Care Medicare Plus *(HMO D-SNP)*

Lista de medicamentos cubiertos (Formulario)

2024

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

Este Formulario se actualizó el 1 de mayo de 2024.

Mensaje importante sobre lo que paga por las vacunas: Algunas vacunas se consideran beneficios médicos.

Otras vacunas se consideran medicamentos de la Parte D. Nuestro plan cubre la mayoría de las vacunas de la Parte D sin costo alguno para usted.

Para obtener información más reciente o por otras preguntas, contáctenos al **1-833-522-3767** (TTY: **711**), las 24 horas del día, los 7 días de la semana, incluso los días festivos, o visítenos en **medicare.lacare.org**.



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L.A. Care Medicare Plus (HMO D-SNP) 2024 *Lista de medicamentos cubiertos* (Formulario)

Introducción

Este documento se llama *Lista de medicamentos cubiertos* (también conocido como Lista de medicamentos). La Lista le indica qué medicamentos recetados, medicamentos de venta libre (over-the-counter, OTC), productos que no sean medicamentos y artículos están cubiertos por L.A. Care Medicare Plus. La Lista de medicamentos también le informa si hay reglas o restricciones especiales con respecto a algún medicamento cubierto por L.A. Care Medicare Plus.

Nuestra información de contacto, junto con la fecha de la última actualización de la Lista de medicamentos, aparece en las páginas de la portada y contracubierta. Los términos más importantes y sus definiciones figuran en el último capítulo de la *Evidencia de cobertura*.

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Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite medicare.lacare.org.

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A. Avisos legales

Esta es una lista de los medicamentos que los miembros pueden obtener en L.A. Care Medicare Plus.

- Siempre puede consultar la *Lista actualizada de medicamentos cubiertos* de L.A. Care Medicare Plus en línea, en medicare.lacare.org, o puede llamar al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos.
- Puede obtener este documento de manera gratuita en otros formatos, como en letra grande, en braille o en formato de audio. Llame al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita.
- Este documento está disponible de forma gratuita en árabe, armenio, chino, persa, jemer, coreano, ruso, español, tagalo y vietnamita.
- Puede solicitar que le enviemos siempre la información en el idioma o formato que necesite. Esto se llama "solicitud permanente". Haremos un seguimiento de su solicitud permanente para que no tenga que hacer solicitudes por separado cada vez que le enviemos información. Para recibir este documento en un idioma que no sea el inglés o en un formato alternativo, comuníquese a Servicios para los Miembros al (833) 522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. Un representante puede ayudarlo a hacer o cambiar una solicitud permanente.

B. Preguntas frecuentes

Encuentre aquí las respuestas para las preguntas que tenga acerca de la *Lista de medicamentos cubiertos*. Puede leer todas las preguntas frecuentes para obtener más información, o buscar una pregunta y su respuesta.

B1. ¿Qué medicamentos recetados están en la *Lista de medicamentos cubiertos*? (Para abreviar, denominamos "*Lista de medicamentos*" a la *Lista de medicamentos cubiertos*).

Los medicamentos que aparecen en la *Lista de medicamentos cubiertos* que comienza en la página 1 son los medicamentos cubiertos por L.A. Care Medicare Plus. Los medicamentos están disponibles en las farmacias dentro de nuestra red. Una farmacia se encuentra en nuestra red si tenemos un acuerdo de trabajo con ella para que le proporcione servicios. Nos referimos a estas farmacias como "farmacias de la red". L.A. Care Medicare Plus cubre los medicamentos recetados incluidos en la *Lista de medicamentos cubiertos*. Otros medicamentos, como algunos medicamentos de venta libre (OTC) y ciertas vitaminas, pueden estar cubiertos por Medi-Cal Rx. Visite el sitio web de Medi-Cal Rx en (www.Medi-Calrx.dhcs.ca.gov) para obtener más información. También puede llamar al Centro de Servicio al Cliente de Medi-Cal Rx al 800-977-2273. Lleve su tarjeta de identificación de beneficiario (Beneficiary Identification Card, BIC) de Medi-Cal cuando adquiera medicamentos recetados a través de Medi-Cal Rx.

- L.A. Care Medicare Plus cubrirá todos los medicamentos médicamente necesarios que se encuentran en la *Lista de medicamentos* si ocurre lo siguiente:
 - su médico u otra persona que recetó el medicamento dice que usted los necesita para mejorarse o mantenerse saludable;
 - L.A. Care Medicare Plus está de acuerdo en que el medicamento es médicamente necesario para usted, y
 - usted surte la receta médica en una farmacia de la red de L.A. Care Medicare Plus.



Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite medicare.lacare.org.

- En algunos casos, debe hacer algo antes de que pueda obtener un medicamento. Consulte la pregunta B4 para obtener más información.

También puede encontrar una lista actualizada de medicamentos cubiertos en nuestro sitio web en medicare.lacare.org o puede llamar al Departamento de Servicios para los Miembros al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos.

B2. ¿La Lista de medicamentos cambia alguna vez?

Sí, y L.A. Care Medicare Plus debe seguir las reglas de Medicare y Medi-Cal al realizar cambios. Podremos agregar o eliminar medicamentos de la Lista de medicamentos durante el año.

También podemos cambiar nuestras reglas sobre los medicamentos. Por ejemplo, podríamos:

- Decidir solicitar o no solicitar la autorización previa de un medicamento. (La autorización previa es el permiso de L.A. Care Medicare Plus antes de que usted pueda obtener un medicamento).
- Agregar o cambiar la cantidad que usted puede obtener de un medicamento (a esto se lo llama límites de cantidad).
- Agregar o cambiar las restricciones a la terapia de pasos de un medicamento. (Terapia de pasos significa que usted debe probar un medicamento antes de que cubramos otro medicamento).

Para obtener más información sobre estas reglas para los medicamentos, consulte la pregunta B4.

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

- salga al mercado un nuevo medicamento más económico que funcione tan bien como un medicamento incluido ahora en la Lista de medicamentos, **o**
- nos enteremos de que un medicamento no es seguro, **o**
- el medicamento sea retirado del mercado.

Las preguntas B3 y B6 incluidas a continuación tienen más información acerca de lo que sucede cuando se realizan cambios en la Lista de medicamentos.

- Siempre puede consultar la Lista actualizada de medicamentos en línea de L.A. Care Medicare Plus en medicare.lacare.org.
- También puede comunicarse con el Departamento de Servicios para los Miembros al 1-833-522-3767 (TTY: 711) para consultar la Lista actual de medicamentos, las 24 horas del día, los 7 días de la semana, incluso los días festivos.



Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite medicare.lacare.org.

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

Algunos cambios en la Lista de medicamentos se realizarán **de inmediato**. Por ejemplo:

- **Un nuevo medicamento genérico está disponible.** A veces, sale al mercado un nuevo medicamento genérico que funciona tan bien como un medicamento de marca incluido ahora en la Lista de medicamentos. Cuando esto suceda, es posible que quitemos el medicamento de marca y agreguemos el nuevo medicamento genérico, pero el costo que usted deberá pagar por el medicamento nuevo seguirá siendo de \$0. Al agregar el nuevo medicamento genérico, también es posible que decidamos mantener el medicamento de marca incluido en la lista, pero que cambiemos las reglas o los límites **para la cobertura de ese medicamento**.
 - Es posible que no podamos avisarle antes de realizar este tipo de cambios, pero le enviaremos información sobre el cambio específico una vez que suceda.
 - Usted o su proveedor pueden solicitar una excepción a estos cambios. Le enviaremos un aviso con las medidas que puede tomar para solicitar una excepción. Consulte las preguntas B10 a B12 para obtener más información sobre las excepciones.
- **Se retira un medicamento del mercado.** Si la Administración de Alimentos y Medicamentos (Food and Drug Administration, FDA) determina que un medicamento que usted está tomando no es seguro, o si el fabricante de un medicamento retira el medicamento del mercado, lo eliminaremos de la Lista de medicamentos. Si usted está tomando el medicamento, se lo haremos saber. Si recibe alguna de estas cartas, consulte con su médico para encontrar una alternativa de medicamento que sea segura para usted.

Podemos hacer otros cambios que afecten los medicamentos que usted toma. Le informaremos con anticipación acerca de estos otros cambios en la Lista de medicamentos. Estos cambios podrían realizarse si:

- La Administración de Alimentos y Medicamentos (Food and Drug Administration, FDA) proporciona nuevas directrices o hay nuevas pautas clínicas acerca de un medicamento.
- Agregamos un medicamento genérico que no es nuevo en el mercado, **y**
 - reemplazamos un medicamento de marca incluido actualmente en la Lista de medicamentos, **o**
 - cambiamos las reglas o los límites de cobertura para el medicamento de marca.

Cuando ocurran estos cambios, haremos lo siguiente:

- informarle al menos 30 días antes de que realicemos el cambio en la Lista de medicamentos, **o**
- informarle y darle un suministro de 30 días del medicamento después de solicitar un resurtido.

Esto le dará tiempo para consultar con su médico u otra persona que recetó el medicamento. Ellos pueden ayudarle a decidir lo siguiente:

- si reemplazar un medicamento por otro similar que se encuentre en la Lista de medicamentos, **o**
- si es necesario solicitar una excepción a estos cambios. Para obtener más información sobre las excepciones, consulte las preguntas B10 a B12.



Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite medicare.lacare.org.

B4. ¿Hay algún límite o restricción en la cobertura de los medicamentos o alguna medida que deba tomar para obtener determinados medicamentos?

Sí, algunos medicamentos poseen reglas de cobertura o tienen límites sobre la cantidad que puede recibir. En algunos casos usted o su médico u otro profesional deben hacer algo antes de que pueda recibir el medicamento. Por ejemplo:

- **Autorización previa:** Para algunos medicamentos, usted o su médico, u otra persona que recetó el medicamento, deben obtener la autorización de L.A. Care Medicare Plus antes de que pueda surtir su receta. Una autorización previa es diferente a una referencia. Es posible que L.A. Care Medicare Plus no cubra el medicamento si no obtiene una autorización previa.
- **Límites de cantidad:** En ocasiones L.A. Care Medicare Plus limita la cantidad de un medicamento que puede obtener.
- **Terapia de pasos:** En ocasiones L.A. Care Medicare Plus requiere que tome una terapia de pasos. Esto significa que debe probar medicamentos en un determinado orden para su condición médica. Es posible que deba probar un medicamento antes de que proporcionemos cobertura para otro medicamento. Si su médico cree que el primer medicamento no le funciona, entonces cubriremos el segundo.
- **Cobertura basada en indicaciones:** Si L.A. Care Medicare Plus cubre un medicamento solo para algunas condiciones médicas, lo identificamos claramente en la Lista de medicamentos junto con las condiciones médicas específicas que están cubiertas.

Puede averiguar si su medicamento posee requisitos adicionales o límites consultando el inicio de las tablas en la página xi. También puede visitar nuestro sitio web medicare.lacare.org para obtener más información. Hemos publicado documentos en línea que explican nuestras restricciones de autorización previa y de terapia de pasos. También puede solicitarnos que le enviemos una copia.

Puede solicitar una excepción a estos límites. Esto le dará tiempo para consultar con su médico u otra persona que recetó el medicamento. Ellos podrán decidir si existe un medicamento similar en la Lista de medicamentos que pueda tomar en su lugar o si debe solicitar una excepción. Consulte las preguntas B10 a B12 para obtener más información sobre las excepciones.

B5. ¿Cómo sabré si el medicamento que deseo tiene restricciones o si hay alguna medida que deba tomar para obtener el medicamento?

La tabla que aparece en la Lista de medicamentos por condición médica en la página número de página 1 posee una columna con el título "Acciones necesarias, restricciones o limitaciones de uso".

B6. ¿Qué sucede si L.A. Care Medicare Plus cambia sus reglas con respecto a la cobertura de algunos medicamentos (por ejemplo, la autorización previa, los límites de cantidad o las restricciones de terapia de pasos)?

En algunos casos, le informaremos con anticipación si agregamos o cambiamos requisitos de autorización previa, límites de cantidad o restricciones de terapia de pasos respecto de un medicamento. Consulte la pregunta B3 para obtener más información sobre esta notificación anticipada y las situaciones en las que quizás no podamos avisarle con anticipación cuando se cambien nuestras reglas acerca de los medicamentos de la Lista de medicamentos.



Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información,** visite medicare.lacare.org.

B7. ¿Cómo puedo encontrar un medicamento en la Lista de medicamentos?

Puede encontrar un medicamento de dos formas:

- puede buscar por orden alfabético, **o**
- puede buscar por condición médica.

Para buscar **por orden alfabético**, busque su medicamento en la sección Índice de medicamentos cubiertos. Puede encontrarla al final de la lista de medicamentos. Se denomina Índice. Los medicamentos figuran en orden alfabético.

Para buscar por **condición médica**, busque la sección denominada “Lista de medicamentos por condición médica” en la página xii. Los medicamentos en esta sección se agrupan en categorías, de acuerdo con el tipo de condición médica que tratan. Por ejemplo, si tiene una condición cardíaca, debe buscar en la categoría, agentes cardiovasculares - Misc. Ahí es donde encontrará los medicamentos que tratan condiciones del corazón.

B8. ¿Qué sucede si el medicamento que deseo tomar no figura en la Lista de medicamentos?

Si no encuentra su medicamento en la Lista de medicamentos, comuníquese con el Departamento de Servicios para los Miembros al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos, y consulte al respecto. Si le informan que L.A. Care Medicare Plus no cubrirá el medicamento, puede elegir una de las siguientes opciones:

- Solicitar al *Departamento de Servicios para los Miembros* una lista de medicamentos similares al que desea tomar. Luego, muestre la lista a su médico u otra persona que recetó el medicamento. Ellos pueden recetar un medicamento de la Lista de medicamentos que sea similar al que usted desea tomar, **o**
- puede pedirle a L.A. Care Medicare Plus que haga una excepción y cubra su medicamento. Consulte las preguntas B10 a B12 para obtener más información sobre las excepciones.

B9. ¿Qué sucede si soy un miembro nuevo de L.A. Care Medicare Plus y no puedo encontrar mi medicamento en la Lista de medicamentos o si tengo problemas para obtener mi medicamento?

Podemos ayudarle. Podemos cubrir un suministro temporal de 30 días de su medicamento durante los primeros 90 días si usted es miembro de L.A. Care Medicare Plus. Esto le dará tiempo para consultar con su médico u otra persona que recetó el medicamento. Ellos podrán decidir si existe un medicamento similar en la Lista de medicamentos que pueda tomar en su lugar o si debe solicitar una excepción.

Si su receta es por menos días, vamos a permitir varios resurtidos para ofrecerle un suministro de medicamentos hasta por un máximo de 30 días.

Cubriremos un suministro de 30 días de su medicamento si:

- está tomando un medicamento que no está en nuestra Lista de medicamento;
- las reglas de nuestro plan de salud no le permiten obtener la cantidad ordenada por la persona que recetó el medicamento;
- el medicamento requiere autorización previa de L.A. Care Medicare Plus, **o**
- está tomando un medicamento que es parte de una restricción de terapia de pasos.



Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite medicare.lacare.org.

Si está tomando un medicamento que L.A. Care Medicare Plus no considera un medicamento de la Parte D, tiene derecho a obtener un suministro único del medicamento durante 72 horas.

Si está en una residencia de reposo u otro centro de atención médica a largo plazo y necesita un medicamento que no está en la Lista de medicamentos, o si no puede conseguir fácilmente el medicamento que necesita, podemos ayudarle. Si ha estado en el plan durante más de 90 días, vive en un centro de atención médica a largo plazo y necesita un suministro de inmediato:

- Cubriremos un suministro para 31 días del medicamento que usted necesite (a menos que tenga una receta para menos días), independientemente de que usted sea o no un miembro nuevo de L.A. Care Medicare Plus.
- Esto se proporciona de manera adicional al suministro temporal durante los primeros 90 días de membresía en L.A. Care Medicare Plus.

Cambios en el nivel de atención médica

Proporcionaremos un suministro de transición de sus medicamentos cuando experimente un cambio en el nivel de atención médica.

Algunos ejemplos de cambios en el nivel de atención médica pueden incluir lo siguiente:

1. Miembros transferidos de un hospital a centros de atención médica a largo plazo.
2. Miembros que son dados de alta de un hospital y enviados a su casa.
3. Miembros que terminan su estadía en un hospital de enfermería de la Parte A de Medicare y que necesitan regresar a su formulario del plan de la Parte D.
4. Miembros que abandonan el estatus del centro de cuidados paliativos para regresar a los beneficios estándar de la Parte A y B de Medicare.
5. Miembros que terminan su estadía en un centro de atención médica a largo plazo y regresan a la comunidad.
6. Miembros que son dados de alta de hospitales psiquiátricos con regímenes de medicamentos altamente personalizados.

Las farmacias pueden comunicarse con el Centro de Ayuda de Farmacia al 1-844-268-9785 para procesar las cancelaciones del punto de venta a fin de asegurar que los miembros reciban acceso a sus medicamentos sin ningún retraso.

B10. ¿Puedo solicitar una excepción para cubrir mi medicamento?

Sí. Puede solicitar a L.A. Care Medicare Plus que realice una excepción para cubrir un medicamento que no se encuentre en la Lista de medicamentos.

También puede solicitarnos que cambiemos las reglas de su medicamento.

- Por ejemplo, L.A. Care Medicare Plus puede limitar la cantidad de medicamentos que cubriremos. Si su medicamento tiene un límite, puede solicitarnos que cambiemos el límite y cubramos una mayor cantidad.
- Otros ejemplos: Puede solicitarnos que suspendamos las restricciones de terapia de pasos o los requisitos de autorización previa.



Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite medicare.lacare.org.

B11. ¿Cómo puedo solicitar una excepción?

Para solicitar una excepción, comuníquese con el Departamento de Servicios para los Miembros. Un representante del Departamento de Servicios para los Miembros trabajará con usted y su proveedor para ayudarle a solicitar una excepción. También puede leer el Capítulo 9 de la *Evidencia de cobertura* para obtener más información acerca de las excepciones.

B12. ¿Cuánto tiempo tarda obtener una excepción?

Una vez que recibimos una declaración de la persona que recetó el medicamento y la cual solicita una excepción, le informaremos sobre nuestra decisión dentro de las 72 horas. Su médico u otra persona que recetó el medicamento puede enviarnos la declaración por fax o correo. O bien, su médico u otra persona que recetó el medicamento nos puede decir al respecto por teléfono y, luego, enviarnos una declaración por fax o por correo. Para obtener más información, puede llamarnos al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos.

Si usted o la persona que recetó el medicamento piensan que su salud puede perjudicarse si tiene que esperar 72 horas para una decisión, puede solicitar una excepción acelerada. Es una decisión más rápida. Si la persona que recetó el medicamento respalda su solicitud, le informaremos nuestra decisión dentro de las 24 horas de recibir la declaración de respaldo de la persona que recetó el medicamento.

B13. ¿Qué son los medicamentos genéricos?

Los medicamentos genéricos contienen los mismos ingredientes activos que los medicamentos de marca. Por lo general, cuestan menos que los medicamentos de marca y normalmente no tienen nombres conocidos. Los medicamentos genéricos están aprobados por la Administración de Alimentos y Medicamentos (FDA).

L.A. Care Medicare Plus cubre tanto medicamentos de marca como medicamentos genéricos.

B14. ¿Qué son los medicamentos OTC?

OTC significa “de venta libre”. L.A. Care Medicare Plus cubre algunos medicamentos OTC cuando son recetados por su proveedor.

Puede leer la Lista de medicamentos de L.A. Care Medicare Plus para buscar cuáles son los medicamentos OTC que están cubiertos.

B15. ¿L.A. Care Medicare Plus cubre los productos OTC que no sean medicamentos?

L.A. Care Medicare Plus cubre algunos productos OTC que no sean medicamentos cuando son recetados por su proveedor.

Algunos ejemplos de productos OTC que no sean medicamentos incluyen hisopos con alcohol.

Puede leer la Lista de medicamentos de L.A. Care Medicare Plus para buscar cuáles son los productos OTC que no sean medicamentos que están cubiertos.



Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite medicare.lacare.org.

B16. ¿L.A. Care Medicare Plus cubre los suministros de medicamentos recetados a largo plazo?

- **Programas de pedidos por correo.** Ofrecemos un programa de pedidos por correo que le permite obtener un suministro de 100 días de sus medicamentos recetados enviado directamente a su hogar. Un suministro de 100 días tiene el mismo copago que un suministro de un mes.
- **Programas de farmacia minorista para 100 días.** Algunas farmacias minoristas también pueden ofrecer un suministro de hasta 100 días de medicamentos recetados cubiertos. Un suministro de 100 días tiene el mismo copago que un suministro de un mes.

B17. ¿La farmacia local me puede enviar medicamentos recetados a mi casa?

Es posible que su farmacia local pueda entregar su receta en su casa. Puede llamar a su farmacia para averiguar si ofrecen entrega a domicilio.

B18. ¿Cuál es mi copago?

Los miembros de L.A. Care Medicare Plus tienen un copago de \$0 para medicamentos OTC y recetados, así como para productos que no sean medicamentos si el miembro sigue las reglas del plan. Consulte las preguntas B14 y B15 para obtener más información sobre los medicamentos OTC y los productos que no sean medicamentos.

Los niveles son grupos de medicamentos en nuestra Lista de medicamentos.

- Todos los medicamentos cubiertos de la Parte D (Nivel 1): Su copago por un suministro para un mes (30 días) es de \$0 por receta.

Si tiene preguntas, llame a Servicios para los Miembros al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos.

C. Resumen de la *Lista de medicamentos cubiertos*

La *Lista de medicamentos cubiertos* le proporciona información sobre los medicamentos cubiertos por L.A. Care Medicare Plus. Si tiene problemas para encontrar su medicamento en la lista, consulte el Índice de medicamentos cubiertos que comienza en la página 1 del índice. El Índice detalla alfabéticamente todos los medicamentos cubiertos por L.A. Care Medicare Plus.



Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite medicare.lacare.org.

ABREVIATURAS DE LAS NOTAS DE COBERTURA

Restricciones a la administración de utilización

ABREVIATURA	DESCRIPCIÓN	EXPLICACIÓN
Autorización previa (Prior Authorization, PA)	Restricción a la autorización previa	Usted (o su médico) deben obtener una autorización previa de L.A. Care Medicare Plus antes de surtir su receta para este medicamento. Sin una autorización previa, L.A. Care Medicare Plus no podrá cubrir este medicamento.
PA BvD	Restricción de autorización previa para la determinación de la Parte B frente a la Parte D	Este medicamento puede ser elegible para el pago en virtud de la Parte B o Parte D de Medicare. Usted (o su médico) deben obtener una autorización previa de L.A. Care Medicare Plus para determinar que el medicamento está cubierto conforme la Parte D de Medicare antes de surtir su receta médica para este medicamento. Sin una autorización previa, L.A. Care Medicare Plus no podrá cubrir este medicamento.
PA NSO	Restricción de autorización previa solo para los miembros nuevos (Prior Authorization Restriction for New Starts Only, PA NSO)	Si esta es una nueva receta para usted, es decir, es el primer medicamento que se le receta, usted (o su médico) debe obtener autorización previa de L.A. Care Medicare Plus antes de surtir su receta de este medicamento. Sin una autorización previa, L.A. Care Medicare Plus no podrá cubrir este medicamento.
QL	Restricción al límite de cantidad (Quantity Limit, QL)	L.A. Care Medicare Plus limita la cantidad cubierta dentro de un plazo específico para este medicamento.
ST	Restricción a la terapia de pasos (Step Therapy, ST)	Antes de que L.A. Care Medicare Plus ofrezca cobertura para este medicamento, primero debe probar otro(s) medicamento(s) del formulario para tratar su condición médica. Este medicamento solo puede cubrirse si otro(s) medicamento(s) no le resulta(n).
ST NSO	Terapia de pasos solo para nuevos tratamientos (Step Therapy for New Starts Only, ST NSO)	Si esta es una receta nueva para usted, es decir, si es la primera vez que se la recetan, antes de que L.A. Care Medicare Plus ofrezca cobertura para este medicamento, primero debe probar otro(s) medicamento(s) del formulario para tratar su condición médica. Este medicamento solo puede cubrirse si otro(s) medicamento(s) no le resulta(n).

Otros requisitos especiales de cobertura

Distribución limitada (Limited distribution, LD)	Medicamento de distribución limitada	Esta receta médica puede estar disponible solo en determinadas farmacias. Para obtener más información, consulte su <i>Directorio de proveedores/farmacias</i> o llame al Departamento de Servicios para los Miembros al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos.
NDS	Suministro sin extensión	Los medicamentos con la inscripción "NDS" se limitan a un suministro de un mes tanto en las farmacias minoristas como en las órdenes por correo.
INS	Insulina	Productos de insulina a un máximo de \$35 por mes.
VAC	Vacuna	Vacunas de la Parte D de Medicare cubiertas a \$0.

Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite medicare.lacare.org.



Nota: El asterisco (*) al lado de un medicamento indica que no es un “medicamento cubierto por la Parte D”. Estos medicamentos tienen reglas diferentes para las apelaciones.

- Una apelación es una manera formal de solicitar la revisión de una decisión que tomamos sobre su cobertura y de solicitar que la cambiemos si cree que cometimos un error.
- Por ejemplo, podemos decidir que un medicamento que usted desea no está cubierto o ya no está cubierto por Medicare o Medi-Cal.
- Si usted o su médico no están de acuerdo con nuestra decisión, pueden apelar. Si en algún momento tiene alguna pregunta, llame a Servicios para los Miembros al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos.
- También puede leer el Capítulo 9 de la *Evidencia de cobertura* para obtener información acerca de cómo apelar una decisión.

C1. Lista de medicamentos por condición médica

Los medicamentos en esta sección se agrupan en categorías, de acuerdo con el tipo de condición médica que tratan. Por ejemplo, si tiene una afección del corazón, debe buscar en la categoría, agentes cardiovasculares - Misc. Ahí es donde encontrará los medicamentos que tratan condiciones del corazón.



Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite medicare.lacare.org.

D. Índice de medicamentos cubiertos

En esta sección, puede buscar un medicamento por su nombre en orden alfabético. Allí podrá ver el número de página donde hay información adicional sobre la cobertura de su medicamento.



Si tiene preguntas, llame a L.A. Care Medicare Plus al 1-833-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita. **Para obtener más información**, visite [medicare.lacare.org](https://www.lacare.org).

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<i>amphetamine/dextroamphetamine 10mg tab</i>	1	
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	1	
<i>amphetamine/dextroamphetamine 15mg tab</i>	1	
<i>amphetamine/dextroamphetamine 20mg tab</i>	1	
<i>amphetamine/dextroamphetamine 25mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 30mg tab</i>	1	
<i>amphetamine/dextroamphetamine 5mg tab</i>	1	
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	1	
<i>dextroamphetamine sulfate 10mg er cap</i>	1	
<i>dextroamphetamine sulfate 10mg tab</i>	1	
<i>dextroamphetamine sulfate 15mg er cap</i>	1	
<i>dextroamphetamine sulfate 5mg er cap</i>	1	
<i>dextroamphetamine sulfate 5mg tab</i>	1	
<i>lisdexamfetamine dimesylate 10mg cap</i>	1	
<i>lisdexamfetamine dimesylate 20mg cap</i>	1	
<i>lisdexamfetamine dimesylate 30mg cap</i>	1	
<i>lisdexamfetamine dimesylate 40mg cap</i>	1	
<i>lisdexamfetamine dimesylate 50mg cap</i>	1	
<i>lisdexamfetamine dimesylate 60mg cap</i>	1	
<i>lisdexamfetamine dimesylate 70mg cap</i>	1	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine 100mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 10mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 18mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 25mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 40mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 60mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 80mg cap</i>	1	QL=60 EA/30 Days
<i>clonidine 0.1mg er tab</i>	1	
<i>guanfacine 1mg er tab</i>	1	
<i>guanfacine 2mg er tab</i>	1	
<i>guanfacine 3mg er tab</i>	1	
<i>guanfacine 4mg er tab</i>	1	
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI 150MG TAB	1	PA QL=30 EA/30 Days
SUNOSI 75MG TAB	1	PA QL=30 EA/30 Days
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS		
WAKIX 17.8MG TAB	1	NDS PA QL=60 EA/30 Days
WAKIX 4.45MG TAB	1	NDS PA QL=60 EA/30 Days
STIMULANTS - MISC.		
<i>armodafinil 150mg tab</i>	1	PA QL=30 EA/30 Days
<i>armodafinil 200mg tab</i>	1	PA QL=30 EA/30 Days
<i>armodafinil 250mg tab</i>	1	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
<i>armodafinil 50mg tab</i>	1	PA QL=30 EA/30 Days
<i>dexmethylphenidate 10mg er cap</i>	1	
<i>dexmethylphenidate 10mg tab</i>	1	
<i>dexmethylphenidate 15mg er cap</i>	1	
<i>dexmethylphenidate 2.5mg tab</i>	1	
<i>dexmethylphenidate 20mg er cap</i>	1	
<i>dexmethylphenidate 25mg er cap</i>	1	
<i>dexmethylphenidate 30mg er cap</i>	1	
<i>dexmethylphenidate 35mg er cap</i>	1	
<i>dexmethylphenidate 40mg er cap</i>	1	
<i>dexmethylphenidate 5mg er cap</i>	1	
<i>dexmethylphenidate 5mg tab</i>	1	
<i>methylphenidate 10mg cr cap</i>	1	
<i>methylphenidate 10mg er tab</i>	1	
<i>methylphenidate 10mg la cap</i>	1	
<i>methylphenidate 10mg tab</i>	1	
<i>methylphenidate 18mg ER osmotic tab</i>	1	
<i>methylphenidate 1mg/ml oral soln</i>	1	
<i>methylphenidate 20mg cr cap</i>	1	
<i>methylphenidate 20mg er tab</i>	1	
<i>methylphenidate 20mg la cap</i>	1	
<i>methylphenidate 20mg tab</i>	1	
<i>methylphenidate 27mg er tab</i>	1	
<i>methylphenidate 27mg sr tab</i>	1	
<i>methylphenidate 2mg/ml oral soln</i>	1	
<i>methylphenidate 30mg cr cap</i>	1	
<i>methylphenidate 30mg la cap</i>	1	
<i>methylphenidate 36mg er tab</i>	1	
<i>methylphenidate 36mg sr tab</i>	1	
<i>methylphenidate 40mg cr cap</i>	1	
<i>methylphenidate 40mg la cap</i>	1	
<i>methylphenidate 50mg cr cap</i>	1	
<i>methylphenidate 54mg er tab</i>	1	
<i>methylphenidate 54mg sr tab</i>	1	
<i>methylphenidate 5mg tab</i>	1	
<i>methylphenidate 60mg cr cap</i>	1	
<i>modafinil 100mg tab</i>	1	PA QL=60 EA/30 Days
<i>modafinil 200mg tab</i>	1	PA QL=60 EA/30 Days
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
<i>amikacin 250mg/ml inj</i>	1	
ARIKAYCE 590MG/8.4ML INH SUSP	1	NDS PA QL=252 ML/30 Days
GENTAMICIN 0.8MG/ML INJ	1	
<i>gentamicin 1.2mg/ml inj</i>	1	
GENTAMICIN 1.6MG/ML INJ	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
GENTAMICIN 1MG/ML INJ	1	
<i>gentamicin 40mg/ml inj</i>	1	
<i>neomycin sulfate 500mg tab</i>	1	
TOBRAMYCIN 10MG/ML INJ	1	
<i>tobramycin 40mg/ml inj</i>	1	
<i>tobramycin 60mg/ml inh soln</i>	1	PA QL=300 ML/30 Days
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
OLUMIANT 1MG TAB	1	NDS PA QL=30 EA/30 Days
OLUMIANT 2MG TAB	1	NDS PA QL=30 EA/30 Days
OLUMIANT 4MG TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 15MG ER TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 30MG ER TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 45MG ER TAB	1	NDS PA QL=30 EA/30 Days
XELJANZ 10MG TAB	1	NDS PA QL=60 EA/30 Days
XELJANZ 1MG/ML ORAL SOLN	1	NDS PA QL=300 ML/30 Days
XELJANZ 5MG TAB	1	NDS PA QL=60 EA/30 Days
XELJANZ XR 11MG TAB	1	NDS PA QL=30 EA/30 Days
XELJANZ XR 22MG TAB	1	NDS PA QL=30 EA/30 Days
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
HADLIMA 40MG/0.4ML AUTO-INJECTOR	1	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.4ML SYRINGE	1	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.8ML AUTO-INJECTOR	1	NDS PA QL=4.80 ML/28 Days
HADLIMA 40MG/0.8ML SYRINGE	1	NDS PA QL=4.80 ML/28 Days
HUMIRA 10MG/0.1ML SYRINGE (ABBVIE)	1	NDS PA QL=2 EA/28 Days
HUMIRA 20MG/0.2ML SYRINGE (ABBVIE)	1	NDS PA QL=2 EA/28 Days
HUMIRA 40MG/0.4ML AUTO-INJECTOR (ABBVIE)	1	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.4ML SYRINGE (ABBVIE)	1	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.8ML AUTO-INJECTOR	1	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.8ML SYRINGE	1	NDS PA QL=6 EA/28 Days
HUMIRA 80MG/0.8ML AUTO-INJECTOR (ABBVIE)	1	NDS PA QL=2 EA/28 Days
HUMIRA PEDIATRIC CROHN'S STARTER PACK SYRINGE (2) 40MG/0.4ML 80MG/0.8ML	1	NDS PA QL=2 EA/180 Days
HUMIRA PEN - PEDIATRIC UC STARTER PACK 80MG/0.8ML INJ (ABBVIE)	1	NDS PA QL=4 EA/180 Days
HUMIRA PEN - PSORIASIS STARTER PACK 40MG/0.8ML	1	NDS PA QL=4 EA/180 Days
HUMIRA PEN 80MG/0.8ML AND 40MG/0.4ML - PSORIASIS/UEVITIS STARTER PACK	1	NDS PA QL=3 EA/180 Days
HUMIRA PEN 80MG/0.8ML CROHNS/UC/HIDRADENITIS STARTER PACK (ABBVIE)	1	NDS PA QL=3 EA/180 Days
HUMIRA PREFILLED SYRINGE 80MG/0.8ML STARTER PACK - PEDIATRIC CROHN'S DISEASE	1	NDS PA QL=3 EA/180 Days
SIMPONI 100MG/ML AUTO-INJECTOR	1	NDS PA QL=3 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
SIMPONI 100MG/ML SYRINGE	1	NDS PA QL=3 ML/28 Days
SIMPONI 50MG/0.5ML AUTO-INJECTOR	1	NDS PA QL=.50 ML/28 Days
SIMPONI 50MG/0.5ML SYRINGE	1	NDS PA QL=.50 ML/28 Days
GOLD COMPOUNDS		
RIDAURA 3MG CAP	1	
INTERLEUKIN-1 BLOCKERS		
ARCALYST 220MG INJ	1	NDS PA
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA 162MG/0.9ML AUTO-INJECTOR	1	NDS PA QL=3.60 ML/28 Days
ACTEMRA 162MG/0.9ML SYRINGE	1	NDS PA QL=3.60 ML/28 Days
KEVZARA 150MG/1.14ML AUTO-INJECTOR	1	NDS PA QL=2.28 ML/28 Days
KEVZARA 150MG/1.14ML SYRINGE	1	NDS PA QL=2.28 ML/28 Days
KEVZARA 200MG/1.14ML AUTO-INJECTOR	1	NDS PA QL=2.28 ML/28 Days
KEVZARA 200MG/1.14ML SYRINGE	1	NDS PA QL=2.28 ML/28 Days
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
<i>celecoxib 100mg cap</i>	1	
<i>celecoxib 200mg cap</i>	1	
<i>celecoxib 400mg cap</i>	1	
<i>celecoxib 50mg cap</i>	1	
<i>diclofenac potassium 50mg tab</i>	1	
<i>diclofenac sodium 100mg er tab</i>	1	
<i>diclofenac sodium 25mg dr tab</i>	1	
<i>diclofenac sodium 50mg dr tab</i>	1	
<i>diclofenac sodium 75mg dr tab</i>	1	
<i>diclofenac sodium/misoprostol 50-0.2mg dr tab</i>	1	
<i>diclofenac sodium/misoprostol 75-0.2mg dr tab</i>	1	
<i>etodolac 200mg cap</i>	1	
<i>etodolac 300mg cap</i>	1	
<i>etodolac 400mg tab</i>	1	
<i>etodolac 500mg tab</i>	1	
<i>ibu 600mg tab</i>	1	
<i>ibu 800mg tab</i>	1	
<i>ibuprofen 20mg/ml susp</i>	1	
<i>ibuprofen 400mg tab</i>	1	
<i>ibuprofen 600mg tab</i>	1	
<i>ibuprofen 800mg tab</i>	1	
<i>ketorolac tromethamine 10mg tab</i>	1	QL=20 EA/5 Days
<i>meloxicam 15mg tab</i>	1	
<i>meloxicam 7.5mg tab</i>	1	
<i>nabumetone 500mg tab</i>	1	
<i>nabumetone 750mg tab</i>	1	
<i>naproxen 250mg tab</i>	1	
<i>naproxen 375mg dr tab</i>	1	
<i>naproxen 375mg tab</i>	1	
<i>naproxen 500mg tab</i>	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
<i>naproxen sodium 275mg tab</i>	1	
<i>naproxen sodium 550mg tab</i>	1	
<i>piroxicam 10mg cap</i>	1	
<i>piroxicam 20mg cap</i>	1	
<i>sulindac 150mg tab</i>	1	
<i>sulindac 200mg tab</i>	1	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA 28-DAY STARTER PACK	1	NDS PA QL=55 EA/28 Days
OTEZLA 30MG TAB	1	NDS PA QL=60 EA/30 Days
PYRIMIDINE SYNTHESIS INHIBITORS		
<i>leflunomide 10mg tab</i>	1	
<i>leflunomide 20mg tab</i>	1	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA 125MG/ML AUTO-INJECTOR	1	NDS PA QL=4 ML/28 Days
ORENCIA 125MG/ML SYRINGE	1	NDS PA QL=4 ML/28 Days
ORENCIA 50MG/0.4ML SYRINGE	1	NDS PA QL=1.60 ML/28 Days
ORENCIA 87.5MG/0.7ML SYRINGE	1	NDS PA QL=2.80 ML/28 Days
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL 25MG/0.5ML INJ	1	NDS PA QL=8 ML/28 Days
ENBREL 25MG/0.5ML SYRINGE	1	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML CARTRIDGE	1	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML SYRINGE	1	NDS PA QL=8 ML/28 Days
ANALGESICS - NONNARCOTIC		
SALICYLATES		
<i>diflunisal 500mg tab</i>	1	
ANALGESICS - OPIOID		
OPIOID AGONISTS		
CODEINE SULFATE 15MG TAB	1	QL=240 EA/30 Days
CODEINE SULFATE 30MG TAB	1	QL=240 EA/30 Days
CODEINE SULFATE 60MG TAB	1	QL=180 EA/30 Days
<i>fentanyl 100mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 1200mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>fentanyl 12mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 1600mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>fentanyl 200mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>fentanyl 25mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 400mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>fentanyl 50mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 600mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>fentanyl 75mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 800mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>hydromorphone 2mg tab</i>	1	QL=450 EA/30 Days
<i>hydromorphone 4mg tab</i>	1	QL=240 EA/30 Days
<i>hydromorphone 8mg tab</i>	1	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
<i>methadone 10mg tab</i>	1	QL=360 EA/30 Days
<i>methadone 5mg tab</i>	1	QL=360 EA/30 Days
<i>morphine sulfate 100mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 EA/30 Days
MORPHINE SULFATE 15MG TAB	1	QL=180 EA/30 Days
<i>morphine sulfate 200mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 ML/30 Days
MORPHINE SULFATE 2MG/ML ORAL SOLN	1	QL=1800 ML/30 Days
<i>morphine sulfate 30mg er tab</i>	1	QL=120 EA/30 Days
MORPHINE SULFATE 30MG TAB	1	QL=180 EA/30 Days
MORPHINE SULFATE 4MG/ML ORAL SOLN	1	QL=900 ML/30 Days
<i>morphine sulfate 60mg er tab</i>	1	QL=120 EA/30 Days
<i>oxycodone 10mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 15mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 1mg/ml oral soln</i>	1	QL=5400 ML/30 Days
<i>oxycodone 20mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 20mg/ml oral soln</i>	1	QL=270 ML/30 Days
<i>oxycodone 30mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 5mg tab</i>	1	QL=360 EA/30 Days
<i>tramadol 100mg er tab</i>	1	QL=30 EA/30 Days
<i>tramadol 200mg er tab</i>	1	QL=30 EA/30 Days
<i>tramadol 300mg er tab</i>	1	QL=30 EA/30 Days
<i>tramadol 50mg tab</i>	1	QL=240 EA/30 Days
OPIOID COMBINATIONS		
<i>acetaminophen/codeine phosphate 24mg-2.4mg/ml oral soln</i>	1	QL=4980 ML/30 Days
<i>acetaminophen/hydrocodone bitartrate 21.7mg-0.5mg/ml oral soln</i>	1	QL=5400 ML/30 Days
<i>codeine phosphate/acetaminophen 15-300mg tab</i>	1	QL=390 EA/30 Days
<i>codeine phosphate/acetaminophen 30-300mg tab</i>	1	QL=390 EA/30 Days
<i>codeine phosphate/acetaminophen 60-300mg tab</i>	1	QL=390 EA/30 Days
<i>endocet 2.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>endocet 325-10mg tab</i>	1	QL=360 EA/30 Days
<i>endocet 325-5mg tab</i>	1	QL=360 EA/30 Days
<i>endocet 325-7.5mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 2.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 5-325mg tab</i>	1	QL=360 EA/30 Days
OXYCODONE/ACETAMINOPHEN 5-325MG/5ML	1	QL=1800 ML/30 Days
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>tramadol/acetaminophen 37.5-325mg tab</i>	1	QL=360 EA/30 Days
OPIOID PARTIAL AGONISTS		

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
<i>buprenorphine 2mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine 8mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 12-3mg sl film</i>	1	QL=60 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 4-1mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	1	QL=90 EA/30 Days
<i>butorphanol tartrate 1mg/act nasal inhaler</i>	1	QL=10 ML/30 Days
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol 100mg cap</i>	1	
<i>danazol 200mg cap</i>	1	
<i>danazol 50mg cap</i>	1	
<i>depo-testosterone 200mg/ml inj</i>	1	
<i>testosterone 1% (12.5mg/act) gel pump</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1% (25mg) gel packet</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1% (50mg) gel packet</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1.62% (1.25gm) gel packet</i>	1	PA QL=75 GM/30 Days
<i>testosterone 1.62% (2.5gm) gel packet</i>	1	PA QL=150 GM/30 Days
<i>testosterone 1.62% (20.25mg/act) gel pump</i>	1	PA QL=150 GM/30 Days
<i>testosterone 30mg/act topical soln</i>	1	PA QL=180 ML/30 Days
<i>testosterone cypionate 100mg/ml inj</i>	1	
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	1	
<i>testosterone cypionate 200mg/ml inj</i>	1	
TESTOSTERONE ENANTHATE 200MG/ML INJ	1	
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide 2mg/act rectal foam</i>	1	PA
<i>hydrocortisone 1.67mg/ml enema</i>	1	
RECTAL STEROIDS		
<i>hydrocortisone 2.5% cream</i>	1	
<i>procto-med 2.5% cream</i>	1	
<i>proctosol 2.5% cream</i>	1	
<i>proctozone hc 2.5% cream</i>	1	
VASODILATING AGENTS		
<i>nitroglycerin 0.4% rectal ointment</i>	1	QL=30 GM/30 Days
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole 200mg tab</i>	1	
BENZNIDAZOLE 100MG TAB	1	
BENZNIDAZOLE 12.5MG TAB	1	
<i>ivermectin 3mg tab</i>	1	PA
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		

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
<i>ranolazine 1000mg er tab</i>	1	
<i>ranolazine 500mg er tab</i>	1	
NITRATES		
<i>isosorbide dinitrate 10mg tab</i>	1	
<i>isosorbide dinitrate 20mg tab</i>	1	
<i>isosorbide dinitrate 30mg tab</i>	1	
<i>isosorbide dinitrate 5mg tab</i>	1	
ISOSORBIDE MONONITRATE 10MG TAB	1	
<i>isosorbide mononitrate 120mg er tab</i>	1	
ISOSORBIDE MONONITRATE 20MG TAB	1	
<i>isosorbide mononitrate 30mg er tab</i>	1	
<i>isosorbide mononitrate 60mg er tab</i>	1	
NITRO-BID 2% OINTMENT	1	
<i>nitroglycerin 0.1mg/hr patch</i>	1	
<i>nitroglycerin 0.2mg/hr patch</i>	1	
<i>nitroglycerin 0.3mg sl tab</i>	1	
<i>nitroglycerin 0.4mg sl tab</i>	1	
<i>nitroglycerin 0.4mg/act spray</i>	1	
<i>nitroglycerin 0.4mg/hr patch</i>	1	
<i>nitroglycerin 0.6mg sl tab</i>	1	
<i>nitroglycerin 0.6mg/hr patch</i>	1	
ANTI-ANXIETY AGENTS		
ANTI-ANXIETY AGENTS - MISC.		
<i>bupirone 10mg tab</i>	1	
<i>bupirone 15mg tab</i>	1	
<i>bupirone 30mg tab</i>	1	
<i>bupirone 5mg tab</i>	1	
<i>bupirone 7.5mg tab</i>	1	
<i>hydroxyzine 10mg tab</i>	1	
<i>hydroxyzine 25mg tab</i>	1	
<i>hydroxyzine 50mg tab</i>	1	
HYDROXYZINE PAMOATE 100MG CAP	1	
<i>hydroxyzine pamoate 25mg cap</i>	1	
<i>hydroxyzine pamoate 50mg cap</i>	1	
BENZODIAZEPINES		
<i>alprazolam 0.25mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 0.5mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 1mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 2mg tab</i>	1	QL=150 EA/30 Days
<i>chlordiazepoxide 10mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 25mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 5mg cap</i>	1	QL=120 EA/30 Days
<i>clorazepate dipotassium 15mg tab</i>	1	QL=180 EA/30 Days
<i>diazepam 10mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 1mg/ml oral soln</i>	1	QL=1200 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
<i>diazepam 2mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg/ml oral soln</i>	1	QL=240 ML/30 Days
<i>lorazepam 0.5mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 1mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg/ml oral soln</i>	1	QL=150 ML/30 Days
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide 100mg cap</i>	1	PA
<i>disopyramide 150mg cap</i>	1	PA
QUINIDINE SULFATE 200MG TAB	1	
QUINIDINE SULFATE 300MG TAB	1	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine 150mg cap</i>	1	
<i>mexiletine 200mg cap</i>	1	
<i>mexiletine 250mg cap</i>	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate 100mg tab</i>	1	
<i>flecainide acetate 150mg tab</i>	1	
<i>flecainide acetate 50mg tab</i>	1	
<i>propafenone 150mg tab</i>	1	
<i>propafenone 225mg er cap</i>	1	
<i>propafenone 225mg tab</i>	1	
<i>propafenone 300mg tab</i>	1	
<i>propafenone 325mg er cap</i>	1	
<i>propafenone 425mg er cap</i>	1	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone 200mg tab</i>	1	
<i>amiodarone 400mg tab</i>	1	
<i>dofetilide 0.125mg cap</i>	1	
<i>dofetilide 0.25mg cap</i>	1	
<i>dofetilide 0.5mg cap</i>	1	
MULTAQ 400MG TAB	1	
<i>pacerone 200mg tab</i>	1	
<i>pacerone 400mg tab</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA 30MG/ML AUTO-INJECTOR	1	PA
FASENRA 30MG/ML SYRINGE	1	PA
NUCALA 100MG INJ	1	NDS PA
NUCALA 100MG/ML AUTO-INJECTOR	1	NDS PA
NUCALA 100MG/ML SYRINGE	1	NDS PA
NUCALA 40MG/0.4ML SYRINGE	1	NDS PA
XOLAIR 150MG INJ	1	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
XOLAIR 150MG/ML AUTO-INJECTOR	1	NDS PA
XOLAIR 150MG/ML SYRINGE	1	NDS PA
XOLAIR 300MG/2ML AUTO-INJECTOR	1	NDS PA
XOLAIR 300MG/2ML SYRINGE	1	NDS PA
XOLAIR 75MG/0.5ML AUTO-INJECTOR	1	NDS PA
XOLAIR 75MG/0.5ML SYRINGE	1	NDS PA
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG INHALER	1	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH INHALER	1	
<i>ipratropium bromide 0.02% inh soln</i>	1	PA BvD
SPIRIVA RESPIMAT 1.25MCG/ACT INH	1	ST QL=4 GM/30 Days
LEUKOTRIENE MODULATORS		
<i>montelukast 10mg tab</i>	1	QL=30 EA/30 Days
<i>montelukast 4mg chew tab</i>	1	QL=30 EA/30 Days
<i>montelukast 4mg granules</i>	1	QL=30 EA/30 Days
<i>montelukast 5mg chew tab</i>	1	QL=30 EA/30 Days
<i>zafirlukast 10mg tab</i>	1	QL=60 EA/30 Days
<i>zafirlukast 20mg tab</i>	1	QL=60 EA/30 Days
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
<i>roflumilast 0.5mg tab</i>	1	
<i>roflumilast 250mcg tab</i>	1	
STEROID INHALANTS		
ALVESCO 160MCG INHALER	1	QL=12.20 GM/30 Days
ALVESCO 80MCG INHALER	1	QL=12.20 GM/30 Days
ARNUITY 100MCG INHALER	1	QL=30 EA/30 Days
ARNUITY 200MCG INHALER	1	QL=30 EA/30 Days
ARNUITY 50MCG INHALER	1	QL=30 EA/30 Days
ASMANEX 100MCG HFA INHALER	1	QL=13 GM/30 Days
ASMANEX 110MCG (30ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 200MCG HFA INHALER	1	QL=13 GM/30 Days
ASMANEX 220MCG (120ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 220MCG (30ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 220MCG (60ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 50MCG HFA INHALER	1	QL=13 GM/30 Days
<i>budesonide 0.125mg/ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
<i>budesonide 0.25mg/ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
FLUTICASONE PROPIONATE 110MCG INHALER	1	QL=24 GM/30 Days
FLUTICASONE PROPIONATE 220MCG INHALER	1	QL=24 GM/30 Days
FLUTICASONE PROPIONATE 44MCG INHALER	1	QL=21.20 GM/30 Days
QVAR 40MCG REDIHALER	1	QL=21.20 GM/30 Days
QVAR 80MCG REDIHALER	1	QL=21.20 GM/30 Days
SYMPATHOMIMETICS		
ADVAIR 115-21MCG HFA INHALER	1	QL=12 GM/30 Days
ADVAIR 230-21MCG HFA INHALER	1	QL=12 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
ADVAIR 45-21MCG/ACT HFA INHALER	1	QL=12 GM/30 Days
<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	1	PA BvD
<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	1	
<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	1	PA BvD
<i>albuterol 1.25mg/3ml neb soln</i>	1	PA BvD
<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	1	QL=13.40 GM/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	1	QL=17 GM/30 Days
<i>albuterol 2mg tab</i>	1	
<i>albuterol 4mg tab</i>	1	
ALBUTEROL 5MG/ML INH SOLN	1	PA BvD
ANORO ELLIPTA 62.5-25MCG INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 100-25MCG INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 200-25MCG INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 50-25MCG INH	1	QL=60 EA/30 Days
<i>breynga 160-4.5mcg/act inh</i>	1	QL=10.30 GM/30 Days
<i>breynga 80-4.5mcg/act inh</i>	1	QL=10.30 GM/30 Days
BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	1	QL=10.70 GM/30 Days
<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	1	QL=10.20 GM/30 Days
<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	1	QL=10.20 GM/30 Days
COMBIVENT 20-100MCG/ACT INH	1	QL=6 GM/30 Days
DULERA 100-5MCG INHALER	1	QL=13 GM/30 Days
DULERA 200-5MCG INHALER	1	QL=13 GM/30 Days
DULERA 50-5MCG INHALER	1	QL=13 GM/30 Days
<i>fluticasone propionate/salmeterol 100-50mcg/act dry powder inhaler</i>	1	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 250-50mcg/act dry powder inhaler</i>	1	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 500-50mcg/act dry powder inhaler</i>	1	QL=60 EA/30 Days
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	1	PA BvD
<i>levalbuterol 0.31mg/3ml neb soln</i>	1	PA BvD
<i>levalbuterol 0.63mg/3ml inh soln</i>	1	PA BvD
<i>levalbuterol 1.25mg/0.5ml neb soln</i>	1	PA BvD
<i>levalbuterol 1.25mg/3ml neb soln</i>	1	PA BvD
LEVALBUTEROL 45MCG/ACT INHALER	1	ST QL=30 GM/30 Days
SEREVENT 50MCG/DOSE INHALER	1	
STIOLTO 2.5-2.5MCG/ACT INH	1	QL=4 GM/30 Days
<i>terbutaline sulfate 2.5mg tab</i>	1	
<i>terbutaline sulfate 5mg tab</i>	1	
TRELEGY ELLIPTA 100-62.5-25MCG INHALER	1	QL=60 EA/30 Days
TRELEGY ELLIPTA 200-62.5-25MCG INHALER	1	QL=60 EA/30 Days
<i>wixela 100-50mcg inhaler</i>	1	QL=60 EA/30 Days
<i>wixela 250-50mcg inhaler</i>	1	QL=60 EA/30 Days
<i>wixela 500-50mcg inhaler</i>	1	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
XOPENEX 45MCG INHALER	1	ST QL=30 GM/30 Days
XANTHINES		
<i>theophylline 300mg er tab</i>	1	
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450mg er tab</i>	1	
<i>theophylline 600mg er tab</i>	1	
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
<i>jantoven 10mg tab</i>	1	
<i>jantoven 1mg tab</i>	1	
<i>jantoven 2.5mg tab</i>	1	
<i>jantoven 2mg tab</i>	1	
<i>jantoven 3mg tab</i>	1	
<i>jantoven 4mg tab</i>	1	
<i>jantoven 5mg tab</i>	1	
<i>jantoven 6mg tab</i>	1	
<i>jantoven 7.5mg tab</i>	1	
<i>warfarin sodium 10mg tab</i>	1	
<i>warfarin sodium 1mg tab</i>	1	
<i>warfarin sodium 2.5mg tab</i>	1	
<i>warfarin sodium 2mg tab</i>	1	
<i>warfarin sodium 3mg tab</i>	1	
<i>warfarin sodium 4mg tab</i>	1	
<i>warfarin sodium 5mg tab</i>	1	
<i>warfarin sodium 6mg tab</i>	1	
<i>warfarin sodium 7.5mg tab</i>	1	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS 2.5MG TAB	1	
ELIQUIS 5MG 30-DAY STARTER PACK	1	
ELIQUIS 5MG TAB	1	
XARELTO 10MG TAB	1	
XARELTO 15MG TAB	1	
XARELTO 1MG/ML SUSP	1	
XARELTO 2.5MG TAB	1	
XARELTO 20MG TAB	1	
XARELTO TAB STARTER PACK	1	
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>enoxaparin sodium 100mg/1ml syringe</i>	1	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	1	
<i>enoxaparin sodium 150mg/1ml syringe</i>	1	
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	1	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	1	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	1	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	1	
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	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
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	1	
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	1	
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	1	
<i>heparin sodium porcine 10000unit/ml inj</i>	1	
<i>heparin sodium porcine 1000unit/ml inj</i>	1	
<i>heparin sodium porcine 20000unit/ml inj</i>	1	
<i>heparin sodium porcine 5000unit/ml inj</i>	1	
ANTICONVULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA 0.5MG/ML SUSP	1	PA NSO
FYCOMPA 10MG TAB	1	PA NSO
FYCOMPA 12MG TAB	1	PA NSO
FYCOMPA 2MG TAB	1	PA NSO
FYCOMPA 4MG TAB	1	PA NSO
FYCOMPA 6MG TAB	1	PA NSO
FYCOMPA 8MG TAB	1	PA NSO
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	1	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml susp</i>	1	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	1	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 2mg odt</i>	1	QL=300 EA/30 Days
<i>clonazepam 2mg tab</i>	1	QL=300 EA/30 Days
<i>diazepam 10mg/2ml rectal gel</i>	1	QL=10 EA/30 Days
DIAZEPAM 2.5MG/0.5ML RECTAL GEL	1	QL=10 EA/30 Days
<i>diazepam 20mg/4ml rectal gel</i>	1	QL=10 EA/30 Days
NAYZILAM 5MG/0.1ML NASAL SPRAY	1	QL=10 EA/30 Days
SYMPAZAN 10MG ORAL FILM	1	ST_NSO QL=60 EA/30 Days
SYMPAZAN 20MG ORAL FILM	1	ST_NSO QL=60 EA/30 Days
SYMPAZAN 5MG ORAL FILM	1	ST_NSO QL=60 EA/30 Days
VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 5MG (5MG/0.1ML) NASAL SPARY DOSE PACK	1	QL=10 EA/30 Days
ANTICONVULSANTS - MISC.		
APTIOM 200MG TAB	1	PA NSO

