



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

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

Lista de medicamentos cubiertos (Formulario)

2023

Este formulario se actualizó el 1 de septiembre de 2023.

Si tiene alguna pregunta, llame a Servicios para los Miembros de 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.

Para obtener más información, visite **www.lacare.medicare.org**.



L.A. Care Medicare Plus (HMO D-SNP) | *Lista de medicamentos cubiertos (Formulario) de 2023*

Introducción

Este documento se llama *Lista de medicamentos cubiertos* (también conocida como Lista de medicamentos). Sirve para informarle qué medicamentos recetados y qué medicamentos, productos que no son medicamentos y artículos de venta libre (*Over-The-Counter*, OTC) 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 y la fecha de la última actualización de la Lista de medicamentos aparecen en las páginas de la tapa y la contratapa. Los términos más importantes y sus definiciones figuran en el último capítulo de la *Evidencia de cobertura*.

Mensaje importante acerca de lo que usted paga por las vacunas. Nuestro plan cubre la mayoría de las vacunas de la Parte D sin ningún costo para usted, aunque no haya pagado su deducible. Llame a Servicios para los Miembros para obtener más información.

Mensaje importante acerca de lo que usted paga por la insulina. No pagará más de \$35 por un suministro para un mes de cada producto de insulina cubierto por nuestro plan, sin importar en qué nivel de costo compartido se encuentre el producto, aunque no haya pagado su deducible.

Índice

A. Avisos legales	iii
B. Preguntas frecuentes	v
B1. ¿Qué medicamentos recetados están incluidos en la <i>Lista de medicamentos cubiertos</i> ? (Para abreviar, llamamos “Lista de medicamentos” a la <i>Lista de medicamentos cubiertos</i>).	v
B2. ¿Se realizan cambios en la Lista de medicamentos?	v
B3. ¿Qué sucede cuando se realiza un cambio en la Lista de medicamentos?	vi
B4. ¿Hay algún límite o restricción en la cobertura de los medicamentos o alguna medida que deba tomar para obtener determinados medicamentos?	vii
B5. ¿Cómo sabré si el medicamento que deseo tiene limitaciones o si hay alguna medida que deba tomar para obtener el medicamento?	viii
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)?	viii
B7. ¿Cómo puedo encontrar un medicamento en la Lista de medicamentos?	viii



Si tiene alguna pregunta, 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.

B8. ¿Qué sucede si el medicamento que deseo tomar no figura en la Lista de medicamentos?	viii
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 tengo un problema para obtener mi medicamento?.....	ix
B10. ¿Puedo solicitar una excepción para que se cubra mi medicamento?	x
B11. ¿Cómo puedo solicitar una excepción?	x
B12. ¿Cuánto tiempo deberé esperar para obtener una excepción?	x
B13. ¿Qué son los medicamentos genéricos?	xi
B14. ¿Qué son los medicamentos OTC?.....	xi
B15. ¿L.A. Care Medicare Plus cubre productos OTC que no son medicamentos?.....	xi
B16. ¿L.A. Care Medicare Plus cubre suministros prolongados de medicamentos recetados?	xi
B17. ¿Puedo pedirle a mi farmacia local que envíe mis medicamentos recetados a mi hogar?	xi
B18. ¿Cuál es mi copago?	xii
C. Descripción general de la <i>Lista de medicamentos cubiertos</i>	xii
C1. Lista de medicamentos por condición médica	xiv
D. Índice de medicamentos cubiertos.....	xv



A. Avisos legales

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

- Puede consultar en todo momento la versión actualizada de la *Lista de medicamentos cubiertos* de L.A. Care Medicare Plus en línea en medicare.lacare.org o llamando al **1-833-522-3767** (TTY: **711**).
- Puede obtener este documento en forma gratuita en otros formatos, como letra grande, braille o 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.
- ATTENTION: If you speak *English*, language assistance services, free of charge, are available to you. Call **1-833-522-3767** (TTY: **711**), 24 hours a day, 7 days a week, including holidays. The call is free.
- ATENCIÓN: Si usted habla español, los servicios de asistencia con el idioma estarán disponibles para usted sin costo. 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.
- ध्यान दें: अगर आप हिंदी बोलते हैं, तो मुफ्त में भाषा सहायता सेवाएं, आपके लिए उपलब्ध हैं। अवकाश के दिनों समेत, दिन के 24 घंटे, सप्ताह के 7 दिन **1-833-522-3767** (TTY: **711**) पर कॉल करें। कॉल नि:शुल्क है।
- LUS TSHAJ TAWM: Yog koj hais lus Hmoob, muaj kev pab txhais lus pub dawb rau koj, hu rau **1-833-522-3767** (TTY: **711**), 24 teev hauv ib hnuv, 7 hnuv hauv ib asthiv, suav nrog cov hnuv so tib si. Qhov hu no yog hu dawb xwb.
- ՈՒՇԱԴՐՈՒԹՅՈՒՆ. Եթե խոսում եք հայերեն, լեզվապես և անվտանգորեն օգնությունները հասանելի են Ձեզ անվճար: Զանգահարեք **1-833-522-3767** հեռախոսահամարով (TTY՝ **711**), օրը 24 ժամ, շաբաթը 7 օր, ներառյալ սոնո օրերը: Հեռախոսազանգն անվճար է:
- ចំណាំ: បើអ្នកនិយាយភាសា ខ្មែរ, សេវាជំនួយផ្នែកភាសា គ្មានបង់ថ្លៃ គឺមានសម្រាប់ជួយអ្នក។ សូម ទូរស័ព្ទទៅ **1-833-522-3767** (TTY: **711**), 24 ម៉ោងក្នុងមួយថ្ងៃ 7 ថ្ងៃក្នុងមួយសប្តាហ៍រួមទាំងថ្ងៃឈប់សម្រាក។ ការហៅទូរស័ព្ទនេះគឺមិនគិតថ្លៃទេ។
- 안내: 한국어를 사용하실 경우 언어지원서비스를 무료로 이용하실 수 있습니다. 연중무휴로 이용할 수 있는 **1-833-522-3767** (TTY: **711**) 번으로 전화하십시오. 통화료는 무료입니다.
- ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ। ਛੁੱਟੀ ਵਾਲੇ ਦਿਨਾਂ ਸਮੇਤ 24 ਘੰਟੇ, 7 ਦਿਨ **1-833-522-3767** (TTY: **711**) 'ਤੇ ਕਾਲ ਕਰੋ। ਕਾਲ ਮੁਫਤ ਹੈ।
- ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາລາວ, ມີບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໃຫ້ທ່ານໂດຍບໍ່ເສັຽຄ່າ. ໂທສ **1-833-522-3767** (TTY: **711**), ໄດ້ຕະຫຼອດ 24 ຊົ່ວໂມງ, 7 ວັນຕໍ່ອາທິດ, ລວມເຖິງ ວັນພັກຕ່າງໆ. ເປີໂທສນີ້ແມ່ນບໍ່ເສັຽຄ່າ.
- ВНИМАНИЕ! Если вы говорите по-русски, вы можете воспользоваться бесплатными услугами переводчика. Звоните по телефону **1-833-522-3767** (TTY: **711**), круглосуточно, без выходных, включая праздничные дни. Звонок бесплатный.

Si tiene alguna pregunta, 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.



- โปรดทราบ: หากท่านพูดภาษาไทย เรามีบริการช่วยเหลือด้านภาษาให้คุณโดยไม่เสียค่าใช้จ่าย โปรดโทรฟรีที่หมายเลข **1-833-522-3767** (TTY: **711**) ได้ตลอด 24 ชั่วโมง ทุกวัน ไม่เว้นวันหยุด
- PAUNAWA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-833-522-3767** (TTY: **711**), 24 na oras sa isang araw, 7 araw sa isang linggo, kabilang ang mga piyesta opisyal. Libre ang pagtawag.
- CHÚ Ý: Nếu quý vị nói Tiếng Việt, hiện có các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Gọi **1-833-522-3767** (TTY: **711**), 24 giờ một ngày, 7 ngày một tuần, kể cả các ngày lễ. Cuộc gọi là miễn phí.
- 注意：如果您說中文，您可免費獲得語言協助服務。請致電 **1-833-522-3767** (TTY: **711**)，服務時間為每週 7 天，每天 24 小時（包含假日）。這是免費電話。

• عنایة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية، متوفرة لك، مجاناً. اتصل على **1-833-522-3767** (TTY: **711**)، 24 ساعة في اليوم و 7 أيام في الأسبوع، بما في ذلك أيام العطلات. هذه المكالمة مجانية.

• ت وجه: اگر به زبان فارسی صحبت می کنید، خدمات کمک در زمینه زبان بطور رایگان در اختیار شما قرار دارد. می توانید در تمام 24 ساعت شبانه روز و 7 روز هفته، حتی روزهای تعطیل با **1-833-522-3767** (TTY: **711**) تماس بگیرید. تماس رایگان می باشد.

Si desea recibir los materiales, ahora y en el futuro, en un idioma que no sea español o en un formato alternativo, 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. La llamada es gratuita.



Si tiene alguna pregunta, 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.

B. Preguntas frecuentes

A continuación, podrá encontrar las respuestas a algunas preguntas acerca de esta *Lista de medicamentos cubiertos*. Puede leer todas las preguntas frecuentes para obtener más información o puede buscar una pregunta y su respuesta.

B1. ¿Qué medicamentos recetados están incluidos en la *Lista de medicamentos cubiertos*? (Para abreviar, llamamos “Lista de medicamentos” a la *Lista de medicamentos cubiertos*).

Los medicamentos de la *Lista de medicamentos cubiertos* que comienza en la página 1 son los medicamentos cubiertos por L.A. Care Medicare Plus. Estos medicamentos están disponibles en las farmacias que forman parte de nuestra red. Una farmacia forma parte de nuestra red si tenemos un acuerdo con ella para que trabaje con nosotros y le brinde servicios. A estas farmacias las denominamos “farmacias de la red”. Los medicamentos recetados incluidos en esta Lista de medicamentos cubiertos están cubiertos por L.A. Care Medicare Plus. Otros medicamentos, como algunos medicamentos de venta libre (OTC) y determinadas vitaminas, pueden estar cubiertos por Medi-Cal Rx. Visite el sitio web de Medi-Cal Rx (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. Por favor, lleve su tarjeta de identificación de beneficios (*Beneficiary Identification Card*, BIC) de Medi-Cal al obtener sus medicamentos recetados a través de Medi-Cal Rx.

- L.A. Care Medicare Plus cubrirá todos los medicamentos médicamente necesarios que estén incluidos en la Lista de medicamentos si:
 - su médico u otro profesional que le recete medicamentos dice que usted necesita los medicamentos para mejorar o mantenerse saludable,
 - L.A. Care Medicare Plus coincide en que el medicamento es médicamente necesario para usted, **y**
 - usted surte la receta en una farmacia de la red de L.A. Care Medicare Plus.
- En algunos casos, usted tendrá que hacer algo antes de poder obtener un medicamento. Consulte la pregunta B4 para obtener más información.

También puede consultar una lista actualizada de los medicamentos que cubrimos en nuestro sitio web en medicare.lacare.org o puede llamar 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.

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

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

También podemos cambiar nuestras reglas relacionadas con los medicamentos. Por ejemplo, podríamos hacer lo siguiente:

- Decidir exigir o no exigir la autorización previa para 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).

Si tiene alguna pregunta, 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.



- Agregar o cambiar restricciones de terapia de pasos respecto 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, generalmente no eliminaremos ni cambiaremos la cobertura de ese medicamento **durante el resto del año**, a menos que:

- surja un nuevo medicamento más económico que sea tan eficaz como aquel incluido en la Lista de medicamentos en ese momento, **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.

- Puede consultar en todo momento la versión actualizada de la Lista de medicamentos de L.A. Care Medicare Plus en medicare.lacare.org.
- También puede llamar 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, para acceder a la Lista de medicamentos actualizada.

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:

- **Cuando haya un nuevo medicamento genérico disponible.** A veces, aparece en el mercado un nuevo medicamento genérico que es tan eficaz como un medicamento de marca que está incluido 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-\$10.35. 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 los cambios específicos que hayamos realizado.
 - Usted o su proveedor pueden solicitar una excepción a estos cambios. Le enviaremos una notificación con los pasos que podrá seguir para solicitar una excepción. Consulte las preguntas B10-B12 para obtener más información sobre las excepciones.
- **Cuando se retire 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 una de estas cartas, hable con su médico para buscar otro medicamento que sea seguro para usted.

Si tiene alguna pregunta, 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.



Cuando realicemos otros cambios que afecten los medicamentos que usted esté tomando. Le informaremos con anticipación acerca de estos otros cambios en la Lista de medicamentos. Estos cambios podrían realizarse si:

- La 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 en la Lista de medicamentos **o**
- cambiamos las reglas o los límites de cobertura para el medicamento de marca.

Cuando se realicen estos cambios, haremos lo siguiente:

- Le informaremos al menos 30 días antes de realizar el cambio en la Lista de medicamentos **o**
- Le informaremos y le proporcionaremos un suministro del medicamento para 30 días después de que pida un resurtido.

Esto le dará tiempo para hablar con su médico u otro profesional que le recete medicamentos, quien podrá ayudarle a decidir lo siguiente:

- Si hay un medicamento similar en la Lista de medicamentos que usted pueda tomar **o**
- Si le conviene solicitar una excepción. Para obtener más información sobre las excepciones, consulte las preguntas B10-B12.

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 tienen reglas para la cobertura o límites en la cantidad que usted puede obtener. En algunos casos, usted, su médico u otro profesional que le recete medicamentos deben hacer algo antes de que usted pueda obtener el medicamento.

Por ejemplo:

- **Autorización previa:** Para algunos medicamentos, usted, su médico u otro profesional que le recete medicamentos deben obtener la autorización de L.A. Care Medicare Plus antes de surtir su receta. La autorización previa es diferente a una referencia. Es posible que L.A. Care Medicare Plus no cubra el medicamento si usted no obtiene una autorización previa.
- **Límites de cantidad:** A veces, L.A. Care Medicare Plus limita la cantidad que usted puede obtener de un medicamento.
- **Terapia de pasos:** A veces, L.A. Care Medicare Plus le exige seguir una terapia de pasos. Esto significa que tendrá que probar ciertos medicamentos en un orden determinado para su condición médica. Quizás deba probar un medicamento antes de que cubramos otro medicamento. Si su médico cree que el primer medicamento no funciona en su caso, cubriremos el segundo.
- **Cobertura basada en la indicación:** Si L.A. Care Medicare Plus cubre un medicamento solamente para algunas condiciones médicas, lo identificaremos claramente en la Lista de medicamentos junto con las condiciones médicas específicas cubiertas.

Si tiene alguna pregunta, 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.



Puede averiguar si su medicamento tiene requisitos o límites adicionales leyendo las tablas que comienzan en la página xii. También puede obtener más información visitando nuestro sitio web en medicare.lacare.org. Hemos publicado documentos en línea que explican nuestro requisito de autorización previa y las restricciones de terapia de pasos. También puede solicitarnos que le enviemos una copia.

Puede solicitar una excepción a estos límites. Esto le dará tiempo para hablar con su médico u otro profesional que le recete medicamentos, quien podrá ayudarle a decidir si hay un medicamento similar en la Lista de medicamentos que usted pueda tomar o si le conviene solicitar una excepción. Consulte las preguntas B10-B12 para obtener más información sobre las excepciones.

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

La tabla en la Lista de medicamentos por condición médica de la página 1 tiene una columna con el título “Medidas necesarias, restricciones o límites en el uso” (Necessary actions, restrictions, or limits on use).

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.

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

Hay dos maneras de buscar un medicamento:

- puede buscarlo alfabéticamente o
- puede buscarlo por condición médica.

Para buscar **alfabéticamente**, busque su medicamento en la sección Índice de medicamentos cubiertos, que aparece al final de la lista de medicamentos y se llama Índice. Los medicamentos figuran en orden alfabético.

Para buscar **por condición médica**, busque la sección titulada “Lista de medicamentos por condición médica” en la página xiii. Los medicamentos de esta sección están agrupados en categorías según el tipo de condiciones médicas para las que se usan. Por ejemplo, si tiene una enfermedad cardíaca, debe buscar en la categoría denominada “Agentes cardiovasculares – Varios” (Cardiovascular agents – Misc). Allí encontrará los medicamentos para tratar enfermedades cardíacas.

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, 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

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los días festivos, y consulte sobre el medicamento. Si le informan que L.A. Care Medicare Plus no cubrirá el medicamento, puede tomar una de las siguientes medidas:

- Pídale a *Servicios para los Miembros* una lista de medicamentos similares al que usted desee tomar. Luego muéstrole la lista a su médico u otro profesional que le recete medicamentos, quien podrá recetarle un medicamento incluido en la Lista de medicamentos que sea similar al que usted desee tomar. **O bien:**
- Puede pedirle a L.A. Care Medicare Plus que haga una excepción para cubrir su medicamento. Consulte las preguntas B10-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 tengo un problema para obtener mi medicamento?

Podemos ayudarle. Podemos cubrir un suministro temporal de su medicamento para 30 días durante los primeros 90 días de membresía en L.A. Care Medicare Plus. Esto le dará tiempo para hablar con su médico u otro profesional que le recete medicamentos, quien podrá ayudarle a decidir si hay un medicamento similar en la Lista de medicamentos que usted pueda tomar o si le conviene solicitar una excepción.

Si la receta que le emitieron es por menos días, le permitiremos varios resurtidos para darle un suministro de su medicamento para 30 días como máximo.

Cubriremos un suministro de su medicamento para 30 días si:

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

Si está tomando un medicamento que L.A. Care Medicare Plus no considere un medicamento de la Parte D, tiene derecho a recibir un suministro del medicamento para 72 horas por única vez.

Si se encuentra en una residencia de reposo u otro establecimiento de cuidados a largo plazo y necesita un medicamento que no figura en la Lista de medicamentos o si no puede obtener fácilmente el medicamento que necesita, podemos ayudarle. Si ha estado en el plan durante más de 90 días, vive en un establecimiento de cuidados 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.

Si tiene alguna pregunta, 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.



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 que ingresan en establecimientos de cuidados a largo plazo después de una hospitalización.
2. Miembros que vuelven a su hogar después de ser dados de alta de un hospital.
3. Miembros que finalizan su estadía en un hospital de enfermería en virtud de la Parte A de Medicare y que necesitan volver a utilizar su formulario del plan de la Parte D.
4. Miembros que abandonan la categoría de cuidados paliativos para volver a recibir los beneficios estándares de las Partes A y B de Medicare.
5. Miembros que finalizan su estadía en un establecimiento de cuidados a largo plazo y vuelven a la comunidad.
6. Miembros que son dados de alta de hospitales psiquiátricos con regímenes de medicamentos altamente individualizados.

Las farmacias pueden comunicarse con el Centro de Ayuda de Farmacia al 1-844-268-9785 para procesar las exenciones en el punto de venta a fin de garantizar que los miembros puedan acceder a sus medicamentos sin demoras.

B10. ¿Puedo solicitar una excepción para que se cubra mi medicamento?

Sí. Puede pedirle a L.A. Care Medicare Plus que haga una excepción para cubrir un medicamento que no esté incluido en la Lista de medicamentos.

También puede pedirnos que cambiemos las reglas de su medicamento.

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

B11. ¿Cómo puedo solicitar una excepción?

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

B12. ¿Cuánto tiempo deberé esperar para obtener una excepción?

Una vez que hayamos recibido una constancia del profesional que le haya recetado el medicamento, en la que apoye su solicitud de una excepción, le informaremos nuestra decisión en un plazo de 72 horas. Su médico u otro profesional que le recete medicamentos



Si tiene alguna pregunta, 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.

pueden enviarnos la constancia por fax o por correo. O bien, su médico u otro profesional que le recete medicamentos puede informarnos por teléfono y luego enviarnos una constancia por fax o por correo. Puede llamarnos al 1-888-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos, para obtener más información.

Si usted o el profesional que le recetó el medicamento creen que esperar 72 horas hasta que se tome una decisión podría dañar su salud, puede solicitar una excepción acelerada y se le brindará una decisión más rápida. Si el profesional que le recetó el medicamento apoya su solicitud, le informaremos nuestra decisión en un plazo de 24 horas a partir de la recepción de la constancia del profesional.

B13. ¿Qué son los medicamentos genéricos?

Los medicamentos genéricos tienen los mismos componentes activos que los medicamentos de marca. Generalmente cuestan menos que los medicamentos de marca y no tienen nombres reconocidos. Los medicamentos genéricos tienen la aprobación de 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?

Son aquellos de venta libre. L.A. Care Medicare Plus cubre algunos medicamentos OTC cuando su proveedor se los receta.

Puede leer la Lista de medicamentos de L.A. Care Medicare Plus para ver qué medicamentos OTC están cubiertos.

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

L.A. Care Medicare Plus cubre algunos productos OTC que no son medicamentos cuando su proveedor se los recete. Por ejemplo, curitas adhesivas, vitaminas, etc.

Puede leer la Lista de medicamentos de L.A. Care Medicare Plus para ver qué productos OTC que no son medicamentos están cubiertos.

B16. ¿L.A. Care Medicare Plus cubre suministros prolongados de medicamentos recetados?

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

B17. ¿Puedo pedirle a mi farmacia local que envíe mis medicamentos recetados a mi hogar?

Es posible que su farmacia local pueda enviar sus medicamentos recetados a su hogar. Puede llamar a su farmacia para averiguar si ofrecen la entrega a domicilio.

Si tiene alguna pregunta, 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.



B18. ¿Cuál es mi copago?

Es posible que los miembros de L.A. Care Medicare Plus tengan que pagar una parte del costo de los medicamentos recetados, los medicamentos OTC y los productos OTC que no son medicamentos, siempre que el miembro siga las reglas del plan. Consulte las preguntas B14 y B15 para obtener más información sobre los medicamentos OTC y los productos OTC que no son medicamentos.

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

Los niveles de costos compartidos son grupos de medicamentos con el mismo copago. Cada medicamento de la Lista de medicamentos de nuestro plan está en uno de cinco (5) niveles de costo compartido. En general, cuanto más alto el número del nivel, más alto el copago.

- Los medicamentos del Nivel 1 son medicamentos genéricos preferidos. El copago es de \$0.
- Los medicamentos del Nivel 2 son medicamentos genéricos. El copago es de \$0 - \$10.35 o \$20. Su copago depende de la cantidad de Ayuda Adicional que reciba.
- Los medicamentos del Nivel 3 son medicamentos de marca preferidos. El copago es de \$0 - \$10.35 o \$47. Su copago depende de la cantidad de Ayuda Adicional que reciba.
- Los medicamentos del Nivel 4 son medicamentos de marca no preferidos. El copago es de \$0 - \$10.35 o \$100. Su copago depende de la cantidad de Ayuda Adicional que reciba.
- *Los medicamentos del Nivel 5 son medicamentos de especialidad.* El copago es de \$0 - \$10.35 o el 25%. Su copago depende de la cantidad de Ayuda Adicional que reciba.

Si tiene alguna pregunta, llame a Servicios para los Miembros al 1-888-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos.

C. Descripción general de la *Lista de medicamentos cubiertos*

La *Lista de medicamentos cubiertos* le brinda información acerca de los medicamentos cubiertos por L.A. Care Medicare Plus. Si tiene dificultades para encontrar su medicamento en la lista, vaya al Índice de medicamentos cubiertos que comienza en la página 1. El índice detalla alfabéticamente todos los medicamentos cubiertos por L.A. Care Medicare Plus.

Si tiene alguna pregunta, 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 de administración de la utilización

ABREVIATURA	DESCRIPCIÓN	EXPLICACIÓN
PA	Restricción de autorización previa (Prior Authorization)	Usted (o su médico) debe obtener la autorización previa de L.A. Care Medicare Plus antes de surtir su receta para este medicamento. Sin la aprobación previa, es posible que L.A. Care Medicare Plus no cubra este medicamento.
PA BvD	Restricción de autorización previa para la determinación de cobertura de la Parte B versus la Parte D (Prior Authorization For Part B vs Part D Determination)	Este medicamento puede ser elegible para el pago en virtud de la Parte B o la Parte D de Medicare. Usted (o su médico) debe obtener la autorización previa de L.A. Care Medicare Plus para determinar si este medicamento está cubierto por la Parte D de Medicare antes de surtir su receta para este medicamento. Sin la aprobación previa, es posible que L.A. Care Medicare Plus no cubra este medicamento.
PA NSO	Restricción de autorización previa para medicamentos recetados por primera vez únicamente (Prior Authorization for New Starts Only)	Si este es un medicamento recetado nuevo para usted, es decir, si es la primera vez que se lo recetan, usted (o su médico) debe obtener la autorización previa de L.A. Care Medicare Plus antes de surtir su receta para este medicamento. Sin la aprobación previa, es posible que L.A. Care Medicare Plus no cubra este medicamento.
QL	Restricción de límite de cantidad (Quantity Limit)	L.A. Care Medicare Plus limita la cantidad que cubrirá dentro de un período específico para este medicamento.
ST	Restricción de terapia de pasos (Step Therapy)	Antes de que L.A. Care Medicare Plus brinde cobertura para este medicamento, usted primero deberá probar otro(s) medicamento(s) del formulario para tratar su condición médica. Este medicamento solamente podrá cubrirse si el (los) otro(s) medicamento(s) no le funciona(n).
ST NSO	Terapia de pasos para medicamentos recetados por primera vez únicamente (Step Therapy for New Starts Only)	Si este es un medicamento recetado nuevo para usted, es decir, si es la primera vez que se lo recetan, antes de que L.A. Care Medicare Plus brinde cobertura para este medicamento, usted primero deberá probar otro(s) medicamento(s) del formulario para tratar su condición médica. Este medicamento solamente podrá cubrirse si el (los) otro(s) medicamento(s) no le funciona(n).

Si tiene alguna pregunta, 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.



Otros requisitos especiales para la cobertura

LD	Medicamento de distribución limitada (Limited Distribution)	Es posible que este medicamento solo esté disponible en determinadas farmacias. Para obtener más información, consulte su <i>Directorio de proveedores/farmacias</i> o llame a Servicios para los Miembros al 1-888-522-3767 (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos.
NDS	Suministro no prolongado (Non-Extended Day Supply)	Los medicamentos con la leyenda “NDS” tienen un límite de un suministro para 1 mes tanto en farmacias minoristas como de pedidos por correo.

Nota: El asterisco (*) junto a un medicamento significa que no es un “medicamento de la Parte D”. Estos medicamentos tienen reglas diferentes para las apelaciones.

- Una apelación es una manera formal de pedirnos que revisemos una decisión que tomamos sobre su cobertura y que la cambiemos si usted considera que cometimos un error.
- Por ejemplo, quizás decidamos 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 tiene alguna pregunta, llame a Servicios para los Miembros al 1-888-522-3767 (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 de esta sección están agrupados en categorías según el tipo de condiciones médicas para las que se usan. Por ejemplo, si tiene una enfermedad cardíaca, debe buscar en la categoría denominada “Agentes cardiovasculares – Varios” (Cardiovascular agents – Misc). Allí encontrará los medicamentos para tratar enfermedades cardíacas.

Puede obtener información sobre el significado de los símbolos y las abreviaturas de esta tabla en la página xii.



Si tiene alguna pregunta, 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, podrá encontrar un medicamento buscando el nombre alfabéticamente. Así accederá al número de página donde podrá encontrar información adicional sobre la cobertura para su medicamento.



Si tiene alguna pregunta, 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.medicare.lacare.org).

