



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

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

Lista de medicamentos cubiertos (Formulario)

2024

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

Este Formulario se actualizó el 1 de agosto de 2024.

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

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

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

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

Introducción

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

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

Índice

A. Avisos legales	iii
B. Preguntas frecuentes	iii
B1. ¿Qué medicamentos recetados están en la <i>Lista de medicamentos cubiertos</i> ? (Para abreviar, llamamos “ <i>Lista de medicamentos</i> ” a la Lista de medicamentos cubiertos)	iii
B2. ¿Se realizan cambios en la Lista de medicamentos?	iv
B3. ¿Qué sucede cuando se realiza un cambio en la Lista de medicamentos?	v
B4. ¿Hay algún límite o restricción en la cobertura de los medicamentos o alguna medida que deba tomar para obtener determinados medicamentos?	vi
B5. ¿Cómo sabré si el medicamento que deseo tiene restricciones o si hay alguna medida que deba tomar para obtener el medicamento?	vi
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)?	vi
B7. ¿Cómo puedo encontrar un medicamento en la Lista de medicamentos?	vii
B8. ¿Qué sucede si el medicamento que deseo tomar no figura en la Lista de medicamentos?	vii
B9. ¿Qué sucede si soy un miembro nuevo de L.A. Care Medicare Plus y no puedo encontrar mi medicamento en la Lista de medicamentos o si tengo problemas para obtener mi medicamento?	vii
B10. ¿Puedo solicitar una excepción para cubrir mi medicamento?	viii
B11. ¿Cómo puedo solicitar una excepción?	ix
B12. ¿Cuánto tiempo tarda obtener una excepción?	ix
B13. ¿Qué son los medicamentos genéricos?	ix
B14. ¿Qué son los medicamentos OTC?	ix
B15. ¿L.A. Care Medicare Plus cubre los productos OTC que no sean medicamentos?	ix



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

B16. ¿L.A. Care Medicare Plus cubre los suministros de medicamentos recetados a largo plazo?	x
B17. ¿La farmacia local me puede enviar medicamentos recetados a mi casa?	x
B18. ¿Cuál es mi copago?	x
C. Resumen de la <i>Lista de medicamentos cubiertos</i>	x
C1. Lista de medicamentos por condición médica	xii
D. Índice de medicamentos cubiertos	xiii



A. Avisos legales

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

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

B. Preguntas frecuentes

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

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

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

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



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

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

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

B2. ¿La Lista de medicamentos cambia alguna vez?

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

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

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

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

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

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

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

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



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

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

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

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

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

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

Cuando ocurran estos cambios, haremos lo siguiente:

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

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

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



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

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

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

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

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

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

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

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

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

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



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

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

Puede encontrar un medicamento de dos formas:

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

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

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

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

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

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

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

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

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

Cubriremos un suministro de 30 días de su medicamento si:

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



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

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

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

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

Cambios en el nivel de atención médica

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

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

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

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

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

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

También puede solicitarnos que cambiemos las reglas de su medicamento.

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



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

B11. ¿Cómo puedo solicitar una excepción?

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

B12. ¿Cuánto tiempo tarda obtener una excepción?

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

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

B13. ¿Qué son los medicamentos genéricos?

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

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

B14. ¿Qué son los medicamentos OTC?

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

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

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

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

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

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



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

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

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

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

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

B18. ¿Cuál es mi copago?

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

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

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

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

C. Resumen de la *Lista de medicamentos cubiertos*

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



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

ABREVIATURAS DE LAS NOTAS DE COBERTURA

Restricciones a la administración de utilización

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

Otros requisitos especiales de cobertura

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

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



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

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

C1. Lista de medicamentos por condición médica

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



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

D. Índice de medicamentos cubiertos

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



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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<i>amphetamine/dextroamphetamine 10mg tab</i>	1	
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	1	
<i>amphetamine/dextroamphetamine 15mg tab</i>	1	
<i>amphetamine/dextroamphetamine 20mg tab</i>	1	
<i>amphetamine/dextroamphetamine 25mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 30mg tab</i>	1	
<i>amphetamine/dextroamphetamine 5mg tab</i>	1	
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	1	
<i>dextroamphetamine sulfate 10mg er cap</i>	1	
<i>dextroamphetamine sulfate 10mg tab</i>	1	
<i>dextroamphetamine sulfate 15mg er cap</i>	1	
<i>dextroamphetamine sulfate 5mg er cap</i>	1	
<i>dextroamphetamine sulfate 5mg tab</i>	1	
<i>lisdexamfetamine dimesylate 10mg cap</i>	1	
<i>lisdexamfetamine dimesylate 20mg cap</i>	1	
<i>lisdexamfetamine dimesylate 30mg cap</i>	1	
<i>lisdexamfetamine dimesylate 40mg cap</i>	1	
<i>lisdexamfetamine dimesylate 50mg cap</i>	1	
<i>lisdexamfetamine dimesylate 60mg cap</i>	1	
<i>lisdexamfetamine dimesylate 70mg cap</i>	1	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine 100mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 10mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 18mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 25mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 40mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 60mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 80mg cap</i>	1	QL=60 EA/30 Days
<i>clonidine 0.1mg er tab</i>	1	
<i>guanfacine 1mg er tab</i>	1	
<i>guanfacine 2mg er tab</i>	1	
<i>guanfacine 3mg er tab</i>	1	
<i>guanfacine 4mg er tab</i>	1	
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI 150MG TAB	1	PA QL=30 EA/30 Days
SUNOSI 75MG TAB	1	PA QL=30 EA/30 Days
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS		
WAKIX 17.8MG TAB	1	NDS PA QL=60 EA/30 Days
WAKIX 4.45MG TAB	1	NDS PA QL=60 EA/30 Days
STIMULANTS - MISC.		
<i>armodafinil 150mg tab</i>	1	PA QL=30 EA/30 Days
<i>armodafinil 200mg tab</i>	1	PA QL=30 EA/30 Days
<i>armodafinil 250mg tab</i>	1	PA QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>armodafinil 50mg tab</i>	1	PA QL=30 EA/30 Days
<i>dexmethylphenidate 10mg er cap</i>	1	
<i>dexmethylphenidate 10mg tab</i>	1	
<i>dexmethylphenidate 15mg er cap</i>	1	
<i>dexmethylphenidate 2.5mg tab</i>	1	
<i>dexmethylphenidate 20mg er cap</i>	1	
<i>dexmethylphenidate 25mg er cap</i>	1	
<i>dexmethylphenidate 30mg er cap</i>	1	
<i>dexmethylphenidate 35mg er cap</i>	1	
<i>dexmethylphenidate 40mg er cap</i>	1	
<i>dexmethylphenidate 5mg er cap</i>	1	
<i>dexmethylphenidate 5mg tab</i>	1	
<i>methylphenidate 10mg cr cap</i>	1	
<i>methylphenidate 10mg er tab</i>	1	
<i>methylphenidate 10mg la cap</i>	1	
<i>methylphenidate 10mg tab</i>	1	
<i>methylphenidate 18mg ER osmotic tab</i>	1	
<i>methylphenidate 1mg/ml oral soln</i>	1	
<i>methylphenidate 20mg cr cap</i>	1	
<i>methylphenidate 20mg er tab</i>	1	
<i>methylphenidate 20mg la cap</i>	1	
<i>methylphenidate 20mg tab</i>	1	
<i>methylphenidate 27mg er tab</i>	1	
<i>methylphenidate 27mg sr tab</i>	1	
<i>methylphenidate 2mg/ml oral soln</i>	1	
<i>methylphenidate 30mg cr cap</i>	1	
<i>methylphenidate 30mg la cap</i>	1	
<i>methylphenidate 36mg er tab</i>	1	
<i>methylphenidate 36mg sr tab</i>	1	
<i>methylphenidate 40mg cr cap</i>	1	
<i>methylphenidate 40mg la cap</i>	1	
<i>methylphenidate 50mg cr cap</i>	1	
<i>methylphenidate 54mg er tab</i>	1	
<i>methylphenidate 54mg sr tab</i>	1	
<i>methylphenidate 5mg tab</i>	1	
<i>methylphenidate 60mg cr cap</i>	1	
<i>modafinil 100mg tab</i>	1	PA QL=60 EA/30 Days
<i>modafinil 200mg tab</i>	1	PA QL=60 EA/30 Days
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
<i>amikacin 250mg/ml inj</i>	1	
ARIKAYCE 590MG/8.4ML INH SUSP	1	NDS PA QL=252 ML/30 Days
GENTAMICIN 0.8MG/ML INJ	1	
<i>gentamicin 1.2mg/ml inj</i>	1	
GENTAMICIN 1.6MG/ML INJ	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GENTAMICIN 1MG/ML INJ	1	
<i>gentamicin 40mg/ml inj</i>	1	
<i>neomycin sulfate 500mg tab</i>	1	
TOBRAMYCIN 10MG/ML INJ	1	
<i>tobramycin 40mg/ml inj</i>	1	
<i>tobramycin 60mg/ml inh soln</i>	1	PA QL=300 ML/30 Days
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
OLUMIANT 1MG TAB	1	NDS PA QL=30 EA/30 Days
OLUMIANT 2MG TAB	1	NDS PA QL=30 EA/30 Days
OLUMIANT 4MG TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 15MG ER TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 30MG ER TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 45MG ER TAB	1	NDS PA QL=30 EA/30 Days
XELJANZ 10MG TAB	1	NDS PA QL=60 EA/30 Days
XELJANZ 1MG/ML ORAL SOLN	1	NDS PA QL=300 ML/30 Days
XELJANZ 5MG TAB	1	NDS PA QL=60 EA/30 Days
XELJANZ XR 11MG TAB	1	NDS PA QL=30 EA/30 Days
XELJANZ XR 22MG TAB	1	NDS PA QL=30 EA/30 Days
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
HADLIMA 40MG/0.4ML AUTO-INJECTOR	1	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.4ML SYRINGE	1	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.8ML AUTO-INJECTOR	1	NDS PA QL=4.80 ML/28 Days
HADLIMA 40MG/0.8ML SYRINGE	1	NDS PA QL=4.80 ML/28 Days
HUMIRA 10MG/0.1ML SYRINGE (ABBVIE)	1	NDS PA QL=2 EA/28 Days
HUMIRA 20MG/0.2ML SYRINGE (ABBVIE)	1	NDS PA QL=2 EA/28 Days
HUMIRA 40MG/0.4ML AUTO-INJECTOR (ABBVIE)	1	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.4ML SYRINGE (ABBVIE)	1	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.8ML AUTO-INJECTOR	1	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.8ML SYRINGE	1	NDS PA QL=6 EA/28 Days
HUMIRA 80MG/0.8ML AUTO-INJECTOR (ABBVIE)	1	NDS PA QL=2 EA/28 Days
HUMIRA PEN - PEDIATRIC UC STARTER PACK 80MG/0.8ML INJ (ABBVIE)	1	NDS PA QL=4 EA/180 Days
HUMIRA PEN 80MG/0.8ML AND 40MG/0.4ML - PSORIASIS/UVEITIS STARTER PACK	1	NDS PA QL=3 EA/180 Days
HUMIRA PEN 80MG/0.8ML CROHNS/UC/HIDRADENITIS STARTER PACK (ABBVIE)	1	NDS PA QL=3 EA/180 Days
SIMPONI 100MG/ML AUTO-INJECTOR	1	NDS PA QL=3 ML/28 Days
SIMPONI 100MG/ML SYRINGE	1	NDS PA QL=3 ML/28 Days
SIMPONI 50MG/0.5ML AUTO-INJECTOR	1	NDS PA QL=.50 ML/28 Days
SIMPONI 50MG/0.5ML SYRINGE	1	NDS PA QL=.50 ML/28 Days
GOLD COMPOUNDS		
RIDAURA 3MG CAP	1	
INTERLEUKIN-1 BLOCKERS		

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
ARCALYST 220MG INJ	1	NDS PA
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA 162MG/0.9ML AUTO-INJECTOR	1	NDS PA QL=3.60 ML/28 Days
ACTEMRA 162MG/0.9ML SYRINGE	1	NDS PA QL=3.60 ML/28 Days
KEVZARA 150MG/1.14ML AUTO-INJECTOR	1	NDS PA QL=2.28 ML/28 Days
KEVZARA 150MG/1.14ML SYRINGE	1	NDS PA QL=2.28 ML/28 Days
KEVZARA 200MG/1.14ML AUTO-INJECTOR	1	NDS PA QL=2.28 ML/28 Days
KEVZARA 200MG/1.14ML SYRINGE	1	NDS PA QL=2.28 ML/28 Days
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
<i>celecoxib 100mg cap</i>	1	
<i>celecoxib 200mg cap</i>	1	
<i>celecoxib 400mg cap</i>	1	
<i>celecoxib 50mg cap</i>	1	
<i>diclofenac potassium 50mg tab</i>	1	
<i>diclofenac sodium 100mg er tab</i>	1	
<i>diclofenac sodium 25mg dr tab</i>	1	
<i>diclofenac sodium 50mg dr tab</i>	1	
<i>diclofenac sodium 75mg dr tab</i>	1	
<i>diclofenac sodium/misoprostol 50-0.2mg dr tab</i>	1	
<i>diclofenac sodium/misoprostol 75-0.2mg dr tab</i>	1	
<i>etodolac 200mg cap</i>	1	
<i>etodolac 300mg cap</i>	1	
<i>etodolac 400mg tab</i>	1	
<i>etodolac 500mg tab</i>	1	
<i>ibu 600mg tab</i>	1	
<i>ibu 800mg tab</i>	1	
<i>ibuprofen 20mg/ml susp</i>	1	
<i>ibuprofen 400mg tab</i>	1	
<i>ibuprofen 600mg tab</i>	1	
<i>ibuprofen 800mg tab</i>	1	
<i>ketorolac tromethamine 10mg tab</i>	1	QL=20 EA/5 Days
<i>meloxicam 15mg tab</i>	1	
<i>meloxicam 7.5mg tab</i>	1	
<i>nabumetone 500mg tab</i>	1	
<i>nabumetone 750mg tab</i>	1	
<i>naproxen 250mg tab</i>	1	
<i>naproxen 375mg dr tab</i>	1	
<i>naproxen 375mg tab</i>	1	
<i>naproxen 500mg tab</i>	1	
<i>naproxen sodium 275mg tab</i>	1	
<i>naproxen sodium 550mg tab</i>	1	
<i>piroxicam 10mg cap</i>	1	
<i>piroxicam 20mg cap</i>	1	
<i>sulindac 150mg tab</i>	1	
<i>sulindac 200mg tab</i>	1	

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
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA 28-DAY STARTER PACK	1	NDS PA QL=55 EA/28 Days
OTEZLA 30MG TAB	1	NDS PA QL=60 EA/30 Days
PYRIMIDINE SYNTHESIS INHIBITORS		
<i>leflunomide 10mg tab</i>	1	
<i>leflunomide 20mg tab</i>	1	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA 125MG/ML AUTO-INJECTOR	1	NDS PA QL=4 ML/28 Days
ORENCIA 125MG/ML SYRINGE	1	NDS PA QL=4 ML/28 Days
ORENCIA 50MG/0.4ML SYRINGE	1	NDS PA QL=1.60 ML/28 Days
ORENCIA 87.5MG/0.7ML SYRINGE	1	NDS PA QL=2.80 ML/28 Days
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL 25MG/0.5ML INJ	1	NDS PA QL=8 ML/28 Days
ENBREL 25MG/0.5ML SYRINGE	1	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML CARTRIDGE	1	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML SYRINGE	1	NDS PA QL=8 ML/28 Days
ANALGESICS - NONNARCOTIC		
SALICYLATES		
<i>diflunisal 500mg tab</i>	1	
ANALGESICS - OPIOID		
OPIOID AGONISTS		
CODEINE SULFATE 15MG TAB	1	QL=240 EA/30 Days
CODEINE SULFATE 30MG TAB	1	QL=240 EA/30 Days
CODEINE SULFATE 60MG TAB	1	QL=180 EA/30 Days
<i>fentanyl 100mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 1200mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>fentanyl 12mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 1600mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>fentanyl 200mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>fentanyl 25mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 400mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>fentanyl 50mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 600mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>fentanyl 75mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 800mcg lozenge</i>	1	PA QL=120 EA/30 Days
<i>hydromorphone 2mg tab</i>	1	QL=450 EA/30 Days
<i>hydromorphone 4mg tab</i>	1	QL=240 EA/30 Days
<i>hydromorphone 8mg tab</i>	1	QL=120 EA/30 Days
<i>methadone 10mg tab</i>	1	QL=360 EA/30 Days
<i>methadone 5mg tab</i>	1	QL=360 EA/30 Days
<i>morphine sulfate 100mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 EA/30 Days
MORPHINE SULFATE 15MG TAB	1	QL=180 EA/30 Days
<i>morphine sulfate 200mg er tab</i>	1	QL=120 EA/30 Days

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>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 ML/30 Days
MORPHINE SULFATE 2MG/ML ORAL SOLN	1	QL=1800 ML/30 Days
<i>morphine sulfate 30mg er tab</i>	1	QL=120 EA/30 Days
MORPHINE SULFATE 30MG TAB	1	QL=180 EA/30 Days
MORPHINE SULFATE 4MG/ML ORAL SOLN	1	QL=900 ML/30 Days
<i>morphine sulfate 60mg er tab</i>	1	QL=120 EA/30 Days
<i>oxycodone 10mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 15mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 1mg/ml oral soln</i>	1	QL=5400 ML/30 Days
<i>oxycodone 20mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 20mg/ml oral soln</i>	1	QL=270 ML/30 Days
<i>oxycodone 30mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 5mg tab</i>	1	QL=360 EA/30 Days
<i>tramadol 100mg er tab</i>	1	QL=30 EA/30 Days
<i>tramadol 200mg er tab</i>	1	QL=30 EA/30 Days
<i>tramadol 300mg er tab</i>	1	QL=30 EA/30 Days
<i>tramadol 50mg tab</i>	1	QL=240 EA/30 Days
OPIOID COMBINATIONS		
<i>acetaminophen/codeine phosphate 24mg-2.4mg/ml oral soln</i>	1	QL=4980 ML/30 Days
<i>acetaminophen/hydrocodone bitartrate 21.7mg-0.5mg/ml oral soln</i>	1	QL=5400 ML/30 Days
<i>codeine phosphate/acetaminophen 15-300mg tab</i>	1	QL=390 EA/30 Days
<i>codeine phosphate/acetaminophen 30-300mg tab</i>	1	QL=390 EA/30 Days
<i>codeine phosphate/acetaminophen 60-300mg tab</i>	1	QL=390 EA/30 Days
<i>endocet 2.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>endocet 325-10mg tab</i>	1	QL=360 EA/30 Days
<i>endocet 325-5mg tab</i>	1	QL=360 EA/30 Days
<i>endocet 325-7.5mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 2.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 5-325mg tab</i>	1	QL=360 EA/30 Days
OXYCODONE/ACETAMINOPHEN 5-325MG/5ML	1	QL=1800 ML/30 Days
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>tramadol/acetaminophen 37.5-325mg tab</i>	1	QL=360 EA/30 Days
OPIOID PARTIAL AGONISTS		
<i>buprenorphine 2mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine 8mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 12-3mg sl film</i>	1	QL=60 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 4-1mg sl film</i>	1	QL=90 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>buprenorphine/naloxone 8-2mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	1	QL=90 EA/30 Days
<i>butorphanol tartrate 1mg/act nasal inhaler</i>	1	QL=10 ML/30 Days
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol 100mg cap</i>	1	
<i>danazol 200mg cap</i>	1	
<i>danazol 50mg cap</i>	1	
<i>depo-testosterone 200mg/ml inj</i>	1	
<i>testosterone 1% (12.5mg/act) gel pump</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1% (25mg) gel packet</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1% (50mg) gel packet</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1.62% (1.25gm) gel packet</i>	1	PA QL=75 GM/30 Days
<i>testosterone 1.62% (2.5gm) gel packet</i>	1	PA QL=150 GM/30 Days
<i>testosterone 1.62% (20.25mg/act) gel pump</i>	1	PA QL=150 GM/30 Days
<i>testosterone 30mg/act topical soln</i>	1	PA QL=180 ML/30 Days
<i>testosterone cypionate 100mg/ml inj</i>	1	
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	1	
<i>testosterone cypionate 200mg/ml inj</i>	1	
TESTOSTERONE ENANTHATE 200MG/ML INJ	1	
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide 2mg/act rectal foam</i>	1	PA
<i>hydrocortisone 1.67mg/ml enema</i>	1	
RECTAL STEROIDS		
<i>hydrocortisone 2.5% cream</i>	1	
<i>procto-med 2.5% cream</i>	1	
<i>proctosol 2.5% cream</i>	1	
<i>proctozone hc 2.5% cream</i>	1	
VASODILATING AGENTS		
<i>nitroglycerin 0.4% rectal ointment</i>	1	QL=30 GM/30 Days
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole 200mg tab</i>	1	
BENZNIDAZOLE 100MG TAB	1	
BENZNIDAZOLE 12.5MG TAB	1	
<i>ivermectin 3mg tab</i>	1	PA
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
<i>ranolazine 1000mg er tab</i>	1	
<i>ranolazine 500mg er tab</i>	1	
NITRATES		
<i>isosorbide dinitrate 10mg tab</i>	1	
<i>isosorbide dinitrate 20mg tab</i>	1	
<i>isosorbide dinitrate 30mg tab</i>	1	

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>isosorbide dinitrate 5mg tab</i>	1	
ISOSORBIDE MONONITRATE 10MG TAB	1	
<i>isosorbide mononitrate 120mg er tab</i>	1	
ISOSORBIDE MONONITRATE 20MG TAB	1	
<i>isosorbide mononitrate 30mg er tab</i>	1	
<i>isosorbide mononitrate 60mg er tab</i>	1	
NITRO-BID 2% OINTMENT	1	
<i>nitroglycerin 0.1mg/hr patch</i>	1	
<i>nitroglycerin 0.2mg/hr patch</i>	1	
<i>nitroglycerin 0.3mg sl tab</i>	1	
<i>nitroglycerin 0.4mg sl tab</i>	1	
<i>nitroglycerin 0.4mg/act spray</i>	1	
<i>nitroglycerin 0.4mg/hr patch</i>	1	
<i>nitroglycerin 0.6mg sl tab</i>	1	
<i>nitroglycerin 0.6mg/hr patch</i>	1	
ANTI-ANXIETY AGENTS		
ANTI-ANXIETY AGENTS - MISC.		
<i>bupirone 10mg tab</i>	1	
<i>bupirone 15mg tab</i>	1	
<i>bupirone 30mg tab</i>	1	
<i>bupirone 5mg tab</i>	1	
<i>bupirone 7.5mg tab</i>	1	
<i>hydroxyzine 10mg tab</i>	1	
<i>hydroxyzine 25mg tab</i>	1	
<i>hydroxyzine 50mg tab</i>	1	
HYDROXYZINE PAMOATE 100MG CAP	1	
<i>hydroxyzine pamoate 25mg cap</i>	1	
<i>hydroxyzine pamoate 50mg cap</i>	1	
BENZODIAZEPINES		
<i>alprazolam 0.25mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 0.5mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 1mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 2mg tab</i>	1	QL=150 EA/30 Days
<i>chlordiazepoxide 10mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 25mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 5mg cap</i>	1	QL=120 EA/30 Days
<i>clorazepate dipotassium 15mg tab</i>	1	QL=180 EA/30 Days
<i>diazepam 10mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 1mg/ml oral soln</i>	1	QL=1200 ML/30 Days
<i>diazepam 2mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg/ml oral soln</i>	1	QL=240 ML/30 Days
<i>lorazepam 0.5mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 1mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg tab</i>	1	QL=150 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lorazepam 2mg/ml oral soln</i>	1	QL=150 ML/30 Days
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide 100mg cap</i>	1	PA
<i>disopyramide 150mg cap</i>	1	PA
QUINIDINE SULFATE 200MG TAB	1	
QUINIDINE SULFATE 300MG TAB	1	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine 150mg cap</i>	1	
<i>mexiletine 200mg cap</i>	1	
<i>mexiletine 250mg cap</i>	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate 100mg tab</i>	1	
<i>flecainide acetate 150mg tab</i>	1	
<i>flecainide acetate 50mg tab</i>	1	
<i>propafenone 150mg tab</i>	1	
<i>propafenone 225mg er cap</i>	1	
<i>propafenone 225mg tab</i>	1	
<i>propafenone 300mg tab</i>	1	
<i>propafenone 325mg er cap</i>	1	
<i>propafenone 425mg er cap</i>	1	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone 200mg tab</i>	1	
<i>amiodarone 400mg tab</i>	1	
<i>dofetilide 0.125mg cap</i>	1	
<i>dofetilide 0.25mg cap</i>	1	
<i>dofetilide 0.5mg cap</i>	1	
MULTAQ 400MG TAB	1	
<i>pacerone 200mg tab</i>	1	
<i>pacerone 400mg tab</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA 10MG/0.5ML SYRINGE	1	PA
FASENRA 30MG/ML AUTO-INJECTOR	1	PA
FASENRA 30MG/ML SYRINGE	1	PA
NUCALA 100MG INJ	1	NDS PA
NUCALA 100MG/ML AUTO-INJECTOR	1	NDS PA
NUCALA 100MG/ML SYRINGE	1	NDS PA
NUCALA 40MG/0.4ML SYRINGE	1	NDS PA
XOLAIR 150MG INJ	1	NDS PA
XOLAIR 150MG/ML AUTO-INJECTOR	1	NDS PA
XOLAIR 150MG/ML SYRINGE	1	NDS PA
XOLAIR 300MG/2ML AUTO-INJECTOR	1	NDS PA
XOLAIR 300MG/2ML SYRINGE	1	NDS PA
XOLAIR 75MG/0.5ML AUTO-INJECTOR	1	NDS PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XOLAIR 75MG/0.5ML SYRINGE	1	NDS PA
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG INHALER	1	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH INHALER	1	
<i>ipratropium bromide 0.02% inh soln</i>	1	PA BvD
SPIRIVA RESPIMAT 1.25MCG/ACT INH	1	ST QL=4 GM/30 Days
LEUKOTRIENE MODULATORS		
<i>montelukast 10mg tab</i>	1	QL=30 EA/30 Days
<i>montelukast 4mg chew tab</i>	1	QL=30 EA/30 Days
<i>montelukast 4mg granules</i>	1	QL=30 EA/30 Days
<i>montelukast 5mg chew tab</i>	1	QL=30 EA/30 Days
<i>zafirlukast 10mg tab</i>	1	QL=60 EA/30 Days
<i>zafirlukast 20mg tab</i>	1	QL=60 EA/30 Days
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
<i>roflumilast 0.5mg tab</i>	1	
<i>roflumilast 250mcg tab</i>	1	
STEROID INHALANTS		
ALVESCO 160MCG INHALER	1	QL=12.20 GM/30 Days
ALVESCO 80MCG INHALER	1	QL=12.20 GM/30 Days
ARNUITY 100MCG INHALER	1	QL=30 EA/30 Days
ARNUITY 200MCG INHALER	1	QL=30 EA/30 Days
ARNUITY 50MCG INHALER	1	QL=30 EA/30 Days
ASMANEX 100MCG HFA INHALER	1	QL=13 GM/30 Days
ASMANEX 110MCG (30ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 200MCG HFA INHALER	1	QL=13 GM/30 Days
ASMANEX 220MCG (120ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 220MCG (30ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 220MCG (60ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 50MCG HFA INHALER	1	QL=13 GM/30 Days
<i>budesonide 0.125mg/ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
<i>budesonide 0.25mg/ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
FLUTICASONE PROPIONATE 110MCG INHALER	1	QL=24 GM/30 Days
FLUTICASONE PROPIONATE 220MCG INHALER	1	QL=24 GM/30 Days
FLUTICASONE PROPIONATE 44MCG INHALER	1	QL=21.20 GM/30 Days
QVAR 40MCG REDIHALER	1	QL=21.20 GM/30 Days
QVAR 80MCG REDIHALER	1	QL=21.20 GM/30 Days
SYMPATHOMIMETICS		
ADVAIR 115-21MCG HFA INHALER	1	QL=12 GM/30 Days
ADVAIR 230-21MCG HFA INHALER	1	QL=12 GM/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER	1	QL=12 GM/30 Days
<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	1	PA BvD
<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	1	
<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	1	PA BvD
<i>albuterol 1.25mg/3ml neb soln</i>	1	PA BvD

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	1	QL=13.40 GM/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	1	QL=17 GM/30 Days
<i>albuterol 2mg tab</i>	1	
<i>albuterol 4mg tab</i>	1	
<i>albuterol 5mg/ml inh soln</i>	1	PA BvD
ANORO ELLIPTA 62.5-25MCG INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 100-25MCG INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 200-25MCG INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 50-25MCG INH	1	QL=60 EA/30 Days
<i>breyana 160-4.5mcg/act inh</i>	1	QL=10.30 GM/30 Days
<i>breyana 80-4.5mcg/act inh</i>	1	QL=10.30 GM/30 Days
BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	1	QL=10.70 GM/30 Days
<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	1	QL=10.20 GM/30 Days
<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	1	QL=10.20 GM/30 Days
COMBIVENT 20-100MCG/ACT INH	1	QL=6 GM/30 Days
DULERA 100-5MCG INHALER	1	QL=13 GM/30 Days
DULERA 200-5MCG INHALER	1	QL=13 GM/30 Days
DULERA 50-5MCG INHALER	1	QL=13 GM/30 Days
<i>fluticasone propionate/salmeterol 100-50mcg/act dry powder inhaler</i>	1	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 250-50mcg/act dry powder inhaler</i>	1	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 500-50mcg/act dry powder inhaler</i>	1	QL=60 EA/30 Days
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	1	PA BvD
<i>levalbuterol 0.31mg/3ml neb soln</i>	1	PA BvD
<i>levalbuterol 0.63mg/3ml inh soln</i>	1	PA BvD
<i>levalbuterol 1.25mg/0.5ml neb soln</i>	1	PA BvD
<i>levalbuterol 1.25mg/3ml neb soln</i>	1	PA BvD
LEVALBUTEROL 45MCG/ACT INHALER	1	ST QL=30 GM/30 Days
SEREVENT 50MCG/DOSE INHALER	1	
STIOLTO 2.5-2.5MCG/ACT INH	1	QL=4 GM/30 Days
<i>terbutaline sulfate 2.5mg tab</i>	1	
<i>terbutaline sulfate 5mg tab</i>	1	
TRELEGY ELLIPTA 100-62.5-25MCG INHALER	1	QL=60 EA/30 Days
TRELEGY ELLIPTA 200-62.5-25MCG INHALER	1	QL=60 EA/30 Days
<i>wixela 100-50mcg inhaler</i>	1	QL=60 EA/30 Days
<i>wixela 250-50mcg inhaler</i>	1	QL=60 EA/30 Days
<i>wixela 500-50mcg inhaler</i>	1	QL=60 EA/30 Days
XOPENEX 45MCG INHALER	1	ST QL=30 GM/30 Days
XANTHINES		
THEOPHYLLINE 100MG ER TAB	1	
THEOPHYLLINE 200MG ER TAB	1	
<i>theophylline 300mg er tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450mg er tab</i>	1	
<i>theophylline 600mg er tab</i>	1	
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
<i>jantoven 10mg tab</i>	1	
<i>jantoven 1mg tab</i>	1	
<i>jantoven 2.5mg tab</i>	1	
<i>jantoven 2mg tab</i>	1	
<i>jantoven 3mg tab</i>	1	
<i>jantoven 4mg tab</i>	1	
<i>jantoven 5mg tab</i>	1	
<i>jantoven 6mg tab</i>	1	
<i>jantoven 7.5mg tab</i>	1	
<i>warfarin sodium 10mg tab</i>	1	
<i>warfarin sodium 1mg tab</i>	1	
<i>warfarin sodium 2.5mg tab</i>	1	
<i>warfarin sodium 2mg tab</i>	1	
<i>warfarin sodium 3mg tab</i>	1	
<i>warfarin sodium 4mg tab</i>	1	
<i>warfarin sodium 5mg tab</i>	1	
<i>warfarin sodium 6mg tab</i>	1	
<i>warfarin sodium 7.5mg tab</i>	1	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS 2.5MG TAB	1	
ELIQUIS 5MG 30-DAY STARTER PACK	1	
ELIQUIS 5MG TAB	1	
XARELTO 10MG TAB	1	
XARELTO 15MG TAB	1	
XARELTO 1MG/ML SUSP	1	
XARELTO 2.5MG TAB	1	
XARELTO 20MG TAB	1	
XARELTO TAB STARTER PACK	1	
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>enoxaparin sodium 100mg/1ml syringe</i>	1	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	1	
<i>enoxaparin sodium 150mg/1ml syringe</i>	1	
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	1	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	1	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	1	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	1	
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	1	
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	1	
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	1	
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	1	

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>heparin sodium porcine 10000unit/ml inj</i>	1	
<i>heparin sodium porcine 1000unit/ml inj</i>	1	
<i>heparin sodium porcine 20000unit/ml inj</i>	1	
<i>heparin sodium porcine 5000unit/ml inj</i>	1	
ANTICONVULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA 0.5MG/ML SUSP	1	PA NSO
FYCOMPA 10MG TAB	1	PA NSO
FYCOMPA 12MG TAB	1	PA NSO
FYCOMPA 2MG TAB	1	PA NSO
FYCOMPA 4MG TAB	1	PA NSO
FYCOMPA 6MG TAB	1	PA NSO
FYCOMPA 8MG TAB	1	PA NSO
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	1	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml susp</i>	1	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	1	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 2mg odt</i>	1	QL=300 EA/30 Days
<i>clonazepam 2mg tab</i>	1	QL=300 EA/30 Days
<i>diazepam 10mg/2ml rectal gel</i>	1	QL=10 EA/30 Days
DIAZEPAM 2.5MG/0.5ML RECTAL GEL	1	QL=10 EA/30 Days
<i>diazepam 20mg/4ml rectal gel</i>	1	QL=10 EA/30 Days
LIBERVANT 10MG BUCCAL FILM	1	PA NSO QL=10 EA/30 Days
LIBERVANT 12.5MG BUCCAL FILM	1	PA NSO QL=10 EA/30 Days
LIBERVANT 15MG BUCCAL FILM	1	PA NSO QL=10 EA/30 Days
LIBERVANT 5MG BUCCAL FILM	1	PA NSO QL=10 EA/30 Days
LIBERVANT 7.5MG BUCCAL FILM	1	PA NSO QL=10 EA/30 Days
NAYZILAM 5MG/0.1ML NASAL SPRAY	1	QL=10 EA/30 Days
SYMPAZAN 10MG ORAL FILM	1	ST_NSO QL=60 EA/30 Days
SYMPAZAN 20MG ORAL FILM	1	ST_NSO QL=60 EA/30 Days
SYMPAZAN 5MG ORAL FILM	1	ST_NSO QL=60 EA/30 Days
VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 5MG (5MG/0.1ML) NASAL SPARY DOSE PACK	1	QL=10 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTICONVULSANTS - MISC.		
APTIOM 200MG TAB	1	PA NSO
APTIOM 400MG TAB	1	PA NSO
APTIOM 600MG TAB	1	PA NSO
APTIOM 800MG TAB	1	PA NSO
BRIVIACT 100MG TAB	1	PA NSO QL=60 EA/30 Days
BRIVIACT 10MG TAB	1	PA NSO QL=60 EA/30 Days
BRIVIACT 10MG/ML ORAL SOLN	1	PA NSO
BRIVIACT 25MG TAB	1	PA NSO QL=60 EA/30 Days
BRIVIACT 50MG TAB	1	PA NSO QL=60 EA/30 Days
BRIVIACT 75MG TAB	1	PA NSO QL=60 EA/30 Days
<i>carbamazepine 100mg chew tab</i>	1	
<i>carbamazepine 100mg er cap</i>	1	
<i>carbamazepine 100mg er tab</i>	1	
<i>carbamazepine 200mg er cap</i>	1	
<i>carbamazepine 200mg er tab</i>	1	
<i>carbamazepine 200mg tab</i>	1	
<i>carbamazepine 20mg/ml susp</i>	1	
<i>carbamazepine 300mg er cap</i>	1	
<i>carbamazepine 400mg er tab</i>	1	
DIACOMIT 250MG CAP	1	NDS PA NSO
DIACOMIT 250MG POWDER FOR ORAL SUSP	1	NDS PA NSO
DIACOMIT 500MG CAP	1	NDS PA NSO
DIACOMIT 500MG POWDER FOR ORAL SUSP	1	NDS PA NSO
EPIDIOLEX 100MG/ML ORAL SOLN	1	PA NSO
<i>epitol 200mg tab</i>	1	
EPRONTIA 25MG/ML ORAL SOLN	1	
FINTEPLA 2.2MG/ML ORAL SOLN	1	NDS PA NSO QL=360 ML/30 Days
<i>gabapentin 100mg cap</i>	1	QL=1080 EA/30 Days
<i>gabapentin 300mg cap</i>	1	QL=360 EA/30 Days
<i>gabapentin 400mg cap</i>	1	QL=270 EA/30 Days
<i>gabapentin 50mg/ml oral soln</i>	1	QL=2160 ML/30 Days
<i>gabapentin 600mg tab (Neurontin equiv)</i>	1	QL=180 EA/30 Days
<i>gabapentin 800mg tab</i>	1	QL=135 EA/30 Days
<i>lacosamide 100mg tab</i>	1	
<i>lacosamide 10mg/ml oral soln</i>	1	
<i>lacosamide 150mg tab</i>	1	
<i>lacosamide 200mg tab</i>	1	
<i>lacosamide 50mg tab</i>	1	
<i>lamotrigine 100mg er tab</i>	1	
<i>lamotrigine 100mg odt</i>	1	
<i>lamotrigine 100mg tab</i>	1	
<i>lamotrigine 150mg tab</i>	1	
<i>lamotrigine 200mg er tab</i>	1	
<i>lamotrigine 200mg odt</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lamotrigine 200mg tab</i>	1	
<i>lamotrigine 250mg er tab</i>	1	
<i>lamotrigine 25mg chew tab</i>	1	
<i>lamotrigine 25mg er tab</i>	1	
<i>lamotrigine 25mg odt</i>	1	
<i>lamotrigine 25mg tab</i>	1	
<i>lamotrigine 300mg er tab</i>	1	
<i>lamotrigine 50mg er tab</i>	1	
<i>lamotrigine 50mg odt</i>	1	
<i>lamotrigine 5mg chew tab</i>	1	
<i>levetiracetam 1000mg tab</i>	1	
<i>levetiracetam 100mg/ml oral soln</i>	1	
<i>levetiracetam 250mg tab</i>	1	
<i>levetiracetam 500mg er tab</i>	1	
<i>levetiracetam 500mg tab</i>	1	
<i>levetiracetam 750mg er tab</i>	1	
<i>levetiracetam 750mg tab</i>	1	
<i>oxcarbazepine 150mg tab</i>	1	
<i>oxcarbazepine 300mg tab</i>	1	
<i>oxcarbazepine 600mg tab</i>	1	
<i>oxcarbazepine 60mg/ml susp</i>	1	
<i>pregabalin 100mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 150mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 200mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 20mg/ml oral soln</i>	1	
<i>pregabalin 225mg cap</i>	1	QL=60 EA/30 Days
<i>pregabalin 25mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 300mg cap</i>	1	QL=60 EA/30 Days
<i>pregabalin 50mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 75mg cap</i>	1	QL=90 EA/30 Days
<i>primidone 250mg tab</i>	1	
<i>primidone 50mg tab</i>	1	
<i>roweepra 500mg tab</i>	1	
<i>rufinamide 200mg tab</i>	1	
<i>rufinamide 400mg tab</i>	1	
<i>rufinamide 40mg/ml susp</i>	1	
SPRITAM 1000MG TAB FOR ORAL SUSP	1	PA NSO
SPRITAM 250MG TAB FOR ORAL SUSP	1	PA NSO
SPRITAM 500MG TAB FOR ORAL SUSP	1	PA NSO
SPRITAM 750MG TAB FOR ORAL SUSP	1	PA NSO
<i>subvenite 100mg tab</i>	1	
<i>subvenite 150mg tab</i>	1	
<i>subvenite 200mg tab</i>	1	
<i>subvenite 25mg tab</i>	1	
<i>topiramate 100mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>topiramate 15mg cap</i>	1	
<i>topiramate 200mg tab</i>	1	
<i>topiramate 25mg cap</i>	1	
<i>topiramate 25mg tab</i>	1	
<i>topiramate 50mg tab</i>	1	
ZONISADE 100MG/5ML SUSP	1	PA NSO
<i>zonisamide 100mg cap</i>	1	
<i>zonisamide 25mg cap</i>	1	
<i>zonisamide 50mg cap</i>	1	
ZTALMY 50MG/ML SUSP	1	NDS PA NSO QL=1100 ML/30 Days
CARBAMATES		
<i>felbamate 120mg/ml susp</i>	1	
<i>felbamate 400mg tab</i>	1	
<i>felbamate 600mg tab</i>	1	
XCOPRI 100MG TAB	1	QL=30 EA/30 Days
XCOPRI 12.5/25MG TITRATION PACK	1	QL=28 EA/28 Days
XCOPRI 150/200MG PACK TAB	1	QL=56 EA/28 Days
XCOPRI 150/200MG TITRATION PACK	1	QL=28 EA/28 Days
XCOPRI 150MG TAB	1	QL=60 EA/30 Days
XCOPRI 200MG TAB	1	QL=60 EA/30 Days
XCOPRI 25MG TAB	1	QL=30 EA/30 Days
XCOPRI 50/100MG TITRATION PACK	1	QL=28 EA/28 Days
XCOPRI 50MG TAB	1	QL=30 EA/30 Days
XCOPRI TAB 100/150MG MAINTENANCE PACK	1	QL=56 EA/28 Days
GABA MODULATORS		
<i>tiagabine 12mg tab</i>	1	
<i>tiagabine 16mg tab</i>	1	
<i>tiagabine 2mg tab</i>	1	
<i>tiagabine 4mg tab</i>	1	
<i>vigabatrin 500mg powder for oral soln</i>	1	PA NSO
<i>vigabatrin 500mg tab</i>	1	PA NSO
<i>vigadrone 500mg powder for oral soln</i>	1	PA NSO
<i>vigadrone 500mg tab</i>	1	PA NSO
<i>vigpoder 500mg powder for oral soln</i>	1	PA NSO
HYDANTOINS		
DILANTIN 30MG ER CAP	1	
<i>phenytoin 25mg/ml susp</i>	1	
<i>phenytoin 50mg chew tab</i>	1	
<i>phenytoin sodium 100mg er cap</i>	1	
<i>phenytoin sodium 200mg er cap</i>	1	
<i>phenytoin sodium 300mg er cap</i>	1	
SUCCINIMIDES		
<i>ethosuximide 250mg cap</i>	1	
<i>ethosuximide 50mg/ml oral soln</i>	1	
<i>methsuximide 300mg cap</i>	1	

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
VALPROIC ACID		
<i>divalproex sodium 125mg dr cap</i>	1	
<i>divalproex sodium 125mg dr tab</i>	1	
<i>divalproex sodium 250mg dr tab</i>	1	
<i>divalproex sodium 250mg er tab</i>	1	
<i>divalproex sodium 500mg dr tab</i>	1	
<i>divalproex sodium 500mg er tab</i>	1	
<i>valproic acid 250mg cap</i>	1	
<i>valproic acid 50mg/ml oral soln</i>	1	
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine 15mg odt</i>	1	
<i>mirtazapine 15mg tab</i>	1	
<i>mirtazapine 30mg odt</i>	1	
<i>mirtazapine 30mg tab</i>	1	
<i>mirtazapine 45mg odt</i>	1	
<i>mirtazapine 45mg tab</i>	1	
<i>mirtazapine 7.5mg tab</i>	1	
ANTIDEPRESSANT COMBINATIONS		
AUVELITY 105-45MG ER TAB	1	ST_NSO QL=60 EA/30 Days
ANTIDEPRESSANTS - MISC.		
<i>bupropion 100mg er tab</i>	1	
<i>bupropion 100mg tab</i>	1	
<i>bupropion 150mg sr (12 hr) tab</i>	1	
<i>bupropion 150mg xl (24 hr) tab</i>	1	
<i>bupropion 200mg er tab</i>	1	
<i>bupropion 300mg er tab</i>	1	
<i>bupropion 75mg tab</i>	1	
GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID		
ZURZUVAE 20MG CAP	1	NDS PA NSO QL=28 EA/14 Days
ZURZUVAE 25MG CAP	1	NDS PA NSO QL=28 EA/14 Days
ZURZUVAE 30MG CAP	1	NDS PA NSO QL=14 EA/14 Days
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM 12MG/24HR PATCH	1	ST_NSO QL=30 EA/30 Days
EMSAM 6MG/24HR PATCH	1	ST_NSO QL=30 EA/30 Days
EMSAM 9MG/24HR PATCH	1	ST_NSO QL=30 EA/30 Days
MARPLAN 10MG TAB	1	
PHENELZINE 15MG TAB	1	
<i>tranylcypromine 10mg tab</i>	1	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram 10mg tab</i>	1	
<i>citalopram 20mg tab</i>	1	
<i>citalopram 2mg/ml oral soln</i>	1	
<i>citalopram 40mg tab</i>	1	
<i>escitalopram 10mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>escitalopram 1mg/ml oral soln</i>	1	
<i>escitalopram 20mg tab</i>	1	
<i>escitalopram 5mg tab</i>	1	
<i>fluoxetine 10mg cap</i>	1	
<i>fluoxetine 20mg cap</i>	1	
<i>fluoxetine 40mg cap</i>	1	
<i>fluoxetine 4mg/ml oral soln</i>	1	
<i>fluoxetine 60mg tab</i>	1	
<i>fluvoxamine maleate 100mg tab</i>	1	
<i>fluvoxamine maleate 25mg tab</i>	1	
<i>fluvoxamine maleate 50mg tab</i>	1	
<i>paroxetine 10mg tab</i>	1	PA NSO
<i>paroxetine 12.5mg er tab</i>	1	PA NSO
<i>paroxetine 20mg tab</i>	1	PA NSO
<i>paroxetine 25mg er tab</i>	1	PA NSO
<i>paroxetine 2mg/ml susp</i>	1	PA NSO
<i>paroxetine 30mg tab</i>	1	PA NSO
<i>paroxetine 37.5mg er tab</i>	1	PA NSO
<i>paroxetine 40mg tab</i>	1	PA NSO
<i>sertraline 100mg tab</i>	1	
<i>sertraline 20mg/ml oral soln</i>	1	
<i>sertraline 25mg tab</i>	1	
<i>sertraline 50mg tab</i>	1	
SEROTONIN MODULATORS		
NEFAZODONE 100MG TAB	1	
NEFAZODONE 150MG TAB	1	
NEFAZODONE 200MG TAB	1	
NEFAZODONE 250MG TAB	1	
NEFAZODONE 50MG TAB	1	
<i>trazodone 100mg tab</i>	1	
<i>trazodone 150mg tab</i>	1	
<i>trazodone 50mg tab</i>	1	
TRINTELLIX 10MG TAB	1	ST_NSO QL=30 EA/30 Days
TRINTELLIX 20MG TAB	1	ST_NSO QL=30 EA/30 Days
TRINTELLIX 5MG TAB	1	ST_NSO QL=30 EA/30 Days
<i>vilazodone 10mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>vilazodone 20mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>vilazodone 40mg tab</i>	1	ST_NSO QL=30 EA/30 Days
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<i>desvenlafaxine succinate 100mg er tab</i>	1	
<i>desvenlafaxine succinate 25mg er tab</i>	1	
<i>desvenlafaxine succinate 50mg er tab</i>	1	
<i>duloxetine 20mg dr cap</i>	1	
<i>duloxetine 30mg dr cap</i>	1	
<i>duloxetine 60mg dr cap</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FETZIMA 120MG ER CAP	1	ST_NSO QL=30 EA/30 Days
FETZIMA 20MG ER CAP	1	ST_NSO QL=30 EA/30 Days
FETZIMA 40MG ER CAP	1	ST_NSO QL=30 EA/30 Days
FETZIMA 80MG ER CAP	1	ST_NSO QL=30 EA/30 Days
FETZIMA PACK	1	ST_NSO QL=30 EA/30 Days
<i>venlafaxine 100mg tab</i>	1	
<i>venlafaxine 150mg er cap</i>	1	
<i>venlafaxine 25mg tab</i>	1	
<i>venlafaxine 37.5mg er cap</i>	1	
<i>venlafaxine 37.5mg tab</i>	1	
<i>venlafaxine 50mg tab</i>	1	
<i>venlafaxine 75mg er cap</i>	1	
<i>venlafaxine 75mg tab</i>	1	
TRICYCLIC AGENTS		
<i>amitriptyline 100mg tab</i>	1	PA NSO
<i>amitriptyline 10mg tab</i>	1	PA NSO
<i>amitriptyline 150mg tab</i>	1	PA NSO
<i>amitriptyline 25mg tab</i>	1	PA NSO
<i>amitriptyline 50mg tab</i>	1	PA NSO
<i>amitriptyline 75mg tab</i>	1	PA NSO
<i>amoxapine 100mg tab</i>	1	PA NSO
<i>amoxapine 150mg tab</i>	1	PA NSO
<i>amoxapine 25mg tab</i>	1	PA NSO
<i>amoxapine 50mg tab</i>	1	PA NSO
<i>clomipramine 25mg cap</i>	1	PA NSO
<i>clomipramine 50mg cap</i>	1	PA NSO
<i>clomipramine 75mg cap</i>	1	PA NSO
<i>desipramine 100mg tab</i>	1	PA NSO
<i>desipramine 10mg tab</i>	1	PA NSO
<i>desipramine 150mg tab</i>	1	PA NSO
<i>desipramine 25mg tab</i>	1	PA NSO
<i>desipramine 50mg tab</i>	1	PA NSO
<i>desipramine 75mg tab</i>	1	PA NSO
<i>doxepin 100mg cap</i>	1	PA NSO
<i>doxepin 10mg cap</i>	1	PA NSO
<i>doxepin 10mg/ml oral soln</i>	1	PA NSO
<i>doxepin 150mg cap</i>	1	PA NSO
<i>doxepin 25mg cap</i>	1	PA NSO
<i>doxepin 50mg cap</i>	1	PA NSO
<i>doxepin 75mg cap</i>	1	PA NSO
<i>imipramine 10mg tab</i>	1	PA NSO
<i>imipramine 25mg tab</i>	1	PA NSO
<i>imipramine 50mg tab</i>	1	PA NSO
<i>nortriptyline 10mg cap</i>	1	
<i>nortriptyline 25mg cap</i>	1	