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
APTIOM 400MG TAB	1	PA NSO
APTIOM 600MG TAB	1	PA NSO
APTIOM 800MG TAB	1	PA NSO
BRIVIACT 100MG TAB	1	PA NSO QL=60 EA/30 Days
BRIVIACT 10MG TAB	1	PA NSO QL=60 EA/30 Days
BRIVIACT 10MG/ML ORAL SOLN	1	PA NSO
BRIVIACT 25MG TAB	1	PA NSO QL=60 EA/30 Days
BRIVIACT 50MG TAB	1	PA NSO QL=60 EA/30 Days
BRIVIACT 75MG TAB	1	PA NSO QL=60 EA/30 Days
<i>carbamazepine 100mg chew tab</i>	1	
<i>carbamazepine 100mg er cap</i>	1	
<i>carbamazepine 100mg er tab</i>	1	
<i>carbamazepine 200mg er cap</i>	1	
<i>carbamazepine 200mg er tab</i>	1	
<i>carbamazepine 200mg tab</i>	1	
<i>carbamazepine 20mg/ml susp</i>	1	
<i>carbamazepine 300mg er cap</i>	1	
<i>carbamazepine 400mg er tab</i>	1	
DIACOMIT 250MG CAP	1	NDS PA NSO
DIACOMIT 250MG POWDER FOR ORAL SUSP	1	NDS PA NSO
DIACOMIT 500MG CAP	1	NDS PA NSO
DIACOMIT 500MG POWDER FOR ORAL SUSP	1	NDS PA NSO
EPIDIOLEX 100MG/ML ORAL SOLN	1	PA NSO
<i>epitol 200mg tab</i>	1	
EPRONTIA 25MG/ML ORAL SOLN	1	
FINTEPLA 2.2MG/ML ORAL SOLN	1	NDS PA NSO QL=360 ML/30 Days
<i>gabapentin 100mg cap</i>	1	QL=1080 EA/30 Days
<i>gabapentin 300mg cap</i>	1	QL=360 EA/30 Days
<i>gabapentin 400mg cap</i>	1	QL=270 EA/30 Days
<i>gabapentin 50mg/ml oral soln</i>	1	QL=2160 ML/30 Days
<i>gabapentin 600mg tab (Neurontin equiv)</i>	1	QL=180 EA/30 Days
<i>gabapentin 800mg tab</i>	1	QL=135 EA/30 Days
<i>lacosamide 100mg tab</i>	1	
<i>lacosamide 10mg/ml oral soln</i>	1	
<i>lacosamide 150mg tab</i>	1	
<i>lacosamide 200mg tab</i>	1	
<i>lacosamide 50mg tab</i>	1	
<i>lamotrigine 100mg er tab</i>	1	
<i>lamotrigine 100mg odt</i>	1	
<i>lamotrigine 100mg tab</i>	1	
<i>lamotrigine 150mg tab</i>	1	
<i>lamotrigine 200mg er tab</i>	1	
<i>lamotrigine 200mg odt</i>	1	
<i>lamotrigine 200mg tab</i>	1	
<i>lamotrigine 250mg er tab</i>	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
<i>lamotrigine 25mg chew tab</i>	1	
<i>lamotrigine 25mg er tab</i>	1	
<i>lamotrigine 25mg odt</i>	1	
<i>lamotrigine 25mg tab</i>	1	
<i>lamotrigine 300mg er tab</i>	1	
<i>lamotrigine 50mg er tab</i>	1	
<i>lamotrigine 50mg odt</i>	1	
<i>lamotrigine 5mg chew tab</i>	1	
<i>levetiracetam 1000mg tab</i>	1	
<i>levetiracetam 100mg/ml oral soln</i>	1	
<i>levetiracetam 250mg tab</i>	1	
<i>levetiracetam 500mg er tab</i>	1	
<i>levetiracetam 500mg tab</i>	1	
<i>levetiracetam 750mg er tab</i>	1	
<i>levetiracetam 750mg tab</i>	1	
<i>oxcarbazepine 150mg tab</i>	1	
<i>oxcarbazepine 300mg tab</i>	1	
<i>oxcarbazepine 600mg tab</i>	1	
<i>oxcarbazepine 60mg/ml susp</i>	1	
<i>pregabalin 100mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 150mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 200mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 20mg/ml oral soln</i>	1	
<i>pregabalin 225mg cap</i>	1	QL=60 EA/30 Days
<i>pregabalin 25mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 300mg cap</i>	1	QL=60 EA/30 Days
<i>pregabalin 50mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 75mg cap</i>	1	QL=90 EA/30 Days
<i>primidone 250mg tab</i>	1	
<i>primidone 50mg tab</i>	1	
<i>roweepra 500mg tab</i>	1	
<i>rufinamide 200mg tab</i>	1	
<i>rufinamide 400mg tab</i>	1	
<i>rufinamide 40mg/ml susp</i>	1	
SPRITAM 1000MG TAB FOR ORAL SUSP	1	PA NSO
SPRITAM 250MG TAB FOR ORAL SUSP	1	PA NSO
SPRITAM 500MG TAB FOR ORAL SUSP	1	PA NSO
SPRITAM 750MG TAB FOR ORAL SUSP	1	PA NSO
<i>subvenite 100mg tab</i>	1	
<i>subvenite 150mg tab</i>	1	
<i>subvenite 200mg tab</i>	1	
<i>subvenite 25mg tab</i>	1	
<i>topiramate 100mg tab</i>	1	
<i>topiramate 15mg cap</i>	1	
<i>topiramate 200mg tab</i>	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
<i>topiramate 25mg cap</i>	1	
<i>topiramate 25mg tab</i>	1	
<i>topiramate 50mg tab</i>	1	
ZONISADE 100MG/5ML SUSP	1	PA NSO
<i>zonisamide 100mg cap</i>	1	
<i>zonisamide 25mg cap</i>	1	
<i>zonisamide 50mg cap</i>	1	
ZTALMY 50MG/ML SUSP	1	NDS PA NSO QL=1100 ML/30 Days
CARBAMATES		
<i>felbamate 120mg/ml susp</i>	1	
<i>felbamate 400mg tab</i>	1	
<i>felbamate 600mg tab</i>	1	
XCOPRI 100MG TAB	1	QL=30 EA/30 Days
XCOPRI 12.5/25MG TITRATION PACK	1	QL=28 EA/28 Days
XCOPRI 150/200MG PACK TAB	1	QL=56 EA/28 Days
XCOPRI 150/200MG TITRATION PACK	1	QL=28 EA/28 Days
XCOPRI 150MG TAB	1	QL=60 EA/30 Days
XCOPRI 200MG TAB	1	QL=60 EA/30 Days
XCOPRI 50/100MG TITRATION PACK	1	QL=28 EA/28 Days
XCOPRI 50MG TAB	1	QL=30 EA/30 Days
XCOPRI TAB 100/150MG MAINTENANCE PACK	1	QL=56 EA/28 Days
GABA MODULATORS		
<i>tiagabine 12mg tab</i>	1	
<i>tiagabine 16mg tab</i>	1	
<i>tiagabine 2mg tab</i>	1	
<i>tiagabine 4mg tab</i>	1	
<i>vigabatrin 500mg powder for oral soln</i>	1	PA NSO
<i>vigabatrin 500mg tab</i>	1	PA NSO
<i>vigadrone 500mg powder for oral soln</i>	1	PA NSO
<i>vigadrone 500mg tab</i>	1	PA NSO
<i>vigpoder 500mg powder for oral soln</i>	1	PA NSO
HYDANTOINS		
DILANTIN 30MG ER CAP	1	
<i>phenytoin 25mg/ml susp</i>	1	
<i>phenytoin 50mg chew tab</i>	1	
<i>phenytoin sodium 100mg er cap</i>	1	
<i>phenytoin sodium 200mg er cap</i>	1	
<i>phenytoin sodium 300mg er cap</i>	1	
SUCCINIMIDES		
<i>ethosuximide 250mg cap</i>	1	
<i>ethosuximide 50mg/ml oral soln</i>	1	
<i>methsuximide 300mg cap</i>	1	
VALPROIC ACID		
<i>divalproex sodium 125mg dr cap</i>	1	
<i>divalproex sodium 125mg dr tab</i>	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
<i>divalproex sodium 250mg dr tab</i>	1	
<i>divalproex sodium 250mg er tab</i>	1	
<i>divalproex sodium 500mg dr tab</i>	1	
<i>divalproex sodium 500mg er tab</i>	1	
<i>valproic acid 250mg cap</i>	1	
<i>valproic acid 50mg/ml oral soln</i>	1	
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine 15mg odt</i>	1	
<i>mirtazapine 15mg tab</i>	1	
<i>mirtazapine 30mg odt</i>	1	
<i>mirtazapine 30mg tab</i>	1	
<i>mirtazapine 45mg odt</i>	1	
<i>mirtazapine 45mg tab</i>	1	
<i>mirtazapine 7.5mg tab</i>	1	
ANTIDEPRESSANT COMBINATIONS		
AUVELITY 105-45MG ER TAB	1	ST_NSO QL=60 EA/30 Days
ANTIDEPRESSANTS - MISC.		
<i>bupropion 100mg er tab</i>	1	
<i>bupropion 100mg tab</i>	1	
<i>bupropion 150mg sr (12 hr) tab</i>	1	
<i>bupropion 150mg xl (24 hr) tab</i>	1	
<i>bupropion 200mg er tab</i>	1	
<i>bupropion 300mg er tab</i>	1	
<i>bupropion 75mg tab</i>	1	
GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID		
ZURZUVAE 20MG CAP	1	NDS PA NSO QL=28 EA/14 Days
ZURZUVAE 25MG CAP	1	NDS PA NSO QL=28 EA/14 Days
ZURZUVAE 30MG CAP	1	NDS PA NSO QL=14 EA/14 Days
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM 12MG/24HR PATCH	1	ST_NSO QL=30 EA/30 Days
EMSAM 6MG/24HR PATCH	1	ST_NSO QL=30 EA/30 Days
EMSAM 9MG/24HR PATCH	1	ST_NSO QL=30 EA/30 Days
MARPLAN 10MG TAB	1	
PHENELZINE 15MG TAB	1	
<i>tranlycypromine 10mg tab</i>	1	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram 10mg tab</i>	1	
<i>citalopram 20mg tab</i>	1	
<i>citalopram 2mg/ml oral soln</i>	1	
<i>citalopram 40mg tab</i>	1	
<i>escitalopram 10mg tab</i>	1	
<i>escitalopram 1mg/ml oral soln</i>	1	
<i>escitalopram 20mg tab</i>	1	
<i>escitalopram 5mg tab</i>	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
<i>fluoxetine 10mg cap</i>	1	
<i>fluoxetine 20mg cap</i>	1	
<i>fluoxetine 40mg cap</i>	1	
<i>fluoxetine 4mg/ml oral soln</i>	1	
<i>fluoxetine 60mg tab</i>	1	
<i>fluvoxamine maleate 100mg tab</i>	1	
<i>fluvoxamine maleate 25mg tab</i>	1	
<i>fluvoxamine maleate 50mg tab</i>	1	
<i>paroxetine 10mg tab</i>	1	PA NSO
<i>paroxetine 12.5mg er tab</i>	1	PA NSO
<i>paroxetine 20mg tab</i>	1	PA NSO
<i>paroxetine 25mg er tab</i>	1	PA NSO
<i>paroxetine 2mg/ml susp</i>	1	PA NSO
<i>paroxetine 30mg tab</i>	1	PA NSO
<i>paroxetine 37.5mg er tab</i>	1	PA NSO
<i>paroxetine 40mg tab</i>	1	PA NSO
<i>sertraline 100mg tab</i>	1	
<i>sertraline 20mg/ml oral soln</i>	1	
<i>sertraline 25mg tab</i>	1	
<i>sertraline 50mg tab</i>	1	
SEROTONIN MODULATORS		
NEFAZODONE 100MG TAB	1	
NEFAZODONE 150MG TAB	1	
NEFAZODONE 200MG TAB	1	
NEFAZODONE 250MG TAB	1	
NEFAZODONE 50MG TAB	1	
<i>trazodone 100mg tab</i>	1	
<i>trazodone 150mg tab</i>	1	
<i>trazodone 50mg tab</i>	1	
TRINTELLIX 10MG TAB	1	ST_NSO QL=30 EA/30 Days
TRINTELLIX 20MG TAB	1	ST_NSO QL=30 EA/30 Days
TRINTELLIX 5MG TAB	1	ST_NSO QL=30 EA/30 Days
<i>vilazodone 10mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>vilazodone 20mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>vilazodone 40mg tab</i>	1	ST_NSO QL=30 EA/30 Days
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<i>desvenlafaxine succinate 100mg er tab</i>	1	
<i>desvenlafaxine succinate 25mg er tab</i>	1	
<i>desvenlafaxine succinate 50mg er tab</i>	1	
<i>duloxetine 20mg dr cap</i>	1	
<i>duloxetine 30mg dr cap</i>	1	
<i>duloxetine 60mg dr cap</i>	1	
FETZIMA 120MG ER CAP	1	ST_NSO QL=30 EA/30 Days
FETZIMA 20MG ER CAP	1	ST_NSO QL=30 EA/30 Days
FETZIMA 40MG ER CAP	1	ST_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
FETZIMA 80MG ER CAP	1	ST_NSO QL=30 EA/30 Days
FETZIMA PACK	1	ST_NSO QL=30 EA/30 Days
<i>venlafaxine 100mg tab</i>	1	
<i>venlafaxine 150mg er cap</i>	1	
<i>venlafaxine 25mg tab</i>	1	
<i>venlafaxine 37.5mg er cap</i>	1	
<i>venlafaxine 37.5mg tab</i>	1	
<i>venlafaxine 50mg tab</i>	1	
<i>venlafaxine 75mg er cap</i>	1	
<i>venlafaxine 75mg tab</i>	1	
TRICYCLIC AGENTS		
<i>amitriptyline 100mg tab</i>	1	PA NSO
<i>amitriptyline 10mg tab</i>	1	PA NSO
<i>amitriptyline 150mg tab</i>	1	PA NSO
<i>amitriptyline 25mg tab</i>	1	PA NSO
<i>amitriptyline 50mg tab</i>	1	PA NSO
<i>amitriptyline 75mg tab</i>	1	PA NSO
<i>amoxapine 100mg tab</i>	1	PA NSO
<i>amoxapine 150mg tab</i>	1	PA NSO
<i>amoxapine 25mg tab</i>	1	PA NSO
<i>amoxapine 50mg tab</i>	1	PA NSO
<i>clomipramine 25mg cap</i>	1	PA NSO
<i>clomipramine 50mg cap</i>	1	PA NSO
<i>clomipramine 75mg cap</i>	1	PA NSO
<i>desipramine 100mg tab</i>	1	PA NSO
<i>desipramine 10mg tab</i>	1	PA NSO
<i>desipramine 150mg tab</i>	1	PA NSO
<i>desipramine 25mg tab</i>	1	PA NSO
<i>desipramine 50mg tab</i>	1	PA NSO
<i>desipramine 75mg tab</i>	1	PA NSO
<i>doxepin 100mg cap</i>	1	PA NSO
<i>doxepin 10mg cap</i>	1	PA NSO
<i>doxepin 10mg/ml oral soln</i>	1	PA NSO
<i>doxepin 150mg cap</i>	1	PA NSO
<i>doxepin 25mg cap</i>	1	PA NSO
<i>doxepin 50mg cap</i>	1	PA NSO
<i>doxepin 75mg cap</i>	1	PA NSO
<i>imipramine 10mg tab</i>	1	PA NSO
<i>imipramine 25mg tab</i>	1	PA NSO
<i>imipramine 50mg tab</i>	1	PA NSO
<i>nortriptyline 10mg cap</i>	1	
<i>nortriptyline 25mg cap</i>	1	
<i>nortriptyline 2mg/ml oral soln</i>	1	
<i>nortriptyline 50mg cap</i>	1	
<i>nortriptyline 75mg cap</i>	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
<i>protriptyline 10mg tab</i>	1	PA NSO
<i>protriptyline 5mg tab</i>	1	PA NSO
<i>trimipramine 100mg cap</i>	1	PA NSO
<i>trimipramine 25mg cap</i>	1	PA NSO
<i>trimipramine 50mg cap</i>	1	PA NSO
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose 100mg tab</i>	1	
<i>acarbose 25mg tab</i>	1	
<i>acarbose 50mg tab</i>	1	
MIGLITOL 100MG TAB	1	
<i>miglitol 25mg tab</i>	1	
MIGLITOL 50MG TAB	1	
ANTIDIABETIC COMBINATIONS		
ALOGLIPTIN 12.5MG/METFORMIN 1000MG TAB	1	QL=60 EA/30 Days
ALOGLIPTIN 12.5MG/METFORMIN 500MG TAB	1	QL=60 EA/30 Days
ALOGLIPTIN 12.5MG/PIOGLITAZONE 30MG TAB	1	QL=30 EA/30 Days
ALOGLIPTIN 25MG/PIOGLITAZONE 15MG TAB	1	QL=30 EA/30 Days
ALOGLIPTIN 25MG/PIOGLITAZONE 30MG TAB	1	QL=30 EA/30 Days
ALOGLIPTIN 25MG/PIOGLITAZONE 45MG TAB	1	QL=30 EA/30 Days
<i>glipizide/metformin 2.5-250mg tab</i>	1	
<i>glipizide/metformin 2.5-500mg tab</i>	1	
<i>glipizide/metformin 5-500mg tab</i>	1	
JANUMET 1000-50MG TAB	1	QL=60 EA/30 Days
JANUMET 500-50MG TAB	1	QL=60 EA/30 Days
JANUMET XR 1000-100MG TAB	1	QL=30 EA/30 Days
JANUMET XR 1000-50MG TAB	1	QL=60 EA/30 Days
JANUMET XR 500-50MG TAB	1	QL=60 EA/30 Days
SYNJARDY 10-1000MG ER TAB	1	QL=30 EA/30 Days
SYNJARDY 12.5-1000MG ER TAB	1	QL=60 EA/30 Days
SYNJARDY 12.5-1000MG TAB	1	QL=60 EA/30 Days
SYNJARDY 12.5-500MG TAB	1	QL=60 EA/30 Days
SYNJARDY 25-1000MG ER TAB	1	QL=30 EA/30 Days
SYNJARDY 5-1000MG ER TAB	1	QL=60 EA/30 Days
SYNJARDY 5-1000MG TAB	1	QL=60 EA/30 Days
SYNJARDY 5-500MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 10-1000MG TAB	1	QL=30 EA/30 Days
XIGDUO XR 10-500MG TAB	1	QL=30 EA/30 Days
XIGDUO XR 2.5-1000MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 5-1000MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 5-500MG TAB	1	QL=30 EA/30 Days
BIGUANIDES		
<i>metformin 1000mg tab</i>	1	
<i>metformin 500mg er tab</i>	1	
<i>metformin 500mg tab</i>	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
<i>metformin 750mg er tab</i>	1	
<i>metformin 850mg tab</i>	1	
DIABETIC OTHER		
BAQSIMI 3MG/DOSE NASAL POWDER	1	QL=2 EA/7 Days
<i>diazoxide 50mg/ml susp</i>	1	
GLUCAGEN 1MG INJ	1	QL=2 EA/7 Days
GLUCAGON (RDNA) 1MG INJ	1	QL=2 EA/7 Days
GVOKE 0.5MG/0.1ML AUTO-INJECTOR	1	QL=.20 ML/7 Days
GVOKE 1MG/0.2ML AUTO-INJECTOR	1	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML INJ	1	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML SYRINGE	1	QL=.40 ML/7 Days
KORLYM 300MG TAB	1	NDS PA QL=120 EA/30 Days
<i>mifepristone 300mg tab</i>	1	PA QL=120 EA/30 Days
ZEGALOGUE 0.6MG/0.6ML AUTO-INJECTOR	1	QL=1.20 ML/7 Days
ZEGALOGUE 0.6MG/0.6ML SYRINGE	1	QL=1.20 ML/7 Days
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
ALOGLIPTIN 12.5MG TAB	1	QL=30 EA/30 Days
ALOGLIPTIN 25MG TAB	1	QL=30 EA/30 Days
ALOGLIPTIN 6.25MG TAB	1	QL=30 EA/30 Days
JANUVIA 100MG TAB	1	QL=30 EA/30 Days
JANUVIA 25MG TAB	1	QL=30 EA/30 Days
JANUVIA 50MG TAB	1	QL=30 EA/30 Days
INCRETIN MIMETIC AGENTS		
BYDUREON 2MG/0.85ML AUTO-INJECTOR	1	PA QL=3.40 ML/28 Days
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
OZEMPIC 2.68MG/ML PEN INJ	1	PA QL=3 ML/28 Days
OZEMPIC 2MG/3ML PEN INJ	1	PA QL=3 ML/28 Days
OZEMPIC 4MG/3ML PEN INJ	1	PA QL=3 ML/28 Days
RYBELSUS 14MG TAB	1	PA QL=30 EA/30 Days
RYBELSUS 3MG TAB	1	PA QL=30 EA/30 Days
RYBELSUS 7MG TAB	1	PA QL=30 EA/30 Days
TRULICITY 0.75MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 1.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 3MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 4.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
VICTOZA 18MG/3ML PEN INJ	1	PA QL=9 ML/30 Days
INSULIN		
HUMALOG 100UNIT/ML CARTRIDGE	1	INS
HUMALOG 100UNIT/ML KWIKPEN	1	INS
HUMALOG 200UNIT/ML PEN INJ	1	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 JUNIOR 100UNIT/ML PEN INJ	1	INS
HUMALOG MIX 25-75UNIT/ML INJ	1	INS
HUMALOG MIX 25-75UNIT/ML PEN INJ	1	INS
HUMALOG MIX 50-50UNIT/ML PEN INJ	1	INS
HUMULIN 70-30UNIT/ML INJ	1	INS
HUMULIN 70-30UNIT/ML PEN INJ	1	INS
HUMULIN N 100UNIT/ML INJ	1	INS
HUMULIN N 100UNIT/ML PEN INJ	1	INS
HUMULIN R 100UNIT/ML INJ	1	INS
HUMULIN R 500UNIT/ML INJ	1	INS PA BvD
HUMULIN R 500UNIT/ML PEN INJ	1	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	1	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	1	INS
INSULIN LISPRO 100UNIT/ML INJ	1	INS PA BvD
LANTUS 100UNIT/ML INJ	1	INS
LANTUS 100UNIT/ML PEN INJ	1	INS
LEVEMIR 100UNIT/ML INJ	1	INS
LEVEMIR 100UNIT/ML PEN INJ	1	INS
LYUMJEV 100UNIT/ML INJ	1	INS
LYUMJEV 100UNIT/ML PEN INJ	1	INS
LYUMJEV 200UNIT/ML PEN INJ	1	INS
TOUJEO 300UNIT/ML PEN INJ	1	INS
TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	1	INS
TRESIBA 100UNIT/ML INJ	1	INS
TRESIBA 100UNIT/ML PEN INJ	1	INS
TRESIBA 200UNIT/ML PEN INJ	1	INS
INSULIN SENSITIZING AGENTS		
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<i>pioglitazone 45mg tab</i>	1	
MEGLITINIDE ANALOGUES		
<i>nateglinide 120mg tab</i>	1	
<i>nateglinide 60mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	1	
<i>repaglinide 1mg tab</i>	1	
<i>repaglinide 2mg tab</i>	1	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA 10MG TAB	1	QL=30 EA/30 Days
FARXIGA 5MG TAB	1	QL=30 EA/30 Days
JARDIANCE 10MG TAB	1	QL=30 EA/30 Days
JARDIANCE 25MG TAB	1	QL=30 EA/30 Days
SULFONYLUREAS		
<i>glimepiride 1mg tab</i>	1	
<i>glimepiride 2mg tab</i>	1	
<i>glimepiride 4mg tab</i>	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
<i>glipizide 10mg er tab</i>	1	
<i>glipizide 10mg tab</i>	1	
<i>glipizide 2.5mg er tab</i>	1	
<i>glipizide 5mg er tab</i>	1	
<i>glipizide 5mg tab</i>	1	
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIPERISTALTIC AGENTS		
<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	1	
<i>loperamide 2mg cap</i>	1	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
<i>deferasirox 125mg tab for oral susp</i>	1	
<i>deferasirox 180mg granules</i>	1	
<i>deferasirox 180mg tab</i>	1	
<i>deferasirox 250mg tab for oral susp</i>	1	
<i>deferasirox 360mg granules</i>	1	
<i>deferasirox 360mg tab</i>	1	
<i>deferasirox 500mg tab for oral susp</i>	1	
<i>deferasirox 90mg granules</i>	1	
<i>deferasirox 90mg tab</i>	1	
<i>deferiprone 1000mg tab</i>	1	PA
<i>deferiprone 500mg tab</i>	1	PA
OPIOID ANTAGONISTS		
KLOXXADO 8MG/0.1ML NASAL SPRAY	1	
NALOXONE 0.4MG/ML CARTRIDGE	1	
<i>naloxone 0.4mg/ml inj</i>	1	
<i>naloxone 1mg/ml syringe</i>	1	
<i>naloxone 40mg/ml nasal spray</i>	1	
<i>naltrexone 50mg tab</i>	1	
OPVEE 2.7MG/0.1ML NASAL SPRAY	1	
ZIMHI 5MG/0.5ML SYRINGE	1	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron 1mg tab</i>	1	PA BvD QL=60 EA/30 Days
<i>ondansetron 0.8mg/ml oral soln</i>	1	PA BvD
<i>ondansetron 4mg odt</i>	1	PA BvD
<i>ondansetron 4mg tab</i>	1	PA BvD
<i>ondansetron 8mg odt</i>	1	PA BvD
<i>ondansetron 8mg tab</i>	1	PA BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab</i>	1	
<i>meclizine 25mg tab</i>	1	
<i>scopolamine 1mg/72hr patch</i>	1	
ANTIEMETICS - MISCELLANEOUS		
<i>doxylamine succinate/pyridoxine 10-10mg dr tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dronabinol 10mg cap</i>	1	PA QL=60 EA/30 Days
<i>dronabinol 2.5mg cap</i>	1	PA QL=60 EA/30 Days
<i>dronabinol 5mg cap</i>	1	PA QL=60 EA/30 Days
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
<i>aprepitant 125mg cap</i>	1	PA BvD QL=3 EA/2 Days
<i>aprepitant 125mg/aprepitant 80mg cap therapy pack</i>	1	PA BvD QL=6 EA/4 Days
<i>aprepitant 40mg cap</i>	1	PA BvD QL=3 EA/2 Days
<i>aprepitant 80mg cap</i>	1	PA BvD QL=6 EA/4 Days
VARUBI 90MG TAB	1	PA BvD QL=4 EA/28 Days
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
<i>caspofungin acetate 50mg inj</i>	1	NDS PA
<i>caspofungin acetate 70mg inj</i>	1	PA
<i>micafungin sodium 100mg inj</i>	1	
<i>micafungin sodium 50mg inj</i>	1	
ANTIFUNGALS		
ABELCET 5MG/ML INJ	1	PA BvD
AMPHOTERICIN B 50MG INJ	1	PA BvD
<i>flucytosine 250mg cap</i>	1	
<i>flucytosine 500mg cap</i>	1	
<i>griseofulvin 125mg tab</i>	1	
<i>griseofulvin 250mg tab</i>	1	
<i>griseofulvin 25mg/ml susp</i>	1	
<i>griseofulvin 500mg tab</i>	1	
<i>nystatin 500000unit tab</i>	1	
<i>terbinafine 250mg tab</i>	1	
IMIDAZOLE-RELATED ANTIFUNGALS		
<i>fluconazole 100mg tab</i>	1	
<i>fluconazole 10mg/ml susp</i>	1	
<i>fluconazole 150mg tab</i>	1	
<i>fluconazole 200mg tab</i>	1	
<i>fluconazole 200mg/100ml inj</i>	1	
<i>fluconazole 400mg/200ml inj</i>	1	
<i>fluconazole 40mg/ml susp</i>	1	
<i>fluconazole 50mg tab</i>	1	
<i>itraconazole 100mg cap</i>	1	
<i>ketoconazole 200mg tab</i>	1	
<i>posaconazole 100mg dr tab</i>	1	PA
<i>posaconazole 40mg/ml susp</i>	1	PA
VORICONAZOLE 200MG INJ	1	PA
<i>voriconazole 200mg tab</i>	1	PA
<i>voriconazole 40mg/ml susp</i>	1	PA
<i>voriconazole 50mg tab</i>	1	PA
ANTIHIISTAMINES		
ANTIHIISTAMINES - NON-SEDATING		

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
<i>desloratadine 5mg tab</i>	1	
<i>levocetirizine 5mg tab</i>	1	
ANTIHISTAMINES - PHENOTHIAZINES		
<i>promethazine 1.25mg/ml oral soln</i>	1	
<i>promethazine 12.5mg rectal supp</i>	1	
<i>promethazine 12.5mg tab</i>	1	
<i>promethazine 25mg rectal supp</i>	1	
<i>promethazine 25mg tab</i>	1	
<i>promethazine 50mg tab</i>	1	
<i>promethegan 25mg rectal supp</i>	1	
ANTIHYPERLIPIDEMICS		
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL 180MG TAB	1	PA QL=30 EA/30 Days
ANTIHYPERLIPIDEMICS - COMBINATIONS		
<i>ezetimibe 10mg/simvastatin 10mg tab</i>	1	
<i>ezetimibe 10mg/simvastatin 20mg tab</i>	1	
<i>ezetimibe 10mg/simvastatin 40mg tab</i>	1	
<i>ezetimibe 10mg/simvastatin 80mg tab</i>	1	
NEXLIZET 180-10MG TAB	1	PA QL=30 EA/30 Days
ANTIHYPERLIPIDEMICS - MISC.		
<i>icosapent ethyl 1000mg cap</i>	1	QL=120 EA/30 Days
<i>icosapent ethyl 500mg cap</i>	1	QL=120 EA/30 Days
<i>omega-3 acid ethyl esters (usp) 1000mg cap</i>	1	QL=120 EA/30 Days
BILE ACID SEQUESTRANTS		
<i>cholestyramine resin (sugar-free) 4000mg powder for oral susp</i>	1	
<i>cholestyramine resin 4000mg powder for oral susp</i>	1	
<i>colesevelam 625mg tab</i>	1	
<i>colestipol 1000mg tab</i>	1	
<i>colestipol 5000mg granules for oral susp</i>	1	
<i>prevalite 4gm powder for oral susp</i>	1	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate 134mg cap</i>	1	
<i>fenofibrate 145mg tab</i>	1	
<i>fenofibrate 160mg tab</i>	1	
<i>fenofibrate 200mg cap</i>	1	
<i>fenofibrate 48mg tab</i>	1	
<i>fenofibrate 54mg tab</i>	1	
<i>fenofibrate 67mg cap</i>	1	
<i>fenofibric acid 135mg dr cap</i>	1	
<i>fenofibric acid 45mg dr cap</i>	1	
<i>gemfibrozil 600mg tab</i>	1	QL=60 EA/30 Days
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin 10mg tab</i>	1	
<i>atorvastatin 20mg tab</i>	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
<i>atorvastatin 40mg tab</i>	1	
<i>atorvastatin 80mg tab</i>	1	
<i>fluvastatin 20mg cap</i>	1	
<i>fluvastatin 40mg cap</i>	1	
<i>lovastatin 10mg tab</i>	1	
<i>lovastatin 20mg tab</i>	1	
<i>lovastatin 40mg tab</i>	1	
<i>pravastatin sodium 10mg tab</i>	1	
<i>pravastatin sodium 20mg tab</i>	1	
<i>pravastatin sodium 40mg tab</i>	1	
<i>pravastatin sodium 80mg tab</i>	1	
<i>rosuvastatin calcium 10mg tab</i>	1	
<i>rosuvastatin calcium 20mg tab</i>	1	
<i>rosuvastatin calcium 40mg tab</i>	1	
<i>rosuvastatin calcium 5mg tab</i>	1	
<i>simvastatin 10mg tab</i>	1	
<i>simvastatin 20mg tab</i>	1	
<i>simvastatin 40mg tab</i>	1	
<i>simvastatin 5mg tab</i>	1	
<i>simvastatin 80mg tab</i>	1	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe 10mg tab</i>	1	QL=30 EA/30 Days
NICOTINIC ACID DERIVATIVES		
<i>niacin 1000mg er tab</i>	1	
<i>niacin 500mg er tab</i>	1	
<i>niacin 750mg er tab</i>	1	
PROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
PRALUENT 150MG/ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
PRALUENT 75MG/ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
REPATHA 140MG/ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
REPATHA 140MG/ML SYRINGE	1	PA QL=2 ML/28 Days
REPATHA 420MG/3.5ML CARTRIDGE	1	PA QL=3.50 ML/28 Days
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril 10mg tab</i>	1	
<i>benazepril 20mg tab</i>	1	
<i>benazepril 40mg tab</i>	1	
<i>benazepril 5mg tab</i>	1	
<i>captopril 100mg tab</i>	1	
<i>captopril 12.5mg tab</i>	1	
<i>captopril 25mg tab</i>	1	
<i>captopril 50mg tab</i>	1	
<i>enalapril maleate 10mg tab</i>	1	
<i>enalapril maleate 2.5mg tab</i>	1	
<i>enalapril maleate 20mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>enalapril maleate 5mg tab</i>	1	
<i>fosinopril sodium 10mg tab</i>	1	
<i>fosinopril sodium 20mg tab</i>	1	
<i>fosinopril sodium 40mg tab</i>	1	
<i>lisinopril 10mg tab</i>	1	
<i>lisinopril 2.5mg tab</i>	1	
<i>lisinopril 20mg tab</i>	1	
<i>lisinopril 30mg tab</i>	1	
<i>lisinopril 40mg tab</i>	1	
<i>lisinopril 5mg tab</i>	1	
<i>moexipril 15mg tab</i>	1	
<i>moexipril 7.5mg tab</i>	1	
PERINDOPRIL ERBUMINE 2MG TAB	1	
<i>perindopril erbumine 4mg tab</i>	1	
PERINDOPRIL ERBUMINE 8MG TAB	1	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<i>quinapril 40mg tab</i>	1	
<i>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	1	
<i>ramipril 10mg cap</i>	1	
<i>ramipril 2.5mg cap</i>	1	
<i>ramipril 5mg cap</i>	1	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
AGENTS FOR PHEOCHROMOCYTOMA		
<i>metyrosine 250mg cap</i>	1	NDS
<i>phenoxybenzamine 10mg cap</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil 16mg tab</i>	1	
<i>candesartan cilexetil 32mg tab</i>	1	
<i>candesartan cilexetil 4mg tab</i>	1	
<i>candesartan cilexetil 8mg tab</i>	1	
<i>irbesartan 150mg tab</i>	1	
<i>irbesartan 300mg tab</i>	1	
<i>irbesartan 75mg tab</i>	1	
<i>losartan potassium 100mg tab</i>	1	
<i>losartan potassium 25mg tab</i>	1	
<i>losartan potassium 50mg tab</i>	1	
<i>olmesartan medoxomil 20mg tab</i>	1	
<i>olmesartan medoxomil 40mg tab</i>	1	
<i>olmesartan medoxomil 5mg tab</i>	1	
<i>telmisartan 20mg tab</i>	1	
<i>telmisartan 40mg tab</i>	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
<i>telmisartan 80mg tab</i>	1	
<i>valsartan 160mg tab</i>	1	
<i>valsartan 320mg tab</i>	1	
<i>valsartan 40mg tab</i>	1	
<i>valsartan 80mg tab</i>	1	
ANTIADRENERGIC ANTIHYPERTENSIVES		
<i>clonidine 0.1mg tab</i>	1	
<i>clonidine 0.1mg/24hr weekly patch</i>	1	
<i>clonidine 0.2mg tab</i>	1	
<i>clonidine 0.2mg/24hr weekly patch</i>	1	
<i>clonidine 0.3mg tab</i>	1	
<i>clonidine 0.3mg/24hr weekly patch</i>	1	
<i>doxazosin 1mg tab</i>	1	
<i>doxazosin 2mg tab</i>	1	
<i>doxazosin 4mg tab</i>	1	
<i>doxazosin 8mg tab</i>	1	
<i>prazosin 1mg cap</i>	1	
<i>prazosin 2mg cap</i>	1	
<i>prazosin 5mg cap</i>	1	
<i>terazosin 10mg cap</i>	1	
<i>terazosin 1mg cap</i>	1	
<i>terazosin 2mg cap</i>	1	
<i>terazosin 5mg cap</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<i>amlodipine/benazepril 5-40mg cap</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-12.5-160mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-25-160mg tab</i>	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
<i>amlodipine/hydrochlorothiazide/valsartan 10-25-320mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 5-12.5-160mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 5-25-160mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	1	
<i>amlodipine/valsartan 10-160mg tab</i>	1	
<i>amlodipine/valsartan 10-320mg tab</i>	1	
<i>amlodipine/valsartan 5-160mg tab</i>	1	
<i>amlodipine/valsartan 5-320mg tab</i>	1	
<i>atenolol/chlorthalidone 100-25mg tab</i>	1	
<i>atenolol/chlorthalidone 50-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	1	
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	1	
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	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
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	1	
<i>hydrochlorothiazide/telmisartan 12.5-40mg tab</i>	1	
<i>hydrochlorothiazide/telmisartan 12.5-80mg tab</i>	1	
<i>hydrochlorothiazide/telmisartan 25-80mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	1	
DIRECT RENIN INHIBITORS		
<i>aliskiren 150mg tab</i>	1	
<i>aliskiren 300mg tab</i>	1	
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
<i>eplerenone 25mg tab</i>	1	
<i>eplerenone 50mg tab</i>	1	
VASODILATORS		
<i>hydralazine 100mg tab</i>	1	
<i>hydralazine 10mg tab</i>	1	
<i>hydralazine 25mg tab</i>	1	
<i>hydralazine 50mg tab</i>	1	
<i>minoxidil 10mg tab</i>	1	
<i>minoxidil 2.5mg tab</i>	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
<i>metronidazole 250mg tab</i>	1	
<i>metronidazole 500mg tab</i>	1	
<i>metronidazole 5mg/ml inj</i>	1	
<i>pentamidine isethionate 300mg inj</i>	1	
<i>pentamidine isethionate 50mg/ml inh soln</i>	1	PA BvD QL=1 EA/28 Days
<i>tinidazole 250mg tab</i>	1	
<i>tinidazole 500mg tab</i>	1	
<i>trimethoprim 100mg tab</i>	1	
XIFAXAN 200MG TAB	1	QL=9 EA/3 Days
XIFAXAN 550MG TAB	1	PA QL=60 EA/30 Days
ANTI-INFECTIVE MISC. - COMBINATIONS		
<i>sulfamethoxazole/trimethoprim 200-40mg/5ml susp</i>	1	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
ANTIPROTOZOAL AGENTS		
<i>atovaquone 150mg/ml susp</i>	1	
<i>nitazoxanide 500mg tab</i>	1	PA QL=6 EA/3 Days
CARBAPENEMS		

