



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 noviembre 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)**.



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

Introducción

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

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

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

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A. Avisos legales

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

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

B. Preguntas frecuentes

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

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

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

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



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

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

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

B2. ¿La Lista de medicamentos cambia alguna vez?

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

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

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

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

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

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

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

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



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

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

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

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

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

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

Cuando ocurran estos cambios, haremos lo siguiente:

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

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

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



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

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

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

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

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

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

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

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

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

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



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

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

Puede encontrar un medicamento de dos formas:

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

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

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

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

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

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

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

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

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

Cubriremos un suministro de 30 días de su medicamento si:

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



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

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

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

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

Cambios en el nivel de atención médica

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

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

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

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

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

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

También puede solicitarnos que cambiemos las reglas de su medicamento.

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



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

B11. ¿Cómo puedo solicitar una excepción?

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

B12. ¿Cuánto tiempo tarda obtener una excepción?

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

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

B13. ¿Qué son los medicamentos genéricos?

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

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

B14. ¿Qué son los medicamentos OTC?

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

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

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

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

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

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



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

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

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

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

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

B18. ¿Cuál es mi copago?

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

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

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

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

C. Resumen de la *Lista de medicamentos cubiertos*

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



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

ABREVIATURAS DE LAS NOTAS DE COBERTURA

Restricciones a la administración de utilización

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

Otros requisitos especiales de cobertura

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

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



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

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

C1. Lista de medicamentos por condición médica

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



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

D. Índice de medicamentos cubiertos

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



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

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

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

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GENTAMICIN 1MG/ML INJ	1	
<i>gentamicin 40mg/ml inj</i>	1	
<i>neomycin sulfate 500mg tab</i>	1	
TOBRAMYCIN 10MG/ML INJ	1	
<i>tobramycin 40mg/ml inj</i>	1	
<i>tobramycin 60mg/ml inh soln</i>	1	PA QL=300 ML/30 Days
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
OLUMIANT 1MG TAB	1	NDS PA QL=30 EA/30 Days
OLUMIANT 2MG TAB	1	NDS PA QL=30 EA/30 Days
OLUMIANT 4MG TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 15MG ER TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 30MG ER TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 45MG ER TAB	1	NDS PA QL=30 EA/30 Days
XELJANZ 10MG TAB	1	NDS PA QL=60 EA/30 Days
XELJANZ 1MG/ML ORAL SOLN	1	NDS PA QL=300 ML/30 Days
XELJANZ 5MG TAB	1	NDS PA QL=60 EA/30 Days
XELJANZ XR 11MG TAB	1	NDS PA QL=30 EA/30 Days
XELJANZ XR 22MG TAB	1	NDS PA QL=30 EA/30 Days
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
HADLIMA 40MG/0.4ML AUTO-INJECTOR	1	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.4ML SYRINGE	1	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.8ML AUTO-INJECTOR	1	NDS PA QL=4.80 ML/28 Days
HADLIMA 40MG/0.8ML SYRINGE	1	NDS PA QL=4.80 ML/28 Days
HUMIRA 10MG/0.1ML SYRINGE (ABBVIE)	1	NDS PA QL=2 EA/28 Days
HUMIRA 20MG/0.2ML SYRINGE (ABBVIE)	1	NDS PA QL=2 EA/28 Days
HUMIRA 40MG/0.4ML AUTO-INJECTOR (ABBVIE)	1	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.4ML SYRINGE (ABBVIE)	1	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.8ML AUTO-INJECTOR	1	NDS PA QL=6 EA/28 Days
HUMIRA 40MG/0.8ML SYRINGE	1	NDS PA QL=6 EA/28 Days
HUMIRA 80MG/0.8ML AUTO-INJECTOR (ABBVIE)	1	NDS PA QL=2 EA/28 Days
HUMIRA 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
TYENNE 162MG/0.9ML AUTO-INJECTOR	1	NDS PA QL=3.60 ML/28 Days
TYENNE 162MG/0.9ML SYRINGE	1	NDS PA QL=3.60 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	

You can find information 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>sulindac 150mg tab</i>	1	
<i>sulindac 200mg tab</i>	1	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA 20MG TAB	1	NDS PA QL=60 EA/30 Days
OTEZLA 28-DAY STARTER PACK	1	NDS PA QL=55 EA/28 Days
OTEZLA 30MG TAB	1	NDS PA QL=60 EA/30 Days
OTEZLA TAB 28-DAY STARTER PACK (55)	1	NDS PA QL=55 EA/28 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

You can find information 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 100mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 EA/30 Days
MORPHINE SULFATE 15MG TAB	1	QL=180 EA/30 Days
<i>morphine sulfate 200mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 ML/30 Days
<i>morphine sulfate 2mg/ml oral soln</i>	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

You can find information 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 12-3mg sl film</i>	1	QL=60 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 4-1mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	1	QL=90 EA/30 Days
<i>butorphanol tartrate 1mg/act nasal inhaler</i>	1	QL=10 ML/30 Days
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol 100mg cap</i>	1	
<i>danazol 200mg cap</i>	1	
<i>danazol 50mg cap</i>	1	
<i>depo-testosterone 200mg/ml inj</i>	1	
<i>testosterone 1% (12.5mg/act) gel pump</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1% (25mg) gel packet</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1% (50mg) gel packet</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1.62% (1.25gm) gel packet</i>	1	PA QL=75 GM/30 Days
<i>testosterone 1.62% (2.5gm) gel packet</i>	1	PA QL=150 GM/30 Days
<i>testosterone 1.62% (20.25mg/act) gel pump</i>	1	PA QL=150 GM/30 Days
<i>testosterone 30mg/act topical soln</i>	1	PA QL=180 ML/30 Days
<i>testosterone cypionate 100mg/ml inj</i>	1	
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	1	
<i>testosterone cypionate 200mg/ml inj</i>	1	
TESTOSTERONE ENANTHATE 200MG/ML INJ	1	
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide 2mg/act rectal foam</i>	1	PA
<i>hydrocortisone 1.67mg/ml enema</i>	1	
RECTAL STEROIDS		
<i>hydrocortisone 2.5% cream</i>	1	
<i>procto-med 2.5% cream</i>	1	
<i>proctosol 2.5% cream</i>	1	
<i>proctozone hc 2.5% cream</i>	1	
VASODILATING AGENTS		
<i>nitroglycerin 0.4% rectal ointment</i>	1	QL=30 GM/30 Days
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole 200mg tab</i>	1	
BENZNIDAZOLE 100MG TAB	1	
BENZNIDAZOLE 12.5MG TAB	1	
<i>ivermectin 3mg tab</i>	1	PA
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
<i>ranolazine 1000mg er tab</i>	1	
<i>ranolazine 500mg er tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
NITRATES		
<i>isosorbide dinitrate 10mg tab</i>	1	
<i>isosorbide dinitrate 20mg tab</i>	1	
<i>isosorbide dinitrate 30mg tab</i>	1	
<i>isosorbide dinitrate 5mg tab</i>	1	
<i>isosorbide mononitrate 10mg tab</i>	1	
<i>isosorbide mononitrate 120mg er tab</i>	1	
<i>isosorbide mononitrate 20mg tab</i>	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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>diazepam 5mg/ml oral soln</i>	1	QL=240 ML/30 Days
<i>lorazepam 0.5mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 1mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg/ml oral soln</i>	1	QL=150 ML/30 Days
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide 100mg cap</i>	1	PA
<i>disopyramide 150mg cap</i>	1	PA
QUINIDINE SULFATE 200MG TAB	1	
QUINIDINE SULFATE 300MG TAB	1	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine 150mg cap</i>	1	
<i>mexiletine 200mg cap</i>	1	
<i>mexiletine 250mg cap</i>	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate 100mg tab</i>	1	
<i>flecainide acetate 150mg tab</i>	1	
<i>flecainide acetate 50mg tab</i>	1	
<i>propafenone 150mg tab</i>	1	
<i>propafenone 225mg er cap</i>	1	
<i>propafenone 225mg tab</i>	1	
<i>propafenone 300mg tab</i>	1	
<i>propafenone 325mg er cap</i>	1	
<i>propafenone 425mg er cap</i>	1	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone 200mg tab</i>	1	
<i>amiodarone 400mg tab</i>	1	
<i>dofetilide 0.125mg cap</i>	1	
<i>dofetilide 0.25mg cap</i>	1	
<i>dofetilide 0.5mg cap</i>	1	
MULTAQ 400MG TAB	1	
<i>pacerone 200mg tab</i>	1	
<i>pacerone 400mg tab</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XOLAIR 150MG/ML SYRINGE	1	NDS PA
XOLAIR 300MG/2ML AUTO-INJECTOR	1	NDS PA
XOLAIR 300MG/2ML SYRINGE	1	NDS PA
XOLAIR 75MG/0.5ML AUTO-INJECTOR	1	NDS PA
XOLAIR 75MG/0.5ML SYRINGE	1	NDS PA
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG INHALER	1	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH INHALER	1	
<i>ipratropium bromide 0.02% inh soln</i>	1	PA BvD
SPIRIVA RESPIMAT 1.25MCG/ACT INH	1	ST QL=4 GM/30 Days
LEUKOTRIENE MODULATORS		
<i>montelukast 10mg tab</i>	1	QL=30 EA/30 Days
<i>montelukast 4mg chew tab</i>	1	QL=30 EA/30 Days
<i>montelukast 4mg granules</i>	1	QL=30 EA/30 Days
<i>montelukast 5mg chew tab</i>	1	QL=30 EA/30 Days
<i>zafirlukast 10mg tab</i>	1	QL=60 EA/30 Days
<i>zafirlukast 20mg tab</i>	1	QL=60 EA/30 Days
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
<i>roflumilast 0.5mg tab</i>	1	
<i>roflumilast 250mcg tab</i>	1	
STEROID INHALANTS		
ALVESCO 160MCG INHALER	1	QL=12.20 GM/30 Days
ALVESCO 80MCG INHALER	1	QL=12.20 GM/30 Days
ARNUITY 100MCG INHALER	1	QL=30 EA/30 Days
ARNUITY 200MCG INHALER	1	QL=30 EA/30 Days
ARNUITY 50MCG INHALER	1	QL=30 EA/30 Days
ASMANEX 100MCG HFA INHALER	1	QL=13 GM/30 Days
ASMANEX 110MCG (30ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 200MCG HFA INHALER	1	QL=13 GM/30 Days
ASMANEX 220MCG (120ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 220MCG (30ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 220MCG (60ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 50MCG HFA INHALER	1	QL=13 GM/30 Days
<i>budesonide 0.125mg/ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
<i>budesonide 0.25mg/ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
FLUTICASONE PROPIONATE 110MCG INHALER	1	QL=24 GM/30 Days
FLUTICASONE PROPIONATE 220MCG INHALER	1	QL=24 GM/30 Days
FLUTICASONE PROPIONATE 44MCG INHALER	1	QL=21.20 GM/30 Days
QVAR 40MCG REDIHALER	1	QL=21.20 GM/30 Days
QVAR 80MCG REDIHALER	1	QL=21.20 GM/30 Days
SYMPATHOMIMETICS		
ADVAIR 115-21MCG HFA INHALER	1	QL=12 GM/30 Days
ADVAIR 230-21MCG HFA INHALER	1	QL=12 GM/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER	1	QL=12 GM/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	1	PA BvD
<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	1	
<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	1	PA BvD
<i>albuterol 1.25mg/3ml neb soln</i>	1	PA BvD
<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	1	QL=13.40 GM/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	1	QL=17 GM/30 Days
<i>albuterol 2mg tab</i>	1	
<i>albuterol 4mg tab</i>	1	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XANTHINES		
THEOPHYLLINE 100MG ER TAB	1	
THEOPHYLLINE 200MG ER TAB	1	
<i>theophylline 300mg er tab</i>	1	
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450mg er tab</i>	1	
<i>theophylline 600mg er tab</i>	1	
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
<i>jantoven 10mg tab</i>	1	
<i>jantoven 1mg tab</i>	1	
<i>jantoven 2.5mg tab</i>	1	
<i>jantoven 2mg tab</i>	1	
<i>jantoven 3mg tab</i>	1	
<i>jantoven 4mg tab</i>	1	
<i>jantoven 5mg tab</i>	1	
<i>jantoven 6mg tab</i>	1	
<i>jantoven 7.5mg tab</i>	1	
<i>warfarin sodium 10mg tab</i>	1	
<i>warfarin sodium 1mg tab</i>	1	
<i>warfarin sodium 2.5mg tab</i>	1	
<i>warfarin sodium 2mg tab</i>	1	
<i>warfarin sodium 3mg tab</i>	1	
<i>warfarin sodium 4mg tab</i>	1	
<i>warfarin sodium 5mg tab</i>	1	
<i>warfarin sodium 6mg tab</i>	1	
<i>warfarin sodium 7.5mg tab</i>	1	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS 2.5MG TAB	1	
ELIQUIS 5MG 30-DAY STARTER PACK	1	
ELIQUIS 5MG TAB	1	
XARELTO 10MG TAB	1	
XARELTO 15MG TAB	1	
XARELTO 1MG/ML SUSP	1	
XARELTO 2.5MG TAB	1	
XARELTO 20MG TAB	1	
XARELTO TAB STARTER PACK	1	
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>enoxaparin sodium 100mg/1ml syringe</i>	1	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	1	
<i>enoxaparin sodium 150mg/1ml syringe</i>	1	
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	1	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	1	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	1	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fondaparinux sodium 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	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 5MG (5MG/0.1ML) NASAL SPARY DOSE PACK	1	QL=10 EA/30 Days
ANTICONVULSANTS - MISC.		
APTIOM 200MG TAB	1	PA NSO
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	

You can find information 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 100mg tab</i>	1	
<i>lamotrigine 150mg tab</i>	1	
<i>lamotrigine 200mg er tab</i>	1	
<i>lamotrigine 200mg odt</i>	1	
<i>lamotrigine 200mg tab</i>	1	
<i>lamotrigine 250mg er tab</i>	1	
<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	

You can find information 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>subvenite 150mg tab</i>	1	
<i>subvenite 200mg tab</i>	1	
<i>subvenite 25mg tab</i>	1	
<i>topiramate 100mg tab</i>	1	
<i>topiramate 15mg cap</i>	1	
<i>topiramate 200mg tab</i>	1	
<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
VIGAFYDE 100MG/ML ORAL SOLN	1	PA NSO QL=720 ML/30 Days
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>phenytoin sodium 300mg er cap</i>	1	
SUCCINIMIDES		
<i>ethosuximide 250mg cap</i>	1	
<i>ethosuximide 50mg/ml oral soln</i>	1	
<i>methsuximide 300mg cap</i>	1	
VALPROIC ACID		
<i>divalproex sodium 125mg dr cap</i>	1	
<i>divalproex sodium 125mg dr tab</i>	1	
<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)		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>citalopram 10mg tab</i>	1	
<i>citalopram 20mg tab</i>	1	
<i>citalopram 2mg/ml oral soln</i>	1	
<i>citalopram 40mg tab</i>	1	
<i>escitalopram 10mg tab</i>	1	
<i>escitalopram 1mg/ml oral soln</i>	1	
<i>escitalopram 20mg tab</i>	1	
<i>escitalopram 5mg tab</i>	1	
<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	

You can find information 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>desvenlafaxine succinate 25mg er tab</i>	1	
<i>desvenlafaxine succinate 50mg er tab</i>	1	
DRIZALMA 20MG DR CAP	1	PA NSO QL=60 EA/30 Days
DRIZALMA 30MG DR CAP	1	PA NSO QL=60 EA/30 Days
DRIZALMA 40MG DR CAP	1	PA NSO QL=60 EA/30 Days
DRIZALMA 60MG DR CAP	1	PA NSO QL=60 EA/30 Days
<i>duloxetine 20mg dr cap</i>	1	
<i>duloxetine 30mg dr cap</i>	1	
<i>duloxetine 60mg dr cap</i>	1	
FETZIMA 120MG ER CAP	1	ST_NSO QL=30 EA/30 Days
FETZIMA 20MG ER CAP	1	ST_NSO QL=30 EA/30 Days
FETZIMA 40MG ER CAP	1	ST_NSO QL=30 EA/30 Days
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

You can find information 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>doxepin 150mg cap</i>	1	PA NSO
<i>doxepin 25mg cap</i>	1	PA NSO
<i>doxepin 50mg cap</i>	1	PA NSO
<i>doxepin 75mg cap</i>	1	PA NSO
<i>imipramine 10mg tab</i>	1	PA NSO
<i>imipramine 25mg tab</i>	1	PA NSO
<i>imipramine 50mg tab</i>	1	PA NSO
<i>nortriptyline 10mg cap</i>	1	
<i>nortriptyline 25mg cap</i>	1	
<i>nortriptyline 2mg/ml oral soln</i>	1	
<i>nortriptyline 50mg cap</i>	1	
<i>nortriptyline 75mg cap</i>	1	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SYNJARDY 5-1000MG ER TAB	1	QL=60 EA/30 Days
SYNJARDY 5-1000MG TAB	1	QL=60 EA/30 Days
SYNJARDY 5-500MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 10-1000MG TAB	1	QL=30 EA/30 Days
XIGDUO XR 10-500MG TAB	1	QL=30 EA/30 Days
XIGDUO XR 2.5-1000MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 5-1000MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 5-500MG TAB	1	QL=30 EA/30 Days
BIGUANIDES		
<i>metformin 1000mg tab</i>	1	
<i>metformin 500mg er tab</i>	1	
<i>metformin 500mg tab</i>	1	
<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	
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
LIRAGLUTIDE 6MG/ML PEN INJ	1	PA QL=9 ML/30 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RYBELSUS 14MG TAB	1	PA QL=30 EA/30 Days
RYBELSUS 3MG TAB	1	PA QL=30 EA/30 Days
RYBELSUS 7MG TAB	1	PA QL=30 EA/30 Days
TRULICITY 0.75MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 1.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 3MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 4.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
VICTOZA 18MG/3ML PEN INJ	1	PA QL=9 ML/30 Days
INSULIN		
HUMALOG 100UNIT/ML CARTRIDGE	1	INS
HUMALOG 100UNIT/ML KWIKPEN	1	INS
HUMALOG 200UNIT/ML PEN INJ	1	INS
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	

You can find information 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>repaglinide 0.5mg tab</i>	1	
<i>repaglinide 1mg tab</i>	1	
<i>repaglinide 2mg tab</i>	1	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA 10MG TAB	1	QL=30 EA/30 Days
FARXIGA 5MG TAB	1	QL=30 EA/30 Days
JARDIANCE 10MG TAB	1	QL=30 EA/30 Days
JARDIANCE 25MG TAB	1	QL=30 EA/30 Days
SULFONYLUREAS		
<i>glimepiride 1mg tab</i>	1	
<i>glimepiride 2mg tab</i>	1	
<i>glimepiride 4mg tab</i>	1	
<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	
NALOXONE 0.4MG/ML SYRINGE	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		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron 1mg tab</i>	1	PA BvD QL=60 EA/30 Days
<i>ondansetron 0.8mg/ml oral soln</i>	1	PA BvD
<i>ondansetron 4mg odt</i>	1	PA BvD
<i>ondansetron 4mg tab</i>	1	PA BvD
<i>ondansetron 8mg odt</i>	1	PA BvD
<i>ondansetron 8mg tab</i>	1	PA BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab</i>	1	
<i>meclizine 25mg tab</i>	1	
<i>scopolamine 1mg/72hr patch</i>	1	
ANTIEMETICS - MISCELLANEOUS		
<i>doxylamine succinate/pyridoxine 10-10mg dr tab</i>	1	
<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	

You can find information 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>fluconazole 400mg/200ml inj</i>	1	
<i>fluconazole 40mg/ml susp</i>	1	
<i>fluconazole 50mg tab</i>	1	
<i>itraconazole 100mg cap</i>	1	
<i>ketoconazole 200mg tab</i>	1	
<i>posaconazole 100mg dr tab</i>	1	PA
<i>posaconazole 40mg/ml susp</i>	1	PA
VORICONAZOLE 200MG INJ	1	PA
<i>voriconazole 200mg tab</i>	1	PA
<i>voriconazole 40mg/ml susp</i>	1	PA
<i>voriconazole 50mg tab</i>	1	PA
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	
ANTI-HYPERLIPIDEMICS		
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL 180MG TAB	1	PA QL=30 EA/30 Days
ANTI-HYPERLIPIDEMICS - 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
ANTI-HYPERLIPIDEMICS - 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		

You can find information 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>fenofibrate 134mg cap</i>	1	
<i>fenofibrate 145mg tab</i>	1	
<i>fenofibrate 160mg tab</i>	1	
<i>fenofibrate 200mg cap</i>	1	
<i>fenofibrate 48mg tab</i>	1	
<i>fenofibrate 54mg tab</i>	1	
<i>fenofibrate 67mg cap</i>	1	
<i>fenofibric acid 135mg dr cap</i>	1	
<i>fenofibric acid 45mg dr cap</i>	1	
<i>gemfibrozil 600mg tab</i>	1	QL=60 EA/30 Days
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin 10mg tab</i>	1	
<i>atorvastatin 20mg tab</i>	1	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril 10mg tab</i>	1	
<i>benazepril 20mg tab</i>	1	
<i>benazepril 40mg tab</i>	1	
<i>benazepril 5mg tab</i>	1	
<i>captopril 100mg tab</i>	1	
<i>captopril 12.5mg tab</i>	1	
<i>captopril 25mg tab</i>	1	
<i>captopril 50mg tab</i>	1	
<i>enalapril maleate 10mg tab</i>	1	
<i>enalapril maleate 2.5mg tab</i>	1	
<i>enalapril maleate 20mg tab</i>	1	
<i>enalapril maleate 5mg tab</i>	1	
<i>fosinopril sodium 10mg tab</i>	1	
<i>fosinopril sodium 20mg tab</i>	1	
<i>fosinopril sodium 40mg tab</i>	1	
<i>lisinopril 10mg tab</i>	1	
<i>lisinopril 2.5mg tab</i>	1	
<i>lisinopril 20mg tab</i>	1	
<i>lisinopril 30mg tab</i>	1	
<i>lisinopril 40mg tab</i>	1	
<i>lisinopril 5mg tab</i>	1	
<i>moexipril 15mg tab</i>	1	
<i>moexipril 7.5mg tab</i>	1	
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	

You can find information 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>candesartan cilexetil 4mg tab</i>	1	
<i>candesartan cilexetil 8mg tab</i>	1	
<i>irbesartan 150mg tab</i>	1	
<i>irbesartan 300mg tab</i>	1	
<i>irbesartan 75mg tab</i>	1	
<i>losartan potassium 100mg tab</i>	1	
<i>losartan potassium 25mg tab</i>	1	
<i>losartan potassium 50mg tab</i>	1	
<i>olmesartan medoxomil 20mg tab</i>	1	
<i>olmesartan medoxomil 40mg tab</i>	1	
<i>olmesartan medoxomil 5mg tab</i>	1	
<i>telmisartan 20mg tab</i>	1	
<i>telmisartan 40mg tab</i>	1	
<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	

You can find information 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/olmesartan medoxomil 10-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-12.5-160mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-25-160mg tab</i>	1	
<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	

You can find information 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/lisinopril 25-20mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	1	
<i>hydrochlorothiazide/telmisartan 12.5-40mg tab</i>	1	
<i>hydrochlorothiazide/telmisartan 12.5-80mg tab</i>	1	
<i>hydrochlorothiazide/telmisartan 25-80mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	1	
DIRECT RENIN INHIBITORS		
<i>aliskiren 150mg tab</i>	1	
<i>aliskiren 300mg tab</i>	1	
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
<i>eplerenone 25mg tab</i>	1	
<i>eplerenone 50mg tab</i>	1	
VASODILATORS		
<i>hydralazine 100mg tab</i>	1	
<i>hydralazine 10mg tab</i>	1	
<i>hydralazine 25mg tab</i>	1	
<i>hydralazine 50mg tab</i>	1	
<i>minoxidil 10mg tab</i>	1	
<i>minoxidil 2.5mg tab</i>	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
<i>metronidazole 250mg tab</i>	1	
<i>metronidazole 500mg tab</i>	1	
<i>metronidazole 5mg/ml inj</i>	1	
<i>pentamidine isethionate 300mg inj</i>	1	
<i>pentamidine isethionate 50mg/ml inh soln</i>	1	PA BvD QL=1 EA/28 Days
<i>tinidazole 250mg tab</i>	1	
<i>tinidazole 500mg tab</i>	1	

You can find information 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>trimethoprim 100mg tab</i>	1	
XIFAXAN 200MG TAB	1	QL=9 EA/3 Days
XIFAXAN 550MG TAB	1	PA QL=60 EA/30 Days
ANTI-INFECTIVE MISC. - COMBINATIONS		
<i>sulfamethoxazole/trimethoprim 200-40mg/5ml susp</i>	1	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
ANTIPROTOZOAL AGENTS		
<i>atovaquone 150mg/ml susp</i>	1	
NITAZOXANIDE 500MG TAB	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

You can find information 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>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	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
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

You can find information 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>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
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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>dasatinib 100mg tab</i>	1	NDS PA NSO QL=30 EA/30 Days
<i>dasatinib 140mg tab</i>	1	NDS PA NSO QL=30 EA/30 Days
<i>dasatinib 20mg tab</i>	1	NDS PA NSO QL=90 EA/30 Days
<i>dasatinib 50mg tab</i>	1	NDS PA NSO QL=30 EA/30 Days
<i>dasatinib 70mg tab</i>	1	NDS PA NSO QL=30 EA/30 Days
<i>dasatinib 80mg tab</i>	1	NDS PA NSO QL=30 EA/30 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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 100MG TAB 7-DAY PACK (14)	1	NDS PA NSO QL=56 EA/28 Days
OGSIVEO 150MG TAB 7-DAY PACK (14)	1	NDS PA NSO QL=56 EA/28 Days
OGSIVEO 50MG TAB	1	NDS PA NSO QL=180 EA/30 Days
OJEMDA 100MG TAB	1	NDS PA NSO QL=24 EA/28 Days
OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	1	NDS PA NSO QL=24 EA/28 Days
OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	1	NDS PA NSO QL=24 EA/28 Days
OJEMDA 25MG/ML POWDER FOR ORAL SUSP	1	NDS PA NSO QL=96 ML/28 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 120MG TAB	1	NDS PA NSO QL=60 EA/30 Days
RETEVMO 160MG TAB	1	NDS PA NSO QL=60 EA/30 Days
RETEVMO 40MG CAP	1	NDS PA NSO QL=120 EA/30 Days
RETEVMO 40MG TAB	1	NDS PA NSO QL=90 EA/30 Days
RETEVMO 80MG CAP	1	NDS PA NSO QL=120 EA/30 Days
RETEVMO 80MG TAB	1	NDS PA NSO QL=60 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
SCEMBLIX 100MG TAB	1	NDS PA NSO QL=120 EA/30 Days
SCEMBLIX 20MG TAB	1	NDS PA NSO QL=60 EA/30 Days
SCEMBLIX 40MG TAB	1	NDS PA NSO QL=300 EA/30 Days
<i>sorafenib 200mg tab</i>	1	PA NSO QL=120 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<i>torpenz 10mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>torpenz 2.5mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>torpenz 5mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>torpenz 7.5mg tab</i>	1	PA NSO QL=30 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
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 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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	

You can find information 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>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		
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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

You can find information 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>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	
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>olanzapine 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		
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	

You can find information 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>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
<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	

You can find information 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>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	
<i>efavirenz 600mg tab</i>	1	
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	1	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	1	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	1	
<i>emtricitabine 200mg cap</i>	1	
<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	1	QL=30 EA/30 Days
EMTRIVA 10MG/ML ORAL SOLN	1	
<i>etravirine 100mg tab</i>	1	
<i>etravirine 200mg tab</i>	1	
EVOTAZ 300-150MG TAB	1	
<i>fosamprenavir 700mg tab</i>	1	
FUZEON 90MG INJ	1	
GENVOYA 150-150-200-10MG TAB	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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	
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VIRACEPT 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
<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

You can find information 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>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	
<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	

You can find information 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>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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>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	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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		
<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
<i>ivabradine 5mg tab</i>	1	PA
<i>ivabradine 7.5mg tab</i>	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ceftriaxone 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	
<i>aubra 28 day pack</i>	1	
<i>aviane 28 pack</i>	1	
<i>azurette 28 day 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	

You can find information 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/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	
<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	

You can find information 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>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>lutra 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	
<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	

You can find information 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>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>turgoz 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		
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	

You can find information 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 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
<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