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>nortriptyline 2mg/ml oral soln</i>	1	
<i>nortriptyline 50mg cap</i>	1	
<i>nortriptyline 75mg cap</i>	1	
<i>protriptyline 10mg tab</i>	1	PA NSO
<i>protriptyline 5mg tab</i>	1	PA NSO
<i>trimipramine 100mg cap</i>	1	PA NSO
<i>trimipramine 25mg cap</i>	1	PA NSO
<i>trimipramine 50mg cap</i>	1	PA NSO
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose 100mg tab</i>	1	
<i>acarbose 25mg tab</i>	1	
<i>acarbose 50mg tab</i>	1	
MIGLITOL 100MG TAB	1	
<i>miglitol 25mg tab</i>	1	
MIGLITOL 50MG TAB	1	
ANTIDIABETIC COMBINATIONS		
ALOGLIPTIN 12.5MG/METFORMIN 1000MG TAB	1	QL=60 EA/30 Days
ALOGLIPTIN 12.5MG/METFORMIN 500MG TAB	1	QL=60 EA/30 Days
ALOGLIPTIN 12.5MG/PIOGLITAZONE 30MG TAB	1	QL=30 EA/30 Days
ALOGLIPTIN 25MG/PIOGLITAZONE 15MG TAB	1	QL=30 EA/30 Days
ALOGLIPTIN 25MG/PIOGLITAZONE 30MG TAB	1	QL=30 EA/30 Days
ALOGLIPTIN 25MG/PIOGLITAZONE 45MG TAB	1	QL=30 EA/30 Days
<i>glipizide/metformin 2.5-250mg tab</i>	1	
<i>glipizide/metformin 2.5-500mg tab</i>	1	
<i>glipizide/metformin 5-500mg tab</i>	1	
JANUMET 1000-50MG TAB	1	QL=60 EA/30 Days
JANUMET 500-50MG TAB	1	QL=60 EA/30 Days
JANUMET XR 1000-100MG TAB	1	QL=30 EA/30 Days
JANUMET XR 1000-50MG TAB	1	QL=60 EA/30 Days
JANUMET XR 500-50MG TAB	1	QL=60 EA/30 Days
SYNJARDY 10-1000MG ER TAB	1	QL=30 EA/30 Days
SYNJARDY 12.5-1000MG ER TAB	1	QL=60 EA/30 Days
SYNJARDY 12.5-1000MG TAB	1	QL=60 EA/30 Days
SYNJARDY 12.5-500MG TAB	1	QL=60 EA/30 Days
SYNJARDY 25-1000MG ER TAB	1	QL=30 EA/30 Days
SYNJARDY 5-1000MG ER TAB	1	QL=60 EA/30 Days
SYNJARDY 5-1000MG TAB	1	QL=60 EA/30 Days
SYNJARDY 5-500MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 10-1000MG TAB	1	QL=30 EA/30 Days
XIGDUO XR 10-500MG TAB	1	QL=30 EA/30 Days
XIGDUO XR 2.5-1000MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 5-1000MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 5-500MG TAB	1	QL=30 EA/30 Days
BIGUANIDES		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>metformin 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	1	QL=2 EA/7 Days
<i>diazoxide 50mg/ml susp</i>	1	
GLUCAGEN 1MG INJ	1	QL=2 EA/7 Days
GLUCAGON (RDNA) 1MG INJ	1	QL=2 EA/7 Days
GVOKE 0.5MG/0.1ML AUTO-INJECTOR	1	QL=.20 ML/7 Days
GVOKE 1MG/0.2ML AUTO-INJECTOR	1	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML INJ	1	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML SYRINGE	1	QL=.40 ML/7 Days
KORLYM 300MG TAB	1	NDS PA QL=120 EA/30 Days
<i>mifepristone 300mg tab</i>	1	PA QL=120 EA/30 Days
ZEGALOGUE 0.6MG/0.6ML AUTO-INJECTOR	1	QL=1.20 ML/7 Days
ZEGALOGUE 0.6MG/0.6ML SYRINGE	1	QL=1.20 ML/7 Days
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
ALOGLIPTIN 12.5MG TAB	1	QL=30 EA/30 Days
ALOGLIPTIN 25MG TAB	1	QL=30 EA/30 Days
ALOGLIPTIN 6.25MG TAB	1	QL=30 EA/30 Days
JANUVIA 100MG TAB	1	QL=30 EA/30 Days
JANUVIA 25MG TAB	1	QL=30 EA/30 Days
JANUVIA 50MG TAB	1	QL=30 EA/30 Days
INCRETIN MIMETIC AGENTS		
BYDUREON 2MG/0.85ML AUTO-INJECTOR	1	PA QL=3.40 ML/28 Days
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
OZEMPIC 2.68MG/ML PEN INJ	1	PA QL=3 ML/28 Days
OZEMPIC 2MG/3ML PEN INJ	1	PA QL=3 ML/28 Days
OZEMPIC 4MG/3ML PEN INJ	1	PA QL=3 ML/28 Days
RYBELSUS 14MG TAB	1	PA QL=30 EA/30 Days
RYBELSUS 3MG TAB	1	PA QL=30 EA/30 Days
RYBELSUS 7MG TAB	1	PA QL=30 EA/30 Days
TRULICITY 0.75MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 1.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 3MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 4.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
VICTOZA 18MG/3ML PEN INJ	1	PA QL=9 ML/30 Days
INSULIN		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HUMALOG 100UNIT/ML CARTRIDGE	1	INS
HUMALOG 100UNIT/ML KWIKPEN	1	INS
HUMALOG 200UNIT/ML PEN INJ	1	INS
HUMALOG JUNIOR 100UNIT/ML PEN INJ	1	INS
HUMALOG MIX 25-75UNIT/ML INJ	1	INS
HUMALOG MIX 25-75UNIT/ML PEN INJ	1	INS
HUMALOG MIX 50-50UNIT/ML PEN INJ	1	INS
HUMULIN 70-30UNIT/ML INJ	1	INS
HUMULIN 70-30UNIT/ML PEN INJ	1	INS
HUMULIN N 100UNIT/ML INJ	1	INS
HUMULIN N 100UNIT/ML PEN INJ	1	INS
HUMULIN R 100UNIT/ML INJ	1	INS
HUMULIN R 500UNIT/ML INJ	1	INS PA BvD
HUMULIN R 500UNIT/ML PEN INJ	1	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	1	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	1	INS
INSULIN LISPRO 100UNIT/ML INJ	1	INS PA BvD
LANTUS 100UNIT/ML INJ	1	INS
LANTUS 100UNIT/ML PEN INJ	1	INS
LEVEMIR 100UNIT/ML INJ	1	INS
LEVEMIR 100UNIT/ML PEN INJ	1	INS
LYUMJEV 100UNIT/ML INJ	1	INS PA BvD
LYUMJEV 100UNIT/ML PEN INJ	1	INS
LYUMJEV 200UNIT/ML PEN INJ	1	INS
TOUJEO 300UNIT/ML PEN INJ	1	INS
TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	1	INS
TRESIBA 100UNIT/ML INJ	1	INS
TRESIBA 100UNIT/ML PEN INJ	1	INS
TRESIBA 200UNIT/ML PEN INJ	1	INS
INSULIN SENSITIZING AGENTS		
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<i>pioglitazone 45mg tab</i>	1	
MEGLITINIDE ANALOGUES		
<i>nateglinide 120mg tab</i>	1	
<i>nateglinide 60mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	1	
<i>repaglinide 1mg tab</i>	1	
<i>repaglinide 2mg tab</i>	1	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA 10MG TAB	1	QL=30 EA/30 Days
FARXIGA 5MG TAB	1	QL=30 EA/30 Days
JARDIANCE 10MG TAB	1	QL=30 EA/30 Days
JARDIANCE 25MG TAB	1	QL=30 EA/30 Days
SULFONYLUREAS		

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>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>	1	
<i>loperamide 2mg cap</i>	1	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
<i>deferasirox 125mg tab for oral susp</i>	1	
<i>deferasirox 180mg granules</i>	1	
<i>deferasirox 180mg tab</i>	1	
<i>deferasirox 250mg tab for oral susp</i>	1	
<i>deferasirox 360mg granules</i>	1	
<i>deferasirox 360mg tab</i>	1	
<i>deferasirox 500mg tab for oral susp</i>	1	
<i>deferasirox 90mg granules</i>	1	
<i>deferasirox 90mg tab</i>	1	
<i>deferiprone 1000mg tab</i>	1	PA
<i>deferiprone 500mg tab</i>	1	PA
OPIOID ANTAGONISTS		
KLOXXADO 8MG/0.1ML NASAL SPRAY	1	
NALOXONE 0.4MG/ML CARTRIDGE	1	
<i>naloxone 0.4mg/ml inj</i>	1	
<i>naloxone 1mg/ml syringe</i>	1	
<i>naloxone 40mg/ml nasal spray</i>	1	
<i>naltrexone 50mg tab</i>	1	
OPVEE 2.7MG/0.1ML NASAL SPRAY	1	
ZIMHI 5MG/0.5ML SYRINGE	1	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron 1mg tab</i>	1	PA BvD QL=60 EA/30 Days
<i>ondansetron 0.8mg/ml oral soln</i>	1	PA BvD
<i>ondansetron 4mg odt</i>	1	PA BvD
<i>ondansetron 4mg tab</i>	1	PA BvD
<i>ondansetron 8mg odt</i>	1	PA BvD
<i>ondansetron 8mg tab</i>	1	PA BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab</i>	1	
<i>meclizine 25mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>scopolamine 1mg/72hr patch</i>	1	
ANTIEMETICS - MISCELLANEOUS		
<i>doxylamine succinate/pyridoxine 10-10mg dr tab</i>	1	
<i>dronabinol 10mg cap</i>	1	PA QL=60 EA/30 Days
<i>dronabinol 2.5mg cap</i>	1	PA QL=60 EA/30 Days
<i>dronabinol 5mg cap</i>	1	PA QL=60 EA/30 Days
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
<i>aprepitant 125mg cap</i>	1	PA BvD QL=3 EA/2 Days
<i>aprepitant 125mg/aprepitant 80mg cap therapy pack</i>	1	PA BvD QL=6 EA/4 Days
<i>aprepitant 40mg cap</i>	1	PA BvD QL=3 EA/2 Days
<i>aprepitant 80mg cap</i>	1	PA BvD QL=6 EA/4 Days
VARUBI 90MG TAB	1	PA BvD QL=4 EA/28 Days
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
<i>casprofungin acetate 50mg inj</i>	1	NDS PA
<i>casprofungin acetate 70mg inj</i>	1	PA
<i>micafungin sodium 100mg inj</i>	1	
<i>micafungin sodium 50mg inj</i>	1	
ANTIFUNGALS		
ABELCET 5MG/ML INJ	1	PA BvD
AMPHOTERICIN B 50MG INJ	1	PA BvD
<i>flucytosine 250mg cap</i>	1	
<i>flucytosine 500mg cap</i>	1	
<i>griseofulvin 125mg tab</i>	1	
<i>griseofulvin 250mg tab</i>	1	
<i>griseofulvin 25mg/ml susp</i>	1	
<i>griseofulvin 500mg tab</i>	1	
<i>nystatin 500000unit tab</i>	1	
<i>terbinafine 250mg tab</i>	1	
IMIDAZOLE-RELATED ANTIFUNGALS		
<i>fluconazole 100mg tab</i>	1	
<i>fluconazole 10mg/ml susp</i>	1	
<i>fluconazole 150mg tab</i>	1	
<i>fluconazole 200mg tab</i>	1	
<i>fluconazole 200mg/100ml inj</i>	1	
<i>fluconazole 400mg/200ml inj</i>	1	
<i>fluconazole 40mg/ml susp</i>	1	
<i>fluconazole 50mg tab</i>	1	
<i>itraconazole 100mg cap</i>	1	
<i>ketoconazole 200mg tab</i>	1	
<i>posaconazole 100mg dr tab</i>	1	PA
<i>posaconazole 40mg/ml susp</i>	1	PA
VORICONAZOLE 200MG INJ	1	PA
<i>voriconazole 200mg tab</i>	1	PA
<i>voriconazole 40mg/ml susp</i>	1	PA

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>voriconazole 50mg tab</i>	1	PA
ANTI-HISTAMINES		
ANTI-HISTAMINES - NON-SEDATING		
<i>desloratadine 5mg tab</i>	1	
<i>levocetirizine 5mg tab</i>	1	
ANTI-HISTAMINES - PHENOTHIAZINES		
<i>promethazine 1.25mg/ml oral soln</i>	1	
<i>promethazine 12.5mg rectal supp</i>	1	
<i>promethazine 12.5mg tab</i>	1	
<i>promethazine 25mg rectal supp</i>	1	
<i>promethazine 25mg tab</i>	1	
<i>promethazine 50mg tab</i>	1	
<i>promethegan 25mg rectal supp</i>	1	
ANTIHYPERLIPIDEMICS		
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL 180MG TAB	1	PA QL=30 EA/30 Days
ANTIHYPERLIPIDEMICS - COMBINATIONS		
<i>ezetimibe 10mg/simvastatin 10mg tab</i>	1	
<i>ezetimibe 10mg/simvastatin 20mg tab</i>	1	
<i>ezetimibe 10mg/simvastatin 40mg tab</i>	1	
<i>ezetimibe 10mg/simvastatin 80mg tab</i>	1	
NEXLIZET 180-10MG TAB	1	PA QL=30 EA/30 Days
ANTIHYPERLIPIDEMICS - MISC.		
<i>icosapent ethyl 1000mg cap</i>	1	QL=120 EA/30 Days
<i>icosapent ethyl 500mg cap</i>	1	QL=120 EA/30 Days
<i>omega-3 acid ethyl esters (usp) 1000mg cap</i>	1	QL=120 EA/30 Days
BILE ACID SEQUESTRANTS		
<i>cholestyramine resin (sugar-free) 4000mg powder for oral susp</i>	1	
<i>cholestyramine resin 4000mg powder for oral susp</i>	1	
<i>colesevelam 625mg tab</i>	1	
<i>colestipol 1000mg tab</i>	1	
<i>colestipol 5000mg granules for oral susp</i>	1	
<i>prevalite 4gm powder for oral susp</i>	1	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate 134mg cap</i>	1	
<i>fenofibrate 145mg tab</i>	1	
<i>fenofibrate 160mg tab</i>	1	
<i>fenofibrate 200mg cap</i>	1	
<i>fenofibrate 48mg tab</i>	1	
<i>fenofibrate 54mg tab</i>	1	
<i>fenofibrate 67mg cap</i>	1	
<i>fenofibric acid 135mg dr cap</i>	1	
<i>fenofibric acid 45mg dr cap</i>	1	
<i>gemfibrozil 600mg tab</i>	1	QL=60 EA/30 Days

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
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>	1	QL=30 EA/30 Days
NICOTINIC ACID DERIVATIVES		
<i>niacin 1000mg er tab</i>	1	
<i>niacin 500mg er tab</i>	1	
<i>niacin 750mg er tab</i>	1	
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
PRALUENT 150MG/ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
PRALUENT 75MG/ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
REPATHA 140MG/ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
REPATHA 140MG/ML SYRINGE	1	PA QL=2 ML/28 Days
REPATHA 420MG/3.5ML CARTRIDGE	1	PA QL=3.50 ML/28 Days
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril 10mg tab</i>	1	
<i>benazepril 20mg tab</i>	1	
<i>benazepril 40mg tab</i>	1	
<i>benazepril 5mg tab</i>	1	
<i>captopril 100mg tab</i>	1	
<i>captopril 12.5mg tab</i>	1	
<i>captopril 25mg tab</i>	1	
<i>captopril 50mg tab</i>	1	

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>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	
PERINDOPRIL ERBUMINE 2MG TAB	1	
<i>perindopril erbumine 4mg tab</i>	1	
PERINDOPRIL ERBUMINE 8MG TAB	1	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<i>quinapril 40mg tab</i>	1	
<i>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	1	
<i>ramipril 10mg cap</i>	1	
<i>ramipril 2.5mg cap</i>	1	
<i>ramipril 5mg cap</i>	1	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
AGENTS FOR PHEOCHROMOCYTOMA		
<i>metyrosine 250mg cap</i>	1	NDS
<i>phenoxybenzamine 10mg cap</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil 16mg tab</i>	1	
<i>candesartan cilexetil 32mg tab</i>	1	
<i>candesartan cilexetil 4mg tab</i>	1	
<i>candesartan cilexetil 8mg tab</i>	1	
<i>irbesartan 150mg tab</i>	1	
<i>irbesartan 300mg tab</i>	1	
<i>irbesartan 75mg tab</i>	1	
<i>losartan potassium 100mg tab</i>	1	
<i>losartan potassium 25mg tab</i>	1	
<i>losartan potassium 50mg tab</i>	1	
<i>olmesartan medoxomil 20mg tab</i>	1	
<i>olmesartan medoxomil 40mg tab</i>	1	

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>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>	1	
<i>clonidine 0.2mg tab</i>	1	
<i>clonidine 0.2mg/24hr weekly patch</i>	1	
<i>clonidine 0.3mg tab</i>	1	
<i>clonidine 0.3mg/24hr weekly patch</i>	1	
<i>doxazosin 1mg tab</i>	1	
<i>doxazosin 2mg tab</i>	1	
<i>doxazosin 4mg tab</i>	1	
<i>doxazosin 8mg tab</i>	1	
<i>prazosin 1mg cap</i>	1	
<i>prazosin 2mg cap</i>	1	
<i>prazosin 5mg cap</i>	1	
<i>terazosin 10mg cap</i>	1	
<i>terazosin 1mg cap</i>	1	
<i>terazosin 2mg cap</i>	1	
<i>terazosin 5mg cap</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<i>amlodipine/benazepril 5-40mg cap</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-12.5-160mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>amlodipine/hydrochlorothiazide/valsartan 10-25-160mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-25-320mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 5-12.5-160mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 5-25-160mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	1	
<i>amlodipine/valsartan 10-160mg tab</i>	1	
<i>amlodipine/valsartan 10-320mg tab</i>	1	
<i>amlodipine/valsartan 5-160mg tab</i>	1	
<i>amlodipine/valsartan 5-320mg tab</i>	1	
<i>atenolol/chlorthalidone 100-25mg tab</i>	1	
<i>atenolol/chlorthalidone 50-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	1	
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	1	
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydrochlorothiazide/olmesartan medoxomil</i> 12.5-20mg tab	1	
<i>hydrochlorothiazide/olmesartan medoxomil</i> 12.5-40mg tab	1	
<i>hydrochlorothiazide/olmesartan medoxomil</i> 25-40mg tab	1	
<i>hydrochlorothiazide/telmisartan</i> 12.5-40mg tab	1	
<i>hydrochlorothiazide/telmisartan</i> 12.5-80mg tab	1	
<i>hydrochlorothiazide/telmisartan</i> 25-80mg tab	1	
<i>hydrochlorothiazide/valsartan</i> 12.5-160mg tab	1	
<i>hydrochlorothiazide/valsartan</i> 12.5-320mg tab	1	
<i>hydrochlorothiazide/valsartan</i> 12.5-80mg tab	1	
<i>hydrochlorothiazide/valsartan</i> 25-160mg tab	1	
<i>hydrochlorothiazide/valsartan</i> 25-320mg tab	1	
DIRECT RENIN INHIBITORS		
<i>aliskiren</i> 150mg tab	1	
<i>aliskiren</i> 300mg tab	1	
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
<i>eplerenone</i> 25mg tab	1	
<i>eplerenone</i> 50mg tab	1	
VASODILATORS		
<i>hydralazine</i> 100mg tab	1	
<i>hydralazine</i> 10mg tab	1	
<i>hydralazine</i> 25mg tab	1	
<i>hydralazine</i> 50mg tab	1	
<i>minoxidil</i> 10mg tab	1	
<i>minoxidil</i> 2.5mg tab	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
<i>metronidazole</i> 250mg tab	1	
<i>metronidazole</i> 500mg tab	1	
<i>metronidazole</i> 5mg/ml inj	1	
<i>pentamidine isethionate</i> 300mg inj	1	
<i>pentamidine isethionate</i> 50mg/ml inh soln	1	PA BvD QL=1 EA/28 Days
<i>tinidazole</i> 250mg tab	1	
<i>tinidazole</i> 500mg tab	1	
<i>trimethoprim</i> 100mg tab	1	
XIFAXAN 200MG TAB	1	QL=9 EA/3 Days
XIFAXAN 550MG TAB	1	PA QL=60 EA/30 Days
ANTI-INFECTIVE MISC. - COMBINATIONS		
<i>sulfamethoxazole/trimethoprim</i> 200-40mg/5ml susp	1	
<i>sulfamethoxazole/trimethoprim</i> 400-80mg tab	1	
<i>sulfamethoxazole/trimethoprim</i> 800-160mg tab	1	
ANTIPROTOZOAL AGENTS		
<i>atovaquone</i> 150mg/ml susp	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>nitazoxanide 500mg tab</i>	1	PA QL=6 EA/3 Days
CARBAPENEMS		
CILASTATIN/IMIPENEM 250-250MG INJ	1	
<i>cilastatin/imipenem 500-500mg inj</i>	1	
<i>ertapenem 1gm inj</i>	1	
<i>meropenem 1000mg inj</i>	1	
<i>meropenem 500mg inj</i>	1	
CYCLIC LIPOPEPTIDES		
<i>daptomycin 500mg inj</i>	1	NDS
GLYCOPEPTIDES		
DALVANCE 500MG INJ	1	NDS
<i>vancomycin 100mg/ml inj</i>	1	
<i>vancomycin 125mg cap</i>	1	ST QL=120 EA/30 Days
<i>vancomycin 1gm inj</i>	1	
<i>vancomycin 250mg cap</i>	1	ST QL=120 EA/30 Days
<i>vancomycin 500mg inj</i>	1	
<i>vancomycin 750mg inj</i>	1	
LEPROSTATICS		
<i>dapsone 100mg tab</i>	1	
<i>dapsone 25mg tab</i>	1	
LINCOSAMIDES		
<i>clindamycin 12mg/ml inj</i>	1	
<i>clindamycin 150mg cap</i>	1	
<i>clindamycin 150mg/ml (6ml) inj</i>	1	
<i>clindamycin 15mg/ml oral soln</i>	1	
<i>clindamycin 18mg/ml inj</i>	1	
<i>clindamycin 300mg cap</i>	1	
<i>clindamycin 6mg/ml inj</i>	1	
<i>clindamycin 75mg cap</i>	1	
MONOBACTAMS		
<i>aztreonam 1000mg inj</i>	1	
<i>aztreonam 2000mg inj</i>	1	
CAYSTON 75MG INH SOLN	1	NDS PA QL=84 ML/28 Days
OXAZOLIDINONES		
<i>linezolid 20mg/ml susp</i>	1	PA
<i>linezolid 2mg/ml inj</i>	1	PA
<i>linezolid 600mg tab</i>	1	
SIVEXTRO 200MG INJ	1	NDS PA QL=6 EA/6 Days
SIVEXTRO 200MG TAB	1	NDS PA QL=6 EA/6 Days
POLYMYXINS		
<i>colistin 75mg/ml inj</i>	1	
<i>polymyxin b 250000unit/ml inj</i>	1	
URINARY ANTI-INFECTIVES		
<i>methenamine hippurate 1000mg tab</i>	1	
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>nitrofurantoin macrocrystals 100mg cap</i>	1	
<i>nitrofurantoin macrocrystals 50mg cap</i>	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone/proguanil 250-100mg tab</i>	1	
<i>atovaquone/proguanil 62.5-25mg tab</i>	1	
COARTEM 20-120MG TAB	1	
ANTIMALARIALS		
<i>chloroquine phosphate 250mg tab</i>	1	
<i>chloroquine phosphate 500mg tab</i>	1	
<i>hydroxychloroquine sulfate 100mg tab</i>	1	
<i>hydroxychloroquine sulfate 200mg tab</i>	1	
<i>hydroxychloroquine sulfate 300mg tab</i>	1	
<i>hydroxychloroquine sulfate 400mg tab</i>	1	
<i>mefloquine 250mg tab</i>	1	
PRIMAQUINE PHOSPHATE 26.3MG TAB	1	
<i>quinine sulfate 324mg cap</i>	1	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE 10MG TAB	1	NDS PA
<i>pyridostigmine bromide 180mg er tab</i>	1	
<i>pyridostigmine bromide 60mg tab</i>	1	
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>ethambutol 100mg tab</i>	1	
<i>ethambutol 400mg tab</i>	1	
ISONIAZID 100MG TAB	1	
<i>isoniazid 10mg/ml oral soln</i>	1	
<i>isoniazid 300mg tab</i>	1	
PRIFTIN 150MG TAB	1	
<i>pyrazinamide 500mg tab</i>	1	
<i>rifabutin 150mg cap</i>	1	
<i>rifampin 150mg cap</i>	1	
<i>rifampin 300mg cap</i>	1	
<i>rifampin 600mg inj</i>	1	
SIRTURO 100MG TAB	1	NDS PA
SIRTURO 20MG TAB	1	NDS PA
TRECTOR 250MG TAB	1	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE 25MG TAB	1	PA BvD
CYCLOPHOSPHAMIDE 50MG TAB	1	PA BvD
GLEOSTINE 100MG CAP	1	
GLEOSTINE 10MG CAP	1	
GLEOSTINE 40MG CAP	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LEUKERAN 2MG TAB	1	
ANTIMETABOLITES		
JYLAMVO 2MG/ML ORAL SOLN	1	PA NSO
<i>mercaptopurine 50mg tab</i>	1	
<i>methotrexate 2.5mg tab</i>	1	
<i>methotrexate 25mg/ml inj</i>	1	
<i>methotrexate 50mg/2ml inj</i>	1	
ONUREG 200MG TAB	1	NDS PA NSO QL=14 EA/28 Days
ONUREG 300MG TAB	1	NDS PA NSO QL=14 EA/28 Days
PURIXAN 2000MG/100ML SUSP	1	
TABLOID 40MG TAB	1	
XATMEP 2.5MG/ML ORAL SOLN	1	PA NSO
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1MG CAP	1	NDS PA NSO QL=84 EA/28 Days
FRUZAQLA 5MG CAP	1	NDS PA NSO QL=21 EA/28 Days
INLYTA 1MG TAB	1	NDS PA NSO QL=180 EA/30 Days
INLYTA 5MG TAB	1	NDS PA NSO QL=120 EA/30 Days
LENVIMA 10MG DAILY DOSE PACK	1	NDS PA NSO QL=30 EA/30 Days
LENVIMA 12MG DAILY DOSE PACK	1	NDS PA NSO QL=90 EA/30 Days
LENVIMA 14MG DAILY DOSE PACK	1	NDS PA NSO QL=60 EA/30 Days
LENVIMA 18MG DAILY DOSE PACK	1	NDS PA NSO QL=90 EA/30 Days
LENVIMA 20MG DAILY DOSE PACK	1	NDS PA NSO QL=60 EA/30 Days
LENVIMA 24MG DAILY DOSE PACK	1	NDS PA NSO QL=90 EA/30 Days
LENVIMA 4MG DAILY DOSE PACK	1	NDS PA NSO QL=30 EA/30 Days
LENVIMA 8MG DAILY DOSE PACK	1	NDS PA NSO QL=60 EA/30 Days
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
TUKYSA 150MG TAB	1	NDS PA NSO QL=120 EA/30 Days
TUKYSA 50MG TAB	1	NDS PA NSO QL=120 EA/30 Days
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA 100MG TAB	1	NDS PA NSO QL=180 EA/30 Days
VENCLEXTA 10MG TAB	1	PA NSO QL=60 EA/30 Days
VENCLEXTA 50MG TAB	1	PA NSO QL=30 EA/30 Days
VENCLEXTA TAB STARTER PACK	1	NDS PA NSO QL=42 EA/28 Days
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>erlotinib 150mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>erlotinib 25mg tab</i>	1	PA NSO QL=90 EA/30 Days
<i>gefitinib 250mg tab</i>	1	PA NSO
GILOTRIF 20MG TAB	1	NDS PA NSO QL=30 EA/30 Days
GILOTRIF 30MG TAB	1	NDS PA NSO QL=30 EA/30 Days
GILOTRIF 40MG TAB	1	NDS PA NSO QL=30 EA/30 Days
TAGRISSE 40MG TAB	1	NDS PA NSO QL=30 EA/30 Days
TAGRISSE 80MG TAB	1	NDS PA NSO QL=30 EA/30 Days
VIZIMPRO 15MG TAB	1	NDS PA NSO QL=30 EA/30 Days
VIZIMPRO 30MG TAB	1	NDS PA NSO QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VIZIMPRO 45MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
DAURISMO 25MG TAB	1	NDS PA NSO QL=60 EA/30 Days
ERIVEDGE 150MG CAP	1	NDS PA NSO
ODOMZO 200MG CAP	1	NDS PA NSO
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	1	QL=120 EA/30 Days
AKEEGA 500-100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
AKEEGA 500-50MG TAB	1	NDS PA NSO QL=60 EA/30 Days
<i>anastrozole 1mg tab</i>	1	
<i>bicalutamide 50mg tab</i>	1	
ELIGARD 22.5MG SYRINGE	1	QL=1 EA/84 Days
ELIGARD 30MG SYRINGE	1	QL=1 EA/112 Days
ELIGARD 45MG SYRINGE	1	QL=1 EA/168 Days
ELIGARD 7.5MG SYRINGE	1	QL=1 EA/28 Days
ERLEADA 240MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ERLEADA 60MG TAB	1	NDS PA NSO QL=120 EA/30 Days
<i>exemestane 25mg tab</i>	1	
FIRMAGON 120MG/VIAL INJ	1	PA NSO
FIRMAGON 80MG INJ	1	PA NSO
<i>letrozole 2.5mg tab</i>	1	
LEUPROLIDE ACETATE 22.5MG INJ	1	QL=1 EA/84 Days
<i>leuprolide acetate 5mg/ml inj</i>	1	
LUPRON 11.25MG SYRINGE (NON-PEDIATRIC)	1	QL=1 EA/84 Days
LUPRON 22.5MG SYRINGE	1	QL=1 EA/84 Days
LUPRON 3.75MG SYRINGE	1	NDS QL=1 EA/28 Days
LUPRON 30MG SYRINGE	1	QL=1 EA/112 Days
LUPRON 45MG SYRINGE (NON-PEDIATRIC)	1	QL=1 EA/168 Days
LUPRON 7.5MG SYRINGE (NON-PEDIATRIC)	1	NDS QL=1 EA/28 Days
LYSODREN 500MG TAB	1	
<i>megestrol acetate 20mg tab</i>	1	PA NSO
<i>megestrol acetate 40mg tab</i>	1	PA NSO
<i>megestrol acetate 40mg/ml susp</i>	1	PA
<i>nilutamide 150mg tab</i>	1	
NUBEQA 300MG TAB	1	NDS PA NSO QL=120 EA/30 Days
ORGOVYX 120MG TAB	1	NDS PA NSO QL=30 EA/28 Days
ORSERDU 345MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ORSERDU 86MG TAB	1	NDS PA NSO QL=90 EA/30 Days
SOLTAMOX 10MG/5ML ORAL SOLN	1	
<i>tamoxifen 10mg tab</i>	1	
<i>tamoxifen 20mg tab</i>	1	
<i>toremifene 60mg tab</i>	1	
TRELSTAR 11.25MG INJ	1	QL=1 EA/84 Days
TRELSTAR 22.5MG INJ	1	QL=1 EA/168 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TRELSTAR 3.75MG INJ	1	NDS QL=1 EA/28 Days
XTANDI 40MG CAP	1	NDS PA NSO QL=120 EA/30 Days
XTANDI 40MG TAB	1	NDS PA NSO QL=120 EA/30 Days
XTANDI 80MG TAB	1	NDS PA NSO QL=60 EA/30 Days
ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS		
WELIREG 40MG TAB	1	NDS PA NSO QL=90 EA/30 Days
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST 1MG CAP	1	NDS PA NSO QL=21 EA/28 Days
POMALYST 2MG CAP	1	NDS PA NSO QL=21 EA/28 Days
POMALYST 3MG CAP	1	NDS PA NSO QL=21 EA/28 Days
POMALYST 4MG CAP	1	NDS PA NSO QL=21 EA/28 Days
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 200MG TAB	1	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 25MG TAB	1	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 300MG TAB	1	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO 100MG ONCE WEEKLY CARTON (8-PACK)	1	NDS PA NSO QL=8 EA/28 Days
XPOVIO 40MG ONCE WEEKLY CARTON (4-PACK)	1	NDS PA NSO QL=4 EA/28 Days
XPOVIO 40MG TWICE WEEKLY CARTON (8-PACK)	1	NDS PA NSO QL=8 EA/28 Days
XPOVIO 60MG ONCE WEEKLY CARTON (4-PACK)	1	NDS PA NSO QL=4 EA/28 Days
XPOVIO 60MG TWICE WEEKLY CARTON (24 PACK)	1	NDS PA NSO QL=24 EA/28 Days
XPOVIO 80MG ONCE WEEKLY CARTON (8-PACK)	1	NDS PA NSO QL=8 EA/28 Days
XPOVIO 80MG TWICE WEEKLY CARTON (32 PACK)	1	NDS PA NSO QL=32 EA/28 Days
ANTINEOPLASTIC COMBINATIONS		
INQOVI 5 TABLET PACK	1	NDS PA NSO QL=5 EA/28 Days
KISQALI/FEMARA 200 CO-PACK	1	NDS PA NSO QL=49 EA/28 Days
KISQALI/FEMARA 400 CO-PACK	1	NDS PA NSO QL=70 EA/28 Days
KISQALI/FEMARA 600 CO-PACK	1	NDS PA NSO QL=91 EA/28 Days
LONSURF 6.14-15MG TAB	1	NDS PA NSO
LONSURF 8.19-20MG TAB	1	NDS PA NSO
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA 150MG CAP	1	NDS PA NSO QL=240 EA/30 Days
ALUNBRIG 180MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ALUNBRIG 30MG TAB	1	NDS PA NSO QL=120 EA/30 Days
ALUNBRIG 90MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ALUNBRIG INITIATION PACK	1	NDS PA NSO QL=30 EA/30 Days
AUGTYRO 40MG CAP	1	NDS PA NSO QL=240 EA/30 Days
BALVERSA 3MG TAB	1	NDS PA NSO QL=60 EA/30 Days
BALVERSA 4MG TAB	1	NDS PA NSO QL=60 EA/30 Days
BALVERSA 5MG TAB	1	NDS PA NSO QL=30 EA/30 Days
BOSULIF 100MG CAP	1	NDS PA NSO QL=150 EA/30 Days
BOSULIF 100MG TAB	1	NDS PA NSO QL=120 EA/30 Days
BOSULIF 400MG TAB	1	NDS PA NSO QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BOSULIF 500MG TAB	1	NDS PA NSO QL=30 EA/30 Days
BOSULIF 50MG CAP	1	NDS PA NSO QL=30 EA/30 Days
BRAFTOVI 75MG CAP	1	NDS PA NSO QL=180 EA/30 Days
BRUKINSA 80MG CAP	1	NDS PA NSO QL=120 EA/30 Days
CABOMETYX 20MG TAB	1	NDS PA NSO QL=30 EA/30 Days
CABOMETYX 40MG TAB	1	NDS PA NSO QL=30 EA/30 Days
CABOMETYX 60MG TAB	1	NDS PA NSO QL=30 EA/30 Days
CALQUENCE 100MG CAP	1	NDS PA NSO QL=60 EA/30 Days
CALQUENCE 100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
CAPRELSA 100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
CAPRELSA 300MG TAB	1	NDS PA NSO QL=30 EA/30 Days
COMETRIQ CAP 100MG DAILY DOSE PACK	1	NDS PA NSO QL=56 EA/28 Days
COMETRIQ CAP 140MG DAILY DOSE PACK	1	NDS PA NSO QL=112 EA/28 Days
COMETRIQ CAP 60MG DAILY DOSE PACK	1	NDS PA NSO QL=84 EA/28 Days
COPIKTRA 15MG CAP	1	NDS PA NSO QL=60 EA/30 Days
COPIKTRA 25MG CAP	1	NDS PA NSO QL=60 EA/30 Days
COTELLIC 20MG TAB	1	NDS PA NSO QL=63 EA/28 Days
<i>everolimus 10mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>everolimus 2.5mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>everolimus 2mg tab for oral susp</i>	1	PA NSO QL=150 EA/30 Days
<i>everolimus 3mg tab for oral susp</i>	1	PA NSO QL=90 EA/30 Days
<i>everolimus 5mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>everolimus 5mg tab for oral susp</i>	1	PA NSO QL=60 EA/30 Days
<i>everolimus 7.5mg tab</i>	1	PA NSO QL=30 EA/30 Days
FOTIVDA 0.89MG CAP	1	NDS PA NSO QL=21 EA/28 Days
FOTIVDA 1.34MG CAP	1	NDS PA NSO QL=21 EA/28 Days
GAVRETO 100MG CAP	1	NDS PA NSO QL=120 EA/30 Days
IBRANCE 100MG CAP	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 100MG TAB	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 125MG CAP	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 125MG TAB	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 75MG CAP	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 75MG TAB	1	NDS PA NSO QL=21 EA/28 Days
ICLUSIG 10MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 15MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 30MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 45MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IDHIFA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IDHIFA 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
<i>imatinib 100mg tab</i>	1	QL=90 EA/30 Days
<i>imatinib 400mg tab</i>	1	QL=60 EA/30 Days
IMBRUVICA 140MG CAP	1	NDS PA NSO QL=90 EA/30 Days
IMBRUVICA 420MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IMBRUVICA 70MG CAP	1	NDS PA NSO QL=30 EA/30 Days
IMBRUVICA 70MG/ML SUSP	1	NDS 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
INREBIC 100MG CAP	1	NDS PA NSO QL=120 EA/30 Days
JAKAFI 10MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 15MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 20MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 25MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 5MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAYPIRCA 100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAYPIRCA 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
KISQALI 200MG DAILY DOSE PACK (21)	1	NDS PA NSO QL=21 EA/28 Days
KISQALI 400MG DAILY DOSE PACK (42)	1	NDS PA NSO QL=42 EA/28 Days
KISQALI 600MG DAILY DOSE PACK (63)	1	NDS PA NSO QL=63 EA/28 Days
KOSELUGO 10MG CAP	1	NDS PA NSO QL=240 EA/30 Days
KOSELUGO 25MG CAP	1	NDS PA NSO QL=120 EA/30 Days
KRAZATI 200MG TAB	1	NDS PA NSO QL=180 EA/30 Days
<i>lapatinib 250mg tab</i>	1	PA NSO
LORBRENA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
LORBRENA 25MG TAB	1	NDS PA NSO QL=90 EA/30 Days
LUMAKRAS 120MG TAB	1	NDS PA NSO QL=240 EA/30 Days
LUMAKRAS 320MG TAB	1	NDS PA NSO QL=90 EA/30 Days
LYNPARZA 100MG TAB	1	NDS PA NSO QL=120 EA/30 Days
LYNPARZA 150MG TAB	1	NDS PA NSO QL=120 EA/30 Days
LYTGOBI 4MG TAB PACK (12MG DAILY DOSE)	1	NDS PA NSO QL=84 EA/28 Days
LYTGOBI 4MG TAB PACK (16MG DAILY DOSE)	1	NDS PA NSO QL=112 EA/28 Days
LYTGOBI 4MG TAB PACK (20MG DAILY DOSE)	1	NDS PA NSO QL=140 EA/28 Days
MEKINIST 0.05MG/ML ORAL SOLN	1	NDS PA NSO
MEKINIST 0.5MG TAB	1	NDS PA NSO QL=90 EA/30 Days
MEKINIST 2MG TAB	1	NDS PA NSO QL=30 EA/30 Days
MEKTOVI 15MG TAB	1	NDS PA NSO QL=180 EA/30 Days
NERLYNX 40MG TAB	1	NDS PA NSO QL=180 EA/30 Days
NINLARO 2.3MG CAP	1	NDS PA NSO QL=3 EA/28 Days
NINLARO 3MG CAP	1	NDS PA NSO QL=3 EA/28 Days
NINLARO 4MG CAP	1	NDS PA NSO QL=3 EA/28 Days
OGSIVEO 50MG TAB	1	NDS PA NSO QL=180 EA/30 Days
OJJAARA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
OJJAARA 150MG TAB	1	NDS PA NSO QL=30 EA/30 Days
OJJAARA 200MG TAB	1	NDS PA NSO QL=30 EA/30 Days
<i>pazopanib 200mg tab</i>	1	PA NSO QL=120 EA/30 Days
PEMAZYRE 13.5MG TAB	1	NDS PA NSO QL=30 EA/30 Days
PEMAZYRE 4.5MG TAB	1	NDS PA NSO QL=30 EA/30 Days
PEMAZYRE 9MG TAB	1	NDS PA NSO QL=30 EA/30 Days
PIQRAY 200MG DAILY DOSE PACK	1	NDS PA NSO QL=30 EA/30 Days
PIQRAY 250MG DAILY DOSE PACK	1	NDS PA NSO QL=60 EA/30 Days
PIQRAY 300MG DAILY DOSE PACK	1	NDS PA NSO QL=60 EA/30 Days
QINLOCK 50MG TAB	1	NDS PA NSO QL=90 EA/30 Days
RETEVMO 40MG CAP	1	NDS PA NSO QL=120 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RETEVMO 80MG CAP	1	NDS PA NSO QL=120 EA/30 Days
REZLIDHIA 150MG CAP	1	NDS PA NSO QL=60 EA/30 Days
ROZLYTREK 100MG CAP	1	NDS PA NSO QL=150 EA/30 Days
ROZLYTREK 200MG CAP	1	NDS PA NSO QL=90 EA/30 Days
ROZLYTREK 50MG ORAL PELLETT	1	NDS PA NSO QL=336 EA/28 Days
RUBRACA 200MG TAB	1	NDS PA NSO QL=120 EA/30 Days
RUBRACA 250MG TAB	1	NDS PA NSO QL=120 EA/30 Days
RUBRACA 300MG TAB	1	NDS PA NSO QL=120 EA/30 Days
RYDAPT 25MG CAP	1	NDS PA NSO QL=224 EA/28 Days
SCSEMBLIX 20MG TAB	1	NDS PA NSO QL=60 EA/30 Days
SCSEMBLIX 40MG TAB	1	NDS PA NSO QL=300 EA/30 Days
<i>sorafenib 200mg tab</i>	1	PA NSO QL=120 EA/30 Days
SPRYCEL 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
SPRYCEL 140MG TAB	1	NDS PA NSO QL=30 EA/30 Days
SPRYCEL 20MG TAB	1	NDS PA NSO QL=90 EA/30 Days
SPRYCEL 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
SPRYCEL 70MG TAB	1	NDS PA NSO QL=30 EA/30 Days
SPRYCEL 80MG TAB	1	NDS PA NSO QL=30 EA/30 Days
STIVARGA 40MG TAB	1	NDS PA NSO QL=84 EA/28 Days
<i>sunitinib 12.5mg cap</i>	1	PA NSO
<i>sunitinib 25mg cap</i>	1	PA NSO
<i>sunitinib 37.5mg cap</i>	1	PA NSO
<i>sunitinib 50mg cap</i>	1	PA NSO
TABRECTA 150MG TAB	1	NDS PA NSO QL=120 EA/30 Days
TABRECTA 200MG TAB	1	NDS PA NSO QL=120 EA/30 Days
TAFINLAR 10MG TAB FOR ORAL SUSP	1	NDS PA NSO QL=840 EA/28 Days
TAFINLAR 50MG CAP	1	NDS PA NSO QL=120 EA/30 Days
TAFINLAR 75MG CAP	1	NDS PA NSO QL=120 EA/30 Days
TALZENNA 0.1MG CAP	1	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.25MG CAP	1	NDS PA NSO QL=90 EA/30 Days
TALZENNA 0.35MG CAP	1	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.5MG CAP	1	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.75MG CAP	1	NDS PA NSO QL=30 EA/30 Days
TALZENNA 1MG CAP	1	NDS PA NSO QL=30 EA/30 Days
TASIGNA 150MG CAP	1	NDS PA NSO QL=112 EA/28 Days
TASIGNA 200MG CAP	1	NDS PA NSO QL=112 EA/28 Days
TASIGNA 50MG CAP	1	NDS PA NSO QL=120 EA/30 Days
TAZVERIK 200MG TAB	1	NDS PA NSO QL=240 EA/30 Days
TEPMETKO 225MG TAB	1	NDS PA NSO QL=60 EA/30 Days
TIBSOVO 250MG TAB	1	NDS PA NSO QL=60 EA/30 Days
TRUQAP 160MG TAB	1	NDS PA NSO QL=64 EA/28 Days
TRUQAP 200MG TAB	1	NDS PA NSO QL=64 EA/28 Days
TURALIO 125MG CAP	1	NDS PA NSO QL=120 EA/30 Days
VANFLYTA 17.7MG TAB	1	NDS PA NSO QL=28 EA/28 Days
VANFLYTA 26.5MG TAB	1	NDS PA NSO QL=56 EA/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VERZENIO 100MG TAB	1	NDS PA NSO QL=56 EA/28 Days
VERZENIO 150MG TAB	1	NDS PA NSO QL=56 EA/28 Days
VERZENIO 200MG TAB	1	NDS PA NSO QL=56 EA/28 Days
VERZENIO 50MG TAB	1	NDS PA NSO QL=56 EA/28 Days
VITRAKVI 100MG CAP	1	NDS PA NSO QL=60 EA/30 Days
VITRAKVI 20MG/ML ORAL SOLN	1	NDS PA NSO QL=300 ML/30 Days
VITRAKVI 25MG CAP	1	NDS PA NSO QL=180 EA/30 Days
VONJO 100MG CAP	1	NDS PA NSO QL=120 EA/30 Days
XALKORI 150MG ORAL PELLETT	1	NDS PA NSO QL=180 EA/30 Days
XALKORI 200MG CAP	1	NDS PA NSO QL=60 EA/30 Days
XALKORI 20MG ORAL PELLETT	1	NDS PA NSO QL=120 EA/30 Days
XALKORI 250MG CAP	1	NDS PA NSO QL=120 EA/30 Days
XALKORI 50MG ORAL PELLETT	1	NDS PA NSO QL=120 EA/30 Days
XOSPATA 40MG TAB	1	NDS PA NSO QL=90 EA/30 Days
ZEJULA 100MG CAP	1	NDS PA NSO QL=90 EA/30 Days
ZEJULA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ZEJULA 200MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ZEJULA 300MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ZELBORAF 240MG TAB	1	NDS PA NSO QL=240 EA/30 Days
ZOLINZA 100MG CAP	1	NDS PA NSO
ZYDELIG 100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
ZYDELIG 150MG TAB	1	NDS PA NSO QL=60 EA/30 Days
ZYKADIA 150MG TAB	1	NDS PA NSO QL=90 EA/30 Days
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000UNIT/0.5ML INJ	1	NDS PA NSO
BESREMI 500MCG/ML SYRINGE	1	NDS PA NSO QL=2 ML/28 Days
<i>bexarotene 75mg cap</i>	1	PA NSO
<i>hydroxyurea 500mg cap</i>	1	
MATULANE 50MG CAP	1	NDS
<i>tretinoin 10mg cap</i>	1	
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
IWILFIN 192MG TAB	1	NDS PA NSO QL=240 EA/30 Days
<i>leucovorin 10mg tab</i>	1	
<i>leucovorin 15mg tab</i>	1	
<i>leucovorin 25mg tab</i>	1	
<i>leucovorin 5mg tab</i>	1	
MESNEX 400MG TAB	1	
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa 25mg tab</i>	1	
NOURIANZ 20MG TAB	1	PA QL=30 EA/30 Days
NOURIANZ 40MG TAB	1	PA QL=30 EA/30 Days
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate 0.5mg tab</i>	1	
<i>benztropine mesylate 1mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>benztropine mesylate 2mg tab</i>	1	
<i>trihexyphenidyl 2mg tab</i>	1	
<i>trihexyphenidyl 5mg tab</i>	1	
ANTIPARKINSON COMT INHIBITORS		
<i>entacapone 200mg tab</i>	1	
<i>tolcapone 100mg tab</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine 100mg cap</i>	1	
<i>amantadine 10mg/ml oral soln</i>	1	
<i>bromocriptine 2.5mg tab</i>	1	
<i>bromocriptine 5mg cap</i>	1	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	1	
CARBIDOPA/LEVODOPA 10-100MG ODT	1	
<i>carbidopa/levodopa 10-100mg tab</i>	1	
<i>carbidopa/levodopa 25-100mg er tab</i>	1	
CARBIDOPA/LEVODOPA 25-100MG ODT	1	
<i>carbidopa/levodopa 25-100mg tab</i>	1	
CARBIDOPA/LEVODOPA 25-250MG ODT	1	
<i>carbidopa/levodopa 25-250mg tab</i>	1	
<i>carbidopa/levodopa 50-200mg er tab</i>	1	
<i>pramipexole 0.125mg tab</i>	1	
<i>pramipexole 0.25mg tab</i>	1	
<i>pramipexole 0.5mg tab</i>	1	
<i>pramipexole 0.75mg tab</i>	1	
<i>pramipexole 1.5mg tab</i>	1	
<i>pramipexole 1mg tab</i>	1	
<i>ropinirole 0.25mg tab</i>	1	
<i>ropinirole 0.5mg tab</i>	1	
<i>ropinirole 1mg tab</i>	1	
<i>ropinirole 2mg tab</i>	1	
<i>ropinirole 3mg tab</i>	1	
<i>ropinirole 4mg tab</i>	1	
<i>ropinirole 5mg tab</i>	1	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline 0.5mg tab</i>	1	
<i>rasagiline 1mg tab</i>	1	
<i>selegiline 5mg cap</i>	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lithium carbonate 150mg cap</i>	1	
<i>lithium carbonate 300mg cap</i>	1	
<i>lithium carbonate 300mg er tab</i>	1	
<i>lithium carbonate 300mg tab</i>	1	
<i>lithium carbonate 450mg er tab</i>	1	
LITHIUM CARBONATE 600MG CAP	1	
<i>lithium citrate 60mg/ml oral soln</i>	1	
ANTIPSYCHOTICS - MISC.		
CAPLYTA 10.5MG CAP	1	PA NSO QL=30 EA/30 Days
CAPLYTA 21MG CAP	1	PA NSO QL=30 EA/30 Days
CAPLYTA 42MG CAP	1	PA NSO QL=30 EA/30 Days
<i>lurasidone 120mg tab</i>	1	ST_NSO
<i>lurasidone 20mg tab</i>	1	ST_NSO
<i>lurasidone 40mg tab</i>	1	ST_NSO
<i>lurasidone 60mg tab</i>	1	ST_NSO
<i>lurasidone 80mg tab</i>	1	ST_NSO
NUPLAZID 10MG TAB	1	PA NSO QL=30 EA/30 Days
NUPLAZID 34MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 1.5MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 3MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 4.5MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 6MG CAP	1	PA NSO QL=30 EA/30 Days
<i>ziprasidone 20mg cap</i>	1	
<i>ziprasidone 20mg inj</i>	1	PA NSO QL=60 EA/30 Days
<i>ziprasidone 40mg cap</i>	1	
<i>ziprasidone 60mg cap</i>	1	
<i>ziprasidone 80mg cap</i>	1	
BENZISOXAZOLES		
FANAPT 10MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 12MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 1MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 2MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 4MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 6MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT 8MG TAB	1	PA NSO QL=60 EA/30 Days
FANAPT TITRATION PACK	1	PA NSO QL=60 EA/30 Days
INVEGA HAFYERA 1092MG/3.5ML SYRINGE	1	PA NSO QL=3.50 ML/180 Days
INVEGA HAFYERA 1560MG/5ML SYRINGE	1	PA NSO QL=5 ML/180 Days
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	1	PA NSO QL=.75 ML/28 Days
INVEGA SUSTENNA 156MG/ML SYRINGE	1	PA NSO QL=1 ML/28 Days
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	1	PA NSO QL=1.50 ML/28 Days
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	1	PA NSO QL=.25 ML/28 Days
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	1	PA NSO QL=.50 ML/28 Days
INVEGA TRINZA 273MG/0.875ML SYRINGE	1	PA NSO QL=.88 ML/84 Days
INVEGA TRINZA 410MG/1.315ML SYRINGE	1	PA NSO QL=1.32 ML/84 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
INVEGA TRINZA 546MG/1.75ML SYRINGE	1	PA NSO QL=1.75 ML/84 Days
INVEGA TRINZA 819MG/2.625ML SYRINGE	1	PA NSO QL=2.63 ML/84 Days
<i>paliperidone 1.5mg er tab</i>	1	QL=30 EA/30 Days
<i>paliperidone 3mg er tab</i>	1	QL=30 EA/30 Days
<i>paliperidone 6mg er tab</i>	1	QL=60 EA/30 Days
<i>paliperidone 9mg er tab</i>	1	QL=30 EA/30 Days
PERSERIS 120MG SYRINGE	1	NDS PA NSO QL=1 EA/28 Days
PERSERIS 90MG SYRINGE	1	NDS PA NSO QL=1 EA/28 Days
RISPERIDONE 0.25MG ODT	1	
<i>risperidone 0.25mg tab</i>	1	
<i>risperidone 0.5mg odt</i>	1	
<i>risperidone 0.5mg tab</i>	1	
<i>risperidone 12.5mg inj</i>	1	PA NSO QL=2 EA/28 Days
<i>risperidone 1mg odt</i>	1	
<i>risperidone 1mg tab</i>	1	
<i>risperidone 1mg/ml oral soln</i>	1	
<i>risperidone 25mg inj</i>	1	PA NSO QL=2 EA/28 Days
<i>risperidone 2mg odt</i>	1	
<i>risperidone 2mg tab</i>	1	
<i>risperidone 37.5mg inj</i>	1	PA NSO QL=2 EA/28 Days
<i>risperidone 3mg odt</i>	1	
<i>risperidone 3mg tab</i>	1	
<i>risperidone 4mg odt</i>	1	
<i>risperidone 4mg tab</i>	1	
<i>risperidone 50mg inj</i>	1	PA NSO QL=2 EA/28 Days
UZEDY 100MG/0.28ML SYRINGE	1	QL=.28 ML/30 Days
UZEDY 125MG/0.35ML SYRINGE	1	NDS QL=.35 ML/30 Days
UZEDY 150MG/0.42ML SYRINGE	1	QL=.42 ML/60 Days
UZEDY 200MG/0.56ML SYRINGE	1	QL=.56 ML/60 Days
UZEDY 250MG/0.7ML SYRINGE	1	QL=.70 ML/60 Days
UZEDY 50MG/0.14ML SYRINGE	1	NDS QL=.14 ML/30 Days
UZEDY 75MG/0.21ML SYRINGE	1	NDS QL=.21 ML/30 Days
BUTYROPHENONES		
<i>haloperidol 0.5mg tab</i>	1	
<i>haloperidol 10mg tab</i>	1	
<i>haloperidol 1mg tab</i>	1	
<i>haloperidol 20mg tab</i>	1	
<i>haloperidol 2mg tab</i>	1	
<i>haloperidol 2mg/ml oral soln</i>	1	
<i>haloperidol 5mg tab</i>	1	
<i>haloperidol 5mg/ml inj</i>	1	
<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	1	
<i>haloperidol decanoate 100mg/ml inj</i>	1	
<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	1	
<i>haloperidol decanoate 50mg/ml inj</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DIBENZAPINES		
<i>asenapine 10mg sl tab</i>	1	QL=60 EA/30 Days
<i>asenapine 2.5mg sl tab</i>	1	QL=60 EA/30 Days
<i>asenapine 5mg sl tab</i>	1	QL=60 EA/30 Days
<i>clozapine 100mg odt</i>	1	
<i>clozapine 100mg tab</i>	1	
CLOZAPINE 12.5MG ODT	1	
<i>clozapine 150mg odt</i>	1	
<i>clozapine 200mg odt</i>	1	
<i>clozapine 200mg tab</i>	1	
<i>clozapine 25mg odt</i>	1	
<i>clozapine 25mg tab</i>	1	
<i>clozapine 50mg tab</i>	1	
<i>loxapine 10mg cap</i>	1	
<i>loxapine 25mg cap</i>	1	
<i>loxapine 50mg cap</i>	1	
<i>loxapine 5mg cap</i>	1	
<i>olanzapine 10mg inj</i>	1	
<i>olanzapine 10mg odt</i>	1	
<i>olanzapine 10mg tab</i>	1	
<i>olanzapine 15mg odt</i>	1	
<i>olanzapine 15mg tab</i>	1	
<i>olanzapine 2.5mg tab</i>	1	
<i>olanzapine 20mg odt</i>	1	
<i>olanzapine 20mg tab</i>	1	
<i>olanzapine 5mg odt</i>	1	
<i>olanzapine 5mg tab</i>	1	
<i>olanzapine 7.5mg tab</i>	1	
<i>quetiapine 100mg tab</i>	1	
<i>quetiapine 150mg er tab</i>	1	
<i>quetiapine 200mg er tab</i>	1	
<i>quetiapine 200mg tab</i>	1	
<i>quetiapine 25mg tab</i>	1	
<i>quetiapine 300mg er tab</i>	1	
<i>quetiapine 300mg tab</i>	1	
<i>quetiapine 400mg er tab</i>	1	
<i>quetiapine 400mg tab</i>	1	
<i>quetiapine 50mg er tab</i>	1	
<i>quetiapine 50mg tab</i>	1	
SECUADO 3.8MG/24HR PATCH	1	PA NSO QL=30 EA/30 Days
SECUADO 5.7MG/24HR PATCH	1	PA NSO QL=30 EA/30 Days
SECUADO 7.6MG/24HR PATCH	1	PA NSO QL=30 EA/30 Days
VERSACLOZ 50MG/ML SUSP	1	
ZYPREXA 210MG INJ	1	PA NSO QL=2 EA/28 Days
DIHYDROINDOLONES		