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<i>amphetamine/dextroamphetamine 10mg tab</i>	2	
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	2	
<i>amphetamine/dextroamphetamine 15mg tab</i>	2	
<i>amphetamine/dextroamphetamine 20mg tab</i>	2	
<i>amphetamine/dextroamphetamine 25mg er cap</i>	2	
<i>amphetamine/dextroamphetamine 30mg tab</i>	2	
<i>amphetamine/dextroamphetamine 5mg tab</i>	2	
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	2	
<i>dextroamphetamine sulfate 10mg er cap</i>	2	
<i>dextroamphetamine sulfate 10mg tab</i>	2	
<i>dextroamphetamine sulfate 15mg er cap</i>	2	
<i>dextroamphetamine sulfate 5mg er cap</i>	2	
<i>dextroamphetamine sulfate 5mg tab</i>	2	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine 100mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 10mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 18mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 25mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 40mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 60mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 80mg cap</i>	2	QL=60 EA/30 Days
<i>clonidine 0.1mg er tab</i>	2	
<i>guanfacine 1mg er tab</i>	2	
<i>guanfacine 2mg er tab</i>	2	
<i>guanfacine 3mg er tab</i>	2	
<i>guanfacine 4mg er tab</i>	2	
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI 150MG TAB	3	PA QL=30 EA/30 Days
SUNOSI 75MG TAB	3	PA QL=30 EA/30 Days
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS		
WAKIX 17.8MG TAB	5	NDS PA QL=60 EA/30 Days
WAKIX 4.45MG TAB	5	NDS PA QL=60 EA/30 Days
STIMULANTS - MISC.		
<i>armodafinil 150mg tab</i>	2	PA QL=30 EA/30 Days
<i>armodafinil 200mg tab</i>	2	PA QL=30 EA/30 Days
<i>armodafinil 250mg tab</i>	2	PA QL=30 EA/30 Days
<i>armodafinil 50mg tab</i>	2	PA QL=30 EA/30 Days
<i>dexmethylphenidate 10mg er cap</i>	2	
<i>dexmethylphenidate 10mg tab</i>	2	
<i>dexmethylphenidate 15mg er cap</i>	2	
<i>dexmethylphenidate 2.5mg tab</i>	2	
<i>dexmethylphenidate 20mg er cap</i>	2	
<i>dexmethylphenidate 25mg er cap</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dexmethylphenidate 30mg er cap</i>	2	
<i>dexmethylphenidate 35mg er cap</i>	2	
<i>dexmethylphenidate 40mg er cap</i>	2	
<i>dexmethylphenidate 5mg er cap</i>	2	
<i>dexmethylphenidate 5mg tab</i>	2	
<i>methylphenidate 10mg cr cap</i>	2	
<i>methylphenidate 10mg er tab</i>	2	
<i>methylphenidate 10mg la cap</i>	2	
<i>methylphenidate 10mg tab</i>	2	
<i>methylphenidate 1mg/ml oral soln</i>	2	
<i>methylphenidate 20mg cr cap</i>	2	
<i>methylphenidate 20mg er tab</i>	2	
<i>methylphenidate 20mg la cap</i>	2	
<i>methylphenidate 20mg tab</i>	2	
<i>methylphenidate 27mg er tab</i>	2	
<i>methylphenidate 27mg sr tab</i>	2	
<i>methylphenidate 2mg/ml oral soln</i>	2	
<i>methylphenidate 30mg cr cap</i>	2	
<i>methylphenidate 30mg la cap</i>	2	
<i>methylphenidate 36mg er tab</i>	2	
<i>methylphenidate 36mg sr tab</i>	2	
<i>methylphenidate 40mg cr cap</i>	2	
<i>methylphenidate 40mg la cap</i>	2	
<i>methylphenidate 50mg cr cap</i>	2	
<i>methylphenidate 54mg er tab</i>	2	
<i>methylphenidate 54mg sr tab</i>	2	
<i>methylphenidate 5mg tab</i>	2	
<i>methylphenidate 60mg cr cap</i>	2	
<i>methylphenidate ER osmotic tab 18mg</i>	2	
<i>modafinil 100mg tab</i>	2	PA QL=60 EA/30 Days
<i>modafinil 200mg tab</i>	2	PA QL=60 EA/30 Days
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
<i>amikacin 250mg/ml inj</i>	2	
ARIKAYCE 590MG/8.4ML INH SUSP	5	NDS PA QL=252 ML/30 Days
GENTAMICIN 0.8MG/ML INJ	2	
<i>gentamicin 1.2mg/ml inj</i>	2	
GENTAMICIN 1.6MG/ML INJ	2	
GENTAMICIN 1MG/ML INJ	2	
<i>gentamicin 40mg/ml inj</i>	2	
<i>neomycin sulfate 500mg tab</i>	2	
<i>paromomycin 250mg cap</i>	4	
STREPTOMYCIN 1GM INJ	4	
TOBRAMYCIN 10MG/ML INJ	2	
<i>tobramycin 40mg/ml inj</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tobramycin 60mg/ml inh soln</i>	5	NDS PA QL=300 ML/30 Days
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
OLUMIANT 1MG TAB	5	NDS PA QL=30 EA/30 Days
OLUMIANT 2MG TAB	5	NDS PA QL=30 EA/30 Days
RINVOQ 15MG ER TAB	5	NDS PA QL=30 EA/30 Days
RINVOQ 30MG ER TAB	5	NDS PA QL=30 EA/30 Days
RINVOQ 45MG ER TAB	5	NDS PA QL=30 EA/30 Days
XELJANZ 10MG TAB	5	NDS PA QL=60 EA/30 Days
XELJANZ 1MG/ML ORAL SOLN	5	NDS PA QL=300 ML/30 Days
XELJANZ 5MG TAB	5	NDS PA QL=60 EA/30 Days
XELJANZ XR 11MG TAB	5	NDS PA QL=30 EA/30 Days
XELJANZ XR 22MG TAB	5	NDS PA QL=30 EA/30 Days
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
HUMIRA 10MG/0.1ML SYRINGE	5	NDS PA QL=2 EA/28 Days
HUMIRA 20MG/0.2ML SYRINGE	5	NDS PA QL=2 EA/28 Days
HUMIRA 40MG/0.4ML AUTO-INJECTOR	5	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.4ML SYRINGE	5	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.8ML AUTO-INJECTOR	5	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.8ML SYRINGE	5	NDS PA QL=6 EA/28 Days
HUMIRA 80MG/0.8ML AUTO-INJECTOR	5	NDS PA QL=2 EA/28 Days
HUMIRA PEDIATRIC CROHN'S STARTER PACK SYRINGE (2) 40MG/0.4ML 80MG/0.8ML	5	NDS PA QL=2 EA/180 Days
HUMIRA PEN - CROHN'S STARTER PACK 40MG/0.8ML INJ	5	PA QL=6 EA/180 Days
HUMIRA PEN - CROHN'S STARTER PACK 80MG/0.8ML INJ	5	PA QL=3 EA/180 Days
HUMIRA PEN - PEDIATRIC UC STARTER PACK 80MG/0.8ML INJ	5	PA QL=4 EA/180 Days
HUMIRA PEN - PSORIASIS STARTER PACK 40MG/0.8ML	5	PA QL=4 EA/180 Days
HUMIRA PEN 80MG/0.8ML AND 40MG/0.4ML - PSORIASIS/UVEITIS STARTER PACK	5	NDS PA QL=3 EA/180 Days
HUMIRA PREFILLED SYRINGE 80MG/0.8ML STARTER PACK - PEDIATRIC CROHN'S DISEASE	5	NDS PA QL=3 EA/180 Days
SIMPONI 100MG/ML AUTO-INJECTOR	5	NDS PA QL=1 ML/28 Days
SIMPONI 100MG/ML SYRINGE	5	NDS PA QL=1 ML/28 Days
SIMPONI 50MG/0.5ML AUTO-INJECTOR	5	NDS PA QL=.50 ML/28 Days
SIMPONI 50MG/0.5ML SYRINGE	5	NDS PA QL=.50 ML/28 Days
GOLD COMPOUNDS		
RIDAURA 3MG CAP	3	
INTERLEUKIN-1 BLOCKERS		
ARCALYST 220MG INJ	5	NDS PA
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA 162MG/0.9ML AUTO-INJECTOR	5	NDS PA QL=3.60 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
ACTEMRA 162MG/0.9ML SYRINGE	5	NDS PA QL=3.60 ML/28 Days
KEVZARA 150MG/1.14ML AUTO-INJECTOR	5	NDS PA QL=2.28 ML/28 Days
KEVZARA 150MG/1.14ML SYRINGE	5	NDS PA QL=2.28 ML/28 Days
KEVZARA 200MG/1.14ML AUTO-INJECTOR	5	NDS PA QL=2.28 ML/28 Days
KEVZARA 200MG/1.14ML SYRINGE	5	NDS PA QL=2.28 ML/28 Days
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
<i>celecoxib 100mg cap</i>	2	
<i>celecoxib 200mg cap</i>	2	
<i>celecoxib 400mg cap</i>	2	
<i>celecoxib 50mg cap</i>	2	
<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>	2	
<i>diclofenac sodium/misoprostol 75-0.2mg dr tab</i>	2	
<i>etodolac 200mg cap</i>	2	
<i>etodolac 300mg cap</i>	2	
<i>etodolac 400mg tab</i>	2	
<i>etodolac 500mg tab</i>	2	
<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>	2	QL=20 EA/5 Days
<i>meloxicam 15mg tab</i>	1	
<i>meloxicam 7.5mg tab</i>	1	
<i>nabumetone 500mg tab</i>	2	
<i>nabumetone 750mg tab</i>	2	
<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	
<i>naproxen sodium 275mg tab</i>	1	
<i>naproxen sodium 550mg tab</i>	1	
<i>piroxicam 10mg cap</i>	2	
<i>piroxicam 20mg cap</i>	2	
<i>sulindac 150mg tab</i>	2	
<i>sulindac 200mg tab</i>	2	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA 28-DAY STARTER PACK	5	NDS PA QL=55 EA/28 Days
OTEZLA 30MG TAB	5	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
PYRIMIDINE SYNTHESIS INHIBITORS		
<i>leflunomide 10mg tab</i>	2	
<i>leflunomide 20mg tab</i>	2	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA 125MG/ML AUTO-INJECTOR	5	NDS PA QL=4 ML/28 Days
ORENCIA 125MG/ML SYRINGE	5	NDS PA QL=4 ML/28 Days
ORENCIA 50MG/0.4ML SYRINGE	5	NDS PA QL=1.60 ML/28 Days
ORENCIA 87.5MG/0.7ML SYRINGE	5	NDS PA QL=2.80 ML/28 Days
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL 25MG/0.5ML INJ	5	NDS PA QL=8 ML/28 Days
ENBREL 25MG/0.5ML SYRINGE	5	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML AUTO-INJECTOR	5	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML CARTRIDGE	5	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML SYRINGE	5	NDS PA QL=8 ML/28 Days
ANALGESICS - NONNARCOTIC		
SALICYLATES		
<i>diflunisal 500mg tab</i>	2	
ANALGESICS - OPIOID		
OPIOID AGONISTS		
CODEINE SULFATE 15MG TAB	3	QL=240 EA/30 Days
CODEINE SULFATE 30MG TAB	3	QL=240 EA/30 Days
CODEINE SULFATE 60MG TAB	3	QL=180 EA/30 Days
FENTANYL 100MCG BUCCAL TAB	4	PA QL=120 EA/30 Days
<i>fentanyl 100mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>fentanyl 1200mcg lozenge</i>	2	PA QL=120 EA/30 Days
<i>fentanyl 12mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>fentanyl 1600mcg lozenge</i>	2	PA QL=120 EA/30 Days
FENTANYL 200MCG BUCCAL TAB	4	PA QL=120 EA/30 Days
<i>fentanyl 200mcg lozenge</i>	2	PA QL=120 EA/30 Days
<i>fentanyl 25mcg/hr patch</i>	2	QL=10 EA/30 Days
FENTANYL 400MCG BUCCAL TAB	4	PA QL=120 EA/30 Days
<i>fentanyl 400mcg lozenge</i>	2	PA QL=120 EA/30 Days
<i>fentanyl 50mcg/hr patch</i>	2	QL=10 EA/30 Days
FENTANYL 600MCG BUCCAL TAB	4	PA QL=120 EA/30 Days
<i>fentanyl 600mcg lozenge</i>	2	PA QL=120 EA/30 Days
<i>fentanyl 75mcg/hr patch</i>	2	QL=10 EA/30 Days
FENTANYL 800MCG BUCCAL TAB	4	PA QL=120 EA/30 Days
<i>fentanyl 800mcg lozenge</i>	2	PA QL=120 EA/30 Days
FENTORA 100MCG BUCCAL TAB	4	PA QL=120 EA/30 Days
FENTORA 200MCG BUCCAL TAB	4	PA QL=120 EA/30 Days
FENTORA 400MCG BUCCAL TAB	4	PA QL=120 EA/30 Days
FENTORA 600MCG BUCCAL TAB	4	PA QL=120 EA/30 Days
FENTORA 800MCG BUCCAL TAB	4	PA QL=120 EA/30 Days
<i>hydromorphone 2mg tab</i>	2	QL=450 EA/30 Days
<i>hydromorphone 4mg tab</i>	2	QL=240 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>hydromorphone 8mg tab</i>	2	QL=120 EA/30 Days
<i>methadone 10mg tab</i>	2	QL=360 EA/30 Days
<i>methadone 5mg tab</i>	2	QL=360 EA/30 Days
<i>morphine sulfate 100mg er tab</i>	2	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	2	QL=120 EA/30 Days
MORPHINE SULFATE 15MG TAB	2	QL=180 EA/30 Days
<i>morphine sulfate 200mg er tab</i>	2	QL=120 EA/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	2	QL=180 ML/30 Days
<i>morphine sulfate 2mg/ml oral soln</i>	2	QL=1800 ML/30 Days
<i>morphine sulfate 30mg er tab</i>	2	QL=120 EA/30 Days
MORPHINE SULFATE 30MG TAB	2	QL=180 EA/30 Days
MORPHINE SULFATE 4MG/ML ORAL SOLN	2	QL=900 ML/30 Days
<i>morphine sulfate 60mg er tab</i>	2	QL=120 EA/30 Days
<i>oxycodone 10mg tab</i>	2	QL=180 EA/30 Days
<i>oxycodone 15mg tab</i>	2	QL=180 EA/30 Days
<i>oxycodone 1mg/ml oral soln</i>	2	QL=5400 ML/30 Days
<i>oxycodone 20mg tab</i>	2	QL=180 EA/30 Days
<i>oxycodone 20mg/ml oral soln</i>	2	QL=270 ML/30 Days
<i>oxycodone 30mg tab</i>	2	QL=180 EA/30 Days
<i>oxycodone 5mg tab</i>	2	QL=360 EA/30 Days
<i>tramadol 100mg er tab</i>	2	QL=30 EA/30 Days
TRAMADOL 100MG ER TAB (MATRIX DELIVERY)	2	QL=60 EA/30 Days
<i>tramadol 200mg er tab</i>	2	QL=30 EA/30 Days
TRAMADOL 200MG ER TAB (MATRIX DELIVERY)	2	QL=60 EA/30 Days
<i>tramadol 300mg er tab</i>	2	QL=30 EA/30 Days
TRAMADOL 300MG ER TAB (MATRIX DELIVERY)	2	QL=60 EA/30 Days
<i>tramadol 50mg tab</i>	2	QL=240 EA/30 Days
OPIOID COMBINATIONS		
<i>acetaminophen/codeine phosphate 24mg-2.4mg/ml oral soln</i>	2	QL=4980 ML/30 Days
<i>acetaminophen/codeine phosphate 300-15mg tab</i>	2	QL=390 EA/30 Days
<i>acetaminophen/codeine phosphate 300-30mg tab</i>	2	QL=390 EA/30 Days
<i>acetaminophen/codeine phosphate 300-60mg tab</i>	2	QL=390 EA/30 Days
<i>acetaminophen/hydrocodone bitartrate 21.7mg-0.5mg/ml oral soln</i>	2	QL=5400 ML/30 Days
<i>acetaminophen/hydrocodone bitartrate 325-10mg tab</i>	2	QL=360 EA/30 Days
<i>acetaminophen/hydrocodone bitartrate 325-5mg tab</i>	2	QL=360 EA/30 Days
<i>acetaminophen/hydrocodone bitartrate 325-7.5mg tab</i>	2	QL=360 EA/30 Days
<i>acetaminophen/oxycodone 325-10mg tab</i>	2	QL=360 EA/30 Days
<i>acetaminophen/oxycodone 325-2.5mg tab</i>	2	QL=360 EA/30 Days
<i>acetaminophen/oxycodone 325-5mg tab</i>	2	QL=360 EA/30 Days
<i>acetaminophen/oxycodone 325-7.5mg tab</i>	2	QL=360 EA/30 Days
<i>acetaminophen/tramadol 325-37.5mg tab</i>	2	QL=360 EA/30 Days
<i>endocet 325-10mg tab</i>	2	QL=360 EA/30 Days
<i>endocet 325-2.5mg tab</i>	2	QL=360 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>endocet 325-5mg tab</i>	2	QL=360 EA/30 Days
<i>endocet 325-7.5mg tab</i>	2	QL=360 EA/30 Days
OXYCODONE/ACETAMINOPHEN 5-325MG/5ML	3	QL=1800 ML/30 Days
OPIOID PARTIAL AGONISTS		
<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>	2	QL=60 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	2	QL=90 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	2	QL=90 EA/30 Days
<i>buprenorphine/naloxone 4-1mg sl film</i>	2	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl film</i>	2	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	2	QL=90 EA/30 Days
<i>butorphanol tartrate 1mg/act nasal inhaler</i>	2	QL=10 ML/30 Days
ZUBSOLV 1.4-0.36MG SL TAB	4	QL=90 EA/30 Days
ZUBSOLV 11.4-2.9MG SL TAB	4	QL=60 EA/30 Days
ZUBSOLV 2.9-0.71MG SL TAB	4	QL=90 EA/30 Days
ZUBSOLV 5.7-1.4MG SL TAB	4	QL=90 EA/30 Days
ZUBSOLV 8.6-2.1MG SL TAB	4	QL=60 EA/30 Days
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol 100mg cap</i>	2	
<i>danazol 200mg cap</i>	2	
<i>danazol 50mg cap</i>	2	
<i>testosterone 1% (12.5mg/act) gel pump</i>	2	PA QL=300 GM/30 Days
<i>testosterone 1% (25mg) gel packet</i>	2	PA QL=300 GM/30 Days
<i>testosterone 1% (50mg) gel packet</i>	2	PA QL=300 GM/30 Days
<i>testosterone 1.62% (1.25gm) gel packet</i>	2	PA QL=75 GM/30 Days
<i>testosterone 1.62% (2.5gm) gel packet</i>	2	PA QL=150 GM/30 Days
<i>testosterone 1.62% (20.25mg/act) gel pump</i>	2	PA QL=150 GM/30 Days
<i>testosterone 30mg/act topical soln</i>	2	PA QL=180 ML/30 Days
<i>testosterone cypionate 100mg/ml inj</i>	2	
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	2	
<i>testosterone cypionate 200mg/ml inj</i>	2	
TESTOSTERONE ENANTHATE 200MG/ML INJ	2	
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide 2mg/act rectal foam</i>	2	PA
<i>hydrocortisone 1.67mg/ml enema</i>	2	
UCERIS 2MG/ACT RECTAL FOAM	4	PA
RECTAL COMBINATIONS		
<i>hydrocortisone acetate/pramoxine 1-1% rectal cream</i>	2	
RECTAL STEROIDS		
<i>hydrocortisone 2.5% cream</i>	2	
<i>procto-med 2.5% cream</i>	2	
<i>proctosol 2.5% cream</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>proctozone hc 2.5% cream</i>	2	
VASODILATING AGENTS		
RECTIV 0.4% RECTAL OINTMENT	4	QL=30 GM/30 Days
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole 200mg tab</i>	2	
BENZNIDAZOLE 100MG TAB	3	
BENZNIDAZOLE 12.5MG TAB	3	
<i>ivermectin 3mg tab</i>	2	PA
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
<i>ranolazine 1000mg er tab</i>	2	
<i>ranolazine 500mg er tab</i>	2	
NITRATES		
<i>isosorbide dinitrate 10mg tab</i>	2	
<i>isosorbide dinitrate 20mg tab</i>	2	
<i>isosorbide dinitrate 30mg tab</i>	2	
<i>isosorbide dinitrate 5mg tab</i>	2	
<i>isosorbide mononitrate 10mg tab</i>	2	
<i>isosorbide mononitrate 120mg er tab</i>	2	
<i>isosorbide mononitrate 20mg tab</i>	2	
<i>isosorbide mononitrate 30mg er tab</i>	2	
<i>isosorbide mononitrate 60mg er tab</i>	2	
NITRO-BID 2% OINTMENT	3	
<i>nitroglycerin 0.1mg/hr patch</i>	2	
<i>nitroglycerin 0.2mg/hr patch</i>	2	
<i>nitroglycerin 0.3mg sl tab</i>	2	
<i>nitroglycerin 0.4mg sl tab</i>	2	
<i>nitroglycerin 0.4mg/act spray</i>	2	
<i>nitroglycerin 0.4mg/hr patch</i>	2	
<i>nitroglycerin 0.6mg sl tab</i>	2	
<i>nitroglycerin 0.6mg/hr patch</i>	2	
ANTIANGIETY AGENTS		
ANTIANGIETY AGENTS - MISC.		
<i>bupirone 10mg tab</i>	2	
<i>bupirone 15mg tab</i>	2	
<i>bupirone 30mg tab</i>	2	
<i>bupirone 5mg tab</i>	2	
<i>bupirone 7.5mg tab</i>	2	
<i>hydroxyzine 10mg tab</i>	2	
<i>hydroxyzine 25mg tab</i>	2	
<i>hydroxyzine 50mg tab</i>	2	
HYDROXYZINE PAMOATE 100MG CAP	2	
<i>hydroxyzine pamoate 25mg cap</i>	2	
<i>hydroxyzine pamoate 50mg cap</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BENZODIAZEPINES		
<i>alprazolam 0.25mg tab</i>	2	QL=120 EA/30 Days
<i>alprazolam 0.5mg tab</i>	2	QL=120 EA/30 Days
<i>alprazolam 1mg tab</i>	2	QL=120 EA/30 Days
<i>alprazolam 2mg tab</i>	2	QL=150 EA/30 Days
<i>chlordiazepoxide 10mg cap</i>	2	QL=120 EA/30 Days
<i>chlordiazepoxide 25mg cap</i>	2	QL=120 EA/30 Days
<i>chlordiazepoxide 5mg cap</i>	2	QL=120 EA/30 Days
<i>clorazepate dipotassium 15mg tab</i>	2	QL=180 EA/30 Days
<i>diazepam 10mg tab</i>	2	QL=120 EA/30 Days
<i>diazepam 1mg/ml oral soln</i>	2	QL=1200 ML/30 Days
<i>diazepam 2mg tab</i>	2	QL=120 EA/30 Days
<i>diazepam 5mg tab</i>	2	QL=120 EA/30 Days
<i>diazepam 5mg/ml oral soln</i>	2	QL=240 ML/30 Days
<i>lorazepam 0.5mg tab</i>	2	QL=150 EA/30 Days
<i>lorazepam 1mg tab</i>	2	QL=150 EA/30 Days
<i>lorazepam 2mg tab</i>	2	QL=150 EA/30 Days
<i>lorazepam 2mg/ml oral soln</i>	2	QL=150 ML/30 Days
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide 100mg cap</i>	2	PA
<i>disopyramide 150mg cap</i>	2	PA
<i>quinidine gluconate 324mg er tab</i>	2	
<i>quinidine sulfate 200mg tab</i>	2	
<i>quinidine sulfate 300mg tab</i>	2	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine 150mg cap</i>	3	
<i>mexiletine 200mg cap</i>	3	
<i>mexiletine 250mg cap</i>	3	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate 100mg tab</i>	2	
<i>flecainide acetate 150mg tab</i>	2	
<i>flecainide acetate 50mg tab</i>	2	
<i>propafenone 150mg tab</i>	2	
<i>propafenone 225mg er cap</i>	2	
<i>propafenone 225mg tab</i>	2	
<i>propafenone 300mg tab</i>	2	
<i>propafenone 325mg er cap</i>	2	
<i>propafenone 425mg er cap</i>	2	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone 200mg tab</i>	2	
<i>amiodarone 400mg tab</i>	2	
<i>dofetilide 0.125mg cap</i>	2	
<i>dofetilide 0.25mg cap</i>	2	
<i>dofetilide 0.5mg cap</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MULTAQ 400MG TAB	3	
<i>pacerone 200mg tab</i>	2	
<i>pacerone 400mg tab</i>	2	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA 30MG/ML AUTO-INJECTOR	5	PA
FASENRA 30MG/ML SYRINGE	5	PA
NUCALA 100MG INJ	5	NDS PA
NUCALA 100MG/ML AUTO-INJECTOR	5	NDS PA
NUCALA 100MG/ML SYRINGE	5	NDS PA
NUCALA 40MG/0.4ML SYRINGE	5	NDS PA
XOLAIR 150MG INJ	5	NDS PA
XOLAIR 150MG/ML SYRINGE	5	NDS PA
XOLAIR 75MG/0.5ML SYRINGE	5	NDS PA
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG INHALER	3	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH INHALER	3	
<i>ipratropium bromide 0.02% inh soln</i>	2	PA BvD
SPIRIVA RESPIMAT 1.25MCG/ACT INH	3	ST QL=4 GM/30 Days
LEUKOTRIENE MODULATORS		
<i>montelukast 10mg tab</i>	2	QL=30 EA/30 Days
<i>montelukast 4mg chew tab</i>	2	QL=30 EA/30 Days
<i>montelukast 4mg granules</i>	2	QL=30 EA/30 Days
<i>montelukast 5mg chew tab</i>	2	QL=30 EA/30 Days
<i>zafirlukast 10mg tab</i>	2	QL=60 EA/30 Days
<i>zafirlukast 20mg tab</i>	2	QL=60 EA/30 Days
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
<i>roflumilast 0.5mg tab</i>	2	
<i>roflumilast 250mcg tab</i>	2	
STEROID INHALANTS		
ARNUITY 100MCG INHALER	3	QL=30 EA/30 Days
ARNUITY 200MCG INHALER	3	QL=30 EA/30 Days
ARNUITY 50MCG INHALER	3	QL=30 EA/30 Days
ASMANEX 100MCG HFA INHALER	3	QL=13 GM/30 Days
ASMANEX 110MCG (30ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 200MCG HFA INHALER	3	QL=13 GM/30 Days
ASMANEX 220MCG (120ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 220MCG (30ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 220MCG (60ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 50MCG HFA INHALER	3	QL=13 GM/30 Days
<i>budesonide 0.125mg/ml inh susp</i>	2	PA BvD QL=120 ML/30 Days
<i>budesonide 0.25mg/ml inh susp</i>	2	PA BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/ml inh susp</i>	2	PA BvD QL=120 ML/30 Days
FLOVENT 100MCG DISKUS	3	QL=60 EA/30 Days
FLOVENT 110MCG HFA INHALER	3	QL=24 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
FLOVENT 220MCG HFA INHALER	3	QL=24 GM/30 Days
FLOVENT 250MCG DISKUS	3	QL=60 EA/30 Days
FLOVENT 44MCG HFA INHALER	3	QL=21.20 GM/30 Days
FLOVENT 50MCG DISKUS	3	QL=60 EA/30 Days
SYMPATHOMIMETICS		
ADVAIR 100-50MCG DISKUS	2	QL=60 EA/30 Days
ADVAIR 115-21MCG HFA INHALER	3	QL=12 GM/30 Days
ADVAIR 230-21MCG HFA INHALER	3	QL=12 GM/30 Days
ADVAIR 250-50MCG DISKUS	2	QL=60 EA/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER	3	QL=12 GM/30 Days
ADVAIR 500-50MCG DISKUS	2	QL=60 EA/30 Days
<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	2	PA BvD
<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	2	
<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	2	PA BvD
<i>albuterol 1.25mg/3ml neb soln</i>	2	PA BvD
<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	2	QL=13.40 GM/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	2	QL=17 GM/30 Days
<i>albuterol 2mg tab</i>	2	
<i>albuterol 4mg tab</i>	2	
<i>albuterol 5mg/ml inh soln</i>	2	PA BvD
ANORO ELLIPTA 62.5-25MCG INHALER	3	QL=60 EA/30 Days
BREO ELLIPTA 100-25MCG INHALER	3	QL=60 EA/30 Days
BREO ELLIPTA 200-25MCG INHALER	3	QL=60 EA/30 Days
BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	3	QL=10.70 GM/30 Days
COMBIVENT 20-100MCG/ACT INH	3	QL=6 GM/30 Days
DULERA 100-5MCG INHALER	3	QL=13 GM/30 Days
DULERA 200-5MCG INHALER	3	QL=13 GM/30 Days
DULERA 50-5MCG INHALER	3	QL=13 GM/30 Days
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	2	PA BvD
<i>levalbuterol 0.31mg/3ml neb soln</i>	2	PA BvD
<i>levalbuterol 0.63mg/3ml inh soln</i>	2	PA BvD
<i>levalbuterol 1.25mg/0.5ml neb soln</i>	2	PA BvD
<i>levalbuterol 1.25mg/3ml neb soln</i>	2	PA BvD
LEVALBUTEROL 45MCG INHALER	4	ST QL=30 GM/30 Days
SEREVENT 50MCG/DOSE INHALER	3	
STIOLTO 2.5-2.5MCG/ACT INH	3	QL=4 GM/30 Days
SYMBICORT 160-4.5MCG INHALER	3	QL=10.20 GM/30 Days
SYMBICORT 80-4.5MCG INHALER	3	QL=10.20 GM/30 Days
<i>terbutaline sulfate 2.5mg tab</i>	2	
<i>terbutaline sulfate 5mg tab</i>	2	
TRELEGY ELLIPTA 100-62.5-25MCG INHALER	3	QL=60 EA/30 Days
TRELEGY ELLIPTA 200-62.5-25MCG INHALER	3	QL=60 EA/30 Days
VENTOLIN 108MCG HFA INHALER	3	QL=36 GM/30 Days
XOPENEX 45MCG INHALER	4	ST QL=30 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
XANTHINES		
THEOPHYLLINE 300MG ER TAB	3	
<i>theophylline 400mg er tab</i>	2	
THEOPHYLLINE 450MG ER TAB	3	
<i>theophylline 5.33mg/ml oral soln</i>	2	
<i>theophylline 600mg er tab</i>	2	
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	3	
ELIQUIS 5MG 30-DAY STARTER PACK	3	
ELIQUIS 5MG TAB	3	
XARELTO 10MG TAB	3	
XARELTO 15MG TAB	3	
XARELTO 1MG/ML SUSP	3	
XARELTO 2.5MG TAB	3	
XARELTO 20MG TAB	3	
XARELTO TAB STARTER PACK	3	
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>enoxaparin sodium 100mg/1ml syringe</i>	2	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	2	
<i>enoxaparin sodium 150mg/1ml syringe</i>	2	
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	2	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	2	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	2	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	2	
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	2	
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	2	
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	2	
FRAGMIN 10000UNIT/ML SYRINGE	4	
FRAGMIN 12500UNIT/0.5ML SYRINGE	4	
FRAGMIN 15000UNIT/0.6ML SYRINGE	4	
FRAGMIN 18000UNT/0.72ML SYRINGE	4	
FRAGMIN 2500UNIT/0.2ML SYRINGE	4	
FRAGMIN 5000UNIT/0.2ML SYRINGE	4	
FRAGMIN 7500UNIT/0.3ML SYRINGE	4	
FRAGMIN 95000UNIT/3.8ML INJ	4	
<i>heparin sodium porcine 10000unit/ml inj</i>	2	
<i>heparin sodium porcine 1000unit/ml inj</i>	2	
<i>heparin sodium porcine 20000unit/ml inj</i>	2	
<i>heparin sodium porcine 5000unit/ml inj</i>	2	
ANTICONVULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA 0.5MG/ML SUSP	4	PA NSO
FYCOMPA 10MG TAB	4	PA NSO
FYCOMPA 12MG TAB	4	PA NSO
FYCOMPA 2MG TAB	4	PA NSO
FYCOMPA 4MG TAB	4	PA NSO
FYCOMPA 6MG TAB	4	PA NSO
FYCOMPA 8MG TAB	4	PA NSO
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	2	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml susp</i>	2	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	2	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 0.5mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	2	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 1mg tab</i>	2	QL=90 EA/30 Days
<i>clonazepam 2mg odt</i>	2	QL=300 EA/30 Days
<i>clonazepam 2mg tab</i>	2	QL=300 EA/30 Days
DIASTAT 10MG RECTAL GEL	3	QL=10 EA/30 Days
DIASTAT 2.5MG RECTAL GEL	3	QL=10 EA/30 Days
DIASTAT 20MG RECTAL GEL	3	QL=10 EA/30 Days
DIAZEPAM 10MG/2ML RECTAL GEL	3	QL=10 EA/30 Days
DIAZEPAM 2.5MG/0.5ML RECTAL GEL	3	QL=10 EA/30 Days
DIAZEPAM 20MG/4ML RECTAL GEL	3	QL=10 EA/30 Days
NAYZILAM 5MG/0.1ML NASAL SPRAY	4	QL=10 EA/30 Days
SYMPAZAN 10MG ORAL FILM	4	ST__NSO QL=60 EA/30 Days
SYMPAZAN 20MG ORAL FILM	4	ST__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
SYMPAZAN 5MG ORAL FILM	4	ST_NSO QL=60 EA/30 Days
VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	4	QL=10 EA/30 Days
VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK	4	QL=10 EA/30 Days
VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	4	QL=10 EA/30 Days
VALTOCO 5MG (5MG/0.1ML) NASAL SPARY DOSE PACK	4	QL=10 EA/30 Days
ANTICONVULSANTS - MISC.		
APTIOM 200MG TAB	4	PA NSO
APTIOM 400MG TAB	4	PA NSO
APTIOM 600MG TAB	4	PA NSO
APTIOM 800MG TAB	4	PA NSO
BRIVIACT 100MG TAB	4	PA NSO QL=60 EA/30 Days
BRIVIACT 10MG TAB	4	PA NSO QL=60 EA/30 Days
BRIVIACT 10MG/ML ORAL SOLN	4	PA NSO
BRIVIACT 25MG TAB	4	PA NSO QL=60 EA/30 Days
BRIVIACT 50MG TAB	4	PA NSO QL=60 EA/30 Days
BRIVIACT 75MG TAB	4	PA NSO QL=60 EA/30 Days
<i>carbamazepine 100mg chew tab</i>	2	
<i>carbamazepine 100mg er cap</i>	2	
<i>carbamazepine 100mg er tab</i>	2	
<i>carbamazepine 200mg er cap</i>	2	
<i>carbamazepine 200mg er tab</i>	2	
<i>carbamazepine 200mg tab</i>	2	
<i>carbamazepine 20mg/ml susp</i>	2	
<i>carbamazepine 300mg er cap</i>	2	
<i>carbamazepine 400mg er tab</i>	2	
DIACOMIT 250MG CAP	5	NDS PA NSO
DIACOMIT 250MG POWDER FOR ORAL SUSP	5	NDS PA NSO
DIACOMIT 500MG CAP	5	NDS PA NSO
DIACOMIT 500MG POWDER FOR ORAL SUSP	5	NDS PA NSO
EPIDIOLEX 100MG/ML ORAL SOLN	3	PA NSO
<i>epitol 200mg tab</i>	2	
EPRONTIA 25MG/ML ORAL SOLN	4	
FINTEPLA 2.2MG/ML ORAL SOLN	5	NDS PA NSO QL=360 ML/30 Days
<i>gabapentin 100mg cap</i>	2	QL=1080 EA/30 Days
<i>gabapentin 300mg cap</i>	2	QL=360 EA/30 Days
<i>gabapentin 400mg cap</i>	2	QL=270 EA/30 Days
<i>gabapentin 50mg/ml oral soln</i>	2	QL=2160 ML/30 Days
<i>gabapentin 600mg tab</i>	2	QL=180 EA/30 Days
<i>gabapentin 800mg tab</i>	2	QL=135 EA/30 Days
<i>lacosamide 100mg tab</i>	2	
<i>lacosamide 10mg/ml oral soln</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lacosamide 150mg tab</i>	2	
<i>lacosamide 200mg tab</i>	2	
<i>lacosamide 50mg tab</i>	2	
<i>lamotrigine 100mg er tab</i>	2	
<i>lamotrigine 100mg odt</i>	2	
<i>lamotrigine 100mg tab</i>	2	
<i>lamotrigine 150mg tab</i>	2	
<i>lamotrigine 200mg er tab</i>	2	
<i>lamotrigine 200mg odt</i>	2	
<i>lamotrigine 200mg tab</i>	2	
<i>lamotrigine 250mg er tab</i>	2	
<i>lamotrigine 25mg chew tab</i>	2	
<i>lamotrigine 25mg er tab</i>	2	
<i>lamotrigine 25mg odt</i>	2	
<i>lamotrigine 25mg tab</i>	2	
<i>lamotrigine 300mg er tab</i>	2	
<i>lamotrigine 50mg er tab</i>	2	
<i>lamotrigine 50mg odt</i>	2	
<i>lamotrigine 5mg chew tab</i>	2	
<i>levetiracetam 1000mg tab</i>	2	
<i>levetiracetam 100mg/ml oral soln</i>	2	
<i>levetiracetam 250mg tab</i>	2	
<i>levetiracetam 500mg er tab</i>	2	
<i>levetiracetam 500mg tab</i>	2	
<i>levetiracetam 750mg er tab</i>	2	
<i>levetiracetam 750mg tab</i>	2	
<i>oxcarbazepine 150mg tab</i>	2	
<i>oxcarbazepine 300mg tab</i>	2	
<i>oxcarbazepine 600mg tab</i>	2	
<i>oxcarbazepine 60mg/ml susp</i>	2	
<i>pregabalin 100mg cap</i>	2	QL=90 EA/30 Days
<i>pregabalin 150mg cap</i>	2	QL=90 EA/30 Days
<i>pregabalin 200mg cap</i>	2	QL=90 EA/30 Days
<i>pregabalin 20mg/ml oral soln</i>	2	
<i>pregabalin 225mg cap</i>	2	QL=60 EA/30 Days
<i>pregabalin 25mg cap</i>	2	QL=90 EA/30 Days
<i>pregabalin 300mg cap</i>	2	QL=60 EA/30 Days
<i>pregabalin 50mg cap</i>	2	QL=90 EA/30 Days
<i>pregabalin 75mg cap</i>	2	QL=90 EA/30 Days
<i>primidone 250mg tab</i>	2	
<i>primidone 50mg tab</i>	2	
<i>roweepra 500mg tab</i>	2	
<i>rufinamide 200mg tab</i>	2	PA NSO
<i>rufinamide 400mg tab</i>	2	PA NSO
<i>rufinamide 40mg/ml susp</i>	2	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
SPRITAM 1000MG TAB FOR ORAL SUSP	4	PA NSO
SPRITAM 250MG TAB FOR ORAL SUSP	4	PA NSO
SPRITAM 500MG TAB FOR ORAL SUSP	4	PA NSO
SPRITAM 750MG TAB FOR ORAL SUSP	4	PA NSO
<i>subvenite 100mg tab</i>	2	
<i>subvenite 150mg tab</i>	2	
<i>subvenite 200mg tab</i>	2	
<i>subvenite 25mg tab</i>	2	
<i>topiramate 100mg tab</i>	2	
<i>topiramate 15mg cap</i>	2	
<i>topiramate 200mg tab</i>	2	
<i>topiramate 25mg cap</i>	2	
<i>topiramate 25mg tab</i>	2	
<i>topiramate 50mg tab</i>	2	
ZONISADE 100MG/5ML SUSP	4	PA NSO
<i>zonisamide 100mg cap</i>	2	
<i>zonisamide 25mg cap</i>	2	
<i>zonisamide 50mg cap</i>	2	
ZTALMY 50MG/ML SUSP	5	NDS PA NSO QL=1100 ML/30 Days
CARBAMATES		
<i>felbamate 120mg/ml susp</i>	2	
<i>felbamate 400mg tab</i>	2	
<i>felbamate 600mg tab</i>	2	
XCOPRI 100MG TAB	3	
XCOPRI 12.5/25MG TITRATION PACK	3	
XCOPRI 150/200MG PACK TAB	3	
XCOPRI 150/200MG TITRATION PACK	3	
XCOPRI 150MG TAB	3	
XCOPRI 200MG TAB	3	
XCOPRI 50/100MG TITRATION PACK	3	
XCOPRI 50MG TAB	3	
XCOPRI TAB 100/150MG MAINTENANCE PACK	3	
GABA MODULATORS		
<i>tiagabine 12mg tab</i>	2	
<i>tiagabine 16mg tab</i>	2	
<i>tiagabine 2mg tab</i>	2	
<i>tiagabine 4mg tab</i>	2	
<i>vigabatrin 500mg powder for oral soln</i>	5	NDS PA NSO
<i>vigabatrin 500mg tab</i>	5	NDS PA NSO
<i>vigadrone 500mg powder for oral soln</i>	5	NDS PA NSO
HYDANTOINS		
DILANTIN 30MG ER CAP	3	
<i>phenytoin 25mg/ml susp</i>	2	
<i>phenytoin 50mg chew tab</i>	2	
<i>phenytoin sodium 100mg er cap</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>phenytoin sodium 200mg er cap</i>	2	
<i>phenytoin sodium 300mg er cap</i>	2	
SUCCINIMIDES		
CELONTIN 300MG CAP	3	
<i>ethosuximide 250mg cap</i>	2	
<i>ethosuximide 50mg/ml oral soln</i>	2	
<i>methsuximide 300mg cap</i>	2	
VALPROIC ACID		
<i>divalproex sodium 125mg dr cap</i>	2	
<i>divalproex sodium 125mg dr tab</i>	2	
<i>divalproex sodium 250mg dr tab</i>	2	
<i>divalproex sodium 250mg er tab</i>	2	
<i>divalproex sodium 500mg dr tab</i>	2	
<i>divalproex sodium 500mg er tab</i>	2	
<i>valproic acid 250mg cap</i>	2	
<i>valproic acid 50mg/ml oral soln</i>	2	
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	4	ST_NSO QL=60 EA/30 Days
ANTIDEPRESSANTS - MISC.		
<i>bupropion 100mg er tab</i>	2	
<i>bupropion 100mg tab</i>	2	
<i>bupropion 150mg sr (12 hr) tab</i>	2	
<i>bupropion 150mg xl (24 hr) tab</i>	2	
<i>bupropion 200mg er tab</i>	2	
<i>bupropion 300mg er tab</i>	2	
<i>bupropion 75mg tab</i>	2	
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM 12MG/24HR PATCH	4	ST_NSO QL=30 EA/30 Days
EMSAM 6MG/24HR PATCH	4	ST_NSO QL=30 EA/30 Days
EMSAM 9MG/24HR PATCH	4	ST_NSO QL=30 EA/30 Days
MARPLAN 10MG TAB	3	
<i>phenelzine 15mg tab</i>	2	
<i>tranylcypromine 10mg tab</i>	2	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram 10mg tab</i>	1	
<i>citalopram 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>citalopram 2mg/ml oral soln</i>	2	
<i>citalopram 40mg tab</i>	1	
<i>escitalopram 10mg tab</i>	2	
<i>escitalopram 1mg/ml oral soln</i>	2	
<i>escitalopram 20mg tab</i>	2	
<i>escitalopram 5mg tab</i>	2	
<i>fluoxetine 10mg cap</i>	2	
<i>fluoxetine 20mg cap</i>	2	
<i>fluoxetine 40mg cap</i>	2	
<i>fluoxetine 4mg/ml oral soln</i>	2	
<i>fluoxetine 60mg tab</i>	2	
<i>fluvoxamine maleate 100mg tab</i>	2	
<i>fluvoxamine maleate 25mg tab</i>	2	
<i>fluvoxamine maleate 50mg tab</i>	2	
<i>paroxetine 10mg tab</i>	1	PA NSO
<i>paroxetine 12.5mg er tab</i>	2	PA NSO
<i>paroxetine 20mg tab</i>	1	PA NSO
<i>paroxetine 25mg er tab</i>	2	PA NSO
<i>paroxetine 2mg/ml susp</i>	2	PA NSO
<i>paroxetine 30mg tab</i>	1	PA NSO
<i>paroxetine 37.5mg er tab</i>	2	PA NSO
<i>paroxetine 40mg tab</i>	1	PA NSO
<i>sertraline 100mg tab</i>	1	
<i>sertraline 20mg/ml oral soln</i>	2	
<i>sertraline 25mg tab</i>	1	
<i>sertraline 50mg tab</i>	1	
SEROTONIN MODULATORS		
NEFAZODONE 100MG TAB	4	
NEFAZODONE 150MG TAB	4	
NEFAZODONE 200MG TAB	4	
NEFAZODONE 250MG TAB	4	
NEFAZODONE 50MG TAB	4	
<i>trazodone 100mg tab</i>	1	
<i>trazodone 150mg tab</i>	1	
<i>trazodone 50mg tab</i>	1	
TRINTELLIX 10MG TAB	3	ST NSO QL=30 EA/30 Days
TRINTELLIX 20MG TAB	3	ST NSO QL=30 EA/30 Days
TRINTELLIX 5MG TAB	3	ST NSO QL=30 EA/30 Days
VIIBRYD 10/20MG STARTER PACK	4	ST NSO QL=30 EA/30 Days
<i>vilazodone 10mg tab</i>	2	ST NSO QL=30 EA/30 Days
<i>vilazodone 20mg tab</i>	2	ST NSO QL=30 EA/30 Days
<i>vilazodone 40mg tab</i>	2	ST NSO QL=30 EA/30 Days
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<i>desvenlafaxine succinate 100mg er tab</i>	2	
<i>desvenlafaxine succinate 25mg er tab</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>desvenlafaxine succinate 50mg er tab</i>	2	
<i>duloxetine 20mg dr cap</i>	2	
<i>duloxetine 30mg dr cap</i>	2	
<i>duloxetine 60mg dr cap</i>	2	
FETZIMA 120MG ER CAP	4	ST_NSO QL=30 EA/30 Days
FETZIMA 20MG ER CAP	4	ST_NSO QL=30 EA/30 Days
FETZIMA 40MG ER CAP	4	ST_NSO QL=30 EA/30 Days
FETZIMA 80MG ER CAP	4	ST_NSO QL=30 EA/30 Days
FETZIMA PACK	4	ST_NSO QL=30 EA/30 Days
<i>venlafaxine 100mg tab</i>	2	
<i>venlafaxine 150mg er cap</i>	2	
<i>venlafaxine 25mg tab</i>	2	
<i>venlafaxine 37.5mg er cap</i>	2	
<i>venlafaxine 37.5mg tab</i>	2	
<i>venlafaxine 50mg tab</i>	2	
<i>venlafaxine 75mg er cap</i>	2	
<i>venlafaxine 75mg tab</i>	2	
TRICYCLIC AGENTS		
<i>amitriptyline 100mg tab</i>	2	PA NSO
<i>amitriptyline 10mg tab</i>	2	PA NSO
<i>amitriptyline 150mg tab</i>	2	PA NSO
<i>amitriptyline 25mg tab</i>	2	PA NSO
<i>amitriptyline 50mg tab</i>	2	PA NSO
<i>amitriptyline 75mg tab</i>	2	PA NSO
AMOXAPINE 100MG TAB	2	PA NSO
AMOXAPINE 150MG TAB	2	PA NSO
AMOXAPINE 25MG TAB	2	PA NSO
AMOXAPINE 50MG TAB	2	PA NSO
<i>clomipramine 25mg cap</i>	2	PA NSO
<i>clomipramine 50mg cap</i>	2	PA NSO
<i>clomipramine 75mg cap</i>	2	PA NSO
<i>desipramine 100mg tab</i>	2	PA NSO
<i>desipramine 10mg tab</i>	2	PA NSO
<i>desipramine 150mg tab</i>	2	PA NSO
<i>desipramine 25mg tab</i>	2	PA NSO
<i>desipramine 50mg tab</i>	2	PA NSO
<i>desipramine 75mg tab</i>	2	PA NSO
<i>doxepin 100mg cap</i>	2	PA NSO
<i>doxepin 10mg cap</i>	2	PA NSO
<i>doxepin 10mg/ml oral soln</i>	2	PA NSO
<i>doxepin 150mg cap</i>	2	PA NSO
<i>doxepin 25mg cap</i>	2	PA NSO
<i>doxepin 50mg cap</i>	2	PA NSO
<i>doxepin 75mg cap</i>	2	PA NSO
<i>imipramine 10mg tab</i>	2	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
<i>imipramine 25mg tab</i>	2	PA NSO
<i>imipramine 50mg tab</i>	2	PA NSO
<i>nortriptyline 10mg cap</i>	2	
<i>nortriptyline 25mg cap</i>	2	
NORTRIPTYLINE 2MG/ML ORAL SOLN	3	
<i>nortriptyline 50mg cap</i>	2	
<i>nortriptyline 75mg cap</i>	2	
<i>protriptyline 10mg tab</i>	2	PA NSO
<i>protriptyline 5mg tab</i>	2	PA NSO
<i>trimipramine 100mg cap</i>	2	PA NSO
<i>trimipramine 25mg cap</i>	2	PA NSO
<i>trimipramine 50mg cap</i>	2	PA NSO
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose 100mg tab</i>	2	
<i>acarbose 25mg tab</i>	2	
<i>acarbose 50mg tab</i>	2	
<i>miglitol 100mg tab</i>	2	
<i>miglitol 25mg tab</i>	2	
<i>miglitol 50mg tab</i>	2	
ANTIDIABETIC COMBINATIONS		
ALOGLIPTIN/METFORMIN 12.5-1000MG TAB	3	QL=60 EA/30 Days
ALOGLIPTIN/METFORMIN 12.5-500MG TAB	3	QL=60 EA/30 Days
ALOGLIPTIN/PIOGLITAZONE 12.5-30MG TAB	3	QL=30 EA/30 Days
ALOGLIPTIN/PIOGLITAZONE 25-15MG TAB	3	QL=30 EA/30 Days
ALOGLIPTIN/PIOGLITAZONE 25-30MG TAB	3	QL=30 EA/30 Days
ALOGLIPTIN/PIOGLITAZONE 25-45MG TAB	3	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	
<i>glyburide/metformin 1.25-250mg tab</i>	1	
<i>glyburide/metformin 2.5-500mg tab</i>	1	
<i>glyburide/metformin 5-500mg tab</i>	1	
JANUMET 1000-50MG TAB	3	QL=60 EA/30 Days
JANUMET 500-50MG TAB	3	QL=60 EA/30 Days
JANUMET XR 1000-100MG TAB	3	QL=30 EA/30 Days
JANUMET XR 1000-50MG TAB	3	QL=60 EA/30 Days
JANUMET XR 500-50MG TAB	3	QL=60 EA/30 Days
SEGLUROMET 2.5-1000MG TAB	3	QL=60 EA/30 Days
SEGLUROMET 2.5-500MG TAB	3	QL=120 EA/30 Days
SEGLUROMET 7.5-1000MG TAB	3	QL=60 EA/30 Days
SEGLUROMET 7.5-500MG TAB	3	QL=60 EA/30 Days
SYNJARDY 12.5-1000MG TAB	3	QL=60 EA/30 Days
SYNJARDY 12.5-500MG TAB	3	QL=60 EA/30 Days
SYNJARDY 5-1000MG TAB	3	QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SYNJARDY 5-500MG TAB	3	QL=60 EA/30 Days
SYNJARDY XR 10-1000MG TAB	3	QL=30 EA/30 Days
SYNJARDY XR 12.5-1000MG TAB	3	QL=60 EA/30 Days
SYNJARDY XR 25-1000MG TAB	3	QL=30 EA/30 Days
SYNJARDY XR 5-1000MG TAB	3	QL=60 EA/30 Days
XIGDUO XR 10-1000MG TAB	3	QL=30 EA/30 Days
XIGDUO XR 10-500MG TAB	3	QL=30 EA/30 Days
XIGDUO XR 2.5-1000MG TAB	3	QL=60 EA/30 Days
XIGDUO XR 5-1000MG TAB	3	QL=60 EA/30 Days
XIGDUO XR 5-500MG TAB	3	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	
<i>metformin 750mg er tab</i>	1	
<i>metformin 850mg tab</i>	1	
DIABETIC OTHER		
BAQSIMI 3MG/DOSE NASAL POWDER	3	QL=2 EA/7 Days
<i>diazoxide 50mg/ml susp</i>	2	
GLUCAGEN 1MG INJ	3	QL=2 EA/7 Days
GLUCAGON (RDNA) 1MG INJ	3	QL=2 EA/7 Days
GVOKE 0.5MG/0.1ML AUTO-INJECTOR	3	QL=.20 ML/7 Days
GVOKE 0.5MG/0.1ML SYRINGE	3	QL=.20 ML/7 Days
GVOKE 1MG/0.2ML AUTO-INJECTOR	3	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML INJ	3	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML SYRINGE	3	QL=.40 ML/7 Days
KORLYM 300MG TAB	5	NDS PA QL=120 EA/30 Days
ZEGALOGUE 0.6MG/0.6ML AUTO-INJECTOR	3	QL=1.20 ML/7 Days
ZEGALOGUE 0.6MG/0.6ML SYRINGE	3	QL=1.20 ML/7 Days
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
ALOGLIPTIN 12.5MG TAB	3	QL=30 EA/30 Days
ALOGLIPTIN 25MG TAB	3	QL=30 EA/30 Days
ALOGLIPTIN 6.25MG TAB	3	QL=30 EA/30 Days
JANUVIA 100MG TAB	3	QL=30 EA/30 Days
JANUVIA 25MG TAB	3	QL=30 EA/30 Days
JANUVIA 50MG TAB	3	QL=30 EA/30 Days
INCRETIN MIMETIC AGENTS		
OZEMPIC 2MG/3ML PEN INJ	3	QL=3 ML/28 Days
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
BYDUREON 2MG/0.85ML AUTO-INJECTOR	3	QL=3.40 ML/28 Days
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	4	PA QL=2 ML/28 Days
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	4	PA QL=2 ML/28 Days
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	4	PA QL=2 ML/28 Days
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	4	PA QL=2 ML/28 Days
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	4	PA QL=2 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
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	4	PA QL=2 ML/28 Days
OZEMPIC 2.68MG/ML PEN INJ	3	QL=3 ML/28 Days
OZEMPIC 4MG/3ML PEN INJ	3	QL=3 ML/28 Days
RYBELSUS 14MG TAB	3	QL=30 EA/30 Days
RYBELSUS 3MG TAB	3	QL=30 EA/30 Days
RYBELSUS 7MG TAB	3	QL=30 EA/30 Days
TRULICITY 0.75MG/0.5ML AUTO-INJECTOR	3	QL=2 ML/28 Days
TRULICITY 1.5MG/0.5ML AUTO-INJECTOR	3	QL=2 ML/28 Days
TRULICITY 3MG/0.5ML AUTO-INJECTOR	3	QL=2 ML/28 Days
TRULICITY 4.5MG/0.5ML AUTO-INJECTOR	3	QL=2 ML/28 Days
VICTOZA 18MG/3ML PEN INJ	3	QL=9 ML/30 Days
INSULIN		
FIASP 100UNIT/ML CARTRIDGE	3	INS
FIASP 100UNIT/ML INJ	3	INS PA BvD
FIASP 100UNIT/ML PEN INJ	3	INS
HUMULIN R 500UNIT/ML INJ	3	INS PA BvD
HUMULIN R 500UNIT/ML PEN INJ	3	INS
INSULIN ASPART HUMAN 100UNIT/ML CARTRIDGE	3	INS
INSULIN ASPART HUMAN 100UNIT/ML INJ	3	INS PA BvD
INSULIN ASPART HUMAN 100UNIT/ML PEN INJ	3	INS
INSULIN ASPART MIX 70UNIT-30UNIT/ML INJ	3	INS
INSULIN ASPART MIX 70UNIT-30UNIT/ML PEN INJ	3	INS
LANTUS 100UNIT/ML INJ	3	INS
LANTUS 100UNIT/ML PEN INJ	3	INS
LEVEMIR 100UNIT/ML INJ	3	INS
LEVEMIR 100UNIT/ML PEN INJ	3	INS
NOVOLIN MIX (70/30) 100UNIT/ML INJ	3	INS
NOVOLIN MIX (70/30) FLEXPEN 100UNIT/ML	3	INS
NOVOLIN N 100UNIT/ML INJ	3	INS
NOVOLIN N 100UNIT/ML PEN INJ	3	INS
NOVOLIN R 100UNIT/ML INJ	3	INS
NOVOLIN R 100UNIT/ML PEN INJ	3	INS
NOVOLOG 100UNIT/ML CARTRIDGE	3	INS
NOVOLOG 100UNIT/ML INJ	3	INS PA BvD
NOVOLOG 100UNIT/ML PEN INJ	3	INS
NOVOLOG MIX (70/30) 100UNIT/ML FLEXPEN	3	INS
NOVOLOG MIX (70/30) 100UNIT/ML INJ	3	INS
TOUJEO 300UNIT/ML PEN INJ	3	INS
TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	3	INS
TRESIBA 100UNIT/ML INJ	3	INS
TRESIBA 100UNIT/ML PEN INJ	3	INS
TRESIBA 200UNIT/ML PEN INJ	3	INS
INSULIN SENSITIZING AGENTS		
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	3	QL=30 EA/30 Days
FARXIGA 5MG TAB	3	QL=30 EA/30 Days
JARDIANCE 10MG TAB	3	QL=30 EA/30 Days
JARDIANCE 25MG TAB	3	QL=30 EA/30 Days
SULFONYLUREAS		
<i>glimepiride 1mg tab</i>	1	
<i>glimepiride 2mg tab</i>	1	
<i>glimepiride 4mg tab</i>	1	
<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>	2	
ATROPINE SULFATE/DIPHENOXYLATE 0.025-2.5MG/5ML ORAL SOLN	2	
<i>loperamide 2mg cap</i>	2	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
<i>deferasirox 125mg tab for oral susp</i>	2	
<i>deferasirox 180mg granules</i>	2	
<i>deferasirox 180mg tab</i>	2	
<i>deferasirox 250mg tab for oral susp</i>	2	
<i>deferasirox 360mg granules</i>	2	
<i>deferasirox 360mg tab</i>	2	
<i>deferasirox 500mg tab for oral susp</i>	2	
<i>deferasirox 90mg granules</i>	2	
<i>deferasirox 90mg tab</i>	2	
<i>deferiprone 1000mg tab</i>	5	NDS PA
<i>deferiprone 500mg tab</i>	5	NDS PA
FERRIPROX 1000MG TAB	5	NDS PA
FERRIPROX 100MG/ML ORAL SOLN	5	NDS PA
OPIOID ANTAGONISTS		
KLOXXADO 8MG/0.1ML NASAL SPRAY	2	
NALOXONE 0.4MG/ML CARTRIDGE	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>naloxone 0.4mg/ml inj</i>	2	
<i>naloxone 1mg/ml syringe</i>	2	
<i>naloxone 40mg/ml nasal spray</i>	2	
<i>naltrexone 50mg tab</i>	1	
ZIMHI 5MG/0.5ML SYRINGE	2	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
ANZEMET 50MG TAB	4	PA BvD
<i>granisetron 1mg tab</i>	2	PA BvD QL=60 EA/30 Days
<i>ondansetron 0.8mg/ml oral soln</i>	2	PA BvD
<i>ondansetron 4mg odt</i>	2	PA BvD
<i>ondansetron 4mg tab</i>	2	PA BvD
<i>ondansetron 8mg odt</i>	2	PA BvD
<i>ondansetron 8mg tab</i>	2	PA BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab</i>	2	
<i>meclizine 25mg tab</i>	2	
<i>scopolamine 1mg/72hr patch</i>	2	
ANTIEMETICS - MISCELLANEOUS		
<i>dronabinol 10mg cap</i>	2	PA QL=60 EA/30 Days
<i>dronabinol 2.5mg cap</i>	2	PA QL=60 EA/30 Days
<i>dronabinol 5mg cap</i>	2	PA QL=60 EA/30 Days
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
<i>aprepitant 125mg cap</i>	2	PA BvD QL=3 EA/2 Days
<i>aprepitant 125mg/aprepitant 80mg cap therapy pack</i>	2	PA BvD QL=6 EA/4 Days
<i>aprepitant 40mg cap</i>	2	PA BvD QL=3 EA/2 Days
<i>aprepitant 80mg cap</i>	2	PA BvD QL=6 EA/4 Days
VARUBI 90MG TAB	4	PA BvD QL=4 EA/28 Days
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
<i>casprofungin acetate 50mg inj</i>	5	NDS PA
<i>casprofungin acetate 70mg inj</i>	2	PA
<i>micafungin sodium 100mg inj</i>	2	
<i>micafungin sodium 50mg inj</i>	2	
ANTIFUNGALS		
ABELCET 5MG/ML INJ	4	PA BvD
AMPHOTERICIN B 50MG INJ	4	PA BvD
<i>flucytosine 250mg cap</i>	2	
<i>flucytosine 500mg cap</i>	2	
<i>griseofulvin 125mg tab</i>	2	
<i>griseofulvin 250mg tab</i>	2	
<i>griseofulvin 25mg/ml susp</i>	2	
<i>griseofulvin 500mg tab</i>	2	
<i>nystatin 500000unit tab</i>	2	
<i>terbinafine 250mg tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
IMIDAZOLE-RELATED ANTIFUNGALS		
<i>fluconazole 100mg tab</i>	2	
<i>fluconazole 10mg/ml susp</i>	2	
<i>fluconazole 150mg tab</i>	2	
<i>fluconazole 200mg tab</i>	2	
<i>fluconazole 200mg/100ml inj</i>	2	
<i>fluconazole 400mg/200ml inj</i>	2	
<i>fluconazole 40mg/ml susp</i>	2	
<i>fluconazole 50mg tab</i>	2	
<i>itraconazole 100mg cap</i>	2	
<i>ketoconazole 200mg tab</i>	2	
NOXAFIL 300MG POWDER FOR ORAL SUSP	4	PA
NOXAFIL 40MG/ML SUSP	3	PA
<i>posaconazole 100mg dr tab</i>	2	PA
<i>posaconazole 40mg/ml susp</i>	2	PA
<i>voriconazole 200mg inj</i>	2	PA
<i>voriconazole 200mg tab</i>	2	PA
<i>voriconazole 40mg/ml susp</i>	2	PA
<i>voriconazole 50mg tab</i>	2	PA
ANTI-HISTAMINES		
ANTI-HISTAMINES - NON-SEDATING		
<i>cetirizine 1mg/ml oral soln</i>	2	
<i>desloratadine 5mg tab</i>	2	
<i>levocetirizine 0.5mg/ml oral soln</i>	2	
<i>levocetirizine 5mg tab</i>	2	
ANTI-HISTAMINES - PHENOTHIAZINES		
<i>promethazine 1.25mg/ml oral soln</i>	2	
<i>promethazine 12.5mg rectal supp</i>	2	
<i>promethazine 12.5mg tab</i>	2	
<i>promethazine 25mg rectal supp</i>	2	
<i>promethazine 25mg tab</i>	2	
<i>promethazine 50mg tab</i>	2	
<i>promethegan 25mg rectal supp</i>	2	
ANTIHYPERLIPIDEMICS		
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL 180MG TAB	3	PA QL=30 EA/30 Days
ANTIHYPERLIPIDEMICS - COMBINATIONS		
<i>ezetimibe 10mg/simvastatin 10mg tab</i>	2	
<i>ezetimibe 10mg/simvastatin 20mg tab</i>	2	
<i>ezetimibe 10mg/simvastatin 40mg tab</i>	2	
<i>ezetimibe 10mg/simvastatin 80mg tab</i>	2	
NEXLIZET 180-10MG TAB	3	PA QL=30 EA/30 Days
ANTIHYPERLIPIDEMICS - MISC.		
<i>omega-3 acid ethyl esters (usp) 1000mg cap</i>	2	QL=120 EA/30 Days
VASCEPA 0.5GM CAP	3	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
VASCEPA 1GM CAP	3	QL=120 EA/30 Days
BILE ACID SEQUESTRANTS		
<i>cholestyramine resin (sugar-free) 4000mg powder for oral susp</i>	2	
<i>cholestyramine resin 4000mg powder for oral susp</i>	2	
<i>colesevelam 625mg tab</i>	2	
<i>colestipol 1000mg tab</i>	2	
<i>colestipol 5000mg granules for oral susp</i>	2	
<i>prevalite 4gm powder for oral susp</i>	2	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate 134mg cap</i>	2	
<i>fenofibrate 145mg tab</i>	2	
<i>fenofibrate 160mg tab</i>	2	
<i>fenofibrate 200mg cap</i>	2	
<i>fenofibrate 48mg tab</i>	2	
<i>fenofibrate 54mg tab</i>	2	
<i>fenofibrate 67mg cap</i>	2	
<i>fenofibric acid 135mg dr cap</i>	2	
<i>fenofibric acid 45mg dr cap</i>	2	
<i>gemfibrozil 600mg tab</i>	2	QL=60 EA/30 Days
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin 10mg tab</i>	1	
<i>atorvastatin 20mg tab</i>	1	
<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>	2	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP) INHIBITORS		
JUXTAPID 10MG CAP	5	NDS PA
JUXTAPID 20MG CAP	5	NDS PA
JUXTAPID 30MG CAP	5	NDS PA
JUXTAPID 5MG CAP	5	NDS PA
NICOTINIC ACID DERIVATIVES		
<i>niacin 1000mg er tab</i>	2	
<i>niacin 500mg er tab</i>	2	
<i>niacin 750mg er tab</i>	2	
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
PRALUENT 150MG/ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
PRALUENT 75MG/ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
REPATHA 140MG/ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
REPATHA 140MG/ML SYRINGE	3	PA QL=2 ML/28 Days
REPATHA 420MG/3.5ML CARTRIDGE	3	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	
<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	
<i>perindopril erbumine 2mg tab</i>	1	
<i>perindopril erbumine 4mg tab</i>	1	
<i>perindopril erbumine 8mg tab</i>	1	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 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>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>	5	NDS
<i>phenoxybenzamine 10mg cap</i>	2	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil 16mg tab</i>	2	
<i>candesartan cilexetil 32mg tab</i>	2	
<i>candesartan cilexetil 4mg tab</i>	2	
<i>candesartan cilexetil 8mg tab</i>	2	
<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	
<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>	2	
<i>clonidine 0.2mg tab</i>	1	
<i>clonidine 0.2mg/24hr weekly patch</i>	2	
<i>clonidine 0.3mg tab</i>	1	
<i>clonidine 0.3mg/24hr weekly patch</i>	2	
<i>doxazosin 1mg tab</i>	2	
<i>doxazosin 2mg tab</i>	2	
<i>doxazosin 4mg tab</i>	2	
<i>doxazosin 8mg tab</i>	2	
<i>prazosin 1mg cap</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>prazosin 2mg cap</i>	2	
<i>prazosin 5mg cap</i>	2	
<i>terazosin 10mg cap</i>	2	
<i>terazosin 1mg cap</i>	2	
<i>terazosin 2mg cap</i>	2	
<i>terazosin 5mg cap</i>	2	
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>	2	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	2	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	2	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	2	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	2	
<i>amlodipine/hydrochlorothiazide/valsartan 10-12.5-160mg tab</i>	2	
<i>amlodipine/hydrochlorothiazide/valsartan 10-25-160mg tab</i>	2	
<i>amlodipine/hydrochlorothiazide/valsartan 10-25-320mg tab</i>	2	
<i>amlodipine/hydrochlorothiazide/valsartan 5-12.5-160mg tab</i>	2	
<i>amlodipine/hydrochlorothiazide/valsartan 5-25-160mg tab</i>	2	
<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	

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>benazepril/hydrochlorothiazide 20-25mg tab</i>	1	
BENAZEPRIL/HYDROCHLOROTHIAZIDE 5-6.25MG TAB	1	
<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	2	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	2	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	2	
<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>	2	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	2	
HYDROCHLOROTHIAZIDE/METOPROLOL TARTRATE 50-100MG TAB	2	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg 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>	2	
<i>aliskiren 300mg tab</i>	2	
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
<i>eplerenone 25mg tab</i>	2	
<i>eplerenone 50mg tab</i>	2	
VASODILATORS		
<i>hydralazine 100mg tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydralazine 10mg tab</i>	2	
<i>hydralazine 25mg tab</i>	2	
<i>hydralazine 50mg tab</i>	2	
<i>minoxidil 10mg tab</i>	2	
<i>minoxidil 2.5mg tab</i>	2	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
IMPAVIDO 50MG CAP	5	NDS PA QL=84 EA/28 Days
<i>metronidazole 250mg tab</i>	2	
<i>metronidazole 500mg tab</i>	2	
<i>metronidazole 5mg/ml inj</i>	2	
<i>pentamidine isethionate 300mg inj</i>	2	
<i>pentamidine isethionate 50mg/ml inh soln</i>	2	PA BvD QL=1 EA/28 Days
<i>tinidazole 250mg tab</i>	2	
<i>tinidazole 500mg tab</i>	2	
TRIMETHOPRIM 100MG TAB	2	
XIFAXAN 200MG TAB	4	QL=9 EA/3 Days
XIFAXAN 550MG TAB	4	PA QL=60 EA/30 Days
ANTI-INFECTIVE MISC. - COMBINATIONS		
<i>sulfamethoxazole/trimethoprim 200-40mg/5ml susp</i>	2	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
ANTIPROTOZOAL AGENTS		
<i>atovaquone 150mg/ml susp</i>	2	
LAMPIT 120MG TAB	3	PA
LAMPIT 30MG TAB	3	PA
<i>nitazoxanide 500mg tab</i>	2	PA QL=6 EA/3 Days
CARBAPENEMS		
CILASTATIN/IMIPENEM 250-250MG INJ	2	
<i>cilastatin/imipenem 500-500mg inj</i>	2	
<i>ertapenem 1gm inj</i>	2	
<i>meropenem 1000mg inj</i>	2	
<i>meropenem 500mg inj</i>	2	
CYCLIC LIPOPEPTIDES		
<i>daptomycin 500mg inj</i>	5	NDS
GLYCOPEPTIDES		
FIRVANQ 25MG/ML ORAL SOLN	3	
FIRVANQ 50MG/ML ORAL SOLN	3	
<i>vancomycin 100mg/ml inj</i>	2	
<i>vancomycin 125mg cap</i>	2	ST QL=120 EA/30 Days
<i>vancomycin 1gm inj</i>	2	
<i>vancomycin 250mg cap</i>	2	ST QL=120 EA/30 Days
VANCOMYCIN 25MG/ML ORAL SOLN	3	
<i>vancomycin 500mg inj</i>	2	
<i>vancomycin 750mg inj</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LEPROSTATICS		
<i>dapsone 100mg tab</i>	2	
<i>dapsone 25mg tab</i>	2	
LINCOSAMIDES		
<i>clindamycin 12mg/ml inj</i>	2	
<i>clindamycin 150mg cap</i>	2	
<i>clindamycin 150mg/ml (2ml) inj</i>	2	
<i>clindamycin 150mg/ml (4ml) inj</i>	2	
<i>clindamycin 150mg/ml (6ml) inj</i>	2	
<i>clindamycin 15mg/ml oral soln</i>	2	
<i>clindamycin 18mg/ml inj</i>	2	
<i>clindamycin 300mg cap</i>	2	
<i>clindamycin 6mg/ml inj</i>	2	
<i>clindamycin 75mg cap</i>	2	
MONOBACTAMS		
<i>aztreonam 1000mg inj</i>	2	
<i>aztreonam 2000mg inj</i>	2	
CAYSTON 75MG INH SOLN	5	NDS PA QL=84 ML/28 Days
OXAZOLIDINONES		
<i>linezolid 20mg/ml susp</i>	2	PA
<i>linezolid 2mg/ml inj</i>	2	PA
<i>linezolid 600mg tab</i>	2	
SIVEXTRO 200MG INJ	5	NDS PA QL=6 EA/6 Days
SIVEXTRO 200MG TAB	5	NDS PA QL=6 EA/6 Days
PLEUROMUTILINS		
XENLETA 600MG TAB	3	PA QL=14 EA/7 Days
POLYMYXINS		
<i>colistin 75mg/ml inj</i>	2	
<i>polymyxin b 500000unit inj</i>	2	
URINARY ANTI-INFECTIVES		
<i>methenamine hippurate 1000mg tab</i>	2	
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	2	
<i>nitrofurantoin macrocrystals 100mg cap</i>	2	
<i>nitrofurantoin macrocrystals 50mg cap</i>	2	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone/proguanil 250-100mg tab</i>	2	
<i>atovaquone/proguanil 62.5-25mg tab</i>	2	
COARTEM 20-120MG TAB	3	
ANTIMALARIALS		
<i>chloroquine phosphate 250mg tab</i>	2	
CHLOROQUINE PHOSPHATE 500MG TAB	2	
<i>hydroxychloroquine sulfate 100mg tab</i>	2	
<i>hydroxychloroquine sulfate 200mg tab</i>	2	
<i>hydroxychloroquine sulfate 300mg tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydroxychloroquine sulfate 400mg tab</i>	2	
<i>mefloquine 250mg tab</i>	3	
PRIMAQUINE PHOSPHATE 26.3MG TAB	2	
<i>quinine sulfate 324mg cap</i>	2	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE 10MG TAB	5	NDS PA
<i>pyridostigmine bromide 180mg er tab</i>	2	
<i>pyridostigmine bromide 60mg tab</i>	2	
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>ethambutol 100mg tab</i>	2	
<i>ethambutol 400mg tab</i>	2	
ISONIAZID 100MG TAB	2	
ISONIAZID 10MG/ML ORAL SOLN	3	
<i>isoniazid 300mg tab</i>	2	
PRIFTIN 150MG TAB	3	
<i>pyrazinamide 500mg tab</i>	2	
<i>rifabutin 150mg cap</i>	2	
<i>rifampin 150mg cap</i>	2	
<i>rifampin 300mg cap</i>	2	
<i>rifampin 600mg inj</i>	2	
SIRTURO 100MG TAB	5	NDS PA
SIRTURO 20MG TAB	5	NDS PA
TRECTOR 250MG TAB	4	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE 25MG TAB	3	PA BvD
CYCLOPHOSPHAMIDE 50MG TAB	3	PA BvD
GLEOSTINE 100MG CAP	3	
GLEOSTINE 10MG CAP	3	
GLEOSTINE 40MG CAP	3	
LEUKERAN 2MG TAB	3	
ANTIMETABOLITES		
<i>mercaptopurine 50mg tab</i>	2	
<i>methotrexate 2.5mg tab</i>	2	
<i>methotrexate 25mg/ml inj</i>	2	
<i>methotrexate 50mg/2ml inj</i>	2	
ONUREG 200MG TAB	5	NDS PA NSO QL=14 EA/28 Days
ONUREG 300MG TAB	5	NDS PA NSO QL=14 EA/28 Days
PURIXAN 2000MG/100ML SUSP	4	
TABLOID 40MG TAB	3	
XATMEP 2.5MG/ML ORAL SOLN	4	PA
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
INLYTA 1MG TAB	5	NDS PA NSO QL=180 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
INLYTA 5MG TAB	5	NDS PA NSO QL=120 EA/30 Days
LENVIMA 10MG DAILY DOSE PACK	5	NDS PA NSO QL=30 EA/30 Days
LENVIMA 12MG DAILY DOSE PACK	5	NDS PA NSO QL=90 EA/30 Days
LENVIMA 14MG DAILY DOSE PACK	5	NDS PA NSO QL=60 EA/30 Days
LENVIMA 18MG DAILY DOSE PACK	5	NDS PA NSO QL=90 EA/30 Days
LENVIMA 20MG DAILY DOSE PACK	5	NDS PA NSO QL=60 EA/30 Days
LENVIMA 24MG DAILY DOSE PACK	5	NDS PA NSO QL=90 EA/30 Days
LENVIMA 4MG DAILY DOSE PACK	5	NDS PA NSO QL=30 EA/30 Days
LENVIMA 8MG DAILY DOSE PACK	5	NDS PA NSO QL=60 EA/30 Days
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
TUKYSA 150MG TAB	5	NDS PA NSO QL=120 EA/30 Days
TUKYSA 50MG TAB	5	NDS PA NSO QL=120 EA/30 Days
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA 100MG TAB	5	NDS PA NSO QL=180 EA/30 Days
VENCLEXTA 10MG TAB	3	PA NSO QL=60 EA/30 Days
VENCLEXTA 50MG TAB	3	PA NSO QL=30 EA/30 Days
VENCLEXTA TAB STARTER PACK	5	NDS PA NSO
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	2	PA NSO QL=30 EA/30 Days
<i>erlotinib 150mg tab</i>	2	PA NSO QL=30 EA/30 Days
<i>erlotinib 25mg tab</i>	2	PA NSO QL=90 EA/30 Days
EXKIVITY 40MG CAP	5	NDS PA NSO QL=120 EA/30 Days
<i>gefitinib 250mg tab</i>	2	PA NSO
GILOTRIF 20MG TAB	5	NDS PA NSO QL=30 EA/30 Days
GILOTRIF 30MG TAB	5	NDS PA NSO QL=30 EA/30 Days
GILOTRIF 40MG TAB	5	NDS PA NSO QL=30 EA/30 Days
TAGRISSE 40MG TAB	5	NDS PA NSO QL=30 EA/30 Days
TAGRISSE 80MG TAB	5	NDS PA NSO QL=30 EA/30 Days
VIZIMPRO 15MG TAB	5	NDS PA NSO QL=30 EA/30 Days
VIZIMPRO 30MG TAB	5	NDS PA NSO QL=30 EA/30 Days
VIZIMPRO 45MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	5	NDS PA NSO
DAURISMO 25MG TAB	5	NDS PA NSO
ERIVEDGE 150MG CAP	5	NDS PA NSO
ODOMZO 200MG CAP	5	NDS PA NSO
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	2	QL=120 EA/30 Days
<i>anastrozole 1mg tab</i>	2	
<i>bicalutamide 50mg tab</i>	2	
ELIGARD 22.5MG SYRINGE	4	QL=1 EA/84 Days
ELIGARD 30MG SYRINGE	4	QL=1 EA/112 Days
ELIGARD 45MG SYRINGE	4	QL=1 EA/168 Days
ELIGARD 7.5MG SYRINGE	4	QL=1 EA/28 Days
EMCYT 140MG CAP	3	

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
ERLEADA 240MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ERLEADA 60MG TAB	5	NDS PA NSO QL=120 EA/30 Days
<i>exemestane 25mg tab</i>	2	
FIRMAGON 120MG/VIAL INJ	3	PA NSO
FIRMAGON 80MG INJ	3	PA NSO
<i>letrozole 2.5mg tab</i>	2	
LEUPROLIDE ACETATE 22.5MG INJ	5	QL=1 EA/84 Days
<i>leuprolide acetate 5mg/ml inj</i>	2	
LUPRON 11.25MG SYRINGE	5	QL=1 EA/84 Days
LUPRON 22.5MG SYRINGE	5	QL=1 EA/84 Days
LUPRON 3.75MG SYRINGE	5	NDS QL=1 EA/28 Days
LUPRON 30MG SYRINGE	5	QL=1 EA/112 Days
LUPRON 45MG SYRINGE (NON-PEDIATRIC)	5	QL=1 EA/168 Days
LUPRON 7.5MG SYRINGE	5	NDS QL=1 EA/28 Days
LYSODREN 500MG TAB	3	
<i>megestrol acetate 20mg tab</i>	2	PA NSO
<i>megestrol acetate 40mg tab</i>	2	PA NSO
<i>megestrol acetate 40mg/ml susp</i>	2	PA
<i>nilutamide 150mg tab</i>	5	NDS
NUBEQA 300MG TAB	5	NDS PA NSO QL=120 EA/30 Days
ORGOVYX 120MG TAB	5	NDS PA NSO QL=30 EA/28 Days
ORSERDU 345MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ORSERDU 86MG TAB	5	NDS PA NSO QL=90 EA/30 Days
SOLTAMOX 10MG/5ML ORAL SOLN	4	PA NSO
<i>tamoxifen 10mg tab</i>	2	
<i>tamoxifen 20mg tab</i>	2	
<i>toremifene 60mg tab</i>	2	
TRELSTAR 11.25MG INJ	5	QL=1 EA/84 Days
TRELSTAR 22.5MG INJ	5	QL=1 EA/168 Days
TRELSTAR 3.75MG INJ	5	NDS QL=1 EA/28 Days
XTANDI 40MG CAP	5	NDS PA NSO QL=120 EA/30 Days
XTANDI 40MG TAB	5	NDS PA NSO QL=120 EA/30 Days
XTANDI 80MG TAB	5	NDS PA NSO QL=60 EA/30 Days
ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS		
WELIREG 40MG TAB	5	NDS PA NSO QL=90 EA/30 Days
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST 1MG CAP	5	NDS PA NSO QL=21 EA/28 Days
POMALYST 2MG CAP	5	NDS PA NSO QL=21 EA/28 Days
POMALYST 3MG CAP	5	NDS PA NSO QL=21 EA/28 Days
POMALYST 4MG CAP	5	NDS PA NSO QL=21 EA/28 Days
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT 100MG TAB	5	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 200MG TAB	5	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 25MG TAB	5	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 300MG TAB	5	NDS PA NSO QL=30 EA/30 Days