You can find information 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>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	
<i>zenatane 30mg cap</i>	1	
<i>zenatane 40mg cap</i>	1	
ANTIBIOTICS - TOPICAL		
<i>gentamicin 0.1% cream</i>	1	QL=30 GM/30 Days
<i>gentamicin 0.1% ointment</i>	1	QL=120 GM/30 Days
<i>mupirocin 2% ointment</i>	1	QL=220 GM/30 Days
ANTIFUNGALS - TOPICAL		
<i>ciclopirox 0.77% cream</i>	1	QL=90 GM/30 Days
<i>ciclopirox 0.77% gel</i>	1	QL=100 GM/30 Days
<i>ciclopirox 1% shampoo</i>	1	QL=120 ML/30 Days
<i>ciclopirox 8% topical soln</i>	1	QL=13.20 ML/30 Days
<i>clotrimazole 1% cream</i>	1	QL=45 GM/30 Days
<i>clotrimazole/betamethasone 1-0.05% cream</i>	1	QL=90 GM/30 Days
CLOTRIMAZOLE/BETAMETHASONE 1-0.05% LOTION	1	QL=60 ML/30 Days
<i>econazole nitrate 1% cream</i>	1	QL=85 GM/30 Days
<i>ketoconazole 2% cream</i>	1	QL=120 GM/30 Days
<i>ketoconazole 2% shampoo</i>	1	QL=240 ML/30 Days
<i>nyamyc 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
<i>nystatin 100000 unit/gm ointment</i>	1	QL=30 GM/30 Days
<i>nystatin 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
<i>nystatin 100000unit/ml cream</i>	1	QL=30 GM/30 Days
<i>% ointment</i>	1	QL=60 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm- % cream</i>	1	QL=60 GM/30 Days
<i>nystop 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene 1% gel</i>	1	PA NSO QL=60 GM/30 Days
<i>diclofenac sodium 3% gel</i>	1	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	1	QL=10 ML/30 Days
<i>fluorouracil 5% cream</i>	1	QL=40 GM/30 Days
<i>fluorouracil 5% topical solution</i>	1	QL=10 ML/30 Days
PANRETIN 0.1% GEL	1	NDS PA NSO
VALCHLOR 0.016% GEL	1	NDS PA NSO QL=240 GM/30 Days
ANTIPSORIATICS		
<i>acitretin 10mg cap</i>	1	
<i>acitretin 17.5mg cap</i>	1	
<i>acitretin 25mg cap</i>	1	
<i>calcipotriene 0.005% cream</i>	1	PA QL=120 GM/30 Days
<i>calcipotriene 0.005% ointment</i>	1	PA QL=120 GM/30 Days
CALCIPOTRIENE 0.005% TOPICAL SOLN	1	PA QL=120 ML/30 Days
METHOXSALEN 10MG CAP	1	
SKYRIZI 150MG/ML AUTO-INJECTOR	1	PA QL=7 ML/365 Days
SKYRIZI 150MG/ML SYRINGE	1	PA QL=7 ML/365 Days
STELARA 45MG/0.5ML INJ	1	PA QL=.50 ML/28 Days
STELARA 45MG/0.5ML SYRINGE	1	PA QL=.50 ML/28 Days
STELARA 90MG/ML SYRINGE	1	PA QL=1 ML/28 Days
TALTZ 20MG/0.25ML SYRINGE	1	NDS PA QL=.25 ML/28 Days
TALTZ 40MG/0.5ML SYRINGE	1	NDS PA QL=.50 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	PA QL=2 ML/28 Days
TREMFYA 100MG/ML SYRINGE	1	PA QL=2 ML/28 Days
ZORYVE 0.3% CREAM	1	PA QL=60 GM/30 Days
ANTISEBORRHEIC PRODUCTS		
<i>selenium sulfide 2.5% shampoo</i>	1	
ANTIVIRALS - TOPICAL		
<i>acyclovir 5% ointment</i>	1	QL=30 GM/30 Days
<i>penciclovir 1% cream</i>	1	QL=5 GM/7 Days
BURN PRODUCTS		
<i>silver sulfadiazine 1% cream</i>	1	
<i>ssd 1% cream</i>	1	
SULFAMYLON 85MG/GM CREAM	1	QL=453.60 GM/30 Days
CORTICOSTEROIDS - TOPICAL		
<i>ala-cort 1% cream</i>	1	QL=240 GM/30 Days
<i>ala-cort 2.5% cream</i>	1	QL=454 GM/30 Days
<i>alclometasone dipropionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>alclometasone dipropionate 0.05% ointment</i>	1	QL=120 GM/30 Days
<i>betamethasone 0.05% aug cream</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% aug lotion</i>	1	QL=120 ML/30 Days

You can find information 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>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
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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
<i>tridacaine 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>permethrin 5% cream</i>	1	
WOUND CARE PRODUCTS		
REGRANEX 0.01% GEL	1	PA QL=30 GM/15 Days
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON 120000-24000-76000UNIT DR CAP	1	
CREON 15000-3000-9500UNIT DR CAP	1	
CREON 180000-36000-114000UNIT DR CAP	1	
CREON 30000-6000-19000UNIT DR CAP	1	
CREON 60000-12000-38000UNIT DR CAP	1	
SUCRAID 8500UNIT/ML ORAL SOLN	1	NDS PA
ZENPEP 105000-25000-79000UNIT DR CAP	1	ST
ZENPEP 14000-3000-10000UNIT DR CAP	1	ST
ZENPEP 24000-5000-17000UNIT DR CAP	1	ST
ZENPEP 252600-60000-189600UNIT DR CAP	1	ST
ZENPEP 40000-126000-168000UNIT DR CAP	1	ST
ZENPEP 42000-10000-32000UNIT DR CAP	1	ST
ZENPEP 63000-15000-47000UNIT DR CAP	1	ST
ZENPEP 84000-20000-63000UNIT DR CAP	1	ST
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide 125mg tab</i>	1	
<i>acetazolamide 250mg tab</i>	1	
<i>acetazolamide 500mg er cap</i>	1	
<i>methazolamide 25mg tab</i>	1	
<i>methazolamide 50mg tab</i>	1	
DIURETIC COMBINATIONS		
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	1	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	1	
LOOP DIURETICS		
<i>bumetanide 0.5mg tab</i>	1	
<i>bumetanide 1mg tab</i>	1	
<i>bumetanide 2mg tab</i>	1	
FUROSCIX 80MG/10ML CARTRIDGE	1	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	1	
<i>furosemide 10mg/ml oral soln</i>	1	
<i>furosemide 20mg tab</i>	1	
<i>furosemide 40mg tab</i>	1	
<i>furosemide 80mg tab</i>	1	
FUROSEMIDE 8MG/ML ORAL SOLN	1	
<i>torseamide 100mg tab</i>	1	

You can find information 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>torse mide 10mg tab</i>	1	
<i>torse mide 20mg tab</i>	1	
<i>torse mide 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	
<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		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
HORMONE RECEPTOR MODULATORS		
OSPHENA 60MG TAB	1	PA
<i>raloxifene 60mg tab</i>	1	QL=30 EA/30 Days
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX 40MG/4ML INJ	1	NDS PA
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
SYNAREL 2MG/ML NASAL INHALER	1	NDS PA
METABOLIC MODIFIERS		
<i>calcitriol 0.25mcg cap</i>	1	PA BvD
<i>calcitriol 0.5mcg cap</i>	1	PA BvD
<i>calcitriol 1mcg/ml oral soln</i>	1	PA BvD
<i>carglumic acid 200mg tab for oral susp</i>	1	PA
<i>cinacalcet 30mg tab</i>	1	PA BvD
<i>cinacalcet 60mg tab</i>	1	PA BvD
<i>cinacalcet 90mg tab</i>	1	PA BvD
GALAFOLD 123MG 28 DAY PACK	1	NDS PA QL=15 EA/30 Days
<i>javygtor 100mg powder for oral soln</i>	1	PA
<i>javygtor 100mg tab</i>	1	PA
<i>javygtor 500mg powder for oral soln</i>	1	PA
<i>levocarnitine 100mg/ml oral soln</i>	1	PA BvD
<i>levocarnitine 330mg tab</i>	1	PA BvD
<i>nitisinone 10mg cap</i>	1	NDS PA
<i>nitisinone 20mg cap</i>	1	NDS PA
<i>nitisinone 2mg cap</i>	1	NDS PA
<i>nitisinone 5mg cap</i>	1	NDS PA
ORFADIN 4MG/ML SUSP	1	NDS PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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	

You can find information 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>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		
OICALIVA 10MG TAB	1	NDS PA QL=30 EA/30 Days
OICALIVA 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		
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
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	

You can find information 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>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
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<i>glutamine 5000mg powder for oral soln</i>	1	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
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		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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>gavilyte-n 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		

You can find information 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>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	
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		

You can find information 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>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
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	

You can find information 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>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	
<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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<i>cyclosporine 25mg cap</i>	1	PA BvD
<i>cyclosporine modified 100mg cap</i>	1	PA BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	1	PA BvD
<i>cyclosporine modified 25mg cap</i>	1	PA BvD
<i>cyclosporine modified 50mg cap</i>	1	PA BvD
ENSPRYNG 120MG/ML SYRINGE	1	NDS PA QL=2 ML/28 Days
ENVARUSUS XR 0.75MG TAB	1	PA BvD
ENVARUSUS XR 1MG TAB	1	PA BvD
ENVARUSUS XR 4MG TAB	1	PA BvD
<i>everolimus 0.25mg tab</i>	1	PA BvD
<i>everolimus 0.5mg tab</i>	1	PA BvD
<i>everolimus 0.75mg tab</i>	1	PA BvD
<i>everolimus 1mg tab</i>	1	PA BvD
<i>gengraf 100mg cap</i>	1	PA BvD
<i>gengraf 100mg/ml oral soln</i>	1	PA BvD
<i>gengraf 25mg cap</i>	1	PA BvD
LUPKYNIS 7.9MG CAP	1	NDS PA QL=180 EA/30 Days
<i>mycophenolate mofetil 200mg/ml susp</i>	1	PA BvD
<i>mycophenolate mofetil 250mg cap</i>	1	PA BvD
<i>mycophenolate mofetil 500mg tab</i>	1	PA BvD
<i>mycophenolic acid 180mg dr tab</i>	1	PA BvD
<i>mycophenolic acid 360mg dr tab</i>	1	PA BvD
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	1	PA BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	1	PA BvD
<i>sirolimus 0.5mg 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>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		
<i>kionex 15gm/60ml susp</i>	1	
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		
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
NEUROMUSCULAR AGENTS		
ALS AGENTS		
<i>RADICAVA 105MG/5ML SUSP</i>	1	NDS PA QL=70 ML/28 Days
<i>riluzole 50mg tab</i>	1	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
<i>EVRYSDI 0.75MG/ML ORAL SOLN</i>	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		
<i>DOJOLVI 100% ORAL SOLN</i>	1	NDS PA
<i>INTRALIPID 20GM/100ML INJ</i>	1	PA BvD
<i>NUTRILIPID 20GM/100ML INJ</i>	1	PA BvD
PROTEINS		
<i>CLINIMIX 4.25/10 INJ</i>	1	PA BvD
<i>CLINIMIX 4.25/5 INJ</i>	1	PA BvD
<i>CLINIMIX 5/15 INJ</i>	1	PA BvD
<i>CLINIMIX 5/20 INJ</i>	1	PA BvD
<i>CLINIMIX E 2.75/5 INJ</i>	1	PA BvD
<i>CLINIMIX E 4.25/10 INJ</i>	1	PA BvD
<i>CLINIMIX E 4.25/5 INJ</i>	1	PA BvD
<i>CLINIMIX E 5/15 INJ</i>	1	PA BvD
<i>CLINIMIX E 5/20 INJ</i>	1	PA BvD
<i>clinisol 15 inj</i>	1	PA BvD

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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		
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	1	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	1	
OTIC STEROIDS		
<i>flac 0.01% otic soln</i>	1	
<i>fluocinolone acetonide 0.01% otic soln</i>	1	
<i>hydrocortisone/acetic acid 1-2% otic soln</i>	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
BIVIGAM 5GM/50ML INJ	1	NDS PA
GAMMAGARD 10GM INJ	1	NDS PA
GAMMAGARD 2.5GM/25ML INJ	1	NDS PA
GAMMAGARD 5GM INJ	1	NDS PA
GAMMAKED 1GM/10ML INJ	1	NDS PA
GAMMAPLEX 10GM/100ML INJ	1	NDS PA
GAMMAPLEX 10GM/200ML INJ	1	NDS PA
GAMMAPLEX 20GM/200ML INJ	1	NDS PA
GAMMAPLEX 5GM/50ML INJ	1	NDS PA
GAMUNEX 1GM/10ML INJ	1	NDS PA
OCTAGAM 1GM/20ML INJ	1	NDS PA
OCTAGAM 2GM/20ML INJ	1	NDS PA
PANZYGA 10GM/100ML INJ	1	NDS PA
PANZYGA 1GM/10ML INJ	1	NDS PA
PANZYGA 2.5GM/25ML INJ	1	NDS PA
PANZYGA 20GM/200ML INJ	1	NDS PA

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
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 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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>piperacillin/tazobactam 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	
<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	

You can find information 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>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
<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 TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 6-12-24MG XR TAB TITRATION PACK	1	NDS PA QL=42 EA/28 Days
AUSTEDO 6MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 9MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO XR 12MG TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO XR 18MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 24MG TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO XR 30MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 36MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 42MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 48MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 6MG TAB	1	NDS PA QL=90 EA/30 Days
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATION PACK	1	NDS PA QL=28 EA/28 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SULFONAMIDES		
<i>sulfadiazine 500mg tab</i>	1	
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA 150MG TAB	1	NDS PA QL=30 EA/14 Days
GLYCYLCYCLINES		
<i>tigecycline 50mg inj</i>	1	NDS
TETRACYCLINES		
<i>demeclocycline 150mg tab</i>	1	
<i>demeclocycline 300mg tab</i>	1	
<i>doxy 100mg inj</i>	1	
<i>doxycycline hyclate 100mg cap</i>	1	
<i>doxycycline hyclate 100mg tab</i>	1	
<i>doxycycline hyclate 20mg tab</i>	1	
<i>doxycycline hyclate 50mg cap</i>	1	
<i>doxycycline monohydrate 100mg cap</i>	1	
<i>doxycycline monohydrate 100mg tab</i>	1	
<i>doxycycline monohydrate 50mg cap</i>	1	
<i>doxycycline monohydrate 50mg tab</i>	1	
<i>doxycycline monohydrate 5mg/ml susp</i>	1	
<i>minocycline 100mg cap</i>	1	
<i>minocycline 50mg cap</i>	1	
<i>minocycline 75mg cap</i>	1	
<i>tetracycline 250mg cap</i>	1	
<i>tetracycline 500mg cap</i>	1	
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	

You can find information 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>levothyroxine sodium 137mcg tab</i>	1	
<i>levothyroxine sodium 150mcg tab</i>	1	
<i>levothyroxine sodium 175mcg tab</i>	1	
<i>levothyroxine sodium 200mcg tab</i>	1	
<i>levothyroxine sodium 25mcg tab</i>	1	
<i>levothyroxine sodium 300mcg tab</i>	1	
<i>levothyroxine sodium 50mcg tab</i>	1	
<i>levothyroxine sodium 75mcg tab</i>	1	
<i>levothyroxine sodium 88mcg tab</i>	1	
<i>levoxyl 100mcg tab</i>	1	
<i>levoxyl 112mcg tab</i>	1	
<i>levoxyl 125mcg tab</i>	1	
<i>levoxyl 137mcg tab</i>	1	
<i>levoxyl 150mcg tab</i>	1	
<i>levoxyl 175mcg tab</i>	1	
<i>levoxyl 200mcg tab</i>	1	
<i>levoxyl 25mcg tab</i>	1	
<i>levoxyl 50mcg tab</i>	1	
<i>levoxyl 75mcg tab</i>	1	
<i>levoxyl 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	1	
<i>liothyronine sodium 50mcg tab</i>	1	
<i>liothyronine sodium 5mcg tab</i>	1	
<i>unithroid 100mcg tab</i>	1	
<i>unithroid 112mcg tab</i>	1	
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PEDIARIX SYRINGE	1	
PENTACEL 96-30-68UNIT/ML INJ	1	
QUADRACEL INJ	1	
QUADRACEL INJ	1	
QUADRACEL SYRINGE	1	
TDVAX 4-4UNIT/ML INJ	1	PA BvD VAC
TENIVAC 4-10UNIT/ML INJ	1	PA BvD VAC
TENIVAC 4-10UNIT/ML SYRINGE	1	PA BvD VAC
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>dicyclomine 10mg cap</i>	1	
<i>dicyclomine 20mg tab</i>	1	
<i>dicyclomine 2mg/ml oral soln</i>	1	
<i>glycopyrrolate 1mg tab</i>	1	
<i>glycopyrrolate 2mg tab</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine 200mg tab</i>	1	
<i>cimetidine 300mg tab</i>	1	
<i>cimetidine 400mg tab</i>	1	
<i>cimetidine 800mg tab</i>	1	
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
<i>famotidine 8mg/ml susp</i>	1	
MISC. ANTI-ULCER		
<i>sucralfate 1000mg tab</i>	1	
<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	

You can find information 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>oxybutynin chloride 5mg tab</i>	1	
<i>tolterodine tartrate 1mg tab</i>	1	
<i>tolterodine tartrate 2mg er cap</i>	1	QL=30 EA/30 Days
<i>tolterodine tartrate 2mg tab</i>	1	
<i>tolterodine tartrate 4mg er cap</i>	1	QL=30 EA/30 Days
<i>tropium chloride 20mg tab</i>	1	
<i>tropium chloride 60mg er cap</i>	1	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
GEMTESA 75MG TAB	1	PA
MYRBETRIQ 25MG ER TAB	1	
MYRBETRIQ 50MG ER TAB	1	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride 10mg tab</i>	1	
<i>bethanechol chloride 25mg tab</i>	1	
<i>bethanechol chloride 50mg tab</i>	1	
<i>bethanechol chloride 5mg tab</i>	1	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate 100mg tab</i>	1	
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ	1	
BCG LIVE TICE STRAIN 50MG INJ	1	VAC
BEXSERO SYRINGE	1	VAC
HIBERIX 10MCG INJ	1	
MENACTRA INJ	1	VAC
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
VAXCHORA SUSP	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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
MRESVIA 50MCG/0.5ML SYRINGE	1	VAC
PREHEVBRIO 10MCG/ML INJ	1	PA BvD VAC
PRIORIX INJ	1	VAC
PROQUAD INJ	1	
RABAVERT 2.5UNIT/ML INJ	1	PA BvD VAC
RECOMBIVAX 10MCG/ML INJ	1	PA BvD VAC
RECOMBIVAX 10MCG/ML SYRINGE	1	PA BvD VAC
RECOMBIVAX 40MCG/ML INJ	1	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML INJ	1	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML SYRINGE	1	PA BvD VAC
ROTARIX SUSP	1	
ROTARIX SUSP	1	
ROTATEQ SUSP	1	
SHINGRIX 50MCG/0.5ML INJ	1	QL=2 EA/365 DaysVAC
TICOVAC 1.2MCG/0.25ML SYRINGE	1	
TICOVAC 2.4MCG/0.5ML SYRINGE	1	VAC
TWINRIX SYRINGE	1	VAC
VAQTA 25UNIT/0.5ML INJ	1	
VAQTA 25UNIT/0.5ML SYRINGE	1	
VAQTA 50UNIT/ML INJ	1	VAC
VAQTA 50UNIT/ML SYRINGE	1	VAC
VARIVAX 1350PFU/0.5ML INJ	1	VAC
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		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>droxidopa 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>	46	<i>acetylcysteine 100mg/ml inh soln</i>	58	AKEEGA 500-100MG TAB	34
<i>abacavir 300mg tab</i>	46	<i>acetylcysteine 200mg/ml inh soln</i>	58	AKEEGA 500-50MG TAB	34
<i>abacavir/lamivudine 600-300mg tab</i>	46	<i>acitretin 10mg cap</i>	60	<i>ala-cort 1% cream</i>	60
ABELCET 5MG/ML INJ	24	<i>acitretin 17.5mg cap</i>	60	<i>ala-cort 2.5% cream</i>	60
ABILIFY 300MG INJ	45	<i>acitretin 25mg cap</i>	60	<i>albendazole 200mg tab</i>	7
ABILIFY 300MG SYRINGE	45	ACTEMRA	4	<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	11
ABILIFY 400MG INJ	45	162MG/0.9ML		<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	11
ABILIFY 400MG SYRINGE	45	AUTO-INJECTOR		<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	11
ABILIFY 720MG/2.4ML SYRINGE	45	ACTEMRA	4	<i>albuterol 1.25mg/3ml neb soln</i>	11
ABILIFY 960MG/3.2ML SYRINGE	45	ACTHIB INJ	90	<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	11
<i>abiraterone acetate 250mg tab</i>	34	ACTIMMUNE	40	<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	11
ABRYSVO	90	2000000UNIT/0.5ML INJ		<i>albuterol 2mg tab</i>	11
120MCG/0.5ML INJ		<i>acyclovir 200mg cap</i>	48	<i>albuterol 4mg tab</i>	11
<i>acamprosate calcium 333mg dr tab</i>	83	<i>acyclovir 400mg tab</i>	48	<i>albuterol 5mg/ml inh soln</i>	11
<i>acarbose 100mg tab</i>	20	<i>acyclovir 40mg/ml susp</i>	48	<i>alclometasone dipropionate 0.05% cream</i>	60
<i>acarbose 25mg tab</i>	20	<i>acyclovir 5% ointment</i>	60	<i>alclometasone dipropionate 0.05% ointment</i>	60
<i>acarbose 50mg tab</i>	20	<i>acyclovir 50mg/ml inj</i>	48	ALCOHOL SWAB 1X1 (DIABETIC)	73
<i>accutane 10mg cap</i>	58	<i>acyclovir 800mg tab</i>	48	ALECENSA 150MG CAP	35
<i>accutane 20mg cap</i>	58	ADACEL INJ	88	<i>alendronate sodium 10mg tab</i>	64
<i>accutane 40mg cap</i>	58	ADACEL SYRINGE	88	<i>alendronate sodium 35mg tab</i>	64
<i>acebutolol 200mg cap</i>	49	<i>adapalene 0.3% gel</i>	58	<i>alendronate sodium 70mg tab</i>	64
<i>acebutolol 400mg cap</i>	49	ADBRY 150MG/ML SYRINGE	62	<i>alendronate sodium 70mg/75ml oral soln</i>	64
<i>acetaminophen/codeine phosphate 24mg-2.4mg/ml oral soln</i>	6	<i>adefovir dipivoxil 10mg tab</i>	48	<i>alfuzosin 10mg er tab</i>	69
<i>acetaminophen/hydrocodone bitartrate 21.7mg-0.5mg/ml oral soln</i>	6	ADEMPAS 0.5MG TAB	52	<i>aliskiren 150mg tab</i>	30
<i>acetazolamide 125mg tab</i>	63	ADEMPAS 1.5MG TAB	52	<i>aliskiren 300mg tab</i>	30
<i>acetazolamide 250mg tab</i>	63	ADEMPAS 1MG TAB	52	<i>allopurinol 100mg tab</i>	70
<i>acetazolamide 500mg er cap</i>	63	ADEMPAS 2.5MG TAB	52	<i>allopurinol 300mg tab</i>	70
<i>acetic acid 2% otic soln</i>	81	ADEMPAS 2MG TAB	52		
		ADVAIR 115-21MCG HFA INHALER	10		
		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>	29
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>	54	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	29
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>	64	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
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>10-12.5-160mg tab</i>	
ALOGLIPTIN 6.25MG TAB	21	<i>amitriptyline 100mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alose tron 0.5mg tab</i>	68	<i>amitriptyline 10mg tab</i>	19	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alose tron 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>	50	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>altavera 28 day pack</i>	54	<i>amlodipine 2.5mg tab</i>	50	<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	36	<i>amlodipine/benazepril 10-40mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
ALUNBRIG INITIATION PACK	36	<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>	54	<i>amlodipine/benazepril 5-40mg cap</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>alyq 20mg tab</i>	52	<i>amlodipine/hydrochlorothiazide/valsartan</i>	28	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
<i>amantadine 100mg cap</i>	40	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29	<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/valsartan</i>	29	<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
		<i>medoxomil 10-25-40mg tab</i>		<i>amlodipine/hydrochlorothiazide/valsartan</i>	29
		<i>amlodipine/hydrochlorothiazide/valsartan</i>	29	<i>ammonium lactate 12% cream</i>	62
		<i>medoxomil 5-12.5-20mg tab</i>		<i>ammonium lactate 12% lotion</i>	62
		<i>amlodipine/hydrochlorothiazide/valsartan</i>	29	<i>amnesteem 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	ARCALYST 220MG INJ	4
<i>amnesteam 40mg cap</i>	58	<i>etamine 25mg er cap</i>		AREXVY 120MCG/0.5ML	90
<i>amoxapine 100mg tab</i>	19	<i>amphetamine/dextroamph</i>	1	INJ	
<i>amoxapine 150mg tab</i>	19	<i>etamine 30mg tab</i>		ARIKAYCE	2
<i>amoxapine 25mg tab</i>	19	<i>amphetamine/dextroamph</i>	1	590MG/8.4ML INH SUSP	
<i>amoxapine 50mg tab</i>	19	<i>etamine 5mg tab</i>		<i>aripiprazole 10mg odt</i>	45
AMOXICILLIN 125MG	82	<i>amphetamine/dextroamph</i>	1	<i>aripiprazole 10mg tab</i>	45
CHEW TAB		<i>etamine 7.5mg tab</i>		<i>aripiprazole 15mg odt</i>	45
<i>amoxicillin 250mg cap</i>	82	AMPHOTERICIN B	24	<i>aripiprazole 15mg tab</i>	45
AMOXICILLIN 250MG	82	50MG INJ		<i>aripiprazole 1mg/ml oral</i>	45
CHEW TAB		<i>ampicillin 1000mg inj</i>	82	<i>soln</i>	
<i>amoxicillin</i>	82	<i>ampicillin 100mg/ml inj</i>	82	<i>aripiprazole 20mg tab</i>	45
<i>250mg/clavulanate</i>		AMPICILLIN 125MG INJ	82	<i>aripiprazole 2mg tab</i>	45
<i>125mg tab</i>		<i>ampicillin 500mg cap</i>	82	<i>aripiprazole 30mg tab</i>	45
<i>amoxicillin 25mg/ml susp</i>	82	<i>ampicillin/sulbactam</i>	82	<i>aripiprazole 5mg tab</i>	45
<i>amoxicillin 40mg/ml susp</i>	82	<i>1000-500mg inj</i>		ARISTADA	45
<i>amoxicillin 500mg cap</i>	82	<i>ampicillin/sulbactam</i>	82	1064MG/3.9ML	
<i>amoxicillin 500mg tab</i>	82	<i>100-50mg/ml inj</i>		SYRINGE	
<i>amoxicillin 50mg/ml susp</i>	82	<i>ampicillin/sulbactam</i>	82	ARISTADA	45
<i>amoxicillin 80mg/ml susp</i>	82	<i>2000-1000mg inj</i>		441MG/1.6ML SYRINGE	
<i>amoxicillin 875mg tab</i>	82	<i>anagrelide 0.5mg cap</i>	70	ARISTADA	45
AMOXICILLIN/CLAVUL	82	<i>anagrelide 1mg cap</i>	70	662MG/2.4ML SYRINGE	
ANATE 400-57MG		<i>anastrozole 1mg tab</i>	34	ARISTADA	45
CHEW TAB		ANNOVERA	57	675MG/2.4ML SYRINGE	
<i>amoxicillin/clavulanate</i>	82	0.15-0.013MG/24HR		ARISTADA	45
<i>500-125mg tab</i>		VAGINAL SYSTEM		882MG/3.2ML SYRINGE	
<i>amoxicillin/clavulanate</i>	82	ANORO ELLIPTA	11	<i>armodafinil 150mg tab</i>	1
<i>875-125mg tab</i>		62.5-25MCG INHALER		<i>armodafinil 200mg tab</i>	1
<i>amoxicillin/k clavulanate</i>	82	APRACLONIDINE 0.5%	79	<i>armodafinil 250mg tab</i>	1
<i>200-28.5mg/5ml susp</i>		OPHTH SOLN		<i>armodafinil 50mg tab</i>	2
<i>amoxicillin/k clavulanate</i>	82	<i>aprepitant 125mg cap</i>	24	ARNUITY 100MCG	10
<i>250-62.5mg/5ml susp</i>		<i>aprepitant</i>	24	INHALER	
<i>amoxicillin/k clavulanate</i>	82	<i>125mg/aprepitant 80mg</i>		ARNUITY 200MCG	10
<i>400-57mg/5ml susp</i>		<i>cap therapy pack</i>		INHALER	
<i>amoxicillin/k clavulanate</i>	82	<i>aprepitant 40mg cap</i>	24	ARNUITY 50MCG	10
<i>600-42.9mg/5ml susp</i>		<i>aprepitant 80mg cap</i>	24	INHALER	
<i>amphetamine/dextroamph</i>	1	<i>apri 28 day pack</i>	54	<i>asenapine 10mg sl tab</i>	43
<i>etamine 10mg tab</i>		APTIOM 200MG TAB	14	<i>asenapine 2.5mg sl tab</i>	43
<i>amphetamine/dextroamph</i>	1	APTIOM 400MG TAB	14	<i>asenapine 5mg sl tab</i>	43
<i>etamine 12.5mg tab</i>		APTIOM 600MG TAB	14	<i>ashlyna 91 day pack</i>	54
<i>amphetamine/dextroamph</i>	1	APTIOM 800MG TAB	14	ASMANEX 100MCG HFA	10
<i>etamine 15mg tab</i>		APTIVUS 250MG CAP	46	INHALER	
<i>amphetamine/dextroamph</i>	1	ARALAST 1000MG INJ	86	ASMANEX 110MCG	10
<i>etamine 20mg tab</i>		<i>aranelle 28 pack</i>	54	(30ACT) TWISTHALER	