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
CILASTATIN/IMIPENEM 250-250MG INJ	1	
<i>cilastatin/imipenem 500-500mg inj</i>	1	
<i>ertapenem 1gm inj</i>	1	
<i>meropenem 1000mg inj</i>	1	
<i>meropenem 500mg inj</i>	1	
CYCLIC LIPOPEPTIDES		
<i>daptomycin 500mg inj</i>	1	NDS
GLYCOPEPTIDES		
DALVANCE 500MG INJ	1	NDS
<i>vancomycin 100mg/ml inj</i>	1	
<i>vancomycin 125mg cap</i>	1	ST QL=120 EA/30 Days
<i>vancomycin 1gm inj</i>	1	
<i>vancomycin 250mg cap</i>	1	ST QL=120 EA/30 Days
<i>vancomycin 500mg inj</i>	1	
<i>vancomycin 750mg inj</i>	1	
LEPROSTATICS		
<i>dapsone 100mg tab</i>	1	
<i>dapsone 25mg tab</i>	1	
LINCOSAMIDES		
<i>clindamycin 12mg/ml inj</i>	1	
<i>clindamycin 150mg cap</i>	1	
<i>clindamycin 150mg/ml (4ml) inj</i>	1	
<i>clindamycin 150mg/ml (6ml) inj</i>	1	
<i>clindamycin 15mg/ml oral soln</i>	1	
<i>clindamycin 18mg/ml inj</i>	1	
<i>clindamycin 300mg cap</i>	1	
<i>clindamycin 6mg/ml inj</i>	1	
<i>clindamycin 75mg cap</i>	1	
MONOBACTAMS		
<i>aztreonam 1000mg inj</i>	1	
<i>aztreonam 2000mg inj</i>	1	
CAYSTON 75MG INH SOLN	1	NDS PA QL=84 ML/28 Days
OXAZOLIDINONES		
<i>linezolid 20mg/ml susp</i>	1	PA
<i>linezolid 2mg/ml inj</i>	1	PA
<i>linezolid 600mg tab</i>	1	
SIVEXTRO 200MG INJ	1	NDS PA QL=6 EA/6 Days
SIVEXTRO 200MG TAB	1	NDS PA QL=6 EA/6 Days
PLEUROMUTILINS		
XENLETA 600MG TAB	1	PA QL=14 EA/7 Days
POLYMYXINS		
<i>colistin 75mg/ml inj</i>	1	
<i>polymyxin b 250000unit/ml inj</i>	1	
URINARY ANTI-INFECTIVES		
<i>methenamine hippurate 1000mg tab</i>	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
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	1	
<i>nitrofurantoin macrocrystals 100mg cap</i>	1	
<i>nitrofurantoin macrocrystals 50mg cap</i>	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone/proguanil 250-100mg tab</i>	1	
<i>atovaquone/proguanil 62.5-25mg tab</i>	1	
COARTEM 20-120MG TAB	1	
ANTIMALARIALS		
<i>chloroquine phosphate 250mg tab</i>	1	
<i>chloroquine phosphate 500mg tab</i>	1	
<i>hydroxychloroquine sulfate 100mg tab</i>	1	
<i>hydroxychloroquine sulfate 200mg tab</i>	1	
<i>hydroxychloroquine sulfate 300mg tab</i>	1	
<i>hydroxychloroquine sulfate 400mg tab</i>	1	
<i>mefloquine 250mg tab</i>	1	
PRIMAQUINE PHOSPHATE 26.3MG TAB	1	
<i>quinine sulfate 324mg cap</i>	1	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE 10MG TAB	1	NDS PA
<i>pyridostigmine bromide 180mg er tab</i>	1	
<i>pyridostigmine bromide 60mg tab</i>	1	
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>ethambutol 100mg tab</i>	1	
<i>ethambutol 400mg tab</i>	1	
ISONIAZID 100MG TAB	1	
<i>isoniazid 10mg/ml oral soln</i>	1	
<i>isoniazid 300mg tab</i>	1	
PRIFTIN 150MG TAB	1	
<i>pyrazinamide 500mg tab</i>	1	
<i>rifabutin 150mg cap</i>	1	
<i>rifampin 150mg cap</i>	1	
<i>rifampin 300mg cap</i>	1	
<i>rifampin 600mg inj</i>	1	
SIRTURO 100MG TAB	1	NDS PA
SIRTURO 20MG TAB	1	NDS PA
TRECTOR 250MG TAB	1	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE 25MG TAB	1	PA BvD
CYCLOPHOSPHAMIDE 50MG TAB	1	PA BvD
GLEOSTINE 100MG CAP	1	
GLEOSTINE 10MG 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
GLEOSTINE 40MG CAP	1	
LEUKERAN 2MG TAB	1	
ANTIMETABOLITES		
<i>mercaptopurine 50mg tab</i>	1	
<i>methotrexate 2.5mg tab</i>	1	
<i>methotrexate 25mg/ml inj</i>	1	
<i>methotrexate 50mg/2ml inj</i>	1	
ONUREG 200MG TAB	1	NDS PA NSO QL=14 EA/28 Days
ONUREG 300MG TAB	1	NDS PA NSO QL=14 EA/28 Days
PURIXAN 2000MG/100ML SUSP	1	
TABLOID 40MG TAB	1	
XATMEP 2.5MG/ML ORAL SOLN	1	PA NSO
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1MG CAP	1	NDS PA NSO QL=84 EA/28 Days
FRUZAQLA 5MG CAP	1	NDS PA NSO QL=21 EA/28 Days
INLYTA 1MG TAB	1	NDS PA NSO QL=180 EA/30 Days
INLYTA 5MG TAB	1	NDS PA NSO QL=120 EA/30 Days
LENVIMA 10MG DAILY DOSE PACK	1	NDS PA NSO QL=30 EA/30 Days
LENVIMA 12MG DAILY DOSE PACK	1	NDS PA NSO QL=90 EA/30 Days
LENVIMA 14MG DAILY DOSE PACK	1	NDS PA NSO QL=60 EA/30 Days
LENVIMA 18MG DAILY DOSE PACK	1	NDS PA NSO QL=90 EA/30 Days
LENVIMA 20MG DAILY DOSE PACK	1	NDS PA NSO QL=60 EA/30 Days
LENVIMA 24MG DAILY DOSE PACK	1	NDS PA NSO QL=90 EA/30 Days
LENVIMA 4MG DAILY DOSE PACK	1	NDS PA NSO QL=30 EA/30 Days
LENVIMA 8MG DAILY DOSE PACK	1	NDS PA NSO QL=60 EA/30 Days
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
TUKYSA 150MG TAB	1	NDS PA NSO QL=120 EA/30 Days
TUKYSA 50MG TAB	1	NDS PA NSO QL=120 EA/30 Days
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA 100MG TAB	1	NDS PA NSO QL=180 EA/30 Days
VENCLEXTA 10MG TAB	1	PA NSO QL=60 EA/30 Days
VENCLEXTA 50MG TAB	1	PA NSO QL=30 EA/30 Days
VENCLEXTA TAB STARTER PACK	1	NDS PA NSO QL=42 EA/28 Days
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>erlotinib 150mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>erlotinib 25mg tab</i>	1	PA NSO QL=90 EA/30 Days
EXKIVITY 40MG CAP	1	NDS PA NSO QL=120 EA/30 Days
<i>gefitinib 250mg tab</i>	1	PA NSO
GILOTRIF 20MG TAB	1	NDS PA NSO QL=30 EA/30 Days
GILOTRIF 30MG TAB	1	NDS PA NSO QL=30 EA/30 Days
GILOTRIF 40MG TAB	1	NDS PA NSO QL=30 EA/30 Days
TAGRISSE 40MG TAB	1	NDS PA NSO QL=30 EA/30 Days
TAGRISSE 80MG TAB	1	NDS PA NSO QL=30 EA/30 Days
VIZIMPRO 15MG TAB	1	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
VIZIMPRO 30MG TAB	1	NDS PA NSO QL=30 EA/30 Days
VIZIMPRO 45MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
DAURISMO 25MG TAB	1	NDS PA NSO QL=60 EA/30 Days
ERIVEDGE 150MG CAP	1	NDS PA NSO
ODOMZO 200MG CAP	1	NDS PA NSO
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	1	QL=120 EA/30 Days
AKEEGA 500-100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
AKEEGA 500-50MG TAB	1	NDS PA NSO QL=60 EA/30 Days
<i>anastrozole 1mg tab</i>	1	
<i>bicalutamide 50mg tab</i>	1	
ELIGARD 22.5MG SYRINGE	1	QL=1 EA/84 Days
ELIGARD 30MG SYRINGE	1	QL=1 EA/112 Days
ELIGARD 45MG SYRINGE	1	QL=1 EA/168 Days
ELIGARD 7.5MG SYRINGE	1	QL=1 EA/28 Days
ERLEADA 240MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ERLEADA 60MG TAB	1	NDS PA NSO QL=120 EA/30 Days
<i>exemestane 25mg tab</i>	1	
FIRMAGON 120MG/VIAL INJ	1	PA NSO
FIRMAGON 80MG INJ	1	PA NSO
<i>letrozole 2.5mg tab</i>	1	
LEUPROLIDE ACETATE 22.5MG INJ	1	QL=1 EA/84 Days
<i>leuprolide acetate 5mg/ml inj</i>	1	
LUPRON 11.25MG SYRINGE (NON-PEDIATRIC)	1	QL=1 EA/84 Days
LUPRON 22.5MG SYRINGE	1	QL=1 EA/84 Days
LUPRON 3.75MG SYRINGE	1	NDS QL=1 EA/28 Days
LUPRON 30MG SYRINGE	1	QL=1 EA/112 Days
LUPRON 45MG SYRINGE (NON-PEDIATRIC)	1	QL=1 EA/168 Days
LUPRON 7.5MG SYRINGE (NON-PEDIATRIC)	1	NDS QL=1 EA/28 Days
LYSODREN 500MG TAB	1	
<i>megestrol acetate 20mg tab</i>	1	PA NSO
<i>megestrol acetate 40mg tab</i>	1	PA NSO
<i>megestrol acetate 40mg/ml susp</i>	1	PA
<i>nilutamide 150mg tab</i>	1	
NUBEQA 300MG TAB	1	NDS PA NSO QL=120 EA/30 Days
ORGOVYX 120MG TAB	1	NDS PA NSO QL=30 EA/28 Days
ORSERDU 345MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ORSERDU 86MG TAB	1	NDS PA NSO QL=90 EA/30 Days
SOLTAMOX 10MG/5ML ORAL SOLN	1	
<i>tamoxifen 10mg tab</i>	1	
<i>tamoxifen 20mg tab</i>	1	
<i>toremifene 60mg tab</i>	1	
TRELSTAR 11.25MG INJ	1	QL=1 EA/84 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
TRELSTAR 22.5MG INJ	1	QL=1 EA/168 Days
TRELSTAR 3.75MG INJ	1	NDS QL=1 EA/28 Days
XTANDI 40MG CAP	1	NDS PA NSO QL=120 EA/30 Days
XTANDI 40MG TAB	1	NDS PA NSO QL=120 EA/30 Days
XTANDI 80MG TAB	1	NDS PA NSO QL=60 EA/30 Days
ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS		
WELIREG 40MG TAB	1	NDS PA NSO QL=90 EA/30 Days
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST 1MG CAP	1	NDS PA NSO QL=21 EA/28 Days
POMALYST 2MG CAP	1	NDS PA NSO QL=21 EA/28 Days
POMALYST 3MG CAP	1	NDS PA NSO QL=21 EA/28 Days
POMALYST 4MG CAP	1	NDS PA NSO QL=21 EA/28 Days
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 200MG TAB	1	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 25MG TAB	1	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 300MG TAB	1	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO 100MG ONCE WEEKLY CARTON (8-PACK)	1	NDS PA NSO QL=8 EA/28 Days
XPOVIO 40MG ONCE WEEKLY CARTON (4-PACK)	1	NDS PA NSO QL=4 EA/28 Days
XPOVIO 40MG TWICE WEEKLY CARTON (8-PACK)	1	NDS PA NSO QL=8 EA/28 Days
XPOVIO 60MG ONCE WEEKLY CARTON (4-PACK)	1	NDS PA NSO QL=4 EA/28 Days
XPOVIO 60MG TWICE WEEKLY CARTON (24 PACK)	1	NDS PA NSO QL=24 EA/28 Days
XPOVIO 80MG ONCE WEEKLY CARTON (8-PACK)	1	NDS PA NSO QL=8 EA/28 Days
XPOVIO 80MG TWICE WEEKLY CARTON (32 PACK)	1	NDS PA NSO QL=32 EA/28 Days
ANTINEOPLASTIC COMBINATIONS		
INQOVI 5 TABLET PACK	1	NDS PA NSO QL=5 EA/28 Days
KISQALI/FEMARA 200 CO-PACK	1	NDS PA NSO QL=49 EA/28 Days
KISQALI/FEMARA 400 CO-PACK	1	NDS PA NSO QL=70 EA/28 Days
KISQALI/FEMARA 600 CO-PACK	1	NDS PA NSO QL=91 EA/28 Days
LONSURF 6.14-15MG TAB	1	NDS PA NSO
LONSURF 8.19-20MG TAB	1	NDS PA NSO
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA 150MG CAP	1	NDS PA NSO QL=240 EA/30 Days
ALUNBRIG 180MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ALUNBRIG 30MG TAB	1	NDS PA NSO QL=120 EA/30 Days
ALUNBRIG 90MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ALUNBRIG INITIATION PACK	1	NDS PA NSO QL=30 EA/30 Days
AUGTYRO 40MG CAP	1	NDS PA NSO QL=240 EA/30 Days
BALVERSA 3MG TAB	1	NDS PA NSO QL=60 EA/30 Days
BALVERSA 4MG TAB	1	NDS PA NSO QL=60 EA/30 Days
BALVERSA 5MG TAB	1	NDS PA NSO QL=30 EA/30 Days
BOSULIF 100MG CAP	1	NDS PA NSO QL=150 EA/30 Days
BOSULIF 100MG TAB	1	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
BOSULIF 400MG TAB	1	NDS PA NSO QL=30 EA/30 Days
BOSULIF 500MG TAB	1	NDS PA NSO QL=30 EA/30 Days
BOSULIF 50MG CAP	1	NDS PA NSO QL=30 EA/30 Days
BRAFTOVI 75MG CAP	1	NDS PA NSO QL=180 EA/30 Days
BRUKINSA 80MG CAP	1	NDS PA NSO QL=120 EA/30 Days
CABOMETYX 20MG TAB	1	NDS PA NSO QL=30 EA/30 Days
CABOMETYX 40MG TAB	1	NDS PA NSO QL=30 EA/30 Days
CABOMETYX 60MG TAB	1	NDS PA NSO QL=30 EA/30 Days
CALQUENCE 100MG CAP	1	NDS PA NSO QL=60 EA/30 Days
CALQUENCE 100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
CAPRELSA 100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
CAPRELSA 300MG TAB	1	NDS PA NSO QL=30 EA/30 Days
COMETRIQ CAP 100MG DAILY DOSE PACK	1	NDS PA NSO QL=56 EA/28 Days
COMETRIQ CAP 140MG DAILY DOSE PACK	1	NDS PA NSO QL=112 EA/28 Days
COMETRIQ CAP 60MG DAILY DOSE PACK	1	NDS PA NSO QL=84 EA/28 Days
COPIKTRA 15MG CAP	1	NDS PA NSO QL=60 EA/30 Days
COPIKTRA 25MG CAP	1	NDS PA NSO QL=60 EA/30 Days
COTELLIC 20MG TAB	1	NDS PA NSO QL=63 EA/28 Days
<i>everolimus 10mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>everolimus 2.5mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>everolimus 2mg tab for oral susp</i>	1	PA NSO QL=150 EA/30 Days
<i>everolimus 3mg tab for oral susp</i>	1	PA NSO QL=90 EA/30 Days
<i>everolimus 5mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>everolimus 5mg tab for oral susp</i>	1	PA NSO QL=60 EA/30 Days
<i>everolimus 7.5mg tab</i>	1	PA NSO QL=30 EA/30 Days
FOTIVDA 0.89MG CAP	1	NDS PA NSO QL=21 EA/28 Days
FOTIVDA 1.34MG CAP	1	NDS PA NSO QL=21 EA/28 Days
GAVRETO 100MG CAP	1	NDS PA NSO QL=120 EA/30 Days
IBRANCE 100MG CAP	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 100MG TAB	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 125MG CAP	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 125MG TAB	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 75MG CAP	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 75MG TAB	1	NDS PA NSO QL=21 EA/28 Days
ICLUSIG 10MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 15MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 30MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 45MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IDHIFA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IDHIFA 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
<i>imatinib 100mg tab</i>	1	QL=90 EA/30 Days
<i>imatinib 400mg tab</i>	1	QL=60 EA/30 Days
IMBRUVICA 140MG CAP	1	NDS PA NSO QL=90 EA/30 Days
IMBRUVICA 420MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IMBRUVICA 70MG CAP	1	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
IMBRUVICA 70MG/ML SUSP	1	NDS PA NSO
INREBIC 100MG CAP	1	NDS PA NSO QL=120 EA/30 Days
JAKAFI 10MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 15MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 20MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 25MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 5MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAYPIRCA 100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAYPIRCA 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
KISQALI 200MG DAILY DOSE PACK (21)	1	NDS PA NSO QL=21 EA/28 Days
KISQALI 400MG DAILY DOSE PACK (42)	1	NDS PA NSO QL=42 EA/28 Days
KISQALI 600MG DAILY DOSE PACK (63)	1	NDS PA NSO QL=63 EA/28 Days
KOSELUGO 10MG CAP	1	NDS PA NSO QL=240 EA/30 Days
KOSELUGO 25MG CAP	1	NDS PA NSO QL=120 EA/30 Days
KRAZATI 200MG TAB	1	NDS PA NSO QL=180 EA/30 Days
<i>lapatinib 250mg tab</i>	1	PA NSO
LORBRENA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
LORBRENA 25MG TAB	1	NDS PA NSO QL=90 EA/30 Days
LUMAKRAS 120MG TAB	1	NDS PA NSO QL=240 EA/30 Days
LUMAKRAS 320MG TAB	1	NDS PA NSO QL=90 EA/30 Days
LYNPARZA 100MG TAB	1	NDS PA NSO QL=120 EA/30 Days
LYNPARZA 150MG TAB	1	NDS PA NSO QL=120 EA/30 Days
LYTGOBI 4MG TAB PACK (12MG DAILY DOSE)	1	NDS PA NSO QL=84 EA/28 Days
LYTGOBI 4MG TAB PACK (16MG DAILY DOSE)	1	NDS PA NSO QL=112 EA/28 Days
LYTGOBI 4MG TAB PACK (20MG DAILY DOSE)	1	NDS PA NSO QL=140 EA/28 Days
MEKINIST 0.05MG/ML ORAL SOLN	1	NDS PA NSO
MEKINIST 0.5MG TAB	1	NDS PA NSO QL=90 EA/30 Days
MEKINIST 2MG TAB	1	NDS PA NSO QL=30 EA/30 Days
MEKTOVI 15MG TAB	1	NDS PA NSO QL=180 EA/30 Days
NERLYNX 40MG TAB	1	NDS PA NSO QL=180 EA/30 Days
NINLARO 2.3MG CAP	1	NDS PA NSO QL=3 EA/28 Days
NINLARO 3MG CAP	1	NDS PA NSO QL=3 EA/28 Days
NINLARO 4MG CAP	1	NDS PA NSO QL=3 EA/28 Days
OGSIVEO 50MG TAB	1	NDS PA NSO QL=180 EA/30 Days
OJJAARA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
OJJAARA 150MG TAB	1	NDS PA NSO QL=30 EA/30 Days
OJJAARA 200MG TAB	1	NDS PA NSO QL=30 EA/30 Days
<i>pazopanib 200mg tab</i>	1	PA NSO QL=120 EA/30 Days
PEMAZYRE 13.5MG TAB	1	NDS PA NSO QL=30 EA/30 Days
PEMAZYRE 4.5MG TAB	1	NDS PA NSO QL=30 EA/30 Days
PEMAZYRE 9MG TAB	1	NDS PA NSO QL=30 EA/30 Days
PIQRAY 200MG DAILY DOSE PACK	1	NDS PA NSO QL=30 EA/30 Days
PIQRAY 250MG DAILY DOSE PACK	1	NDS PA NSO QL=60 EA/30 Days
PIQRAY 300MG DAILY DOSE PACK	1	NDS PA NSO QL=60 EA/30 Days
QINLOCK 50MG TAB	1	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
RETEVMO 40MG CAP	1	NDS PA NSO QL=120 EA/30 Days
RETEVMO 80MG CAP	1	NDS PA NSO QL=120 EA/30 Days
REZLIDHIA 150MG CAP	1	NDS PA NSO QL=60 EA/30 Days
ROZLYTREK 100MG CAP	1	NDS PA NSO QL=150 EA/30 Days
ROZLYTREK 200MG CAP	1	NDS PA NSO QL=90 EA/30 Days
ROZLYTREK 50MG ORAL PELLETT	1	NDS PA NSO QL=336 EA/28 Days
RUBRACA 200MG TAB	1	NDS PA NSO QL=120 EA/30 Days
RUBRACA 250MG TAB	1	NDS PA NSO QL=120 EA/30 Days
RUBRACA 300MG TAB	1	NDS PA NSO QL=120 EA/30 Days
RYDAPT 25MG CAP	1	NDS PA NSO QL=224 EA/28 Days
SCSEMBLIX 20MG TAB	1	NDS PA NSO QL=60 EA/30 Days
SCSEMBLIX 40MG TAB	1	NDS PA NSO QL=300 EA/30 Days
<i>sorafenib 200mg tab</i>	1	PA NSO QL=120 EA/30 Days
SPRYCEL 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
SPRYCEL 140MG TAB	1	NDS PA NSO QL=30 EA/30 Days
SPRYCEL 20MG TAB	1	NDS PA NSO QL=90 EA/30 Days
SPRYCEL 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
SPRYCEL 70MG TAB	1	NDS PA NSO QL=30 EA/30 Days
SPRYCEL 80MG TAB	1	NDS PA NSO QL=30 EA/30 Days
STIVARGA 40MG TAB	1	NDS PA NSO QL=84 EA/28 Days
<i>sunitinib 12.5mg cap</i>	1	PA NSO
<i>sunitinib 25mg cap</i>	1	PA NSO
<i>sunitinib 37.5mg cap</i>	1	PA NSO
<i>sunitinib 50mg cap</i>	1	PA NSO
TABRECTA 150MG TAB	1	NDS PA NSO QL=120 EA/30 Days
TABRECTA 200MG TAB	1	NDS PA NSO QL=120 EA/30 Days
TAFINLAR 10MG TAB FOR ORAL SUSP	1	NDS PA NSO QL=840 EA/28 Days
TAFINLAR 50MG CAP	1	NDS PA NSO QL=120 EA/30 Days
TAFINLAR 75MG CAP	1	NDS PA NSO QL=120 EA/30 Days
TALZENNA 0.1MG CAP	1	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.25MG CAP	1	NDS PA NSO QL=90 EA/30 Days
TALZENNA 0.35MG CAP	1	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.5MG CAP	1	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.75MG CAP	1	NDS PA NSO QL=30 EA/30 Days
TALZENNA 1MG CAP	1	NDS PA NSO QL=30 EA/30 Days
TASIGNA 150MG CAP	1	NDS PA NSO QL=112 EA/28 Days
TASIGNA 200MG CAP	1	NDS PA NSO QL=112 EA/28 Days
TASIGNA 50MG CAP	1	NDS PA NSO QL=120 EA/30 Days
TAZVERIK 200MG TAB	1	NDS PA NSO QL=240 EA/30 Days
TEPMETKO 225MG TAB	1	NDS PA NSO QL=60 EA/30 Days
TIBSOVO 250MG TAB	1	NDS PA NSO QL=60 EA/30 Days
TRUQAP 160MG TAB	1	NDS PA NSO QL=64 EA/28 Days
TRUQAP 200MG TAB	1	NDS PA NSO QL=64 EA/28 Days
TURALIO 125MG CAP	1	NDS PA NSO QL=120 EA/30 Days
VANFLYTA 17.7MG TAB	1	NDS PA NSO 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
VANFLYTA 26.5MG TAB	1	NDS PA NSO QL=56 EA/28 Days
VERZENIO 100MG TAB	1	NDS PA NSO QL=56 EA/28 Days
VERZENIO 150MG TAB	1	NDS PA NSO QL=56 EA/28 Days
VERZENIO 200MG TAB	1	NDS PA NSO QL=56 EA/28 Days
VERZENIO 50MG TAB	1	NDS PA NSO QL=56 EA/28 Days
VITRAKVI 100MG CAP	1	NDS PA NSO QL=60 EA/30 Days
VITRAKVI 20MG/ML ORAL SOLN	1	NDS PA NSO QL=300 ML/30 Days
VITRAKVI 25MG CAP	1	NDS PA NSO QL=180 EA/30 Days
VONJO 100MG CAP	1	NDS PA NSO QL=120 EA/30 Days
XALKORI 150MG ORAL PELLETT	1	NDS PA NSO QL=180 EA/30 Days
XALKORI 200MG CAP	1	NDS PA NSO QL=60 EA/30 Days
XALKORI 20MG ORAL PELLETT	1	NDS PA NSO QL=120 EA/30 Days
XALKORI 250MG CAP	1	NDS PA NSO QL=120 EA/30 Days
XALKORI 50MG ORAL PELLETT	1	NDS PA NSO QL=120 EA/30 Days
XOSPATA 40MG TAB	1	NDS PA NSO QL=90 EA/30 Days
ZEJULA 100MG CAP	1	NDS PA NSO QL=90 EA/30 Days
ZEJULA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ZEJULA 200MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ZEJULA 300MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ZELBORAF 240MG TAB	1	NDS PA NSO QL=240 EA/30 Days
ZOLINZA 100MG CAP	1	NDS PA NSO
ZYDELIG 100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
ZYDELIG 150MG TAB	1	NDS PA NSO QL=60 EA/30 Days
ZYKADIA 150MG TAB	1	NDS PA NSO QL=90 EA/30 Days
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000UNIT/0.5ML INJ	1	NDS PA NSO
BESREMI 500MCG/ML SYRINGE	1	NDS PA NSO QL=2 ML/28 Days
<i>bexarotene 75mg cap</i>	1	PA NSO
<i>hydroxyurea 500mg cap</i>	1	
MATULANE 50MG CAP	1	NDS
<i>tretinoin 10mg cap</i>	1	
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
IWILFIN 192MG TAB	1	NDS PA NSO QL=240 EA/30 Days
<i>leucovorin 10mg tab</i>	1	
<i>leucovorin 15mg tab</i>	1	
<i>leucovorin 25mg tab</i>	1	
<i>leucovorin 5mg tab</i>	1	
MESNEX 400MG TAB	1	
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa 25mg tab</i>	1	
NOURIANZ 20MG TAB	1	PA QL=30 EA/30 Days
NOURIANZ 40MG TAB	1	PA QL=30 EA/30 Days
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate 0.5mg tab</i>	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
<i>benztropine mesylate 1mg tab</i>	1	
<i>benztropine mesylate 2mg tab</i>	1	
<i>trihexyphenidyl 2mg tab</i>	1	
<i>trihexyphenidyl 5mg tab</i>	1	
ANTIPARKINSON COMT INHIBITORS		
<i>entacapone 200mg tab</i>	1	
<i>tolcapone 100mg tab</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine 100mg cap</i>	1	
<i>amantadine 10mg/ml oral soln</i>	1	
<i>bromocriptine 2.5mg tab</i>	1	
<i>bromocriptine 5mg cap</i>	1	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	1	
CARBIDOPA/LEVODOPA 10-100MG ODT	1	
<i>carbidopa/levodopa 10-100mg tab</i>	1	
<i>carbidopa/levodopa 25-100mg er tab</i>	1	
CARBIDOPA/LEVODOPA 25-100MG ODT	1	
<i>carbidopa/levodopa 25-100mg tab</i>	1	
CARBIDOPA/LEVODOPA 25-250MG ODT	1	
<i>carbidopa/levodopa 25-250mg tab</i>	1	
<i>carbidopa/levodopa 50-200mg er tab</i>	1	
<i>pramipexole 0.125mg tab</i>	1	
<i>pramipexole 0.25mg tab</i>	1	
<i>pramipexole 0.5mg tab</i>	1	
<i>pramipexole 0.75mg tab</i>	1	
<i>pramipexole 1.5mg tab</i>	1	
<i>pramipexole 1mg tab</i>	1	
<i>ropinirole 0.25mg tab</i>	1	
<i>ropinirole 0.5mg tab</i>	1	
<i>ropinirole 1mg tab</i>	1	
<i>ropinirole 2mg tab</i>	1	
<i>ropinirole 3mg tab</i>	1	
<i>ropinirole 4mg tab</i>	1	
<i>ropinirole 5mg tab</i>	1	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline 0.5mg tab</i>	1	
<i>rasagiline 1mg tab</i>	1	
<i>selegiline 5mg cap</i>	1	
ANTIPSYCHOTICS/ANTIMANIC 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
ANTIMANIC AGENTS		
<i>lithium carbonate 150mg cap</i>	1	
<i>lithium carbonate 300mg cap</i>	1	
<i>lithium carbonate 300mg er tab</i>	1	
<i>lithium carbonate 300mg tab</i>	1	
<i>lithium carbonate 450mg er tab</i>	1	
LITHIUM CARBONATE 600MG CAP	1	
<i>lithium citrate 60mg/ml oral soln</i>	1	
ANTIPSYCHOTICS - MISC.		
CAPLYTA 10.5MG CAP	1	PA NSO QL=30 EA/30 Days
CAPLYTA 21MG CAP	1	PA NSO QL=30 EA/30 Days
CAPLYTA 42MG CAP	1	PA NSO QL=30 EA/30 Days
<i>lurasidone 120mg tab</i>	1	ST_NSO
<i>lurasidone 20mg tab</i>	1	ST_NSO
<i>lurasidone 40mg tab</i>	1	ST_NSO
<i>lurasidone 60mg tab</i>	1	ST_NSO
<i>lurasidone 80mg tab</i>	1	ST_NSO
NUPLAZID 10MG TAB	1	PA NSO QL=30 EA/30 Days
NUPLAZID 34MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 1.5/3MG MIXED PACK	1	PA NSO QL=30 EA/30 Days
VRAYLAR 1.5MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 3MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 4.5MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 6MG CAP	1	PA NSO QL=30 EA/30 Days
<i>ziprasidone 20mg cap</i>	1	
<i>ziprasidone 20mg inj</i>	1	PA NSO QL=60 EA/30 Days
<i>ziprasidone 40mg cap</i>	1	
<i>ziprasidone 60mg cap</i>	1	
<i>ziprasidone 80mg cap</i>	1	
BENZISOXAZOLES		
FANAPT 10MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 12MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 1MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 2MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 4MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 6MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 8MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT TITRATION PACK	1	PA NSO QL=60 EA/30 Days
INVEGA 1092MG/3.5ML SYRINGE	1	PA NSO QL=3.50 ML/180 Days
INVEGA 117MG/0.75ML SYRINGE	1	PA NSO QL=.75 ML/28 Days
INVEGA 1560MG/5ML SYRINGE	1	PA NSO QL=5 ML/180 Days
INVEGA 156MG/ML SYRINGE	1	PA NSO QL=1 ML/28 Days
INVEGA 234MG/1.5ML SYRINGE	1	PA NSO QL=1.50 ML/28 Days
INVEGA 273MG/0.875ML SYRINGE	1	PA NSO QL=.88 ML/84 Days
INVEGA 39MG/0.25ML SYRINGE	1	PA NSO QL=.25 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
INVEGA 410MG/1.315ML SYRINGE	1	PA NSO QL=1.32 ML/84 Days
INVEGA 546MG/1.75ML SYRINGE	1	PA NSO QL=1.75 ML/84 Days
INVEGA 78MG/0.5ML SYRINGE	1	PA NSO QL=.50 ML/28 Days
INVEGA 819MG/2.625ML SYRINGE	1	PA NSO QL=2.63 ML/84 Days
<i>paliperidone 1.5mg er tab</i>	1	QL=30 EA/30 Days
<i>paliperidone 3mg er tab</i>	1	QL=30 EA/30 Days
<i>paliperidone 6mg er tab</i>	1	QL=60 EA/30 Days
<i>paliperidone 9mg er tab</i>	1	QL=30 EA/30 Days
PERSERIS 120MG SYRINGE	1	NDS PA NSO QL=1 EA/28 Days
PERSERIS 90MG SYRINGE	1	NDS PA NSO QL=1 EA/28 Days
RISPERIDONE 0.25MG ODT	1	
<i>risperidone 0.25mg tab</i>	1	
<i>risperidone 0.5mg odt</i>	1	
<i>risperidone 0.5mg tab</i>	1	
<i>risperidone 12.5mg inj</i>	1	PA NSO QL=2 EA/28 Days
<i>risperidone 1mg odt</i>	1	
<i>risperidone 1mg tab</i>	1	
<i>risperidone 1mg/ml oral soln</i>	1	
<i>risperidone 25mg inj</i>	1	PA NSO QL=2 EA/28 Days
<i>risperidone 2mg odt</i>	1	
<i>risperidone 2mg tab</i>	1	
<i>risperidone 37.5mg inj</i>	1	PA NSO QL=2 EA/28 Days
<i>risperidone 3mg odt</i>	1	
<i>risperidone 3mg tab</i>	1	
<i>risperidone 4mg odt</i>	1	
<i>risperidone 4mg tab</i>	1	
<i>risperidone 50mg inj</i>	1	PA NSO QL=2 EA/28 Days
UZEDY 100MG/0.28ML SYRINGE	1	QL=.28 ML/30 Days
UZEDY 125MG/0.35ML SYRINGE	1	NDS QL=.35 ML/30 Days
UZEDY 150MG/0.42ML SYRINGE	1	QL=.42 ML/60 Days
UZEDY 200MG/0.56ML SYRINGE	1	QL=.56 ML/60 Days
UZEDY 250MG/0.7ML SYRINGE	1	QL=.70 ML/60 Days
UZEDY 50MG/0.14ML SYRINGE	1	NDS QL=.14 ML/30 Days
UZEDY 75MG/0.21ML SYRINGE	1	NDS QL=.21 ML/30 Days
BUTYROPHENONES		
<i>haloperidol 0.5mg tab</i>	1	
<i>haloperidol 10mg tab</i>	1	
<i>haloperidol 1mg tab</i>	1	
<i>haloperidol 20mg tab</i>	1	
<i>haloperidol 2mg tab</i>	1	
<i>haloperidol 2mg/ml oral soln</i>	1	
<i>haloperidol 5mg tab</i>	1	
<i>haloperidol 5mg/ml inj</i>	1	
<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	1	
<i>haloperidol decanoate 100mg/ml inj</i>	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
haloperidol decanoate 50mg/ml (1ml) inj	1	
haloperidol decanoate 50mg/ml inj	1	
DIBENZAPINES		
asenapine 10mg sl tab	1	QL=60 EA/30 Days
asenapine 2.5mg sl tab	1	QL=60 EA/30 Days
asenapine 5mg sl tab	1	QL=60 EA/30 Days
clozapine 100mg odt	1	
clozapine 100mg tab	1	
CLOZAPINE 12.5MG ODT	1	
clozapine 150mg odt	1	
clozapine 200mg odt	1	
clozapine 200mg tab	1	
clozapine 25mg odt	1	
clozapine 25mg tab	1	
clozapine 50mg tab	1	
loxapine 10mg cap	1	
loxapine 25mg cap	1	
loxapine 50mg cap	1	
loxapine 5mg cap	1	
olanzapine 10mg inj	1	
olanzapine 10mg odt	1	
olanzapine 10mg tab	1	
olanzapine 15mg odt	1	
olanzapine 15mg tab	1	
olanzapine 2.5mg tab	1	
olanzapine 20mg odt	1	
olanzapine 20mg tab	1	
olanzapine 5mg odt	1	
olanzapine 5mg tab	1	
olanzapine 7.5mg tab	1	
quetiapine 100mg tab	1	
quetiapine 150mg er tab	1	
quetiapine 200mg er tab	1	
quetiapine 200mg tab	1	
quetiapine 25mg tab	1	
quetiapine 300mg er tab	1	
quetiapine 300mg tab	1	
quetiapine 400mg er tab	1	
quetiapine 400mg tab	1	
quetiapine 50mg er tab	1	
quetiapine 50mg tab	1	
SECUADO 3.8MG/24HR PATCH	1	PA NSO QL=30 EA/30 Days
SECUADO 5.7MG/24HR PATCH	1	PA NSO QL=30 EA/30 Days
SECUADO 7.6MG/24HR PATCH	1	PA NSO QL=30 EA/30 Days
VERSACLOZ 50MG/ML SUSP	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
ZYPREXA 210MG INJ	1	PA NSO QL=2 EA/28 Days
DIHYDROINDOLONES		
MOLINDONE 10MG TAB	1	
MOLINDONE 25MG TAB	1	
MOLINDONE 5MG TAB	1	
PHENOTHIAZINES		
<i>chlorpromazine 100mg tab</i>	1	
CHLORPROMAZINE 100MG/ML ORAL SOLN	1	
<i>chlorpromazine 10mg tab</i>	1	
<i>chlorpromazine 200mg tab</i>	1	
<i>chlorpromazine 25mg tab</i>	1	
CHLORPROMAZINE 30MG/ML ORAL SOLN	1	
<i>chlorpromazine 50mg tab</i>	1	
<i>compro 25mg rectal supp</i>	1	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	1	
<i>fluphenazine 10mg tab</i>	1	
<i>fluphenazine 1mg tab</i>	1	
<i>fluphenazine 2.5mg tab</i>	1	
FLUPHENAZINE 2.5MG/ML INJ	1	
<i>fluphenazine 5mg tab</i>	1	
FLUPHENAZINE 5MG/ML ORAL SOLN	1	
<i>fluphenazine decanoate 25mg/ml inj</i>	1	
<i>perphenazine 16mg tab</i>	1	
<i>perphenazine 2mg tab</i>	1	
<i>perphenazine 4mg tab</i>	1	
<i>perphenazine 8mg tab</i>	1	
<i>prochlorperazine 10mg tab</i>	1	
<i>prochlorperazine 25mg rectal supp</i>	1	
<i>prochlorperazine 5mg tab</i>	1	
<i>thioridazine 100mg tab</i>	1	
<i>thioridazine 10mg tab</i>	1	
<i>thioridazine 25mg tab</i>	1	
<i>thioridazine 50mg tab</i>	1	
<i>trifluoperazine 10mg tab</i>	1	
<i>trifluoperazine 1mg tab</i>	1	
<i>trifluoperazine 2mg tab</i>	1	
<i>trifluoperazine 5mg tab</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY 300MG INJ	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY 300MG SYRINGE	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY 400MG INJ	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY 400MG SYRINGE	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY 720MG/2.4ML SYRINGE	1	QL=2.40 ML/56 Days
ABILIFY 960MG/3.2ML SYRINGE	1	QL=3.20 ML/56 Days
<i>aripiprazole 10mg odt</i>	1	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
<i>aripiprazole 10mg tab</i>	1	
<i>aripiprazole 15mg odt</i>	1	PA NSO QL=60 EA/30 Days
<i>aripiprazole 15mg tab</i>	1	
<i>aripiprazole 1mg/ml oral soln</i>	1	PA NSO
<i>aripiprazole 20mg tab</i>	1	
<i>aripiprazole 2mg tab</i>	1	
<i>aripiprazole 30mg tab</i>	1	
<i>aripiprazole 5mg tab</i>	1	
ARISTADA 1064MG/3.9ML SYRINGE	1	PA NSO QL=3.90 ML/56 Days
ARISTADA 441MG/1.6ML SYRINGE	1	NDS PA NSO QL=1.60 ML/28 Days
ARISTADA 662MG/2.4ML SYRINGE	1	NDS PA NSO QL=2.40 ML/28 Days
ARISTADA 675MG/2.4ML SYRINGE	1	PA NSO QL=2.40 ML/42 Days
ARISTADA 882MG/3.2ML SYRINGE	1	PA NSO QL=3.20 ML/28 Days
REXULTI 0.25MG TAB	1	PA NSO QL=30 EA/30 Days
REXULTI 0.5MG TAB	1	PA NSO QL=30 EA/30 Days
REXULTI 1MG TAB	1	PA NSO QL=30 EA/30 Days
REXULTI 2MG TAB	1	PA NSO QL=30 EA/30 Days
REXULTI 3MG TAB	1	PA NSO QL=30 EA/30 Days
REXULTI 4MG TAB	1	PA NSO QL=30 EA/30 Days
THIOXANTHENES		
<i>thiothixene 10mg cap</i>	1	
<i>thiothixene 1mg cap</i>	1	
<i>thiothixene 2mg cap</i>	1	
<i>thiothixene 5mg cap</i>	1	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir 20mg/ml oral soln</i>	1	
<i>abacavir 300mg tab</i>	1	
<i>abacavir/lamivudine 600-300mg tab</i>	1	
APTIVUS 250MG CAP	1	
<i>atazanavir 150mg cap</i>	1	
<i>atazanavir 200mg cap</i>	1	
<i>atazanavir 300mg cap</i>	1	
BIKTARVY 30-120-15MG TAB	1	
BIKTARVY 50-200-25MG TAB	1	
CIMDUO 300-300MG TAB	1	
COMPLERA 200-25-300MG TAB	1	
<i>darunavir 600mg tab</i>	1	
<i>darunavir 800mg tab</i>	1	
DELSTRIGO 100-300-300MG TAB	1	
DESCOVY 120-15MG TAB	1	QL=30 EA/30 Days
DESCOVY 200-25MG TAB	1	QL=30 EA/30 Days
DOVATO 50-300MG TAB	1	
EDURANT 25MG TAB	1	
EFAVIRENZ 200MG 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
EFAVIRENZ 50MG CAP	1	
<i>efavirenz 600mg tab</i>	1	
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	1	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	1	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	1	
<i>emtricitabine 200mg cap</i>	1	
<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	1	QL=30 EA/30 Days
EMTRIVA 10MG/ML ORAL SOLN	1	
<i>etravirine 100mg tab</i>	1	
<i>etravirine 200mg tab</i>	1	
EVOTAZ 300-150MG TAB	1	
<i>fosamprenavir 700mg tab</i>	1	
FUZEON 90MG INJ	1	
GENVOYA 150-150-200-10MG TAB	1	
INTELENCE 25MG TAB	1	
ISENTRESS 100MG CHEW TAB	1	
ISENTRESS 100MG GRANULES FOR ORAL SUSP	1	
ISENTRESS 25MG CHEW TAB	1	
ISENTRESS 400MG TAB	1	
ISENTRESS 600MG TAB	1	
JULUCA 50-25MG TAB	1	
<i>lamivudine 10mg/ml oral soln</i>	1	
<i>lamivudine 150mg tab</i>	1	
<i>lamivudine 300mg tab</i>	1	
<i>lamivudine/zidovudine 150-300mg tab</i>	1	
LEXIVA 50MG/ML SUSP	1	
<i>lopinavir/ritonavir 100-25mg tab</i>	1	
<i>lopinavir/ritonavir 200-50mg tab</i>	1	
<i>lopinavir/ritonavir 80-20mg/ml oral soln</i>	1	
<i>maraviroc 150mg tab</i>	1	
<i>maraviroc 300mg tab</i>	1	
NEVIRAPINE 10MG/ML SUSP	1	
<i>nevirapine 200mg tab</i>	1	
<i>nevirapine 400mg er tab</i>	1	
NORVIR 100MG ORAL POWDER	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
ODEFSEY 200-25-25MG TAB	1	
PIFELTRO 100MG TAB	1	
PREZCOBIX 150-800MG TAB	1	
PREZISTA 100MG/ML SUSP	1	
PREZISTA 150MG TAB	1	
PREZISTA 75MG TAB	1	
REYATAZ 50MG ORAL POWDER	1	
<i>ritonavir 100mg tab</i>	1	
RUKOBIA 600MG ER TAB	1	
SELZENTRY 20MG/ML ORAL SOLN	1	
SELZENTRY 25MG TAB	1	
SELZENTRY 75MG TAB	1	
STRIBILD 150-150-200-300MG TAB	1	
SUNLENCA 300MG TAB 4-TABLET PACK	1	QL=4 EA/28 Days
SUNLENCA 300MG TAB 5-TABLET PACK	1	QL=5 EA/28 Days
SYMTUZA 150-800-200-10MG TAB	1	
<i>tenofovir disoproxil fumarate 300mg tab</i>	1	
TIVICAY 10MG TAB	1	
TIVICAY 25MG TAB	1	
TIVICAY 50MG TAB	1	
TIVICAY 5MG TAB FOR ORAL SUSP	1	
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	1	
TRIUMEQ 600-50-300MG TAB	1	
TRIZIVIR 300-150-300MG TAB	1	
TYBOST 150MG TAB	1	
VIRACEPT 250MG TAB	1	
VIRACEPT 625MG TAB	1	
VIREAD 150MG TAB	1	
VIREAD 200MG TAB	1	
VIREAD 250MG TAB	1	
VIREAD 40MG/GM ORAL POWDER	1	
<i>zidovudine 100mg cap</i>	1	
<i>zidovudine 10mg/ml oral soln</i>	1	
<i>zidovudine 300mg tab</i>	1	
ANTIVIRAL COMBINATIONS		
PAXLOVID 150MG/100MG TAB PACK (20)	1	QL=20 EA/5 Days
PAXLOVID 150MG/100MG TAB PACK (30)	1	QL=30 EA/5 Days
CMV AGENTS		
LIVTENCITY 200MG TAB	1	NDS PA QL=120 EA/30 Days
PREVYMIS 240MG TAB	1	NDS PA QL=30 EA/30 Days
PREVYMIS 480MG TAB	1	NDS PA QL=30 EA/30 Days
<i>valganciclovir 450mg tab</i>	1	
<i>valganciclovir 50mg/ml oral soln</i>	1	NDS
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	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
<i>entecavir 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>entecavir 1mg tab</i>	1	QL=30 EA/30 Days
<i>lamivudine 100mg tab</i>	1	
MAVYRET 100-40MG TAB	1	NDS PA QL=90 EA/30 Days
MAVYRET 50-20MG ORAL PELLETT	1	NDS PA QL=150 EA/30 Days
PEGASYS 180MCG/0.5ML SYRINGE	1	NDS
PEGASYS 180MCG/ML INJ	1	NDS
RIBAVIRIN 200MG CAP	1	
RIBAVIRIN 200MG TAB	1	
SOFOSBUVIR/VELPATASVIR 400-100MG TAB	1	NDS PA QL=30 EA/30 Days
VEMLIDY 25MG TAB	1	NDS
VOSEVI 400-100-100MG TAB	1	NDS PA QL=30 EA/30 Days
HERPES AGENTS		
<i>acyclovir 200mg cap</i>	1	
<i>acyclovir 400mg tab</i>	1	
<i>acyclovir 40mg/ml susp</i>	1	
<i>acyclovir 50mg/ml inj</i>	1	PA BvD
<i>acyclovir 800mg tab</i>	1	
<i>famciclovir 125mg tab</i>	1	
<i>famciclovir 250mg tab</i>	1	
<i>famciclovir 500mg tab</i>	1	
<i>valacyclovir 1000mg tab</i>	1	
<i>valacyclovir 500mg tab</i>	1	
INFLUENZA AGENTS		
<i>oseltamivir 30mg cap</i>	1	QL=84 EA/180 Days
<i>oseltamivir 45mg cap</i>	1	QL=42 EA/180 Days
<i>oseltamivir 6mg/ml susp</i>	1	QL=540 ML/180 Days
<i>oseltamivir 75mg cap</i>	1	QL=42 EA/180 Days
RELENZA 5MG/BLISTER INHALER	1	QL=120 EA/30 Days
RIMANTADINE 100MG TAB	1	
MISC. ANTIVIRALS		
LAGEVRIO 200MG CAP	1	QL=40 EA/5 Days
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol 12.5mg tab</i>	1	
<i>carvedilol 25mg tab</i>	1	
<i>carvedilol 3.125mg tab</i>	1	
<i>carvedilol 6.25mg tab</i>	1	
<i>labetalol 100mg tab</i>	1	
<i>labetalol 200mg tab</i>	1	
<i>labetalol 300mg tab</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	1	
<i>acebutolol 400mg cap</i>	1	
<i>atenolol 100mg tab</i>	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
<i>atenolol 25mg tab</i>	1	
<i>atenolol 50mg tab</i>	1	
<i>betaxolol 10mg tab</i>	1	
<i>betaxolol 20mg tab</i>	1	
<i>bisoprolol fumarate 10mg tab</i>	1	
<i>bisoprolol fumarate 5mg tab</i>	1	
<i>metoprolol succinate 100mg er tab</i>	1	
<i>metoprolol succinate 200mg er tab</i>	1	
<i>metoprolol succinate 25mg er tab</i>	1	
<i>metoprolol succinate 50mg er tab</i>	1	
<i>metoprolol tartrate 100mg tab</i>	1	
<i>metoprolol tartrate 25mg tab</i>	1	
<i>metoprolol tartrate 37.5mg tab</i>	1	
<i>metoprolol tartrate 50mg tab</i>	1	
<i>metoprolol tartrate 75mg tab</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	1	
<i>nadolol 40mg tab</i>	1	
<i>nadolol 80mg tab</i>	1	
<i>pindolol 10mg tab</i>	1	
<i>pindolol 5mg tab</i>	1	
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	1	
<i>propranolol 160mg er cap</i>	1	
<i>propranolol 20mg tab</i>	1	
<i>propranolol 40mg tab</i>	1	
<i>propranolol 4mg/ml oral soln</i>	1	
<i>propranolol 60mg er cap</i>	1	
<i>propranolol 60mg tab</i>	1	
<i>propranolol 80mg er cap</i>	1	
<i>propranolol 80mg tab</i>	1	
PROPRANOLOL 8MG/ML ORAL SOLN	1	
<i>sorine 120mg tab</i>	1	
<i>sorine 160mg tab</i>	1	
<i>sorine 80mg tab</i>	1	
<i>sotalol 120mg tab</i>	1	
<i>sotalol 160mg tab</i>	1	
<i>sotalol 240mg tab</i>	1	
<i>sotalol 80mg tab</i>	1	
<i>sotalol af 120mg tab</i>	1	
<i>sotalol af 160mg tab</i>	1	
<i>sotalol af 80mg tab</i>	1	
<i>timolol 10mg tab</i>	1	
<i>timolol 5mg tab</i>	1	
CALCIUM CHANNEL BLOCKERS		

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
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine 10mg tab</i>	1	
<i>amlodipine 2.5mg tab</i>	1	
<i>amlodipine 5mg tab</i>	1	
<i>cartia 120mg er cap</i>	1	
<i>cartia 180mg er cap</i>	1	
<i>cartia 240mg er cap</i>	1	
<i>cartia 300mg er cap</i>	1	
<i>dilt 120mg er cap</i>	1	
<i>dilt 180mg er cap</i>	1	
<i>dilt 240mg er cap</i>	1	
<i>diltiazem 120mg er (12hr) cap</i>	1	
<i>diltiazem 120mg er (24hr) cap</i>	1	
<i>diltiazem 120mg tab</i>	1	
<i>diltiazem 180mg er (24hr) cap</i>	1	
<i>diltiazem 240mg er (24hr) cap</i>	1	
<i>diltiazem 300mg er (24hr) cap</i>	1	
<i>diltiazem 30mg tab</i>	1	
<i>diltiazem 360mg er (24hr) cap</i>	1	
<i>diltiazem 420mg er (24hr) cap</i>	1	
<i>diltiazem 60mg er (12hr) cap</i>	1	
<i>diltiazem 60mg tab</i>	1	
<i>diltiazem 90mg er (12hr) cap</i>	1	
<i>diltiazem 90mg tab</i>	1	
<i>felodipine 10mg er tab</i>	1	
<i>felodipine 2.5mg er tab</i>	1	
<i>felodipine 5mg er tab</i>	1	
<i>isradipine 2.5mg cap</i>	1	
<i>isradipine 5mg cap</i>	1	
<i>nicardipine 20mg cap</i>	1	
<i>nicardipine 30mg cap</i>	1	
<i>nifedipine 30mg er tab</i>	1	
<i>nifedipine 30mg osmotic er tab</i>	1	
<i>nifedipine 60mg er tab</i>	1	
<i>nifedipine 60mg osmotic er tab</i>	1	
<i>nifedipine 90mg er tab</i>	1	
<i>nifedipine 90mg osmotic er tab</i>	1	
<i>nimodipine 30mg cap</i>	1	
<i>taztia 120mg er cap</i>	1	
<i>taztia 180mg er cap</i>	1	
<i>taztia 240mg er cap</i>	1	
<i>taztia 300mg er cap</i>	1	
<i>taztia 360mg er cap</i>	1	
<i>tiadylt 120mg er cap</i>	1	
<i>tiadylt 180mg er cap</i>	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
<i>tiadylt 240mg er cap</i>	1	
<i>tiadylt 300mg er cap</i>	1	
<i>tiadylt 360mg er cap</i>	1	
<i>tiadylt 420mg er cap</i>	1	
<i>verapamil 120mg er cap</i>	1	
<i>verapamil 120mg er tab</i>	1	
<i>verapamil 120mg tab</i>	1	
<i>verapamil 180mg er cap</i>	1	
<i>verapamil 180mg er tab</i>	1	
<i>verapamil 240mg er cap</i>	1	
<i>verapamil 240mg er tab</i>	1	
<i>verapamil 40mg tab</i>	1	
<i>verapamil 80mg tab</i>	1	
CARDIOTONICS		
CARDIAC GLYCOSIDES		
DIGOXIN 0.05MG/ML ORAL SOLN	1	
<i>digoxin 0.125mg tab</i>	1	
<i>digoxin 0.25mg tab</i>	1	
CARDIOVASCULAR AGENTS - MISC.		
CARDIAC MYOSIN INHIBITORS		
CAMZYOS 10MG CAP	1	NDS PA QL=30 EA/30 Days
CAMZYOS 15MG CAP	1	NDS PA QL=30 EA/30 Days
CAMZYOS 2.5MG CAP	1	NDS PA QL=30 EA/30 Days
CAMZYOS 5MG CAP	1	NDS PA QL=30 EA/30 Days
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
ENTRESTO 24-26MG TAB	1	QL=60 EA/30 Days
ENTRESTO 49-51MG TAB	1	QL=60 EA/30 Days
ENTRESTO 97-103MG TAB	1	QL=60 EA/30 Days
<i>hydralazine/isosorbide dinitrate 37.5-20mg tab</i>	1	
PROSTAGLANDIN VASODILATORS		
ORENITRAM 0.125MG ER TAB	1	PA
ORENITRAM 0.25MG ER TAB	1	NDS PA
ORENITRAM 1MG ER TAB	1	NDS PA
ORENITRAM 2.5MG ER TAB	1	NDS PA
ORENITRAM 5MG ER TAB	1	NDS PA
ORENITRAM ER TAB MONTH 1 TITRATION KIT PACK	1	NDS PA
ORENITRAM ER TAB MONTH 2 TITRATION KIT PACK	1	NDS PA
ORENITRAM ER TAB MONTH 3 TITRATION KIT PACK	1	NDS PA
TYVASO 16-32-48MCG TITRATION PACK	1	NDS PA QL=252 EA/28 Days
TYVASO 16MCG INH POWDER	1	NDS PA QL=112 EA/28 Days
TYVASO 32-48MCG MAINTENANCE PACK	1	NDS PA QL=224 EA/28 Days
TYVASO 32MCG INH POWDER	1	NDS PA 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
TYVASO 48MCG INH POWDER	1	NDS PA QL=112 EA/28 Days
TYVASO 64MCG INH POWDER	1	NDS PA QL=112 EA/28 Days
VENTAVIS 10MCG/ML INH SOLN	1	NDS PA QL=270 ML/30 Days
VENTAVIS 20MCG/ML INH SOLN	1	NDS PA QL=270 ML/30 Days
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<i>ambrisentan 10mg tab</i>	1	PA QL=30 EA/30 Days
<i>ambrisentan 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>bosentan 125mg tab</i>	1	PA QL=60 EA/30 Days
<i>bosentan 62.5mg tab</i>	1	PA QL=60 EA/30 Days
OPSUMIT 10MG TAB	1	NDS PA QL=30 EA/30 Days
TRACLEER 32MG TAB FOR ORAL SUSP	1	NDS PA QL=120 EA/30 Days
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
<i>alyq 20mg tab</i>	1	PA
<i>sildenafil 20mg tab</i>	1	PA
<i>tadalafil 20mg tab</i>	1	PA
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		
ADEMPAS 0.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	1	NDS PA QL=90 EA/30 Days
SINUS NODE INHIBITORS		
CORLANOR 5MG TAB	1	PA
CORLANOR 5MG/5ML ORAL SOLN	1	PA
CORLANOR 7.5MG TAB	1	PA
TRANSTHYRETIN STABILIZERS		
VYNDAMAX 61MG CAP	1	NDS PA QL=30 EA/30 Days
VYNDAQEL 20MG CAP	1	NDS PA QL=120 EA/30 Days
VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
VERQUVO 10MG TAB	1	PA QL=30 EA/30 Days
VERQUVO 2.5MG TAB	1	PA QL=30 EA/30 Days
VERQUVO 5MG TAB	1	PA QL=30 EA/30 Days
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
CEFADROXIL 1000MG TAB	1	
<i>cefadroxil 100mg/ml susp</i>	1	
<i>cefadroxil 500mg cap</i>	1	
<i>cefadroxil 50mg/ml susp</i>	1	
<i>cefazolin 1000mg inj</i>	1	
<i>cefazolin 200mg/ml inj</i>	1	
<i>cefazolin 500mg inj</i>	1	
<i>cephalexin 250mg cap</i>	1	
<i>cephalexin 25mg/ml susp</i>	1	
<i>cephalexin 500mg cap</i>	1	
<i>cephalexin 50mg/ml susp</i>	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
CEPHALOSPORINS - 2ND GENERATION		
CEFACLOR 250MG CAP	1	
CEFACLOR 500MG CAP	1	
<i>cefoxitin 1gm inj</i>	1	
<i>cefoxitin 200mg/ml inj</i>	1	
<i>cefoxitin 2gm inj</i>	1	
<i>cefprozil 250mg tab</i>	1	
<i>cefprozil 25mg/ml susp</i>	1	
<i>cefprozil 500mg tab</i>	1	
<i>cefprozil 50mg/ml susp</i>	1	
<i>cefuroxime 1500mg inj</i>	1	
<i>cefuroxime 250mg tab</i>	1	
<i>cefuroxime 500mg tab</i>	1	
<i>cefuroxime 750mg inj</i>	1	
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir 25mg/ml susp</i>	1	
<i>cefdinir 300mg cap</i>	1	
<i>cefdinir 50mg/ml susp</i>	1	
<i>cefixime 20mg/ml susp</i>	1	
<i>cefixime 400mg cap</i>	1	
<i>cefixime 40mg/ml susp</i>	1	
<i>cefpodoxime 100mg tab</i>	1	
<i>cefpodoxime 10mg/ml susp</i>	1	
<i>cefpodoxime 200mg tab</i>	1	
<i>cefpodoxime 20mg/ml susp</i>	1	
<i>ceftazidime 1gm inj</i>	1	
<i>ceftazidime 200mg/ml inj</i>	1	
<i>ceftazidime 2gm inj</i>	1	
<i>ceftriaxone 10gm inj</i>	1	
<i>ceftriaxone 1gm inj</i>	1	
<i>ceftriaxone 250mg inj</i>	1	
<i>ceftriaxone 2gm inj</i>	1	
<i>ceftriaxone 500mg inj</i>	1	
<i>tazicef 1gm inj</i>	1	
<i>tazicef 2gm inj</i>	1	
TAZICEF 6GM INJ	1	
CEPHALOSPORINS - 4TH GENERATION		
<i>cefepime 1000mg inj</i>	1	
<i>cefepime 2000mg inj</i>	1	
CEPHALOSPORINS - 5TH GENERATION		
TEFLARO 400MG INJ	1	NDS
TEFLARO 600MG INJ	1	NDS
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		
<i>altavera 28 day pack</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>alyacen 1/35 pack</i>	1	
<i>amethia 91 day pack</i>	1	
<i>apri 28 day pack</i>	1	
<i>aranelle 28 pack</i>	1	
<i>ashlyna 91 day pack</i>	1	
<i>aubra 28 day pack</i>	1	
<i>aviane 28 pack</i>	1	
<i>balziva 28 day pack</i>	1	
<i>blisovi 21 fe 1.5/30 28 day pack</i>	1	
<i>blisovi 24 fe 1/20 28 day pack</i>	1	
<i>briellyn 28 day pack</i>	1	
<i>cryselle 28 pack</i>	1	
<i>cyred 28 day pack</i>	1	
<i>desogestrel/ethinyl estradiol/ethinyl estradiol 0.15-0.01-0.02mg 28 day pack</i>	1	
<i>desogestrel/ethinyl estradiol/inert ingredients 0.15-0.03-1mg pack</i>	1	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg pack</i>	1	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg pack</i>	1	
<i>enpresse 28 day pack</i>	1	
<i>enskyce 28 day pack</i>	1	
<i>estarylla 28 day pack</i>	1	
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	1	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.035-1-1mg pack</i>	1	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.05-1-1mg pack</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.025-75-0.8mg pack</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.035-75-0.4mg pack</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg 21 day pack</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg 28 day pack</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 1-20/1-30/1-35mg-mcg pack</i>	1	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg 28 day pack</i>	1	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg 28 daypack</i>	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
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg 91 day pack</i>	1	
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg pack</i>	1	
<i>ethinyl estradiol/inert ingredients/norgestimate/norgestimate/norgestimate 0.025-1-0.18-0.215-0.25mg</i>	1	
<i>ethinyl estradiol/inert ingredients/norgestimate/norgestimate/norgestimate 0.035-1-0.18-0.215-0.25mg</i>	1	
<i>ethinyl estradiol/levonorgestrel 91 day pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg pack</i>	1	
<i>falmina 28 day pack</i>	1	
<i>finzala 24 fe chewable 28 day pack</i>	1	
<i>hailey 24 fe 28 day pack</i>	1	
<i>iclevia 91 day pack</i>	1	
<i>introvale 91 day pack</i>	1	
<i>isibloom 28 day pack</i>	1	
<i>jasmiel 28 day pack</i>	1	
<i>juleber 28 day pack</i>	1	
<i>junel 1.5/30 21 day pack</i>	1	
<i>junel 1/20 21 day pack</i>	1	
<i>junel fe 1.5/30 28 day pack</i>	1	
<i>junel fe 1/20 28 day pack</i>	1	
<i>junel fe 24 1/20 28 day pack</i>	1	
<i>kaitlib fe 28 day pack</i>	1	
<i>kariva 28 day pack</i>	1	
<i>kelnor 1/35 28 day pack</i>	1	
<i>kelnor 1/50 28 day pack</i>	1	
<i>kurvelo pack</i>	1	
<i>larin 1.5/30 pack</i>	1	
<i>larin 1/20 pack</i>	1	
<i>larin fe 1.5/30 pack</i>	1	
<i>larin fe 1/20 pack</i>	1	
<i>layolis fe 28 pack</i>	1	
<i>leena 28 day pack</i>	1	
<i>lessina 28 day pack</i>	1	
<i>levonest 28 day pack</i>	1	
<i>levonorgestrel-ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg pack</i>	1	
<i>levora 0.15/30 28 day pack</i>	1	
<i>loestrin fe 1/20 28 day pack</i>	1	
<i>loryna 28 day pack</i>	1	
<i>low-ogestrel 28 day pack</i>	1	
<i>lutera 28 day pack</i>	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
<i>marlissa 28 day pack</i>	1	
<i>mibelas 24 fe chewable 28 day pack</i>	1	
<i>microgestin 1.5/30 21 day pack</i>	1	
<i>microgestin 1/20 21 day pack</i>	1	
<i>microgestin 24 fe 28 day pack</i>	1	
<i>microgestin fe 1.5/30 28 day pack</i>	1	
<i>microgestin fe 1/20 28 day pack</i>	1	
<i>mili 28 day pack</i>	1	
<i>necon 0.5/35 28 day pack</i>	1	
<i>nikki 28 day pack</i>	1	
<i>nortrel 0.5/35 28 day pack</i>	1	
<i>nortrel 1/35 21 day pack</i>	1	
<i>nortrel 1/35 28 day pack</i>	1	
<i>nortrel 7/7/7 28 day pack</i>	1	
<i>nylia 1/35 28 day pack</i>	1	
<i>nylia 7/7/7 28 day pack</i>	1	
<i>nymyo 28 day pack</i>	1	
<i>ocella 28 day pack</i>	1	
<i>pimtrea tab pack</i>	1	
<i>portia 28 day pack</i>	1	
<i>reclipsen 28 day pack</i>	1	
<i>rivelsa 91 day pack</i>	1	
<i>setlakin 91 day pack</i>	1	
<i>sprintec 28 day pack</i>	1	
<i>sronyx 28 day pack</i>	1	
<i>syeda 28 day pack</i>	1	
<i>tarina 24 fe 1/20 28 day pack</i>	1	
<i>tarina fe 1/20 28 day pack</i>	1	
<i>tilia fe pack</i>	1	
<i>tri-estarylla 28 day pack</i>	1	
<i>tri-legest 28 day pack</i>	1	
<i>tri-lo- estarylla 28 day pack</i>	1	
<i>tri-lo-sprintec 28 day pack</i>	1	
<i>tri-mili 28 day pack</i>	1	
<i>tri-nymyo 28 day pack</i>	1	
<i>tri-sprintec 28 day pack</i>	1	
<i>tri-vylibra 28 day pack</i>	1	
<i>tri-vylibra lo 28 day pack</i>	1	
<i>trivora 28 day pack</i>	1	
<i>turqoz 28 day pack</i>	1	
TYBLUME 28 DAY PACK	1	
VELIVET 28 DAY PACK	1	
<i>vestura 3-0.02mg pack</i>	1	
<i>vienva 28 day pack</i>	1	
<i>vyfemla 28 day pack</i>	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
<i>vylibra 28 day pack</i>	1	
<i>wymzya fe 28 day pack</i>	1	
<i>zovia 1/35e 28 day pack</i>	1	
COMBINATION CONTRACEPTIVES - VAGINAL		
ANNOVERA 0.15-0.013MG/24HR VAGINAL SYSTEM	1	QL=1 EA/365 Days
<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	1	
<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	1	
<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	1	
<i>haloette 0.120-0.015mg/24hr vaginal system</i>	1	
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	1	
<i>medroxyprogesterone acetate 150mg/ml inj</i>	1	
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	1	
PROGESTIN CONTRACEPTIVES - ORAL		
<i>camila 28 day 0.35mg pack</i>	1	
<i>deblitane 0.35mg tab 28 day pack</i>	1	
<i>errin 28 day 0.35mg pack</i>	1	
<i>heather 0.35mg 28-day pack</i>	1	
<i>incassia 0.35mg 28 day pack</i>	1	
<i>lyleq 28 day 0.35mg pack</i>	1	
<i>lyza 0.35mg pack</i>	1	
<i>nora-be 28 day 0.35mg pack</i>	1	
<i>norethindrone 0.35mg pack</i>	1	
<i>sharobel 0.35mg 28 day pack</i>	1	
SLYND 4MG TAB PACK	1	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>budesonide 3mg dr cap</i>	1	
<i>budesonide 9mg er tab</i>	1	PA QL=30 EA/30 Days
DEXAMETHASONE 0.1MG/ML ORAL SOLN	1	
<i>dexamethasone 0.5mg tab</i>	1	
<i>dexamethasone 0.75mg tab</i>	1	
<i>dexamethasone 1.5mg tab</i>	1	
<i>dexamethasone 1mg tab</i>	1	
<i>dexamethasone 2mg tab</i>	1	
<i>dexamethasone 4mg tab</i>	1	
<i>dexamethasone 6mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	1	
<i>hydrocortisone 20mg tab</i>	1	
<i>hydrocortisone 5mg tab</i>	1	
<i>methylprednisolone 16mg tab</i>	1	PA BvD
<i>methylprednisolone 32mg tab</i>	1	PA BvD
<i>methylprednisolone 4mg pack</i>	1	
<i>methylprednisolone 4mg tab</i>	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
<i>methylprednisolone 8mg tab</i>	1	PA BvD
<i>prednisolone 1mg/ml oral soln</i>	1	PA BvD
<i>prednisolone 3mg/ml oral soln</i>	1	PA BvD
<i>prednisone 10mg tab</i>	1	PA BvD
<i>prednisone 1mg tab</i>	1	PA BvD
PREDNISON 1MG/ML ORAL SOLN	1	PA BvD
<i>prednisone 2.5mg tab</i>	1	PA BvD
<i>prednisone 20mg tab</i>	1	PA BvD
<i>prednisone 50mg tab</i>	1	PA BvD
<i>prednisone 5mg tab</i>	1	PA BvD
MINERALOCORTICOIDS		
<i>fludrocortisone acetate 0.1mg tab</i>	1	
COUGH/COLD/ALLERGY		
MUCOLYTICS		
<i>acetylcysteine 100mg/ml inh soln</i>	1	PA BvD
<i>acetylcysteine 200mg/ml inh soln</i>	1	PA BvD
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>acutane 10mg cap</i>	1	
<i>acutane 20mg cap</i>	1	
<i>acutane 40mg cap</i>	1	
<i>adapalene 0.3% gel</i>	1	PA QL=45 GM/30 Days
<i>amneesteem 10mg cap</i>	1	
<i>amneesteem 20mg cap</i>	1	
<i>amneesteem 40mg cap</i>	1	
<i>claravis 10mg cap</i>	1	
<i>claravis 20mg cap</i>	1	
<i>claravis 30mg cap</i>	1	
<i>claravis 40mg cap</i>	1	
<i>clindamycin 1% gel</i>	1	QL=75 GM/30 Days
<i>clindamycin 1% lotion</i>	1	QL=60 ML/30 Days
<i>clindamycin 1% topical soln</i>	1	QL=60 ML/30 Days
<i>clindamycin/benzoyl peroxide 1-5% gel</i>	1	QL=100 GM/30 Days
<i>erythromycin 2% gel</i>	1	QL=60 GM/30 Days
<i>erythromycin 2% topical soln</i>	1	QL=60 ML/30 Days
<i>erythromycin/benzoyl peroxide 5-3% gel</i>	1	QL=46.60 GM/30 Days
<i>isotretinoin 10mg cap</i>	1	
<i>isotretinoin 20mg cap</i>	1	
<i>isotretinoin 30mg cap</i>	1	
<i>isotretinoin 40mg cap</i>	1	
<i>sulfacetamide sodium 10% lotion</i>	1	QL=118 ML/30 Days
<i>tretinoin 0.01% gel</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.025% cream</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.025% gel</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.05% cream</i>	1	PA QL=45 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
<i>tretinoin 0.1% cream</i>	1	PA QL=45 GM/30 Days
<i>zenatane 10mg cap</i>	1	
<i>zenatane 20mg cap</i>	1	
<i>zenatane 30mg cap</i>	1	
<i>zenatane 40mg cap</i>	1	
ANTIBIOTICS - TOPICAL		
<i>gentamicin 0.1% cream</i>	1	QL=30 GM/30 Days
<i>gentamicin 0.1% ointment</i>	1	QL=120 GM/30 Days
<i>mupirocin 2% ointment</i>	1	QL=220 GM/30 Days
ANTIFUNGALS - TOPICAL		
<i>ciclopirox 0.77% cream</i>	1	QL=90 GM/30 Days
<i>ciclopirox 0.77% gel</i>	1	QL=100 GM/30 Days
<i>ciclopirox 1% shampoo</i>	1	QL=120 ML/30 Days
<i>ciclopirox 8% topical soln</i>	1	QL=13.20 ML/30 Days
<i>clotrimazole 1% cream</i>	1	QL=45 GM/30 Days
<i>clotrimazole/betamethasone 1-0.05% cream</i>	1	QL=90 GM/30 Days
<i>clotrimazole/betamethasone 1-0.05% lotion</i>	1	QL=60 ML/30 Days
<i>econazole nitrate 1% cream</i>	1	QL=85 GM/30 Days
<i>ketoconazole 2% cream</i>	1	QL=120 GM/30 Days
<i>ketoconazole 2% shampoo</i>	1	QL=240 ML/30 Days
<i>nyamyc 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
<i>nystatin 100000 unit/gm ointment</i>	1	QL=30 GM/30 Days
<i>nystatin 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
<i>nystatin 100000unit/ml cream</i>	1	QL=30 GM/30 Days
<i>% ointment</i>	1	QL=60 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	1	QL=60 GM/30 Days
<i>nystop 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
ANTI-INFLAMMATORY AGENTS - TOPICAL		
<i>diclofenac sodium 1% gel</i>	1	QL=1000 GM/30 Days
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene 1% gel</i>	1	PA NSO QL=60 GM/30 Days
<i>diclofenac sodium 3% gel</i>	1	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	1	QL=10 ML/30 Days
<i>fluorouracil 5% cream</i>	1	QL=40 GM/30 Days
<i>fluorouracil 5% topical solution</i>	1	QL=10 ML/30 Days
PANRETIN 0.1% GEL	1	NDS PA NSO
VALCHLOR 0.016% GEL	1	NDS PA NSO QL=240 GM/30 Days
ANTIPSORIATICS		
<i>acitretin 10mg cap</i>	1	
<i>acitretin 17.5mg cap</i>	1	
<i>acitretin 25mg cap</i>	1	
<i>calcipotriene 0.005% cream</i>	1	PA QL=120 GM/30 Days
<i>calcipotriene 0.005% ointment</i>	1	PA QL=120 GM/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>calcipotriene 0.005% topical soln</i>	1	PA QL=120 ML/30 Days
METHOXSALEN 10MG CAP	1	
SKYRIZI 150MG/ML AUTO-INJECTOR	1	PA QL=7 ML/365 Days
SKYRIZI 150MG/ML SYRINGE	1	PA QL=7 ML/365 Days
STELARA 45MG/0.5ML INJ	1	PA QL=.50 ML/28 Days
STELARA 45MG/0.5ML SYRINGE	1	PA QL=.50 ML/28 Days
STELARA 90MG/ML SYRINGE	1	PA QL=1 ML/28 Days
TALTZ 80MG/ML AUTO-INJECTOR	1	NDS PA QL=3 ML/28 Days
TALTZ 80MG/ML SYRINGE	1	NDS PA QL=3 ML/28 Days
<i>tazarotene 0.1% cream</i>	1	PA QL=60 GM/30 Days
TREMFYA 100MG/ML AUTO-INJECTOR	1	NDS PA QL=2 ML/28 Days
TREMFYA 100MG/ML SYRINGE	1	NDS PA QL=2 ML/28 Days
ZORYVE 0.3% CREAM	1	PA QL=60 GM/30 Days
ANTISEBORRHEIC PRODUCTS		
<i>selenium sulfide 2.5% shampoo</i>	1	
ANTIVIRALS - TOPICAL		
<i>acyclovir 5% ointment</i>	1	QL=30 GM/30 Days
<i>penciclovir 1% cream</i>	1	QL=5 GM/7 Days
BURN PRODUCTS		
<i>silver sulfadiazine 1% cream</i>	1	
<i>ssd 1% cream</i>	1	
SULFAMYLON 85MG/GM CREAM	1	QL=453.60 GM/30 Days
CORTICOSTEROIDS - TOPICAL		
<i>ala-cort 1% cream</i>	1	QL=240 GM/30 Days
<i>ala-cort 2.5% cream</i>	1	QL=454 GM/30 Days
<i>alclometasone dipropionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>alclometasone dipropionate 0.05% ointment</i>	1	QL=120 GM/30 Days
<i>betamethasone 0.05% aug cream</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% aug lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% aug ointment</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% cream</i>	1	QL=90 GM/30 Days
<i>betamethasone 0.05% lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% ointment</i>	1	QL=90 GM/30 Days
<i>betamethasone 0.1% cream</i>	1	QL=180 GM/30 Days
<i>betamethasone 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>clobetasol propionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% e cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% foam</i>	1	QL=100 GM/30 Days
<i>clobetasol propionate 0.05% gel</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% lotion</i>	1	QL=118 ML/30 Days
<i>clobetasol propionate 0.05% ointment</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% shampoo</i>	1	QL=236 ML/30 Days
<i>clobetasol propionate 0.05% topical soln</i>	1	QL=100 ML/30 Days
<i>clobetasol propionate 0.05% topical spray</i>	1	QL=125 ML/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>clodan 0.05% shampoo</i>	1	QL=236 ML/30 Days
<i>desonide 0.05% ointment</i>	1	QL=120 GM/30 Days
<i>desoximetasone 0.25% cream</i>	1	QL=120 GM/30 Days
<i>desoximetasone 0.25% ointment</i>	1	QL=120 GM/30 Days
FLUOCINOLONE ACETONIDE 0.01% CREAM	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% oil</i>	1	QL=120 ML/30 Days
<i>fluocinolone acetonide 0.01% topical soln</i>	1	QL=90 ML/30 Days
<i>fluocinolone acetonide 0.025% cream</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.025% ointment</i>	1	QL=120 GM/30 Days
<i>fluocinonide 0.05% cream</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% e cream</i>	1	QL=120 GM/30 Days
<i>fluocinonide 0.05% gel</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% ointment</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical soln</i>	1	QL=60 ML/30 Days
<i>fluocinonide 0.1% cream</i>	1	QL=60 GM/30 Days
<i>fluticasone propionate 0.005% ointment</i>	1	QL=240 GM/30 Days
<i>fluticasone propionate 0.05% cream</i>	1	QL=240 GM/30 Days
<i>halobetasol propionate 0.05% cream</i>	1	QL=50 GM/30 Days
<i>halobetasol propionate 0.05% ointment</i>	1	QL=50 GM/30 Days
<i>hydrocortisone 1% cream</i>	1	QL=240 GM/30 Days
<i>hydrocortisone 2.5% lotion</i>	1	QL=118 ML/30 Days
<i>hydrocortisone 2.5% ointment</i>	1	QL=240 GM/30 Days
<i>mometasone furoate 0.1% cream</i>	1	QL=180 GM/30 Days
<i>mometasone furoate 0.1% lotion</i>	1	QL=180 ML/30 Days
<i>mometasone furoate 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>triamcinolone acetonide 0.025% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.025% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.025% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.1% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% ointment</i>	1	QL=120 GM/30 Days
<i>triderm 0.1% cream</i>	1	QL=454 GM/30 Days
<i>triderm 0.5% cream</i>	1	QL=454 GM/30 Days
ECZEMA AGENTS		
ADBRY 150MG/ML SYRINGE	1	NDS PA QL=6 ML/28 Days
CIBINQO 100MG TAB	1	NDS PA QL=30 EA/30 Days
CIBINQO 200MG TAB	1	NDS PA QL=30 EA/30 Days
CIBINQO 50MG TAB	1	NDS PA QL=30 EA/30 Days
DUPIXENT 100MG/0.67ML SYRINGE	1	NDS PA QL=1.34 ML/28 Days
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	1	NDS PA QL=4.56 ML/28 Days
DUPIXENT 200MG/1.14ML SYRINGE	1	NDS PA QL=4.56 ML/28 Days
DUPIXENT 300MG/2ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
DUPIXENT 300MG/2ML SYRINGE	1	NDS PA QL=8 ML/28 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
EMOLLIENTS		
<i>ammonium lactate 12% cream</i>	1	
<i>ammonium lactate 12% lotion</i>	1	
ENZYMES - TOPICAL		
SANTYL 250UNIT/GM OINTMENT	1	QL=90 GM/30 Days
HAIR GROWTH AGENTS		
LITFULO 50MG CAP	1	NDS PA QL=28 EA/28 Days
IMMUNOMODULATING AGENTS - TOPICAL		
<i>imiquimod 5% cream</i>	1	QL=24 EA/30 Days
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus 1% cream</i>	1	QL=100 GM/30 Days
<i>tacrolimus 0.03% ointment</i>	1	QL=100 GM/30 Days
<i>tacrolimus 0.1% ointment</i>	1	QL=100 GM/30 Days
KERATOLYTIC/ANTIMITOTIC AGENTS		
PODOFILOX 0.5% TOPICAL SOLN	1	QL=7 ML/30 Days
LOCAL ANESTHETICS - TOPICAL		
<i>lidocaine 4% topical soln</i>	1	QL=50 ML/30 Days
<i>lidocaine 5% ointment</i>	1	PA QL=107 GM/30 Days
<i>lidocaine 5% patch</i>	1	PA QL=90 EA/30 Days
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	1	QL=30 GM/30 Days
<i>lidocan 5% patch</i>	1	PA QL=90 EA/30 Days
ROSACEA AGENTS		
<i>azelaic acid 15% gel</i>	1	QL=50 GM/30 Days
<i>metronidazole 0.75% cream</i>	1	QL=45 GM/30 Days
<i>metronidazole 0.75% gel</i>	1	QL=45 GM/30 Days
<i>metronidazole 1% gel</i>	1	QL=60 GM/30 Days
SCABICIDES & PEDICULICIDES		
<i>malathion 0.5% lotion</i>	1	
<i>permethrin 5% cream</i>	1	
WOUND CARE PRODUCTS		
REGRANEX 0.01% GEL	1	PA QL=30 GM/15 Days
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON 120000-24000-76000UNIT DR CAP	1	
CREON 15000-3000-9500UNIT DR CAP	1	
CREON 180000-36000-114000UNIT DR CAP	1	
CREON 30000-6000-19000UNIT DR CAP	1	
CREON 60000-12000-38000UNIT DR CAP	1	
SUCRAID 8500UNIT/ML ORAL SOLN	1	NDS PA
ZENPEP 105000-25000-79000UNIT DR CAP	1	ST
ZENPEP 14000-3000-10000UNIT DR CAP	1	ST
ZENPEP 24000-5000-17000UNIT DR CAP	1	ST
ZENPEP 252600-60000-189600UNIT DR CAP	1	ST
ZENPEP 40000-126000-168000UNIT DR CAP	1	ST
ZENPEP 42000-10000-32000UNIT DR CAP	1	ST