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
AYVAKIT 50MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO 100MG ONCE WEEKLY CARTON (8-PACK)	5	NDS PA NSO QL=8 EA/28 Days
XPOVIO 40MG ONCE WEEKLY CARTON (4-PACK)	5	NDS PA NSO QL=4 EA/28 Days
XPOVIO 40MG TWICE WEEKLY CARTON (8-PACK)	5	NDS PA NSO QL=8 EA/28 Days
XPOVIO 60MG ONCE WEEKLY CARTON (4-PACK)	5	NDS PA NSO QL=4 EA/28 Days
XPOVIO 60MG TWICE WEEKLY CARTON (24 PACK)	5	NDS PA NSO QL=24 EA/28 Days
XPOVIO 80MG ONCE WEEKLY CARTON (8-PACK)	5	NDS PA NSO QL=8 EA/28 Days
XPOVIO 80MG TWICE WEEKLY CARTON (32 PACK)	5	NDS PA NSO QL=32 EA/28 Days
ANTINEOPLASTIC COMBINATIONS		
INQOVI 5 TABLET PACK	5	NDS PA NSO QL=5 EA/28 Days
KISQALI/FEMARA 200 CO-PACK	5	NDS PA NSO QL=49 EA/28 Days
KISQALI/FEMARA 400 CO-PACK	5	NDS PA NSO QL=70 EA/28 Days
KISQALI/FEMARA 600 CO-PACK	5	NDS PA NSO QL=91 EA/28 Days
LONSURF 6.14-15MG TAB	5	NDS PA NSO
LONSURF 8.19-20MG TAB	5	NDS PA NSO
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA 150MG CAP	5	NDS PA NSO QL=240 EA/30 Days
ALUNBRIG 180MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ALUNBRIG 30MG TAB	5	NDS PA NSO QL=120 EA/30 Days
ALUNBRIG 90MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ALUNBRIG INITIATION PACK	5	NDS PA NSO QL=30 EA/30 Days
BALVERSA 3MG TAB	5	NDS PA NSO QL=60 EA/30 Days
BALVERSA 4MG TAB	5	NDS PA NSO QL=60 EA/30 Days
BALVERSA 5MG TAB	5	NDS PA NSO QL=30 EA/30 Days
BOSULIF 100MG TAB	5	NDS PA NSO QL=120 EA/30 Days
BOSULIF 400MG TAB	5	NDS PA NSO QL=30 EA/30 Days
BOSULIF 500MG TAB	5	NDS PA NSO QL=30 EA/30 Days
BRAFTOVI 75MG CAP	5	NDS PA NSO QL=180 EA/30 Days
BRUKINSA 80MG CAP	5	NDS PA NSO QL=120 EA/30 Days
CABOMETYX 20MG TAB	5	NDS PA NSO QL=30 EA/30 Days
CABOMETYX 40MG TAB	5	NDS PA NSO QL=30 EA/30 Days
CABOMETYX 60MG TAB	5	NDS PA NSO QL=30 EA/30 Days
CALQUENCE 100MG CAP	5	NDS PA NSO QL=60 EA/30 Days
CALQUENCE 100MG TAB	5	NDS PA NSO QL=60 EA/30 Days
CAPRELSA 100MG TAB	5	NDS PA NSO QL=60 EA/30 Days
CAPRELSA 300MG TAB	5	NDS PA NSO QL=30 EA/30 Days
COMETRIQ CAP 100MG DAILY DOSE PACK	5	NDS PA NSO
COMETRIQ CAP 140MG DAILY DOSE PACK	5	NDS PA NSO
COMETRIQ CAP 60MG DAILY DOSE PACK	5	NDS PA NSO
COPIKTRA 15MG CAP	5	NDS PA NSO QL=60 EA/30 Days
COPIKTRA 25MG CAP	5	NDS PA NSO QL=60 EA/30 Days
COTELLIC 20MG TAB	5	NDS PA NSO QL=63 EA/28 Days
<i>everolimus 10mg tab</i>	2	PA NSO QL=30 EA/30 Days
<i>everolimus 2.5mg tab</i>	2	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
<i>everolimus 2mg tab for oral susp</i>	2	PA NSO QL=150 EA/30 Days
<i>everolimus 3mg tab for oral susp</i>	2	PA NSO QL=90 EA/30 Days
<i>everolimus 5mg tab</i>	2	PA NSO QL=30 EA/30 Days
<i>everolimus 5mg tab for oral susp</i>	2	PA NSO QL=60 EA/30 Days
<i>everolimus 7.5mg tab</i>	2	PA NSO QL=30 EA/30 Days
FOTIVDA 0.89MG CAP	5	NDS PA NSO QL=21 EA/28 Days
FOTIVDA 1.34MG CAP	5	NDS PA NSO QL=21 EA/28 Days
GAVRETO 100MG CAP	5	NDS PA NSO QL=120 EA/30 Days
IBRANCE 100MG CAP	5	NDS PA NSO QL=21 EA/28 Days
IBRANCE 100MG TAB	5	NDS PA NSO QL=21 EA/28 Days
IBRANCE 125MG CAP	5	NDS PA NSO QL=21 EA/28 Days
IBRANCE 125MG TAB	5	NDS PA NSO QL=21 EA/28 Days
IBRANCE 75MG CAP	5	NDS PA NSO QL=21 EA/28 Days
IBRANCE 75MG TAB	5	NDS PA NSO QL=21 EA/28 Days
ICLUSIG 10MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 15MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 30MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 45MG TAB	5	NDS PA NSO QL=30 EA/30 Days
IDHIFA 100MG TAB	5	NDS PA NSO QL=30 EA/30 Days
IDHIFA 50MG TAB	5	NDS PA NSO QL=30 EA/30 Days
<i>imatinib 100mg tab</i>	2	QL=90 EA/30 Days
<i>imatinib 400mg tab</i>	2	QL=60 EA/30 Days
IMBRUVICA 140MG CAP	5	NDS PA NSO QL=90 EA/30 Days
IMBRUVICA 420MG TAB	5	NDS PA NSO QL=30 EA/30 Days
IMBRUVICA 70MG CAP	5	NDS PA NSO QL=30 EA/30 Days
IMBRUVICA 70MG/ML SUSP	5	NDS PA NSO
INREBIC 100MG CAP	5	NDS PA NSO QL=120 EA/30 Days
JAKAFI 10MG TAB	5	NDS PA NSO QL=60 EA/30 Days
JAKAFI 15MG TAB	5	NDS PA NSO QL=60 EA/30 Days
JAKAFI 20MG TAB	5	NDS PA NSO QL=60 EA/30 Days
JAKAFI 25MG TAB	5	NDS PA NSO QL=60 EA/30 Days
JAKAFI 5MG TAB	5	NDS PA NSO QL=60 EA/30 Days
JAYPIRCA 100MG TAB	5	NDS PA NSO QL=60 EA/30 Days
JAYPIRCA 50MG TAB	5	NDS PA NSO QL=30 EA/30 Days
KISQALI 200MG DAILY DOSE PACK (21)	5	NDS PA NSO QL=21 EA/28 Days
KISQALI 400MG DAILY DOSE PACK (42)	5	NDS PA NSO QL=42 EA/28 Days
KISQALI 600MG DAILY DOSE PACK (63)	5	NDS PA NSO QL=63 EA/28 Days
KOSELUGO 10MG CAP	5	NDS PA NSO QL=240 EA/30 Days
KOSELUGO 25MG CAP	5	NDS PA NSO QL=120 EA/30 Days
KRAZATI 200MG TAB	5	NDS PA NSO QL=180 EA/30 Days
<i>lapatinib 250mg tab</i>	5	NDS PA NSO
LORBRENA 100MG TAB	5	NDS PA NSO QL=30 EA/30 Days
LORBRENA 25MG TAB	5	NDS PA NSO QL=90 EA/30 Days
LUMAKRAS 120MG TAB	5	NDS PA NSO QL=240 EA/30 Days
LUMAKRAS 320MG TAB	5	NDS PA NSO QL=90 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LYNPARZA 100MG TAB	5	NDS PA NSO QL=120 EA/30 Days
LYNPARZA 150MG TAB	5	NDS PA NSO QL=120 EA/30 Days
LYTGOBI 4MG TAB PACK (12MG DAILY DOSE)	5	NDS PA NSO QL=84 EA/28 Days
LYTGOBI 4MG TAB PACK (16MG DAILY DOSE)	5	NDS PA NSO QL=112 EA/28 Days
LYTGOBI 4MG TAB PACK (20MG DAILY DOSE)	5	NDS PA NSO QL=140 EA/28 Days
MEKINIST 0.05MG/ML ORAL SOLN	5	NDS PA NSO
MEKINIST 0.5MG TAB	5	NDS PA NSO QL=90 EA/30 Days
MEKINIST 2MG TAB	5	NDS PA NSO QL=30 EA/30 Days
MEKTOVI 15MG TAB	5	NDS PA NSO QL=180 EA/30 Days
NERLYNX 40MG TAB	5	NDS PA NSO QL=180 EA/30 Days
NINLARO 2.3MG CAP	5	NDS PA NSO QL=3 EA/28 Days
NINLARO 3MG CAP	5	NDS PA NSO QL=3 EA/28 Days
NINLARO 4MG CAP	5	NDS PA NSO QL=3 EA/28 Days
PEMAZYRE 13.5MG TAB	5	NDS PA NSO
PEMAZYRE 4.5MG TAB	5	NDS PA NSO
PEMAZYRE 9MG TAB	5	NDS PA NSO
PIQRAY 200MG DAILY DOSE PACK	5	NDS PA NSO QL=30 EA/30 Days
PIQRAY 250MG DAILY DOSE PACK	5	NDS PA NSO QL=60 EA/30 Days
PIQRAY 300MG DAILY DOSE PACK	5	NDS PA NSO QL=60 EA/30 Days
QINLOCK 50MG TAB	5	NDS PA NSO QL=90 EA/30 Days
RETEVMO 40MG CAP	5	NDS PA NSO QL=120 EA/30 Days
RETEVMO 80MG CAP	5	NDS PA NSO QL=120 EA/30 Days
REZLIDHIA 150MG CAP	5	NDS PA NSO QL=60 EA/30 Days
ROZLYTREK 100MG CAP	5	NDS PA NSO QL=150 EA/30 Days
ROZLYTREK 200MG CAP	5	NDS PA NSO QL=90 EA/30 Days
RUBRACA 200MG TAB	5	NDS PA NSO QL=120 EA/30 Days
RUBRACA 250MG TAB	5	NDS PA NSO QL=120 EA/30 Days
RUBRACA 300MG TAB	5	NDS PA NSO QL=120 EA/30 Days
RYDAPT 25MG CAP	5	NDS PA NSO
SCSEMBLIX 20MG TAB	5	NDS PA NSO QL=60 EA/30 Days
SCSEMBLIX 40MG TAB	5	NDS PA NSO QL=300 EA/30 Days
<i>sorafenib 200mg tab</i>	2	PA NSO QL=120 EA/30 Days
SPRYCEL 100MG TAB	5	NDS PA NSO
SPRYCEL 140MG TAB	5	NDS PA NSO
SPRYCEL 20MG TAB	5	NDS PA NSO
SPRYCEL 50MG TAB	5	NDS PA NSO
SPRYCEL 70MG TAB	5	NDS PA NSO
SPRYCEL 80MG TAB	5	NDS PA NSO
STIVARGA 40MG TAB	5	NDS PA NSO QL=84 EA/28 Days
<i>sunitinib 12.5mg cap</i>	2	PA NSO
<i>sunitinib 25mg cap</i>	2	PA NSO
<i>sunitinib 37.5mg cap</i>	2	PA NSO
<i>sunitinib 50mg cap</i>	2	PA NSO
TABRECTA 150MG TAB	5	NDS PA NSO QL=120 EA/30 Days
TABRECTA 200MG TAB	5	NDS PA NSO QL=120 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TAFINLAR 10MG TAB FOR ORAL SUSP	5	NDS PA NSO QL=840 EA/28 Days
TAFINLAR 50MG CAP	5	NDS PA NSO QL=120 EA/30 Days
TAFINLAR 75MG CAP	5	NDS PA NSO QL=120 EA/30 Days
TALZENNA 0.25MG CAP	5	NDS PA NSO QL=90 EA/30 Days
TALZENNA 0.5MG CAP	5	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.75MG CAP	5	NDS PA NSO QL=30 EA/30 Days
TALZENNA 1MG CAP	5	NDS PA NSO QL=30 EA/30 Days
TASIGNA 150MG CAP	5	NDS PA NSO
TASIGNA 200MG CAP	5	NDS PA NSO
TASIGNA 50MG CAP	5	NDS PA NSO
TAZVERIK 200MG TAB	5	NDS PA NSO QL=240 EA/30 Days
TEPMETKO 225MG TAB	5	NDS PA NSO QL=60 EA/30 Days
TIBSOVO 250MG TAB	5	NDS PA NSO QL=60 EA/30 Days
TURALIO 125MG CAP	5	NDS PA NSO QL=120 EA/30 Days
VERZENIO 100MG TAB	5	NDS PA NSO QL=56 EA/28 Days
VERZENIO 150MG TAB	5	NDS PA NSO QL=56 EA/28 Days
VERZENIO 200MG TAB	5	NDS PA NSO QL=56 EA/28 Days
VERZENIO 50MG TAB	5	NDS PA NSO QL=56 EA/28 Days
VITRAKVI 100MG CAP	5	NDS PA NSO QL=60 EA/30 Days
VITRAKVI 20MG/ML ORAL SOLN	5	NDS PA NSO QL=300 ML/30 Days
VITRAKVI 25MG CAP	5	NDS PA NSO QL=180 EA/30 Days
VONJO 100MG CAP	5	NDS PA NSO QL=120 EA/30 Days
VOTRIENT 200MG TAB	5	NDS PA NSO
XALKORI 200MG CAP	5	NDS PA NSO QL=60 EA/30 Days
XALKORI 250MG CAP	5	NDS PA NSO QL=120 EA/30 Days
XOSPATA 40MG TAB	5	NDS PA NSO QL=90 EA/30 Days
ZEJULA 100MG CAP	5	NDS PA NSO QL=90 EA/30 Days
ZELBORAF 240MG TAB	5	NDS PA NSO QL=240 EA/30 Days
ZOLINZA 100MG CAP	5	NDS PA NSO
ZYDELIG 100MG TAB	5	NDS PA NSO QL=60 EA/30 Days
ZYDELIG 150MG TAB	5	NDS PA NSO QL=60 EA/30 Days
ZYKADIA 150MG TAB	5	NDS PA NSO QL=90 EA/30 Days
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000UNIT/0.5ML INJ	5	NDS PA NSO
BESREMI 500MCG/ML SYRINGE	5	NDS PA NSO QL=2 ML/28 Days
<i>bexarotene 75mg cap</i>	2	PA NSO
<i>hydroxyurea 500mg cap</i>	2	
MATULANE 50MG CAP	5	NDS
SYNRIBO 3.5MG INJ	5	NDS PA NSO
<i>tretinoin 10mg cap</i>	2	
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
<i>leucovorin 10mg tab</i>	2	
<i>leucovorin 15mg tab</i>	2	
<i>leucovorin 25mg tab</i>	2	
<i>leucovorin 5mg tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MESNEX 400MG TAB	3	
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa 25mg tab</i>	2	
NOURIANZ 20MG TAB	4	PA QL=30 EA/30 Days
NOURIANZ 40MG TAB	4	PA QL=30 EA/30 Days
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate 0.5mg tab</i>	2	
<i>benztropine mesylate 1mg tab</i>	2	
<i>benztropine mesylate 2mg tab</i>	2	
TRIHXYPHENIDYL 0.4MG/ML ORAL SOLN	2	
<i>trihexyphenidyl 2mg tab</i>	2	
<i>trihexyphenidyl 5mg tab</i>	2	
ANTIPARKINSON COMT INHIBITORS		
<i>entacapone 200mg tab</i>	2	
ONGENTYS 25MG CAP	4	PA QL=30 EA/30 Days
ONGENTYS 50MG CAP	4	PA QL=30 EA/30 Days
<i>tolcapone 100mg tab</i>	2	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine 100mg cap</i>	2	
<i>amantadine 10mg/ml oral soln</i>	2	
<i>bromocriptine 2.5mg tab</i>	2	
<i>bromocriptine 5mg cap</i>	2	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	2	
CARBIDOPA/LEVODOPA 10-100MG ODT	2	
<i>carbidopa/levodopa 10-100mg tab</i>	2	
<i>carbidopa/levodopa 25-100mg er tab</i>	2	
CARBIDOPA/LEVODOPA 25-100MG ODT	2	
<i>carbidopa/levodopa 25-100mg tab</i>	2	
CARBIDOPA/LEVODOPA 25-250MG ODT	2	
<i>carbidopa/levodopa 25-250mg tab</i>	2	
<i>carbidopa/levodopa 50-200mg er tab</i>	2	
NEUPRO 1MG/24HR PATCH	4	QL=30 EA/30 Days
NEUPRO 2MG/24HR PATCH	4	QL=30 EA/30 Days
NEUPRO 3MG/24HR PATCH	4	QL=30 EA/30 Days
NEUPRO 4MG/24HR PATCH	4	QL=30 EA/30 Days
NEUPRO 6MG/24HR PATCH	4	QL=30 EA/30 Days
NEUPRO 8MG/24HR PATCH	4	QL=30 EA/30 Days
<i>pramipexole 0.125mg tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>pramipexole 0.25mg tab</i>	2	
<i>pramipexole 0.5mg tab</i>	2	
<i>pramipexole 0.75mg tab</i>	2	
<i>pramipexole 1.5mg tab</i>	2	
<i>pramipexole 1mg tab</i>	2	
<i>ropinirole 0.25mg tab</i>	2	
<i>ropinirole 0.5mg tab</i>	2	
<i>ropinirole 1mg tab</i>	2	
<i>ropinirole 2mg tab</i>	2	
<i>ropinirole 3mg tab</i>	2	
<i>ropinirole 4mg tab</i>	2	
<i>ropinirole 5mg tab</i>	2	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline 0.5mg tab</i>	2	
<i>rasagiline 1mg tab</i>	2	
<i>selegiline 5mg cap</i>	2	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<i>lithium carbonate 150mg cap</i>	2	
<i>lithium carbonate 300mg cap</i>	2	
<i>lithium carbonate 300mg er tab</i>	2	
<i>lithium carbonate 300mg tab</i>	2	
<i>lithium carbonate 450mg er tab</i>	2	
LITHIUM CARBONATE 600MG CAP	2	
ANTIPSYCHOTICS - MISC.		
CAPLYTA 10.5MG CAP	4	PA NSO QL=30 EA/30 Days
CAPLYTA 21MG CAP	4	PA NSO QL=30 EA/30 Days
CAPLYTA 42MG CAP	4	PA NSO QL=30 EA/30 Days
<i>lurasidone 120mg tab</i>	2	ST_NSO
<i>lurasidone 20mg tab</i>	2	ST_NSO
<i>lurasidone 40mg tab</i>	2	ST_NSO
<i>lurasidone 60mg tab</i>	2	ST_NSO
<i>lurasidone 80mg tab</i>	2	ST_NSO
NUPLAZID 10MG TAB	4	PA NSO QL=30 EA/30 Days
NUPLAZID 34MG CAP	4	PA NSO QL=30 EA/30 Days
VRAYLAR 1.5/3MG MIXED PACK	4	PA NSO QL=30 EA/30 Days
VRAYLAR 1.5MG CAP	4	PA NSO QL=30 EA/30 Days
VRAYLAR 3MG CAP	4	PA NSO QL=30 EA/30 Days
VRAYLAR 4.5MG CAP	4	PA NSO QL=30 EA/30 Days
VRAYLAR 6MG CAP	4	PA NSO QL=30 EA/30 Days
<i>ziprasidone 20mg cap</i>	2	
<i>ziprasidone 20mg inj</i>	2	PA NSO QL=60 EA/30 Days
<i>ziprasidone 40mg cap</i>	2	
<i>ziprasidone 60mg cap</i>	2	
<i>ziprasidone 80mg cap</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BENZISOXAZOLES		
FANAPT 10MG TAB	4	PA NSO QL=60 EA/30 Days
FANAPT 12MG TAB	4	PA NSO QL=60 EA/30 Days
FANAPT 1MG TAB	4	PA NSO QL=60 EA/30 Days
FANAPT 2MG TAB	4	PA NSO QL=60 EA/30 Days
FANAPT 4MG TAB	4	PA NSO QL=60 EA/30 Days
FANAPT 6MG TAB	4	PA NSO QL=60 EA/30 Days
FANAPT 8MG TAB	4	PA NSO QL=60 EA/30 Days
FANAPT TITRATION PACK	4	PA NSO QL=60 EA/30 Days
INVEGA 1092MG/3.5ML SYRINGE	4	PA NSO QL=3.50 ML/180 Days
INVEGA 117MG/0.75ML SYRINGE	4	PA NSO QL=.75 ML/28 Days
INVEGA 1560MG/5ML SYRINGE	4	PA NSO QL=5 ML/180 Days
INVEGA 156MG/ML SYRINGE	4	PA NSO QL=1 ML/28 Days
INVEGA 234MG/1.5ML SYRINGE	4	PA NSO QL=1.50 ML/28 Days
INVEGA 273MG/0.875ML SYRINGE	4	PA NSO QL=.88 ML/84 Days
INVEGA 39MG/0.25ML SYRINGE	4	PA NSO QL=.25 ML/28 Days
INVEGA 410MG/1.315ML SYRINGE	4	PA NSO QL=1.32 ML/84 Days
INVEGA 546MG/1.75ML SYRINGE	4	PA NSO QL=1.75 ML/84 Days
INVEGA 78MG/0.5ML SYRINGE	4	PA NSO QL=.50 ML/28 Days
INVEGA 819MG/2.625ML SYRINGE	4	PA NSO QL=2.63 ML/84 Days
<i>paliperidone 1.5mg er tab</i>	2	QL=30 EA/30 Days
<i>paliperidone 3mg er tab</i>	2	QL=30 EA/30 Days
<i>paliperidone 6mg er tab</i>	2	QL=60 EA/30 Days
<i>paliperidone 9mg er tab</i>	2	QL=30 EA/30 Days
PERSERIS 120MG SYRINGE	5	NDS PA NSO QL=1 EA/28 Days
PERSERIS 90MG SYRINGE	5	NDS PA NSO QL=1 EA/28 Days
RISPERDAL 12.5MG INJ	4	PA NSO QL=2 EA/28 Days
RISPERDAL 25MG INJ	4	PA NSO QL=2 EA/28 Days
RISPERDAL 37.5MG INJ	4	PA NSO QL=2 EA/28 Days
RISPERDAL 50MG INJ	4	PA NSO QL=2 EA/28 Days
RISPERIDONE 0.25MG ODT	2	
<i>risperidone 0.25mg tab</i>	2	
<i>risperidone 0.5mg odt</i>	2	
<i>risperidone 0.5mg tab</i>	2	
<i>risperidone 1mg odt</i>	2	
<i>risperidone 1mg tab</i>	2	
<i>risperidone 1mg/ml oral soln</i>	2	
<i>risperidone 2mg odt</i>	2	
<i>risperidone 2mg tab</i>	2	
<i>risperidone 3mg odt</i>	2	
<i>risperidone 3mg tab</i>	2	
<i>risperidone 4mg odt</i>	2	
<i>risperidone 4mg tab</i>	2	
UZEDY 100MG/0.28ML SYRINGE	5	QL=.28 ML/30 Days
UZEDY 125MG/0.35ML SYRINGE	5	NDS QL=.35 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
UZEDY 150MG/0.42ML SYRINGE	5	QL=.42 ML/60 Days
UZEDY 200MG/0.56ML SYRINGE	5	QL=.56 ML/60 Days
UZEDY 250MG/0.7ML SYRINGE	5	QL=.70 ML/60 Days
UZEDY 50MG/0.14ML SYRINGE	5	NDS QL=.14 ML/30 Days
UZEDY 75MG/0.21ML SYRINGE	5	NDS QL=.21 ML/30 Days
BUTYROPHENONES		
<i>haloperidol 0.5mg tab</i>	2	
<i>haloperidol 10mg tab</i>	2	
<i>haloperidol 1mg tab</i>	2	
<i>haloperidol 20mg tab</i>	2	
<i>haloperidol 2mg tab</i>	2	
<i>haloperidol 2mg/ml oral soln</i>	2	
<i>haloperidol 5mg tab</i>	2	
<i>haloperidol 5mg/ml inj</i>	2	
<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	2	
<i>haloperidol decanoate 100mg/ml inj</i>	2	
<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	2	
<i>haloperidol decanoate 50mg/ml inj</i>	2	
DIBENZAPINES		
<i>asenapine 10mg sl tab</i>	2	QL=60 EA/30 Days
<i>asenapine 2.5mg sl tab</i>	2	QL=60 EA/30 Days
<i>asenapine 5mg sl tab</i>	2	QL=60 EA/30 Days
<i>clozapine 100mg odt</i>	2	
<i>clozapine 100mg tab</i>	2	
CLOZAPINE 12.5MG ODT	2	
CLOZAPINE 150MG ODT	4	
CLOZAPINE 200MG ODT	4	
<i>clozapine 200mg tab</i>	2	
<i>clozapine 25mg odt</i>	2	
<i>clozapine 25mg tab</i>	2	
<i>clozapine 50mg tab</i>	2	
<i>loxapine 10mg cap</i>	2	
<i>loxapine 25mg cap</i>	2	
<i>loxapine 50mg cap</i>	2	
<i>loxapine 5mg cap</i>	2	
<i>olanzapine 10mg inj</i>	2	
<i>olanzapine 10mg odt</i>	2	
<i>olanzapine 10mg tab</i>	2	
<i>olanzapine 15mg odt</i>	2	
<i>olanzapine 15mg tab</i>	2	
<i>olanzapine 2.5mg tab</i>	2	
<i>olanzapine 20mg odt</i>	2	
<i>olanzapine 20mg tab</i>	2	
<i>olanzapine 5mg odt</i>	2	
<i>olanzapine 5mg tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>olanzapine 7.5mg tab</i>	2	
<i>quetiapine 100mg tab</i>	2	
<i>quetiapine 150mg er tab</i>	2	
<i>quetiapine 200mg er tab</i>	2	
<i>quetiapine 200mg tab</i>	2	
<i>quetiapine 25mg tab</i>	2	
<i>quetiapine 300mg er tab</i>	2	
<i>quetiapine 300mg tab</i>	2	
<i>quetiapine 400mg er tab</i>	2	
<i>quetiapine 400mg tab</i>	2	
<i>quetiapine 50mg er tab</i>	2	
<i>quetiapine 50mg tab</i>	2	
SECUADO 3.8MG/24HR PATCH	4	PA NSO QL=30 EA/30 Days
SECUADO 5.7MG/24HR PATCH	4	PA NSO QL=30 EA/30 Days
SECUADO 7.6MG/24HR PATCH	4	PA NSO QL=30 EA/30 Days
VERSACLOZ 50MG/ML SUSP	4	
ZYPREXA 210MG INJ	4	PA NSO QL=2 EA/28 Days
DIHYDROINDOLONES		
MOLINDONE 10MG TAB	4	
MOLINDONE 25MG TAB	4	
MOLINDONE 5MG TAB	4	
PHENOTHIAZINES		
<i>chlorpromazine 100mg tab</i>	2	
CHLORPROMAZINE 100MG/ML ORAL SOLN	4	
<i>chlorpromazine 10mg tab</i>	2	
<i>chlorpromazine 200mg tab</i>	2	
<i>chlorpromazine 25mg tab</i>	2	
CHLORPROMAZINE 30MG/ML ORAL SOLN	4	
<i>chlorpromazine 50mg tab</i>	2	
<i>compro 25mg rectal supp</i>	2	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	3	
<i>fluphenazine 10mg tab</i>	2	
<i>fluphenazine 1mg tab</i>	2	
<i>fluphenazine 2.5mg tab</i>	2	
FLUPHENAZINE 2.5MG/ML INJ	3	
<i>fluphenazine 5mg tab</i>	2	
FLUPHENAZINE 5MG/ML ORAL SOLN	3	
<i>fluphenazine decanoate 25mg/ml inj</i>	2	
<i>perphenazine 16mg tab</i>	2	
<i>perphenazine 2mg tab</i>	2	
<i>perphenazine 4mg tab</i>	2	
<i>perphenazine 8mg tab</i>	2	
<i>prochlorperazine 10mg tab</i>	2	
<i>prochlorperazine 25mg rectal supp</i>	2	
<i>prochlorperazine 5mg tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>thioridazine 100mg tab</i>	2	
<i>thioridazine 10mg tab</i>	2	
<i>thioridazine 25mg tab</i>	2	
<i>thioridazine 50mg tab</i>	2	
<i>trifluoperazine 10mg tab</i>	2	
<i>trifluoperazine 1mg tab</i>	2	
<i>trifluoperazine 2mg tab</i>	2	
<i>trifluoperazine 5mg tab</i>	2	
QUINOLINONE DERIVATIVES		
ABILIFY 300MG INJ	5	NDS PA NSO QL=1 EA/28 Days
ABILIFY 300MG SYRINGE	5	NDS PA NSO QL=1 EA/28 Days
ABILIFY 400MG INJ	5	NDS PA NSO QL=1 EA/28 Days
ABILIFY 400MG SYRINGE	5	NDS PA NSO QL=1 EA/28 Days
ABILIFY 720MG/2.4ML SYRINGE	5	QL=2.40 ML/56 Days
ABILIFY 960MG/3.2ML SYRINGE	5	QL=3.20 ML/56 Days
<i>aripiprazole 10mg odt</i>	2	PA NSO QL=60 EA/30 Days
<i>aripiprazole 10mg tab</i>	2	
<i>aripiprazole 15mg odt</i>	2	PA NSO QL=60 EA/30 Days
<i>aripiprazole 15mg tab</i>	2	
<i>aripiprazole 1mg/ml oral soln</i>	2	PA NSO
<i>aripiprazole 20mg tab</i>	2	
<i>aripiprazole 2mg tab</i>	2	
<i>aripiprazole 30mg tab</i>	2	
<i>aripiprazole 5mg tab</i>	2	
ARISTADA 1064MG/3.9ML SYRINGE	5	PA NSO QL=3.90 ML/56 Days
ARISTADA 441MG/1.6ML SYRINGE	5	NDS PA NSO QL=1.60 ML/28 Days
ARISTADA 662MG/2.4ML SYRINGE	5	NDS PA NSO QL=2.40 ML/28 Days
ARISTADA 675MG/2.4ML SYRINGE	5	NDS PA NSO QL=2.40 ML/42 Days
ARISTADA 882MG/3.2ML SYRINGE	5	PA NSO QL=3.20 ML/28 Days
REXULTI 0.25MG TAB	4	PA NSO QL=30 EA/30 Days
REXULTI 0.5MG TAB	4	PA NSO QL=30 EA/30 Days
REXULTI 1MG TAB	4	PA NSO QL=30 EA/30 Days
REXULTI 2MG TAB	4	PA NSO QL=30 EA/30 Days
REXULTI 3MG TAB	4	PA NSO QL=30 EA/30 Days
REXULTI 4MG TAB	4	PA NSO QL=30 EA/30 Days
THIOXANTHENES		
<i>thiothixene 10mg cap</i>	2	
<i>thiothixene 1mg cap</i>	2	
<i>thiothixene 2mg cap</i>	2	
<i>thiothixene 5mg cap</i>	2	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir 20mg/ml oral soln</i>	2	
<i>abacavir 300mg tab</i>	2	
<i>abacavir/lamivudine 600-300mg tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
APTIVUS 250MG CAP	5	
<i>atazanavir 150mg cap</i>	2	
<i>atazanavir 200mg cap</i>	2	
<i>atazanavir 300mg cap</i>	2	
BIKTARVY 30-120-15MG TAB	5	
BIKTARVY 50-200-25MG TAB	5	
CIMDUO 300-300MG TAB	5	
COMPLERA 200-25-300MG TAB	5	
<i>darunavir 600mg tab</i>	2	
<i>darunavir 800mg tab</i>	2	
DELSTRIGO 100-300-300MG TAB	5	
DESCOVY 120-15MG TAB	5	QL=30 EA/30 Days
DESCOVY 200-25MG TAB	5	QL=30 EA/30 Days
DOVATO 50-300MG TAB	5	
EDURANT 25MG TAB	5	
<i>efavirenz 200mg cap</i>	2	
<i>efavirenz 50mg cap</i>	2	
<i>efavirenz 600mg tab</i>	2	
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	5	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	2	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	2	
<i>emtricitabine 200mg cap</i>	2	
<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	5	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	5	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	5	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	5	QL=30 EA/30 Days
EMTRIVA 10MG/ML ORAL SOLN	3	
<i>etravirine 100mg tab</i>	2	
<i>etravirine 200mg tab</i>	2	
EVOTAZ 300-150MG TAB	5	
<i>fosamprenavir 700mg tab</i>	5	
FUZEON 90MG INJ	5	
GENVOYA 150-150-200-10MG TAB	5	
INTELENCE 25MG TAB	3	
ISENTRESS 100MG CHEW TAB	3	
ISENTRESS 100MG GRANULES FOR ORAL SUSP	3	
ISENTRESS 25MG CHEW TAB	3	
ISENTRESS 400MG TAB	3	

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
ISENTRESS 600MG TAB	3	
JULUCA 50-25MG TAB	5	
<i>lamivudine 10mg/ml oral soln</i>	2	
<i>lamivudine 150mg tab</i>	2	
<i>lamivudine 300mg tab</i>	2	
<i>lamivudine/zidovudine 150-300mg tab</i>	2	
LEXIVA 50MG/ML SUSP	3	
<i>lopinavir/ritonavir 100-25mg tab</i>	2	
<i>lopinavir/ritonavir 200-50mg tab</i>	2	
<i>lopinavir/ritonavir 80-20mg/ml oral soln</i>	2	
<i>maraviroc 150mg tab</i>	5	
<i>maraviroc 300mg tab</i>	5	
NEVIRAPINE 100MG ER TAB	3	
NEVIRAPINE 10MG/ML SUSP	2	
<i>nevirapine 200mg tab</i>	2	
<i>nevirapine 400mg er tab</i>	2	
NORVIR 100MG ORAL POWDER	3	
ODEFSEY 200-25-25MG TAB	5	
PIFELTRO 100MG TAB	5	
PREZCOBIX 150-800MG TAB	5	
PREZISTA 100MG/ML SUSP	3	
PREZISTA 150MG TAB	3	
PREZISTA 600MG TAB	5	
PREZISTA 75MG TAB	3	
PREZISTA 800MG TAB	5	
REYATAZ 50MG ORAL POWDER	5	
<i>ritonavir 100mg tab</i>	2	
RUKOBIA 600MG ER TAB	5	
SELZENTRY 20MG/ML ORAL SOLN	5	
SELZENTRY 25MG TAB	3	
SELZENTRY 75MG TAB	5	
STRIBILD 150-150-200-300MG TAB	5	
SUNLENCA 300MG TAB 4-TABLET PACK	5	QL=4 EA/28 Days
SUNLENCA 300MG TAB 5-TABLET PACK	5	QL=5 EA/28 Days
SYMTUZA 150-800-200-10MG TAB	5	
<i>tenofovir disoproxil fumarate 300mg tab</i>	2	
TIVICAY 10MG TAB	3	
TIVICAY 25MG TAB	3	
TIVICAY 50MG TAB	5	
TIVICAY 5MG TAB FOR ORAL SUSP	3	
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	5	
TRIUMEQ 600-50-300MG TAB	5	
TRIZIVIR 300-150-300MG TAB	5	
TYBOST 150MG TAB	3	
VIRACEPT 250MG TAB	5	

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
VIRACEPT 625MG TAB	5	
VIREAD 150MG TAB	5	
VIREAD 200MG TAB	5	
VIREAD 250MG TAB	5	
VIREAD 40MG/GM ORAL POWDER	3	
<i>zidovudine 100mg cap</i>	2	
<i>zidovudine 10mg/ml oral soln</i>	2	
<i>zidovudine 300mg tab</i>	2	
CMV AGENTS		
LIVTENCITY 200MG TAB	5	NDS PA QL=120 EA/30 Days
PREVYMIS 240MG TAB	5	NDS PA QL=30 EA/30 Days
PREVYMIS 480MG TAB	5	NDS PA QL=30 EA/30 Days
<i>valganciclovir 450mg tab</i>	2	
<i>valganciclovir 50mg/ml oral soln</i>	5	NDS
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	2	
<i>entecavir 0.5mg tab</i>	2	
<i>entecavir 1mg tab</i>	2	
<i>lamivudine 100mg tab</i>	2	
MAVYRET 100-40MG TAB	5	NDS PA QL=90 EA/30 Days
MAVYRET 50-20MG ORAL PELLETT	5	NDS PA QL=150 EA/30 Days
PEGASYS 180MCG/0.5ML SYRINGE	5	NDS
PEGASYS 180MCG/ML INJ	5	NDS
<i>ribavirin 200mg cap</i>	2	
<i>ribavirin 200mg tab</i>	2	
SOFOSBUVIR/VELPATASVIR 400-100MG TAB	5	NDS PA QL=30 EA/30 Days
VEMLIDY 25MG TAB	5	NDS
VOSEVI 400-100-100MG TAB	5	NDS PA QL=30 EA/30 Days
HERPES AGENTS		
<i>acyclovir 200mg cap</i>	2	
<i>acyclovir 400mg tab</i>	2	
<i>acyclovir 40mg/ml susp</i>	2	
<i>acyclovir 50mg/ml inj</i>	2	PA BvD
<i>acyclovir 800mg tab</i>	2	
<i>famciclovir 125mg tab</i>	2	
<i>famciclovir 250mg tab</i>	2	
<i>famciclovir 500mg tab</i>	2	
<i>valacyclovir 1000mg tab</i>	2	
<i>valacyclovir 500mg tab</i>	2	
INFLUENZA AGENTS		
<i>oseltamivir 30mg cap</i>	2	QL=84 EA/180 Days
<i>oseltamivir 45mg cap</i>	2	QL=42 EA/180 Days
<i>oseltamivir 6mg/ml susp</i>	2	QL=540 ML/180 Days
<i>oseltamivir 75mg cap</i>	2	QL=42 EA/180 Days
RELENZA 5MG/BLISTER INHALER	3	QL=120 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RIMANTADINE 100MG TAB	3	
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>	2	
<i>labetalol 200mg tab</i>	2	
<i>labetalol 300mg tab</i>	2	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	2	
<i>acebutolol 400mg cap</i>	2	
<i>atenolol 100mg tab</i>	1	
<i>atenolol 25mg tab</i>	1	
<i>atenolol 50mg tab</i>	1	
<i>betaxolol 10mg tab</i>	2	
<i>betaxolol 20mg tab</i>	2	
<i>bisoprolol fumarate 10mg tab</i>	2	
<i>bisoprolol fumarate 5mg tab</i>	2	
<i>metoprolol succinate 100mg er tab</i>	2	
<i>metoprolol succinate 200mg er tab</i>	2	
<i>metoprolol succinate 25mg er tab</i>	2	
<i>metoprolol succinate 50mg er tab</i>	2	
<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>	2	
<i>nadolol 40mg tab</i>	2	
<i>nadolol 80mg tab</i>	2	
<i>pindolol 10mg tab</i>	2	
<i>pindolol 5mg tab</i>	2	
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	2	
<i>propranolol 160mg er cap</i>	2	
<i>propranolol 20mg tab</i>	1	
<i>propranolol 40mg tab</i>	1	
<i>propranolol 4mg/ml oral soln</i>	2	
<i>propranolol 60mg er cap</i>	2	
<i>propranolol 60mg tab</i>	1	
<i>propranolol 80mg er cap</i>	2	
<i>propranolol 80mg 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
PROPRANOLOL 8MG/ML ORAL SOLN	2	
<i>sorine 120mg tab</i>	2	
<i>sorine 160mg tab</i>	2	
<i>sorine 240mg tab</i>	2	
<i>sorine 80mg tab</i>	2	
<i>sotalol 120mg tab</i>	2	
<i>sotalol 160mg tab</i>	2	
<i>sotalol 240mg tab</i>	2	
<i>sotalol 80mg tab</i>	2	
<i>sotalol af 120mg tab</i>	2	
<i>sotalol af 160mg tab</i>	2	
<i>sotalol af 80mg tab</i>	2	
<i>timolol 10mg tab</i>	1	
<i>timolol 5mg tab</i>	1	
CALCIUM CHANNEL BLOCKERS		
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>	2	
<i>cartia 180mg er cap</i>	2	
<i>cartia 240mg er cap</i>	2	
<i>cartia 300mg er cap</i>	2	
<i>dilt 120mg er cap</i>	2	
<i>dilt 180mg er cap</i>	2	
<i>dilt 240mg er cap</i>	2	
<i>diltiazem 120mg er (12hr) cap</i>	2	
<i>diltiazem 120mg er (24hr) cap</i>	2	
<i>diltiazem 120mg tab</i>	2	
<i>diltiazem 180mg er (24hr) cap</i>	2	
<i>diltiazem 240mg er (24hr) cap</i>	2	
<i>diltiazem 300mg er (24hr) cap</i>	2	
<i>diltiazem 30mg tab</i>	2	
<i>diltiazem 360mg er (24hr) cap</i>	2	
<i>diltiazem 420mg er (24hr) cap</i>	2	
<i>diltiazem 60mg er (12hr) cap</i>	2	
<i>diltiazem 60mg tab</i>	2	
<i>diltiazem 90mg er (12hr) cap</i>	2	
<i>diltiazem 90mg tab</i>	2	
<i>felodipine 10mg er tab</i>	2	
<i>felodipine 2.5mg er tab</i>	2	
<i>felodipine 5mg er tab</i>	2	
<i>nicardipine 20mg cap</i>	2	
<i>nicardipine 30mg cap</i>	2	
<i>nifedipine 30mg er tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>nifedipine 30mg osmotic er tab</i>	2	
<i>nifedipine 60mg er tab</i>	2	
<i>nifedipine 60mg osmotic er tab</i>	2	
<i>nifedipine 90mg er tab</i>	2	
<i>nifedipine 90mg osmotic er tab</i>	2	
<i>taztia 120mg er cap</i>	2	
<i>taztia 180mg er cap</i>	2	
<i>taztia 240mg er cap</i>	2	
<i>taztia 300mg er cap</i>	2	
<i>taztia 360mg er cap</i>	2	
<i>tiadylt 120mg er cap</i>	2	
<i>tiadylt 180mg er cap</i>	2	
<i>tiadylt 240mg er cap</i>	2	
<i>tiadylt 300mg er cap</i>	2	
<i>tiadylt 360mg er cap</i>	2	
<i>tiadylt 420mg er cap</i>	2	
<i>verapamil 120mg er cap</i>	2	
<i>verapamil 120mg er tab</i>	2	
<i>verapamil 120mg tab</i>	1	
<i>verapamil 180mg er cap</i>	2	
<i>verapamil 180mg er tab</i>	2	
<i>verapamil 240mg er cap</i>	2	
<i>verapamil 240mg er tab</i>	2	
<i>verapamil 40mg tab</i>	1	
<i>verapamil 80mg tab</i>	1	
CARDIOTONICS		
CARDIAC GLYCOSIDES		
DIGOXIN 0.05MG/ML ORAL SOLN	2	
<i>digoxin 0.125mg tab</i>	2	
<i>digoxin 0.25mg tab</i>	2	
CARDIOVASCULAR AGENTS - MISC.		
CARDIAC MYOSIN INHIBITORS		
CAMZYOS 10MG CAP	5	NDS PA QL=30 EA/30 Days
CAMZYOS 15MG CAP	5	NDS PA QL=30 EA/30 Days
CAMZYOS 2.5MG CAP	5	NDS PA QL=30 EA/30 Days
CAMZYOS 5MG CAP	5	NDS PA QL=30 EA/30 Days
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
ENTRESTO 24-26MG TAB	3	QL=60 EA/30 Days
ENTRESTO 49-51MG TAB	3	QL=60 EA/30 Days
ENTRESTO 97-103MG TAB	3	QL=60 EA/30 Days
PROSTAGLANDIN VASODILATORS		
ORENITRAM 0.125MG ER TAB	4	PA
ORENITRAM 0.25MG ER TAB	5	NDS PA
ORENITRAM 1MG ER TAB	5	NDS PA
ORENITRAM 2.5MG ER TAB	5	NDS PA

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ORENITRAM 5MG ER TAB	5	NDS PA
ORENITRAM MONTH 1 TITRATION PACK	5	NDS PA
ORENITRAM MONTH 2 TITRATION PACK	5	NDS PA
ORENITRAM MONTH 3 TITRATION PACK	5	NDS PA
TYVASO 16-32-48MCG TITRATION PACK	5	NDS PA QL=252 EA/28 Days
TYVASO 16-32MCG TITRATION PACK	5	NDS PA QL=196 EA/28 Days
TYVASO 16MCG INH POWDER	5	NDS PA QL=112 EA/28 Days
TYVASO 32-48MCG MAINTENANCE PACK	5	NDS PA QL=224 EA/28 Days
TYVASO 32MCG INH POWDER	5	NDS PA QL=112 EA/28 Days
TYVASO 48MCG INH POWDER	5	NDS PA QL=112 EA/28 Days
TYVASO 64MCG INH POWDER	5	NDS PA QL=112 EA/28 Days
VENTAVIS 10MCG/ML INH SOLN	5	NDS PA QL=270 ML/30 Days
VENTAVIS 20MCG/ML INH SOLN	5	NDS PA QL=270 ML/30 Days
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<i>ambrisentan 10mg tab</i>	2	PA QL=30 EA/30 Days
<i>ambrisentan 5mg tab</i>	2	PA QL=30 EA/30 Days
<i>bosentan 125mg tab</i>	2	PA QL=60 EA/30 Days
<i>bosentan 62.5mg tab</i>	2	PA QL=60 EA/30 Days
OPSUMIT 10MG TAB	5	NDS PA QL=30 EA/30 Days
TRACLEER 32MG TAB FOR ORAL SUSP	5	NDS PA QL=120 EA/30 Days
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
<i>alyq 20mg tab</i>	2	PA
<i>sildenafil 20mg tab</i>	2	PA
<i>tadalafil 20mg tab</i>	2	PA
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI 1000MCG TAB	5	NDS PA QL=60 EA/30 Days
UPTRAVI 1200MCG TAB	5	NDS PA QL=60 EA/30 Days
UPTRAVI 1400MCG TAB	5	NDS PA QL=60 EA/30 Days
UPTRAVI 1600MCG TAB	5	NDS PA QL=60 EA/30 Days
UPTRAVI 200MCG TAB	5	NDS PA QL=60 EA/30 Days
UPTRAVI 400MCG TAB	5	NDS PA QL=60 EA/30 Days
UPTRAVI 600MCG TAB	5	NDS PA QL=60 EA/30 Days
UPTRAVI 800MCG TAB	5	NDS PA QL=60 EA/30 Days
UPTRAVI TAB TITRATION PACK	5	NDS PA QL=200 EA/28 Days
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		
ADEMPAS 0.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	5	NDS PA QL=90 EA/30 Days
SINUS NODE INHIBITORS		
CORLANOR 5MG TAB	4	PA
CORLANOR 5MG/5ML ORAL SOLN	4	PA
CORLANOR 7.5MG TAB	4	PA
TRANSTHYRETIN STABILIZERS		

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
VYNDAMAX 61MG CAP	5	NDS PA QL=30 EA/30 Days
VYNDAQEL 20MG CAP	5	NDS PA QL=120 EA/30 Days
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
CEFADROXIL 1000MG TAB	2	
<i>cefadroxil 100mg/ml susp</i>	2	
<i>cefadroxil 500mg cap</i>	2	
<i>cefadroxil 50mg/ml susp</i>	2	
<i>cefazolin 1000mg inj</i>	2	
<i>cefazolin 200mg/ml inj</i>	2	
<i>cefazolin 500mg inj</i>	2	
<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	
CEPHALOSPORINS - 2ND GENERATION		
CEFACLOR 250MG CAP	2	
CEFACLOR 500MG CAP	2	
CEFOTETAN 1GM INJ	2	
CEFOTETAN 2GM INJ	2	
<i>cefoxitin 1gm inj</i>	2	
<i>cefoxitin 200mg/ml inj</i>	2	
<i>cefoxitin 2gm inj</i>	2	
<i>cefprozil 250mg tab</i>	2	
<i>cefprozil 25mg/ml susp</i>	2	
<i>cefprozil 500mg tab</i>	2	
<i>cefprozil 50mg/ml susp</i>	2	
<i>cefuroxime 1500mg inj</i>	2	
<i>cefuroxime 250mg tab</i>	2	
<i>cefuroxime 500mg tab</i>	2	
<i>cefuroxime 750mg inj</i>	2	
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir 25mg/ml susp</i>	2	
<i>cefdinir 300mg cap</i>	2	
<i>cefdinir 50mg/ml susp</i>	2	
<i>cefixime 20mg/ml susp</i>	2	
<i>cefixime 400mg cap</i>	2	
<i>cefixime 40mg/ml susp</i>	2	
<i>cefpodoxime 100mg tab</i>	2	
<i>cefpodoxime 10mg/ml susp</i>	2	
<i>cefpodoxime 200mg tab</i>	2	
<i>cefpodoxime 20mg/ml susp</i>	2	
<i>ceftazidime 1gm inj</i>	2	
<i>ceftazidime 200mg/ml inj</i>	2	
<i>ceftazidime 2gm inj</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ceftriaxone 10gm inj</i>	2	
<i>ceftriaxone 1gm inj</i>	2	
<i>ceftriaxone 250mg inj</i>	2	
<i>ceftriaxone 2gm inj</i>	2	
<i>ceftriaxone 500mg inj</i>	2	
<i>tazicef 1gm inj</i>	2	
<i>tazicef 2gm inj</i>	2	
TAZICEF 6GM INJ	2	
CEPHALOSPORINS - 4TH GENERATION		
<i>cefepime 1000mg inj</i>	2	
<i>cefepime 2000mg inj</i>	2	
CEPHALOSPORINS - 5TH GENERATION		
TEFLARO 400MG INJ	5	NDS
TEFLARO 600MG INJ	5	NDS
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		
<i>altavera 28 day pack</i>	2	
<i>alyacen 1/35 pack</i>	2	
<i>amethia 91 day pack</i>	2	
<i>apri 28 day pack</i>	2	
<i>aranelle 28 pack</i>	2	
<i>ashlyna 91 day pack</i>	2	
<i>aubra 28 day pack</i>	2	
<i>aviane 28 pack</i>	2	
<i>balziva 28 day pack</i>	2	
<i>blisovi 21 fe 1.5/30 28 day pack</i>	2	
<i>blisovi 24 fe 1/20 28 day pack</i>	2	
<i>briellyn 28 day pack</i>	2	
<i>cryselle 28 pack</i>	2	
<i>cyred 28 day pack</i>	2	
<i>desogestrel/ethinyl estradiol/ethinyl estradiol 0.15-0.01-0.02mg 28 day pack</i>	2	
<i>desogestrel/ethinyl estradiol/inert ingredients 0.15-0.03-1mg pack</i>	2	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg pack</i>	2	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg pack</i>	2	
<i>enpresse 28 day pack</i>	2	
<i>enskyce 28 day pack</i>	2	
<i>estarylla 28 day pack</i>	2	
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	2	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.035-1-1mg pack</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.05-1-1mg pack</i>	2	
<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.025-75-0.8mg pack</i>	2	
<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.035-75-0.4mg pack</i>	2	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg 21 day pack</i>	2	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 1-20/1-30/1-35mg-mcg pack</i>	2	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg 28 day pack</i>	2	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg 28 daypack</i>	2	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg 91 day pack</i>	2	
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg pack</i>	2	
<i>ethinyl estradiol/inert ingredients/norgestimate/norgestimate/norgestimate 0.025-1-0.18-0.215-0.25mg</i>	2	
<i>ethinyl estradiol/inert ingredients/norgestimate/norgestimate/norgestimate 0.035-1-0.18-0.215-0.25mg</i>	2	
<i>ethinyl estradiol/levonorgestrel 91 day pack</i>	2	
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg pack</i>	2	
<i>falmina 28 day pack</i>	2	
<i>finzala 24 fe chewable 28 day pack</i>	2	
<i>hailey 24 fe 28 day pack</i>	2	
<i>iclevia 91 day pack</i>	2	
<i>introvale 91 day pack</i>	2	
<i>isibloom 28 day pack</i>	2	
<i>jasmiel 28 day pack</i>	2	
<i>juleber 28 day pack</i>	2	
<i>junel 1.5/30 21 day pack</i>	2	
<i>junel 1/20 21 day pack</i>	2	
<i>junel fe 1.5/30 28 day pack</i>	2	
<i>junel fe 1/20 28 day pack</i>	2	
<i>junel fe 24 1/20 28 day pack</i>	2	
<i>kaitlib fe 28 day pack</i>	2	
<i>kariva 28 day pack</i>	2	
<i>kelnor 1/35 28 day pack</i>	2	
<i>kelnor 1/50 28 day pack</i>	2	
<i>kurvelo pack</i>	2	
<i>larin 1.5/30 pack</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>larin 1/20 pack</i>	2	
<i>larin fe 1.5/30 pack</i>	2	
<i>larin fe 1/20 pack</i>	2	
<i>layolis fe 28 pack</i>	2	
<i>leena 28 day pack</i>	2	
<i>lessina 28 day pack</i>	2	
<i>levonest 28 day pack</i>	2	
<i>levonorgestrel-ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg pack</i>	2	
<i>levora 0.15/30 28 day pack</i>	2	
<i>loestrin fe 1/20 28 day pack</i>	2	
<i>loryna 28 day pack</i>	2	
<i>low-ogestrel 28 day pack</i>	2	
<i>lutra 28 day pack</i>	2	
<i>marlissa 28 day pack</i>	2	
<i>mibelas 24 fe chewable 28 day pack</i>	2	
<i>microgestin 1.5/30 21 day pack</i>	2	
<i>microgestin 1/20 21 day pack</i>	2	
<i>microgestin 24 fe 28 day pack</i>	2	
<i>microgestin fe 1.5/30 28 day pack</i>	2	
<i>microgestin fe 1/20 28 day pack</i>	2	
<i>mili 28 day pack</i>	2	
<i>necon 0.5/35 28 day pack</i>	2	
<i>nikki 28 day pack</i>	2	
<i>nortrel 0.5/35 28 day pack</i>	2	
<i>nortrel 1/35 21 day pack</i>	2	
<i>nortrel 1/35 28 day pack</i>	2	
<i>nortrel 7/7/7 28 day pack</i>	2	
<i>nylia 1/35 28 day pack</i>	2	
<i>nylia 7/7/7 28 day pack</i>	2	
<i>nymyo 28 day pack</i>	2	
<i>ocella 28 day pack</i>	2	
<i>pimtrea tab pack</i>	2	
<i>portia 28 day pack</i>	2	
<i>reclipsen 28 day pack</i>	2	
<i>rivelsa 91 day pack</i>	2	
<i>setlakin 91 day pack</i>	2	
<i>sprintec 28 day pack</i>	2	
<i>sronyx 28 day pack</i>	2	
<i>syeda 28 day pack</i>	2	
<i>tarina 24 fe 1/20 28 day pack</i>	2	
<i>tarina fe 1/20 28 day pack</i>	2	
<i>tilia fe pack</i>	2	
<i>tri-estarylla 28 day pack</i>	2	
<i>tri-legest 28 day pack</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tri-lo- estarylla 28 day pack</i>	2	
<i>tri-lo-sprintec 28 day pack</i>	2	
<i>tri-mili 28 day pack</i>	2	
<i>tri-nymyo 28 day pack</i>	2	
<i>tri-sprintec 28 day pack</i>	2	
<i>tri-vylibra 28 day pack</i>	2	
<i>tri-vylibra lo 28 day pack</i>	2	
<i>trivora 28 day pack</i>	2	
TYBLUME CHEW TAB 28 DAY PACK	3	
<i>velivet 28 day pack</i>	2	
<i>vestura 3-0.02mg pack</i>	2	
<i>vienva 28 day pack</i>	2	
<i>vyfemla 28 day pack</i>	2	
<i>vylibra 28 day pack</i>	2	
<i>wymzya fe 28 day pack</i>	2	
<i>zovia 1/35e 28 day pack</i>	2	
COMBINATION CONTRACEPTIVES - VAGINAL		
<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	2	
<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	2	
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA 150MG/ML INJ	4	QL=1 ML/84 Days
<i>medroxyprogesterone acetate 150mg/ml inj</i>	2	
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	2	
PROGESTIN CONTRACEPTIVES - ORAL		
<i>camila 28 day 0.35mg pack</i>	2	
<i>deblitane 0.35mg tab 28 day pack</i>	2	
<i>errin 28 day 0.35mg pack</i>	2	
<i>incassia 0.35mg 28 day pack</i>	2	
<i>lyleq 28 day 0.35mg pack</i>	2	
<i>lyza 0.35mg pack</i>	2	
<i>nora-be 28 day 0.35mg pack</i>	2	
<i>norethindrone 0.35mg pack</i>	2	
<i>sharobel 0.35mg 28 day pack</i>	2	
SLYND 4MG TAB PACK	4	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>budesonide 3mg dr cap</i>	2	
<i>budesonide 9mg er tab</i>	2	PA QL=30 EA/30 Days
DEXAMETHASONE 0.1MG/ML ORAL SOLN	2	
DEXAMETHASONE 0.5MG TAB	2	
<i>dexamethasone 0.75mg tab</i>	2	
<i>dexamethasone 1.5mg tab</i>	2	
DEXAMETHASONE 1MG TAB	2	
DEXAMETHASONE 2MG TAB	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dexamethasone 4mg tab</i>	2	
<i>dexamethasone 6mg tab</i>	2	
<i>hydrocortisone 10mg tab</i>	2	
<i>hydrocortisone 20mg tab</i>	2	
<i>hydrocortisone 5mg tab</i>	2	
<i>methylprednisolone 16mg tab</i>	2	PA BvD
<i>methylprednisolone 32mg tab</i>	2	PA BvD
<i>methylprednisolone 4mg pack</i>	2	
<i>methylprednisolone 4mg tab</i>	2	PA BvD
<i>methylprednisolone 8mg tab</i>	2	PA BvD
<i>prednisolone 1mg/ml oral soln</i>	2	PA BvD
<i>prednisolone 3mg/ml oral soln</i>	2	PA BvD
<i>prednisone 10mg tab</i>	1	PA BvD
<i>prednisone 1mg tab</i>	1	PA BvD
PREDNISON 1MG/ML ORAL SOLN	2	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>	2	
COUGH/COLD/ALLERGY		
MUCOLYTICS		
<i>acetylcysteine 100mg/ml inh soln</i>	2	PA BvD
<i>acetylcysteine 200mg/ml inh soln</i>	2	PA BvD
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>acutane 10mg cap</i>	2	
<i>acutane 20mg cap</i>	2	
<i>acutane 30mg cap</i>	2	
<i>acutane 40mg cap</i>	2	
<i>adapalene 0.3% gel</i>	2	PA QL=45 GM/30 Days
<i>amneestem 10mg cap</i>	2	
<i>amneestem 20mg cap</i>	2	
<i>amneestem 40mg cap</i>	2	
<i>avita 0.025% cream</i>	2	PA QL=45 GM/30 Days
<i>claravis 10mg cap</i>	2	
<i>claravis 20mg cap</i>	2	
<i>claravis 30mg cap</i>	2	
<i>claravis 40mg cap</i>	2	
<i>clindamycin 1% gel</i>	2	QL=75 GM/30 Days
<i>clindamycin 1% lotion</i>	2	QL=60 ML/30 Days
<i>clindamycin 1% topical soln</i>	2	QL=60 ML/30 Days
<i>clindamycin/benzoyl peroxide 1-5% gel</i>	2	QL=100 GM/30 Days
<i>erythromycin 2% gel</i>	2	QL=60 GM/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>erythromycin 2% topical soln</i>	2	QL=60 ML/30 Days
<i>erythromycin/benzoyl peroxide 5-3% gel</i>	2	QL=46.60 GM/30 Days
<i>isotretinoin 10mg cap</i>	2	
<i>isotretinoin 20mg cap</i>	2	
<i>isotretinoin 30mg cap</i>	2	
<i>isotretinoin 40mg cap</i>	2	
<i>sulfacetamide sodium 10% lotion</i>	2	QL=118 ML/30 Days
<i>tretinoin 0.01% gel</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.025% cream</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.025% gel</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.05% cream</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.05% gel</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.1% cream</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.1% gel</i>	2	PA QL=50 GM/30 Days
<i>zenatane 10mg cap</i>	2	
<i>zenatane 20mg cap</i>	2	
<i>zenatane 30mg cap</i>	2	
<i>zenatane 40mg cap</i>	2	
ANTIBIOTICS - TOPICAL		
<i>gentamicin 0.1% cream</i>	2	QL=30 GM/30 Days
<i>gentamicin 0.1% ointment</i>	2	QL=120 GM/30 Days
<i>mupirocin 2% ointment</i>	2	QL=220 GM/30 Days
ANTIFUNGALS - TOPICAL		
<i>ciclopirox 0.77% cream</i>	2	QL=90 GM/30 Days
<i>ciclopirox 0.77% gel</i>	2	QL=100 GM/30 Days
<i>ciclopirox 1% shampoo</i>	2	QL=120 ML/30 Days
<i>ciclopirox 8% topical soln</i>	2	QL=13.20 ML/30 Days
<i>clotrimazole 1% cream</i>	2	QL=45 GM/30 Days
<i>clotrimazole/betamethasone 1-0.05% cream</i>	2	QL=90 GM/30 Days
<i>clotrimazole/betamethasone 1-0.05% lotion</i>	2	QL=60 ML/30 Days
<i>econazole nitrate 1% cream</i>	2	QL=85 GM/30 Days
<i>ketoconazole 2% cream</i>	2	QL=120 GM/30 Days
<i>ketoconazole 2% shampoo</i>	2	QL=240 ML/30 Days
<i>nyamyc 100000unit/gm topical powder</i>	2	QL=60 GM/30 Days
<i>nystatin 100000 unit/gm ointment</i>	2	QL=30 GM/30 Days
<i>nystatin 100000unit/gm topical powder</i>	2	QL=60 GM/30 Days
<i>nystatin 100000unit/ml cream</i>	2	QL=30 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	2	QL=60 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	2	QL=60 GM/30 Days
<i>nystop 100000unit/gm topical powder</i>	2	QL=60 GM/30 Days
ANTI-INFLAMMATORY AGENTS - TOPICAL		
<i>diclofenac sodium 1% gel</i>	2	QL=1000 GM/30 Days
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>bexarotene 1% gel</i>	2	PA NSO QL=60 GM/30 Days
<i>diclofenac sodium 3% gel</i>	2	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	3	QL=10 ML/30 Days
<i>fluorouracil 5% cream</i>	2	QL=40 GM/30 Days
FLUOROURACIL 5% TOPICAL SOLN	3	QL=10 ML/30 Days
PANRETIN 0.1% GEL	5	NDS PA NSO
VALCHLOR 0.016% GEL	5	NDS PA NSO QL=240 GM/30 Days
ANTIPSORIATICS		
<i>acitretin 10mg cap</i>	2	
<i>acitretin 17.5mg cap</i>	2	
<i>acitretin 25mg cap</i>	2	
<i>calcipotriene 0.005% cream</i>	2	PA QL=120 GM/30 Days
<i>calcipotriene 0.005% ointment</i>	2	PA QL=120 GM/30 Days
<i>calcipotriene 0.005% topical soln</i>	2	PA QL=120 ML/30 Days
METHOXSALEN 10MG CAP	2	
SKYRIZI 150MG/ML AUTO-INJECTOR	5	PA QL=7 ML/365 Days
SKYRIZI 150MG/ML SYRINGE	5	PA QL=7 ML/365 Days
STELARA 45MG/0.5ML INJ	5	PA QL=.50 ML/28 Days
STELARA 45MG/0.5ML SYRINGE	5	PA QL=.50 ML/28 Days
STELARA 90MG/ML SYRINGE	5	PA QL=1 ML/28 Days
TALTZ 80MG/ML AUTO-INJECTOR	5	NDS PA QL=3 ML/28 Days
TALTZ 80MG/ML SYRINGE	5	NDS PA QL=3 ML/28 Days
<i>tazarotene 0.1% cream</i>	2	PA QL=60 GM/30 Days
TREMFYA 100MG/ML AUTO-INJECTOR	5	NDS PA QL=2 ML/28 Days
TREMFYA 100MG/ML SYRINGE	5	NDS PA QL=2 ML/28 Days
ZORYVE 0.3% CREAM	3	PA QL=60 GM/30 Days
ANTISEBORRHEIC PRODUCTS		
<i>selenium sulfide 2.5% shampoo</i>	2	
ANTIVIRALS - TOPICAL		
<i>acyclovir 5% ointment</i>	2	QL=30 GM/30 Days
BURN PRODUCTS		
<i>silver sulfadiazine 1% cream</i>	2	
<i>ssd 1% cream</i>	2	
SULFAMYLON 85MG/GM CREAM	3	QL=453.60 GM/30 Days
CORTICOSTEROIDS - TOPICAL		
<i>ala-cort 1% cream</i>	2	QL=240 GM/30 Days
<i>ala-cort 2.5% cream</i>	2	QL=454 GM/30 Days
<i>alclometasone dipropionate 0.05% cream</i>	2	QL=120 GM/30 Days
<i>alclometasone dipropionate 0.05% ointment</i>	2	QL=120 GM/30 Days
<i>betamethasone 0.05% aug cream</i>	2	QL=100 GM/30 Days
<i>betamethasone 0.05% aug lotion</i>	2	QL=120 ML/30 Days
<i>betamethasone 0.05% aug ointment</i>	2	QL=100 GM/30 Days
<i>betamethasone 0.05% cream</i>	2	QL=90 GM/30 Days
<i>betamethasone 0.05% lotion</i>	2	QL=120 ML/30 Days
<i>betamethasone 0.05% ointment</i>	2	QL=90 GM/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>betamethasone 0.1% cream</i>	2	QL=180 GM/30 Days
<i>betamethasone 0.1% lotion</i>	2	QL=120 ML/30 Days
<i>betamethasone 0.1% ointment</i>	2	QL=180 GM/30 Days
<i>clobetasol propionate 0.05% cream</i>	2	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% e cream</i>	2	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% foam</i>	2	QL=100 GM/30 Days
<i>clobetasol propionate 0.05% gel</i>	2	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% lotion</i>	2	QL=118 ML/30 Days
<i>clobetasol propionate 0.05% ointment</i>	2	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% shampoo</i>	2	QL=236 ML/30 Days
<i>clobetasol propionate 0.05% topical soln</i>	2	QL=100 ML/30 Days
<i>clobetasol propionate 0.05% topical spray</i>	2	QL=125 ML/30 Days
<i>clodan 0.05% shampoo</i>	2	QL=236 ML/30 Days
<i>desonide 0.05% ointment</i>	2	QL=120 GM/30 Days
<i>desoximetasone 0.25% cream</i>	2	QL=120 GM/30 Days
<i>desoximetasone 0.25% ointment</i>	2	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% cream</i>	2	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% oil</i>	2	QL=120 ML/30 Days
<i>fluocinolone acetonide 0.01% topical soln</i>	2	QL=90 ML/30 Days
<i>fluocinolone acetonide 0.025% cream</i>	2	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.025% ointment</i>	2	QL=120 GM/30 Days
<i>fluocinonide 0.05% cream</i>	2	QL=60 GM/30 Days
<i>fluocinonide 0.05% e cream</i>	2	QL=120 GM/30 Days
<i>fluocinonide 0.05% gel</i>	2	QL=60 GM/30 Days
<i>fluocinonide 0.05% ointment</i>	2	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical soln</i>	2	QL=60 ML/30 Days
<i>fluocinonide 0.1% cream</i>	2	QL=60 GM/30 Days
<i>fluticasone propionate 0.005% ointment</i>	2	QL=240 GM/30 Days
<i>fluticasone propionate 0.05% cream</i>	2	QL=240 GM/30 Days
<i>halobetasol propionate 0.05% cream</i>	2	QL=50 GM/30 Days
<i>halobetasol propionate 0.05% ointment</i>	2	QL=50 GM/30 Days
<i>hydrocortisone 1% cream</i>	2	QL=240 GM/30 Days
<i>hydrocortisone 2.5% lotion</i>	2	QL=118 ML/30 Days
<i>hydrocortisone 2.5% ointment</i>	2	QL=240 GM/30 Days
<i>mometasone furoate 0.1% cream</i>	2	QL=180 GM/30 Days
<i>mometasone furoate 0.1% lotion</i>	2	QL=180 ML/30 Days
<i>mometasone furoate 0.1% ointment</i>	2	QL=180 GM/30 Days
<i>triamcinolone acetonide 0.025% cream</i>	2	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.025% lotion</i>	2	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.025% ointment</i>	2	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% cream</i>	2	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% lotion</i>	2	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.1% ointment</i>	2	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% cream</i>	2	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% ointment</i>	2	QL=120 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>triderm 0.1% cream</i>	2	QL=454 GM/30 Days
<i>triderm 0.5% cream</i>	2	QL=454 GM/30 Days
ECZEMA AGENTS		
ADBRY 150MG/ML SYRINGE	5	NDS PA
CIBINQO 100MG TAB	5	NDS PA QL=30 EA/30 Days
CIBINQO 200MG TAB	5	NDS PA QL=30 EA/30 Days
CIBINQO 50MG TAB	5	NDS PA QL=30 EA/30 Days
DUPIXENT 100MG/0.67ML SYRINGE	5	NDS PA
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	5	NDS PA
DUPIXENT 200MG/1.14ML SYRINGE	5	NDS PA
DUPIXENT 300MG/2ML AUTO-INJECTOR	5	NDS PA
DUPIXENT 300MG/2ML SYRINGE	5	NDS PA
EMOLLIENTS		
<i>ammonium lactate 12% cream</i>	2	
<i>ammonium lactate 12% lotion</i>	2	
ENZYMES - TOPICAL		
SANTYL 250UNIT/GM OINTMENT	3	QL=90 GM/30 Days
IMMUNOMODULATING AGENTS - TOPICAL		
<i>imiquimod 5% cream</i>	2	QL=24 EA/30 Days
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus 1% cream</i>	2	QL=100 GM/30 Days
<i>tacrolimus 0.03% ointment</i>	2	QL=100 GM/30 Days
<i>tacrolimus 0.1% ointment</i>	2	QL=100 GM/30 Days
KERATOLYTIC/ANTIMITOTIC AGENTS		
<i>podofilox 0.5% topical soln</i>	2	QL=7 ML/30 Days
LOCAL ANESTHETICS - TOPICAL		
<i>lidocaine 4% topical soln</i>	2	QL=50 ML/30 Days
<i>lidocaine 5% ointment</i>	2	PA QL=107 GM/30 Days
<i>lidocaine 5% patch</i>	2	PA QL=90 EA/30 Days
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	2	QL=30 GM/30 Days
ROSACEA AGENTS		
<i>azelaic acid 15% gel</i>	2	QL=50 GM/30 Days
<i>metronidazole 0.75% cream</i>	2	QL=45 GM/30 Days
<i>metronidazole 0.75% gel</i>	2	QL=45 GM/30 Days
<i>metronidazole 1% gel</i>	2	QL=60 GM/30 Days
SCABICIDES & PEDICULICIDES		
<i>malathion 0.5% lotion</i>	2	
<i>permethrin 5% cream</i>	2	
WOUND CARE PRODUCTS		
REGANEX 0.01% GEL	3	PA QL=30 GM/15 Days
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON 120000-24000-76000UNIT DR CAP	3	
CREON 15000-3000-9500UNIT DR CAP	3	
CREON 180000-36000-114000UNIT DR CAP	3	