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 200MCG HFA INHALER	10	ATROVENT 17MCG INHALER	10	<i>azithromycin 40mg/ml susp</i>	73
ASMANEX 220MCG (120ACT) TWISTHALER	10	<i>aubra 28 day pack</i>	54	<i>azithromycin 500mg inj</i>	73
ASMANEX 220MCG (30ACT) TWISTHALER	10	AUGTYRO 40MG CAP	36	<i>azithromycin 500mg tab</i>	73
ASMANEX 220MCG (60ACT) TWISTHALER	10	AUSTEDO 12MG TAB	84	<i>azithromycin 500mg tab pack</i>	73
ASMANEX 50MCG HFA INHALER	10	AUSTEDO 6-12-24MG XR TAB TITRATION PACK	84	<i>azithromycin 600mg tab</i>	73
<i>aspirin/dipyridamole 25-200mg er cap</i>	70	AUSTEDO 6MG TAB	84	<i>aztreonam 1000mg inj</i>	31
<i>atazanavir 150mg cap</i>	46	AUSTEDO 9MG TAB	84	<i>aztreonam 2000mg inj</i>	31
<i>atazanavir 200mg cap</i>	46	AUSTEDO XR 12MG TAE	84	<i>azurette 28 day pack</i>	54
<i>atazanavir 300mg cap</i>	46	AUSTEDO XR 18MG TAE	84	B	
<i>atenolol 100mg tab</i>	49	AUSTEDO XR 24MG TAE	84	BACITRACIN	79
<i>atenolol 25mg tab</i>	49	AUSTEDO XR 30MG TAE	84	500UNIT/GM OPHTH OINTMENT	
<i>atenolol 50mg tab</i>	49	AUSTEDO XR 36MG TAE	84	<i>bacitracin/polymyxin B 0.5-10unit/mg ophth ointment</i>	79
<i>atenolol/chlorthalidone 100-25mg tab</i>	29	AUSTEDO XR 42MG TAE	84	<i>baclofen 10mg tab</i>	77
<i>atenolol/chlorthalidone 50-25mg tab</i>	29	AUSTEDO XR 48MG TAE	84	<i>baclofen 20mg tab</i>	77
<i>atomoxetine 100mg cap</i>	1	AUSTEDO XR 6MG TAB	84	<i>balsalazide disodium 750mg cap</i>	68
<i>atomoxetine 10mg cap</i>	1	AUSTEDO XR TAB ONCI DAILY 4 WEEK TITRATION PACK	84	BALVERSA 3MG TAB	36
<i>atomoxetine 18mg cap</i>	1	AUVELITY 105-45MG ER TAB	17	BALVERSA 4MG TAB	36
<i>atomoxetine 25mg cap</i>	1	<i>aviane 28 pack</i>	54	BALVERSA 5MG TAB	36
<i>atomoxetine 40mg cap</i>	1	AVONEX 30MCG/0.5ML AUTO-INJECTOR	85	<i>balziva 28 day pack</i>	54
<i>atomoxetine 60mg cap</i>	1	AVONEX 30MCG/0.5ML SYRINGE	85	BAQSIMI 3MG/DOSE NASAL POWDER	21
<i>atomoxetine 80mg cap</i>	1	AYVAKIT 100MG TAB	35	BAXDELA 450MG TAB	67
<i>atorvastatin 10mg tab</i>	26	AYVAKIT 200MG TAB	35	BCG LIVE TICE STRAIN 50MG INJ	90
<i>atorvastatin 20mg tab</i>	26	AYVAKIT 25MG TAB	35	<i>benazepril 10mg tab</i>	27
<i>atorvastatin 40mg tab</i>	26	AYVAKIT 300MG TAB	35	<i>benazepril 20mg tab</i>	27
<i>atorvastatin 80mg tab</i>	26	AYVAKIT 50MG TAB	35	<i>benazepril 40mg tab</i>	27
<i>atovaquone 150mg/ml susp</i>	31	<i>azathioprine 50mg tab</i>	76	<i>benazepril 5mg tab</i>	27
<i>atovaquone/proguanil 250-100mg tab</i>	32	<i>azelaic acid 15% gel</i>	62	<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	29
<i>atovaquone/proguanil 62.5-25mg tab</i>	32	<i>azelastine 0.05% ophth soln</i>	80	<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	29
<i>atropine sulfate 1% ophth soln</i>	79	<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	78	<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	29
<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	23	<i>azithromycin 20mg/ml susp</i>	73	<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	29
		<i>azithromycin 250mg pack</i>	73	BENLYSTA 200MG/ML AUTO-INJECTOR	77
		<i>azithromycin 250mg tab</i>	73		

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

ALPHABETICAL LISTING OF DRUGS

BENLYSTA 200MG/ML SYRINGE	77	<i>bethanechol chloride 5mg tab</i>	90	BOSULIF 100MG TAB	36
BENZNIDAZOLE 100MG TAB	7	<i>bexarotene 1% gel</i>	60	BOSULIF 400MG TAB	36
BENZNIDAZOLE 12.5MG TAB	7	<i>bexarotene 75mg cap</i>	40	BOSULIF 500MG TAB	36
<i>benztropine mesylate 0.5mg tab</i>	40	BEXSERO SYRINGE	90	BOSULIF 50MG CAP	36
<i>benztropine mesylate 1mg tab</i>	40	<i>bicalutamide 50mg tab</i>	34	BRAFTOVI 75MG CAP	36
<i>benztropine mesylate 2mg tab</i>	40	BICILLIN L-A 1200000UNIT/2ML SYRINGE	82	BREO ELLIPTA 100-25MCG INHALER	11
BERINERT 500UNIT INJ	70	BICILLIN L-A 2400000UNIT/4ML SYRINGE	82	BREO ELLIPTA 200-25MCG INHALER	11
BESREMI 500MCG/ML SYRINGE	40	BICILLIN L-A 600000UNIT/ML SYRINGE	82	BREO ELLIPTA 50-25MCG INH	11
<i>betamethasone 0.05% aug cream</i>	60	BIKTARVY 30-120-15MG TAB	46	<i>breynga 160-4.5mcg/act inh</i>	11
<i>betamethasone 0.05% aug lotion</i>	60	BIKTARVY 50-200-25MG TAB	46	<i>breynga 80-4.5mcg/act inh</i>	11
<i>betamethasone 0.05% aug ointment</i>	61	<i>bimatoprost 0.03% ophthalmic soln</i>	81	BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	11
<i>betamethasone 0.05% cream</i>	61	<i>bisoprolol fumarate 10mg tab</i>	49	<i>briellyn 28 day pack</i>	54
<i>betamethasone 0.05% lotion</i>	61	<i>bisoprolol fumarate 5mg tab</i>	49	BRILINTA 60MG TAB	70
<i>betamethasone 0.05% ointment</i>	61	<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	29	BRILINTA 90MG TAB	70
<i>betamethasone 0.1% cream</i>	61	<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	29	<i>brimonidine tartrate 0.1% ophthalmic soln</i>	79
<i>betamethasone 0.1% lotion</i>	61	<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	29	<i>brimonidine tartrate 0.15% ophthalmic soln</i>	79
BETASERON 0.3MG INJ	85	BIVIGAM 5GM/50ML INJ	81	<i>brimonidine tartrate 0.2% ophthalmic soln</i>	79
BETAXOLOL 0.5% OPHTH SOLN	79	<i>blisovi 21 fe 1.5/30 28 day pack</i>	54	<i>brimonidine tartrate/timolol 0.2-0.5% ophthalmic soln</i>	79
<i>betaxolol 10mg tab</i>	49	<i>blisovi 24 fe 1/20 28 day pack</i>	54	<i>brinzolamide 1% ophthalmic susp</i>	80
<i>betaxolol 20mg tab</i>	49	BOOSTRIX INJ	88	BRIVIACT 100MG TAB	14
<i>bethanechol chloride 10mg tab</i>	90	BOOSTRIX SYRINGE	88	BRIVIACT 10MG TAB	14
<i>bethanechol chloride 25mg tab</i>	90	<i>bosentan 125mg tab</i>	52	BRIVIACT 10MG/ML	14
<i>bethanechol chloride 50mg tab</i>	90	<i>bosentan 62.5mg tab</i>	52	BRIVIACT 25MG TAB	14
		BOSULIF 100MG CAP	36	BRIVIACT 50MG TAB	14
				BRIVIACT 75MG TAB	14
				<i>bromfenac 0.07% ophthalmic soln</i>	80
				<i>bromocriptine 2.5mg tab</i>	40
				<i>bromocriptine 5mg cap</i>	40
				BRONCHITOL 40MG INH POWDER	86

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

ALPHABETICAL LISTING OF DRUGS

BRUKINSA 80MG CAP	36	<i>bupirone 10mg tab</i>	8	<i>candesartan cilexetil 8mg</i>	28
<i>budesonide 0.125mg/ml inh susp</i>	10	<i>bupirone 15mg tab</i>	8	<i>tab</i>	
<i>budesonide 0.25mg/ml inh susp</i>	10	<i>bupirone 30mg tab</i>	8	CAPLYTA 10.5MG CAP	41
<i>budesonide 0.5mg/ml inh susp</i>	10	<i>bupirone 5mg tab</i>	8	CAPLYTA 21MG CAP	41
<i>budesonide 2mg/act rectal foam</i>	7	<i>bupirone 7.5mg tab</i>	8	CAPLYTA 42MG CAP	41
<i>budesonide 3mg dr cap</i>	57	<i>butorphanol tartrate 1mg/act nasal inhaler</i>	7	CAPRELSA 100MG TAB	36
<i>budesonide 9mg er tab</i>	57	BYDUREON	21	CAPRELSA 300MG TAB	36
<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	11	2MG/0.85ML		<i>captopril 100mg tab</i>	27
<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	11	AUTO-INJECTOR		<i>captopril 12.5mg tab</i>	27
<i>bumetanide 0.5mg tab</i>	63	C		<i>captopril 25mg tab</i>	27
<i>bumetanide 1mg tab</i>	63	<i>cabergoline 0.5mg tab</i>	66	<i>captopril 50mg tab</i>	27
<i>bumetanide 2mg tab</i>	63	CABLIVI 11MG INJ	70	<i>carbamazepine 100mg chew tab</i>	14
<i>buprenorphine 2mg sl tab</i>	6	CABOMETYX 20MG TAE	36	<i>carbamazepine 100mg er cap</i>	14
<i>buprenorphine 8mg sl tab</i>	6	CABOMETYX 40MG TAE	36	<i>carbamazepine 100mg er tab</i>	14
<i>buprenorphine/naloxone 12-3mg sl film</i>	7	CABOMETYX 60MG TAE	36	<i>carbamazepine 200mg er cap</i>	14
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	7	<i>calcipotriene 0.005% cream</i>	60	<i>carbamazepine 200mg er tab</i>	14
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	7	<i>calcipotriene 0.005% ointment</i>	60	<i>carbamazepine 200mg</i>	14
<i>buprenorphine/naloxone 4-1mg sl film</i>	7	CALCIPOTRIENE 0.005% TOPICAL SOLN	60	<i>carbamazepine 200mg tab</i>	14
<i>buprenorphine/naloxone 8-2mg sl film</i>	7	<i>calcitriol 0.25mcg cap</i>	65	<i>carbamazepine 20mg/ml susp</i>	14
<i>buprenorphine/naloxone 8-2mg sl tab</i>	7	<i>calcitriol 0.5mcg cap</i>	65	<i>carbamazepine 300mg er cap</i>	14
<i>bupropion 100mg er tab</i>	17	<i>calcitriol 1mcg/ml oral soln</i>	65	<i>carbamazepine 400mg er tab</i>	14
<i>bupropion 100mg tab</i>	17	<i>calcium acetate 667mg cap</i>	69	<i>carbidopa 25mg tab</i>	40
<i>bupropion 150mg sr (12 hr) tab</i>	17	CALQUENCE 100MG CAP	36	<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	40
<i>bupropion 150mg sr tab</i>	86	CALQUENCE 100MG TAB	36	<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	40
<i>bupropion 150mg xl (24 hr) tab</i>	17	<i>camila 28 day 0.35mg pack</i>	57	<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	40
<i>bupropion 200mg er tab</i>	17	CAMZYOS 10MG CAP	51	<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	40
<i>bupropion 300mg er tab</i>	17	CAMZYOS 15MG CAP	51		
<i>bupropion 75mg tab</i>	17	CAMZYOS 2.5MG CAP	51		
		CAMZYOS 5MG CAP	51		
		<i>candesartan cilexetil 16mg tab</i>	27		
		<i>candesartan cilexetil 32mg tab</i>	27		
		<i>candesartan cilexetil 4mg tab</i>	28		

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

ALPHABETICAL LISTING OF DRUGS

<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	40	CEFADROXIL 1000MG TAB	53	<i>celecoxib 50mg cap</i>	4
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	40	<i>cefadroxil 100mg/ml susp</i>	53	<i>cephalexin 250mg cap</i>	53
CARBIDOPA/LEVODOPA 10-100MG ODT	40	<i>cefadroxil 500mg cap</i>	53	<i>cephalexin 25mg/ml susp</i>	53
<i>carbidopa/levodopa 10-100mg tab</i>	40	<i>cefadroxil 50mg/ml susp</i>	53	<i>cephalexin 500mg cap</i>	53
<i>carbidopa/levodopa 25-100mg er tab</i>	41	<i>cefazolin 1000mg inj</i>	53	<i>cephalexin 50mg/ml susp</i>	53
CARBIDOPA/LEVODOPA 25-100MG ODT	41	<i>cefazolin 200mg/ml inj</i>	53	CERDELGA 84MG CAP	71
<i>carbidopa/levodopa 25-100mg tab</i>	41	<i>cefazolin 500mg inj</i>	53	<i>cevimeline 30mg cap</i>	77
CARBIDOPA/LEVODOPA 25-250MG ODT	41	<i>cefdinir 25mg/ml susp</i>	53	<i>chlordiazepoxide 10mg cap</i>	8
<i>carbidopa/levodopa 25-250mg tab</i>	41	<i>cefdinir 300mg cap</i>	53	<i>chlordiazepoxide 25mg cap</i>	8
<i>carbidopa/levodopa 50-200mg er tab</i>	41	<i>cefdinir 50mg/ml susp</i>	53	<i>chlordiazepoxide 5mg cap</i>	8
<i>carglumic acid 200mg tab for oral susp</i>	65	<i>cefepime 1000mg inj</i>	54	<i>chlorhexidine gluconate 0.12% mouthwash</i>	77
<i>carisoprodol 350mg tab</i>	77	<i>cefepime 2000mg inj</i>	54	<i>chloroquine phosphate 250mg tab</i>	32
CARTEOLOL 1% OPHTH SOLN	79	<i>cefepime 2000mg inj</i>	54	<i>chloroquine phosphate 500mg tab</i>	32
<i>cartia 120mg er cap</i>	50	<i>cefexime 20mg/ml susp</i>	53	<i>chlorpromazine 100mg tab</i>	44
<i>cartia 180mg er cap</i>	50	<i>cefexime 400mg cap</i>	53	CHLORPROMAZINE 100MG/ML ORAL SOLN	44
<i>cartia 240mg er cap</i>	50	<i>cefexime 40mg/ml susp</i>	53	<i>chlorpromazine 10mg tab</i>	44
<i>cartia 300mg er cap</i>	50	<i>cefoxitin 1gm inj</i>	53	<i>chlorpromazine 200mg tab</i>	44
<i>carvedilol 12.5mg tab</i>	49	<i>cefoxitin 200mg/ml inj</i>	53	<i>chlorpromazine 25mg tab</i>	44
<i>carvedilol 25mg tab</i>	49	<i>cefoxitin 2gm inj</i>	53	CHLORPROMAZINE 30MG/ML ORAL SOLN	44
<i>carvedilol 3.125mg tab</i>	49	<i>cefpodoxime 100mg tab</i>	53	<i>chlorpromazine 50mg tab</i>	44
<i>carvedilol 6.25mg tab</i>	49	<i>cefpodoxime 10mg/ml susp</i>	53	<i>chlorthalidone 25mg tab</i>	64
<i>caspofungin acetate 50mg inj</i>	24	<i>cefpodoxime 200mg tab</i>	53	<i>chlorthalidone 50mg tab</i>	64
<i>caspofungin acetate 70mg inj</i>	24	<i>cefpodoxime 20mg/ml susp</i>	53	<i>chlorzoxazone 500mg tab</i>	77
CAYSTON 75MG INH SOLN	31	<i>cefprozil 250mg tab</i>	53	<i>cholestyramine resin (sugar-free) 4000mg powder for oral susp</i>	25
CEFACLOR 250MG CAP	53	<i>cefprozil 25mg/ml susp</i>	53	<i>cholestyramine resin 4000mg powder for oral susp</i>	25
CEFACLOR 500MG CAP	53	<i>cefprozil 500mg tab</i>	53	CIBINQO 100MG TAB	62
		<i>cefprozil 50mg/ml susp</i>	53	CIBINQO 200MG TAB	62
		<i>ceftazidime 1gm inj</i>	53	CIBINQO 50MG TAB	62
		<i>ceftazidime 200mg/ml inj</i>	53	<i>ciclopirox 0.77% cream</i>	59
		<i>ceftazidime 2gm inj</i>	53	<i>ciclopirox 0.77% gel</i>	59
		<i>ceftriaxone 10gm inj</i>	53	<i>ciclopirox 1% shampoo</i>	59
		<i>ceftriaxone 1gm inj</i>	53		
		<i>ceftriaxone 250mg inj</i>	53		
		<i>ceftriaxone 2gm inj</i>	54		
		<i>ceftriaxone 500mg inj</i>	54		
		<i>cefuroxime 1500mg inj</i>	53		
		<i>cefuroxime 250mg tab</i>	53		
		<i>cefuroxime 500mg tab</i>	53		
		<i>cefuroxime 750mg inj</i>	53		
		<i>celecoxib 100mg cap</i>	4		
		<i>celecoxib 200mg cap</i>	4		
		<i>celecoxib 400mg cap</i>	4		

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

ALPHABETICAL LISTING OF DRUGS

<i>ciclopirox 8% topical soln</i>	59	<i>clarithromycin 500mg tab</i>	73	<i>clobetasol propionate 0.05% lotion</i>	61
CILASTATIN/IMIPENEM 250-250MG INJ	31	CLARITHROMYCIN 50MG/ML SUSP	73	<i>clobetasol propionate 0.05% ointment</i>	61
<i>cilastatin/imipenem 500-500mg inj</i>	31	<i>clindamycin 1% gel (twice-daily)</i>	58	<i>clobetasol propionate 0.05% shampoo</i>	61
<i>cilostazol 100mg tab</i>	70	<i>clindamycin 1% lotion</i>	59	<i>clobetasol propionate 0.05% topical soln</i>	61
<i>cilostazol 50mg tab</i>	70	<i>clindamycin 1% topical soln</i>	59	<i>clobetasol propionate 0.05% topical spray</i>	61
CIMDUO 300-300MG TAB	46	<i>clindamycin 12mg/ml inj</i>	31	<i>clodan 0.05% shampoo</i>	61
<i>cimetidine 200mg tab</i>	89	<i>clindamycin 150mg cap</i>	31	<i>clomipramine 25mg cap</i>	19
<i>cimetidine 300mg tab</i>	89	<i>clindamycin 150mg/ml (6ml) inj</i>	31	<i>clomipramine 50mg cap</i>	19
<i>cimetidine 400mg tab</i>	89	<i>clindamycin 15mg/ml oral soln</i>	31	<i>clomipramine 75mg cap</i>	19
<i>cimetidine 800mg tab</i>	89	<i>clindamycin 18mg/ml inj</i>	31	<i>clonazepam 0.125mg odt</i>	13
CIMZIA 200MG INJ	68	<i>clindamycin 2% vaginal cream</i>	91	<i>clonazepam 0.25mg odt</i>	13
CIMZIA 200MG/ML SYRINGE	68	<i>clindamycin 300mg cap</i>	31	<i>clonazepam 0.5mg odt</i>	13
<i>cinacalcet 30mg tab</i>	65	<i>clindamycin 6mg/ml inj</i>	31	<i>clonazepam 0.5mg tab</i>	13
<i>cinacalcet 60mg tab</i>	65	<i>clindamycin 75mg cap</i>	31	<i>clonazepam 1mg odt</i>	13
<i>cinacalcet 90mg tab</i>	65	<i>clindamycin/benzoyl peroxide 1-5% gel</i>	59	<i>clonazepam 1mg tab</i>	13
CINRYZE 500UNIT INJ	70	CLINIMIX 4.25/10 INJ	78	<i>clonazepam 2mg odt</i>	13
CIPROFLOXACIN 0.2% OTIC SOLN	81	CLINIMIX 4.25/5 INJ	78	<i>clonazepam 2mg tab</i>	13
<i>ciprofloxacin 0.3% ophthalmic soln</i>	79	CLINIMIX 5/15 INJ	78	<i>clonidine 0.1mg er tab</i>	1
<i>ciprofloxacin 250mg tab</i>	67	CLINIMIX 5/20 INJ	78	<i>clonidine 0.1mg tab</i>	28
<i>ciprofloxacin 2mg/ml inj</i>	67	CLINIMIX E 2.75/5 INJ	78	<i>clonidine 0.1mg/24hr weekly patch</i>	28
<i>ciprofloxacin 500mg tab</i>	67	CLINIMIX E 4.25/10 INJ	78	<i>clonidine 0.2mg tab</i>	28
<i>ciprofloxacin 750mg tab</i>	67	CLINIMIX E 4.25/5 INJ	78	<i>clonidine 0.2mg/24hr weekly patch</i>	28
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	81	CLINIMIX E 5/15 INJ	78	<i>clonidine 0.3mg tab</i>	28
<i>citalopram 10mg tab</i>	18	CLINIMIX E 5/20 INJ	78	<i>clonidine 0.3mg/24hr weekly patch</i>	28
<i>citalopram 20mg tab</i>	18	<i>clinisol 15 inj</i>	78	<i>clopidogrel 75mg tab</i>	70
<i>citalopram 2mg/ml oral soln</i>	18	<i>clobazam 10mg tab</i>	13	<i>clorazepate dipotassium 15mg tab</i>	8
<i>citalopram 40mg tab</i>	18	<i>clobazam 2.5mg/ml susp</i>	13	<i>clotrimazole 1% cream</i>	59
<i>claravis 10mg cap</i>	58	<i>clobazam 20mg tab</i>	13	<i>clotrimazole 10mg lozenge</i>	77
<i>claravis 20mg cap</i>	58	<i>clobetasol propionate 0.05% cream</i>	61	<i>clotrimazole/betamethasone 1-0.05% cream</i>	59
<i>claravis 30mg cap</i>	58	<i>clobetasol propionate 0.05% e cream</i>	61	CLOTRIMAZOLE/BETA METHASONE 1-0.05% LOTION	59
<i>claravis 40mg cap</i>	58	<i>clobetasol propionate 0.05% foam</i>	61	<i>clozapine 100mg odt</i>	43
<i>clarithromycin 250mg tab</i>	73	<i>clobetasol propionate 0.05% gel</i>	61		
CLARITHROMYCIN 25MG/ML SUSP	73				
<i>clarithromycin 500mg er tab</i>	73				

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

ALPHABETICAL LISTING OF DRUGS

<i>clozapine 100mg tab</i>	43	<i>compro 25mg rectal supp</i>	44	<i>cyclosporine modified</i>	76
CLOZAPINE 12.5MG ODT	43	<i>constulose 10gm/15ml oral soln</i>	72	<i>100mg/ml oral soln</i>	
<i>clozapine 150mg odt</i>	43	COPIKTRA 15MG CAP	36	<i>cyclosporine modified</i>	76
<i>clozapine 200mg odt</i>	43	COPIKTRA 25MG CAP	36	<i>25mg cap</i>	
<i>clozapine 200mg tab</i>	43	CORLANOR 5MG TAB	52	<i>cyclosporine modified</i>	76
<i>clozapine 25mg odt</i>	43	CORLANOR 5MG/5ML	52	<i>50mg cap</i>	
<i>clozapine 25mg tab</i>	43	ORAL SOLN		<i>cyred 28 day pack</i>	54
<i>clozapine 50mg tab</i>	43	CORLANOR 7.5MG TAB	52	CYSTADROPS 0.37%	80
COARTEM 20-120MG TAB	32	COTELLIC 20MG TAB	36	OPHTH SOLN	
<i>codeine</i>	6	CREON	63	CYSTAGON 150MG CAP	69
<i>phosphate/acetaminophen 15-300mg tab</i>		120000-24000-76000UNIT DR CAP		CYSTAGON 50MG CAP	69
<i>codeine</i>	6	CREON	63	CYSTARAN 0.44%	80
<i>phosphate/acetaminophen 30-300mg tab</i>		15000-3000-9500UNIT DR CAP		OPHTH SOLN	
<i>codeine</i>	6	CREON	63	D	
<i>phosphate/acetaminophen 60-300mg tab</i>		180000-36000-114000UNIT NIT DR CAP		<i>dalfampridine 10mg er tab</i>	85
CODEINE SULFATE 15MG TAB	5	CREON	63	DALVANCE 500MG INJ	31
CODEINE SULFATE 30MG TAB	5	60000-12000-38000UNIT DR CAP		<i>danazol 100mg cap</i>	7
CODEINE SULFATE 60MG TAB	5	CREON	63	<i>danazol 200mg cap</i>	7
<i>colchicine 0.6mg tab</i>	70	<i>cromolyn sodium 20mg/ml oral soln</i>	68	<i>danazol 50mg cap</i>	7
<i>colchicine/probenecid 0.5-500mg tab</i>	70	CROMOLYN SODIUM 4% OPTH SOLN	80	<i>dantrolene sodium 100mg cap</i>	78
<i>colesevelam 625mg tab</i>	25	<i>cryselle 28 pack</i>	54	<i>dantrolene sodium 25mg cap</i>	78
<i>colestipol 1000mg tab</i>	25	<i>cyclobenzaprine 10mg tab</i>	77	<i>dantrolene sodium 50mg cap</i>	78
<i>colestipol 5000mg granules for oral susp</i>	25	CYCLOBENZAPRINE 5mg tab	77	<i>dapsone 100mg tab</i>	31
<i>colistin 75mg/ml inj</i>	32	CYCLOPHOSPHAMIDE 25MG TAB	33	<i>dapsone 25mg tab</i>	31
COMBIVENT 20-100MCG/ACT INH	11	CYCLOPHOSPHAMIDE 50MG TAB	33	DAPTACEL INJ	88
COMETRIQ CAP 100MG	36	<i>cyclosporine 0.05% ophthalmic susp</i>	80	<i>daptomycin 500mg inj</i>	31
DAILY DOSE PACK		<i>cyclosporine 100mg cap</i>	76	<i>darunavir 600mg tab</i>	46
COMETRIQ CAP 140MG	36	<i>cyclosporine 25mg cap</i>	76	<i>darunavir 800mg tab</i>	46
DAILY DOSE PACK		<i>cyclosporine modified 100mg cap</i>	76	<i>dasatinib 100mg tab</i>	36
COMETRIQ CAP 60MG	36			<i>dasatinib 140mg tab</i>	36
DAILY DOSE PACK				<i>dasatinib 20mg tab</i>	36
COMPLERA 200-25-300MG TAB	46			<i>dasatinib 50mg tab</i>	36
				<i>dasatinib 70mg tab</i>	36
				<i>dasatinib 80mg tab</i>	36
				DAURISMO 100MG TAB	34
				DAURISMO 25MG TAB	34
				<i>deblitane 0.35mg tab 28 day pack</i>	57
				<i>deferasirox 125mg tab for oral susp</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 180mg granules</i>	23	<i>desogestrel/ethinyl estradiol/ethinyl</i>	54	<i>dexmethylphenidate 2.5mg tab</i>	2
<i>deferasirox 180mg tab</i>	23	<i>estradiol</i>		<i>dexmethylphenidate 20mg er cap</i>	2
<i>deferasirox 250mg tab for oral susp</i>	23	<i>0.15-0.01-0.02mg 28 day pack</i>		<i>dexmethylphenidate 25mg er cap</i>	2
<i>deferasirox 360mg granules</i>	23	<i>desogestrel/ethinyl estradiol/inert ingredients</i>	54	<i>dexmethylphenidate 30mg er cap</i>	2
<i>deferasirox 360mg tab</i>	23	<i>0.15-0.03-1mg pack</i>		<i>dexmethylphenidate 35mg er cap</i>	2
<i>deferasirox 500mg tab for oral susp</i>	23	<i>desonide 0.05% ointment</i>	61	<i>dexmethylphenidate 40mg er cap</i>	2
<i>deferasirox 90mg granules</i>	23	<i>desoximetasone 0.25% cream</i>	61	<i>dexmethylphenidate 5mg er cap</i>	2
<i>deferasirox 90mg tab</i>	23	<i>desoximetasone 0.25% ointment</i>	61	<i>dexmethylphenidate 5mg tab</i>	2
<i>deferiprone 1000mg tab</i>	23	<i>desvenlafaxine succinate 100mg er tab</i>	18	<i>dextroamphetamine sulfate 10mg er cap</i>	1
<i>deferiprone 500mg tab</i>	23	<i>desvenlafaxine succinate 25mg er tab</i>	19	<i>dextroamphetamine sulfate 10mg tab</i>	1
DELSTRIGO	46	<i>desvenlafaxine succinate 50mg er tab</i>	19	<i>DEXAMETHASONE 0.1MG/ML ORAL SOLN</i>	57
100-300-300MG TAB		<i>DEXAMETHASONE 0.5mg tab</i>	58	<i>dexamethasone 0.75mg tab</i>	58
<i>demeclocycline 150mg tab</i>	87	<i>dexamethasone 1.5mg tab</i>	58	<i>dexamethasone 1mg tab</i>	58
<i>demeclocycline 300mg tab</i>	87	<i>dexamethasone 2mg tab</i>	58	<i>dexamethasone 4mg tab</i>	58
DEPO-SUBQ PROVERA	57	<i>dexamethasone 6mg tab</i>	58	<i>DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN</i>	80
104MG/0.65ML SYRINGE		<i>DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN</i>	80	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	80
<i>depo-testosterone 200mg/ml inj</i>	7	<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	80	<i>dexmethylphenidate 10mg er cap</i>	2
DESCOVY 120-15MG TAB	46	<i>dexmethylphenidate 10mg er cap</i>	2	<i>dexmethylphenidate 10mg tab</i>	2
DESCOVY 200-25MG TAB	46	<i>dexmethylphenidate 15mg er cap</i>	1	<i>dexmethylphenidate 15mg er cap</i>	1
<i>desipramine 100mg tab</i>	19	<i>DIACOMIT 250MG CAP</i>	14	<i>DIACOMIT 250MG POWDER FOR ORAL SUSP</i>	14
<i>desipramine 10mg tab</i>	19	<i>DIACOMIT 500MG CAP</i>	14	<i>DIACOMIT 500MG POWDER FOR ORAL SUSP</i>	14
<i>desipramine 150mg tab</i>	19	<i>DIACOMIT 500MG POWDER FOR ORAL SUSP</i>	14	<i>diazepam 10mg tab</i>	8
<i>desipramine 25mg tab</i>	19	<i>diazepam 10mg/2ml rectal gel</i>	13	<i>diazepam 1mg/ml oral soln</i>	8
<i>desipramine 50mg tab</i>	19	<i>diazepam 1mg/ml oral soln</i>	8	<i>DIAZEPAM 2.5MG/0.5ML RECTAL GEL</i>	13
<i>desipramine 75mg tab</i>	19	<i>DIAZEPAM 2.5MG/0.5ML RECTAL GEL</i>	13	<i>diazepam 20mg/4ml rectal gel</i>	13
<i>desloratadine 5mg tab</i>	25	<i>diazepam 20mg/4ml rectal gel</i>	13		
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	66				
<i>desmopressin acetate 0.1mg tab</i>	66				
<i>desmopressin acetate 0.2mg tab</i>	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