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
ZENPEP 63000-15000-47000UNIT DR CAP	1	ST
ZENPEP 84000-20000-63000UNIT DR CAP	1	ST
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide 125mg tab</i>	1	
<i>acetazolamide 250mg tab</i>	1	
<i>acetazolamide 500mg er cap</i>	1	
<i>methazolamide 25mg tab</i>	1	
<i>methazolamide 50mg tab</i>	1	
DIURETIC COMBINATIONS		
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	1	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	1	
LOOP DIURETICS		
<i>bumetanide 0.5mg tab</i>	1	
<i>bumetanide 1mg tab</i>	1	
<i>bumetanide 2mg tab</i>	1	
FUROSCIX 80MG/10ML CARTRIDGE	1	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	1	
<i>furosemide 10mg/ml oral soln</i>	1	
<i>furosemide 20mg tab</i>	1	
<i>furosemide 40mg tab</i>	1	
<i>furosemide 80mg tab</i>	1	
FUROSEMIDE 8MG/ML ORAL SOLN	1	
<i>torseamide 100mg tab</i>	1	
<i>torseamide 10mg tab</i>	1	
<i>torseamide 20mg tab</i>	1	
<i>torseamide 5mg tab</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone 25mg tab</i>	1	
<i>chlorthalidone 50mg tab</i>	1	
<i>hydrochlorothiazide 12.5mg cap</i>	1	
<i>hydrochlorothiazide 12.5mg tab</i>	1	
<i>hydrochlorothiazide 25mg tab</i>	1	
<i>hydrochlorothiazide 50mg tab</i>	1	
<i>indapamide 1.25mg tab</i>	1	
<i>indapamide 2.5mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
metolazone 10mg tab	1	
metolazone 2.5mg tab	1	
metolazone 5mg tab	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
alendronate sodium 10mg tab	1	
alendronate sodium 35mg tab	1	
alendronate sodium 70mg tab	1	
alendronate sodium 70mg/75ml oral soln	1	
ibandronate 150mg tab	1	QL=1 EA/30 Days
PROLIA 60MG/ML SYRINGE	1	ST QL=1 ML/168 Days
risedronate sodium 150mg tab	1	
risedronate sodium 30mg tab	1	
risedronate sodium 35mg tab	1	
risedronate sodium 35mg tab (12) pack	1	
risedronate sodium 35mg tab (4) pack	1	
risedronate sodium 5mg tab	1	
salmon calcitonin 200unit/act nasal spray	1	
TERIPARATIDE 0.02MG/ACT PEN INJ	1	NDS QL=2.48 ML/28 Days
TYMLOS 3120MCG/1.56ML PEN INJ	1	NDS PA QL=1.56 ML/30 Days
XGEVA 120MG/1.7ML INJ	1	NDS PA QL=1.70 ML/28 Days
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT 10MG INJ	1	NDS PA
SOMAVERT 15MG INJ	1	NDS PA
SOMAVERT 20MG INJ	1	NDS PA
SOMAVERT 25MG INJ	1	NDS PA
SOMAVERT 30MG INJ	1	NDS PA
GROWTH HORMONES		
NORDITROPIN 10MG/1.5ML PEN INJ	1	NDS PA
NORDITROPIN 15MG/1.5ML PEN INJ	1	NDS PA
NORDITROPIN 30MG/3ML PEN INJ	1	NDS PA
NORDITROPIN 5MG/1.5ML PEN INJ	1	NDS PA
OMNITROPE 10MG/1.5ML CARTRIDGE	1	NDS PA
OMNITROPE 5.8MG INJ	1	NDS PA
OMNITROPE 5MG/1.5ML CARTRIDGE	1	NDS PA
SKYTROFA 11MG CARTRIDGE	1	NDS PA
SKYTROFA 13.3MG CARTRIDGE	1	NDS PA
SKYTROFA 3.6MG CARTRIDGE	1	NDS PA
SKYTROFA 3MG CARTRIDGE	1	NDS PA
SKYTROFA 4.3MG CARTRIDGE	1	NDS PA
SKYTROFA 5.2MG CARTRIDGE	1	NDS PA
SKYTROFA 6.3MG CARTRIDGE	1	NDS PA
SKYTROFA 7.6MG CARTRIDGE	1	NDS PA
SKYTROFA 9.1MG CARTRIDGE	1	NDS PA
SOGROYA 10MG/1.5ML PEN INJ	1	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
SOGROYA 15MG/1.5ML PEN INJ	1	NDS PA
SOGROYA 5MG/1.5ML PEN INJ	1	NDS PA
HORMONE RECEPTOR MODULATORS		
OSPHENA 60MG TAB	1	PA
<i>raloxifene 60mg tab</i>	1	QL=30 EA/30 Days
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX 40MG/4ML INJ	1	NDS PA
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
SYNAREL 2MG/ML NASAL INHALER	1	NDS PA
METABOLIC MODIFIERS		
<i>calcitriol 0.25mcg cap</i>	1	PA BvD
<i>calcitriol 0.5mcg cap</i>	1	PA BvD
<i>calcitriol 1mcg/ml oral soln</i>	1	PA BvD
<i>carglumic acid 200mg tab for oral susp</i>	1	PA
<i>cinacalcet 30mg tab</i>	1	PA BvD
<i>cinacalcet 60mg tab</i>	1	PA BvD
<i>cinacalcet 90mg tab</i>	1	PA BvD
GALAFOLD 123MG 28 DAY PACK	1	NDS PA QL=15 EA/30 Days
<i>javygtor 100mg powder for oral soln</i>	1	PA
<i>javygtor 100mg tab</i>	1	PA
<i>javygtor 500mg powder for oral soln</i>	1	PA
<i>levocarnitine 100mg/ml oral soln</i>	1	PA BvD
<i>levocarnitine 330mg tab</i>	1	PA BvD
<i>nitisinone 10mg cap</i>	1	NDS PA
<i>nitisinone 20mg cap</i>	1	NDS PA
<i>nitisinone 2mg cap</i>	1	NDS PA
<i>nitisinone 5mg cap</i>	1	NDS PA
ORFADIN 4MG/ML SUSP	1	NDS PA
PALYNZIQ 10MG/0.5ML SYRINGE	1	NDS PA
PALYNZIQ 2.5MG/0.5ML SYRINGE	1	NDS PA
PALYNZIQ 20MG/ML SYRINGE	1	NDS PA
<i>paricalcitol 1mcg cap</i>	1	PA BvD
<i>paricalcitol 2mcg cap</i>	1	PA BvD
<i>paricalcitol 4mcg cap</i>	1	PA BvD
PHEBURANE 483MG/GM ORAL PELLETT	1	NDS
<i>sapropterin 100mg powder for oral soln</i>	1	PA
<i>sapropterin 100mg tab</i>	1	PA
<i>sapropterin 500mg powder for oral soln</i>	1	PA
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA 10MG TAB	1	PA QL=30 EA/30 Days
KERENDIA 20MG TAB	1	PA QL=30 EA/30 Days
POSTERIOR PITUITARY HORMONES		
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	1	
<i>desmopressin acetate 0.1mg tab</i>	1	
<i>desmopressin acetate 0.2mg tab</i>	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
PROLACTIN INHIBITORS		
<i>cabergoline 0.5mg tab</i>	1	
SOMATOSTATIC AGENTS		
<i>octreotide 0.05mg/ml inj</i>	1	PA
<i>octreotide 0.1mg/ml inj</i>	1	PA
<i>octreotide 0.2mg/ml inj</i>	1	PA
<i>octreotide 0.5mg/ml inj</i>	1	PA
<i>octreotide 1mg/ml inj</i>	1	PA
SIGNIFOR 0.3MG/ML INJ	1	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.6MG/ML INJ	1	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.9MG/ML INJ	1	NDS PA QL=60 ML/30 Days
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>amabelz 0.5/0.1mg 28 day pack</i>	1	
<i>estradiol/norethindrone acetate 0.5-0.1mg pack</i>	1	
<i>estradiol/norethindrone acetate 1-0.5mg pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg pack</i>	1	
<i>fyavolv 0.0025-0.5mg tab</i>	1	
<i>fyavolv 0.005-1mg tab</i>	1	
<i>jinteli 0.005-1mg tab</i>	1	
<i>mimvey pack</i>	1	
PREMPHASE 28 DAY PACK	1	
PREMPRO 0.3/1.5MG 28 DAY PACK	1	
PREMPRO 0.45/1.5MG 28 DAY PACK	1	
PREMPRO 0.625/2.5MG 28 DAY PACK	1	
PREMPRO 0.625/5MG 28 DAY PACK	1	
ESTROGENS		
<i>dotti 0.025mg/24hr patch</i>	1	
<i>dotti 0.0375mg/24hr patch</i>	1	
<i>dotti 0.05mg/24hr patch</i>	1	
<i>dotti 0.075mg/24hr patch</i>	1	
<i>dotti 0.1mg/24hr patch</i>	1	
<i>estradiol 0.00104mg/hr twice weekly patch</i>	1	
<i>estradiol 0.00104mg/hr weekly patch</i>	1	
<i>estradiol 0.00156mg/hr twice weekly patch</i>	1	
<i>estradiol 0.00156mg/hr weekly patch</i>	1	
<i>estradiol 0.00208mg/hr twice weekly patch</i>	1	
<i>estradiol 0.00208mg/hr weekly patch</i>	1	
<i>estradiol 0.0025mg/hr weekly patch</i>	1	
<i>estradiol 0.00312mg/hr weekly patch</i>	1	
<i>estradiol 0.00313mg/hr twice weekly patch</i>	1	
<i>estradiol 0.00417mg/hr twice weekly patch</i>	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
<i>estradiol 0.00417mg/hr weekly patch</i>	1	
<i>estradiol 0.5mg tab</i>	1	
<i>estradiol 1mg tab</i>	1	
<i>estradiol 2mg tab</i>	1	
<i>estradiol valerate 10mg/ml inj</i>	1	
<i>estradiol valerate 20mg/ml inj</i>	1	
<i>estradiol valerate 40mg/ml inj</i>	1	
<i>lyllana 0.025mg/24hr patch</i>	1	
<i>lyllana 0.0375mg/24hr patch</i>	1	
<i>lyllana 0.05mg/24hr patch</i>	1	
<i>lyllana 0.075mg/24hr patch</i>	1	
<i>lyllana 0.1mg/24hr patch</i>	1	
PREMARIN 0.3MG TAB	1	
PREMARIN 0.45MG TAB	1	
PREMARIN 0.625MG TAB	1	
PREMARIN 0.9MG TAB	1	
PREMARIN 1.25MG TAB	1	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
BAXDELA 450MG TAB	1	PA QL=60 EA/30 Days
<i>ciprofloxacin 250mg tab</i>	1	
<i>ciprofloxacin 2mg/ml inj</i>	1	
<i>ciprofloxacin 500mg tab</i>	1	
<i>ciprofloxacin 750mg tab</i>	1	
<i>levofloxacin 250mg tab</i>	1	
<i>levofloxacin 500mg tab</i>	1	
<i>levofloxacin 500mg/100ml inj</i>	1	
<i>levofloxacin 750mg tab</i>	1	
<i>levofloxacin 750mg/150ml inj</i>	1	
<i>levofloxacin oral soln 25mg/ml</i>	1	
MOXIFLOXACIN 1.6MG/ML INJ	1	
<i>moxifloxacin 400mg tab</i>	1	
<i>ofloxacin 400mg tab</i>	1	
GASTROINTESTINAL AGENTS - MISC.		
AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)		
TRULANCE 3MG TAB	1	
FARNESOID X RECEPTOR (FXR) AGONISTS		
OCALIVA 10MG TAB	1	NDS PA QL=30 EA/30 Days
OCALIVA 5MG TAB	1	NDS PA QL=30 EA/30 Days
GALLSTONE SOLUBILIZING AGENTS		
RELTONE 200MG CAP	1	PA
RELTONE 400MG CAP	1	PA
<i>ursodiol 250mg tab</i>	1	
<i>ursodiol 300mg cap</i>	1	
<i>ursodiol 500mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium 20mg/ml oral soln</i>	1	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone 24mcg cap</i>	1	QL=60 EA/30 Days
<i>lubiprostone 8mcg cap</i>	1	QL=60 EA/30 Days
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide 10mg tab</i>	1	
<i>metoclopramide 1mg/ml oral soln</i>	1	
<i>metoclopramide 5mg tab</i>	1	
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium 750mg cap</i>	1	
CIMZIA 200MG INJ	1	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE	1	NDS PA QL=2 EA/28 Days
<i>mesalamine 1000mg rectal supp</i>	1	
<i>mesalamine 375mg er cap</i>	1	
<i>mesalamine 66.7mg/ml enema</i>	1	
SKYRIZI 180MG/1.2ML CARTRIDGE	1	PA QL=1.20 ML/56 Days
SKYRIZI 360MG/2.4ML CARTRIDGE	1	PA QL=2.40 ML/56 Days
<i>sulfasalazine 500mg dr tab</i>	1	
<i>sulfasalazine 500mg tab</i>	1	
INTESTINAL ACIDIFIERS		
<i>enulose 10gm/15ml oral soln</i>	1	
<i>generlac 10gm/15ml oral soln</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>alosetron 0.5mg tab</i>	1	
<i>alosetron 1mg tab</i>	1	
LINZESS 145MCG CAP	1	PA QL=30 EA/30 Days
LINZESS 290MCG CAP	1	PA QL=30 EA/30 Days
LINZESS 72MCG CAP	1	PA QL=30 EA/30 Days
LIVE FECAL MICROBIOTA		
VOWST 30000000UNIT CAP	1	PA QL=12 EA/365 Days
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK 12.5MG TAB	1	PA
MOVANTIK 25MG TAB	1	PA
RELISTOR 12MG/0.6ML INJ	1	PA
RELISTOR 12MG/0.6ML SYRINGE	1	PA
RELISTOR 8MG/0.4ML SYRINGE	1	PA
SYMPROIC 0.2MG TAB	1	PA
PHOSPHATE BINDER AGENTS		
<i>calcium acetate 667mg cap</i>	1	
FOSRENOL 1000MG ORAL POWDER	1	
FOSRENOL 750MG ORAL POWDER	1	
<i>lanthanum carbonate 1000mg chew tab</i>	1	
<i>lanthanum carbonate 500mg chew tab</i>	1	
<i>lanthanum carbonate 750mg chew tab</i>	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
<i>sevelamer carbonate 2400mg powder for oral susp</i>	1	
<i>sevelamer carbonate 800mg powder for oral susp</i>	1	
<i>sevelamer carbonate 800mg tab</i>	1	
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX 5MG INJ	1	NDS PA
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO 250MG	1	NDS PA QL=84 EA/28 Days
GENITOURINARY AGENTS - MISCELLANEOUS		
ALKALINIZERS		
<i>potassium citrate 10meq er tab</i>	1	
<i>potassium citrate 15meq er tab</i>	1	
<i>potassium citrate 5meq er tab</i>	1	
CYSTINOSIS AGENTS		
CYSTAGON 150MG CAP	1	
CYSTAGON 50MG CAP	1	
GENITOURINARY IRRIGANTS		
<i>sodium chloride 0.9% irrigation soln</i>	1	
IGA NEPHROPATHY (IGAN) AGENTS		
FILSPARI 200MG TAB	1	NDS PA QL=30 EA/30 Days
FILSPARI 400MG TAB	1	NDS PA QL=30 EA/30 Days
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON 100MG CAP	1	
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	
<i>dutasteride 0.5mg cap</i>	1	
<i>finasteride 5mg tab</i>	1	
<i>tamsulosin 0.4mg cap</i>	1	
URINARY STONE AGENTS		
LITHOSTAT 250MG TAB	1	
<i>tiopronin 100mg tab</i>	1	
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine/probenecid 0.5-500mg tab</i>	1	
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	1	
<i>allopurinol 300mg tab</i>	1	
<i>colchicine 0.6mg tab</i>	1	
<i>febuxostat 40mg tab</i>	1	ST
<i>febuxostat 80mg tab</i>	1	ST
URICOSURICS		
<i>probenecid 500mg tab</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
BRADYKININ B2 RECEPTOR ANTAGONISTS		
<i>icatibant 10mg/ml syringe</i>	1	PA
<i>sajazir 30mg/3ml syringe</i>	1	PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
COMPLEMENT INHIBITORS		
BERINERT 500UNIT INJ	1	NDS PA
CINRYZE 500UNIT INJ	1	NDS PA
HAEGARDA 2000UNIT INJ	1	NDS PA
HAEGARDA 3000UNIT INJ	1	NDS PA
RUCONEST 2100UNIT INJ	1	NDS PA
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline 400mg er tab</i>	1	
PLASMA KALLIKREIN INHIBITORS		
ORLADEYO 110MG CAP	1	NDS PA QL=30 EA/30 Days
ORLADEYO 150MG CAP	1	NDS PA QL=30 EA/30 Days
TAKHZYRO 300MG/2ML INJ	1	NDS PA QL=4 ML/28 Days
TAKHZYRO 300MG/2ML SYRINGE	1	NDS PA QL=4 ML/28 Days
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide 0.5mg cap</i>	1	
<i>anagrelide 1mg cap</i>	1	
<i>aspirin/dipyridamole 25-200mg er cap</i>	1	
BRILINTA 60MG TAB	1	
BRILINTA 90MG TAB	1	
CABLIVI 11MG INJ	1	NDS PA QL=30 EA/30 Days
<i>cilostazol 100mg tab</i>	1	
<i>cilostazol 50mg tab</i>	1	
<i>clopidogrel 75mg tab</i>	1	
<i>prasugrel 10mg tab</i>	1	
<i>prasugrel 5mg tab</i>	1	
PYRUVATE KINASE ACTIVATORS		
PYRUKYND 20MG TAB (4-WEEK PACK)	1	NDS PA QL=56 EA/28 Days
PYRUKYND 20MG/50MG TAB TAPER PACK	1	NDS PA QL=14 EA/14 Days
PYRUKYND 50MG TAB (4-WEEK PACK)	1	NDS PA QL=56 EA/28 Days
PYRUKYND 5MG TAB (4-WEEK PACK)	1	NDS PA QL=56 EA/28 Days
PYRUKYND 5MG TAB TAPER PACK	1	NDS PA QL=7 EA/7 Days
PYRUKYND 5MG/20MG TAB TAPER PACK	1	NDS PA QL=14 EA/14 Days
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA 84MG CAP	1	NDS PA QL=60 EA/30 Days
<i>miglustat 100mg cap</i>	1	PA
AGENTS FOR SICKLE CELL DISEASE		
DROXIA 200MG CAP	1	
DROXIA 300MG CAP	1	
DROXIA 400MG CAP	1	
ENDARI 5GM POWDER FOR ORAL SOLN	1	NDS PA QL=180 EA/30 Days
OXBRYTA 300MG TAB	1	NDS PA QL=90 EA/30 Days
OXBRYTA 300MG TAB FOR ORAL SUSP	1	NDS PA QL=150 EA/30 Days
OXBRYTA 500MG TAB	1	NDS PA QL=150 EA/30 Days
HEMATOPOIETIC GROWTH FACTORS		

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
DOPTELET 20MG TAB	1	NDS PA QL=60 EA/30 Days
DOPTELET TAB 40MG DAILY DOSE PACK	1	NDS PA QL=10 EA/5 Days
DOPTELET TAB 60MG DAILY DOSE PACK	1	NDS PA QL=15 EA/5 Days
NIVESTYM 300MCG/0.5ML SYRINGE	1	NDS
NIVESTYM 300MCG/ML INJ	1	NDS
NIVESTYM 480MCG/0.8ML SYRINGE	1	NDS
NIVESTYM 480MCG/1.6ML INJ	1	NDS
NYVEPRIA 6MG/0.6ML SYRINGE	1	NDS
PROMACTA 12.5MG POWDER FOR ORAL SUSP	1	NDS PA
PROMACTA 12.5MG TAB	1	NDS PA QL=30 EA/30 Days
PROMACTA 25MG POWDER FOR ORAL SUSP	1	NDS PA
PROMACTA 25MG TAB	1	NDS PA QL=30 EA/30 Days
PROMACTA 50MG TAB	1	NDS PA QL=60 EA/30 Days
PROMACTA 75MG TAB	1	NDS PA QL=60 EA/30 Days
RETACRIT 10000UNIT/ML INJ	1	PA
RETACRIT 20000UNIT/2ML INJ	1	PA
RETACRIT 20000UNIT/ML INJ	1	PA
RETACRIT 2000UNIT/ML INJ	1	PA
RETACRIT 3000UNIT/ML INJ	1	PA
RETACRIT 40000UNIT/ML INJ	1	PA
RETACRIT 4000UNIT/ML INJ	1	PA
ZARXIO 300MCG/0.5ML SYRINGE	1	NDS
ZARXIO 480MCG/0.8ML SYRINGE	1	NDS
ZIEXTENZO 6MG/0.6ML SYRINGE	1	NDS
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>tranexamic acid 650mg tab</i>	1	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
<i>phenobarbital 100mg tab</i>	1	
<i>phenobarbital 15mg tab</i>	1	
<i>phenobarbital 16.2mg tab</i>	1	
<i>phenobarbital 30mg tab</i>	1	
<i>phenobarbital 32.4mg tab</i>	1	
<i>phenobarbital 4mg/ml oral soln</i>	1	
<i>phenobarbital 60mg tab</i>	1	
<i>phenobarbital 64.8mg tab</i>	1	
<i>phenobarbital 97.2mg tab</i>	1	
NON-BARBITURATE HYPNOTICS		
<i>eszopiclone 1mg tab</i>	1	PA QL=30 EA/30 Days
<i>eszopiclone 2mg tab</i>	1	PA QL=30 EA/30 Days
<i>eszopiclone 3mg tab</i>	1	PA QL=30 EA/30 Days
<i>temazepam 15mg cap</i>	1	QL=30 EA/30 Days
<i>temazepam 30mg cap</i>	1	QL=30 EA/30 Days
<i>triazolam 0.125mg tab</i>	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
<i>triazolam 0.25mg tab</i>	1	QL=60 EA/30 Days
<i>zaleplon 10mg cap</i>	1	QL=30 EA/30 Days
<i>zaleplon 5mg cap</i>	1	QL=30 EA/30 Days
<i>zolpidem tartrate 10mg tab</i>	1	PA QL=30 EA/30 Days
<i>zolpidem tartrate 12.5mg er tab</i>	1	PA QL=30 EA/30 Days
<i>zolpidem tartrate 5mg tab</i>	1	PA QL=60 EA/30 Days
<i>zolpidem tartrate 6.25mg er tab</i>	1	PA QL=30 EA/30 Days
SELECTIVE MELATONIN RECEPTOR AGONISTS		
<i>ramelteon 8mg tab</i>	1	QL=30 EA/30 Days
<i>tasimelteon 20mg cap</i>	1	NDS PA QL=30 EA/30 Days
LAXATIVES		
LAXATIVE COMBINATIONS		
GAVILYTE-C POWDER FOR ORAL SOLN	1	
<i>gavilyte-g powder for oral soln</i>	1	
<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	1	
<i>peg 3350/electrolyte oral soln</i>	1	
<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	1	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6gm/177ml prep kit</i>	1	
SUFLAVE SOLN PACK	1	
LAXATIVES - MISCELLANEOUS		
<i>constulose 10gm/15ml oral soln</i>	1	
<i>lactulose 667mg/ml oral soln</i>	1	
MACROLIDES		
AZITHROMYCIN		
<i>azithromycin 20mg/ml susp</i>	1	
<i>azithromycin 250mg pack</i>	1	
<i>azithromycin 250mg tab</i>	1	
<i>azithromycin 40mg/ml susp</i>	1	
<i>azithromycin 500mg inj</i>	1	
<i>azithromycin 500mg tab</i>	1	
<i>azithromycin 500mg tab pack</i>	1	
<i>azithromycin 600mg tab</i>	1	
CLARITHROMYCIN		
<i>clarithromycin 250mg tab</i>	1	
CLARITHROMYCIN 25MG/ML SUSP	1	
<i>clarithromycin 500mg er tab</i>	1	
<i>clarithromycin 500mg tab</i>	1	
CLARITHROMYCIN 50MG/ML SUSP	1	
ERYTHROMYCINS		
ERYTHROMYCIN 250MG DR CAP	1	
<i>erythromycin 250mg tab</i>	1	
<i>erythromycin 500mg tab</i>	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
<i>erythromycin ethylsuccinate 40mg/ml susp</i>	1	
<i>erythromycin ethylsuccinate 80mg/ml susp</i>	1	
FIDAXOMICIN		
DIFICID 200MG TAB	1	PA QL=20 EA/10 Days
DIFICID 40MG/ML SUSP	1	PA QL=136 ML/10 Days
MEDICAL DEVICES AND SUPPLIES		
BANDAGES-DRESSINGS-TAPE		
GAUZE PADS & DRESSINGS - PADS 2 X 2	1	
MISC. DEVICES		
ALCOHOL SWAB 1X1 (DIABETIC)	1	
PARENTERAL THERAPY SUPPLIES		
INSULIN PEN NEEDLE	1	
INSULIN SYRINGE (DISP) U-100 0.3ML	1	
INSULIN SYRINGE (DISP) U-100 1/2ML	1	
INSULIN SYRINGE (DISP) U-100 1ML	1	
NEEDLES INSULIN DISP. SAFETY	1	
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG		
AIMOVIG 140MG/ML AUTO-INJECTOR	1	PA QL=1 ML/30 Days
AIMOVIG 70MG/ML AUTO-INJECTOR	1	PA QL=1 ML/30 Days
EMGALITY 100MG/ML SYRINGE	1	PA QL=3 ML/30 Days
EMGALITY 120MG/ML AUTO-INJECTOR	1	PA QL=2 ML/30 Days
EMGALITY 120MG/ML SYRINGE	1	PA QL=2 ML/30 Days
UBRELVY 100MG TAB	1	PA QL=16 EA/30 Days
UBRELVY 50MG TAB	1	PA QL=16 EA/30 Days
ZAVZPRET 10MG/ACT NASAL SPRAY	1	PA QL=6 EA/30 Days
MIGRAINE PRODUCTS		
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	1	PA QL=16 ML/30 Days
SEROTONIN AGONISTS		
<i>naratriptan 1mg tab</i>	1	QL=18 EA/30 Days
<i>naratriptan 2.5mg tab</i>	1	QL=18 EA/30 Days
REYVOW 100MG TAB	1	PA QL=8 EA/30 Days
REYVOW 50MG TAB	1	PA QL=8 EA/30 Days
<i>rizatriptan 10mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 10mg tab</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg tab</i>	1	QL=36 EA/60 Days
<i>sumatriptan 100mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 25mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 4mg/0.5ml auto-injector</i>	1	QL=5 ML/30 Days
<i>sumatriptan 4mg/0.5ml cartridge</i>	1	QL=5 ML/30 Days
<i>sumatriptan 50mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 6mg/0.5ml auto-injector</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml cartridge</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml inj</i>	1	QL=5 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
<i>zolmitriptan 2.5mg tab</i>	1	QL=18 EA/30 Days
<i>zolmitriptan 5mg tab</i>	1	QL=18 EA/30 Days
<i>zolmitriptan 5mg/act nasal spray</i>	1	QL=12 EA/30 Days
MINERALS & ELECTROLYTES		
ELECTROLYTE MIXTURES		
<i>electrolyte-148 solution</i>	1	
GLUCOSE 100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	1	PA BvD
GLUCOSE 100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	1	PA BvD
GLUCOSE 25MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	1	
<i>glucose 50mg/ml/potassium chloride 0.01meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 2.25mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 9mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.03meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
GLUCOSE 50MG/ML/POTASSIUM CHLORIDE 0.04MEQ/ML/SODIUM CHLORIDE 9MG/ML INJ	1	
<i>glucose 50mg/ml/sodium chloride 2mg/ml inj</i>	1	
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	1	
KCL/D5W/LR INJ 0.15%	1	
<i>kcl/nacl 20meq-0.45% inj</i>	1	
<i>kcl/nacl 20meq-0.9% inj</i>	1	
<i>kcl/nacl 40meq-9% inj</i>	1	
PLASMA-LYTE 148 INJ	1	
PLASMA-LYTE A INJ	1	
TPN ELECTROLYTES INJ	1	PA BvD
MAGNESIUM		
<i>magnesium sulfatate 500mg/ml inj</i>	1	
<i>magnesium sulfatate 500mg/ml syringe</i>	1	
POTASSIUM		
<i>klor-con 10meq er tab</i>	1	
<i>klor-con 10meq micro er tab</i>	1	
<i>klor-con 15meq micro er tab</i>	1	
<i>klor-con 20meq micro er tab</i>	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
<i>klor-con 20meq powder for oral soln</i>	1	
<i>klor-con 8meq er tab</i>	1	
<i>potassium chloride 1.33meq/ml oral soln</i>	1	
<i>potassium chloride 10meq er cap</i>	1	
<i>potassium chloride 10meq er tab</i>	1	
<i>potassium chloride 10meq micro er tab</i>	1	
POTASSIUM CHLORIDE 10MEQ/100ML INJ	1	
<i>potassium chloride 15meq micro er tab</i>	1	
<i>potassium chloride 2.67meq/ml oral soln</i>	1	
<i>potassium chloride 20meq er tab</i>	1	
<i>potassium chloride 20meq micro er tab</i>	1	
<i>potassium chloride 20meq powder for oral soln</i>	1	
POTASSIUM CHLORIDE 20MEQ/100ML INJ	1	
<i>potassium chloride 2meq/ml (20ml) inj</i>	1	
<i>potassium chloride 2meq/ml inj</i>	1	
POTASSIUM CHLORIDE 40MEQ/100ML INJ	1	
<i>potassium chloride 8meq er cap</i>	1	
<i>potassium chloride 8meq er tab</i>	1	
SODIUM		
<i>sodium chloride 0.45% inj</i>	1	
<i>sodium chloride 0.9% inj</i>	1	
<i>sodium chloride 3% inj</i>	1	
<i>sodium chloride 50mg/ml inj</i>	1	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
<i>penicillamine 250mg tab</i>	1	
<i>trientine 250mg cap</i>	1	PA
IMMUNOMODULATORS		
<i>lenalidomide 10mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 15mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 2.5mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 20mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 25mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 5mg cap</i>	1	PA NSO QL=30 EA/30 Days
REVLIMID 10MG CAP	1	NDS PA NSO QL=30 EA/30 Days
REVLIMID 15MG CAP	1	NDS PA NSO QL=30 EA/30 Days
REVLIMID 2.5MG CAP	1	NDS PA NSO QL=30 EA/30 Days
REVLIMID 20MG CAP	1	NDS PA NSO QL=30 EA/30 Days
REVLIMID 25MG CAP	1	NDS PA NSO QL=30 EA/30 Days
REVLIMID 5MG CAP	1	NDS PA NSO QL=30 EA/30 Days
REZUROCK 200MG TAB	1	NDS PA QL=30 EA/30 Days
THALOMID 100MG CAP	1	NDS QL=30 EA/30 Days
THALOMID 150MG CAP	1	NDS QL=60 EA/30 Days
THALOMID 200MG CAP	1	NDS QL=60 EA/30 Days
THALOMID 50MG CAP	1	NDS 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
IMMUNOSUPPRESSIVE AGENTS		
<i>azathioprine 50mg tab</i>	1	PA BvD
<i>cyclosporine 100mg cap</i>	1	PA BvD
<i>cyclosporine 25mg cap</i>	1	PA BvD
<i>cyclosporine modified 100mg cap</i>	1	PA BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	1	PA BvD
<i>cyclosporine modified 25mg cap</i>	1	PA BvD
<i>cyclosporine modified 50mg cap</i>	1	PA BvD
ENSPRYNG 120MG/ML SYRINGE	1	NDS PA QL=2 ML/28 Days
ENVARUSUS XR 0.75MG TAB	1	PA BvD
ENVARUSUS XR 1MG TAB	1	PA BvD
ENVARUSUS XR 4MG TAB	1	PA BvD
<i>everolimus 0.25mg tab</i>	1	PA BvD
<i>everolimus 0.5mg tab</i>	1	PA BvD
<i>everolimus 0.75mg tab</i>	1	PA BvD
<i>everolimus 1mg tab</i>	1	PA BvD
<i>gengraf 100mg cap</i>	1	PA BvD
<i>gengraf 100mg/ml oral soln</i>	1	PA BvD
<i>gengraf 25mg cap</i>	1	PA BvD
LUPKYNIS 7.9MG CAP	1	NDS PA QL=180 EA/30 Days
<i>mycophenolate mofetil 200mg/ml susp</i>	1	PA BvD
<i>mycophenolate mofetil 250mg cap</i>	1	PA BvD
<i>mycophenolate mofetil 500mg tab</i>	1	PA BvD
<i>mycophenolic acid 180mg dr tab</i>	1	PA BvD
<i>mycophenolic acid 360mg dr tab</i>	1	PA BvD
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	1	PA BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	1	PA BvD
SANDIMMUNE 100MG/ML ORAL SOLN	1	PA BvD
<i>sirolimus 0.5mg tab</i>	1	PA BvD
<i>sirolimus 1mg tab</i>	1	PA BvD
<i>sirolimus 1mg/ml oral soln</i>	1	PA BvD
<i>sirolimus 2mg tab</i>	1	PA BvD
<i>tacrolimus 0.5mg cap</i>	1	PA BvD
<i>tacrolimus 1mg cap</i>	1	PA BvD
<i>tacrolimus 5mg cap</i>	1	PA BvD
POTASSIUM REMOVING AGENTS		
LOKELMA 10GM POWDER FOR ORAL SUSP	1	PA
LOKELMA 5GM POWDER FOR ORAL SUSP	1	PA
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	1	
SPS 15GM/60ML SUSP	1	
VELTASSA 16.8GM POWDER FOR ORAL SUSP	1	PA
VELTASSA 25.2GM POWDER FOR ORAL SUSP	1	PA
VELTASSA 8.4GM POWDER FOR ORAL SUSP	1	PA
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BENLYSTA 200MG/ML AUTO-INJECTOR	1	NDS PA QL=4 ML/28 Days
BENLYSTA 200MG/ML SYRINGE	1	NDS PA QL=4 ML/28 Days
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
<i>lidocaine viscous 2% topical soln</i>	1	
ANTI-INFECTIVES - THROAT		
<i>clotrimazole 10mg lozenge</i>	1	
<i>nystatin 100000unit/ml susp</i>	1	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate 0.12% mouthwash</i>	1	
<i>periogard 0.12% mouthwash</i>	1	
STEROIDS - MOUTH/THROAT/DENTAL		
<i>kourzeq 0.1% oral paste</i>	1	
<i>triamcinolone acetate 0.1% oral paste</i>	1	
THROAT PRODUCTS - MISC.		
<i>cevimeline 30mg cap</i>	1	
<i>pilocarpine 5mg tab</i>	1	
<i>pilocarpine 7.5mg tab</i>	1	
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen 10mg tab</i>	1	
<i>baclofen 20mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	PA QL=90 EA/30 Days
<i>chlorzoxazone 500mg tab</i>	1	PA
<i>cyclobenzaprine 10mg tab</i>	1	PA QL=90 EA/30 Days
<i>cyclobenzaprine 5mg tab</i>	1	PA QL=90 EA/30 Days
<i>metaxalone 800mg tab</i>	1	PA
<i>methocarbamol 500mg tab</i>	1	PA
<i>methocarbamol 750mg tab</i>	1	PA
<i>orphenadrine citrate 100mg er tab</i>	1	PA
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg tab</i>	1	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium 100mg cap</i>	1	
<i>dantrolene sodium 25mg cap</i>	1	
<i>dantrolene sodium 50mg cap</i>	1	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	1	
<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	1	
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	1	
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	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
NASAL STEROIDS		
<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	1	QL=50 ML/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	1	QL=32 GM/30 Days
NEUROMUSCULAR AGENTS		
ALS AGENTS		
RADICAVA 105MG/5ML SUSP	1	NDS PA QL=70 ML/28 Days
RELYVRIO 3-1GM POWDER PACK	1	NDS PA QL=56 EA/28 Days
<i>riluzole 50mg tab</i>	1	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI 0.75MG/ML ORAL SOLN	1	NDS PA QL=200 ML/30 Days
NUTRIENTS		
CARBOHYDRATES		
<i>glucose 100mg/ml inj</i>	1	PA BvD
<i>glucose 50mg/ml inj</i>	1	
LIPIDS		
DOJOLVI 100% ORAL SOLN	1	NDS PA
INTRALIPID 20GM/100ML INJ	1	PA BvD
NUTRILIPID 20GM/100ML INJ	1	PA BvD
PROTEINS		
CLINIMIX 4.25/10 INJ	1	PA BvD
CLINIMIX 4.25/5 INJ	1	PA BvD
CLINIMIX 5/15 INJ	1	PA BvD
CLINIMIX 5/20 INJ	1	PA BvD
CLINIMIX E 2.75/5 INJ	1	PA BvD
CLINIMIX E 4.25/10 INJ	1	PA BvD
CLINIMIX E 4.25/5 INJ	1	PA BvD
CLINIMIX E 5/15 INJ	1	PA BvD
CLINIMIX E 5/20 INJ	1	PA BvD
<i>clinisol 15 inj</i>	1	PA BvD
<i>plenamine 15% inj</i>	1	PA BvD
PREMASOL 10% INJ	1	PA BvD
PROSOL 20% INJ	1	PA BvD
TRAVASOL 10% INJ	1	PA BvD
TROPHAMINE 10% INJ	1	PA BvD
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPHTHALMIC		
BETAXOLOL 0.5% OPTH SOLN	1	
<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	1	
CARTEOLOL 1% OPTH SOLN	1	
<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	1	
<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	1	
LEVOBUNOLOL 0.5% OPTH SOLN	1	
<i>timolol 0.25% ophth gel</i>	1	
<i>timolol 0.25% ophth soln</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>timolol 0.5% ophth gel</i>	1	
<i>timolol 0.5% ophth soln</i>	1	
<i>timolol 0.5% ophth soln (preservative-free)</i>	1	
CYCLOPLEGIC MYDRIATICS		
<i>atropine sulfate 1% ophth soln</i>	1	
MIOTICS		
PHOSPHOLINE IODIDE 0.125% OPHTH SOLN	1	
<i>pilocarpine 1% ophth soln</i>	1	
<i>pilocarpine 2% ophth soln</i>	1	
<i>pilocarpine 4% ophth soln</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
APRACLONIDINE 0.5% OPHTH SOLN	1	
<i>brimonidine tartrate 0.1% ophth soln</i>	1	
<i>brimonidine tartrate 0.15% ophth soln</i>	1	
<i>brimonidine tartrate 0.2% ophth soln</i>	1	
SIMBRINZA 0.2-1% OPHTH SUSP	1	
OPHTHALMIC ANTI-INFECTIVES		
BACITRACIN 500UNIT/GM OPHTH OINTMENT	1	
<i>bacitracin/polymyxin B 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>ciprofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>erythromycin 0.5% ophth ointment</i>	1	QL=7 GM/7 Days
<i>gentamicin 0.3% ophth soln</i>	1	QL=10 ML/7 Days
NATACYN 5% OPHTH SUSP	1	QL=15 ML/7 Days
<i>neo-polycin ophth ointment</i>	1	QL=7 GM/7 Days
<i>neomycin/bacitracin/polymyxin ophth ointment 5mg-400unit-10000unit</i>	1	QL=7 GM/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	1	QL=10 ML/7 Days
<i>ofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>polycin 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>polymyxin b/trimethoprim 10000 Unit/ML-0.1% ophth soln</i>	1	QL=10 ML/7 Days
<i>sulfacetamide sodium 10% ophth soln</i>	1	QL=15 ML/7 Days
<i>tobramycin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
TRIFLURIDINE 1% OPHTH SOLN	1	QL=15 ML/7 Days
XDEMVIY 0.25% OPHTH SOLN	1	PA QL=10 ML/42 Days
OPHTHALMIC IMMUNOMODULATORS		
<i>cyclosporine 0.05% ophth susp</i>	1	QL=60 EA/30 Days
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA 5% OPHTH SOLN	1	QL=60 EA/30 Days
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPHTH SOLN	1	QL=5 ML/30 Days
ROCKLATAN 0.05-0.2MG/ML OPHTH SOLN	1	QL=5 ML/30 Days
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE 0.002% OPHTH SOLN	1	NDS PA QL=112 ML/365 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
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	1	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>	1	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	1	
<i>difluprednate 0.05% ophth susp</i>	1	
<i>fluorometholone 0.1% ophth susp</i>	1	
<i>loteprednol etabonate 0.5% ophth gel</i>	1	
<i>loteprednol etabonate 0.5% ophth susp</i>	1	
<i>neo-polycin hc ophth ointment</i>	1	
<i>neomycin/polymyxin/bacitracin/hydrocortisone ophth 1% ointment</i>	1	
<i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>	1	
PREDNISOLONE 1% OPHTH SOLN	1	
PREDNISOLONE ACETATE 1% OPHTH SUSP	1	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN	1	
TOBRADEX 0.1-0.3% OPHTH OINTMENT	1	
OPHTHALMICS - MISC.		
<i>azelastine 0.05% ophth soln</i>	1	
<i>brinzolamide 1% ophth susp</i>	1	
<i>bromfenac 0.07% ophth soln</i>	1	QL=12 ML/365 Days
CROMOLYN SODIUM 4% OPHTH SOLN	1	
CYSTADROPS 0.37% OPHTH SOLN	1	NDS PA QL=20 ML/28 Days
CYSTARAN 0.44% OPHTH SOLN	1	NDS PA QL=60 ML/28 Days
<i>diclofenac sodium 0.1% ophth soln</i>	1	QL=20 ML/365 Days
<i>dorzolamide 2% ophth soln</i>	1	
<i>epinastine 0.05% ophth soln</i>	1	
FLURBIPROFEN SODIUM 0.03% OPHTH SOLN	1	
ILEVRO 0.3% OPHTH SUSP	1	QL=12 ML/365 Days
<i>ketorolac tromethamine 0.4% ophth soln</i>	1	QL=20 ML/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	1	
PROLENSA 0.07% OPHTH SOLN	1	QL=12 ML/365 Days
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03% ophth soln</i>	1	QL=5 ML/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 ML/30 Days
LUMIGAN 0.01% OPHTH SOLN	1	QL=5 ML/30 Days
<i>tafluprost 0.0015% ophth soln</i>	1	ST QL=30 EA/30 Days
<i>travoprost 0.004% ophth soln</i>	1	QL=5 ML/30 Days
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2% otic soln</i>	1	
OTIC ANTI-INFECTIVES		
CIPROFLOXACIN 0.2% OTIC SOLN	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
<i>ofloxacin 0.3% otic soln</i>	1	
OTIC COMBINATIONS		
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	1	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	1	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	1	
OTIC STEROIDS		
<i>flac 0.01% otic soln</i>	1	
<i>fluocinolone acetonide 0.01% otic soln</i>	1	
<i>hydrocortisone/acetic acid 1-2% otic soln</i>	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
BIVIGAM 5GM/50ML INJ	1	NDS PA
GAMMAGARD 10GM INJ	1	NDS PA
GAMMAGARD 2.5GM/25ML INJ	1	NDS PA
GAMMAGARD 5GM INJ	1	NDS PA
GAMMAKED 1GM/10ML INJ	1	NDS PA
GAMMAPLEX 10GM/100ML INJ	1	NDS PA
GAMMAPLEX 10GM/200ML INJ	1	NDS PA
GAMMAPLEX 20GM/200ML INJ	1	NDS PA
GAMMAPLEX 5GM/50ML INJ	1	NDS PA
GAMUNEX 1GM/10ML INJ	1	NDS PA
OCTAGAM 1GM/20ML INJ	1	NDS PA
OCTAGAM 2GM/20ML INJ	1	NDS PA
PANZYGA 10GM/100ML INJ	1	NDS PA
PANZYGA 1GM/10ML INJ	1	NDS PA
PANZYGA 2.5GM/25ML INJ	1	NDS PA
PANZYGA 20GM/200ML INJ	1	NDS PA
PANZYGA 30GM/300ML INJ	1	NDS PA
PANZYGA 5GM/50ML INJ	1	NDS PA
PRIVIGEN 20GM/200ML INJ	1	NDS PA
PENICILLINS		
AMINOPENICILLINS		
AMOXICILLIN 125MG CHEW TAB	1	
<i>amoxicillin 250mg cap</i>	1	
AMOXICILLIN 250MG CHEW TAB	1	
<i>amoxicillin 25mg/ml susp</i>	1	
<i>amoxicillin 40mg/ml susp</i>	1	
<i>amoxicillin 500mg cap</i>	1	
<i>amoxicillin 500mg tab</i>	1	
<i>amoxicillin 50mg/ml susp</i>	1	
<i>amoxicillin 80mg/ml susp</i>	1	
<i>amoxicillin 875mg tab</i>	1	
<i>ampicillin 1000mg inj</i>	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
<i>ampicillin 100mg/ml inj</i>	1	
AMPICILLIN 125MG INJ	1	
<i>ampicillin 500mg cap</i>	1	
NATURAL PENICILLINS		
BICILLIN L-A 1200000UNIT/2ML SYRINGE	1	
BICILLIN L-A 2400000UNIT/4ML SYRINGE	1	
BICILLIN L-A 600000UNIT/ML SYRINGE	1	
<i>penicillin g potassium 1000000unit/ml inj</i>	1	
PENICILLIN G POTASSIUM 40000UNIT/ML INJ	1	
PENICILLIN G POTASSIUM 60000UNIT/ML INJ	1	
PENICILLIN G SODIUM 100000UNIT/ML INJ	1	
<i>penicillin v potassium 250mg tab</i>	1	
PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN	1	
<i>penicillin v potassium 500mg tab</i>	1	
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin 250mg/clavulanate 125mg tab</i>	1	
AMOXICILLIN/CLAVULANATE 200-28.5MG CHEW TAB	1	
AMOXICILLIN/CLAVULANATE 400-57MG CHEW TAB	1	
<i>amoxicillin/clavulanate 500-125mg tab</i>	1	
<i>amoxicillin/clavulanate 875-125mg tab</i>	1	
<i>amoxicillin/k clavulanate 200-28.5mg/5ml susp</i>	1	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml susp</i>	1	
<i>amoxicillin/k clavulanate 400-57mg/5ml susp</i>	1	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml susp</i>	1	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	1	
<i>ampicillin/sulbactam 1000-500mg inj</i>	1	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	1	
<i>piperacillin/tazobactam 2000-250mg inj</i>	1	
<i>piperacillin/tazobactam 3000-375mg inj</i>	1	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	1	
<i>piperacillin/tazobactam 4000-500mg inj</i>	1	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	
<i>nafcillin 100mg/ml inj</i>	1	
<i>nafcillin 1gm inj</i>	1	
<i>nafcillin 2gm inj</i>	1	
<i>oxacillin 100mg/ml inj</i>	1	
<i>oxacillin 1gm inj</i>	1	
OXACILLIN 20MG/ML INJ	1	
<i>oxacillin 2gm inj</i>	1	
OXACILLIN 40MG/ML INJ	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
PROGESTINS		
PROGESTINS		
<i>medroxyprogesterone acetate 10mg tab</i>	1	
<i>medroxyprogesterone acetate 2.5mg tab</i>	1	
<i>medroxyprogesterone acetate 5mg tab</i>	1	
<i>megestrol acetate 125mg/ml susp</i>	1	PA
<i>norethindrone acetate 5mg tab</i>	1	
<i>progesterone 100mg cap</i>	1	
<i>progesterone 200mg cap</i>	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium 333mg dr tab</i>	1	
<i>disulfiram 250mg tab</i>	1	
<i>disulfiram 500mg tab</i>	1	
ANTI-CATAPLECTIC AGENTS		
LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
LUMRYZ 6GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
LUMRYZ 9GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
SODIUM OXYBATE 500MG/ML ORAL SOLN	1	NDS PA QL=540 ML/30 Days
XYWAV 0.5GM/ML ORAL SOLN	1	NDS PA QL=540 ML/30 Days
ANTIDEMENTIA AGENTS		
<i>donepezil 10mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 10mg tab</i>	1	QL=60 EA/30 Days
<i>donepezil 23mg tab</i>	1	ST QL=30 EA/30 Days
<i>donepezil 5mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 5mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine 12mg tab</i>	1	
<i>galantamine 4mg tab</i>	1	
<i>galantamine 8mg tab</i>	1	
<i>galantamine hydrobromide 16mg er cap</i>	1	
<i>galantamine hydrobromide 24mg er cap</i>	1	
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	1	
<i>galantamine hydrobromide 8mg er cap</i>	1	
<i>memantine 10mg tab</i>	1	QL=60 EA/30 Days
<i>memantine 14mg er cap</i>	1	ST QL=30 EA/30 Days
<i>memantine 21mg er cap</i>	1	ST QL=30 EA/30 Days
<i>memantine 28mg er cap</i>	1	ST QL=30 EA/30 Days
<i>memantine 2mg/ml oral soln</i>	1	QL=300 ML/30 Days
<i>memantine 5/10mg titration pack</i>	1	
<i>memantine 5mg tab</i>	1	QL=60 EA/30 Days
<i>memantine 7mg er cap</i>	1	ST QL=30 EA/30 Days
<i>rivastigmine 1.5mg cap</i>	1	
<i>rivastigmine 13.3mg/24hr patch</i>	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
<i>rivastigmine 3mg cap</i>	1	
<i>rivastigmine 4.5mg cap</i>	1	
<i>rivastigmine 4.6mg/24hr patch</i>	1	QL=30 EA/30 Days
<i>rivastigmine 6mg cap</i>	1	
<i>rivastigmine 9.5mg/24hr patch</i>	1	QL=30 EA/30 Days
FIBROMYALGIA AGENTS		
SAVELLA 100MG TAB	1	QL=60 EA/30 Days
SAVELLA 12.5MG TAB	1	QL=60 EA/30 Days
SAVELLA 25MG TAB	1	QL=60 EA/30 Days
SAVELLA 50MG TAB	1	QL=60 EA/30 Days
SAVELLA TAB 4-WEEK TITRATION PACK (55)	1	
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12MG ER TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO 12MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 24MG ER TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO 6-12-24MG XR TAB TITRATION PACK	1	NDS PA QL=42 EA/28 Days
AUSTEDO 6MG ER TAB	1	NDS PA QL=90 EA/30 Days
AUSTEDO 6MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 9MG TAB	1	NDS PA QL=120 EA/30 Days
INGREZZA 40MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 60MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 80MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA CAP PACK	1	NDS PA QL=28 EA/28 Days
<i>tetrabenazine 12.5mg tab</i>	1	
<i>tetrabenazine 25mg tab</i>	1	
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	1	NDS
AVONEX 30MCG/0.5ML SYRINGE	1	NDS
<i>dalfampridine 10mg er tab</i>	1	QL=60 EA/30 Days
<i>dimethyl fumarate 120mg dr cap</i>	1	
<i>dimethyl fumarate 240mg dr cap</i>	1	
<i>dimethyl fumarate/dimethyl fumarate 120-240mg pack</i>	1	
EXTAVIA 0.3MG INJ	1	NDS
<i>fingolimod 0.5mg cap</i>	1	
<i>glatiramer acetate 20mg/ml syringe</i>	1	
<i>glatiramer acetate 40mg/ml syringe</i>	1	
<i>glatopa 20mg/ml syringe</i>	1	
<i>glatopa 40mg/ml syringe</i>	1	
KESIMPTA 20MG/0.4ML PEN INJ	1	NDS
MAVENCLAD 10 TABLET PACK 10MG	1	NDS
MAVENCLAD 4 TABLET PACK 10MG	1	NDS
MAVENCLAD 5 TABLET PACK 10MG	1	NDS
MAVENCLAD 6 TABLET PACK 10MG	1	NDS
MAVENCLAD 7 TABLET PACK 10MG	1	NDS
MAVENCLAD 8 TABLET PACK 10MG	1	NDS