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
MOLINDONE 10MG TAB	1	
MOLINDONE 25MG TAB	1	
MOLINDONE 5MG TAB	1	
PHENOTHIAZINES		
<i>chlorpromazine 100mg tab</i>	1	
CHLORPROMAZINE 100MG/ML ORAL SOLN	1	
<i>chlorpromazine 10mg tab</i>	1	
<i>chlorpromazine 200mg tab</i>	1	
<i>chlorpromazine 25mg tab</i>	1	
CHLORPROMAZINE 30MG/ML ORAL SOLN	1	
<i>chlorpromazine 50mg tab</i>	1	
<i>compro 25mg rectal supp</i>	1	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	1	
<i>fluphenazine 10mg tab</i>	1	
<i>fluphenazine 1mg tab</i>	1	
<i>fluphenazine 2.5mg tab</i>	1	
FLUPHENAZINE 2.5MG/ML INJ	1	
<i>fluphenazine 5mg tab</i>	1	
FLUPHENAZINE 5MG/ML ORAL SOLN	1	
<i>fluphenazine decanoate 25mg/ml inj</i>	1	
<i>perphenazine 16mg tab</i>	1	
<i>perphenazine 2mg tab</i>	1	
<i>perphenazine 4mg tab</i>	1	
<i>perphenazine 8mg tab</i>	1	
<i>prochlorperazine 10mg tab</i>	1	
<i>prochlorperazine 25mg rectal supp</i>	1	
<i>prochlorperazine 5mg tab</i>	1	
<i>thioridazine 100mg tab</i>	1	
<i>thioridazine 10mg tab</i>	1	
<i>thioridazine 25mg tab</i>	1	
<i>thioridazine 50mg tab</i>	1	
<i>trifluoperazine 10mg tab</i>	1	
<i>trifluoperazine 1mg tab</i>	1	
<i>trifluoperazine 2mg tab</i>	1	
<i>trifluoperazine 5mg tab</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY 300MG INJ	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY 300MG SYRINGE	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY 400MG INJ	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY 400MG SYRINGE	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY 720MG/2.4ML SYRINGE	1	QL=2.40 ML/56 Days
ABILIFY 960MG/3.2ML SYRINGE	1	QL=3.20 ML/56 Days
<i>aripiprazole 10mg odt</i>	1	PA NSO QL=60 EA/30 Days
<i>aripiprazole 10mg tab</i>	1	
<i>aripiprazole 15mg odt</i>	1	PA NSO QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>aripiprazole 15mg tab</i>	1	
<i>aripiprazole 1mg/ml oral soln</i>	1	PA NSO
<i>aripiprazole 20mg tab</i>	1	
<i>aripiprazole 2mg tab</i>	1	
<i>aripiprazole 30mg tab</i>	1	
<i>aripiprazole 5mg tab</i>	1	
ARISTADA 1064MG/3.9ML SYRINGE	1	PA NSO QL=3.90 ML/56 Days
ARISTADA 441MG/1.6ML SYRINGE	1	NDS PA NSO QL=1.60 ML/28 Days
ARISTADA 662MG/2.4ML SYRINGE	1	NDS PA NSO QL=2.40 ML/28 Days
ARISTADA 675MG/2.4ML SYRINGE	1	PA NSO QL=2.40 ML/42 Days
ARISTADA 882MG/3.2ML SYRINGE	1	PA NSO QL=3.20 ML/28 Days
REXULTI 0.25MG TAB	1	PA NSO QL=30 EA/30 Days
REXULTI 0.5MG TAB	1	PA NSO QL=30 EA/30 Days
REXULTI 1MG TAB	1	PA NSO QL=30 EA/30 Days
REXULTI 2MG TAB	1	PA NSO QL=30 EA/30 Days
REXULTI 3MG TAB	1	PA NSO QL=30 EA/30 Days
REXULTI 4MG TAB	1	PA NSO QL=30 EA/30 Days
THIOXANTHENES		
<i>thiothixene 10mg cap</i>	1	
<i>thiothixene 1mg cap</i>	1	
<i>thiothixene 2mg cap</i>	1	
<i>thiothixene 5mg cap</i>	1	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir 20mg/ml oral soln</i>	1	
<i>abacavir 300mg tab</i>	1	
<i>abacavir/lamivudine 600-300mg tab</i>	1	
APTIVUS 250MG CAP	1	
<i>atazanavir 150mg cap</i>	1	
<i>atazanavir 200mg cap</i>	1	
<i>atazanavir 300mg cap</i>	1	
BIKTARVY 30-120-15MG TAB	1	
BIKTARVY 50-200-25MG TAB	1	
CIMDUO 300-300MG TAB	1	
COMPLERA 200-25-300MG TAB	1	
<i>darunavir 600mg tab</i>	1	
<i>darunavir 800mg tab</i>	1	
DELSTRIGO 100-300-300MG TAB	1	
DESCOVY 120-15MG TAB	1	QL=30 EA/30 Days
DESCOVY 200-25MG TAB	1	QL=30 EA/30 Days
DOVATO 50-300MG TAB	1	
EDURANT 25MG TAB	1	
EFAVIRENZ 200MG CAP	1	
EFAVIRENZ 50MG CAP	1	
<i>efavirenz 600mg 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>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	1	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	1	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	1	
<i>emtricitabine 200mg cap</i>	1	
<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	1	QL=30 EA/30 Days
EMTRIVA 10MG/ML ORAL SOLN	1	
<i>etravirine 100mg tab</i>	1	
<i>etravirine 200mg tab</i>	1	
EVOTAZ 300-150MG TAB	1	
<i>fosamprenavir 700mg tab</i>	1	
FUZEON 90MG INJ	1	
GENVOYA 150-150-200-10MG TAB	1	
INTELENCE 25MG TAB	1	
ISENTRESS 100MG CHEW TAB	1	
ISENTRESS 100MG GRANULES FOR ORAL SUSP	1	
ISENTRESS 25MG CHEW TAB	1	
ISENTRESS 400MG TAB	1	
ISENTRESS 600MG TAB	1	
JULUCA 50-25MG TAB	1	
<i>lamivudine 10mg/ml oral soln</i>	1	
<i>lamivudine 150mg tab</i>	1	
<i>lamivudine 300mg tab</i>	1	
<i>lamivudine/zidovudine 150-300mg tab</i>	1	
LEXIVA 50MG/ML SUSP	1	
<i>lopinavir/ritonavir 100-25mg tab</i>	1	
<i>lopinavir/ritonavir 200-50mg tab</i>	1	
<i>lopinavir/ritonavir 80-20mg/ml oral soln</i>	1	
<i>maraviroc 150mg tab</i>	1	
<i>maraviroc 300mg tab</i>	1	
NEVIRAPINE 10MG/ML SUSP	1	
<i>nevirapine 200mg tab</i>	1	
<i>nevirapine 400mg er tab</i>	1	
NORVIR 100MG ORAL POWDER	1	
ODEFSEY 200-25-25MG TAB	1	
PIFELTRO 100MG TAB	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PREZCOBIX 150-800MG TAB	1	
PREZISTA 100MG/ML SUSP	1	
PREZISTA 150MG TAB	1	
PREZISTA 75MG TAB	1	
REYATAZ 50MG ORAL POWDER	1	
<i>ritonavir 100mg tab</i>	1	
RUKOBIA 600MG ER TAB	1	
SELZENTRY 20MG/ML ORAL SOLN	1	
SELZENTRY 25MG TAB	1	
SELZENTRY 75MG TAB	1	
STRIBILD 150-150-200-300MG TAB	1	
SUNLENCA 300MG TAB 4-TABLET PACK	1	QL=4 EA/28 Days
SUNLENCA 300MG TAB 5-TABLET PACK	1	QL=5 EA/28 Days
SYMTUZA 150-800-200-10MG TAB	1	
<i>tenofovir disoproxil fumarate 300mg tab</i>	1	
TIVICAY 10MG TAB	1	
TIVICAY 25MG TAB	1	
TIVICAY 50MG TAB	1	
TIVICAY 5MG TAB FOR ORAL SUSP	1	
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	1	
TRIUMEQ 600-50-300MG TAB	1	
TRIZIVIR 300-150-300MG TAB	1	
TYBOST 150MG TAB	1	
VIRACEPT 250MG TAB	1	
VIRACEPT 625MG TAB	1	
VIREAD 150MG TAB	1	
VIREAD 200MG TAB	1	
VIREAD 250MG TAB	1	
VIREAD 40MG/GM ORAL POWDER	1	
<i>zidovudine 100mg cap</i>	1	
<i>zidovudine 10mg/ml oral soln</i>	1	
<i>zidovudine 300mg tab</i>	1	
ANTIVIRAL COMBINATIONS		
PAXLOVID 150MG/100MG TAB PACK (20)	1	QL=20 EA/5 Days
PAXLOVID 150MG/100MG TAB PACK (30)	1	QL=30 EA/5 Days
CMV AGENTS		
LIVTENCITY 200MG TAB	1	NDS PA QL=120 EA/30 Days
PREVYMIS 240MG TAB	1	NDS PA QL=30 EA/30 Days
PREVYMIS 480MG TAB	1	NDS PA QL=30 EA/30 Days
<i>valganciclovir 450mg tab</i>	1	
<i>valganciclovir 50mg/ml oral soln</i>	1	NDS
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	1	
<i>entecavir 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>entecavir 1mg tab</i>	1	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lamivudine 100mg tab</i>	1	
MAVYRET 100-40MG TAB	1	NDS PA QL=90 EA/30 Days
MAVYRET 50-20MG ORAL PELLETT	1	NDS PA QL=150 EA/30 Days
PEGASYS 180MCG/0.5ML SYRINGE	1	NDS
PEGASYS 180MCG/ML INJ	1	NDS
RIBAVIRIN 200MG CAP	1	
RIBAVIRIN 200MG TAB	1	
SOFOSBUVIR/VELPATASVIR 400-100MG TAB	1	NDS PA QL=30 EA/30 Days
VEMLIDY 25MG TAB	1	NDS
VOSEVI 400-100-100MG TAB	1	NDS PA QL=30 EA/30 Days
HERPES AGENTS		
<i>acyclovir 200mg cap</i>	1	
<i>acyclovir 400mg tab</i>	1	
<i>acyclovir 40mg/ml susp</i>	1	
<i>acyclovir 50mg/ml inj</i>	1	PA BvD
<i>acyclovir 800mg tab</i>	1	
<i>famciclovir 125mg tab</i>	1	
<i>famciclovir 250mg tab</i>	1	
<i>famciclovir 500mg tab</i>	1	
<i>valacyclovir 1000mg tab</i>	1	
<i>valacyclovir 500mg tab</i>	1	
INFLUENZA AGENTS		
<i>oseltamivir 30mg cap</i>	1	QL=84 EA/180 Days
<i>oseltamivir 45mg cap</i>	1	QL=42 EA/180 Days
<i>oseltamivir 6mg/ml susp</i>	1	QL=540 ML/180 Days
<i>oseltamivir 75mg cap</i>	1	QL=42 EA/180 Days
RELENZA 5MG/BLISTER INHALER	1	QL=120 EA/30 Days
RIMANTADINE 100MG TAB	1	
MISC. ANTIVIRALS		
LAGEVRIO 200MG CAP	1	QL=40 EA/5 Days
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol 12.5mg tab</i>	1	
<i>carvedilol 25mg tab</i>	1	
<i>carvedilol 3.125mg tab</i>	1	
<i>carvedilol 6.25mg tab</i>	1	
<i>labetalol 100mg tab</i>	1	
<i>labetalol 200mg tab</i>	1	
<i>labetalol 300mg tab</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	1	
<i>acebutolol 400mg cap</i>	1	
<i>atenolol 100mg tab</i>	1	
<i>atenolol 25mg tab</i>	1	
<i>atenolol 50mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>betaxolol 10mg tab</i>	1	
<i>betaxolol 20mg tab</i>	1	
<i>bisoprolol fumarate 10mg tab</i>	1	
<i>bisoprolol fumarate 5mg tab</i>	1	
<i>metoprolol succinate 100mg er tab</i>	1	
<i>metoprolol succinate 200mg er tab</i>	1	
<i>metoprolol succinate 25mg er tab</i>	1	
<i>metoprolol succinate 50mg er tab</i>	1	
<i>metoprolol tartrate 100mg tab</i>	1	
<i>metoprolol tartrate 25mg tab</i>	1	
<i>metoprolol tartrate 37.5mg tab</i>	1	
<i>metoprolol tartrate 50mg tab</i>	1	
<i>metoprolol tartrate 75mg tab</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	1	
<i>nadolol 40mg tab</i>	1	
<i>nadolol 80mg tab</i>	1	
<i>pindolol 10mg tab</i>	1	
<i>pindolol 5mg tab</i>	1	
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	1	
<i>propranolol 160mg er cap</i>	1	
<i>propranolol 20mg tab</i>	1	
<i>propranolol 40mg tab</i>	1	
<i>propranolol 4mg/ml oral soln</i>	1	
<i>propranolol 60mg er cap</i>	1	
<i>propranolol 60mg tab</i>	1	
<i>propranolol 80mg er cap</i>	1	
<i>propranolol 80mg tab</i>	1	
PROPRANOLOL 8MG/ML ORAL SOLN	1	
<i>sorine 120mg tab</i>	1	
<i>sorine 160mg tab</i>	1	
<i>sotalol 120mg tab</i>	1	
<i>sotalol 160mg tab</i>	1	
<i>sotalol 240mg tab</i>	1	
<i>sotalol 80mg tab</i>	1	
<i>sotalol af 120mg tab</i>	1	
<i>sotalol af 160mg tab</i>	1	
<i>sotalol af 80mg tab</i>	1	
<i>timolol 10mg tab</i>	1	
<i>timolol 5mg tab</i>	1	
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine 10mg tab</i>	1	
<i>amlodipine 2.5mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>amlodipine 5mg tab</i>	1	
<i>cartia 120mg er cap</i>	1	
<i>cartia 180mg er cap</i>	1	
<i>cartia 240mg er cap</i>	1	
<i>cartia 300mg er cap</i>	1	
<i>dilt 120mg er cap</i>	1	
<i>dilt 180mg er cap</i>	1	
<i>dilt 240mg er cap</i>	1	
<i>diltiazem 120mg er (12hr) cap</i>	1	
<i>diltiazem 120mg er (24hr) cap</i>	1	
<i>diltiazem 120mg tab</i>	1	
<i>diltiazem 180mg er (24hr) cap</i>	1	
<i>diltiazem 240mg er (24hr) cap</i>	1	
<i>diltiazem 300mg er (24hr) cap</i>	1	
<i>diltiazem 30mg tab</i>	1	
<i>diltiazem 360mg er (24hr) cap</i>	1	
<i>diltiazem 420mg er (24hr) cap</i>	1	
<i>diltiazem 60mg er (12hr) cap</i>	1	
<i>diltiazem 60mg tab</i>	1	
<i>diltiazem 90mg er (12hr) cap</i>	1	
<i>diltiazem 90mg tab</i>	1	
<i>felodipine 10mg er tab</i>	1	
<i>felodipine 2.5mg er tab</i>	1	
<i>felodipine 5mg er tab</i>	1	
<i>isradipine 2.5mg cap</i>	1	
<i>isradipine 5mg cap</i>	1	
<i>nicardipine 20mg cap</i>	1	
<i>nicardipine 30mg cap</i>	1	
<i>nifedipine 30mg er tab</i>	1	
<i>nifedipine 30mg osmotic er tab</i>	1	
<i>nifedipine 60mg er tab</i>	1	
<i>nifedipine 60mg osmotic er tab</i>	1	
<i>nifedipine 90mg er tab</i>	1	
<i>nifedipine 90mg osmotic er tab</i>	1	
<i>nimodipine 30mg cap</i>	1	
<i>taztia 120mg er cap</i>	1	
<i>taztia 180mg er cap</i>	1	
<i>taztia 240mg er cap</i>	1	
<i>taztia 300mg er cap</i>	1	
<i>taztia 360mg er cap</i>	1	
<i>tiadylt 120mg er cap</i>	1	
<i>tiadylt 180mg er cap</i>	1	
<i>tiadylt 240mg er cap</i>	1	
<i>tiadylt 300mg er cap</i>	1	
<i>tiadylt 360mg er cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tiadylt 420mg er cap</i>	1	
<i>verapamil 120mg er cap</i>	1	
<i>verapamil 120mg er tab</i>	1	
<i>verapamil 120mg tab</i>	1	
<i>verapamil 180mg er cap</i>	1	
<i>verapamil 180mg er tab</i>	1	
<i>verapamil 240mg er cap</i>	1	
<i>verapamil 240mg er tab</i>	1	
<i>verapamil 40mg tab</i>	1	
<i>verapamil 80mg tab</i>	1	
CARDIOTONICS		
CARDIAC GLYCOSIDES		
DIGOXIN 0.05MG/ML ORAL SOLN	1	
<i>digoxin 0.125mg tab</i>	1	
<i>digoxin 0.25mg tab</i>	1	
CARDIOVASCULAR AGENTS - MISC.		
CARDIAC MYOSIN INHIBITORS		
CAMZYOS 10MG CAP	1	NDS PA QL=30 EA/30 Days
CAMZYOS 15MG CAP	1	NDS PA QL=30 EA/30 Days
CAMZYOS 2.5MG CAP	1	NDS PA QL=30 EA/30 Days
CAMZYOS 5MG CAP	1	NDS PA QL=30 EA/30 Days
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
ENTRESTO 24-26MG TAB	1	QL=60 EA/30 Days
ENTRESTO 49-51MG TAB	1	QL=60 EA/30 Days
ENTRESTO 97-103MG TAB	1	QL=60 EA/30 Days
<i>hydralazine/isosorbide dinitrate 37.5-20mg tab</i>	1	
PROSTAGLANDIN VASODILATORS		
ORENITRAM 0.125MG ER TAB	1	PA
ORENITRAM 0.25MG ER TAB	1	NDS PA
ORENITRAM 1MG ER TAB	1	NDS PA
ORENITRAM 2.5MG ER TAB	1	NDS PA
ORENITRAM 5MG ER TAB	1	NDS PA
ORENITRAM ER TAB MONTH 1 TITRATION KIT PACK	1	NDS PA
ORENITRAM ER TAB MONTH 2 TITRATION KIT PACK	1	NDS PA
ORENITRAM ER TAB MONTH 3 TITRATION KIT PACK	1	NDS PA
TYVASO 16-32-48MCG TITRATION PACK	1	NDS PA QL=252 EA/28 Days
TYVASO 16MCG INH POWDER	1	NDS PA QL=112 EA/28 Days
TYVASO 32-48MCG MAINTENANCE PACK	1	NDS PA QL=224 EA/28 Days
TYVASO 32MCG INH POWDER	1	NDS PA QL=112 EA/28 Days
TYVASO 48MCG INH POWDER	1	NDS PA QL=112 EA/28 Days
TYVASO 64MCG INH POWDER	1	NDS PA QL=112 EA/28 Days
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ambrisentan 10mg tab</i>	1	PA QL=30 EA/30 Days
<i>ambrisentan 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>bosentan 125mg tab</i>	1	PA QL=60 EA/30 Days
<i>bosentan 62.5mg tab</i>	1	PA QL=60 EA/30 Days
OPSUMIT 10MG TAB	1	NDS PA QL=30 EA/30 Days
TRACLEER 32MG TAB FOR ORAL SUSP	1	NDS PA QL=120 EA/30 Days
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
<i>alyq 20mg tab</i>	1	PA
<i>sildenafil 20mg tab</i>	1	PA
<i>tadalafil 20mg tab</i>	1	PA
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		
ADEMPAS 0.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	1	NDS PA QL=90 EA/30 Days
SINUS NODE INHIBITORS		
CORLANOR 5MG TAB	1	PA
CORLANOR 5MG/5ML ORAL SOLN	1	PA
CORLANOR 7.5MG TAB	1	PA
TRANSTHYRETIN STABILIZERS		
VYNDAMAX 61MG CAP	1	NDS PA QL=30 EA/30 Days
VYNDAQEL 20MG CAP	1	NDS PA QL=120 EA/30 Days
VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
VERQUVO 10MG TAB	1	PA QL=30 EA/30 Days
VERQUVO 2.5MG TAB	1	PA QL=30 EA/30 Days
VERQUVO 5MG TAB	1	PA QL=30 EA/30 Days
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
CEFADROXIL 1000MG TAB	1	
<i>cefadroxil 100mg/ml susp</i>	1	
<i>cefadroxil 500mg cap</i>	1	
<i>cefadroxil 50mg/ml susp</i>	1	
<i>cefazolin 1000mg inj</i>	1	
<i>cefazolin 200mg/ml inj</i>	1	
<i>cefazolin 500mg inj</i>	1	
<i>cephalexin 250mg cap</i>	1	
<i>cephalexin 25mg/ml susp</i>	1	
<i>cephalexin 500mg cap</i>	1	
<i>cephalexin 50mg/ml susp</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
CEFACLOR 250MG CAP	1	
CEFACLOR 500MG CAP	1	
<i>cefoxitin 1gm inj</i>	1	
<i>cefoxitin 200mg/ml inj</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cefoxitin 2gm inj</i>	1	
<i>cefprozil 250mg tab</i>	1	
<i>cefprozil 25mg/ml susp</i>	1	
<i>cefprozil 500mg tab</i>	1	
<i>cefprozil 50mg/ml susp</i>	1	
<i>cefuroxime 1500mg inj</i>	1	
<i>cefuroxime 250mg tab</i>	1	
<i>cefuroxime 500mg tab</i>	1	
<i>cefuroxime 750mg inj</i>	1	
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir 25mg/ml susp</i>	1	
<i>cefdinir 300mg cap</i>	1	
<i>cefdinir 50mg/ml susp</i>	1	
<i>cefixime 20mg/ml susp</i>	1	
<i>cefixime 400mg cap</i>	1	
<i>cefixime 40mg/ml susp</i>	1	
<i>cefpodoxime 100mg tab</i>	1	
<i>cefpodoxime 10mg/ml susp</i>	1	
<i>cefpodoxime 200mg tab</i>	1	
<i>cefpodoxime 20mg/ml susp</i>	1	
<i>ceftazidime 1gm inj</i>	1	
<i>ceftazidime 200mg/ml inj</i>	1	
<i>ceftazidime 2gm inj</i>	1	
<i>ceftriaxone 10gm inj</i>	1	
<i>ceftriaxone 1gm inj</i>	1	
<i>ceftriaxone 250mg inj</i>	1	
<i>ceftriaxone 2gm inj</i>	1	
<i>ceftriaxone 500mg inj</i>	1	
<i>tazicef 1gm inj</i>	1	
<i>tazicef 2gm inj</i>	1	
TAZICEF 6GM INJ	1	
CEPHALOSPORINS - 4TH GENERATION		
<i>cefepime 1000mg inj</i>	1	
<i>cefepime 2000mg inj</i>	1	
CEPHALOSPORINS - 5TH GENERATION		
TEFLARO 400MG INJ	1	NDS
TEFLARO 600MG INJ	1	NDS
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		
<i>altavera 28 day pack</i>	1	
<i>alyacen 1/35 pack</i>	1	
<i>amethia 91 day pack</i>	1	
<i>apri 28 day pack</i>	1	
<i>aranelle 28 pack</i>	1	
<i>ashlyna 91 day pack</i>	1	

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>aubra 28 day pack</i>	1	
<i>aviane 28 pack</i>	1	
<i>balziva 28 day pack</i>	1	
<i>blisovi 21 fe 1.5/30 28 day pack</i>	1	
<i>blisovi 24 fe 1/20 28 day pack</i>	1	
<i>briellyn 28 day pack</i>	1	
<i>cryselle 28 pack</i>	1	
<i>cyred 28 day pack</i>	1	
<i>desogestrel/ethinyl estradiol/ethinyl estradiol 0.15-0.01-0.02mg 28 day pack</i>	1	
<i>desogestrel/ethinyl estradiol/inert ingredients 0.15-0.03-1mg pack</i>	1	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg pack</i>	1	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg pack</i>	1	
<i>enpresse 28 day pack</i>	1	
<i>enskyce 28 day pack</i>	1	
<i>estarylla 28 day pack</i>	1	
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	1	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.035-1-1mg pack</i>	1	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.05-1-1mg pack</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.025-75-0.8mg pack</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.035-75-0.4mg pack</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg 21 day pack</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg 28 day pack</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 1-20/1-30/1-35mg-mcg pack</i>	1	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg 28 day pack</i>	1	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg 28 daypack</i>	1	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg 91 day pack</i>	1	
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg pack</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ethinyl estradiol/inert ingredients/norgestimate/norgestimate/norgestimate 0.025-1-0.18-0.215-0.25mg</i>	1	
<i>ethinyl estradiol/inert ingredients/norgestimate/norgestimate/norgestimate 0.035-1-0.18-0.215-0.25mg</i>	1	
<i>ethinyl estradiol/levonorgestrel 91 day pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg pack</i>	1	
<i>falmina 28 day pack</i>	1	
<i>finzala 24 fe chewable 28 day pack</i>	1	
<i>hailey 24 fe 28 day pack</i>	1	
<i>iclevia 91 day pack</i>	1	
<i>introvale 91 day pack</i>	1	
<i>isibloom 28 day pack</i>	1	
<i>jasmiel 28 day pack</i>	1	
<i>juleber 28 day pack</i>	1	
<i>junel 1.5/30 21 day pack</i>	1	
<i>junel 1/20 21 day pack</i>	1	
<i>junel fe 1.5/30 28 day pack</i>	1	
<i>junel fe 1/20 28 day pack</i>	1	
<i>junel fe 24 1/20 28 day pack</i>	1	
<i>kaitlib fe 28 day pack</i>	1	
<i>kariva 28 day pack</i>	1	
<i>kelnor 1/35 28 day pack</i>	1	
<i>kelnor 1/50 28 day pack</i>	1	
<i>kurvelo pack</i>	1	
<i>larin 1.5/30 pack</i>	1	
<i>larin 1/20 pack</i>	1	
<i>larin fe 1.5/30 pack</i>	1	
<i>larin fe 1/20 pack</i>	1	
<i>layolis fe 28 pack</i>	1	
<i>leena 28 day pack</i>	1	
<i>lessina 28 day pack</i>	1	
<i>levonest 28 day pack</i>	1	
<i>levonorgestrel-ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg pack</i>	1	
<i>levora 0.15/30 28 day pack</i>	1	
<i>loestrin fe 1/20 28 day pack</i>	1	
<i>loryna 28 day pack</i>	1	
<i>low-ogestrel 28 day pack</i>	1	
<i>lutera 28 day pack</i>	1	
<i>marlissa 28 day pack</i>	1	
<i>mibelas 24 fe chewable 28 day pack</i>	1	
<i>microgestin 1.5/30 21 day pack</i>	1	
<i>microgestin 1/20 21 day pack</i>	1	

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>microgestin 24 fe 28 day pack</i>	1	
<i>microgestin fe 1.5/30 28 day pack</i>	1	
<i>microgestin fe 1/20 28 day pack</i>	1	
<i>mili 28 day pack</i>	1	
<i>necon 0.5/35 28 day pack</i>	1	
<i>nikki 28 day pack</i>	1	
<i>nortrel 0.5/35 28 day pack</i>	1	
<i>nortrel 1/35 21 day pack</i>	1	
<i>nortrel 1/35 28 day pack</i>	1	
<i>nortrel 7/7/7 28 day pack</i>	1	
<i>nylia 1/35 28 day pack</i>	1	
<i>nylia 7/7/7 28 day pack</i>	1	
<i>nymyo 28 day pack</i>	1	
<i>ocella 28 day pack</i>	1	
<i>pimtrea tab pack</i>	1	
<i>portia 28 day pack</i>	1	
<i>reclipsen 28 day pack</i>	1	
<i>rivelsa 91 day pack</i>	1	
<i>setlakin 91 day pack</i>	1	
<i>sprintec 28 day pack</i>	1	
<i>sronyx 28 day pack</i>	1	
<i>syeda 28 day pack</i>	1	
<i>tarina 24 fe 1/20 28 day pack</i>	1	
<i>tarina fe 1/20 28 day pack</i>	1	
<i>tilia fe pack</i>	1	
<i>tri-estarylla 28 day pack</i>	1	
<i>tri-legest 28 day pack</i>	1	
<i>tri-lo- estarylla 28 day pack</i>	1	
<i>tri-lo-sprintec 28 day pack</i>	1	
<i>tri-mili 28 day pack</i>	1	
<i>tri-nymyo 28 day pack</i>	1	
<i>tri-sprintec 28 day pack</i>	1	
<i>tri-vylibra 28 day pack</i>	1	
<i>tri-vylibra lo 28 day pack</i>	1	
<i>trivora 28 day pack</i>	1	
<i>turqoz 28 day pack</i>	1	
TYBLUME 28 DAY PACK	1	
VELIVET 28 DAY PACK	1	
<i>vestura 3-0.02mg pack</i>	1	
<i>vienva 28 day pack</i>	1	
<i>vyfemla 28 day pack</i>	1	
<i>vylibra 28 day pack</i>	1	
<i>wymzya fe 28 day pack</i>	1	
<i>zovia 1/35e 28 day pack</i>	1	
COMBINATION CONTRACEPTIVES - VAGINAL		

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
ANNOVERA 0.15-0.013MG/24HR VAGINAL SYSTEM	1	QL=1 EA/365 Days
<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	1	
<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	1	
<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	1	
<i>haloette 0.120-0.015mg/24hr vaginal system</i>	1	
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	1	
<i>medroxyprogesterone acetate 150mg/ml inj</i>	1	
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	1	
PROGESTIN CONTRACEPTIVES - ORAL		
<i>camila 28 day 0.35mg pack</i>	1	
<i>deblitane 0.35mg tab 28 day pack</i>	1	
<i>errin 28 day 0.35mg pack</i>	1	
<i>heather 0.35mg 28-day pack</i>	1	
<i>incassia 0.35mg 28 day pack</i>	1	
<i>lyleq 28 day 0.35mg pack</i>	1	
<i>lyza 0.35mg pack</i>	1	
<i>nora-be 28 day 0.35mg pack</i>	1	
<i>norethindrone 0.35mg pack</i>	1	
<i>sharobel 0.35mg 28 day pack</i>	1	
SLYND 4MG TAB PACK	1	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>budesonide 3mg dr cap</i>	1	
<i>budesonide 9mg er tab</i>	1	PA QL=30 EA/30 Days
DEXAMETHASONE 0.1MG/ML ORAL SOLN	1	
<i>dexamethasone 0.5mg tab</i>	1	
<i>dexamethasone 0.75mg tab</i>	1	
<i>dexamethasone 1.5mg tab</i>	1	
<i>dexamethasone 1mg tab</i>	1	
<i>dexamethasone 2mg tab</i>	1	
<i>dexamethasone 4mg tab</i>	1	
<i>dexamethasone 6mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	1	
<i>hydrocortisone 20mg tab</i>	1	
<i>hydrocortisone 5mg tab</i>	1	
<i>methylprednisolone 16mg tab</i>	1	PA BvD
<i>methylprednisolone 32mg tab</i>	1	PA BvD
<i>methylprednisolone 4mg pack</i>	1	
<i>methylprednisolone 4mg tab</i>	1	PA BvD
<i>methylprednisolone 8mg tab</i>	1	PA BvD
<i>prednisolone 1mg/ml oral soln</i>	1	PA BvD
<i>prednisolone 3mg/ml oral soln</i>	1	PA BvD
<i>prednisone 10mg tab</i>	1	PA BvD

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>prednisone 1mg tab</i>	1	PA BvD
PREDNISON 1MG/ML ORAL SOLN	1	PA BvD
<i>prednisone 2.5mg tab</i>	1	PA BvD
<i>prednisone 20mg tab</i>	1	PA BvD
<i>prednisone 50mg tab</i>	1	PA BvD
<i>prednisone 5mg tab</i>	1	PA BvD
MINERALOCORTICOIDS		
<i>fludrocortisone acetate 0.1mg tab</i>	1	
COUGH/COLD/ALLERGY		
MUCOLYTICS		
<i>acetylcysteine 100mg/ml inh soln</i>	1	PA BvD
<i>acetylcysteine 200mg/ml inh soln</i>	1	PA BvD
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>acutane 10mg cap</i>	1	
<i>acutane 20mg cap</i>	1	
<i>acutane 40mg cap</i>	1	
<i>adapalene 0.3% gel</i>	1	PA QL=45 GM/30 Days
<i>amneestem 10mg cap</i>	1	
<i>amneestem 20mg cap</i>	1	
<i>amneestem 40mg cap</i>	1	
<i>claravis 10mg cap</i>	1	
<i>claravis 20mg cap</i>	1	
<i>claravis 30mg cap</i>	1	
<i>claravis 40mg cap</i>	1	
<i>clindamycin 1% gel</i>	1	QL=75 GM/30 Days
<i>clindamycin 1% gel (twice-daily)</i>	1	QL=75 GM/30 Days
<i>clindamycin 1% lotion</i>	1	QL=60 ML/30 Days
<i>clindamycin 1% topical soln</i>	1	QL=60 ML/30 Days
<i>clindamycin/benzoyl peroxide 1-5% gel</i>	1	QL=100 GM/30 Days
<i>erythromycin 2% gel</i>	1	QL=60 GM/30 Days
<i>erythromycin 2% topical soln</i>	1	QL=60 ML/30 Days
<i>erythromycin/benzoyl peroxide 5-3% gel</i>	1	QL=46.60 GM/30 Days
<i>isotretinoin 10mg cap</i>	1	
<i>isotretinoin 20mg cap</i>	1	
<i>isotretinoin 30mg cap</i>	1	
<i>isotretinoin 40mg cap</i>	1	
<i>sulfacetamide sodium 10% lotion</i>	1	QL=118 ML/30 Days
<i>tretinoin 0.01% gel</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.025% cream</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.025% gel</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.05% cream</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.1% cream</i>	1	PA QL=45 GM/30 Days
<i>zenatane 10mg cap</i>	1	
<i>zenatane 20mg cap</i>	1	

