



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

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

Listahan ng Mga Sinasaklaw na Gamot Formulary (Pormularyo) **2025**

MANGYARING BASAHIN: NAGLALAMAN ANG DOKUMENTONG ITO NG IMPORMASYON TUNGKOL SA MGA GAMOT NA SINASAKLAW NAMIN SA PLANONG ITO

Na-update ang formulary na ito noong Marso 1, 2025.

Para sa higit pang kamakailang impormasyon o iba pang tanong, makipag-ugnayan sa amin sa **1-833-522-3767** (TTY: **711**), 24 na oras sa isang araw, 7 araw sa isang linggo, kabilang ang mga holiday, o pumunta sa **medicare.lacare.org**.



L.A. Care Medicare Plus (HMO D-SNP) | 2025 Listahan ng Mga Saklaw na Gamot (Formulary)

Panimula

Tinatawag ang dokumentong ito na *Listahan ng Mga Saklaw na Gamot* (na kilala rin bilang *Listahan ng Gamot*). Makikita rito ang mga inireresetang gamot at over-the-counter (OTC) na gamot at produkto at item na hindi gamot na sinasaklaw ng L.A. Care Medicare Plus. Nakasaad din sa *Listahan ng Gamot* kung may anumang espesyal na panuntunan o paghihigpit sa anumang gamot na sinasaklaw ng L.A. Care Medicare Plus. Makikita ang mahahalagang termino at ang kahulugan ng mga ito sa huling kabanata ng *Handbook ng Miyembro*.

Talaan ng mga Nilalaman

A. Mga Disclaimer	iii
B. Mga Madalas Itanong (FAQ)	ix
B1. Anong mga inireresetang gamot ang nasa <i>Listahan ng Mga Saklaw na Gamot</i> ? (Tinatawag namin ang <i>Listahan ng Mga Saklaw na Gamot</i> na “ <i>Listahan ng Gamot</i> ” sa maikling salita.)	ix
B2. Nagbabago ba ang <i>Listahan ng Gamot</i> ?	x
B3. Ano ang mangyayari kapag may nagbago sa <i>Listahan ng Gamot</i> ?	xi
B4. Mayroon bang anumang paghihigpit o limitasyon sa saklaw sa gamot o anumang kinakailangang pagkilos para makuha ang ilang partikular na gamot?	xii
B5. Paano ko malalaman kung may mga limitasyon ang gusto kong gamot o kung may mga kinakailangang pagkilos para makuha ang gamot?	xiii
B6. Ano ang mangyayari kung binabago ng L.A. Care Medicare Plus ang kanilang mga panuntunan tungkol sa pagsaklaw ng ilang gamot (halimbawa, mga paghihigpit sa paunang pahintulot, mga limitasyon sa dami, at/o step therapy)?	xiii
B7. Paano ko mahahanap ang isang gamot sa <i>Listahan ng Gamot</i> ?	xiii
B8. Paano kung wala sa <i>Listahan ng Gamot</i> ang gamot na gusto kong inumin?	xiv
B9. Paano kung bagong miyembro ako ng L.A. Care Medicare Plus at hindi ko mahanap ang aking gamot sa <i>Listahan ng Gamot</i> o nagkakaproblema ako sa pagkuha ng aking gamot?	xiv
B10. Puwede ba akong humiling ng pagbubukod para saklawin ang aking gamot?	xv
B11. Paano ako hihiling ng pagbubukod?	xvi
B12. Gaano katagal bago makakuha ng pagbubukod?	xvi
B13. Ano ang mga generic na gamot?	xvi

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



B14. Ano ang mga orihinal na biyolohikal na produkto at paano nauugnay ang mga ito sa mga biosimilar?.....	xvii
B15. Ano ang mga OTC na gamot?	xvii
B16. Sinasaklaw ba ng L.A. Care Medicare Plus ang mga OTC na produktong hindi gamot?	xvii
B17. Sinasaklaw ba ng L.A. Care Medicare Plus ang mga pangmatagalang supply ng mga reseta?	xvii
B18. Maaari ba akong magpahatid sa aking bahay ng mga reseta mula sa aking lokal na parmasya?	xviii
B19. Ano ang aking copay?	xviii
C. Pangkalahatang-ideya ng <i>Listahan ng Mga Saklaw na Gamot</i>	xviii
C1. Listahan ng Mga Gamot ayon sa Medikal na Kundisyon	xxi
D. Index ng Mga Saklaw na Gamot	xxii



A. Mga Disclaimer

Isa itong listahan ng mga gamot na makukuha ng mga miyembro sa L.A. Care Medicare Plus.

- ❖ Puwede niyong tingnan ang pinakabagong *Listahan ng Mga Saklaw na Gamot* ng L.A. Care Medicare Plus online anumang oras sa medicare.lacare.org o sa pamamagitan ng pagtawag sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag na ito.
- ❖ Makukuha ninyo ang dokumentong ito nang libre sa iba pang format, gaya ng malalaking titik, braille, o audio. Tumawag sa 1-833-522-3767 (TTY: 711) o sa mga numerong nakalista sa ibaba ng pahinang ito o sa mga numero sa footer ng dokumentong ito. Libre ang tawag.
- ❖ **ATTENTION: If you need help in your language, call 1-833-522-3767 (TTY: 711).** Aids and services for people with disabilities, like documents in braille and large print, are also available. Call **1-833-522-3767 (TTY: 711)**. These services are free.