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
MAVENCLAD 9 TABLET PACK 10MG	1	NDS
MAYZENT 0.25MG STARTER PACK	1	NDS
MAYZENT 0.25MG TAB	1	NDS
MAYZENT 1MG TAB	1	NDS
MAYZENT 2MG TAB	1	NDS
MAYZENT STARTER PACK (7)	1	
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	1	NDS
PLEGRIDY 125MCG/0.5ML SYRINGE	1	NDS
REBIF 22MCG/0.5ML AUTO-INJECTOR	1	NDS
REBIF 22MCG/0.5ML SYRINGE	1	NDS
REBIF 44MCG/0.5ML AUTO-INJECTOR	1	NDS
REBIF 44MCG/0.5ML SYRINGE	1	NDS
REBIF REBIDOSE PACK	1	NDS
REBIF TITRATION PACK	1	NDS
<i>teriflunomide 14mg tab</i>	1	
<i>teriflunomide 7mg tab</i>	1	
ZEPOSIA 0.92MG CAP	1	NDS PA
ZEPOSIA 28-DAY STARTER KIT	1	NDS PA
ZEPOSIA CAP 7-DAY STARTER PACK	1	NDS PA
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUEDEXTA 20-10MG CAP	1	PA QL=60 EA/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
ERGOLOID MESYLATES USP 1MG TAB	1	
PIMOZIDE 1MG TAB	1	
PIMOZIDE 2MG TAB	1	
SMOKING DETERRENTS		
<i>bupropion 150mg sr tab</i>	1	
NICOTROL 10MG INH SOLN	1	
NICOTROL 10MG/ML NASAL INHALER	1	
<i>varenicline 0.5mg tab</i>	1	
<i>varenicline 0.5mg/1mg first month pack</i>	1	
<i>varenicline 1mg tab</i>	1	
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
ARALAST 1000MG INJ	1	NDS PA
GLASSIA 1000MG/50ML INJ	1	NDS PA
PROLASTIN 1000MG INJ	1	NDS PA
ZEMAIRA 1000MG INJ	1	NDS PA
CYSTIC FIBROSIS AGENTS		
BRONCHITOL 40MG INH POWDER	1	NDS PA QL=560 EA/28 Days
KALYDECO 13.4MG GRANULES	1	NDS PA QL=56 EA/28 Days
KALYDECO 150MG TAB	1	NDS PA QL=60 EA/30 Days
KALYDECO 25MG GRANULES	1	NDS PA QL=60 EA/30 Days
KALYDECO 5.8MG GRANULES	1	NDS PA QL=56 EA/28 Days
KALYDECO 50MG GRANULES	1	NDS PA 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
KALYDECO 75MG GRANULES	1	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG GRANULES	1	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG TAB	1	NDS PA QL=120 EA/30 Days
ORKAMBI 125-200MG TAB	1	NDS PA QL=120 EA/30 Days
ORKAMBI 188-150MG GRANULES	1	NDS PA QL=60 EA/30 Days
ORKAMBI 94-75MG GRANULES	1	NDS PA QL=56 EA/28 Days
PULMOZYME 1MG/ML INH SOLN	1	NDS PA BvD QL=150 ML/30 Days
SYMDEKO 50-75MG/75MG PACK	1	NDS PA QL=60 EA/30 Days
SYMDEKO TAB 4-WEEK PACK	1	NDS PA QL=60 EA/30 Days
TRIKAFTA 100-50-75MG/150MG PACK	1	NDS PA QL=90 EA/30 Days
TRIKAFTA 100-50-75MG/75MG GRANULES PACK	1	NDS PA QL=56 EA/28 Days
TRIKAFTA 50-37.5-25MG/75MG TAB PACK	1	NDS PA QL=84 EA/28 Days
TRIKAFTA 80-40-60MG/59.5MG GRANULES PACK	1	NDS PA QL=56 EA/28 Days
PULMONARY FIBROSIS AGENTS		
OFEV 100MG CAP	1	NDS PA QL=60 EA/30 Days
OFEV 150MG CAP	1	NDS PA QL=60 EA/30 Days
<i>pirfenidone 267mg cap</i>	1	PA QL=270 EA/30 Days
<i>pirfenidone 267mg tab</i>	1	PA QL=270 EA/30 Days
<i>pirfenidone 801mg tab</i>	1	PA QL=90 EA/30 Days
SULFONAMIDES		
SULFONAMIDES		
SULFADIAZINE 500MG TAB	1	
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA 150MG TAB	1	NDS PA QL=30 EA/14 Days
GLYCYLCYCLINES		
<i>tigecycline 50mg inj</i>	1	NDS
TETRACYCLINES		
<i>demeclocycline 150mg tab</i>	1	
<i>demeclocycline 300mg tab</i>	1	
<i>doxy 100mg inj</i>	1	
<i>doxycycline hyclate 100mg cap</i>	1	
<i>doxycycline hyclate 100mg tab</i>	1	
<i>doxycycline hyclate 20mg tab</i>	1	
<i>doxycycline hyclate 50mg cap</i>	1	
<i>doxycycline monohydrate 100mg cap</i>	1	
<i>doxycycline monohydrate 100mg tab</i>	1	
<i>doxycycline monohydrate 50mg cap</i>	1	
<i>doxycycline monohydrate 50mg tab</i>	1	
<i>doxycycline monohydrate 5mg/ml susp</i>	1	
<i>minocycline 100mg cap</i>	1	
<i>minocycline 50mg cap</i>	1	
<i>minocycline 75mg cap</i>	1	
<i>tetracycline 250mg cap</i>	1	
<i>tetracycline 500mg cap</i>	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
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole 10mg tab</i>	1	
<i>methimazole 5mg tab</i>	1	
<i>propylthiouracil 50mg tab</i>	1	
THYROID HORMONES		
<i>euthyrox 100mcg tab</i>	1	
<i>euthyrox 112mcg tab</i>	1	
<i>euthyrox 125mcg tab</i>	1	
<i>euthyrox 137mcg tab</i>	1	
<i>euthyrox 150mcg tab</i>	1	
<i>euthyrox 175mcg tab</i>	1	
<i>euthyrox 200mcg tab</i>	1	
<i>euthyrox 25mcg tab</i>	1	
<i>euthyrox 50mcg tab</i>	1	
<i>euthyrox 75mcg tab</i>	1	
<i>euthyrox 88mcg tab</i>	1	
<i>levothyroxine sodium 100mcg tab</i>	1	
<i>levothyroxine sodium 112mcg tab</i>	1	
<i>levothyroxine sodium 125mcg tab</i>	1	
<i>levothyroxine sodium 137mcg tab</i>	1	
<i>levothyroxine sodium 150mcg tab</i>	1	
<i>levothyroxine sodium 175mcg tab</i>	1	
<i>levothyroxine sodium 200mcg tab</i>	1	
<i>levothyroxine sodium 25mcg tab</i>	1	
<i>levothyroxine sodium 300mcg tab</i>	1	
<i>levothyroxine sodium 50mcg tab</i>	1	
<i>levothyroxine sodium 75mcg tab</i>	1	
<i>levothyroxine sodium 88mcg tab</i>	1	
<i>levoxyl 100mcg tab</i>	1	
<i>levoxyl 112mcg tab</i>	1	
<i>levoxyl 125mcg tab</i>	1	
<i>levoxyl 137mcg tab</i>	1	
<i>levoxyl 150mcg tab</i>	1	
<i>levoxyl 175mcg tab</i>	1	
<i>levoxyl 200mcg tab</i>	1	
<i>levoxyl 25mcg tab</i>	1	
<i>levoxyl 50mcg tab</i>	1	
<i>levoxyl 75mcg tab</i>	1	
<i>levoxyl 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	1	
<i>liothyronine sodium 50mcg tab</i>	1	
<i>liothyronine sodium 5mcg tab</i>	1	
<i>unithroid 100mcg tab</i>	1	
<i>unithroid 112mcg tab</i>	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
<i>unithroid 125mcg tab</i>	1	
<i>unithroid 137mcg tab</i>	1	
<i>unithroid 150mcg tab</i>	1	
<i>unithroid 175mcg tab</i>	1	
<i>unithroid 200mcg tab</i>	1	
<i>unithroid 25mcg tab</i>	1	
<i>unithroid 300mcg tab</i>	1	
<i>unithroid 50mcg tab</i>	1	
<i>unithroid 75mcg tab</i>	1	
<i>unithroid 88mcg tab</i>	1	
TOXOIDS		
TOXOID COMBINATIONS		
ADACEL INJ	1	VAC
ADACEL SYRINGE	1	VAC
BOOSTRIX INJ	1	VAC
BOOSTRIX SYRINGE	1	VAC
DAPTACEL INJ	1	
DIPHThERIA/TETANUS TOXOID INJ	1	PA BvD
INFANRIX SYRINGE	1	
KINRIX SYRINGE	1	
PEDIARIX SYRINGE	1	
PENTACEL 96-30-68UNIT/ML INJ	1	
QUADRACEL INJ	1	
QUADRACEL INJ	1	
QUADRACEL SYRINGE	1	
TDVAX 4-4UNIT/ML INJ	1	PA BvD VAC
TENIVAC 4-10UNIT/ML INJ	1	PA BvD VAC
TENIVAC 4-10UNIT/ML SYRINGE	1	PA BvD VAC
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>dicyclomine 10mg cap</i>	1	
<i>dicyclomine 20mg tab</i>	1	
<i>dicyclomine 2mg/ml oral soln</i>	1	
<i>glycopyrrolate 1mg tab</i>	1	
<i>glycopyrrolate 2mg tab</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine 200mg tab</i>	1	
<i>cimetidine 300mg tab</i>	1	
<i>cimetidine 400mg tab</i>	1	
<i>cimetidine 800mg tab</i>	1	
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
<i>famotidine 8mg/ml susp</i>	1	
MISC. ANTI-ULCER		
<i>sucralfate 1000mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>sucralfate 100mg/ml susp</i>	1	
PROTON PUMP INHIBITORS		
<i>lansoprazole 15mg dr cap</i>	1	
<i>lansoprazole 30mg dr cap</i>	1	
<i>omeprazole 10mg dr cap</i>	1	
<i>omeprazole 20mg dr cap</i>	1	
<i>omeprazole 40mg dr cap</i>	1	
<i>pantoprazole 20mg dr tab</i>	1	
<i>pantoprazole 40mg dr tab</i>	1	
ULCER DRUGS - PROSTAGLANDINS		
<i>misoprostol 100mcg tab</i>	1	
<i>misoprostol 200mcg tab</i>	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>fesoterodine fumarate 4mg er tab</i>	1	
<i>fesoterodine fumarate 8mg er tab</i>	1	
<i>oxybutynin chloride 10mg er tab</i>	1	
<i>oxybutynin chloride 15mg er tab</i>	1	
<i>oxybutynin chloride 1mg/ml oral soln</i>	1	
<i>oxybutynin chloride 5mg er tab</i>	1	
<i>oxybutynin chloride 5mg tab</i>	1	
<i>tolterodine tartrate 1mg tab</i>	1	
<i>tolterodine tartrate 2mg er cap</i>	1	QL=30 EA/30 Days
<i>tolterodine tartrate 2mg tab</i>	1	
<i>tolterodine tartrate 4mg er cap</i>	1	QL=30 EA/30 Days
<i>tropium chloride 20mg tab</i>	1	
<i>tropium chloride 60mg er cap</i>	1	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
GEMTESA 75MG TAB	1	PA
MYRBETRIQ 25MG ER TAB	1	
MYRBETRIQ 50MG ER TAB	1	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride 10mg tab</i>	1	
<i>bethanechol chloride 25mg tab</i>	1	
<i>bethanechol chloride 50mg tab</i>	1	
<i>bethanechol chloride 5mg tab</i>	1	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate 100mg tab</i>	1	
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ	1	
BCG LIVE TICE STRAIN 50MG INJ	1	VAC
BEXSERO SYRINGE	1	VAC
HIBERIX 10MCG INJ	1	
MENACTRA INJ	1	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
MENQUADFI INJ	1	VAC
MENVEO INJ	1	VAC
PEDVAXHIB 7.5MCG/0.5ML INJ	1	
PENBRAYA INJ	1	VAC
TRUMENBA SYRINGE	1	VAC
TYPHIM VI 25MCG/0.5ML INJ	1	VAC
TYPHIM VI 25MCG/0.5ML SYRINGE	1	VAC
VIRAL VACCINES		
ABRYSVO 120MCG/0.5ML INJ	1	VAC
AREXVY 120MCG/0.5ML INJ	1	VAC
ENGERIX-B 10MCG/0.5ML SYRINGE	1	PA BvD VAC
ENGERIX-B 20MCG/ML INJ	1	PA BvD VAC
ENGERIX-B 20MCG/ML SYRINGE	1	PA BvD VAC
GARDASIL 9 INJ	1	VAC
GARDASIL 9 SYRINGE	1	VAC
HAVRIX 1440ELU/ML SYRINGE	1	VAC
HAVRIX 720ELU/0.5ML SYRINGE	1	
HEPLISAV-B 20MCG/0.5ML SYRINGE	1	PA BvD VAC
IMOVAX 2.5UNIT/ML INJ	1	PA BvD VAC
IPOL INJ	1	VAC
IXCHIQ INJ	1	VAC
IXIARO 0.012MG/ML SYRINGE	1	VAC
JYNNEOS 0.5ML INJ	1	VAC
M-M-R II INJ	1	VAC
PREHEVBRIO 10MCG/ML INJ	1	PA BvD VAC
PRIORIX INJ	1	VAC
PROQUAD INJ	1	
RABAVERT 2.5UNIT/ML INJ	1	PA BvD VAC
RECOMBIVAX 10MCG/ML INJ	1	PA BvD VAC
RECOMBIVAX 10MCG/ML SYRINGE	1	PA BvD VAC
RECOMBIVAX 40MCG/ML INJ	1	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML INJ	1	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML SYRINGE	1	PA BvD VAC
ROTARIX SUSP	1	
ROTARIX SUSP	1	
ROTATEQ SUSP	1	
SHINGRIX 50MCG/0.5ML INJ	1	QL=2 EA/365 DaysVAC
TICOVAC 1.2MCG/0.25ML SYRINGE	1	
TICOVAC 2.4MCG/0.5ML SYRINGE	1	VAC
TWINRIX SYRINGE	1	VAC
VAQTA 25UNIT/0.5ML INJ	1	
VAQTA 25UNIT/0.5ML SYRINGE	1	
VAQTA 50UNIT/ML INJ	1	VAC
VAQTA 50UNIT/ML SYRINGE	1	VAC
VARIVAX 1350PFU/0.5ML INJ	1	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
YF-VAX INJ	1	VAC
YF-VAX INJ	1	VAC
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<i>clindamycin 2% vaginal cream</i>	1	
<i>metronidazole 0.75% vaginal gel</i>	1	
<i>terconazole 0.4% vaginal cream</i>	1	
<i>terconazole 0.8% vaginal cream</i>	1	
<i>terconazole 80mg vaginal insert</i>	1	
VAGINAL ESTROGENS		
<i>estradiol 0.01% vaginal cream</i>	1	
ESTRING 2MG (7.5 MCG/24HR) VAGINAL SYSTEM	1	ST
PREMARIN 0.625MG/GM VAGINAL CREAM	1	
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	1	QL=2 EA/15 Days
<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	1	QL=2 EA/15 Days
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
<i>droxidopa 100mg cap</i>	1	PA
<i>droxidopa 200mg cap</i>	1	PA
<i>droxidopa 300mg cap</i>	1	PA
VASOPRESSORS		
<i>midodrine 10mg tab</i>	1	
<i>midodrine 2.5mg tab</i>	1	
<i>midodrine 5mg tab</i>	1	

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

ALPHABETICAL LISTING OF DRUGS

A					
<i>abacavir 20mg/ml oral soln</i>	45	<i>acetylcysteine 100mg/ml inh soln</i>	58	AKEEGA 500-100MG TAB	34
<i>abacavir 300mg tab</i>	45	<i>acetylcysteine 200mg/ml inh soln</i>	58	AKEEGA 500-50MG TAB	34
<i>abacavir/lamivudine 600-300mg tab</i>	45	<i>acitretin 10mg cap</i>	59	<i>ala-cort 1% cream</i>	60
ABELCET 5MG/ML INJ	24	<i>acitretin 17.5mg cap</i>	59	<i>ala-cort 2.5% cream</i>	60
ABILIFY 300MG INJ	44	<i>acitretin 25mg cap</i>	59	<i>albendazole 200mg tab</i>	7
ABILIFY 300MG SYRINGE	44	ACTEMRA	4	<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	11
ABILIFY 400MG INJ	44	162MG/0.9ML		<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	11
ABILIFY 400MG SYRINGE	44	AUTO-INJECTOR		<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	11
ABILIFY 720MG/2.4ML SYRINGE	44	ACTEMRA	4	<i>albuterol 1.25mg/3ml neb soln</i>	11
ABILIFY 960MG/3.2ML SYRINGE	44	ACTHIB INJ	89	<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	11
<i>abiraterone acetate 250mg tab</i>	34	ACTIMMUNE	39	<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	11
ABRYSVO	90	2000000UNIT/0.5ML INJ		<i>albuterol 2mg tab</i>	11
120MCG/0.5ML INJ		<i>acyclovir 200mg cap</i>	48	<i>albuterol 4mg tab</i>	11
<i>acamprosate calcium 333mg dr tab</i>	83	<i>acyclovir 400mg tab</i>	48	ALBUTEROL 5MG/ML INH SOLN	11
<i>acarbose 100mg tab</i>	20	<i>acyclovir 40mg/ml susp</i>	48	<i>alclometasone dipropionate 0.05% cream</i>	60
<i>acarbose 25mg tab</i>	20	<i>acyclovir 5% ointment</i>	60	<i>alclometasone dipropionate 0.05% ointment</i>	60
<i>acarbose 50mg tab</i>	20	<i>acyclovir 50mg/ml inj</i>	48	ALCOHOL SWAB 1X1 (DIABETIC)	73
<i>accutane 10mg cap</i>	58	<i>acyclovir 800mg tab</i>	48	ALECENSA 150MG CAP	35
<i>accutane 20mg cap</i>	58	ADACEL INJ	88	<i>alendronate sodium 10mg tab</i>	64
<i>accutane 40mg cap</i>	58	ADACEL SYRINGE	88	<i>alendronate sodium 35mg tab</i>	64
<i>acebutolol 200mg cap</i>	48	<i>adapalene 0.3% gel</i>	58	<i>alendronate sodium 70mg tab</i>	64
<i>acebutolol 400mg cap</i>	48	ADBRY 150MG/ML SYRINGE	61	<i>alendronate sodium 70mg/75ml oral soln</i>	64
<i>acetaminophen/codeine phosphate 24mg-2.4mg/ml oral soln</i>	6	<i>adefovir dipivoxil 10mg tab</i>	47	<i>alfuzosin 10mg er tab</i>	69
<i>acetaminophen/hydrocodone bitartrate 21.7mg-0.5mg/ml oral soln</i>	6	ADEMPAS 0.5MG TAB	52	<i>aliskiren 150mg tab</i>	30
<i>acetazolamide 125mg tab</i>	63	ADEMPAS 1.5MG TAB	52	<i>aliskiren 300mg tab</i>	30
<i>acetazolamide 250mg tab</i>	63	ADEMPAS 1MG TAB	52	<i>allopurinol 100mg tab</i>	69
<i>acetazolamide 500mg er cap</i>	63	ADEMPAS 2.5MG TAB	52	<i>allopurinol 300mg tab</i>	69
<i>acetic acid 2% otic soln</i>	80	ADEMPAS 2MG TAB	52		
		ADVAIR 115-21MCG HFA INHALER	10		
		ADVAIR 230-21MCG HFA INHALER	10		
		ADVAIR 45-21MCG/ACT HFA INHALER	11		
		AIMOVIG 140MG/ML	73		
		AUTO-INJECTOR			
		AIMOVIG 70MG/ML	73		
		AUTO-INJECTOR			

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

ALPHABETICAL LISTING OF DRUGS

ALOGLIPTIN 12.5MG TAB	21	<i>amantadine 10mg/ml oral soln</i>	40	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28
ALOGLIPTIN 12.5MG/METFORMIN 1000MG TAB	20	<i>ambrisentan 10mg tab</i>	52	<i>medoxomil 5-12.5-20mg tab</i>	
ALOGLIPTIN 12.5MG/METFORMIN 500MG TAB	20	<i>ambrisentan 5mg tab</i>	52	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28
ALOGLIPTIN 12.5MG/PIOGLITAZONE 30MG TAB	20	<i>amethia 91 day pack</i>	54	<i>medoxomil 5-12.5-40mg tab</i>	
ALOGLIPTIN 25MG TAB	21	<i>amikacin 250mg/ml inj</i>	2	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28
ALOGLIPTIN 25MG/PIOGLITAZONE 15MG TAB	20	<i>amiloride 5mg tab</i>	63	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28
ALOGLIPTIN 25MG/PIOGLITAZONE 30MG TAB	20	AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	63	<i>medoxomil 5-25-40mg tab</i>	
ALOGLIPTIN 45MG TAB	20	<i>amiodarone 200mg tab</i>	9	<i>amlodipine/hydrochlorothiazide/valsartan</i>	28
ALOGLIPTIN 6.25MG TAB	21	<i>amiodarone 400mg tab</i>	9	<i>10-12.5-160mg tab</i>	
<i>alosepron 0.5mg tab</i>	68	<i>amitriptyline 100mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	28
<i>alosepron 1mg tab</i>	68	<i>amitriptyline 10mg tab</i>	19	<i>10-25-160mg tab</i>	
<i>alprazolam 0.25mg tab</i>	8	<i>amitriptyline 150mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alprazolam 0.5mg tab</i>	8	<i>amitriptyline 25mg tab</i>	19	<i>10-25-320mg tab</i>	
<i>alprazolam 1mg tab</i>	8	<i>amitriptyline 50mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alprazolam 2mg tab</i>	8	<i>amitriptyline 75mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>altavera 28 day pack</i>	53	<i>amlodipine 10mg tab</i>	50	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALUNBRIG 180MG TAB	35	<i>amlodipine 2.5mg tab</i>	50	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALUNBRIG 30MG TAB	35	<i>amlodipine 5mg tab</i>	50	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALUNBRIG 90MG TAB	35	<i>amlodipine/benazepril 10-20mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALUNBRIG INITIATION PACK	35	<i>amlodipine/benazepril 10-40mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALVESCO 160MCG INHALER	10	<i>amlodipine/benazepril 2.5-10mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALVESCO 80MCG INHALER	10	<i>amlodipine/benazepril 5-10mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alyacen 1/35 pack</i>	54	<i>amlodipine/benazepril 5-20mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alyq 20mg tab</i>	52	<i>amlodipine/benazepril 5-40mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>amabelz 0.5/0.1mg 28 day pack</i>	66	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>amantadine 100mg cap</i>	40	<i>medoxomil 10-12.5-40mg tab</i>		<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
		<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
		<i>medoxomil 10-25-40mg tab</i>		<i>amlodipine/hydrochlorothiazide/valsartan</i>	29

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

ALPHABETICAL LISTING OF DRUGS

<i>ammonium lactate 12% cream</i>	62	<i>amphetamine/dextroamphetamine 10mg tab</i>	1	<i>apri 28 day pack</i>	54
<i>ammonium lactate 12% lotion</i>	62	<i>amphetamine/dextroamphetamine 12.5mg tab</i>	1	APTIOM 200MG TAB	13
<i>amnesteem 10mg cap</i>	58	<i>amphetamine/dextroamphetamine 15mg tab</i>	1	APTIOM 400MG TAB	14
<i>amnesteem 20mg cap</i>	58	<i>amphetamine/dextroamphetamine 20mg tab</i>	1	APTIOM 600MG TAB	14
<i>amnesteem 40mg cap</i>	58	<i>amphetamine/dextroamphetamine 25mg er cap</i>	1	APTIOM 800MG TAB	14
<i>amoxapine 100mg tab</i>	19	<i>amphetamine/dextroamphetamine 30mg tab</i>	1	APTIVUS 250MG CAP	45
<i>amoxapine 150mg tab</i>	19	<i>amphetamine/dextroamphetamine 5mg tab</i>	1	ARALAST 1000MG INJ	85
<i>amoxapine 25mg tab</i>	19	<i>amphetamine/dextroamphetamine 7.5mg tab</i>	1	<i>aranelle 28 pack</i>	54
<i>amoxapine 50mg tab</i>	19	AMPHOTERICIN B 50MG INJ	24	ARCALYST 220MG INJ	4
AMOXICILLIN 125MG CHEW TAB	81	<i>ampicillin 1000mg inj</i>	81	AREXVY 120MCG/0.5ML INJ	90
<i>amoxicillin 250mg cap</i>	81	<i>ampicillin 100mg/ml inj</i>	82	ARIKAYCE 590MG/8.4ML INH SUSP	2
AMOXICILLIN 250MG CHEW TAB	81	AMPICILLIN 125MG INJ	82	<i>aripiprazole 10mg odt</i>	44
<i>amoxicillin 250mg/clavulanate 125mg tab</i>	82	<i>ampicillin 500mg cap</i>	82	<i>aripiprazole 10mg tab</i>	45
<i>amoxicillin 25mg/ml susp</i>	81	<i>ampicillin/sulbactam 1000-500mg inj</i>	82	<i>aripiprazole 15mg odt</i>	45
<i>amoxicillin 40mg/ml susp</i>	81	<i>ampicillin/sulbactam 100-50mg/ml inj</i>	82	<i>aripiprazole 15mg tab</i>	45
<i>amoxicillin 500mg cap</i>	81	<i>ampicillin/sulbactam 2000-1000mg inj</i>	82	<i>aripiprazole 1mg/ml oral soln</i>	45
<i>amoxicillin 500mg tab</i>	81	<i>anagrelide 0.5mg cap</i>	70	<i>aripiprazole 20mg tab</i>	45
<i>amoxicillin 50mg/ml susp</i>	81	<i>anagrelide 1mg cap</i>	70	<i>aripiprazole 2mg tab</i>	45
<i>amoxicillin 80mg/ml susp</i>	81	<i>anastrozole 1mg tab</i>	34	<i>aripiprazole 30mg tab</i>	45
<i>amoxicillin 875mg tab</i>	81	ANNOVERA 0.15-0.013MG/24HR VAGINAL SYSTEM	57	<i>aripiprazole 5mg tab</i>	45
AMOXICILLIN/CLAVULANATE 200-28.5MG CHEW TAB	82	ANORO ELLIPTA 62.5-25MCG INHALER	11	ARISTADA 1064MG/3.9ML SYRINGE	45
AMOXICILLIN/CLAVULANATE 400-57MG CHEW TAB	82	APRACLONIDINE 0.5% OPHTH SOLN	79	ARISTADA 441MG/1.6ML SYRINGE	45
<i>amoxicillin/clavulanate 500-125mg tab</i>	82	<i>aprepitant 125mg cap</i>	24	ARISTADA 662MG/2.4ML SYRINGE	45
<i>amoxicillin/clavulanate 875-125mg tab</i>	82	<i>aprepitant 125mg/aprepitant 80mg cap therapy pack</i>	24	ARISTADA 675MG/2.4ML SYRINGE	45
<i>amoxicillin/k clavulanate 200-28.5mg/5ml susp</i>	82	<i>aprepitant 40mg cap</i>	24	ARISTADA 882MG/3.2ML SYRINGE	45
<i>amoxicillin/k clavulanate 250-62.5mg/5ml susp</i>	82	<i>aprepitant 80mg cap</i>	24	<i>armodafinil 150mg tab</i>	1
<i>amoxicillin/k clavulanate 400-57mg/5ml susp</i>	82			<i>armodafinil 200mg tab</i>	1
<i>amoxicillin/k clavulanate 600-42.9mg/5ml susp</i>	82			<i>armodafinil 250mg tab</i>	1
				<i>armodafinil 50mg tab</i>	2
				ARNUITY 100MCG INHALER	10
				ARNUITY 200MCG INHALER	10
				ARNUITY 50MCG INHALER	10

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

ALPHABETICAL LISTING OF DRUGS

<i>asenapine 10mg sl tab</i>	43	<i>atovaquone/proguanil</i>	32	<i>azithromycin 250mg tab</i>	72
<i>asenapine 2.5mg sl tab</i>	43	<i>250-100mg tab</i>		<i>azithromycin 40mg/ml</i>	72
<i>asenapine 5mg sl tab</i>	43	<i>atovaquone/proguanil</i>	32	<i>susp</i>	
<i>ashlyna 91 day pack</i>	54	<i>62.5-25mg tab</i>		<i>azithromycin 500mg inj</i>	72
ASMANEX 100MCG HFA	10	<i>atropine sulfate 1% ophth</i>	79	<i>azithromycin 500mg tab</i>	72
INHALER		<i>soln</i>		<i>azithromycin 500mg tab</i>	72
ASMANEX 110MCG	10	<i>atropine</i>	23	<i>pack</i>	
(30ACT) TWISTHALER		<i>sulfate/diphenoxylate</i>		<i>azithromycin 600mg tab</i>	72
ASMANEX 200MCG HFA	10	<i>0.025-2.5mg tab</i>		<i>aztreonam 1000mg inj</i>	31
INHALER		ATROVENT 17MCG	10	<i>aztreonam 2000mg inj</i>	31
ASMANEX 220MCG	10	INHALER			
(120ACT) TWISTHALER		<i>aubra 28 day pack</i>	54	B	
ASMANEX 220MCG	10	AUGTYRO 40MG CAP	35	BACITRACIN	79
(30ACT) TWISTHALER		AUSTEDO 12MG ER TAB	84	500UNIT/GM OPHTH	
ASMANEX 220MCG	10	AUSTEDO 12MG TAB	84	OINTMENT	
(60ACT) TWISTHALER		AUSTEDO 24MG ER TAB	84	<i>bacitracin/polymyxin B</i>	79
ASMANEX 50MCG HFA	10	AUSTEDO 6-12-24MG	84	<i>0.5-10unit/mg ophth</i>	
INHALER		XR TAB TITRATION		<i>ointment</i>	
<i>aspirin/dipyridamole</i>	70	PACK		<i>baclofen 10mg tab</i>	77
<i>25-200mg er cap</i>		AUSTEDO 6MG ER TAB	84	<i>baclofen 20mg tab</i>	77
<i>atazanavir 150mg cap</i>	45	AUSTEDO 6MG TAB	84	<i>balsalazide disodium</i>	68
<i>atazanavir 200mg cap</i>	45	AUSTEDO 9MG TAB	84	<i>750mg cap</i>	
<i>atazanavir 300mg cap</i>	45	AUVELITY 105-45MG ER	17	BALVERSA 3MG TAB	35
<i>atenolol 100mg tab</i>	48	TAB		BALVERSA 4MG TAB	35
<i>atenolol 25mg tab</i>	49	<i>aviane 28 pack</i>	54	BALVERSA 5MG TAB	35
<i>atenolol 50mg tab</i>	49	AVONEX 30MCG/0.5ML	84	<i>balziva 28 day pack</i>	54
<i>atenolol/chlorthalidone</i>	29	AUTO-INJECTOR		BAQSIMI 3MG/DOSE	21
<i>100-25mg tab</i>		AVONEX 30MCG/0.5ML	84	NASAL POWDER	
<i>atenolol/chlorthalidone</i>	29	SYRINGE		BAXDELA 450MG TAB	67
<i>50-25mg tab</i>		AYVAKIT 100MG TAB	35	BCG LIVE TICE STRAIN	89
<i>atomoxetine 100mg cap</i>	1	AYVAKIT 200MG TAB	35	50MG INJ	
<i>atomoxetine 10mg cap</i>	1	AYVAKIT 25MG TAB	35	<i>benazepril 10mg tab</i>	26
<i>atomoxetine 18mg cap</i>	1	AYVAKIT 300MG TAB	35	<i>benazepril 20mg tab</i>	26
<i>atomoxetine 25mg cap</i>	1	AYVAKIT 50MG TAB	35	<i>benazepril 40mg tab</i>	26
<i>atomoxetine 40mg cap</i>	1	<i>azathioprine 50mg tab</i>	76	<i>benazepril 5mg tab</i>	26
<i>atomoxetine 60mg cap</i>	1	<i>azelaic acid 15% gel</i>	62	<i>benazepril/hydrochloroth</i>	29
<i>atomoxetine 80mg cap</i>	1	<i>azelastine 0.05% ophth</i>	80	<i>iazide 10-12.5mg tab</i>	
<i>atorvastatin 10mg tab</i>	25	<i>soln</i>		<i>benazepril/hydrochloroth</i>	29
<i>atorvastatin 20mg tab</i>	25	<i>azelastine 0.1%</i>	77	<i>iazide 20-12.5mg tab</i>	
<i>atorvastatin 40mg tab</i>	26	<i>(137mcg/act) nasal</i>		<i>benazepril/hydrochloroth</i>	29
<i>atorvastatin 80mg tab</i>	26	<i>inhaler</i>		<i>iazide 20-25mg tab</i>	
<i>atovaquone 150mg/ml</i>	30	<i>azithromycin 20mg/ml</i>	72	<i>benazepril/hydrochloroth</i>	29
<i>susp</i>		<i>susp</i>		<i>iazide 5-6.25mg tab</i>	
		<i>azithromycin 250mg pack</i>	72	BENLYSTA 200MG/ML	77
				AUTO-INJECTOR	

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

ALPHABETICAL LISTING OF DRUGS

BENLYSTA 200MG/ML SYRINGE	77	<i>bethanechol chloride 5mg tab</i>	89	BOSULIF 100MG TAB	35
BENZNIDAZOLE 100MG TAB	7	<i>bexarotene 1% gel</i>	59	BOSULIF 400MG TAB	36
BENZNIDAZOLE 12.5MG TAB	7	<i>bexarotene 75mg cap</i>	39	BOSULIF 500MG TAB	36
<i>benztropine mesylate 0.5mg tab</i>	39	BEXSERO SYRINGE	89	BOSULIF 50MG CAP	36
<i>benztropine mesylate 1mg tab</i>	40	<i>bicalutamide 50mg tab</i>	34	BRAFTOVI 75MG CAP	36
<i>benztropine mesylate 2mg tab</i>	40	BICILLIN L-A 1200000UNIT/2ML SYRINGE	82	BREO ELLIPTA 100-25MCG INHALER	11
BERINERT 500UNIT INJ	70	BICILLIN L-A 2400000UNIT/4ML SYRINGE	82	BREO ELLIPTA 200-25MCG INHALER	11
BESREMI 500MCG/ML SYRINGE	39	BICILLIN L-A 600000UNIT/ML SYRINGE	82	BREO ELLIPTA 50-25MCG INH	11
<i>betamethasone 0.05% aug cream</i>	60	BIKTARVY 30-120-15MG TAB	45	<i>breyana 160-4.5mcg/act inh</i>	11
<i>betamethasone 0.05% aug lotion</i>	60	BIKTARVY 50-200-25MG TAB	45	<i>breyana 80-4.5mcg/act inh</i>	11
<i>betamethasone 0.05% aug ointment</i>	60	<i>bimatoprost 0.03% ophth soln</i>	80	BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	11
<i>betamethasone 0.05% cream</i>	60	<i>bisoprolol fumarate 10mg tab</i>	49	<i>briellyn 28 day pack</i>	54
<i>betamethasone 0.05% lotion</i>	60	<i>bisoprolol fumarate 5mg tab</i>	49	BRILINTA 60MG TAB	70
<i>betamethasone 0.05% ointment</i>	60	<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	29	BRILINTA 90MG TAB	70
<i>betamethasone 0.1% cream</i>	60	<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	29	<i>brimonidine tartrate 0.1% ophth soln</i>	79
<i>betamethasone 0.1% lotion</i>	60	<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	29	<i>brimonidine tartrate 0.15% ophth soln</i>	79
<i>betamethasone 0.1% ointment</i>	60	BIVIGAM 5GM/50ML INJ	81	<i>brimonidine tartrate 0.2% ophth soln</i>	79
BETAXOLOL 0.5% OPTH SOLN	78	<i>blisovi 21 fe 1.5/30 28 day pack</i>	54	<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	78
<i>betaxolol 10mg tab</i>	49	<i>blisovi 24 fe 1/20 28 day pack</i>	54	<i>brinzolamide 1% ophth susp</i>	80
<i>betaxolol 20mg tab</i>	49	BOOSTRIX INJ	88	BRIVIACT 100MG TAB	14
<i>bethanechol chloride 10mg tab</i>	89	BOOSTRIX SYRINGE	88	BRIVIACT 10MG TAB	14
<i>bethanechol chloride 25mg tab</i>	89	<i>bosentan 125mg tab</i>	52	BRIVIACT 10MG/ML	14
<i>bethanechol chloride 50mg tab</i>	89	<i>bosentan 62.5mg tab</i>	52	BRIVIACT 25MG TAB	14
		BOSULIF 100MG CAP	35	BRIVIACT 50MG TAB	14
				BRIVIACT 75MG TAB	14
				<i>bromfenac 0.07% ophth soln</i>	80
				<i>bromocriptine 2.5mg tab</i>	40
				<i>bromocriptine 5mg cap</i>	40
				BRONCHITOL 40MG INH POWDER	85

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

ALPHABETICAL LISTING OF DRUGS

BRUKINSA 80MG CAP	36	<i>bupirone 10mg tab</i>	8	<i>candesartan cilexetil 8mg</i>	27
<i>budesonide 0.125mg/ml</i>	10	<i>bupirone 15mg tab</i>	8	<i>tab</i>	
<i>inh susp</i>		<i>bupirone 30mg tab</i>	8	CAPLYTA 10.5MG CAP	41
<i>budesonide 0.25mg/ml</i>	10	<i>bupirone 5mg tab</i>	8	CAPLYTA 21MG CAP	41
<i>inh susp</i>		<i>bupirone 7.5mg tab</i>	8	CAPLYTA 42MG CAP	41
<i>budesonide 0.5mg/ml inh</i>	10	<i>butorphanol tartrate</i>	7	CAPRELSA 100MG TAB	36
<i>susp</i>		<i>1mg/act nasal inhaler</i>		CAPRELSA 300MG TAB	36
<i>budesonide 2mg/act</i>	7	BYDUREON	21	<i>captopril 100mg tab</i>	26
<i>rectal foam</i>		2MG/0.85ML		<i>captopril 12.5mg tab</i>	26
<i>budesonide 3mg dr cap</i>	57	AUTO-INJECTOR		<i>captopril 25mg tab</i>	26
<i>budesonide 9mg er tab</i>	57			<i>captopril 50mg tab</i>	26
<i>budesonide/formoterol</i>	11	C		<i>carbamazepine 100mg</i>	14
<i>fumarate 160-45mcg</i>		<i>cabergoline 0.5mg tab</i>	66	<i>chew tab</i>	
<i>inhaler</i>		CABLIVI 11MG INJ	70	<i>carbamazepine 100mg er</i>	14
<i>budesonide/formoterol</i>	11	CABOMETRYX 20MG TAE	36	<i>cap</i>	
<i>fumarate 80-45mcg</i>		CABOMETRYX 40MG TAE	36	<i>carbamazepine 100mg er</i>	14
<i>inhaler</i>		CABOMETRYX 60MG TAE	36	<i>tab</i>	
<i>bumetanide 0.5mg tab</i>	63	<i>calcipotriene 0.005%</i>	59	<i>carbamazepine 200mg er</i>	14
<i>bumetanide 1mg tab</i>	63	<i>cream</i>		<i>cap</i>	
<i>bumetanide 2mg tab</i>	63	<i>calcipotriene 0.005%</i>	59	<i>carbamazepine 200mg er</i>	14
<i>buprenorphine 2mg sl tab</i>	7	<i>ointment</i>		<i>tab</i>	
<i>buprenorphine 8mg sl tab</i>	7	<i>calcipotriene 0.005%</i>	60	<i>carbamazepine 200mg</i>	14
<i>buprenorphine/naloxone</i>	7	<i>topical soln</i>		<i>tab</i>	
<i>12-3mg sl film</i>		<i>calcitriol 0.25mcg cap</i>	65	<i>carbamazepine 20mg/ml</i>	14
<i>buprenorphine/naloxone</i>	7	<i>calcitriol 0.5mcg cap</i>	65	<i>susp</i>	
<i>2-0.5mg sl film</i>		<i>calcitriol 1mcg/ml oral</i>	65	<i>carbamazepine 300mg er</i>	14
<i>buprenorphine/naloxone</i>	7	<i>soln</i>		<i>cap</i>	
<i>2-0.5mg sl tab</i>		<i>calcium acetate 667mg</i>	68	<i>carbamazepine 400mg er</i>	14
<i>buprenorphine/naloxone</i>	7	<i>cap</i>		<i>tab</i>	
<i>4-1mg sl film</i>		CALQUENCE 100MG	36	<i>carbidopa 25mg tab</i>	39
<i>buprenorphine/naloxone</i>	7	CAP		<i>carbidopa/entacapone/le</i>	40
<i>8-2mg sl film</i>		CALQUENCE 100MG	36	<i>vodopa 12.5-200-50mg</i>	
<i>buprenorphine/naloxone</i>	7	TAB		<i>tab</i>	
<i>8-2mg sl tab</i>		<i>camila 28 day 0.35mg</i>	57	<i>carbidopa/entacapone/le</i>	40
<i>bupropion 100mg er tab</i>	17	<i>pack</i>		<i>vodopa 18.75-200-75mg</i>	
<i>bupropion 100mg tab</i>	17	CAMZYOS 10MG CAP	51	<i>tab</i>	
<i>bupropion 150mg sr (12</i>	17	CAMZYOS 15MG CAP	51	<i>carbidopa/entacapone/le</i>	40
<i>hr) tab</i>		CAMZYOS 2.5MG CAP	51	<i>vodopa 25-200-100mg</i>	
<i>bupropion 150mg sr tab</i>	85	CAMZYOS 5MG CAP	51	<i>tab</i>	
<i>bupropion 150mg xl (24</i>	17	<i>candesartan cilexetil</i>	27	<i>carbidopa/entacapone/le</i>	40
<i>hr) tab</i>		<i>16mg tab</i>		<i>vodopa 31.25-200-125mg</i>	
<i>bupropion 200mg er tab</i>	17	<i>candesartan cilexetil</i>	27	<i>tab</i>	
<i>bupropion 300mg er tab</i>	17	<i>32mg tab</i>			
<i>bupropion 75mg tab</i>	17	<i>candesartan cilexetil 4mg</i>	27		
		<i>tab</i>			

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

ALPHABETICAL LISTING OF DRUGS

<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	40	CEFADROXIL 1000MG TAB	52	<i>celecoxib 50mg cap</i>	4
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	40	<i>cefadroxil 100mg/ml susp</i>	52	<i>cephalexin 250mg cap</i>	52
CARBIDOPA/LEVODOPA 10-100MG ODT	40	<i>cefadroxil 500mg cap</i>	52	<i>cephalexin 25mg/ml susp</i>	52
<i>carbidopa/levodopa 10-100mg tab</i>	40	<i>cefadroxil 50mg/ml susp</i>	52	<i>cephalexin 500mg cap</i>	52
<i>carbidopa/levodopa 25-100mg er tab</i>	40	<i>cefazolin 1000mg inj</i>	52	<i>cephalexin 50mg/ml susp</i>	52
CARBIDOPA/LEVODOPA 25-100MG ODT	40	<i>cefazolin 200mg/ml inj</i>	52	CERDELGA 84MG CAP	70
<i>carbidopa/levodopa 25-100mg tab</i>	40	<i>cefazolin 500mg inj</i>	52	<i>cevimeline 30mg cap</i>	77
CARBIDOPA/LEVODOPA 25-250MG ODT	40	<i>cefdinir 25mg/ml susp</i>	53	<i>chlordiazepoxide 10mg cap</i>	8
<i>carbidopa/levodopa 25-250mg tab</i>	40	<i>cefdinir 300mg cap</i>	53	<i>chlordiazepoxide 25mg cap</i>	8
<i>carbidopa/levodopa 50-200mg er tab</i>	40	<i>cefdinir 50mg/ml susp</i>	53	<i>chlordiazepoxide 5mg cap</i>	8
<i>carglumic acid 200mg tab for oral susp</i>	65	<i>cefepime 1000mg inj</i>	53	<i>chlorhexidine gluconate 0.12% mouthwash</i>	77
<i>carisoprodol 350mg tab</i>	77	<i>cefepime 2000mg inj</i>	53	<i>chloroquine phosphate 250mg tab</i>	32
CARTEOLOL 1% OPHTH SOLN	78	<i>cefepime 20mg/ml susp</i>	53	<i>chloroquine phosphate 500mg tab</i>	32
<i>cartia 120mg er cap</i>	50	<i>cefexime 400mg cap</i>	53	<i>chlorpromazine 100mg tab</i>	44
<i>cartia 180mg er cap</i>	50	<i>cefexime 40mg/ml susp</i>	53	CHLORPROMAZINE 100MG/ML ORAL SOLN	44
<i>cartia 240mg er cap</i>	50	<i>cefoxitin 1gm inj</i>	53	<i>chlorpromazine 10mg tab</i>	44
<i>cartia 300mg er cap</i>	50	<i>cefoxitin 200mg/ml inj</i>	53	<i>chlorpromazine 200mg tab</i>	44
<i>carvedilol 12.5mg tab</i>	48	<i>cefoxitin 2gm inj</i>	53	<i>chlorpromazine 25mg tab</i>	44
<i>carvedilol 25mg tab</i>	48	<i>cefpodoxime 100mg tab</i>	53	CHLORPROMAZINE 30MG/ML ORAL SOLN	44
<i>carvedilol 3.125mg tab</i>	48	<i>cefpodoxime 10mg/ml susp</i>	53	<i>chlorpromazine 50mg tab</i>	44
<i>carvedilol 6.25mg tab</i>	48	<i>cefpodoxime 200mg tab</i>	53	<i>chlorthalidone 25mg tab</i>	63
<i>caspofungin acetate 50mg inj</i>	24	<i>cefpodoxime 20mg/ml susp</i>	53	<i>chlorthalidone 50mg tab</i>	63
<i>caspofungin acetate 70mg inj</i>	24	<i>cefprozil 250mg tab</i>	53	<i>chlorzoxazone 500mg tab</i>	77
CAYSTON 75MG INH SOLN	31	<i>cefprozil 25mg/ml susp</i>	53	<i>cholestyramine resin (sugar-free) 4000mg powder for oral susp</i>	25
CEFACLOR 250MG CAP	53	<i>cefprozil 500mg tab</i>	53	<i>cholestyramine resin 4000mg powder for oral susp</i>	25
CEFACLOR 500MG CAP	53	<i>cefprozil 50mg/ml susp</i>	53	CIBINQO 100MG TAB	61
		<i>ceftazidime 1gm inj</i>	53	CIBINQO 200MG TAB	61
		<i>ceftazidime 200mg/ml inj</i>	53	CIBINQO 50MG TAB	61
		<i>ceftazidime 2gm inj</i>	53	<i>ciclopirox 0.77% cream</i>	59
		<i>ceftriaxone 10gm inj</i>	53	<i>ciclopirox 0.77% gel</i>	59
		<i>ceftriaxone 1gm inj</i>	53	<i>ciclopirox 1% shampoo</i>	59
		<i>ceftriaxone 250mg inj</i>	53		
		<i>ceftriaxone 2gm inj</i>	53		
		<i>ceftriaxone 500mg inj</i>	53		
		<i>cefuroxime 1500mg inj</i>	53		
		<i>cefuroxime 250mg tab</i>	53		
		<i>cefuroxime 500mg tab</i>	53		
		<i>cefuroxime 750mg inj</i>	53		
		<i>celecoxib 100mg cap</i>	4		
		<i>celecoxib 200mg cap</i>	4		
		<i>celecoxib 400mg cap</i>	4		