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
zenatane 30mg cap	1	
zenatane 40mg cap	1	
ANTIBIOTICS - TOPICAL		
gentamicin 0.1% cream	1	QL=30 GM/30 Days
gentamicin 0.1% ointment	1	QL=120 GM/30 Days
mupirocin 2% ointment	1	QL=220 GM/30 Days
ANTIFUNGALS - TOPICAL		
ciclopirox 0.77% cream	1	QL=90 GM/30 Days
ciclopirox 0.77% gel	1	QL=100 GM/30 Days
ciclopirox 1% shampoo	1	QL=120 ML/30 Days
ciclopirox 8% topical soln	1	QL=13.20 ML/30 Days
clotrimazole 1% cream	1	QL=45 GM/30 Days
clotrimazole/betamethasone 1-0.05% cream	1	QL=90 GM/30 Days
CLOTTRIMAZOLE/BETAMETHASONE 1-0.05% LOTION	1	QL=60 ML/30 Days
econazole nitrate 1% cream	1	QL=85 GM/30 Days
ketoconazole 2% cream	1	QL=120 GM/30 Days
ketoconazole 2% shampoo	1	QL=240 ML/30 Days
nyamyc 100000unit/gm topical powder	1	QL=60 GM/30 Days
nystatin 100000 unit/gm ointment	1	QL=30 GM/30 Days
nystatin 100000unit/gm topical powder	1	QL=60 GM/30 Days
nystatin 100000unit/ml cream	1	QL=30 GM/30 Days
nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment	1	QL=60 GM/30 Days
nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream	1	QL=60 GM/30 Days
nystop 100000unit/gm topical powder	1	QL=60 GM/30 Days
ANTI-INFLAMMATORY AGENTS - TOPICAL		
diclofenac sodium 1% gel	1	QL=1000 GM/30 Days
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
bexarotene 1% gel	1	PA NSO QL=60 GM/30 Days
diclofenac sodium 3% gel	1	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	1	QL=10 ML/30 Days
fluorouracil 5% cream	1	QL=40 GM/30 Days
fluorouracil 5% topical solution	1	QL=10 ML/30 Days
PANRETIN 0.1% GEL	1	NDS PA NSO
VALCHLOR 0.016% GEL	1	NDS PA NSO QL=240 GM/30 Days
ANTIPSORIATICS		
acitretin 10mg cap	1	
acitretin 17.5mg cap	1	
acitretin 25mg cap	1	
calcipotriene 0.005% cream	1	PA QL=120 GM/30 Days
calcipotriene 0.005% ointment	1	PA QL=120 GM/30 Days
CALCIPOTRIENE 0.005% TOPICAL SOLN	1	PA QL=120 ML/30 Days
METHOXSALEN 10MG CAP	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SKYRIZI 150MG/ML AUTO-INJECTOR	1	PA QL=7 ML/365 Days
SKYRIZI 150MG/ML SYRINGE	1	PA QL=7 ML/365 Days
STELARA 45MG/0.5ML INJ	1	PA QL=.50 ML/28 Days
STELARA 45MG/0.5ML SYRINGE	1	PA QL=.50 ML/28 Days
STELARA 90MG/ML SYRINGE	1	PA QL=1 ML/28 Days
TALTZ 80MG/ML AUTO-INJECTOR	1	NDS PA QL=3 ML/28 Days
TALTZ 80MG/ML SYRINGE	1	NDS PA QL=3 ML/28 Days
<i>tazarotene 0.1% cream</i>	1	PA QL=60 GM/30 Days
TREMFYA 100MG/ML AUTO-INJECTOR	1	NDS PA QL=2 ML/28 Days
TREMFYA 100MG/ML SYRINGE	1	NDS PA QL=2 ML/28 Days
ZORYVE 0.3% CREAM	1	PA QL=60 GM/30 Days
ANTISEBORRHEIC PRODUCTS		
<i>selenium sulfide 2.5% shampoo</i>	1	
ANTIVIRALS - TOPICAL		
<i>acyclovir 5% ointment</i>	1	QL=30 GM/30 Days
<i>penciclovir 1% cream</i>	1	QL=5 GM/7 Days
BURN PRODUCTS		
<i>silver sulfadiazine 1% cream</i>	1	
<i>ssd 1% cream</i>	1	
SULFAMYLYON 85MG/GM CREAM	1	QL=453.60 GM/30 Days
CORTICOSTEROIDS - TOPICAL		
<i>ala-cort 1% cream</i>	1	QL=240 GM/30 Days
<i>ala-cort 2.5% cream</i>	1	QL=454 GM/30 Days
<i>alclometasone dipropionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>alclometasone dipropionate 0.05% ointment</i>	1	QL=120 GM/30 Days
<i>betamethasone 0.05% aug cream</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% aug lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% aug ointment</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% cream</i>	1	QL=90 GM/30 Days
<i>betamethasone 0.05% lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% ointment</i>	1	QL=90 GM/30 Days
<i>betamethasone 0.1% cream</i>	1	QL=180 GM/30 Days
<i>betamethasone 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>clobetasol propionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% e cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% foam</i>	1	QL=100 GM/30 Days
<i>clobetasol propionate 0.05% gel</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% lotion</i>	1	QL=118 ML/30 Days
<i>clobetasol propionate 0.05% ointment</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% shampoo</i>	1	QL=236 ML/30 Days
<i>clobetasol propionate 0.05% topical soln</i>	1	QL=100 ML/30 Days
<i>clobetasol propionate 0.05% topical spray</i>	1	QL=125 ML/30 Days
<i>clodan 0.05% shampoo</i>	1	QL=236 ML/30 Days
<i>desonide 0.05% ointment</i>	1	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>desoximetasone 0.25% cream</i>	1	QL=120 GM/30 Days
<i>desoximetasone 0.25% ointment</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% cream</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% oil</i>	1	QL=120 ML/30 Days
<i>fluocinolone acetonide 0.01% topical soln</i>	1	QL=90 ML/30 Days
<i>fluocinolone acetonide 0.025% cream</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.025% ointment</i>	1	QL=120 GM/30 Days
<i>fluocinonide 0.05% cream</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% e cream</i>	1	QL=120 GM/30 Days
FLUOCINONIDE 0.05% GEL	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% ointment</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical soln</i>	1	QL=60 ML/30 Days
<i>fluocinonide 0.1% cream</i>	1	QL=60 GM/30 Days
<i>fluticasone propionate 0.005% ointment</i>	1	QL=240 GM/30 Days
<i>fluticasone propionate 0.05% cream</i>	1	QL=240 GM/30 Days
<i>halobetasol propionate 0.05% cream</i>	1	QL=50 GM/30 Days
<i>halobetasol propionate 0.05% ointment</i>	1	QL=50 GM/30 Days
<i>hydrocortisone 1% cream</i>	1	QL=240 GM/30 Days
<i>hydrocortisone 2.5% ointment</i>	1	QL=240 GM/30 Days
HYDROCORTISONE LOTION 2.5%	1	QL=118 ML/30 Days
<i>mometasone furoate 0.1% cream</i>	1	QL=180 GM/30 Days
<i>mometasone furoate 0.1% lotion</i>	1	QL=180 ML/30 Days
<i>mometasone furoate 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>triamcinolone acetonide 0.025% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.025% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.025% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.1% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% ointment</i>	1	QL=120 GM/30 Days
<i>triderm 0.1% cream</i>	1	QL=454 GM/30 Days
<i>triderm 0.5% cream</i>	1	QL=454 GM/30 Days
ECZEMA AGENTS		
ADBRY 150MG/ML SYRINGE	1	NDS PA QL=6 ML/28 Days
CIBINQO 100MG TAB	1	NDS PA QL=30 EA/30 Days
CIBINQO 200MG TAB	1	NDS PA QL=30 EA/30 Days
CIBINQO 50MG TAB	1	NDS PA QL=30 EA/30 Days
DUPIXENT 100MG/0.67ML SYRINGE	1	NDS PA QL=1.34 ML/28 Days
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	1	NDS PA QL=4.56 ML/28 Days
DUPIXENT 200MG/1.14ML SYRINGE	1	NDS PA QL=4.56 ML/28 Days
DUPIXENT 300MG/2ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
DUPIXENT 300MG/2ML SYRINGE	1	NDS PA QL=8 ML/28 Days
EMOLLIENTS		
<i>ammonium lactate 12% cream</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>ammonium lactate 12% lotion</i>	1	
ENZYMES - TOPICAL		
SANTYL 250UNIT/GM OINTMENT	1	QL=90 GM/30 Days
HAIR GROWTH AGENTS		
LITFULO 50MG CAP	1	NDS PA QL=28 EA/28 Days
IMMUNOMODULATING AGENTS - TOPICAL		
<i>imiquimod 5% cream</i>	1	QL=24 EA/30 Days
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus 1% cream</i>	1	QL=100 GM/30 Days
<i>tacrolimus 0.03% ointment</i>	1	QL=100 GM/30 Days
<i>tacrolimus 0.1% ointment</i>	1	QL=100 GM/30 Days
KERATOLYTIC/ANTIMITOTIC AGENTS		
PODOFILOX 0.5% TOPICAL SOLN	1	QL=7 ML/30 Days
LOCAL ANESTHETICS - TOPICAL		
<i>lidocaine 4% topical soln</i>	1	QL=50 ML/30 Days
<i>lidocaine 5% ointment</i>	1	PA QL=107 GM/30 Days
<i>lidocaine 5% patch</i>	1	PA QL=90 EA/30 Days
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	1	QL=30 GM/30 Days
<i>lidocan 5% patch</i>	1	PA QL=90 EA/30 Days
ROSACEA AGENTS		
<i>azelaic acid 15% gel</i>	1	QL=50 GM/30 Days
<i>metronidazole 0.75% cream</i>	1	QL=45 GM/30 Days
<i>metronidazole 0.75% gel</i>	1	QL=45 GM/30 Days
<i>metronidazole 1% gel</i>	1	QL=60 GM/30 Days
SCABICIDES & PEDICULICIDES		
<i>malathion 0.5% lotion</i>	1	
<i>permethrin 5% cream</i>	1	
WOUND CARE PRODUCTS		
REGGRANEX 0.01% GEL	1	PA QL=30 GM/15 Days
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON 120000-24000-76000UNIT DR CAP	1	
CREON 15000-3000-9500UNIT DR CAP	1	
CREON 180000-36000-114000UNIT DR CAP	1	
CREON 30000-6000-19000UNIT DR CAP	1	
CREON 60000-12000-38000UNIT DR CAP	1	
SUCRAID 8500UNIT/ML ORAL SOLN	1	NDS PA
ZENPEP 105000-25000-79000UNIT DR CAP	1	ST
ZENPEP 14000-3000-10000UNIT DR CAP	1	ST
ZENPEP 24000-5000-17000UNIT DR CAP	1	ST
ZENPEP 252600-60000-189600UNIT DR CAP	1	ST
ZENPEP 40000-126000-168000UNIT DR CAP	1	ST
ZENPEP 42000-10000-32000UNIT DR CAP	1	ST
ZENPEP 63000-15000-47000UNIT DR CAP	1	ST
ZENPEP 84000-20000-63000UNIT DR CAP	1	ST

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide 125mg tab</i>	1	
<i>acetazolamide 250mg tab</i>	1	
<i>acetazolamide 500mg er cap</i>	1	
<i>methazolamide 25mg tab</i>	1	
<i>methazolamide 50mg tab</i>	1	
DIURETIC COMBINATIONS		
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	1	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	1	
LOOP DIURETICS		
<i>bumetanide 0.5mg tab</i>	1	
<i>bumetanide 1mg tab</i>	1	
<i>bumetanide 2mg tab</i>	1	
FUROSCIX 80MG/10ML CARTRIDGE	1	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	1	
<i>furosemide 10mg/ml oral soln</i>	1	
<i>furosemide 20mg tab</i>	1	
<i>furosemide 40mg tab</i>	1	
<i>furosemide 80mg tab</i>	1	
FUROSEMIDE 8MG/ML ORAL SOLN	1	
<i>toremide 100mg tab</i>	1	
<i>toremide 10mg tab</i>	1	
<i>toremide 20mg tab</i>	1	
<i>toremide 5mg tab</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone 25mg tab</i>	1	
<i>chlorthalidone 50mg tab</i>	1	
<i>hydrochlorothiazide 12.5mg cap</i>	1	
<i>hydrochlorothiazide 12.5mg tab</i>	1	
<i>hydrochlorothiazide 25mg tab</i>	1	
<i>hydrochlorothiazide 50mg tab</i>	1	
<i>indapamide 1.25mg tab</i>	1	
<i>indapamide 2.5mg tab</i>	1	
<i>metolazone 10mg tab</i>	1	
<i>metolazone 2.5mg 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>metolazone 5mg tab</i>	1	
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>	1	
<i>ibandronate 150mg tab</i>	1	QL=1 EA/30 Days
PROLIA 60MG/ML SYRINGE	1	ST QL=1 ML/168 Days
<i>risedronate sodium 150mg tab</i>	1	
<i>risedronate sodium 30mg tab</i>	1	
<i>risedronate sodium 35mg tab</i>	1	
<i>risedronate sodium 35mg tab (12) pack</i>	1	
<i>risedronate sodium 35mg tab (4) pack</i>	1	
<i>risedronate sodium 5mg tab</i>	1	
<i>salmon calcitonin 200unit/act nasal spray</i>	1	
TERIPARATIDE 0.02MG/ACT PEN INJ	1	NDS QL=2.48 ML/28 Days
TYMLOS 3120MCG/1.56ML PEN INJ	1	NDS PA QL=1.56 ML/30 Days
XGEVA 120MG/1.7ML INJ	1	NDS PA QL=1.70 ML/28 Days
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT 10MG INJ	1	NDS PA
SOMAVERT 15MG INJ	1	NDS PA
SOMAVERT 20MG INJ	1	NDS PA
SOMAVERT 25MG INJ	1	NDS PA
SOMAVERT 30MG INJ	1	NDS PA
GROWTH HORMONES		
NORDITROPIN 10MG/1.5ML PEN INJ	1	NDS PA
NORDITROPIN 15MG/1.5ML PEN INJ	1	NDS PA
NORDITROPIN 30MG/3ML PEN INJ	1	NDS PA
NORDITROPIN 5MG/1.5ML PEN INJ	1	NDS PA
OMNITROPE 10MG/1.5ML CARTRIDGE	1	NDS PA
OMNITROPE 5.8MG INJ	1	NDS PA
OMNITROPE 5MG/1.5ML CARTRIDGE	1	NDS PA
SKYTROFA 11MG CARTRIDGE	1	NDS PA
SKYTROFA 13.3MG CARTRIDGE	1	NDS PA
SKYTROFA 3.6MG CARTRIDGE	1	NDS PA
SKYTROFA 3MG CARTRIDGE	1	NDS PA
SKYTROFA 4.3MG CARTRIDGE	1	NDS PA
SKYTROFA 5.2MG CARTRIDGE	1	NDS PA
SKYTROFA 6.3MG CARTRIDGE	1	NDS PA
SKYTROFA 7.6MG CARTRIDGE	1	NDS PA
SKYTROFA 9.1MG CARTRIDGE	1	NDS PA
SOGROYA 10MG/1.5ML PEN INJ	1	NDS PA
SOGROYA 15MG/1.5ML PEN INJ	1	NDS PA
SOGROYA 5MG/1.5ML PEN INJ	1	NDS PA

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HORMONE RECEPTOR MODULATORS		
OSPHERA 60MG TAB	1	PA
<i>raloxifene 60mg tab</i>	1	QL=30 EA/30 Days
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX 40MG/4ML INJ	1	NDS PA
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
SYNAREL 2MG/ML NASAL INHALER	1	NDS PA
METABOLIC MODIFIERS		
<i>calcitriol 0.25mcg cap</i>	1	PA BvD
<i>calcitriol 0.5mcg cap</i>	1	PA BvD
<i>calcitriol 1mcg/ml oral soln</i>	1	PA BvD
<i>carglumic acid 200mg tab for oral susp</i>	1	PA
<i>cinacalcet 30mg tab</i>	1	PA BvD
<i>cinacalcet 60mg tab</i>	1	PA BvD
<i>cinacalcet 90mg tab</i>	1	PA BvD
GALAFOLD 123MG 28 DAY PACK	1	NDS PA QL=15 EA/30 Days
<i>javygtor 100mg powder for oral soln</i>	1	PA
<i>javygtor 100mg tab</i>	1	PA
<i>javygtor 500mg powder for oral soln</i>	1	PA
<i>levocarnitine 100mg/ml oral soln</i>	1	PA BvD
<i>levocarnitine 330mg tab</i>	1	PA BvD
<i>nitisinone 10mg cap</i>	1	NDS PA
<i>nitisinone 20mg cap</i>	1	NDS PA
<i>nitisinone 2mg cap</i>	1	NDS PA
<i>nitisinone 5mg cap</i>	1	NDS PA
ORFADIN 4MG/ML SUSP	1	NDS PA
PALYNZIQ 10MG/0.5ML SYRINGE	1	NDS PA
PALYNZIQ 2.5MG/0.5ML SYRINGE	1	NDS PA
PALYNZIQ 20MG/ML SYRINGE	1	NDS PA
<i>paricalcitol 1mcg cap</i>	1	PA BvD
<i>paricalcitol 2mcg cap</i>	1	PA BvD
<i>paricalcitol 4mcg cap</i>	1	PA BvD
PHEBURANE 483MG/GM ORAL PELLETT	1	NDS
<i>sapropterin 100mg powder for oral soln</i>	1	PA
<i>sapropterin 100mg tab</i>	1	PA
<i>sapropterin 500mg powder for oral soln</i>	1	PA
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA 10MG TAB	1	PA QL=30 EA/30 Days
KERENDIA 20MG TAB	1	PA QL=30 EA/30 Days
POSTERIOR PITUITARY HORMONES		
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	1	
<i>desmopressin acetate 0.1mg tab</i>	1	
<i>desmopressin acetate 0.2mg tab</i>	1	
PROLACTIN INHIBITORS		
<i>cabergoline 0.5mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SOMATOSTATIC AGENTS		
<i>octreotide 0.05mg/ml inj</i>	1	PA
<i>octreotide 0.1mg/ml inj</i>	1	PA
<i>octreotide 0.2mg/ml inj</i>	1	PA
<i>octreotide 0.5mg/ml inj</i>	1	PA
<i>octreotide 1mg/ml inj</i>	1	PA
SIGNIFOR 0.3MG/ML INJ	1	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.6MG/ML INJ	1	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.9MG/ML INJ	1	NDS PA QL=60 ML/30 Days
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>estradiol/norethindrone acetate 0.5-0.1mg pack</i>	1	
<i>estradiol/norethindrone acetate 1-0.5mg pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg pack</i>	1	
<i>fyavolv 0.0025-0.5mg tab</i>	1	
<i>fyavolv 0.005-1mg tab</i>	1	
<i>jinteli 0.005-1mg tab</i>	1	
<i>mimvey pack</i>	1	
PREMPHASE 28 DAY PACK	1	
PREMPRO 0.3/1.5MG 28 DAY PACK	1	
PREMPRO 0.45/1.5MG 28 DAY PACK	1	
PREMPRO 0.625/2.5MG 28 DAY PACK	1	
PREMPRO 0.625/5MG 28 DAY PACK	1	
ESTROGENS		
<i>dotti 0.025mg/24hr patch</i>	1	
<i>dotti 0.0375mg/24hr patch</i>	1	
<i>dotti 0.05mg/24hr patch</i>	1	
<i>dotti 0.075mg/24hr patch</i>	1	
<i>dotti 0.1mg/24hr patch</i>	1	
<i>estradiol 0.00104mg/hr twice weekly patch</i>	1	
<i>estradiol 0.00104mg/hr weekly patch</i>	1	
<i>estradiol 0.00156mg/hr twice weekly patch</i>	1	
<i>estradiol 0.00156mg/hr weekly patch</i>	1	
<i>estradiol 0.00208mg/hr twice weekly patch</i>	1	
<i>estradiol 0.00208mg/hr weekly patch</i>	1	
<i>estradiol 0.0025mg/hr weekly patch</i>	1	
<i>estradiol 0.00312mg/hr weekly patch</i>	1	
<i>estradiol 0.00313mg/hr twice weekly patch</i>	1	
<i>estradiol 0.00417mg/hr twice weekly patch</i>	1	
<i>estradiol 0.00417mg/hr weekly patch</i>	1	
<i>estradiol 0.5mg tab</i>	1	
<i>estradiol 1mg 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>estradiol 2mg tab</i>	1	
<i>estradiol valerate 10mg/ml inj</i>	1	
<i>estradiol valerate 20mg/ml inj</i>	1	
<i>estradiol valerate 40mg/ml inj</i>	1	
<i>lyllana 0.025mg/24hr patch</i>	1	
<i>lyllana 0.0375mg/24hr patch</i>	1	
<i>lyllana 0.05mg/24hr patch</i>	1	
<i>lyllana 0.075mg/24hr patch</i>	1	
<i>lyllana 0.1mg/24hr patch</i>	1	
PREMARIN 0.3MG TAB	1	
PREMARIN 0.45MG TAB	1	
PREMARIN 0.625MG TAB	1	
PREMARIN 0.9MG TAB	1	
PREMARIN 1.25MG TAB	1	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
BAXDELA 450MG TAB	1	PA QL=60 EA/30 Days
<i>ciprofloxacin 250mg tab</i>	1	
<i>ciprofloxacin 2mg/ml inj</i>	1	
<i>ciprofloxacin 500mg tab</i>	1	
<i>ciprofloxacin 750mg tab</i>	1	
<i>levofloxacin 250mg tab</i>	1	
<i>levofloxacin 500mg tab</i>	1	
<i>levofloxacin 500mg/100ml inj</i>	1	
<i>levofloxacin 750mg tab</i>	1	
<i>levofloxacin 750mg/150ml inj</i>	1	
<i>levofloxacin oral soln 25mg/ml</i>	1	
MOXIFLOXACIN 1.6MG/ML INJ	1	
<i>moxifloxacin 400mg tab</i>	1	
<i>ofloxacin 400mg tab</i>	1	
GASTROINTESTINAL AGENTS - MISC.		
AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)		
TRULANCE 3MG TAB	1	
FARNESOID X RECEPTOR (FXR) AGONISTS		
OCALIVA 10MG TAB	1	NDS PA QL=30 EA/30 Days
OCALIVA 5MG TAB	1	NDS PA QL=30 EA/30 Days
GALLSTONE SOLUBILIZING AGENTS		
RELTONE 200MG CAP	1	PA
RELTONE 400MG CAP	1	PA
<i>ursodiol 250mg tab</i>	1	
<i>ursodiol 300mg cap</i>	1	
<i>ursodiol 500mg tab</i>	1	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium 20mg/ml oral soln</i>	1	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lubiprostone 24mcg cap</i>	1	QL=60 EA/30 Days
<i>lubiprostone 8mcg cap</i>	1	QL=60 EA/30 Days
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide 10mg tab</i>	1	
<i>metoclopramide 1mg/ml oral soln</i>	1	
<i>metoclopramide 5mg tab</i>	1	
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium 750mg cap</i>	1	
CIMZIA 200MG INJ	1	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE	1	NDS PA QL=2 EA/28 Days
<i>mesalamine 1000mg rectal supp</i>	1	
<i>mesalamine 375mg er cap</i>	1	
<i>mesalamine 66.7mg/ml enema</i>	1	
SKYRIZI 180MG/1.2ML CARTRIDGE	1	PA QL=1.20 ML/56 Days
SKYRIZI 360MG/2.4ML CARTRIDGE	1	PA QL=2.40 ML/56 Days
<i>sulfasalazine 500mg dr tab</i>	1	
<i>sulfasalazine 500mg tab</i>	1	
INTESTINAL ACIDIFIERS		
<i>enulose 10gm/15ml oral soln</i>	1	
<i>generlac 10gm/15ml oral soln</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>alosetron 0.5mg tab</i>	1	
<i>alosetron 1mg tab</i>	1	
LINZESS 145MCG CAP	1	PA QL=30 EA/30 Days
LINZESS 290MCG CAP	1	PA QL=30 EA/30 Days
LINZESS 72MCG CAP	1	PA QL=30 EA/30 Days
LIVE FECAL MICROBIOTA		
VOWST 30000000UNIT CAP	1	PA QL=12 EA/365 Days
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK 12.5MG TAB	1	PA
MOVANTIK 25MG TAB	1	PA
RELISTOR 12MG/0.6ML INJ	1	PA
RELISTOR 12MG/0.6ML SYRINGE	1	PA
RELISTOR 8MG/0.4ML SYRINGE	1	PA
SYMPROIC 0.2MG TAB	1	PA
PHOSPHATE BINDER AGENTS		
<i>calcium acetate 667mg cap</i>	1	
FOSRENOL 1000MG ORAL POWDER	1	
FOSRENOL 750MG ORAL POWDER	1	
<i>lanthanum carbonate 1000mg chew tab</i>	1	
<i>lanthanum carbonate 500mg chew tab</i>	1	
<i>lanthanum carbonate 750mg chew tab</i>	1	
<i>sevelamer carbonate 2400mg powder for oral susp</i>	1	
<i>sevelamer carbonate 800mg powder for oral susp</i>	1	
<i>sevelamer carbonate 800mg tab</i>	1	

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
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX 5MG INJ	1	NDS PA
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO 250MG	1	NDS PA QL=84 EA/28 Days
GENITOURINARY AGENTS - MISCELLANEOUS		
ALKALINIZERS		
<i>potassium citrate 10meq er tab</i>	1	
<i>potassium citrate 15meq er tab</i>	1	
<i>potassium citrate 5meq er tab</i>	1	
CYSTINOSIS AGENTS		
CYSTAGON 150MG CAP	1	
CYSTAGON 50MG CAP	1	
GENITOURINARY IRRIGANTS		
<i>sodium chloride 0.9% irrigation soln</i>	1	
IGA NEPHROPATHY (IGAN) AGENTS		
FILSPARI 200MG TAB	1	NDS PA QL=30 EA/30 Days
FILSPARI 400MG TAB	1	NDS PA QL=30 EA/30 Days
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON 100MG CAP	1	
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	
<i>dutasteride 0.5mg cap</i>	1	
<i>finasteride 5mg tab</i>	1	
<i>tamsulosin 0.4mg cap</i>	1	
URINARY STONE AGENTS		
LITHOSTAT 250MG TAB	1	
<i>tiopronin 100mg tab</i>	1	
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine/probenecid 0.5-500mg tab</i>	1	
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	1	
<i>allopurinol 300mg tab</i>	1	
<i>colchicine 0.6mg tab</i>	1	
<i>febuxostat 40mg tab</i>	1	ST
<i>febuxostat 80mg tab</i>	1	ST
URICOSURICS		
<i>probenecid 500mg tab</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
BRADYKININ B2 RECEPTOR ANTAGONISTS		
<i>icatibant 10mg/ml syringe</i>	1	PA
<i>sajazir 30mg/3ml syringe</i>	1	PA
COMPLEMENT INHIBITORS		
BERINERT 500UNIT INJ	1	NDS PA
CINRYZE 500UNIT INJ	1	NDS PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HAEGARDA 2000UNIT INJ	1	NDS PA
HAEGARDA 3000UNIT INJ	1	NDS PA
RUCONEST 2100UNIT INJ	1	NDS PA
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline 400mg er tab</i>	1	
PLASMA KALLIKREIN INHIBITORS		
ORLADEYO 110MG CAP	1	NDS PA QL=30 EA/30 Days
ORLADEYO 150MG CAP	1	NDS PA QL=30 EA/30 Days
TAKHZYRO 300MG/2ML INJ	1	NDS PA QL=4 ML/28 Days
TAKHZYRO 300MG/2ML SYRINGE	1	NDS PA QL=4 ML/28 Days
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide 0.5mg cap</i>	1	
<i>anagrelide 1mg cap</i>	1	
<i>aspirin/dipyridamole 25-200mg er cap</i>	1	
BRILINTA 60MG TAB	1	
BRILINTA 90MG TAB	1	
CABLIVI 11MG INJ	1	NDS PA QL=30 EA/30 Days
<i>cilostazol 100mg tab</i>	1	
<i>cilostazol 50mg tab</i>	1	
<i>clopidogrel 75mg tab</i>	1	
<i>prasugrel 10mg tab</i>	1	
<i>prasugrel 5mg tab</i>	1	
PYRUVATE KINASE ACTIVATORS		
PYRUKYND 20MG TAB (4-WEEK PACK)	1	NDS PA QL=56 EA/28 Days
PYRUKYND 20MG/50MG TAB TAPER PACK	1	NDS PA QL=14 EA/14 Days
PYRUKYND 50MG TAB (4-WEEK PACK)	1	NDS PA QL=56 EA/28 Days
PYRUKYND 5MG TAB (4-WEEK PACK)	1	NDS PA QL=56 EA/28 Days
PYRUKYND 5MG TAB TAPER PACK	1	NDS PA QL=7 EA/7 Days
PYRUKYND 5MG/20MG TAB TAPER PACK	1	NDS PA QL=14 EA/14 Days
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA 84MG CAP	1	NDS PA QL=60 EA/30 Days
<i>miglustat 100mg cap</i>	1	PA
<i>yargesa 100mg cap</i>	1	PA
AGENTS FOR SICKLE CELL DISEASE		
DROXIA 200MG CAP	1	
DROXIA 300MG CAP	1	
DROXIA 400MG CAP	1	
ENDARI 5GM POWDER FOR ORAL SOLN	1	NDS PA QL=180 EA/30 Days
OXBRYTA 300MG TAB	1	NDS PA QL=90 EA/30 Days
OXBRYTA 300MG TAB FOR ORAL SUSP	1	NDS PA QL=150 EA/30 Days
OXBRYTA 500MG TAB	1	NDS PA QL=150 EA/30 Days
HEMATOPOIETIC GROWTH FACTORS		
DOPTELET 20MG TAB	1	NDS PA QL=60 EA/30 Days
DOPTELET TAB 40MG DAILY DOSE PACK	1	NDS PA QL=10 EA/5 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DOPTELET TAB 60MG DAILY DOSE PACK	1	NDS PA QL=15 EA/5 Days
NIVESTYM 300MCG/0.5ML SYRINGE	1	NDS
NIVESTYM 300MCG/ML INJ	1	NDS
NIVESTYM 480MCG/0.8ML SYRINGE	1	NDS
NIVESTYM 480MCG/1.6ML INJ	1	NDS
NYVEPRIA 6MG/0.6ML SYRINGE	1	NDS
PROMACTA 12.5MG POWDER FOR ORAL SUSP	1	NDS PA
PROMACTA 12.5MG TAB	1	NDS PA QL=30 EA/30 Days
PROMACTA 25MG POWDER FOR ORAL SUSP	1	NDS PA
PROMACTA 25MG TAB	1	NDS PA QL=30 EA/30 Days
PROMACTA 50MG TAB	1	NDS PA QL=60 EA/30 Days
PROMACTA 75MG TAB	1	NDS PA QL=60 EA/30 Days
RETACRIT 10000UNIT/ML INJ	1	PA
RETACRIT 20000UNIT/2ML INJ	1	PA
RETACRIT 20000UNIT/ML INJ	1	PA
RETACRIT 2000UNIT/ML INJ	1	PA
RETACRIT 3000UNIT/ML INJ	1	PA
RETACRIT 40000UNIT/ML INJ	1	PA
RETACRIT 4000UNIT/ML INJ	1	PA
ZARXIO 300MCG/0.5ML SYRINGE	1	NDS
ZARXIO 480MCG/0.8ML SYRINGE	1	NDS
ZIEXTENZO 6MG/0.6ML SYRINGE	1	NDS
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>tranexamic acid 650mg tab</i>	1	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
<i>phenobarbital 100mg tab</i>	1	
<i>phenobarbital 15mg tab</i>	1	
<i>phenobarbital 16.2mg tab</i>	1	
<i>phenobarbital 30mg tab</i>	1	
<i>phenobarbital 32.4mg tab</i>	1	
<i>phenobarbital 4mg/ml oral soln</i>	1	
<i>phenobarbital 60mg tab</i>	1	
<i>phenobarbital 64.8mg tab</i>	1	
<i>phenobarbital 97.2mg tab</i>	1	
NON-BARBITURATE HYPNOTICS		
<i>eszopiclone 1mg tab</i>	1	PA QL=30 EA/30 Days
<i>eszopiclone 2mg tab</i>	1	PA QL=30 EA/30 Days
<i>eszopiclone 3mg tab</i>	1	PA QL=30 EA/30 Days
<i>temazepam 15mg cap</i>	1	QL=30 EA/30 Days
<i>temazepam 30mg cap</i>	1	QL=30 EA/30 Days
<i>triazolam 0.125mg tab</i>	1	QL=30 EA/30 Days
<i>triazolam 0.25mg tab</i>	1	QL=60 EA/30 Days
<i>zaleplon 10mg cap</i>	1	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>zaleplon 5mg cap</i>	1	QL=30 EA/30 Days
<i>zolpidem tartrate 10mg tab</i>	1	PA QL=30 EA/30 Days
<i>zolpidem tartrate 12.5mg er tab</i>	1	PA QL=30 EA/30 Days
<i>zolpidem tartrate 5mg tab</i>	1	PA QL=60 EA/30 Days
<i>zolpidem tartrate 6.25mg er tab</i>	1	PA QL=30 EA/30 Days
SELECTIVE MELATONIN RECEPTOR AGONISTS		
<i>ramelteon 8mg tab</i>	1	QL=30 EA/30 Days
<i>tasimelteon 20mg cap</i>	1	NDS PA QL=30 EA/30 Days
LAXATIVES		
LAXATIVE COMBINATIONS		
GAVILYTE-C POWDER FOR ORAL SOLN	1	
<i>gavilyte-g powder for oral soln</i>	1	
<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	1	
<i>peg 3350/electrolyte oral soln</i>	1	
<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	1	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6gm/177ml prep kit</i>	1	
SUFLAVE SOLN PACK	1	
LAXATIVES - MISCELLANEOUS		
<i>constulose 10gm/15ml oral soln</i>	1	
<i>lactulose 667mg/ml oral soln</i>	1	
MACROLIDES		
AZITHROMYCIN		
<i>azithromycin 20mg/ml susp</i>	1	
<i>azithromycin 250mg pack</i>	1	
<i>azithromycin 250mg tab</i>	1	
<i>azithromycin 40mg/ml susp</i>	1	
<i>azithromycin 500mg inj</i>	1	
<i>azithromycin 500mg tab</i>	1	
<i>azithromycin 500mg tab pack</i>	1	
<i>azithromycin 600mg tab</i>	1	
CLARITHROMYCIN		
<i>clarithromycin 250mg tab</i>	1	
CLARITHROMYCIN 25MG/ML SUSP	1	
<i>clarithromycin 500mg er tab</i>	1	
<i>clarithromycin 500mg tab</i>	1	
CLARITHROMYCIN 50MG/ML SUSP	1	
ERYTHROMYCINS		
ERYTHROMYCIN 250MG DR CAP	1	
<i>erythromycin 250mg tab</i>	1	
<i>erythromycin 500mg tab</i>	1	
<i>erythromycin ethylsuccinate 40mg/ml susp</i>	1	
<i>erythromycin ethylsuccinate 80mg/ml susp</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FIDAXOMICIN		
DIFICID 200MG TAB	1	PA QL=20 EA/10 Days
DIFICID 40MG/ML SUSP	1	PA QL=136 ML/10 Days
MEDICAL DEVICES AND SUPPLIES		
BANDAGES-DRESSINGS-TAPE		
GAUZE PADS & DRESSINGS - PADS 2 X 2	1	
MISC. DEVICES		
ALCOHOL SWAB 1X1 (DIABETIC)	1	
PARENTERAL THERAPY SUPPLIES		
INSULIN PEN NEEDLE	1	
INSULIN SYRINGE (DISP) U-100 0.3ML	1	
INSULIN SYRINGE (DISP) U-100 1/2ML	1	
INSULIN SYRINGE (DISP) U-100 1ML	1	
NEEDLES INSULIN DISP. SAFETY	1	
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG		
AIMOVIG 140MG/ML AUTO-INJECTOR	1	PA QL=1 ML/30 Days
AIMOVIG 70MG/ML AUTO-INJECTOR	1	PA QL=1 ML/30 Days
EMGALITY 100MG/ML SYRINGE	1	PA QL=3 ML/30 Days
EMGALITY 120MG/ML AUTO-INJECTOR	1	PA QL=2 ML/30 Days
EMGALITY 120MG/ML SYRINGE	1	PA QL=2 ML/30 Days
UBRELVY 100MG TAB	1	PA QL=16 EA/30 Days
UBRELVY 50MG TAB	1	PA QL=16 EA/30 Days
ZAVZPRET 10MG/ACT NASAL SPRAY	1	PA QL=6 EA/30 Days
MIGRAINE PRODUCTS		
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	1	PA QL=16 ML/30 Days
SEROTONIN AGONISTS		
<i>naratriptan 1mg tab</i>	1	QL=18 EA/30 Days
<i>naratriptan 2.5mg tab</i>	1	QL=18 EA/30 Days
REYVOW 100MG TAB	1	PA QL=8 EA/30 Days
REYVOW 50MG TAB	1	PA QL=8 EA/30 Days
<i>rizatriptan 10mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 10mg tab</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg tab</i>	1	QL=36 EA/60 Days
<i>sumatriptan 100mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 25mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 4mg/0.5ml cartridge</i>	1	QL=5 ML/30 Days
<i>sumatriptan 50mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 6mg/0.5ml auto-injector</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml cartridge</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml inj</i>	1	QL=5 ML/30 Days
<i>zolmitriptan 2.5mg tab</i>	1	QL=18 EA/30 Days
<i>zolmitriptan 5mg tab</i>	1	QL=18 EA/30 Days
<i>zolmitriptan 5mg/act nasal spray</i>	1	QL=12 EA/30 Days

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
MINERALS & ELECTROLYTES		
ELECTROLYTE MIXTURES		
ELECTROLYTE-148 SOLUTION	1	
GLUCOSE 100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	1	PA BvD
GLUCOSE 100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	1	PA BvD
GLUCOSE 25MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	1	
<i>glucose 50mg/ml/potassium chloride 0.01meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 2.25mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 9mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.03meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
GLUCOSE 50MG/ML/POTASSIUM CHLORIDE 0.04MEQ/ML/SODIUM CHLORIDE 9MG/ML INJ	1	
<i>glucose 50mg/ml/sodium chloride 2mg/ml inj</i>	1	
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	1	
KCL/D5W/LR INJ 0.15%	1	
<i>kcl/nacl 20meq-0.45% inj</i>	1	
<i>kcl/nacl 20meq-0.9% inj</i>	1	
<i>kcl/nacl 40meq-9% inj</i>	1	
PLASMA-LYTE 148 INJ	1	
PLASMA-LYTE A INJ	1	
TPN ELECTROLYTES INJ	1	PA BvD
MAGNESIUM		
<i>magnesium sulfate 500mg/ml inj</i>	1	
<i>magnesium sulfate 500mg/ml syringe</i>	1	
POTASSIUM		
<i>klor-con 10meq er tab</i>	1	
<i>klor-con 10meq micro er tab</i>	1	
<i>klor-con 15meq micro er tab</i>	1	
<i>klor-con 20meq micro er tab</i>	1	
<i>klor-con 20meq powder for oral soln</i>	1	
<i>klor-con 8meq er tab</i>	1	
<i>potassium chloride 1.33meq/ml oral soln</i>	1	

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cyclosporine 25mg cap</i>	1	PA BvD
<i>cyclosporine modified 100mg cap</i>	1	PA BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	1	PA BvD
<i>cyclosporine modified 25mg cap</i>	1	PA BvD
<i>cyclosporine modified 50mg cap</i>	1	PA BvD
ENSPRYNG 120MG/ML SYRINGE	1	NDS PA QL=2 ML/28 Days
ENVARUSUS XR 0.75MG TAB	1	PA BvD
ENVARUSUS XR 1MG TAB	1	PA BvD
ENVARUSUS XR 4MG TAB	1	PA BvD
<i>everolimus 0.25mg tab</i>	1	PA BvD
<i>everolimus 0.5mg tab</i>	1	PA BvD
<i>everolimus 0.75mg tab</i>	1	PA BvD
<i>everolimus 1mg tab</i>	1	PA BvD
<i>engraf 100mg cap</i>	1	PA BvD
<i>engraf 100mg/ml oral soln</i>	1	PA BvD
<i>engraf 25mg cap</i>	1	PA BvD
LUPKYNIS 7.9MG CAP	1	NDS PA QL=180 EA/30 Days
<i>mycophenolate mofetil 200mg/ml susp</i>	1	PA BvD
<i>mycophenolate mofetil 250mg cap</i>	1	PA BvD
<i>mycophenolate mofetil 500mg tab</i>	1	PA BvD
<i>mycophenolic acid 180mg dr tab</i>	1	PA BvD
<i>mycophenolic acid 360mg dr tab</i>	1	PA BvD
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	1	PA BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	1	PA BvD
SANDIMMUNE 100MG/ML ORAL SOLN	1	PA BvD
<i>sirolimus 0.5mg tab</i>	1	PA BvD
<i>sirolimus 1mg tab</i>	1	PA BvD
<i>sirolimus 1mg/ml oral soln</i>	1	PA BvD
<i>sirolimus 2mg tab</i>	1	PA BvD
<i>tacrolimus 0.5mg cap</i>	1	PA BvD
<i>tacrolimus 1mg cap</i>	1	PA BvD
<i>tacrolimus 5mg cap</i>	1	PA BvD
POTASSIUM REMOVING AGENTS		
LOKELMA 10GM POWDER FOR ORAL SUSP	1	PA
LOKELMA 5GM POWDER FOR ORAL SUSP	1	PA
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	1	
<i>sps 15gm/60ml susp</i>	1	
VELTASSA 16.8GM POWDER FOR ORAL SUSP	1	PA
VELTASSA 25.2GM POWDER FOR ORAL SUSP	1	PA
VELTASSA 8.4GM POWDER FOR ORAL SUSP	1	PA
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA 200MG/ML AUTO-INJECTOR	1	NDS PA QL=4 ML/28 Days
BENLYSTA 200MG/ML SYRINGE	1	NDS PA QL=4 ML/28 Days
MOUTH/THROAT/DENTAL AGENTS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANESTHETICS TOPICAL ORAL		
<i>lidocaine viscous 2% topical soln</i>	1	
ANTI-INFECTIVES - THROAT		
<i>clotrimazole 10mg lozenge</i>	1	
<i>nystatin 100000unit/ml susp</i>	1	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate 0.12% mouthwash</i>	1	
<i>periogard 0.12% mouthwash</i>	1	
STEROIDS - MOUTH/THROAT/DENTAL		
<i>kourzeq 0.1% oral paste</i>	1	
<i>triamcinolone acetonide 0.1% oral paste</i>	1	
THROAT PRODUCTS - MISC.		
<i>cevimeline 30mg cap</i>	1	
<i>pilocarpine 5mg tab</i>	1	
<i>pilocarpine 7.5mg tab</i>	1	
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen 10mg tab</i>	1	
<i>baclofen 20mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	PA QL=90 EA/30 Days
<i>chlorzoxazone 500mg tab</i>	1	PA
<i>cyclobenzaprine 10mg tab</i>	1	PA QL=90 EA/30 Days
<i>cyclobenzaprine 5mg tab</i>	1	PA QL=90 EA/30 Days
<i>metaxalone 800mg tab</i>	1	PA
<i>methocarbamol 500mg tab</i>	1	PA
<i>methocarbamol 750mg tab</i>	1	PA
<i>orphenadrine citrate 100mg er tab</i>	1	PA
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg tab</i>	1	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium 100mg cap</i>	1	
<i>dantrolene sodium 25mg cap</i>	1	
<i>dantrolene sodium 50mg cap</i>	1	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	1	
<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	1	
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	1	
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	1	
NASAL STEROIDS		
<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	1	QL=50 ML/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	1	QL=32 GM/30 Days

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
NEUROMUSCULAR AGENTS		
ALS AGENTS		
RADICAVA 105MG/5ML SUSP	1	NDS PA QL=70 ML/28 Days
<i>riluzole 50mg tab</i>	1	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI 0.75MG/ML ORAL SOLN	1	NDS PA QL=200 ML/30 Days
NUTRIENTS		
CARBOHYDRATES		
<i>glucose 100mg/ml inj</i>	1	PA BvD
<i>glucose 50mg/ml inj</i>	1	
LIPIDS		
DOJOLVI 100% ORAL SOLN	1	NDS PA
INTRALIPID 20GM/100ML INJ	1	PA BvD
NUTRILIPID 20GM/100ML INJ	1	PA BvD
PROTEINS		
CLINIMIX 4.25/10 INJ	1	PA BvD
CLINIMIX 4.25/5 INJ	1	PA BvD
CLINIMIX 5/15 INJ	1	PA BvD
CLINIMIX 5/20 INJ	1	PA BvD
CLINIMIX E 2.75/5 INJ	1	PA BvD
CLINIMIX E 4.25/10 INJ	1	PA BvD
CLINIMIX E 4.25/5 INJ	1	PA BvD
CLINIMIX E 5/15 INJ	1	PA BvD
CLINIMIX E 5/20 INJ	1	PA BvD
<i>clinisol 15 inj</i>	1	PA BvD
<i>plenamine 15% inj</i>	1	PA BvD
PREMASOL 10% INJ	1	PA BvD
PROSOL 20% INJ	1	PA BvD
TRAVASOL 10% INJ	1	PA BvD
TROPHAMINE 10% INJ	1	PA BvD
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPHTHALMIC		
BETAXOLOL 0.5% OPHTH SOLN	1	
<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	1	
CARTEOLOL 1% OPHTH SOLN	1	
<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	1	
<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	1	
LEVOBUNOLOL 0.5% OPHTH SOLN	1	
<i>timolol 0.25% ophth gel</i>	1	
<i>timolol 0.25% ophth soln</i>	1	
<i>timolol 0.5% ophth gel</i>	1	
<i>timolol 0.5% ophth soln</i>	1	
<i>timolol 0.5% ophth soln (preservative-free)</i>	1	
CYCLOPLEGIC MYDRIATICS		