<i>diazepam 2mg tab</i>	8	<i>dilt 120mg er cap</i>	50	<i>divalproex sodium 250mg</i>	17
<i>diazepam 5mg tab</i>	8	<i>dilt 180mg er cap</i>	50	<i>dr tab</i>	
<i>diazepam 5mg/ml oral soln</i>	9	<i>dilt 240mg er cap</i>	50	<i>divalproex sodium 250mg er tab</i>	17
<i>diazoxide 50mg/ml susp</i>	21	<i>diltiazem 120mg er (12hr) cap</i>	50	<i>divalproex sodium 500mg dr tab</i>	17
<i>diclofenac potassium 50mg tab</i>	4	<i>diltiazem 120mg er (24hr) cap</i>	50	<i>divalproex sodium 500mg er tab</i>	17
<i>diclofenac sodium 0.1% ophth soln</i>	80	<i>diltiazem 120mg tab</i>	50	<i>dofetilide 0.125mg cap</i>	9
<i>diclofenac sodium 100mg er tab</i>	4	<i>diltiazem 180mg er (24hr) cap</i>	50	<i>dofetilide 0.25mg cap</i>	9
<i>diclofenac sodium 25mg dr tab</i>	4	<i>diltiazem 240mg er (24hr) cap</i>	50	<i>dofetilide 0.5mg cap</i>	9
<i>diclofenac sodium 3% gel</i>	60	<i>diltiazem 300mg er (24hr) cap</i>	50	DOJOLVI 100% ORAL SOLN	78
<i>diclofenac sodium 50mg dr tab</i>	4	<i>diltiazem 30mg tab</i>	50	<i>donepezil 10mg odt</i>	83
<i>diclofenac sodium 75mg dr tab</i>	4	<i>diltiazem 360mg er (24hr) cap</i>	50	<i>donepezil 10mg tab</i>	83
<i>diclofenac sodium/misoprostol 50-0.2mg dr tab</i>	4	<i>diltiazem 420mg er (24hr) cap</i>	50	<i>donepezil 23mg tab</i>	83
<i>diclofenac sodium/misoprostol 75-0.2mg dr tab</i>	4	<i>diltiazem 60mg er (12hr) cap</i>	50	<i>donepezil 5mg odt</i>	83
<i>dicloxacillin 250mg cap</i>	83	<i>diltiazem 60mg tab</i>	50	<i>donepezil 5mg tab</i>	83
<i>dicloxacillin 500mg cap</i>	83	<i>diltiazem 90mg er (12hr) cap</i>	50	DOPTELET 20MG TAB	71
<i>dicyclomine 10mg cap</i>	89	<i>diltiazem 90mg tab</i>	50	DOPTELET TAB 40MG	71
<i>dicyclomine 20mg tab</i>	89	<i>dimethyl fumarate 120mg dr cap</i>	85	DAILY DOSE PACK	
<i>dicyclomine 2mg/ml oral soln</i>	89	<i>dimethyl fumarate 240mg dr cap</i>	85	DOPTELET TAB 60MG	71
DIFICID 200MG TAB	73	<i>dimethyl fumarate/dimethyl fumarate 120-240mg pack</i>	85	DAILY DOSE PACK	
DIFICID 40MG/ML SUSP	73	DIPHThERIA/TETANUS TOXOID INJ	88	<i>dorzolamide 2% ophth soln</i>	80
<i>diflunisal 500mg tab</i>	5	<i>disopyramide 100mg cap</i>	9	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	79
<i>difluprednate 0.05% ophth susp</i>	80	<i>disopyramide 150mg cap</i>	9	<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	79
DIGOXIN 0.05MG/ML ORAL SOLN	51	<i>disulfiram 250mg tab</i>	83	<i>dotti 0.025mg/24hr patch</i>	67
<i>digoxin 0.125mg tab</i>	51	<i>disulfiram 500mg tab</i>	83	<i>dotti 0.0375mg/24hr patch</i>	67
<i>digoxin 0.25mg tab</i>	51	<i>divalproex sodium 125mg dr cap</i>	17	<i>dotti 0.05mg/24hr patch</i>	67
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	74	<i>divalproex sodium 125mg dr tab</i>	17	<i>dotti 0.075mg/24hr patch</i>	67
DILANTIN 30MG ER CAP	16			<i>dotti 0.1mg/24hr patch</i>	67
				DOVATO 50-300MG TAB	46
				<i>doxazosin 1mg tab</i>	28
				<i>doxazosin 2mg tab</i>	28
				<i>doxazosin 4mg tab</i>	28
				<i>doxazosin 8mg tab</i>	28
				<i>doxepin 100mg cap</i>	19
				<i>doxepin 10mg 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 10mg/ml oral soln</i>	19	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg pack</i>	54	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	46
<i>doxepin 150mg cap</i>	20	DROXIA 200MG CAP	71	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	46
<i>doxepin 25mg cap</i>	20	DROXIA 300MG CAP	71	ELECTROLYTE-148 SOLUTION	74
<i>doxepin 50mg cap</i>	20	DROXIA 400MG CAP	71	ELIGARD 22.5MG SYRINGE	34
<i>doxepin 75mg cap</i>	20	<i>droxidopa 100mg cap</i>	92	ELIGARD 30MG SYRINGE	34
<i>doxy 100mg inj</i>	87	<i>droxidopa 200mg cap</i>	92	ELIGARD 45MG SYRINGE	34
<i>doxycycline hyclate 100mg cap</i>	87	<i>droxidopa 300mg cap</i>	92	ELIGARD 7.5MG SYRINGE	34
<i>doxycycline hyclate 100mg tab</i>	87	DULERA 100-5MCG INHALER	11	ELIQUIS 2.5MG TAB	12
<i>doxycycline hyclate 20mg tab</i>	87	DULERA 200-5MCG INHALER	11	ELIQUIS 5MG 30-DAY STARTER PACK	12
<i>doxycycline hyclate 50mg cap</i>	87	DULERA 50-5MCG INHALER	11	ELIQUIS 5MG TAB	12
<i>doxycycline monohydrate 100mg cap</i>	87	<i>duloxetine 20mg dr cap</i>	19	ELMIRON 100MG CAP	69
<i>doxycycline monohydrate 100mg tab</i>	87	<i>duloxetine 30mg dr cap</i>	19	<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	57
<i>doxycycline monohydrate 50mg cap</i>	87	<i>duloxetine 60mg dr cap</i>	19	EMGALITY 100MG/ML SYRINGE	73
<i>doxycycline monohydrate 50mg tab</i>	87	DUPIXENT 100MG/0.67ML SYRINGE	62	EMGALITY 120MG/ML AUTO-INJECTOR	73
<i>doxycycline monohydrate 5mg/ml susp</i>	87	DUPIXENT 200MG/1.14ML AUTO-INJECTOR	62	EMGALITY 120MG/ML SYRINGE	73
<i>doxylamine succinate/pyridoxine 10-10mg dr tab</i>	24	DUPIXENT 300MG/2ML AUTO-INJECTOR	62	EMSAM 12MG/24HR PATCH	17
DRIZALMA 20MG DR CAP	19	DUPIXENT 300MG/2ML SYRINGE	62	EMSAM 6MG/24HR PATCH	17
DRIZALMA 30MG DR CAP	19	<i>dutasteride 0.5mg cap</i>	69	EMSAM 9MG/24HR PATCH	17
DRIZALMA 40MG DR CAP	19	E		<i>emtricitabine 200mg cap</i>	46
DRIZALMA 60MG DR CAP	19	<i>econazole nitrate 1% cream</i>	59	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	46
<i>dronabinol 10mg cap</i>	24	EDURANT 25MG TAB	46	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	46
<i>dronabinol 2.5mg cap</i>	24	<i>efavirenz 600mg tab</i>	46		
<i>dronabinol 5mg cap</i>	24	<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	46		
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg 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>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	46	<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	57	<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	91
<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	46	<i>enoxaparin sodium 100mg/1ml syringe</i>	12	<i>epitol 200mg tab</i>	14
EMTRIVA 10MG/ML	46	<i>enoxaparin sodium 120mg/0.8ml syringe</i>	12	<i>eplerenone 25mg tab</i>	30
ORAL SOLN		<i>enoxaparin sodium 150mg/1ml syringe</i>	12	<i>eplerenone 50mg tab</i>	30
<i>enalapril maleate 10mg tab</i>	27	<i>enoxaparin sodium 30mg/0.3ml syringe</i>	12	EPRONTIA 25MG/ML	14
<i>enalapril maleate 2.5mg tab</i>	27	<i>enoxaparin sodium 40mg/0.4ml syringe</i>	12	ORAL SOLN	
<i>enalapril maleate 20mg tab</i>	27	<i>enoxaparin sodium 60mg/0.6ml syringe</i>	12	ERGOLOID MESYLATES	86
<i>enalapril maleate 5mg tab</i>	27	<i>enoxaparin sodium 80mg/0.8ml syringe</i>	12	USP 1MG TAB	
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	29	<i>enpresse 28 day pack</i>	54	ERIVEDGE 150MG CAP	34
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	29	<i>enskyce 28 day pack</i>	54	ERLEADA 240MG TAB	34
ENBREL 25MG/0.5ML INJ	5	ENSPRYNG 120MG/ML SYRINGE	76	ERLEADA 60MG TAB	34
ENBREL 25MG/0.5ML SYRINGE	5	<i>entacapone 200mg tab</i>	40	<i>erlotinib 100mg tab</i>	33
ENBREL 50MG/ML AUTO-INJECTOR	5	<i>entecavir 0.5mg tab</i>	48	<i>erlotinib 150mg tab</i>	33
ENBREL 50MG/ML CARTRIDGE	5	<i>entecavir 1mg tab</i>	48	<i>erlotinib 25mg tab</i>	34
ENBREL 50MG/ML SYRINGE	5	ENTRESTO 24-26MG TAB	51	<i>errin 28 day 0.35mg pack</i>	57
<i>endocet 2.5-325mg tab</i>	6	ENTRESTO 49-51MG TAB	51	<i>ertapenem 1gm inj</i>	31
<i>endocet 325-10mg tab</i>	6	ENTRESTO 97-103MG TAB	51	<i>erythromycin 0.5% ophth ointment</i>	79
<i>endocet 325-5mg tab</i>	6	<i>enulose 10gm/15ml oral soln</i>	68	<i>erythromycin 2% gel</i>	59
<i>endocet 325-7.5mg tab</i>	6	ENVARUSUS XR 0.75MG TAB	76	<i>erythromycin 2% topical soln</i>	59
ENGERIX-B 10MCG/0.5ML SYRINGE	90	ENVARUSUS XR 1MG TAE	76	ERYTHROMYCIN 250MG DR CAP	73
ENGERIX-B 20MCG/ML INJ	90	ENVARUSUS XR 4MG TAE	76	<i>erythromycin 250mg tab</i>	73
ENGERIX-B 20MCG/ML SYRINGE	90	EPIDIOLEX 100MG/ML ORAL SOLN	14	<i>erythromycin 500mg tab</i>	73
		<i>epinastine 0.05% ophth soln</i>	80	<i>erythromycin</i>	73
		<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	91	<i>ethylsuccinate 40mg/ml susp</i>	
				<i>erythromycin</i>	73
				<i>ethylsuccinate 80mg/ml susp</i>	
				<i>erythromycin/benzoyl peroxide 5-3% gel</i>	59
				<i>escitalopram 10mg tab</i>	18
				<i>escitalopram 1mg/ml oral soln</i>	18
				<i>escitalopram 20mg tab</i>	18
				<i>escitalopram 5mg tab</i>	18
				<i>estarylla 28 day pack</i>	54
				<i>estradiol 0.00104mg/hr twice weekly patch</i>	67
				<i>estradiol 0.00104mg/hr weekly patch</i>	67

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 0.00156mg/hr twice weekly patch</i>	67	<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg 91 day pack</i>	54	<i>ethinyl estradiol/inert ingredients/levonorgestre l 0.03-1-0.15mg 28 daypack</i>	55
<i>estradiol 0.00156mg/hr weekly patch</i>	67	<i>ethinyl</i>	54	<i>ethinyl estradiol/inert ingredients/levonorgestre l 0.03-1-0.15mg 91 day pack</i>	55
<i>estradiol 0.00208mg/hr twice weekly patch</i>	67	<i>estradiol/ethynodiol diacetate/inert ingredients 0.035-1-1mg pack</i>	54	<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg pack</i>	55
<i>estradiol 0.00208mg/hr weekly patch</i>	67	<i>ethinyl</i>	54	<i>ethinyl estradiol/inert ingredients/norgestimate/ norgestimate/norgestim e</i>	55
<i>estradiol 0.0025mg/hr weekly patch</i>	67	<i>estradiol/ethynodiol diacetate/inert ingredients 0.05-1-1mg pack</i>	57	<i>0.025-1-0.18-0.215-0.25 mg</i>	
<i>estradiol 0.00312mg/hr weekly patch</i>	67	<i>ethinyl</i>	57	<i>ethinyl estradiol/inert</i>	55
<i>estradiol 0.00313mg/hr twice weekly patch</i>	67	<i>estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	55	<i>ingredients/norgestimate/ norgestimate/norgestim e</i>	55
<i>estradiol 0.00417mg/hr twice weekly patch</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.025-75-0.8mg pack</i>	55	<i>0.035-1-0.18-0.215-0.25 mg</i>	
<i>estradiol 0.00417mg/hr weekly patch</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone 0.035-75-0.4mg pack</i>	55	<i>ethinyl</i>	55
<i>estradiol 0.01% vaginal cream</i>	91	<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg 21 day pack</i>	55	<i>estradiol/levonorgestrel 91 day pack</i>	
<i>estradiol 0.5mg tab</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg 28 day pack</i>	55	<i>ethinyl</i>	66
<i>estradiol 1mg tab</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.0025-0.5mg pack</i>	55	<i>ethinyl</i>	66
<i>estradiol 2mg tab</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg 28 day pack</i>	55	<i>estradiol/norethindrone acetate 0.005-1mg pack</i>	
<i>estradiol valerate 10mg/ml inj</i>	67	<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate</i>	55	<i>estradiol/norethindrone acetate 0.02-1mg pack</i>	
<i>estradiol valerate 20mg/ml inj</i>	67	<i>1-20/1-30/1-35mg-mcg pack</i>		<i>ethosuximide 250mg cap</i>	17
<i>estradiol valerate 40mg/ml inj</i>	67	<i>ethinyl estradiol/inert ingredients/levonorgestre l 0.02-1-0.1mg 28 day pack</i>	55	<i>ethosuximide 50mg/ml oral soln</i>	17
<i>estradiol/norethindrone acetate 0.5-0.1mg pack</i>	66			<i>etodolac 200mg cap</i>	4
<i>estradiol/norethindrone acetate 1-0.5mg pack</i>	66			<i>etodolac 300mg cap</i>	4
ESTRING 2MG (7.5 MCG/24HR) VAGINAL SYSTEM	91			<i>etodolac 400mg tab</i>	4
<i>eszopiclone 1mg tab</i>	72			<i>etodolac 500mg tab</i>	4
<i>eszopiclone 2mg tab</i>	72			<i>etravirine 100mg tab</i>	46
<i>eszopiclone 3mg tab</i>	72				
<i>ethambutol 100mg tab</i>	32				
<i>ethambutol 400mg tab</i>	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>etravirine 200mg tab</i>	46	F		<i>fentanyl 100mcg/hr patch</i>	5
<i>euthyrox 100mcg tab</i>	87	<i>falmina 28 day pack</i>	55	<i>fentanyl 1200mcg lozenge</i>	5
<i>euthyrox 112mcg tab</i>	87	<i>famciclovir 125mg tab</i>	48	<i>fentanyl 12mcg/hr patch</i>	5
<i>euthyrox 125mcg tab</i>	87	<i>famciclovir 250mg tab</i>	48	<i>fentanyl 1600mcg lozenge</i>	5
<i>euthyrox 137mcg tab</i>	87	<i>famciclovir 500mg tab</i>	48	<i>fentanyl 200mcg lozenge</i>	5
<i>euthyrox 150mcg tab</i>	87	<i>famotidine 20mg tab</i>	89	<i>fentanyl 25mcg/hr patch</i>	5
<i>euthyrox 175mcg tab</i>	87	<i>famotidine 40mg tab</i>	89	<i>fentanyl 400mcg lozenge</i>	5
<i>euthyrox 200mcg tab</i>	87	<i>famotidine 8mg/ml susp</i>	89	<i>fentanyl 50mcg/hr patch</i>	5
<i>euthyrox 25mcg tab</i>	87	FANAPT 10MG TAB	42	<i>fentanyl 600mcg lozenge</i>	5
<i>euthyrox 50mcg tab</i>	87	FANAPT 12MG TAB	42	<i>fentanyl 75mcg/hr patch</i>	5
<i>euthyrox 75mcg tab</i>	87	FANAPT 1MG TAB	42	<i>fentanyl 800mcg lozenge</i>	5
<i>euthyrox 88mcg tab</i>	87	FANAPT 2MG TAB	42	<i>fesoterodine fumarate</i>	89
<i>everolimus 0.25mg tab</i>	76	FANAPT 4MG TAB	42	<i>4mg er tab</i>	
<i>everolimus 0.5mg tab</i>	76	FANAPT 6MG TAB	42	<i>fesoterodine fumarate</i>	89
<i>everolimus 0.75mg tab</i>	76	FANAPT 8MG TAB	42	<i>8mg er tab</i>	
<i>everolimus 10mg tab</i>	36	FANAPT TITRATION	42	FETZIMA 120MG ER	19
<i>everolimus 1mg tab</i>	76	PACK		CAP	
<i>everolimus 2.5mg tab</i>	36	FARXIGA 10MG TAB	23	FETZIMA 20MG ER CAP	19
<i>everolimus 2mg tab for oral susp</i>	36	FARXIGA 5MG TAB	23	FETZIMA 40MG ER CAP	19
<i>everolimus 3mg tab for oral susp</i>	36	FASENRA 10MG/0.5ML	9	FETZIMA 80MG ER CAP	19
<i>everolimus 5mg tab</i>	36	SYRINGE		FETZIMA PACK	19
<i>everolimus 5mg tab for oral susp</i>	36	FASENRA 30MG/ML	9	FILSPARI 200MG TAB	69
<i>everolimus 7.5mg tab</i>	36	AUTO-INJECTOR		FILSPARI 400MG TAB	69
EVOTAZ 300-150MG TAB	46	FASENRA 30MG/ML	9	<i>finasteride 5mg tab</i>	69
EVRYSIDI 0.75MG/ML ORAL SOLN	78	SYRINGE		<i>ingolimod 0.5mg cap</i>	85
<i>exemestane 25mg tab</i>	34	<i>febuxostat 40mg tab</i>	70	FINTEPLA 2.2MG/ML	14
<i>ezetimibe 10mg tab</i>	26	<i>febuxostat 80mg tab</i>	70	ORAL SOLN	
<i>ezetimibe 10mg/simvastatin 10mg tab</i>	25	<i>felbamate 120mg/ml susp</i>	16	<i>finzala 24 fe chewable 28 day pack</i>	55
<i>ezetimibe 10mg/simvastatin 20mg tab</i>	25	<i>felbamate 400mg tab</i>	16	FIRDAPSE 10MG TAB	32
<i>ezetimibe 10mg/simvastatin 40mg tab</i>	25	<i>felbamate 600mg tab</i>	16	FIRMAGON	34
<i>ezetimibe 10mg/simvastatin 80mg tab</i>	25	<i>felodipine 10mg er tab</i>	50	120MG/VIAL INJ	
		<i>felodipine 2.5mg er tab</i>	50	FIRMAGON 80MG INJ	34
		<i>felodipine 5mg er tab</i>	51	<i>flac 0.01% otic soln</i>	81
		<i>fenofibrate 134mg cap</i>	26	<i>flavoxate 100mg tab</i>	90
		<i>fenofibrate 145mg tab</i>	26	<i>flecainide acetate 100mg tab</i>	9
		<i>fenofibrate 160mg tab</i>	26	<i>flecainide acetate 150mg tab</i>	9
		<i>fenofibrate 200mg cap</i>	26	<i>flecainide acetate 50mg tab</i>	9
		<i>fenofibrate 48mg tab</i>	26	<i>fluconazole 100mg tab</i>	24
		<i>fenofibrate 54mg tab</i>	26	<i>fluconazole 10mg/ml susp</i>	24
		<i>fenofibrate 67mg cap</i>	26	<i>fluconazole 150mg tab</i>	24
		<i>fenofibric acid 135mg dr cap</i>	26		
		<i>fenofibric acid 45mg dr cap</i>	26		

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>fluconazole 200mg tab</i>	24	<i>fluoxetine 40mg cap</i>	18	<i>fluticasone</i>	11
<i>fluconazole 200mg/100ml inj</i>	24	<i>fluoxetine 4mg/ml oral soln</i>	18	<i>propionate/salmeterol 500-50mcg/act dry powder inhaler</i>	
<i>fluconazole 400mg/200ml inj</i>	25	<i>fluoxetine 60mg tab</i>	18	<i>fluvastatin 20mg cap</i>	26
<i>fluconazole 40mg/ml susp</i>	25	FLUPHENAZINE	44	<i>fluvastatin 40mg cap</i>	26
<i>fluconazole 50mg tab</i>	25	0.5MG/ML ORAL SOLN		<i>fluvoxamine maleate 100mg tab</i>	18
<i>flucytosine 250mg cap</i>	24	<i>fluphenazine 10mg tab</i>	44	<i>fluvoxamine maleate 25mg tab</i>	18
<i>flucytosine 500mg cap</i>	24	<i>fluphenazine 1mg tab</i>	44	<i>fluvoxamine maleate 50mg tab</i>	18
<i>fludrocortisone acetate 0.1mg tab</i>	58	<i>fluphenazine 2.5mg tab</i>	44	<i>fondaparinux sodium 10mg/0.8ml syringe</i>	13
<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	78	FLUPHENAZINE	44	<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	13
<i>fluocinolone acetamide 0.01% cream</i>	61	2.5MG/ML INJ		<i>fondaparinux sodium 5mg/0.4ml syringe</i>	13
<i>fluocinolone acetamide 0.01% oil</i>	61	<i>fluphenazine 5mg tab</i>	44	<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	13
<i>fluocinolone acetamide 0.01% otic soln</i>	81	FLUPHENAZINE	44	<i>fosamprenavir 700mg tab</i>	46
<i>fluocinolone acetamide 0.01% topical soln</i>	61	5MG/ML ORAL SOLN		<i>fosinopril sodium 10mg tab</i>	27
<i>fluocinolone acetamide 0.025% cream</i>	61	<i>fluphenazine decanoate 25mg/ml inj</i>	44	<i>fosinopril sodium 20mg tab</i>	27
<i>fluocinolone acetamide 0.025% ointment</i>	61	FLURBIPROFEN	81	<i>fosinopril sodium 40mg tab</i>	27
<i>fluocinonide 0.05% cream</i>	61	SODIUM 0.03% OPHTH SOLN		<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	29
<i>fluocinonide 0.05% e cream</i>	61	<i>fluticasone propionate 0.005% ointment</i>	61	<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	29
FLUOCINONIDE 0.05% GEL	61	<i>fluticasone propionate 0.05% cream</i>	61	FOSRENOL 1000MG ORAL POWDER	69
<i>fluocinonide 0.05% ointment</i>	61	FLUTICASONE	10	FOSRENOL 750MG ORAL POWDER	69
<i>fluocinonide 0.05% topical soln</i>	61	PROPIONATE 110MCG		FOTIVDA 0.89MG CAP	36
<i>fluocinonide 0.1% cream</i>	61	INHALER		FOTIVDA 1.34MG CAP	36
<i>fluorometholone 0.1% ophth susp</i>	80	FLUTICASONE	10	FRUZAQLA 1MG CAP	33
FLUOROURACIL 2% TOPICAL SOLN	60	PROPIONATE 220MCG		FRUZAQLA 5MG CAP	33
<i>fluorouracil 5% cream</i>	60	INHALER		FUROSCIX 80MG/10ML CARTRIDGE	63
<i>fluorouracil 5% topical solution</i>	60	<i>fluticasone propionate 50mcg/act nasal inhaler</i>	78	<i>furosemide 10mg/ml inj</i>	63
<i>fluoxetine 10mg cap</i>	18	<i>fluticasone propionate 50mcg/act nasal inhaler</i>	11		
<i>fluoxetine 20mg cap</i>	18	<i>fluticasone propionate/salmeterol 100-50mcg/act dry powder inhaler</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>furosemide 10mg/ml oral soln</i>	63	GAMMAGARD 10GM INJ	81	<i>gentamicin 1.2mg/ml inj</i>	2
<i>furosemide 20mg tab</i>	63	GAMMAGARD	81	GENTAMICIN 1.6MG/ML INJ	2
<i>furosemide 40mg tab</i>	63	2.5GM/25ML INJ		GENTAMICIN 1MG/ML INJ	3
<i>furosemide 80mg tab</i>	63	GAMMAGARD 5GM INJ	81	<i>gentamicin 40mg/ml inj</i>	3
FUROSEMIDE 8MG/ML ORAL SOLN	63	GAMMAKED 1GM/10ML INJ	81	GENVOYA	46
FUZEON 90MG INJ	46	GAMMAPLEX	81	150-150-200-10MG TAB	
<i>fyavolv 0.0025-0.5mg tab</i>	66	10GM/100ML INJ		GILOTRIF 20MG TAB	34
<i>fyavolv 0.005-1mg tab</i>	66	GAMMAPLEX	81	GILOTRIF 30MG TAB	34
FYCOMPA 0.5MG/ML SUSP	13	10GM/200ML INJ		GILOTRIF 40MG TAB	34
FYCOMPA 10MG TAB	13	GAMMAPLEX	81	GLASSIA 1000MG/50ML INJ	86
FYCOMPA 12MG TAB	13	5GM/50ML INJ		<i>glatiramer acetate 20mg/ml syringe</i>	85
FYCOMPA 2MG TAB	13	GAMUNEX 1GM/10ML INJ	81	<i>glatiramer acetate 40mg/ml syringe</i>	85
FYCOMPA 4MG TAB	13	GARDASIL 9 INJ	90	<i>glatopa 20mg/ml syringe</i>	85
FYCOMPA 6MG TAB	13	GARDASIL 9 SYRINGE	90	<i>glatopa 40mg/ml syringe</i>	85
FYCOMPA 8MG TAB	13	GATTEX 5MG INJ	69	GLEOSTINE 100MG CAP	33
G		GAUZE PADS & DRESSINGS - PADS 2 X 2	73	GLEOSTINE 10MG CAP	33
<i>gabapentin 100mg cap</i>	14	GAVILYTE-C POWDER FOR ORAL SOLN	72	<i>glimepiride 1mg tab</i>	23
<i>gabapentin 300mg cap</i>	14	<i>gavilyte-g powder for oral soln</i>	72	<i>glimepiride 2mg tab</i>	23
<i>gabapentin 400mg cap</i>	14	<i>gavilyte-n powder for oral soln</i>	72	<i>glimepiride 4mg tab</i>	23
<i>gabapentin 50mg/ml oral soln</i>	14	GAVRETO 100MG CAP	36	<i>glipizide 10mg er tab</i>	23
<i>gabapentin 600mg tab (Neurontin equiv)</i>	14	<i>gefitinib 250mg tab</i>	34	<i>glipizide 10mg tab</i>	23
<i>gabapentin 800mg tab</i>	14	<i>gemfibrozil 600mg tab</i>	26	<i>glipizide 2.5mg er tab</i>	23
GALAFOLD 123MG 28 DAY PACK	65	GEMTESA 75MG TAB	90	<i>glipizide 5mg er tab</i>	23
<i>galantamine 12mg tab</i>	83	<i>generlac 10gm/15ml oral soln</i>	68	<i>glipizide 5mg tab</i>	23
<i>galantamine 4mg tab</i>	83	<i>gengraf 100mg cap</i>	76	<i>glipizide/metformin 2.5-250mg tab</i>	20
<i>galantamine 8mg tab</i>	83	<i>gengraf 100mg/ml oral soln</i>	76	<i>glipizide/metformin 2.5-500mg tab</i>	20
<i>galantamine hydrobromide 16mg er cap</i>	84	<i>gengraf 25mg cap</i>	76	<i>glipizide/metformin 5-500mg tab</i>	20
<i>galantamine hydrobromide 24mg er cap</i>	84	<i>gentamicin 0.1% cream</i>	59	GLUCAGON (RDNA) 1MG INJ	21
GALANTAMINE	84	<i>gentamicin 0.1% ointment</i>	59	<i>glucose 100mg/ml inj</i>	78
HYDROBROMIDE		<i>gentamicin 0.3% ophth soln</i>	79	GLUCOSE	74
4MG/ML ORAL SOLN		GENTAMICIN 0.8MG/ML INJ	2	100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	
<i>galantamine hydrobromide 8mg er cap</i>	84				