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
CREON 30000-6000-19000UNIT DR CAP	3	
CREON 60000-12000-38000UNIT DR CAP	3	
SUCRAID 8500UNIT/ML ORAL SOLN	5	NDS PA
ZENPEP 105000-25000-79000UNIT DR CAP	4	ST
ZENPEP 14000-3000-10000UNIT DR CAP	4	ST
ZENPEP 24000-5000-17000UNIT DR CAP	4	ST
ZENPEP 40000-126000-168000UNIT DR CAP	4	ST
ZENPEP 42000-10000-32000UNIT DR CAP	4	ST
ZENPEP 63000-15000-47000UNIT DR CAP	4	ST
ZENPEP 84000-20000-63000UNIT DR CAP	4	ST
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide 125mg tab</i>	2	
<i>acetazolamide 250mg tab</i>	2	
<i>acetazolamide 500mg er cap</i>	2	
<i>methazolamide 25mg tab</i>	2	
<i>methazolamide 50mg tab</i>	2	
DIURETIC COMBINATIONS		
<i>amiloride/hydrochlorothiazide 5-50mg tab</i>	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>	2	
<i>bumetanide 1mg tab</i>	2	
<i>bumetanide 2mg tab</i>	2	
FUROSCIX 80MG/10ML CARTRIDGE	5	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	2	
<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	2	
<i>torseamide 100mg tab</i>	2	
<i>torseamide 10mg tab</i>	2	
<i>torseamide 20mg tab</i>	2	
<i>torseamide 5mg tab</i>	2	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	2	
<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	

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>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	
<i>metolazone 10mg tab</i>	2	
<i>metolazone 2.5mg tab</i>	2	
<i>metolazone 5mg tab</i>	2	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
<i>alendronate sodium 10mg tab</i>	1	
<i>alendronate sodium 35mg tab</i>	1	
<i>alendronate sodium 70mg tab</i>	1	
<i>alendronate sodium 70mg/75ml oral soln</i>	2	
FORTEO 600MCG/2.4ML PEN INJ	5	NDS PA QL=2.40 ML/28 Days
<i>ibandronate 150mg tab</i>	2	ST QL=1 EA/30 Days
NATPARA 100MCG CARTRIDGE	5	NDS PA
NATPARA 25MCG CARTRIDGE	5	NDS PA
NATPARA 50MCG CARTRIDGE	5	NDS PA
NATPARA 75MCG CARTRIDGE	5	NDS PA
PROLIA 60MG/ML SYRINGE	4	PA QL=1 ML/168 Days
<i>risedronate sodium 150mg tab</i>	2	
<i>risedronate sodium 30mg tab</i>	2	ST
<i>risedronate sodium 35mg tab</i>	2	ST
<i>risedronate sodium 35mg tab (12) pack</i>	2	ST
<i>risedronate sodium 35mg tab (4) pack</i>	2	ST
<i>risedronate sodium 5mg tab</i>	2	ST
<i>salmon calcitonin 200unit/act nasal spray</i>	2	
TYMLOS 3120MCG/1.56ML PEN INJ	5	NDS PA QL=1.56 ML/30 Days
XGEVA 120MG/1.7ML INJ	5	NDS PA QL=1.70 ML/28 Days
GNRH/LHRH ANTAGONISTS		
ORILISSA 150MG TAB	3	PA QL=30 EA/30 Days
ORILISSA 200MG TAB	3	PA QL=60 EA/30 Days
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT 10MG INJ	5	NDS PA
SOMAVERT 15MG INJ	5	NDS PA
SOMAVERT 20MG INJ	5	NDS PA
SOMAVERT 25MG INJ	5	NDS PA
SOMAVERT 30MG INJ	5	NDS PA
GROWTH HORMONES		
GENOTROPIN 0.2MG SYRINGE	5	NDS PA
GENOTROPIN 0.4MG SYRINGE	5	NDS PA
GENOTROPIN 0.6MG SYRINGE	5	NDS PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GENOTROPIN 0.8MG SYRINGE	5	NDS PA
GENOTROPIN 1.2MG SYRINGE	5	NDS PA
GENOTROPIN 1.4MG SYRINGE	5	NDS PA
GENOTROPIN 1.6MG SYRINGE	5	NDS PA
GENOTROPIN 1.8MG SYRINGE	5	NDS PA
GENOTROPIN 12MG CARTRIDGE	5	NDS PA
GENOTROPIN 1MG SYRINGE	5	NDS PA
GENOTROPIN 2MG SYRINGE	5	NDS PA
GENOTROPIN 5MG CARTRIDGE	5	NDS PA
HORMONE RECEPTOR MODULATORS		
OSPHENA 60MG TAB	4	PA
<i>raloxifene 60mg tab</i>	2	QL=30 EA/30 Days
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX 40MG/4ML INJ	5	NDS PA
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
LUPRON 11.25MG INJ PED KIT (3 MONTH)	5	QL=1 EA/84 Days
LUPRON 7.5MG INJ PED KIT (1 MONTH)	5	NDS QL=1 EA/28 Days
SYNAREL 2MG/ML NASAL INHALER	5	NDS PA
METABOLIC MODIFIERS		
<i>calcitriol 0.25mcg cap</i>	2	PA BvD
<i>calcitriol 0.5mcg cap</i>	2	PA BvD
<i>calcitriol 1mcg/ml oral soln</i>	2	PA BvD
<i>carglumic acid 200mg tab for oral susp</i>	2	PA
<i>cinacalcet 30mg tab</i>	2	PA BvD
<i>cinacalcet 60mg tab</i>	2	PA BvD
<i>cinacalcet 90mg tab</i>	2	PA BvD
<i>doxercalciferol 0.05mcg cap</i>	2	PA BvD
<i>doxercalciferol 1mcg cap</i>	2	PA BvD
<i>doxercalciferol 2.5mcg cap</i>	2	PA BvD
GALAFOLD 123MG 28 DAY PACK	5	NDS PA QL=15 EA/30 Days
<i>javygtor 100mg powder for oral soln</i>	2	PA
<i>javygtor 100mg tab</i>	2	PA
<i>javygtor 500mg powder for oral soln</i>	2	PA
<i>levocarnitine 100mg/ml oral soln</i>	2	PA BvD
<i>levocarnitine 330mg tab</i>	2	PA BvD
<i>nitisinone 10mg cap</i>	5	NDS PA
<i>nitisinone 20mg cap</i>	5	NDS PA
<i>nitisinone 2mg cap</i>	5	NDS PA
<i>nitisinone 5mg cap</i>	5	NDS PA
ORFADIN 20MG CAP	5	NDS PA
ORFADIN 4MG/ML SUSP	5	NDS PA
PALYNZIQ 10MG/0.5ML SYRINGE	5	NDS PA
PALYNZIQ 2.5MG/0.5ML SYRINGE	5	NDS PA
PALYNZIQ 20MG/ML SYRINGE	5	NDS PA
<i>paricalcitol 1mcg cap</i>	2	PA BvD

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>paricalcitol 2mcg cap</i>	2	PA BvD
<i>paricalcitol 4mcg cap</i>	2	PA BvD
PHEBURANE 483MG/GM ORAL PELLETT	5	NDS
RAVICTI 1.1GM/ML ORAL SOLN	5	NDS PA
<i>sapropterin 100mg powder for oral soln</i>	2	PA
<i>sapropterin 100mg tab</i>	2	PA
<i>sapropterin 500mg powder for oral soln</i>	2	PA
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA 10MG TAB	4	PA QL=30 EA/30 Days
KERENDIA 20MG TAB	4	PA QL=30 EA/30 Days
NATRIURETIC PEPTIDES		
VOXZOGO 0.4MG INJ	5	NDS PA QL=30 EA/30 Days
VOXZOGO 0.56MG INJ	5	NDS PA QL=30 EA/30 Days
VOXZOGO 1.2MG INJ	5	NDS PA QL=30 EA/30 Days
POSTERIOR PITUITARY HORMONES		
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	2	
<i>desmopressin acetate 0.1mg tab</i>	2	
<i>desmopressin acetate 0.2mg tab</i>	2	
PROLACTIN INHIBITORS		
<i>cabergoline 0.5mg tab</i>	2	
SOMATOSTATIC AGENTS		
<i>octreotide 0.05mg/ml inj</i>	2	PA
<i>octreotide 0.1mg/ml inj</i>	2	PA
<i>octreotide 0.2mg/ml inj</i>	2	PA
<i>octreotide 0.5mg/ml inj</i>	2	PA
<i>octreotide 1mg/ml inj</i>	2	PA
SIGNIFOR 0.3MG/ML INJ	5	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.6MG/ML INJ	5	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.9MG/ML INJ	5	NDS PA QL=60 ML/30 Days
VASOPRESSIN RECEPTOR ANTAGONISTS		
JYNARQUE 15MG TAB	5	NDS PA QL=120 EA/30 Days
JYNARQUE 30MG TAB	5	NDS PA QL=120 EA/30 Days
JYNARQUE TAB 15/15 CARTON PACK (56)	5	NDS PA QL=60 EA/30 Days
JYNARQUE TAB 30/15 CARTON PACK (28)	5	NDS PA QL=60 EA/30 Days
JYNARQUE TAB 45/15 CARTON PACK (28)	5	NDS PA QL=60 EA/30 Days
JYNARQUE TAB 60/30 CARTON PACK (28)	5	NDS PA QL=60 EA/30 Days
JYNARQUE TAB 90/30 CARTON PACK (28)	5	NDS PA QL=60 EA/30 Days
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>amabelz 0.5/0.1mg 28 day pack</i>	2	
<i>amabelz 1/0.5mg 28 day pack</i>	2	
<i>estradiol/norethindrone acetate 0.5-0.1mg pack</i>	2	
<i>estradiol/norethindrone acetate 1-0.5mg pack</i>	2	
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg pack</i>	2	
<i>fyavolv 0.0025-0.5mg tab</i>	2	
<i>fyavolv 0.005-1mg tab</i>	2	
<i>jinteli 0.005-1mg tab</i>	2	
<i>mimvey pack</i>	2	
MYFEMBREE 1-0.5-40MG TAB	3	PA QL=30 EA/30 Days
ORIAHNN 28 DAY KIT PACK	3	PA QL=56 EA/28 Days
PREMPHASE 28 DAY PACK	3	
PREMPRO 0.3/1.5MG 28 DAY PACK	3	
PREMPRO 0.45/1.5MG 28 DAY PACK	3	
PREMPRO 0.625/2.5MG 28 DAY PACK	3	
PREMPRO 0.625/5MG 28 DAY PACK	3	
ESTROGENS		
<i>dotti 0.025mg/24hr patch</i>	2	
<i>dotti 0.0375mg/24hr patch</i>	2	
<i>dotti 0.05mg/24hr patch</i>	2	
<i>dotti 0.075mg/24hr patch</i>	2	
<i>dotti 0.1mg/24hr patch</i>	2	
<i>estradiol 0.00104mg/hr twice weekly patch</i>	2	
<i>estradiol 0.00104mg/hr weekly patch</i>	2	
<i>estradiol 0.00156mg/hr twice weekly patch</i>	2	
<i>estradiol 0.00156mg/hr weekly patch</i>	2	
<i>estradiol 0.00208mg/hr twice weekly patch</i>	2	
<i>estradiol 0.00208mg/hr weekly patch</i>	2	
<i>estradiol 0.0025mg/hr weekly patch</i>	2	
<i>estradiol 0.00312mg/hr weekly patch</i>	2	
<i>estradiol 0.00313mg/hr twice weekly patch</i>	2	
<i>estradiol 0.00417mg/hr twice weekly patch</i>	2	
<i>estradiol 0.00417mg/hr weekly patch</i>	2	
<i>estradiol 0.5mg tab</i>	2	
<i>estradiol 1mg tab</i>	2	
<i>estradiol 2mg tab</i>	2	
<i>estradiol valerate 10mg/ml inj</i>	2	
<i>estradiol valerate 20mg/ml inj</i>	2	
<i>estradiol valerate 40mg/ml inj</i>	2	
<i>lyllana 0.025mg/24hr patch</i>	2	
<i>lyllana 0.0375mg/24hr patch</i>	2	
<i>lyllana 0.05mg/24hr patch</i>	2	
<i>lyllana 0.075mg/24hr patch</i>	2	
<i>lyllana 0.1mg/24hr patch</i>	2	
PREMARIN 0.3MG TAB	3	
PREMARIN 0.45MG TAB	3	
PREMARIN 0.625MG TAB	3	
PREMARIN 0.9MG TAB	3	

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
PREMARIN 1.25MG TAB	3	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
BAXDELA 450MG TAB	3	PA QL=60 EA/30 Days
<i>ciprofloxacin 250mg tab</i>	1	
<i>ciprofloxacin 2mg/ml inj</i>	2	
<i>ciprofloxacin 500mg tab</i>	1	
<i>ciprofloxacin 750mg tab</i>	1	
<i>levofloxacin 250mg tab</i>	1	
<i>levofloxacin 25mg/ml oral soln</i>	2	
<i>levofloxacin 500mg tab</i>	1	
<i>levofloxacin 500mg/100ml inj</i>	2	
<i>levofloxacin 750mg tab</i>	1	
<i>levofloxacin 750mg/150ml inj</i>	2	
MOXIFLOXACIN 1.6MG/ML INJ	2	
<i>moxifloxacin 400mg tab</i>	2	
<i>ofloxacin 400mg tab</i>	2	
GASTROINTESTINAL AGENTS - MISC.		
AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)		
TRULANCE 3MG TAB	3	
BILE ACID SYNTHESIS DISORDER AGENTS		
CHOLBAM 250MG CAP	5	NDS PA
CHOLBAM 50MG CAP	5	NDS PA
FARNESOID X RECEPTOR (FXR) AGONISTS		
OCALIVA 10MG TAB	5	NDS PA QL=30 EA/30 Days
OCALIVA 5MG TAB	5	NDS PA QL=30 EA/30 Days
GALLSTONE SOLUBILIZING AGENTS		
CHENODAL 250MG TAB	5	NDS
<i>ursodiol 250mg tab</i>	2	
<i>ursodiol 300mg cap</i>	2	
<i>ursodiol 500mg tab</i>	2	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium 20mg/ml oral soln</i>	2	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone 24mcg cap</i>	2	QL=60 EA/30 Days
<i>lubiprostone 8mcg cap</i>	2	QL=60 EA/30 Days
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide 10mg tab</i>	2	
<i>metoclopramide 1mg/ml oral soln</i>	2	
<i>metoclopramide 5mg tab</i>	2	
ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS		
BYLVAY 1200MCG CAP	5	NDS PA QL=150 EA/30 Days
BYLVAY 200MCG ORAL PELLETT	5	NDS PA QL=240 EA/30 Days
BYLVAY 400MCG CAP	5	NDS PA QL=450 EA/30 Days
BYLVAY 600MCG ORAL PELLETT	5	NDS PA QL=120 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LIVMARLI 9.5MG/ML ORAL SOLN	5	NDS PA QL=90 ML/30 Days
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium 750mg cap</i>	2	
CIMZIA 200MG INJ	5	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE	5	NDS PA QL=2 EA/28 Days
<i>mesalamine 1000mg rectal supp</i>	2	
<i>mesalamine 375mg er cap</i>	2	
<i>mesalamine 66.7mg/ml enema</i>	2	
SKYRIZI 180MG/1.2ML CARTRIDGE	5	PA QL=1.20 ML/56 Days
SKYRIZI 360MG/2.4ML CARTRIDGE	5	PA QL=2.40 ML/56 Days
<i>sulfasalazine 500mg dr tab</i>	2	
<i>sulfasalazine 500mg tab</i>	2	
INTESTINAL ACIDIFIERS		
<i>enulose 10gm/15ml oral soln</i>	2	
<i>generlac 10gm/15ml oral soln</i>	2	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>alosetron 0.5mg tab</i>	2	
<i>alosetron 1mg tab</i>	2	
VIBERZI 100MG TAB	4	PA
VIBERZI 75MG TAB	4	PA
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK 12.5MG TAB	3	PA
MOVANTIK 25MG TAB	3	PA
RELISTOR 12MG/0.6ML INJ	4	PA
RELISTOR 12MG/0.6ML SYRINGE	4	PA
RELISTOR 8MG/0.4ML SYRINGE	4	PA
SYMPROIC 0.2MG TAB	3	PA
PHOSPHATE BINDER AGENTS		
AURYXIA 210MG TAB	4	PA
<i>calcium acetate 667mg cap</i>	2	
FOSRENOL 1000MG ORAL POWDER	3	
FOSRENOL 750MG ORAL POWDER	3	
<i>lanthanum carbonate 1000mg chew tab</i>	2	
<i>lanthanum carbonate 500mg chew tab</i>	2	
<i>lanthanum carbonate 750mg chew tab</i>	2	
<i>sevelamer carbonate 2400mg powder for oral susp</i>	2	
<i>sevelamer carbonate 800mg powder for oral susp</i>	2	
<i>sevelamer carbonate 800mg tab</i>	2	
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX 5MG INJ	5	NDS PA
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO 250MG TAB	5	NDS PA QL=90 EA/30 Days
GENITOURINARY AGENTS - MISCELLANEOUS		
ALKALINIZERS		
<i>potassium citrate 10meq er tab</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>potassium citrate 15meq er tab</i>	2	
<i>potassium citrate 5meq er tab</i>	2	
CYSTINOSIS AGENTS		
CYSTAGON 150MG CAP	3	
CYSTAGON 50MG CAP	3	
GENTOURINARY IRRIGANTS		
<i>sodium chloride 0.9% irrigation soln</i>	2	
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON 100MG CAP	3	
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	2	
<i>dutasteride 0.5mg cap</i>	2	
<i>finasteride 5mg tab</i>	1	
<i>tamsulosin 0.4mg cap</i>	1	
URINARY STONE AGENTS		
<i>tiopronin 100mg tab</i>	2	
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine/probenecid 0.5-500mg tab</i>	2	
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	2	
<i>allopurinol 300mg tab</i>	2	
<i>colchicine 0.6mg tab</i>	2	
<i>febuxostat 40mg tab</i>	2	ST
<i>febuxostat 80mg tab</i>	2	ST
URICOSURICS		
<i>probenecid 500mg tab</i>	2	
HEMATOLOGICAL AGENTS - MISC.		
BRADYKININ B2 RECEPTOR ANTAGONISTS		
<i>icatibant 10mg/ml syringe</i>	2	PA
<i>sajazir 30mg/3ml syringe</i>	2	PA
COMPLEMENT INHIBITORS		
BERINERT 500UNIT INJ	5	NDS PA
CINRYZE 500UNIT INJ	5	NDS PA
HAEGARDA 2000UNIT INJ	5	NDS PA
HAEGARDA 3000UNIT INJ	5	NDS PA
RUCONEST 2100UNIT INJ	5	NDS PA
TAVNEOS 10MG CAP	5	NDS PA QL=180 EA/30 Days
HEMATAOLOGIC - TYROSINE KINASE INHIBITORS		
TAVALISSE 100MG TAB	5	NDS PA QL=60 EA/30 Days
TAVALISSE 150MG TAB	5	NDS PA QL=60 EA/30 Days
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline 400mg er tab</i>	2	
PLASMA KALLIKREIN INHIBITORS		
TAKHZYRO 300MG/2ML INJ	5	NDS PA QL=4 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
TAKHZYRO 300MG/2ML SYRINGE	5	NDS PA QL=4 ML/28 Days
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide 0.5mg cap</i>	2	
<i>anagrelide 1mg cap</i>	2	
<i>aspirin/dipyridamole 25-200mg er cap</i>	2	
BRILINTA 60MG TAB	3	
BRILINTA 90MG TAB	3	
CABLIVI 11MG INJ	5	NDS PA QL=30 EA/30 Days
<i>cilostazol 100mg tab</i>	2	
<i>cilostazol 50mg tab</i>	2	
<i>clopidogrel 75mg tab</i>	1	
<i>prasugrel 10mg tab</i>	2	
<i>prasugrel 5mg tab</i>	2	
PYRUVATE KINASE ACTIVATORS		
PYRUKYND 20MG TAB (4-WEEK PACK)	5	NDS PA QL=56 EA/28 Days
PYRUKYND 20MG/50MG TAB TAPER PACK	5	NDS PA QL=14 EA/14 Days
PYRUKYND 50MG TAB (4-WEEK PACK)	5	NDS PA QL=56 EA/28 Days
PYRUKYND 5MG TAB (4-WEEK PACK)	5	NDS PA QL=56 EA/28 Days
PYRUKYND 5MG TAB TAPER PACK	5	NDS PA QL=7 EA/7 Days
PYRUKYND 5MG/20MG TAB TAPER PACK	5	NDS PA QL=14 EA/14 Days
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA 84MG CAP	5	NDS PA QL=60 EA/30 Days
<i>miglustat 100mg cap</i>	5	NDS PA
AGENTS FOR SICKLE CELL DISEASE		
DROXIA 200MG CAP	3	
DROXIA 300MG CAP	3	
DROXIA 400MG CAP	3	
ENDARI 5GM POWDER FOR ORAL SOLN	5	NDS PA QL=180 EA/30 Days
OXBRYTA 300MG TAB	5	NDS PA QL=90 EA/30 Days
OXBRYTA 300MG TAB FOR ORAL SUSP	5	NDS PA QL=150 EA/30 Days
OXBRYTA 500MG TAB	5	NDS PA QL=150 EA/30 Days
HEMATOPOIETIC GROWTH FACTORS		
DOPTELET 20MG TAB	5	NDS PA QL=60 EA/30 Days
DOPTELET TAB 40MG DAILY DOSE PACK	5	NDS PA QL=10 EA/5 Days
DOPTELET TAB 60MG DAILY DOSE PACK	5	NDS PA QL=15 EA/5 Days
NIVESTYM 300MCG/0.5ML SYRINGE	5	NDS
NIVESTYM 300MCG/ML INJ	5	NDS
NIVESTYM 480MCG/0.8ML SYRINGE	5	NDS
NIVESTYM 480MCG/1.6ML INJ	5	NDS
PROMACTA 12.5MG POWDER FOR ORAL SUSP	5	NDS PA
PROMACTA 12.5MG TAB	5	NDS PA QL=30 EA/30 Days
PROMACTA 25MG POWDER FOR ORAL SUSP	5	NDS PA
PROMACTA 25MG TAB	5	NDS PA QL=30 EA/30 Days
PROMACTA 50MG TAB	5	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
PROMACTA 75MG TAB	5	NDS PA QL=60 EA/30 Days
RETACRIT 10000UNIT/ML INJ	3	PA
RETACRIT 20000UNIT/2ML INJ	3	PA
RETACRIT 20000UNIT/ML INJ	3	PA
RETACRIT 2000UNIT/ML INJ	3	PA
RETACRIT 3000UNIT/ML INJ	3	PA
RETACRIT 40000UNIT/ML INJ	3	PA
RETACRIT 4000UNIT/ML INJ	3	PA
UDENYCA 6MG/0.6ML AUTO-INJECTOR	5	NDS
UDENYCA 6MG/0.6ML SYRINGE	5	NDS
ZARXIO 300MCG/0.5ML SYRINGE	5	NDS
ZARXIO 480MCG/0.8ML SYRINGE	5	NDS
ZIEXTENZO 6MG/0.6ML SYRINGE	5	NDS
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>tranexamic acid 650mg tab</i>	2	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
<i>phenobarbital 100mg tab</i>	2	
<i>phenobarbital 15mg tab</i>	2	
<i>phenobarbital 16.2mg tab</i>	2	
<i>phenobarbital 30mg tab</i>	2	
<i>phenobarbital 32.4mg tab</i>	2	
<i>phenobarbital 4mg/ml oral soln</i>	2	
<i>phenobarbital 60mg tab</i>	2	
<i>phenobarbital 64.8mg tab</i>	2	
<i>phenobarbital 97.2mg tab</i>	2	
NON-BARBITURATE HYPNOTICS		
<i>estazolam 2mg tab</i>	2	QL=30 EA/30 Days
<i>eszopiclone 1mg tab</i>	2	PA QL=30 EA/30 Days
<i>eszopiclone 2mg tab</i>	2	PA QL=30 EA/30 Days
<i>eszopiclone 3mg tab</i>	2	PA QL=30 EA/30 Days
<i>temazepam 15mg cap</i>	2	QL=30 EA/30 Days
<i>temazepam 30mg cap</i>	2	QL=30 EA/30 Days
<i>triazolam 0.125mg tab</i>	2	QL=30 EA/30 Days
<i>triazolam 0.25mg tab</i>	2	QL=60 EA/30 Days
<i>zaleplon 10mg cap</i>	2	QL=30 EA/30 Days
<i>zaleplon 5mg cap</i>	2	QL=30 EA/30 Days
<i>zolpidem tartrate 10mg tab</i>	2	PA QL=30 EA/30 Days
<i>zolpidem tartrate 12.5mg er tab</i>	2	PA QL=30 EA/30 Days
<i>zolpidem tartrate 5mg tab</i>	2	PA QL=60 EA/30 Days
<i>zolpidem tartrate 6.25mg er tab</i>	2	PA QL=30 EA/30 Days
OREXIN RECEPTOR ANTAGONISTS		
DAYVIGO 10MG TAB	4	PA QL=30 EA/30 Days
DAYVIGO 5MG TAB	4	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
SELECTIVE MELATONIN RECEPTOR AGONISTS		
HETLIOZ 4MG/ML SUSP	5	NDS PA QL=158 ML/30 Days
<i>ramelteon 8mg tab</i>	2	QL=30 EA/30 Days
<i>tasimelteon 20mg cap</i>	5	NDS PA QL=30 EA/30 Days
LAXATIVES		
LAXATIVE COMBINATIONS		
CLENPIQ 75-21.9-0.0625MG/ML ORAL SOLN	3	
GAVILYTE-C POWDER FOR ORAL SOLN	2	
<i>gavilyte-g powder for oral soln</i>	2	
<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	2	
<i>peg 3350/electrolyte oral soln</i>	2	
<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	2	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml prep kit</i>	2	
LAXATIVES - MISCELLANEOUS		
<i>constulose 10gm/15ml oral soln</i>	2	
<i>lactulose 667mg/ml oral soln</i>	2	
MACROLIDES		
AZITHROMYCIN		
<i>azithromycin 20mg/ml susp</i>	2	
<i>azithromycin 250mg pack</i>	2	
<i>azithromycin 250mg tab</i>	2	
<i>azithromycin 40mg/ml susp</i>	2	
<i>azithromycin 500mg inj</i>	2	
<i>azithromycin 500mg tab</i>	2	
<i>azithromycin 500mg tab pack</i>	2	
<i>azithromycin 600mg tab</i>	2	
CLARITHROMYCIN		
<i>clarithromycin 250mg tab</i>	2	
CLARITHROMYCIN 25MG/ML SUSP	3	
<i>clarithromycin 500mg er tab</i>	2	
<i>clarithromycin 500mg tab</i>	2	
CLARITHROMYCIN 50MG/ML SUSP	3	
ERYTHROMYCINS		
ERYTHROMYCIN 250MG DR CAP	2	
<i>erythromycin 250mg tab</i>	2	
<i>erythromycin 500mg tab</i>	2	
<i>erythromycin ethylsuccinate 40mg/ml susp</i>	2	
<i>erythromycin ethylsuccinate 80mg/ml susp</i>	2	
FIDAXOMICIN		
DIFICID 200MG TAB	3	PA QL=20 EA/10 Days
DIFICID 40MG/ML SUSP	3	PA QL=136 ML/10 Days
MEDICAL DEVICES AND SUPPLIES		

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
BANDAGES-DRESSINGS-TAPE		
GAUZE PADS (2 X 2)	2	
MISC. DEVICES		
ALCOHOL SWAB 1X1 (DIABETIC)	2	
PARENTERAL THERAPY SUPPLIES		
INSULIN PEN NEEDLE	2	
INSULIN SYRINGE	2	
INSULIN SYRINGE (DISP) U-100 0.3ML	2	
INSULIN SYRINGE (DISP) U-100 1/2ML	2	
INSULIN SYRINGE (DISP) U-100 1ML	2	
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG		
AIMOVIG 140MG/ML AUTO-INJECTOR	3	PA
AIMOVIG 70MG/ML AUTO-INJECTOR	3	PA
EMGALITY 100MG/ML SYRINGE	3	PA
EMGALITY 120MG/ML AUTO-INJECTOR	3	PA
EMGALITY 120MG/ML SYRINGE	3	PA
UBRELVY 100MG TAB	3	PA QL=16 EA/30 Days
UBRELVY 50MG TAB	3	PA QL=16 EA/30 Days
MIGRAINE PRODUCTS		
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	3	PA QL=16 ML/30 Days
SEROTONIN AGONISTS		
IMITREX 6MG/0.5ML CARTRIDGE	2	QL=5 ML/30 Days
<i>naratriptan 1mg tab</i>	2	QL=18 EA/30 Days
<i>naratriptan 2.5mg tab</i>	2	QL=18 EA/30 Days
REYVOW 100MG TAB	3	PA QL=8 EA/30 Days
REYVOW 50MG TAB	3	PA QL=8 EA/30 Days
<i>rizatriptan 10mg odt</i>	2	QL=36 EA/60 Days
<i>rizatriptan 10mg tab</i>	2	QL=36 EA/60 Days
<i>rizatriptan 5mg odt</i>	2	QL=36 EA/60 Days
<i>rizatriptan 5mg tab</i>	2	QL=36 EA/60 Days
<i>sumatriptan 100mg tab</i>	2	QL=18 EA/30 Days
<i>sumatriptan 25mg tab</i>	2	QL=18 EA/30 Days
<i>sumatriptan 4mg/0.5ml auto-injector</i>	2	QL=5 ML/30 Days
<i>sumatriptan 4mg/0.5ml cartridge</i>	2	QL=5 ML/30 Days
<i>sumatriptan 50mg tab</i>	2	QL=18 EA/30 Days
<i>sumatriptan 6mg/0.5ml auto-injector</i>	2	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml cartridge</i>	2	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml inj</i>	2	QL=5 ML/30 Days
<i>zolmitriptan 2.5mg tab</i>	2	QL=18 EA/30 Days
<i>zolmitriptan 5mg tab</i>	2	QL=18 EA/30 Days
<i>zolmitriptan 5mg/act nasal spray</i>	2	QL=12 EA/30 Days
MINERALS & ELECTROLYTES		
ELECTROLYTE MIXTURES		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GLUCOSE 100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	3	PA BvD
GLUCOSE 100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	3	PA BvD
GLUCOSE 25MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	2	
<i>glucose 50mg/ml/potassium chloride 0.01meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 2.25mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 9mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.03meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
GLUCOSE 50MG/ML/POTASSIUM CHLORIDE 0.04MEQ/ML/SODIUM CHLORIDE 9MG/ML INJ	3	
<i>glucose 50mg/ml/sodium chloride 2mg/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	2	
ISOLYTE P INJ	3	
ISOLYTE S INJ	3	
KCL/D5W/LR INJ 0.15%	3	
<i>kcl/nacl 20meq-0.9% inj</i>	2	
KCL/NACL 40MEQ-9% INJ	3	
PLASMA-LYTE 148 INJ	3	
PLASMA-LYTE A INJ	3	
TPN ELECTROLYTES INJ	2	PA BvD
MAGNESIUM		
<i>magnesium sulfate 500mg/ml inj</i>	2	
<i>magnesium sulfate 500mg/ml syringe</i>	2	
POTASSIUM		
<i>klor-con 10meq er tab</i>	2	
<i>klor-con 10meq micro er tab</i>	2	
<i>klor-con 15meq micro er tab</i>	2	
<i>klor-con 20meq micro er tab</i>	2	
<i>klor-con 20meq powder for oral soln</i>	2	
<i>klor-con 8meq er tab</i>	2	
<i>potassium chloride 1.33meq/ml oral soln</i>	2	
<i>potassium chloride 10meq er cap</i>	2	
<i>potassium chloride 10meq er tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>potassium chloride 10meq micro er tab</i>	2	
POTASSIUM CHLORIDE 10MEQ/100ML INJ	2	
<i>potassium chloride 15meq micro er tab</i>	2	
<i>potassium chloride 2.67meq/ml oral soln</i>	2	
<i>potassium chloride 20meq er tab</i>	2	
<i>potassium chloride 20meq micro er tab</i>	2	
<i>potassium chloride 20meq powder for oral soln</i>	2	
POTASSIUM CHLORIDE 20MEQ/100ML INJ	2	
<i>potassium chloride 2meq/ml (20ml) inj</i>	2	
<i>potassium chloride 2meq/ml inj</i>	2	
POTASSIUM CHLORIDE 40MEQ/100ML INJ	2	
<i>potassium chloride 8meq er cap</i>	2	
<i>potassium chloride 8meq er tab</i>	2	
SODIUM		
<i>sodium chloride 0.45% inj</i>	2	
<i>sodium chloride 0.9% inj</i>	2	
<i>sodium chloride 3% inj</i>	2	
<i>sodium chloride 50mg/ml inj</i>	2	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
<i>penicillamine 250mg tab</i>	2	
<i>trientine 250mg cap</i>	2	PA
IMMUNOMODULATORS		
<i>lenalidomide 10mg cap</i>	2	PA NSO QL=30 EA/30 Days
<i>lenalidomide 15mg cap</i>	2	PA NSO QL=30 EA/30 Days
<i>lenalidomide 2.5mg cap</i>	2	PA NSO QL=30 EA/30 Days
<i>lenalidomide 20mg cap</i>	2	PA NSO QL=30 EA/30 Days
<i>lenalidomide 25mg cap</i>	2	PA NSO QL=30 EA/30 Days
<i>lenalidomide 5mg cap</i>	2	PA NSO QL=30 EA/30 Days
REVLIMID 10MG CAP	5	NDS PA NSO QL=30 EA/30 Days
REVLIMID 15MG CAP	5	NDS PA NSO QL=30 EA/30 Days
REVLIMID 2.5MG CAP	5	NDS PA NSO QL=30 EA/30 Days
REVLIMID 20MG CAP	5	NDS PA NSO QL=30 EA/30 Days
REVLIMID 25MG CAP	5	NDS PA NSO QL=30 EA/30 Days
REVLIMID 5MG CAP	5	NDS PA NSO QL=30 EA/30 Days
REZUROCK 200MG TAB	5	NDS PA QL=30 EA/30 Days
THALOMID 100MG CAP	5	NDS PA NSO QL=30 EA/30 Days
THALOMID 150MG CAP	5	NDS PA NSO QL=60 EA/30 Days
THALOMID 200MG CAP	5	NDS PA NSO QL=60 EA/30 Days
THALOMID 50MG CAP	5	NDS PA NSO QL=30 EA/30 Days
IMMUNOSUPPRESSIVE AGENTS		
ASTAGRAF 0.5MG ER CAP	4	PA BvD
ASTAGRAF 1MG ER CAP	4	PA BvD
ASTAGRAF 5MG ER CAP	4	PA BvD
<i>azasan 100mg tab</i>	2	PA BvD