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>atropine sulfate 1% ophth soln</i>	1	
MIOTICS		
PHOSPHOLINE IODIDE 0.125% OPHTH SOLN	1	
<i>pilocarpine 1% ophth soln</i>	1	
<i>pilocarpine 2% ophth soln</i>	1	
<i>pilocarpine 4% ophth soln</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
APRACLONIDINE 0.5% OPHTH SOLN	1	
<i>brimonidine tartrate 0.1% ophth soln</i>	1	
<i>brimonidine tartrate 0.15% ophth soln</i>	1	
<i>brimonidine tartrate 0.2% ophth soln</i>	1	
SIMBRINZA 0.2-1% OPHTH SUSP	1	
OPHTHALMIC ANTI-INFECTIVES		
BACITRACIN 500UNIT/GM OPHTH OINTMENT	1	
<i>bacitracin/polymyxin B 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>ciprofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>erythromycin 0.5% ophth ointment</i>	1	QL=7 GM/7 Days
<i>gentamicin 0.3% ophth soln</i>	1	QL=10 ML/7 Days
NATACYN 5% OPHTH SUSP	1	QL=15 ML/7 Days
<i>neo-polycin ophth ointment</i>	1	QL=7 GM/7 Days
<i>neomycin/bacitracin/polymyxin ophth ointment 5mg-400unit-10000unit</i>	1	QL=7 GM/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	1	QL=10 ML/7 Days
<i>ofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>polycin 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>polymyxin b/trimethoprim 10000 Unit/ML-0.1% ophth soln</i>	1	QL=10 ML/7 Days
<i>sulfacetamide sodium 10% ophth soln</i>	1	QL=15 ML/7 Days
<i>tobramycin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
TRIFLURIDINE 1% OPHTH SOLN	1	QL=15 ML/7 Days
XDEMVIY 0.25% OPHTH SOLN	1	PA QL=10 ML/42 Days
OPHTHALMIC IMMUNOMODULATORS		
<i>cyclosporine 0.05% ophth susp</i>	1	QL=60 EA/30 Days
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA 5% OPHTH SOLN	1	QL=60 EA/30 Days
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPHTH SOLN	1	QL=5 ML/30 Days
ROCKLATAN 0.05-0.2MG/ML OPHTH SOLN	1	QL=5 ML/30 Days
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE 0.002% OPHTH SOLN	1	NDS PA QL=112 ML/365 Days
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>	1	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	1	
<i>difluprednate 0.05% ophth susp</i>	1	
<i>fluorometholone 0.1% ophth susp</i>	1	
<i>loteprednol etabonate 0.5% ophth gel</i>	1	
<i>loteprednol etabonate 0.5% ophth susp</i>	1	
<i>neo-polycin hc ophth ointment</i>	1	
<i>neomycin/polymyxin/bacitracin/hydrocortisone ophth 1% ointment</i>	1	
<i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>	1	
PREDNISOLONE 1% OPHTH SOLN	1	
PREDNISOLONE ACETATE 1% OPHTH SUSP	1	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN	1	
TOBRADEX 0.1-0.3% OPHTH OINTMENT	1	
OPHTHALMICS - MISC.		
<i>azelastine 0.05% ophth soln</i>	1	
<i>brinzolamide 1% ophth susp</i>	1	
<i>bromfenac 0.07% ophth soln</i>	1	QL=12 ML/365 Days
CROMOLYN SODIUM 4% OPHTH SOLN	1	
CYSTADROPS 0.37% OPHTH SOLN	1	NDS PA QL=20 ML/28 Days
CYSTARAN 0.44% OPHTH SOLN	1	NDS PA QL=60 ML/28 Days
<i>diclofenac sodium 0.1% ophth soln</i>	1	QL=20 ML/365 Days
<i>dorzolamide 2% ophth soln</i>	1	
<i>epinastine 0.05% ophth soln</i>	1	
FLURBIPROFEN SODIUM 0.03% OPHTH SOLN	1	
ILEVRO 0.3% OPHTH SUSP	1	QL=12 ML/365 Days
<i>ketorolac tromethamine 0.4% ophth soln</i>	1	QL=20 ML/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	1	
PROLENSA 0.07% OPHTH SOLN	1	QL=12 ML/365 Days
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03% ophth soln</i>	1	QL=5 ML/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 ML/30 Days
LUMIGAN 0.01% OPHTH SOLN	1	QL=5 ML/30 Days
<i>tafluprost 0.0015% ophth soln</i>	1	ST QL=30 EA/30 Days
<i>travoprost 0.004% ophth soln</i>	1	QL=5 ML/30 Days
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2% otic soln</i>	1	
OTIC ANTI-INFECTIVES		
CIPROFLOXACIN 0.2% OTIC SOLN	1	
<i>ofloxacin 0.3% otic soln</i>	1	
OTIC COMBINATIONS		
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>neomycin/polymyxin/hydrocortisone</i> 3.5-10000unit-1% otic soln	1	
<i>neomycin/polymyxin/hydrocortisone</i> 3.5-10000unit-1% otic susp	1	
OTIC STEROIDS		
<i>flac 0.01% otic soln</i>	1	
<i>fluocinolone acetonide 0.01% otic soln</i>	1	
<i>hydrocortisone/acetic acid 1-2% otic soln</i>	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
BIVIGAM 5GM/50ML INJ	1	NDS PA
GAMMAGARD 10GM INJ	1	NDS PA
GAMMAGARD 2.5GM/25ML INJ	1	NDS PA
GAMMAGARD 5GM INJ	1	NDS PA
GAMMAKED 1GM/10ML INJ	1	NDS PA
GAMMAPLEX 10GM/100ML INJ	1	NDS PA
GAMMAPLEX 10GM/200ML INJ	1	NDS PA
GAMMAPLEX 20GM/200ML INJ	1	NDS PA
GAMMAPLEX 5GM/50ML INJ	1	NDS PA
GAMUNEX 1GM/10ML INJ	1	NDS PA
OCTAGAM 1GM/20ML INJ	1	NDS PA
OCTAGAM 2GM/20ML INJ	1	NDS PA
PANZYGA 10GM/100ML INJ	1	NDS PA
PANZYGA 1GM/10ML INJ	1	NDS PA
PANZYGA 2.5GM/25ML INJ	1	NDS PA
PANZYGA 20GM/200ML INJ	1	NDS PA
PANZYGA 30GM/300ML INJ	1	NDS PA
PANZYGA 5GM/50ML INJ	1	NDS PA
PRIVIGEN 20GM/200ML INJ	1	NDS PA
PENICILLINS		
AMINOPENICILLINS		
AMOXICILLIN 125MG CHEW TAB	1	
<i>amoxicillin 250mg cap</i>	1	
AMOXICILLIN 250MG CHEW TAB	1	
<i>amoxicillin 25mg/ml susp</i>	1	
<i>amoxicillin 40mg/ml susp</i>	1	
<i>amoxicillin 500mg cap</i>	1	
<i>amoxicillin 500mg tab</i>	1	
<i>amoxicillin 50mg/ml susp</i>	1	
<i>amoxicillin 80mg/ml susp</i>	1	
<i>amoxicillin 875mg tab</i>	1	
<i>ampicillin 1000mg inj</i>	1	
<i>ampicillin 100mg/ml inj</i>	1	
AMPICILLIN 125MG INJ	1	
<i>ampicillin 500mg cap</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
NATURAL PENICILLINS		
BICILLIN L-A 1200000UNIT/2ML SYRINGE	1	
BICILLIN L-A 2400000UNIT/4ML SYRINGE	1	
BICILLIN L-A 600000UNIT/ML SYRINGE	1	
<i>penicillin g potassium 1000000unit/ml inj</i>	1	
PENICILLIN G POTASSIUM 40000UNIT/ML INJ	1	
PENICILLIN G POTASSIUM 60000UNIT/ML INJ	1	
PENICILLIN G SODIUM 100000UNIT/ML INJ	1	
<i>penicillin v potassium 250mg tab</i>	1	
PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN	1	
<i>penicillin v potassium 500mg tab</i>	1	
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin 250mg/clavulanate 125mg tab</i>	1	
AMOXICILLIN/CLAVULANATE 200-28.5MG CHEW TAB	1	
AMOXICILLIN/CLAVULANATE 400-57MG CHEW TAB	1	
<i>amoxicillin/clavulanate 500-125mg tab</i>	1	
<i>amoxicillin/clavulanate 875-125mg tab</i>	1	
<i>amoxicillin/k clavulanate 200-28.5mg/5ml susp</i>	1	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml susp</i>	1	
<i>amoxicillin/k clavulanate 400-57mg/5ml susp</i>	1	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml susp</i>	1	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	1	
<i>ampicillin/sulbactam 1000-500mg inj</i>	1	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	1	
<i>piperacillin/tazobactam 2000-250mg inj</i>	1	
<i>piperacillin/tazobactam 3000-375mg inj</i>	1	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	1	
<i>piperacillin/tazobactam 4000-500mg inj</i>	1	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	
<i>nafcillin 100mg/ml inj</i>	1	
<i>nafcillin 1gm inj</i>	1	
<i>nafcillin 2gm inj</i>	1	
<i>oxacillin 100mg/ml inj</i>	1	
<i>oxacillin 1gm inj</i>	1	
OXACILLIN 20MG/ML INJ	1	
<i>oxacillin 2gm inj</i>	1	
OXACILLIN 40MG/ML INJ	1	
PROGESTINS		
PROGESTINS		
<i>medroxyprogesterone acetate 10mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>medroxyprogesterone acetate 2.5mg tab</i>	1	
<i>medroxyprogesterone acetate 5mg tab</i>	1	
MEGESTROL ACETATE 125MG/ML SUSP	1	PA
<i>norethindrone acetate 5mg tab</i>	1	
<i>progesterone 100mg cap</i>	1	
<i>progesterone 200mg cap</i>	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium 333mg dr tab</i>	1	
<i>disulfiram 250mg tab</i>	1	
<i>disulfiram 500mg tab</i>	1	
ANTI-CATAPLECTIC AGENTS		
LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
LUMRYZ 6GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
LUMRYZ 9GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
SODIUM OXYBATE 500MG/ML ORAL SOLN	1	NDS PA QL=540 ML/30 Days
XYWAV 0.5GM/ML ORAL SOLN	1	NDS PA QL=540 ML/30 Days
ANTIDEMENTIA AGENTS		
<i>donepezil 10mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 10mg tab</i>	1	QL=60 EA/30 Days
<i>donepezil 23mg tab</i>	1	ST QL=30 EA/30 Days
<i>donepezil 5mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 5mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine 12mg tab</i>	1	
<i>galantamine 4mg tab</i>	1	
<i>galantamine 8mg tab</i>	1	
<i>galantamine hydrobromide 16mg er cap</i>	1	
<i>galantamine hydrobromide 24mg er cap</i>	1	
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	1	
<i>galantamine hydrobromide 8mg er cap</i>	1	
<i>memantine 10mg tab</i>	1	QL=60 EA/30 Days
<i>memantine 14mg er cap</i>	1	ST QL=30 EA/30 Days
<i>memantine 21mg er cap</i>	1	ST QL=30 EA/30 Days
<i>memantine 28mg er cap</i>	1	ST QL=30 EA/30 Days
<i>memantine 2mg/ml oral soln</i>	1	QL=300 ML/30 Days
<i>memantine 5/10mg titration pack</i>	1	
<i>memantine 5mg tab</i>	1	QL=60 EA/30 Days
<i>memantine 7mg er cap</i>	1	ST QL=30 EA/30 Days
<i>rivastigmine 1.5mg cap</i>	1	
<i>rivastigmine 13.3mg/24hr patch</i>	1	QL=30 EA/30 Days
<i>rivastigmine 3mg cap</i>	1	
<i>rivastigmine 4.5mg cap</i>	1	
<i>rivastigmine 4.6mg/24hr patch</i>	1	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>rivastigmine 6mg cap</i>	1	
<i>rivastigmine 9.5mg/24hr patch</i>	1	QL=30 EA/30 Days
FIBROMYALGIA AGENTS		
SAVELLA 100MG TAB	1	QL=60 EA/30 Days
SAVELLA 12.5MG TAB	1	QL=60 EA/30 Days
SAVELLA 25MG TAB	1	QL=60 EA/30 Days
SAVELLA 50MG TAB	1	QL=60 EA/30 Days
SAVELLA TAB 4-WEEK TITRATION PACK (55)	1	
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12MG ER TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO 12MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 24MG ER TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO 6-12-24MG XR TAB TITRATION PACK	1	NDS PA QL=42 EA/28 Days
AUSTEDO 6MG ER TAB	1	NDS PA QL=90 EA/30 Days
AUSTEDO 6MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 9MG TAB	1	NDS PA QL=120 EA/30 Days
INGREZZA 40MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 40MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 60MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 60MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 80MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 80MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA CAP PACK	1	NDS PA QL=28 EA/28 Days
<i>tetrabenazine 12.5mg tab</i>	1	
<i>tetrabenazine 25mg tab</i>	1	
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	1	NDS
AVONEX 30MCG/0.5ML SYRINGE	1	NDS
BETASERON 0.3MG INJ	1	NDS
<i>dalfampridine 10mg er tab</i>	1	QL=60 EA/30 Days
<i>dimethyl fumarate 120mg dr cap</i>	1	
<i>dimethyl fumarate 240mg dr cap</i>	1	
<i>dimethyl fumarate/dimethyl fumarate 120-240mg pack</i>	1	
<i>fingolimod 0.5mg cap</i>	1	
<i>glatiramer acetate 20mg/ml syringe</i>	1	
<i>glatiramer acetate 40mg/ml syringe</i>	1	
<i>glatopa 20mg/ml syringe</i>	1	
<i>glatopa 40mg/ml syringe</i>	1	
KESIMPTA 20MG/0.4ML PEN INJ	1	NDS
MAVENCLAD 10 TABLET PACK 10MG	1	NDS
MAVENCLAD 4 TABLET PACK 10MG	1	NDS
MAVENCLAD 5 TABLET PACK 10MG	1	NDS
MAVENCLAD 6 TABLET PACK 10MG	1	NDS
MAVENCLAD 7 TABLET PACK 10MG	1	NDS
MAVENCLAD 8 TABLET PACK 10MG	1	NDS

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MAVENCLAD 9 TABLET PACK 10MG	1	NDS
MAYZENT 0.25MG STARTER PACK	1	NDS
MAYZENT 0.25MG TAB	1	NDS
MAYZENT 1MG TAB	1	NDS
MAYZENT 2MG TAB	1	NDS
MAYZENT STARTER PACK (7)	1	
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	1	NDS
PLEGRIDY 125MCG/0.5ML SYRINGE	1	NDS
REBIF 22MCG/0.5ML AUTO-INJECTOR	1	NDS
REBIF 22MCG/0.5ML SYRINGE	1	NDS
REBIF 44MCG/0.5ML AUTO-INJECTOR	1	NDS
REBIF 44MCG/0.5ML SYRINGE	1	NDS
REBIF REBIDOSE PACK	1	NDS
REBIF TITRATION PACK	1	NDS
<i>teriflunomide 14mg tab</i>	1	
<i>teriflunomide 7mg tab</i>	1	
ZEPOSIA 0.92MG CAP	1	NDS PA
ZEPOSIA 28-DAY STARTER KIT	1	NDS PA
ZEPOSIA CAP 7-DAY STARTER PACK	1	NDS PA
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUEDEXTA 20-10MG CAP	1	PA QL=60 EA/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
ERGOLOID MESYLATES USP 1MG TAB	1	
PIMOZIDE 1MG TAB	1	
PIMOZIDE 2MG TAB	1	
SMOKING DETERRENTS		
<i>bupropion 150mg sr tab</i>	1	
NICOTROL 10MG INH SOLN	1	
NICOTROL 10MG/ML NASAL INHALER	1	
<i>varenicline 0.5mg tab</i>	1	
<i>varenicline 0.5mg/1mg first month pack</i>	1	
<i>varenicline 1mg tab</i>	1	
<i>varenicline 1mg tab pack (56)</i>	1	
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
ARALAST 1000MG INJ	1	NDS PA
GLASSIA 1000MG/50ML INJ	1	NDS PA
PROLASTIN 1000MG INJ	1	NDS PA
ZEMAIRA 1000MG INJ	1	NDS PA
CYSTIC FIBROSIS AGENTS		
BRONCHITOL 40MG INH POWDER	1	NDS PA QL=560 EA/28 Days
KALYDECO 13.4MG GRANULES	1	NDS PA QL=56 EA/28 Days
KALYDECO 150MG TAB	1	NDS PA QL=60 EA/30 Days
KALYDECO 25MG GRANULES	1	NDS PA QL=60 EA/30 Days
KALYDECO 5.8MG GRANULES	1	NDS PA QL=56 EA/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
KALYDECO 50MG GRANULES	1	NDS PA QL=60 EA/30 Days
KALYDECO 75MG GRANULES	1	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG GRANULES	1	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG TAB	1	NDS PA QL=120 EA/30 Days
ORKAMBI 125-200MG TAB	1	NDS PA QL=120 EA/30 Days
ORKAMBI 188-150MG GRANULES	1	NDS PA QL=60 EA/30 Days
ORKAMBI 94-75MG GRANULES	1	NDS PA QL=56 EA/28 Days
PULMOZYME 1MG/ML INH SOLN	1	NDS PA BvD QL=150 ML/30 Days
SYMDEKO 50-75MG/75MG PACK	1	NDS PA QL=60 EA/30 Days
SYMDEKO TAB 4-WEEK PACK	1	NDS PA QL=60 EA/30 Days
TRIKAFTA 100-50-75MG/150MG PACK	1	NDS PA QL=90 EA/30 Days
TRIKAFTA 100-50-75MG/75MG GRANULES PACK	1	NDS PA QL=56 EA/28 Days
TRIKAFTA 50-37.5-25MG/75MG TAB PACK	1	NDS PA QL=84 EA/28 Days
TRIKAFTA 80-40-60MG/59.5MG GRANULES PACK	1	NDS PA QL=56 EA/28 Days
PULMONARY FIBROSIS AGENTS		
OFEV 100MG CAP	1	NDS PA QL=60 EA/30 Days
OFEV 150MG CAP	1	NDS PA QL=60 EA/30 Days
<i>pirfenidone 267mg cap</i>	1	PA QL=270 EA/30 Days
<i>pirfenidone 267mg tab</i>	1	PA QL=270 EA/30 Days
<i>pirfenidone 801mg tab</i>	1	PA QL=90 EA/30 Days
SULFONAMIDES		
SULFONAMIDES		
SULFADIAZINE 500MG TAB	1	
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA 150MG TAB	1	NDS PA QL=30 EA/14 Days
GLYCYLCYCLINES		
<i>tigecycline 50mg inj</i>	1	NDS
TETRACYCLINES		
<i>demeclocycline 150mg tab</i>	1	
<i>demeclocycline 300mg tab</i>	1	
<i>doxy 100mg inj</i>	1	
<i>doxycycline hyclate 100mg cap</i>	1	
<i>doxycycline hyclate 100mg tab</i>	1	
<i>doxycycline hyclate 20mg tab</i>	1	
<i>doxycycline hyclate 50mg cap</i>	1	
<i>doxycycline monohydrate 100mg cap</i>	1	
<i>doxycycline monohydrate 100mg tab</i>	1	
<i>doxycycline monohydrate 50mg cap</i>	1	
<i>doxycycline monohydrate 50mg tab</i>	1	
<i>doxycycline monohydrate 5mg/ml susp</i>	1	
<i>minocycline 100mg cap</i>	1	
<i>minocycline 50mg cap</i>	1	
<i>minocycline 75mg cap</i>	1	
<i>tetracycline 250mg cap</i>	1	

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>tetracycline 500mg cap</i>	1	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole 10mg tab</i>	1	
<i>methimazole 5mg tab</i>	1	
<i>propylthiouracil 50mg tab</i>	1	
THYROID HORMONES		
<i>euthyrox 100mcg tab</i>	1	
<i>euthyrox 112mcg tab</i>	1	
<i>euthyrox 125mcg tab</i>	1	
<i>euthyrox 137mcg tab</i>	1	
<i>euthyrox 150mcg tab</i>	1	
<i>euthyrox 175mcg tab</i>	1	
<i>euthyrox 200mcg tab</i>	1	
<i>euthyrox 25mcg tab</i>	1	
<i>euthyrox 50mcg tab</i>	1	
<i>euthyrox 75mcg tab</i>	1	
<i>euthyrox 88mcg tab</i>	1	
<i>levothyroxine sodium 100mcg tab</i>	1	
<i>levothyroxine sodium 112mcg tab</i>	1	
<i>levothyroxine sodium 125mcg tab</i>	1	
<i>levothyroxine sodium 137mcg tab</i>	1	
<i>levothyroxine sodium 150mcg tab</i>	1	
<i>levothyroxine sodium 175mcg tab</i>	1	
<i>levothyroxine sodium 200mcg tab</i>	1	
<i>levothyroxine sodium 25mcg tab</i>	1	
<i>levothyroxine sodium 300mcg tab</i>	1	
<i>levothyroxine sodium 50mcg tab</i>	1	
<i>levothyroxine sodium 75mcg tab</i>	1	
<i>levothyroxine sodium 88mcg tab</i>	1	
<i>levoxyl 100mcg tab</i>	1	
<i>levoxyl 112mcg tab</i>	1	
<i>levoxyl 125mcg tab</i>	1	
<i>levoxyl 137mcg tab</i>	1	
<i>levoxyl 150mcg tab</i>	1	
<i>levoxyl 175mcg tab</i>	1	
<i>levoxyl 200mcg tab</i>	1	
<i>levoxyl 25mcg tab</i>	1	
<i>levoxyl 50mcg tab</i>	1	
<i>levoxyl 75mcg tab</i>	1	
<i>levoxyl 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	1	
<i>liothyronine sodium 50mcg tab</i>	1	
<i>liothyronine sodium 5mcg tab</i>	1	
<i>unithroid 100mcg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>unithroid 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	1	VAC
ADACEL SYRINGE	1	VAC
BOOSTRIX INJ	1	VAC
BOOSTRIX SYRINGE	1	VAC
DAPTACEL INJ	1	
DIPHThERIA/TETANUS TOXOID INJ	1	PA BvD
INFANRIX SYRINGE	1	
KINRIX SYRINGE	1	
PEDIARIX SYRINGE	1	
PENTACEL 96-30-68UNIT/ML INJ	1	
QUADRACEL INJ	1	
QUADRACEL INJ	1	
QUADRACEL SYRINGE	1	
TDVAX 4-4UNIT/ML INJ	1	PA BvD VAC
TENIVAC 4-10UNIT/ML INJ	1	PA BvD VAC
TENIVAC 4-10UNIT/ML SYRINGE	1	PA BvD VAC
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>dicyclomine 10mg cap</i>	1	
<i>dicyclomine 20mg tab</i>	1	
<i>dicyclomine 2mg/ml oral soln</i>	1	
<i>glycopyrrolate 1mg tab</i>	1	
<i>glycopyrrolate 2mg tab</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine 200mg tab</i>	1	
<i>cimetidine 300mg tab</i>	1	
<i>cimetidine 400mg tab</i>	1	
<i>cimetidine 800mg tab</i>	1	
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
<i>famotidine 8mg/ml susp</i>	1	
MISC. ANTI-ULCER		

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>sucralfate 1000mg tab</i>	1	
<i>sucralfate 100mg/ml susp</i>	1	
PROTON PUMP INHIBITORS		
<i>lansoprazole 15mg dr cap</i>	1	
<i>lansoprazole 30mg dr cap</i>	1	
<i>omeprazole 10mg dr cap</i>	1	
<i>omeprazole 20mg dr cap</i>	1	
<i>omeprazole 40mg dr cap</i>	1	
<i>pantoprazole 20mg dr tab</i>	1	
<i>pantoprazole 40mg dr tab</i>	1	
ULCER DRUGS - PROSTAGLANDINS		
<i>misoprostol 100mcg tab</i>	1	
<i>misoprostol 200mcg tab</i>	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>fesoterodine fumarate 4mg er tab</i>	1	
<i>fesoterodine fumarate 8mg er tab</i>	1	
<i>oxybutynin chloride 10mg er tab</i>	1	
<i>oxybutynin chloride 15mg er tab</i>	1	
<i>oxybutynin chloride 1mg/ml oral soln</i>	1	
<i>oxybutynin chloride 5mg er tab</i>	1	
<i>oxybutynin chloride 5mg tab</i>	1	
<i>tolterodine tartrate 1mg tab</i>	1	
<i>tolterodine tartrate 2mg er cap</i>	1	QL=30 EA/30 Days
<i>tolterodine tartrate 2mg tab</i>	1	
<i>tolterodine tartrate 4mg er cap</i>	1	QL=30 EA/30 Days
<i>tropium chloride 20mg tab</i>	1	
<i>tropium chloride 60mg er cap</i>	1	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
GEMTESA 75MG TAB	1	PA
MYRBETRIQ 25MG ER TAB	1	
MYRBETRIQ 50MG ER TAB	1	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride 10mg tab</i>	1	
<i>bethanechol chloride 25mg tab</i>	1	
<i>bethanechol chloride 50mg tab</i>	1	
<i>bethanechol chloride 5mg tab</i>	1	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate 100mg tab</i>	1	
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ	1	
BCG LIVE TICE STRAIN 50MG INJ	1	VAC
BEXSERO SYRINGE	1	VAC
HIBERIX 10MCG INJ	1	

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
MENACTRA INJ	1	VAC
MENQUADFI INJ	1	VAC
MENVEO INJ	1	VAC
PEDVAXHIB 7.5MCG/0.5ML INJ	1	
PENBRAYA INJ	1	VAC
TRUMENBA SYRINGE	1	VAC
TYPHIM VI 25MCG/0.5ML INJ	1	VAC
TYPHIM VI 25MCG/0.5ML SYRINGE	1	VAC
VIRAL VACCINES		
ABRYSVO 120MCG/0.5ML INJ	1	VAC
AREXVY 120MCG/0.5ML INJ	1	VAC
ENGERIX-B 10MCG/0.5ML SYRINGE	1	PA BvD VAC
ENGERIX-B 20MCG/ML INJ	1	PA BvD VAC
ENGERIX-B 20MCG/ML SYRINGE	1	PA BvD VAC
GARDASIL 9 INJ	1	VAC
GARDASIL 9 SYRINGE	1	VAC
HAVRIX 1440ELU/ML SYRINGE	1	VAC
HAVRIX 720ELU/0.5ML SYRINGE	1	
HEPLISAV-B 20MCG/0.5ML SYRINGE	1	PA BvD VAC
IMOVAX 2.5UNIT/ML INJ	1	PA BvD VAC
IPOL INJ	1	VAC
IXCHIQ INJ	1	VAC
IXIARO 0.012MG/ML SYRINGE	1	VAC
JYNNEOS 0.5ML INJ	1	VAC
M-M-R II INJ	1	VAC
PREHEVBRIO 10MCG/ML INJ	1	PA BvD VAC
PRIORIX INJ	1	VAC
PROQUAD INJ	1	
RABAVERT 2.5UNIT/ML INJ	1	PA BvD VAC
RECOMBIVAX 10MCG/ML INJ	1	PA BvD VAC
RECOMBIVAX 10MCG/ML SYRINGE	1	PA BvD VAC
RECOMBIVAX 40MCG/ML INJ	1	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML INJ	1	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML SYRINGE	1	PA BvD VAC
ROTARIX SUSP	1	
ROTARIX SUSP	1	
ROTATEQ SUSP	1	
SHINGRIX 50MCG/0.5ML INJ	1	QL=2 EA/365 DaysVAC
TICOVAC 1.2MCG/0.25ML SYRINGE	1	
TICOVAC 2.4MCG/0.5ML SYRINGE	1	VAC
TWINRIX SYRINGE	1	VAC
VAQTA 25UNIT/0.5ML INJ	1	
VAQTA 25UNIT/0.5ML SYRINGE	1	
VAQTA 50UNIT/ML INJ	1	VAC
VAQTA 50UNIT/ML SYRINGE	1	VAC

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
VARIVAX 1350PFU/0.5ML INJ	1	VAC
YF-VAX INJ	1	VAC
YF-VAX INJ	1	VAC
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<i>clindamycin 2% vaginal cream</i>	1	
<i>metronidazole 0.75% vaginal gel</i>	1	
<i>terconazole 0.4% vaginal cream</i>	1	
<i>terconazole 0.8% vaginal cream</i>	1	
<i>terconazole 80mg vaginal insert</i>	1	
VAGINAL ESTROGENS		
<i>estradiol 0.01% vaginal cream</i>	1	
ESTRING 2MG (7.5 MCG/24HR) VAGINAL SYSTEM	1	ST
PREMARIN 0.625MG/GM VAGINAL CREAM	1	
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	1	QL=2 EA/15 Days
<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	1	QL=2 EA/15 Days
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
<i>droxidopa 100mg cap</i>	1	PA
<i>droxidopa 200mg cap</i>	1	PA
<i>droxidopa 300mg cap</i>	1	PA
VASOPRESSORS		
<i>midodrine 10mg tab</i>	1	
<i>midodrine 2.5mg tab</i>	1	
<i>midodrine 5mg tab</i>	1	

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

ALPHABETICAL LISTING OF DRUGS

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

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

ALPHABETICAL LISTING OF DRUGS

ALOGLIPTIN 12.5MG TAB	21	<i>ambrisentan 10mg tab</i>	52	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28
ALOGLIPTIN 12.5MG/METFORMIN 1000MG TAB	20	<i>ambrisentan 5mg tab</i>	52	<i>medoxomil 5-12.5-40mg tab</i>	
ALOGLIPTIN 12.5MG/METFORMIN 500MG TAB	20	<i>amethia 91 day pack</i>	53	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28
ALOGLIPTIN 12.5MG/PIOGLITAZONE 30MG TAB	20	<i>amikacin 250mg/ml inj</i>	2	<i>medoxomil 5-25-40mg tab</i>	
ALOGLIPTIN 25MG TAB	21	<i>amiloride 5mg tab</i>	63	<i>amlodipine/hydrochlorothiazide/valsartan</i>	28
ALOGLIPTIN 25MG/PIOGLITAZONE 15MG TAB	20	AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	63	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALOGLIPTIN 25MG/PIOGLITAZONE 30MG TAB	20	<i>amiodarone 200mg tab</i>	9	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALOGLIPTIN 25MG/PIOGLITAZONE 45MG TAB	20	<i>amiodarone 400mg tab</i>	9	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALOGLIPTIN 6.25MG TAB	21	<i>amitriptyline 100mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alosepron 0.5mg tab</i>	68	<i>amitriptyline 10mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alosepron 1mg tab</i>	68	<i>amitriptyline 150mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alprazolam 0.25mg tab</i>	8	<i>amitriptyline 25mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alprazolam 0.5mg tab</i>	8	<i>amitriptyline 50mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alprazolam 1mg tab</i>	8	<i>amitriptyline 75mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alprazolam 2mg tab</i>	8	<i>amlodipine 10mg tab</i>	49	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>altavera 28 day pack</i>	53	<i>amlodipine 2.5mg tab</i>	49	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALUNBRIG 180MG TAB	35	<i>amlodipine 5mg tab</i>	50	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALUNBRIG 30MG TAB	35	<i>amlodipine/benazepril 10-20mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALUNBRIG 90MG TAB	35	<i>amlodipine/benazepril 10-40mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALUNBRIG INITIATION PACK	35	<i>amlodipine/benazepril 2.5-10mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALVESCO 160MCG INHALER	10	<i>amlodipine/benazepril 5-10mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALVESCO 80MCG INHALER	10	<i>amlodipine/benazepril 5-20mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alyacen 1/35 pack</i>	53	<i>amlodipine/benazepril 5-40mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alyq 20mg tab</i>	52	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>amantadine 100mg cap</i>	40	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>amantadine 10mg/ml oral soln</i>	40	<i>medoxomil 10-12.5-40mg tab</i>		<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
		<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
		<i>medoxomil 10-25-40mg tab</i>		<i>ammonium lactate 12% cream</i>	61
		<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28	<i>ammonium lactate 12% lotion</i>	62
		<i>amlodipine/hydrochlorothiazide/olmesartan</i>	28	<i>amnestem 10mg cap</i>	58

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

ALPHABETICAL LISTING OF DRUGS

<i>amnesteam 20mg cap</i>	58	<i>amphetamine/dextroamph</i>	1	APTIOM 800MG TAB	14
<i>amnesteam 40mg cap</i>	58	<i>etamine 15mg tab</i>		APTIVUS 250MG CAP	45
<i>amoxapine 100mg tab</i>	19	<i>amphetamine/dextroamph</i>	1	ARALAST 1000MG INJ	85
<i>amoxapine 150mg tab</i>	19	<i>etamine 20mg tab</i>		<i>aranelle 28 pack</i>	53
<i>amoxapine 25mg tab</i>	19	<i>amphetamine/dextroamph</i>	1	ARCALYST 220MG INJ	4
<i>amoxapine 50mg tab</i>	19	<i>etamine 25mg er cap</i>		AREXVY 120MCG/0.5ML	90
AMOXICILLIN 125MG	81	<i>amphetamine/dextroamph</i>	1	INJ	
CHEW TAB		<i>etamine 30mg tab</i>		ARIKAYCE	2
<i>amoxicillin 250mg cap</i>	81	<i>amphetamine/dextroamph</i>	1	590MG/8.4ML INH SUSP	
AMOXICILLIN 250MG	81	<i>etamine 5mg tab</i>		<i>aripiprazole 10mg odt</i>	44
CHEW TAB		<i>amphetamine/dextroamph</i>	1	<i>aripiprazole 10mg tab</i>	44
<i>amoxicillin</i>	82	<i>etamine 7.5mg tab</i>		<i>aripiprazole 15mg odt</i>	44
<i>250mg/clavulanate</i>		AMPHOTERICIN B	24	<i>aripiprazole 15mg tab</i>	45
<i>125mg tab</i>		50MG INJ		<i>aripiprazole 1mg/ml oral</i>	45
<i>amoxicillin 25mg/ml susp</i>	81	<i>ampicillin 1000mg inj</i>	81	<i>soln</i>	
<i>amoxicillin 40mg/ml susp</i>	81	<i>ampicillin 100mg/ml inj</i>	81	<i>aripiprazole 20mg tab</i>	45
<i>amoxicillin 500mg cap</i>	81	AMPICILLIN 125MG INJ	81	<i>aripiprazole 2mg tab</i>	45
<i>amoxicillin 500mg tab</i>	81	<i>ampicillin 500mg cap</i>	81	<i>aripiprazole 30mg tab</i>	45
<i>amoxicillin 50mg/ml susp</i>	81	<i>ampicillin/sulbactam</i>	82	<i>aripiprazole 5mg tab</i>	45
<i>amoxicillin 80mg/ml susp</i>	81	<i>1000-500mg inj</i>		ARISTADA	45
<i>amoxicillin 875mg tab</i>	81	<i>ampicillin/sulbactam</i>	82	1064MG/3.9ML	
AMOXICILLIN/CLAVUL	82	<i>100-50mg/ml inj</i>		SYRINGE	
ANATE 200-28.5MG		<i>ampicillin/sulbactam</i>	82	ARISTADA	45
CHEW TAB		<i>2000-1000mg inj</i>		441MG/1.6ML SYRINGE	
AMOXICILLIN/CLAVUL	82	<i>anagrelide 0.5mg cap</i>	70	ARISTADA	45
ANATE 400-57MG		<i>anagrelide 1mg cap</i>	70	662MG/2.4ML SYRINGE	
CHEW TAB		<i>anastrozole 1mg tab</i>	34	ARISTADA	45
<i>amoxicillin/clavulanate</i>	82	ANNOVERA	57	675MG/2.4ML SYRINGE	
<i>500-125mg tab</i>		0.15-0.013MG/24HR		ARISTADA	45
<i>amoxicillin/clavulanate</i>	82	VAGINAL SYSTEM		882MG/3.2ML SYRINGE	
<i>875-125mg tab</i>		ANORO ELLIPTA	11	<i>armodafinil 150mg tab</i>	1
<i>amoxicillin/k clavulanate</i>	82	62.5-25MCG INHALER		<i>armodafinil 200mg tab</i>	1
<i>200-28.5mg/5ml susp</i>		APRACLONIDINE 0.5%	79	<i>armodafinil 250mg tab</i>	1
<i>amoxicillin/k clavulanate</i>	82	OPHTH SOLN		<i>armodafinil 50mg tab</i>	2
<i>250-62.5mg/5ml susp</i>		<i>aprepitant 125mg cap</i>	24	ARNUITY 100MCG	10
<i>amoxicillin/k clavulanate</i>	82	<i>aprepitant</i>	24	INHALER	
<i>400-57mg/5ml susp</i>		<i>125mg/aprepitant 80mg</i>		ARNUITY 200MCG	10
<i>amoxicillin/k clavulanate</i>	82	<i>cap therapy pack</i>		INHALER	
<i>600-42.9mg/5ml susp</i>		<i>aprepitant 40mg cap</i>	24	ARNUITY 50MCG	10
<i>amphetamine/dextroamph</i>	1	<i>aprepitant 80mg cap</i>	24	INHALER	
<i>etamine 10mg tab</i>		<i>apri 28 day pack</i>	53	<i>asenapine 10mg sl tab</i>	43
<i>amphetamine/dextroamph</i>	1	APTIOM 200MG TAB	14	<i>asenapine 2.5mg sl tab</i>	43
<i>etamine 12.5mg tab</i>		APTIOM 400MG TAB	14	<i>asenapine 5mg sl tab</i>	43
		APTIOM 600MG TAB	14	<i>ashlyna 91 day pack</i>	53

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

ASMANEX 100MCG HFA INHALER	10	<i>atropine sulfate 1% ophth soln</i>	79	<i>azithromycin 500mg tab</i>	72
ASMANEX 110MCG (30ACT) TWISTHALER	10	<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	23	<i>azithromycin 500mg tab pack</i>	72
ASMANEX 200MCG HFA INHALER	10	ATROVENT 17MCG INHALER	10	<i>azithromycin 600mg tab</i>	72
ASMANEX 220MCG (120ACT) TWISTHALER	10	<i>aubra 28 day pack</i>	54	<i>aztreonam 1000mg inj</i>	31
ASMANEX 220MCG (30ACT) TWISTHALER	10	AUGTYRO 40MG CAP	35	<i>aztreonam 2000mg inj</i>	31
ASMANEX 220MCG (60ACT) TWISTHALER	10	AUSTEDO 12MG ER TAB	84	B	
ASMANEX 50MCG HFA INHALER	10	AUSTEDO 12MG TAB	84	BACITRACIN	79
<i>aspirin/dipyridamole 25-200mg er cap</i>	70	AUSTEDO 24MG ER TAB	84	500UNIT/GM OPHTH OINTMENT	
<i>atazanavir 150mg cap</i>	45	AUSTEDO 6-12-24MG XR TAB TITRATION PACK	84	<i>bacitracin/polymyxin B 0.5-10unit/mg ophth ointment</i>	79
<i>atazanavir 200mg cap</i>	45	AUSTEDO 6MG ER TAB	84	<i>baclofen 10mg tab</i>	77
<i>atazanavir 300mg cap</i>	45	AUSTEDO 6MG TAB	84	<i>baclofen 20mg tab</i>	77
<i>atenolol 100mg tab</i>	48	AUSTEDO 9MG TAB	84	<i>balsalazide disodium 750mg cap</i>	68
<i>atenolol 25mg tab</i>	48	AUVELITY 105-45MG ER TAB	17	BALVERSA 3MG TAB	35
<i>atenolol 50mg tab</i>	48	<i>aviane 28 pack</i>	54	BALVERSA 4MG TAB	35
<i>atenolol/chlorthalidone 100-25mg tab</i>	29	AVONEX 30MCG/0.5ML AUTO-INJECTOR	84	BALVERSA 5MG TAB	35
<i>atenolol/chlorthalidone 50-25mg tab</i>	29	AVONEX 30MCG/0.5ML SYRINGE	84	<i>balziva 28 day pack</i>	54
<i>atomoxetine 100mg cap</i>	1	AYVAKIT 100MG TAB	35	BAQSIMI 3MG/DOSE NASAL POWDER	21
<i>atomoxetine 10mg cap</i>	1	AYVAKIT 200MG TAB	35	BAXDELA 450MG TAB	67
<i>atomoxetine 18mg cap</i>	1	AYVAKIT 25MG TAB	35	BCG LIVE TICE STRAIN 50MG INJ	89
<i>atomoxetine 25mg cap</i>	1	AYVAKIT 300MG TAB	35	<i>benazepril 10mg tab</i>	26
<i>atomoxetine 40mg cap</i>	1	AYVAKIT 50MG TAB	35	<i>benazepril 20mg tab</i>	26
<i>atomoxetine 60mg cap</i>	1	<i>azathioprine 50mg tab</i>	75	<i>benazepril 40mg tab</i>	26
<i>atomoxetine 80mg cap</i>	1	<i>azelaic acid 15% gel</i>	62	<i>benazepril 5mg tab</i>	26
<i>atorvastatin 10mg tab</i>	26	<i>azelastine 0.05% ophth soln</i>	80	<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	29
<i>atorvastatin 20mg tab</i>	26	<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	77	<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	29
<i>atorvastatin 40mg tab</i>	26	<i>azithromycin 20mg/ml susp</i>	72	<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	29
<i>atorvastatin 80mg tab</i>	26	<i>azithromycin 250mg pack</i>	72	<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	29
<i>atovaquone 150mg/ml susp</i>	30	<i>azithromycin 250mg tab</i>	72	BENLYSTA 200MG/ML AUTO-INJECTOR	76
<i>atovaquone/proguanil 250-100mg tab</i>	32	<i>azithromycin 40mg/ml susp</i>	72	BENLYSTA 200MG/ML SYRINGE	76
<i>atovaquone/proguanil 62.5-25mg tab</i>	32	<i>azithromycin 500mg inj</i>	72	BENZNIDAZOLE 100MG TAB	7

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

BENZNIDAZOLE	7	BEXSERO SYRINGE	89	BRAFTOVI 75MG CAP	36
12.5MG TAB		<i>bicalutamide 50mg tab</i>	34	BREO ELLIPTA	11
<i>benztropine mesylate</i>	39	BICILLIN L-A	82	100-25MCG INHALER	
<i>0.5mg tab</i>		1200000UNIT/2ML		BREO ELLIPTA	11
<i>benztropine mesylate 1mg</i>	39	SYRINGE		200-25MCG INHALER	
<i>tab</i>		BICILLIN L-A	82	BREO ELLIPTA	11
<i>benztropine mesylate 2mg</i>	40	2400000UNIT/4ML		50-25MCG INH	
<i>tab</i>		SYRINGE		<i>breyana 160-4.5mcg/act</i>	11
BERINERT 500UNIT INJ	69	BICILLIN L-A	82	<i>inh</i>	
BESREMI 500MCG/ML	39	600000UNIT/ML		<i>breyana 80-4.5mcg/act inh</i>	11
SYRINGE		SYRINGE		BREZTRI AEROSPHERE	11
<i>betamethasone 0.05%</i>	60	BIKTARVY 30-120-15MG	45	160-9-4.8MCG/ACT	
<i>aug cream</i>		TAB		INHALER	
<i>betamethasone 0.05%</i>	60	BIKTARVY 50-200-25MG	45	<i>briellyn 28 day pack</i>	54
<i>aug lotion</i>		TAB		BRILINTA 60MG TAB	70
<i>betamethasone 0.05%</i>	60	<i>bimatoprost 0.03% ophth</i>	80	BRILINTA 90MG TAB	70
<i>aug ointment</i>		<i>soln</i>		<i>brimonidine tartrate</i>	79
<i>betamethasone 0.05%</i>	60	<i>bisoprolol fumarate 10mg</i>	49	<i>0.1% ophth soln</i>	
<i>cream</i>		<i>tab</i>		<i>brimonidine tartrate</i>	79
<i>betamethasone 0.05%</i>	60	<i>bisoprolol fumarate 5mg</i>	49	<i>0.15% ophth soln</i>	
<i>lotion</i>		<i>tab</i>		<i>brimonidine tartrate</i>	79
<i>betamethasone 0.05%</i>	60	<i>bisoprolol</i>	29	<i>0.2% ophth soln</i>	
<i>ointment</i>		<i>fumarate/hydrochlorothia</i>		<i>brimonidine</i>	78
<i>betamethasone 0.1%</i>	60	<i>zide 10-6.25mg tab</i>		<i>tartrate/timolol 0.2-0.5%</i>	
<i>cream</i>		<i>bisoprolol</i>	29	<i>ophth soln</i>	
<i>betamethasone 0.1%</i>	60	<i>fumarate/hydrochlorothia</i>		<i>brinzolamide 1% ophth</i>	80
<i>lotion</i>		<i>zide 2.5-6.25mg tab</i>		<i>susp</i>	
<i>betamethasone 0.1%</i>	60	<i>bisoprolol</i>	29	BRIVIACT 100MG TAB	14
<i>ointment</i>		<i>fumarate/hydrochlorothia</i>		BRIVIACT 10MG TAB	14
BETASERON 0.3MG INJ	84	<i>zide 5-6.25mg tab</i>		BRIVIACT 10MG/ML	14
BETAXOLOL 0.5%	78	BIVIGAM 5GM/50ML INJ	81	ORAL SOLN	
OPHTH SOLN		<i>blisovi 21 fe 1.5/30 28</i>	54	BRIVIACT 25MG TAB	14
<i>betaxolol 10mg tab</i>	49	<i>day pack</i>		BRIVIACT 50MG TAB	14
<i>betaxolol 20mg tab</i>	49	<i>blisovi 24 fe 1/20 28 day</i>	54	BRIVIACT 75MG TAB	14
<i>bethanechol chloride</i>	89	<i>pack</i>		<i>bromfenac 0.07% ophth</i>	80
<i>10mg tab</i>		BOOSTRIX INJ	88	<i>soln</i>	
<i>bethanechol chloride</i>	89	BOOSTRIX SYRINGE	88	<i>bromocriptine 2.5mg tab</i>	40
<i>25mg tab</i>		<i>bosentan 125mg tab</i>	52	<i>bromocriptine 5mg cap</i>	40
<i>bethanechol chloride</i>	89	<i>bosentan 62.5mg tab</i>	52	BRONCHITOL 40MG	85
<i>50mg tab</i>		BOSULIF 100MG CAP	35	INH POWDER	
<i>bethanechol chloride 5mg</i>	89	BOSULIF 100MG TAB	35	BRUKINSA 80MG CAP	36
<i>tab</i>		BOSULIF 400MG TAB	35	<i>budesonide 0.125mg/ml</i>	10
<i>bexarotene 1% gel</i>	59	BOSULIF 500MG TAB	36	<i>inh susp</i>	
<i>bexarotene 75mg cap</i>	39	BOSULIF 50MG CAP	36		

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>budesonide 0.25mg/ml inh susp</i>	10	<i>bupropion 100mg er tab</i>	17	<i>CAPLYTA 21MG CAP</i>	41
<i>budesonide 0.5mg/ml inh susp</i>	10	<i>bupropion 100mg tab</i>	17	<i>CAPLYTA 42MG CAP</i>	41
<i>budesonide 2mg/act rectal foam</i>	7	<i>bupropion 150mg sr (12 hr) tab</i>	17	<i>CAPRELSA 100MG TAB</i>	36
<i>budesonide 3mg dr cap</i>	57	<i>bupropion 150mg sr tab</i>	85	<i>CAPRELSA 300MG TAB</i>	36
<i>budesonide 9mg er tab</i>	57	<i>bupropion 150mg xl (24 hr) tab</i>	17	<i>captopril 100mg tab</i>	26
<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	11	<i>bupropion 200mg er tab</i>	17	<i>captopril 12.5mg tab</i>	26
<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	11	<i>bupropion 300mg er tab</i>	17	<i>captopril 25mg tab</i>	26
<i>bumetanide 0.5mg tab</i>	63	<i>bupropion 75mg tab</i>	17	<i>captopril 50mg tab</i>	26
<i>bumetanide 1mg tab</i>	63	<i>bupirone 10mg tab</i>	8	<i>carbamazepine 100mg chew tab</i>	14
<i>bumetanide 2mg tab</i>	63	<i>bupirone 15mg tab</i>	8	<i>carbamazepine 100mg er cap</i>	14
<i>buprenorphine 2mg sl tab</i>	6	<i>bupirone 30mg tab</i>	8	<i>carbamazepine 100mg er tab</i>	14
<i>buprenorphine 8mg sl tab</i>	6			<i>carbamazepine 200mg er cap</i>	14
<i>buprenorphine/naloxone 12-3mg sl film</i>	6			<i>carbamazepine 200mg er tab</i>	14
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	6			<i>carbamazepine 200mg er tab</i>	14
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	6			<i>carbamazepine 200mg</i>	14
<i>buprenorphine/naloxone 4-1mg sl film</i>	6			<i>carbamazepine 200mg tab</i>	14
<i>buprenorphine/naloxone 8-2mg sl film</i>	7			<i>carbamazepine 20mg/ml susp</i>	14
<i>buprenorphine/naloxone 8-2mg sl tab</i>	7			<i>carbamazepine 300mg er cap</i>	14
<i>bupropion 100mg er tab</i>	17			<i>carbamazepine 400mg er tab</i>	14
<i>bupropion 100mg tab</i>	17			<i>carbidopa 25mg tab</i>	39
<i>bupropion 150mg sr (12 hr) tab</i>	17			<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	40
<i>bupropion 150mg sr tab</i>	85			<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	40
<i>bupropion 150mg xl (24 hr) tab</i>	17			<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	40
<i>bupropion 200mg er tab</i>	17			<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	40
<i>bupropion 300mg er tab</i>	17			<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	40
<i>bupropion 75mg tab</i>	17			<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	40
<i>bupirone 10mg tab</i>	8				
<i>bupirone 15mg tab</i>	8				
<i>bupirone 30mg tab</i>	8				
		<i>buspirone 5mg tab</i>	8		
		<i>buspirone 7.5mg tab</i>	8		
		<i>butorphanol tartrate 1mg/act nasal inhaler</i>	7		
		<i>BYDUREON 2MG/0.85ML AUTO-INJECTOR</i>	21		
		C			
		<i>cabergoline 0.5mg tab</i>	65		
		<i>CABLIVI 11MG INJ</i>	70		
		<i>CABOMETYX 20MG TAE</i>	36		
		<i>CABOMETYX 40MG TAE</i>	36		
		<i>CABOMETYX 60MG TAE</i>	36		
		<i>calcipotriene 0.005% cream</i>	59		
		<i>calcipotriene 0.005% ointment</i>	59		
		<i>CALCIPOTRIENE 0.005% TOPICAL SOLN</i>	59		
		<i>calcitriol 0.25mcg cap</i>	65		
		<i>calcitriol 0.5mcg cap</i>	65		
		<i>calcitriol 1mcg/ml oral soln</i>	65		
		<i>calcium acetate 667mg cap</i>	68		
		<i>CALQUENCE 100MG CAP</i>	36		
		<i>CALQUENCE 100MG TAB</i>	36		
		<i>camila 28 day 0.35mg pack</i>	57		
		<i>CAMZYOS 10MG CAP</i>	51		
		<i>CAMZYOS 15MG CAP</i>	51		
		<i>CAMZYOS 2.5MG CAP</i>	51		
		<i>CAMZYOS 5MG CAP</i>	51		
		<i>candesartan cilexetil 16mg tab</i>	27		
		<i>candesartan cilexetil 32mg tab</i>	27		
		<i>candesartan cilexetil 4mg tab</i>	27		
		<i>candesartan cilexetil 8mg tab</i>	27		
		<i>CAPLYTA 10.5MG CAP</i>	41		