❖ يُرجى الانتباه: إذا احتجت إلى المساعدة بلغتك، فاتصل بـ
1-833-522-3767 (TTY: 711). تتوفر أيضًا المساعدات
والخدمات للأشخاص ذوي الإعاقة، مثل المستندات المكتوبة بطريقة
(TTY: 711) بريل والخط الكبير. اتصل بـ 1-833-522-3767
هذه الخدمات مجانية.

- ❖ ՈՒՇԱԴՐՈՒԹՅՈՒՆ: Եթե Ձեզ օգնություն է հարկավոր Ձեր լեզվով, զանգահարեք **1-833-522-3767 (TTY: 711)**: Կան նաև օժանդակ միջոցներ ու ծառայություններ հաշմանդամություն ունեցող անձանց համար, օրինակ՝ Բրայլի գրատիպով ու խոշորատառ տպագրված նյութեր: Զանգահարեք **1-833-522-3767 (TTY: 711)**: Այդ ծառայություններն անվճար են:



- ❖ **请注意：**如果您需要以您的母语提供帮助，请致电 **1-833-522-3767 (TTY: 711)**。另外还提供针对残疾人士的帮助和服务，例如盲文和需要较大字体阅读，也是方便取用的。请致电 **1-833-522-3767 (TTY: 711)**。这些服务都是免费的。
- ❖ **ਧਿਆਨ ਦਿਓ:** ਜੇ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਮਦਦ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਾਲ ਕਰੋ **1-833-522-3767 (TTY: 711)**. ਅਪਾਹਜ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਿਵੇਂ ਕਿ ਬੋਲ ਅਤੇ ਮੋਟੀ ਛਪਾਈ ਵਿੱਚ ਦਸਤਾਵੇਜ਼, ਵੀ ਉਪਲਬਧ ਹਨ। ਕਾਲ ਕਰੋ **1-833-522-3767 (TTY: 711)**. ਇਹ ਸੇਵਾਵਾਂ ਮੁਫਤ ਹਨ।
- ❖ **ध्यान दें:** अगर आपको अपनी भाषा में सहायता की आवश्यकता है तो **1-833-522-3767 (TTY: 711)** पर कॉल करें। अशक्तता वाले लोगों के लिए सहायता और सेवाएं, जैसे ब्रेल और बड़े प्रिंट में भी दस्तावेज़ उपलब्ध हैं। **1-833-522-3767 (TTY: 711)** पर कॉल करें। ये सेवाएं नः शुल्क हैं।
- ❖ **CEEB TOOM:** Yog koj xav tau kev pab txhais koj hom lus hu rau **1-833-522-3767 (TTY: 711)**. Muaj cov kev pab txhawb thiab kev pab cuam rau cov neeg xiam oob qhab, xws li puav leej muaj ua cov ntawv su thiab luam tawm ua tus ntawv loj. Hu rau **1-833-522-3767 (TTY: 711)**. Cov kev pab cuam no yog pab dawb xwb.

- ❖ 注意日本語での対応が必要な場合は **1-833-522-3767 (TTY: 711)** へお電話ください。点字の資料や文字の拡大表示など、障がいをお持ちの方のためのサービスも用意しています。 **1-833-522-3767 (TTY: 711)** へお電話ください。これらのサービスは無料で提供しています。
- ❖ 유의사항: 귀하의 언어로 도움을 받고 싶으시면 **1-833-522-3767 (TTY: 711)** 번으로 문의하십시오. 점자나 큰 활자로 된 문서와 같이 장애가 있는 분들을 위한 도움과 서비스도 이용 가능합니다. **1-833-522-3767 (TTY: 711)** 번으로 문의하십시오. 이러한 서비스는 무료로 제공됩니다.
- ❖ ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໂທຫາເບີ **1-833-522-3767 (TTY: 711)**. ຍັງມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມິໂຕພິມໃຫຍ່ ໃຫ້ໂທຫາເບີ **1-833-522-3767 (TTY: 711)**. ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.



❖ LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiex longc mienh tengx faan benx meih nyei waac nor douc waac daaih lorx taux **1-833-522-3767** (TTY: **711**). Liouh lorx jauvlouc tengx aengx caux nzie gong bun taux ninh mbuo wuaaic fangx mienh, beiv taux longc benx nzangc-pokc bun hluc mbiutc aengx caux aamz mborqv benx domh sou se mbenc nzaih bun longc. Douc waac daaih lorx **1-833-522-3767** (TTY: **711**). Naaiv deix nzie weih gong-bou jauv-louc se benx wang-henh tengx mv zuqc cuotv nyaanh oc.