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

ALPHABETICAL LISTING OF DRUGS

GLUCOSE	74	GLUCOSE	74	HAEGARDA 3000UNIT	70
100MG/ML/SODIUM		50MG/ML/POTASSIUM		INJ	
CHLORIDE 4.5MG/ML		CHLORIDE		<i>hailey 24 fe 28 day pack</i>	55
INJ		0.04MEQ/ML/SODIUM		<i>halobetasol propionate</i>	61
GLUCOSE	74	CHLORIDE 9MG/ML INJ		<i>0.05% cream</i>	
25MG/ML/SODIUM		<i>glucose 50mg/ml/sodium</i>	74	<i>halobetasol propionate</i>	61
CHLORIDE 4.5MG/ML		<i>chloride 2mg/ml inj</i>		<i>0.05% ointment</i>	
INJ		<i>glucose 50mg/ml/sodium</i>	75	<i>haloette</i>	57
<i>glucose 50mg/ml inj</i>	78	<i>chloride 4.5mg/ml inj</i>		<i>0.120-0.015mg/24hr</i>	
<i>glucose</i>	74	<i>glucose 50mg/ml/sodium</i>	75	<i>vaginal system</i>	
<i>50mg/ml/potassium</i>		<i>chloride 9mg/ml inj</i>		<i>haloperidol 0.5mg tab</i>	43
<i>chloride</i>		<i>glutamine 5000mg</i>	71	<i>haloperidol 10mg tab</i>	43
<i>0.01meq/ml/sodium</i>		<i>powder for oral soln</i>		<i>haloperidol 1mg tab</i>	43
<i>chloride 4.5mg/ml inj</i>		<i>glycopyrrolate 1mg tab</i>	89	<i>haloperidol 20mg tab</i>	43
<i>glucose</i>	74	<i>glycopyrrolate 2mg tab</i>	89	<i>haloperidol 2mg tab</i>	43
<i>50mg/ml/potassium</i>		<i>granisetron 1mg tab</i>	24	<i>haloperidol 2mg/ml oral</i>	43
<i>chloride 0.02meq/ml inj</i>		<i>griseofulvin 125mg tab</i>	24	<i>soln</i>	
<i>glucose</i>	74	<i>griseofulvin 250mg tab</i>	24	<i>haloperidol 5mg tab</i>	43
<i>50mg/ml/potassium</i>		<i>griseofulvin 25mg/ml</i>	24	<i>haloperidol 5mg/ml inj</i>	43
<i>chloride</i>		<i>susp</i>		<i>haloperidol decanoate</i>	43
<i>0.02meq/ml/sodium</i>		<i>griseofulvin 500mg tab</i>	24	<i>100mg/ml (1ml) inj</i>	
<i>chloride 2.25mg/ml inj</i>		<i>guanfacine 1mg er tab</i>	1	<i>haloperidol decanoate</i>	43
<i>glucose</i>	74	<i>guanfacine 2mg er tab</i>	1	<i>100mg/ml inj</i>	
<i>50mg/ml/potassium</i>		<i>guanfacine 3mg er tab</i>	1	<i>haloperidol decanoate</i>	43
<i>chloride</i>		<i>guanfacine 4mg er tab</i>	1	<i>50mg/ml (1ml) inj</i>	
<i>0.02meq/ml/sodium</i>		GVOKE 0.5MG/0.1ML	21	<i>haloperidol decanoate</i>	43
<i>chloride 4.5mg/ml inj</i>		AUTO-INJECTOR		<i>50mg/ml inj</i>	
<i>glucose</i>	74	GVOKE 1MG/0.2ML	21	HAVRIX 1440ELU/ML	90
<i>50mg/ml/potassium</i>		AUTO-INJECTOR		SYRINGE	
<i>chloride</i>		GVOKE 1MG/0.2ML INJ	21	HAVRIX 720ELU/0.5ML	90
<i>0.02meq/ml/sodium</i>		GVOKE 1MG/0.2ML	21	SYRINGE	
<i>chloride 9mg/ml inj</i>		SYRINGE		<i>heather 0.35mg 28-day</i>	57
<i>glucose</i>	74	<hr/>		<i>pack</i>	
<i>50mg/ml/potassium</i>		H		<i>heparin sodium porcine</i>	13
<i>chloride</i>		HADLIMA 40MG/0.4ML	3	<i>10000unit/ml inj</i>	
<i>0.03meq/ml/sodium</i>		AUTO-INJECTOR		<i>heparin sodium porcine</i>	13
<i>chloride 4.5mg/ml inj</i>		HADLIMA 40MG/0.4ML	3	<i>1000unit/ml inj</i>	
<i>glucose</i>	74	SYRINGE		<i>heparin sodium porcine</i>	13
<i>50mg/ml/potassium</i>		HADLIMA 40MG/0.8ML	3	<i>20000unit/ml inj</i>	
<i>chloride</i>		AUTO-INJECTOR		<i>heparin sodium porcine</i>	13
<i>0.04meq/ml/sodium</i>		HADLIMA 40MG/0.8ML	3	<i>5000unit/ml inj</i>	
<i>chloride 4.5mg/ml inj</i>		SYRINGE		HEPLISAV-B	90
		HAEGARDA 2000UNIT	70	20MCG/0.5ML SYRINGE	
		INJ		HIBERIX 10MCG INJ	90

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

HUMALOG 100UNIT/ML CARTRIDGE	22	HUMULIN 70-30UNIT/ML INJ	22	<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	30
HUMALOG 100UNIT/ML KWIKPEN	22	HUMULIN 70-30UNIT/ML PEN INJ	22	<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	30
HUMALOG 200UNIT/ML PEN INJ	22	HUMULIN N 100UNIT/ML INJ	22	<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	30
HUMALOG JUNIOR 100UNIT/ML PEN INJ	22	HUMULIN N 100UNIT/ML PEN INJ	22	<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	30
HUMALOG MIX 25-75UNIT/ML INJ	22	HUMULIN R 100UNIT/ML INJ	22	<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	30
HUMALOG MIX 25-75UNIT/ML PEN INJ	22	HUMULIN R 500UNIT/ML INJ	22	<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	30
HUMALOG MIX 50-50UNIT/ML PEN INJ	22	HUMULIN R 500UNIT/ML PEN INJ	22	<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	30
HUMIRA 10MG/0.1ML SYRINGE (ABBVIE)	3	<i>hydralazine 100mg tab</i>	30	<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	63
HUMIRA 20MG/0.2ML SYRINGE (ABBVIE)	3	<i>hydralazine 10mg tab</i>	30	<i>hydrochlorothiazide/telmisartan 12.5-40mg tab</i>	30
HUMIRA 40MG/0.4ML AUTO-INJECTOR (ABBVIE)	3	<i>hydralazine 25mg tab</i>	30	<i>hydrochlorothiazide/telmisartan 12.5-80mg tab</i>	30
HUMIRA 40MG/0.4ML SYRINGE (ABBVIE)	3	<i>hydralazine 50mg tab</i>	30	<i>hydrochlorothiazide/telmisartan 25-80mg tab</i>	30
HUMIRA 40MG/0.8ML AUTO-INJECTOR	3	<i>hydralazine/isosorbide dinitrate 37.5-20mg tab</i>	51	<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	63
HUMIRA 40MG/0.8ML SYRINGE	3	<i>hydrochlorothiazide 12.5mg cap</i>	64	<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	63
HUMIRA 80MG/0.8ML AUTO-INJECTOR (ABBVIE)	3	<i>hydrochlorothiazide 12.5mg tab</i>	64	<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	63
HUMIRA PEN - PEDIATRIC UC STARTER PACK 80MG/0.8ML INJ (ABBVIE)	3	<i>hydrochlorothiazide 25mg tab</i>	64	<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	30
HUMIRA PEN 80MG/0.8ML AND 40MG/0.4ML - PSORIASIS/UVEITIS STARTER PACK	3	<i>hydrochlorothiazide 50mg tab</i>	64	<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	30
HUMIRA PEN 80MG/0.8ML CROHNS/UC/HIDRADENITIS STARTER PACK (ABBVIE)	3	<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	29	<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	30
		<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	29	<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	30
		<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	29		
		<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	29		
		<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	30		
		<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	30		
		<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	30		

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>hydrochlorothiazide/valsartan 25-320mg tab</i>	30	<i>hydroxyzine pamoate 50mg cap</i>	8	INCRELEX 40MG/4ML INJ	65	
<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	6	I			INCRUSE ELLIPTA 62.5MCG/INH INHALER	10
<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	6	<i>ibandronate 150mg tab</i>	64	<i>indapamide 1.25mg tab</i>	64	
<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	6	IBRANCE 100MG CAP	36	<i>indapamide 2.5mg tab</i>	64	
<i>hydrocortisone 1% cream</i>	61	IBRANCE 100MG TAB	36	INFANRIX SYRINGE	88	
<i>hydrocortisone 1.67mg/ml enema</i>	7	IBRANCE 125MG CAP	36	INGREZZA 40MG CAP	84	
<i>hydrocortisone 10mg tab</i>	58	IBRANCE 125MG TAB	37	INGREZZA 40MG SPRINKLE CAP	84	
<i>hydrocortisone 2.5% cream</i>	7	IBRANCE 75MG CAP	37	INGREZZA 60MG CAP	84	
<i>hydrocortisone 2.5% ointment</i>	61	IBRANCE 75MG TAB	37	INGREZZA 60MG SPRINKLE CAP	84	
<i>hydrocortisone 20mg tab</i>	58	<i>ibu 600mg tab</i>	4	INGREZZA 80MG CAP	84	
<i>hydrocortisone 5mg tab</i>	58	<i>ibu 800mg tab</i>	4	INGREZZA 80MG SPRINKLE CAP	85	
HYDROCORTISONE LOTION 2.5%	61	<i>ibuprofen 20mg/ml susp</i>	4	INGREZZA 80MG CAP	84	
<i>hydrocortisone/acetic acid 1-2% otic soln</i>	81	<i>ibuprofen 400mg tab</i>	4	INGREZZA 80MG SPRINKLE CAP	85	
<i>hydromorphone 2mg tab</i>	5	<i>ibuprofen 600mg tab</i>	4	INGREZZA CAP PACK	85	
<i>hydromorphone 4mg tab</i>	5	<i>ibuprofen 800mg tab</i>	4	INLYTA 1MG TAB	33	
<i>hydroxychloroquine sulfate 100mg tab</i>	32	<i>icatibant 10mg/ml syringe</i>	70	INLYTA 5MG TAB	33	
<i>hydroxychloroquine sulfate 200mg tab</i>	32	<i>iclevia 91 day pack</i>	55	INQOVI 5 TABLET PACK	35	
<i>hydroxychloroquine sulfate 300mg tab</i>	32	ICLUSIG 10MG TAB	37	INREBIC 100MG CAP	37	
<i>hydroxychloroquine sulfate 400mg tab</i>	32	ICLUSIG 15MG TAB	37	INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	22	
<i>hydroxyurea 500mg cap</i>	40	ICLUSIG 30MG TAB	37	INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	22	
<i>hydroxyzine 10mg tab</i>	8	ICLUSIG 45MG TAB	37	INSULIN LISPRO 100UNIT/ML INJ	22	
<i>hydroxyzine 25mg tab</i>	8	<i>icosapent ethyl 1000mg cap</i>	25	INSULIN PEN NEEDLE	73	
<i>hydroxyzine 50mg tab</i>	8	<i>icosapent ethyl 500mg cap</i>	25	INSULIN SYRINGE (DISP) U-100 0.3ML	73	
HYDROXYZINE PAMOATE 100MG CAP	8	IDHIFA 100MG TAB	37	INSULIN SYRINGE (DISP) U-100 1/2ML	73	
<i>hydroxyzine pamoate 25mg cap</i>	8	IDHIFA 50MG TAB	37	INSULIN SYRINGE (DISP) U-100 1ML	73	
		ILEVRO 0.3% OPHTH SUSP	81	INTELENCE 25MG TAB	47	
		<i>imatinib 100mg tab</i>	37	INTRALIPID 20GM/100ML INJ	78	
		<i>imatinib 400mg tab</i>	37	<i>introvale 91 day pack</i>	55	
		IMBRUVICA 140MG CAP	37	INVEGA HAFYERA 1092MG/3.5ML SYRINGE	42	
		IMBRUVICA 420MG TAB	37			
		IMBRUVICA 70MG CAP	37			
		IMBRUVICA 70MG/ML SUSP	37			
		<i>imipramine 10mg tab</i>	20			
		<i>imipramine 25mg tab</i>	20			
		<i>imipramine 50mg tab</i>	20			
		<i>imiquimod 5% cream</i>	62			
		IMOVAX 2.5UNIT/ML INJ	90			
		<i>incassia 0.35mg 28 day pack</i>	57			

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 HAFYERA 1560MG/5ML SYRINGE	42	ISENTRESS 25MG CHEW TAB	47	JAKAFI 20MG TAB	37
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	42	ISENTRESS 400MG TAB	47	JAKAFI 25MG TAB	37
INVEGA SUSTENNA 156MG/ML SYRINGE	42	ISENTRESS 600MG TAB	47	JAKAFI 5MG TAB	37
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	42	<i>isibloom 28 day pack</i>	55	<i>jantoven 10mg tab</i>	12
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	42	ISONIAZID 100MG TAB	32	<i>jantoven 1mg tab</i>	12
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	42	<i>isoniazid 10mg/ml oral soln</i>	32	<i>jantoven 2.5mg tab</i>	12
INVEGA TRINZA 273MG/0.875ML SYRINGE	42	<i>isoniazid 300mg tab</i>	32	<i>jantoven 3mg tab</i>	12
INVEGA TRINZA 410MG/1.315ML SYRINGE	42	<i>isosorbide dinitrate 10mg tab</i>	8	<i>jantoven 4mg tab</i>	12
INVEGA TRINZA 546MG/1.75ML SYRINGE	42	<i>isosorbide dinitrate 20mg tab</i>	8	<i>jantoven 5mg tab</i>	12
INVEGA TRINZA 819MG/2.625ML SYRINGE	42	<i>isosorbide dinitrate 30mg tab</i>	8	<i>jantoven 6mg tab</i>	12
IPOL INJ	91	<i>isosorbide dinitrate 5mg tab</i>	8	<i>jantoven 7.5mg tab</i>	12
<i>ipratropium bromide 0.02% inh soln</i>	10	<i>isosorbide dinitrate 10mg tab</i>	8	JANUMET 1000-50MG TAB	20
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	78	<i>isosorbide dinitrate 20mg tab</i>	8	JANUMET 500-50MG TAB	20
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	78	<i>isosorbide mononitrate 10mg tab</i>	8	JANUMET XR	20
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	11	<i>isosorbide mononitrate 120mg er tab</i>	8	JANUMET XR 1000-100MG TAB	20
<i>irbesartan 150mg tab</i>	28	<i>isosorbide mononitrate 20mg tab</i>	8	JANUMET XR 1000-50MG TAB	20
<i>irbesartan 300mg tab</i>	28	<i>isosorbide mononitrate 30mg er tab</i>	8	JANUMET XR 500-50MG TAB	20
<i>irbesartan 75mg tab</i>	28	<i>isosorbide mononitrate 60mg er tab</i>	8	JANUVIA 100MG TAB	21
ISENTRESS 100MG CHEW TAB	47	<i>isotretinoin 10mg cap</i>	59	JANUVIA 25MG TAB	21
ISENTRESS 100MG GRANULES FOR ORAL SUSP	47	<i>isotretinoin 20mg cap</i>	59	JANUVIA 50MG TAB	21
		<i>isotretinoin 30mg cap</i>	59	JARDIANCE 10MG TAB	23
		<i>isotretinoin 40mg cap</i>	59	JARDIANCE 25MG TAB	23
		<i>isradipine 2.5mg cap</i>	51	<i>jasmiel 28 day pack</i>	55
		<i>isradipine 5mg cap</i>	51	<i>javygtor 100mg powder for oral soln</i>	65
		<i>itraconazole 100mg cap</i>	25	<i>javygtor 100mg tab</i>	65
		<i>ivabradine 5mg tab</i>	52	<i>javygtor 500mg powder for oral soln</i>	65
		<i>ivabradine 7.5mg tab</i>	52	JAYPIRCA 100MG TAB	37
		<i>ivermectin 3mg tab</i>	7	JAYPIRCA 50MG TAB	37
IWILFIN 192MG TAB	40	<i>ivermectin 3mg tab</i>	7	<i>jinteli 0.005-1mg tab</i>	66
IXCHIQ INJ	91	IWILFIN 192MG TAB	40	<i>juleber 28 day pack</i>	55
IXIARO 0.012MG/ML SYRINGE	91	IXCHIQ INJ	91	JULUCA 50-25MG TAB	47
		IXIARO 0.012MG/ML SYRINGE	91	<i>junel 1.5/30 21 day pack</i>	55
				<i>junel 1/20 21 day pack</i>	55
				<i>junel fe 1.5/30 28 day pack</i>	55
		J		<i>junel fe 1/20 28 day pack</i>	55
		JAKAFI 10MG TAB	37		
		JAKAFI 15MG 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>junel fe 24 1/20 28 day pack</i>	55	KEVZARA	4	<i>labetalol 300mg tab</i>	49
JYLAMVO 2MG/ML	33	150MG/1.14ML		<i>lacosamide 100mg tab</i>	14
ORAL SOLN		SYRINGE		<i>lacosamide 10mg/ml oral soln</i>	14
JYNNEOS 0.5ML INJ	91	KEVZARA	4	<i>lacosamide 150mg tab</i>	14
K		200MG/1.14ML		<i>lacosamide 200mg tab</i>	14
<i>kaitlib fe 28 day pack</i>	55	AUTO-INJECTOR		<i>lacosamide 50mg tab</i>	14
KALYDECO 13.4MG GRANULES	86	KEVZARA	4	<i>lactulose 667mg/ml oral soln</i>	72
KALYDECO 150MG TAB	86	200MG/1.14ML		LAGEVRIO 200MG CAP	49
KALYDECO 25MG GRANULES	86	SYRINGE		<i>lamivudine 100mg tab</i>	48
KALYDECO 5.8MG GRANULES	86	KINRIX SYRINGE	88	<i>lamivudine 10mg/ml oral soln</i>	47
KALYDECO 50MG GRANULES	86	<i>kionex 15gm/60ml susp</i>	77	<i>lamivudine 150mg tab</i>	47
KALYDECO 75MG GRANULES	86	KISQALI 200MG DAILY DOSE PACK (21)	37	<i>lamivudine 300mg tab</i>	47
<i>kariva 28 day pack</i>	55	KISQALI 400MG DAILY DOSE PACK (42)	37	<i>lamivudine/zidovudine 150-300mg tab</i>	
KCL/D5W/LR INJ 0.15%	75	KISQALI 600MG DAILY DOSE PACK (63)	37	<i>lamotrigine 100mg er tab</i>	14
<i>kcl/nacl 20meq-0.45% inj</i>	75	KISQALI/FEMARA 200 CO-PACK	35	<i>lamotrigine 100mg odt</i>	14
<i>kcl/nacl 20meq-0.9% inj</i>	75	KISQALI/FEMARA 400 CO-PACK	35	<i>lamotrigine 100mg tab</i>	15
<i>kcl/nacl 40meq-9% inj</i>	75	KISQALI/FEMARA 600 CO-PACK	35	<i>lamotrigine 150mg tab</i>	15
<i>kelnor 1/35 28 day pack</i>	55	<i>klor-con 10meq er tab</i>	75	<i>lamotrigine 200mg er tab</i>	15
<i>kelnor 1/50 28 day pack</i>	55	<i>klor-con 10meq micro er tab</i>	75	<i>lamotrigine 200mg odt</i>	15
KERENDIA 10MG TAB	66	<i>klor-con 15meq micro er tab</i>	75	<i>lamotrigine 200mg tab</i>	15
KERENDIA 20MG TAB	66	<i>klor-con 20meq micro er tab</i>	75	<i>lamotrigine 250mg er tab</i>	15
KESIMPTA 20MG/0.4ML PEN INJ	85	<i>klor-con 20meq powder for oral soln</i>	75	<i>lamotrigine 25mg chew tab</i>	15
<i>ketoconazole 2% cream</i>	59	<i>klor-con 8meq er tab</i>	75	<i>lamotrigine 25mg er tab</i>	15
<i>ketoconazole 2% shampoo</i>	59	KLOXXADO 8MG/0.1ML NASAL SPRAY	23	<i>lamotrigine 25mg odt</i>	15
<i>ketoconazole 200mg tab</i>	25	KORLYM 300MG TAB	21	<i>lamotrigine 25mg tab</i>	15
<i>ketorolac tromethamine 0.4% ophth soln</i>	81	KOSELUGO 10MG CAP	37	<i>lamotrigine 300mg er tab</i>	15
<i>ketorolac tromethamine 0.5% ophth soln</i>	81	KOSELUGO 25MG CAP	37	<i>lamotrigine 50mg er tab</i>	15
<i>ketorolac tromethamine 10mg tab</i>	4	<i>kourzeq 0.1% oral paste</i>	77	<i>lamotrigine 50mg odt</i>	15
KEVZARA	4	KRAZATI 200MG TAB	37	<i>lamotrigine 5mg chew tab</i>	15
150MG/1.14ML		<i>kurvelo pack</i>	55	<i>lansoprazole 15mg dr cap</i>	89
AUTO-INJECTOR		L		<i>lansoprazole 30mg dr cap</i>	89
		<i>labetalol 100mg tab</i>	49	<i>lanthanum carbonate 1000mg chew tab</i>	69
		<i>labetalol 200mg tab</i>	49	<i>lanthanum carbonate 500mg chew tab</i>	69
				<i>lanthanum carbonate 750mg chew tab</i>	69
				LANTUS 100UNIT/ML INJ	22

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

ALPHABETICAL LISTING OF DRUGS

LANTUS 100UNIT/ML PEN INJ	22	<i>leuprolide acetate 5mg/ml inj</i>	34	<i>levonorgestrel-ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg pack</i>	56
<i>lapatinib 250mg tab</i>	37	<i>levabuterol 0.31mg/3ml neb soln</i>	11	<i>levora 0.15/30 28 day pack</i>	56
<i>larin 1.5/30 pack</i>	55	<i>levabuterol 0.63mg/3ml inh soln</i>	11	<i>levothyroxine sodium 100mcg tab</i>	87
<i>larin 1/20 pack</i>	56	<i>levabuterol 1.25mg/0.5ml neb soln</i>	11	<i>levothyroxine sodium 112mcg tab</i>	87
<i>larin fe 1.5/30 pack</i>	56	<i>levabuterol 1.25mg/3ml neb soln</i>	11	<i>levothyroxine sodium 125mcg tab</i>	87
<i>larin fe 1/20 pack</i>	56	LEVALBUTEROL	11	<i>levothyroxine sodium 137mcg tab</i>	88
<i>latanoprost 0.005% ophth soln</i>	81	45MCG/ACT INHALER	22	<i>levothyroxine sodium 150mcg tab</i>	88
<i>layolis fe 28 pack</i>	56	LEVEMIR 100UNIT/ML INJ	22	<i>levothyroxine sodium 175mcg tab</i>	88
<i>leena 28 day pack</i>	56	LEVEMIR 100UNIT/ML PEN INJ	22	<i>levothyroxine sodium 200mcg tab</i>	88
<i>leflunomide 10mg tab</i>	5	<i>levetiracetam 1000mg tab</i>	15	<i>levothyroxine sodium 25mcg tab</i>	88
<i>leflunomide 20mg tab</i>	5	<i>levetiracetam 100mg/ml oral soln</i>	15	<i>levothyroxine sodium 300mcg tab</i>	88
<i>lenalidomide 10mg cap</i>	76	<i>levetiracetam 250mg tab</i>	15	<i>levothyroxine sodium 50mcg tab</i>	88
<i>lenalidomide 15mg cap</i>	76	<i>levetiracetam 500mg er tab</i>	15	<i>levothyroxine sodium 75mcg tab</i>	88
<i>lenalidomide 2.5mg cap</i>	76	<i>levetiracetam 500mg tab</i>	15	<i>levothyroxine sodium 88mcg tab</i>	88
<i>lenalidomide 20mg cap</i>	76	<i>levetiracetam 750mg er tab</i>	15	<i>levoxyl 100mcg tab</i>	88
<i>lenalidomide 25mg cap</i>	76	<i>levetiracetam 750mg tab</i>	15	<i>levoxyl 112mcg tab</i>	88
<i>lenalidomide 5mg cap</i>	76	LEVOBUNOLOL 0.5% OPTH SOLN	79	<i>levoxyl 125mcg tab</i>	88
LENVIMA 10MG DAILY DOSE PACK	33	<i>levocarnitine 100mg/ml oral soln</i>	65	<i>levoxyl 137mcg tab</i>	88
LENVIMA 12MG DAILY DOSE PACK	33	<i>levocarnitine 330mg tab</i>	65	<i>levoxyl 150mcg tab</i>	88
LENVIMA 14MG DAILY DOSE PACK	33	<i>levocetirizine 5mg tab</i>	25	<i>levoxyl 175mcg tab</i>	88
LENVIMA 18MG DAILY DOSE PACK	33	<i>levofloxacin 250mg tab</i>	67	<i>levoxyl 200mcg tab</i>	88
LENVIMA 20MG DAILY DOSE PACK	33	<i>levofloxacin 500mg tab</i>	67	<i>levoxyl 25mcg tab</i>	88
LENVIMA 24MG DAILY DOSE PACK	33	<i>levofloxacin 750mg/150ml inj</i>	67	<i>levoxyl 50mcg tab</i>	88
LENVIMA 4MG DAILY DOSE PACK	33	<i>levofloxacin oral soln 25mg/ml</i>	68	<i>levoxyl 75mcg tab</i>	88
LENVIMA 8MG DAILY DOSE PACK	33	<i>levonest 28 day pack</i>	56	<i>LIBERVANT 10MG BUCCAL FILM</i>	13
<i>lessina 28 day pack</i>	56				
<i>letrozole 2.5mg tab</i>	34				
<i>leucovorin 10mg tab</i>	40				
<i>leucovorin 15mg tab</i>	40				
<i>leucovorin 25mg tab</i>	40				
<i>leucovorin 5mg tab</i>	40				
LEUKERAN 2MG TAB	33				
LEUPROLIDE ACETATE 22.5MG INJ	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

LIBERVANT 12.5MG	13	<i>lisinopril 10mg tab</i>	27	<i>lorazepam 2mg tab</i>	9
BUCCAL FILM		<i>lisinopril 2.5mg tab</i>	27	<i>lorazepam 2mg/ml oral</i>	9
LIBERVANT 15MG	13	<i>lisinopril 20mg tab</i>	27	<i>soln</i>	
BUCCAL FILM		<i>lisinopril 30mg tab</i>	27	LORBRENA 100MG TAB	37
LIBERVANT 5MG	13	<i>lisinopril 40mg tab</i>	27	LORBRENA 25MG TAB	37
BUCCAL FILM		<i>lisinopril 5mg tab</i>	27	<i>loryna 28 day pack</i>	56
LIBERVANT 7.5MG	13	LITFULO 50MG CAP	62	<i>losartan potassium</i>	28
BUCCAL FILM		<i>lithium carbonate 150mg</i>	41	<i>100mg tab</i>	
<i>lidocaine 4% topical soln</i>	62	<i>cap</i>		<i>losartan potassium 25mg</i>	28
<i>lidocaine 5% ointment</i>	62	<i>lithium carbonate 300mg</i>	41	<i>tab</i>	
<i>lidocaine 5% patch</i>	62	<i>cap</i>		<i>losartan potassium 50mg</i>	28
<i>lidocaine viscous 2%</i>	77	<i>lithium carbonate 300mg</i>	41	<i>tab</i>	
<i>topical soln</i>		<i>er tab</i>		<i>loteprednol etabonate</i>	80
<i>lidocaine/prilocaine</i>	62	<i>lithium carbonate 300mg</i>	41	<i>0.5% ophth gel</i>	
<i>2.5-2.5% cream</i>		<i>tab</i>		<i>loteprednol etabonate</i>	80
<i>lidocan 5% patch</i>	62	<i>lithium carbonate 450mg</i>	41	<i>0.5% ophth susp</i>	
<i>linezolid 20mg/ml susp</i>	31	<i>er tab</i>		<i>lovastatin 10mg tab</i>	26
<i>linezolid 2mg/ml inj</i>	31	LITHIUM CARBONATE	41	<i>lovastatin 20mg tab</i>	26
<i>linezolid 600mg tab</i>	32	600MG CAP		<i>lovastatin 40mg tab</i>	26
LINZESS 145MCG CAP	68	<i>lithium citrate 60mg/ml</i>	41	<i>low-ogestrel 28 day pack</i>	56
LINZESS 290MCG CAP	68	<i>oral soln</i>		<i>loxapine 10mg cap</i>	43
LINZESS 72MCG CAP	68	LITHOSTAT 250MG TAB	69	<i>loxapine 25mg cap</i>	43
<i>liothyronine sodium</i>	88	LIVTENCITY 200MG TAF	48	<i>loxapine 50mg cap</i>	43
<i>25mcg tab</i>		<i>loestrin fe 1/20 28 day</i>	56	<i>loxapine 5mg cap</i>	43
<i>liothyronine sodium</i>	88	<i>pack</i>		<i>lubiprostone 24mcg cap</i>	68
<i>50mcg tab</i>		LOKELMA 10GM	77	<i>lubiprostone 8mcg cap</i>	68
<i>liothyronine sodium 5mcg</i>	88	POWDER FOR ORAL		LUMAKRAS 120MG TAB	37
<i>tab</i>		SUSP		LUMAKRAS 320MG TAB	37
LIRAGLUTIDE 6MG/ML	21	LOKELMA 5GM	77	LUMIGAN 0.01% OPHTH	81
PEN INJ		POWDER FOR ORAL		SOLN	
<i>lisdexamfetamine</i>	1	SUSP		LUMRYZ 4.5GM	83
<i>dimesylate 10mg cap</i>		LONSURF 6.14-15MG	35	GRANULES FOR ORAL	
<i>lisdexamfetamine</i>	1	TAB		SUSP	
<i>dimesylate 20mg cap</i>		LONSURF 8.19-20MG	35	LUMRYZ 6GM	83
<i>lisdexamfetamine</i>	1	TAB		GRANULES FOR ORAL	
<i>dimesylate 30mg cap</i>		<i>loperamide 2mg cap</i>	23	SUSP	
<i>lisdexamfetamine</i>	1	<i>lopinavir/ritonavir</i>	47	LUMRYZ 7.5GM	83
<i>dimesylate 40mg cap</i>		<i>100-25mg tab</i>		GRANULES FOR ORAL	
<i>lisdexamfetamine</i>	1	<i>lopinavir/ritonavir</i>	47	SUSP	
<i>dimesylate 50mg cap</i>		<i>200-50mg tab</i>		LUMRYZ 9GM	83
<i>lisdexamfetamine</i>	1	<i>lopinavir/ritonavir</i>	47	GRANULES FOR ORAL	
<i>dimesylate 60mg cap</i>		<i>80-20mg/ml oral soln</i>		SUSP	
<i>lisdexamfetamine</i>	1	<i>lorazepam 0.5mg tab</i>	9	LUPKYNIS 7.9MG CAP	76
<i>dimesylate 70mg cap</i>		<i>lorazepam 1mg tab</i>	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