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

ALPHABETICAL LISTING OF DRUGS

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

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>cilastatin/imipenem</i>	31	<i>clindamycin 1% gel</i>	58	<i>clobetasol propionate</i>	60
<i>500-500mg inj</i>		<i>clindamycin 1% gel</i>	58	<i>0.05% ointment</i>	
<i>cilostazol 100mg tab</i>	70	<i>(twice-daily)</i>		<i>clobetasol propionate</i>	60
<i>cilostazol 50mg tab</i>	70	<i>clindamycin 1% lotion</i>	58	<i>0.05% shampoo</i>	
CIMDUO 300-300MG	45	<i>clindamycin 1% topical</i>	58	<i>clobetasol propionate</i>	60
TAB		<i>soln</i>		<i>0.05% topical soln</i>	
<i>cimetidine 200mg tab</i>	88	<i>clindamycin 12mg/ml inj</i>	31	<i>clobetasol propionate</i>	60
<i>cimetidine 300mg tab</i>	88	<i>clindamycin 150mg cap</i>	31	<i>0.05% topical spray</i>	
<i>cimetidine 400mg tab</i>	88	<i>clindamycin 150mg/ml</i>	31	<i>clodan 0.05% shampoo</i>	60
<i>cimetidine 800mg tab</i>	88	<i>(6ml) inj</i>		<i>clomipramine 25mg cap</i>	19
CIMZIA 200MG INJ	68	<i>clindamycin 15mg/ml oral</i>	31	<i>clomipramine 50mg cap</i>	19
CIMZIA 200MG/ML	68	<i>soln</i>		<i>clomipramine 75mg cap</i>	19
SYRINGE		<i>clindamycin 18mg/ml inj</i>	31	<i>clonazepam 0.125mg odt</i>	13
<i>cinacalcet 30mg tab</i>	65	<i>clindamycin 2% vaginal</i>	91	<i>clonazepam 0.25mg odt</i>	13
<i>cinacalcet 60mg tab</i>	65	<i>cream</i>		<i>clonazepam 0.5mg odt</i>	13
<i>cinacalcet 90mg tab</i>	65	<i>clindamycin 300mg cap</i>	31	<i>clonazepam 0.5mg tab</i>	13
CINRYZE 500UNIT INJ	69	<i>clindamycin 6mg/ml inj</i>	31	<i>clonazepam 1mg odt</i>	13
CIPROFLOXACIN 0.2%	80	<i>clindamycin 75mg cap</i>	31	<i>clonazepam 1mg tab</i>	13
OTIC SOLN		<i>clindamycin/benzoyl</i>	58	<i>clonazepam 2mg odt</i>	13
<i>ciprofloxacin 0.3% ophth</i>	79	<i>peroxide 1-5% gel</i>		<i>clonazepam 2mg tab</i>	13
<i>soln</i>		CLINIMIX 4.25/10 INJ	78	<i>clonidine 0.1mg er tab</i>	1
<i>ciprofloxacin 250mg tab</i>	67	CLINIMIX 4.25/5 INJ	78	<i>clonidine 0.1mg tab</i>	28
<i>ciprofloxacin 2mg/ml inj</i>	67	CLINIMIX 5/15 INJ	78	<i>clonidine 0.1mg/24hr</i>	28
<i>ciprofloxacin 500mg tab</i>	67	CLINIMIX 5/20 INJ	78	<i>weekly patch</i>	
<i>ciprofloxacin 750mg tab</i>	67	CLINIMIX E 2.75/5 INJ	78	<i>clonidine 0.2mg tab</i>	28
<i>ciprofloxacin/dexamethas</i>	80	CLINIMIX E 4.25/10 INJ	78	<i>clonidine 0.2mg/24hr</i>	28
<i>one 0.3-0.1% otic susp</i>		CLINIMIX E 4.25/5 INJ	78	<i>weekly patch</i>	
<i>citalopram 10mg tab</i>	17	CLINIMIX E 5/15 INJ	78	<i>clonidine 0.3mg tab</i>	28
<i>citalopram 20mg tab</i>	17	CLINIMIX E 5/20 INJ	78	<i>clonidine 0.3mg/24hr</i>	28
<i>citalopram 2mg/ml oral</i>	17	<i>clinisol 15 inj</i>	78	<i>weekly patch</i>	
<i>soln</i>		<i>clobazam 10mg tab</i>	13	<i>clopidogrel 75mg tab</i>	70
<i>citalopram 40mg tab</i>	17	<i>clobazam 2.5mg/ml susp</i>	13	<i>clorazepate dipotassium</i>	8
<i>claravis 10mg cap</i>	58	<i>clobazam 20mg tab</i>	13	<i>15mg tab</i>	
<i>claravis 20mg cap</i>	58	<i>clobetasol propionate</i>	60	<i>clotrimazole 1% cream</i>	59
<i>claravis 30mg cap</i>	58	<i>0.05% cream</i>		<i>clotrimazole 10mg</i>	77
<i>claravis 40mg cap</i>	58	<i>clobetasol propionate</i>	60	<i>lozenge</i>	
<i>clarithromycin 250mg tab</i>	72	<i>0.05% e cream</i>		<i>clotrimazole/betamethaso</i>	59
CLARITHROMYCIN	72	<i>clobetasol propionate</i>	60	<i>ne 1-0.05% cream</i>	
25MG/ML SUSP		<i>0.05% foam</i>		CLOTRIMAZOLE/BETA	59
<i>clarithromycin 500mg er</i>	72	<i>clobetasol propionate</i>	60	METHASONE 1-0.05%	
<i>tab</i>		<i>0.05% gel</i>		LOTION	
<i>clarithromycin 500mg tab</i>	72	<i>clobetasol propionate</i>	60	<i>clozapine 100mg odt</i>	43
CLARITHROMYCIN	72	<i>0.05% lotion</i>		<i>clozapine 100mg tab</i>	43
50MG/ML SUSP					

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

ALPHABETICAL LISTING OF DRUGS

CLOZAPINE 12.5MG ODT	43	<i>constulose 10gm/15ml oral soln</i>	72	<i>cyclosporine modified 25mg cap</i>	76
<i>clozapine 150mg odt</i>	43	COPIKTRA 15MG CAP	36	<i>cyclosporine modified 50mg cap</i>	76
<i>clozapine 200mg odt</i>	43	COPIKTRA 25MG CAP	36	<i>cyred 28 day pack</i>	54
<i>clozapine 200mg tab</i>	43	CORLANOR 5MG TAB	52	CYSTADROPS 0.37% OPHTH SOLN	80
<i>clozapine 25mg odt</i>	43	CORLANOR 5MG/5ML	52	CYSTAGON 150MG CAP	69
<i>clozapine 25mg tab</i>	43	ORAL SOLN		CYSTAGON 50MG CAP	69
<i>clozapine 50mg tab</i>	43	CORLANOR 7.5MG TAB	52	CYSTARAN 0.44% OPHTH SOLN	80
COARTEM 20-120MG TAB	32	COTELLIC 20MG TAB	36		
<i>codeine phosphate/acetaminophen 15-300mg tab</i>	6	CREON 120000-24000-76000UNIT DR CAP			
<i>codeine phosphate/acetaminophen 30-300mg tab</i>	6	CREON 15000-3000-9500UNIT DR CAP	62	D	
<i>codeine phosphate/acetaminophen 60-300mg tab</i>	6	CREON 180000-36000-114000UNIT NIT DR CAP	62	<i>dalfampridine 10mg er tab</i>	84
CODEINE SULFATE 15MG TAB	5	CREON 30000-6000-19000UNIT DR CAP	62	DALVANCE 500MG INJ	31
CODEINE SULFATE 30MG TAB	5	CREON 60000-12000-38000UNIT DR CAP	62	<i>danazol 100mg cap</i>	7
CODEINE SULFATE 60MG TAB	5	<i>cromolyn sodium 20mg/ml oral soln</i>	67	<i>danazol 200mg cap</i>	7
<i>colchicine 0.6mg tab</i>	69	CROMOLYN SODIUM 4% OPHTH SOLN	80	<i>danazol 50mg cap</i>	7
<i>colchicine/probenecid 0.5-500mg tab</i>	69	<i>cryselle 28 pack</i>	54	<i>dantrolene sodium 100mg cap</i>	77
<i>colesevelam 625mg tab</i>	25	<i>cyclobenzaprine 10mg tab</i>	77	<i>dantrolene sodium 25mg cap</i>	77
<i>colestipol 1000mg tab</i>	25	<i>cyclobenzaprine 5mg tab</i>	77	<i>dantrolene sodium 50mg cap</i>	77
<i>colestipol 5000mg granules for oral susp</i>	25	CYCLOPHOSPHAMIDE 25MG TAB	32	<i>dapsone 100mg tab</i>	31
<i>colistin 75mg/ml inj</i>	31	CYCLOPHOSPHAMIDE 50MG TAB	32	<i>dapsone 25mg tab</i>	31
COMBIVENT 20-100MCG/ACT INH	11	<i>cyclosporine 0.05% ophthalmic susp</i>	79	DAPTACEL INJ	88
COMETRIQ CAP 100MG DAILY DOSE PACK	36	<i>cyclosporine 100mg cap</i>	75	<i>daptomycin 500mg inj</i>	31
COMETRIQ CAP 140MG DAILY DOSE PACK	36	<i>cyclosporine 25mg cap</i>	76	<i>darunavir 600mg tab</i>	45
COMETRIQ CAP 60MG DAILY DOSE PACK	36	<i>cyclosporine modified 100mg cap</i>	76	<i>darunavir 800mg tab</i>	45
COMPLERA 200-25-300MG TAB	45	<i>cyclosporine modified 100mg/ml oral soln</i>	76	DAURISMO 100MG TAB	34
<i>compro 25mg rectal supp</i>	44			DAURISMO 25MG TAB	34
				<i>deblitane 0.35mg tab 28 day pack</i>	57
				<i>deferasirox 125mg tab for oral susp</i>	23
				<i>deferasirox 180mg granules</i>	23
				<i>deferasirox 180mg tab</i>	23
				<i>deferasirox 250mg tab for oral susp</i>	23
				<i>deferasirox 360mg granules</i>	23
				<i>deferasirox 360mg tab</i>	23

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

ALPHABETICAL LISTING OF DRUGS

<i>deferasirox 500mg tab for oral susp</i>	23	<i>desogestrel/ethinyl estradiol/inert ingredients 0.15-0.03-1mg pack</i>	54	<i>dexmethylphenidate 25mg er cap</i>	2
<i>deferasirox 90mg granules</i>	23	<i>desonide 0.05% ointment</i>	60	<i>dexmethylphenidate 30mg er cap</i>	2
<i>deferasirox 90mg tab</i>	23	<i>desoximetasone 0.25% cream</i>	61	<i>dexmethylphenidate 35mg er cap</i>	2
<i>deferiprone 1000mg tab</i>	23	<i>desoximetasone 0.25% ointment</i>	61	<i>dexmethylphenidate 40mg er cap</i>	2
<i>deferiprone 500mg tab</i>	23	<i>desvenlafaxine succinate 100mg er tab</i>	18	<i>dexmethylphenidate 5mg er cap</i>	2
DELSTRIGO	45	<i>desvenlafaxine succinate 25mg er tab</i>	18	<i>dexmethylphenidate 5mg tab</i>	2
100-300-300MG TAB		<i>desvenlafaxine succinate 50mg er tab</i>	18	<i>dextroamphetamine sulfate 10mg er cap</i>	1
<i>demeclocycline 150mg tab</i>	86	DEXAMETHASONE	57	<i>dextroamphetamine sulfate 10mg tab</i>	1
<i>demeclocycline 300mg tab</i>	86	0.1MG/ML ORAL SOLN		<i>dextroamphetamine sulfate 15mg er cap</i>	1
DEPO-SUBQ PROVERA	57	<i>dexamethasone 0.5mg tab</i>	57	<i>dextroamphetamine sulfate 5mg er cap</i>	1
104MG/0.65ML		<i>dexamethasone 0.75mg tab</i>	57	<i>dextroamphetamine sulfate 5mg tab</i>	1
SYRINGE		<i>dexamethasone 1.5mg tab</i>	57	DIACOMIT 250MG CAP	14
<i>depo-testosterone 200mg/ml inj</i>	7	<i>dexamethasone 1mg tab</i>	57	DIACOMIT 250MG POWDER FOR ORAL SUSP	14
DESCOVY 120-15MG TAB	45	<i>dexamethasone 2mg tab</i>	57	DIACOMIT 500MG CAP	14
DESCOVY 200-25MG TAB	45	<i>dexamethasone 4mg tab</i>	57	DIACOMIT 500MG POWDER FOR ORAL SUSP	14
<i>desipramine 100mg tab</i>	19	<i>dexamethasone 6mg tab</i>	57	<i>diazepam 10mg tab</i>	8
<i>desipramine 10mg tab</i>	19	DEXAMETHASONE	79	<i>diazepam 10mg/2ml rectal gel</i>	13
<i>desipramine 150mg tab</i>	19	PHOSPHATE 0.1% OPHTH SOLN		<i>diazepam 1mg/ml oral soln</i>	8
<i>desipramine 25mg tab</i>	19	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	80	DIAZEPAM	13
<i>desipramine 50mg tab</i>	19	<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	80	2.5MG/0.5ML RECTAL GEL	
<i>desipramine 75mg tab</i>	19	<i>dexmethylphenidate 10mg er cap</i>	2	<i>diazepam 20mg/4ml rectal gel</i>	13
<i>desloratadine 5mg tab</i>	25	<i>dexmethylphenidate 10mg tab</i>	2	<i>diazepam 2mg tab</i>	8
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	65	<i>dexmethylphenidate 15mg er cap</i>	2	<i>diazepam 5mg tab</i>	8
<i>desmopressin acetate 0.1mg tab</i>	65	<i>dexmethylphenidate 2.5mg tab</i>	2	<i>diazepam 5mg/ml oral soln</i>	8
<i>desmopressin acetate 0.2mg tab</i>	65	<i>dexmethylphenidate 20mg er cap</i>	2		
<i>desogestrel/ethinyl estradiol/ethinyl estradiol 0.15-0.01-0.02mg 28 day 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>diazoxide 50mg/ml susp</i>	21	<i>diltiazem 120mg er (12hr)</i>	50	<i>divalproex sodium 500mg</i>	17
<i>diclofenac potassium</i>	4	<i>cap</i>		<i>dr tab</i>	
<i>50mg tab</i>		<i>diltiazem 120mg er (24hr)</i>	50	<i>divalproex sodium 500mg</i>	17
<i>diclofenac sodium 0.1%</i>	80	<i>cap</i>		<i>er tab</i>	
<i>ophth soln</i>		<i>diltiazem 120mg tab</i>	50	<i>dofetilide 0.125mg cap</i>	9
<i>diclofenac sodium 1% gel</i>	59	<i>diltiazem 180mg er (24hr)</i>	50	<i>dofetilide 0.25mg cap</i>	9
<i>diclofenac sodium 100mg</i>	4	<i>cap</i>		<i>dofetilide 0.5mg cap</i>	9
<i>er tab</i>		<i>diltiazem 240mg er (24hr)</i>	50	DOJOLVI 100% ORAL	78
<i>diclofenac sodium 25mg</i>	4	<i>cap</i>		SOLN	
<i>dr tab</i>		<i>diltiazem 300mg er (24hr)</i>	50	<i>donepezil 10mg odt</i>	83
<i>diclofenac sodium 3% gel</i>	59	<i>cap</i>		<i>donepezil 10mg tab</i>	83
<i>diclofenac sodium 50mg</i>	4	<i>diltiazem 30mg tab</i>	50	<i>donepezil 23mg tab</i>	83
<i>dr tab</i>		<i>diltiazem 360mg er (24hr)</i>	50	<i>donepezil 5mg odt</i>	83
<i>diclofenac sodium 75mg</i>	4	<i>cap</i>		<i>donepezil 5mg tab</i>	83
<i>dr tab</i>		<i>diltiazem 420mg er (24hr)</i>	50	DOPTELET 20MG TAB	70
<i>diclofenac</i>	4	<i>cap</i>		DOPTELET TAB 40MG	70
<i>sodium/misoprostol</i>		<i>diltiazem 60mg er (12hr)</i>	50	DAILY DOSE PACK	
<i>50-0.2mg dr tab</i>		<i>cap</i>		DOPTELET TAB 60MG	71
<i>diclofenac</i>	4	<i>diltiazem 60mg tab</i>	50	DAILY DOSE PACK	
<i>sodium/misoprostol</i>		<i>diltiazem 90mg er (12hr)</i>	50	<i>dorzolamide 2% ophth</i>	80
<i>75-0.2mg dr tab</i>		<i>cap</i>		<i>soln</i>	
<i>dicloxacillin 250mg cap</i>	82	<i>diltiazem 90mg tab</i>	50	<i>dorzolamide/timolol</i>	78
<i>dicloxacillin 500mg cap</i>	82	<i>dimethyl fumarate 120mg</i>	84	<i>22.3-6.8mg/ml ophth soln</i>	
<i>dicyclomine 10mg cap</i>	88	<i>dr cap</i>		<i>dorzolamide/timolol</i>	78
<i>dicyclomine 20mg tab</i>	88	<i>dimethyl fumarate 240mg</i>	84	<i>maleate 2%-0.5% ophth</i>	
<i>dicyclomine 2mg/ml oral</i>	88	<i>dr cap</i>		<i>soln (preservative-free)</i>	
<i>soln</i>		<i>dimethyl</i>	84	<i>dotti 0.025mg/24hr patch</i>	66
DIFICID 200MG TAB	73	<i>fumarate/dimethyl</i>		<i>dotti 0.0375mg/24hr</i>	66
DIFICID 40MG/ML SUSP	73	<i>fumarate 120-240mg</i>		<i>patch</i>	
<i>diflunisal 500mg tab</i>	5	<i>pack</i>		<i>dotti 0.05mg/24hr patch</i>	66
<i>difluprednate 0.05%</i>	80	DIPHThERIA/TETANUS	88	<i>dotti 0.075mg/24hr patch</i>	66
<i>ophth susp</i>		TOXOID INJ		<i>dotti 0.1mg/24hr patch</i>	66
DIGOXIN 0.05MG/ML	51	<i>disopyramide 100mg cap</i>	9	DOVATO 50-300MG TAB	45
ORAL SOLN		<i>disopyramide 150mg cap</i>	9	<i>doxazosin 1mg tab</i>	28
<i>digoxin 0.125mg tab</i>	51	<i>disulfiram 250mg tab</i>	83	<i>doxazosin 2mg tab</i>	28
<i>digoxin 0.25mg tab</i>	51	<i>disulfiram 500mg tab</i>	83	<i>doxazosin 4mg tab</i>	28
<i>dihydroergotamine</i>	73	<i>divalproex sodium 125mg</i>	17	<i>doxazosin 8mg tab</i>	28
<i>mesylate 0.5mg/act nasal</i>		<i>dr cap</i>		<i>doxepin 100mg cap</i>	19
<i>inhaler</i>		<i>divalproex sodium 125mg</i>	17	<i>doxepin 10mg cap</i>	19
DILANTIN 30MG ER	16	<i>dr tab</i>		<i>doxepin 10mg/ml oral</i>	19
CAP		<i>divalproex sodium 250mg</i>	17	<i>soln</i>	
<i>dilt 120mg er cap</i>	50	<i>dr tab</i>		<i>doxepin 150mg cap</i>	19
<i>dilt 180mg er cap</i>	50	<i>divalproex sodium 250mg</i>	17	<i>doxepin 25mg cap</i>	19
<i>dilt 240mg er cap</i>	50	<i>er tab</i>		<i>doxepin 50mg cap</i>	19

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

ALPHABETICAL LISTING OF DRUGS

<i>doxepin 75mg cap</i>	19	DULERA 50-5MCG	11	ELIGARD 7.5MG	34
<i>doxy 100mg inj</i>	86	INHALER		SYRINGE	
<i>doxycycline hyclate 100mg cap</i>	86	<i>duloxetine 20mg dr cap</i>	18	ELIQUIS 2.5MG TAB	12
<i>doxycycline hyclate 100mg tab</i>	86	<i>duloxetine 30mg dr cap</i>	18	ELIQUIS 5MG 30-DAY STARTER PACK	12
<i>doxycycline hyclate 20mg tab</i>	86	<i>duloxetine 60mg dr cap</i>	18	ELIQUIS 5MG TAB	12
<i>doxycycline hyclate 50mg cap</i>	86	DUPIXENT	61	ELMIRON 100MG CAP	69
<i>doxycycline monohydrate 100mg cap</i>	86	100MG/0.67ML SYRINGE		<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	57
<i>doxycycline monohydrate 100mg tab</i>	86	DUPIXENT	61	EMGALITY 100MG/ML SYRINGE	73
<i>doxycycline monohydrate 50mg cap</i>	86	200MG/1.14ML AUTO-INJECTOR		EMGALITY 120MG/ML AUTO-INJECTOR	73
<i>doxycycline monohydrate 50mg tab</i>	86	DUPIXENT 300MG/2ML AUTO-INJECTOR	61	EMGALITY 120MG/ML SYRINGE	73
<i>doxycycline monohydrate 5mg/ml susp</i>	86	DUPIXENT 300MG/2ML SYRINGE	61	EMSAM 12MG/24HR PATCH	17
<i>doxylamine succinate/pyridoxine 10-10mg dr tab</i>	24	<i>dutasteride 0.5mg cap</i>	69	EMSAM 6MG/24HR PATCH	17
<i>dronabinol 10mg cap</i>	24	E		EMSAM 9MG/24HR PATCH	17
<i>dronabinol 2.5mg cap</i>	24	<i>econazole nitrate 1% cream</i>	59	<i>emtricitabine 200mg cap</i>	46
<i>dronabinol 5mg cap</i>	24	EDURANT 25MG TAB	45	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	46
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg pack</i>	54	EFAVIRENZ 200MG CAP	45	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	46
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg pack</i>	54	EFAVIRENZ 50MG CAP	45	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	46
DROXIA 200MG CAP	70	<i>efavirenz 600mg tab</i>	45	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	46
DROXIA 300MG CAP	70	<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	46	EMTRIVA 10MG/ML ORAL SOLN	46
DROXIA 400MG CAP	70	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	46	<i>enalapril maleate 10mg tab</i>	27
<i>droxidopa 100mg cap</i>	91	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	46	<i>enalapril maleate 2.5mg tab</i>	27
<i>droxidopa 200mg cap</i>	91	ELECTROLYTE-148 SOLUTION	74	<i>enalapril maleate 20mg tab</i>	27
<i>droxidopa 300mg cap</i>	91	ELIGARD 22.5MG SYRINGE	34		
DULERA 100-5MCG INHALER	11	ELIGARD 30MG SYRINGE	34		
DULERA 200-5MCG INHALER	11	ELIGARD 45MG SYRINGE	34		

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

ALPHABETICAL LISTING OF DRUGS

<i>enalapril maleate 5mg tab</i>	27	<i>enoxaparin sodium 60mg/0.6ml syringe</i>	12	<i>erlotinib 25mg tab</i>	33
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	29	<i>enoxaparin sodium 80mg/0.8ml syringe</i>	12	<i>errin 28 day 0.35mg pack</i>	57
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	29	<i>enpresse 28 day pack</i>	54	<i>ertapenem 1gm inj</i>	31
ENBREL 25MG/0.5ML INJ	5	<i>enskyce 28 day pack</i>	54	<i>erythromycin 0.5% ophthalm ointment</i>	79
ENBREL 25MG/0.5ML SYRINGE	5	ENSPRYNG 120MG/ML SYRINGE	76	<i>erythromycin 2% gel</i>	58
ENBREL 50MG/ML AUTO-INJECTOR	5	<i>entacapone 200mg tab</i>	40	<i>erythromycin 2% topical soln</i>	58
ENBREL 50MG/ML CARTRIDGE	5	<i>entecavir 0.5mg tab</i>	47	ERYTHROMYCIN 250MG DR CAP	72
ENBREL 50MG/ML SYRINGE	5	<i>entecavir 1mg tab</i>	47	<i>erythromycin 250mg tab</i>	72
ENDARI 5GM POWDER FOR ORAL SOLN	70	ENTRESTO 24-26MG TAB	51	<i>erythromycin 500mg tab</i>	72
<i>endocet 2.5-325mg tab</i>	6	ENTRESTO 49-51MG TAB	51	<i>erythromycin</i>	72
<i>endocet 325-10mg tab</i>	6	ENTRESTO 97-103MG TAB	51	<i>ethylsuccinate 40mg/ml susp</i>	
<i>endocet 325-5mg tab</i>	6	<i>enulose 10gm/15ml oral soln</i>	68	<i>erythromycin</i>	72
<i>endocet 325-7.5mg tab</i>	6	ENVARUSUS XR 0.75MG TAB	76	<i>ethylsuccinate 80mg/ml susp</i>	
ENGERIX-B 10MCG/0.5ML SYRINGE	90	ENVARUSUS XR 1MG TAE	76	<i>erythromycin/benzoyl peroxide 5-3% gel</i>	58
ENGERIX-B 20MCG/ML INJ	90	ENVARUSUS XR 4MG TAE	76	<i>escitalopram 10mg tab</i>	17
ENGERIX-B 20MCG/ML SYRINGE	90	EPIDIOLEX 100MG/ML ORAL SOLN	14	<i>escitalopram 1mg/ml oral soln</i>	18
<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	57	<i>epinastine 0.05% ophthalm soln</i>	80	<i>escitalopram 20mg tab</i>	18
<i>enoxaparin sodium 100mg/1ml syringe</i>	12	<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	91	<i>escitalopram 5mg tab</i>	18
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	12	<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	91	<i>estarylla 28 day pack</i>	54
<i>enoxaparin sodium 150mg/1ml syringe</i>	12	<i>epitol 200mg tab</i>	14	<i>estradiol 0.00104mg/hr twice weekly patch</i>	66
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	12	<i>epplerenone 25mg tab</i>	30	<i>estradiol 0.00104mg/hr weekly patch</i>	66
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	12	<i>epplerenone 50mg tab</i>	30	<i>estradiol 0.00208mg/hr twice weekly patch</i>	66
		EPRONTIA 25MG/ML ORAL SOLN	14	<i>estradiol 0.00208mg/hr weekly patch</i>	66
		ERGOLOID MESYLATES USP 1MG TAB	85	<i>estradiol 0.0025mg/hr weekly patch</i>	66
		ERIVEDGE 150MG CAP	34	<i>estradiol 0.00312mg/hr weekly patch</i>	66
		ERLEADA 240MG TAB	34	<i>estradiol 0.00313mg/hr twice weekly patch</i>	66
		ERLEADA 60MG TAB	34		
		<i>erlotinib 100mg tab</i>	33		
		<i>erlotinib 150mg tab</i>	33		

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

ALPHABETICAL LISTING OF DRUGS

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

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

ALPHABETICAL LISTING OF DRUGS

<i>everolimus 2.5mg tab</i>	36	FARXIGA 10MG TAB	22	FETZIMA 20MG ER CAP	19
<i>everolimus 2mg tab for oral susp</i>	36	FARXIGA 5MG TAB	22	FETZIMA 40MG ER CAP	19
<i>everolimus 3mg tab for oral susp</i>	36	FASENRA 10MG/0.5ML SYRINGE	9	FETZIMA 80MG ER CAP	19
<i>everolimus 5mg tab</i>	36	FASENRA 30MG/ML AUTO-INJECTOR	9	FETZIMA PACK	19
<i>everolimus 5mg tab for oral susp</i>	36	FASENRA 30MG/ML SYRINGE	9	FILSPARI 200MG TAB	69
<i>everolimus 7.5mg tab</i>	36	<i>febuxostat 40mg tab</i>	69	FILSPARI 400MG TAB	69
EVOTAZ 300-150MG TAB	46	<i>febuxostat 80mg tab</i>	69	<i>finasteride 5mg tab</i>	69
EVRYSDI 0.75MG/ML ORAL SOLN	78	<i>felbamate 120mg/ml susp</i>	16	<i> fingolimod 0.5mg cap</i>	84
<i>exemestane 25mg tab</i>	34	<i>felbamate 400mg tab</i>	16	FINTEPLA 2.2MG/ML ORAL SOLN	14
<i>ezetimibe 10mg tab</i>	26	<i>felbamate 600mg tab</i>	16	<i>finzala 24 fe chewable 28 day pack</i>	55
<i>ezetimibe 10mg/simvastatin 10mg tab</i>	25	<i>felodipine 10mg er tab</i>	50	FIRDAPSE 10MG TAB	32
<i>ezetimibe 10mg/simvastatin 20mg tab</i>	25	<i>felodipine 2.5mg er tab</i>	50	FIRMAGON 120MG/VIAL INJ	34
<i>ezetimibe 10mg/simvastatin 40mg tab</i>	25	<i>felodipine 5mg er tab</i>	50	FIRMAGON 80MG INJ	34
<i>ezetimibe 10mg/simvastatin 80mg tab</i>	25	<i>fenofibrate 134mg cap</i>	25	<i>flac 0.01% otic soln</i>	81
F		<i>fenofibrate 145mg tab</i>	25	<i>flavoxate 100mg tab</i>	89
<i>falmina 28 day pack</i>	55	<i>fenofibrate 160mg tab</i>	25	<i>flecainide acetate 100mg tab</i>	9
<i>famciclovir 125mg tab</i>	48	<i>fenofibrate 200mg cap</i>	25	<i>flecainide acetate 150mg tab</i>	9
<i>famciclovir 250mg tab</i>	48	<i>fenofibrate 48mg tab</i>	25	<i>flecainide acetate 50mg tab</i>	9
<i>famciclovir 500mg tab</i>	48	<i>fenofibrate 54mg tab</i>	25	<i>fluconazole 100mg tab</i>	24
<i>famotidine 20mg tab</i>	88	<i>fenofibrate 67mg cap</i>	25	<i>fluconazole 10mg/ml susp</i>	24
<i>famotidine 40mg tab</i>	88	<i>fenofibric acid 135mg dr cap</i>	25	<i>fluconazole 150mg tab</i>	24
<i>famotidine 8mg/ml susp</i>	88	<i>fenofibric acid 45mg dr cap</i>	25	<i>fluconazole 200mg tab</i>	24
FANAPT 10MG TAB	41	<i>fentanyl 100mcg/hr patch</i>	5	<i>fluconazole 200mg/100ml inj</i>	24
FANAPT 12MG TAB	41	<i>fentanyl 1200mcg lozenge</i>	5	<i>fluconazole 400mg/200ml inj</i>	24
FANAPT 1MG TAB	41	<i>fentanyl 12mcg/hr patch</i>	5	<i>fluconazole 40mg/ml susp</i>	24
FANAPT 2MG TAB	41	<i>fentanyl 1600mcg lozenge</i>	5	<i>fluconazole 50mg tab</i>	24
FANAPT 4MG TAB	41	<i>fentanyl 200mcg lozenge</i>	5	<i>flucytosine 250mg cap</i>	24
FANAPT 6MG TAB	41	<i>fentanyl 25mcg/hr patch</i>	5	<i>flucytosine 500mg cap</i>	24
FANAPT 8MG TAB	41	<i>fentanyl 400mcg lozenge</i>	5	<i>fludrocortisone acetate 0.1mg tab</i>	58
FANAPT TITRATION PACK	41	<i>fentanyl 50mcg/hr patch</i>	5	<i>flunisolid 25% (25mcg/act) nasal inhaler</i>	77
		<i>fentanyl 600mcg lozenge</i>	5	<i>fluocinolone acetone 0.01% cream</i>	61
		<i>fentanyl 75mcg/hr patch</i>	5	<i>fluocinolone acetone 0.01% oil</i>	61
		<i>fentanyl 800mcg lozenge</i>	5		
		<i>fesoterodine fumarate 4mg er tab</i>	89		
		<i>fesoterodine fumarate 8mg er tab</i>	89		
		FETZIMA 120MG ER CAP	19		

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

ALPHABETICAL LISTING OF DRUGS

<i>fluocinolone acetonide</i>	81	FLURBIPROFEN	80	<i>fondaparinux sodium</i>	12
<i>0.01% otic soln</i>		SODIUM 0.03% OPHTH		<i>7.5mg/0.6ml syringe</i>	
<i>fluocinolone acetonide</i>	61	SOLN		<i>fosamprenavir 700mg tab</i>	46
<i>0.01% topical soln</i>		<i>fluticasone propionate</i>	61	<i>fosinopril sodium 10mg</i>	27
<i>fluocinolone acetonide</i>	61	<i>0.005% ointment</i>		<i>tab</i>	
<i>0.025% cream</i>		<i>fluticasone propionate</i>	61	<i>fosinopril sodium 20mg</i>	27
<i>fluocinolone acetonide</i>	61	<i>0.05% cream</i>		<i>tab</i>	
<i>0.025% ointment</i>		FLUTICASONE	10	<i>fosinopril sodium 40mg</i>	27
<i>fluocinonide 0.05% cream</i>	61	PROPIONATE 110MCG		<i>tab</i>	
<i>fluocinonide 0.05% e</i>	61	INHALER		<i>fosinopril</i>	29
<i>cream</i>		FLUTICASONE	10	<i>sodium/hydrochlorothiazide</i>	
FLUOCINONIDE 0.05%	61	PROPIONATE 220MCG		<i>de 10-12.5mg tab</i>	
GEL		INHALER		<i>fosinopril</i>	29
<i>fluocinonide 0.05%</i>	61	FLUTICASONE	10	<i>sodium/hydrochlorothiazide</i>	
<i>ointment</i>		PROPIONATE 44MCG		<i>de 20-12.5mg tab</i>	
<i>fluocinonide 0.05%</i>	61	INHALER		FOSRENOL 1000MG	68
<i>topical soln</i>		<i>fluticasone propionate</i>	77	ORAL POWDER	
<i>fluocinonide 0.1% cream</i>	61	<i>50mcg/act nasal inhaler</i>		FOSRENOL 750MG	68
<i>fluorometholone 0.1%</i>	80	<i>fluticasone</i>	11	ORAL POWDER	
<i>ophth susp</i>		<i>propionate/salmeterol</i>		FOTIVDA 0.89MG CAP	36
FLUOROURACIL 2%	59	<i>100-50mcg/act dry</i>		FOTIVDA 1.34MG CAP	36
TOPICAL SOLN		<i>powder inhaler</i>		FRUZAQLA 1MG CAP	33
<i>fluorouracil 5% cream</i>	59	<i>fluticasone</i>	11	FRUZAQLA 5MG CAP	33
<i>fluorouracil 5% topical</i>	59	<i>propionate/salmeterol</i>		FUROSCIX 80MG/10ML	63
<i>solution</i>		<i>250-50mcg/act dry</i>		CARTRIDGE	
<i>fluoxetine 10mg cap</i>	18	<i>powder inhaler</i>		<i>furosemide 10mg/ml inj</i>	63
<i>fluoxetine 20mg cap</i>	18	<i>fluticasone</i>	11	<i>furosemide 10mg/ml oral</i>	63
<i>fluoxetine 40mg cap</i>	18	<i>propionate/salmeterol</i>		<i>soln</i>	
<i>fluoxetine 4mg/ml oral</i>	18	<i>500-50mcg/act dry</i>		<i>furosemide 20mg tab</i>	63
<i>soln</i>		<i>powder inhaler</i>		<i>furosemide 40mg tab</i>	63
<i>fluoxetine 60mg tab</i>	18	<i>fluvastatin 20mg cap</i>	26	<i>furosemide 80mg tab</i>	63
FLUPHENAZINE	44	<i>fluvastatin 40mg cap</i>	26	FUROSEMIDE 8MG/ML	63
0.5MG/ML ORAL SOLN		<i>fluvoxamine maleate</i>	18	ORAL SOLN	
<i>fluphenazine 10mg tab</i>	44	<i>100mg tab</i>		FUZEON 90MG INJ	46
<i>fluphenazine 1mg tab</i>	44	<i>fluvoxamine maleate</i>	18	<i>fyavolv 0.0025-0.5mg tab</i>	66
<i>fluphenazine 2.5mg tab</i>	44	<i>25mg tab</i>		<i>fyavolv 0.005-1mg tab</i>	66
FLUPHENAZINE	44	<i>fluvoxamine maleate</i>	18	FYCOMPA 0.5MG/ML	13
2.5MG/ML INJ		<i>50mg tab</i>		SUSP	
<i>fluphenazine 5mg tab</i>	44	<i>fondaparinux sodium</i>	12	FYCOMPA 10MG TAB	13
FLUPHENAZINE	44	<i>10mg/0.8ml syringe</i>		FYCOMPA 12MG TAB	13
5MG/ML ORAL SOLN		<i>fondaparinux sodium</i>	12	FYCOMPA 2MG TAB	13
<i>fluphenazine decanoate</i>	44	<i>2.5mg/0.5ml syringe</i>		FYCOMPA 4MG TAB	13
<i>25mg/ml inj</i>		<i>fondaparinux sodium</i>	12	FYCOMPA 6MG TAB	13
		<i>5mg/0.4ml syringe</i>		FYCOMPA 8MG TAB	13

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

ALPHABETICAL LISTING OF DRUGS

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

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

ALPHABETICAL LISTING OF DRUGS

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

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

ALPHABETICAL LISTING OF DRUGS

HUMIRA 40MG/0.8ML SYRINGE	3	hydrochlorothiazide 25mg tab	63	hydrochlorothiazide/telmisartan 12.5-40mg tab	30
HUMIRA 80MG/0.8ML AUTO-INJECTOR (ABBVIE)	3	hydrochlorothiazide 50mg tab	63	hydrochlorothiazide/telmisartan 12.5-80mg tab	30
HUMIRA PEN - PEDIATRIC UC STARTER PACK 80MG/0.8ML INJ (ABBVIE)	3	hydrochlorothiazide/irbesartan 12.5-150mg tab	29	hydrochlorothiazide/telmisartan 25-80mg tab	30
HUMIRA PEN 80MG/0.8ML AND 40MG/0.4ML - PSORIASIS/UVEITIS STARTER PACK	3	hydrochlorothiazide/irbesartan 12.5-300mg tab	29	hydrochlorothiazide/triamterene 25-37.5mg cap	63
HUMIRA PEN 80MG/0.8ML CROHNS/UC/HIDRADENITIS STARTER PACK (ABBVIE)	3	hydrochlorothiazide/lisinopril 12.5-10mg tab	29	hydrochlorothiazide/triamterene 25-37.5mg tab	63
HUMULIN 70-30UNIT/ML INJ	22	hydrochlorothiazide/lisinopril 12.5-20mg tab	29	hydrochlorothiazide/triamterene 50-75mg tab	63
HUMULIN 70-30UNIT/ML PEN INJ	22	hydrochlorothiazide/lisinopril 25-20mg tab	29	hydrochlorothiazide/valsartan 12.5-160mg tab	30
HUMULIN N 100UNIT/ML INJ	22	hydrochlorothiazide/losartan potassium 12.5-100mg tab	29	hydrochlorothiazide/valsartan 12.5-320mg tab	30
HUMULIN N 100UNIT/ML PEN INJ	22	hydrochlorothiazide/losartan potassium 12.5-50mg tab	29	hydrochlorothiazide/valsartan 25-160mg tab	30
HUMULIN R 100UNIT/ML INJ	22	hydrochlorothiazide/losartan potassium 25-100mg tab	29	hydrochlorothiazide/valsartan 25-320mg tab	30
HUMULIN R 500UNIT/ML INJ	22	hydrochlorothiazide/metoprolol tartrate 25-100mg tab	29	hydrocodone	6
hydralazine 100mg tab	30	hydrochlorothiazide/metoprolol tartrate 25-50mg tab	29	bitartrate/acetaminophen 10-325mg tab	6
hydralazine 10mg tab	30	hydrochlorothiazide/metoprolol tartrate 25-50mg tab	29	hydrocodone	6
hydralazine 25mg tab	30	hydrochlorothiazide/metoprolol tartrate 50-100mg tab	29	bitartrate/acetaminophen 5-325mg tab	6
hydralazine 50mg tab	30	hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab	30	hydrocodone	6
hydralazine/isosorbide dinitrate 37.5-20mg tab	51	hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab	30	bitartrate/acetaminophen 7.5-325mg tab	61
hydrochlorothiazide 12.5mg cap	63	hydrochlorothiazide/olmesartan medoxomil 25-40mg tab	30	hydrocortisone 1% cream	61
hydrochlorothiazide 12.5mg tab	63	hydrochlorothiazide/spirolactone 25-25mg tab	63	hydrocortisone 1.67mg/ml enema	7
				hydrocortisone 10mg tab	57
				hydrocortisone 2.5% cream	7
				hydrocortisone 2.5% ointment	61
				hydrocortisone 20mg tab	57
				hydrocortisone 5mg tab	57
				HYDROCORTISONE LOTION 2.5%	61

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

ALPHABETICAL LISTING OF DRUGS

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

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

ALPHABETICAL LISTING OF DRUGS

INVEGA TRINZA 819MG/2.625ML SYRINGE	42	ISOSORBIDE MONONITRATE 20MG TAB	8	JANUVIA 100MG TAB	21
IPOL INJ	90	<i>isosorbide mononitrate</i>	8	JANUVIA 25MG TAB	21
<i>ipratropium bromide</i>	10	<i>30mg er tab</i>		JANUVIA 50MG TAB	21
<i>0.02% inh soln</i>		<i>isosorbide mononitrate</i>	8	JARDIANCE 10MG TAB	22
<i>ipratropium bromide</i>	77	<i>60mg er tab</i>		JARDIANCE 25MG TAB	22
<i>0.03% (0.021mg/act)</i>		<i>isotretinoin 10mg cap</i>	58	<i>jasmiel 28 day pack</i>	55
<i>nasal inhaler</i>		<i>isotretinoin 20mg cap</i>	58	<i>javygtor 100mg powder</i>	65
<i>ipratropium bromide</i>	77	<i>isotretinoin 30mg cap</i>	58	<i>for oral soln</i>	
<i>0.06% (0.042mg/act)</i>		<i>isotretinoin 40mg cap</i>	58	<i>javygtor 100mg tab</i>	65
<i>nasal inhaler</i>		<i>isradipine 2.5mg cap</i>	50	<i>javygtor 500mg powder</i>	65
<i>ipratropium/albuterol</i>	11	<i>isradipine 5mg cap</i>	50	<i>for oral soln</i>	
<i>0.5-2.5mg/3ml inh soln</i>		<i>itraconazole 100mg cap</i>	24	JAYPIRCA 100MG TAB	37
<i>irbesartan 150mg tab</i>	27	<i>ivermectin 3mg tab</i>	7	JAYPIRCA 50MG TAB	37
<i>irbesartan 300mg tab</i>	27	IWILFIN 192MG TAB	39	<i>jinteli 0.005-1mg tab</i>	66
<i>irbesartan 75mg tab</i>	27	IXCHIQ INJ	90	<i>juleber 28 day pack</i>	55
ISENTRESS 100MG CHEW TAB	46	IXIARO 0.012MG/ML SYRINGE	90	JULUCA 50-25MG TAB	46
ISENTRESS 100MG GRANULES FOR ORAL SUSP	46			<i>junel 1.5/30 21 day pack</i>	55
ISENTRESS 25MG CHEW TAB	46	J		<i>junel 1/20 21 day pack</i>	55
ISENTRESS 400MG TAB	46	JAKAFI 10MG TAB	37	<i>junel fe 1.5/30 28 day</i>	55
ISENTRESS 600MG TAB	46	JAKAFI 15MG TAB	37	<i>pack</i>	
<i>isibloom 28 day pack</i>	55	JAKAFI 20MG TAB	37	<i>junel fe 1/20 28 day pack</i>	55
ISONIAZID 100MG TAB	32	JAKAFI 25MG TAB	37	<i>junel fe 24 1/20 28 day</i>	55
<i>isoniazid 10mg/ml oral</i>	32	JAKAFI 5MG TAB	37	<i>pack</i>	
<i>soln</i>		<i>jantoven 10mg tab</i>	12	JYLAMVO 2MG/ML ORAL SOLN	33
<i>isoniazid 300mg tab</i>	32	<i>jantoven 1mg tab</i>	12	JYNNEOS 0.5ML INJ	90
<i>isosorbide dinitrate 10mg</i>	7	<i>jantoven 2.5mg tab</i>	12	K	
<i>tab</i>		<i>jantoven 2mg tab</i>	12	<i>kaitlib fe 28 day pack</i>	55
<i>isosorbide dinitrate 20mg</i>	7	<i>jantoven 3mg tab</i>	12	KALYDECO 13.4MG GRANULES	85
<i>tab</i>		<i>jantoven 4mg tab</i>	12	KALYDECO 150MG TAB	85
<i>isosorbide dinitrate 30mg</i>	7	<i>jantoven 5mg tab</i>	12	KALYDECO 25MG GRANULES	85
<i>tab</i>		<i>jantoven 6mg tab</i>	12	KALYDECO 5.8MG GRANULES	85
<i>isosorbide dinitrate 5mg</i>	8	<i>jantoven 7.5mg tab</i>	12	KALYDECO 50MG GRANULES	86
<i>tab</i>		JANUMET 1000-50MG TAB	20	KALYDECO 75MG GRANULES	86
ISOSORBIDE	8	JANUMET 500-50MG TAB	20	<i>kariva 28 day pack</i>	55
MONONITRATE 10MG TAB		JANUMET XR	20	KCL/D5W/LR INJ 0.15%	74
<i>isosorbide mononitrate</i>	8	1000-100MG TAB		<i>kcl/nacl 20meq-0.45% inj</i>	74
<i>120mg er tab</i>		JANUMET XR	20	<i>kcl/nacl 20meq-0.9% inj</i>	74
		1000-50MG TAB		<i>kcl/nacl 40meq-9% inj</i>	74
		JANUMET XR 500-50MG TAB	20		