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

ALPHABETICAL LISTING OF DRUGS

<i>ciclopirox 8% topical soln</i>	59	<i>clarithromycin 500mg tab</i>	72	<i>clobetasol propionate 0.05% lotion</i>	60
CILASTATIN/IMIPENEM 250-250MG INJ	31	CLARITHROMYCIN 50MG/ML SUSP	72	<i>clobetasol propionate 0.05% ointment</i>	60
<i>cilastatin/imipenem 500-500mg inj</i>	31	<i>clindamycin 1% gel</i>	58	<i>clobetasol propionate 0.05% shampoo</i>	60
<i>cilostazol 100mg tab</i>	70	<i>clindamycin 1% lotion</i>	58	<i>clobetasol propionate 0.05% topical soln</i>	60
<i>cilostazol 50mg tab</i>	70	<i>clindamycin 1% topical soln</i>	58	<i>clobetasol propionate 0.05% topical spray</i>	60
CIMDUO 300-300MG TAB	45	<i>clindamycin 12mg/ml inj</i>	31	<i>clodan 0.05% shampoo</i>	61
<i>cimetidine 200mg tab</i>	88	<i>clindamycin 150mg cap</i>	31	<i>clomipramine 25mg cap</i>	19
<i>cimetidine 300mg tab</i>	88	<i>clindamycin 150mg/ml (4ml) inj</i>	31	<i>clomipramine 50mg cap</i>	19
<i>cimetidine 400mg tab</i>	88	<i>clindamycin 150mg/ml (6ml) inj</i>	31	<i>clomipramine 75mg cap</i>	19
<i>cimetidine 800mg tab</i>	88	<i>clindamycin 15mg/ml oral soln</i>	31	<i>clonazepam 0.125mg odt</i>	13
CIMZIA 200MG INJ	68	<i>clindamycin 18mg/ml inj</i>	31	<i>clonazepam 0.25mg odt</i>	13
CIMZIA 200MG/ML SYRINGE	68	<i>clindamycin 2% vaginal cream</i>	91	<i>clonazepam 0.5mg odt</i>	13
<i>cinacalcet 30mg tab</i>	65	<i>clindamycin 300mg cap</i>	31	<i>clonazepam 0.5mg tab</i>	13
<i>cinacalcet 60mg tab</i>	65	<i>clindamycin 6mg/ml inj</i>	31	<i>clonazepam 1mg odt</i>	13
<i>cinacalcet 90mg tab</i>	65	<i>clindamycin 75mg cap</i>	31	<i>clonazepam 1mg tab</i>	13
CINRYZE 500UNIT INJ	70	<i>clindamycin/benzoyl peroxide 1-5% gel</i>	58	<i>clonazepam 2mg odt</i>	13
CIPROFLOXACIN 0.2% OTIC SOLN	80	CLINIMIX 4.25/10 INJ	78	<i>clonazepam 2mg tab</i>	13
<i>ciprofloxacin 0.3% ophthalmic soln</i>	79	CLINIMIX 4.25/5 INJ	78	<i>clonidine 0.1mg er tab</i>	1
<i>ciprofloxacin 250mg tab</i>	67	CLINIMIX 5/15 INJ	78	<i>clonidine 0.1mg tab</i>	28
<i>ciprofloxacin 2mg/ml inj</i>	67	CLINIMIX 5/20 INJ	78	<i>clonidine 0.1mg/24hr weekly patch</i>	28
<i>ciprofloxacin 500mg tab</i>	67	CLINIMIX E 2.75/5 INJ	78	<i>clonidine 0.2mg tab</i>	28
<i>ciprofloxacin 750mg tab</i>	67	CLINIMIX E 4.25/10 INJ	78	<i>clonidine 0.2mg/24hr weekly patch</i>	28
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	81	CLINIMIX E 4.25/5 INJ	78	<i>clonidine 0.3mg tab</i>	28
<i>citalopram 10mg tab</i>	17	CLINIMIX E 5/15 INJ	78	<i>clonidine 0.3mg/24hr weekly patch</i>	28
<i>citalopram 20mg tab</i>	17	CLINIMIX E 5/20 INJ	78	<i>clopidogrel 75mg tab</i>	70
<i>citalopram 2mg/ml oral soln</i>	17	<i>clinisol 15 inj</i>	78	<i>clorazepate dipotassium 15mg tab</i>	8
<i>citalopram 40mg tab</i>	17	<i>clobazam 10mg tab</i>	13	<i>clotrimazole 1% cream</i>	59
<i>claravis 10mg cap</i>	58	<i>clobazam 2.5mg/ml susp</i>	13	<i>clotrimazole 10mg lozenge</i>	77
<i>claravis 20mg cap</i>	58	<i>clobazam 20mg tab</i>	13	<i>clotrimazole/betamethasone 1-0.05% cream</i>	59
<i>claravis 30mg cap</i>	58	<i>clobetasol propionate 0.05% cream</i>	60	<i>clotrimazole/betamethasone 1-0.05% lotion</i>	59
<i>claravis 40mg cap</i>	58	<i>clobetasol propionate 0.05% e cream</i>	60	<i>clozapine 100mg odt</i>	43
<i>clarithromycin 250mg tab</i>	72	<i>clobetasol propionate 0.05% foam</i>	60	<i>clozapine 100mg tab</i>	43
CLARITHROMYCIN 25MG/ML SUSP	72	<i>clobetasol propionate 0.05% gel</i>	60		
<i>clarithromycin 500mg er tab</i>	72				

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

ALPHABETICAL LISTING OF DRUGS

CLOZAPINE 12.5MG ODT	43	<i>constulose 10gm/15ml oral soln</i>	72	<i>cyclosporine modified 25mg cap</i>	76
<i>clozapine 150mg odt</i>	43	COPIKTRA 15MG CAP	36	<i>cyclosporine modified 50mg cap</i>	76
<i>clozapine 200mg odt</i>	43	COPIKTRA 25MG CAP	36	<i>cyred 28 day pack</i>	54
<i>clozapine 200mg tab</i>	43	CORLANOR 5MG TAB	52	CYSTADROPS 0.37% OPHTH SOLN	80
<i>clozapine 25mg odt</i>	43	CORLANOR 5MG/5ML	52	CYSTAGON 150MG CAP	69
<i>clozapine 25mg tab</i>	43	ORAL SOLN		CYSTAGON 50MG CAP	69
<i>clozapine 50mg tab</i>	43	CORLANOR 7.5MG TAB	52	CYSTARAN 0.44% OPHTH SOLN	80
COARTEM 20-120MG TAB	32	COTELLIC 20MG TAB	36		
<i>codeine phosphate/acetaminophen 15-300mg tab</i>	6	CREON 120000-24000-76000UNIT DR CAP	62	D	
<i>codeine phosphate/acetaminophen 30-300mg tab</i>	6	CREON 15000-3000-9500UNIT DR CAP	62	<i>dalfampridine 10mg er tab</i>	84
<i>codeine phosphate/acetaminophen 60-300mg tab</i>	6	CREON 180000-36000-114000UNIT NIT DR CAP	62	DALVANCE 500MG INJ	31
CODEINE SULFATE 15MG TAB	5	CREON 30000-6000-19000UNIT DR CAP	62	<i>danazol 100mg cap</i>	7
CODEINE SULFATE 30MG TAB	5	CREON 60000-12000-38000UNIT DR CAP	62	<i>danazol 200mg cap</i>	7
CODEINE SULFATE 60MG TAB	5	<i>cromolyn sodium 20mg/ml oral soln</i>	68	<i>danazol 50mg cap</i>	7
<i>colchicine 0.6mg tab</i>	69	CROMOLYN SODIUM 4% OPHTH SOLN	80	<i>dantrolene sodium 100mg cap</i>	77
<i>colchicine/probenecid 0.5-500mg tab</i>	69	<i>cryselle 28 pack</i>	54	<i>dantrolene sodium 25mg cap</i>	77
<i>colesevelam 625mg tab</i>	25	<i>cyclobenzaprine 10mg tab</i>	77	<i>dantrolene sodium 50mg cap</i>	77
<i>colestipol 1000mg tab</i>	25	<i>cyclobenzaprine 5mg tab</i>	77	<i>dapsone 100mg tab</i>	31
<i>colestipol 5000mg granules for oral susp</i>	25	CYCLOPHOSPHAMIDE 25MG TAB	32	<i>dapsone 25mg tab</i>	31
<i>colistin 75mg/ml inj</i>	31	CYCLOPHOSPHAMIDE 50MG TAB	32	DAPTACEL INJ	88
COMBIVENT 20-100MCG/ACT INH	11	<i>cyclosporine 0.05% ophthalmic susp</i>	79	<i>daptomycin 500mg inj</i>	31
COMETRIQ CAP 100MG DAILY DOSE PACK	36	<i>cyclosporine 100mg cap</i>	76	<i>darunavir 600mg tab</i>	45
COMETRIQ CAP 140MG DAILY DOSE PACK	36	<i>cyclosporine 25mg cap</i>	76	<i>darunavir 800mg tab</i>	45
COMETRIQ CAP 60MG DAILY DOSE PACK	36	<i>cyclosporine modified 100mg cap</i>	76	DAURISMO 100MG TAB	34
COMPLERA 200-25-300MG TAB	45	<i>cyclosporine modified 100mg/ml oral soln</i>	76	DAURISMO 25MG TAB	34
<i>compro 25mg rectal supp</i>	44			<i>deblitane 0.35mg tab 28 day pack</i>	57
				<i>deferasirox 125mg tab for oral susp</i>	23
				<i>deferasirox 180mg granules</i>	23
				<i>deferasirox 180mg tab</i>	23
				<i>deferasirox 250mg tab for oral susp</i>	23
				<i>deferasirox 360mg granules</i>	23
				<i>deferasirox 360mg tab</i>	23

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

ALPHABETICAL LISTING OF DRUGS

<i>deferasirox 500mg tab for oral susp</i>	23	<i>desogestrel/ethinyl estradiol/inert ingredients</i>	54	<i>dexmethylphenidate 25mg er cap</i>	2
<i>deferasirox 90mg granules</i>	23	<i>desonide 0.05% ointment</i>	61	<i>dexmethylphenidate 30mg er cap</i>	2
<i>deferasirox 90mg tab</i>	23	<i>desoximetasone 0.25% cream</i>	61	<i>dexmethylphenidate 40mg er cap</i>	2
<i>deferiprone 1000mg tab</i>	23	<i>desoximetasone 0.25% ointment</i>	61	<i>dexmethylphenidate 5mg er cap</i>	2
<i>deferiprone 500mg tab</i>	23	<i>desvenlafaxine succinate 100mg er tab</i>	18	<i>dexmethylphenidate 5mg tab</i>	2
DELSTRIGO	45	<i>desvenlafaxine succinate 25mg er tab</i>	18	<i>dextroamphetamine sulfate 10mg er cap</i>	1
100-300-300MG TAB		<i>desvenlafaxine succinate 50mg er tab</i>	18	<i>dextroamphetamine sulfate 10mg tab</i>	1
<i>demeclocycline 150mg tab</i>	86	DEXAMETHASONE	57	<i>dextroamphetamine sulfate 15mg er cap</i>	1
<i>demeclocycline 300mg tab</i>	86	0.1MG/ML ORAL SOLN		<i>dextroamphetamine sulfate 5mg er cap</i>	1
DEPO-SUBQ PROVERA	57	<i>dexamethasone 0.5mg tab</i>	57	<i>dextroamphetamine sulfate 5mg tab</i>	1
104MG/0.65ML		<i>dexamethasone 0.75mg tab</i>	57	DIACOMIT 250MG CAP	14
SYRINGE		<i>dexamethasone 1.5mg tab</i>	57	DIACOMIT 250MG POWDER FOR ORAL SUSP	14
<i>depo-testosterone 200mg/ml inj</i>	7	<i>dexamethasone 1mg tab</i>	57	DIACOMIT 500MG CAP	14
DESCOVY 120-15MG TAB	45	<i>dexamethasone 2mg tab</i>	57	DIACOMIT 500MG POWDER FOR ORAL SUSP	14
DESCOVY 200-25MG TAB	45	<i>dexamethasone 4mg tab</i>	57	<i>diazepam 10mg tab</i>	8
<i>desipramine 100mg tab</i>	19	<i>dexamethasone 6mg tab</i>	57	<i>diazepam 10mg/2ml rectal gel</i>	13
<i>desipramine 10mg tab</i>	19	DEXAMETHASONE	80	<i>diazepam 1mg/ml oral soln</i>	8
<i>desipramine 150mg tab</i>	19	PHOSPHATE 0.1% OPHTH SOLN		DIAZEPAM	13
<i>desipramine 25mg tab</i>	19	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	80	2.5MG/0.5ML RECTAL GEL	
<i>desipramine 50mg tab</i>	19	<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	80	<i>diazepam 20mg/4ml rectal gel</i>	13
<i>desipramine 75mg tab</i>	19	<i>dexmethylphenidate 10mg er cap</i>	2	<i>diazepam 2mg tab</i>	9
<i>desloratadine 5mg tab</i>	25	<i>dexmethylphenidate 10mg tab</i>	2	<i>diazepam 5mg tab</i>	9
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	65	<i>dexmethylphenidate 15mg er cap</i>	2	<i>diazepam 5mg/ml oral soln</i>	9
<i>desmopressin acetate 0.1mg tab</i>	65	<i>dexmethylphenidate 2.5mg tab</i>	2		
<i>desmopressin acetate 0.2mg tab</i>	65	<i>dexmethylphenidate 20mg er cap</i>	2		
<i>desogestrel/ethinyl estradiol/ethinyl estradiol</i>	54				
<i>0.15-0.01-0.02mg 28 day pack</i>					

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

ALPHABETICAL LISTING OF DRUGS

<i>diazoxide 50mg/ml susp</i>	21	<i>diltiazem 120mg er (12hr)</i>	50	<i>divalproex sodium 500mg</i>	17
<i>diclofenac potassium</i>	4	<i>cap</i>		<i>dr tab</i>	
<i>50mg tab</i>		<i>diltiazem 120mg er (24hr)</i>	50	<i>divalproex sodium 500mg</i>	17
<i>diclofenac sodium 0.1%</i>	80	<i>cap</i>		<i>er tab</i>	
<i>ophth soln</i>		<i>diltiazem 120mg tab</i>	50	<i>dofetilide 0.125mg cap</i>	9
<i>diclofenac sodium 1% gel</i>	59	<i>diltiazem 180mg er (24hr)</i>	50	<i>dofetilide 0.25mg cap</i>	9
<i>diclofenac sodium 100mg</i>	4	<i>cap</i>		<i>dofetilide 0.5mg cap</i>	9
<i>er tab</i>		<i>diltiazem 240mg er (24hr)</i>	50	DOJOLVI 100% ORAL	78
<i>diclofenac sodium 25mg</i>	4	<i>cap</i>		SOLN	
<i>dr tab</i>		<i>diltiazem 300mg er (24hr)</i>	50	<i>donepezil 10mg odt</i>	83
<i>diclofenac sodium 3% gel</i>	59	<i>cap</i>		<i>donepezil 10mg tab</i>	83
<i>diclofenac sodium 50mg</i>	4	<i>diltiazem 30mg tab</i>	50	<i>donepezil 23mg tab</i>	83
<i>dr tab</i>		<i>diltiazem 360mg er (24hr)</i>	50	<i>donepezil 5mg odt</i>	83
<i>diclofenac sodium 75mg</i>	4	<i>cap</i>		<i>donepezil 5mg tab</i>	83
<i>dr tab</i>		<i>diltiazem 420mg er (24hr)</i>	50	DOPTELET 20MG TAB	71
<i>diclofenac</i>	4	<i>cap</i>		DOPTELET TAB 40MG	71
<i>sodium/misoprostol</i>		<i>diltiazem 60mg er (12hr)</i>	50	DAILY DOSE PACK	
<i>50-0.2mg dr tab</i>		<i>cap</i>		DOPTELET TAB 60MG	71
<i>diclofenac</i>	4	<i>diltiazem 60mg tab</i>	50	DAILY DOSE PACK	
<i>sodium/misoprostol</i>		<i>diltiazem 90mg er (12hr)</i>	50	<i>dorzolamide 2% ophth</i>	80
<i>75-0.2mg dr tab</i>		<i>cap</i>		<i>soln</i>	
<i>dicloxacillin 250mg cap</i>	82	<i>diltiazem 90mg tab</i>	50	<i>dorzolamide/timolol</i>	78
<i>dicloxacillin 500mg cap</i>	82	<i>dimethyl fumarate 120mg</i>	84	<i>22.3-6.8mg/ml ophth soln</i>	
<i>dicyclomine 10mg cap</i>	88	<i>dr cap</i>		<i>dorzolamide/timolol</i>	78
<i>dicyclomine 20mg tab</i>	88	<i>dimethyl fumarate 240mg</i>	84	<i>maleate 2%-0.5% ophth</i>	
<i>dicyclomine 2mg/ml oral</i>	88	<i>dr cap</i>		<i>soln (preservative-free)</i>	
<i>soln</i>		<i>dimethyl</i>	84	<i>dotti 0.025mg/24hr patch</i>	66
DIFICID 200MG TAB	73	<i>fumarate/dimethyl</i>		<i>dotti 0.0375mg/24hr</i>	66
DIFICID 40MG/ML SUSP	73	<i>fumarate 120-240mg</i>		<i>patch</i>	
<i>diflunisal 500mg tab</i>	5	<i>pack</i>		<i>dotti 0.05mg/24hr patch</i>	66
<i>difluprednate 0.05%</i>	80	DIPHThERIA/TETANUS	88	<i>dotti 0.075mg/24hr patch</i>	66
<i>ophth susp</i>		TOXOID INJ		<i>dotti 0.1mg/24hr patch</i>	66
DIGOXIN 0.05MG/ML	51	<i>disopyramide 100mg cap</i>	9	DOVATO 50-300MG TAB	45
ORAL SOLN		<i>disopyramide 150mg cap</i>	9	<i>doxazosin 1mg tab</i>	28
<i>digoxin 0.125mg tab</i>	51	<i>disulfiram 250mg tab</i>	83	<i>doxazosin 2mg tab</i>	28
<i>digoxin 0.25mg tab</i>	51	<i>disulfiram 500mg tab</i>	83	<i>doxazosin 4mg tab</i>	28
<i>dihydroergotamine</i>	73	<i>divalproex sodium 125mg</i>	16	<i>doxazosin 8mg tab</i>	28
<i>mesylate 0.5mg/act nasal</i>		<i>dr cap</i>		<i>doxepin 100mg cap</i>	19
<i>inhaler</i>		<i>divalproex sodium 125mg</i>	16	<i>doxepin 10mg cap</i>	19
DILANTIN 30MG ER	16	<i>dr tab</i>		<i>doxepin 10mg/ml oral</i>	19
CAP		<i>divalproex sodium 250mg</i>	17	<i>soln</i>	
<i>dilt 120mg er cap</i>	50	<i>dr tab</i>		<i>doxepin 150mg cap</i>	19
<i>dilt 180mg er cap</i>	50	<i>divalproex sodium 250mg</i>	17	<i>doxepin 25mg cap</i>	19
<i>dilt 240mg er cap</i>	50	<i>er tab</i>		<i>doxepin 50mg cap</i>	19

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

ALPHABETICAL LISTING OF DRUGS

<i>doxepin 75mg cap</i>	19	DULERA 50-5MCG	11	ELIGARD 7.5MG	34
<i>doxy 100mg inj</i>	86	INHALER		SYRINGE	
<i>doxycycline hyclate 100mg cap</i>	86	<i>duloxetine 20mg dr cap</i>	18	ELIQUIS 2.5MG TAB	12
<i>doxycycline hyclate 100mg tab</i>	86	<i>duloxetine 30mg dr cap</i>	18	ELIQUIS 5MG 30-DAY STARTER PACK	12
<i>doxycycline hyclate 20mg tab</i>	86	<i>duloxetine 60mg dr cap</i>	18	ELIQUIS 5MG TAB	12
<i>doxycycline hyclate 50mg cap</i>	86	DUPIXENT	61	ELMIRON 100MG CAP	69
<i>doxycycline monohydrate 100mg cap</i>	86	100MG/0.67ML SYRINGE		<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	57
<i>doxycycline monohydrate 100mg tab</i>	86	DUPIXENT	61	EMGALITY 100MG/ML SYRINGE	73
<i>doxycycline monohydrate 50mg cap</i>	86	200MG/1.14ML AUTO-INJECTOR		EMGALITY 120MG/ML AUTO-INJECTOR	73
<i>doxycycline monohydrate 50mg tab</i>	86	DUPIXENT 300MG/2ML AUTO-INJECTOR	61	EMGALITY 120MG/ML SYRINGE	73
<i>doxycycline monohydrate 5mg/ml susp</i>	86	DUPIXENT 300MG/2ML SYRINGE	61	EMSAM 12MG/24HR PATCH	17
<i>doxylamine succinate/pyridoxine 10-10mg dr tab</i>	23	<i>dutasteride 0.5mg cap</i>	69	EMSAM 6MG/24HR PATCH	17
<i>dronabinol 10mg cap</i>	24	E		EMSAM 9MG/24HR PATCH	17
<i>dronabinol 2.5mg cap</i>	24	<i>econazole nitrate 1% cream</i>	59	<i>emtricitabine 200mg cap</i>	46
<i>dronabinol 5mg cap</i>	24	EDURANT 25MG TAB	45	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	46
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg pack</i>	54	EFAVIRENZ 200MG CAP	45	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	46
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg pack</i>	54	EFAVIRENZ 50MG CAP	46	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	46
DROXIA 200MG CAP	70	<i>efavirenz 600mg tab</i>	46	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	46
DROXIA 300MG CAP	70	<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	46	EMTRIVA 10MG/ML ORAL SOLN	46
DROXIA 400MG CAP	70	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	46	<i>enalapril maleate 10mg tab</i>	26
<i>droxidopa 100mg cap</i>	91	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	46	<i>enalapril maleate 2.5mg tab</i>	26
<i>droxidopa 200mg cap</i>	91	<i>electrolyte-148 solution</i>	74	<i>enalapril maleate 20mg tab</i>	26
<i>droxidopa 300mg cap</i>	91	ELIGARD 22.5MG SYRINGE	34		
DULERA 100-5MCG INHALER	11	ELIGARD 30MG SYRINGE	34		
DULERA 200-5MCG INHALER	11	ELIGARD 45MG SYRINGE	34		

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

ALPHABETICAL LISTING OF DRUGS

<i>enalapril maleate 5mg tab</i>	27	<i>enoxaparin sodium 60mg/0.6ml syringe</i>	12	<i>erlotinib 25mg tab</i>	33
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	29	<i>enoxaparin sodium 80mg/0.8ml syringe</i>	12	<i>errin 28 day 0.35mg pack</i>	57
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	29	<i>enpresse 28 day pack</i>	54	<i>ertapenem 1gm inj</i>	31
ENBREL 25MG/0.5ML INJ	5	<i>enskyce 28 day pack</i>	54	<i>erythromycin 0.5% ophthalm ointment</i>	79
ENBREL 25MG/0.5ML SYRINGE	5	ENSPRYNG 120MG/ML SYRINGE	76	<i>erythromycin 2% gel</i>	58
ENBREL 50MG/ML AUTO-INJECTOR	5	<i>entacapone 200mg tab</i>	40	<i>erythromycin 2% topical soln</i>	58
ENBREL 50MG/ML CARTRIDGE	5	<i>entecavir 0.5mg tab</i>	48	ERYTHROMYCIN 250MG DR CAP	72
ENBREL 50MG/ML SYRINGE	5	<i>entecavir 1mg tab</i>	48	<i>erythromycin 250mg tab</i>	72
ENDARI 5GM POWDER FOR ORAL SOLN	70	ENTRESTO 24-26MG TAB	51	<i>erythromycin 500mg tab</i>	72
<i>endocet 2.5-325mg tab</i>	6	ENTRESTO 49-51MG TAB	51	<i>erythromycin</i>	73
<i>endocet 325-10mg tab</i>	6	ENTRESTO 97-103MG TAB	51	<i>ethylsuccinate 40mg/ml susp</i>	
<i>endocet 325-5mg tab</i>	6	<i>enulose 10gm/15ml oral soln</i>	68	<i>erythromycin</i>	73
<i>endocet 325-7.5mg tab</i>	6	ENVARUSUS XR 0.75MG TAB	76	<i>ethylsuccinate 80mg/ml susp</i>	
ENGERIX-B 10MCG/0.5ML SYRINGE	90	ENVARUSUS XR 1MG TAE	76	<i>erythromycin/benzoyl peroxide 5-3% gel</i>	58
ENGERIX-B 20MCG/ML INJ	90	ENVARUSUS XR 4MG TAE	76	<i>escitalopram 10mg tab</i>	17
ENGERIX-B 20MCG/ML SYRINGE	90	EPIDIOLEX 100MG/ML ORAL SOLN	14	<i>escitalopram 1mg/ml oral soln</i>	17
<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	57	<i>epinastine 0.05% ophthalm soln</i>	80	<i>escitalopram 20mg tab</i>	17
<i>enoxaparin sodium 100mg/1ml syringe</i>	12	<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	91	<i>escitalopram 5mg tab</i>	17
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	12	<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	91	<i>estarylla 28 day pack</i>	54
<i>enoxaparin sodium 150mg/1ml syringe</i>	12	<i>epitol 200mg tab</i>	14	<i>estradiol 0.00104mg/hr twice weekly patch</i>	66
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	12	<i>epplerenone 25mg tab</i>	30	<i>estradiol 0.00104mg/hr weekly patch</i>	66
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	12	<i>epplerenone 50mg tab</i>	30	<i>estradiol 0.00156mg/hr twice weekly patch</i>	66
		EPRONTIA 25MG/ML ORAL SOLN	14	<i>estradiol 0.00156mg/hr weekly patch</i>	66
		ERGOLOID MESYLATES USP 1MG TAB	85	<i>estradiol 0.00208mg/hr twice weekly patch</i>	66
		ERIVEDGE 150MG CAP	34	<i>estradiol 0.00208mg/hr weekly patch</i>	66
		ERLEADA 240MG TAB	34	<i>estradiol 0.0025mg/hr weekly patch</i>	66
		ERLEADA 60MG TAB	34	<i>estradiol 0.00312mg/hr weekly patch</i>	66
		<i>erlotinib 100mg tab</i>	33	<i>estradiol 0.00313mg/hr twice weekly patch</i>	66
		<i>erlotinib 150mg tab</i>	33		

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

ALPHABETICAL LISTING OF DRUGS

<i>estradiol 0.00417mg/hr twice weekly patch</i>	66	<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	57	<i>ethinyl estradiol/inert ingredients/norgestimate/norgestimate/norgestimate</i>	55
<i>estradiol 0.00417mg/hr weekly patch</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.025-75-0.8mg pack</i>	54	<i>0.035-1-0.18-0.215-0.25 mg ethinyl</i>	55
<i>estradiol 0.01% vaginal cream</i>	91	<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.035-75-0.4mg pack</i>	54	<i>estradiol/levonorgestrel 91 day pack</i>	66
<i>estradiol 0.5mg tab</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.035-75-0.4mg pack</i>	54	<i>estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	66
<i>estradiol 1mg tab</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg 21 day pack</i>	54	<i>ethinyl estradiol/norethindrone acetate 0.005-1mg pack</i>	55
<i>estradiol 2mg tab</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg 28 day pack</i>	54	<i>estradiol/norethindrone acetate 0.02-1mg pack</i>	16
<i>estradiol valerate 10mg/ml inj</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 1-20/1-30/1-35mg-mcg pack</i>	54	<i>ethosuximide 250mg cap</i>	16
<i>estradiol valerate 20mg/ml inj</i>	67	<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg 28 day pack</i>	54	<i>ethosuximide 50mg/ml oral soln</i>	4
<i>estradiol valerate 40mg/ml inj</i>	67	<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg 28 daypack</i>	55	<i>etodolac 200mg cap</i>	4
<i>estradiol/norethindrone acetate 0.5-0.1mg pack</i>	66	<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.035-1-0.25mg pack</i>	55	<i>etodolac 300mg cap</i>	4
<i>estradiol/norethindrone acetate 1-0.5mg pack</i>	66	<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg pack</i>	55	<i>etodolac 400mg tab</i>	4
ESTRING 2MG (7.5 MCG/24HR) VAGINAL SYSTEM	91	<i>ethinyl estradiol/inert ingredients/norgestimate/norgestimate/norgestimate 0.025-1-0.18-0.215-0.25 mg</i>	57	<i>etodolac 500mg tab</i>	4
<i>eszopiclone 1mg tab</i>	71			<i>etravirine 100mg tab</i>	46
<i>eszopiclone 2mg tab</i>	71			<i>etravirine 200mg tab</i>	46
<i>eszopiclone 3mg tab</i>	71			<i>euthyrox 100mcg tab</i>	87
<i>ethambutol 100mg tab</i>	32			<i>euthyrox 112mcg tab</i>	87
<i>ethambutol 400mg tab</i>	32			<i>euthyrox 125mcg tab</i>	87
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>euthyrox 137mcg tab</i>	87
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>euthyrox 150mcg tab</i>	87
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>euthyrox 175mcg tab</i>	87
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>euthyrox 200mcg tab</i>	87
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>euthyrox 25mcg tab</i>	87
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>euthyrox 50mcg tab</i>	87
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>euthyrox 75mcg tab</i>	87
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>euthyrox 88mcg tab</i>	87
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>everolimus 0.25mg tab</i>	76
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>everolimus 0.5mg tab</i>	76
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>everolimus 0.75mg tab</i>	76
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>everolimus 10mg tab</i>	36
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54			<i>everolimus 1mg tab</i>	76

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

ALPHABETICAL LISTING OF DRUGS

<i>everolimus 2.5mg tab</i>	36	FANAPT TITRATION	41	FETZIMA 20MG ER CAP	18
<i>everolimus 2mg tab for oral susp</i>	36	PACK		FETZIMA 40MG ER CAP	18
<i>everolimus 3mg tab for oral susp</i>	36	FARXIGA 10MG TAB	22	FETZIMA 80MG ER CAP	19
<i>everolimus 5mg tab</i>	36	FARXIGA 5MG TAB	22	FETZIMA PACK	19
<i>everolimus 5mg tab for oral susp</i>	36	FASENRA 30MG/ML	9	FILSPARI 200MG TAB	69
<i>everolimus 7.5mg tab</i>	36	AUTO-INJECTOR		FILSPARI 400MG TAB	69
EVOTAZ 300-150MG TAB	46	FASENRA 30MG/ML SYRINGE	9	<i>finasteride 5mg tab</i>	69
EVRYSDI 0.75MG/ML ORAL SOLN	78	<i>febuxostat 40mg tab</i>	69	<i>finolimid 0.5mg cap</i>	84
<i>exemestane 25mg tab</i>	34	<i>febuxostat 80mg tab</i>	69	FINTEPLA 2.2MG/ML	14
EXKIVITY 40MG CAP	33	<i>felbamate 120mg/ml susp</i>	16	ORAL SOLN	
EXTAVIA 0.3MG INJ	84	<i>felbamate 400mg tab</i>	16	<i>finzala 24 fe chewable 28 day pack</i>	55
<i>ezetimibe 10mg tab</i>	26	<i>felbamate 600mg tab</i>	16	FIRDAPSE 10MG TAB	32
<i>ezetimibe 10mg/simvastatin 10mg tab</i>	25	<i>felodipine 10mg er tab</i>	50	FIRMAGON	34
<i>ezetimibe 10mg/simvastatin 20mg tab</i>	25	<i>felodipine 2.5mg er tab</i>	50	120MG/VIAL INJ	
<i>ezetimibe 10mg/simvastatin 40mg tab</i>	25	<i>felodipine 5mg er tab</i>	50	FIRMAGON 80MG INJ	34
<i>ezetimibe 10mg/simvastatin 80mg tab</i>	25	<i>fenofibrate 134mg cap</i>	25	<i>flac 0.01% otic soln</i>	81
F		<i>fenofibrate 145mg tab</i>	25	<i>flavoxate 100mg tab</i>	89
<i>falmina 28 day pack</i>	55	<i>fenofibrate 160mg tab</i>	25	<i>flecainide acetate 100mg tab</i>	9
<i>famciclovir 125mg tab</i>	48	<i>fenofibrate 200mg cap</i>	25	<i>flecainide acetate 150mg tab</i>	9
<i>famciclovir 250mg tab</i>	48	<i>fenofibrate 48mg tab</i>	25	<i>flecainide acetate 50mg tab</i>	9
<i>famciclovir 500mg tab</i>	48	<i>fenofibrate 54mg tab</i>	25	<i>fluconazole 100mg tab</i>	24
<i>famotidine 20mg tab</i>	88	<i>fenofibrate 67mg cap</i>	25	<i>fluconazole 10mg/ml susp</i>	24
<i>famotidine 40mg tab</i>	88	<i>fenofibric acid 135mg dr cap</i>	25	<i>fluconazole 150mg tab</i>	24
<i>famotidine 8mg/ml susp</i>	88	<i>fenofibric acid 45mg dr cap</i>	25	<i>fluconazole 200mg tab</i>	24
FANAPT 10MG TAB	41	<i>fentanyl 100mcg/hr patch</i>	5	<i>fluconazole 200mg/100ml inj</i>	24
FANAPT 12MG TAB	41	<i>fentanyl 1200mcg lozenge</i>	5	<i>fluconazole 400mg/200ml inj</i>	24
FANAPT 1MG TAB	41	<i>fentanyl 12mcg/hr patch</i>	5	<i>fluconazole 40mg/ml susp</i>	24
FANAPT 2MG TAB	41	<i>fentanyl 1600mcg lozenge</i>	5	<i>fluconazole 50mg tab</i>	24
FANAPT 4MG TAB	41	<i>fentanyl 200mcg lozenge</i>	5	<i>flucytosine 250mg cap</i>	24
FANAPT 6MG TAB	41	<i>fentanyl 25mcg/hr patch</i>	5	<i>flucytosine 500mg cap</i>	24
FANAPT 8MG TAB	41	<i>fentanyl 400mcg lozenge</i>	5	<i>fludrocortisone acetate 0.1mg tab</i>	58
		<i>fentanyl 50mcg/hr patch</i>	5	<i>flunisolid 25% (25mcg/act) nasal inhaler</i>	78
		<i>fentanyl 600mcg lozenge</i>	5	FLUOCINOLONE	61
		<i>fentanyl 75mcg/hr patch</i>	5	ACETONIDE 0.01% CREAM	
		<i>fentanyl 800mcg lozenge</i>	5		
		<i>fesoterodine fumarate 4mg er tab</i>	89		
		<i>fesoterodine fumarate 8mg er tab</i>	89		
		FETZIMA 120MG ER CAP	18		

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

ALPHABETICAL LISTING OF DRUGS

<i>fluocinolone acetonide</i> 0.01% oil	61	FLURBIPROFEN	80	<i>fondaparinux sodium</i> 7.5mg/0.6ml syringe	13
<i>fluocinolone acetonide</i> 0.01% otic soln	81	SODIUM 0.03% OPHTH SOLN		<i>fosamprenavir 700mg tab</i>	46
<i>fluocinolone acetonide</i> 0.01% topical soln	61	<i>fluticasone propionate</i> 0.005% ointment	61	<i>fosinopril sodium 10mg</i> tab	27
<i>fluocinolone acetonide</i> 0.025% cream	61	<i>fluticasone propionate</i> 0.05% cream	61	<i>fosinopril sodium 20mg</i> tab	27
<i>fluocinolone acetonide</i> 0.025% ointment	61	FLUTICASONE PROPIONATE 110MCG INHALER	10	<i>fosinopril sodium 40mg</i> tab	27
<i>fluocinonide 0.05% cream</i>	61	FLUTICASONE PROPIONATE 220MCG INHALER	10	<i>fosinopril</i>	29
<i>fluocinonide 0.05% e</i> cream	61	FLUTICASONE PROPIONATE 44MCG INHALER	10	<i>sodium/hydrochlorothiazide</i> 10-12.5mg tab	
<i>fluocinonide 0.05% gel</i>	61	<i>fluticasone propionate</i> 50mcg/act nasal inhaler	78	<i>fosinopril</i>	29
<i>fluocinonide 0.05%</i> ointment	61	<i>fluticasone</i> propionate/salmeterol 100-50mcg/act dry powder inhaler	11	<i>sodium/hydrochlorothiazide</i> 20-12.5mg tab	
<i>fluocinonide 0.05%</i> topical soln	61	<i>fluticasone</i> propionate/salmeterol 250-50mcg/act dry powder inhaler	11	FOSRENOL 1000MG ORAL POWDER	68
<i>fluocinonide 0.1% cream</i>	61	<i>fluticasone</i> propionate/salmeterol 500-50mcg/act dry powder inhaler	11	FOSRENOL 750MG ORAL POWDER	68
<i>fluorometholone 0.1%</i> ophth susp	80	<i>fluvastatin 20mg cap</i>	26	FOTIVDA 0.89MG CAP	36
FLUOROURACIL 2% TOPICAL SOLN	59	<i>fluvastatin 40mg cap</i>	26	FOTIVDA 1.34MG CAP	36
<i>fluorouracil 5% cream</i>	59	<i>fluvoxamine maleate</i> 100mg tab	18	FRUZAQLA 1MG CAP	33
<i>fluorouracil 5% topical</i> solution	59	<i>fluvoxamine maleate</i> 25mg tab	18	FRUZAQLA 5MG CAP	33
<i>fluoxetine 10mg cap</i>	18	<i>fondaparinux sodium</i> 10mg/0.8ml syringe	12	FUROSCIX 80MG/10ML CARTRIDGE	63
<i>fluoxetine 20mg cap</i>	18	<i>fondaparinux sodium</i> 2.5mg/0.5ml syringe	13	<i>furosemide 10mg/ml inj</i>	63
<i>fluoxetine 40mg cap</i>	18	<i>fondaparinux sodium</i> 5mg/0.4ml syringe	13	<i>furosemide 10mg/ml oral</i> soln	63
<i>fluoxetine 4mg/ml oral</i> soln	18			<i>furosemide 20mg tab</i>	63
<i>fluoxetine 60mg tab</i>	18			<i>furosemide 40mg tab</i>	63
FLUPHENAZINE 0.5MG/ML ORAL SOLN	44			<i>furosemide 80mg tab</i>	63
<i>fluphenazine 10mg tab</i>	44			FUROSEMIDE 8MG/ML ORAL SOLN	63
<i>fluphenazine 1mg tab</i>	44			FUZEON 90MG INJ	46
<i>fluphenazine 2.5mg tab</i>	44			<i>fyavolv 0.0025-0.5mg tab</i>	66
FLUPHENAZINE 2.5MG/ML INJ	44			<i>fyavolv 0.005-1mg tab</i>	66
<i>fluphenazine 5mg tab</i>	44			FYCOMPA 0.5MG/ML SUSP	13
FLUPHENAZINE 5MG/ML ORAL SOLN	44			FYCOMPA 10MG TAB	13
<i>fluphenazine decanoate</i> 25mg/ml inj	44			FYCOMPA 12MG TAB	13
				FYCOMPA 2MG TAB	13
				FYCOMPA 4MG TAB	13
				FYCOMPA 6MG TAB	13
				FYCOMPA 8MG TAB	13

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

ALPHABETICAL LISTING OF DRUGS

G		GATTEX 5MG INJ	69	GLEOSTINE 40MG CAP	33
<i>gabapentin 100mg cap</i>	14	GAUZE PADS &	73	<i>glimepiride 1mg tab</i>	22
<i>gabapentin 300mg cap</i>	14	DRESSINGS - PADS 2 X 2		<i>glimepiride 2mg tab</i>	22
<i>gabapentin 400mg cap</i>	14	GAVILYTE-C POWDER	72	<i>glimepiride 4mg tab</i>	22
<i>gabapentin 50mg/ml oral soln</i>	14	FOR ORAL SOLN		<i>glipizide 10mg er tab</i>	23
<i>gabapentin 600mg tab (Neurontin equiv)</i>	14	<i>gavilyte-g powder for oral soln</i>	72	<i>glipizide 10mg tab</i>	23
<i>gabapentin 800mg tab</i>	14	GAVRETO 100MG CAP	36	<i>glipizide 2.5mg er tab</i>	23
GALAFOLD 123MG 28 DAY PACK	65	<i>gefitinib 250mg tab</i>	33	<i>glipizide 5mg er tab</i>	23
<i>galantamine 12mg tab</i>	83	<i>gemfibrozil 600mg tab</i>	25	<i>glipizide 5mg tab</i>	23
<i>galantamine 4mg tab</i>	83	GEMTESA 75MG TAB	89	<i>glipizide/metformin 2.5-250mg tab</i>	20
<i>galantamine 8mg tab</i>	83	<i>generlac 10gm/15ml oral soln</i>	68	<i>glipizide/metformin 2.5-500mg tab</i>	20
<i>galantamine hydrobromide 16mg er cap</i>	83	<i>gengraf 100mg cap</i>	76	<i>glipizide/metformin 5-500mg tab</i>	20
<i>galantamine hydrobromide 24mg er cap</i>	83	<i>gengraf 100mg/ml oral soln</i>	76	GLUCAGEN 1MG INJ	21
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	83	<i>gengraf 25mg cap</i>	76	GLUCAGON (RDNA) 1MG INJ	21
<i>galantamine hydrobromide 8mg er cap</i>	83	<i>gentamicin 0.1% cream</i>	59	<i>glucose 100mg/ml inj</i>	78
GAMMAGARD 10GM INJ	81	<i>gentamicin 0.1% ointment</i>	59	GLUCOSE 100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	74
GAMMAGARD 2.5GM/25ML INJ	81	<i>gentamicin 0.3% ophth soln</i>	79	GLUCOSE 100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	74
GAMMAGARD 5GM INJ	81	GENTAMICIN 0.8MG/ML INJ	2	GLUCOSE 100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	74
GAMMAKED 1GM/10ML INJ	81	<i>gentamicin 1.2mg/ml inj</i>	2	GLUCOSE 25MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	74
GAMMAPLEX 10GM/100ML INJ	81	GENTAMICIN 1.6MG/ML INJ	2	<i>glucose 50mg/ml inj</i>	78
GAMMAPLEX 10GM/200ML INJ	81	GENTAMICIN 1MG/ML INJ	3	<i>glucose 50mg/ml/potassium chloride</i>	74
GAMMAPLEX 20GM/200ML INJ	81	<i>gentamicin 40mg/ml inj</i>	3	<i>0.01meq/ml/sodium chloride 4.5mg/ml inj</i>	74
GAMMAPLEX 5GM/50ML INJ	81	GENVOYA	46	<i>glucose 50mg/ml/potassium chloride 0.02meq/ml inj</i>	74
GAMUNEX 1GM/10ML INJ	81	150-150-200-10MG TAB		<i>glucose 50mg/ml/potassium chloride</i>	74
GARDASIL 9 INJ	90	GILOTRIF 20MG TAB	33	<i>0.02meq/ml/sodium chloride 2.25mg/ml inj</i>	
GARDASIL 9 SYRINGE	90	GILOTRIF 30MG TAB	33		
		GILOTRIF 40MG TAB	33		
		GLASSIA 1000MG/50ML INJ	85		
		<i>glatiramer acetate 20mg/ml syringe</i>	84		
		<i>glatiramer acetate 40mg/ml syringe</i>	84		
		<i>glatopa 20mg/ml syringe</i>	84		
		<i>glatopa 40mg/ml syringe</i>	84		
		GLEOSTINE 100MG CAP	32		
		GLEOSTINE 10MG CAP	32		

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

ALPHABETICAL LISTING OF DRUGS

<i>glucose</i>	74	GVOKE 0.5MG/0.1ML	21	<i>haloperidol decanoate</i>	43
<i>50mg/ml/potassium chloride</i>		AUTO-INJECTOR		<i>50mg/ml inj</i>	
<i>0.02meq/ml/sodium chloride 4.5mg/ml inj</i>		GVOKE 1MG/0.2ML	21	HAVRIX 1440ELU/ML	90
<i>glucose</i>	74	AUTO-INJECTOR		SYRINGE	
<i>50mg/ml/potassium chloride</i>		GVOKE 1MG/0.2ML INJ	21	HAVRIX 720ELU/0.5ML	90
<i>0.02meq/ml/sodium chloride 9mg/ml inj</i>		GVOKE 1MG/0.2ML	21	SYRINGE	
<i>glucose</i>	74	SYRINGE		<i>heather 0.35mg 28-day pack</i>	57
<i>50mg/ml/potassium chloride</i>		H		<i>heparin sodium porcine 10000unit/ml inj</i>	13
<i>0.03meq/ml/sodium chloride 4.5mg/ml inj</i>		HADLIMA 40MG/0.4ML	3	<i>heparin sodium porcine 1000unit/ml inj</i>	13
<i>glucose</i>	74	AUTO-INJECTOR		<i>heparin sodium porcine 20000unit/ml inj</i>	13
<i>50mg/ml/potassium chloride</i>		HADLIMA 40MG/0.4ML	3	<i>heparin sodium porcine 5000unit/ml inj</i>	13
<i>0.03meq/ml/sodium chloride 4.5mg/ml inj</i>		SYRINGE		HEPLISAV-B	90
<i>glucose</i>	74	HADLIMA 40MG/0.8ML	3	20MCG/0.5ML SYRINGE	
<i>50mg/ml/potassium chloride</i>		AUTO-INJECTOR		HIBERIX 10MCG INJ	89
<i>0.04meq/ml/sodium chloride 4.5mg/ml inj</i>		HADLIMA 40MG/0.8ML	3	HUMALOG 100UNIT/ML	21
<i>GLUCOSE</i>	74	SYRINGE		CARTRIDGE	
<i>50MG/ML/POTASSIUM CHLORIDE</i>		HAEGARDA 2000UNIT	70	HUMALOG 100UNIT/ML	21
<i>0.04MEQ/ML/SODIUM CHLORIDE 9MG/ML INJ</i>		INJ		KWIKPEN	
<i>glucose 50mg/ml/sodium chloride 2mg/ml inj</i>	74	HAEGARDA 3000UNIT	70	HUMALOG 200UNIT/ML	21
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	74	INJ		PEN INJ	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	74	<i>hailey 24 fe 28 day pack</i>	55	HUMALOG JUNIOR	22
<i>glycopyrrolate 1mg tab</i>	88	<i>halobetasol propionate 0.05% cream</i>	61	100UNIT/ML PEN INJ	
<i>glycopyrrolate 2mg tab</i>	88	<i>halobetasol propionate 0.05% ointment</i>	61	HUMALOG MIX	22
<i>granisetron 1mg tab</i>	23	<i>haloette</i>	57	25-75UNIT/ML INJ	
<i>griseofulvin 125mg tab</i>	24	<i>0.120-0.015mg/24hr vaginal system</i>		HUMALOG MIX	22
<i>griseofulvin 250mg tab</i>	24	<i>haloperidol 0.5mg tab</i>	42	25-75UNIT/ML PEN INJ	
<i>griseofulvin 25mg/ml susp</i>	24	<i>haloperidol 10mg tab</i>	42	HUMALOG MIX	22
<i>griseofulvin 500mg tab</i>	24	<i>haloperidol 1mg tab</i>	42	50-50UNIT/ML PEN INJ	
<i>guanfacine 1mg er tab</i>	1	<i>haloperidol 20mg tab</i>	42	HUMIRA 10MG/0.1ML	3
<i>guanfacine 2mg er tab</i>	1	<i>haloperidol 2mg tab</i>	42	SYRINGE (ABBVIE)	
<i>guanfacine 3mg er tab</i>	1	<i>haloperidol 2mg/ml oral soln</i>	42	HUMIRA 20MG/0.2ML	3
<i>guanfacine 4mg er tab</i>	1	<i>haloperidol 5mg tab</i>	42	SYRINGE (ABBVIE)	
		<i>haloperidol 5mg/ml inj</i>	42	HUMIRA 40MG/0.4ML	3
		<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	42	AUTO-INJECTOR (ABBVIE)	
		<i>haloperidol decanoate 100mg/ml inj</i>	42	HUMIRA 40MG/0.4ML	3
		<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	43	SYRINGE (ABBVIE)	
				HUMIRA 40MG/0.8ML	3
				AUTO-INJECTOR	

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

ALPHABETICAL LISTING OF DRUGS

HUMIRA 40MG/0.8ML SYRINGE	3	HUMULIN R 500UNIT/ML PEN INJ	22	<i>hydrochlorothiazide/olmesartan medoxomil</i>	29
HUMIRA 80MG/0.8ML AUTO-INJECTOR (ABBVIE)	3	<i>hydralazine 100mg tab</i>	30	<i>12.5-20mg tab</i>	
HUMIRA PEDIATRIC CROHN'S STARTER PACK SYRINGE (2) 40MG/0.4ML 80MG/0.8ML	3	<i>hydralazine 10mg tab</i>	30	<i>hydrochlorothiazide/olmesartan medoxomil</i>	30
HUMIRA PEN - PEDIATRIC UC STARTER PACK 80MG/0.8ML INJ (ABBVIE)	3	<i>hydralazine 25mg tab</i>	30	<i>12.5-40mg tab</i>	
HUMIRA PEN - PSORIASIS STARTER PACK 40MG/0.8ML	3	<i>hydralazine 50mg tab</i>	30	<i>hydrochlorothiazide/olmesartan medoxomil</i>	30
HUMIRA PEN 80MG/0.8ML AND 40MG/0.4ML - PSORIASIS/UVEITIS STARTER PACK	3	<i>hydralazine/isosorbide dinitrate 37.5-20mg tab</i>	51	<i>25-40mg tab</i>	
HUMIRA PEN 80MG/0.8ML CROHNS/UC/HIDRADENITIS STARTER PACK (ABBVIE)	3	<i>hydrochlorothiazide 12.5mg cap</i>	63	<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	63
HUMIRA PREFILLED SYRINGE 80MG/0.8ML STARTER PACK - PEDIATRIC CROHN'S DISEASE	3	<i>hydrochlorothiazide 12.5mg tab</i>	63	<i>hydrochlorothiazide/telmisartan 12.5-40mg tab</i>	30
HUMULIN 70-30UNIT/ML INJ	22	<i>hydrochlorothiazide 25mg tab</i>	63	<i>hydrochlorothiazide/telmisartan 12.5-80mg tab</i>	30
HUMULIN 70-30UNIT/ML PEN INJ	22	<i>hydrochlorothiazide 50mg tab</i>	63	<i>hydrochlorothiazide/telmisartan 25-80mg tab</i>	30
HUMULIN N 100UNIT/ML INJ	22	<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	29	<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	63
HUMULIN N 100UNIT/ML PEN INJ	22	<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	29	<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	63
HUMULIN R 100UNIT/ML INJ	22	<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	29	<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	63
HUMULIN R 500UNIT/ML INJ	22	<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	29	<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	30
		<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	29	<i>artan 12.5-320mg tab</i>	30
		<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	29	<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	30
		<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	29	<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	30
		<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	29	<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	30
		<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	29	<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	6
		<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	29	<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	6
				<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	6
				<i>hydrocortisone 1% cream</i>	61