LUPRON 11.25MG SYRINGE (NON-PEDIATRIC)	34	LYUMJEV 100UNIT/ML INJ	22	<i>meclizine 25mg tab</i>	24
LUPRON 22.5MG SYRINGE	34	LYUMJEV 100UNIT/ML PEN INJ	22	<i>medroxyprogesterone acetate 10mg tab</i>	83
LUPRON 3.75MG SYRINGE	34	LYUMJEV 200UNIT/ML PEN INJ	22	<i>medroxyprogesterone acetate 150mg/ml inj</i>	57
LUPRON 30MG SYRINGE	34	<i>lyza 0.35mg pack</i>	57	<i>medroxyprogesterone acetate 150mg/ml syringe</i>	57
LUPRON 45MG SYRINGE (NON-PEDIATRIC)	34	M		<i>medroxyprogesterone acetate 2.5mg tab</i>	83
LUPRON 7.5MG SYRINGE (NON-PEDIATRIC)	34	<i>magnesium sulfate 500mg/ml inj</i>	75	<i>medroxyprogesterone acetate 5mg tab</i>	83
<i>lurasidone 120mg tab</i>	41	<i>magnesium sulfate 500mg/ml syringe</i>	75	<i>mefloquine 250mg tab</i>	32
<i>lurasidone 20mg tab</i>	41	<i>malathion 0.5% lotion</i>	62	MEGESTROL ACETATE 125MG/ML SUSP	83
<i>lurasidone 40mg tab</i>	41	<i>maraviroc 150mg tab</i>	47	<i>megestrol acetate 20mg tab</i>	34
<i>lurasidone 60mg tab</i>	41	<i>maraviroc 300mg tab</i>	47	<i>megestrol acetate 40mg tab</i>	34
<i>lurasidone 80mg tab</i>	41	<i>marlissa 28 day pack</i>	56	<i>megestrol acetate 40mg/ml susp</i>	34
<i>lutera 28 day pack</i>	56	MARPLAN 10MG TAB	17	MEKINIST 0.05MG/ML ORAL SOLN	37
<i>lyleq 28 day 0.35mg pack</i>	57	MATULANE 50MG CAP	40	MEKINIST 0.5MG TAB	37
<i>lyllana 0.025mg/24hr patch</i>	67	MAVENCLAD 10 TABLET PACK 10MG	85	MEKINIST 2MG TAB	37
<i>lyllana 0.0375mg/24hr patch</i>	67	MAVENCLAD 4 TABLET PACK 10MG	85	MEKTOVI 15MG TAB	37
<i>lyllana 0.05mg/24hr patch</i>	67	MAVENCLAD 5 TABLET PACK 10MG	85	<i>meloxicam 15mg tab</i>	4
<i>lyllana 0.075mg/24hr patch</i>	67	MAVENCLAD 6 TABLET PACK 10MG	85	<i>meloxicam 7.5mg tab</i>	4
<i>lyllana 0.1mg/24hr patch</i>	67	MAVENCLAD 7 TABLET PACK 10MG	85	<i>memantine 10mg tab</i>	84
LYNPARZA 100MG TAB	37	MAVENCLAD 8 TABLET PACK 10MG	85	<i>memantine 14mg er cap</i>	84
LYNPARZA 150MG TAB	37	MAVENCLAD 9 TABLET PACK 10MG	85	<i>memantine 21mg er cap</i>	84
LYSODREN 500MG TAB	34	MAVENCLAD 10 TABLET PACK 10MG	85	<i>memantine 28mg er cap</i>	84
LYTGOBI 4MG TAB PACK (12MG DAILY DOSE)	37	MAVYRET 100-40MG TAB	48	<i>memantine 2mg/ml oral soln</i>	84
LYTGOBI 4MG TAB PACK (16MG DAILY DOSE)	37	MAVYRET 50-20MG ORAL PELLETT	48	<i>memantine 5/10mg titration pack</i>	84
LYTGOBI 4MG TAB PACK (20MG DAILY DOSE)	37	MAYZENT 0.25MG STARTER PACK	85	<i>memantine 5mg tab</i>	84
		MAYZENT 0.25MG TAB	85	<i>memantine 7mg er cap</i>	84
		MAYZENT 1MG TAB	85	MENACTRA INJ	90
		MAYZENT 2MG TAB	85	MENQUADFI INJ	90
		MAYZENT STARTER PACK (7)	85	MENVEO INJ	90
		<i>meclizine 12.5mg tab</i>	24	<i>mercaptopurine 50mg tab</i>	33
				<i>meropenem 1000mg inj</i>	31
				<i>meropenem 500mg inj</i>	31

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>mesalamine 1000mg rectal supp</i>	68	<i>methylphenidate 20mg cr cap</i>	2	<i>methylprednisolone 8mg tab</i>	58
<i>mesalamine 375mg er cap</i>	68	<i>methylphenidate 20mg er tab</i>	2	<i>metoclopramide 10mg tab</i>	68
<i>mesalamine 66.7mg/ml enema</i>	68	<i>methylphenidate 20mg la cap</i>	2	<i>metoclopramide 1mg/ml oral soln</i>	68
MESNEX 400MG TAB	40	<i>methylphenidate 20mg tab</i>	2	<i>metoclopramide 5mg tab</i>	68
<i>metaxalone 800mg tab</i>	77	<i>methylphenidate 27mg er tab</i>	2	<i>metolazone 10mg tab</i>	64
<i>metformin 1000mg tab</i>	21	<i>methylphenidate 27mg sr tab</i>	2	<i>metolazone 2.5mg tab</i>	64
<i>metformin 500mg er tab</i>	21	<i>methylphenidate 2mg/ml oral soln</i>	2	<i>metolazone 5mg tab</i>	64
<i>metformin 500mg tab</i>	21	<i>methylphenidate 30mg cr cap</i>	2	<i>metoprolol succinate 100mg er tab</i>	49
<i>metformin 750mg er tab</i>	21	<i>methylphenidate 30mg la cap</i>	2	<i>metoprolol succinate 200mg er tab</i>	49
<i>metformin 850mg tab</i>	21	<i>methylphenidate 36mg er tab</i>	2	<i>metoprolol succinate 25mg er tab</i>	49
<i>methadone 10mg tab</i>	5	<i>methylphenidate 36mg sr tab</i>	2	<i>metoprolol succinate 50mg er tab</i>	49
<i>methadone 5mg tab</i>	5	<i>methylphenidate 40mg cr cap</i>	2	<i>metoprolol tartrate 100mg tab</i>	49
<i>methazolamide 25mg tab</i>	63	<i>methylphenidate 40mg la cap</i>	2	<i>metoprolol tartrate 100mg tab</i>	49
<i>methazolamide 50mg tab</i>	63	<i>methylphenidate 50mg cr cap</i>	2	<i>metoprolol tartrate 25mg tab</i>	49
<i>methenamine hippurate 1000mg tab</i>	32	<i>methylphenidate 54mg er tab</i>	2	<i>metoprolol tartrate 37.5mg tab</i>	49
<i>methimazole 10mg tab</i>	87	<i>methylphenidate 54mg sr tab</i>	2	<i>metoprolol tartrate 50mg tab</i>	49
<i>methimazole 5mg tab</i>	87	<i>methylphenidate 5mg tab</i>	2	<i>metoprolol tartrate 75mg tab</i>	49
<i>methocarbamol 500mg tab</i>	77	<i>methylphenidate 60mg cr cap</i>	2	<i>metronidazole 0.75% cream</i>	62
<i>methocarbamol 750mg tab</i>	78	<i>methylphenidate 10mg cr cap</i>	2	<i>metronidazole 0.75% gel</i>	62
<i>methotrexate 2.5mg tab</i>	33	<i>methylphenidate 10mg er tab</i>	2	<i>metronidazole 0.75% vaginal gel</i>	91
<i>methotrexate 25mg/ml inj</i>	33	<i>methylphenidate 10mg la cap</i>	2	<i>metronidazole 1% gel</i>	62
<i>methotrexate 50mg/2ml inj</i>	33	<i>methylphenidate 10mg tab</i>	2	<i>metronidazole 250mg tab</i>	30
METHOXSALEN 10MG CAP	60	<i>methylphenidate 18mg ER osmotic tab</i>	2	<i>metronidazole 500mg tab</i>	30
<i>methsuximide 300mg cap</i>	17	<i>methylphenidate 1mg/ml oral soln</i>	2	<i>metronidazole 5mg/ml inj</i>	30
<i>methylphenidate 10mg cr cap</i>	2			<i>metyrosine 250mg cap</i>	27
<i>methylphenidate 10mg er tab</i>	2	<i>methylprednisolone 16mg tab</i>	58	<i>mexiletine 150mg cap</i>	9
<i>methylphenidate 10mg la cap</i>	2	<i>methylprednisolone 32mg tab</i>	58	<i>mexiletine 200mg cap</i>	9
<i>methylphenidate 10mg tab</i>	2	<i>methylprednisolone 4mg pack</i>	58	<i>mexiletine 250mg cap</i>	9
<i>methylphenidate 18mg ER osmotic tab</i>	2	<i>methylprednisolone 4mg tab</i>	58	<i>mibelas 24 fe chewable 28 day pack</i>	56
<i>methylphenidate 1mg/ml oral soln</i>	2			<i>micafungin sodium 100mg inj</i>	24

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

ALPHABETICAL LISTING OF DRUGS

<i>micafungin sodium 50mg inj</i>	24	<i>mometasone furoate 0.1% cream</i>	61	MOUNJARO 2.5MG/0.5ML	21
<i>microgestin 1.5/30 21 day pack</i>	56	<i>mometasone furoate 0.1% lotion</i>	61	AUTO-INJECTOR	
<i>microgestin 1/20 21 day pack</i>	56	<i>mometasone furoate 0.1% ointment</i>	61	MOUNJARO 5MG/0.5ML	21
<i>microgestin 24 fe 28 day pack</i>	56	<i>montelukast 10mg tab</i>	10	AUTO-INJECTOR	
<i>microgestin fe 1.5/30 28 day pack</i>	56	<i>montelukast 4mg chew tab</i>	10	7.5MG/0.5ML	
<i>microgestin fe 1/20 28 day pack</i>	56	<i>montelukast 4mg granules</i>	10	AUTO-INJECTOR	
<i>midodrine 10mg tab</i>	92	<i>montelukast 5mg chew tab</i>	10	MOVANTIK 12.5MG TAB	69
<i>midodrine 2.5mg tab</i>	92	<i>morphine sulfate 100mg er tab</i>	6	MOVANTIK 25MG TAB	69
<i>midodrine 5mg tab</i>	92	<i>morphine sulfate 15mg er tab</i>	6	MOXIFLOXACIN 1.6MG/ML INJ	68
<i>mifepristone 300mg tab</i>	21	<i>morphine sulfate 200mg er tab</i>	6	<i>moxifloxacin 400mg tab</i>	68
MIGLITOL 100MG TAB	20	<i>morphine sulfate 20mg/ml oral soln</i>	6	MRESVIA 50MCG/0.5ML SYRINGE	91
<i>miglitol 25mg tab</i>	20	<i>morphine sulfate 2mg/ml oral soln</i>	6	MULTAQ 400MG TAB	9
MIGLITOL 50MG TAB	20	<i>morphine sulfate 30mg er tab</i>	6	<i>mupirocin 2% ointment</i>	59
<i>miglustat 100mg cap</i>	71	MORPHINE SULFATE 15MG TAB		<i>mycophenolate mofetil 200mg/ml susp</i>	76
<i>mili 28 day pack</i>	56	<i>morphine sulfate 200mg er tab</i>	6	<i>mycophenolate mofetil 250mg cap</i>	76
<i>mimvey pack</i>	66	<i>morphine sulfate 20mg/ml oral soln</i>	6	<i>mycophenolate mofetil 500mg tab</i>	76
<i>minocycline 100mg cap</i>	87	<i>morphine sulfate 2mg/ml oral soln</i>	6	<i>mycophenolic acid 180mg dr tab</i>	76
<i>minocycline 50mg cap</i>	87	<i>morphine sulfate 30mg er tab</i>	6	<i>mycophenolic acid 360mg dr tab</i>	76
<i>minocycline 75mg cap</i>	87	MORPHINE SULFATE 30MG TAB		MYRBETRIQ 25MG ER TAB	90
<i>minoxidil 10mg tab</i>	30	MORPHINE SULFATE 4MG/ML ORAL SOLN		MYRBETRIQ 50MG ER TAB	90
<i>minoxidil 2.5mg tab</i>	30	<i>morphine sulfate 60mg er tab</i>	6	<hr/>	
<i>mirtazapine 15mg odt</i>	17	MOUNJARO 10MG/0.5ML	21	N	
<i>mirtazapine 15mg tab</i>	17	AUTO-INJECTOR		<i>nabumetone 500mg tab</i>	4
<i>mirtazapine 30mg odt</i>	17	MOUNJARO 12.5MG/0.5ML	21	<i>nabumetone 750mg tab</i>	4
<i>mirtazapine 30mg tab</i>	17	AUTO-INJECTOR		<i>nadolol 20mg tab</i>	49
<i>mirtazapine 45mg odt</i>	17	MOUNJARO 15MG/0.5ML	21	<i>nadolol 40mg tab</i>	49
<i>mirtazapine 45mg tab</i>	17	AUTO-INJECTOR		<i>nadolol 80mg tab</i>	49
<i>mirtazapine 7.5mg tab</i>	17			<i>nafacillin 100mg/ml inj</i>	83
<i>misoprostol 100mcg tab</i>	89			<i>nafacillin 1gm inj</i>	83
<i>misoprostol 200mcg tab</i>	89			<i>nafacillin 2gm inj</i>	83
M-M-R II INJ	91			NALOXONE 0.4MG/ML CARTRIDGE	23
<i>modafinil 100mg tab</i>	2			<i>naloxone 0.4mg/ml inj</i>	23
<i>modafinil 200mg tab</i>	2				
<i>moexipril 15mg tab</i>	27				
<i>moexipril 7.5mg tab</i>	27				
MOLINDONE 10MG TAB	44				
MOLINDONE 25MG TAB	44				
MOLINDONE 5MG TAB	44				

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

NALOXONE 0.4MG/ML SYRINGE	23	<i>neomycin/polymyxin/bacitracin/hydrocortisone ophth 1% ointment</i>	80	<i>nikki 28 day pack</i>	56
<i>naloxone 1mg/ml syringe</i>	23	<i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>	80	<i>nilutamide 150mg tab</i>	34
<i>naloxone 40mg/ml nasal spray</i>	23	<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	81	<i>nimodipine 30mg cap</i>	51
<i>naltrexone 50mg tab</i>	23	<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	81	NINLARO 2.3MG CAP	37
<i>naproxen 250mg tab</i>	4	<i>neo-polycin hc ophth ointment</i>	80	NINLARO 3MG CAP	38
<i>naproxen 375mg dr tab</i>	4	<i>neo-polycin ophth ointment</i>	79	NINLARO 4MG CAP	38
<i>naproxen 375mg tab</i>	4	NERLYNX 40MG TAB	37	NITAZOXANIDE 500MG TAB	31
<i>naproxen 500mg tab</i>	4	NEVIRAPINE 10MG/ML SUSP	47	<i>nitisinone 10mg cap</i>	65
<i>naproxen sodium 275mg tab</i>	4	<i>nevirapine 200mg tab</i>	47	<i>nitisinone 20mg cap</i>	65
<i>naproxen sodium 550mg tab</i>	4	<i>nevirapine 400mg er tab</i>	47	<i>nitisinone 2mg cap</i>	65
<i>naratriptan 1mg tab</i>	74	NEXLETOL 180MG TAB	25	<i>nitisinone 5mg cap</i>	65
<i>naratriptan 2.5mg tab</i>	74	NEXLIZET 180-10MG TAB	25	NITRO-BID 2% OINTMENT	8
NATACYN 5% OPHTH SUSP	79	<i>niacin 1000mg er tab</i>	26	<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	32
<i>nateglinide 120mg tab</i>	22	<i>niacin 500mg er tab</i>	26	<i>nitrofurantoin macrocrystals 100mg cap</i>	32
<i>nateglinide 60mg tab</i>	22	<i>niacin 750mg er tab</i>	26	<i>nitrofurantoin macrocrystals 50mg cap</i>	32
NAYZILAM 5MG/0.1ML NASAL SPRAY	13	<i>nicardipine 20mg cap</i>	51	<i>nitroglycerin 0.1mg/hr patch</i>	8
<i>necon 0.5/35 28 day pack</i>	56	<i>nicardipine 30mg cap</i>	51	<i>nitroglycerin 0.2mg/hr patch</i>	8
NEEDLES INSULIN DISP. SAFETY	73	NICOTROL 10MG INH SOLN	86	<i>nitroglycerin 0.3mg sl tab</i>	8
NEFAZODONE 100MG TAB	18	NICOTROL 10MG/ML NASAL INHALER	86	<i>nitroglycerin 0.4% rectal ointment</i>	7
NEFAZODONE 150MG TAB	18	<i>nifedipine 30mg er tab</i>	51	<i>nitroglycerin 0.4mg sl tab</i>	8
NEFAZODONE 200MG TAB	18	<i>nifedipine 30mg osmotic er tab</i>	51	<i>nitroglycerin 0.4mg/act spray</i>	8
NEFAZODONE 250MG TAB	18	<i>nifedipine 60mg er tab</i>	51	<i>nitroglycerin 0.4mg/hr patch</i>	8
NEFAZODONE 50MG TAB	18	<i>nifedipine 60mg osmotic er tab</i>	51	<i>nitroglycerin 0.6mg sl tab</i>	8
<i>neomycin sulfate 500mg tab</i>	3	<i>nifedipine 90mg er tab</i>	51	<i>nitroglycerin 0.6mg/hr patch</i>	8
<i>neomycin/bacitracin/polymyxin ophth ointment 5mg-400unit-10000unit</i>	79	<i>nifedipine 90mg osmotic er tab</i>	51	NIVESTYM 300MCG/0.5ML SYRINGE	71
NEOMYCIN/POLYMYXIN B/GRAMICIDIN	79			NIVESTYM 300MCG/ML INJ	71
1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN				NIVESTYM 480MCG/0.8ML SYRINGE	71

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

NIVESTYM	71	NUTRILIPID	78	OFEV 100MG CAP	86
480MCG/1.6ML INJ		20GM/100ML INJ		OFEV 150MG CAP	86
<i>nora-be 28 day 0.35mg pack</i>	57	NUZYRA 150MG TAB	87	<i>ofloxacin 0.3% ophth soln</i>	79
NORDITROPIN	65	<i>nyamyc 100000unit/gm topical powder</i>	59	<i>ofloxacin 0.3% otic soln</i>	81
10MG/1.5ML PEN INJ		<i>nylia 1/35 28 day pack</i>	56	<i>ofloxacin 400mg tab</i>	68
NORDITROPIN	65	<i>nylia 7/7/7 28 day pack</i>	56	OGSIVEO 100MG TAB	38
15MG/1.5ML PEN INJ		<i>nymyo 28 day pack</i>	56	7-DAY PACK (14)	
NORDITROPIN	65	<i>nystatin 100000 unit/gm ointment</i>	59	OGSIVEO 150MG TAB	38
30MG/3ML PEN INJ		<i>nystatin 100000unit/gm topical powder</i>	59	7-DAY PACK (14)	
NORDITROPIN	65	<i>nystatin 100000unit/ml cream</i>	59	OGSIVEO 50MG TAB	38
5MG/1.5ML PEN INJ		<i>nystatin 100000unit/ml susp</i>	77	OJEMDA 100MG TAB	38
<i>norethindrone 0.35mg pack</i>	57	<i>nystatin 500000unit tab</i>	24	OJEMDA 100MG TAB	38
<i>norethindrone acetate 5mg tab</i>	83	<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	59	OJEMDA 100MG TAB	38
<i>nortrel 0.5/35 28 day pack</i>	56	<i>nystatin/triamcinolone acetonide</i>	59	PACK (400MG ONCE WEEKLY) (16)	
<i>nortrel 1/35 21 day pack</i>	56	<i>100000-0.1unit/gm-% cream</i>	59	OJEMDA 100MG TAB	38
<i>nortrel 1/35 28 day pack</i>	56	<i>nystop 100000unit/gm topical powder</i>	59	PACK (600MG ONCE WEEKLY) (24)	
<i>nortrel 7/7/7 28 day pack</i>	56	NYVEPRIA 6MG/0.6ML	71	OJEMDA 25MG/ML	38
<i>nortriptyline 10mg cap</i>	20	SYRINGE		POWDER FOR ORAL	
<i>nortriptyline 25mg cap</i>	20	O		SUSP	
<i>nortriptyline 2mg/ml oral soln</i>	20	OICALIVA 10MG TAB	68	OJJAARA 100MG TAB	38
<i>nortriptyline 50mg cap</i>	20	OICALIVA 5MG TAB	68	OJJAARA 150MG TAB	38
<i>nortriptyline 75mg cap</i>	20	<i>ocella 28 day pack</i>	56	OJJAARA 200MG TAB	38
NORVIR 100MG ORAL	47	OCTAGAM 1GM/20ML	81	<i>olanzapine 10mg inj</i>	43
POWDER		INJ		<i>olanzapine 10mg odt</i>	43
NOURIANZ 20MG TAB	40	OCTAGAM 2GM/20ML	81	<i>olanzapine 10mg tab</i>	43
NOURIANZ 40MG TAB	40	INJ		<i>olanzapine 15mg odt</i>	44
NUBEQA 300MG TAB	34	<i>octreotide 0.05mg/ml inj</i>	66	<i>olanzapine 15mg tab</i>	44
NUCALA 100MG INJ	9	<i>octreotide 0.1mg/ml inj</i>	66	<i>olanzapine 2.5mg tab</i>	44
NUCALA 100MG/ML	9	<i>octreotide 0.2mg/ml inj</i>	66	<i>olanzapine 20mg odt</i>	44
AUTO-INJECTOR		<i>octreotide 0.5mg/ml inj</i>	66	<i>olanzapine 20mg tab</i>	44
NUCALA 100MG/ML	9	<i>octreotide 1mg/ml inj</i>	66	<i>olanzapine 5mg odt</i>	44
SYRINGE		ODEFSEY 200-25-25MG	47	<i>olanzapine 5mg tab</i>	44
NUCALA 40MG/0.4ML	9	TAB		<i>olanzapine 7.5mg tab</i>	44
SYRINGE		ODOMZO 200MG CAP	34	<i>olmesartan medoxomil 20mg tab</i>	28
NUDEXTA 20-10MG	85			<i>olmesartan medoxomil 40mg tab</i>	28
CAP				<i>olmesartan medoxomil 5mg tab</i>	28
NUPLAZID 10MG TAB	41			<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	78
NUPLAZID 34MG CAP	41			OLUMIANT 1MG 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

OLUMIANT 2MG TAB	3	ORENITRAM ER TAB	52	OXACILLIN 40MG/ML	83
OLUMIANT 4MG TAB	3	MONTH 1 TITRATION		INJ	
<i>omega-3 acid ethyl esters</i>	25	KIT PACK		OXBRYTA 300MG TAB	71
<i>(usp) 1000mg cap</i>		ORENITRAM ER TAB	52	OXBRYTA 300MG TAB	71
<i>omeprazole 10mg dr cap</i>	89	MONTH 2 TITRATION		FOR ORAL SUSP	
<i>omeprazole 20mg dr cap</i>	89	KIT PACK		OXBRYTA 500MG TAB	71
<i>omeprazole 40mg dr cap</i>	89	ORENITRAM ER TAB	52	<i>oxcarbazepine 150mg tab</i>	15
OMNITROPE	65	MONTH 3 TITRATION		<i>oxcarbazepine 300mg tab</i>	15
10MG/1.5ML		KIT PACK		<i>oxcarbazepine 600mg tab</i>	15
CARTRIDGE		ORFADIN 4MG/ML SUSP	65	<i>oxcarbazepine 60mg/ml</i>	15
OMNITROPE 5.8MG INJ	65	ORGOVYX 120MG TAB	35	<i>susp</i>	
OMNITROPE	65	ORKAMBI 125-100MG	86	OXERVATE 0.002%	80
5MG/1.5ML CARTRIDGE		GRANULES		OPHTH SOLN	
<i>ondansetron 0.8mg/ml</i>	24	ORKAMBI 125-100MG	86	<i>oxybutynin chloride 10mg</i>	89
<i>oral soln</i>		TAB		<i>er tab</i>	
<i>ondansetron 4mg odt</i>	24	ORKAMBI 125-200MG	86	<i>oxybutynin chloride 15mg</i>	89
<i>ondansetron 4mg tab</i>	24	TAB		<i>er tab</i>	
<i>ondansetron 8mg odt</i>	24	ORKAMBI 188-150MG	86	<i>oxybutynin chloride</i>	89
<i>ondansetron 8mg tab</i>	24	GRANULES		<i>1mg/ml oral soln</i>	
ONUREG 200MG TAB	33	ORKAMBI 94-75MG	86	<i>oxybutynin chloride 5mg</i>	89
ONUREG 300MG TAB	33	GRANULES		<i>er tab</i>	
OPSUMIT 10MG TAB	52	ORLADEYO 110MG CAP	70	<i>oxybutynin chloride 5mg</i>	90
OPVEE 2.7MG/0.1ML	23	ORLADEYO 150MG CAP	70	<i>tab</i>	
NASAL SPRAY		<i>orphenadrine citrate</i>	78	<i>oxycodone 10mg tab</i>	6
ORENCIA 125MG/ML	5	<i>100mg er tab</i>		<i>oxycodone 15mg tab</i>	6
AUTO-INJECTOR		ORSERDU 345MG TAB	35	<i>oxycodone 1mg/ml oral</i>	6
ORENCIA 125MG/ML	5	ORSERDU 86MG TAB	35	<i>soln</i>	
SYRINGE		<i>oseltamivir 30mg cap</i>	48	<i>oxycodone 20mg tab</i>	6
ORENCIA 50MG/0.4ML	5	<i>oseltamivir 45mg cap</i>	49	<i>oxycodone 20mg/ml oral</i>	6
SYRINGE		<i>oseltamivir 6mg/ml susp</i>	49	<i>soln</i>	
ORENCIA 87.5MG/0.7ML	5	<i>oseltamivir 75mg cap</i>	49	<i>oxycodone 30mg tab</i>	6
SYRINGE		OSPHENA 60MG TAB	65	<i>oxycodone 5mg tab</i>	6
ORENITRAM 0.125MG	51	OTEZLA 20MG TAB	5	<i>oxycodone/acetaminophe</i>	6
ER TAB		OTEZLA 28-DAY	5	<i>n 10-325mg tab</i>	
ORENITRAM 0.25MG ER	52	STARTER PACK		<i>oxycodone/acetaminophe</i>	6
TAB		OTEZLA 30MG TAB	5	<i>n 2.5-325mg tab</i>	
ORENITRAM 1MG ER	52	OTEZLA TAB 28-DAY	5	<i>oxycodone/acetaminophe</i>	6
TAB		STARTER PACK (55)		<i>n 5-325mg tab</i>	
ORENITRAM 2.5MG ER	52	<i>oxacillin 100mg/ml inj</i>	83	OXYCODONE/ACETAMI	6
TAB		<i>oxacillin 1gm inj</i>	83	NOPHEN 5-325MG/5ML	
ORENITRAM 5MG ER	52	OXACILLIN 20MG/ML	83	<i>oxycodone/acetaminophe</i>	6
TAB		INJ		<i>n 7.5-325mg tab</i>	
		<i>oxacillin 2gm inj</i>	83	OZEMPIC 2.68MG/ML	21
				PEN 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