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>azasan 75mg tab</i>	2	PA BvD
<i>azathioprine 100mg tab</i>	2	PA BvD
<i>azathioprine 50mg tab</i>	2	PA BvD
<i>azathioprine 75mg tab</i>	2	PA BvD
<i>cyclosporine 100mg cap</i>	2	PA BvD
<i>cyclosporine 25mg cap</i>	2	PA BvD
<i>cyclosporine modified 100mg cap</i>	2	PA BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	2	PA BvD
<i>cyclosporine modified 25mg cap</i>	2	PA BvD
<i>cyclosporine modified 50mg cap</i>	2	PA BvD
ENSPRYNG 120MG/ML SYRINGE	5	NDS PA QL=2 ML/28 Days
ENVARUSUS XR 0.75MG TAB	4	PA BvD
ENVARUSUS XR 1MG TAB	4	PA BvD
ENVARUSUS XR 4MG TAB	4	PA BvD
<i>everolimus 0.25mg tab</i>	2	PA BvD
<i>everolimus 0.5mg tab</i>	2	PA BvD
<i>everolimus 0.75mg tab</i>	2	PA BvD
<i>everolimus 1mg tab</i>	2	PA BvD
<i>engraf 100mg cap</i>	2	PA BvD
<i>engraf 100mg/ml oral soln</i>	2	PA BvD
<i>engraf 25mg cap</i>	2	PA BvD
LUPKYNIS 7.9MG CAP	5	NDS PA QL=180 EA/30 Days
<i>mycophenolate mofetil 200mg/ml susp</i>	2	PA BvD
<i>mycophenolate mofetil 250mg cap</i>	2	PA BvD
<i>mycophenolate mofetil 500mg tab</i>	2	PA BvD
<i>mycophenolic acid 180mg dr tab</i>	2	PA BvD
<i>mycophenolic acid 360mg dr tab</i>	2	PA BvD
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	4	PA BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	4	PA BvD
SANDIMMUNE 100MG/ML ORAL SOLN	4	PA BvD
<i>sirolimus 0.5mg tab</i>	2	PA BvD
<i>sirolimus 1mg tab</i>	2	PA BvD
<i>sirolimus 1mg/ml oral soln</i>	2	PA BvD
<i>sirolimus 2mg tab</i>	2	PA BvD
<i>tacrolimus 0.5mg cap</i>	2	PA BvD
<i>tacrolimus 1mg cap</i>	2	PA BvD
<i>tacrolimus 5mg cap</i>	2	PA BvD
POTASSIUM REMOVING AGENTS		
LOKELMA 10GM POWDER FOR ORAL SUSP	3	PA
LOKELMA 5GM POWDER FOR ORAL SUSP	3	PA
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	2	
SPS 15GM/60ML SUSP	2	
VELTASSA 16.8GM POWDER FOR ORAL SUSP	3	PA
VELTASSA 25.2GM POWDER FOR ORAL SUSP	3	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
VELTASSA 8.4GM POWDER FOR ORAL SUSP	3	PA
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA 200MG/ML AUTO-INJECTOR	5	NDS PA QL=4 ML/28 Days
BENLYSTA 200MG/ML SYRINGE	5	NDS PA QL=4 ML/28 Days
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
<i>lidocaine viscous 2% topical soln</i>	2	
ANTI-INFECTIVES - THROAT		
<i>clotrimazole 10mg lozenge</i>	2	
<i>nystatin 100000unit/ml susp</i>	2	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate 0.12% mouthwash</i>	2	
<i>periogard 0.12% mouthwash</i>	2	
STEROIDS - MOUTH/THROAT		
<i>triamcinolone acetonide 0.1% oral paste</i>	2	
THROAT PRODUCTS - MISC.		
<i>cevimeline 30mg cap</i>	2	
<i>pilocarpine 5mg tab</i>	2	
<i>pilocarpine 7.5mg tab</i>	2	
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen 10mg tab</i>	2	
<i>baclofen 20mg tab</i>	2	
<i>carisoprodol 350mg tab</i>	2	PA QL=90 EA/30 Days
<i>chlorzoxazone 500mg tab</i>	3	PA
<i>cyclobenzaprine 10mg tab</i>	2	PA QL=90 EA/30 Days
<i>cyclobenzaprine 5mg tab</i>	2	PA QL=90 EA/30 Days
<i>metaxalone 800mg tab</i>	2	PA
<i>methocarbamol 500mg tab</i>	2	PA
<i>methocarbamol 750mg tab</i>	2	PA
<i>orphenadrine citrate 100mg er tab</i>	2	PA
<i>tizanidine 2mg tab</i>	2	
<i>tizanidine 4mg tab</i>	2	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium 100mg cap</i>	2	
<i>dantrolene sodium 25mg cap</i>	2	
<i>dantrolene sodium 50mg cap</i>	2	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	2	
<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	2	
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	2	
NASAL STEROIDS		
FLUNISOLIDE 25% (25MCG/ACT) NASAL INHALER	4	QL=50 ML/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	2	QL=32 GM/30 Days
NEUROMUSCULAR AGENTS		
ALS AGENTS		
RADICAVA 105MG/5ML SUSP	5	NDS PA QL=70 ML/28 Days
RELYVRIO 3-1GM POWDER PACK	5	NDS PA QL=56 EA/28 Days
<i>riluzole 50mg tab</i>	2	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI 0.75MG/ML ORAL SOLN	5	NDS PA QL=200 ML/30 Days
NUTRIENTS		
CARBOHYDRATES		
<i>glucose 100mg/ml inj</i>	2	PA BvD
<i>glucose 50mg/ml inj</i>	2	
LIPIDS		
INTRALIPID 20GM/100ML INJ	2	PA BvD
NUTRILIPID 20GM/100ML INJ	2	PA BvD
PROTEINS		
CLINIMIX 4.25/10 INJ	3	PA BvD
CLINIMIX 4.25/5 INJ	3	PA BvD
CLINIMIX 5/15 INJ	3	PA BvD
CLINIMIX 5/20 INJ	3	PA BvD
CLINIMIX E 2.75/5 INJ	3	PA BvD
CLINIMIX E 4.25/10 INJ	3	PA BvD
CLINIMIX E 4.25/5 INJ	3	PA BvD
CLINIMIX E 5/15 INJ	3	PA BvD
CLINIMIX E 5/20 INJ	3	PA BvD
<i>clinisol 15 inj</i>	2	PA BvD
<i>plenamine 15% inj</i>	2	PA BvD
PREMASOL 10% INJ	4	PA BvD
PROSOL 20% INJ	4	PA BvD
TRAVASOL 10% INJ	4	PA BvD
TROPHAMINE 10% INJ	4	PA BvD
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPHTHALMIC		
<i>betaxolol 0.5% ophth soln</i>	2	
<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	2	
CARTEOLOL 1% OPHTH SOLN	2	
<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	2	
<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	2	
LEVOBUNOLOL 0.5% OPHTH SOLN	2	
<i>timolol 0.25% ophth gel</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>timolol 0.25% ophth soln</i>	1	
<i>timolol 0.5% ophth gel</i>	2	
<i>timolol 0.5% ophth soln</i>	1	
<i>timolol 0.5% ophth soln (preservative-free)</i>	2	
CYCLOPLEGIC MYDRIATICS		
ATROPINE SULFATE 1% OPHTH SOLN	2	
MIOTICS		
<i>pilocarpine 1% ophth soln</i>	2	
<i>pilocarpine 2% ophth soln</i>	2	
<i>pilocarpine 4% ophth soln</i>	2	
OPHTHALMIC ADRENERGIC AGENTS		
ALPHAGAN 0.1% OPHTH SOLN	3	
<i>brimonidine tartrate 0.15% ophth soln</i>	2	
<i>brimonidine tartrate 0.2% ophth soln</i>	2	
SIMBRINZA 0.2-1% OPHTH SUSP	3	
OPHTHALMIC ANTI-INFECTIVES		
AZASITE 1% OPHTH SOLN	3	
BACITRACIN 500UNIT/GM OPHTH OINTMENT	2	
<i>bacitracin/polymyxin B 0.5-10unit/mg ophth ointment</i>	2	QL=7 GM/7 Days
<i>ciprofloxacin 0.3% ophth soln</i>	2	QL=60 ML/30 Days
<i>erythromycin 0.5% ophth ointment</i>	2	QL=7 GM/7 Days
<i>gatifloxacin 0.5% ophth soln</i>	2	ST QL=5 ML/7 Days
<i>gentamicin 0.3% ophth soln</i>	2	QL=10 ML/7 Days
<i>levofloxacin 0.5% ophth soln</i>	2	QL=60 ML/30 Days
NATACYN 5% OPHTH SUSP	3	QL=15 ML/7 Days
<i>neo-polycin ophth ointment</i>	2	QL=7 GM/7 Days
<i>neomycin/bacitracin/polymyxin ophth ointment 5mg-400unit-10000unit</i>	2	QL=7 GM/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	2	QL=10 ML/7 Days
<i>ofloxacin 0.3% ophth soln</i>	2	QL=60 ML/30 Days
<i>polycin 0.5-10unit/mg ophth ointment</i>	2	QL=7 GM/7 Days
<i>polymyxin b/trimethoprim 10000 Unit/ML-0.1% ophth soln</i>	2	QL=10 ML/7 Days
<i>sulfacetamide sodium 10% ophth soln</i>	2	QL=15 ML/7 Days
<i>tobramycin 0.3% ophth soln</i>	2	QL=60 ML/30 Days
TRIFLURIDINE 1% OPHTH SOLN	2	QL=15 ML/7 Days
ZIRGAN 0.15% OPHTH GEL	3	QL=10 GM/7 Days
OPHTHALMIC IMMUNOMODULATORS		
RESTASIS 0.05% OPHTH SUSP (MULTI-USE VIAL)	3	QL=11 ML/30 Days
RESTASIS 0.05% OPHTH SUSP (SINGLE USE VIAL)	3	QL=60 EA/30 Days
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPHTH SOLN	3	QL=5 ML/30 Days
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE 0.002% OPHTH SOLN	5	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		
ALREX 0.2% OPHTH SUSP	3	
DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	2	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>	2	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	2	
<i>difluprednate 0.05% ophth susp</i>	2	
<i>fluorometholone 0.1% ophth susp</i>	2	
LOTEMAX 0.5% OPHTH OINTMENT	3	
<i>loteprednol etabonate 0.5% ophth gel</i>	2	
<i>loteprednol etabonate 0.5% ophth susp</i>	2	
<i>neo-polycin hc ophth ointment</i>	2	
<i>neomycin/polymyxin/bacitracin/hydrocortisone ophth 1% ointment</i>	2	
<i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>	2	
PRED MILD 0.12% OPHTH SUSP	3	
PREDNISOLONE 1% OPHTH SOLN	2	
PREDNISOLONE ACETATE 1% OPHTH SUSP	2	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN	2	
TOBRADEX 0.1-0.3% OPHTH OINTMENT	3	
OPHTHALMICS - MISC.		
ALOMIDE 0.1% OPHTH SOLN	3	
<i>azelastine 0.05% ophth soln</i>	2	
<i>brinzolamide 1% ophth susp</i>	2	
<i>cromolyn sodium 4% ophth soln</i>	2	
CYSTADROPS 0.37% OPHTH SOLN	5	NDS PA QL=20 ML/28 Days
CYSTARAN 0.44% OPHTH SOLN	5	NDS PA QL=60 ML/28 Days
<i>diclofenac sodium 0.1% ophth soln</i>	2	QL=20 ML/365 Days
<i>dorzolamide 2% ophth soln</i>	2	
<i>epinastine 0.05% ophth soln</i>	2	
FLURBIPROFEN SODIUM 0.03% OPHTH SOLN	3	
ILEVRO 0.3% OPHTH SUSP	3	QL=12 ML/365 Days
<i>ketorolac tromethamine 0.4% ophth soln</i>	2	QL=20 ML/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	2	
NEVANAC 0.1% OPHTH SUSP	3	QL=12 ML/365 Days
<i>olopatadine 0.1% ophth soln</i>	2	
PROLENSA 0.07% OPHTH SOLN	3	QL=12 ML/365 Days
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03% ophth soln</i>	2	QL=5 ML/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 ML/30 Days
LUMIGAN 0.01% OPHTH SOLN	3	QL=5 ML/30 Days
<i>tafluprost 0.0015% ophth soln</i>	2	ST QL=30 EA/30 Days
<i>travoprost 0.004% ophth soln</i>	2	QL=5 ML/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2% otic soln</i>	2	
OTIC ANTI-INFECTIVES		
CETRAXAL 0.2% OTIC SOLN	3	
CIPROFLOXACIN 0.2% OTIC SOLN	3	
<i>ofloxacin 0.3% otic soln</i>	2	
OTIC COMBINATIONS		
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	2	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	2	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	2	
OTIC STEROIDS		
<i>flac 0.01% otic soln</i>	2	
<i>fluocinolone acetonide 0.01% otic soln</i>	2	
<i>hydrocortisone/acetic acid 1-2% otic soln</i>	2	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
BIVIGAM 5GM/50ML INJ	5	NDS PA
FLEBOGAMMA 5GM/50ML INJ	5	NDS PA
GAMMAGARD 10GM INJ	5	NDS PA
GAMMAGARD 2.5GM/25ML INJ	5	NDS PA
GAMMAGARD 5GM INJ	5	NDS PA
GAMMAKED 1GM/10ML INJ	5	NDS PA
GAMMAPLEX 10GM/100ML INJ	5	NDS PA
GAMMAPLEX 10GM/200ML INJ	5	NDS PA
GAMMAPLEX 20GM/200ML INJ	5	NDS PA
GAMMAPLEX 5GM/50ML INJ	5	NDS PA
GAMUNEX 1GM/10ML INJ	5	NDS PA
OCTAGAM 1GM/20ML INJ	5	NDS PA
OCTAGAM 2GM/20ML INJ	5	NDS PA
PANZYGA 10GM/100ML INJ	5	NDS PA
PANZYGA 1GM/10ML INJ	5	NDS PA
PANZYGA 2.5GM/25ML INJ	5	NDS PA
PANZYGA 20GM/200ML INJ	5	NDS PA
PANZYGA 30GM/300ML INJ	5	NDS PA
PANZYGA 5GM/50ML INJ	5	NDS PA
PRIVIGEN 20GM/200ML INJ	5	NDS PA
PENICILLINS		
AMINOPENICILLINS		
AMOXICILLIN 125MG CHEW TAB	2	
<i>amoxicillin 250mg cap</i>	1	
AMOXICILLIN 250MG CHEW TAB	2	
<i>amoxicillin 25mg/ml susp</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	
<i>ampicillin 100mg/ml inj</i>	2	
AMPICILLIN 125MG INJ	3	
AMPICILLIN 500MG CAP	2	
NATURAL PENICILLINS		
BICILLIN L-A 1200000UNIT/2ML SYRINGE	3	
BICILLIN L-A 2400000UNIT/4ML SYRINGE	3	
BICILLIN L-A 600000UNIT/ML SYRINGE	3	
<i>penicillin g potassium 1000000unit/ml inj</i>	2	
PENICILLIN G POTASSIUM 40000UNIT/ML INJ	2	
PENICILLIN G POTASSIUM 60000UNIT/ML INJ	2	
PENICILLIN G PROCAINE 600000UNIT/ML SYRINGE	3	
PENICILLIN G SODIUM 100000UNIT/ML INJ	3	
<i>penicillin v potassium 250mg tab</i>	2	
PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN	2	
<i>penicillin v potassium 500mg tab</i>	2	
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	2	
PENICILLIN COMBINATIONS		
<i>amoxicillin 250mg/clavulanate 125mg tab</i>	2	
AMOXICILLIN/CLAVULANATE 1000-62.5MG ER TAB	4	
AMOXICILLIN/CLAVULANATE 200-28.5MG CHEW TAB	2	
AMOXICILLIN/CLAVULANATE 400-57MG CHEW TAB	2	
<i>amoxicillin/clavulanate 500-125mg tab</i>	2	
<i>amoxicillin/clavulanate 875-125mg tab</i>	2	
<i>amoxicillin/k clavulanate 200-28.5mg/5ml susp</i>	2	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml susp</i>	2	
<i>amoxicillin/k clavulanate 400-57mg/5ml susp</i>	2	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml susp</i>	2	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	2	
<i>ampicillin/sulbactam 1000-500mg inj</i>	2	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	2	
BICILLIN 300000-300000UNIT/ML SYRINGE	3	
BICILLIN 450000-150000UNIT/ML SYRINGE	3	
<i>piperacillin/tazobactam 2000-250mg inj</i>	2	
<i>piperacillin/tazobactam 3000-375mg inj</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>piperacillin/tazobactam 36-4.5gm inj</i>	2	
<i>piperacillin/tazobactam 4000-500mg inj</i>	2	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	2	
<i>dicloxacillin 500mg cap</i>	2	
<i>nafcillin 100mg/ml inj</i>	2	
<i>nafcillin 1gm inj</i>	2	
<i>nafcillin 2gm inj</i>	2	
<i>oxacillin 100mg/ml inj</i>	2	
<i>oxacillin 1gm inj</i>	2	
OXACILLIN 20MG/ML INJ	3	
<i>oxacillin 2gm inj</i>	2	
OXACILLIN 40MG/ML INJ	3	
PROGESTINS		
PROGESTINS		
<i>medroxyprogesterone acetate 10mg tab</i>	2	
<i>medroxyprogesterone acetate 2.5mg tab</i>	2	
<i>medroxyprogesterone acetate 5mg tab</i>	2	
<i>megestrol acetate 125mg/ml susp</i>	2	PA
<i>norethindrone acetate 5mg tab</i>	2	
<i>progesterone 100mg cap</i>	2	
<i>progesterone 200mg cap</i>	2	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium 333mg dr tab</i>	2	
<i>disulfiram 250mg tab</i>	2	
<i>disulfiram 500mg tab</i>	2	
ANTI-CATAPLECTIC AGENTS		
SODIUM OXYBATE 500MG/ML ORAL SOLN	5	NDS PA QL=540 ML/30 Days
XYREM 500MG/ML ORAL SOLN	5	NDS PA QL=540 ML/30 Days
ANTIDEMENTIA AGENTS		
<i>donepezil 10mg odt</i>	2	QL=30 EA/30 Days
<i>donepezil 10mg tab</i>	2	QL=60 EA/30 Days
<i>donepezil 23mg tab</i>	2	ST QL=30 EA/30 Days
<i>donepezil 5mg odt</i>	2	QL=30 EA/30 Days
<i>donepezil 5mg tab</i>	2	QL=60 EA/30 Days
<i>galantamine 12mg tab</i>	2	
<i>galantamine 4mg tab</i>	2	
<i>galantamine 8mg tab</i>	2	
<i>galantamine hydrobromide 16mg er cap</i>	2	
<i>galantamine hydrobromide 24mg er cap</i>	2	
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	4	
<i>galantamine hydrobromide 8mg er cap</i>	2	
<i>memantine 10mg tab</i>	2	QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>memantine 14mg er cap</i>	2	ST QL=30 EA/30 Days
<i>memantine 21mg er cap</i>	2	ST QL=30 EA/30 Days
<i>memantine 28mg er cap</i>	2	ST QL=30 EA/30 Days
<i>memantine 2mg/ml oral soln</i>	2	QL=300 ML/30 Days
<i>memantine 5/10mg titration pack</i>	2	
<i>memantine 5mg tab</i>	2	QL=60 EA/30 Days
<i>memantine 7mg er cap</i>	2	ST QL=30 EA/30 Days
<i>rivastigmine 1.5mg cap</i>	2	
<i>rivastigmine 13.3mg/24hr patch</i>	2	QL=30 EA/30 Days
<i>rivastigmine 3mg cap</i>	2	
<i>rivastigmine 4.5mg cap</i>	2	
<i>rivastigmine 4.6mg/24hr patch</i>	2	QL=30 EA/30 Days
<i>rivastigmine 6mg cap</i>	2	
<i>rivastigmine 9.5mg/24hr patch</i>	2	QL=30 EA/30 Days
COMBINATION PSYCHOTHERAPEUTICS		
AMITRIPTYLINE/CHLORDIAZEPOXIDE 12.5-5MG TAB	2	
AMITRIPTYLINE/CHLORDIAZEPOXIDE 25-10MG TAB	2	
LYBALVI 10-10MG TAB	5	NDS PA NSO QL=30 EA/30 Days
LYBALVI 15-10MG TAB	5	NDS PA NSO QL=30 EA/30 Days
LYBALVI 20-10MG TAB	5	NDS PA NSO QL=30 EA/30 Days
LYBALVI 5-10MG TAB	5	NDS PA NSO QL=30 EA/30 Days
FIBROMYALGIA AGENTS		
SAVELLA 100MG TAB	3	QL=60 EA/30 Days
SAVELLA 12.5MG TAB	3	QL=60 EA/30 Days
SAVELLA 25MG TAB	3	QL=60 EA/30 Days
SAVELLA 50MG TAB	3	QL=60 EA/30 Days
SAVELLA TAB 4-WEEK TITRATION PACK (55)	3	
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12MG ER TAB	5	NDS PA QL=60 EA/30 Days
AUSTEDO 12MG TAB	5	NDS PA QL=120 EA/30 Days
AUSTEDO 24MG ER TAB	5	NDS PA QL=60 EA/30 Days
AUSTEDO 6MG ER TAB	5	NDS PA QL=60 EA/30 Days
AUSTEDO 6MG TAB	5	NDS PA QL=120 EA/30 Days
AUSTEDO 9MG TAB	5	NDS PA QL=120 EA/30 Days
INGREZZA 40MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 60MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 80MG CAP	5	NDS PA QL=30 EA/30 Days
<i>tetrabenazine 12.5mg tab</i>	2	PA
<i>tetrabenazine 25mg tab</i>	2	PA
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	5	NDS
AVONEX 30MCG/0.5ML SYRINGE	5	NDS
<i>dalfampridine 10mg er tab</i>	2	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
<i>dimethyl fumarate 120mg dr cap</i>	2	
<i>dimethyl fumarate 240mg dr cap</i>	2	
<i>dimethyl fumarate/dimethyl fumarate 120-240mg pack</i>	2	
EXTAVIA 0.3MG INJ	5	NDS
<i> fingolimod 0.5mg cap</i>	2	
GILENYA 0.25MG CAP	5	NDS
<i> glatiramer acetate 20mg/ml syringe</i>	2	
<i> glatiramer acetate 40mg/ml syringe</i>	2	
<i> glatopa 20mg/ml syringe</i>	2	
<i> glatopa 40mg/ml syringe</i>	2	
KESIMPTA 20MG/0.4ML PEN INJ	5	NDS
MAVENCLAD 10 TABLET PACK 10MG	5	NDS
MAVENCLAD 4 TABLET PACK 10MG	5	NDS
MAVENCLAD 5 TABLET PACK 10MG	5	NDS
MAVENCLAD 6 TABLET PACK 10MG	5	NDS
MAVENCLAD 7 TABLET PACK 10MG	5	NDS
MAVENCLAD 8 TABLET PACK 10MG	5	NDS
MAVENCLAD 9 TABLET PACK 10MG	5	NDS
MAYZENT 0.25MG STARTER PACK	5	NDS
MAYZENT 0.25MG TAB	5	NDS
MAYZENT 1MG TAB	5	NDS
MAYZENT 2MG TAB	5	NDS
MAYZENT STARTER PACK (7)	3	
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	5	NDS
PLEGRIDY 125MCG/0.5ML SYRINGE	5	NDS
REBIF 22MCG/0.5ML AUTO-INJECTOR	5	NDS
REBIF 22MCG/0.5ML SYRINGE	5	NDS
REBIF 44MCG/0.5ML AUTO-INJECTOR	5	NDS
REBIF 44MCG/0.5ML SYRINGE	5	NDS
REBIF REBIDOSE PACK	5	NDS
REBIF TITRATION PACK	5	NDS
<i> teriflunomide 14mg tab</i>	2	
<i> teriflunomide 7mg tab</i>	2	
ZEPOSIA 0.92MG CAP	5	NDS PA
ZEPOSIA CAP 7-DAY STARTER PACK	5	NDS PA
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUEDEXTA 20-10MG CAP	3	PA QL=60 EA/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
ERGOLOID MESYLATES USP 1MG TAB	4	
PIMOZIDE 1MG TAB	3	
PIMOZIDE 2MG TAB	3	
SMOKING DETERRENTS		
<i> bupropion 150mg sr tab</i>	2	
NICOTROL 10MG INH SOLN	3	
NICOTROL 10MG/ML NASAL INHALER	3	

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
VARENICLINE 0.5MG TAB	2	
VARENICLINE 0.5MG/1MG FIRST MONTH PACK	3	
VARENICLINE 1MG TAB	2	
TRANSTHYRETIN AMYLOIDOSIS AGENTS		
TEGSEDI 284MG/1.5ML SYRINGE	5	NDS PA QL=6 ML/28 Days
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
ARALAST 1000MG INJ	5	NDS PA
GLASSIA 1000MG/50ML INJ	5	NDS PA
PROLASTIN 1000MG INJ	5	NDS PA
ZEMAIRA 1000MG INJ	5	NDS PA
CYSTIC FIBROSIS AGENTS		
KALYDECO 13.4MG GRANULES	5	NDS PA QL=56 EA/28 Days
KALYDECO 150MG TAB	5	NDS PA QL=60 EA/30 Days
KALYDECO 25MG GRANULES	5	NDS PA QL=60 EA/30 Days
KALYDECO 50MG GRANULES	5	NDS PA QL=60 EA/30 Days
KALYDECO 75MG GRANULES	5	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG GRANULES	5	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG TAB	5	NDS PA QL=120 EA/30 Days
ORKAMBI 125-200MG TAB	5	NDS PA QL=120 EA/30 Days
ORKAMBI 188-150MG GRANULES	5	NDS PA QL=60 EA/30 Days
ORKAMBI 94-75MG GRANULES	5	NDS PA QL=56 EA/28 Days
PULMOZYME 1MG/ML INH SOLN	5	NDS PA BvD QL=150 ML/30 Days
SYMDEKO 50-75MG/75MG PACK	5	NDS PA QL=60 EA/30 Days
SYMDEKO TAB 4-WEEK PACK	5	NDS PA QL=60 EA/30 Days
TRIKAFTA 100-50-75MG/150MG PACK	5	NDS PA QL=90 EA/30 Days
TRIKAFTA 100-50-75MG/75MG GRANULES PACK	5	NDS PA QL=56 EA/28 Days
TRIKAFTA 50-37.5-25MG/75MG TAB PACK	5	NDS PA QL=84 EA/28 Days
TRIKAFTA 80-40-60MG/59.5MG GRANULES PACK	5	NDS PA QL=56 EA/28 Days
PULMONARY FIBROSIS AGENTS		
OFEV 100MG CAP	5	NDS PA QL=60 EA/30 Days
OFEV 150MG CAP	5	NDS PA QL=60 EA/30 Days
<i>pirfenidone 267mg cap</i>	2	PA QL=270 EA/30 Days
<i>pirfenidone 267mg tab</i>	2	PA QL=270 EA/30 Days
<i>pirfenidone 801mg tab</i>	2	PA QL=90 EA/30 Days
SULFONAMIDES		
SULFONAMIDES		
<i>sulfadiazine 500mg tab</i>	3	
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA 150MG TAB	5	NDS PA QL=30 EA/14 Days
GLYCYLCYCLINES		
TIGECYCLINE 50MG INJ	5	NDS
TETRACYCLINES		
<i>demeclocycline 150mg tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>demeclocycline 300mg tab</i>	2	
<i>doxy 100mg inj</i>	2	
<i>doxycycline hyclate 100mg cap</i>	2	
<i>doxycycline hyclate 100mg tab</i>	2	
<i>doxycycline hyclate 20mg tab</i>	2	
<i>doxycycline hyclate 50mg cap</i>	2	
<i>doxycycline monohydrate 100mg cap</i>	2	
<i>doxycycline monohydrate 100mg tab</i>	2	
<i>doxycycline monohydrate 50mg cap</i>	2	
<i>doxycycline monohydrate 50mg tab</i>	2	
<i>doxycycline monohydrate 5mg/ml susp</i>	2	
<i>minocycline 100mg cap</i>	2	
<i>minocycline 50mg cap</i>	2	
<i>minocycline 75mg cap</i>	2	
<i>tetracycline 250mg cap</i>	2	
<i>tetracycline 500mg cap</i>	2	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole 10mg tab</i>	2	
<i>methimazole 5mg tab</i>	2	
<i>propylthiouracil 50mg tab</i>	2	
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	

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>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>	2	
<i>liothyronine sodium 50mcg tab</i>	2	
<i>liothyronine sodium 5mcg tab</i>	2	
<i>unithroid 100mcg tab</i>	1	
<i>unithroid 112mcg tab</i>	1	
<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	3	VAC
ADACEL SYRINGE	3	VAC
BOOSTRIX INJ	3	VAC
BOOSTRIX SYRINGE	3	VAC
DAPTACEL INJ	3	VAC
DIPHTHERIA/TETANUS TOXOID INJ	3	PA BvD VAC
INFANRIX SYRINGE	3	VAC
KINRIX SYRINGE	3	VAC
PEDIARIX SYRINGE	3	VAC
PENTACEL 96-30-68UNIT/ML INJ	3	VAC
QUADRACEL INJ	3	VAC
QUADRACEL INJ	3	VAC
QUADRACEL SYRINGE	3	VAC
TDVAX 4-4UNIT/ML INJ	3	PA BvD VAC
TENIVAC 4-10UNIT/ML INJ	3	PA BvD VAC
TENIVAC 4-10UNIT/ML SYRINGE	3	PA BvD VAC
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		

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
ANTISPASMODICS		
<i>dicyclomine 10mg cap</i>	2	
<i>dicyclomine 20mg tab</i>	2	
<i>dicyclomine 2mg/ml oral soln</i>	2	
<i>glycopyrrolate 1mg tab</i>	2	
<i>glycopyrrolate 2mg tab</i>	2	
H-2 ANTAGONISTS		
<i>cimetidine 200mg tab</i>	2	
<i>cimetidine 300mg tab</i>	2	
<i>cimetidine 400mg tab</i>	2	
<i>cimetidine 800mg tab</i>	2	
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
<i>famotidine 8mg/ml susp</i>	2	
MISC. ANTI-ULCER		
<i>sucralfate 1000mg tab</i>	2	
<i>sucralfate 100mg/ml susp</i>	2	
PROTON PUMP INHIBITORS		
<i>lansoprazole 15mg dr cap</i>	2	
<i>lansoprazole 30mg dr cap</i>	2	
<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>	2	
<i>misoprostol 200mcg tab</i>	2	
ULCER THERAPY COMBINATIONS		
<i>amoxicillin/clarithromycin/lansoprazole 500-500-30mg pack</i>	2	
<i>bismuth subcitrate/metronidazole/tetracycline 140-125-125mg cap</i>	2	
PYLERA 140-125-125MG CAP	4	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>fesoterodine fumarate 4mg er tab</i>	2	
<i>fesoterodine fumarate 8mg er tab</i>	2	
<i>oxybutynin chloride 10mg er tab</i>	2	
<i>oxybutynin chloride 15mg er tab</i>	2	
<i>oxybutynin chloride 1mg/ml oral soln</i>	2	
<i>oxybutynin chloride 5mg er tab</i>	2	
<i>oxybutynin chloride 5mg tab</i>	2	
<i>tolterodine tartrate 1mg tab</i>	2	
<i>tolterodine tartrate 2mg er cap</i>	2	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tolterodine tartrate 2mg tab</i>	2	
<i>tolterodine tartrate 4mg er cap</i>	2	QL=30 EA/30 Days
<i>tropium chloride 20mg tab</i>	2	
<i>tropium chloride 60mg er cap</i>	2	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
GEMTESA 75MG TAB	4	PA
MYRBETRIQ 25MG ER TAB	3	
MYRBETRIQ 50MG ER TAB	3	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride 10mg tab</i>	2	
<i>bethanechol chloride 25mg tab</i>	2	
<i>bethanechol chloride 50mg tab</i>	2	
<i>bethanechol chloride 5mg tab</i>	2	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate 100mg tab</i>	2	
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ	3	VAC
BCG LIVE TICE STRAIN 50MG INJ	3	VAC
BEXSERO SYRINGE	3	VAC
HIBERIX 10MCG INJ	3	VAC
MENACTRA INJ	3	VAC
MENQUADFI INJ	3	VAC
MENVEO INJ	3	VAC
PEDVAXHIB 7.5MCG/0.5ML INJ	3	VAC
TRUMENBA SYRINGE	3	VAC
TYPHIM VI 25MCG/0.5ML INJ	3	VAC
TYPHIM VI 25MCG/0.5ML SYRINGE	3	VAC
VIRAL VACCINES		
ENGERIX-B 10MCG/0.5ML SYRINGE	3	PA BvD VAC
ENGERIX-B 20MCG/ML INJ	3	PA BvD VAC
ENGERIX-B 20MCG/ML SYRINGE	3	PA BvD VAC
GARDASIL 9 INJ	3	VAC
GARDASIL 9 SYRINGE	3	VAC
HAVRIX 1440ELU/ML SYRINGE	3	VAC
HAVRIX 720ELU/0.5ML SYRINGE	3	VAC
HEPLISAV-B 20MCG/0.5ML SYRINGE	3	PA BvD VAC
IMOVAX 2.5UNIT/ML INJ	3	PA BvD VAC
IPOL INJ	3	VAC
IXIARO 0.012MG/ML SYRINGE	3	VAC
JYNNEOS 0.5ML INJ	3	VAC
M-M-R II INJ	3	VAC
PREHEVBRIO 10MCG/ML INJ	3	PA BvD VAC
PRIORIX INJ	3	VAC
PROQUAD INJ	3	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
RABAVERT 2.5UNIT/ML INJ	3	PA BvD VAC
RECOMBIVAX 10MCG/ML INJ	3	PA BvD VAC
RECOMBIVAX 10MCG/ML SYRINGE	3	PA BvD VAC
RECOMBIVAX 40MCG/ML INJ	3	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML INJ	3	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML SYRINGE	3	PA BvD VAC
ROTARIX SUSP	3	VAC
ROTATEQ SUSP	3	VAC
SHINGRIX 50MCG/0.5ML INJ	3	QL=2 EA/365 DaysVAC
TICOVAC 1.2MCG/0.25ML SYRINGE	3	VAC
TICOVAC 2.4MCG/0.5ML SYRINGE	3	VAC
TWINRIX SYRINGE	3	VAC
VAQTA 25UNIT/0.5ML INJ	3	VAC
VAQTA 25UNIT/0.5ML SYRINGE	3	VAC
VAQTA 50UNIT/ML INJ	3	VAC
VAQTA 50UNIT/ML SYRINGE	3	VAC
VARIVAX 1350PFU/0.5ML INJ	3	VAC
YF-VAX INJ	3	VAC
YF-VAX INJ	3	VAC
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<i>terconazole 0.4% vaginal cream</i>	2	
<i>terconazole 0.8% vaginal cream</i>	2	
<i>terconazole 80mg vaginal insert</i>	2	
VAGINAL CONTRACEPTIVE - PH MODULATORS		
PHEXXI 1.8-1-0.4% VAGINAL GEL	4	
VAGINAL ESTROGENS		
<i>estradiol 0.01% vaginal cream</i>	2	
ESTRING 2MG (7.5 MCG/24HR) VAGINAL SYSTEM	4	ST
PREMARIN 0.625MG/GM VAGINAL CREAM	3	
VAGINAL PROGESTINS		
CRINONE 4% VAGINAL GEL	3	PA
CRINONE 8% VAGINAL GEL	3	PA
VAGINAL PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<i>clindamycin 2% vaginal cream</i>	2	
<i>metronidazole 0.75% vaginal gel</i>	2	
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	2	QL=2 EA/15 Days
<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	2	QL=2 EA/15 Days
SYMJEPI 0.15MG/0.3ML SYRINGE	2	QL=2 EA/15 Days
SYMJEPI 0.3MG/0.3ML SYRINGE	2	QL=2 EA/15 Days
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
<i>droxidopa 100mg cap</i>	2	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
<i>droxidopa 200mg cap</i>	2	PA
<i>droxidopa 300mg cap</i>	2	PA
VASOPRESSORS		
<i>midodrine 10mg tab</i>	2	
<i>midodrine 2.5mg tab</i>	2	
<i>midodrine 5mg tab</i>	2	

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>acetaminophen/hydrocodone bitartrate 325-10mg tab</i>	6	<i>acyclovir 800mg tab</i>	48
<i>abacavir 300mg tab</i>	45	<i>acetaminophen/hydrocodone bitartrate 325-5mg tab</i>	6	ADACEL INJ	89
<i>abacavir/lamivudine 600-300mg tab</i>	45	<i>acetaminophen/hydrocodone bitartrate 325-7.5mg tab</i>	6	ADACEL SYRINGE	89
ABELCET 5MG/ML INJ	24	<i>acetaminophen/oxycodone 325-10mg tab</i>	6	<i>adapalene 0.3% gel</i>	58
ABILIFY 300MG INJ	45	<i>acetaminophen/oxycodone 325-2.5mg tab</i>	6	ADBRY 150MG/ML SYRINGE	62
ABILIFY 300MG SYRINGE	45	<i>acetaminophen/oxycodone 325-5mg tab</i>	6	<i>adefovir dipivoxil 10mg tab</i>	48
ABILIFY 400MG INJ	45	<i>acetaminophen/oxycodone 325-7.5mg tab</i>	6	ADEMPAS 0.5MG TAB	52
ABILIFY 400MG SYRINGE	45	<i>acetaminophen/tramadol 325-37.5mg tab</i>	6	ADEMPAS 1.5MG TAB	52
ABILIFY 720MG/2.4ML SYRINGE	45	<i>acetazolamide 125mg tab</i>	63	ADEMPAS 1MG TAB	52
ABILIFY 960MG/3.2ML SYRINGE	45	<i>acetazolamide 250mg tab</i>	63	ADEMPAS 2.5MG TAB	52
<i>abiraterone acetate 250mg tab</i>	34	<i>acetazolamide 500mg er cap</i>	63	ADEMPAS 2MG TAB	52
<i>acamprosate calcium 333mg dr tab</i>	84	<i>acetic acid 2% otic soln</i>	82	ADVAIR 100-50MCG DISKUS	11
<i>acarbose 100mg tab</i>	20	<i>acetylcysteine 100mg/ml inh soln</i>	58	ADVAIR 115-21MCG HFA INHALER	11
<i>acarbose 25mg tab</i>	20	<i>acetylcysteine 200mg/ml inh soln</i>	58	ADVAIR 230-21MCG HFA INHALER	11
<i>acarbose 50mg tab</i>	20	<i>acitretin 10mg cap</i>	60	ADVAIR 250-50MCG DISKUS	11
<i>accutane 10mg cap</i>	58	<i>acitretin 17.5mg cap</i>	60	ADVAIR 45-21MCG/ACT HFA INHALER	11
<i>accutane 20mg cap</i>	58	<i>acitretin 25mg cap</i>	60	ADVAIR 500-50MCG DISKUS	11
<i>accutane 30mg cap</i>	58	ACTEMRA	3	AIMOVIG 140MG/ML AUTO-INJECTOR	74
<i>accutane 40mg cap</i>	58	162MG/0.9ML AUTO-INJECTOR	4	AIMOVIG 70MG/ML AUTO-INJECTOR	74
<i>acebutolol 200mg cap</i>	49	ACTEMRA	4	<i>ala-cort 1% cream</i>	60
<i>acebutolol 400mg cap</i>	49	162MG/0.9ML SYRINGE	4	<i>ala-cort 2.5% cream</i>	60
<i>acetaminophen/codeine phosphate 24mg-2.4mg/ml oral soln</i>	6	ACTHIB INJ	91	<i>albendazole 200mg tab</i>	8
<i>acetaminophen/codeine phosphate 300-15mg tab</i>	6	ACTIMMUNE	39	<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	11
<i>acetaminophen/codeine phosphate 300-30mg tab</i>	6	2000000UNIT/0.5ML INJ	48	<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	11
<i>acetaminophen/codeine phosphate 300-60mg tab</i>	6	<i>acyclovir 200mg cap</i>	48	<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	11
<i>acetaminophen/hydrocodone bitartrate 21.7mg-0.5mg/ml oral soln</i>	6	<i>acyclovir 400mg tab</i>	48	<i>albuterol 1.25mg/3ml neb soln</i>	11
		<i>acyclovir 40mg/ml susp</i>	48	<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	11
		<i>acyclovir 5% ointment</i>	60	<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	11
		<i>acyclovir 50mg/ml inj</i>	48		

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>albuterol 2mg tab</i>	11	<i>alose tron 0.5mg tab</i>	69	AMITRIPTYLINE/CHLOR	85
<i>albuterol 4mg tab</i>	11	<i>alose tron 1mg tab</i>	69	DIAZEPOXIDE 25-10MG	
<i>albuterol 5mg/ml inh soln</i>	11	ALPHAGAN 0.1%	80	TAB	
<i>alclometasone</i>	60	OPHTH SOLN		<i>amlodipine 10mg tab</i>	50
<i>dipropionate 0.05%</i>		<i>alprazolam 0.25mg tab</i>	9	<i>amlodipine 2.5mg tab</i>	50
<i>cream</i>		<i>alprazolam 0.5mg tab</i>	9	<i>amlodipine 5mg tab</i>	50
<i>alclometasone</i>	60	<i>alprazolam 1mg tab</i>	9	<i>amlodipine/benazepril</i>	29
<i>dipropionate 0.05%</i>		<i>alprazolam 2mg tab</i>	9	<i>10-20mg cap</i>	
<i>ointment</i>		ALREX 0.2% OPTH	81	<i>amlodipine/benazepril</i>	29
ALCOHOL SWAB 1X1	74	SUSP		<i>10-40mg cap</i>	
(DIABETIC)		<i>altavera 28 day pack</i>	54	<i>amlodipine/benazepril</i>	29
ALECENSA 150MG CAP	36	ALUNBRIG 180MG TAB	36	<i>2.5-10mg cap</i>	
<i>alendronate sodium 10mg</i>	64	ALUNBRIG 30MG TAB	36	<i>amlodipine/benazepril</i>	29
<i>tab</i>		ALUNBRIG 90MG TAB	36	<i>5-10mg cap</i>	
<i>alendronate sodium 35mg</i>	64	ALUNBRIG INITIATION	36	<i>amlodipine/benazepril</i>	29
<i>tab</i>		PACK		<i>5-20mg cap</i>	
<i>alendronate sodium 70mg</i>	64	<i>alyacen 1/35 pack</i>	54	<i>amlodipine/benazepril</i>	29
<i>tab</i>		<i>alyq 20mg tab</i>	52	<i>5-40mg cap</i>	
<i>alendronate sodium</i>	64	<i>amabelz 0.5/0.1mg 28 day</i>	66	<i>amlodipine/hydrochloroth</i>	29
<i>70mg/75ml oral soln</i>		<i>pack</i>		<i>iazide/olmesartan</i>	
<i>alfuzosin 10mg er tab</i>	70	<i>amabelz 1/0.5mg 28 day</i>	66	<i>medoxomil 10-12.5-40mg</i>	
<i>aliskiren 150mg tab</i>	30	<i>pack</i>		<i>tab</i>	
<i>aliskiren 300mg tab</i>	30	<i>amantadine 100mg cap</i>	40	<i>amlodipine/hydrochloroth</i>	29
<i>allopurinol 100mg tab</i>	70	<i>amantadine 10mg/ml oral</i>	40	<i>iazide/olmesartan</i>	
<i>allopurinol 300mg tab</i>	70	<i>soln</i>		<i>medoxomil 10-25-40mg</i>	
ALOGLIPTIN 12.5MG	21	<i>ambrisentan 10mg tab</i>	52	<i>tab</i>	
TAB		<i>ambrisentan 5mg tab</i>	52	<i>amlodipine/hydrochloroth</i>	29
ALOGLIPTIN 25MG TAB	21	<i>amethia 91 day pack</i>	54	<i>iazide/olmesartan</i>	
ALOGLIPTIN 6.25MG	21	<i>amikacin 250mg/ml inj</i>	2	<i>medoxomil 5-12.5-20mg</i>	
TAB		<i>amiloride 5mg tab</i>	63	<i>tab</i>	
ALOGLIPTIN/METFORM	20	<i>amiloride/hydrochlorothi</i>	63	<i>amlodipine/hydrochloroth</i>	29
IN 12.5-1000MG TAB		<i>azide 5-50mg tab</i>		<i>iazide/olmesartan</i>	
ALOGLIPTIN/METFORM	20	<i>amiodarone 200mg tab</i>	9	<i>medoxomil 5-12.5-40mg</i>	
IN 12.5-500MG TAB		<i>amiodarone 400mg tab</i>	9	<i>tab</i>	
ALOGLIPTIN/PIOGLITAZ	20	<i>amitriptyline 100mg tab</i>	19	<i>amlodipine/hydrochloroth</i>	29
ONE 12.5-30MG TAB		<i>amitriptyline 10mg tab</i>	19	<i>iazide/olmesartan</i>	
ALOGLIPTIN/PIOGLITAZ	20	<i>amitriptyline 150mg tab</i>	19	<i>medoxomil 5-25-40mg</i>	
ONE 25-15MG TAB		<i>amitriptyline 25mg tab</i>	19	<i>tab</i>	
ALOGLIPTIN/PIOGLITAZ	20	<i>amitriptyline 50mg tab</i>	19	<i>amlodipine/hydrochloroth</i>	29
ONE 25-30MG TAB		<i>amitriptyline 75mg tab</i>	19	<i>iazide/valsartan</i>	
ALOGLIPTIN/PIOGLITAZ	20	AMITRIPTYLINE/CHLOR	85	<i>10-12.5-160mg tab</i>	
ONE 25-45MG TAB		DIAZEPOXIDE		<i>amlodipine/hydrochloroth</i>	29
ALOMIDE 0.1% OPTH	81	12.5-5MG TAB		<i>iazide/valsartan</i>	
SOLN				<i>10-25-160mg 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>amlodipine/hydrochlorothiazide/valsartan</i> 10-25-320mg tab	29	<i>amoxicillin</i> 250mg/clavulanate 125mg tab	83	<i>amphetamine/dextroamphetamine</i> 30mg tab	1
<i>amlodipine/hydrochlorothiazide/valsartan</i> 5-12.5-160mg tab	29	<i>amoxicillin</i> 25mg/ml susp	82	<i>amphetamine/dextroamphetamine</i> 5mg tab	1
<i>amlodipine/hydrochlorothiazide/valsartan</i> 5-25-160mg tab	29	<i>amoxicillin</i> 40mg/ml susp	83	<i>amphetamine/dextroamphetamine</i> 7.5mg tab	1
<i>amlodipine/olmesartan medoxomil</i> 10-20mg tab	29	<i>amoxicillin</i> 500mg cap	83	AMPHOTERICIN B 50MG INJ	24
<i>amlodipine/olmesartan medoxomil</i> 10-40mg tab	29	<i>amoxicillin</i> 500mg tab	83	<i>ampicillin</i> 1000mg inj	83
<i>amlodipine/olmesartan medoxomil</i> 5-20mg tab	29	<i>amoxicillin</i> 50mg/ml susp	83	<i>ampicillin</i> 100mg/ml inj	83
<i>amlodipine/olmesartan medoxomil</i> 5-40mg tab	29	<i>amoxicillin</i> 80mg/ml susp	83	AMPICILLIN 125MG INJ	83
<i>amlodipine/valsartan</i> 10-160mg tab	29	<i>amoxicillin</i> 875mg tab	83	AMPICILLIN 500MG CAP	83
<i>amlodipine/valsartan</i> 10-320mg tab	29	<i>amoxicillin/clarithromycin/lansoprazole</i> 500-500-30mg pack	90	<i>ampicillin/sulbactam</i> 1000-500mg inj	83
<i>amlodipine/valsartan</i> 5-160mg tab	29	AMOXICILLIN/CLAVULANATE 1000-62.5MG ER TAB	83	<i>ampicillin/sulbactam</i> 100-50mg/ml inj	83
<i>amlodipine/valsartan</i> 5-320mg tab	29	AMOXICILLIN/CLAVULANATE 200-28.5MG CHEW TAB	83	<i>ampicillin/sulbactam</i> 2000-1000mg inj	83
<i>ammonium lactate</i> 12% cream	62	AMOXICILLIN/CLAVULANATE 400-57MG CHEW TAB	83	<i>anagrelide</i> 0.5mg cap	71
<i>ammonium lactate</i> 12% lotion	62	<i>amoxicillin/clavulanate</i> 500-125mg tab	83	<i>anagrelide</i> 1mg cap	71
<i>amnesteem</i> 10mg cap	58	<i>amoxicillin/clavulanate</i> 875-125mg tab	83	<i>anastrozole</i> 1mg tab	34
<i>amnesteem</i> 20mg cap	58	<i>amoxicillin/k clavulanate</i> 200-28.5mg/5ml susp	83	ANORO ELLIPTA 62.5-25MCG INHALER	11
<i>amnesteem</i> 40mg cap	58	<i>amoxicillin/k clavulanate</i> 250-62.5mg/5ml susp	83	ANZEMET 50MG TAB	24
AMOXAPINE 100MG TAB	19	<i>amoxicillin/k clavulanate</i> 400-57mg/5ml susp	83	<i>aprepitant</i> 125mg cap	24
AMOXAPINE 150MG TAB	19	<i>amoxicillin/k clavulanate</i> 600-42.9mg/5ml susp	83	<i>aprepitant</i> 125mg/aprepitant 80mg cap therapy pack	24
AMOXAPINE 25MG TAB	19	<i>amphetamine/dextroamphetamine</i> 10mg tab	1	<i>aprepitant</i> 40mg cap	24
AMOXAPINE 50MG TAB	19	<i>amphetamine/dextroamphetamine</i> 12.5mg tab	1	<i>aprepitant</i> 80mg cap	24
AMOXICILLIN 125MG CHEW TAB	82	<i>amphetamine/dextroamphetamine</i> 15mg tab	1	<i>apri</i> 28 day pack	54
<i>amoxicillin</i> 250mg cap	82	<i>amphetamine/dextroamphetamine</i> 20mg tab	1	APTIOM 200MG TAB	14
AMOXICILLIN 250MG CHEW TAB	82	<i>amphetamine/dextroamphetamine</i> 25mg er cap	1	APTIOM 400MG TAB	14
				APTIOM 600MG TAB	14
				APTIOM 800MG TAB	14
				APTIVUS 250MG CAP	46
				ARALAST 1000MG INJ	87
				<i>aranelle</i> 28 pack	54
				ARCALYST 220MG INJ	3
				ARIKAYCE 590MG/8.4ML INH SUSP	2
				<i>aripiprazole</i> 10mg odt	45
				<i>aripiprazole</i> 10mg tab	45

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>aripiprazole 15mg odt</i>	45	ASMANEX 220MCG	10	ATROPINE	23
<i>aripiprazole 15mg tab</i>	45	(60ACT) TWISTHALER		SULFATE/DIPHENOXYL	
<i>aripiprazole 1mg/ml oral soln</i>	45	ASMANEX 50MCG HFA INHALER	10	ATE 0.025-2.5MG/5ML ORAL SOLN	
<i>aripiprazole 20mg tab</i>	45	<i>aspirin/dipyridamole 25-200mg er cap</i>	71	ATROVENT 17MCG INHALER	10
<i>aripiprazole 2mg tab</i>	45	ASTAGRAF 0.5MG ER CAP	76	<i>aubra 28 day pack</i>	54
<i>aripiprazole 30mg tab</i>	45	CAP		AURYXIA 210MG TAB	69
<i>aripiprazole 5mg tab</i>	45	ASTAGRAF 1MG ER CAP	76	AUSTEDO 12MG ER TAB	85
ARISTADA	45	ASTAGRAF 5MG ER CAP	76	AUSTEDO 12MG TAB	85
1064MG/3.9ML SYRINGE		<i>atazanavir 150mg cap</i>	46	AUSTEDO 24MG ER TAB	85
ARISTADA	45	<i>atazanavir 200mg cap</i>	46	AUSTEDO 6MG ER TAB	85
441MG/1.6ML SYRINGE		<i>atazanavir 300mg cap</i>	46	AUSTEDO 6MG TAB	85
ARISTADA	45	<i>atenolol 100mg tab</i>	49	AUSTEDO 9MG TAB	85
662MG/2.4ML SYRINGE		<i>atenolol 25mg tab</i>	49	AUVELITY 105-45MG ER TAB	17
ARISTADA	45	<i>atenolol 50mg tab</i>	49	<i>aviane 28 pack</i>	54
675MG/2.4ML SYRINGE		<i>atenolol/chlorthalidone 100-25mg tab</i>	29	<i>avita 0.025% cream</i>	58
ARISTADA	45	<i>atenolol/chlorthalidone 50-25mg tab</i>	29	AVONEX 30MCG/0.5ML AUTO-INJECTOR	85
882MG/3.2ML SYRINGE		<i>atomoxetine 100mg cap</i>	1	AVONEX 30MCG/0.5ML SYRINGE	85
<i>armodafinil 150mg tab</i>	1	<i>atomoxetine 10mg cap</i>	1	AYVAKIT 100MG TAB	35
<i>armodafinil 200mg tab</i>	1	<i>atomoxetine 18mg cap</i>	1	AYVAKIT 200MG TAB	35
<i>armodafinil 250mg tab</i>	1	<i>atomoxetine 25mg cap</i>	1	AYVAKIT 25MG TAB	35
<i>armodafinil 50mg tab</i>	1	<i>atomoxetine 40mg cap</i>	1	AYVAKIT 300MG TAB	35
ARNUITY 100MCG INHALER	10	<i>atomoxetine 60mg cap</i>	1	AYVAKIT 50MG TAB	36
ARNUITY 200MCG INHALER	10	<i>atomoxetine 80mg cap</i>	1	<i>azasan 100mg tab</i>	76
ARNUITY 50MCG INHALER	10	<i>atorvastatin 10mg tab</i>	26	<i>azasan 75mg tab</i>	77
<i>asenapine 10mg sl tab</i>	43	<i>atorvastatin 20mg tab</i>	26	AZASITE 1% OPHTH SOLN	80
<i>asenapine 2.5mg sl tab</i>	43	<i>atorvastatin 40mg tab</i>	26	<i>azathioprine 100mg tab</i>	77
<i>asenapine 5mg sl tab</i>	43	<i>atorvastatin 80mg tab</i>	26	<i>azathioprine 50mg tab</i>	77
<i>ashlyna 91 day pack</i>	54	<i>atovaquone 150mg/ml susp</i>	31	<i>azathioprine 75mg tab</i>	77
ASMANEX 100MCG HFA INHALER	10	<i>atovaquone/proguanil 250-100mg tab</i>	32	<i>azelaic acid 15% gel</i>	62
ASMANEX 110MCG (30ACT) TWISTHALER	10	<i>atovaquone/proguanil 62.5-25mg tab</i>	32	<i>azelastine 0.05% ophth soln</i>	81
ASMANEX 200MCG HFA INHALER	10	ATROPINE SULFATE 1% OPHTH SOLN	80	<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	78
ASMANEX 220MCG (120ACT) TWISTHALER	10	<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	23	<i>azithromycin 20mg/ml susp</i>	73
ASMANEX 220MCG (30ACT) TWISTHALER	10			<i>azithromycin 250mg pack</i>	73
				<i>azithromycin 250mg tab</i>	73

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>azithromycin 40mg/ml susp</i>	73	BENLYSTA 200MG/ML SYRINGE	78	<i>bethanechol chloride 5mg tab</i>	91
<i>azithromycin 500mg inj</i>	73	BENZNIDAZOLE 100MG TAB	8	<i>bexarotene 1% gel</i>	60
<i>azithromycin 500mg tab</i>	73	BENZNIDAZOLE 12.5MG TAB	8	<i>bexarotene 75mg cap</i>	39
<i>azithromycin 500mg tab pack</i>	73	<i>benztropine mesylate 0.5mg tab</i>	40	BEXSERO SYRINGE	91
<i>azithromycin 600mg tab</i>	73	<i>benztropine mesylate 1mg tab</i>	40	<i>bicalutamide 50mg tab</i>	34
<i>aztreonam 1000mg inj</i>	32	<i>benztropine mesylate 2mg tab</i>	40	BICILLIN	83
<i>aztreonam 2000mg inj</i>	32	BERINERT 500UNIT INJ	70	300000-300000UNIT/ML SYRINGE	
B		BESREMI 500MCG/ML SYRINGE	39	BICILLIN	83
BACITRACIN 500UNIT/GM OPHTH OINTMENT	80	<i>betamethasone 0.05% aug cream</i>	60	450000-150000UNIT/ML SYRINGE	
<i>bacitracin/polymyxin B 0.5-10unit/mg ophthalm ointment</i>	80	<i>betamethasone 0.05% aug lotion</i>	60	BICILLIN L-A	83
<i>baclofen 10mg tab</i>	78	<i>betamethasone 0.05% aug ointment</i>	60	1200000UNIT/2ML SYRINGE	
<i>baclofen 20mg tab</i>	78	<i>betamethasone 0.05% cream</i>	60	BICILLIN L-A	83
<i>balsalazide disodium 750mg cap</i>	69	<i>betamethasone 0.05% lotion</i>	60	2400000UNIT/4ML SYRINGE	
BALVERSA 3MG TAB	36	<i>betamethasone 0.05% ointment</i>	60	BICILLIN L-A	83
BALVERSA 4MG TAB	36	<i>betamethasone 0.1% cream</i>	61	600000UNIT/ML SYRINGE	
BALVERSA 5MG TAB	36	<i>betamethasone 0.1% lotion</i>	61	BIKTARVY 30-120-15MG TAB	46
<i>balziva 28 day pack</i>	54	<i>betamethasone 0.1% ointment</i>	61	BIKTARVY 50-200-25MG TAB	46
BAQSIMI 3MG/DOSE NASAL POWDER	21	<i>betaxolol 0.5% ophthalm soln</i>	79	<i>bimatoprost 0.03% ophthalm soln</i>	81
BAXDELA 450MG TAB	68	<i>betaxolol 10mg tab</i>	49	<i>bismuth subcitrate/metronidazole/tetracycline 140-125-125mg cap</i>	90
BCG LIVE TICE STRAIN 50MG INJ	91	<i>betaxolol 20mg tab</i>	49	<i>bisoprolol fumarate 10mg tab</i>	49
<i>benazepril 10mg tab</i>	27	<i>bethanechol chloride 10mg tab</i>	91	<i>bisoprolol fumarate 5mg tab</i>	49
<i>benazepril 20mg tab</i>	27	<i>bethanechol chloride 25mg tab</i>	91	<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	30
<i>benazepril 40mg tab</i>	27	<i>bethanechol chloride 50mg tab</i>	91	<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	30
<i>benazepril 5mg tab</i>	27			<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	30
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	29				
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	29				
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	30				
BENAZEPRIL/HYDROCHLOROTHIAZIDE	30				
5-6.25MG TAB					
BENLYSTA 200MG/ML AUTO-INJECTOR	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

BIVIGAM 5GM/50ML INJ	82	<i>budesonide 0.25mg/ml inh susp</i>	10	BYDUREON 2MG/0.85ML	21
<i>blisovi 21 fe 1.5/30 28 day pack</i>	54	<i>budesonide 0.5mg/ml inh susp</i>	10	AUTO-INJECTOR	
<i>blisovi 24 fe 1/20 28 day pack</i>	54	<i>budesonide 2mg/act rectal foam</i>	7	BYLVAY 1200MCG CAP	68
BOOSTRIX INJ	89	<i>budesonide 3mg dr cap</i>	57	BYLVAY 200MCG ORAL PELLETT	68
BOOSTRIX SYRINGE	89	<i>budesonide 9mg er tab</i>	57	BYLVAY 400MCG CAP	68
<i>bosentan 125mg tab</i>	52	<i>budesonide 0.5mg tab</i>	63	BYLVAY 600MCG ORAL PELLETT	68
<i>bosentan 62.5mg tab</i>	52	<i>bumetanide 1mg tab</i>	63		
BOSULIF 100MG TAB	36	<i>bumetanide 2mg tab</i>	63	C	
BOSULIF 400MG TAB	36	<i>buprenorphine 2mg sl tab</i>	7	<i>cabergoline 0.5mg tab</i>	66
BOSULIF 500MG TAB	36	<i>buprenorphine 8mg sl tab</i>	7	CABLIVI 11MG INJ	71
BRAFTOVI 75MG CAP	36	<i>buprenorphine/naloxone 12-3mg sl film</i>	7	CABOMETYX 20MG TAB	36
BREO ELLIPTA 100-25MCG INHALER	11	<i>buprenorphine/naloxone 2-0.5mg sl film</i>	7	CABOMETYX 40MG TAB	36
BREO ELLIPTA 200-25MCG INHALER	11	<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	7	CABOMETYX 60MG TAB	36
BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	11	<i>buprenorphine/naloxone 4-1mg sl film</i>	7	<i>calcipotriene 0.005% cream</i>	60
<i>briellyn 28 day pack</i>	54	<i>buprenorphine/naloxone 8-2mg sl film</i>	7	<i>calcipotriene 0.005% ointment</i>	60
BRILINTA 60MG TAB	71	<i>buprenorphine/naloxone 8-2mg sl tab</i>	7	<i>calcipotriene 0.005% topical soln</i>	60
BRILINTA 90MG TAB	71	<i>bupropion 100mg er tab</i>	17	<i>calcitriol 0.25mcg cap</i>	65
<i>brimonidine tartrate 0.15% ophth soln</i>	80	<i>bupropion 100mg tab</i>	17	<i>calcitriol 0.5mcg cap</i>	65
<i>brimonidine tartrate 0.2% ophth soln</i>	80	<i>bupropion 150mg sr (12 hr) tab</i>	17	<i>calcitriol 1mcg/ml oral soln</i>	65
<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	79	<i>bupropion 150mg sr tab</i>	86	<i>calcium acetate 667mg cap</i>	69
<i>brinzolamide 1% ophth susp</i>	81	<i>bupropion 150mg xl (24 hr) tab</i>	17	CALQUENCE 100MG CAP	36
BRIVIACT 100MG TAB	14	<i>bupropion 200mg er tab</i>	17	CALQUENCE 100MG TAB	36
BRIVIACT 10MG TAB	14	<i>bupropion 300mg er tab</i>	17	<i>camila 28 day 0.35mg pack</i>	57
BRIVIACT 10MG/ML ORAL SOLN	14	<i>bupropion 75mg tab</i>	17	CAMZYOS 10MG CAP	51
BRIVIACT 25MG TAB	14	<i>bupirone 10mg tab</i>	8	CAMZYOS 15MG CAP	51
BRIVIACT 50MG TAB	14	<i>bupirone 15mg tab</i>	8	CAMZYOS 2.5MG CAP	51
BRIVIACT 75MG TAB	14	<i>bupirone 30mg tab</i>	8	CAMZYOS 5MG CAP	51
<i>bromocriptine 2.5mg tab</i>	40	<i>bupirone 5mg tab</i>	8	<i>candesartan cilexetil 16mg tab</i>	28
<i>bromocriptine 5mg cap</i>	40	<i>bupirone 7.5mg tab</i>	8	<i>candesartan cilexetil 32mg tab</i>	28
BRUKINSA 80MG CAP	36	<i>butorphanol tartrate 1mg/act nasal inhaler</i>	7	<i>candesartan cilexetil 4mg tab</i>	28
<i>budesonide 0.125mg/ml inh susp</i>	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>candesartan cilexetil 8mg tab</i>	28	<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	40	CEFADROXIL 1000MG TAB	53
CAPLYTA 10.5MG CAP	41	<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	40	<i>cefadroxil 100mg/ml susp</i>	53
CAPLYTA 21MG CAP	41	CARBIDOPA/LEVODOPA 10-100MG ODT	40	<i>cefadroxil 500mg cap</i>	53
CAPLYTA 42MG CAP	41	<i>carbidopa/levodopa 10-100mg tab</i>	40	<i>cefadroxil 50mg/ml susp</i>	53
CAPRELSA 100MG TAB	36	<i>carbidopa/levodopa 25-100mg er tab</i>	40	<i>cefazolin 1000mg inj</i>	53
CAPRELSA 300MG TAB	36	CARBIDOPA/LEVODOPA 25-100MG ODT	40	<i>cefazolin 200mg/ml inj</i>	53
<i>captopril 100mg tab</i>	27	<i>carbidopa/levodopa 25-100mg tab</i>	40	<i>cefazolin 500mg inj</i>	53
<i>captopril 12.5mg tab</i>	27	CARBIDOPA/LEVODOPA 25-250MG ODT	40	<i>cefdinir 25mg/ml susp</i>	53
<i>captopril 25mg tab</i>	27	<i>carbidopa/levodopa 25-100mg tab</i>	40	<i>cefdinir 300mg cap</i>	53
<i>captopril 50mg tab</i>	27	CARBIDOPA/LEVODOPA 25-250MG ODT	40	<i>cefdinir 50mg/ml susp</i>	53
<i>carbamazepine 100mg chew tab</i>	14	<i>carbidopa/levodopa 25-100mg tab</i>	40	<i>cefepime 1000mg inj</i>	54
<i>carbamazepine 100mg er cap</i>	14	CARBIDOPA/LEVODOPA 50-200mg er tab	40	<i>cefepime 2000mg inj</i>	54
<i>carbamazepine 100mg er tab</i>	14	<i>carbidopa/levodopa 50-200mg er tab</i>	40	<i>cefepime 20mg/ml susp</i>	53
<i>carbamazepine 200mg er cap</i>	14	<i>carglumic acid 200mg tab for oral susp</i>	65	<i>cefepime 400mg cap</i>	53
<i>carbamazepine 200mg er tab</i>	14	<i>carisoprodol 350mg tab</i>	78	<i>cefepime 40mg/ml susp</i>	53
<i>carbamazepine 200mg tab</i>	14	CARTEOLOL 1% OPHTH SOLN	79	CEFOTETAN 1GM INJ	53
<i>carbamazepine 20mg/ml susp</i>	14	<i>cartia 120mg er cap</i>	50	CEFOTETAN 2GM INJ	53
<i>carbamazepine 300mg er cap</i>	14	<i>cartia 180mg er cap</i>	50	<i>cefoxitin 1gm inj</i>	53
<i>carbamazepine 400mg er tab</i>	14	<i>cartia 240mg er cap</i>	50	<i>cefoxitin 200mg/ml inj</i>	53
<i>carbidopa 25mg tab</i>	40	<i>cartia 300mg er cap</i>	50	<i>cefoxitin 2gm inj</i>	53
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	40	<i>carvedilol 12.5mg tab</i>	49	<i>cefpodoxime 100mg tab</i>	53
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	40	<i>carvedilol 25mg tab</i>	49	<i>cefpodoxime 10mg/ml susp</i>	53
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	40	<i>carvedilol 3.125mg tab</i>	49	<i>cefpodoxime 200mg tab</i>	53
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	40	<i>carvedilol 6.25mg tab</i>	49	<i>cefpodoxime 20mg/ml susp</i>	53
		<i>casprofungin acetate 50mg inj</i>	24	<i>cefprozil 250mg tab</i>	53
		<i>casprofungin acetate 70mg inj</i>	24	<i>cefprozil 25mg/ml susp</i>	53
		CAYSTON 75MG INH SOLN	32	<i>cefprozil 500mg tab</i>	53
		CEFACLOR 250MG CAP	53	<i>cefprozil 50mg/ml susp</i>	53
		CEFACLOR 500MG CAP	53	<i>ceftazidime 1gm inj</i>	53
				<i>ceftazidime 200mg/ml inj</i>	53
				<i>ceftazidime 2gm inj</i>	53
				<i>ceftriaxone 10gm inj</i>	54
				<i>ceftriaxone 1gm inj</i>	54
				<i>ceftriaxone 250mg inj</i>	54
				<i>ceftriaxone 2gm inj</i>	54
				<i>ceftriaxone 500mg inj</i>	54
				<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