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

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

ALPHABETICAL LISTING OF DRUGS

LENVIMA 18MG DAILY DOSE PACK	33	<i>levetiracetam 750mg tab</i>	15	<i>levothyroxine sodium 75mcg tab</i>	87
LENVIMA 20MG DAILY DOSE PACK	33	LEVOBUNOLOL 0.5%	78	<i>levothyroxine sodium 88mcg tab</i>	87
LENVIMA 24MG DAILY DOSE PACK	33	OPHTH SOLN		<i>levoxyl 100mcg tab</i>	87
LENVIMA 4MG DAILY DOSE PACK	33	<i>levocarnitine 100mg/ml oral soln</i>	65	<i>levoxyl 112mcg tab</i>	87
LENVIMA 8MG DAILY DOSE PACK	33	<i>levocarnitine 330mg tab</i>	65	<i>levoxyl 125mcg tab</i>	87
<i>lessina 28 day pack</i>	55	<i>levocetirizine 5mg tab</i>	25	<i>levoxyl 137mcg tab</i>	87
<i>letrozole 2.5mg tab</i>	34	<i>levofloxacin 250mg tab</i>	67	<i>levoxyl 150mcg tab</i>	87
<i>leucovorin 10mg tab</i>	39	<i>levofloxacin 500mg tab</i>	67	<i>levoxyl 175mcg tab</i>	87
<i>leucovorin 15mg tab</i>	39	<i>levofloxacin</i>	67	<i>levoxyl 200mcg tab</i>	87
<i>leucovorin 25mg tab</i>	39	<i>500mg/100ml inj</i>		<i>levoxyl 25mcg tab</i>	87
<i>leucovorin 5mg tab</i>	39	<i>levofloxacin 750mg tab</i>	67	<i>levoxyl 50mcg tab</i>	87
LEUKERAN 2MG TAB	33	<i>levofloxacin 750mg/150ml inj</i>	67	<i>levoxyl 75mcg tab</i>	87
LEUPROLIDE ACETATE 22.5MG INJ	34	<i>levofloxacin oral soln</i>	67	<i>levoxyl 88mcg tab</i>	87
<i>leuprolide acetate 5mg/ml inj</i>	34	<i>25mg/ml</i>		LEXIVA 50MG/ML SUSP	46
<i>levalbuterol 0.31mg/3ml neb soln</i>	11	<i>levonest 28 day pack</i>	55	LIBERVANT 10MG BUCCAL FILM	13
<i>levalbuterol 0.63mg/3ml inh soln</i>	11	<i>levonorgestrel-ethinyl estradiol</i>	55	LIBERVANT 12.5MG BUCCAL FILM	13
<i>levalbuterol 1.25mg/0.5ml neb soln</i>	11	<i>0.05-30/0.075-40/0.125-30mg-mcg pack</i>		LIBERVANT 15MG BUCCAL FILM	13
<i>levalbuterol 1.25mg/3ml neb soln</i>	11	<i>levora 0.15/30 28 day pack</i>	55	LIBERVANT 5MG BUCCAL FILM	13
LEVALBUTEROL 45MCG/ACT INHALER	11	<i>levothyroxine sodium 100mcg tab</i>	87	LIBERVANT 7.5MG BUCCAL FILM	13
LEVEMIR 100UNIT/ML INJ	22	<i>levothyroxine sodium 112mcg tab</i>	87	<i>lidocaine 4% topical soln</i>	62
LEVEMIR 100UNIT/ML PEN INJ	22	<i>levothyroxine sodium 125mcg tab</i>	87	<i>lidocaine 5% ointment</i>	62
<i>levetiracetam 1000mg tab</i>	15	<i>levothyroxine sodium 137mcg tab</i>	87	<i>lidocaine 5% patch</i>	62
<i>levetiracetam 100mg/ml oral soln</i>	15	<i>levothyroxine sodium 150mcg tab</i>	87	<i>lidocaine viscous 2% topical soln</i>	77
<i>levetiracetam 250mg tab</i>	15	<i>levothyroxine sodium 175mcg tab</i>	87	<i>lidocaine/prilocaine 2.5-2.5% cream</i>	62
<i>levetiracetam 500mg er tab</i>	15	<i>levothyroxine sodium 200mcg tab</i>	87	<i>lidocan 5% patch</i>	62
<i>levetiracetam 500mg tab</i>	15	<i>levothyroxine sodium 25mcg tab</i>	87	<i>linezolid 20mg/ml susp</i>	31
<i>levetiracetam 750mg er tab</i>	15	<i>levothyroxine sodium 300mcg tab</i>	87	<i>linezolid 2mg/ml inj</i>	31
		<i>levothyroxine sodium 50mcg tab</i>	87	<i>linezolid 600mg tab</i>	31
				LINZESS 145MCG CAP	68
				LINZESS 290MCG CAP	68
				LINZESS 72MCG CAP	68
				<i>liothyronine sodium 25mcg tab</i>	87
				<i>liothyronine sodium 50mcg tab</i>	87

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>liothyronine sodium 5mcg tab</i>	87	LOKELMA 5GM POWDER FOR ORAL SUSP	76	LUMIGAN 0.01% OPHTH SOLN	80
<i>lisdexamfetamine dimesylate 10mg cap</i>	1	LONSURF 6.14-15MG TAB	35	LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	83
<i>lisdexamfetamine dimesylate 20mg cap</i>	1	LONSURF 8.19-20MG TAB	35	LUMRYZ 6GM GRANULES FOR ORAL SUSP	83
<i>lisdexamfetamine dimesylate 30mg cap</i>	1	<i>loperamide 2mg cap</i>	23	LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	83
<i>lisdexamfetamine dimesylate 40mg cap</i>	1	<i>lopinavir/ritonavir 100-25mg tab</i>	46	LUMRYZ 9GM GRANULES FOR ORAL SUSP	83
<i>lisdexamfetamine dimesylate 50mg cap</i>	1	<i>lopinavir/ritonavir 200-50mg tab</i>	46	LUPKYNIS 7.9MG CAP	76
<i>lisdexamfetamine dimesylate 60mg cap</i>	1	<i>lopinavir/ritonavir 80-20mg/ml oral soln</i>	46	LUPRON 11.25MG SYRINGE	34
<i>lisdexamfetamine dimesylate 70mg cap</i>	1	<i>lorazepam 0.5mg tab</i>	8	LUPRON 22.5MG SYRINGE	34
<i>lisinopril 10mg tab</i>	27	<i>lorazepam 1mg tab</i>	8	LUPRON 3.75MG SYRINGE	34
<i>lisinopril 2.5mg tab</i>	27	<i>lorazepam 2mg tab</i>	8	LUPRON 30MG SYRINGE	34
<i>lisinopril 20mg tab</i>	27	<i>lorazepam 2mg/ml oral soln</i>	9	LUPRON 45MG SYRINGE	34
<i>lisinopril 30mg tab</i>	27	LORBRENA 100MG TAB	37	LUPRON 7.5MG SYRINGE (NON-PEDIATRIC)	34
<i>lisinopril 40mg tab</i>	27	LORBRENA 25MG TAB	37	<i>lurasidone 120mg tab</i>	41
<i>lisinopril 5mg tab</i>	27	<i>loryna 28 day pack</i>	55	<i>lurasidone 20mg tab</i>	41
LITFULO 50MG CAP	62	<i>losartan potassium 100mg tab</i>	27	<i>lurasidone 40mg tab</i>	41
<i>lithium carbonate 150mg cap</i>	41	<i>losartan potassium 25mg tab</i>	27	<i>lurasidone 60mg tab</i>	41
<i>lithium carbonate 300mg cap</i>	41	<i>losartan potassium 50mg tab</i>	27	<i>lutera 28 day pack</i>	55
<i>lithium carbonate 300mg er tab</i>	41	<i>loteprednol etabonate 0.5% ophth gel</i>	80	<i>lyleq 28 day 0.35mg pack</i>	57
<i>lithium carbonate 300mg er tab</i>	41	<i>loteprednol etabonate 0.5% ophth susp</i>	80	<i>lyllana 0.025mg/24hr patch</i>	67
LITHIUM CARBONATE 600MG CAP	41	<i>lovastatin 10mg tab</i>	26	<i>lyllana 0.0375mg/24hr patch</i>	67
<i>lithium citrate 60mg/ml oral soln</i>	41	<i>lovastatin 20mg tab</i>	26	<i>lyllana 0.05mg/24hr patch</i>	67
LITHOSTAT 250MG TAB	69	<i>lovastatin 40mg tab</i>	26		
LIVTENCITY 200MG TAE	47	<i>low-ogestrel 28 day pack</i>	55		
<i>loestrin fe 1/20 28 day pack</i>	55	<i>loxapine 10mg cap</i>	43		
LOKELMA 10GM POWDER FOR ORAL SUSP	76	<i>loxapine 25mg cap</i>	43		
		<i>loxapine 50mg cap</i>	43		
		<i>loxapine 5mg cap</i>	43		
		<i>lubiprostone 24mcg cap</i>	68		
		<i>lubiprostone 8mcg cap</i>	68		
		LUMAKRAS 120MG TAB	37		
		LUMAKRAS 320MG TAB	37		

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

ALPHABETICAL LISTING OF DRUGS

<i>lyllana 0.075mg/24hr patch</i>	67	MAVENCLAD 8 TABLET PACK 10MG	84	<i>memantine 14mg er cap</i>	83
<i>lyllana 0.1mg/24hr patch</i>	67	MAVENCLAD 9 TABLET PACK 10MG	85	<i>memantine 21mg er cap</i>	83
LYNPARZA 100MG TAB	37	MAVENCLAD 9 TABLET PACK 10MG	85	<i>memantine 28mg er cap</i>	83
LYNPARZA 150MG TAB	37	MAVYRET 100-40MG TAB	48	<i>memantine 2mg/ml oral soln</i>	83
LYSODREN 500MG TAB	34	MAVYRET 50-20MG ORAL PELLETT	48	<i>memantine 5/10mg titration pack</i>	83
LYTGOBI 4MG TAB PACK (12MG DAILY DOSE)	37	MAYZENT 0.25MG STARTER PACK	85	<i>memantine 5mg tab</i>	83
LYTGOBI 4MG TAB PACK (16MG DAILY DOSE)	37	MAYZENT 0.25MG TAB	85	<i>memantine 7mg er cap</i>	83
LYTGOBI 4MG TAB PACK (20MG DAILY DOSE)	37	MAYZENT 1MG TAB	85	MENACTRA INJ	90
LYUMJEV 100UNIT/ML INJ	22	MAYZENT 2MG TAB	85	MENQUADFI INJ	90
LYUMJEV 100UNIT/ML PEN INJ	22	MAYZENT STARTER PACK (7)	85	MENVEO INJ	90
LYUMJEV 200UNIT/ML PEN INJ	22	<i>meclizine 12.5mg tab</i>	23	<i>mercaptopurine 50mg tab</i>	33
<i>lyza 0.35mg pack</i>	57	<i>meclizine 25mg tab</i>	23	<i>meropenem 1000mg inj</i>	31
M		<i>medroxyprogesterone acetate 10mg tab</i>	82	<i>meropenem 500mg inj</i>	31
<i>magnesium sulfate 500mg/ml inj</i>	74	<i>medroxyprogesterone acetate 150mg/ml inj</i>	57	<i>mesalamine 1000mg rectal supp</i>	68
<i>magnesium sulfate 500mg/ml syringe</i>	74	<i>medroxyprogesterone acetate 150mg/ml syringe</i>	57	<i>mesalamine 375mg er cap</i>	68
<i>malathion 0.5% lotion</i>	62	<i>medroxyprogesterone acetate 2.5mg tab</i>	83	<i>mesalamine 66.7mg/ml enema</i>	68
<i>maraviroc 150mg tab</i>	46	<i>medroxyprogesterone acetate 5mg tab</i>	83	MESNEX 400MG TAB	39
<i>maraviroc 300mg tab</i>	46	<i>mefloquine 250mg tab</i>	32	<i>metaxalone 800mg tab</i>	77
<i>marlissa 28 day pack</i>	55	MEGESTROL ACETATE 125MG/ML SUSP	83	<i>metformin 1000mg tab</i>	21
MARPLAN 10MG TAB	17	<i>megestrol acetate 20mg tab</i>	34	<i>metformin 500mg er tab</i>	21
MATULANE 50MG CAP	39	<i>megestrol acetate 40mg tab</i>	34	<i>metformin 500mg tab</i>	21
MAVENCLAD 10 TABLET PACK 10MG	84	<i>megestrol acetate 40mg/ml susp</i>	34	<i>metformin 750mg er tab</i>	21
MAVENCLAD 4 TABLET PACK 10MG	84	MEKINIST 0.05MG/ML ORAL SOLN	37	<i>metformin 850mg tab</i>	21
MAVENCLAD 5 TABLET PACK 10MG	84	MEKINIST 0.5MG TAB	37	<i>methadone 10mg tab</i>	5
MAVENCLAD 6 TABLET PACK 10MG	84	MEKINIST 2MG TAB	37	<i>methadone 5mg tab</i>	5
MAVENCLAD 7 TABLET PACK 10MG	84	MEKTOVI 15MG TAB	37	<i>methazolamide 25mg tab</i>	63
		<i>meloxicam 15mg tab</i>	4	<i>methazolamide 50mg tab</i>	63
		<i>meloxicam 7.5mg tab</i>	4	<i>methenamine hippurate 1000mg tab</i>	31
		<i>memantine 10mg tab</i>	83	<i>methimazole 10mg tab</i>	87
				<i>methimazole 5mg tab</i>	87
				<i>methocarbamol 500mg tab</i>	77
				<i>methocarbamol 750mg tab</i>	77
				<i>methotrexate 2.5mg tab</i>	33
				<i>methotrexate 25mg/ml inj</i>	33
				<i>methotrexate 50mg/2ml inj</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

METHOXSALLEN 10MG CAP	59	<i>methylphenidate 54mg er tab</i>	2	<i>metronidazole 0.75% gel</i>	62
<i>methsuximide 300mg cap</i>	16	<i>methylphenidate 54mg sr tab</i>	2	<i>metronidazole 0.75% vaginal gel</i>	91
<i>methylphenidate 10mg cr cap</i>	2	<i>methylphenidate 5mg tab</i>	2	<i>metronidazole 1% gel</i>	62
<i>methylphenidate 10mg er tab</i>	2	<i>methylphenidate 60mg cr cap</i>	2	<i>metronidazole 250mg tab</i>	30
<i>methylphenidate 10mg la cap</i>	2	<i>methylprednisolone 16mg tab</i>	57	<i>metronidazole 500mg tab</i>	30
<i>methylphenidate 10mg tab</i>	2	<i>methylprednisolone 32mg tab</i>	57	<i>metronidazole 5mg/ml inj</i>	30
<i>methylphenidate 18mg ER osmotic tab</i>	2	<i>methylprednisolone 4mg pack</i>	57	<i>metyrosine 250mg cap</i>	27
<i>methylphenidate 1mg/ml oral soln</i>	2	<i>methylprednisolone 4mg tab</i>	57	<i>mexiletine 150mg cap</i>	9
<i>methylphenidate 20mg cr cap</i>	2	<i>methylprednisolone 8mg tab</i>	57	<i>mexiletine 200mg cap</i>	9
<i>methylphenidate 20mg er tab</i>	2	<i>metoclopramide 10mg tab</i>	68	<i>mexiletine 250mg cap</i>	9
<i>methylphenidate 20mg la cap</i>	2	<i>metoclopramide 1mg/ml oral soln</i>	68	<i>mibelas 24 fe chewable 28 day pack</i>	55
<i>methylphenidate 20mg tab</i>	2	<i>metoclopramide 5mg tab</i>	68	<i>micafungin sodium 100mg inj</i>	24
<i>methylphenidate 27mg er tab</i>	2	<i>metolazone 10mg tab</i>	63	<i>micafungin sodium 50mg inj</i>	24
<i>methylphenidate 27mg sr tab</i>	2	<i>metolazone 2.5mg tab</i>	63	<i>microgestin 1.5/30 21 day pack</i>	55
<i>methylphenidate 2mg/ml oral soln</i>	2	<i>metolazone 5mg tab</i>	64	<i>microgestin 1/20 21 day pack</i>	55
<i>methylphenidate 30mg cr cap</i>	2	<i>metoprolol succinate 100mg er tab</i>	49	<i>microgestin 24 fe 28 day pack</i>	56
<i>methylphenidate 30mg la cap</i>	2	<i>metoprolol succinate 200mg er tab</i>	49	<i>microgestin fe 1.5/30 28 day pack</i>	56
<i>methylphenidate 36mg er tab</i>	2	<i>metoprolol succinate 25mg er tab</i>	49	<i>microgestin fe 1/20 28 day pack</i>	56
<i>methylphenidate 36mg sr tab</i>	2	<i>metoprolol succinate 50mg er tab</i>	49	<i>midodrine 10mg tab</i>	91
<i>methylphenidate 40mg cr cap</i>	2	<i>metoprolol tartrate 100mg tab</i>	49	<i>midodrine 2.5mg tab</i>	91
<i>methylphenidate 40mg la cap</i>	2	<i>metoprolol tartrate 25mg tab</i>	49	<i>midodrine 5mg tab</i>	91
<i>methylphenidate 50mg cr cap</i>	2	<i>metoprolol tartrate 37.5mg tab</i>	49	<i>mifepristone 300mg tab</i>	21
		<i>metoprolol tartrate 50mg tab</i>	49	MIGLITOL 100MG TAB	20
		<i>metoprolol tartrate 75mg tab</i>	49	<i>miglitol 25mg tab</i>	20
		<i>metronidazole 0.75% cream</i>	62	MIGLITOL 50MG TAB	20
				<i>miglustat 100mg cap</i>	70
				<i>mili 28 day pack</i>	56
				<i>mimvey pack</i>	66
				<i>minocycline 100mg cap</i>	86
				<i>minocycline 50mg cap</i>	86
				<i>minocycline 75mg cap</i>	86
				<i>minoxidil 10mg tab</i>	30
				<i>minoxidil 2.5mg tab</i>	30
				<i>mirtazapine 15mg odt</i>	17
				<i>mirtazapine 15mg 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

<i>mirtazapine 30mg odt</i>	17	MORPHINE SULFATE	6	<i>nabumetone 750mg tab</i>	4
<i>mirtazapine 30mg tab</i>	17	4MG/ML ORAL SOLN		<i>nadolol 20mg tab</i>	49
<i>mirtazapine 45mg odt</i>	17	<i>morphine sulfate 60mg er</i>	6	<i>nadolol 40mg tab</i>	49
<i>mirtazapine 45mg tab</i>	17	<i>tab</i>		<i>nadolol 80mg tab</i>	49
<i>mirtazapine 7.5mg tab</i>	17	MOUNJARO	21	<i>nafacillin 100mg/ml inj</i>	82
<i>misoprostol 100mcg tab</i>	89	10MG/0.5ML		<i>nafacillin 1gm inj</i>	82
<i>misoprostol 200mcg tab</i>	89	AUTO-INJECTOR		<i>nafacillin 2gm inj</i>	82
M-M-R II INJ	90	MOUNJARO	21	NALOXONE 0.4MG/ML	23
<i>modafinil 100mg tab</i>	2	12.5MG/0.5ML		CARTRIDGE	
<i>modafinil 200mg tab</i>	2	AUTO-INJECTOR		<i>naloxone 0.4mg/ml inj</i>	23
<i>moexipril 15mg tab</i>	27	MOUNJARO	21	<i>naloxone 1mg/ml syringe</i>	23
<i>moexipril 7.5mg tab</i>	27	15MG/0.5ML		<i>naloxone 40mg/ml nasal</i>	23
MOLINDONE 10MG TAB	44	AUTO-INJECTOR		<i>spray</i>	
MOLINDONE 25MG TAB	44	MOUNJARO	21	<i>naltrexone 50mg tab</i>	23
MOLINDONE 5MG TAB	44	2.5MG/0.5ML		<i>naproxen 250mg tab</i>	4
<i>mometasone furoate 0.1%</i>	61	AUTO-INJECTOR		<i>naproxen 375mg dr tab</i>	4
<i>cream</i>		MOUNJARO 5MG/0.5ML	21	<i>naproxen 375mg tab</i>	4
<i>mometasone furoate 0.1%</i>	61	AUTO-INJECTOR		<i>naproxen 500mg tab</i>	4
<i>lotion</i>		MOUNJARO	21	<i>naproxen sodium 275mg</i>	4
<i>mometasone furoate 0.1%</i>	61	7.5MG/0.5ML		<i>tab</i>	
<i>ointment</i>		AUTO-INJECTOR		<i>naproxen sodium 550mg</i>	4
<i>montelukast 10mg tab</i>	10	MOVANTIK 12.5MG TAB	68	<i>tab</i>	
<i>montelukast 4mg chew</i>	10	MOVANTIK 25MG TAB	68	<i>naratriptan 1mg tab</i>	73
<i>tab</i>		MOXIFLOXACIN	67	<i>naratriptan 2.5mg tab</i>	73
<i>montelukast 4mg</i>	10	1.6MG/ML INJ		NATACYN 5% OPHTH	79
<i>granules</i>		<i>moxifloxacin 400mg tab</i>	67	SUSP	
<i>montelukast 5mg chew</i>	10	MULTAQ 400MG TAB	9	<i>nateglinide 120mg tab</i>	22
<i>tab</i>		<i>mupirocin 2% ointment</i>	59	<i>nateglinide 60mg tab</i>	22
<i>morphine sulfate 100mg</i>	5	<i>mycophenolate mofetil</i>	76	NAYZILAM 5MG/0.1ML	13
<i>er tab</i>		<i>200mg/ml susp</i>		NASAL SPRAY	
<i>morphine sulfate 15mg er</i>	5	<i>mycophenolate mofetil</i>	76	<i>necon 0.5/35 28 day pack</i>	56
<i>tab</i>		<i>250mg cap</i>		NEEDLES INSULIN	73
MORPHINE SULFATE	5	<i>mycophenolate mofetil</i>	76	DISP. SAFETY	
15MG TAB		<i>500mg tab</i>		NEFAZODONE 100MG	18
<i>morphine sulfate 200mg</i>	5	<i>mycophenolic acid 180mg</i>	76	TAB	
<i>er tab</i>		<i>dr tab</i>		NEFAZODONE 150MG	18
<i>morphine sulfate 20mg/ml</i>	6	<i>mycophenolic acid 360mg</i>	76	TAB	
<i>oral soln</i>		<i>dr tab</i>		NEFAZODONE 200MG	18
MORPHINE SULFATE	6	MYRBETRIQ 25MG ER	89	TAB	
2MG/ML ORAL SOLN		TAB		NEFAZODONE 250MG	18
<i>morphine sulfate 30mg er</i>	6	MYRBETRIQ 50MG ER	89	TAB	
<i>tab</i>		TAB		NEFAZODONE 50MG	18
MORPHINE SULFATE	6	<hr/>		TAB	
30MG TAB		N			
		<i>nabumetone 500mg 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>neomycin sulfate 500mg tab</i>	3	<i>nifedipine 30mg er tab</i>	50	NIVESTYM	71
<i>neomycin/bacitracin/polymyxin ophthalmic ointment 5mg-400unit-10000unit</i>	79	<i>nifedipine 30mg osmotic er tab</i>	50	300MCG/0.5ML SYRINGE	
NEOMYCIN/POLYMYXIN N B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	79	<i>nifedipine 60mg er tab</i>	50	NIVESTYM 300MCG/ML INJ	71
<i>neomycin/polymyxin/bacitracin/hydrocortisone ophthalmic 1% ointment</i>	80	<i>nifedipine 60mg osmotic er tab</i>	50	NIVESTYM	71
<i>neomycin/polymyxin/dexamethasone 0.1% ophthalmic suspension</i>	80	<i>nifedipine 90mg er tab</i>	50	480MCG/0.8ML SYRINGE	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% ophthalmic solution</i>	81	<i>nifedipine 90mg osmotic er tab</i>	50	NIVESTYM	71
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% ophthalmic suspension</i>	81	<i>nikki 28 day pack</i>	56	480MCG/1.6ML INJ	
<i>neo-polycin hc ophthalmic ointment</i>	80	<i>nilutamide 150mg tab</i>	34	<i>nora-be 28 day 0.35mg pack</i>	57
<i>neo-polycin ophthalmic ointment</i>	79	<i>nimodipine 30mg cap</i>	50	NORDITROPIN	64
NERLYNX 40MG TAB	37	NINLARO 2.3MG CAP	37	10MG/1.5ML PEN INJ	
NEVIRAPINE 10MG/ML SUSP	46	NINLARO 3MG CAP	37	NORDITROPIN	64
<i>nevirapine 200mg tab</i>	46	NINLARO 4MG CAP	37	15MG/1.5ML PEN INJ	
<i>nevirapine 400mg er tab</i>	46	<i>nitazoxanide 500mg tab</i>	31	NORDITROPIN	64
NEXLETOL 180MG TAB	25	<i>nitisinone 10mg cap</i>	65	30MG/3ML PEN INJ	
NEXLIZET 180-10MG TAB	25	<i>nitisinone 20mg cap</i>	65	NORDITROPIN	64
<i>niacin 1000mg er tab</i>	26	<i>nitisinone 2mg cap</i>	65	5MG/1.5ML PEN INJ	
<i>niacin 500mg er tab</i>	26	<i>nitisinone 5mg cap</i>	65	<i>norethindrone 0.35mg pack</i>	57
<i>niacin 750mg er tab</i>	26	NITRO-BID 2% OINTMENT	8	<i>norethindrone acetate 5mg tab</i>	83
<i>nicardipine 20mg cap</i>	50	<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	31	<i>nortrel 0.5/35 28 day pack</i>	56
<i>nicardipine 30mg cap</i>	50	<i>nitrofurantoin macrocrystals 100mg cap</i>	32	<i>nortrel 1/35 21 day pack</i>	56
NICOTROL 10MG INH SOLN	85	<i>nitrofurantoin macrocrystals 50mg cap</i>	32	<i>nortrel 1/35 28 day pack</i>	56
NICOTROL 10MG/ML NASAL INHALER	85	<i>nitrofurantoin nitroglycerin 0.1mg/hr patch</i>	8	<i>nortrel 7/7/7 28 day pack</i>	56
		<i>nitrofurantoin nitroglycerin 0.2mg/hr patch</i>	8	<i>nortriptyline 10mg cap</i>	19
		<i>nitroglycerin 0.3mg sl tab</i>	8	<i>nortriptyline 25mg cap</i>	19
		<i>nitroglycerin 0.4% rectal ointment</i>	7	<i>nortriptyline 2mg/ml oral soln</i>	20
		<i>nitroglycerin 0.4mg sl tab</i>	8	<i>nortriptyline 50mg cap</i>	20
		<i>nitroglycerin 0.4mg/act spray</i>	8	<i>nortriptyline 75mg cap</i>	20
		<i>nitroglycerin 0.4mg/hr patch</i>	8	NORVIR 100MG ORAL POWDER	
		<i>nitroglycerin 0.6mg sl tab</i>	8	NOURIANZ 20MG TAB	39
		<i>nitroglycerin 0.6mg/hr patch</i>	8	NOURIANZ 40MG TAB	39
				NUBEQA 300MG TAB	34
				NUCALA 100MG INJ	9
				NUCALA 100MG/ML AUTO-INJECTOR	9

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

NUCALA 100MG/ML SYRINGE	9	<i>octreotide 0.05mg/ml inj</i>	66	<i>omeprazole 40mg dr cap</i>	89
NUCALA 40MG/0.4ML SYRINGE	9	<i>octreotide 0.1mg/ml inj</i>	66	OMNITROPE 10MG/1.5ML CARTRIDGE	64
NUEDEXTA 20-10MG CAP	85	<i>octreotide 0.2mg/ml inj</i>	66	OMNITROPE 5.8MG INJ	64
NUPLAZID 10MG TAB	41	<i>octreotide 0.5mg/ml inj</i>	66	OMNITROPE 5MG/1.5ML CARTRIDGE	64
NUPLAZID 34MG CAP	41	<i>octreotide 1mg/ml inj</i>	66	<i>ondansetron 0.8mg/ml oral soln</i>	23
NUTRILIPID 20GM/100ML INJ	78	ODEFSEY 200-25-25MG TAB	46	<i>ondansetron 4mg odt</i>	23
NUZYRA 150MG TAB	86	ODOMZO 200MG CAP	34	<i>ondansetron 4mg tab</i>	23
<i>nyamyc 100000unit/gm topical powder</i>	59	OFEV 100MG CAP	86	<i>ondansetron 8mg odt</i>	23
<i>nylia 1/35 28 day pack</i>	56	OFEV 150MG CAP	86	<i>ondansetron 8mg tab</i>	23
<i>nylia 7/7/7 28 day pack</i>	56	<i>ofloxacin 0.3% ophth soln</i>	79	ONUREG 200MG TAB	33
<i>nymyo 28 day pack</i>	56	<i>ofloxacin 0.3% otic soln</i>	80	ONUREG 300MG TAB	33
<i>nystatin 100000 unit/gm ointment</i>	59	<i>ofloxacin 400mg tab</i>	67	OPSUMIT 10MG TAB	52
<i>nystatin 100000unit/gm topical powder</i>	59	OGSIVEO 50MG TAB	37	OPVEE 2.7MG/0.1ML NASAL SPRAY	23
<i>nystatin 100000unit/ml cream</i>	59	OJJAARA 100MG TAB	37	ORENCIA 125MG/ML AUTO-INJECTOR	5
<i>nystatin 100000unit/ml susp</i>	77	OJJAARA 150MG TAB	37	ORENCIA 125MG/ML SYRINGE	5
<i>nystatin 500000unit tab</i>	24	OJJAARA 200MG TAB	37	ORENCIA 50MG/0.4ML SYRINGE	5
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	59	<i>olanzapine 10mg inj</i>	43	ORENCIA 87.5MG/0.7ML SYRINGE	5
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	59	<i>olanzapine 10mg odt</i>	43	ORENITRAM 0.125MG ER TAB	51
<i>nystop 100000unit/gm topical powder</i>	59	<i>olanzapine 10mg tab</i>	43	ORENITRAM 0.25MG ER TAB	51
NYVEPRIA 6MG/0.6ML SYRINGE	71	<i>olanzapine 15mg odt</i>	43	ORENITRAM 1MG ER TAB	51
O		<i>olanzapine 15mg tab</i>	43	ORENITRAM 2.5MG ER TAB	51
OICALIVA 10MG TAB	67	<i>olanzapine 2.5mg tab</i>	43	ORENITRAM 5MG ER TAB	51
OICALIVA 5MG TAB	67	<i>olanzapine 20mg odt</i>	43	ORENITRAM ER TAB	51
<i>ocella 28 day pack</i>	56	<i>olanzapine 20mg tab</i>	43	MONTH 1 TITRATION KIT PACK	
OCTAGAM 1GM/20ML INJ	81	<i>olanzapine 25mg odt</i>	43	ORENITRAM ER TAB	51
OCTAGAM 2GM/20ML INJ	81	<i>olanzapine 5mg odt</i>	43	MONTH 2 TITRATION KIT PACK	
		<i>olanzapine 5mg tab</i>	43		
		<i>olanzapine 7.5mg tab</i>	43		
		<i>olmesartan medoxomil 20mg tab</i>	27		
		<i>olmesartan medoxomil 40mg tab</i>	27		
		<i>olmesartan medoxomil 5mg tab</i>	28		
		<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	77		
		OLUMIANT 1MG TAB	3		
		OLUMIANT 2MG TAB	3		
		OLUMIANT 4MG TAB	3		
		<i>omega-3 acid ethyl esters (usp) 1000mg cap</i>	25		
		<i>omeprazole 10mg dr cap</i>	89		
		<i>omeprazole 20mg dr cap</i>	89		

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

ORENITRAM ER TAB	51	<i>oxcarbazepine 60mg/ml</i>	15	<i>paliperidone 6mg er tab</i>	42
MONTH 3 TITRATION		<i>susp</i>		<i>paliperidone 9mg er tab</i>	42
KIT PACK		OXERVATE 0.002%	79	PALYNZIQ 10MG/0.5ML	65
ORFADIN 4MG/ML SUSP	65	OPHTH SOLN		SYRINGE	
ORGOVYX 120MG TAB	34	<i>oxybutynin chloride 10mg</i>	89	PALYNZIQ 2.5MG/0.5ML	65
ORKAMBI 125-100MG	86	<i>er tab</i>		SYRINGE	
GRANULES		<i>oxybutynin chloride 15mg</i>	89	PALYNZIQ 20MG/ML	65
ORKAMBI 125-100MG	86	<i>er tab</i>		SYRINGE	
TAB		<i>oxybutynin chloride</i>	89	PANRETIN 0.1% GEL	59
ORKAMBI 125-200MG	86	<i>1mg/ml oral soln</i>		<i>pantoprazole 20mg dr tab</i>	89
TAB		<i>oxybutynin chloride 5mg</i>	89	<i>pantoprazole 40mg dr tab</i>	89
ORKAMBI 188-150MG	86	<i>er tab</i>		PANZYGA 10GM/100ML	81
GRANULES		<i>oxybutynin chloride 5mg</i>	89	INJ	
ORKAMBI 94-75MG	86	<i>tab</i>		PANZYGA 1GM/10ML	81
GRANULES		<i>oxycodone 10mg tab</i>	6	INJ	
ORLADEYO 110MG CAP	70	<i>oxycodone 15mg tab</i>	6	PANZYGA 2.5GM/25ML	81
ORLADEYO 150MG CAP	70	<i>oxycodone 1mg/ml oral</i>	6	INJ	
<i>orphenadrine citrate</i>	77	<i>soln</i>		PANZYGA 20GM/200ML	81
<i>100mg er tab</i>		<i>oxycodone 20mg tab</i>	6	INJ	
ORSERDU 345MG TAB	34	<i>oxycodone 20mg/ml oral</i>	6	PANZYGA 30GM/300ML	81
ORSERDU 86MG TAB	34	<i>soln</i>		INJ	
<i>oseltamivir 30mg cap</i>	48	<i>oxycodone 30mg tab</i>	6	PANZYGA 5GM/50ML	81
<i>oseltamivir 45mg cap</i>	48	<i>oxycodone 5mg tab</i>	6	INJ	
<i>oseltamivir 6mg/ml susp</i>	48	<i>oxycodone/acetaminophe</i>	6	<i>paricalcitol 1mcg cap</i>	65
<i>oseltamivir 75mg cap</i>	48	<i>n 10-325mg tab</i>		<i>paricalcitol 2mcg cap</i>	65
OSPHENA 60MG TAB	65	<i>oxycodone/acetaminophe</i>	6	<i>paricalcitol 4mcg cap</i>	65
OTEZLA 28-DAY	5	<i>n 2.5-325mg tab</i>		<i>paroxetine 10mg tab</i>	18
STARTER PACK		<i>oxycodone/acetaminophe</i>	6	<i>paroxetine 12.5mg er tab</i>	18
OTEZLA 30MG TAB	5	<i>n 5-325mg tab</i>		<i>paroxetine 20mg tab</i>	18
<i>oxacillin 100mg/ml inj</i>	82	OXYCODONE/ACETAMI	6	<i>paroxetine 25mg er tab</i>	18
<i>oxacillin 1gm inj</i>	82	NOPHEN 5-325MG/5ML		<i>paroxetine 2mg/ml susp</i>	18
OXACILLIN 20MG/ML	82	<i>oxycodone/acetaminophe</i>	6	<i>paroxetine 30mg tab</i>	18
INJ		<i>n 7.5-325mg tab</i>		<i>paroxetine 37.5mg er tab</i>	18
<i>oxacillin 2gm inj</i>	82	OZEMPIC 2.68MG/ML	21	<i>paroxetine 40mg tab</i>	18
OXACILLIN 40MG/ML	82	PEN INJ		PAXLOVID	47
INJ		OZEMPIC 2MG/3ML	21	150MG/100MG TAB	
OXBRYTA 300MG TAB	70	PEN INJ		PACK (20)	
OXBRYTA 300MG TAB	70	OZEMPIC 4MG/3ML	21	PAXLOVID	47
FOR ORAL SUSP		PEN INJ		150MG/100MG TAB	
OXBRYTA 500MG TAB	70	P		PACK (30)	
<i>oxcarbazepine 150mg tab</i>	15	<i>pacerone 200mg tab</i>	9	<i>pazopanib 200mg tab</i>	37
<i>oxcarbazepine 300mg tab</i>	15	<i>pacerone 400mg tab</i>	9	PEDIARIX SYRINGE	88
<i>oxcarbazepine 600mg tab</i>	15	<i>paliperidone 1.5mg er tab</i>	42	PEDVAXHIB	90
		<i>paliperidone 3mg er tab</i>	42	7.5MCG/0.5ML 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

<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	72	<i>pentamidine isethionate 50mg/ml inh soln</i>	30	<i>phenytoin sodium 300mg er cap</i>	16
<i>peg 3350/electrolyte oral soln</i>	72	<i>pentoxifylline 400mg er tab</i>	70	PHOSPHOLINE IODIDE 0.125% OPHTH SOLN	79
<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	72	PERINDOPRIL	27	PIFELTRO 100MG TAB	46
PEGASYS 180MCG/0.5ML SYRINGE	48	ERBUMINE 2MG TAB		<i>pilocarpine 1% ophth soln</i>	79
PEGASYS 180MCG/ML INJ	48	<i>perindopril erbumine 4mg tab</i>	27	<i>pilocarpine 2% ophth soln</i>	79
PEMAZYRE 13.5MG TAB	37	PERINDOPRIL	27	<i>pilocarpine 4% ophth soln</i>	79
PEMAZYRE 4.5MG TAB	37	ERBUMINE 8MG TAB		<i>pilocarpine 5mg tab</i>	77
PEMAZYRE 9MG TAB	37	<i>periogard 0.12% mouthwash</i>	77	<i>pilocarpine 7.5mg tab</i>	77
PENBRAYA INJ	90	<i>permethrin 5% cream</i>	62	<i>pilocarpine 1% cream</i>	62
<i>penciclovir 1% cream</i>	60	<i>perphenazine 16mg tab</i>	44	PIMOZIDE 1MG TAB	85
<i>penicillamine 250mg tab</i>	75	<i>perphenazine 2mg tab</i>	44	PIMOZIDE 2MG TAB	85
<i>penicillin g potassium 1000000unit/ml inj</i>	82	<i>perphenazine 4mg tab</i>	44	<i>pimtrea tab pack</i>	56
PENICILLIN G POTASSIUM 40000UNIT/ML INJ	82	<i>perphenazine 8mg tab</i>	44	<i>pindolol 10mg tab</i>	49
PENICILLIN G POTASSIUM 60000UNIT/ML INJ	82	PERSERIS 120MG SYRINGE	42	<i>pindolol 5mg tab</i>	49
PENICILLIN G SODIUM 100000UNIT/ML INJ	82	PERSERIS 90MG SYRINGE	42	<i>pioglitazone 15mg tab</i>	22
<i>penicillin v potassium 250mg tab</i>	82	PHEBURANE 483MG/GM ORAL PELLET	65	<i>pioglitazone 30mg tab</i>	22
PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN	82	PHENELZINE 15MG TAB	17	<i>pioglitazone 45mg tab</i>	22
<i>penicillin v potassium 500mg tab</i>	82	<i>phenobarbital 100mg tab</i>	71	<i>piperacillin/tazobactam 2000-250mg inj</i>	82
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	82	<i>phenobarbital 15mg tab</i>	71	<i>piperacillin/tazobactam 3000-375mg inj</i>	82
PENTACEL 96-30-68UNIT/ML INJ	88	<i>phenobarbital 16.2mg tab</i>	71	<i>piperacillin/tazobactam 36-4.5gm inj</i>	82
<i>pentamidine isethionate 300mg inj</i>	30	<i>phenobarbital 30mg tab</i>	71	<i>piperacillin/tazobactam 4000-500mg inj</i>	82
		<i>phenobarbital 32.4mg tab</i>	71	PIQRAY 200MG DAILY DOSE PACK	37
		<i>phenobarbital 4mg/ml oral soln</i>	71	PIQRAY 250MG DAILY DOSE PACK	37
		<i>phenobarbital 60mg tab</i>	71	PIQRAY 300MG DAILY DOSE PACK	37
		<i>phenobarbital 64.8mg tab</i>	71	<i>pirfenidone 267mg cap</i>	86
		<i>phenobarbital 97.2mg tab</i>	71	<i>pirfenidone 267mg tab</i>	86
		<i>phenoxybenzamine 10mg cap</i>	27	<i>pirfenidone 801mg tab</i>	86
		<i>phenytoin 25mg/ml susp</i>	16	<i>piroxicam 10mg cap</i>	4
		<i>phenytoin 50mg chew tab</i>	16	<i>piroxicam 20mg cap</i>	4
		<i>phenytoin sodium 100mg er cap</i>	16	PLASMA-LYTE 148 INJ	74
		<i>phenytoin sodium 200mg er cap</i>	16	PLASMA-LYTE A INJ	74

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

ALPHABETICAL LISTING OF DRUGS

PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	85	<i>potassium chloride</i> 20meq powder for oral soln	75	PREDNISOLONE 1% OPHTH SOLN	80
PLEGRIDY 125MCG/0.5ML SYRINGE	85	POTASSIUM CHLORIDE 20MEQ/100ML INJ	75	<i>prednisolone 1mg/ml oral</i> soln	57
<i>plenamine 15% inj</i>	78	<i>potassium chloride</i> 2meq/ml (20ml) inj	75	<i>prednisolone 3mg/ml oral</i> soln	57
PODOFILOX 0.5% TOPICAL SOLN	62	<i>potassium chloride</i> 2meq/ml inj	75	PREDNISOLONE ACETATE 1% OPTH SUSP	80
<i>polycin 0.5-10unit/mg</i> <i>ophth ointment</i>	79	POTASSIUM CHLORIDE 40MEQ/100ML INJ	75	<i>prednisone 10mg tab</i>	57
<i>polymyxin b</i> 250000unit/ml inj	31	<i>potassium chloride 8meq</i> er cap	75	<i>prednisone 1mg tab</i>	58
<i>polymyxin b/trimethoprim</i> 10000 Unit/ML-0.1% <i>ophth soln</i>	79	<i>potassium chloride 8meq</i> er tab	75	PREDNISONE 1MG/ML ORAL SOLN	58
POMALYST 1MG CAP	35	<i>potassium citrate 10meq</i> er tab	69	<i>prednisone 2.5mg tab</i>	58
POMALYST 2MG CAP	35	<i>potassium citrate 15meq</i> er tab	69	<i>prednisone 20mg tab</i>	58
POMALYST 3MG CAP	35	<i>potassium citrate 5meq er</i> tab	69	<i>prednisone 50mg tab</i>	58
POMALYST 4MG CAP	35	POTALUENT 150MG/ML AUTO-INJECTOR	26	<i>prednisone 5mg tab</i>	58
<i>portia 28 day pack</i>	56	POTALUENT 75MG/ML AUTO-INJECTOR	26	<i>pregabalin 100mg cap</i>	15
<i>posaconazole 100mg dr</i> tab	24	<i>pramipexole 0.125mg tab</i>	40	<i>pregabalin 150mg cap</i>	15
<i>posaconazole 40mg/ml</i> susp	24	<i>pramipexole 0.25mg tab</i>	40	<i>pregabalin 200mg cap</i>	15
<i>potassium chloride</i> 1.33meq/ml oral soln	74	<i>pramipexole 0.5mg tab</i>	40	<i>pregabalin 20mg/ml oral</i> soln	15
<i>potassium chloride</i> 10meq er cap	75	<i>pramipexole 0.75mg tab</i>	40	<i>pregabalin 225mg cap</i>	15
<i>potassium chloride</i> 10meq er tab	75	<i>pramipexole 1.5mg tab</i>	40	<i>pregabalin 25mg cap</i>	15
<i>potassium chloride</i> 10meq micro er tab	75	<i>pramipexole 1mg tab</i>	40	<i>pregabalin 300mg cap</i>	15
POTASSIUM CHLORIDE 10MEQ/100ML INJ	75	<i>prasugrel 10mg tab</i>	70	<i>pregabalin 50mg cap</i>	15
<i>potassium chloride</i> 15meq micro er tab	75	<i>pravastatin sodium 10mg</i> tab	26	<i>pregabalin 75mg cap</i>	15
<i>potassium chloride</i> 2.67meq/ml oral soln	75	<i>pravastatin sodium 20mg</i> tab	26	PREHEVBRIO 10MCG/ML INJ	90
<i>potassium chloride</i> 20meq er tab	75	<i>pravastatin sodium 40mg</i> tab	26	PREMARIN 0.3MG TAB	67
<i>potassium chloride</i> 20meq micro er tab	75	<i>pravastatin sodium 80mg</i> tab	26	PREMARIN 0.45MG TAB	67
		<i>prazosin 1mg cap</i>	28	PREMARIN 0.625MG TAB	67
		<i>prazosin 2mg cap</i>	28	PREMARIN 0.625MG/GM VAGINAL CREAM	91
		<i>prazosin 5mg cap</i>	28	<i>PREMARIN 0.9MG TAB</i>	67
				<i>PREMARIN 1.25MG TAB</i>	67
				PREMASOL 10% INJ	78
				PREMPHASE 28 DAY PACK	66
				PREMPRO 0.3/1.5MG 28 DAY PACK	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

PREMPRO 0.45/1.5MG 28 DAY PACK	66	PROLENSA 0.07% OPHTH SOLN	80	<i>propranolol 60mg tab</i>	49
PREMPRO 0.625/2.5MG 28 DAY PACK	66	PROLIA 60MG/ML SYRINGE	64	<i>propranolol 80mg er cap</i>	49
PREMPRO 0.625/5MG 28 DAY PACK	66	PROMACTA 12.5MG POWDER FOR ORAL SUSP	71	<i>propranolol 80mg tab</i>	49
<i>prevalite 4gm powder for oral susp</i>	25	PROMACTA 12.5MG TAB	71	PROPRANOLOL 8MG/ML ORAL SOLN	49
PREVYMIS 240MG TAB	47	PROMACTA 25MG POWDER FOR ORAL SUSP	71	<i>propylthiouracil 50mg tab</i>	87
PREVYMIS 480MG TAB	47	PROMACTA 25MG TAB	71	PROQUAD INJ	90
PREZCOBIX 150-800MG TAB	47	PROMACTA 50MG TAB	71	PROSOL 20% INJ	78
PREZISTA 100MG/ML SUSP	47	PROMACTA 75MG TAB	71	<i>protriptyline 10mg tab</i>	20
PREZISTA 150MG TAB	47	<i>promethazine 1.25mg/ml oral soln</i>	25	<i>protriptyline 5mg tab</i>	20
PREZISTA 75MG TAB	47	<i>promethazine 12.5mg rectal supp</i>	25	PULMOZYME 1MG/ML INH SOLN	86
PRIFTIN 150MG TAB	32	<i>promethazine 12.5mg tab</i>	25	PURIXAN	33
PRIMAQUINE	32	<i>promethazine 25mg rectal supp</i>	25	2000MG/100ML SUSP	
PHOSPHATE 26.3MG TAB		<i>promethazine 25mg tab</i>	25	<i>pyrazinamide 500mg tab</i>	32
<i>primidone 250mg tab</i>	15	<i>promethazine 50mg tab</i>	25	<i>pyridostigmine bromide 180mg er tab</i>	32
<i>primidone 50mg tab</i>	15	<i>promethegan 25mg rectal supp</i>	25	<i>pyridostigmine bromide 60mg tab</i>	32
PRIORIX INJ	90	<i>propafenone 150mg tab</i>	9	PYRUKYND 20MG TAB (4-WEEK PACK)	70
PRIVIGEN 20GM/200ML INJ	81	<i>propafenone 225mg er cap</i>	9	PYRUKYND	70
<i>probenecid 500mg tab</i>	69	<i>propafenone 225mg tab</i>	9	20MG/50MG TAB TAPER PACK	
<i>prochlorperazine 10mg tab</i>	44	<i>propafenone 300mg tab</i>	9	PYRUKYND 50MG TAB (4-WEEK PACK)	70
<i>prochlorperazine 25mg rectal supp</i>	44	<i>propafenone 325mg er cap</i>	9	PYRUKYND 5MG TAB (4-WEEK PACK)	70
<i>prochlorperazine 5mg tab</i>	44	<i>propafenone 425mg er cap</i>	9	PYRUKYND 5MG TAB TAPER PACK	70
<i>procto-med 2.5% cream</i>	7	<i>propranolol 10mg tab</i>	49	PYRUKYND 5MG/20MG TAB TAPER PACK	70
<i>proctosol 2.5% cream</i>	7	<i>propranolol 120mg er cap</i>	49		
<i>proctozone hc 2.5% cream</i>	7	<i>propranolol 160mg er cap</i>	49	Q	
<i>progesterone 100mg cap</i>	83	<i>propranolol 20mg tab</i>	49	QINLOCK 50MG TAB	37
<i>progesterone 200mg cap</i>	83	<i>propranolol 40mg tab</i>	49	QUADRACEL INJ	88
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	76	<i>propranolol 4mg/ml oral soln</i>	49	QUADRACEL INJ	88
PROGRAF 1MG GRANULES FOR ORAL SUSP	76	<i>propranolol 60mg er cap</i>	49	QUADRACEL SYRINGE	88
PROLASTIN 1000MG INJ	85			<i>quetiapine 100mg tab</i>	43
				<i>quetiapine 150mg er tab</i>	43
				<i>quetiapine 200mg er tab</i>	43
				<i>quetiapine 200mg tab</i>	43
				<i>quetiapine 25mg tab</i>	43
				<i>quetiapine 300mg er tab</i>	43