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

ALPHABETICAL LISTING OF DRUGS

<i>hydrocortisone 1.67mg/ml enema</i>	7	<i>ibuprofen 20mg/ml susp</i>	4	INLYTA 5MG TAB	33
<i>hydrocortisone 10mg tab</i>	57	<i>ibuprofen 400mg tab</i>	4	INQOVI 5 TABLET PACK	35
<i>hydrocortisone 2.5% cream</i>	7	<i>ibuprofen 600mg tab</i>	4	INREBIC 100MG CAP	37
<i>hydrocortisone 2.5% lotion</i>	61	<i>ibuprofen 800mg tab</i>	4	INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	22
<i>hydrocortisone 2.5% ointment</i>	61	<i>icatibant 10mg/ml syringe</i>	69	INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	22
<i>hydrocortisone 20mg tab</i>	57	<i>iclevia 91 day pack</i>	55	INSULIN LISPRO 100UNIT/ML INJ	22
<i>hydrocortisone 5mg tab</i>	57	ICLUSIG 10MG TAB	36	INSULIN PEN NEEDLE	73
<i>hydrocortisone/acetic acid 1-2% otic soln</i>	81	ICLUSIG 15MG TAB	36	INSULIN SYRINGE (DISP) U-100 0.3ML	73
<i>hydromorphone 2mg tab</i>	5	ICLUSIG 30MG TAB	36	INSULIN SYRINGE (DISP) U-100 1/2ML	73
<i>hydromorphone 4mg tab</i>	5	ICLUSIG 45MG TAB	36	INSULIN SYRINGE (DISP) U-100 1ML	73
<i>hydromorphone 8mg tab</i>	5	<i>icosapent ethyl 1000mg cap</i>	25	INTELENCE 25MG TAB	46
<i>hydroxychloroquine sulfate 100mg tab</i>	32	<i>icosapent ethyl 500mg cap</i>	25	INTRALIPID 20GM/100ML INJ	78
<i>hydroxychloroquine sulfate 200mg tab</i>	32	IDHIFA 100MG TAB	36	<i>introvale 91 day pack</i>	55
<i>hydroxychloroquine sulfate 300mg tab</i>	32	IDHIFA 50MG TAB	36	INVEGA 1092MG/3.5ML SYRINGE	41
<i>hydroxychloroquine sulfate 400mg tab</i>	32	ILEVRO 0.3% OPHTH SUSP	80	INVEGA 117MG/0.75ML SYRINGE	41
<i>hydroxyurea 500mg cap</i>	39	<i>imatinib 100mg tab</i>	36	INVEGA 1560MG/5ML SYRINGE	41
<i>hydroxyzine 10mg tab</i>	8	<i>imatinib 400mg tab</i>	36	INVEGA 156MG/ML SYRINGE	41
<i>hydroxyzine 25mg tab</i>	8	IMBRUVICA 140MG CAP	36	INVEGA 234MG/1.5ML SYRINGE	41
<i>hydroxyzine 50mg tab</i>	8	IMBRUVICA 420MG TAB	36	INVEGA 273MG/0.875ML SYRINGE	41
HYDROXYZINE PAMOATE 100MG CAP	8	IMBRUVICA 70MG CAP	36	INVEGA 39MG/0.25ML SYRINGE	41
<i>hydroxyzine pamoate 25mg cap</i>	8	IMBRUVICA 70MG/ML SUSP	37	INVEGA 410MG/1.315ML SYRINGE	42
<i>hydroxyzine pamoate 50mg cap</i>	8	<i>imipramine 10mg tab</i>	19	INVEGA 546MG/1.75ML SYRINGE	42
I		<i>imipramine 25mg tab</i>	19	INVEGA 78MG/0.5ML SYRINGE	42
<i>ibandronate 150mg tab</i>	64	<i>imipramine 50mg tab</i>	19		
IBRANCE 100MG CAP	36	<i>imiquimod 5% cream</i>	62		
IBRANCE 100MG TAB	36	IMOVAX 2.5UNIT/ML INJ	90		
IBRANCE 125MG CAP	36	<i>incassia 0.35mg 28 day pack</i>	57		
IBRANCE 125MG TAB	36	INCRELEX 40MG/4ML INJ	65		
IBRANCE 75MG CAP	36	INCRUSE ELLIPTA 62.5MCG/INH INHALER	10		
IBRANCE 75MG TAB	36	<i>indapamide 1.25mg tab</i>	63		
<i>ibu 600mg tab</i>	4	<i>indapamide 2.5mg tab</i>	63		
<i>ibu 800mg tab</i>	4	INFANRIX SYRINGE	88		
		INGREZZA 40MG CAP	84		
		INGREZZA 60MG CAP	84		
		INGREZZA 80MG CAP	84		
		INGREZZA CAP PACK	84		
		INLYTA 1MG TAB	33		

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

ALPHABETICAL LISTING OF DRUGS

INVEGA	42	ISOSORBIDE	8	JANUVIA 100MG TAB	21
819MG/2.625ML		MONONITRATE 20MG		JANUVIA 25MG TAB	21
SYRINGE		TAB		JANUVIA 50MG TAB	21
IPOL INJ	90	<i>isosorbide mononitrate</i>	8	JARDIANCE 10MG TAB	22
<i>ipratropium bromide</i>	10	<i>30mg er tab</i>		JARDIANCE 25MG TAB	22
<i>0.02% inh soln</i>		<i>isosorbide mononitrate</i>	8	<i>jasmiel 28 day pack</i>	55
<i>ipratropium bromide</i>	77	<i>60mg er tab</i>		<i>javygtor 100mg powder</i>	65
<i>0.03% (0.021mg/act)</i>		<i>isotretinoin 10mg cap</i>	58	<i>for oral soln</i>	
<i>nasal inhaler</i>		<i>isotretinoin 20mg cap</i>	58	<i>javygtor 100mg tab</i>	65
<i>ipratropium bromide</i>	77	<i>isotretinoin 30mg cap</i>	58	<i>javygtor 500mg powder</i>	65
<i>0.06% (0.042mg/act)</i>		<i>isotretinoin 40mg cap</i>	58	<i>for oral soln</i>	
<i>nasal inhaler</i>		<i>isradipine 2.5mg cap</i>	50	JAYPIRCA 100MG TAB	37
<i>ipratropium/albuterol</i>	11	<i>isradipine 5mg cap</i>	50	JAYPIRCA 50MG TAB	37
<i>0.5-2.5mg/3ml inh soln</i>		<i>itraconazole 100mg cap</i>	24	<i>jinteli 0.005-1mg tab</i>	66
<i>irbesartan 150mg tab</i>	27	<i>ivermectin 3mg tab</i>	7	<i>juleber 28 day pack</i>	55
<i>irbesartan 300mg tab</i>	27	IWILFIN 192MG TAB	39	JULUCA 50-25MG TAB	46
<i>irbesartan 75mg tab</i>	27	IXCHIQ INJ	90	<i>junel 1.5/30 21 day pack</i>	55
ISENTRESS 100MG	46	IXIARO 0.012MG/ML	90	<i>junel 1/20 21 day pack</i>	55
CHEW TAB		SYRINGE		<i>junel fe 1.5/30 28 day</i>	55
ISENTRESS 100MG	46			<i>pack</i>	
GRANULES FOR ORAL		J		<i>junel fe 1/20 28 day pack</i>	55
SUSP		JAKAFI 10MG TAB	37	<i>junel fe 24 1/20 28 day</i>	55
ISENTRESS 25MG	46	JAKAFI 15MG TAB	37	<i>pack</i>	
CHEW TAB		JAKAFI 20MG TAB	37	JYNNEOS 0.5ML INJ	90
ISENTRESS 400MG TAB	46	JAKAFI 25MG TAB	37		
ISENTRESS 600MG TAB	46	JAKAFI 5MG TAB	37	K	
<i>isibloom 28 day pack</i>	55	<i>jantoven 10mg tab</i>	12	<i>kaitlib fe 28 day pack</i>	55
ISONIAZID 100MG TAB	32	<i>jantoven 1mg tab</i>	12	KALYDECO 13.4MG	85
<i>isoniazid 10mg/ml oral</i>	32	<i>jantoven 2.5mg tab</i>	12	GRANULES	
<i>soln</i>		<i>jantoven 2mg tab</i>	12	KALYDECO 150MG TAB	85
<i>isoniazid 300mg tab</i>	32	<i>jantoven 3mg tab</i>	12	KALYDECO 25MG	85
<i>isosorbide dinitrate 10mg</i>	8	<i>jantoven 4mg tab</i>	12	GRANULES	
<i>tab</i>		<i>jantoven 5mg tab</i>	12	KALYDECO 5.8MG	85
<i>isosorbide dinitrate 20mg</i>	8	<i>jantoven 6mg tab</i>	12	GRANULES	
<i>tab</i>		<i>jantoven 7.5mg tab</i>	12	KALYDECO 50MG	85
<i>isosorbide dinitrate 30mg</i>	8	JANUMET 1000-50MG	20	GRANULES	
<i>tab</i>		TAB		KALYDECO 75MG	86
<i>isosorbide dinitrate 5mg</i>	8	JANUMET 500-50MG	20	GRANULES	
<i>tab</i>		TAB		<i>kariva 28 day pack</i>	55
ISOSORBIDE	8	JANUMET XR	20	KCL/D5W/LR INJ 0.15%	74
MONONITRATE 10MG		1000-100MG TAB		<i>kcl/nacl 20meq-0.45% inj</i>	74
TAB		JANUMET XR	20	<i>kcl/nacl 20meq-0.9% inj</i>	74
<i>isosorbide mononitrate</i>	8	1000-50MG TAB		<i>kcl/nacl 40meq-9% inj</i>	74
<i>120mg er tab</i>		JANUMET XR 500-50MG	20	<i>kelnor 1/35 28 day pack</i>	55
		TAB		<i>kelnor 1/50 28 day pack</i>	55

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

ALPHABETICAL LISTING OF DRUGS

KERENDIA 10MG TAB	65	<i>klor-con 20meq micro er</i>	74	<i>lamotrigine 25mg odt</i>	15
KERENDIA 20MG TAB	65	<i>tab</i>		<i>lamotrigine 25mg tab</i>	15
KESIMPTA 20MG/0.4ML	84	<i>klor-con 20meq powder</i>	75	<i>lamotrigine 300mg er tab</i>	15
PEN INJ		<i>for oral soln</i>		<i>lamotrigine 50mg er tab</i>	15
<i>ketoconazole 2% cream</i>	59	<i>klor-con 8meq er tab</i>	75	<i>lamotrigine 50mg odt</i>	15
<i>ketoconazole 2% shampoo</i>	59	KLOXXADO 8MG/0.1ML	23	<i>lamotrigine 5mg chew tab</i>	15
<i>ketoconazole 200mg tab</i>	24	NASAL SPRAY		<i>lansoprazole 15mg dr cap</i>	89
<i>ketorolac tromethamine 0.4% ophth soln</i>	80	KORLYM 300MG TAB	21	<i>lansoprazole 30mg dr cap</i>	89
<i>ketorolac tromethamine 0.5% ophth soln</i>	80	KOSELUGO 10MG CAP	37	<i>lanthanum carbonate 1000mg chew tab</i>	68
<i>ketorolac tromethamine 10mg tab</i>	4	KOSELUGO 25MG CAP	37	<i>lanthanum carbonate 500mg chew tab</i>	68
KEVZARA	4	<i>kourzeq 0.1% oral paste</i>	77	<i>lanthanum carbonate 750mg chew tab</i>	68
150MG/1.14ML		KRAZATI 200MG TAB	37	LANTUS 100UNIT/ML	22
AUTO-INJECTOR		<i>kurvelo pack</i>	55	INJ	
KEVZARA	4	L		LANTUS 100UNIT/ML	22
150MG/1.14ML		<i>labetalol 100mg tab</i>	48	PEN INJ	
SYRINGE		<i>labetalol 200mg tab</i>	48	<i>lapatinib 250mg tab</i>	37
KEVZARA	4	<i>labetalol 300mg tab</i>	48	<i>larin 1.5/30 pack</i>	55
150MG/1.14ML		<i>lacosamide 100mg tab</i>	14	<i>larin 1/20 pack</i>	55
SYRINGE		<i>lacosamide 10mg/ml oral soln</i>	14	<i>larin fe 1.5/30 pack</i>	55
KEVZARA	4	<i>lacosamide 150mg tab</i>	14	<i>larin fe 1/20 pack</i>	55
200MG/1.14ML		<i>lacosamide 200mg tab</i>	14	<i>latanoprost 0.005% ophth soln</i>	80
AUTO-INJECTOR		<i>lacosamide 50mg tab</i>	14	<i>layolis fe 28 pack</i>	55
KEVZARA	4	<i>lactulose 667mg/ml oral soln</i>	72	<i>leena 28 day pack</i>	55
200MG/1.14ML		LAGEVRIO 200MG CAP	48	<i>leflunomide 10mg tab</i>	5
SYRINGE		<i>lamivudine 100mg tab</i>	48	<i>leflunomide 20mg tab</i>	5
KINRIX SYRINGE	88	<i>lamivudine 10mg/ml oral soln</i>	46	<i>lenalidomide 10mg cap</i>	75
KISQALI 200MG DAILY	37	<i>lamivudine 150mg tab</i>	46	<i>lenalidomide 15mg cap</i>	75
DOSE PACK (21)		<i>lamivudine 300mg tab</i>	46	<i>lenalidomide 2.5mg cap</i>	75
KISQALI 400MG DAILY	37	<i>lamivudine/zidovudine 150-300mg tab</i>	46	<i>lenalidomide 20mg cap</i>	75
DOSE PACK (42)		<i>lamotrigine 100mg er tab</i>	14	<i>lenalidomide 25mg cap</i>	75
KISQALI 600MG DAILY	37	<i>lamotrigine 100mg odt</i>	14	<i>lenalidomide 5mg cap</i>	75
DOSE PACK (63)		<i>lamotrigine 100mg tab</i>	14	LENVIMA 10MG DAILY	33
KISQALI/FEMARA 200	35	<i>lamotrigine 150mg tab</i>	14	DOSE PACK	
CO-PACK		<i>lamotrigine 200mg er tab</i>	14	LENVIMA 12MG DAILY	33
KISQALI/FEMARA 400	35	<i>lamotrigine 200mg odt</i>	14	DOSE PACK	
CO-PACK		<i>lamotrigine 200mg tab</i>	14	LENVIMA 14MG DAILY	33
KISQALI/FEMARA 600	35	<i>lamotrigine 250mg er tab</i>	14	DOSE PACK	
CO-PACK		<i>lamotrigine 25mg chew tab</i>	15	LENVIMA 18MG DAILY	33
<i>klor-con 10meq er tab</i>	74	<i>lamotrigine 25mg er tab</i>	15	DOSE PACK	
<i>klor-con 10meq micro er tab</i>	74				
<i>klor-con 15meq micro er tab</i>	74				

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

ALPHABETICAL LISTING OF DRUGS

LENVIMA 20MG DAILY DOSE PACK	33	LEVOBUNOLOL 0.5% OPHTH SOLN	78	levothyroxine sodium 88mcg tab	87
LENVIMA 24MG DAILY DOSE PACK	33	levocarnitine 100mg/ml oral soln	65	levoxyl 100mcg tab	87
LENVIMA 4MG DAILY DOSE PACK	33	levocarnitine 330mg tab	65	levoxyl 112mcg tab	87
LENVIMA 8MG DAILY DOSE PACK	33	levocetirizine 5mg tab	25	levoxyl 125mcg tab	87
lessina 28 day pack	55	levofloxacin 250mg tab	67	levoxyl 137mcg tab	87
letrozole 2.5mg tab	34	levofloxacin 500mg tab	67	levoxyl 150mcg tab	87
leucovorin 10mg tab	39	levofloxacin	67	levoxyl 175mcg tab	87
leucovorin 15mg tab	39	500mg/100ml inj		levoxyl 200mcg tab	87
leucovorin 25mg tab	39	levofloxacin 750mg tab	67	levoxyl 25mcg tab	87
leucovorin 5mg tab	39	levofloxacin	67	levoxyl 50mcg tab	87
LEUKERAN 2MG TAB	33	750mg/150ml inj		levoxyl 75mcg tab	87
LEUPROLIDE ACETATE 22.5MG INJ	34	levofloxacin oral soln	67	levoxyl 88mcg tab	87
leuprolide acetate 5mg/ml inj	34	25mg/ml		LEXIVA 50MG/ML SUSP	46
levabuterol 0.31mg/3ml neb soln	11	levonest 28 day pack	55	lidocaine 4% topical soln	62
levabuterol 0.63mg/3ml inh soln	11	levonorgestrel-ethinyl estradiol	55	lidocaine 5% ointment	62
levabuterol 1.25mg/0.5ml neb soln	11	0.05-30/0.075-40/0.125-3 0mg-mcg pack		lidocaine 5% patch	62
levabuterol 1.25mg/3ml neb soln	11	levora 0.15/30 28 day pack	55	lidocaine viscous 2% topical soln	77
LEVALBUTEROL 45MCG/ACT INHALER	11	levothyroxine sodium 100mcg tab	87	lidocaine/prilocaine 2.5-2.5% cream	62
LEVEMIR 100UNIT/ML INJ	22	levothyroxine sodium 112mcg tab	87	lidocan 5% patch	62
LEVEMIR 100UNIT/ML PEN INJ	22	levothyroxine sodium 125mcg tab	87	linezolid 20mg/ml susp	31
levetiracetam 1000mg tab	15	levothyroxine sodium 137mcg tab	87	linezolid 2mg/ml inj	31
levetiracetam 100mg/ml oral soln	15	levothyroxine sodium 150mcg tab	87	linezolid 600mg tab	31
levetiracetam 250mg tab	15	levothyroxine sodium 175mcg tab	87	LINZESS 145MCG CAP	68
levetiracetam 500mg er tab	15	levothyroxine sodium 200mcg tab	87	LINZESS 290MCG CAP	68
levetiracetam 500mg tab	15	levothyroxine sodium 25mcg tab	87	LINZESS 72MCG CAP	68
levetiracetam 750mg er tab	15	levothyroxine sodium 300mcg tab	87	liothyronine sodium 25mcg tab	87
levetiracetam 750mg tab	15	levothyroxine sodium 50mcg tab	87	liothyronine sodium 50mcg tab	87
		levothyroxine sodium 75mcg tab	87	liothyronine sodium 5mcg tab	87
				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

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

ALPHABETICAL LISTING OF DRUGS

<i>lisdexamfetamine</i>	1	<i>lopinavir/ritonavir</i>	46	LUMRYZ 9GM	83
<i>dimesylate 60mg cap</i>		<i>80-20mg/ml oral soln</i>		GRANULES FOR ORAL	
<i>lisdexamfetamine</i>	1	<i>lorazepam 0.5mg tab</i>	9	SUSP	
<i>dimesylate 70mg cap</i>		<i>lorazepam 1mg tab</i>	9	LUPKYNIS 7.9MG CAP	76
<i>lisinopril 10mg tab</i>	27	<i>lorazepam 2mg tab</i>	9	LUPRON 11.25MG	34
<i>lisinopril 2.5mg tab</i>	27	<i>lorazepam 2mg/ml oral</i>	9	SYRINGE	
<i>lisinopril 20mg tab</i>	27	<i>soln</i>		(NON-PEDIATRIC)	
<i>lisinopril 30mg tab</i>	27	LORBRENA 100MG TAB	37	LUPRON 22.5MG	34
<i>lisinopril 40mg tab</i>	27	LORBRENA 25MG TAB	37	SYRINGE	
<i>lisinopril 5mg tab</i>	27	<i>loryna 28 day pack</i>	55	LUPRON 3.75MG	34
LITFULO 50MG CAP	62	<i>losartan potassium</i>	27	SYRINGE	
<i>lithium carbonate 150mg</i>	41	<i>100mg tab</i>		LUPRON 30MG	34
<i>cap</i>		<i>losartan potassium 25mg</i>	27	SYRINGE	
<i>lithium carbonate 300mg</i>	41	<i>tab</i>		LUPRON 45MG	34
<i>cap</i>		<i>losartan potassium 50mg</i>	27	SYRINGE	
<i>lithium carbonate 300mg</i>	41	<i>tab</i>		(NON-PEDIATRIC)	
<i>er tab</i>		<i>loteprednol etabonate</i>	80	LUPRON 7.5MG	34
<i>lithium carbonate 300mg</i>	41	<i>0.5% ophth gel</i>		SYRINGE	
<i>tab</i>		<i>loteprednol etabonate</i>	80	(NON-PEDIATRIC)	
<i>lithium carbonate 450mg</i>	41	<i>0.5% ophth susp</i>		<i>lurasidone 120mg tab</i>	41
<i>er tab</i>		<i>lovastatin 10mg tab</i>	26	<i>lurasidone 20mg tab</i>	41
LITHIUM CARBONATE	41	<i>lovastatin 20mg tab</i>	26	<i>lurasidone 40mg tab</i>	41
600MG CAP		<i>lovastatin 40mg tab</i>	26	<i>lurasidone 60mg tab</i>	41
<i>lithium citrate 60mg/ml</i>	41	<i>low-ogestrel 28 day pack</i>	55	<i>lurasidone 80mg tab</i>	41
<i>oral soln</i>		<i>loxapine 10mg cap</i>	43	<i>lutera 28 day pack</i>	55
LITHOSTAT 250MG TAB	69	<i>loxapine 25mg cap</i>	43	<i>lyleq 28 day 0.35mg pack</i>	57
LIVTENCITY 200MG TAE	47	<i>loxapine 50mg cap</i>	43	<i>lyllana 0.025mg/24hr</i>	67
<i>loestrin fe 1/20 28 day</i>	55	<i>loxapine 5mg cap</i>	43	<i>patch</i>	
<i>pack</i>		<i>lubiprostone 24mcg cap</i>	68	<i>lyllana 0.0375mg/24hr</i>	67
LOKELMA 10GM	76	<i>lubiprostone 8mcg cap</i>	68	<i>patch</i>	
POWDER FOR ORAL		LUMAKRAS 120MG TAB	37	<i>lyllana 0.05mg/24hr</i>	67
SUSP		LUMAKRAS 320MG TAB	37	<i>patch</i>	
LOKELMA 5GM	76	LUMIGAN 0.01% OPHTH	80	<i>lyllana 0.075mg/24hr</i>	67
POWDER FOR ORAL		SOLN		<i>patch</i>	
SUSP		LUMRYZ 4.5GM	83	<i>lyllana 0.1mg/24hr patch</i>	67
LONSURF 6.14-15MG	35	GRANULES FOR ORAL		LYNPARZA 100MG TAB	37
TAB		SUSP		LYNPARZA 150MG TAB	37
LONSURF 8.19-20MG	35	LUMRYZ 6GM	83	LYSODREN 500MG TAB	34
TAB		GRANULES FOR ORAL		LYTGOBI 4MG TAB	37
<i>loperamide 2mg cap</i>	23	SUSP		PACK (12MG DAILY	
<i>lopinavir/ritonavir</i>	46	LUMRYZ 7.5GM	83	DOSE)	
<i>100-25mg tab</i>		GRANULES FOR ORAL		LYTGOBI 4MG TAB	37
<i>lopinavir/ritonavir</i>	46	SUSP		PACK (16MG DAILY	
<i>200-50mg tab</i>				DOSE)	

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

ALPHABETICAL LISTING OF DRUGS

LYTGOBI 4MG TAB PACK (20MG DAILY DOSE)	37	MAYZENT STARTER PACK (7)	85	<i>meropenem 1000mg inj</i>	31
LYUMJEV 100UNIT/ML INJ	22	<i>meclizine 12.5mg tab</i>	23	<i>meropenem 500mg inj</i>	31
LYUMJEV 100UNIT/ML PEN INJ	22	<i>meclizine 25mg tab</i>	23	<i>mesalamine 1000mg rectal supp</i>	68
LYUMJEV 200UNIT/ML PEN INJ	22	<i>medroxyprogesterone acetate 10mg tab</i>	83	<i>mesalamine 375mg er cap</i>	68
<i>lyza 0.35mg pack</i>	57	<i>medroxyprogesterone acetate 150mg/ml inj</i>	57	<i>mesalamine 66.7mg/ml enema</i>	68
M		<i>medroxyprogesterone acetate 150mg/ml syringe</i>	83	MESNEX 400MG TAB	39
<i>magnesium sulfate 500mg/ml inj</i>	74	<i>medroxyprogesterone acetate 2.5mg tab</i>	83	<i>metaxalone 800mg tab</i>	77
<i>magnesium sulfate 500mg/ml syringe</i>	74	<i>medroxyprogesterone acetate 5mg tab</i>	83	<i>metformin 1000mg tab</i>	20
<i>malathion 0.5% lotion</i>	62	<i>mefloquine 250mg tab</i>	32	<i>metformin 500mg er tab</i>	20
<i>maraviroc 150mg tab</i>	46	<i>megestrol acetate</i>	83	<i>metformin 500mg tab</i>	20
<i>maraviroc 300mg tab</i>	46	<i>125mg/ml susp</i>	34	<i>metformin 750mg er tab</i>	21
<i>marlissa 28 day pack</i>	56	<i>megestrol acetate 20mg tab</i>	34	<i>metformin 850mg tab</i>	21
MARPLAN 10MG TAB	17	<i>megestrol acetate 40mg tab</i>	34	<i>methadone 10mg tab</i>	6
MATULANE 50MG CAP	39	<i>megestrol acetate</i>	34	<i>methadone 5mg tab</i>	6
MAVENCLAD 10 TABLET PACK 10MG	84	<i>40mg/ml susp</i>	37	<i>methazolamide 25mg tab</i>	63
MAVENCLAD 4 TABLET PACK 10MG	84	MEKINIST 0.05MG/ML ORAL SOLN	37	<i>methazolamide 50mg tab</i>	63
MAVENCLAD 5 TABLET PACK 10MG	84	MEKINIST 0.5MG TAB	37	<i>methenamine hippurate 1000mg tab</i>	31
MAVENCLAD 6 TABLET PACK 10MG	84	MEKINIST 2MG TAB	37	<i>methimazole 10mg tab</i>	87
MAVENCLAD 7 TABLET PACK 10MG	84	MEKTOVI 15MG TAB	37	<i>methimazole 5mg tab</i>	87
MAVENCLAD 8 TABLET PACK 10MG	84	<i>meloxicam 15mg tab</i>	4	<i>methocarbamol 500mg tab</i>	77
MAVENCLAD 9 TABLET PACK 10MG	85	<i>meloxicam 7.5mg tab</i>	4	<i>methocarbamol 750mg tab</i>	77
MAVYRET 100-40MG TAB	48	<i>memantine 10mg tab</i>	83	<i>methotrexate 2.5mg tab</i>	33
MAVYRET 50-20MG ORAL PELLETT	48	<i>memantine 14mg er cap</i>	83	<i>methotrexate 25mg/ml inj</i>	33
MAYZENT 0.25MG STARTER PACK	85	<i>memantine 21mg er cap</i>	83	<i>methotrexate 50mg/2ml inj</i>	33
MAYZENT 0.25MG TAB	85	<i>memantine 28mg er cap</i>	83	METHOXSALLEN 10MG CAP	60
MAYZENT 1MG TAB	85	<i>memantine 2mg/ml oral soln</i>	83	<i>methsuximide 300mg cap</i>	16
MAYZENT 2MG TAB	85	<i>memantine 5/10mg titration pack</i>	83	<i>methylphenidate 10mg cr cap</i>	2
		<i>memantine 5mg tab</i>	83	<i>methylphenidate 10mg er tab</i>	2
		<i>memantine 7mg er cap</i>	83	<i>methylphenidate 10mg la cap</i>	2
		MENACTRA INJ	89	<i>methylphenidate 10mg tab</i>	2
		MENQUADFI INJ	90	<i>methylphenidate 18mg ER</i>	2
		MENVEO INJ	90	<i>osmotic tab</i>	
		<i>mercaptapurine 50mg tab</i>	33		

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

ALPHABETICAL LISTING OF DRUGS

<i>methylphenidate 1mg/ml oral soln</i>	2	<i>methylprednisolone 4mg tab</i>	57	<i>micafungin sodium 100mg inj</i>	24
<i>methylphenidate 20mg cr cap</i>	2	<i>methylprednisolone 8mg tab</i>	58	<i>micafungin sodium 50mg inj</i>	24
<i>methylphenidate 20mg er tab</i>	2	<i>metoclopramide 10mg tab</i>	68	<i>microgestin 1.5/30 21 day pack</i>	56
<i>methylphenidate 20mg la cap</i>	2	<i>metoclopramide 1mg/ml oral soln</i>	68	<i>microgestin 1/20 21 day pack</i>	56
<i>methylphenidate 20mg tab</i>	2	<i>metoclopramide 5mg tab</i>	68	<i>microgestin 24 fe 28 day pack</i>	56
<i>methylphenidate 27mg er tab</i>	2	<i>metolazone 10mg tab</i>	64	<i>microgestin fe 1.5/30 28 day pack</i>	56
<i>methylphenidate 27mg sr tab</i>	2	<i>metolazone 2.5mg tab</i>	64	<i>microgestin fe 1/20 28 day pack</i>	56
<i>methylphenidate 2mg/ml oral soln</i>	2	<i>metolazone 5mg tab</i>	64	<i>midodrine 10mg tab</i>	91
<i>methylphenidate 30mg cr cap</i>	2	<i>metoprolol succinate 100mg er tab</i>	49	<i>midodrine 2.5mg tab</i>	91
<i>methylphenidate 30mg la cap</i>	2	<i>metoprolol succinate 200mg er tab</i>	49	<i>midodrine 5mg tab</i>	91
<i>methylphenidate 36mg er tab</i>	2	<i>metoprolol succinate 25mg er tab</i>	49	<i>mifepristone 300mg tab</i>	21
<i>methylphenidate 36mg sr tab</i>	2	<i>metoprolol succinate 50mg er tab</i>	49	MIGLITOL 100MG TAB	20
<i>methylphenidate 40mg cr cap</i>	2	<i>metoprolol tartrate 100mg tab</i>	49	<i>miglitol 25mg tab</i>	20
<i>methylphenidate 40mg la cap</i>	2	<i>metoprolol tartrate 25mg tab</i>	49	MIGLITOL 50MG TAB	20
<i>methylphenidate 50mg cr cap</i>	2	<i>metoprolol tartrate 37.5mg tab</i>	49	<i>miglustat 100mg cap</i>	70
<i>methylphenidate 54mg er tab</i>	2	<i>metoprolol tartrate 50mg tab</i>	49	<i>mili 28 day pack</i>	56
<i>methylphenidate 54mg sr tab</i>	2	<i>metoprolol tartrate 75mg tab</i>	49	<i>mimvey pack</i>	66
<i>methylphenidate 5mg tab</i>	2	<i>metronidazole 0.75% cream</i>	62	<i>minocycline 100mg cap</i>	86
<i>methylphenidate 60mg cr cap</i>	2	<i>metronidazole 0.75% gel</i>	62	<i>minocycline 50mg cap</i>	86
<i>methylprednisolone 16mg tab</i>	57	<i>metronidazole 0.75% vaginal gel</i>	91	<i>minocycline 75mg cap</i>	86
<i>methylprednisolone 32mg tab</i>	57	<i>metronidazole 1% gel</i>	62	<i>minoxidil 10mg tab</i>	30
<i>methylprednisolone 4mg pack</i>	57	<i>metronidazole 250mg tab</i>	30	<i>minoxidil 2.5mg tab</i>	30
		<i>metronidazole 500mg tab</i>	30	<i>mirtazapine 15mg odt</i>	17
		<i>metronidazole 5mg/ml inj</i>	30	<i>mirtazapine 15mg tab</i>	17
		<i>metyrosine 250mg cap</i>	27	<i>mirtazapine 30mg odt</i>	17
		<i>mexiletine 150mg cap</i>	9	<i>mirtazapine 30mg tab</i>	17
		<i>mexiletine 200mg cap</i>	9	<i>mirtazapine 45mg odt</i>	17
		<i>mexiletine 250mg cap</i>	9	<i>mirtazapine 45mg tab</i>	17
		<i>mibelas 24 fe chewable 28 day pack</i>	56	<i>mirtazapine 7.5mg tab</i>	17
				<i>misoprostol 100mcg tab</i>	89
				<i>misoprostol 200mcg tab</i>	89
				M-M-R II INJ	90
				<i>modafinil 100mg tab</i>	2
				<i>modafinil 200mg tab</i>	2
				<i>moexipril 15mg tab</i>	27
				<i>moexipril 7.5mg tab</i>	27
				MOLINDONE 10MG TAB	44

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

ALPHABETICAL LISTING OF DRUGS

MOLINDONE 25MG TAB	44	MOUNJARO	21	<i>naltrexone 50mg tab</i>	23
MOLINDONE 5MG TAB	44	2.5MG/0.5ML		<i>naproxen 250mg tab</i>	4
<i>mometasone furoate 0.1% cream</i>	61	AUTO-INJECTOR		<i>naproxen 375mg dr tab</i>	4
<i>mometasone furoate 0.1% lotion</i>	61	MOUNJARO 5MG/0.5ML	21	<i>naproxen 375mg tab</i>	4
<i>mometasone furoate 0.1% ointment</i>	61	AUTO-INJECTOR		<i>naproxen 500mg tab</i>	4
<i>montelukast 10mg tab</i>	10	MOUNJARO	21	<i>naproxen sodium 275mg tab</i>	5
<i>montelukast 4mg chew tab</i>	10	7.5MG/0.5ML		<i>naproxen sodium 550mg tab</i>	5
<i>montelukast 4mg granules</i>	10	AUTO-INJECTOR		<i>naratriptan 1mg tab</i>	73
<i>montelukast 5mg chew tab</i>	10	MOVANTIK 12.5MG TAB	68	<i>naratriptan 2.5mg tab</i>	73
<i>morphine sulfate 100mg er tab</i>	6	MOVANTIK 25MG TAB	68	NATACYN 5% OPHTH	79
<i>morphine sulfate 15mg er tab</i>	6	MOXIFLOXACIN	67	SUSP	
MORPHINE SULFATE 15MG TAB	6	1.6MG/ML INJ		<i>nateglinide 120mg tab</i>	22
<i>morphine sulfate 200mg er tab</i>	6	<i>moxifloxacin 400mg tab</i>	67	<i>nateglinide 60mg tab</i>	22
<i>morphine sulfate 20mg/ml oral soln</i>	6	MULTAQ 400MG TAB	9	NAYZILAM 5MG/0.1ML	13
MORPHINE SULFATE 2MG/ML ORAL SOLN	6	<i>mupirocin 2% ointment</i>	59	NASAL SPRAY	
<i>morphine sulfate 30mg er tab</i>	6	<i>mycophenolate mofetil 200mg/ml susp</i>	76	<i>necon 0.5/35 28 day pack</i>	56
MORPHINE SULFATE 30MG TAB	6	<i>mycophenolate mofetil 250mg cap</i>	76	NEEDLES INSULIN	73
MORPHINE SULFATE 4MG/ML ORAL SOLN	6	<i>mycophenolate mofetil 500mg tab</i>	76	DISP. SAFETY	
<i>morphine sulfate 60mg er tab</i>	6	<i>mycophenolic acid 180mg dr tab</i>	76	NEFAZODONE 100MG	18
MOUNJARO	21	<i>mycophenolic acid 360mg dr tab</i>	76	NEFAZODONE 150MG	18
10MG/0.5ML		MYRBETRIQ 25MG ER	89	NEFAZODONE 200MG	18
AUTO-INJECTOR		TAB		NEFAZODONE 250MG	18
MOUNJARO	21	MYRBETRIQ 50MG ER	89	TAB	
12.5MG/0.5ML		TAB		NEFAZODONE 50MG	18
AUTO-INJECTOR		<hr/>		TAB	
MOUNJARO	21	N		<i>neomycin sulfate 500mg tab</i>	3
15MG/0.5ML		<i>nabumetone 500mg tab</i>	4	<i>neomycin/bacitracin/poly myxin ophth ointment 5mg-400unit-10000unit</i>	79
AUTO-INJECTOR		<i>nabumetone 750mg tab</i>	4	NEOMYCIN/POLYMYXI	79
		<i>nadolol 20mg tab</i>	49	N B/GRAMICIDIN	
		<i>nadolol 40mg tab</i>	49	1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	
		<i>nadolol 80mg tab</i>	49	<i>neomycin/polymyxin/bacitracin/hydrocortisone ophth 1% ointment</i>	80
		<i>nafacillin 100mg/ml inj</i>	82		
		<i>nafacillin 1gm inj</i>	82		
		<i>nafacillin 2gm inj</i>	82		
		NALOXONE 0.4MG/ML	23		
		CARTRIDGE			
		<i>naloxone 0.4mg/ml inj</i>	23		
		<i>naloxone 1mg/ml syringe</i>	23		
		<i>naloxone 40mg/ml nasal spray</i>	23		

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

ALPHABETICAL LISTING OF DRUGS

<i>neomycin/polymyxin/dexa methasone 0.1% ophth susp</i>	80	NINLARO 2.3MG CAP	37	NORDITROPIN	64
<i>neomycin/polymyxin/hydr ocortisone 3.5-10000unit-1% otic soln</i>	81	NINLARO 3MG CAP	37	10MG/1.5ML PEN INJ	
<i>neomycin/polymyxin/hydr ocortisone 3.5-10000unit-1% otic susp</i>	81	NINLARO 4MG CAP	37	NORDITROPIN	64
<i>neo-polycin hc ophth ointment</i>	80	<i>nitazoxanide 500mg tab</i>	30	15MG/1.5ML PEN INJ	
<i>neo-polycin ophth ointment</i>	79	<i>nitisinone 10mg cap</i>	65	NORDITROPIN	64
NERLYNX 40MG TAB	37	<i>nitisinone 20mg cap</i>	65	30MG/3ML PEN INJ	
NEVIRAPINE 10MG/ML SUSP	46	<i>nitisinone 2mg cap</i>	65	NORDITROPIN	64
<i>nevirapine 200mg tab</i>	46	<i>nitisinone 5mg cap</i>	65	5MG/1.5ML PEN INJ	
<i>nevirapine 400mg er tab</i>	46	NITRO-BID 2% OINTMENT	8	<i>norethindrone 0.35mg pack</i>	57
NEXLETOL 180MG TAB	25	<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	32	<i>norethindrone acetate 5mg tab</i>	83
NEXLIZET 180-10MG TAB	25	<i>nitrofurantoin macrocrystals 100mg cap</i>	32	<i>nortrel 0.5/35 28 day pack</i>	56
<i>niacin 1000mg er tab</i>	26	<i>nitrofurantoin macrocrystals 50mg cap</i>	32	<i>nortrel 1/35 21 day pack</i>	56
<i>niacin 500mg er tab</i>	26	<i>nitrofurantoin nitroglycerin 0.1mg/hr patch</i>	8	<i>nortrel 1/35 28 day pack</i>	56
<i>niacin 750mg er tab</i>	26	<i>nitrofurantoin nitroglycerin 0.2mg/hr patch</i>	8	<i>nortrel 7/7/7 28 day pack</i>	56
<i>nicardipine 20mg cap</i>	50	<i>nitroglycerin 0.3mg sl tab</i>	8	<i>nortriptyline 10mg cap</i>	19
<i>nicardipine 30mg cap</i>	50	<i>nitroglycerin 0.4% rectal ointment</i>	7	<i>nortriptyline 25mg cap</i>	19
NICOTROL 10MG INH SOLN	85	<i>nitroglycerin 0.4mg sl tab</i>	8	<i>nortriptyline 2mg/ml oral soln</i>	19
NICOTROL 10MG/ML NASAL INHALER	85	<i>nitroglycerin 0.4mg/act spray</i>	8	<i>nortriptyline 50mg cap</i>	19
<i>nifedipine 30mg er tab</i>	50	<i>nitroglycerin 0.4mg/hr patch</i>	8	<i>nortriptyline 75mg cap</i>	19
<i>nifedipine 30mg osmotic er tab</i>	50	<i>nitroglycerin 0.6mg sl tab</i>	8	NORVIR 100MG ORAL POWDER	46
<i>nifedipine 60mg er tab</i>	50	<i>nitroglycerin 0.6mg/hr patch</i>	8	NOURIANZ 20MG TAB	39
<i>nifedipine 60mg osmotic er tab</i>	50	NIVESTYM 300MCG/0.5ML SYRINGE	71	NOURIANZ 40MG TAB	39
<i>nifedipine 90mg er tab</i>	50	NIVESTYM 300MCG/ML INJ	71	NUBEQA 300MG TAB	34
<i>nifedipine 90mg osmotic er tab</i>	50	NIVESTYM 480MCG/0.8ML SYRINGE	71	NUCALA 100MG INJ	9
<i>nikki 28 day pack</i>	56	NIVESTYM 480MCG/1.6ML INJ	71	NUCALA 100MG/ML AUTO-INJECTOR	9
<i>nilutamide 150mg tab</i>	34	<i>nora-be 28 day 0.35mg pack</i>	57	NUCALA 100MG/ML SYRINGE	9
<i>nimodipine 30mg cap</i>	50			NUCALA 40MG/0.4ML SYRINGE	9
				NUDEXTA 20-10MG CAP	85
				NUPLAZID 10MG TAB	41
				NUPLAZID 34MG CAP	41
				NUTRILIPID 20GM/100ML INJ	78
				NUZYRA 150MG TAB	86
				<i>nyamyc 100000unit/gm topical powder</i>	59

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

ALPHABETICAL LISTING OF DRUGS

<i>nylia 1/35 28 day pack</i>	56	OGSIVEO 50MG TAB	37	ONUREG 200MG TAB	33
<i>nylia 7/7/7 28 day pack</i>	56	OJJAARA 100MG TAB	37	ONUREG 300MG TAB	33
<i>nymyo 28 day pack</i>	56	OJJAARA 150MG TAB	37	OPSUMIT 10MG TAB	52
<i>nystatin 100000 unit/gm ointment</i>	59	OJJAARA 200MG TAB	37	OPVEE 2.7MG/0.1ML	23
<i>nystatin 100000unit/gm topical powder</i>	59	<i>olanzapine 10mg inj</i>	43	NASAL SPRAY	
<i>nystatin 100000unit/ml cream</i>	59	<i>olanzapine 10mg odt</i>	43	ORENCIA 125MG/ML	5
<i>nystatin 100000unit/ml susp</i>	77	<i>olanzapine 10mg tab</i>	43	AUTO-INJECTOR	
<i>nystatin 500000unit tab</i>	24	<i>olanzapine 15mg odt</i>	43	ORENCIA 125MG/ML	5
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	59	<i>olanzapine 15mg tab</i>	43	SYRINGE	
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	59	<i>olanzapine 2.5mg tab</i>	43	ORENCIA 50MG/0.4ML	5
<i>nystop 100000unit/gm topical powder</i>	59	<i>olanzapine 20mg odt</i>	43	SYRINGE	
NYVEPRIA 6MG/0.6ML SYRINGE	71	<i>olanzapine 20mg tab</i>	43	ORENCIA 87.5MG/0.7ML	5
O		<i>olanzapine 5mg odt</i>	43	SYRINGE	
OCALIVA 10MG TAB	67	<i>olanzapine 5mg tab</i>	43	ORENITRAM 0.125MG ER TAB	51
OCALIVA 5MG TAB	67	<i>olanzapine 7.5mg tab</i>	43	ORENITRAM 0.25MG ER TAB	51
<i>ocella 28 day pack</i>	56	<i>olmesartan medoxomil 20mg tab</i>	27	ORENITRAM 1MG ER TAB	51
OCTAGAM 1GM/20ML INJ	81	<i>olmesartan medoxomil 40mg tab</i>	27	ORENITRAM 2.5MG ER TAB	51
OCTAGAM 2GM/20ML INJ	81	<i>olmesartan medoxomil 5mg tab</i>	27	ORENITRAM 5MG ER TAB	51
<i>octreotide 0.05mg/ml inj</i>	66	<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	77	ORENITRAM ER TAB	51
<i>octreotide 0.1mg/ml inj</i>	66	OLUMIANT 1MG TAB	3	MONTH 1 TITRATION KIT PACK	
<i>octreotide 0.2mg/ml inj</i>	66	OLUMIANT 2MG TAB	3	ORENITRAM ER TAB	51
<i>octreotide 0.5mg/ml inj</i>	66	OLUMIANT 4MG TAB	3	MONTH 2 TITRATION KIT PACK	
<i>octreotide 1mg/ml inj</i>	66	<i>omega-3 acid ethyl esters (usp) 1000mg cap</i>	25	ORENITRAM ER TAB	51
ODEFSEY 200-25-25MG TAB	47	<i>omeprazole 10mg dr cap</i>	89	MONTH 3 TITRATION KIT PACK	
ODOMZO 200MG CAP	34	<i>omeprazole 20mg dr cap</i>	89	ORFADIN 4MG/ML SUSP	65
OFEV 100MG CAP	86	<i>omeprazole 40mg dr cap</i>	89	ORGOVYX 120MG TAB	34
OFEV 150MG CAP	86	OMNITROPE	64	ORKAMBI 125-100MG GRANULES	86
<i>ofloxacin 0.3% ophth soln</i>	79	10MG/1.5ML CARTRIDGE		ORKAMBI 125-100MG TAB	86
<i>ofloxacin 0.3% otic soln</i>	81	OMNITROPE 5.8MG INJ	64	ORKAMBI 125-200MG TAB	86
<i>ofloxacin 400mg tab</i>	67	OMNITROPE 5MG/1.5ML CARTRIDGE		ORKAMBI 188-150MG GRANULES	86
		<i>ondansetron 0.8mg/ml oral soln</i>	23	ORKAMBI 94-75MG GRANULES	86
		<i>ondansetron 4mg odt</i>	23		
		<i>ondansetron 4mg tab</i>	23		
		<i>ondansetron 8mg odt</i>	23		
		<i>ondansetron 8mg tab</i>	23		

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

ALPHABETICAL LISTING OF DRUGS

ORLADEYO 110MG CAP	70	<i>oxycodone 1mg/ml oral</i>	6	PANZYGA 2.5GM/25ML	81
ORLADEYO 150MG CAP	70	<i>soln</i>		INJ	
<i>orphenadrine citrate</i>	77	<i>oxycodone 20mg tab</i>	6	PANZYGA 20GM/200ML	81
<i>100mg er tab</i>		<i>oxycodone 20mg/ml oral</i>	6	INJ	
ORSERDU 345MG TAB	34	<i>soln</i>		PANZYGA 30GM/300ML	81
ORSERDU 86MG TAB	34	<i>oxycodone 30mg tab</i>	6	INJ	
<i>oseltamivir 30mg cap</i>	48	<i>oxycodone 5mg tab</i>	6	PANZYGA 5GM/50ML	81
<i>oseltamivir 45mg cap</i>	48	<i>oxycodone/acetaminophe</i>	6	INJ	
<i>oseltamivir 6mg/ml susp</i>	48	<i>n 10-325mg tab</i>		<i>paricalcitol 1mcg cap</i>	65
<i>oseltamivir 75mg cap</i>	48	<i>oxycodone/acetaminophe</i>	6	<i>paricalcitol 2mcg cap</i>	65
OSPHENA 60MG TAB	65	<i>n 2.5-325mg tab</i>		<i>paricalcitol 4mcg cap</i>	65
OTEZLA 28-DAY	5	<i>oxycodone/acetaminophe</i>	6	<i>paroxetine 10mg tab</i>	18
STARTER PACK		<i>n 5-325mg tab</i>		<i>paroxetine 12.5mg er tab</i>	18
OTEZLA 30MG TAB	5	OXYCODONE/ACETAMI	6	<i>paroxetine 20mg tab</i>	18
<i>oxacillin 100mg/ml inj</i>	82	NOPHEN 5-325MG/5ML		<i>paroxetine 25mg er tab</i>	18
<i>oxacillin 1gm inj</i>	82	<i>oxycodone/acetaminophe</i>	6	<i>paroxetine 2mg/ml susp</i>	18
OXACILLIN 20MG/ML	82	<i>n 7.5-325mg tab</i>		<i>paroxetine 30mg tab</i>	18
INJ		OZEMPIC 2.68MG/ML	21	<i>paroxetine 37.5mg er tab</i>	18
<i>oxacillin 2gm inj</i>	82	PEN INJ		<i>paroxetine 40mg tab</i>	18
OXACILLIN 40MG/ML	82	OZEMPIC 2MG/3ML	21	PAXLOVID	47
INJ		PEN INJ		150MG/100MG TAB	
OXBRYTA 300MG TAB	70	OZEMPIC 4MG/3ML	21	PACK (20)	
OXBRYTA 300MG TAB	70	PEN INJ		PAXLOVID	47
FOR ORAL SUSP				150MG/100MG TAB	
OXBRYTA 500MG TAB	70	P		PACK (30)	
<i>oxcarbazepine 150mg tab</i>	15	<i>pacerone 200mg tab</i>	9	<i>pazopanib 200mg tab</i>	37
<i>oxcarbazepine 300mg tab</i>	15	<i>pacerone 400mg tab</i>	9	PEDIARIX SYRINGE	88
<i>oxcarbazepine 600mg tab</i>	15	<i>paliperidone 1.5mg er tab</i>	42	PEDVAXHIB	90
<i>oxcarbazepine 60mg/ml</i>	15	<i>paliperidone 3mg er tab</i>	42	7.5MCG/0.5ML INJ	
<i>susp</i>		<i>paliperidone 6mg er tab</i>	42	<i>peg 3350 powder for oral</i>	72
OXERVATE 0.002%	79	<i>paliperidone 9mg er tab</i>	42	<i>soln (100gm Moviprep</i>	
OPHTH SOLN		PALYNZIQ 10MG/0.5ML	65	<i>equiv)</i>	
<i>oxybutynin chloride 10mg</i>	89	SYRINGE		<i>peg 3350/electrolyte oral</i>	72
<i>er tab</i>		PALYNZIQ 2.5MG/0.5ML	65	<i>soln</i>	
<i>oxybutynin chloride 15mg</i>	89	SYRINGE		<i>peg 3350/kcl/sodium</i>	72
<i>er tab</i>		PALYNZIQ 20MG/ML	65	<i>bicarbonate/sodium</i>	
<i>oxybutynin chloride</i>	89	SYRINGE		<i>chloride powder for oral</i>	
<i>1mg/ml oral soln</i>		PANRETIN 0.1% GEL	59	<i>soln</i>	
<i>oxybutynin chloride 5mg</i>	89	<i>pantoprazole 20mg dr tab</i>	89	PEGASYS	48
<i>er tab</i>		<i>pantoprazole 40mg dr tab</i>	89	180MCG/0.5ML	
<i>oxybutynin chloride 5mg</i>	89	PANZYGA 10GM/100ML	81	SYRINGE	
<i>tab</i>		INJ		PEGASYS 180MCG/ML	48
<i>oxycodone 10mg tab</i>	6	PANZYGA 1GM/10ML	81	INJ	
<i>oxycodone 15mg tab</i>	6	INJ		PEMAZYRE 13.5MG TAB	37

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

ALPHABETICAL LISTING OF DRUGS

PEMAZYRE 4.5MG TAB	37	<i>perphenazine 4mg tab</i>	44	<i>pimtrex tab pack</i>	56
PEMAZYRE 9MG TAB	37	<i>perphenazine 8mg tab</i>	44	<i>pindolol 10mg tab</i>	49
PENBRAYA INJ	90	PERSERIS 120MG	42	<i>pindolol 5mg tab</i>	49
<i>penciclovir 1% cream</i>	60	SYRINGE		<i>pioglitazone 15mg tab</i>	22
<i>penicillamine 250mg tab</i>	75	PERSERIS 90MG	42	<i>pioglitazone 30mg tab</i>	22
<i>penicillin g potassium</i>	82	SYRINGE		<i>pioglitazone 45mg tab</i>	22
<i>1000000unit/ml inj</i>		PHEBURANE	65	<i>piperacillin/tazobactam</i>	82
PENICILLIN G	82	483MG/GM ORAL		<i>2000-250mg inj</i>	
POTASSIUM		PELLET		<i>piperacillin/tazobactam</i>	82
40000UNIT/ML INJ		PHENELZINE 15MG TAB	17	<i>3000-375mg inj</i>	
PENICILLIN G	82	<i>phenobarbital 100mg tab</i>	71	<i>piperacillin/tazobactam</i>	82
POTASSIUM		<i>phenobarbital 15mg tab</i>	71	<i>36-4.5gm inj</i>	
60000UNIT/ML INJ		<i>phenobarbital 16.2mg tab</i>	71	<i>piperacillin/tazobactam</i>	82
PENICILLIN G SODIUM	82	<i>phenobarbital 30mg tab</i>	71	<i>4000-500mg inj</i>	
100000UNIT/ML INJ		<i>phenobarbital 32.4mg tab</i>	71	PIQRAY 200MG DAILY	37
<i>penicillin v potassium</i>	82	<i>phenobarbital 4mg/ml</i>	71	DOSE PACK	
<i>250mg tab</i>		<i>oral soln</i>		PIQRAY 250MG DAILY	37
PENICILLIN V	82	<i>phenobarbital 60mg tab</i>	71	DOSE PACK	
POTASSIUM 25MG/ML		<i>phenobarbital 64.8mg tab</i>	71	PIQRAY 300MG DAILY	37
ORAL SOLN		<i>phenobarbital 97.2mg tab</i>	71	DOSE PACK	
<i>penicillin v potassium</i>	82	<i>phenoxybenzamine 10mg</i>	27	<i>pirfenidone 267mg cap</i>	86
<i>500mg tab</i>		<i>cap</i>		<i>pirfenidone 267mg tab</i>	86
PENICILLIN V	82	<i>phenytoin 25mg/ml susp</i>	16	<i>pirfenidone 801mg tab</i>	86
POTASSIUM 50MG/ML		<i>phenytoin 50mg chew tab</i>	16	<i>piroxicam 10mg cap</i>	5
ORAL SOLN		<i>phenytoin sodium 100mg</i>	16	<i>piroxicam 20mg cap</i>	5
PENTACEL	88	<i>er cap</i>		PLASMA-LYTE 148 INJ	74
96-30-68UNIT/ML INJ		<i>phenytoin sodium 200mg</i>	16	PLASMA-LYTE A INJ	74
<i>pentamidine isethionate</i>	30	<i>er cap</i>		PLEGRIDY	85
<i>300mg inj</i>		<i>phenytoin sodium 300mg</i>	16	125MCG/0.5ML	
<i>pentamidine isethionate</i>	30	<i>er cap</i>		AUTO-INJECTOR	
<i>50mg/ml inh soln</i>		PHOSPHOLINE IODIDE	79	PLEGRIDY	85
<i>pentoxifylline 400mg er</i>	70	0.125% OPHTH SOLN		125MCG/0.5ML	
<i>tab</i>		PIFELTRO 100MG TAB	47	SYRINGE	
PERINDOPRIL	27	<i>pilocarpine 1% ophth</i>	79	<i>plenamine 15% inj</i>	78
ERBUMINE 2MG TAB		<i>soln</i>		PODOFILOX 0.5%	62
<i>perindopril erbumine</i>	27	<i>pilocarpine 2% ophth</i>	79	TOPICAL SOLN	
<i>4mg tab</i>		<i>soln</i>		<i>polycin 0.5-10unit/mg</i>	79
PERINDOPRIL	27	<i>pilocarpine 4% ophth</i>	79	<i>ophth ointment</i>	
ERBUMINE 8MG TAB		<i>soln</i>		<i>polymyxin b</i>	31
<i>periogard 0.12%</i>	77	<i>pilocarpine 5mg tab</i>	77	<i>250000unit/ml inj</i>	
<i>mouthwash</i>		<i>pilocarpine 7.5mg tab</i>	77	<i>polymyxin b/trimethoprim</i>	79
<i>permethrin 5% cream</i>	62	<i>pimecrolimus 1% cream</i>	62	<i>10000 Unit/ML-0.1%</i>	
<i>perphenazine 16mg tab</i>	44	PIMOZIDE 1MG TAB	85	<i>ophth soln</i>	
<i>perphenazine 2mg tab</i>	44	PIMOZIDE 2MG TAB	85	POMALYST 1MG CAP	35