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>celecoxib 200mg cap</i>	4	<i>cholestyramine resin</i>	26	<i>citalopram 2mg/ml oral soln</i>	18
<i>celecoxib 400mg cap</i>	4	<i>(sugar-free) 4000mg powder for oral susp</i>		<i>citalopram 40mg tab</i>	18
<i>celecoxib 50mg cap</i>	4	<i>cholestyramine resin</i>	26	<i>claravis 10mg cap</i>	58
CELONTIN 300MG CAP	17	<i>4000mg powder for oral susp</i>		<i>claravis 20mg cap</i>	58
<i>cephalexin 250mg cap</i>	53	CIBINQO 100MG TAB	62	<i>claravis 30mg cap</i>	58
<i>cephalexin 25mg/ml susp</i>	53	CIBINQO 200MG TAB	62	<i>claravis 40mg cap</i>	58
<i>cephalexin 500mg cap</i>	53	CIBINQO 50MG TAB	62	<i>clarithromycin 250mg tab</i>	73
<i>cephalexin 50mg/ml susp</i>	53	<i>ciclopirox 0.77% cream</i>	59	CLARITHROMYCIN	73
CERDELGA 84MG CAP	71	<i>ciclopirox 0.77% gel</i>	59	25MG/ML SUSP	
<i>cetirizine 1mg/ml oral soln</i>	25	<i>ciclopirox 1% shampoo</i>	59	<i>clarithromycin 500mg er tab</i>	73
CETRAXAL 0.2% OTIC SOLN	82	<i>ciclopirox 8% topical soln</i>	59	<i>clarithromycin 500mg tab</i>	73
<i>cevimeline 30mg cap</i>	78	CILASTATIN/IMIPENEM	31	CLARITHROMYCIN	73
CHENODAL 250MG TAB	68	250-250MG INJ		50MG/ML SUSP	
<i>chlordiazepoxide 10mg cap</i>	9	<i>cilastatin/imipenem 500-500mg inj</i>	31	CLENPIQ	73
<i>chlordiazepoxide 25mg cap</i>	9	<i>cilostazol 100mg tab</i>	71	75-21.9-0.0625MG/ML ORAL SOLN	
<i>chlordiazepoxide 5mg cap</i>	9	<i>cilostazol 50mg tab</i>	71	<i>clindamycin 1% gel</i>	58
<i>chlorhexidine gluconate 0.12% mouthwash</i>	78	CIMDUO 300-300MG TAB	46	<i>clindamycin 1% lotion</i>	58
<i>chloroquine phosphate 250mg tab</i>	32	<i>cimetidine 200mg tab</i>	90	<i>clindamycin 1% topical soln</i>	58
CHLOROQUINE	32	<i>cimetidine 300mg tab</i>	90	<i>clindamycin 12mg/ml inj</i>	32
PHOSPHATE 500MG TAB		<i>cimetidine 400mg tab</i>	90	<i>clindamycin 150mg cap</i>	32
<i>chlorpromazine 100mg tab</i>	44	<i>cimetidine 800mg tab</i>	90	<i>clindamycin 150mg/ml (2ml) inj</i>	32
CHLORPROMAZINE	44	CIMZIA 200MG INJ	69	<i>clindamycin 150mg/ml (4ml) inj</i>	32
100MG/ML ORAL SOLN		CIMZIA 200MG/ML SYRINGE	69	<i>clindamycin 150mg/ml (6ml) inj</i>	32
<i>chlorpromazine 10mg tab</i>	44	<i>cinacalcet 30mg tab</i>	65	<i>clindamycin 15mg/ml oral soln</i>	32
<i>chlorpromazine 200mg tab</i>	44	<i>cinacalcet 60mg tab</i>	65	<i>clindamycin 18mg/ml inj</i>	32
<i>chlorpromazine 25mg tab</i>	44	<i>cinacalcet 90mg tab</i>	65	<i>clindamycin 2% vaginal cream</i>	92
CHLORPROMAZINE	44	CINRYZE 500UNIT INJ	70	<i>clindamycin 300mg cap</i>	32
30MG/ML ORAL SOLN		CIPROFLOXACIN 0.2% OTIC SOLN	82	<i>clindamycin 6mg/ml inj</i>	32
<i>chlorpromazine 50mg tab</i>	44	<i>ciprofloxacin 0.3% ophth soln</i>	80	<i>clindamycin 75mg cap</i>	32
<i>chlorthalidone 25mg tab</i>	63	<i>ciprofloxacin 250mg tab</i>	68	<i>clindamycin/benzoyl peroxide 1-5% gel</i>	58
<i>chlorthalidone 50mg tab</i>	64	<i>ciprofloxacin 2mg/ml inj</i>	68	CLINIMIX 4.25/10 INJ	79
<i>chlorzoxazone 500mg tab</i>	78	<i>ciprofloxacin 500mg tab</i>	68	CLINIMIX 4.25/5 INJ	79
CHOLBAM 250MG CAP	68	<i>ciprofloxacin 750mg tab</i>	68	CLINIMIX 5/15 INJ	79
CHOLBAM 50MG CAP	68	<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	82	CLINIMIX 5/20 INJ	79
		<i>citalopram 10mg tab</i>	17		
		<i>citalopram 20mg tab</i>	17		

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

CLINIMIX E 2.75/5 INJ	79	<i>clonidine 0.2mg/24hr</i>	28	COMBIVENT	11
CLINIMIX E 4.25/10 INJ	79	<i>weekly patch</i>		20-100MCG/ACT INH	
CLINIMIX E 4.25/5 INJ	79	<i>clonidine 0.3mg tab</i>	28	COMETRIQ CAP 100MG	36
CLINIMIX E 5/15 INJ	79	<i>clonidine 0.3mg/24hr</i>	28	DAILY DOSE PACK	
CLINIMIX E 5/20 INJ	79	<i>weekly patch</i>		COMETRIQ CAP 140MG	36
<i>clinisol 15 inj</i>	79	<i>clopidogrel 75mg tab</i>	71	DAILY DOSE PACK	
<i>clobazam 10mg tab</i>	13	<i>clorazepate dipotassium</i>	9	COMETRIQ CAP 60MG	36
<i>clobazam 2.5mg/ml susp</i>	13	<i>15mg tab</i>		DAILY DOSE PACK	
<i>clobazam 20mg tab</i>	13	<i>clotrimazole 1% cream</i>	59	COMPLERA	46
<i>clobetasol propionate</i>	61	<i>clotrimazole 10mg</i>	78	200-25-300MG TAB	
<i>0.05% cream</i>		<i>lozenge</i>		<i>compro 25mg rectal supp</i>	44
<i>clobetasol propionate</i>	61	<i>clotrimazole/betamethaso</i>	59	<i>constulose 10gm/15ml</i>	73
<i>0.05% e cream</i>		<i>ne 1-0.05% cream</i>		<i>oral soln</i>	
<i>clobetasol propionate</i>	61	<i>clotrimazole/betamethaso</i>	59	COPIKTRA 15MG CAP	36
<i>0.05% foam</i>		<i>ne 1-0.05% lotion</i>		COPIKTRA 25MG CAP	36
<i>clobetasol propionate</i>	61	<i>clozapine 100mg odt</i>	43	CORLANOR 5MG TAB	52
<i>0.05% gel</i>		<i>clozapine 100mg tab</i>	43	CORLANOR 5MG/5ML	52
<i>clobetasol propionate</i>	61	CLOZAPINE 12.5MG	43	ORAL SOLN	
<i>0.05% lotion</i>		ODT		CORLANOR 7.5MG TAB	52
<i>clobetasol propionate</i>	61	CLOZAPINE 150MG	43	COTELLIC 20MG TAB	36
<i>0.05% ointment</i>		ODT		CREON	62
<i>clobetasol propionate</i>	61	CLOZAPINE 200MG	43	120000-24000-76000UNI	
<i>0.05% shampoo</i>		ODT		T DR CAP	
<i>clobetasol propionate</i>	61	<i>clozapine 200mg tab</i>	43	CREON	62
<i>0.05% topical soln</i>		<i>clozapine 25mg odt</i>	43	15000-3000-9500UNIT	
<i>clobetasol propionate</i>	61	<i>clozapine 25mg tab</i>	43	DR CAP	
<i>0.05% topical spray</i>		<i>clozapine 50mg tab</i>	43	CREON	62
<i>clodan 0.05% shampoo</i>	61	COARTEM 20-120MG	32	180000-36000-114000U	
<i>clomipramine 25mg cap</i>	19	TAB		NIT DR CAP	
<i>clomipramine 50mg cap</i>	19	CODEINE SULFATE	5	CREON	63
<i>clomipramine 75mg cap</i>	19	15MG TAB		30000-6000-19000UNIT	
<i>clonazepam 0.125mg odt</i>	13	CODEINE SULFATE	5	DR CAP	
<i>clonazepam 0.25mg odt</i>	13	30MG TAB		CREON	63
<i>clonazepam 0.5mg odt</i>	13	CODEINE SULFATE	5	60000-12000-38000UNIT	
<i>clonazepam 0.5mg tab</i>	13	60MG TAB		DR CAP	
<i>clonazepam 1mg odt</i>	13	<i>colchicine 0.6mg tab</i>	70	CRINONE 4% VAGINAL	92
<i>clonazepam 1mg tab</i>	13	<i>colchicine/probenecid</i>	70	GEL	
<i>clonazepam 2mg odt</i>	13	<i>0.5-500mg tab</i>		CRINONE 8% VAGINAL	92
<i>clonazepam 2mg tab</i>	13	<i>colesevelam 625mg tab</i>	26	GEL	
<i>clonidine 0.1mg er tab</i>	1	<i>colestipol 1000mg tab</i>	26	<i>cromolyn sodium 20mg/ml</i>	68
<i>clonidine 0.1mg tab</i>	28	<i>colestipol 5000mg</i>	26	<i>oral soln</i>	
<i>clonidine 0.1mg/24hr</i>	28	<i>granules for oral susp</i>		<i>cromolyn sodium 4%</i>	81
<i>weekly patch</i>		<i>colistin 75mg/ml inj</i>	32	<i>ophth soln</i>	
<i>clonidine 0.2mg tab</i>	28			<i>cryselle 28 pack</i>	54

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>cyclobenzaprine 10mg tab</i>	78	DAYVIGO 10MG TAB	72	<i>desmopressin acetate 0.1mg tab</i>	66
<i>cyclobenzaprine 5mg tab</i>	78	DAYVIGO 5MG TAB	72	<i>desmopressin acetate 0.2mg tab</i>	66
CYCLOPHOSPHAMIDE 25MG TAB	33	<i>deblitane 0.35mg tab 28 day pack</i>	57	<i>desogestrel/ethinyl estradiol/ethinyl estradiol 0.15-0.01-0.02mg 28 day pack</i>	54
CYCLOPHOSPHAMIDE 50MG TAB	33	<i>deferasirox 125mg tab for oral susp</i>	23	<i>desogestrel/ethinyl estradiol/inert ingredients 0.15-0.03-1mg pack</i>	54
<i>cyclosporine 100mg cap</i>	77	<i>deferasirox 180mg granules</i>	23	<i>desonide 0.05% ointment</i>	61
<i>cyclosporine 25mg cap</i>	77	<i>deferasirox 180mg tab</i>	23	<i>desoximetasone 0.25% cream</i>	61
<i>cyclosporine modified 100mg cap</i>	77	<i>deferasirox 250mg tab for oral susp</i>	23	<i>desoximetasone 0.25% ointment</i>	61
<i>cyclosporine modified 100mg/ml oral soln</i>	77	<i>deferasirox 360mg granules</i>	23	<i>desvenlafaxine succinate 100mg er tab</i>	18
<i>cyclosporine modified 25mg cap</i>	77	<i>deferasirox 360mg tab</i>	23	<i>desvenlafaxine succinate 25mg er tab</i>	18
<i>cyclosporine modified 50mg cap</i>	77	<i>deferasirox 500mg tab for oral susp</i>	23	<i>desvenlafaxine succinate 50mg er tab</i>	19
<i>cyred 28 day pack</i>	54	<i>deferasirox 90mg granules</i>	23	DEXAMETHASONE 0.1MG/ML ORAL SOLN	57
CYSTADROPS 0.37% OPHTH SOLN	81	<i>deferasirox 90mg tab</i>	23	DEXAMETHASONE 0.5MG TAB	57
CYSTAGON 150MG CAP	70	<i>deferiprone 1000mg tab</i>	23	<i>dexamethasone 0.75mg tab</i>	57
CYSTAGON 50MG CAP	70	<i>deferiprone 500mg tab</i>	23	<i>dexamethasone 1.5mg tab</i>	57
CYSTARAN 0.44% OPHTH SOLN	81	DELSTRIGO 100-300-300MG TAB	46	DEXAMETHASONE 1MG TAB	57
<hr/>		<i>demeclocycline 150mg tab</i>	87	DEXAMETHASONE 2MG TAB	57
D		<i>demeclocycline 300mg tab</i>	88	<i>dexamethasone 4mg tab</i>	58
<i>dalfampridine 10mg er tab</i>	85	DEPO-PROVERA 150MG/ML INJ	57	<i>dexamethasone 6mg tab</i>	58
<i>danazol 100mg cap</i>	7	DESCOVY 120-15MG TAB	46	DEXAMETHASONE 81	
<i>danazol 200mg cap</i>	7	DESCOVY 200-25MG TAB	46	PHOSPHATE 0.1% OPHTH SOLN	
<i>danazol 50mg cap</i>	7	<i>desipramine 100mg tab</i>	19	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	81
<i>dantrolene sodium 100mg cap</i>	78	<i>desipramine 10mg tab</i>	19		
<i>dantrolene sodium 25mg cap</i>	78	<i>desipramine 150mg tab</i>	19		
<i>dantrolene sodium 50mg cap</i>	78	<i>desipramine 25mg tab</i>	19		
<i>dapsone 100mg tab</i>	32	<i>desipramine 50mg tab</i>	19		
<i>dapsone 25mg tab</i>	32	<i>desipramine 75mg tab</i>	19		
DAPTACEL INJ	89	<i>desloratadine 5mg tab</i>	25		
<i>daptomycin 500mg inj</i>	31	<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	66		
<i>darunavir 600mg tab</i>	46				
<i>darunavir 800mg tab</i>	46				
DAURISMO 100MG TAB	34				
DAURISMO 25MG TAB	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>dexamethasone/tobramycin</i> 0.3-0.1% ophth susp	81	DIASTAT 2.5MG RECTAL GEL	13	<i>dicyclomine</i> 2mg/ml oral soln	90
<i>dexmethylphenidate</i> 10mg er cap	1	DIASTAT 20MG RECTAL GEL	13	DIFICID 200MG TAB	73
<i>dexmethylphenidate</i> 10mg tab	1	<i>diazepam</i> 10mg tab	9	DIFICID 40MG/ML SUSP	73
<i>dexmethylphenidate</i> 15mg er cap	1	DIAZEPAM 10MG/2ML RECTAL GEL	13	<i>diflunisal</i> 500mg tab	5
<i>dexmethylphenidate</i> 2.5mg tab	1	<i>diazepam</i> 1mg/ml oral soln	9	<i>difluprednate</i> 0.05% ophth susp	81
<i>dexmethylphenidate</i> 20mg er cap	1	DIAZEPAM 2.5MG/0.5ML RECTAL GEL	13	DIGOXIN 0.05MG/ML ORAL SOLN	51
<i>dexmethylphenidate</i> 25mg er cap	1	DIAZEPAM 20MG/4ML RECTAL GEL	13	<i>digoxin</i> 0.125mg tab	51
<i>dexmethylphenidate</i> 30mg er cap	2	<i>diazepam</i> 2mg tab	9	<i>digoxin</i> 0.25mg tab	51
<i>dexmethylphenidate</i> 35mg er cap	2	<i>diazepam</i> 5mg tab	9	<i>dihydroergotamine mesylate</i> 0.5mg/act nasal inhaler	74
<i>dexmethylphenidate</i> 40mg er cap	2	<i>diazepam</i> 5mg/ml oral soln	9	DILANTIN 30MG ER CAP	16
<i>dexmethylphenidate</i> 5mg er cap	2	<i>diazoxide</i> 50mg/ml susp	21	<i>dilt</i> 120mg er cap	50
<i>dexmethylphenidate</i> 5mg tab	2	<i>diclofenac</i> potassium 50mg tab	4	<i>dilt</i> 180mg er cap	50
<i>dextroamphetamine sulfate</i> 10mg er cap	1	<i>diclofenac</i> sodium 0.1% ophth soln	81	<i>dilt</i> 240mg er cap	50
<i>dextroamphetamine sulfate</i> 10mg tab	1	<i>diclofenac</i> sodium 1% gel	59	<i>diltiazem</i> 120mg er (12hr) cap	50
<i>dextroamphetamine sulfate</i> 15mg er cap	1	<i>diclofenac</i> sodium 100mg er tab	4	<i>diltiazem</i> 120mg er (24hr) cap	50
<i>dextroamphetamine sulfate</i> 5mg er cap	1	<i>diclofenac</i> sodium 25mg dr tab	4	<i>diltiazem</i> 120mg tab	50
<i>dextroamphetamine sulfate</i> 5mg tab	1	<i>diclofenac</i> sodium 3% gel	60	<i>diltiazem</i> 180mg er (24hr) cap	50
DIACOMIT 250MG CAP	14	<i>diclofenac</i> sodium 50mg dr tab	4	<i>diltiazem</i> 240mg er (24hr) cap	50
DIACOMIT 250MG POWDER FOR ORAL SUSP	14	<i>diclofenac</i> sodium 75mg dr tab	4	<i>diltiazem</i> 300mg er (24hr) cap	50
DIACOMIT 500MG CAP	14	<i>diclofenac</i> sodium/misoprostol 50-0.2mg dr tab	4	<i>diltiazem</i> 30mg tab	50
DIACOMIT 500MG POWDER FOR ORAL SUSP	14	<i>diclofenac</i> sodium/misoprostol 75-0.2mg dr tab	4	<i>diltiazem</i> 360mg er (24hr) cap	50
DIASTAT 10MG RECTAL GEL	13	<i>dicloxacillin</i> 250mg cap	84	<i>diltiazem</i> 420mg er (24hr) cap	50
		<i>dicloxacillin</i> 500mg cap	84	<i>diltiazem</i> 60mg er (12hr) cap	50
		<i>dicyclomine</i> 10mg cap	90	<i>diltiazem</i> 60mg tab	50
		<i>dicyclomine</i> 20mg tab	90	<i>diltiazem</i> 90mg er (12hr) cap	50
				<i>diltiazem</i> 90mg tab	50
				<i>dimethyl fumarate</i> 120mg dr cap	86

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>dimethyl fumarate 240mg dr cap</i>	86	<i>dotti 0.025mg/24hr patch</i>	67	<i>dronabinol 2.5mg cap</i>	24
<i>dimethyl fumarate/dimethyl fumarate 120-240mg pack</i>	86	<i>dotti 0.0375mg/24hr patch</i>	67	<i>dronabinol 5mg cap</i>	24
DIPHThERIA/TETANUS TOXOID INJ	89	<i>dotti 0.05mg/24hr patch</i>	67	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg pack</i>	54
<i>disopyramide 100mg cap</i>	9	<i>dotti 0.075mg/24hr patch</i>	67	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg pack</i>	54
<i>disopyramide 150mg cap</i>	9	<i>dotti 0.1mg/24hr patch</i>	67	DROXIA 200MG CAP	71
<i>disulfiram 250mg tab</i>	84	DOVATO 50-300MG TAB	46	DROXIA 300MG CAP	71
<i>disulfiram 500mg tab</i>	84	<i>doxazosin 1mg tab</i>	28	DROXIA 400MG CAP	71
<i>divalproex sodium 125mg dr cap</i>	17	<i>doxazosin 2mg tab</i>	28	<i>droxidopa 100mg cap</i>	92
<i>divalproex sodium 125mg dr tab</i>	17	<i>doxazosin 4mg tab</i>	28	<i>droxidopa 200mg cap</i>	93
<i>divalproex sodium 250mg dr tab</i>	17	<i>doxazosin 8mg tab</i>	28	<i>droxidopa 300mg cap</i>	93
<i>divalproex sodium 250mg er tab</i>	17	<i>doxepin 100mg cap</i>	19	DULERA 100-5MCG	11
<i>divalproex sodium 500mg dr tab</i>	17	<i>doxepin 10mg cap</i>	19	INHALER	
<i>divalproex sodium 500mg er tab</i>	17	<i>doxepin 10mg/ml oral soln</i>	19	DULERA 200-5MCG	11
<i>dofetilide 0.125mg cap</i>	9	<i>doxepin 150mg cap</i>	19	INHALER	
<i>dofetilide 0.25mg cap</i>	9	<i>doxepin 25mg cap</i>	19	DULERA 50-5MCG	11
<i>dofetilide 0.5mg cap</i>	9	<i>doxepin 50mg cap</i>	19	INHALER	
<i>donepezil 10mg odt</i>	84	<i>doxepin 75mg cap</i>	19	<i>duloxetine 20mg dr cap</i>	19
<i>donepezil 10mg tab</i>	84	<i>doxercalciferol 0.05mcg cap</i>	65	<i>duloxetine 30mg dr cap</i>	19
<i>donepezil 23mg tab</i>	84	<i>doxercalciferol 1mcg cap</i>	65	<i>duloxetine 60mg dr cap</i>	19
<i>donepezil 5mg odt</i>	84	<i>doxercalciferol 2.5mcg cap</i>	65	DUPIXENT	62
<i>donepezil 5mg tab</i>	84	<i>doxy 100mg inj</i>	88	100MG/0.67ML	
DOPTELET 20MG TAB	71	<i>doxycycline hyclate 100mg cap</i>	88	SYRINGE	
DOPTELET TAB 40MG	71	<i>doxycycline hyclate 100mg tab</i>	88	DUPIXENT	62
DAILY DOSE PACK		<i>doxycycline hyclate 20mg tab</i>	88	200MG/1.14ML	
DOPTELET TAB 60MG	71	<i>doxycycline hyclate 50mg cap</i>	88	AUTO-INJECTOR	
DAILY DOSE PACK		<i>doxycycline monohydrate 100mg cap</i>	88	DUPIXENT	62
<i>dorzolamide 2% ophth soln</i>	81	<i>doxycycline monohydrate 100mg tab</i>	88	200MG/1.14ML	
<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	79	<i>doxycycline monohydrate 50mg cap</i>	88	SYRINGE	
<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	79	<i>doxycycline monohydrate 50mg tab</i>	88	DUPIXENT 300MG/2ML	62
		<i>doxycycline monohydrate 5mg/ml susp</i>	88	AUTO-INJECTOR	
		<i>dronabinol 10mg cap</i>	24	DUPIXENT 300MG/2ML	62
				SYRINGE	
				<i>dutasteride 0.5mg cap</i>	70
				E	
				<i>econazole nitrate 1% cream</i>	59
				EDURANT 25MG TAB	46
				<i>efavirenz 200mg cap</i>	46

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>efavirenz 50mg cap</i>	46	<i>emtricitabine/tenofovir</i>	46	ENGERIX-B	91
<i>efavirenz 600mg tab</i>	46	<i>disoproxil fumarate</i>		10MCG/0.5ML SYRINGE	
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	46	<i>100-150mg tab</i>		ENGERIX-B 20MCG/ML INJ	91
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	46	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	46	ENGERIX-B 20MCG/ML SYRINGE	91
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	46	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	46	<i>enoxaparin sodium 100mg/1ml syringe</i>	12
ELIGARD 22.5MG SYRINGE	34	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	46	<i>enoxaparin sodium 120mg/0.8ml syringe</i>	12
ELIGARD 30MG SYRINGE	34	EMTRIVA 10MG/ML ORAL SOLN	46	<i>enoxaparin sodium 150mg/1ml syringe</i>	12
ELIGARD 45MG SYRINGE	34	<i>enalapril maleate 10mg tab</i>	27	<i>enoxaparin sodium 30mg/0.3ml syringe</i>	12
ELIGARD 7.5MG SYRINGE	34	<i>enalapril maleate 2.5mg tab</i>	27	<i>enoxaparin sodium 40mg/0.4ml syringe</i>	12
ELIQUIS 2.5MG TAB	12	<i>enalapril maleate 20mg tab</i>	27	<i>enoxaparin sodium 60mg/0.6ml syringe</i>	12
ELIQUIS 5MG 30-DAY STARTER PACK	12	<i>enalapril maleate 5mg tab</i>	27	<i>enpresse 28 day pack</i>	54
ELIQUIS 5MG TAB	12	<i>enalapril</i>	30	<i>enskyce 28 day pack</i>	54
ELMIRON 100MG CAP	70	<i>maleate/hydrochlorothiazide 10-25mg tab</i>		ENSPRYNG 120MG/ML SYRINGE	77
<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	57	<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>		<i>entacapone 200mg tab</i>	40
EMCYT 140MG CAP	34	ENBREL 25MG/0.5ML INJ	5	<i>entecavir 0.5mg tab</i>	48
EMGALITY 100MG/ML SYRINGE	74	ENBREL 25MG/0.5ML SYRINGE	5	<i>entecavir 1mg tab</i>	48
EMGALITY 120MG/ML AUTO-INJECTOR	74	ENBREL 50MG/ML AUTO-INJECTOR	5	ENTRESTO 24-26MG TAB	51
EMGALITY 120MG/ML SYRINGE	74	ENBREL 50MG/ML CARTRIDGE	5	ENTRESTO 49-51MG TAB	51
EMSAM 12MG/24HR PATCH	17	ENBREL 50MG/ML SYRINGE	5	ENTRESTO 97-103MG TAB	51
EMSAM 6MG/24HR PATCH	17	ENDARI 5GM POWDER FOR ORAL SOLN	71	<i>enulose 10gm/15ml oral soln</i>	69
EMSAM 9MG/24HR PATCH	17	<i>endocet 325-10mg tab</i>	6	ENVARUSUS XR 0.75MG TAB	77
<i>emtricitabine 200mg cap</i>	46	<i>endocet 325-2.5mg tab</i>	6	ENVARUSUS XR 1MG TAB	77
		<i>endocet 325-5mg tab</i>	7	ENVARUSUS XR 4MG TAB	77
		<i>endocet 325-7.5mg tab</i>	7	EPIDIOLEX 100MG/ML ORAL SOLN	14
				<i>epinastine 0.05% ophthalmic soln</i>	81

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>epinephrine</i>	92	<i>estradiol 0.00104mg/hr</i>	67	<i>ethambutol 400mg tab</i>	33
<i>0.15mg/0.3ml</i>		<i>twice weekly patch</i>		<i>ethinyl estradiol/ethinyl</i>	54
<i>auto-injector (2pack)</i>		<i>estradiol 0.00104mg/hr</i>	67	<i>estradiol/levonorgestrel</i>	
<i>epinephrine 0.3mg/0.3ml</i>	92	<i>weekly patch</i>		<i>0.01-0.03-0.15mg 91 day</i>	
<i>auto-injector (2pack)</i>		<i>estradiol 0.00156mg/hr</i>	67	<i>pack</i>	
<i>epitol 200mg tab</i>	14	<i>twice weekly patch</i>		<i>ethinyl</i>	54
<i>eplerenone 25mg tab</i>	30	<i>estradiol 0.00156mg/hr</i>	67	<i>estradiol/ethynodiol</i>	
<i>eplerenone 50mg tab</i>	30	<i>weekly patch</i>		<i>diacetate/inert</i>	
EPRONTIA 25MG/ML	14	<i>estradiol 0.00208mg/hr</i>	67	<i>ingredients 0.035-1-1mg</i>	
ORAL SOLN		<i>twice weekly patch</i>		<i>pack</i>	
ERGOLOID MESYLATES	86	<i>estradiol 0.00208mg/hr</i>	67	<i>ethinyl</i>	55
USP 1MG TAB		<i>weekly patch</i>		<i>estradiol/ethynodiol</i>	
ERIVEDGE 150MG CAP	34	<i>estradiol 0.0025mg/hr</i>	67	<i>diacetate/inert</i>	
ERLEADA 240MG TAB	35	<i>weekly patch</i>		<i>ingredients 0.05-1-1mg</i>	
ERLEADA 60MG TAB	35	<i>estradiol 0.00312mg/hr</i>	67	<i>pack</i>	
<i>erlotinib 100mg tab</i>	34	<i>weekly patch</i>		<i>ethinyl</i>	57
<i>erlotinib 150mg tab</i>	34	<i>estradiol 0.00313mg/hr</i>	67	<i>estradiol/etonogestrel</i>	
<i>erlotinib 25mg tab</i>	34	<i>twice weekly patch</i>		<i>0.120-0.015 mg/24hr</i>	
<i>errin 28 day 0.35mg pack</i>	57	<i>estradiol 0.00417mg/hr</i>	67	<i>vaginal system</i>	
<i>ertapenem 1gm inj</i>	31	<i>twice weekly patch</i>		<i>ethinyl estradiol/ferrous</i>	55
<i>erythromycin 0.5% ophth</i>	80	<i>estradiol 0.00417mg/hr</i>	67	<i>fumarate/norethindrone</i>	
<i>ointment</i>		<i>weekly patch</i>		<i>0.025-75-0.8mg pack</i>	
<i>erythromycin 2% gel</i>	58	<i>estradiol 0.01% vaginal</i>	92	<i>ethinyl estradiol/ferrous</i>	55
<i>erythromycin 2% topical</i>	59	<i>cream</i>		<i>fumarate/norethindrone</i>	
<i>soln</i>		<i>estradiol 0.5mg tab</i>	67	<i>0.035-75-0.4mg pack</i>	
ERYTHROMYCIN	73	<i>estradiol 1mg tab</i>	67	<i>ethinyl estradiol/ferrous</i>	55
250MG DR CAP		<i>estradiol 2mg tab</i>	67	<i>fumarate/norethindrone</i>	
<i>erythromycin 250mg tab</i>	73	<i>estradiol valerate</i>	67	<i>acetate 0.02-75-1mg 21</i>	
<i>erythromycin 500mg tab</i>	73	<i>10mg/ml inj</i>		<i>day pack</i>	
<i>erythromycin</i>	73	<i>estradiol valerate</i>	67	<i>ethinyl estradiol/ferrous</i>	55
<i>ethylsuccinate 40mg/ml</i>		<i>20mg/ml inj</i>		<i>fumarate/norethindrone</i>	
<i>susp</i>		<i>estradiol valerate</i>	67	<i>acetate</i>	
<i>erythromycin</i>	73	<i>40mg/ml inj</i>		<i>1-20/1-30/1-35mg-mcg</i>	
<i>ethylsuccinate 80mg/ml</i>		<i>estradiol/norethindrone</i>	66	<i>pack</i>	
<i>susp</i>		<i>acetate 0.5-0.1mg pack</i>		<i>ethinyl estradiol/inert</i>	55
<i>erythromycin/benzoyl</i>	59	<i>estradiol/norethindrone</i>	66	<i>ingredients/levonorgestre</i>	
<i>peroxide 5-3% gel</i>		<i>acetate 1-0.5mg pack</i>		<i>l 0.02-1-0.1mg 28 day</i>	
<i>escitalopram 10mg tab</i>	18	ESTRING 2MG (7.5	92	<i>pack</i>	
<i>escitalopram 1mg/ml oral</i>	18	MCG/24HR) VAGINAL		<i>ethinyl estradiol/inert</i>	55
<i>soln</i>		SYSTEM		<i>ingredients/levonorgestre</i>	
<i>escitalopram 20mg tab</i>	18	<i>eszopiclone 1mg tab</i>	72	<i>l 0.03-1-0.15mg 28</i>	
<i>escitalopram 5mg tab</i>	18	<i>eszopiclone 2mg tab</i>	72	<i>daypack</i>	
<i>estarylla 28 day pack</i>	54	<i>eszopiclone 3mg tab</i>	72		
<i>estazolam 2mg tab</i>	72	<i>ethambutol 100mg 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>ethinyl estradiol/inert ingredients/levonorgestrel 1 0.03-1-0.15mg 91 day pack</i>	55	<i>euthyrox 137mcg tab</i>	88	<i>famciclovir 125mg tab</i>	48
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg pack</i>	55	<i>euthyrox 150mcg tab</i>	88	<i>famciclovir 250mg tab</i>	48
<i>ethinyl estradiol/inert ingredients/norgestimate/norgestimate 0.025-1-0.18-0.215-0.25 mg</i>	55	<i>euthyrox 175mcg tab</i>	88	<i>famciclovir 500mg tab</i>	48
<i>ethinyl estradiol/inert ingredients/norgestimate/norgestimate 0.035-1-0.18-0.215-0.25 mg</i>	55	<i>euthyrox 200mcg tab</i>	88	<i>famotidine 20mg tab</i>	90
<i>ethinyl estradiol/levonorgestrel 91 day pack</i>	55	<i>euthyrox 25mcg tab</i>	88	<i>famotidine 40mg tab</i>	90
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	66	<i>euthyrox 50mcg tab</i>	88	<i>famotidine 8mg/ml susp</i>	90
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg pack</i>	67	<i>euthyrox 75mcg tab</i>	88	FANAPT 10MG TAB	42
<i>ethosuximide 250mg cap</i>	17	<i>euthyrox 88mcg tab</i>	88	FANAPT 12MG TAB	42
<i>ethosuximide 50mg/ml oral soln</i>	17	<i>everolimus 0.25mg tab</i>	77	FANAPT 1MG TAB	42
<i>etodolac 200mg cap</i>	4	<i>everolimus 0.5mg tab</i>	77	FANAPT 2MG TAB	42
<i>etodolac 300mg cap</i>	4	<i>everolimus 0.75mg tab</i>	77	FANAPT 4MG TAB	42
<i>etodolac 400mg tab</i>	4	<i>everolimus 10mg tab</i>	36	FANAPT 6MG TAB	42
<i>etodolac 500mg tab</i>	4	<i>everolimus 1mg tab</i>	77	FANAPT 8MG TAB	42
<i>etravirine 100mg tab</i>	46	<i>everolimus 2.5mg tab</i>	36	FANAPT TITRATION PACK	42
<i>etravirine 200mg tab</i>	46	<i>everolimus 2mg tab for oral susp</i>	37	FARXIGA 10MG TAB	23
<i>euthyrox 100mcg tab</i>	88	<i>everolimus 3mg tab for oral susp</i>	37	FARXIGA 5MG TAB	23
<i>euthyrox 112mcg tab</i>	88	<i>everolimus 5mg tab</i>	37	FASENRA 30MG/ML AUTO-INJECTOR	10
<i>euthyrox 125mcg tab</i>	88	<i>everolimus 5mg tab for oral susp</i>	37	FASENRA 30MG/ML SYRINGE	10
		<i>everolimus 7.5mg tab</i>	37	<i>febuxostat 40mg tab</i>	70
		EVOTAZ 300-150MG TAB	46	<i>febuxostat 80mg tab</i>	70
		EVRYSIDI 0.75MG/ML ORAL SOLN	79	<i>felbamate 120mg/ml susp</i>	16
		<i>exemestane 25mg tab</i>	35	<i>felbamate 400mg tab</i>	16
		EXKIVITY 40MG CAP	34	<i>felbamate 600mg tab</i>	16
		EXTAVIA 0.3MG INJ	86	<i>felodipine 10mg er tab</i>	50
		<i>ezetimibe 10mg tab</i>	26	<i>felodipine 2.5mg er tab</i>	50
		<i>ezetimibe 10mg/simvastatin 10mg tab</i>	25	<i>felodipine 5mg er tab</i>	50
		<i>ezetimibe 10mg/simvastatin 20mg tab</i>	25	<i>fenofibrate 134mg cap</i>	26
		<i>ezetimibe 10mg/simvastatin 40mg tab</i>	25	<i>fenofibrate 145mg tab</i>	26
		<i>ezetimibe 10mg/simvastatin 80mg tab</i>	25	<i>fenofibrate 160mg tab</i>	26
		F		<i>fenofibrate 200mg cap</i>	26
		<i>falmina 28 day pack</i>	55	<i>fenofibrate 48mg tab</i>	26
				<i>fenofibrate 54mg tab</i>	26
				<i>fenofibrate 67mg cap</i>	26
				<i>fenofibric acid 135mg dr cap</i>	26
				<i>fenofibric acid 45mg dr cap</i>	26
				FENTANYL 100MCG BUCCAL TAB	5
				<i>fentanyl 100mcg/hr patch</i>	5
				<i>fentanyl 1200mcg lozenge</i>	5

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>fentanyl 12mcg/hr patch</i>	5	FIASP 100UNIT/ML PEN	22	<i>fluconazole 400mg/200ml inj</i>	25
<i>fentanyl 1600mcg lozenge</i>	5	INJ		<i>fluconazole 40mg/ml susp</i>	25
FENTANYL 200MCG BUCCAL TAB	5	<i>finasteride 5mg tab</i>	70	<i>fluconazole 50mg tab</i>	25
<i>fentanyl 200mcg lozenge</i>	5	<i>finzala 24 fe chewable 28 day pack</i>	55	<i>flucytosine 250mg cap</i>	24
<i>fentanyl 25mcg/hr patch</i>	5	FINTEPLA 2.2MG/ML	14	<i>flucytosine 500mg cap</i>	24
FENTANYL 400MCG BUCCAL TAB	5	ORAL SOLN		<i>fludrocortisone acetate 0.1mg tab</i>	58
<i>fentanyl 400mcg lozenge</i>	5	<i>finzala 24 fe chewable 28 day pack</i>	55	FLUNISOLIDE 25% (25MCG/ACT) NASAL INHALER	79
<i>fentanyl 50mcg/hr patch</i>	5	FIRDAPSE 10MG TAB	33	<i>fluocinolone acetonide 0.01% cream</i>	61
FENTANYL 600MCG BUCCAL TAB	5	FIRMAGON	35	<i>fluocinolone acetonide 0.01% oil</i>	61
<i>fentanyl 600mcg lozenge</i>	5	120MG/VIAL INJ		<i>fluocinolone acetonide 0.01% otic soln</i>	82
<i>fentanyl 75mcg/hr patch</i>	5	FIRMAGON 80MG INJ	35	<i>fluocinolone acetonide 0.01% topical soln</i>	61
FENTANYL 800MCG BUCCAL TAB	5	FIRVANQ 25MG/ML	31	<i>fluocinolone acetonide 0.025% cream</i>	61
<i>fentanyl 800mcg lozenge</i>	5	ORAL SOLN		<i>fluocinolone acetonide 0.025% ointment</i>	61
FENTORA 100MCG BUCCAL TAB	5	FIRVANQ 50MG/ML	31	<i>fluocinonide 0.05% cream</i>	61
FENTORA 200MCG BUCCAL TAB	5	ORAL SOLN		<i>fluocinonide 0.05% e cream</i>	61
FENTORA 400MCG BUCCAL TAB	5	<i>flac 0.01% otic soln</i>	82	<i>fluocinonide 0.05% gel</i>	61
FENTORA 600MCG BUCCAL TAB	5	<i>flavoxate 100mg tab</i>	91	<i>fluocinonide 0.05% ointment</i>	61
FENTORA 800MCG BUCCAL TAB	5	FLEBOGAMMA	82	<i>fluorometholone 0.1% ophth susp</i>	81
FERRIPROX 1000MG TAB	23	5GM/50ML INJ		FLUOROURACIL 2% TOPICAL SOLN	60
FERRIPROX 100MG/ML ORAL SOLN	23	<i>flecainide acetate 100mg tab</i>	9	<i>fluorouracil 5% cream</i>	60
<i>fesoterodine fumarate 4mg er tab</i>	90	<i>flecainide acetate 150mg tab</i>	9	FLUOROURACIL 5% TOPICAL SOLN	60
<i>fesoterodine fumarate 8mg er tab</i>	90	<i>flecainide acetate 50mg tab</i>	9	<i>fluoxetine 10mg cap</i>	18
FETZIMA 120MG ER CAP	19	FLOVENT 100MCG DISKUS	10	<i>fluoxetine 20mg cap</i>	18
FETZIMA 20MG ER CAP	19	FLOVENT 110MCG HFA INHALER	10	<i>fluoxetine 40mg cap</i>	18
FETZIMA 40MG ER CAP	19	FLOVENT 220MCG HFA INHALER	11	<i>fluoxetine 4mg/ml oral soln</i>	18
FETZIMA 80MG ER CAP	19	FLOVENT 250MCG DISKUS	11		
FETZIMA PACK	19	FLOVENT 44MCG HFA INHALER	11		
FIASP 100UNIT/ML CARTRIDGE	22	FLOVENT 50MCG DISKUS	11		
FIASP 100UNIT/ML INJ	22	<i>fluconazole 100mg tab</i>	25		
		<i>fluconazole 10mg/ml susp</i>	25		
		<i>fluconazole 150mg tab</i>	25		
		<i>fluconazole 200mg tab</i>	25		
		<i>fluconazole 200mg/100ml inj</i>	25		

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>fluoxetine 60mg tab</i>	18	<i>fosinopril sodium 20mg tab</i>	27	<i>furosemide 20mg tab</i>	63
FLUPHENAZINE	44	<i>fosinopril sodium 40mg tab</i>	27	<i>furosemide 40mg tab</i>	63
0.5MG/ML ORAL SOLN		<i>fosinopril sodium 40mg tab</i>		<i>furosemide 80mg tab</i>	63
<i>fluphenazine 10mg tab</i>	44	<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>		FUROSEMIDE 8MG/ML	63
<i>fluphenazine 1mg tab</i>	44	<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	30	ORAL SOLN	
<i>fluphenazine 2.5mg tab</i>	44	FOSRENOL 1000MG	69	FUZEON 90MG INJ	46
FLUPHENAZINE	44	ORAL POWDER		<i>fyavolv 0.0025-0.5mg tab</i>	67
2.5MG/ML INJ		FOSRENOL 750MG	69	<i>fyavolv 0.005-1mg tab</i>	67
<i>fluphenazine 5mg tab</i>	44	ORAL POWDER		FYCOMPA 0.5MG/ML	13
FLUPHENAZINE	44	FOTIVDA 0.89MG CAP	37	SUSP	
5MG/ML ORAL SOLN		FOTIVDA 1.34MG CAP	37	FYCOMPA 10MG TAB	13
<i>fluphenazine decanoate 25mg/ml inj</i>	44	FRAGMIN	13	FYCOMPA 12MG TAB	13
FLURBIPROFEN	81	10000UNIT/ML		FYCOMPA 2MG TAB	13
SODIUM 0.03% OPHTH SOLN		SYRINGE		FYCOMPA 4MG TAB	13
<i>fluticasone propionate 0.005% ointment</i>	61	FRAGMIN	13	FYCOMPA 6MG TAB	13
<i>fluticasone propionate 0.05% cream</i>	61	12500UNIT/0.5ML		FYCOMPA 8MG TAB	13
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	79	SYRINGE		<hr/>	
<i>fluvastatin 20mg cap</i>	26	FRAGMIN	13	G	
<i>fluvastatin 40mg cap</i>	26	15000UNIT/0.6ML		<i>gabapentin 100mg cap</i>	14
<i>fluvoxamine maleate 100mg tab</i>	18	SYRINGE		<i>gabapentin 300mg cap</i>	14
<i>fluvoxamine maleate 25mg tab</i>	18	FRAGMIN	13	<i>gabapentin 400mg cap</i>	14
<i>fluvoxamine maleate 50mg tab</i>	18	18000UNT/0.72ML		<i>gabapentin 50mg/ml oral soln</i>	14
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	12	SYRINGE		<i>gabapentin 600mg tab</i>	14
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	13	FRAGMIN	13	<i>gabapentin 800mg tab</i>	14
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	13	2500UNIT/0.2ML		GALAFOLD 123MG 28 DAY PACK	65
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	13	SYRINGE		<i>galantamine 12mg tab</i>	84
FORTEO 600MCG/2.4ML PEN INJ	64	FRAGMIN	13	<i>galantamine 4mg tab</i>	84
<i>fosamprenavir 700mg tab</i>	46	5000UNIT/0.2ML		<i>galantamine 8mg tab</i>	84
<i>fosinopril sodium 10mg tab</i>	27	SYRINGE		<i>galantamine hydrobromide 16mg er cap</i>	84
		FRAGMIN	13	<i>galantamine hydrobromide 24mg er cap</i>	84
		7500UNIT/0.3ML		GALANTAMINE	84
		SYRINGE		HYDROBROMIDE	
		95000UNIT/3.8ML INJ		4MG/ML ORAL SOLN	
		FUROSCIX 80MG/10ML	63	<i>galantamine hydrobromide 8mg er cap</i>	84
		CARTRIDGE		GAMMAGARD 10GM INJ	82
		<i>furosemide 10mg/ml inj</i>	63	GAMMAGARD	82
		<i>furosemide 10mg/ml oral soln</i>	63	2.5GM/25ML INJ	

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

GAMMAGARD 5GM INJ	82	GENOTROPIN 1.4MG	65	<i>glimepiride 2mg tab</i>	23
GAMMAKED 1GM/10ML INJ	82	SYRINGE		<i>glimepiride 4mg tab</i>	23
GAMMAPLEX 10GM/100ML INJ	82	GENOTROPIN 1.6MG	65	<i>glipizide 10mg er tab</i>	23
GAMMAPLEX 10GM/200ML INJ	82	SYRINGE		<i>glipizide 10mg tab</i>	23
GAMMAPLEX 20GM/200ML INJ	82	GENOTROPIN 1.8MG	65	<i>glipizide 2.5mg er tab</i>	23
GAMMAPLEX 5GM/50ML INJ	82	SYRINGE		<i>glipizide 5mg er tab</i>	23
GAMUNEX 1GM/10ML INJ	82	GENOTROPIN 12MG	65	<i>glipizide 5mg tab</i>	23
GARDASIL 9 INJ	91	CARTRIDGE		<i>glipizide/metformin 2.5-250mg tab</i>	
GARDASIL 9 SYRINGE	91	GENOTROPIN 1MG	65	<i>glipizide/metformin 2.5-500mg tab</i>	20
<i>gatifloxacin 0.5% ophth soln</i>	80	SYRINGE		<i>glipizide/metformin 5-500mg tab</i>	
GATTEX 5MG INJ	69	GENOTROPIN 2MG	65	GLUCAGEN 1MG INJ	21
GAUZE PADS (2 X 2)	74	SYRINGE		GLUCAGON (RDNA) 1MG INJ	21
GAVILYTE-C POWDER FOR ORAL SOLN	73	GENOTROPIN 5MG	65	<i>glucose 100mg/ml inj</i>	79
<i>gavilyte-g powder for oral soln</i>	73	CARTRIDGE		GLUCOSE	75
GAVRETO 100MG CAP	37	<i>gentamicin 0.1% cream</i>	59	100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	
<i>gefitinib 250mg tab</i>	34	<i>gentamicin 0.1% ointment</i>	59	GLUCOSE	75
<i>gemfibrozil 600mg tab</i>	26	<i>gentamicin 0.3% ophth soln</i>	80	100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	
GEMTESA 75MG TAB	91	GENTAMICIN 0.8MG/ML INJ	2	GLUCOSE	75
<i>generlac 10gm/15ml oral soln</i>	69	<i>gentamicin 1.2mg/ml inj</i>	2	25MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	
<i>gengraf 100mg cap</i>	77	GENTAMICIN 1.6MG/ML INJ	2	GLUCOSE	75
<i>gengraf 100mg/ml oral soln</i>	77	GENTAMICIN 1MG/ML INJ	2	50mg/ml/potassium chloride	
<i>gengraf 25mg cap</i>	77	GENTAMICIN 40mg/ml inj	2	<i>0.01meq/ml/sodium chloride 4.5mg/ml inj</i>	
GENOTROPIN 0.2MG SYRINGE	64	GENVOYA 150-150-200-10MG TAB	46	<i>glucose</i>	75
GENOTROPIN 0.4MG SYRINGE	64	GILENYA 0.25MG CAP	86	<i>50mg/ml/potassium chloride 0.02meq/ml inj</i>	
GENOTROPIN 0.6MG SYRINGE	64	GILOTRIF 20MG TAB	34	<i>glucose</i>	75
GENOTROPIN 0.8MG SYRINGE	65	GILOTRIF 30MG TAB	34	<i>50mg/ml/potassium chloride</i>	
GENOTROPIN 1.2MG SYRINGE	65	GILOTRIF 40MG TAB	34	<i>0.02meq/ml/sodium chloride 2.25mg/ml inj</i>	
		GLASSIA 1000MG/50ML INJ	87		
		<i>glatiramer acetate 20mg/ml syringe</i>	86		
		<i>glatiramer acetate 40mg/ml syringe</i>	86		
		<i>glatopa 20mg/ml syringe</i>	86		
		<i>glatopa 40mg/ml syringe</i>	86		
		GLEOSTINE 100MG CAP	33		
		GLEOSTINE 10MG CAP	33		
		GLEOSTINE 40MG CAP	33		
		<i>glimepiride 1mg 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>glucose</i>	75	<i>griseofulvin 500mg tab</i>	24	HAVRIX 720ELU/0.5ML	91
<i>50mg/ml/potassium chloride</i>		<i>guanfacine 1mg er tab</i>	1	SYRINGE	
<i>0.02meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>guanfacine 2mg er tab</i>	1	<i>heparin sodium porcine 10000unit/ml inj</i>	13
<i>glucose</i>	75	<i>guanfacine 3mg er tab</i>	1	<i>heparin sodium porcine 1000unit/ml inj</i>	13
<i>50mg/ml/potassium chloride</i>		<i>guanfacine 4mg er tab</i>	1	<i>heparin sodium porcine 20000unit/ml inj</i>	13
<i>0.02meq/ml/sodium chloride 9mg/ml inj</i>		GVOKE 0.5MG/0.1ML	21	<i>heparin sodium porcine 5000unit/ml inj</i>	13
<i>glucose</i>	75	AUTO-INJECTOR		HEPLISAV-B	91
<i>50mg/ml/potassium chloride</i>		GVOKE 0.5MG/0.1ML	21	20MCG/0.5ML SYRINGE	
<i>0.03meq/ml/sodium chloride 4.5mg/ml inj</i>		SYRINGE		HETLIOZ 4MG/ML SUSP	73
<i>glucose</i>	75	GVOKE 1MG/0.2ML	21	HIBERIX 10MCG INJ	91
<i>50mg/ml/potassium chloride</i>		AUTO-INJECTOR		HUMIRA 10MG/0.1ML	3
<i>0.03meq/ml/sodium chloride 4.5mg/ml inj</i>		GVOKE 1MG/0.2ML INJ	21	SYRINGE	
<i>glucose</i>	75	GVOKE 1MG/0.2ML	21	HUMIRA 20MG/0.2ML	3
<i>50mg/ml/potassium chloride</i>		SYRINGE		SYRINGE	
<i>0.04meq/ml/sodium chloride 4.5mg/ml inj</i>		H		HUMIRA 40MG/0.4ML	3
<i>GLUCOSE</i>	75	HAEGARDA 2000UNIT	70	AUTO-INJECTOR	
<i>50MG/ML/POTASSIUM CHLORIDE</i>		INJ		HUMIRA 40MG/0.4ML	3
<i>0.04MEQ/ML/SODIUM CHLORIDE 9MG/ML INJ</i>		HAEGARDA 3000UNIT	70	SYRINGE	
<i>glucose 50mg/ml/sodium chloride 2mg/ml inj</i>	75	INJ		HUMIRA 80MG/0.8ML	3
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	75	<i>hailey 24 fe 28 day pack</i>	55	AUTO-INJECTOR	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	75	<i>halobetasol propionate 0.05% cream</i>	61	HUMIRA PEDIATRIC	3
<i>glyburide/metformin 1.25-250mg tab</i>	20	<i>halobetasol propionate 0.05% ointment</i>	61	CROHN'S STARTER	
<i>glyburide/metformin 2.5-500mg tab</i>	20	<i>haloperidol 0.5mg tab</i>	43	PACK SYRINGE (2)	
<i>glyburide/metformin 5-500mg tab</i>	20	<i>haloperidol 10mg tab</i>	43	40MG/0.4ML	
<i>glycopyrrolate 1mg tab</i>	90	<i>haloperidol 1mg tab</i>	43	80MG/0.8ML	
<i>glycopyrrolate 2mg tab</i>	90	<i>haloperidol 20mg tab</i>	43	HUMIRA PEN - CROHN'S	3
<i>granisetron 1mg tab</i>	24	<i>haloperidol 2mg tab</i>	43	STARTER PACK	
<i>griseofulvin 125mg tab</i>	24	<i>haloperidol 2mg/ml oral soln</i>	43	40MG/0.8ML INJ	
<i>griseofulvin 250mg tab</i>	24	<i>haloperidol 5mg tab</i>	43	HUMIRA PEN - CROHN'S	3
<i>griseofulvin 25mg/ml susp</i>	24	<i>haloperidol 5mg/ml inj</i>	43	STARTER PACK	
		<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	43	80MG/0.8ML INJ	
		<i>haloperidol decanoate 100mg/ml inj</i>	43	HUMIRA PEN -	3
		<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	43	PEDIATRIC UC STARTER	
		<i>haloperidol decanoate 50mg/ml inj</i>	43	PACK 80MG/0.8ML INJ	
		HAVRIX 1440ELU/ML	91		
		SYRINGE			