OZEMPIC 2MG/3ML	21	PAXLOVID	48	PENICILLIN V	82
PEN INJ		150MG/100MG TAB		POTASSIUM 25MG/ML	
OZEMPIC 4MG/3ML	21	PACK (20)		ORAL SOLN	
PEN INJ		PAXLOVID	48	<i>penicillin v potassium</i>	82
<hr/>					
P		150MG/100MG TAB		<i>500mg tab</i>	
<i>pacerone 200mg tab</i>	9	PACK (30)		PENICILLIN V	82
<i>pacerone 400mg tab</i>	9	<i>pazopanib 200mg tab</i>	38	POTASSIUM 50MG/ML	
<i>paliperidone 1.5mg er tab</i>	42	PEDIARIX SYRINGE	89	ORAL SOLN	
<i>paliperidone 3mg er tab</i>	42	PEDVAXHIB	90	PENTACEL	89
<i>paliperidone 6mg er tab</i>	42	7.5MCG/0.5ML INJ		96-30-68UNIT/ML INJ	
<i>paliperidone 9mg er tab</i>	42	<i>peg 3350 powder for oral</i>	72	<i>pentamidine isethionate</i>	30
PALYNZIQ 10MG/0.5ML	66	<i>soln (100gm Moviprep</i>		<i>300mg inj</i>	
SYRINGE		<i>equiv)</i>		<i>pentamidine isethionate</i>	30
PALYNZIQ 2.5MG/0.5ML	66	<i>peg 3350/electrolyte oral</i>	72	<i>50mg/ml inh soln</i>	
SYRINGE		<i>soln</i>		<i>pentoxifylline 400mg er</i>	70
PALYNZIQ 20MG/ML	66	<i>peg 3350/kcl/sodium</i>	72	<i>tab</i>	
SYRINGE		<i>bicarbonate/sodium</i>		PERINDOPRIL	27
PANRETIN 0.1% GEL	60	<i>chloride powder for oral</i>		ERBUMINE 2MG TAB	
<i>pantoprazole 20mg dr tab</i>	89	<i>soln</i>		<i>perindopril erbumine</i>	27
<i>pantoprazole 40mg dr tab</i>	89	PEGASYS	48	<i>4mg tab</i>	
PANZYGA 10GM/100ML	81	180MCG/0.5ML		PERINDOPRIL	27
INJ		SYRINGE		ERBUMINE 8MG TAB	
PANZYGA 1GM/10ML	81	PEGASYS 180MCG/ML	48	<i>periogard 0.12%</i>	77
INJ		INJ		<i>mouthwash</i>	
PANZYGA 2.5GM/25ML	81	PEMAZYRE 13.5MG TAB	38	<i>permethrin 5% cream</i>	63
INJ		PEMAZYRE 4.5MG TAB	38	<i>perphenazine 16mg tab</i>	45
PANZYGA 20GM/200ML	81	PEMAZYRE 9MG TAB	38	<i>perphenazine 2mg tab</i>	45
INJ		PENBRAYA INJ	90	<i>perphenazine 4mg tab</i>	45
PANZYGA 30GM/300ML	82	<i>penciclovir 1% cream</i>	60	<i>perphenazine 8mg tab</i>	45
INJ		<i>penicillamine 250mg tab</i>	75	PERSERIS 120MG	42
PANZYGA 5GM/50ML	82	<i>penicillin g potassium</i>	82	SYRINGE	
INJ		<i>1000000unit/ml inj</i>		PERSERIS 90MG	42
<i>paricalcitol 1mcg cap</i>	66	PENICILLIN G	82	SYRINGE	
<i>paricalcitol 2mcg cap</i>	66	POTASSIUM		PHEBURANE	66
<i>paricalcitol 4mcg cap</i>	66	40000UNIT/ML INJ		483MG/GM ORAL	
<i>paroxetine 10mg tab</i>	18	PENICILLIN G	82	PELLET	
<i>paroxetine 12.5mg er tab</i>	18	POTASSIUM		PHENELZINE 15MG TAB	17
<i>paroxetine 20mg tab</i>	18	60000UNIT/ML INJ		<i>phenobarbital 100mg tab</i>	72
<i>paroxetine 25mg er tab</i>	18	PENICILLIN G SODIUM	82	<i>phenobarbital 15mg tab</i>	72
<i>paroxetine 2mg/ml susp</i>	18	100000UNIT/ML INJ		<i>phenobarbital 16.2mg tab</i>	72
<i>paroxetine 30mg tab</i>	18	<i>penicillin v potassium</i>	82	<i>phenobarbital 30mg tab</i>	72
<i>paroxetine 37.5mg er tab</i>	18	<i>250mg tab</i>		<i>phenobarbital 32.4mg tab</i>	72
<i>paroxetine 40mg tab</i>	18			<i>phenobarbital 4mg/ml</i>	72
				<i>oral soln</i>	

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

ALPHABETICAL LISTING OF DRUGS

<i>phenobarbital 60mg tab</i>	72	PIQRAY 250MG DAILY	38	POTASSIUM CHLORIDE	75
<i>phenobarbital 64.8mg tab</i>	72	DOSE PACK		10MEQ/100ML INJ	
<i>phenobarbital 97.2mg tab</i>	72	PIQRAY 300MG DAILY	38	<i>potassium chloride</i>	75
<i>phenoxybenzamine 10mg cap</i>	27	DOSE PACK		<i>15meq micro er tab</i>	
<i>phenytoin 25mg/ml susp</i>	16	<i>pirfenidone 267mg cap</i>	86	<i>potassium chloride</i>	75
<i>phenytoin 50mg chew tab</i>	16	<i>pirfenidone 267mg tab</i>	86	<i>2.67meq/ml oral soln</i>	
<i>phenytoin sodium 100mg er cap</i>	16	<i>pirfenidone 801mg tab</i>	86	<i>potassium chloride</i>	75
<i>phenytoin sodium 200mg er cap</i>	16	<i>piroxicam 10mg cap</i>	4	<i>20meq er tab</i>	
<i>phenytoin sodium 300mg er cap</i>	17	<i>piroxicam 20mg cap</i>	4	<i>potassium chloride</i>	75
PHOSPHOLINE IODIDE	79	PLASMA-LYTE 148 INJ	75	<i>20meq micro er tab</i>	
0.125% OPHTH SOLN		PLASMA-LYTE A INJ	75	<i>potassium chloride</i>	75
PIFELTRO 100MG TAB	47	PLEGRIDY	85	<i>20meq powder for oral soln</i>	
<i>pilocarpine 1% ophth soln</i>	79	125MCG/0.5ML		POTASSIUM CHLORIDE	75
<i>pilocarpine 2% ophth soln</i>	79	AUTO-INJECTOR		20MEQ/100ML INJ	
<i>pilocarpine 4% ophth soln</i>	79	PLEGRIDY	85	<i>potassium chloride</i>	75
<i>pilocarpine 5mg tab</i>	77	125MCG/0.5ML		<i>2meq/ml (20ml) inj</i>	
<i>pilocarpine 7.5mg tab</i>	77	SYRINGE		<i>potassium chloride</i>	75
<i>pimecrolimus 1% cream</i>	62	<i>plenamine 15% inj</i>	79	<i>2meq/ml inj</i>	
PIMOZIDE 1MG TAB	86	PODOFILOX 0.5%	62	POTASSIUM CHLORIDE	75
PIMOZIDE 2MG TAB	86	TOPICAL SOLN		40MEQ/100ML INJ	
<i>pimtrea tab pack</i>	56	<i>polycin 0.5-10unit/mg ophth ointment</i>	80	<i>potassium chloride 8meq er cap</i>	75
<i>pindolol 10mg tab</i>	49	<i>polymyxin b 250000unit/ml inj</i>	32	<i>potassium chloride 8meq er tab</i>	75
<i>pindolol 5mg tab</i>	49	<i>polymyxin b/trimethoprim 10000 Unit/ML-0.1% ophth soln</i>	80	<i>potassium citrate 10meq er tab</i>	69
<i>pioglitazone 15mg tab</i>	22	POMALYST 1MG CAP	35	<i>potassium citrate 15meq er tab</i>	69
<i>pioglitazone 30mg tab</i>	22	POMALYST 2MG CAP	35	<i>potassium citrate 5meq er tab</i>	69
<i>pioglitazone 45mg tab</i>	22	POMALYST 3MG CAP	35	PRALUENT 150MG/ML	26
<i>piperacillin/tazobactam 2000-250mg inj</i>	82	POMALYST 4MG CAP	35	AUTO-INJECTOR	
<i>piperacillin/tazobactam 3000-375mg inj</i>	83	<i>portia 28 day pack</i>	56	PRALUENT 75MG/ML	26
<i>piperacillin/tazobactam 36-4.5gm inj</i>	83	<i>posaconazole 100mg dr tab</i>	25	AUTO-INJECTOR	
<i>piperacillin/tazobactam 4000-500mg inj</i>	83	<i>posaconazole 40mg/ml susp</i>	25	<i>pramipexole 0.125mg tab</i>	41
PIQRAY 200MG DAILY	38	<i>potassium chloride 1.33meq/ml oral soln</i>	75	<i>pramipexole 0.25mg tab</i>	41
DOSE PACK		<i>potassium chloride 10meq er cap</i>	75	<i>pramipexole 0.5mg tab</i>	41
		<i>potassium chloride 10meq er tab</i>	75	<i>pramipexole 0.75mg tab</i>	41
		<i>potassium chloride 10meq micro er tab</i>	75	<i>pramipexole 1.5mg tab</i>	41
				<i>pramipexole 1mg tab</i>	41
				<i>prasugrel 10mg tab</i>	70
				<i>prasugrel 5mg tab</i>	70

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>pravastatin sodium 10mg tab</i>	26	PREMARIN	91	<i>progesterone 100mg cap</i>	83
<i>pravastatin sodium 20mg tab</i>	26	0.625MG/GM VAGINAL		<i>progesterone 200mg cap</i>	83
<i>pravastatin sodium 40mg tab</i>	26	CREAM		PROGRAF 0.2MG	76
<i>pravastatin sodium 80mg tab</i>	26	PREMARIN 0.9MG TAB	67	GRANULES FOR ORAL	
<i>prazosin 1mg cap</i>	28	PREMARIN 1.25MG TAB	67	SUSP	
<i>prazosin 2mg cap</i>	28	PREMASOL 10% INJ	79	PROGRAF 1MG	76
<i>prazosin 5mg cap</i>	28	PREMPHASE 28 DAY	66	GRANULES FOR ORAL	
PREDNISOLONE 1%	80	PACK		SUSP	
OPHTH SOLN		PREMPRO 0.3/1.5MG 28	66	PROLASTIN 1000MG INJ	86
<i>prednisolone 1mg/ml oral soln</i>	58	DAY PACK		PROLENSA 0.07%	81
<i>prednisolone 3mg/ml oral soln</i>	58	PREMPRO 0.45/1.5MG	66	OPHTH SOLN	
PREDNISOLONE	80	28 DAY PACK		PROLIA 60MG/ML	64
ACETATE 1% OPTH		PREMPRO 0.625/2.5MG	66	SYRINGE	
SUSP		28 DAY PACK		PROMACTA 12.5MG	71
<i>prednisone 10mg tab</i>	58	PREMPRO 0.625/5MG	66	POWDER FOR ORAL	
<i>prednisone 1mg tab</i>	58	28 DAY PACK		SUSP	
PREDNISONE 1MG/ML	58	<i>prevalite 4gm powder for</i>	25	PROMACTA 12.5MG TAB	71
ORAL SOLN		<i>oral susp</i>		PROMACTA 25MG	71
<i>prednisone 2.5mg tab</i>	58	PREVYMIS 240MG TAB	48	POWDER FOR ORAL	
<i>prednisone 20mg tab</i>	58	PREVYMIS 480MG TAB	48	SUSP	
<i>prednisone 50mg tab</i>	58	PREZCOBIX 150-800MG	47	PROMACTA 25MG TAB	71
<i>prednisone 5mg tab</i>	58	TAB		PROMACTA 50MG TAB	71
<i>pregabalin 100mg cap</i>	15	PREZISTA 100MG/ML	47	PROMACTA 75MG TAB	71
<i>pregabalin 150mg cap</i>	15	SUSP		<i>promethazine 1.25mg/ml</i>	25
<i>pregabalin 200mg cap</i>	15	PREZISTA 150MG TAB	47	<i>oral soln</i>	
<i>pregabalin 20mg/ml oral soln</i>	15	PREZISTA 75MG TAB	47	<i>promethazine 12.5mg</i>	25
<i>pregabalin 225mg cap</i>	15	PRIFTIN 150MG TAB	32	<i>rectal supp</i>	
<i>pregabalin 25mg cap</i>	15	PRIMAQUINE	32	<i>promethazine 12.5mg tab</i>	25
<i>pregabalin 300mg cap</i>	15	PHOSPHATE 26.3MG		<i>promethazine 25mg rectal</i>	25
<i>pregabalin 50mg cap</i>	15	TAB		<i>supp</i>	
<i>pregabalin 75mg cap</i>	15	<i>primidone 250mg tab</i>	15	<i>promethazine 25mg tab</i>	25
PREHEVBRIO	91	<i>primidone 50mg tab</i>	15	<i>promethazine 50mg tab</i>	25
10MCG/ML INJ		PRIORIX INJ	91	<i>promethagan 25mg rectal</i>	25
PREMARIN 0.3MG TAB	67	PRIVIGEN 20GM/200ML	82	<i>supp</i>	
PREMARIN 0.45MG TAB	67	INJ		<i>propafenone 150mg tab</i>	9
PREMARIN 0.625MG	67	<i>probenecid 500mg tab</i>	70	<i>propafenone 225mg er</i>	9
TAB		<i>prochlorperazine 10mg</i>	45	<i>cap</i>	
		<i>tab</i>		<i>propafenone 225mg tab</i>	9
		<i>prochlorperazine 25mg</i>	45	<i>propafenone 300mg tab</i>	9
		<i>rectal supp</i>		<i>propafenone 325mg er</i>	9
		<i>prochlorperazine 5mg tab</i>	45	<i>cap</i>	
		<i>procto-med 2.5% cream</i>	7	<i>propafenone 425mg er</i>	9
		<i>proctosol 2.5% cream</i>	7	<i>cap</i>	
		<i>proctozone hc 2.5% cream</i>	7	<i>propranolol 10mg tab</i>	49

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>propranolol 120mg er cap</i>	49	QUADRACEL INJ	89	REBIF 22MCG/0.5ML	85
<i>propranolol 160mg er cap</i>	49	QUADRACEL INJ	89	AUTO-INJECTOR	
<i>propranolol 20mg tab</i>	49	QUADRACEL SYRINGE	89	REBIF 22MCG/0.5ML	85
<i>propranolol 40mg tab</i>	50	<i>quetiapine 100mg tab</i>	44	SYRINGE	
<i>propranolol 4mg/ml oral soln</i>	50	<i>quetiapine 150mg er tab</i>	44	REBIF 44MCG/0.5ML	85
<i>propranolol 60mg er cap</i>	50	<i>quetiapine 200mg er tab</i>	44	AUTO-INJECTOR	
<i>propranolol 60mg tab</i>	50	<i>quetiapine 200mg tab</i>	44	REBIF 44MCG/0.5ML	85
<i>propranolol 80mg er cap</i>	50	<i>quetiapine 25mg tab</i>	44	SYRINGE	
<i>propranolol 80mg tab</i>	50	<i>quetiapine 300mg er tab</i>	44	REBIF REBIDOSE PACK	85
PROPRANOLOL	50	<i>quetiapine 300mg tab</i>	44	REBIF TITRATION PACK	85
8MG/ML ORAL SOLN	50	<i>quetiapine 400mg er tab</i>	44	<i>reclipsen 28 day pack</i>	56
<i>propylthiouracil 50mg tab</i>	87	<i>quetiapine 400mg tab</i>	44	RECOMBIVAX	91
PROQUAD INJ	91	<i>quetiapine 50mg er tab</i>	44	10MCG/ML INJ	
PROSOL 20% INJ	79	<i>quetiapine 50mg tab</i>	44	RECOMBIVAX	91
<i>protriptyline 10mg tab</i>	20	<i>quinapril 10mg tab</i>	27	10MCG/ML SYRINGE	
<i>protriptyline 5mg tab</i>	20	<i>quinapril 20mg tab</i>	27	RECOMBIVAX	91
PULMOZYME 1MG/ML INH SOLN	86	<i>quinapril 40mg tab</i>	27	40MCG/ML INJ	
PURIXAN	33	<i>quinapril 5mg tab</i>	27	RECOMBIVAX	91
2000MG/100ML SUSP	33	QUINIDINE SULFATE	9	5MCG/0.5ML INJ	
<i>pyrazinamide 500mg tab</i>	32	200MG TAB		RECOMBIVAX	91
<i>pyridostigmine bromide 180mg er tab</i>	32	QUINIDINE SULFATE	9	5MCG/0.5ML SYRINGE	
<i>pyridostigmine bromide 60mg tab</i>	32	300MG TAB		REGRANEX 0.01% GEL	63
PYRUKYND 20MG TAB (4-WEEK PACK)	70	<i>quinine sulfate 324mg cap</i>	32	RELENZA 5MG/BLISTER	49
PYRUKYND 20MG/50MG TAB TAPER PACK	70	QVAR 40MCG	10	INHALER	
PYRUKYND 50MG TAB (4-WEEK PACK)	70	REDIHALER		RELISTOR 12MG/0.6ML INJ	69
PYRUKYND 5MG TAB (4-WEEK PACK)	71	QVAR 80MCG	10	RELISTOR 12MG/0.6ML SYRINGE	69
PYRUKYND 5MG TAB TAPER PACK	71	REDIHALER		RELISTOR 8MG/0.4ML SYRINGE	69
PYRUKYND 5MG/20MG TAB TAPER PACK	71	R		RELTONE 200MG CAP	68
Q		RABAVERT 2.5UNIT/ML INJ	91	RELTONE 400MG CAP	68
QINLOCK 50MG TAB	38	RADICAVA 105MG/5ML SUSP	78	<i>repaglinide 0.5mg tab</i>	23
		<i>raloxifene 60mg tab</i>	65	<i>repaglinide 1mg tab</i>	23
		<i>ramelteon 8mg tab</i>	72	<i>repaglinide 2mg tab</i>	23
		<i>ramipril 1.25mg cap</i>	27	REPATHA 140MG/ML	26
		<i>ramipril 10mg cap</i>	27	AUTO-INJECTOR	
		<i>ramipril 2.5mg cap</i>	27	REPATHA 140MG/ML SYRINGE	26
		<i>ramipril 5mg cap</i>	27	REPATHA 420MG/3.5ML CARTRIDGE	26
		<i>ranolazine 1000mg er tab</i>	7	RETACRIT	71
		<i>ranolazine 500mg er tab</i>	7	10000UNIT/ML INJ	
		<i>rasagiline 0.5mg tab</i>	41		
		<i>rasagiline 1mg tab</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

RETACRIT 20000UNIT/2ML INJ	71	<i>rifampin 600mg inj</i>	32	<i>rivastigmine 4.6mg/24hr patch</i>	84
RETACRIT 20000UNIT/ML INJ	71	<i>riluzole 50mg tab</i>	78	<i>rivastigmine 6mg cap</i>	84
RETACRIT 2000UNIT/ML INJ	71	RIMANTADINE 100MG TAB	49	<i>rivastigmine 9.5mg/24hr patch</i>	84
RETACRIT 3000UNIT/ML INJ	71	RINVOQ 15MG ER TAB	3	<i>rivelsa 91 day pack</i>	56
RETACRIT 40000UNIT/ML INJ	71	RINVOQ 30MG ER TAB	3	<i>rizatriptan 10mg odt</i>	74
RETACRIT 4000UNIT/ML INJ	71	RINVOQ 45MG ER TAB	3	<i>rizatriptan 10mg tab</i>	74
RETEVMO 120MG TAB	38	<i>risedronate sodium 150mg tab</i>	64	<i>rizatriptan 5mg odt</i>	74
RETEVMO 160MG TAB	38	<i>risedronate sodium 30mg tab</i>	64	<i>rizatriptan 5mg tab</i>	74
RETEVMO 40MG CAP	38	<i>risedronate sodium 35mg tab</i>	64	ROCKLATAN	80
RETEVMO 40MG TAB	38	<i>risedronate sodium 35mg tab (12) pack</i>	64	0.05-0.2MG/ML OPHTH SOLN	
RETEVMO 80MG CAP	38	<i>risedronate sodium 35mg tab (4) pack</i>	64	<i>roflumilast 0.5mg tab</i>	10
RETEVMO 80MG TAB	38	<i>risedronate sodium 5mg tab</i>	64	<i>roflumilast 250mcg tab</i>	10
REVLIMID 10MG CAP	76	RISPERIDONE 0.25MG ODT	42	<i>ropinirole 0.25mg tab</i>	41
REVLIMID 15MG CAP	76	<i>risperidone 0.25mg tab</i>	42	<i>ropinirole 0.5mg tab</i>	41
REVLIMID 2.5MG CAP	76	<i>risperidone 0.5mg odt</i>	42	<i>ropinirole 1mg tab</i>	41
REVLIMID 20MG CAP	76	<i>risperidone 0.5mg tab</i>	42	<i>ropinirole 2mg tab</i>	41
REVLIMID 5MG CAP	76	<i>risperidone 12.5mg inj</i>	42	<i>ropinirole 3mg tab</i>	41
REXULTI 0.25MG TAB	45	<i>risperidone 1mg odt</i>	42	<i>ropinirole 4mg tab</i>	41
REXULTI 0.5MG TAB	45	<i>risperidone 1mg tab</i>	42	<i>ropinirole 5mg tab</i>	41
REXULTI 1MG TAB	45	<i>risperidone 1mg/ml oral soln</i>	42	<i>rosuvastatin calcium 10mg tab</i>	26
REXULTI 2MG TAB	45	<i>risperidone 25mg inj</i>	42	<i>rosuvastatin calcium 20mg tab</i>	26
REXULTI 3MG TAB	45	<i>risperidone 2mg odt</i>	42	<i>rosuvastatin calcium 40mg tab</i>	26
REXULTI 4MG TAB	45	<i>risperidone 2mg tab</i>	42	<i>rosuvastatin calcium 5mg tab</i>	26
REYATAZ 50MG ORAL POWDER	47	<i>risperidone 37.5mg inj</i>	42	ROTARIX SUSP	91
REYVOW 100MG TAB	74	<i>risperidone 3mg odt</i>	43	ROTARIX SUSP	91
REYVOW 50MG TAB	74	<i>risperidone 3mg tab</i>	43	ROTATEQ SUSP	91
REZLIDHIA 150MG CAP	38	<i>risperidone 4mg odt</i>	43	<i>roweepra 500mg tab</i>	15
REZUROCK 200MG TAB	76	<i>risperidone 4mg tab</i>	43	ROZLYTREK 100MG CAP	38
RHOPRESSA 0.02% OPHTH SOLN	80	<i>risperidone 50mg inj</i>	43	ROZLYTREK 200MG CAP	38
RIBAVIRIN 200MG CAP	48	<i>ritonavir 100mg tab</i>	47	ROZLYTREK 50MG ORAL PELLETT	38
RIBAVIRIN 200MG TAB	48	<i>rivastigmine 1.5mg cap</i>	84	RUBRACA 200MG TAB	38
RIDAURA 3MG CAP	3	<i>rivastigmine 13.3mg/24hr patch</i>	84	RUBRACA 250MG TAB	38
<i>rifabutin 150mg cap</i>	32	<i>rivastigmine 3mg cap</i>	84	RUBRACA 300MG TAB	38
<i>rifampin 150mg cap</i>	32	<i>rivastigmine 4.5mg cap</i>	84		
<i>rifampin 300mg cap</i>	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

RUCONEST 2100UNIT INJ	70	SELZENTRY 25MG TAB	47	<i>sirolimus 1mg tab</i>	77
<i>rufinamide 200mg tab</i>	15	SELZENTRY 75MG TAB	47	<i>sirolimus 1mg/ml oral soln</i>	77
<i>rufinamide 400mg tab</i>	15	SEREVENT	11	<i>sirolimus 2mg tab</i>	77
<i>rufinamide 40mg/ml susp</i>	15	50MCG/DOSE INHALER		SIRTURO 100MG TAB	32
RUKOBIA 600MG ER TAB	47	<i>sertraline 100mg tab</i>	18	SIRTURO 20MG TAB	33
RYBELSUS 14MG TAB	22	<i>sertraline 20mg/ml oral soln</i>	18	SIVEXTRO 200MG INJ	32
RYBELSUS 3MG TAB	22	<i>sertraline 25mg tab</i>	18	SIVEXTRO 200MG TAB	32
RYBELSUS 7MG TAB	22	<i>sertraline 50mg tab</i>	18	SKYRIZI 150MG/ML	60
RYDAPT 25MG CAP	38	<i>setlakin 91 day pack</i>	56	AUTO-INJECTOR	
S		<i>sevelamer carbonate 2400mg powder for oral susp</i>	69	SKYRIZI 150MG/ML	60
<i>sajazir 30mg/3ml syringe</i>	70	<i>sevelamer carbonate 800mg powder for oral susp</i>	69	SYRINGE	
<i>salmon calcitonin 200unit/act nasal spray</i>	64	<i>sevelamer carbonate 800mg tab</i>	69	SKYRIZI 180MG/1.2ML	68
SANTYL 250UNIT/GM OINTMENT	62	<i>sharobel 0.35mg 28 day pack</i>	57	CARTRIDGE	
<i>sapropterin 100mg powder for oral soln</i>	66	SHINGRIX	91	SKYRIZI 360MG/2.4ML	68
<i>sapropterin 100mg tab</i>	66	50MCG/0.5ML INJ		CARTRIDGE	
<i>sapropterin 500mg powder for oral soln</i>	66	SIGNIFOR 0.3MG/ML INJ	66	SKYTROFA 11MG	65
SAVELLA 100MG TAB	84	SIGNIFOR 0.6MG/ML INJ	66	CARTRIDGE	
SAVELLA 12.5MG TAB	84	SIGNIFOR 0.9MG/ML INJ	66	SKYTROFA 13.3MG	65
SAVELLA 25MG TAB	84	<i>sildenafil 20mg tab</i>	52	CARTRIDGE	
SAVELLA 50MG TAB	84	<i>silver sulfadiazine 1% cream</i>	60	SKYTROFA 3.6MG	65
SAVELLA TAB 4-WEEK TITRATION PACK (55)	84	SIMBRINZA 0.2-1% OPHTH SUSP	79	CARTRIDGE	
SCSEMBLIX 100MG TAB	38	SIMPONI 100MG/ML	3	SKYTROFA 3MG	65
SCSEMBLIX 20MG TAB	38	AUTO-INJECTOR		CARTRIDGE	
SCSEMBLIX 40MG TAB	38	SIMPONI 100MG/ML	3	SKYTROFA 4.3MG	65
<i>scopolamine 1mg/72hr patch</i>	24	SYRINGE		CARTRIDGE	
SECUADO 3.8MG/24HR PATCH	44	SIMPONI 50MG/0.5ML	3	SKYTROFA 5.2MG	65
SECUADO 5.7MG/24HR PATCH	44	AUTO-INJECTOR		CARTRIDGE	
SECUADO 7.6MG/24HR PATCH	44	SIMPONI 50MG/0.5ML	3	SKYTROFA 6.3MG	65
<i>selegiline 5mg cap</i>	41	SYRINGE		SKYTROFA 7.6MG	65
<i>selenium sulfide 2.5% shampoo</i>	60	<i>simvastatin 10mg tab</i>	26	CARTRIDGE	
SELZENTRY 20MG/ML ORAL SOLN	47	<i>simvastatin 20mg tab</i>	26	SKYTROFA 9.1MG	65
		<i>simvastatin 40mg tab</i>	26	CARTRIDGE	
		<i>simvastatin 5mg tab</i>	26	SLYND 4MG TAB PACK	57
		<i>simvastatin 80mg tab</i>	26	<i>sodium chloride 0.45% inj</i>	75
		<i>sirolimus 0.5mg tab</i>	76	<i>sodium chloride 0.9% inj</i>	75
				<i>sodium chloride 0.9%</i>	69
				<i>irrigation soln</i>	
				<i>sodium chloride 3% inj</i>	75
				<i>sodium chloride 50mg/ml inj</i>	75

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

SODIUM OXYBATE 500MG/ML ORAL SOLN	83	SPRITAM 500MG TAB FOR ORAL SUSP	15	<i>sulfasalazine 500mg dr tab</i>	68
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	77	SPRITAM 750MG TAB FOR ORAL SUSP <i>sps 15gm/60ml susp</i>	15 77	<i>sulfasalazine 500mg tab</i>	68
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6gm/177ml prep kit</i>	72	<i>sronyx 28 day pack ssd 1% cream</i>	56 60	<i>sulindac 150mg tab</i>	5
SOFOSBUVIR/VELPATAS VIR 400-100MG TAB	48	STELARA 45MG/0.5ML SYRINGE	60	<i>sulindac 200mg tab</i>	5
SOGROYA 10MG/1.5ML PEN INJ	65	STELARA 90MG/ML SYRINGE	60	<i>sumatriptan 100mg tab</i>	74
SOGROYA 15MG/1.5ML PEN INJ	65	STIOLTO 2.5-2.5MCG/ACT INH	11	<i>sumatriptan 25mg tab</i>	74
SOGROYA 5MG/1.5ML PEN INJ	65	STIVARGA 40MG TAB	38	<i>sumatriptan 4mg/0.5ml cartridge</i>	74
SOLTAMOX 10MG/5ML ORAL SOLN	35	STRIBILD 150-150-200-300MG TAB	47	<i>sumatriptan 50mg tab</i>	74
SOMAVERT 10MG INJ	64	<i>subvenite 100mg tab</i>	15	<i>sumatriptan 6mg/0.5ml auto-injector</i>	74
SOMAVERT 15MG INJ	64	<i>subvenite 150mg tab</i>	16	<i>sumatriptan 6mg/0.5ml cartridge</i>	74
SOMAVERT 20MG INJ	64	<i>subvenite 200mg tab</i>	16	<i>sumatriptan 6mg/0.5ml cartridge</i>	74
SOMAVERT 25MG INJ	64	<i>subvenite 25mg tab</i>	16	<i>sumatriptan 6mg/0.5ml inj</i>	74
SOMAVERT 30MG INJ	64	SUCRAID 8500UNIT/ML ORAL SOLN	63	<i>sunitinib 12.5mg cap</i>	38
<i>sorafenib 200mg tab</i>	38	<i>sucrafate 1000mg tab</i>	89	<i>sunitinib 25mg cap</i>	38
<i>sorine 120mg tab</i>	50	<i>sucrafate 100mg/ml susp</i>	89	<i>sunitinib 37.5mg cap</i>	38
<i>sorine 160mg tab</i>	50	SUFLAVE SOLN PACK	72	<i>sunitinib 50mg cap</i>	38
<i>sotalol 120mg tab</i>	50	<i>sulfacetamide sodium 10% lotion</i>	59	SUNLENCA 300MG TAB 4-TABLET PACK	47
<i>sotalol 160mg tab</i>	50	<i>sulfacetamide sodium 10% ophth soln</i>	80	SUNLENCA 300MG TAB 5-TABLET PACK	47
<i>sotalol 240mg tab</i>	50	SULFACETAMIDE/PRED NISOLONE 10-0.25% OPHTH SOLN	80	SUNOSI 150MG TAB	1
<i>sotalol 80mg tab</i>	50	<i>sulfadiazine 500mg tab</i>	87	SUNOSI 75MG TAB	1
<i>sotalol af 120mg tab</i>	50	<i>sulfamethoxazole/trimeth oprim 200-40mg/5ml susp</i>	31	<i>syeda 28 day pack</i>	56
<i>sotalol af 160mg tab</i>	50	<i>sulfamethoxazole/trimeth oprim 400-80mg tab</i>	31	SYMDEKO	86
<i>sotalol af 80mg tab</i>	50	<i>sulfamethoxazole/trimeth oprim 800-160mg tab</i>	31	50-75MG/75MG PACK	
SPIRIVA RESPIMAT 1.25MCG/ACT INH	10	SULFAMYLON 85MG/GM CREAM	60	SYMDEKO TAB 4-WEEK PACK	86
<i>spironolactone 100mg tab</i>	64			SYMPAZAN 10MG ORAL FILM	13
<i>spironolactone 25mg tab</i>	64			SYMPAZAN 20MG ORAL FILM	13
<i>spironolactone 50mg tab</i>	64			SYMPAZAN 5MG ORAL FILM	13
<i>sprintec 28 day pack</i>	56			SYMPROIC 0.2MG TAB	69
SPRITAM 1000MG TAB FOR ORAL SUSP	15			SYMTUZA	47
SPRITAM 250MG TAB FOR ORAL SUSP	15			150-800-200-10MG TAB	
				SYNAREL 2MG/ML NASAL INHALER	65
				SYNJARDY 10-1000MG ER 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