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>quetiapine 300mg tab</i>	43	<i>reclipsen 28 day pack</i>	56	RETACRIT 4000UNIT/ML	71
<i>quetiapine 400mg er tab</i>	43	RECOMBIVAX	90	INJ	
<i>quetiapine 400mg tab</i>	43	10MCG/ML INJ		RETEVMO 40MG CAP	37
<i>quetiapine 50mg er tab</i>	43	RECOMBIVAX	90	RETEVMO 80MG CAP	38
<i>quetiapine 50mg tab</i>	43	10MCG/ML SYRINGE		REVLIMID 10MG CAP	75
<i>quinapril 10mg tab</i>	27	RECOMBIVAX	90	REVLIMID 15MG CAP	75
<i>quinapril 20mg tab</i>	27	40MCG/ML INJ		REVLIMID 2.5MG CAP	75
<i>quinapril 40mg tab</i>	27	RECOMBIVAX	90	REVLIMID 20MG CAP	75
<i>quinapril 5mg tab</i>	27	5MCG/0.5ML INJ		REVLIMID 25MG CAP	75
QUINIDINE SULFATE	9	RECOMBIVAX	90	REVLIMID 5MG CAP	75
200MG TAB		5MCG/0.5ML SYRINGE		REXULTI 0.25MG TAB	45
QUINIDINE SULFATE	9	REGANEX 0.01% GEL	62	REXULTI 0.5MG TAB	45
300MG TAB		RELENZA 5MG/BLISTER	48	REXULTI 1MG TAB	45
<i>quinine sulfate 324mg</i>	32	INHALER		REXULTI 2MG TAB	45
<i>cap</i>		RELISTOR 12MG/0.6ML	68	REXULTI 3MG TAB	45
QVAR 40MCG	10	INJ		REXULTI 4MG TAB	45
REDIHALER		RELISTOR 12MG/0.6ML	68	REYATAZ 50MG ORAL	47
QVAR 80MCG	10	SYRINGE		POWDER	
REDIHALER		RELISTOR 8MG/0.4ML	68	REYVOW 100MG TAB	73
R		SYRINGE		REYVOW 50MG TAB	73
RABAVERT 2.5UNIT/ML	90	RELTONE 200MG CAP	67	REZLIDHIA 150MG CAP	38
INJ		RELTONE 400MG CAP	67	REZUROCK 200MG TAB	75
RADICAVA 105MG/5ML	78	<i>repaglinide 0.5mg tab</i>	22	RHOPRESSA 0.02%	79
SUSP		<i>repaglinide 1mg tab</i>	22	OPHTH SOLN	
<i>raloxifene 60mg tab</i>	65	<i>repaglinide 2mg tab</i>	22	RIBAVIRIN 200MG CAP	48
<i>ramelteon 8mg tab</i>	72	REPATHA 140MG/ML	26	RIBAVIRIN 200MG TAB	48
<i>ramipril 1.25mg cap</i>	27	AUTO-INJECTOR		RIDAURA 3MG CAP	3
<i>ramipril 10mg cap</i>	27	REPATHA 140MG/ML	26	<i>rifabutin 150mg cap</i>	32
<i>ramipril 2.5mg cap</i>	27	SYRINGE		<i>rifampin 150mg cap</i>	32
<i>ramipril 5mg cap</i>	27	REPATHA 420MG/3.5ML	26	<i>rifampin 300mg cap</i>	32
<i>ranolazine 1000mg er tab</i>	7	CARTRIDGE		<i>rifampin 600mg inj</i>	32
<i>ranolazine 500mg er tab</i>	7	RETACRIT	71	<i>riluzole 50mg tab</i>	78
<i>rasagiline 0.5mg tab</i>	40	10000UNIT/ML INJ		RIMANTADINE 100MG	48
<i>rasagiline 1mg tab</i>	40	RETACRIT	71	TAB	
REBIF 22MCG/0.5ML	85	20000UNIT/2ML INJ		RINVOQ 15MG ER TAB	3
AUTO-INJECTOR		RETACRIT	71	RINVOQ 30MG ER TAB	3
REBIF 22MCG/0.5ML	85	20000UNIT/ML INJ		RINVOQ 45MG ER TAB	3
SYRINGE		RETACRIT 2000UNIT/ML	71	<i>risedronate sodium</i>	64
REBIF 44MCG/0.5ML	85	INJ		<i>150mg tab</i>	
AUTO-INJECTOR		RETACRIT 3000UNIT/ML	71	<i>risedronate sodium 30mg</i>	64
REBIF 44MCG/0.5ML	85	INJ		<i>tab</i>	
SYRINGE		RETACRIT	71	<i>risedronate sodium 35mg</i>	64
REBIF REBIDOSE PACK	85	40000UNIT/ML INJ		<i>tab</i>	
REBIF TITRATION PACK	85				

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

ALPHABETICAL LISTING OF DRUGS

<i>risedronate sodium 35mg tab (12) pack</i>	64	<i>roflumilast 0.5mg tab</i>	10	<i>salmon calcitonin 200unit/act nasal spray</i>	64
<i>risedronate sodium 35mg tab (4) pack</i>	64	<i>roflumilast 250mcg tab</i>	10	SANDIMMUNE	76
<i>risedronate sodium 5mg tab</i>	64	<i>ropinirole 0.25mg tab</i>	40	100MG/ML ORAL SOLN	
RISPERIDONE 0.25MG ODT	42	<i>ropinirole 0.5mg tab</i>	40	SANTYL 250UNIT/GM OINTMENT	62
<i>risperidone 0.25mg tab</i>	42	<i>ropinirole 1mg tab</i>	40	<i>sapropterin 100mg powder for oral soln</i>	65
<i>risperidone 0.5mg odt</i>	42	<i>ropinirole 2mg tab</i>	40	<i>sapropterin 100mg tab</i>	65
<i>risperidone 0.5mg tab</i>	42	<i>ropinirole 3mg tab</i>	40	<i>sapropterin 500mg powder for oral soln</i>	65
<i>risperidone 12.5mg inj</i>	42	<i>ropinirole 4mg tab</i>	40	SAVELLA 100MG TAB	84
<i>risperidone 1mg odt</i>	42	<i>ropinirole 5mg tab</i>	40	SAVELLA 12.5MG TAB	84
<i>risperidone 1mg tab</i>	42	<i>rosuvastatin calcium 10mg tab</i>	26	SAVELLA 25MG TAB	84
<i>risperidone 1mg/ml oral soln</i>	42	<i>rosuvastatin calcium 20mg tab</i>	26	SAVELLA 50MG TAB	84
<i>risperidone 25mg inj</i>	42	<i>rosuvastatin calcium 40mg tab</i>	26	SAVELLA TAB 4-WEEK TITRATION PACK (55)	84
<i>risperidone 2mg odt</i>	42	<i>rosuvastatin calcium 5mg tab</i>	26	SCSEMBLIX 20MG TAB	38
<i>risperidone 2mg tab</i>	42	ROTARIX SUSP	90	SCSEMBLIX 40MG TAB	38
<i>risperidone 37.5mg inj</i>	42	ROTARIX SUSP	90	<i>scopolamine 1mg/72hr patch</i>	24
<i>risperidone 3mg odt</i>	42	ROTATEQ SUSP	90	SECUADO 3.8MG/24HR PATCH	43
<i>risperidone 3mg tab</i>	42	<i>roweepra 500mg tab</i>	15	SECUADO 5.7MG/24HR PATCH	43
<i>risperidone 4mg odt</i>	42	ROZLYTREK 100MG CAP	38	SECUADO 7.6MG/24HR PATCH	43
<i>risperidone 4mg tab</i>	42	ROZLYTREK 200MG CAP	38	<i>selegiline 5mg cap</i>	40
<i>risperidone 50mg inj</i>	42	ROZLYTREK 50MG ORAL PELLETT	38	<i>selenium sulfide 2.5% shampoo</i>	60
<i>ritonavir 100mg tab</i>	47	RUBRACA 200MG TAB	38	SELZENTRY 20MG/ML ORAL SOLN	47
<i>rivastigmine 1.5mg cap</i>	83	RUBRACA 250MG TAB	38	SELZENTRY 25MG TAB	47
<i>rivastigmine 13.3mg/24hr patch</i>	83	RUBRACA 300MG TAB	38	SELZENTRY 75MG TAB	47
<i>rivastigmine 3mg cap</i>	83	RUCONEST 2100UNIT INJ	70	SEREVENT	11
<i>rivastigmine 4.5mg cap</i>	83	<i>rufinamide 200mg tab</i>	15	50MCG/DOSE INHALER	
<i>rivastigmine 4.6mg/24hr patch</i>	83	<i>rufinamide 400mg tab</i>	15	<i>sertraline 100mg tab</i>	18
<i>rivastigmine 6mg cap</i>	84	<i>rufinamide 40mg/ml susp</i>	15	<i>sertraline 20mg/ml oral soln</i>	18
<i>rivastigmine 9.5mg/24hr patch</i>	84	RUKOBIA 600MG ER TAB	47	<i>sertraline 25mg tab</i>	18
<i>rivelsa 91 day pack</i>	56	RYBELSUS 14MG TAB	21	<i>sertraline 50mg tab</i>	18
<i>rizatRIPTAN 10mg odt</i>	73	RYBELSUS 3MG TAB	21	<i>setlakin 91 day pack</i>	56
<i>rizatRIPTAN 10mg tab</i>	73	RYBELSUS 7MG TAB	21		
<i>rizatRIPTAN 5mg odt</i>	73	RYDAPT 25MG CAP	38		
<i>rizatRIPTAN 5mg tab</i>	73				
ROCKLATAN 0.05-0.2MG/ML OPHTH SOLN	79	S			
		<i>sajazir 30mg/3ml syringe</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>sevelamer carbonate</i>	68	SKYRIZI 150MG/ML	60	SOGROYA 10MG/1.5ML	64
<i>2400mg powder for oral</i>		SYRINGE		PEN INJ	
<i>susp</i>		SKYRIZI 180MG/1.2ML	68	SOGROYA 15MG/1.5ML	64
<i>sevelamer carbonate</i>	68	CARTRIDGE		PEN INJ	
<i>800mg powder for oral</i>		SKYRIZI 360MG/2.4ML	68	SOGROYA 5MG/1.5ML	64
<i>susp</i>		CARTRIDGE		PEN INJ	
<i>sevelamer carbonate</i>	68	SKYTROFA 11MG	64	SOLTAMOX 10MG/5ML	34
<i>800mg tab</i>		CARTRIDGE		ORAL SOLN	
<i>sharobel 0.35mg 28 day</i>	57	SKYTROFA 13.3MG	64	SOMAVERT 10MG INJ	64
<i>pack</i>		CARTRIDGE		SOMAVERT 15MG INJ	64
SHINGRIX	90	SKYTROFA 3.6MG	64	SOMAVERT 20MG INJ	64
50MCG/0.5ML INJ		CARTRIDGE		SOMAVERT 25MG INJ	64
SIGNIFOR 0.3MG/ML INJ	66	SKYTROFA 3MG	64	SOMAVERT 30MG INJ	64
SIGNIFOR 0.6MG/ML INJ	66	CARTRIDGE		<i>sorafenib 200mg tab</i>	38
SIGNIFOR 0.9MG/ML INJ	66	SKYTROFA 4.3MG	64	<i>sorine 120mg tab</i>	49
<i>sildenafil 20mg tab</i>	52	CARTRIDGE		<i>sorine 160mg tab</i>	49
<i>silver sulfadiazine 1%</i>	60	SKYTROFA 5.2MG	64	<i>sotalol 120mg tab</i>	49
<i>cream</i>		CARTRIDGE		<i>sotalol 160mg tab</i>	49
SIMBRINZA 0.2-1%	79	SKYTROFA 6.3MG	64	<i>sotalol 240mg tab</i>	49
OPHTH SUSP		CARTRIDGE		<i>sotalol 80mg tab</i>	49
SIMPONI 100MG/ML	3	SKYTROFA 7.6MG	64	<i>sotalol af 120mg tab</i>	49
AUTO-INJECTOR		CARTRIDGE		<i>sotalol af 160mg tab</i>	49
SIMPONI 100MG/ML	3	SKYTROFA 9.1MG	64	<i>sotalol af 80mg tab</i>	49
SYRINGE		CARTRIDGE		SPIRIVA RESPIMAT	10
SIMPONI 50MG/0.5ML	3	SLYND 4MG TAB PACK	57	1.25MCG/ACT INH	
AUTO-INJECTOR		<i>sodium chloride 0.45%</i>	75	<i>spironolactone 100mg tab</i>	63
SIMPONI 50MG/0.5ML	3	<i>inj</i>		<i>spironolactone 25mg tab</i>	63
SYRINGE		<i>sodium chloride 0.9% inj</i>	75	<i>spironolactone 50mg tab</i>	63
<i>simvastatin 10mg tab</i>	26	<i>sodium chloride 0.9%</i>	69	<i>sprintec 28 day pack</i>	56
<i>simvastatin 20mg tab</i>	26	<i>irrigation soln</i>		SPRITAM 1000MG TAB	15
<i>simvastatin 40mg tab</i>	26	<i>sodium chloride 3% inj</i>	75	FOR ORAL SUSP	
<i>simvastatin 5mg tab</i>	26	<i>sodium chloride 50mg/ml</i>	75	SPRITAM 250MG TAB	15
<i>simvastatin 80mg tab</i>	26	<i>inj</i>		FOR ORAL SUSP	
<i>sirolimus 0.5mg tab</i>	76	SODIUM OXYBATE	83	SPRITAM 500MG TAB	15
<i>sirolimus 1mg tab</i>	76	500MG/ML ORAL SOLN		FOR ORAL SUSP	
<i>sirolimus 1mg/ml oral</i>	76	<i>sodium polystyrene</i>	76	SPRITAM 750MG TAB	15
<i>soln</i>		<i>sulfonate 15000mg</i>		FOR ORAL SUSP	
<i>sirolimus 2mg tab</i>	76	<i>powder for oral susp</i>		SPRYCEL 100MG TAB	38
SIRTURO 100MG TAB	32	<i>sodium sulfate/potassium</i>	72	SPRYCEL 140MG TAB	38
SIRTURO 20MG TAB	32	<i>sulfate/magnesium sulfate</i>		SPRYCEL 20MG TAB	38
SIVEXTRO 200MG INJ	31	<i>17.5-3.13-1.6gm/177ml</i>		SPRYCEL 50MG TAB	38
SIVEXTRO 200MG TAB	31	<i>prep kit</i>		SPRYCEL 70MG TAB	38
SKYRIZI 150MG/ML	60	SOFOSBUVIR/VELPATAS	48	SPRYCEL 80MG TAB	38
AUTO-INJECTOR		VIR 400-100MG TAB		<i>sps 15gm/60ml susp</i>	76

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

ALPHABETICAL LISTING OF DRUGS

<i>sronyx 28 day pack</i>	56	<i>sulindac 200mg tab</i>	4	SYNJARDY 12.5-500MG	20
<i>ssd 1% cream</i>	60	<i>sumatriptan 100mg tab</i>	73	TAB	
STELARA 45MG/0.5ML	60	<i>sumatriptan 25mg tab</i>	73	SYNJARDY 25-1000MG	20
INJ		<i>sumatriptan 4mg/0.5ml</i>	73	ER TAB	
STELARA 45MG/0.5ML	60	<i>cartridge</i>		SYNJARDY 5-1000MG	20
SYRINGE		<i>sumatriptan 50mg tab</i>	73	ER TAB	
STELARA 90MG/ML	60	<i>sumatriptan 6mg/0.5ml</i>	73	SYNJARDY 5-1000MG	20
SYRINGE		<i>auto-injector</i>		TAB	
STIOLTO	11	<i>sumatriptan 6mg/0.5ml</i>	73	SYNJARDY 5-500MG	20
2.5-2.5MCG/ACT INH		<i>cartridge</i>		TAB	
STIVARGA 40MG TAB	38	<i>sumatriptan 6mg/0.5ml</i>	73		
STRIBILD	47	<i>inj</i>		T	
150-150-200-300MG		<i>sunitinib 12.5mg cap</i>	38	TABLOID 40MG TAB	33
TAB		<i>sunitinib 25mg cap</i>	38	TABRECTA 150MG TAB	38
<i>subvenite 100mg tab</i>	15	<i>sunitinib 37.5mg cap</i>	38	TABRECTA 200MG TAB	38
<i>subvenite 150mg tab</i>	15	<i>sunitinib 50mg cap</i>	38	<i>tacrolimus 0.03%</i>	62
<i>subvenite 200mg tab</i>	15	SUNLENCA 300MG TAB	47	<i>ointment</i>	
<i>subvenite 25mg tab</i>	15	4-TABLET PACK		<i>tacrolimus 0.1% ointment</i>	62
SUCRAID 8500UNIT/ML	62	SUNLENCA 300MG TAB	47	<i>tacrolimus 0.5mg cap</i>	76
ORAL SOLN		5-TABLET PACK		<i>tacrolimus 1mg cap</i>	76
<i>sucralfate 1000mg tab</i>	89	SUNOSI 150MG TAB	1	<i>tacrolimus 5mg cap</i>	76
<i>sucralfate 100mg/ml susp</i>	89	SUNOSI 75MG TAB	1	<i>tadalafil 20mg tab</i>	52
SUFLAVE SOLN PACK	72	<i>syeda 28 day pack</i>	56	TAFINLAR 10MG TAB	38
<i>sulfacetamide sodium</i>	58	SYMDEKO	86	FOR ORAL SUSP	
<i>10% lotion</i>		50-75MG/75MG PACK		TAFINLAR 50MG CAP	38
<i>sulfacetamide sodium</i>	79	SYMDEKO TAB 4-WEEK	86	TAFINLAR 75MG CAP	38
<i>10% ophth soln</i>		PACK		<i>tafluprost 0.0015% ophth</i>	80
SULFACETAMIDE/PRED	80	SYMPAZAN 10MG ORAL	13	<i>soln</i>	
NISOLONE 10-0.25%		FILM		TAGRISSE 40MG TAB	33
OPHTH SOLN		SYMPAZAN 20MG ORAL	13	TAGRISSE 80MG TAB	33
SULFADIAZINE 500MG	86	FILM		TAKHZYRO 300MG/2ML	70
TAB		SYMPAZAN 5MG ORAL	13	INJ	
<i>sulfamethoxazole/trimeth</i>	30	FILM		TAKHZYRO 300MG/2ML	70
<i>oprim 200-40mg/5ml susp</i>	30	SYMPROIC 0.2MG TAB	68	SYRINGE	
<i>sulfamethoxazole/trimeth</i>	30	SYMTUZA	47	TALTZ 80MG/ML	60
<i>oprim 400-80mg tab</i>		150-800-200-10MG TAB		AUTO-INJECTOR	
<i>sulfamethoxazole/trimeth</i>	30	SYNAREL 2MG/ML	65	TALTZ 80MG/ML	60
<i>oprim 800-160mg tab</i>		NASAL INHALER		SYRINGE	
SULFAMYLON	60	SYNJARDY 10-1000MG	20	TALZENNA 0.1MG CAP	38
85MG/GM CREAM		ER TAB		TALZENNA 0.25MG CAP	38
<i>sulfasalazine 500mg dr</i>	68	SYNJARDY	20	TALZENNA 0.35MG CAP	38
<i>tab</i>		12.5-1000MG ER TAB		TALZENNA 0.5MG CAP	38
<i>sulfasalazine 500mg tab</i>	68	SYNJARDY	20	TALZENNA 0.75MG CAP	38
<i>sulindac 150mg tab</i>	4	12.5-1000MG TAB		TALZENNA 1MG CAP	38
				<i>tamoxifen 10mg tab</i>	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>tamoxifen 20mg tab</i>	34	<i>terconazole 0.4% vaginal cream</i>	91	THEOPHYLLINE 200MG ER TAB	11
<i>tamsulosin 0.4mg cap</i>	69	<i>terconazole 0.8% vaginal cream</i>	91	<i>theophylline 300mg er tab</i>	11
<i>tarina 24 fe 1/20 28 day pack</i>	56	<i>terconazole 80mg vaginal insert</i>	91	<i>theophylline 400mg er tab</i>	12
<i>tarina fe 1/20 28 day pack</i>	56	<i>teriflunomide 14mg tab</i>	85	<i>theophylline 450mg er tab</i>	12
TASIGNA 150MG CAP	38	<i>teriflunomide 7mg tab</i>	85	<i>theophylline 600mg er tab</i>	12
TASIGNA 200MG CAP	38	TERIPARATIDE	64	<i>thioridazine 100mg tab</i>	44
TASIGNA 50MG CAP	38	0.02MG/ACT PEN INJ		<i>thioridazine 10mg tab</i>	44
<i>tasimelteon 20mg cap</i>	72	<i>testosterone 1% (12.5mg/act) gel pump</i>	7	<i>thioridazine 25mg tab</i>	44
<i>tazarotene 0.1% cream</i>	60	<i>testosterone 1% (25mg) gel packet</i>	7	<i>thioridazine 50mg tab</i>	44
<i>tazicef 1gm inj</i>	53	<i>testosterone 1% (50mg) gel packet</i>	7	<i>thiothixene 10mg cap</i>	45
<i>tazicef 2gm inj</i>	53	<i>testosterone 1.62% (1.25gm) gel packet</i>	7	<i>thiothixene 1mg cap</i>	45
TAZICEF 6GM INJ	53	<i>testosterone 1.62% (2.5gm) gel packet</i>	7	<i>thiothixene 2mg cap</i>	45
<i>taztia 120mg er cap</i>	50	<i>testosterone 1.62% (20.25mg/act) gel pump</i>	7	<i>thiothixene 5mg cap</i>	45
<i>taztia 180mg er cap</i>	50	<i>testosterone 30mg/act topical soln</i>	7	<i>tiadylt 120mg er cap</i>	50
<i>taztia 240mg er cap</i>	50	<i>testosterone cypionate 100mg/ml inj</i>	7	<i>tiadylt 180mg er cap</i>	50
<i>taztia 300mg er cap</i>	50	<i>testosterone cypionate 200mg/ml (1ml) inj</i>	7	<i>tiadylt 240mg er cap</i>	50
<i>taztia 360mg er cap</i>	50	<i>testosterone cypionate 200mg/ml inj</i>	7	<i>tiadylt 300mg er cap</i>	50
TAZVERIK 200MG TAB	38	TESTOSTERONE ENANTHATE 200MG/ML INJ	7	<i>tiadylt 360mg er cap</i>	50
TDVAX 4-4UNIT/ML INJ	88	<i>tetrabenazine 12.5mg tab</i>	84	<i>tiadylt 420mg er cap</i>	51
TEFLARO 400MG INJ	53	<i>tetrabenazine 25mg tab</i>	84	<i>tiagabine 12mg tab</i>	16
TEFLARO 600MG INJ	53	<i>tetracycline 250mg cap</i>	86	<i>tiagabine 16mg tab</i>	16
<i>telmisartan 20mg tab</i>	28	<i>tetracycline 500mg cap</i>	87	<i>tiagabine 2mg tab</i>	16
<i>telmisartan 40mg tab</i>	28	THALOMID 100MG CAP	75	<i>tiagabine 4mg tab</i>	16
<i>telmisartan 80mg tab</i>	28	THALOMID 150MG CAP	75	TIBSOVO 250MG TAB	38
<i>temazepam 15mg cap</i>	71	THALOMID 200MG CAP	75	TICOVAC	90
<i>temazepam 30mg cap</i>	71	THALOMID 50MG CAP	75	1.2MCG/0.25ML SYRINGE	
TENIVAC 4-10UNIT/ML INJ	88	THEOPHYLLINE 100MG ER TAB	11	TICOVAC 2.4MCG/0.5ML SYRINGE	90
TENIVAC 4-10UNIT/ML SYRINGE	88			<i>tigecycline 50mg inj</i>	86
<i>tenofovir disoproxil fumarate 300mg tab</i>	47			<i>tilia fe pack</i>	56
TEPMETKO 225MG TAB	38			<i>timolol 0.25% ophth gel</i>	78
<i>terazosin 10mg cap</i>	28			<i>timolol 0.25% ophth soln</i>	78
<i>terazosin 1mg cap</i>	28			<i>timolol 0.5% ophth gel</i>	78
<i>terazosin 2mg cap</i>	28			<i>timolol 0.5% ophth soln</i>	78
<i>terazosin 5mg cap</i>	28			<i>timolol 0.5% ophth soln (preservative-free)</i>	78
<i>terbinafine 250mg tab</i>	24			<i>timolol 10mg tab</i>	49
<i>terbutaline sulfate 2.5mg tab</i>	11			<i>timolol 5mg tab</i>	49
<i>terbutaline sulfate 5mg tab</i>	11				

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>tinidazole 250mg tab</i>	30	TPN ELECTROLYTES IN.	74	<i>tretinoin 0.025% gel</i>	58
<i>tinidazole 500mg tab</i>	30	TRACLEER 32MG TAB	52	<i>tretinoin 0.05% cream</i>	58
<i>tiopronin 100mg tab</i>	69	FOR ORAL SUSP		<i>tretinoin 0.1% cream</i>	58
TIVICAY 10MG TAB	47	<i>tramadol 100mg er tab</i>	6	<i>tretinoin 10mg cap</i>	39
TIVICAY 25MG TAB	47	<i>tramadol 200mg er tab</i>	6	<i>triamcinolone acetonide</i>	61
TIVICAY 50MG TAB	47	<i>tramadol 300mg er tab</i>	6	<i>0.025% cream</i>	
TIVICAY 5MG TAB FOR	47	<i>tramadol 50mg tab</i>	6	<i>triamcinolone acetonide</i>	61
ORAL SUSP		<i>tramadol/acetaminophen</i>	6	<i>0.025% lotion</i>	
<i>tizanidine 2mg tab</i>	77	<i>37.5-325mg tab</i>		<i>triamcinolone acetonide</i>	61
<i>tizanidine 4mg tab</i>	77	<i>trandolapril 1mg tab</i>	27	<i>0.025% ointment</i>	
TOBRADEX 0.1-0.3%	80	<i>trandolapril 2mg tab</i>	27	<i>triamcinolone acetonide</i>	61
OPHTH OINTMENT		<i>trandolapril 4mg tab</i>	27	<i>0.1% cream</i>	
<i>tobramycin 0.3% ophth</i>	79	<i>tranexamic acid 650mg</i>	71	<i>triamcinolone acetonide</i>	61
<i>soln</i>		<i>tab</i>		<i>0.1% lotion</i>	
TOBRAMYCIN	3	<i>tranylcypromine 10mg</i>	17	<i>triamcinolone acetonide</i>	61
10MG/ML INJ		<i>tab</i>		<i>0.1% ointment</i>	
<i>tobramycin 40mg/ml inj</i>	3	TRAVASOL 10% INJ	78	<i>triamcinolone acetonide</i>	77
<i>tobramycin 60mg/ml inh</i>	3	<i>travoprost 0.004% ophth</i>	80	<i>0.1% oral paste</i>	
<i>soln</i>		<i>soln</i>		<i>triamcinolone acetonide</i>	61
<i>tolcapone 100mg tab</i>	40	<i>trazodone 100mg tab</i>	18	<i>0.5% cream</i>	
<i>tolterodine tartrate 1mg</i>	89	<i>trazodone 150mg tab</i>	18	<i>triamcinolone acetonide</i>	61
<i>tab</i>		<i>trazodone 50mg tab</i>	18	<i>0.5% ointment</i>	
<i>tolterodine tartrate 2mg</i>	89	TRECTOR 250MG TAB	32	<i>triazolam 0.125mg tab</i>	71
<i>er cap</i>		TRELEGY ELLIPTA	11	<i>triazolam 0.25mg tab</i>	71
<i>tolterodine tartrate 2mg</i>	89	100-62.5-25MCG		<i>triderm 0.1% cream</i>	61
<i>tab</i>		INHALER		<i>triderm 0.5% cream</i>	61
<i>tolterodine tartrate 4mg</i>	89	TRELEGY ELLIPTA	11	<i>trientine 250mg cap</i>	75
<i>er cap</i>		200-62.5-25MCG		<i>tri-estarylla 28 day pack</i>	56
<i>topiramate 100mg tab</i>	15	INHALER		<i>trifluoperazine 10mg tab</i>	44
<i>topiramate 15mg cap</i>	16	TRELSTAR 11.25MG INJ	34	<i>trifluoperazine 1mg tab</i>	44
<i>topiramate 200mg tab</i>	16	TRELSTAR 22.5MG INJ	34	<i>trifluoperazine 2mg tab</i>	44
<i>topiramate 25mg cap</i>	16	TRELSTAR 3.75MG INJ	35	<i>trifluoperazine 5mg tab</i>	44
<i>topiramate 25mg tab</i>	16	TREMFYA 100MG/ML	60	TRIFLURIDINE 1%	79
<i>topiramate 50mg tab</i>	16	AUTO-INJECTOR		OPHTH SOLN	
<i>toremifene 60mg tab</i>	34	TREMFYA 100MG/ML	60	<i>trihexyphenidyl 2mg tab</i>	40
<i>toremifene 100mg tab</i>	63	SYRINGE		<i>trihexyphenidyl 5mg tab</i>	40
<i>toremifene 10mg tab</i>	63	TRESIBA 100UNIT/ML	22	TRIKAFTA	86
<i>toremifene 20mg tab</i>	63	INJ		100-50-75MG/150MG	
<i>toremifene 5mg tab</i>	63	TRESIBA 100UNIT/ML	22	PACK	
TOUJEO 300UNIT/ML	22	PEN INJ		TRIKAFTA	86
PEN INJ		TRESIBA 200UNIT/ML	22	100-50-75MG/75MG	
TOUJEO MAX	22	PEN INJ		GRANULES PACK	
300UNIT/ML PEN INJ		<i>tretinoin 0.01% gel</i>	58		
(3ML)		<i>tretinoin 0.025% cream</i>	58		

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

ALPHABETICAL LISTING OF DRUGS

TRIKAFTA	86	TRULICITY	21	<i>unithroid 50mcg tab</i>	88
50-37.5-25MG/75MG		4.5MG/0.5ML		<i>unithroid 75mcg tab</i>	88
TAB PACK		AUTO-INJECTOR		<i>unithroid 88mcg tab</i>	88
TRIKAFTA	86	TRUMENBA SYRINGE	90	<i>ursodiol 250mg tab</i>	67
80-40-60MG/59.5MG		TRUQAP 160MG TAB	38	<i>ursodiol 300mg cap</i>	67
GRANULES PACK		TRUQAP 200MG TAB	38	<i>ursodiol 500mg tab</i>	67
<i>tri-legest 28 day pack</i>	56	TUKYSA 150MG TAB	33	UZEDY 100MG/0.28ML	42
<i>tri-lo- estarylla 28 day pack</i>	56	TUKYSA 50MG TAB	33	SYRINGE	
<i>tri-lo-sprintec 28 day pack</i>	56	TURALIO 125MG CAP	38	UZEDY 125MG/0.35ML	42
<i>trimethoprim 100mg tab</i>	30	<i>turqoz 28 day pack</i>	56	SYRINGE	
<i>tri-mili 28 day pack</i>	56	TWINRIX SYRINGE	90	UZEDY 150MG/0.42ML	42
<i>trimipramine 100mg cap</i>	20	TYBLUME 28 DAY PACK	56	SYRINGE	
<i>trimipramine 25mg cap</i>	20	TYBOST 150MG TAB	47	UZEDY 200MG/0.56ML	42
<i>trimipramine 50mg cap</i>	20	TYMLOS	64	SYRINGE	
TRINTELLIX 10MG TAB	18	3120MCG/1.56ML PEN		UZEDY 250MG/0.7ML	42
TRINTELLIX 20MG TAB	18	INJ		SYRINGE	
TRINTELLIX 5MG TAB	18	TYPHIM VI	90	UZEDY 50MG/0.14ML	42
<i>tri-nymyo 28 day pack</i>	56	25MCG/0.5ML INJ		SYRINGE	
<i>tri-sprintec 28 day pack</i>	56	TYPHIM VI	90	UZEDY 75MG/0.21ML	42
TRIUMEQ	47	25MCG/0.5ML SYRINGE		SYRINGE	
600-50-300MG TAB		TYVASO 16-32-48MCG	51	<hr/>	
TRIUMEQ 60-5-30MG	47	TITRATION PACK		V	
TAB FOR ORAL SUSP		TYVASO 16MCG INH	51	<i>valacyclovir 1000mg tab</i>	48
<i>trivora 28 day pack</i>	56	POWDER		<i>valacyclovir 500mg tab</i>	48
<i>tri-vylibra 28 day pack</i>	56	TYVASO 32-48MCG	51	VALCHLOR 0.016% GEL	59
<i>tri-vylibra lo 28 day pack</i>	56	MAINTENANCE PACK		<i>valganciclovir 450mg tab</i>	47
TRIZIVIR	47	TYVASO 32MCG INH	51	<i>valganciclovir 50mg/ml oral soln</i>	47
300-150-300MG TAB		POWDER		<i>valproic acid 250mg cap</i>	17
TROPHAMINE 10% INJ	78	TYVASO 48MCG INH	51	<i>valproic acid 50mg/ml oral soln</i>	17
<i>trospium chloride 20mg tab</i>	89	POWDER		<i>valsartan 160mg tab</i>	28
<i>trospium chloride 60mg er cap</i>	89	TYVASO 64MCG INH	51	<i>valsartan 320mg tab</i>	28
TRULANCE 3MG TAB	67	POWDER		<i>valsartan 40mg tab</i>	28
TRULICITY	21	<hr/>		<i>valsartan 80mg tab</i>	28
0.75MG/0.5ML		U		VALTOCO 10MG	13
AUTO-INJECTOR		UBRELVY 100MG TAB	73	(10MG/0.1ML) NASAL	
TRULICITY	21	UBRELVY 50MG TAB	73	SPRAY DOSE PACK	
1.5MG/0.5ML		<i>unithroid 100mcg tab</i>	87	VALTOCO 15MG	13
AUTO-INJECTOR		<i>unithroid 112mcg tab</i>	88	(7.5MG/0.1ML) NASAL	
TRULICITY 3MG/0.5ML	21	<i>unithroid 125mcg tab</i>	88	SPRAY DOSE PACK	
AUTO-INJECTOR		<i>unithroid 137mcg tab</i>	88	VALTOCO 20MG	13
		<i>unithroid 150mcg tab</i>	88	(10MG/0.1ML) NASAL	
		<i>unithroid 175mcg tab</i>	88	SPRAY DOSE PACK	
		<i>unithroid 200mcg tab</i>	88		
		<i>unithroid 25mcg tab</i>	88		
		<i>unithroid 300mcg tab</i>	88		

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

VALTOCO 5MG (5MG/0.1ML) NASAL SPARY DOSE PACK	13	<i>venlafaxine 100mg tab</i>	19	VIREAD 150MG TAB	47
<i>vancomycin 100mg/ml inj</i>	31	<i>venlafaxine 150mg er cap</i>	19	VIREAD 200MG TAB	47
<i>vancomycin 125mg cap</i>	31	<i>venlafaxine 25mg tab</i>	19	VIREAD 250MG TAB	47
<i>vancomycin 1gm inj</i>	31	<i>venlafaxine 37.5mg er cap</i>	19	VIREAD 40MG/GM ORAL POWDER	47
<i>vancomycin 250mg cap</i>	31	<i>venlafaxine 37.5mg tab</i>	19	VITRAKVI 100MG CAP	39
<i>vancomycin 500mg inj</i>	31	<i>venlafaxine 50mg tab</i>	19	VITRAKVI 20MG/ML	39
<i>vancomycin 750mg inj</i>	31	<i>venlafaxine 75mg er cap</i>	19	ORAL SOLN	
VANFLYTA 17.7MG TAB	38	<i>venlafaxine 75mg tab</i>	19	VITRAKVI 25MG CAP	39
VANFLYTA 26.5MG TAB	38	<i>verapamil 120mg er cap</i>	51	VIZIMPRO 15MG TAB	33
VAQTA 25UNIT/0.5ML INJ	90	<i>verapamil 120mg er tab</i>	51	VIZIMPRO 30MG TAB	33
VAQTA 25UNIT/0.5ML SYRINGE	90	<i>verapamil 120mg tab</i>	51	VIZIMPRO 45MG TAB	34
VAQTA 50UNIT/ML INJ	90	<i>verapamil 180mg er cap</i>	51	VONJO 100MG CAP	39
VAQTA 50UNIT/ML SYRINGE	90	<i>verapamil 180mg er tab</i>	51	VORICONAZOLE 200MG INJ	24
<i>varenicline 0.5mg tab</i>	85	<i>verapamil 240mg er cap</i>	51	<i>voriconazole 200mg tab</i>	24
<i>varenicline 0.5mg/1mg first month pack</i>	85	<i>verapamil 240mg er tab</i>	51	<i>voriconazole 40mg/ml susp</i>	24
<i>varenicline 1mg tab</i>	85	<i>verapamil 40mg tab</i>	51	<i>voriconazole 50mg tab</i>	25
<i>varenicline 1mg tab pack (56)</i>	85	<i>verapamil 80mg tab</i>	51	VOSEVI 400-100-100MG TAB	48
VARIVAX 1350PFU/0.5ML INJ	91	VERQUOVO 10MG TAB	52	VOWST 30000000UNIT CAP	68
VARUBI 90MG TAB	24	VERQUOVO 2.5MG TAB	52	VRAYLAR 1.5MG CAP	41
VELIVET 28 DAY PACK	56	VERQUOVO 5MG TAB	52	VRAYLAR 3MG CAP	41
VELTASSA 16.8GM POWDER FOR ORAL SUSP	76	VERSACLOZ 50MG/ML SUSP	43	VRAYLAR 4.5MG CAP	41
VELTASSA 25.2GM POWDER FOR ORAL SUSP	76	VERZENIO 100MG TAB	39	VRAYLAR 6MG CAP	41
VELTASSA 8.4GM POWDER FOR ORAL SUSP	76	VERZENIO 150MG TAB	39	<i>vyfemla 28 day pack</i>	56
VEMLIDY 25MG TAB	48	VERZENIO 200MG TAB	39	<i>vylibra 28 day pack</i>	56
VENCLEXTA 100MG TAB	33	VERZENIO 50MG TAB	39	VYNDAMAX 61MG CAP	52
VENCLEXTA 10MG TAB	33	<i>vestura 3-0.02mg pack</i>	56	VYNDAQEL 20MG CAP	52
VENCLEXTA 50MG TAB	33	VICTOZA 18MG/3ML PEN INJ	21		
VENCLEXTA TAB STARTER PACK	33	<i>vienva 28 day pack</i>	56	W	
		<i>vigabatrin 500mg powder for oral soln</i>	16	WAKIX 17.8MG TAB	1
		<i>vigabatrin 500mg tab</i>	16	WAKIX 4.45MG TAB	1
		<i>vigadrone 500mg powder for oral soln</i>	16	<i>warfarin sodium 10mg tab</i>	12
		<i>vigadrone 500mg tab</i>	16	<i>warfarin sodium 1mg tab</i>	12
		<i>vigpoder 500mg powder for oral soln</i>	16	<i>warfarin sodium 2.5mg tab</i>	12
		<i>vilazodone 10mg tab</i>	18	<i>warfarin sodium 2mg tab</i>	12
		<i>vilazodone 20mg tab</i>	18	<i>warfarin sodium 3mg tab</i>	12
		<i>vilazodone 40mg tab</i>	18	<i>warfarin sodium 4mg tab</i>	12
		VIRACEPT 250MG TAB	47	<i>warfarin sodium 5mg tab</i>	12
		VIRACEPT 625MG TAB	47	<i>warfarin sodium 6mg tab</i>	12

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>warfarin sodium 7.5mg tab</i>	12	XELJANZ 1MG/ML ORAL SOLN	3	XPOVIO 40MG TWICE WEEKLY CARTON (8-PACK)	35
WELIREG 40MG TAB	35	XELJANZ 5MG TAB	3	XPOVIO 60MG ONCE WEEKLY CARTON (4-PACK)	35
<i>wixela 100-50mcg inhaler</i>	11	XELJANZ XR 11MG TAB	3	XPOVIO 60MG TWICE WEEKLY CARTON (24 PACK)	35
<i>wixela 250-50mcg inhaler</i>	11	XELJANZ XR 22MG TAB	3	XPOVIO 80MG ONCE WEEKLY CARTON (8-PACK)	35
<i>wixela 500-50mcg inhaler</i>	11	XERMELO 250MG	69	XPOVIO 80MG TWICE WEEKLY CARTON (32 PACK)	35
<i>wymzya fe 28 day pack</i>	56	XGEVA 120MG/1.7ML INJ	64	XTANDI 40MG CAP	35
X		XIFAXAN 200MG TAB	30	XTANDI 40MG TAB	35
XALKORI 150MG ORAL PELLETT	39	XIFAXAN 550MG TAB	30	XTANDI 80MG TAB	35
XALKORI 200MG CAP	39	XIGDUO XR 10-1000MG TAB	20	XYWAV 0.5GM/ML ORAL SOLN	83
XALKORI 20MG ORAL PELLETT	39	XIGDUO XR 10-500MG TAB	20		
XALKORI 250MG CAP	39	XIGDUO XR	20	Y	
XALKORI 50MG ORAL PELLETT	39	XIGDUO XR 2.5-1000MG TAB	20	<i>yargesa 100mg cap</i>	70
XARELTO 10MG TAB	12	XIGDUO XR 5-1000MG TAB	20	YF-VAX INJ	91
XARELTO 15MG TAB	12	XIGDUO XR 5-500MG TAB	20	YF-VAX INJ	91
XARELTO 1MG/ML SUSP	12	XIIDRA 5% OPHTH SOLN	79	Z	
XARELTO 2.5MG TAB	12	XOLAIR 150MG INJ	9	<i>zafirlukast 10mg tab</i>	10
XARELTO 20MG TAB	12	XOLAIR 150MG/ML AUTO-INJECTOR	9	<i>zafirlukast 20mg tab</i>	10
XARELTO TAB STARTER PACK	12	XOLAIR 150MG/ML SYRINGE	9	<i>zaleplon 10mg cap</i>	71
XATMEP 2.5MG/ML ORAL SOLN	33	XOLAIR 300MG/2ML AUTO-INJECTOR	9	<i>zaleplon 5mg cap</i>	72
XCOPRI 100MG TAB	16	XOLAIR 300MG/2ML SYRINGE	9	ZARXIO 300MCG/0.5ML SYRINGE	71
XCOPRI 12.5/25MG TITRATION PACK	16	XOLAIR 75MG/0.5ML AUTO-INJECTOR	9	ZARXIO 480MCG/0.8ML SYRINGE	71
XCOPRI 150/200MG PACK TAB	16	XOLAIR 75MG/0.5ML SYRINGE	10	ZAVZPRET 10MG/ACT NASAL SPRAY	73
XCOPRI 150/200MG TITRATION PACK	16	XOPENEX 45MCG INHALER	11	ZEGALOGUE	21
XCOPRI 150MG TAB	16	XOSPATA 40MG TAB	39	0.6MG/0.6ML AUTO-INJECTOR	
XCOPRI 200MG TAB	16	XPOVIO 100MG ONCE WEEKLY CARTON (8-PACK)	35	ZEGALOGUE	21
XCOPRI 25MG TAB	16	XPOVIO 40MG ONCE WEEKLY CARTON (4-PACK)	35	0.6MG/0.6ML SYRINGE	
XCOPRI 50/100MG TITRATION PACK	16			ZEJULA 100MG CAP	39
XCOPRI 50MG TAB	16			ZEJULA 100MG TAB	39
XCOPRI TAB 100/150MG MAINTENANCE PACK	16			ZEJULA 200MG TAB	39
XDEMVIY 0.25% OPHTH SOLN	79				
XELJANZ 10MG TAB	3				

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

ALPHABETICAL LISTING OF DRUGS

ZEJULA 300MG TAB	39	<i>ziprasidone 20mg cap</i>	41
ZELBORAF 240MG TAB	39	<i>ziprasidone 20mg inj</i>	41
ZEMAIRA 1000MG INJ	85	<i>ziprasidone 40mg cap</i>	41
<i>zenatane 10mg cap</i>	58	<i>ziprasidone 60mg cap</i>	41
<i>zenatane 20mg cap</i>	58	<i>ziprasidone 80mg cap</i>	41
<i>zenatane 30mg cap</i>	59	ZOLINZA 100MG CAP	39
<i>zenatane 40mg cap</i>	59	<i>zolmitriptan 2.5mg tab</i>	73
ZENPEP	62	<i>zolmitriptan 5mg tab</i>	73
105000-25000-79000UNI		<i>zolmitriptan 5mg/act</i>	73
T DR CAP		<i>nasal spray</i>	
ZENPEP	62	<i>zolpidem tartrate 10mg</i>	72
14000-3000-10000UNIT		<i>tab</i>	
DR CAP		<i>zolpidem tartrate 12.5mg</i>	72
ZENPEP	62	<i>er tab</i>	
24000-5000-17000UNIT		<i>zolpidem tartrate 5mg tab</i>	72
DR CAP		<i>zolpidem tartrate 6.25mg</i>	72
ZENPEP	62	<i>er tab</i>	
252600-60000-189600U		ZONISADE 100MG/5ML	16
NIT DR CAP		SUSP	
ZENPEP	62	<i>zonisamide 100mg cap</i>	16
40000-126000-168000U		<i>zonisamide 25mg cap</i>	16
NIT DR CAP		<i>zonisamide 50mg cap</i>	16
ZENPEP	62	ZORYVE 0.3% CREAM	60
42000-10000-32000UNIT		<i>zovia 1/35e 28 day pack</i>	56
DR CAP		ZTALMY 50MG/ML	16
ZENPEP	62	SUSP	
63000-15000-47000UNIT		ZURZUVAE 20MG CAP	17
DR CAP		ZURZUVAE 25MG CAP	17
ZENPEP	62	ZURZUVAE 30MG CAP	17
84000-20000-63000UNIT		ZYDELIG 100MG TAB	39
DR CAP		ZYDELIG 150MG TAB	39
ZEPOSIA 0.92MG CAP	85	ZYKADIA 150MG TAB	39
ZEPOSIA 28-DAY	85	ZYPREXA 210MG INJ	43
STARTER KIT			
ZEPOSIA CAP 7-DAY	85		
STARTER PACK			
<i>zidovudine 100mg cap</i>	47		
<i>zidovudine 10mg/ml oral</i>	47		
<i>soln</i>			
<i>zidovudine 300mg tab</i>	47		
ZIEXTENZO 6MG/0.6ML	71		
SYRINGE			
ZIMHI 5MG/0.5ML	23		
SYRINGE			

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L.A. Care
HEALTH PLAN®

For All of L.A.

Este Formulario se actualizó el 08/01/2024. Mensaje importante sobre lo que paga por las vacunas: Algunas vacunas se consideran beneficios médicos. Otras vacunas se consideran medicamentos de la Parte D. Nuestro plan cubre la mayoría de las vacunas de la Parte D sin costo alguno para usted.

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