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 PEN - PSORIASIS STARTER PACK 40MG/0.8ML	3	<i>hydrochlorothiazide/losar tan potassium 12.5-50mg tab</i>	30	<i>hydrocortisone 1.67mg/ml enema</i>	7
HUMIRA PEN 80MG/0.8ML AND 40MG/0.4ML - PSORIASIS/UVEITIS STARTER PACK	3	<i>hydrochlorothiazide/losar tan potassium 25-100mg tab</i>	30	<i>hydrocortisone 10mg tab</i>	58
HUMIRA PREFILLED SYRINGE 80MG/0.8ML STARTER PACK - PEDIATRIC CROHN'S DISEASE	3	<i>hydrochlorothiazide/meto prolol tartrate 25-100mg tab</i>	30	<i>hydrocortisone 2.5% cream</i>	7
HUMULIN R 500UNIT/ML INJ	22	<i>hydrochlorothiazide/meto prolol tartrate 25-50mg tab</i>	30	<i>hydrocortisone 2.5% lotion</i>	61
HUMULIN R 500UNIT/ML PEN INJ	22	<i>hydrochlorothiazide/olme sartan medoxomil 12.5-20mg tab</i>	30	<i>hydrocortisone 2.5% ointment</i>	61
<i>hydralazine 100mg tab</i>	30	<i>hydrochlorothiazide/olme sartan medoxomil 12.5-40mg tab</i>	30	<i>hydrocortisone 20mg tab</i>	58
<i>hydralazine 10mg tab</i>	31	<i>hydrochlorothiazide/olme sartan medoxomil 12.5-40mg tab</i>	30	<i>hydrocortisone 5mg tab</i>	58
<i>hydralazine 25mg tab</i>	31	<i>hydrochlorothiazide/olme sartan medoxomil 25-40mg tab</i>	30	<i>hydrocortisone</i>	7
<i>hydralazine 50mg tab</i>	31	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>acetate/pramoxine 1-1% rectal cream</i>	
<i>hydrochlorothiazide 12.5mg cap</i>	64	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>hydrocortisone/acetic acid 1-2% otic soln</i>	82
<i>hydrochlorothiazide 12.5mg tab</i>	64	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>hydromorphone 2mg tab</i>	5
<i>hydrochlorothiazide 25mg tab</i>	64	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>hydromorphone 4mg tab</i>	5
<i>hydrochlorothiazide 50mg tab</i>	64	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>hydromorphone 8mg tab</i>	6
<i>hydrochlorothiazide/irbes artan 12.5-150mg tab</i>	30	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>hydroxychloroquine sulfate 100mg tab</i>	32
<i>hydrochlorothiazide/irbes artan 12.5-300mg tab</i>	30	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>hydroxychloroquine sulfate 200mg tab</i>	32
<i>hydrochlorothiazide/lisin opril 12.5-10mg tab</i>	30	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>hydroxychloroquine sulfate 300mg tab</i>	32
<i>hydrochlorothiazide/lisin opril 12.5-20mg tab</i>	30	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>hydroxychloroquine sulfate 400mg tab</i>	33
<i>hydrochlorothiazide/lisin opril 25-20mg tab</i>	30	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>hydroxyurea 500mg cap</i>	39
<i>hydrochlorothiazide/losar tan potassium 12.5-100mg tab</i>	30	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	63	<i>hydroxyzine 10mg tab</i>	8
		<i>hydrochlorothiazide/tria mterene 25-37.5mg cap</i>	63	<i>hydroxyzine 25mg tab</i>	8
		<i>hydrochlorothiazide/tria mterene 25-37.5mg tab</i>	63	<i>hydroxyzine 50mg tab</i>	8
		<i>hydrochlorothiazide/tria mterene 50-75mg tab</i>	63	HYDROXYZINE	8
		<i>hydrochlorothiazide/vals artan 12.5-160mg tab</i>	30	PAMOATE 100MG CAP	
		<i>hydrochlorothiazide/vals artan 12.5-320mg tab</i>	30	<i>hydroxyzine pamoate 25mg cap</i>	8
		<i>hydrochlorothiazide/vals artan 12.5-80mg tab</i>	30	<i>hydroxyzine pamoate 50mg cap</i>	8
		<i>hydrochlorothiazide/vals artan 25-160mg tab</i>	30		
		<i>hydrochlorothiazide/vals artan 25-320mg tab</i>	30	I	
		<i>hydrocortisone 1% cream</i>	61	<i>ibandronate 150mg tab</i>	64
				IBRANCE 100MG CAP	37
				IBRANCE 100MG TAB	37
				IBRANCE 125MG CAP	37
				IBRANCE 125MG TAB	37
				IBRANCE 75MG CAP	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

IBRANCE 75MG TAB	37	INLYTA 1MG TAB	33	INVEGA 39MG/0.25ML	42
<i>ibu 600mg tab</i>	4	INLYTA 5MG TAB	34	SYRINGE	
<i>ibu 800mg tab</i>	4	INQOVI 5 TABLET PACK	36	INVEGA	42
<i>ibuprofen 20mg/ml susp</i>	4	INREBIC 100MG CAP	37	410MG/1.315ML	
<i>ibuprofen 400mg tab</i>	4	INSULIN ASPART	22	SYRINGE	
<i>ibuprofen 600mg tab</i>	4	HUMAN 100UNIT/ML		INVEGA 546MG/1.75ML	42
<i>ibuprofen 800mg tab</i>	4	CARTRIDGE		SYRINGE	
<i>icatibant 10mg/ml syringe</i>	70	INSULIN ASPART	22	INVEGA 78MG/0.5ML	42
<i>iclevia 91 day pack</i>	55	HUMAN 100UNIT/ML		SYRINGE	
ICLUSIG 10MG TAB	37	INJ		INVEGA	42
ICLUSIG 15MG TAB	37	INSULIN ASPART	22	819MG/2.625ML	
ICLUSIG 30MG TAB	37	HUMAN 100UNIT/ML		SYRINGE	
ICLUSIG 45MG TAB	37	PEN INJ		IPOL INJ	91
IDHIFA 100MG TAB	37	INSULIN ASPART MIX	22	<i>ipratropium bromide</i>	10
IDHIFA 50MG TAB	37	70UNIT-30UNIT/ML INJ		<i>0.02% inh soln</i>	
ILEVRO 0.3% OPPTH	81	INSULIN ASPART MIX	22	<i>ipratropium bromide</i>	78
SUSP		70UNIT-30UNIT/ML PEN		<i>0.03% (0.021mg/act)</i>	
<i>imatinib 100mg tab</i>	37	INJ		<i>nasal inhaler</i>	
<i>imatinib 400mg tab</i>	37	INSULIN PEN NEEDLE	74	<i>ipratropium bromide</i>	79
IMBRUVICA 140MG CAP	37	INSULIN SYRINGE	74	<i>0.06% (0.042mg/act)</i>	
IMBRUVICA 420MG TAB	37	INSULIN SYRINGE	74	<i>nasal inhaler</i>	
IMBRUVICA 70MG CAP	37	(DISP) U-100 0.3ML		<i>ipratropium/albuterol</i>	11
IMBRUVICA 70MG/ML	37	INSULIN SYRINGE	74	<i>0.5-2.5mg/3ml inh soln</i>	
SUSP		(DISP) U-100 1/2ML		<i>irbesartan 150mg tab</i>	28
<i>imipramine 10mg tab</i>	19	INSULIN SYRINGE	74	<i>irbesartan 300mg tab</i>	28
<i>imipramine 25mg tab</i>	20	(DISP) U-100 1ML		<i>irbesartan 75mg tab</i>	28
<i>imipramine 50mg tab</i>	20	INTELENCE 25MG TAB	46	ISENTRESS 100MG	46
<i>imiquimod 5% cream</i>	62	INTRALIPID	79	CHEW TAB	
IMITREX 6MG/0.5ML	74	20GM/100ML INJ		ISENTRESS 100MG	46
CARTRIDGE		<i>introvale 91 day pack</i>	55	GRANULES FOR ORAL	
IMOVAX 2.5UNIT/ML INJ	91	INVEGA 1092MG/3.5ML	42	SUSP	
IMPAVIDO 50MG CAP	31	SYRINGE		ISENTRESS 25MG	46
<i>incassia 0.35mg 28 day</i>	57	INVEGA 117MG/0.75ML	42	CHEW TAB	
<i>pack</i>		SYRINGE		ISENTRESS 400MG TAB	46
INCRELEX 40MG/4ML	65	INVEGA 1560MG/5ML	42	ISENTRESS 600MG TAB	47
INJ		SYRINGE		<i>isibloom 28 day pack</i>	55
INCRUSE ELLIPTA	10	INVEGA 156MG/ML	42	ISOLYTE P INJ	75
62.5MCG/INH INHALER		SYRINGE		ISOLYTE S INJ	75
<i>indapamide 1.25mg tab</i>	64	INVEGA 234MG/1.5ML	42	ISONIAZID 100MG TAB	33
<i>indapamide 2.5mg tab</i>	64	SYRINGE		ISONIAZID 10MG/ML	33
INFANRIX SYRINGE	89	INVEGA	42	ORAL SOLN	
INGREZZA 40MG CAP	85	273MG/0.875ML		<i>isoniazid 300mg tab</i>	33
INGREZZA 60MG CAP	85	SYRINGE		<i>isosorbide dinitrate 10mg</i>	8
INGREZZA 80MG CAP	85			<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>isosorbide dinitrate 20mg tab</i>	8	JANUMET XR 1000-100MG TAB	20	JYNARQUE TAB 90/30 CARTON PACK (28)	66
<i>isosorbide dinitrate 30mg tab</i>	8	JANUMET XR 1000-50MG TAB	20	JYNNEOS 0.5ML INJ	91
<i>isosorbide dinitrate 5mg tab</i>	8	JANUMET XR 500-50MG TAB	20	K	
<i>isosorbide mononitrate 10mg tab</i>	8	JANUVIA 100MG TAB	21	<i>kaitlib fe 28 day pack</i>	55
<i>isosorbide mononitrate 120mg er tab</i>	8	JANUVIA 25MG TAB	21	KALYDECO 13.4MG GRANULES	87
<i>isosorbide mononitrate 20mg tab</i>	8	JANUVIA 50MG TAB	21	KALYDECO 150MG TAB	87
<i>isosorbide mononitrate 30mg er tab</i>	8	JARDIANCE 10MG TAB	23	KALYDECO 25MG GRANULES	87
<i>isosorbide mononitrate 60mg er tab</i>	8	JARDIANCE 25MG TAB	23	KALYDECO 50MG GRANULES	87
<i>isotretinoin 10mg cap</i>	59	<i>jasmiel 28 day pack</i>	55	KALYDECO 75MG GRANULES	87
<i>isotretinoin 20mg cap</i>	59	<i>javygtor 100mg powder for oral soln</i>	65	<i>kariva 28 day pack</i>	55
<i>isotretinoin 30mg cap</i>	59	<i>javygtor 100mg tab</i>	65	KCL/D5W/LR INJ 0.15%	75
<i>isotretinoin 40mg cap</i>	59	<i>javygtor 500mg powder for oral soln</i>	65	<i>kcl/nacl 20meq-0.9% inj</i>	75
<i>itraconazole 100mg cap</i>	25	JAYPIRCA 100MG TAB	37	KCL/NACL 40MEQ-9% INJ	75
<i>ivermectin 3mg tab</i>	8	JAYPIRCA 50MG TAB	37	<i>kelnor 1/35 28 day pack</i>	55
IXIARO 0.012MG/ML SYRINGE	91	<i>jinteli 0.005-1mg tab</i>	67	<i>kelnor 1/50 28 day pack</i>	55
J		<i>juleber 28 day pack</i>	55	KERENDIA 10MG TAB	66
JAKAFI 10MG TAB	37	JULUCA 50-25MG TAB	47	KERENDIA 20MG TAB	66
JAKAFI 15MG TAB	37	<i>junel 1.5/30 21 day pack</i>	55	KESIMPTA 20MG/0.4ML PEN INJ	86
JAKAFI 20MG TAB	37	<i>junel 1/20 21 day pack</i>	55	<i>ketoconazole 2% cream</i>	59
JAKAFI 25MG TAB	37	<i>junel fe 1.5/30 28 day pack</i>	55	<i>ketoconazole 2% shampoo</i>	59
JAKAFI 5MG TAB	37	<i>junel fe 1/20 28 day pack</i>	55	<i>ketoconazole 200mg tab</i>	25
<i>jantoven 10mg tab</i>	12	<i>junel fe 24 1/20 28 day pack</i>	55	ketorolac tromethamine 0.4% ophth soln	81
<i>jantoven 1mg tab</i>	12	JUXTAPID 10MG CAP	27	ketorolac tromethamine 0.5% ophth soln	81
<i>jantoven 2.5mg tab</i>	12	JUXTAPID 20MG CAP	27	ketorolac tromethamine 10mg tab	4
<i>jantoven 2mg tab</i>	12	JUXTAPID 30MG CAP	27	KEVZARA	4
<i>jantoven 3mg tab</i>	12	JUXTAPID 5MG CAP	27	150MG/1.14ML AUTO-INJECTOR	
<i>jantoven 4mg tab</i>	12	JYNARQUE 15MG TAB	66	KEVZARA	4
<i>jantoven 5mg tab</i>	12	JYNARQUE 30MG TAB	66	150MG/1.14ML SYRINGE	
<i>jantoven 6mg tab</i>	12	JYNARQUE TAB 15/15 CARTON PACK (56)	66	KEVZARA	4
<i>jantoven 7.5mg tab</i>	12	JYNARQUE TAB 30/15 CARTON PACK (28)	66	200MG/1.14ML AUTO-INJECTOR	
JANUMET 1000-50MG TAB	20	JYNARQUE TAB 45/15 CARTON PACK (28)	66		
JANUMET 500-50MG TAB	20	JYNARQUE TAB 60/30 CARTON PACK (28)	66		

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

KEVZARA	4	<i>lactulose 667mg/ml oral soln</i>	73	<i>larin fe 1/20 pack</i>	56
200MG/1.14ML SYRINGE		<i>lamivudine 100mg tab</i>	48	<i>latanoprost 0.005% ophth soln</i>	81
KINRIX SYRINGE	89	<i>lamivudine 10mg/ml oral soln</i>	47	<i>layolis fe 28 pack</i>	56
KISQALI 200MG DAILY DOSE PACK (21)	37	<i>lamivudine 150mg tab</i>	47	<i>leena 28 day pack</i>	56
KISQALI 400MG DAILY DOSE PACK (42)	37	<i>lamivudine 300mg tab</i>	47	<i>leflunomide 10mg tab</i>	5
KISQALI 600MG DAILY DOSE PACK (63)	37	<i>lamivudine/zidovudine 150-300mg tab</i>	47	<i>leflunomide 20mg tab</i>	5
KISQALI/FEMARA 200 CO-PACK	36	<i>lamotrigine 100mg er tab</i>	15	<i>lenalidomide 10mg cap</i>	76
KISQALI/FEMARA 400 CO-PACK	36	<i>lamotrigine 100mg odt</i>	15	<i>lenalidomide 15mg cap</i>	76
KISQALI/FEMARA 600 CO-PACK	36	<i>lamotrigine 100mg tab</i>	15	<i>lenalidomide 2.5mg cap</i>	76
<i>klor-con 10meq er tab</i>	75	<i>lamotrigine 150mg tab</i>	15	<i>lenalidomide 20mg cap</i>	76
<i>klor-con 10meq micro er tab</i>	75	<i>lamotrigine 200mg er tab</i>	15	<i>lenalidomide 25mg cap</i>	76
<i>klor-con 15meq micro er tab</i>	75	<i>lamotrigine 200mg odt</i>	15	<i>lenalidomide 5mg cap</i>	76
<i>klor-con 20meq micro er tab</i>	75	<i>lamotrigine 200mg tab</i>	15	LENVIMA 10MG DAILY DOSE PACK	34
<i>klor-con 20meq powder for oral soln</i>	75	<i>lamotrigine 250mg er tab</i>	15	LENVIMA 12MG DAILY DOSE PACK	34
<i>klor-con 8meq er tab</i>	75	<i>lamotrigine 25mg chew tab</i>	15	LENVIMA 14MG DAILY DOSE PACK	34
KLOXXADO 8MG/0.1ML NASAL SPRAY	23	<i>lamotrigine 25mg er tab</i>	15	LENVIMA 18MG DAILY DOSE PACK	34
KORLYM 300MG TAB	21	<i>lamotrigine 25mg odt</i>	15	LENVIMA 20MG DAILY DOSE PACK	34
KOSELUGO 10MG CAP	37	<i>lamotrigine 25mg tab</i>	15	LENVIMA 24MG DAILY DOSE PACK	34
KOSELUGO 25MG CAP	37	<i>lamotrigine 300mg er tab</i>	15	LENVIMA 4MG DAILY DOSE PACK	34
KRAZATI 200MG TAB	37	<i>lamotrigine 50mg er tab</i>	15	LENVIMA 8MG DAILY DOSE PACK	34
<i>kurvelo pack</i>	55	<i>lamotrigine 50mg odt</i>	15	<i>lessina 28 day pack</i>	56
L		<i>lamotrigine 5mg chew tab</i>	15	<i>letrozole 2.5mg tab</i>	35
<i>labetalol 100mg tab</i>	49	LAMPIT 120MG TAB	31	<i>leucovorin 10mg tab</i>	39
<i>labetalol 200mg tab</i>	49	LAMPIT 30MG TAB	31	<i>leucovorin 15mg tab</i>	39
<i>labetalol 300mg tab</i>	49	<i>lansoprazole 15mg dr cap</i>	90	<i>leucovorin 25mg tab</i>	39
<i>lacosamide 100mg tab</i>	14	<i>lansoprazole 30mg dr cap</i>	90	<i>leucovorin 5mg tab</i>	39
<i>lacosamide 10mg/ml oral soln</i>	14	<i>lanthanum carbonate 1000mg chew tab</i>	69	LEUKERAN 2MG TAB	33
<i>lacosamide 150mg tab</i>	15	<i>lanthanum carbonate 500mg chew tab</i>	69	LEUPROLIDE ACETATE 22.5MG INJ	35
<i>lacosamide 200mg tab</i>	15	<i>lanthanum carbonate 750mg chew tab</i>	69	<i>leuprolide acetate 5mg/ml inj</i>	35
<i>lacosamide 50mg tab</i>	15	LANTUS 100UNIT/ML INJ	22	<i>levalbuterol 0.31mg/3ml neb soln</i>	11
		LANTUS 100UNIT/ML PEN INJ	22	<i>levalbuterol 0.63mg/3ml inh soln</i>	11
		<i>lapatinib 250mg tab</i>	37		
		<i>larin 1.5/30 pack</i>	55		
		<i>larin 1/20 pack</i>	56		
		<i>larin fe 1.5/30 pack</i>	56		

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>levalbuterol</i>	11	<i>levora 0.15/30 28 day pack</i>	56	<i>lidocaine/prilocaine 2.5-2.5% cream</i>	62
<i>1.25mg/0.5ml neb soln</i>		<i>levothyroxine sodium 100mcg tab</i>	88	<i>linezolid 20mg/ml susp</i>	32
<i>levalbuterol 1.25mg/3ml neb soln</i>	11	<i>levothyroxine sodium 112mcg tab</i>	88	<i>linezolid 2mg/ml inj</i>	32
LEVALBUTEROL 45MCG INHALER	11	<i>levothyroxine sodium 125mcg tab</i>	88	<i>linezolid 600mg tab</i>	32
LEVEMIR 100UNIT/ML INJ	22	<i>levothyroxine sodium 137mcg tab</i>	88	<i>liothyronine sodium 25mcg tab</i>	89
LEVEMIR 100UNIT/ML PEN INJ	22	<i>levothyroxine sodium 150mcg tab</i>	88	<i>liothyronine sodium 50mcg tab</i>	89
<i>levetiracetam 1000mg tab</i>	15	<i>levothyroxine sodium 175mcg tab</i>	88	<i>liothyronine sodium 5mcg tab</i>	89
<i>levetiracetam 100mg/ml oral soln</i>	15	<i>levothyroxine sodium 200mcg tab</i>	88	<i>lisinopril 10mg tab</i>	27
<i>levetiracetam 250mg tab</i>	15	<i>levothyroxine sodium 25mcg tab</i>	88	<i>lisinopril 2.5mg tab</i>	27
<i>levetiracetam 500mg er tab</i>	15	<i>levothyroxine sodium 300mcg tab</i>	88	<i>lisinopril 20mg tab</i>	27
<i>levetiracetam 500mg tab</i>	15	<i>levothyroxine sodium 50mcg tab</i>	88	<i>lisinopril 30mg tab</i>	27
<i>levetiracetam 750mg er tab</i>	15	<i>levothyroxine sodium 75mcg tab</i>	88	<i>lisinopril 40mg tab</i>	27
<i>levetiracetam 750mg tab</i>	15	<i>levothyroxine sodium 88mcg tab</i>	88	<i>lisinopril 5mg tab</i>	27
LEVOBUNOLOL 0.5% OPHTH SOLN	79	<i>levoxyl 100mcg tab</i>	89	<i>lithium carbonate 150mg cap</i>	41
<i>levocarnitine 100mg/ml oral soln</i>	65	<i>levoxyl 112mcg tab</i>	89	<i>lithium carbonate 300mg cap</i>	41
<i>levocarnitine 330mg tab</i>	65	<i>levoxyl 125mcg tab</i>	89	<i>lithium carbonate 300mg er tab</i>	41
<i>levocetirizine 0.5mg/ml oral soln</i>	25	<i>levoxyl 137mcg tab</i>	89	<i>lithium carbonate 300mg tab</i>	41
<i>levocetirizine 5mg tab</i>	25	<i>levoxyl 150mcg tab</i>	89	<i>lithium carbonate 300mg er tab</i>	41
<i>levofloxacin 0.5% ophth soln</i>	80	<i>levoxyl 175mcg tab</i>	89	<i>lithium carbonate 450mg er tab</i>	41
<i>levofloxacin 250mg tab</i>	68	<i>levoxyl 200mcg tab</i>	89	LITHIUM CARBONATE 600MG CAP	41
<i>levofloxacin 25mg/ml oral soln</i>	68	<i>levoxyl 25mcg tab</i>	89	LIVMARLI 9.5MG/ML ORAL SOLN	69
<i>levofloxacin 500mg tab</i>	68	<i>levoxyl 50mcg tab</i>	89	LIVTENCITY 200MG TAB	48
<i>levofloxacin 500mg/100ml inj</i>	68	<i>levoxyl 75mcg tab</i>	89	<i>loestrin fe 1/20 28 day pack</i>	56
<i>levofloxacin 750mg tab</i>	68	<i>levoxyl 88mcg tab</i>	89	LOKELMA 10GM POWDER FOR ORAL SUSP	77
<i>levofloxacin 750mg/150ml inj</i>	68	LEXIVA 50MG/ML SUSP	47	LOKELMA 5GM POWDER FOR ORAL SUSP	77
<i>levonest 28 day pack</i>	56	<i>lidocaine 4% topical soln</i>	62	LONSURF 6.14-15MG TAB	36
<i>levonorgestrel-ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg pack</i>	56	<i>lidocaine 5% ointment</i>	62	LONSURF 8.19-20MG TAB	36
		<i>lidocaine 5% patch</i>	62		
		<i>lidocaine viscous 2% topical soln</i>	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

<i>loperamide 2mg cap</i>	23	LUPRON 11.25MG	35	LYTGOBI 4MG TAB	38
<i>lopinavir/ritonavir</i>	47	SYRINGE		PACK (20MG DAILY	
<i>100-25mg tab</i>		LUPRON 22.5MG	35	DOSE)	
<i>lopinavir/ritonavir</i>	47	SYRINGE		<i>lyza 0.35mg pack</i>	57
<i>200-50mg tab</i>		LUPRON 3.75MG	35	<hr/>	
<i>lopinavir/ritonavir</i>	47	SYRINGE		M	
<i>80-20mg/ml oral soln</i>		LUPRON 30MG	35	<i>magnesium sulfate</i>	75
<i>lorazepam 0.5mg tab</i>	9	SYRINGE		<i>500mg/ml inj</i>	
<i>lorazepam 1mg tab</i>	9	LUPRON 45MG	35	<i>magnesium sulfate</i>	75
<i>lorazepam 2mg tab</i>	9	SYRINGE		<i>500mg/ml syringe</i>	
<i>lorazepam 2mg/ml oral</i>	9	(NON-PEDIATRIC)		<i>malathion 0.5% lotion</i>	62
<i>soln</i>		LUPRON 7.5MG INJ PED	65	<i>maraviroc 150mg tab</i>	47
LORBRENA 100MG TAB	37	KIT (1 MONTH)		<i>maraviroc 300mg tab</i>	47
LORBRENA 25MG TAB	37	LUPRON 7.5MG	35	<i>marlissa 28 day pack</i>	56
<i>loryna 28 day pack</i>	56	SYRINGE		MARPLAN 10MG TAB	17
<i>losartan potassium</i>	28	<i>lurasidone 120mg tab</i>	41	MATULANE 50MG CAP	39
<i>100mg tab</i>		<i>lurasidone 20mg tab</i>	41	MAVENCLAD 10	86
<i>losartan potassium 25mg</i>	28	<i>lurasidone 40mg tab</i>	41	TABLET PACK 10MG	
<i>tab</i>		<i>lurasidone 60mg tab</i>	41	MAVENCLAD 4 TABLET	86
<i>losartan potassium 50mg</i>	28	<i>lurasidone 80mg tab</i>	41	PACK 10MG	
<i>tab</i>		<i>lutra 28 day pack</i>	56	MAVENCLAD 5 TABLET	86
LOTEMAX 0.5% OPHTH	81	LYBALVI 10-10MG TAB	85	PACK 10MG	
OINTMENT		LYBALVI 15-10MG TAB	85	MAVENCLAD 6 TABLET	86
<i>loteprednol etabonate</i>	81	LYBALVI 20-10MG TAB	85	PACK 10MG	
<i>0.5% ophth gel</i>		LYBALVI 5-10MG TAB	85	MAVENCLAD 7 TABLET	86
<i>loteprednol etabonate</i>	81	<i>lyleq 28 day 0.35mg pack</i>	57	PACK 10MG	
<i>0.5% ophth susp</i>		<i>lyllana 0.025mg/24hr</i>	67	MAVENCLAD 8 TABLET	86
<i>lovastatin 10mg tab</i>	26	<i>patch</i>		PACK 10MG	
<i>lovastatin 20mg tab</i>	26	<i>lyllana 0.0375mg/24hr</i>	67	MAVENCLAD 9 TABLET	86
<i>lovastatin 40mg tab</i>	26	<i>patch</i>		PACK 10MG	
<i>low-ogestrel 28 day pack</i>	56	<i>lyllana 0.05mg/24hr</i>	67	MAVYRET 100-40MG	48
<i>loxapine 10mg cap</i>	43	<i>patch</i>		TAB	
<i>loxapine 25mg cap</i>	43	<i>lyllana 0.075mg/24hr</i>	67	MAVYRET 50-20MG	48
<i>loxapine 50mg cap</i>	43	<i>patch</i>		ORAL PELLETT	
<i>loxapine 5mg cap</i>	43	<i>lyllana 0.1mg/24hr patch</i>	67	MAYZENT 0.25MG	86
<i>lubiprostone 24mcg cap</i>	68	LYNPARZA 100MG TAB	38	STARTER PACK	
<i>lubiprostone 8mcg cap</i>	68	LYNPARZA 150MG TAB	38	MAYZENT 0.25MG TAB	86
LUMAKRAS 120MG TAB	37	LYSODREN 500MG TAB	35	MAYZENT 1MG TAB	86
LUMAKRAS 320MG TAB	37	LYTGOBI 4MG TAB	38	MAYZENT 2MG TAB	86
LUMIGAN 0.01% OPHTH	81	PACK (12MG DAILY		MAYZENT STARTER	86
SOLN		DOSE)		PACK (7)	
LUPKYNIS 7.9MG CAP	77	LYTGOBI 4MG TAB	38	<i>meclizine 12.5mg tab</i>	24
LUPRON 11.25MG INJ	65	PACK (16MG DAILY		<i>meclizine 25mg tab</i>	24
PED KIT (3 MONTH)		DOSE)		<i>medroxyprogesterone</i>	84
				<i>acetate 10mg tab</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>medroxyprogesterone acetate 150mg/ml inj</i>	57	<i>mesalamine 66.7mg/ml enema</i>	69	<i>methylphenidate 20mg tab</i>	2
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	57	MESNEX 400MG TAB	40	<i>methylphenidate 27mg er tab</i>	2
<i>medroxyprogesterone acetate 2.5mg tab</i>	84	<i>metaxalone 800mg tab</i>	78	<i>methylphenidate 27mg sr tab</i>	2
<i>medroxyprogesterone acetate 5mg tab</i>	84	<i>metformin 1000mg tab</i>	21	<i>methylphenidate 2mg/ml oral soln</i>	2
<i>mefloquine 250mg tab</i>	33	<i>metformin 500mg er tab</i>	21	<i>methylphenidate 30mg cr cap</i>	2
<i>megestrol acetate 125mg/ml susp</i>	84	<i>metformin 500mg tab</i>	21	<i>methylphenidate 30mg la cap</i>	2
<i>megestrol acetate 20mg tab</i>	35	<i>metformin 750mg er tab</i>	21	<i>methylphenidate 36mg er tab</i>	2
<i>megestrol acetate 40mg tab</i>	35	<i>metformin 850mg tab</i>	21	<i>methylphenidate 36mg sr tab</i>	2
<i>megestrol acetate 40mg/ml susp</i>	35	<i>methadone 10mg tab</i>	6	<i>methylphenidate 40mg cr cap</i>	2
MEKINIST 0.05MG/ML ORAL SOLN	38	<i>methadone 5mg tab</i>	6	<i>methylphenidate 40mg la cap</i>	2
MEKINIST 0.5MG TAB	38	<i>methazolamide 25mg tab</i>	63	<i>methylphenidate 50mg cr cap</i>	2
MEKINIST 2MG TAB	38	<i>methazolamide 50mg tab</i>	63	<i>methylphenidate 54mg er tab</i>	2
MEKTOVI 15MG TAB	38	<i>methenamine hippurate 1000mg tab</i>	32	<i>methylphenidate 54mg sr tab</i>	2
<i>meloxicam 15mg tab</i>	4	<i>methimazole 10mg tab</i>	88	<i>methylphenidate 5mg tab</i>	2
<i>meloxicam 7.5mg tab</i>	4	<i>methimazole 5mg tab</i>	88	<i>methylphenidate 60mg cr cap</i>	2
<i>memantine 10mg tab</i>	84	<i>methocarbamol 500mg tab</i>	78	<i>methylphenidate ER osmotic tab 18mg</i>	2
<i>memantine 14mg er cap</i>	85	<i>methocarbamol 750mg tab</i>	78	<i>methylprednisolone 16mg tab</i>	58
<i>memantine 21mg er cap</i>	85	<i>methotrexate 2.5mg tab</i>	33	<i>methylprednisolone 32mg tab</i>	58
<i>memantine 28mg er cap</i>	85	<i>methotrexate 25mg/ml inj</i>	33	<i>methylprednisolone 4mg pack</i>	58
<i>memantine 2mg/ml oral soln</i>	85	<i>methotrexate 50mg/2ml inj</i>	33	<i>methylprednisolone 4mg tab</i>	58
<i>memantine 5/10mg titration pack</i>	85	METHOXSALLEN 10MG CAP	60	<i>methylprednisolone 8mg tab</i>	58
<i>memantine 5mg tab</i>	85	<i>methsuximide 300mg cap</i>	17	<i>metoclopramide 10mg tab</i>	68
<i>memantine 7mg er cap</i>	85	<i>methylphenidate 10mg cr cap</i>	2	<i>metoclopramide 1mg/ml oral soln</i>	68
MENACTRA INJ	91	<i>methylphenidate 10mg er tab</i>	2		
MENQUADFI INJ	91	<i>methylphenidate 10mg la cap</i>	2		
MENVEO INJ	91	<i>methylphenidate 10mg cr cap</i>	2		
<i>mercaptopurine 50mg tab</i>	33	<i>methylphenidate 1mg/ml oral soln</i>	2		
<i>meropenem 1000mg inj</i>	31	<i>methylphenidate 20mg cr cap</i>	2		
<i>meropenem 500mg inj</i>	31	<i>methylphenidate 20mg er tab</i>	2		
<i>mesalamine 1000mg rectal supp</i>	69	<i>methylphenidate 20mg la cap</i>	2		
<i>mesalamine 375mg er cap</i>	69				

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>metoclopramide 5mg tab</i>	68	<i>microgestin 1/20 21 day pack</i>	56	<i>mometasone furoate 0.1% ointment</i>	61
<i>metolazone 10mg tab</i>	64	<i>microgestin 24 fe 28 day pack</i>	56	<i>montelukast 10mg tab</i>	10
<i>metolazone 2.5mg tab</i>	64	<i>microgestin fe 1.5/30 28 day pack</i>	56	<i>montelukast 4mg chew tab</i>	10
<i>metolazone 5mg tab</i>	64	<i>microgestin fe 1/20 28 day pack</i>	56	<i>montelukast 4mg granules</i>	10
<i>metoprolol succinate 100mg er tab</i>	49	<i>midodrine 10mg tab</i>	93	<i>montelukast 5mg chew tab</i>	10
<i>metoprolol succinate 200mg er tab</i>	49	<i>midodrine 2.5mg tab</i>	93	<i>morphine sulfate 100mg er tab</i>	6
<i>metoprolol succinate 25mg er tab</i>	49	<i>midodrine 5mg tab</i>	93	<i>morphine sulfate 15mg er tab</i>	6
<i>metoprolol succinate 50mg er tab</i>	49	<i>miglitol 100mg tab</i>	20	<i>morphine sulfate 15mg er tab</i>	6
<i>metoprolol tartrate 100mg tab</i>	49	<i>miglitol 25mg tab</i>	20	MORPHINE SULFATE 15MG TAB	6
<i>metoprolol tartrate 25mg tab</i>	49	<i>miglitol 50mg tab</i>	20	<i>morphine sulfate 200mg er tab</i>	6
<i>metoprolol tartrate 25mg tab</i>	49	<i>miglustat 100mg cap mili 28 day pack</i>	71	<i>morphine sulfate 20mg/ml oral soln</i>	6
<i>metoprolol tartrate 37.5mg tab</i>	49	<i>mimvey pack</i>	67	<i>morphine sulfate 2mg/ml oral soln</i>	6
<i>metoprolol tartrate 50mg tab</i>	49	<i>minocycline 100mg cap</i>	88	<i>morphine sulfate 30mg er tab</i>	6
<i>metoprolol tartrate 75mg tab</i>	49	<i>minocycline 50mg cap</i>	88	MORPHINE SULFATE 30MG TAB	6
<i>metronidazole 0.75% cream</i>	62	<i>minocycline 75mg cap</i>	88	MORPHINE SULFATE 4MG/ML ORAL SOLN	6
<i>metronidazole 0.75% gel</i>	62	<i>minoxidil 10mg tab</i>	31	<i>morphine sulfate 60mg er tab</i>	6
<i>metronidazole 0.75% vaginal gel</i>	92	<i>minoxidil 2.5mg tab</i>	31	MORPHINE SULFATE 30MG TAB	6
<i>metronidazole 1% gel</i>	62	<i>mirtazapine 15mg odt</i>	17	MORPHINE SULFATE 4MG/ML ORAL SOLN	6
<i>metronidazole 250mg tab</i>	31	<i>mirtazapine 15mg tab</i>	17	<i>morphine sulfate 60mg er tab</i>	6
<i>metronidazole 500mg tab</i>	31	<i>mirtazapine 30mg odt</i>	17	MOUNJARO 10MG/0.5ML AUTO-INJECTOR	21
<i>metronidazole 5mg/ml inj</i>	31	<i>mirtazapine 30mg tab</i>	17	MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	21
<i>metyrosine 250mg cap</i>	28	<i>mirtazapine 45mg odt</i>	17	MOUNJARO 15MG/0.5ML AUTO-INJECTOR	21
<i>mexiletine 150mg cap</i>	9	<i>mirtazapine 45mg tab</i>	17	MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	21
<i>mexiletine 200mg cap</i>	9	<i>mirtazapine 7.5mg tab</i>	17	MOUNJARO 5MG/0.5ML AUTO-INJECTOR	21
<i>mexiletine 250mg cap</i>	9	<i>misoprostol 100mcg tab</i>	90		
<i>mibelas 24 fe chewable 28 day pack</i>	56	<i>misoprostol 200mcg tab</i>	90		
<i>micafungin sodium 100mg inj</i>	24	M-M-R II INJ	91		
<i>micafungin sodium 50mg inj</i>	24	<i>modafinil 100mg tab</i>	2		
<i>microgestin 1.5/30 21 day pack</i>	56	<i>modafinil 200mg tab</i>	2		
		<i>moexipril 15mg tab</i>	27		
		<i>moexipril 7.5mg tab</i>	27		
		MOLINDONE 10MG TAB	44		
		MOLINDONE 25MG TAB	44		
		MOLINDONE 5MG TAB	44		
		<i>mometasone furoate 0.1% cream</i>	61		
		<i>mometasone furoate 0.1% lotion</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

MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	22	<i>naproxen 375mg tab</i>	4	<i>neomycin/polymyxin/bacit</i>	81
MOVANTIK 12.5MG TAB	69	<i>naproxen 500mg tab</i>	4	<i>racin/hydrocortisone</i>	
MOVANTIK 25MG TAB	69	<i>naproxen sodium 275mg tab</i>	4	<i>ophth 1% ointment</i>	
MOXIFLOXACIN 1.6MG/ML INJ	68	<i>naproxen sodium 550mg tab</i>	4	<i>neomycin/polymyxin/dexa</i>	81
<i>moxifloxacin 400mg tab</i>	68	<i>naratriptan 1mg tab</i>	74	<i>methasone 0.1% ophth susp</i>	
MULTAQ 400MG TAB	10	<i>naratriptan 2.5mg tab</i>	74	<i>neomycin/polymyxin/hydr</i>	82
<i>mupirocin 2% ointment</i>	59	NATACYN 5% OPHTH SUSP	80	<i>ocortisone</i>	
<i>mycophenolate mofetil 200mg/ml susp</i>	77	<i>nateglinide 120mg tab</i>	23	<i>3.5-10000unit-1% otic soln</i>	
<i>mycophenolate mofetil 250mg cap</i>	77	<i>nateglinide 60mg tab</i>	23	<i>neomycin/polymyxin/hydr</i>	82
<i>mycophenolate mofetil 500mg tab</i>	77	NATPARA 100MCG CARTRIDGE	64	<i>ocortisone</i>	
<i>mycophenolic acid 180mg dr tab</i>	77	NATPARA 25MCG CARTRIDGE	64	<i>3.5-10000unit-1% otic susp</i>	
<i>mycophenolic acid 360mg dr tab</i>	77	NATPARA 50MCG CARTRIDGE	64	<i>neo-polycin hc ophth ointment</i>	81
MYFEMBREE 1-0.5-40MG TAB	67	NATPARA 75MCG CARTRIDGE	64	<i>neo-polycin ophth</i>	80
MYRBETRIQ 25MG ER TAB	91	NAYZILAM 5MG/0.1ML NASAL SPRAY	13	NERLYNX 40MG TAB	38
MYRBETRIQ 50MG ER TAB	91	<i>necon 0.5/35 28 day pack</i>	56	NEUPRO 1MG/24HR PATCH	40
		NEFAZODONE 100MG TAB	18	NEUPRO 2MG/24HR PATCH	40
		NEFAZODONE 150MG TAB	18	NEUPRO 3MG/24HR PATCH	40
N		NEFAZODONE 200MG TAB	18	NEUPRO 4MG/24HR PATCH	40
<i>nabumetone 500mg tab</i>	4	NEFAZODONE 250MG TAB	18	NEUPRO 6MG/24HR PATCH	40
<i>nabumetone 750mg tab</i>	4	NEFAZODONE 50MG TAB	18	NEUPRO 8MG/24HR PATCH	40
<i>nadolol 20mg tab</i>	49	<i>neomycin sulfate 500mg tab</i>	2	NEVANAC 0.1% OPHTH SUSP	81
<i>nadolol 40mg tab</i>	49	<i>neomycin/bacitracin/poly myxin ophth ointment</i>	80	<i>nevirapine 100MG ER</i>	47
<i>nadolol 80mg tab</i>	49	<i>5mg-400unit-10000unit</i>		<i>NEVIRAPINE 10MG/ML</i>	47
<i>nafcillin 100mg/ml inj</i>	84	NEOMYCIN/POLYMYXI	80	<i>SUSP</i>	
<i>nafcillin 1gm inj</i>	84	N B/GRAMICIDIN		<i>nevirapine 200mg tab</i>	47
<i>nafcillin 2gm inj</i>	84	1.75-10000-0.025MG-UN T-MG/ML OPHTH SOLN		<i>nevirapine 400mg er tab</i>	47
NALOXONE 0.4MG/ML CARTRIDGE	23			NEXLETOL 180MG TAB	25
<i>naloxone 0.4mg/ml inj</i>	24			NEXLIZET 180-10MG TAB	25
<i>naloxone 1mg/ml syringe</i>	24			<i>niacin 1000mg er tab</i>	27
<i>naloxone 40mg/ml nasal spray</i>	24			<i>niacin 500mg er tab</i>	27
<i>naltrexone 50mg tab</i>	24				
<i>naproxen 250mg tab</i>	4				
<i>naproxen 375mg dr tab</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>niacin 750mg er tab</i>	27	<i>nitroglycerin 0.4mg/hr patch</i>	8	NOVOLIN R 100UNIT/ML INJ	22
<i>nicardipine 20mg cap</i>	50	<i>nitroglycerin 0.6mg sl tab</i>	8	NOVOLIN R 100UNIT/ML PEN INJ	22
<i>nicardipine 30mg cap</i>	50	<i>nitroglycerin 0.6mg/hr patch</i>	8	NOVOLOG 100UNIT/ML CARTRIDGE	22
NICOTROL 10MG INH SOLN	86	NIVESTYM 300MCG/0.5ML SYRINGE	71	NOVOLOG 100UNIT/ML INJ	22
NICOTROL 10MG/ML NASAL INHALER	86	NIVESTYM 300MCG/ML INJ	71	NOVOLOG 100UNIT/ML PEN INJ	22
<i>nifedipine 30mg er tab</i>	50	NIVESTYM 480MCG/0.8ML SYRINGE	71	NOVOLOG MIX (70/30) 100UNIT/ML FLEXPEN	22
<i>nifedipine 30mg osmotic er tab</i>	51	NIVESTYM 480MCG/1.6ML INJ	71	NOVOLOG MIX (70/30) 100UNIT/ML INJ	22
<i>nifedipine 60mg er tab</i>	51	<i>nora-be 28 day 0.35mg pack</i>	57	NOXAFIL 300MG POWDER FOR ORAL SUSP	25
<i>nifedipine 60mg osmotic er tab</i>	51	<i>norethindrone 0.35mg pack</i>	57	NOXAFIL 40MG/ML SUSP	25
<i>nifedipine 90mg er tab</i>	51	<i>norethindrone acetate 5mg tab</i>	84	NUBEQA 300MG TAB	35
<i>nifedipine 90mg osmotic er tab</i>	51	<i>nortrel 0.5/35 28 day pack</i>	56	NUCALA 100MG INJ	10
<i>nikki 28 day pack</i>	56	<i>nortrel 1/35 21 day pack</i>	56	NUCALA 100MG/ML AUTO-INJECTOR	10
<i>nilutamide 150mg tab</i>	35	<i>nortrel 1/35 28 day pack</i>	56	NUCALA 100MG/ML SYRINGE	10
NINLARO 2.3MG CAP	38	<i>nortrel 7/7/7 28 day pack</i>	56	NUCALA 40MG/0.4ML SYRINGE	10
NINLARO 3MG CAP	38	<i>nortriptyline 10mg cap</i>	20	NUDEXTA 20-10MG CAP	86
NINLARO 4MG CAP	38	<i>nortriptyline 25mg cap</i>	20	NUPLAZID 10MG TAB	41
<i>nitazoxanide 500mg tab</i>	31	NORTRIPTYLINE 2MG/ML ORAL SOLN	20	NUPLAZID 34MG CAP	41
<i>nitisinone 10mg cap</i>	65	<i>nortriptyline 50mg cap</i>	20	NUTRILIPID 20GM/100ML INJ	79
<i>nitisinone 20mg cap</i>	65	<i>nortriptyline 75mg cap</i>	20	NUZYRA 150MG TAB	87
<i>nitisinone 2mg cap</i>	65	NORVIR 100MG ORAL POWDER	47	<i>nyamyc 100000unit/gm topical powder</i>	59
NITRO-BID 2% OINTMENT	8	NOURIANZ 20MG TAB	40	<i>nylia 1/35 28 day pack</i>	56
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	32	NOURIANZ 40MG TAB	40	<i>nylia 7/7/7 28 day pack</i>	56
<i>nitrofurantoin macrocrystals 100mg cap</i>	32	NOVOLIN MIX (70/30) 100UNIT/ML INJ	22	<i>nymyo 28 day pack</i>	56
<i>nitrofurantoin macrocrystals 50mg cap</i>	32	NOVOLIN MIX (70/30) FLEXPEN 100UNIT/ML	22	<i>nystatin 100000 unit/gm ointment</i>	59
<i>nitroglycerin 0.1mg/hr patch</i>	8	NOVOLIN N 100UNIT/ML INJ	22	<i>nystatin 100000unit/gm topical powder</i>	59
<i>nitroglycerin 0.2mg/hr patch</i>	8	NOVOLIN N 100UNIT/ML PEN INJ	22		
<i>nitroglycerin 0.3mg sl tab</i>	8				
<i>nitroglycerin 0.4mg sl tab</i>	8				
<i>nitroglycerin 0.4mg/act spray</i>	8				

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>nystatin 100000unit/ml cream</i>	59	<i>olanzapine 5mg tab</i>	43	ORENITRAM 1MG ER	51
<i>nystatin 100000unit/ml susp</i>	78	<i>olanzapine 7.5mg tab</i>	44	TAB	
<i>nystatin 500000unit tab</i>	24	<i>olmesartan medoxomil 20mg tab</i>	28	ORENITRAM 2.5MG ER	51
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	59	<i>olmesartan medoxomil 40mg tab</i>	28	TAB	
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	59	<i>olmesartan medoxomil 5mg tab</i>	28	ORENITRAM 5MG ER	52
<i>nystop 100000unit/gm topical powder</i>	59	<i>olmesartan medoxomil 5mg tab</i>	28	TAB	
O		<i>olmesartan medoxomil 5mg tab</i>	28	ORENITRAM MONTH 1 TITRATION PACK	52
OALIVA 10MG TAB	68	<i>olopatadine 0.1% ophth soln</i>	81	ORENITRAM MONTH 2 TITRATION PACK	52
OALIVA 5MG TAB	68	<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	78	ORENITRAM MONTH 3 TITRATION PACK	52
ocella 28 day pack	56	OLUMIANT 1MG TAB	3	ORFADIN 20MG CAP	65
OCTAGAM 1GM/20ML INJ	82	OLUMIANT 2MG TAB	3	ORFADIN 4MG/ML SUSP	65
OCTAGAM 2GM/20ML INJ	82	<i>omega-3 acid ethyl esters (usp) 1000mg cap</i>	25	ORGOVYX 120MG TAB	35
<i>octreotide 0.05mg/ml inj</i>	66	<i>omeprazole 10mg dr cap</i>	90	ORIAHNN 28 DAY KIT	67
<i>octreotide 0.1mg/ml inj</i>	66	<i>omeprazole 20mg dr cap</i>	90	PACK	
<i>octreotide 0.2mg/ml inj</i>	66	<i>omeprazole 40mg dr cap</i>	90	ORILISSA 150MG TAB	64
<i>octreotide 0.5mg/ml inj</i>	66	<i>ondansetron 0.8mg/ml oral soln</i>	24	ORILISSA 200MG TAB	64
<i>octreotide 1mg/ml inj</i>	66	<i>ondansetron 4mg odt</i>	24	ORKAMBI 125-100MG GRANULES	87
ODEFSEY 200-25-25MG TAB	47	<i>ondansetron 4mg tab</i>	24	ORKAMBI 125-100MG TAB	87
ODOMZO 200MG CAP	34	<i>ondansetron 8mg odt</i>	24	ORKAMBI 125-200MG TAB	87
OFEV 100MG CAP	87	<i>ondansetron 8mg tab</i>	24	ORKAMBI 188-150MG GRANULES	87
OFEV 150MG CAP	87	ONGENTYS 25MG CAP	40	ORKAMBI 94-75MG GRANULES	87
<i>ofloxacin 0.3% ophth soln</i>	80	ONGENTYS 50MG CAP	40	<i>orphenadrine citrate 100mg er tab</i>	78
<i>ofloxacin 0.3% otic soln</i>	82	ONUREG 200MG TAB	33	ORSERDU 345MG TAB	35
<i>ofloxacin 400mg tab</i>	68	ONUREG 300MG TAB	33	ORSERDU 86MG TAB	35
<i>olanzapine 10mg inj</i>	43	OPSUMIT 10MG TAB	52	<i>oseltamivir 30mg cap</i>	48
<i>olanzapine 10mg odt</i>	43	ORENCIA 125MG/ML AUTO-INJECTOR	5	<i>oseltamivir 45mg cap</i>	48
<i>olanzapine 10mg tab</i>	43	ORENCIA 125MG/ML SYRINGE	5	<i>oseltamivir 6mg/ml susp</i>	48
<i>olanzapine 15mg odt</i>	43	ORENCIA 50MG/0.4ML SYRINGE	5	<i>oseltamivir 75mg cap</i>	48
<i>olanzapine 15mg tab</i>	43	ORENCIA 87.5MG/0.7ML SYRINGE	5	OSPHENA 60MG TAB	65
<i>olanzapine 2.5mg tab</i>	43	ORENITRAM 0.125MG ER TAB	51	OTEZLA 28-DAY STARTER PACK	4
<i>olanzapine 20mg odt</i>	43	ORENITRAM 0.25MG ER TAB	51	OTEZLA 30MG TAB	4
<i>olanzapine 20mg tab</i>	43			<i>oxacillin 100mg/ml inj</i>	84
<i>olanzapine 5mg odt</i>	43			<i>oxacillin 1gm inj</i>	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

OXACILLIN 20MG/ML INJ	84	<i>pacerone 200mg tab</i>	10	<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	73
<i>oxacillin 2gm inj</i>	84	<i>pacerone 400mg tab</i>	10	<i>peg 3350/electrolyte oral soln</i>	73
OXACILLIN 40MG/ML INJ	84	<i>paliperidone 1.5mg er tab</i>	42	<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	73
OXBRYTA 300MG TAB	71	<i>paliperidone 3mg er tab</i>	42		
OXBRYTA 300MG TAB FOR ORAL SUSP	71	<i>paliperidone 6mg er tab</i>	42		
OXBRYTA 500MG TAB	71	<i>paliperidone 9mg er tab</i>	42		
<i>oxcarbazepine 150mg tab</i>	15	PALYNZIQ 10MG/0.5ML SYRINGE	65	PEGASYS	48
<i>oxcarbazepine 300mg tab</i>	15	PALYNZIQ 2.5MG/0.5ML SYRINGE	65	180MCG/0.5ML SYRINGE	
<i>oxcarbazepine 600mg tab</i>	15	PANRETIN 0.1% GEL	60	PEGASYS 180MCG/ML INJ	48
<i>oxcarbazepine 60mg/ml susp</i>	15	<i>pantoprazole 20mg dr tab</i>	90	PEMAZYRE 13.5MG TAB	38
OXERVATE 0.002% OPHTH SOLN	80	<i>pantoprazole 40mg dr tab</i>	90	PEMAZYRE 4.5MG TAB	38
<i>oxybutynin chloride 10mg er tab</i>	90	PANZYGA 10GM/100ML INJ	82	PEMAZYRE 9MG TAB	38
<i>oxybutynin chloride 15mg er tab</i>	90	PANZYGA 1GM/10ML INJ	82	<i>penicillamine 250mg tab</i>	76
<i>oxybutynin chloride 1mg/ml oral soln</i>	90	PANZYGA 2.5GM/25ML INJ	82	<i>penicillin g potassium 1000000unit/ml inj</i>	83
<i>oxybutynin chloride 5mg er tab</i>	90	PANZYGA 20GM/200ML INJ	82	PENICILLIN G	83
<i>oxybutynin chloride 5mg tab</i>	90	PANZYGA 30GM/300ML INJ	82	POTASSIUM 40000UNIT/ML INJ	
<i>oxycodone 10mg tab</i>	6	PANZYGA 5GM/50ML INJ	82	PENICILLIN G	83
<i>oxycodone 15mg tab</i>	6	<i>paricalcitol 1mcg cap</i>	65	PROCAINE	
<i>oxycodone 1mg/ml oral soln</i>	6	<i>paricalcitol 2mcg cap</i>	66	600000UNIT/ML SYRINGE	
<i>oxycodone 20mg tab</i>	6	<i>paricalcitol 4mcg cap</i>	66	PENICILLIN G SODIUM	83
<i>oxycodone 20mg/ml oral soln</i>	6	<i>paromomycin 250mg cap</i>	2	100000UNIT/ML INJ	
<i>oxycodone 30mg tab</i>	6	<i>paroxetine 10mg tab</i>	18	<i>penicillin v potassium 250mg tab</i>	83
<i>oxycodone 5mg tab</i>	6	<i>paroxetine 12.5mg er tab</i>	18	PENICILLIN V	83
OXYCODONE/ACETAMI	7	<i>paroxetine 20mg tab</i>	18	POTASSIUM 25MG/ML ORAL SOLN	
NOPHEN 5-325MG/5ML		<i>paroxetine 25mg er tab</i>	18	<i>penicillin v potassium 500mg tab</i>	83
OZEMPIC 2.68MG/ML PEN INJ	22	<i>paroxetine 2mg/ml susp</i>	18	PENICILLIN V	83
OZEMPIC 2MG/3ML PEN INJ	21	<i>paroxetine 30mg tab</i>	18	POTASSIUM 50MG/ML ORAL SOLN	
OZEMPIC 4MG/3ML PEN INJ	22	<i>paroxetine 37.5mg er tab</i>	18	PENTACEL	89
		<i>paroxetine 40mg tab</i>	18	96-30-68UNIT/ML INJ	
		PEDIARIX SYRINGE	89		
		PEDVAXHIB	91		
		7.5MCG/0.5ML INJ			

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ALPHABETICAL LISTING OF DRUGS