SYNJARDY 12.5-1000MG ER TAB	20	TALTZ 80MG/ML SYRINGE	60	<i>terbutaline sulfate 2.5mg tab</i>	11
SYNJARDY 12.5-1000MG TAB	20	TALZENNA 0.1MG CAP	39	<i>terbutaline sulfate 5mg tab</i>	11
SYNJARDY 12.5-500MG TAB	20	TALZENNA 0.25MG CAP	39	<i>terconazole 0.4% vaginal cream</i>	91
SYNJARDY 25-1000MG ER TAB	20	TALZENNA 0.35MG CAP	39	<i>terconazole 0.8% vaginal cream</i>	91
SYNJARDY 5-1000MG ER TAB	21	TALZENNA 0.5MG CAP	39	<i>terconazole 80mg vaginal insert</i>	91
SYNJARDY 5-1000MG TAB	21	TALZENNA 0.75MG CAP	39	<i>teriflunomide 14mg tab</i>	85
SYNJARDY 5-500MG TAB	21	TALZENNA 1MG CAP	39	<i>teriflunomide 7mg tab</i>	85
T		<i>tamoxifen 10mg tab</i>	35	TERIPARATIDE	64
TABLOID 40MG TAB	33	<i>tamoxifen 20mg tab</i>	35	0.02MG/ACT PEN INJ	
TABRECTA 150MG TAB	39	<i>tamsulosin 0.4mg cap</i>	69	<i>testosterone 1%</i>	7
TABRECTA 200MG TAB	39	<i>tarina 24 fe 1/20 28 day pack</i>	56	<i>(12.5mg/act) gel pump</i>	
<i>tacrolimus 0.03% ointment</i>	62	<i>tarina fe 1/20 28 day pack</i>	56	<i>testosterone 1% (25mg) gel packet</i>	7
<i>tacrolimus 0.1% ointment</i>	62	TASIGNA 150MG CAP	39	<i>testosterone 1% (50mg) gel packet</i>	7
<i>tacrolimus 0.5mg cap</i>	77	TASIGNA 200MG CAP	39	<i>testosterone 1.62%</i>	7
<i>tacrolimus 1mg cap</i>	77	TASIGNA 50MG CAP	39	<i>(1.25gm) gel packet</i>	
<i>tacrolimus 5mg cap</i>	77	<i>tasimelteon 20mg cap</i>	72	<i>testosterone 1.62%</i>	7
<i>tadalafil 20mg tab</i>	52	<i>tazarotene 0.1% cream</i>	60	<i>(2.5gm) gel packet</i>	
TAFINLAR 10MG TAB	39	<i>tazicef 1gm inj</i>	54	<i>testosterone 1.62%</i>	7
FOR ORAL SUSP		<i>tazicef 2gm inj</i>	54	<i>(20.25mg/act) gel pump</i>	
TAFINLAR 50MG CAP	39	TAZICEF 6GM INJ	54	<i>testosterone 30mg/act</i>	7
TAFINLAR 75MG CAP	39	TAZVERIK 200MG TAB	39	<i>topical soln</i>	
<i>tafluprost 0.0015% ophth soln</i>	81	TDVAX 4-4UNIT/ML INJ	89	<i>testosterone cypionate 100mg/ml inj</i>	7
TAGRISSO 40MG TAB	34	TEFLARO 400MG INJ	54	<i>testosterone cypionate 200mg/ml (1ml) inj</i>	7
TAGRISSO 80MG TAB	34	TEFLARO 600MG INJ	54	<i>testosterone cypionate 200mg/ml inj</i>	7
TAKHZYRO 300MG/2ML INJ	70	<i>telmisartan 20mg tab</i>	28	TESTOSTERONE	7
TAKHZYRO 300MG/2ML SYRINGE	70	<i>telmisartan 40mg tab</i>	28	ENANTHATE 200MG/ML INJ	
TALTZ 20MG/0.25ML SYRINGE	60	<i>telmisartan 80mg tab</i>	28	<i>tetrabenazine 12.5mg tab</i>	85
TALTZ 40MG/0.5ML SYRINGE	60	<i>temazepam 15mg cap</i>	72	<i>tetrabenazine 25mg tab</i>	85
TALTZ 80MG/ML AUTO-INJECTOR	60	<i>temazepam 30mg cap</i>	72	<i>tetracycline 250mg cap</i>	87
		TENIVAC 4-10UNIT/ML INJ	89	<i>tetracycline 500mg cap</i>	87
		TENIVAC 4-10UNIT/ML SYRINGE	89	THALOMID 100MG CAP	76
		<i>tenofovir disoproxil fumarate 300mg tab</i>	47	THALOMID 150MG CAP	76
		TEPMETKO 225MG TAB	39	THALOMID 200MG CAP	76
		<i>terazosin 10mg cap</i>	28		
		<i>terazosin 1mg cap</i>	28		
		<i>terazosin 2mg cap</i>	28		
		<i>terazosin 5mg cap</i>	28		
		<i>terbinafine 250mg tab</i>	24		

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

ALPHABETICAL LISTING OF DRUGS

THALOMID 50MG CAP	76	<i>timolol 0.5% ophth soln</i>	79	<i>torsemid 10mg tab</i>	64
THEOPHYLLINE 100MG ER TAB	12	<i>(preservative-free)</i>		<i>torsemid 20mg tab</i>	64
THEOPHYLLINE 200MG ER TAB	12	<i>timolol 10mg tab</i>	50	<i>torsemid 5mg tab</i>	64
<i>theophylline 300mg er tab</i>	12	<i>timolol 5mg tab</i>	50	TOUJEO 300UNIT/ML PEN INJ	22
<i>theophylline 400mg er tab</i>	12	<i>tinidazole 250mg tab</i>	30	TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	22
<i>theophylline 450mg er tab</i>	12	<i>tinidazole 500mg tab</i>	30	TPN ELECTROLYTES INJ	75
<i>theophylline 600mg er tab</i>	12	<i>tiopronin 100mg tab</i>	70	TRACLEER 32MG TAB FOR ORAL SUSP	52
<i>thioridazine 100mg tab</i>	45	TIVICAY 10MG TAB	47	<i>tramadol 100mg er tab</i>	6
<i>thioridazine 10mg tab</i>	45	TIVICAY 25MG TAB	47	<i>tramadol 200mg er tab</i>	6
<i>thioridazine 25mg tab</i>	45	TIVICAY 50MG TAB	47	<i>tramadol 300mg er tab</i>	6
<i>thioridazine 50mg tab</i>	45	TIVICAY 5MG TAB FOR ORAL SUSP	47	<i>tramadol 50mg tab</i>	6
<i>thiothixene 10mg cap</i>	45	<i>tizanidine 2mg tab</i>	78	<i>tramadol/acetaminophen 37.5-325mg tab</i>	6
<i>thiothixene 1mg cap</i>	45	<i>tizanidine 4mg tab</i>	78	<i>trandolapril 1mg tab</i>	27
<i>thiothixene 2mg cap</i>	46	TOBRADEX 0.1-0.3% OPTH OINTMENT	80	<i>trandolapril 2mg tab</i>	27
<i>thiothixene 5mg cap</i>	46	<i>tobramycin 0.3% ophth soln</i>	80	<i>trandolapril 4mg tab</i>	27
<i>tiadylt 120mg er cap</i>	51	TOBRAMYCIN 10MG/ML INJ	3	<i>tranexamic acid 650mg tab</i>	71
<i>tiadylt 180mg er cap</i>	51	<i>tobramycin 40mg/ml inj</i>	3	<i>tranylcypramine 10mg tab</i>	17
<i>tiadylt 240mg er cap</i>	51	<i>tobramycin 60mg/ml inh soln</i>	3	TRAVASOL 10% INJ	79
<i>tiadylt 300mg er cap</i>	51	<i>tolcapone 100mg tab</i>	40	<i>travoprost 0.004% ophth soln</i>	81
<i>tiadylt 360mg er cap</i>	51	<i>tolterodine tartrate 1mg tab</i>	90	<i>trazodone 100mg tab</i>	18
<i>tiadylt 420mg er cap</i>	51	<i>tolterodine tartrate 2mg er cap</i>	90	<i>trazodone 150mg tab</i>	18
<i>tiagabine 12mg tab</i>	16	<i>tolterodine tartrate 2mg tab</i>	90	<i>trazodone 50mg tab</i>	18
<i>tiagabine 16mg tab</i>	16	<i>tolterodine tartrate 4mg er cap</i>	90	TRECTOR 250MG TAB	33
<i>tiagabine 2mg tab</i>	16	<i>topiramate 100mg tab</i>	16	TRELEGY ELLIPTA 100-62.5-25MCG INHALER	11
<i>tiagabine 4mg tab</i>	16	<i>topiramate 15mg cap</i>	16	TRELEGY ELLIPTA 200-62.5-25MCG INHALER	11
TIBSOVO 250MG TAB	39	<i>topiramate 200mg tab</i>	16	TRELSTAR 11.25MG INJ	35
TICOVAC 1.2MCG/0.25ML SYRINGE	91	<i>topiramate 25mg cap</i>	16	TRELSTAR 22.5MG INJ	35
TICOVAC 2.4MCG/0.5ML SYRINGE	91	<i>topiramate 25mg tab</i>	16	TRELSTAR 3.75MG INJ	35
<i>tigecycline 50mg inj</i>	87	<i>topiramate 50mg tab</i>	16	TREMFYA 100MG/ML AUTO-INJECTOR	60
<i>tilia fe pack</i>	56	<i>toemifene 60mg tab</i>	35	TREMFYA 100MG/ML SYRINGE	60
<i>timolol 0.25% ophth gel</i>	79	<i>torpenz 10mg tab</i>	39		
<i>timolol 0.25% ophth soln</i>	79	<i>torpenz 2.5mg tab</i>	39		
<i>timolol 0.5% ophth gel</i>	79	<i>torpenz 5mg tab</i>	39		
<i>timolol 0.5% ophth soln</i>	79	<i>torpenz 7.5mg tab</i>	39		
		<i>torsemid 100mg tab</i>	63		

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

TRESIBA 100UNIT/ML INJ	22	<i>trihexyphenidyl 5mg tab</i>	40	TRULICITY	22
TRESIBA 100UNIT/ML PEN INJ	22	TRIKAFTA	86	0.75MG/0.5ML	
TRESIBA 200UNIT/ML PEN INJ	22	100-50-75MG/150MG PACK		AUTO-INJECTOR	
<i>tretinoin 0.01% gel</i>	59	TRIKAFTA	86	TRULICITY	22
<i>tretinoin 0.025% cream</i>	59	100-50-75MG/75MG GRANULES PACK		1.5MG/0.5ML	
<i>tretinoin 0.025% gel</i>	59	TRIKAFTA	86	AUTO-INJECTOR	
<i>tretinoin 0.05% cream</i>	59	50-37.5-25MG/75MG TAB PACK		TRULICITY	22
<i>tretinoin 0.1% cream</i>	59	TRIKAFTA	86	4.5MG/0.5ML	
<i>tretinoin 10mg cap</i>	40	80-40-60MG/59.5MG GRANULES PACK		AUTO-INJECTOR	
<i>triamcinolone acetone 0.025% cream</i>	61	<i>tri-legest 28 day pack</i>	56	TRUMENBA SYRINGE	90
<i>triamcinolone acetone 0.025% lotion</i>	61	<i>tri-lo- estarylla 28 day pack</i>	57	TRUQAP 160MG TAB	39
<i>triamcinolone acetone 0.025% ointment</i>	61	<i>tri-lo-sprintec 28 day pack</i>	57	TRUQAP 200MG TAB	39
<i>triamcinolone acetone 0.1% cream</i>	61	<i>trimethoprim 100mg tab</i>	31	TUKYSA 150MG TAB	33
<i>triamcinolone acetone 0.1% lotion</i>	62	<i>tri-mili 28 day pack</i>	57	TUKYSA 50MG TAB	33
<i>triamcinolone acetone 0.1% ointment</i>	62	<i>trimipramine 100mg cap</i>	20	TURALIO 125MG CAP	39
<i>triamcinolone acetone 0.1% oral paste</i>	77	<i>trimipramine 25mg cap</i>	20	<i>turqoz 28 day pack</i>	57
<i>triamcinolone acetone 0.5% cream</i>	62	<i>trimipramine 50mg cap</i>	20	TWINRIX SYRINGE	91
<i>triamcinolone acetone 0.5% ointment</i>	62	TRINTELLIX 10MG TAB	18	TYBLUME 28 DAY PACK	57
<i>triazolam 0.125mg tab</i>	72	TRINTELLIX 20MG TAB	18	TYBOST 150MG TAB	47
<i>triazolam 0.25mg tab</i>	72	TRINTELLIX 5MG TAB	18	TYENNE 162MG/0.9ML	4
<i>tridacaine 5% patch</i>	62	<i>tri-nymyo 28 day pack</i>	57	AUTO-INJECTOR	
<i>triderm 0.1% cream</i>	62	<i>tri-sprintec 28 day pack</i>	57	TYENNE 162MG/0.9ML	4
<i>triderm 0.5% cream</i>	62	TRIUMEQ	47	SYRINGE	
<i>trientine 250mg cap</i>	75	600-50-300MG TAB		TYMLOS	64
<i>tri-estarylla 28 day pack</i>	56	TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	47	3120MCG/1.56ML PEN	
<i>trifluoperazine 10mg tab</i>	45	<i>trivora 28 day pack</i>	57	INJ	
<i>trifluoperazine 1mg tab</i>	45	<i>tri-vylibra 28 day pack</i>	57	TYPHIM VI	90
<i>trifluoperazine 2mg tab</i>	45	<i>tri-vylibra lo 28 day pack</i>	57	25MCG/0.5ML INJ	
<i>trifluoperazine 5mg tab</i>	45	TRIZIVIR	47	TYPHIM VI	90
TRIFLURIDINE 1%	80	300-150-300MG TAB		25MCG/0.5ML SYRINGE	
OPHTH SOLN		TROPHAMINE 10% INJ	79	TYVASO 16-32-48MCG	52
<i>trihexyphenidyl 2mg tab</i>	40	<i>trospium chloride 20mg tab</i>	90	TITRATION PACK	
		<i>trospium chloride 60mg er cap</i>	90	TYVASO 16MCG INH	52
		TRULANCE 3MG TAB	68	POWDER	
				TYVASO 32-48MCG	52
				MAINTENANCE PACK	
				TYVASO 32MCG INH	52
				POWDER	
				TYVASO 48MCG INH	52
				POWDER	
				TYVASO 64MCG INH	52
				POWDER	

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

U		<i>valsartan 40mg tab</i>	28	VELTASSA 25.2GM	77
UBRELVY 100MG TAB	73	<i>valsartan 80mg tab</i>	28	POWDER FOR ORAL	
UBRELVY 50MG TAB	73	VALTOCO 10MG	13	SUSP	
<i>unithroid 100mcg tab</i>	88	(10MG/0.1ML) NASAL		VELTASSA 8.4GM	77
<i>unithroid 112mcg tab</i>	88	SPRAY DOSE PACK		POWDER FOR ORAL	
<i>unithroid 125mcg tab</i>	88	VALTOCO 15MG	13	SUSP	
<i>unithroid 137mcg tab</i>	88	(7.5MG/0.1ML) NASAL		VEMLIDY 25MG TAB	48
<i>unithroid 150mcg tab</i>	88	SPRAY DOSE PACK		VENCLEXTA 100MG	33
<i>unithroid 175mcg tab</i>	88	VALTOCO 20MG	14	TAB	
<i>unithroid 200mcg tab</i>	88	(10MG/0.1ML) NASAL		VENCLEXTA 10MG TAB	33
<i>unithroid 25mcg tab</i>	88	SPRAY DOSE PACK		VENCLEXTA 50MG TAB	33
<i>unithroid 300mcg tab</i>	88	VALTOCO 5MG	14	VENCLEXTA TAB	33
<i>unithroid 50mcg tab</i>	88	(5MG/0.1ML) NASAL		STARTER PACK	
<i>unithroid 75mcg tab</i>	88	SPARY DOSE PACK		<i>venlafaxine 100mg tab</i>	19
<i>unithroid 88mcg tab</i>	88	<i>vancomycin 100mg/ml inj</i>	31	<i>venlafaxine 150mg er cap</i>	19
<i>ursodiol 250mg tab</i>	68	<i>vancomycin 125mg cap</i>	31	<i>venlafaxine 25mg tab</i>	19
<i>ursodiol 300mg cap</i>	68	<i>vancomycin 1gm inj</i>	31	<i>venlafaxine 37.5mg er</i>	19
<i>ursodiol 500mg tab</i>	68	<i>vancomycin 250mg cap</i>	31	<i>cap</i>	
UZEDY 100MG/0.28ML	43	<i>vancomycin 500mg inj</i>	31	<i>venlafaxine 37.5mg tab</i>	19
SYRINGE		<i>vancomycin 750mg inj</i>	31	<i>venlafaxine 50mg tab</i>	19
UZEDY 125MG/0.35ML	43	VANFLYTA 17.7MG TAB	39	<i>venlafaxine 75mg er cap</i>	19
SYRINGE		VANFLYTA 26.5MG TAB	39	<i>venlafaxine 75mg tab</i>	19
UZEDY 150MG/0.42ML	43	VAQTA 25UNIT/0.5ML	91	<i>verapamil 120mg er cap</i>	51
SYRINGE		INJ		<i>verapamil 120mg er tab</i>	51
UZEDY 200MG/0.56ML	43	VAQTA 25UNIT/0.5ML	91	<i>verapamil 120mg tab</i>	51
SYRINGE		SYRINGE		<i>verapamil 180mg er cap</i>	51
UZEDY 250MG/0.7ML	43	VAQTA 50UNIT/ML INJ	91	<i>verapamil 180mg er tab</i>	51
SYRINGE		VAQTA 50UNIT/ML	91	<i>verapamil 240mg er cap</i>	51
UZEDY 50MG/0.14ML	43	SYRINGE		<i>verapamil 240mg er tab</i>	51
SYRINGE		<i>varenicline 0.5mg tab</i>	86	<i>verapamil 40mg tab</i>	51
UZEDY 75MG/0.21ML	43	<i>varenicline 0.5mg/1mg</i>	86	<i>verapamil 80mg tab</i>	51
SYRINGE		<i>first month pack</i>		VERQUVO 10MG TAB	52
V		<i>varenicline 1mg tab</i>	86	VERQUVO 2.5MG TAB	52
<i>valacyclovir 1000mg tab</i>	48	<i>varenicline 1mg tab pack</i>	86	VERQUVO 5MG TAB	53
<i>valacyclovir 500mg tab</i>	48	(56)		VERSACLOZ 50MG/ML	44
VALCHLOR 0.016% GEL	60	VARIVAX	91	SUSP	
<i>valganciclovir 450mg tab</i>	48	1350PFU/0.5ML INJ		VERZENIO 100MG TAB	39
<i>valganciclovir 50mg/ml</i>	48	VARUBI 90MG TAB	24	VERZENIO 150MG TAB	39
<i>oral soln</i>		VAXCHORA SUSP	90	VERZENIO 200MG TAB	39
<i>valproic acid 250mg cap</i>	17	VELIVET 28 DAY PACK	57	VERZENIO 50MG TAB	39
<i>valproic acid 50mg/ml</i>	17	VELTASSA 16.8GM	77	<i>vestura 3-0.02mg pack</i>	57
<i>oral soln</i>		POWDER FOR ORAL		VICTOZA 18MG/3ML	22
<i>valsartan 160mg tab</i>	28	SUSP		PEN INJ	
<i>valsartan 320mg tab</i>	28			<i>vienva 28 day pack</i>	57

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>vigabatrin 500mg powder for oral soln</i>	16	VYNDAMAX 61MG CAP	52	XCOPRI 12.5/25MG TITRATION PACK	16
<i>vigabatrin 500mg tab</i>	16	VYNDAQEL 20MG CAP	52	XCOPRI 150/200MG PACK TAB	16
<i>vigadrone 500mg powder for oral soln</i>	16	W		XCOPRI 150/200MG TITRATION PACK	16
<i>vigadrone 500mg tab</i>	16	WAKIX 17.8MG TAB	1	XCOPRI 150MG TAB	16
VIGAFYDE 100MG/ML ORAL SOLN	16	WAKIX 4.45MG TAB	1	XCOPRI 200MG TAB	16
<i>vigpoder 500mg powder for oral soln</i>	16	<i>warfarin sodium 10mg tab</i>	12	XCOPRI 25MG TAB	16
<i>vilazodone 10mg tab</i>	18	<i>warfarin sodium 1mg tab</i>	12	XCOPRI 50/100MG TITRATION PACK	
<i>vilazodone 20mg tab</i>	18	<i>warfarin sodium 2.5mg tab</i>	12	XCOPRI 50MG TAB	16
<i>vilazodone 40mg tab</i>	18	<i>warfarin sodium 2mg tab</i>	12	XCOPRI TAB 100/150MG	16
VIRACEPT 250MG TAB	48	<i>warfarin sodium 3mg tab</i>	12	MAINTENANCE PACK	
VIRACEPT 625MG TAB	48	<i>warfarin sodium 4mg tab</i>	12	XDEMVIY 0.25% OPHTH SOLN	80
VIREAD 150MG TAB	48	<i>warfarin sodium 5mg tab</i>	12	XELJANZ 10MG TAB	3
VIREAD 200MG TAB	48	<i>warfarin sodium 6mg tab</i>	12	XELJANZ 1MG/ML ORAL SOLN	3
VIREAD 250MG TAB	48	<i>warfarin sodium 7.5mg tab</i>	12	XELJANZ 5MG TAB	3
VIREAD 40MG/GM ORAL POWDER	48	WELIREG 40MG TAB	35	XELJANZ XR 11MG TAB	3
VITRAKVI 100MG CAP	39	<i>wixela 100-50mcg inhaler</i>	11	XELJANZ XR 22MG TAB	3
VITRAKVI 20MG/ML ORAL SOLN	39	<i>wixela 250-50mcg inhaler</i>	11	XERMELO 250MG	69
VITRAKVI 25MG CAP	39	<i>wixela 500-50mcg inhaler</i>	11	XGEVA 120MG/1.7ML INJ	64
VIZIMPRO 15MG TAB	34	<i>wymzya fe 28 day pack</i>	57	XIFAXAN 200MG TAB	31
VIZIMPRO 30MG TAB	34	X		XIFAXAN 550MG TAB	31
VIZIMPRO 45MG TAB	34	XALKORI 150MG ORAL PELLET	39	XIGDUO XR 10-1000MG TAB	21
VONJO 100MG CAP	39	XALKORI 200MG CAP	39	XIGDUO XR 10-500MG TAB	21
VORICONAZOLE 200MG INJ	25	XALKORI 20MG ORAL PELLET	39	XIGDUO XR	21
<i>voriconazole 200mg tab</i>	25	XALKORI 250MG CAP	39	2.5-1000MG TAB	
<i>voriconazole 40mg/ml susp</i>	25	XALKORI 50MG ORAL PELLET	39	XIGDUO XR 5-1000MG TAB	21
<i>voriconazole 50mg tab</i>	25	XARELTO 10MG TAB	12	XIGDUO XR 5-500MG TAB	21
VOSEVI 400-100-100MG TAB	48	XARELTO 15MG TAB	12	XIIDRA 5% OPHTH SOLN	80
VOWST 30000000UNIT CAP	69	XARELTO 1MG/ML SUSP	12	XOLAIR 150MG INJ	9
VRAYLAR 1.5MG CAP	41	XARELTO 2.5MG TAB	12	XOLAIR 150MG/ML AUTO-INJECTOR	9
VRAYLAR 3MG CAP	41	XARELTO 20MG TAB	12	XOLAIR 150MG/ML SYRINGE	10
VRAYLAR 4.5MG CAP	42	XARELTO TAB STARTER PACK	12		
VRAYLAR 6MG CAP	42	XATMEP 2.5MG/ML ORAL SOLN	33		
<i>vyfemla 28 day pack</i>	57	XCOPRI 100MG TAB	16		
<i>vylibra 28 day pack</i>	57				

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

XOLAIR 300MG/2ML AUTO-INJECTOR	10	<i>zafirlukast 20mg tab</i>	10	ZENPEP	63
XOLAIR 300MG/2ML SYRINGE	10	<i>zaleplon 10mg cap</i>	72	84000-20000-63000UNIT	
XOLAIR 75MG/0.5ML AUTO-INJECTOR	10	<i>zaleplon 5mg cap</i>	72	DR CAP	
XOLAIR 75MG/0.5ML SYRINGE	10	ZARXIO 300MCG/0.5ML SYRINGE	71	ZEPOSIA 0.92MG CAP	85
XOPENEX 45MCG INHALER	11	ZARXIO 480MCG/0.8ML SYRINGE	71	ZEPOSIA 28-DAY STARTER KIT	85
XOSPATA 40MG TAB	39	ZAVZPRET 10MG/ACT NASAL SPRAY	73	ZEPOSIA CAP 7-DAY STARTER PACK	85
XPOVIO 100MG ONCE WEEKLY CARTON (8-PACK)	35	ZEGALOGUE 0.6MG/0.6ML AUTO-INJECTOR	21	<i>zidovudine 100mg cap</i>	48
XPOVIO 40MG ONCE WEEKLY CARTON (4-PACK)	35	ZEGALOGUE 0.6MG/0.6ML SYRINGE	21	<i>zidovudine 10mg/ml oral soln</i>	48
XPOVIO 40MG TWICE WEEKLY CARTON (8-PACK)	35	ZEJULA 100MG TAB	39	<i>zidovudine 300mg tab</i>	48
XPOVIO 60MG ONCE WEEKLY CARTON (4-PACK)	35	ZEJULA 200MG TAB	39	ZIEXTENZO 6MG/0.6ML SYRINGE	71
XPOVIO 60MG TWICE WEEKLY CARTON (24 PACK)	35	ZEJULA 300MG TAB	39	ZIMHI 5MG/0.5ML SYRINGE	23
XPOVIO 80MG ONCE WEEKLY CARTON (8-PACK)	35	ZELBORAF 240MG TAB	39	<i>ziprasidone 20mg cap</i>	42
XPOVIO 80MG TWICE WEEKLY CARTON (32 PACK)	35	ZEMAIRA 1000MG INJ	86	<i>ziprasidone 20mg inj</i>	42
XTANDI 40MG CAP	35	<i>zenatane 10mg cap</i>	59	<i>ziprasidone 40mg cap</i>	42
XTANDI 40MG TAB	35	<i>zenatane 20mg cap</i>	59	<i>ziprasidone 60mg cap</i>	42
XTANDI 80MG TAB	35	<i>zenatane 30mg cap</i>	59	<i>ziprasidone 80mg cap</i>	42
XYWAV 0.5GM/ML ORAL SOLN	83	<i>zenatane 40mg cap</i>	59	ZOLINZA 100MG CAP	39
Y		ZENPEP	63	<i>zolmitriptan 2.5mg tab</i>	74
<i>yargesa 100mg cap</i>	71	105000-25000-79000UNI T DR CAP		<i>zolmitriptan 5mg tab</i>	74
YF-VAX INJ	91	ZENPEP	63	<i>zolmitriptan 5mg/act nasal spray</i>	74
YF-VAX INJ	91	ZENPEP	63	<i>zolpidem tartrate 10mg tab</i>	72
Z		14000-3000-10000UNIT DR CAP		<i>zolpidem tartrate 12.5mg er tab</i>	72
<i>zafirlukast 10mg tab</i>	10	ZENPEP	63	<i>zolpidem tartrate 5mg tab</i>	72
		24000-5000-17000UNIT DR CAP		<i>zolpidem tartrate 6.25mg er tab</i>	72
		ZENPEP	63	ZONISADE 100MG/5ML SUSP	16
		40000-126000-168000U NIT DR CAP		<i>zonisamide 100mg cap</i>	16
		ZENPEP	63	<i>zonisamide 25mg cap</i>	16
		42000-10000-32000UNIT DR CAP		<i>zonisamide 50mg cap</i>	16
		ZENPEP	63	ZORYVE 0.3% CREAM	60
		63000-15000-47000UNIT DR CAP		<i>zovia 1/35e 28 day pack</i>	57
				ZTALMY 50MG/ML	16
				SUSP	
				ZURZUVAE 20MG CAP	17
				ZURZUVAE 25MG CAP	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

ZURZUVAE 30MG CAP	17
ZYDELIG 100MG TAB	40
ZYDELIG 150MG TAB	40
ZYKADIA 150MG TAB	40
ZYPREXA 210MG INJ	44

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L.A. Care
HEALTH PLAN®

For All of L.A.

Este Formulario se actualizó el 11/01/2024. 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)**.