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

ALPHABETICAL LISTING OF DRUGS

POMALYST 2MG CAP	35	<i>potassium citrate 15meq</i>	69	<i>pregabalin 100mg cap</i>	15
POMALYST 3MG CAP	35	<i>er tab</i>		<i>pregabalin 150mg cap</i>	15
POMALYST 4MG CAP	35	<i>potassium citrate 5meq er</i>	69	<i>pregabalin 200mg cap</i>	15
<i>portia 28 day pack</i>	56	<i>tab</i>		<i>pregabalin 20mg/ml oral</i>	15
<i>posaconazole 100mg dr</i>	24	PRALUENT 150MG/ML	26	<i>soln</i>	
<i>tab</i>		AUTO-INJECTOR		<i>pregabalin 225mg cap</i>	15
<i>posaconazole 40mg/ml</i>	24	PRALUENT 75MG/ML	26	<i>pregabalin 25mg cap</i>	15
<i>susp</i>		AUTO-INJECTOR		<i>pregabalin 300mg cap</i>	15
<i>potassium chloride</i>	75	<i>pramipexole 0.125mg tab</i>	40	<i>pregabalin 50mg cap</i>	15
<i>1.33meq/ml oral soln</i>		<i>pramipexole 0.25mg tab</i>	40	<i>pregabalin 75mg cap</i>	15
<i>potassium chloride</i>	75	<i>pramipexole 0.5mg tab</i>	40	PREHEVBRIO	90
<i>10meq er cap</i>		<i>pramipexole 0.75mg tab</i>	40	10MCG/ML INJ	
<i>potassium chloride</i>	75	<i>pramipexole 1.5mg tab</i>	40	PREMARIN 0.3MG TAB	67
<i>10meq er tab</i>		<i>pramipexole 1mg tab</i>	40	PREMARIN 0.45MG TAB	67
<i>potassium chloride</i>	75	<i>prasugrel 10mg tab</i>	70	PREMARIN 0.625MG	67
<i>10meq micro er tab</i>		<i>prasugrel 5mg tab</i>	70	TAB	
POTASSIUM CHLORIDE	75	<i>pravastatin sodium 10mg</i>	26	PREMARIN	91
10MEQ/100ML INJ		<i>tab</i>		0.625MG/GM VAGINAL	
<i>potassium chloride</i>	75	<i>pravastatin sodium 20mg</i>	26	CREAM	
<i>15meq micro er tab</i>		<i>tab</i>		PREMARIN 0.9MG TAB	67
<i>potassium chloride</i>	75	<i>pravastatin sodium 40mg</i>	26	PREMARIN 1.25MG TAB	67
<i>2.67meq/ml oral soln</i>		<i>tab</i>		PREMASOL 10% INJ	78
<i>potassium chloride</i>	75	<i>pravastatin sodium 80mg</i>	26	PREMPHASE 28 DAY	66
<i>20meq er tab</i>		<i>tab</i>		PACK	
<i>potassium chloride</i>	75	<i>prazosin 1mg cap</i>	28	PREMPRO 0.3/1.5MG 28	66
<i>20meq micro er tab</i>		<i>prazosin 2mg cap</i>	28	DAY PACK	
<i>potassium chloride</i>	75	<i>prazosin 5mg cap</i>	28	PREMPRO 0.45/1.5MG	66
<i>20meq powder for oral</i>		PREDNISOLONE 1%	80	28 DAY PACK	
<i>soln</i>		OPHTH SOLN		PREMPRO 0.625/2.5MG	66
POTASSIUM CHLORIDE	75	<i>prednisolone 1mg/ml oral</i>	58	28 DAY PACK	
20MEQ/100ML INJ		<i>soln</i>		PREMPRO 0.625/5MG	66
<i>potassium chloride</i>	75	<i>prednisolone 3mg/ml oral</i>	58	28 DAY PACK	
<i>2meq/ml (20ml) inj</i>		<i>soln</i>		<i>prevalite 4gm powder for</i>	25
<i>potassium chloride</i>	75	PREDNISOLONE	80	<i>oral susp</i>	
<i>2meq/ml inj</i>		ACETATE 1% OPTH		PREVYMIS 240MG TAB	47
POTASSIUM CHLORIDE	75	SUSP		PREVYMIS 480MG TAB	47
40MEQ/100ML INJ		<i>prednisone 10mg tab</i>	58	PREZCOBIX 150-800MG	47
<i>potassium chloride 8meq</i>	75	<i>prednisone 1mg tab</i>	58	TAB	
<i>er cap</i>		PREDNISONE 1MG/ML	58	PREZISTA 100MG/ML	47
<i>potassium chloride 8meq</i>	75	ORAL SOLN		SUSP	
<i>er tab</i>		<i>prednisone 2.5mg tab</i>	58	PREZISTA 150MG TAB	47
<i>potassium citrate 10meq</i>	69	<i>prednisone 20mg tab</i>	58	PREZISTA 75MG TAB	47
<i>er tab</i>		<i>prednisone 50mg tab</i>	58	PRIFTIN 150MG TAB	32
		<i>prednisone 5mg tab</i>	58		

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

ALPHABETICAL LISTING OF DRUGS

PRIMAQUINE	32	<i>promethazine 12.5mg tab</i>	25	<i>pyridostigmine bromide</i>	32
PHOSPHATE 26.3MG TAB		<i>promethazine 25mg rectal supp</i>	25	<i>60mg tab</i>	
<i>primidone 250mg tab</i>	15	<i>promethazine 25mg tab</i>	25	PYRUKYND 20MG TAB	70
<i>primidone 50mg tab</i>	15	<i>promethazine 50mg tab</i>	25	(4-WEEK PACK)	
PRIORIX INJ	90	<i>promethazine 50mg tab</i>	25	PYRUKYND	70
PRIVIGEN 20GM/200ML INJ	81	<i>promethagan 25mg rectal supp</i>	25	20MG/50MG TAB TAPER PACK	
<i>probenecid 500mg tab</i>	69	<i>propafenone 150mg tab</i>	9	PYRUKYND 50MG TAB	70
<i>prochlorperazine 10mg tab</i>	44	<i>propafenone 225mg er cap</i>	9	(4-WEEK PACK)	
<i>prochlorperazine 25mg rectal supp</i>	44	<i>propafenone 225mg tab</i>	9	PYRUKYND 5MG TAB	70
<i>prochlorperazine 5mg tab</i>	44	<i>propafenone 300mg tab</i>	9	(4-WEEK PACK)	
<i>procto-med 2.5% cream</i>	7	<i>propafenone 325mg er cap</i>	9	PYRUKYND 5MG TAB	70
<i>proctosol 2.5% cream</i>	7	<i>propafenone 425mg er cap</i>	9	TAPER PACK	
<i>proctozone hc 2.5% cream</i>	7	<i>propranolol 10mg tab</i>	49	PYRUKYND 5MG/20MG TAB TAPER PACK	70
<i>progesterone 100mg cap</i>	83	<i>propranolol 120mg er cap</i>	49		
<i>progesterone 200mg cap</i>	83	<i>propranolol 160mg er cap</i>	49	Q	
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	76	<i>propranolol 20mg tab</i>	49	QINLOCK 50MG TAB	37
PROGRAF 1MG GRANULES FOR ORAL SUSP	76	<i>propranolol 40mg tab</i>	49	QUADRACEL INJ	88
PROLASTIN 1000MG INJ	85	<i>propranolol 4mg/ml oral soln</i>	49	QUADRACEL INJ	88
PROLENSA 0.07%	80	<i>propranolol 60mg er cap</i>	49	QUADRACEL SYRINGE	88
OPHTH SOLN		<i>propranolol 60mg tab</i>	49	<i>quetiapine 100mg tab</i>	43
PROLIA 60MG/ML SYRINGE	64	<i>propranolol 80mg er cap</i>	49	<i>quetiapine 150mg er tab</i>	43
PROMACTA 12.5MG POWDER FOR ORAL SUSP	71	<i>propranolol 80mg tab</i>	49	<i>quetiapine 200mg er tab</i>	43
PROMACTA 12.5MG TAB	71	PROPRANOLOL	49	<i>quetiapine 200mg tab</i>	43
PROMACTA 25MG POWDER FOR ORAL SUSP	71	8MG/ML ORAL SOLN		<i>quetiapine 25mg tab</i>	43
PROMACTA 25MG TAB	71	<i>propylthiouracil 50mg tab</i>	87	<i>quetiapine 300mg er tab</i>	43
PROMACTA 50MG TAB	71	PROQUAD INJ	90	<i>quetiapine 300mg tab</i>	43
PROMACTA 75MG TAB	71	PROSOL 20% INJ	78	<i>quetiapine 400mg er tab</i>	43
<i>promethazine 1.25mg/ml oral soln</i>	25	<i>protriptyline 10mg tab</i>	20	<i>quetiapine 400mg tab</i>	43
<i>promethazine 12.5mg rectal supp</i>	25	<i>protriptyline 5mg tab</i>	20	<i>quetiapine 50mg er tab</i>	43
		PULMOZYME 1MG/ML	86	<i>quetiapine 50mg tab</i>	43
		INH SOLN		<i>quinapril 10mg tab</i>	27
		PURIXAN	33	<i>quinapril 20mg tab</i>	27
		2000MG/100ML SUSP		<i>quinapril 40mg tab</i>	27
		<i>pyrazinamide 500mg tab</i>	32	<i>quinapril 5mg tab</i>	27
		<i>pyridostigmine bromide</i>	32	QUINIDINE SULFATE	9
		<i>180mg er tab</i>		200MG TAB	
				QUINIDINE SULFATE	9
				300MG TAB	
				<i>quinine sulfate 324mg cap</i>	32
				QVAR 40MCG	10
				REDIHALER	

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

ALPHABETICAL LISTING OF DRUGS

QVAR 80MCG REDIHALER	10	RELISTOR 12MG/0.6ML SYRINGE	68	REXULTI 4MG TAB	45
R		RELISTOR 8MG/0.4ML SYRINGE	68	REYATAZ 50MG ORAL POWDER	47
RABAVERT 2.5UNIT/ML INJ	90	RELTONE 200MG CAP	67	REYVOW 100MG TAB	73
RADICAVA 105MG/5ML SUSP	78	RELTONE 400MG CAP	67	REYVOW 50MG TAB	73
<i>raloxifene 60mg tab</i>	65	RELYVRIO 3-1GM POWDER PACK	78	REZLIDHIA 150MG CAP	38
<i>ramelteon 8mg tab</i>	72	<i>repaglinide 0.5mg tab</i>	22	REZUROCK 200MG TAB	75
<i>ramipril 1.25mg cap</i>	27	<i>repaglinide 1mg tab</i>	22	RHOPRESSA 0.02%	79
<i>ramipril 10mg cap</i>	27	<i>repaglinide 2mg tab</i>	22	OPHTH SOLN	
<i>ramipril 2.5mg cap</i>	27	REPATHA 140MG/ML AUTO-INJECTOR	26	RIBAVIRIN 200MG CAP	48
<i>ramipril 5mg cap</i>	27	REPATHA 140MG/ML SYRINGE	26	RIBAVIRIN 200MG TAB	48
<i>ranolazine 1000mg er tab</i>	8	REPATHA 420MG/3.5ML CARTRIDGE	26	RIDAURA 3MG CAP	4
<i>ranolazine 500mg er tab</i>	8	RETACRIT 10000UNIT/ML INJ	71	<i>rifabutin 150mg cap</i>	32
<i>rasagiline 0.5mg tab</i>	40	RETACRIT 20000UNIT/2ML INJ	71	<i>rifampin 150mg cap</i>	32
<i>rasagiline 1mg tab</i>	40	RETACRIT 20000UNIT/ML INJ	71	<i>rifampin 300mg cap</i>	32
REBIF 22MCG/0.5ML AUTO-INJECTOR	85	RETACRIT 2000UNIT/ML INJ	71	<i>rifampin 600mg inj</i>	32
REBIF 22MCG/0.5ML SYRINGE	85	RETACRIT 3000UNIT/ML INJ	71	<i>riluzole 50mg tab</i>	78
REBIF 44MCG/0.5ML AUTO-INJECTOR	85	RETACRIT 40000UNIT/ML INJ	71	RIMANTADINE 100MG TAB	48
REBIF 44MCG/0.5ML SYRINGE	85	RETACRIT 4000UNIT/ML INJ	71	RINVOQ 15MG ER TAB	3
REBIF REBIDOSE PACK	85	RETEVMO 40MG CAP	38	RINVOQ 30MG ER TAB	3
REBIF TITRATION PACK	85	RETEVMO 80MG CAP	38	RINVOQ 45MG ER TAB	3
<i>reclipsen 28 day pack</i>	56	REVLIMID 10MG CAP	75	<i>risedronate sodium</i>	64
RECOMBIVAX 10MCG/ML INJ	90	REVLIMID 15MG CAP	75	<i>150mg tab</i>	
RECOMBIVAX 10MCG/ML SYRINGE	90	REVLIMID 2.5MG CAP	75	<i>risedronate sodium 30mg tab</i>	64
RECOMBIVAX 40MCG/ML INJ	90	REVLIMID 20MG CAP	75	<i>risedronate sodium 35mg</i>	64
RECOMBIVAX 5MCG/0.5ML INJ	90	REVLIMID 25MG CAP	75	<i>tab</i>	
RECOMBIVAX 5MCG/0.5ML SYRINGE	90	REVLIMID 5MG CAP	75	<i>risedronate sodium 35mg tab (12) pack</i>	64
REGANEX 0.01% GEL	62	REXULTI 0.25MG TAB	45	<i>risedronate sodium 35mg tab (4) pack</i>	64
RELENZA 5MG/BLISTER INHALER	48	REXULTI 0.5MG TAB	45	<i>risedronate sodium 5mg tab</i>	64
RELISTOR 12MG/0.6ML INJ	68	REXULTI 1MG TAB	45	RISPERIDONE 0.25MG ODT	42
		REXULTI 2MG TAB	45	<i>risperidone 0.25mg tab</i>	42
		REXULTI 3MG TAB	45	<i>risperidone 0.5mg odt</i>	42
				<i>risperidone 0.5mg tab</i>	42
				<i>risperidone 12.5mg inj</i>	42
				<i>risperidone 1mg odt</i>	42
				<i>risperidone 1mg tab</i>	42
				<i>risperidone 1mg/ml oral soln</i>	42

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

ALPHABETICAL LISTING OF DRUGS

<i>risperidone 25mg inj</i>	42	<i>rosuvastatin calcium 5mg</i>	26	SAVELLA TAB 4-WEEK	84
<i>risperidone 2mg odt</i>	42	<i>tab</i>		TITRATION PACK (55)	
<i>risperidone 2mg tab</i>	42	ROTARIX SUSP	90	SCSEMBLIX 20MG TAB	38
<i>risperidone 37.5mg inj</i>	42	ROTARIX SUSP	90	SCSEMBLIX 40MG TAB	38
<i>risperidone 3mg odt</i>	42	ROTATEQ SUSP	90	<i>scopolamine 1mg/72hr</i>	23
<i>risperidone 3mg tab</i>	42	<i>roweepra 500mg tab</i>	15	<i>patch</i>	
<i>risperidone 4mg odt</i>	42	ROZLYTREK 100MG	38	SECUADO 3.8MG/24HR	43
<i>risperidone 4mg tab</i>	42	CAP		PATCH	
<i>risperidone 50mg inj</i>	42	ROZLYTREK 200MG	38	SECUADO 5.7MG/24HR	43
<i>ritonavir 100mg tab</i>	47	CAP		PATCH	
<i>rivastigmine 1.5mg cap</i>	83	ROZLYTREK 50MG	38	SECUADO 7.6MG/24HR	43
<i>rivastigmine 13.3mg/24hr</i>	83	ORAL PELLETT		PATCH	
<i>patch</i>		RUBRACA 200MG TAB	38	<i>selegiline 5mg cap</i>	40
<i>rivastigmine 3mg cap</i>	84	RUBRACA 250MG TAB	38	<i>selenium sulfide 2.5%</i>	60
<i>rivastigmine 4.5mg cap</i>	84	RUBRACA 300MG TAB	38	<i>shampoo</i>	
<i>rivastigmine 4.6mg/24hr</i>	84	RUCONEST 2100UNIT	70	SELZENTRY 20MG/ML	47
<i>patch</i>		INJ		ORAL SOLN	
<i>rivastigmine 6mg cap</i>	84	<i>rufinamide 200mg tab</i>	15	SELZENTRY 25MG TAB	47
<i>rivastigmine 9.5mg/24hr</i>	84	<i>rufinamide 400mg tab</i>	15	SELZENTRY 75MG TAB	47
<i>patch</i>		<i>rufinamide 40mg/ml susp</i>	15	SEREVENT	11
<i>rivelsa 91 day pack</i>	56	RUKOBIA 600MG ER	47	50MCG/DOSE INHALER	
<i>rizatriptan 10mg odt</i>	73	TAB		<i>sertraline 100mg tab</i>	18
<i>rizatriptan 10mg tab</i>	73	RYBELSUS 14MG TAB	21	<i>sertraline 20mg/ml oral</i>	18
<i>rizatriptan 5mg odt</i>	73	RYBELSUS 3MG TAB	21	<i>soln</i>	
<i>rizatriptan 5mg tab</i>	73	RYBELSUS 7MG TAB	21	<i>sertraline 25mg tab</i>	18
ROCKLATAN	79	RYDAPT 25MG CAP	38	<i>sertraline 50mg tab</i>	18
0.05-0.2MG/ML OPHTH				<i>setlakin 91 day pack</i>	56
SOLN		S		<i>sevelamer carbonate</i>	69
<i>roflumilast 0.5mg tab</i>	10	<i>sajazir 30mg/3ml syringe</i>	69	<i>2400mg powder for oral</i>	
<i>roflumilast 250mcg tab</i>	10	<i>salmon calcitonin</i>	64	<i>susp</i>	
<i>ropinirole 0.25mg tab</i>	40	<i>200unit/act nasal spray</i>		<i>sevelamer carbonate</i>	69
<i>ropinirole 0.5mg tab</i>	40	SANDIMMUNE	76	<i>800mg powder for oral</i>	
<i>ropinirole 1mg tab</i>	40	100MG/ML ORAL SOLN		<i>susp</i>	
<i>ropinirole 2mg tab</i>	40	SANTYL 250UNIT/GM	62	<i>sevelamer carbonate</i>	69
<i>ropinirole 3mg tab</i>	40	OINTMENT		<i>800mg tab</i>	
<i>ropinirole 4mg tab</i>	40	<i>sapropterin 100mg</i>	65	<i>sharobel 0.35mg 28 day</i>	57
<i>ropinirole 5mg tab</i>	40	<i>powder for oral soln</i>		<i>pack</i>	
<i>rosuvastatin calcium</i>	26	<i>sapropterin 100mg tab</i>	65	SHINGRIX	90
<i>10mg tab</i>		<i>sapropterin 500mg</i>	65	50MCG/0.5ML INJ	
<i>rosuvastatin calcium</i>	26	<i>powder for oral soln</i>		SIGNIFOR 0.3MG/ML INJ	66
<i>20mg tab</i>		SAVELLA 100MG TAB	84	SIGNIFOR 0.6MG/ML INJ	66
<i>rosuvastatin calcium</i>	26	SAVELLA 12.5MG TAB	84	SIGNIFOR 0.9MG/ML INJ	66
<i>40mg tab</i>		SAVELLA 25MG TAB	84	<i>sildenafil 20mg tab</i>	52
		SAVELLA 50MG TAB	84		

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

ALPHABETICAL LISTING OF DRUGS

<i>silver sulfadiazine 1% cream</i>	60	SKYTROFA 5.2MG CARTRIDGE	64	<i>sorine 80mg tab</i>	49
SIMBRINZA 0.2-1% OPTH SUSP	79	SKYTROFA 6.3MG CARTRIDGE	64	<i>sotalol 120mg tab</i>	49
SIMPONI 100MG/ML AUTO-INJECTOR	3	SKYTROFA 7.6MG CARTRIDGE	64	<i>sotalol 160mg tab</i>	49
SIMPONI 100MG/ML SYRINGE	4	SKYTROFA 9.1MG CARTRIDGE	64	<i>sotalol 240mg tab</i>	49
SIMPONI 50MG/0.5ML AUTO-INJECTOR	4	SLYND 4MG TAB PACK	57	<i>sotalol 80mg tab</i>	49
SIMPONI 50MG/0.5ML SYRINGE	4	<i>sodium chloride 0.45% inj</i>	75	<i>sotalol af 120mg tab</i>	49
<i>simvastatin 10mg tab</i>	26	<i>sodium chloride 0.9% inj</i>	75	<i>sotalol af 160mg tab</i>	49
<i>simvastatin 20mg tab</i>	26	<i>sodium chloride 0.9% irrigation soln</i>	69	<i>sotalol af 80mg tab</i>	49
<i>simvastatin 40mg tab</i>	26	<i>sodium chloride 3% inj</i>	75	SPIRIVA RESPIMAT	10
<i>simvastatin 5mg tab</i>	26	<i>sodium chloride 50mg/ml inj</i>	75	1.25MCG/ACT INH	
<i>simvastatin 80mg tab</i>	26	SODIUM OXYBATE 500MG/ML ORAL SOLN	83	<i>spironolactone 100mg tab</i>	63
<i>sirolimus 0.5mg tab</i>	76	<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	76	<i>spironolactone 25mg tab</i>	63
<i>sirolimus 1mg tab</i>	76	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6gm/177ml prep kit</i>	72	<i>spironolactone 50mg tab</i>	63
<i>sirolimus 1mg/ml oral soln</i>	76	SOFOSBUVIR/VELPATAS VIR 400-100MG TAB	48	<i>sprintec 28 day pack</i>	56
<i>sirolimus 2mg tab</i>	76	SOGROYA 10MG/1.5ML PEN INJ	64	SPRITAM 1000MG TAB FOR ORAL SUSP	15
SIRTURO 100MG TAB	32	SOGROYA 15MG/1.5ML PEN INJ	65	SPRITAM 250MG TAB FOR ORAL SUSP	15
SIRTURO 20MG TAB	32	SOGROYA 5MG/1.5ML PEN INJ	65	SPRITAM 500MG TAB FOR ORAL SUSP	15
SIVEXTRO 200MG INJ	31	SOLTAMOX 10MG/5ML ORAL SOLN	34	SPRITAM 750MG TAB FOR ORAL SUSP	15
SIVEXTRO 200MG TAB	31	SOMAVERT 10MG INJ	64	SPRYCEL 100MG TAB	38
SKYRIZI 150MG/ML AUTO-INJECTOR	60	SOMAVERT 15MG INJ	64	SPRYCEL 140MG TAB	38
SKYRIZI 150MG/ML SYRINGE	60	SOMAVERT 20MG INJ	64	SPRYCEL 20MG TAB	38
SKYRIZI 180MG/1.2ML CARTRIDGE	68	SOMAVERT 25MG INJ	64	SPRYCEL 50MG TAB	38
SKYRIZI 360MG/2.4ML CARTRIDGE	68	SOMAVERT 30MG INJ	64	SPRYCEL 70MG TAB	38
SKYTROFA 11MG CARTRIDGE	64	<i>sorafenib 200mg tab</i>	38	SPRYCEL 80MG TAB	38
SKYTROFA 13.3MG CARTRIDGE	64	<i>sorine 120mg tab</i>	49	SPS 15GM/60ML SUSP	76
SKYTROFA 3.6MG CARTRIDGE	64	<i>sorine 160mg tab</i>	49	<i>sronyx 28 day pack</i>	56
SKYTROFA 3MG CARTRIDGE	64			<i>ssd 1% cream</i>	60
SKYTROFA 4.3MG CARTRIDGE	64			STELARA 45MG/0.5ML INJ	60
				STELARA 45MG/0.5ML SYRINGE	60
				STELARA 90MG/ML SYRINGE	60
				STIOLTO	11
				2.5-2.5MCG/ACT INH	
				STIVARGA 40MG TAB	38
				STRIBILD	47
				150-150-200-300MG TAB	
				<i>subvenite 100mg tab</i>	15

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

ALPHABETICAL LISTING OF DRUGS

<i>subvenite 150mg tab</i>	15	<i>sunitinib 25mg cap</i>	38	TABRECTA 200MG TAB	38
<i>subvenite 200mg tab</i>	15	<i>sunitinib 37.5mg cap</i>	38	<i>tacrolimus 0.03%</i>	62
<i>subvenite 25mg tab</i>	15	<i>sunitinib 50mg cap</i>	38	<i>ointment</i>	
SUCRAID 8500UNIT/ML	62	SUNLENCA 300MG TAB	47	<i>tacrolimus 0.1% ointment</i>	62
ORAL SOLN		4-TABLET PACK		<i>tacrolimus 0.5mg cap</i>	76
<i>sucralfate 1000mg tab</i>	88	SUNLENCA 300MG TAB	47	<i>tacrolimus 1mg cap</i>	76
<i>sucralfate 100mg/ml susp</i>	89	5-TABLET PACK		<i>tacrolimus 5mg cap</i>	76
SUFLAVE SOLN PACK	72	SUNOSI 150MG TAB	1	<i>tadalafil 20mg tab</i>	52
<i>sulfacetamide sodium</i>	58	SUNOSI 75MG TAB	1	TAFINLAR 10MG TAB	38
<i>10% lotion</i>		<i>syeda 28 day pack</i>	56	FOR ORAL SUSP	
<i>sulfacetamide sodium</i>	79	SYMDEKO	86	TAFINLAR 50MG CAP	38
<i>10% ophth soln</i>		50-75MG/75MG PACK		TAFINLAR 75MG CAP	38
SULFACETAMIDE/PRED	80	SYMDEKO TAB 4-WEEK	86	<i>tafluprost 0.0015% ophth</i>	80
NISOLONE 10-0.25%		PACK		<i>soln</i>	
OPHTH SOLN		SYMPAZAN 10MG ORAL	13	TAGRISSE 40MG TAB	33
SULFADIAZINE 500MG	86	FILM		TAGRISSE 80MG TAB	33
TAB		SYMPAZAN 20MG ORAL	13	TAKHZYRO 300MG/2ML	70
<i>sulfamethoxazole/trimeth</i>	30	FILM		INJ	
<i>oprim 200-40mg/5ml susp</i>		SYMPAZAN 5MG ORAL	13	TAKHZYRO 300MG/2ML	70
<i>sulfamethoxazole/trimeth</i>	30	FILM		SYRINGE	
<i>oprim 400-80mg tab</i>		SYMPROIC 0.2MG TAB	68	TALTZ 80MG/ML	60
<i>sulfamethoxazole/trimeth</i>	30	SYMTUZA	47	AUTO-INJECTOR	
<i>oprim 800-160mg tab</i>		150-800-200-10MG TAB		TALTZ 80MG/ML	60
SULFAMYLON	60	SYNAREL 2MG/ML	65	SYRINGE	
85MG/GM CREAM		NASAL INHALER		TALZENNA 0.1MG CAP	38
<i>sulfasalazine 500mg dr</i>	68	SYNJARDY 10-1000MG	20	TALZENNA 0.25MG CAP	38
<i>tab</i>		ER TAB		TALZENNA 0.35MG CAP	38
<i>sulfasalazine 500mg tab</i>	68	SYNJARDY	20	TALZENNA 0.5MG CAP	38
<i>sulindac 150mg tab</i>	5	12.5-1000MG ER TAB		TALZENNA 0.75MG CAP	38
<i>sulindac 200mg tab</i>	5	SYNJARDY	20	TALZENNA 1MG CAP	38
<i>sumatriptan 100mg tab</i>	73	12.5-1000MG TAB		<i>tamoxifen 10mg tab</i>	34
<i>sumatriptan 25mg tab</i>	73	SYNJARDY 12.5-500MG	20	<i>tamoxifen 20mg tab</i>	34
<i>sumatriptan 4mg/0.5ml</i>	73	TAB		<i>tamsulosin 0.4mg cap</i>	69
<i>auto-injector</i>		SYNJARDY 25-1000MG	20	<i>tarina 24 fe 1/20 28 day</i>	56
<i>sumatriptan 4mg/0.5ml</i>	73	ER TAB		<i>pack</i>	
<i>cartridge</i>		SYNJARDY 5-1000MG	20	<i>tarina fe 1/20 28 day</i>	56
<i>sumatriptan 50mg tab</i>	73	ER TAB		<i>pack</i>	
<i>sumatriptan 6mg/0.5ml</i>	73	SYNJARDY 5-1000MG	20	TASIGNA 150MG CAP	38
<i>auto-injector</i>		TAB		TASIGNA 200MG CAP	38
<i>sumatriptan 6mg/0.5ml</i>	73	SYNJARDY 5-500MG	20	TASIGNA 50MG CAP	38
<i>cartridge</i>		TAB		<i>tasimelteon 20mg cap</i>	72
<i>sumatriptan 6mg/0.5ml</i>	73			<i>tazarotene 0.1% cream</i>	60
<i>inj</i>		T		<i>tazicef 1gm inj</i>	53
<i>sunitinib 12.5mg cap</i>	38	TABLOID 40MG TAB	33	<i>tazicef 2gm inj</i>	53
		TABRECTA 150MG TAB	38		

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

ALPHABETICAL LISTING OF DRUGS

TAZICEF 6GM INJ	53	<i>testosterone 1% (25mg)</i>	7	<i>thiothixene 5mg cap</i>	45
<i>taztia 120mg er cap</i>	50	<i>gel packet</i>		<i>tiadylt 120mg er cap</i>	50
<i>taztia 180mg er cap</i>	50	<i>testosterone 1% (50mg)</i>	7	<i>tiadylt 180mg er cap</i>	50
<i>taztia 240mg er cap</i>	50	<i>gel packet</i>		<i>tiadylt 240mg er cap</i>	51
<i>taztia 300mg er cap</i>	50	<i>testosterone 1.62%</i>	7	<i>tiadylt 300mg er cap</i>	51
<i>taztia 360mg er cap</i>	50	<i>(1.25gm) gel packet</i>		<i>tiadylt 360mg er cap</i>	51
TAZVERIK 200MG TAB	38	<i>testosterone 1.62%</i>	7	<i>tiadylt 420mg er cap</i>	51
TDVAX 4-4UNIT/ML INJ	88	<i>(2.5gm) gel packet</i>		<i>tiagabine 12mg tab</i>	16
TEFLARO 400MG INJ	53	<i>testosterone 1.62%</i>	7	<i>tiagabine 16mg tab</i>	16
TEFLARO 600MG INJ	53	<i>(20.25mg/act) gel pump</i>		<i>tiagabine 2mg tab</i>	16
<i>telmisartan 20mg tab</i>	27	<i>testosterone 30mg/act</i>	7	<i>tiagabine 4mg tab</i>	16
<i>telmisartan 40mg tab</i>	27	<i>topical soln</i>		TIBSOVO 250MG TAB	38
<i>telmisartan 80mg tab</i>	28	<i>testosterone cypionate</i>	7	TICOVAC	90
<i>temazepam 15mg cap</i>	71	<i>100mg/ml inj</i>		1.2MCG/0.25ML	
<i>temazepam 30mg cap</i>	71	<i>testosterone cypionate</i>	7	SYRINGE	
TENIVAC 4-10UNIT/ML	88	<i>200mg/ml (1ml) inj</i>		TICOVAC 2.4MCG/0.5ML	90
INJ		<i>testosterone cypionate</i>	7	SYRINGE	
TENIVAC 4-10UNIT/ML	88	<i>200mg/ml inj</i>		<i>tigecycline 50mg inj</i>	86
SYRINGE		TESTOSTERONE	7	<i>tilia fe pack</i>	56
<i>tenofovir disoproxil</i>	47	ENANTHATE 200MG/ML		<i>timolol 0.25% ophth gel</i>	78
<i>fumarate 300mg tab</i>		INJ		<i>timolol 0.25% ophth soln</i>	78
TEPMETKO 225MG TAB	38	<i>tetrabenazine 12.5mg tab</i>	84	<i>timolol 0.5% ophth gel</i>	79
<i>terazosin 10mg cap</i>	28	<i>tetrabenazine 25mg tab</i>	84	<i>timolol 0.5% ophth soln</i>	79
<i>terazosin 1mg cap</i>	28	<i>tetracycline 250mg cap</i>	86	<i>timolol 0.5% ophth soln</i>	79
<i>terazosin 2mg cap</i>	28	<i>tetracycline 500mg cap</i>	86	<i>(preservative-free)</i>	
<i>terazosin 5mg cap</i>	28	THALOMID 100MG CAP	75	<i>timolol 10mg tab</i>	49
<i>terbinafine 250mg tab</i>	24	THALOMID 150MG CAP	75	<i>timolol 5mg tab</i>	49
<i>terbutaline sulfate 2.5mg</i>	11	THALOMID 200MG CAP	75	<i>tinidazole 250mg tab</i>	30
<i>tab</i>		THALOMID 50MG CAP	75	<i>tinidazole 500mg tab</i>	30
<i>terbutaline sulfate 5mg</i>	11	<i>theophylline 300mg er</i>	12	<i>tiopronin 100mg tab</i>	69
<i>tab</i>		<i>tab</i>		TIVICAY 10MG TAB	47
<i>terconazole 0.4% vaginal</i>	91	<i>theophylline 400mg er</i>	12	TIVICAY 25MG TAB	47
<i>cream</i>		<i>tab</i>		TIVICAY 50MG TAB	47
<i>terconazole 0.8% vaginal</i>	91	<i>theophylline 450mg er</i>	12	TIVICAY 5MG TAB FOR	47
<i>cream</i>		<i>tab</i>		ORAL SUSP	
<i>terconazole 80mg vaginal</i>	91	<i>theophylline 600mg er</i>	12	<i>tizanidine 2mg tab</i>	77
<i>insert</i>		<i>tab</i>		<i>tizanidine 4mg tab</i>	77
<i>teriflunomide 14mg tab</i>	85	<i>thioridazine 100mg tab</i>	44	TOBRADEX 0.1-0.3%	80
<i>teriflunomide 7mg tab</i>	85	<i>thioridazine 10mg tab</i>	44	OPHTH OINTMENT	
TERIPARATIDE	64	<i>thioridazine 25mg tab</i>	44	<i>tobramycin 0.3% ophth</i>	79
0.02MG/ACT PEN INJ		<i>thioridazine 50mg tab</i>	44	<i>soln</i>	
<i>testosterone 1%</i>	7	<i>thiothixene 10mg cap</i>	45	TOBRAMYCIN	3
<i>(12.5mg/act) gel pump</i>		<i>thiothixene 1mg cap</i>	45	10MG/ML INJ	
		<i>thiothixene 2mg cap</i>	45	<i>tobramycin 40mg/ml inj</i>	3

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

ALPHABETICAL LISTING OF DRUGS

<i>tobramycin 60mg/ml inh soln</i>	3	<i>travoprost 0.004% ophth soln</i>	80	<i>triamcinolone acetonide 0.1% oral paste</i>	77
<i>tolcapone 100mg tab</i>	40	<i>trazodone 100mg tab</i>	18	<i>triamcinolone acetonide 0.5% cream</i>	61
<i>tolterodine tartrate 1mg tab</i>	89	<i>trazodone 150mg tab</i>	18	<i>triamcinolone acetonide 0.5% ointment</i>	61
<i>tolterodine tartrate 2mg er cap</i>	89	TRECTOR 250MG TAB	32	<i>triazolam 0.125mg tab</i>	71
<i>tolterodine tartrate 2mg tab</i>	89	TRELEGY ELLIPTA 100-62.5-25MCG INHALER	11	<i>triazolam 0.25mg tab</i>	72
<i>tolterodine tartrate 4mg er cap</i>	89	TRELEGY ELLIPTA 200-62.5-25MCG INHALER	11	<i>triderm 0.1% cream</i>	61
<i>topiramate 100mg tab</i>	15	TRELSTAR 11.25MG INJ	34	<i>triderm 0.5% cream</i>	61
<i>topiramate 15mg cap</i>	15	TRELSTAR 22.5MG INJ	35	<i>trientine 250mg cap</i>	75
<i>topiramate 200mg tab</i>	15	TRELSTAR 3.75MG INJ	35	<i>tri-estarylla 28 day pack</i>	56
<i>topiramate 25mg cap</i>	16	TREMFYA 100MG/ML AUTO-INJECTOR	60	<i>trifluoperazine 10mg tab</i>	44
<i>topiramate 25mg tab</i>	16	TREMFYA 100MG/ML SYRINGE	60	<i>trifluoperazine 1mg tab</i>	44
<i>topiramate 50mg tab</i>	16	TRESIBA 100UNIT/ML INJ	22	<i>trifluoperazine 2mg tab</i>	44
<i>toremifene 60mg tab</i>	34	TRESIBA 100UNIT/ML PEN INJ	22	<i>trifluoperazine 5mg tab</i>	44
<i>toremide 100mg tab</i>	63	TRESIBA 200UNIT/ML PEN INJ	22	TRIFLURIDINE 1% OPTH SOLN	79
<i>toremide 10mg tab</i>	63	<i>tretinoin 0.01% gel</i>	58	<i>trihexyphenidyl 2mg tab</i>	40
<i>toremide 20mg tab</i>	63	<i>tretinoin 0.025% cream</i>	58	<i>trihexyphenidyl 5mg tab</i>	40
<i>toremide 5mg tab</i>	63	<i>tretinoin 0.025% gel</i>	58	TRIKAFTA 100-50-75MG/150MG PACK	86
TOUJEO 300UNIT/ML PEN INJ	22	<i>tretinoin 0.05% cream</i>	58	TRIKAFTA 100-50-75MG/75MG GRANULES PACK	86
TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	22	<i>tretinoin 0.1% cream</i>	59	TRIKAFTA 50-37.5-25MG/75MG TAB PACK	86
TPN ELECTROLYTES INJ	74	<i>tretinoin 10mg cap</i>	39	TRIKAFTA 80-40-60MG/59.5MG GRANULES PACK	86
TRACLEER 32MG TAB FOR ORAL SUSP	52	<i>triamcinolone acetonide 0.025% cream</i>	61	<i>tri-legest 28 day pack</i>	56
<i>tramadol 100mg er tab</i>	6	<i>triamcinolone acetonide 0.025% lotion</i>	61	<i>tri-lo- estarylla 28 day pack</i>	56
<i>tramadol 200mg er tab</i>	6	<i>triamcinolone acetonide 0.025% ointment</i>	61	<i>tri-lo-sprintec 28 day pack</i>	56
<i>tramadol 300mg er tab</i>	6	<i>triamcinolone acetonide 0.1% cream</i>	61	<i>trimethoprim 100mg tab</i>	30
<i>tramadol 50mg tab</i>	6	<i>triamcinolone acetonide 0.1% lotion</i>	61	<i>tri-mili 28 day pack</i>	56
<i>tramadol/acetaminophen 37.5-325mg tab</i>	6	<i>triamcinolone acetonide 0.1% ointment</i>	61	<i>trimipramine 100mg cap</i>	20
<i>trandolapril 1mg tab</i>	27			<i>trimipramine 25mg cap</i>	20
<i>trandolapril 2mg tab</i>	27			<i>trimipramine 50mg cap</i>	20
<i>trandolapril 4mg tab</i>	27			TRINTELLIX 10MG TAB	18
<i>tranexamic acid 650mg tab</i>	71			TRINTELLIX 20MG TAB	18
<i>tranlycypromine 10mg tab</i>	17				
TRAVASOL 10% INJ	78				

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

ALPHABETICAL LISTING OF DRUGS

TRINTELLIX 5MG TAB	18	TYPHIM VI	90	UZEDY 75MG/0.21ML	42
<i>tri-nymyo 28 day pack</i>	56	25MCG/0.5ML SYRINGE		SYRINGE	
<i>tri-sprintec 28 day pack</i>	56	TYVASO 16-32-48MCG	51	<hr/>	
TRIUMEQ	47	TITRATION PACK		V	
600-50-300MG TAB		TYVASO 16MCG INH	51	<i>valacyclovir 1000mg tab</i>	48
TRIUMEQ 60-5-30MG	47	POWDER		<i>valacyclovir 500mg tab</i>	48
TAB FOR ORAL SUSP		TYVASO 32-48MCG	51	VALCHLOR 0.016% GEL	59
<i>trivora 28 day pack</i>	56	MAINTENANCE PACK		<i>valganciclovir 450mg tab</i>	47
<i>tri-vylibra 28 day pack</i>	56	TYVASO 32MCG INH	51	<i>valganciclovir 50mg/ml</i>	47
<i>tri-vylibra lo 28 day pack</i>	56	POWDER		<i>oral soln</i>	
TRIZIVIR	47	TYVASO 48MCG INH	52	<i>valproic acid 250mg cap</i>	17
300-150-300MG TAB		POWDER		<i>valproic acid 50mg/ml</i>	17
TROPHAMINE 10% INJ	78	TYVASO 64MCG INH	52	<i>oral soln</i>	
<i>trosipium chloride 20mg</i>	89	POWDER		<i>valsartan 160mg tab</i>	28
<i>tab</i>		<hr/>		<i>valsartan 320mg tab</i>	28
<i>trosipium chloride 60mg</i>	89	U		<i>valsartan 40mg tab</i>	28
<i>er cap</i>		UBRELVY 100MG TAB	73	<i>valsartan 80mg tab</i>	28
TRULANCE 3MG TAB	67	UBRELVY 50MG TAB	73	VALTOCO 10MG	13
TRULICITY	21	<i>unithroid 100mcg tab</i>	87	(10MG/0.1ML) NASAL	
0.75MG/0.5ML		<i>unithroid 112mcg tab</i>	87	SPRAY DOSE PACK	
AUTO-INJECTOR		<i>unithroid 125mcg tab</i>	88	VALTOCO 15MG	13
TRULICITY	21	<i>unithroid 137mcg tab</i>	88	(7.5MG/0.1ML) NASAL	
1.5MG/0.5ML		<i>unithroid 150mcg tab</i>	88	SPRAY DOSE PACK	
AUTO-INJECTOR		<i>unithroid 175mcg tab</i>	88	VALTOCO 20MG	13
TRULICITY 3MG/0.5ML	21	<i>unithroid 200mcg tab</i>	88	(10MG/0.1ML) NASAL	
AUTO-INJECTOR		<i>unithroid 25mcg tab</i>	88	SPRAY DOSE PACK	
TRULICITY	21	<i>unithroid 300mcg tab</i>	88	VALTOCO 5MG	13
4.5MG/0.5ML		<i>unithroid 50mcg tab</i>	88	(5MG/0.1ML) NASAL	
AUTO-INJECTOR		<i>unithroid 75mcg tab</i>	88	SPARY DOSE PACK	
TRUMENBA SYRINGE	90	<i>unithroid 88mcg tab</i>	88	<i>vancomycin 100mg/ml inj</i>	31
TRUQAP 160MG TAB	38	<i>ursodiol 250mg tab</i>	67	<i>vancomycin 125mg cap</i>	31
TRUQAP 200MG TAB	38	<i>ursodiol 300mg cap</i>	67	<i>vancomycin 1gm inj</i>	31
TUKYSA 150MG TAB	33	<i>ursodiol 500mg tab</i>	67	<i>vancomycin 250mg cap</i>	31
TUKYSA 50MG TAB	33	UZEDY 100MG/0.28ML	42	<i>vancomycin 500mg inj</i>	31
TURALIO 125MG CAP	38	SYRINGE		<i>vancomycin 750mg inj</i>	31
<i>turqoz 28 day pack</i>	56	UZEDY 125MG/0.35ML	42	VANFLYTA 17.7MG TAB	38
TWINRIX SYRINGE	90	SYRINGE		VANFLYTA 26.5MG TAB	39
TYBLUME 28 DAY PACK	56	UZEDY 150MG/0.42ML	42	VAQTA 25UNIT/0.5ML	90
TYBOST 150MG TAB	47	SYRINGE		INJ	
TYMLOS	64	UZEDY 200MG/0.56ML	42	VAQTA 25UNIT/0.5ML	90
3120MCG/1.56ML PEN		SYRINGE		SYRINGE	
INJ		UZEDY 250MG/0.7ML	42	VAQTA 50UNIT/ML INJ	90
TYPHIM VI	90	SYRINGE		VAQTA 50UNIT/ML	90
25MCG/0.5ML INJ		UZEDY 50MG/0.14ML	42	SYRINGE	
		SYRINGE		<i>varenicline 0.5mg tab</i>	85

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

ALPHABETICAL LISTING OF DRUGS

<i>varenicline 0.5mg/1mg first month pack</i>	85	<i>verapamil 80mg tab</i>	51	<i>voriconazole 40mg/ml susp</i>	24
<i>varenicline 1mg tab</i>	85	VERQUVO 10MG TAB	52	<i>voriconazole 50mg tab</i>	24
VARIVAX	90	VERQUVO 2.5MG TAB	52	VOSEVI 400-100-100MG TAB	48
1350PFU/0.5ML INJ		VERQUVO 5MG TAB	52	VOWST 30000000UNIT CAP	68
VARUBI 90MG TAB	24	VERSACLOZ 50MG/ML SUSP	43	VRAYLAR 1.5/3MG MIXED PACK	
VELIVET 28 DAY PACK	56	VERZENIO 100MG TAB	39	VRAYLAR 1.5MG CAP	41
VELTASSA 16.8GM POWDER FOR ORAL SUSP	76	VERZENIO 150MG TAB	39	VRAYLAR 3MG CAP	41
VELTASSA 25.2GM POWDER FOR ORAL SUSP	76	VERZENIO 200MG TAB	39	VRAYLAR 4.5MG CAP	41
VELTASSA 8.4GM POWDER FOR ORAL SUSP	76	VERZENIO 50MG TAB	39	VRAYLAR 6MG CAP	41
VEMLIDY 25MG TAB	48	<i>vestura 3-0.02mg pack</i>	56	<i>vyfemla 28 day pack</i>	56
VENCLEXTA 100MG TAB	33	VICTOZA 18MG/3ML PEN INJ	21	<i>vylibra 28 day pack</i>	57
VENCLEXTA 10MG TAB	33	<i>vienva 28 day pack</i>	56	VYNDAMAX 61MG CAP	52
VENCLEXTA 50MG TAB	33	<i>vigabatrin 500mg powder for oral soln</i>	16	VYNDAQEL 20MG CAP	52
VENCLEXTA TAB STARTER PACK	33	<i>vigabatrin 500mg tab</i>	16		
<i>venlafaxine 100mg tab</i>	19	<i>vigadrone 500mg powder for oral soln</i>	16	W	
<i>venlafaxine 150mg er cap</i>	19	<i>vigadrone 500mg tab</i>	16	WAKIX 17.8MG TAB	1
<i>venlafaxine 25mg tab</i>	19	<i>vigpoder 500mg powder for oral soln</i>	16	WAKIX 4.45MG TAB	1
<i>venlafaxine 37.5mg er cap</i>	19	<i>vilazodone 10mg tab</i>	18	<i>warfarin sodium 10mg tab</i>	12
<i>venlafaxine 37.5mg tab</i>	19	<i>vilazodone 20mg tab</i>	18	<i>warfarin sodium 1mg tab</i>	12
<i>venlafaxine 50mg tab</i>	19	<i>vilazodone 40mg tab</i>	18	<i>warfarin sodium 2.5mg tab</i>	12
<i>venlafaxine 75mg er cap</i>	19	VIRACEPT 250MG TAB	47	<i>warfarin sodium 2mg tab</i>	12
<i>venlafaxine 75mg tab</i>	19	VIRACEPT 625MG TAB	47	<i>warfarin sodium 3mg tab</i>	12
VENTAVIS 10MCG/ML INH SOLN	52	VIREAD 150MG TAB	47	<i>warfarin sodium 4mg tab</i>	12
VENTAVIS 20MCG/ML INH SOLN	52	VIREAD 200MG TAB	47	<i>warfarin sodium 5mg tab</i>	12
<i>verapamil 120mg er cap</i>	51	VIREAD 250MG TAB	47	<i>warfarin sodium 6mg tab</i>	12
<i>verapamil 120mg er tab</i>	51	VIREAD 40MG/GM ORAL POWDER	47	<i>warfarin sodium 7.5mg tab</i>	12
<i>verapamil 120mg tab</i>	51	VITRAKVI 100MG CAP	39	WELIREG 40MG TAB	35
<i>verapamil 180mg er cap</i>	51	VITRAKVI 20MG/ML ORAL SOLN	39	<i>wixela 100-50mcg inhaler</i>	11
<i>verapamil 180mg er tab</i>	51	VITRAKVI 25MG CAP	39	<i>wixela 250-50mcg inhaler</i>	11
<i>verapamil 240mg er cap</i>	51	VIZIMPRO 15MG TAB	33	<i>wixela 500-50mcg inhaler</i>	11
<i>verapamil 240mg er tab</i>	51	VIZIMPRO 30MG TAB	34	<i>wymzya fe 28 day pack</i>	57
<i>verapamil 40mg tab</i>	51	VIZIMPRO 45MG TAB	34		
		VONJO 100MG CAP	39	X	
		VORICONAZOLE 200MG INJ	24	XALKORI 150MG ORAL PELLET	39
		<i>voriconazole 200mg tab</i>	24	XALKORI 200MG CAP	39
				XALKORI 20MG ORAL PELLET	39

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

ALPHABETICAL LISTING OF DRUGS

XALKORI 250MG CAP	39	XIGDUO XR 10-500MG	20	XPOVIO 80MG TWICE	35
XALKORI 50MG ORAL	39	TAB		WEEKLY CARTON (32	
PELLET		XIGDUO XR	20	PACK)	
XARELTO 10MG TAB	12	2.5-1000MG TAB		XTANDI 40MG CAP	35
XARELTO 15MG TAB	12	XIGDUO XR 5-1000MG	20	XTANDI 40MG TAB	35
XARELTO 1MG/ML	12	TAB		XTANDI 80MG TAB	35
SUSP		XIGDUO XR 5-500MG	20	XYWAV 0.5GM/ML	83
XARELTO 2.5MG TAB	12	TAB		ORAL SOLN	
XARELTO 20MG TAB	12	XIIDRA 5% OPHTH	79	<hr/>	
XARELTO TAB STARTER	12	SOLN		Y	
PACK		XOLAIR 150MG INJ	9	YF-VAX INJ	91
XATMEP 2.5MG/ML	33	XOLAIR 150MG/ML	10	YF-VAX INJ	91
ORAL SOLN		AUTO-INJECTOR		<hr/>	
XCOPRI 100MG TAB	16	XOLAIR 150MG/ML	10	Z	
XCOPRI 12.5/25MG	16	SYRINGE		<i>zafirlukast 10mg tab</i>	10
TITRATION PACK		XOLAIR 300MG/2ML	10	<i>zafirlukast 20mg tab</i>	10
XCOPRI 150/200MG	16	AUTO-INJECTOR		<i>zaleplon 10mg cap</i>	72
PACK TAB		XOLAIR 300MG/2ML	10	<i>zaleplon 5mg cap</i>	72
XCOPRI 150/200MG	16	SYRINGE		ZARXIO 300MCG/0.5ML	71
TITRATION PACK		XOLAIR 75MG/0.5ML	10	SYRINGE	
XCOPRI 150MG TAB	16	AUTO-INJECTOR		ZARXIO 480MCG/0.8ML	71
XCOPRI 200MG TAB	16	XOLAIR 75MG/0.5ML	10	SYRINGE	
XCOPRI 50/100MG	16	SYRINGE		ZAVZPRET 10MG/ACT	73
TITRATION PACK		XOPENEX 45MCG	12	NASAL SPRAY	
XCOPRI 50MG TAB	16	INHALER		ZEGALOGUE	21
XCOPRI TAB 100/150MG	16	XOSPATA 40MG TAB	39	0.6MG/0.6ML	
MAINTENANCE PACK		XPOVIO 100MG ONCE	35	AUTO-INJECTOR	
XDEMVIY 0.25% OPHTH	79	WEEKLY CARTON		ZEGALOGUE	21
SOLN		(8-PACK)		0.6MG/0.6ML SYRINGE	
XELJANZ 10MG TAB	3	XPOVIO 40MG ONCE	35	ZEJULA 100MG CAP	39
XELJANZ 1MG/ML	3	WEEKLY CARTON		ZEJULA 100MG TAB	39
ORAL SOLN		(4-PACK)		ZEJULA 200MG TAB	39
XELJANZ 5MG TAB	3	XPOVIO 40MG TWICE	35	ZEJULA 300MG TAB	39
XELJANZ XR 11MG TAB	3	WEEKLY CARTON		ZELBORAF 240MG TAB	39
XELJANZ XR 22MG TAB	3	(8-PACK)		ZEMAIRA 1000MG INJ	85
XENLETA 600MG TAB	31	XPOVIO 60MG ONCE	35	<i>zenatane 10mg cap</i>	59
XERMELO 250MG	69	WEEKLY CARTON		<i>zenatane 20mg cap</i>	59
XGEVA 120MG/1.7ML	64	(4-PACK)		<i>zenatane 30mg cap</i>	59
INJ		XPOVIO 60MG TWICE	35	<i>zenatane 40mg cap</i>	59
XIFAXAN 200MG TAB	30	WEEKLY CARTON (24		ZENPEP	62
XIFAXAN 550MG TAB	30	PACK)		105000-25000-79000UNI	
XIGDUO XR 10-1000MG	20	XPOVIO 80MG ONCE	35	T DR CAP	
TAB		WEEKLY CARTON		ZENPEP	62
		(8-PACK)		14000-3000-10000UNIT	
				DR CAP	

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

ALPHABETICAL LISTING OF DRUGS

ZENPEP 24000-5000-17000UNIT DR CAP	62	<i>zolpidem tartrate 12.5mg er tab</i>	72
ZENPEP 252600-60000-189600U NIT DR CAP	62	<i>zolpidem tartrate 5mg tab</i> <i>zolpidem tartrate 6.25mg er tab</i>	72 72
ZENPEP 40000-126000-168000U NIT DR CAP	62	ZONISADE 100MG/5ML SUSP	16
ZENPEP 42000-10000-32000UNIT DR CAP	62	<i>zonisamide 100mg cap</i> <i>zonisamide 25mg cap</i> <i>zonisamide 50mg cap</i>	16 16 16
ZENPEP 63000-15000-47000UNIT DR CAP	63	ZORYVE 0.3% CREAM <i>zovia 1/35e 28 day pack</i>	60 57
ZENPEP 84000-20000-63000UNIT DR CAP	63	ZTALMY 50MG/ML SUSP	16
ZEPOSIA 0.92MG CAP ZEPOSIA 28-DAY STARTER KIT	85	ZURZUVAE 20MG CAP ZURZUVAE 25MG CAP ZURZUVAE 30MG CAP	17 17 17
ZEPOSIA CAP 7-DAY STARTER PACK	85	ZYDELIG 100MG TAB ZYDELIG 150MG TAB	39 39
<i>zidovudine 100mg cap</i> <i>zidovudine 10mg/ml oral soln</i> <i>zidovudine 300mg tab</i>	47 47 47	ZYKADIA 150MG TAB ZYPREXA 210MG INJ	39 44
ZIEXTENZO 6MG/0.6ML SYRINGE	71		
ZIMHI 5MG/0.5ML SYRINGE	23		
<i>ziprasidone 20mg cap</i> <i>ziprasidone 20mg inj</i> <i>ziprasidone 40mg cap</i> <i>ziprasidone 60mg cap</i> <i>ziprasidone 80mg cap</i>	41 41 41 41 41		
ZOLINZA 100MG CAP <i>zolmitriptan 2.5mg tab</i> <i>zolmitriptan 5mg tab</i> <i>zolmitriptan 5mg/act nasal spray</i> <i>zolpidem tartrate 10mg tab</i>	39 74 74 74 72		

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



L.A. Care
HEALTH PLAN®

For All of L.A.

Este Formulario se actualizó el 05/01/2024. Mensaje importante sobre lo que paga por las vacunas: Algunas vacunas se consideran beneficios médicos. Otras vacunas se consideran medicamentos de la Parte D. Nuestro plan cubre la mayoría de las vacunas de la Parte D sin costo alguno para usted.

Para obtener información más reciente u otras preguntas, contáctenos al **1-833-522-3767** (TTY: **711**), las 24 horas del día, los 7 días de la semana, incluso los días festivos, o visítenos en **[medicare.lacare.org](https://www.medicare.lacare.org)**.