<i>pentamidine isethionate</i>	31	<i>phenytoin sodium 200mg</i>	17	PLASMA-LYTE A INJ	75
<i>300mg inj</i>		<i>er cap</i>		PLEGRIDY	86
<i>pentamidine isethionate</i>	31	<i>phenytoin sodium 300mg</i>	17	125MCG/0.5ML	
<i>50mg/ml inh soln</i>		<i>er cap</i>		AUTO-INJECTOR	
<i>pentoxifylline 400mg er</i>	70	PHEXXI 1.8-1-0.4%	92	PLEGRIDY	86
<i>tab</i>		VAGINAL GEL		125MCG/0.5ML	
<i>perindopril erbumine</i>	27	PIFELTRO 100MG TAB	47	SYRINGE	
<i>2mg tab</i>		<i>pilocarpine 1% ophth</i>	80	<i>plenamine 15% inj</i>	79
<i>perindopril erbumine</i>	27	<i>soln</i>		<i>podofilox 0.5% topical</i>	62
<i>4mg tab</i>		<i>pilocarpine 2% ophth</i>	80	<i>soln</i>	
<i>perindopril erbumine</i>	27	<i>soln</i>		<i>polycin 0.5-10unit/mg</i>	80
<i>8mg tab</i>		<i>pilocarpine 4% ophth</i>	80	<i>ophth ointment</i>	
<i>periogard 0.12%</i>	78	<i>soln</i>		<i>polymyxin b 500000unit</i>	32
<i>mouthwash</i>		<i>pilocarpine 5mg tab</i>	78	<i>inj</i>	
<i>permethrin 5% cream</i>	62	<i>pilocarpine 7.5mg tab</i>	78	<i>polymyxin b/trimethoprim</i>	80
<i>perphenazine 16mg tab</i>	44	<i>pimecrolimus 1% cream</i>	62	<i>10000 Unit/ML-0.1%</i>	
<i>perphenazine 2mg tab</i>	44	PIMOZIDE 1MG TAB	86	<i>ophth soln</i>	
<i>perphenazine 4mg tab</i>	44	PIMOZIDE 2MG TAB	86	POMALYST 1MG CAP	35
<i>perphenazine 8mg tab</i>	44	<i>pimtrea tab pack</i>	56	POMALYST 2MG CAP	35
PERSERIS 120MG	42	<i>pindolol 10mg tab</i>	49	POMALYST 3MG CAP	35
SYRINGE		<i>pindolol 5mg tab</i>	49	POMALYST 4MG CAP	35
PERSERIS 90MG	42	<i>pioglitazone 15mg tab</i>	22	<i>portia 28 day pack</i>	56
SYRINGE		<i>pioglitazone 30mg tab</i>	22	<i>posaconazole 100mg dr</i>	25
PHEBURANE	66	<i>pioglitazone 45mg tab</i>	23	<i>tab</i>	
483MG/GM ORAL		<i>piperacillin/tazobactam</i>	83	<i>posaconazole 40mg/ml</i>	25
PELLET		<i>2000-250mg inj</i>		<i>susp</i>	
<i>phenelzine 15mg tab</i>	17	<i>piperacillin/tazobactam</i>	83	<i>potassium chloride</i>	75
<i>phenobarbital 100mg tab</i>	72	<i>3000-375mg inj</i>		<i>1.33meq/ml oral soln</i>	
<i>phenobarbital 15mg tab</i>	72	<i>piperacillin/tazobactam</i>	84	<i>potassium chloride</i>	75
<i>phenobarbital 16.2mg tab</i>	72	<i>36-4.5gm inj</i>		<i>10meq er cap</i>	
<i>phenobarbital 30mg tab</i>	72	<i>piperacillin/tazobactam</i>	84	<i>potassium chloride</i>	75
<i>phenobarbital 32.4mg tab</i>	72	<i>4000-500mg inj</i>		<i>10meq er tab</i>	
<i>phenobarbital 4mg/ml</i>	72	PIQRAY 200MG DAILY	38	<i>potassium chloride</i>	76
<i>oral soln</i>		DOSE PACK		<i>10meq micro er tab</i>	
<i>phenobarbital 60mg tab</i>	72	PIQRAY 250MG DAILY	38	POTASSIUM CHLORIDE	76
<i>phenobarbital 64.8mg tab</i>	72	DOSE PACK		10MEQ/100ML INJ	
<i>phenobarbital 97.2mg tab</i>	72	PIQRAY 300MG DAILY	38	<i>potassium chloride</i>	76
<i>phenoxybenzamine 10mg</i>	28	DOSE PACK		<i>15meq micro er tab</i>	
<i>cap</i>		<i>pirfenidone 267mg cap</i>	87	<i>potassium chloride</i>	76
<i>phenytoin 25mg/ml susp</i>	16	<i>pirfenidone 267mg tab</i>	87	<i>2.67meq/ml oral soln</i>	
<i>phenytoin 50mg chew tab</i>	16	<i>pirfenidone 801mg tab</i>	87	<i>potassium chloride</i>	76
<i>phenytoin sodium 100mg</i>	16	<i>piroxicam 10mg cap</i>	4	<i>20meq er tab</i>	
<i>er cap</i>		<i>piroxicam 20mg cap</i>	4	<i>potassium chloride</i>	76
		PLASMA-LYTE 148 INJ	75	<i>20meq micro er 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>potassium chloride</i>	76	PRED MILD 0.12%	81	PREMPRO 0.3/1.5MG 28	67
<i>20meq powder for oral</i>		OPHTH SUSP		DAY PACK	
<i>soln</i>		PREDNISOLONE 1%	81	PREMPRO 0.45/1.5MG	67
POTASSIUM CHLORIDE	76	OPHTH SOLN		28 DAY PACK	
20MEQ/100ML INJ		<i>prednisolone 1mg/ml oral</i>	58	PREMPRO 0.625/2.5MG	67
<i>potassium chloride</i>	76	<i>soln</i>		28 DAY PACK	
<i>2meq/ml (20ml) inj</i>		<i>prednisolone 3mg/ml oral</i>	58	PREMPRO 0.625/5MG	67
<i>potassium chloride</i>	76	<i>soln</i>		28 DAY PACK	
<i>2meq/ml inj</i>		PREDNISOLONE	81	<i>prevalite 4gm powder for</i>	26
POTASSIUM CHLORIDE	76	ACETATE 1% OPTH		<i>oral susp</i>	
40MEQ/100ML INJ		SUSP		PREVYMIS 240MG TAB	48
<i>potassium chloride 8meq</i>	76	<i>prednisone 10mg tab</i>	58	PREVYMIS 480MG TAB	48
<i>er cap</i>		<i>prednisone 1mg tab</i>	58	PREZCOBIX 150-800MG	47
<i>potassium chloride 8meq</i>	76	PREDNISONE 1MG/ML	58	TAB	
<i>er tab</i>		ORAL SOLN		PREZISTA 100MG/ML	47
<i>potassium citrate 10meq</i>	69	<i>prednisone 2.5mg tab</i>	58	SUSP	
<i>er tab</i>		<i>prednisone 20mg tab</i>	58	PREZISTA 150MG TAB	47
<i>potassium citrate 15meq</i>	70	<i>prednisone 50mg tab</i>	58	PREZISTA 600MG TAB	47
<i>er tab</i>		<i>prednisone 5mg tab</i>	58	PREZISTA 75MG TAB	47
<i>potassium citrate 5meq er</i>	70	<i>pregabalin 100mg cap</i>	15	PREZISTA 800MG TAB	47
<i>tab</i>		<i>pregabalin 150mg cap</i>	15	PRIFTIN 150MG TAB	33
PRALUENT 150MG/ML	27	<i>pregabalin 200mg cap</i>	15	PRIMAQUINE	33
AUTO-INJECTOR		<i>pregabalin 20mg/ml oral</i>	15	PHOSPHATE 26.3MG	
PRALUENT 75MG/ML	27	<i>soln</i>		TAB	
AUTO-INJECTOR		<i>pregabalin 225mg cap</i>	15	<i>primidone 250mg tab</i>	15
<i>pramipexole 0.125mg tab</i>	40	<i>pregabalin 25mg cap</i>	15	<i>primidone 50mg tab</i>	15
<i>pramipexole 0.25mg tab</i>	41	<i>pregabalin 300mg cap</i>	15	PRIORIX INJ	91
<i>pramipexole 0.5mg tab</i>	41	<i>pregabalin 50mg cap</i>	15	PRIVIGEN 20GM/200ML	82
<i>pramipexole 0.75mg tab</i>	41	<i>pregabalin 75mg cap</i>	15	INJ	
<i>pramipexole 1.5mg tab</i>	41	PREHEVBRIO	91	<i>probenecid 500mg tab</i>	70
<i>pramipexole 1mg tab</i>	41	10MCG/ML INJ		<i>prochlorperazine 10mg</i>	44
<i>prasugrel 10mg tab</i>	71	PREMARIN 0.3MG TAB	67	<i>tab</i>	
<i>prasugrel 5mg tab</i>	71	PREMARIN 0.45MG TAB	67	<i>prochlorperazine 25mg</i>	44
<i>pravastatin sodium 10mg</i>	26	PREMARIN 0.625MG	67	<i>rectal supp</i>	
<i>tab</i>		TAB		<i>prochlorperazine 5mg tab</i>	44
<i>pravastatin sodium 20mg</i>	26	PREMARIN	92	<i>procto-med 2.5% cream</i>	7
<i>tab</i>		0.625MG/GM VAGINAL		<i>proctosol 2.5% cream</i>	7
<i>pravastatin sodium 40mg</i>	26	CREAM		<i>proctozone hc 2.5% cream</i>	8
<i>tab</i>		PREMARIN 0.9MG TAB	67	<i>progesterone 100mg cap</i>	84
<i>pravastatin sodium 80mg</i>	26	PREMARIN 1.25MG TAB	68	<i>progesterone 200mg cap</i>	84
<i>tab</i>		PREMASOL 10% INJ	79	PROGRAF 0.2MG	77
<i>prazosin 1mg cap</i>	28	PREMPHASE 28 DAY	67	GRANULES FOR ORAL	
<i>prazosin 2mg cap</i>	29	PACK		SUSP	
<i>prazosin 5mg cap</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

PROGRAF 1MG	77	<i>propranolol 40mg tab</i>	49	<i>quetiapine 100mg tab</i>	44
GRANULES FOR ORAL		<i>propranolol 4mg/ml oral</i>	49	<i>quetiapine 150mg er tab</i>	44
SUSP		<i>soln</i>		<i>quetiapine 200mg er tab</i>	44
PROLASTIN 1000MG INJ	87	<i>propranolol 60mg er cap</i>	49	<i>quetiapine 200mg tab</i>	44
PROLENSA 0.07%	81	<i>propranolol 60mg tab</i>	49	<i>quetiapine 25mg tab</i>	44
OPHTH SOLN		<i>propranolol 80mg er cap</i>	49	<i>quetiapine 300mg er tab</i>	44
PROLIA 60MG/ML	64	<i>propranolol 80mg tab</i>	49	<i>quetiapine 300mg tab</i>	44
SYRINGE		PROPRANOLOL	50	<i>quetiapine 400mg er tab</i>	44
PROMACTA 12.5MG	71	8MG/ML ORAL SOLN		<i>quetiapine 400mg tab</i>	44
POWDER FOR ORAL		<i>propylthiouracil 50mg</i>	88	<i>quetiapine 50mg er tab</i>	44
SUSP		<i>tab</i>		<i>quetiapine 50mg tab</i>	44
PROMACTA 12.5MG TAB	71	PROQUAD INJ	91	<i>quinapril 10mg tab</i>	27
PROMACTA 25MG	71	PROSOL 20% INJ	79	<i>quinapril 20mg tab</i>	27
POWDER FOR ORAL		<i>protriptyline 10mg tab</i>	20	<i>quinapril 40mg tab</i>	28
SUSP		<i>protriptyline 5mg tab</i>	20	<i>quinapril 5mg tab</i>	28
PROMACTA 25MG TAB	71	PULMOZYME 1MG/ML	87	<i>quinidine gluconate</i>	9
PROMACTA 50MG TAB	71	INH SOLN		<i>324mg er tab</i>	
PROMACTA 75MG TAB	72	PURIXAN	33	<i>quinidine sulfate 200mg</i>	9
<i>promethazine 1.25mg/ml</i>	25	2000MG/100ML SUSP		<i>tab</i>	
<i>oral soln</i>		PYLERA	90	<i>quinidine sulfate 300mg</i>	9
<i>promethazine 12.5mg</i>	25	140-125-125MG CAP		<i>tab</i>	
<i>rectal supp</i>		<i>pyrazinamide 500mg tab</i>	33	<i>quinine sulfate 324mg</i>	33
<i>promethazine 12.5mg tab</i>	25	<i>pyridostigmine bromide</i>	33	<i>cap</i>	
<i>promethazine 25mg rectal</i>	25	<i>180mg er tab</i>			
<i>supp</i>		<i>pyridostigmine bromide</i>	33		
<i>promethazine 25mg tab</i>	25	<i>60mg tab</i>		R	
<i>promethazine 50mg tab</i>	25	PYRUKYND 20MG TAB	71	RABAVERT 2.5UNIT/ML	92
<i>promethegan 25mg rectal</i>	25	(4-WEEK PACK)		INJ	
<i>supp</i>		PYRUKYND	71	RADICAVA 105MG/5ML	79
<i>propafenone 150mg tab</i>	9	20MG/50MG TAB TAPER		SUSP	
<i>propafenone 225mg er</i>	9	PACK		<i>raloxifene 60mg tab</i>	65
<i>cap</i>		PYRUKYND 50MG TAB	71	<i>ramelteon 8mg tab</i>	73
<i>propafenone 225mg tab</i>	9	(4-WEEK PACK)		<i>ramipril 1.25mg cap</i>	28
<i>propafenone 300mg tab</i>	9	PYRUKYND 5MG TAB	71	<i>ramipril 10mg cap</i>	28
<i>propafenone 325mg er</i>	9	(4-WEEK PACK)		<i>ramipril 2.5mg cap</i>	28
<i>cap</i>		PYRUKYND 5MG TAB	71	<i>ramipril 5mg cap</i>	28
<i>propafenone 425mg er</i>	9	TAPER PACK		<i>ranolazine 1000mg er tab</i>	8
<i>cap</i>		PYRUKYND 5MG/20MG	71	<i>ranolazine 500mg er tab</i>	8
<i>propranolol 10mg tab</i>	49	TAB TAPER PACK		<i>rasagiline 0.5mg tab</i>	41
<i>propranolol 120mg er</i>	49			<i>rasagiline 1mg tab</i>	41
<i>cap</i>		Q		RAVICTI 1.1GM/ML	66
<i>propranolol 160mg er</i>	49	QINLOCK 50MG TAB	38	ORAL SOLN	
<i>cap</i>		QUADRACEL INJ	89	REBIF 22MCG/0.5ML	86
<i>propranolol 20mg tab</i>	49	QUADRACEL INJ	89	AUTO-INJECTOR	
		QUADRACEL SYRINGE	89	REBIF 22MCG/0.5ML	86
				SYRINGE	

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

REBIF 44MCG/0.5ML AUTO-INJECTOR	86	RETACRIT 10000UNIT/ML INJ	72	RIMANTADINE 100MG TAB	49
REBIF 44MCG/0.5ML SYRINGE	86	RETACRIT 20000UNIT/2ML INJ	72	RINVOQ 15MG ER TAB	3
REBIF REBIDOSE PACK	86	RETACRIT	72	RINVOQ 30MG ER TAB	3
REBIF TITRATION PACK	86	20000UNIT/ML INJ		RINVOQ 45MG ER TAB	3
<i>reclipsen 28 day pack</i>	56	RETACRIT 2000UNIT/ML INJ	72	<i>risedronate sodium 150mg tab</i>	64
RECOMBIVAX 10MCG/ML INJ	92	RETACRIT 3000UNIT/ML INJ	72	<i>risedronate sodium 30mg tab</i>	64
RECOMBIVAX 10MCG/ML SYRINGE	92	RETACRIT	72	<i>risedronate sodium 35mg tab</i>	64
RECOMBIVAX 40MCG/ML INJ	92	40000UNIT/ML INJ		<i>risedronate sodium 35mg tab (12) pack</i>	64
RECOMBIVAX 5MCG/0.5ML INJ	92	RETACRIT 4000UNIT/ML INJ	72	<i>risedronate sodium 35mg tab (4) pack</i>	64
RECOMBIVAX 5MCG/0.5ML SYRINGE	92	RETEVMO 40MG CAP	38	<i>risedronate sodium 5mg tab</i>	64
RECTIV 0.4% RECTAL OINTMENT	8	RETEVMO 80MG CAP	38	RISPERDAL 12.5MG INJ	42
REGANEX 0.01% GEL	62	REVLIMID 10MG CAP	76	RISPERDAL 25MG INJ	42
RELENZA 5MG/BLISTER INHALER	48	REVLIMID 15MG CAP	76	RISPERDAL 37.5MG INJ	42
RELISTOR 12MG/0.6ML INJ	69	REVLIMID 2.5MG CAP	76	RISPERDAL 50MG INJ	42
RELISTOR 12MG/0.6ML SYRINGE	69	REVLIMID 20MG CAP	76	RISPERIDONE 0.25MG ODT	42
RELISTOR 8MG/0.4ML SYRINGE	69	REVLIMID 25MG CAP	76	<i>risperidone 0.25mg tab</i>	42
RELYVRIO 3-1GM POWDER PACK	79	REVLIMID 5MG CAP	76	<i>risperidone 0.5mg odt</i>	42
<i>repaglinide 0.5mg tab</i>	23	REXULTI 0.25MG TAB	45	<i>risperidone 0.5mg tab</i>	42
<i>repaglinide 1mg tab</i>	23	REXULTI 0.5MG TAB	45	<i>risperidone 1mg odt</i>	42
<i>repaglinide 2mg tab</i>	23	REXULTI 1MG TAB	45	<i>risperidone 1mg tab</i>	42
REPATHA 140MG/ML AUTO-INJECTOR	27	REXULTI 2MG TAB	45	<i>risperidone 1mg/ml oral soln</i>	42
REPATHA 140MG/ML SYRINGE	27	REXULTI 3MG TAB	45	<i>risperidone 2mg odt</i>	42
REPATHA 420MG/3.5ML CARTRIDGE	27	REXULTI 4MG TAB	45	<i>risperidone 2mg tab</i>	42
RESTASIS 0.05% OPHTH SUSP (MULTI-USE VIAL)	80	REYATAZ 50MG ORAL POWDER	47	<i>risperidone 3mg odt</i>	42
RESTASIS 0.05% OPHTH SUSP (SINGLE USE VIAL)	80	REYVOW 100MG TAB	74	<i>risperidone 3mg tab</i>	42
		REYVOW 50MG TAB	74	<i>risperidone 4mg odt</i>	42
		REZLIDHIA 150MG CAP	38	<i>risperidone 4mg tab</i>	42
		REZUROCK 200MG TAB	76	<i>ritonavir 100mg tab</i>	47
		RHOPRESSA 0.02% OPHTH SOLN	80	<i>rivastigmine 1.5mg cap</i>	85
		<i>ribavirin 200mg cap</i>	48	<i>rivastigmine 13.3mg/24hr patch</i>	85
		<i>ribavirin 200mg tab</i>	48	<i>rivastigmine 3mg cap</i>	85
		RIDAURA 3MG CAP	3	<i>rivastigmine 4.5mg cap</i>	85
		<i>rifabutin 150mg cap</i>	33	<i>rivastigmine 4.6mg/24hr patch</i>	85
		<i>rifampin 150mg cap</i>	33		
		<i>rifampin 300mg cap</i>	33		
		<i>rifampin 600mg inj</i>	33		
		<i>riluzole 50mg tab</i>	79		

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>rivastigmine 6mg cap</i>	85	RYBELSUS 7MG TAB	22	SELZENTRY 25MG TAB	47
<i>rivastigmine 9.5mg/24hr patch</i>	85	RYDAPT 25MG CAP	38	SELZENTRY 75MG TAB	47
<i>rivelsa 91 day pack</i>	56	S		SEREVENT	11
<i>rizatriptan 10mg odt</i>	74	<i>sajazir 30mg/3ml syringe</i>	70	50MCG/DOSE INHALER	
<i>rizatriptan 10mg tab</i>	74	<i>salmon calcitonin 200unit/act nasal spray</i>	64	<i>sertraline 100mg tab</i>	18
<i>rizatriptan 5mg odt</i>	74	SANDIMMUNE	77	<i>sertraline 20mg/ml oral soln</i>	18
<i>rizatriptan 5mg tab</i>	74	100MG/ML ORAL SOLN		<i>sertraline 25mg tab</i>	18
<i>roflumilast 0.5mg tab</i>	10	SANTYL 250UNIT/GM OINTMENT	62	<i>sertraline 50mg tab</i>	18
<i>roflumilast 250mcg tab</i>	10	<i>sapropterin 100mg powder for oral soln</i>	66	<i>setlakin 91 day pack</i>	56
<i>ropinirole 0.25mg tab</i>	41	<i>sapropterin 100mg tab</i>	66	<i>sevelamer carbonate 2400mg powder for oral susp</i>	69
<i>ropinirole 0.5mg tab</i>	41	<i>sapropterin 500mg powder for oral soln</i>	66	<i>sevelamer carbonate 800mg powder for oral susp</i>	69
<i>ropinirole 1mg tab</i>	41	SAVELLA 100MG TAB	85	<i>sevelamer carbonate 800mg tab</i>	69
<i>ropinirole 2mg tab</i>	41	SAVELLA 12.5MG TAB	85	<i>sharobel 0.35mg 28 day pack</i>	57
<i>ropinirole 3mg tab</i>	41	SAVELLA 25MG TAB	85	SHINGRIX	92
<i>ropinirole 4mg tab</i>	41	SAVELLA 50MG TAB	85	50MCG/0.5ML INJ	
<i>ropinirole 5mg tab</i>	41	SAVELLA TAB 4-WEEK TITRATION PACK (55)	85	SIGNIFOR 0.3MG/ML INJ	66
<i>rosuvastatin calcium 10mg tab</i>	26	SCEMBLIX 20MG TAB	38	SIGNIFOR 0.6MG/ML INJ	66
<i>rosuvastatin calcium 20mg tab</i>	26	SCEMBLIX 40MG TAB	38	SIGNIFOR 0.9MG/ML INJ	66
<i>rosuvastatin calcium 40mg tab</i>	26	<i>scopolamine 1mg/72hr patch</i>	24	<i>sildenafil 20mg tab</i>	52
<i>rosuvastatin calcium 5mg tab</i>	26	SECUADO 3.8MG/24HR PATCH	44	<i>silver sulfadiazine 1% cream</i>	60
ROTARIX SUSP	92	SECUADO 5.7MG/24HR PATCH	44	SIMBRINZA 0.2-1% OPTH SUSP	80
ROTATEQ SUSP	92	SECUADO 7.6MG/24HR PATCH	44	SIMPONI 100MG/ML AUTO-INJECTOR	3
<i>roweepra 500mg tab</i>	15	SEGLUROMET 2.5-1000MG TAB	20	SIMPONI 100MG/ML SYRINGE	3
ROZLYTREK 100MG CAP	38	SEGLUROMET 2.5-500MG TAB	20	SIMPONI 50MG/0.5ML AUTO-INJECTOR	3
ROZLYTREK 200MG CAP	38	SEGLUROMET 7.5-1000MG TAB	20	SIMPONI 50MG/0.5ML SYRINGE	3
RUBRACA 200MG TAB	38	SEGLUROMET 7.5-500MG TAB	20	<i>simvastatin 10mg tab</i>	26
RUBRACA 250MG TAB	38	<i>selegiline 5mg cap</i>	41	<i>simvastatin 20mg tab</i>	26
RUBRACA 300MG TAB	38	<i>selenium sulfide 2.5% shampoo</i>	60	<i>simvastatin 40mg tab</i>	26
RUCONEST 2100UNIT INJ	70	SELZENTRY 20MG/ML ORAL SOLN	47	<i>simvastatin 5mg tab</i>	26
<i>rufinamide 200mg tab</i>	15			<i>simvastatin 80mg tab</i>	26
<i>rufinamide 400mg tab</i>	15			<i>sirolimus 0.5mg tab</i>	77
<i>rufinamide 40mg/ml susp</i>	15				
RUKOBIA 600MG ER TAB	47				
RYBELSUS 14MG TAB	22				
RYBELSUS 3MG TAB	22				

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>sirolimus 1mg tab</i>	77	<i>sorine 120mg tab</i>	50	STREPTOMYCIN 1GM	2
<i>sirolimus 1mg/ml oral soln</i>	77	<i>sorine 160mg tab</i>	50	INJ	
<i>sirolimus 2mg tab</i>	77	<i>sorine 240mg tab</i>	50	STRIBILD	47
SIRTURO 100MG TAB	33	<i>sorine 80mg tab</i>	50	150-150-200-300MG	
SIRTURO 20MG TAB	33	<i>sotalol 120mg tab</i>	50	TAB	
SIVEXTRO 200MG INJ	32	<i>sotalol 160mg tab</i>	50	<i>subvenite 100mg tab</i>	16
SIVEXTRO 200MG TAB	32	<i>sotalol 240mg tab</i>	50	<i>subvenite 150mg tab</i>	16
SKYRIZI 150MG/ML	60	<i>sotalol 80mg tab</i>	50	<i>subvenite 200mg tab</i>	16
AUTO-INJECTOR		<i>sotalol af 120mg tab</i>	50	<i>subvenite 25mg tab</i>	16
SKYRIZI 150MG/ML	60	<i>sotalol af 160mg tab</i>	50	SUCRAID 8500UNIT/ML	63
SYRINGE		<i>sotalol af 80mg tab</i>	50	ORAL SOLN	
SKYRIZI 180MG/1.2ML	69	SPIRIVA RESPIMAT	10	<i>sucalfate 1000mg tab</i>	90
CARTRIDGE		1.25MCG/ACT INH		<i>sucalfate 100mg/ml susp</i>	90
SKYRIZI 360MG/2.4ML	69	<i>spironolactone 100mg tab</i>	63	<i>sulfacetamide sodium</i>	59
CARTRIDGE		<i>spironolactone 25mg tab</i>	63	10% lotion	
SLYND 4MG TAB PACK	57	<i>spironolactone 50mg tab</i>	63	<i>sulfacetamide sodium</i>	80
<i>sodium chloride 0.45% inj</i>	76	<i>sprintec 28 day pack</i>	56	10% ophth soln	
<i>sodium chloride 0.9% inj</i>	76	SPRITAM 1000MG TAB	16	SULFACETAMIDE/PRED	81
<i>sodium chloride 0.9% irrigation soln</i>	70	FOR ORAL SUSP		NISOLONE 10-0.25%	
<i>sodium chloride 3% inj</i>	76	SPRITAM 250MG TAB	16	OPHTH SOLN	
<i>sodium chloride 50mg/ml inj</i>	76	FOR ORAL SUSP		<i>sulfadiazine 500mg tab</i>	87
SODIUM OXYBATE	84	SPRITAM 500MG TAB	16	<i>sulfamethoxazole/trimeth</i>	31
500MG/ML ORAL SOLN		FOR ORAL SUSP		<i>oprim 200-40mg/5ml susp</i>	
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	77	SPRITAM 750MG TAB	16	<i>sulfamethoxazole/trimeth</i>	31
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml prep kit</i>	73	FOR ORAL SUSP		<i>oprim 400-80mg tab</i>	
SOFOSBUVIR/VELPATAS	48	SPRYCEL 100MG TAB	38	<i>sulfamethoxazole/trimeth</i>	31
VIR 400-100MG TAB		SPRYCEL 140MG TAB	38	<i>oprim 800-160mg tab</i>	
SOLTAMOX 10MG/5ML	35	SPRYCEL 20MG TAB	38	SULFAMYLON	60
ORAL SOLN		SPRYCEL 50MG TAB	38	85MG/GM CREAM	
SOMAVERT 10MG INJ	64	SPRYCEL 70MG TAB	38	<i>sulfasalazine 500mg dr tab</i>	69
SOMAVERT 15MG INJ	64	SPRYCEL 80MG TAB	38	<i>sulfasalazine 500mg tab</i>	69
SOMAVERT 20MG INJ	64	SPS 15GM/60ML SUSP	77	<i>sulindac 150mg tab</i>	4
SOMAVERT 25MG INJ	64	<i>sronyx 28 day pack</i>	56	<i>sulindac 200mg tab</i>	4
SOMAVERT 30MG INJ	64	<i>ssd 1% cream</i>	60	<i>sumatriptan 100mg tab</i>	74
<i>sorafenib 200mg tab</i>	38	STELARA 45MG/0.5ML	60	<i>sumatriptan 25mg tab</i>	74
		INJ		<i>sumatriptan 4mg/0.5ml auto-injector</i>	74
		STELARA 45MG/0.5ML	60	<i>sumatriptan 4mg/0.5ml cartridge</i>	74
		SYRINGE		<i>sumatriptan 50mg tab</i>	74
		STIOLTO	11	<i>sumatriptan 6mg/0.5ml auto-injector</i>	74
		2.5-2.5MCG/ACT INH			
		STIVARGA 40MG 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

<i>sumatriptan 6mg/0.5ml cartridge</i>	74	SYNJARDY 5-500MG TAB	21	<i>tamsulosin 0.4mg cap</i>	70	
<i>sumatriptan 6mg/0.5ml inj</i>	74	SYNJARDY XR 10-1000MG TAB	21	<i>tarina 24 fe 1/20 28 day pack</i>	56	
<i>sunitinib 12.5mg cap</i>	38	SYNJARDY XR 12.5-1000MG TAB	21	<i>tarina fe 1/20 28 day pack</i>	56	
<i>sunitinib 25mg cap</i>	38	SYNJARDY XR 25-1000MG TAB	21	TASIGNA 150MG CAP	39	
<i>sunitinib 37.5mg cap</i>	38	SYNJARDY XR 5-1000MG TAB	21	TASIGNA 200MG CAP	39	
<i>sunitinib 50mg cap</i>	38	SYNRIBO 3.5MG INJ	39	TASIGNA 50MG CAP	39	
SUNLENCA 300MG TAB 4-TABLET PACK	47	<hr/>			<i>tasimelteon 20mg cap</i>	73
SUNLENCA 300MG TAB 5-TABLET PACK	47	T		TAVALISSE 100MG TAB	70	
SUNOSI 150MG TAB	1	TABLOID 40MG TAB	33	TAVALISSE 150MG TAB	70	
SUNOSI 75MG TAB	1	TABRECTA 150MG TAB	38	TAVNEOS 10MG CAP	70	
<i>syeda 28 day pack</i>	56	TABRECTA 200MG TAB	38	<i>tazarotene 0.1% cream</i>	60	
SYMBICORT 160-4.5MCG INHALER	11	<i>tacrolimus 0.03% ointment</i>	62	<i>tazicef 1gm inj</i>	54	
SYMBICORT 80-4.5MCG INHALER	11	<i>tacrolimus 0.1% ointment</i>	62	<i>tazicef 2gm inj</i>	54	
SYMDEKO 50-75MG/75MG PACK	87	<i>tacrolimus 0.5mg cap</i>	77	TAZICEF 6GM INJ	54	
SYMDEKO TAB 4-WEEK PACK	87	<i>tacrolimus 1mg cap</i>	77	<i>taztia 120mg er cap</i>	51	
SYMJEPI 0.15MG/0.3ML SYRINGE	92	<i>tacrolimus 5mg cap</i>	77	<i>taztia 180mg er cap</i>	51	
SYMJEPI 0.3MG/0.3ML SYRINGE	92	<i>tadalafil 20mg tab</i>	52	<i>taztia 240mg er cap</i>	51	
SYMPAZAN 10MG ORAL FILM	13	TAFINLAR 10MG TAB FOR ORAL SUSP	39	<i>taztia 300mg er cap</i>	51	
SYMPAZAN 20MG ORAL FILM	13	TAFINLAR 50MG CAP	39	<i>taztia 360mg er cap</i>	51	
SYMPAZAN 5MG ORAL FILM	14	TAFINLAR 75MG CAP	39	TAZVERIK 200MG TAB	39	
SYMPROIC 0.2MG TAB	69	<i>tafluprost 0.0015% ophth soln</i>	81	TDVAX 4-4UNIT/ML INJ	89	
SYMTUZA 150-800-200-10MG TAB	65	TAGRISO 40MG TAB	34	TEFLARO 400MG INJ	54	
SYNAREL 2MG/ML NASAL INHALER	20	TAGRISO 80MG TAB	34	TEFLARO 600MG INJ	54	
SYNJARDY 12.5-1000MG TAB	20	TAKHZYRO 300MG/2ML INJ	70	TEGSEDI 284MG/1.5ML SYRINGE	87	
SYNJARDY 12.5-500MG TAB	20	TAKHZYRO 300MG/2ML SYRINGE	71	<i>telmisartan 20mg tab</i>	28	
SYNJARDY 5-1000MG TAB	20	TALTZ 80MG/ML AUTO-INJECTOR	60	<i>telmisartan 40mg tab</i>	28	
		TALTZ 80MG/ML SYRINGE	60	<i>telmisartan 80mg tab</i>	28	
		TALZENNA 0.25MG CAP	39	<i>temazepam 15mg cap</i>	72	
		TALZENNA 0.5MG CAP	39	<i>temazepam 30mg cap</i>	72	
		TALZENNA 0.75MG CAP	39	TENIVAC 4-10UNIT/ML INJ	89	
		TALZENNA 1MG CAP	39	TENIVAC 4-10UNIT/ML SYRINGE	89	
		<i>tamoxifen 10mg tab</i>	35	<i>tenofovir disoproxil fumarate 300mg tab</i>	47	
		<i>tamoxifen 20mg tab</i>	35	TEPMETKO 225MG TAB	39	
				<i>terazosin 10mg cap</i>	29	
				<i>terazosin 1mg cap</i>	29	
				<i>terazosin 2mg cap</i>	29	
				<i>terazosin 5mg cap</i>	29	
				<i>terbinafine 250mg tab</i>	24	

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>terbutaline sulfate 2.5mg tab</i>	11	THEOPHYLLINE 300MG ER TAB	12	<i>tinidazole 250mg tab</i>	31
<i>terbutaline sulfate 5mg tab</i>	11	<i>theophylline 400mg er tab</i>	12	<i>tinidazole 500mg tab</i>	31
<i>terconazole 0.4% vaginal cream</i>	92	THEOPHYLLINE 450MG ER TAB	12	<i>tiopronin 100mg tab</i>	70
<i>terconazole 0.8% vaginal cream</i>	92	<i>theophylline 5.33mg/ml oral soln</i>	12	TIVICAY 10MG TAB	47
<i>terconazole 80mg vaginal insert</i>	92	<i>theophylline 600mg er tab</i>	12	TIVICAY 25MG TAB	47
<i>teriflunomide 14mg tab</i>	86	<i>thioridazine 100mg tab</i>	45	TIVICAY 50MG TAB	47
<i>teriflunomide 7mg tab</i>	86	<i>thioridazine 10mg tab</i>	45	TIVICAY 5MG TAB FOR ORAL SUSP	47
<i>testosterone 1% (12.5mg/act) gel pump</i>	7	<i>thioridazine 25mg tab</i>	45	<i>tizanidine 2mg tab</i>	78
<i>testosterone 1% (25mg) gel packet</i>	7	<i>thioridazine 50mg tab</i>	45	<i>tizanidine 4mg tab</i>	78
<i>testosterone 1% (50mg) gel packet</i>	7	<i>thiothixene 10mg cap</i>	45	TOBRADEX 0.1-0.3% OPHTH OINTMENT	81
<i>testosterone 1.62% (1.25gm) gel packet</i>	7	<i>thiothixene 1mg cap</i>	45	<i>tobramycin 0.3% ophth soln</i>	80
<i>testosterone 1.62% (2.5gm) gel packet</i>	7	<i>thiothixene 2mg cap</i>	45	TOBRAMYCIN 10MG/ML INJ	2
<i>testosterone 1.62% (20.25mg/act) gel pump</i>	7	<i>thiothixene 5mg cap</i>	45	<i>tobramycin 40mg/ml inj</i>	2
<i>testosterone 30mg/act topical soln</i>	7	<i>tiadylt 120mg er cap</i>	51	<i>tobramycin 60mg/ml inh soln</i>	3
<i>testosterone cypionate 100mg/ml inj</i>	7	<i>tiadylt 180mg er cap</i>	51	<i>tolcapone 100mg tab</i>	40
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	7	<i>tiadylt 240mg er cap</i>	51	<i>tolterodine tartrate 1mg tab</i>	90
<i>testosterone cypionate 200mg/ml inj</i>	7	<i>tiadylt 300mg er cap</i>	51	<i>tolterodine tartrate 2mg er cap</i>	90
TESTOSTERONE ENANTHATE 200MG/ML INJ	7	<i>tiadylt 360mg er cap</i>	51	<i>tolterodine tartrate 2mg tab</i>	91
<i>tetrabenazine 12.5mg tab</i>	85	<i>tiadylt 420mg er cap</i>	51	<i>tolterodine tartrate 4mg er cap</i>	91
<i>tetrabenazine 25mg tab</i>	85	<i>tiagabine 12mg tab</i>	16	<i>topiramate 100mg tab</i>	16
<i>tetracycline 250mg cap</i>	88	<i>tiagabine 16mg tab</i>	16	<i>topiramate 15mg cap</i>	16
<i>tetracycline 500mg cap</i>	88	<i>tiagabine 2mg tab</i>	16	<i>topiramate 200mg tab</i>	16
THALOMID 100MG CAP	76	<i>tiagabine 4mg tab</i>	16	<i>topiramate 25mg cap</i>	16
THALOMID 150MG CAP	76	TIBSOVO 250MG TAB	39	<i>topiramate 25mg tab</i>	16
THALOMID 200MG CAP	76	TICOVAC	92	<i>topiramate 50mg tab</i>	16
THALOMID 50MG CAP	76	1.2MCG/0.25ML SYRINGE		<i>toremifene 60mg tab</i>	35
		TICOVAC 2.4MCG/0.5ML SYRINGE	92	<i>torseamide 100mg tab</i>	63
		TIGECYCLINE 50MG INJ	87	<i>torseamide 10mg tab</i>	63
		<i>tilia fe pack</i>	56	<i>torseamide 20mg tab</i>	63
		<i>timolol 0.25% ophth gel</i>	79	<i>torseamide 5mg tab</i>	63
		<i>timolol 0.25% ophth soln</i>	80	TOUJEO 300UNIT/ML PEN INJ	22
		<i>timolol 0.5% ophth gel</i>	80	TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	22
		<i>timolol 0.5% ophth soln (preservative-free)</i>	80		
		<i>timolol 10mg tab</i>	50		
		<i>timolol 5mg tab</i>	50		

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

TPN ELECTROLYTES INJ	75	TRESIBA 100UNIT/ML	22	TRIHEXYPHENIDYL	40
TRACLEER 32MG TAB	52	INJ		0.4MG/ML ORAL SOLN	
FOR ORAL SUSP		TRESIBA 100UNIT/ML	22	<i>trihexyphenidyl 2mg tab</i>	40
<i>tramadol 100mg er tab</i>	6	PEN INJ		<i>trihexyphenidyl 5mg tab</i>	40
TRAMADOL 100MG ER	6	TRESIBA 200UNIT/ML	22	TRIKAFTA	87
TAB (MATRIX		PEN INJ		100-50-75MG/150MG	
DELIVERY)		<i>tretinoin 0.01% gel</i>	59	PACK	
<i>tramadol 200mg er tab</i>	6	<i>tretinoin 0.025% cream</i>	59	TRIKAFTA	87
TRAMADOL 200MG ER	6	<i>tretinoin 0.025% gel</i>	59	100-50-75MG/75MG	
TAB (MATRIX		<i>tretinoin 0.05% cream</i>	59	GRANULES PACK	
DELIVERY)		<i>tretinoin 0.05% gel</i>	59	TRIKAFTA	87
<i>tramadol 300mg er tab</i>	6	<i>tretinoin 0.1% cream</i>	59	50-37.5-25MG/75MG	
TRAMADOL 300MG ER	6	<i>tretinoin 0.1% gel</i>	59	TAB PACK	
TAB (MATRIX		<i>tretinoin 10mg cap</i>	39	TRIKAFTA	87
DELIVERY)		<i>triamcinolone acetonide</i>	61	80-40-60MG/59.5MG	
<i>tramadol 50mg tab</i>	6	<i>0.025% cream</i>		GRANULES PACK	
<i>trandolapril 1mg tab</i>	28	<i>triamcinolone acetonide</i>	61	<i>tri-legest 28 day pack</i>	56
<i>trandolapril 2mg tab</i>	28	<i>0.025% lotion</i>		<i>tri-lo- estarylla 28 day</i>	57
<i>trandolapril 4mg tab</i>	28	<i>triamcinolone acetonide</i>	61	<i>pack</i>	
<i>tranexamic acid 650mg</i>	72	<i>0.025% ointment</i>		<i>tri-lo-sprintec 28 day</i>	57
<i>tab</i>		<i>triamcinolone acetonide</i>	61	<i>pack</i>	
<i>tranlycypromine 10mg</i>	17	<i>0.1% cream</i>		TRIMETHOPRIM 100MG	31
<i>tab</i>		<i>triamcinolone acetonide</i>	61	TAB	
TRAVASOL 10% INJ	79	<i>0.1% lotion</i>		<i>tri-mili 28 day pack</i>	57
<i>travoprost 0.004% ophth</i>	81	<i>triamcinolone acetonide</i>	61	<i>trimipramine 100mg cap</i>	20
<i>soln</i>		<i>0.1% ointment</i>		<i>trimipramine 25mg cap</i>	20
<i>trazodone 100mg tab</i>	18	<i>triamcinolone acetonide</i>	78	<i>trimipramine 50mg cap</i>	20
<i>trazodone 150mg tab</i>	18	<i>0.1% oral paste</i>		TRINTELLIX 10MG TAB	18
<i>trazodone 50mg tab</i>	18	<i>triamcinolone acetonide</i>	61	TRINTELLIX 20MG TAB	18
TRECATOR 250MG TAB	33	<i>0.5% cream</i>		TRINTELLIX 5MG TAB	18
TRELEGY ELLIPTA	11	<i>triamcinolone acetonide</i>	61	<i>tri-nymyo 28 day pack</i>	57
100-62.5-25MCG		<i>0.5% ointment</i>		<i>tri-sprintec 28 day pack</i>	57
INHALER		<i>triazolam 0.125mg tab</i>	72	TRIUMEQ	47
TRELEGY ELLIPTA	11	<i>triazolam 0.25mg tab</i>	72	600-50-300MG TAB	
200-62.5-25MCG		<i>triderm 0.1% cream</i>	62	TRIUMEQ 60-5-30MG	47
INHALER		<i>triderm 0.5% cream</i>	62	TAB FOR ORAL SUSP	
TRELSTAR 11.25MG INJ	35	<i>trientine 250mg cap</i>	76	<i>trivora 28 day pack</i>	57
TRELSTAR 22.5MG INJ	35	<i>tri-estarylla 28 day pack</i>	56	<i>tri-vylibra 28 day pack</i>	57
TRELSTAR 3.75MG INJ	35	<i>trifluoperazine 10mg tab</i>	45	<i>tri-vylibra lo 28 day pack</i>	57
TREMFYA 100MG/ML	60	<i>trifluoperazine 1mg tab</i>	45	TRIZIVIR	47
AUTO-INJECTOR		<i>trifluoperazine 2mg tab</i>	45	300-150-300MG TAB	
TREMFYA 100MG/ML	60	<i>trifluoperazine 5mg tab</i>	45	TROPHAMINE 10% INJ	79
SYRINGE		TRIFLURIDINE 1%	80	<i>tropium chloride 20mg</i>	91
		OPHTH SOLN		<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>trosipium chloride 60mg er cap</i>	91	UBRELVY 100MG TAB	74	UZEDY 50MG/0.14ML	43
TRULANCE 3MG TAB	68	UBRELVY 50MG TAB	74	SYRINGE	
TRULICITY	22	UCERIS 2MG/ACT	7	UZEDY 75MG/0.21ML	43
0.75MG/0.5ML		RECTAL FOAM		SYRINGE	
AUTO-INJECTOR		UDENYCA 6MG/0.6ML	72	<hr/>	
TRULICITY	22	AUTO-INJECTOR		V	
1.5MG/0.5ML		UDENYCA 6MG/0.6ML	72	<i>valacyclovir 1000mg tab</i>	48
AUTO-INJECTOR		SYRINGE		<i>valacyclovir 500mg tab</i>	48
TRULICITY 3MG/0.5ML	22	<i>unithroid 100mcg tab</i>	89	VALCHLOR 0.016% GEL	60
AUTO-INJECTOR		<i>unithroid 112mcg tab</i>	89	<i>valganciclovir 450mg tab</i>	48
TRULICITY	22	<i>unithroid 125mcg tab</i>	89	<i>valganciclovir 50mg/ml</i>	48
4.5MG/0.5ML		<i>unithroid 137mcg tab</i>	89	<i>oral soln</i>	
AUTO-INJECTOR		<i>unithroid 150mcg tab</i>	89	<i>valproic acid 250mg cap</i>	17
TRUMENBA SYRINGE	91	<i>unithroid 175mcg tab</i>	89	<i>valproic acid 50mg/ml</i>	17
TUKYSA 150MG TAB	34	<i>unithroid 200mcg tab</i>	89	<i>oral soln</i>	
TUKYSA 50MG TAB	34	<i>unithroid 25mcg tab</i>	89	<i>valsartan 160mg tab</i>	28
TURALIO 125MG CAP	39	<i>unithroid 300mcg tab</i>	89	<i>valsartan 320mg tab</i>	28
TWINRIX SYRINGE	92	<i>unithroid 50mcg tab</i>	89	<i>valsartan 40mg tab</i>	28
TYBLUME CHEW TAB	57	<i>unithroid 75mcg tab</i>	89	<i>valsartan 80mg tab</i>	28
28 DAY PACK		<i>unithroid 88mcg tab</i>	89	VALTOCO 10MG	14
TYBOST 150MG TAB	47	UPTRAVI 1000MCG TAB	52	(10MG/0.1ML) NASAL	
TYMLOS	64	UPTRAVI 1200MCG TAB	52	SPRAY DOSE PACK	
3120MCG/1.56ML PEN		UPTRAVI 1400MCG TAB	52	VALTOCO 15MG	14
INJ		UPTRAVI 1600MCG TAB	52	(7.5MG/0.1ML) NASAL	
TYPHIM VI	91	UPTRAVI 200MCG TAB	52	SPRAY DOSE PACK	
25MCG/0.5ML INJ		UPTRAVI 400MCG TAB	52	VALTOCO 20MG	14
TYPHIM VI	91	UPTRAVI 600MCG TAB	52	(10MG/0.1ML) NASAL	
25MCG/0.5ML SYRINGE		UPTRAVI 800MCG TAB	52	SPRAY DOSE PACK	
TYVASO 16-32-48MCG	52	UPTRAVI TAB	52	VALTOCO 5MG	14
TITRATION PACK		TITRATION PACK		(5MG/0.1ML) NASAL	
TYVASO 16-32MCG	52	<i>ursodiol 250mg tab</i>	68	SPARY DOSE PACK	
TITRATION PACK		<i>ursodiol 300mg cap</i>	68	<i>vancomycin 100mg/ml inj</i>	31
TYVASO 16MCG INH	52	<i>ursodiol 500mg tab</i>	68	<i>vancomycin 125mg cap</i>	31
POWDER		UZEDY 100MG/0.28ML	42	<i>vancomycin 1gm inj</i>	31
TYVASO 32-48MCG	52	SYRINGE		<i>vancomycin 250mg cap</i>	31
MAINTENANCE PACK		UZEDY 125MG/0.35ML	42	VANCOMYCIN	31
TYVASO 32MCG INH	52	SYRINGE		25MG/ML ORAL SOLN	
POWDER		UZEDY 150MG/0.42ML	43	<i>vancomycin 500mg inj</i>	31
TYVASO 48MCG INH	52	SYRINGE		<i>vancomycin 750mg inj</i>	31
POWDER		UZEDY 200MG/0.56ML	43	VAQTA 25UNIT/0.5ML	92
TYVASO 64MCG INH	52	SYRINGE		INJ	
POWDER		UZEDY 250MG/0.7ML	43	VAQTA 25UNIT/0.5ML	92
		SYRINGE		SYRINGE	
				VAQTA 50UNIT/ML INJ	92

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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

VAQTA 50UNIT/ML SYRINGE	92	VENTOLIN 108MCG HFA INHALER	11	VIZIMPRO 15MG TAB	34
VARENICLINE 0.5MG TAB	87	<i>verapamil 120mg er cap</i>	51	VIZIMPRO 30MG TAB	34
VARENICLINE 0.5MG/1MG FIRST MONTH PACK	87	<i>verapamil 120mg er tab</i>	51	VIZIMPRO 45MG TAB	34
VARENICLINE 1MG TAB	87	<i>verapamil 120mg tab</i>	51	VONJO 100MG CAP	39
VARIVAX 1350PFU/0.5ML INJ	92	<i>verapamil 180mg er cap</i>	51	<i>voriconazole 200mg inj</i>	25
VARUBI 90MG TAB	24	<i>verapamil 180mg er tab</i>	51	<i>voriconazole 200mg tab</i>	25
VASCEPA 0.5GM CAP	25	<i>verapamil 240mg er cap</i>	51	<i>voriconazole 40mg/ml susp</i>	25
VASCEPA 1GM CAP	26	<i>verapamil 240mg er tab</i>	51	<i>voriconazole 50mg tab</i>	25
<i>velivet 28 day pack</i>	57	<i>verapamil 40mg tab</i>	51	VOSEVI 400-100-100MG TAB	48
VELTASSA 16.8GM POWDER FOR ORAL SUSP	77	<i>verapamil 80mg tab</i>	51	VOTRIENT 200MG TAB	39
VELTASSA 25.2GM POWDER FOR ORAL SUSP	77	VERSACLOZ 50MG/ML SUSP	44	VOXZOGO 0.4MG INJ	66
VELTASSA 8.4GM POWDER FOR ORAL SUSP	78	VERZENIO 100MG TAB	39	VOXZOGO 0.56MG INJ	66
VEMLIDY 25MG TAB	48	VERZENIO 150MG TAB	39	VOXZOGO 1.2MG INJ	66
VENCLEXTA 100MG TAB	34	VERZENIO 200MG TAB	39	VRAYLAR 1.5/3MG MIXED PACK	41
VENCLEXTA 10MG TAB	34	VERZENIO 50MG TAB	39	VRAYLAR 1.5MG CAP	41
VENCLEXTA 50MG TAB	34	<i>vestura 3-0.02mg pack</i>	57	VRAYLAR 3MG CAP	41
VENCLEXTA TAB STARTER PACK	34	VIBERZI 100MG TAB	69	VRAYLAR 4.5MG CAP	41
<i>venlafaxine 100mg tab</i>	19	VIBERZI 75MG TAB	69	VRAYLAR 6MG CAP	41
<i>venlafaxine 150mg er cap</i>	19	VICTOZA 18MG/3ML PEN INJ	22	<i>vyfemla 28 day pack</i>	57
<i>venlafaxine 25mg tab</i>	19	<i>vienna 28 day pack</i>	57	<i>vylibra 28 day pack</i>	57
<i>venlafaxine 37.5mg er cap</i>	19	<i>vigabatrin 500mg powder for oral soln</i>	16	VYNDAMAX 61MG CAP	53
<i>venlafaxine 37.5mg tab</i>	19	<i>vigabatrin 500mg tab</i>	16	VYNDAQEL 20MG CAP	53
<i>venlafaxine 50mg tab</i>	19	<i>vigadrone 500mg powder for oral soln</i>	16	W	
<i>venlafaxine 75mg er cap</i>	19	VIIBRYD 10/20MG STARTER PACK	18	WAKIX 17.8MG TAB	1
<i>venlafaxine 75mg tab</i>	19	<i>vilazodone 10mg tab</i>	18	WAKIX 4.45MG TAB	1
VENTAVIS 10MCG/ML INH SOLN	52	<i>vilazodone 20mg tab</i>	18	<i>warfarin sodium 10mg tab</i>	12
VENTAVIS 20MCG/ML INH SOLN	52	<i>vilazodone 40mg tab</i>	18	<i>warfarin sodium 1mg tab</i>	12
		VIRACEPT 250MG TAB	47	<i>warfarin sodium 2.5mg tab</i>	12
		VIRACEPT 625MG TAB	48	<i>warfarin sodium 2mg tab</i>	12
		VIREAD 150MG TAB	48	<i>warfarin sodium 3mg tab</i>	12
		VIREAD 200MG TAB	48	<i>warfarin sodium 4mg tab</i>	12
		VIREAD 250MG TAB	48	<i>warfarin sodium 5mg tab</i>	12
		VIREAD 40MG/GM ORAL POWDER	48	<i>warfarin sodium 6mg tab</i>	12
		VITRAKVI 100MG CAP	39	<i>warfarin sodium 7.5mg tab</i>	12
		VITRAKVI 20MG/ML ORAL SOLN	39	WELIREG 40MG TAB	35
		VITRAKVI 25MG CAP	39	<i>wymzya fe 28 day pack</i>	57
				X	

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 200MG CAP	39	XIGDUO XR 5-1000MG	21	<i>zafirlukast 20mg tab</i>	10
XALKORI 250MG CAP	39	TAB		<i>zaleplon 10mg cap</i>	72
XARELTO 10MG TAB	12	XIGDUO XR 5-500MG	21	<i>zaleplon 5mg cap</i>	72
XARELTO 15MG TAB	12	TAB		ZARXIO 300MCG/0.5ML	72
XARELTO 1MG/ML	12	XOLAIR 150MG INJ	10	SYRINGE	
SUSP		XOLAIR 150MG/ML	10	ZARXIO 480MCG/0.8ML	72
XARELTO 2.5MG TAB	12	SYRINGE		SYRINGE	
XARELTO 20MG TAB	12	XOLAIR 75MG/0.5ML	10	ZEGALOGUE	21
XARELTO TAB STARTER	12	SYRINGE		0.6MG/0.6ML	
PACK		XOPENEX 45MCG	11	AUTO-INJECTOR	
XATMEP 2.5MG/ML	33	INHALER		ZEGALOGUE	21
ORAL SOLN		XOSPATA 40MG TAB	39	0.6MG/0.6ML SYRINGE	
XCOPRI 100MG TAB	16	XPOVIO 100MG ONCE	36	ZEJULA 100MG CAP	39
XCOPRI 12.5/25MG	16	WEEKLY CARTON		ZELBORAF 240MG TAB	39
TITRATION PACK		(8-PACK)		ZEMAIRA 1000MG INJ	87
XCOPRI 150/200MG	16	XPOVIO 40MG ONCE	36	<i>zenatane 10mg cap</i>	59
PACK TAB		WEEKLY CARTON		<i>zenatane 20mg cap</i>	59
XCOPRI 150/200MG	16	(4-PACK)		<i>zenatane 30mg cap</i>	59
TITRATION PACK		XPOVIO 40MG TWICE	36	<i>zenatane 40mg cap</i>	59
XCOPRI 150MG TAB	16	WEEKLY CARTON		ZENPEP	63
XCOPRI 200MG TAB	16	(8-PACK)		105000-25000-79000UNI	
XCOPRI 50/100MG	16	XPOVIO 60MG ONCE	36	T DR CAP	
TITRATION PACK		WEEKLY CARTON		ZENPEP	63
XCOPRI 50MG TAB	16	(4-PACK)		14000-3000-10000UNIT	
XCOPRI TAB 100/150MG	16	XPOVIO 60MG TWICE	36	DR CAP	
MAINTENANCE PACK		WEEKLY CARTON (24		ZENPEP	63
XELJANZ 10MG TAB	3	PACK)		24000-5000-17000UNIT	
XELJANZ 1MG/ML	3	XPOVIO 80MG ONCE	36	DR CAP	
ORAL SOLN		WEEKLY CARTON		ZENPEP	63
XELJANZ 5MG TAB	3	(8-PACK)		40000-126000-168000U	
XELJANZ XR 11MG TAB	3	XPOVIO 80MG TWICE	36	NIT DR CAP	
XELJANZ XR 22MG TAB	3	WEEKLY CARTON (32		ZENPEP	63
XENLETA 600MG TAB	32	PACK)		42000-10000-32000UNIT	
XERMELO 250MG TAB	69	XTANDI 40MG CAP	35	DR CAP	
XGEVA 120MG/1.7ML	64	XTANDI 40MG TAB	35	ZENPEP	63
INJ		XTANDI 80MG TAB	35	63000-15000-47000UNIT	
XIFAXAN 200MG TAB	31	XYREM 500MG/ML	84	DR CAP	
XIFAXAN 550MG TAB	31	ORAL SOLN		ZENPEP	63
XIGDUO XR 10-1000MG	21			84000-20000-63000UNIT	
TAB		Y		DR CAP	
XIGDUO XR 10-500MG	21	YF-VAX INJ	92	ZEPOSIA 0.92MG CAP	86
TAB		YF-VAX INJ	92	ZEPOSIA CAP 7-DAY	86
XIGDUO XR	21	Z		STARTER PACK	
2.5-1000MG TAB		<i>zafirlukast 10mg tab</i>	10	<i>zidovudine 100mg cap</i>	48

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>zidovudine 10mg/ml oral soln</i>	48	ZUBSOLV 8.6-2.1MG SL TAB	7
<i>zidovudine 300mg tab</i>	48	ZYDELIG 100MG TAB	39
ZIEXTENZO 6MG/0.6ML SYRINGE	72	ZYDELIG 150MG TAB	39
ZIMHI 5MG/0.5ML SYRINGE	24	ZYKADIA 150MG TAB	39
<i>ziprasidone 20mg cap</i>	41	ZYPREXA 210MG INJ	44
<i>ziprasidone 20mg inj</i>	41		
<i>ziprasidone 40mg cap</i>	41		
<i>ziprasidone 60mg cap</i>	41		
<i>ziprasidone 80mg cap</i>	41		
ZIRGAN 0.15% OPHTH GEL	80		
ZOLINZA 100MG CAP	39		
<i>zolmitriptan 2.5mg tab</i>	74		
<i>zolmitriptan 5mg tab</i>	74		
<i>zolmitriptan 5mg/act nasal spray</i>	74		
<i>zolpidem tartrate 10mg tab</i>	72		
<i>zolpidem tartrate 12.5mg er tab</i>	72		
<i>zolpidem tartrate 5mg tab</i>	72		
<i>zolpidem tartrate 6.25mg er tab</i>	72		
ZONISADE 100MG/5ML SUSP	16		
<i>zonisamide 100mg cap</i>	16		
<i>zonisamide 25mg cap</i>	16		
<i>zonisamide 50mg cap</i>	16		
ZORYVE 0.3% CREAM	60		
<i>zovia 1/35e 28 day pack</i>	57		
ZTALMY 50MG/ML SUSP	16		
ZUBSOLV 1.4-0.36MG SL TAB	7		
ZUBSOLV 11.4-2.9MG SL TAB	7		
ZUBSOLV 2.9-0.71MG SL TAB	7		
ZUBSOLV 5.7-1.4MG SL TAB	7		

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