❖ ចំណាំ៖ បើអ្នក ត្រូវ ការជំនួយ ជាភាសា របស់អ្នក ស្នូម ទូរស័ព្ទទៅលេខ **1-833-522-3767** (TTY: **711**)។ ជំនួយ និង សេវាកម្ម សម្រាប់ ជនពិការ ដូចជាឯកសារសរសេរជា អក្សរធំស្តុ សម្រាប់ជនពិការភ្នែក ឬឯកសារសរសេរជា អក្សរពុម្ពធី ក៏អាចរកបានផងដែរ។ ទូរស័ព្ទមកលេខ **1-833-522-3767** (TTY: **711**)។ សេវាកម្មទាំងនេះមិន គិតថ្លៃឡើយ។

❖ توجه: اگر می‌خواهید به زبان خود کمک دریافت کنید، با تماس بگیرید. کمک‌ها و **1-833-522-3767** (TTY: **711**) خدمات مخصوص افراد دارای معلولیت، مانند نسخه‌های خط بریل و چاپ با حروف بزرگ، نیز موجود است. با **1-833-522-3767** تماس بگیرید. این خدمات رایگان ارائه می‌شوند (TTY: **711**).



- ❖ **ВНИМАНИЕ!** Если вам нужна помощь на вашем родном языке, звоните по номеру **1-833-522-3767** (TTY: **711**). Также предоставляются средства и услуги для людей с ограниченными возможностями, например документы крупным шрифтом или шрифтом Брайля. Звоните по номеру **1-833-522-3767** (TTY: **711**). Такие услуги предоставляются бесплатно.
- ❖ **ATENCIÓN:** si necesita ayuda en su idioma, llame al **1-833-522-3767** (TTY: **711**). También ofrecemos asistencia y servicios para personas con discapacidades, como documentos en braille y con letras grandes. Llame al **1-833-522-3767** (TTY: **711**). Estos servicios son gratuitos.
- ❖ **ATENSIYON:** Kung kailangan mo ng tulong sa iyong wika, tumawag sa **1-833-522-3767** (TTY: **711**). Mayroon ding mga tulong at serbisyo para sa mga taong may kapansanan, tulad ng mga dokumento sa braille at malaking print. Tumawag sa **1-833-522-3767** (TTY: **711**). Libre ang mga serbisyong ito.



- ❖ **โปรดทราบ:** หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ กรุณาโทรศัพท์ไปที่หมายเลข **1-833-522-3767** (TTY: **711**) นอกจากนี้ ยังพร้อมให้ความช่วยเหลือและบริการต่าง ๆ สำหรับบุคคลที่มีความพิการ เช่น เอกสารต่าง ๆ ที่เป็นอักษรเบรลล์และเอกสารที่พิมพ์ด้วยตัวอักษรขนาดใหญ่ กรุณาโทรศัพท์ไปที่หมายเลข **1-833-522-3767** (TTY: **711**) ไม่มีค่าใช้จ่ายสำหรับบริการเหล่านี้
- ❖ **УВАГА! Якщо вам потрібна допомога вашою рідною мовою, телефонуйте на номер 1-833-522-3767 (TTY: 711).** Люди з обмеженими можливостями також можуть скористатися допоміжними засобами та послугами, наприклад, отримати документи, надруковані шрифтом Брайля та великим шрифтом. Телефонуйте на номер **1-833-522-3767** (TTY: **711**). Ці послуги безкоштовні.
- ❖ **CHÚ Ý:** Nếu quý vị cần trợ giúp bằng ngôn ngữ của mình, vui lòng gọi số **1-833-522-3767** (TTY: **711**). Chúng tôi cũng hỗ trợ và cung cấp các dịch vụ dành cho người khuyết tật, như tài liệu bằng chữ nổi Braille và chữ khổ lớn (chữ hoa). Vui lòng gọi số **1-833-522-3767** (TTY: **711**). Các dịch vụ này đều miễn phí.

- ❖ Available ang dokumentong ito nang libre sa Arabic, Armenian, Chinese, Punjabi, Hindi, Hmong, Japanese, Farsi, Korean, Laotian, Russian, Spanish, Tagalog, Mien, Cambodian, Thai, Ukrainian at Vietnamese.
- ❖ Maaari ninyong hilingin na palagi kaming magpadala sa inyo ng impormasyon sa wika o format na kailangan ninyo. Tinatawag itong pangmatagalang kahilingan. Susubaybayan namin ang inyong pangmatagalang kahilingan upang hindi ninyo kailangang gumawa ng mga hiwalay na kahilingan sa tuwing magpapadala kami sa inyo ng impormasyon. Upang makuha ang dokumentong ito sa isang wika maliban sa English at/o sa isang alternatibong format, mangyaring makipag-ugnayan sa Mga Serbisyo sa Miyembro sa (833) 522-3767, TTY: 711, 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Matutulungan ka ng isang kinatawan na gumawa o magbago ng pangmatagalang kahilingan.

B. Mga Madalas Itanong (FAQ)

Makikita rito ang mga sagot sa mga tanong na posibleng mayroon kayo tungkol sa *Listahan ng Mga Saklaw na Gamot* na ito. Maaari ninyong basahin ang lahat ng FAQ para matuto pa o puwede kayong maghanap ng tanong at sagot.

B1. Anong mga inireresetang gamot ang nasa *Listahan ng Mga Saklaw na Gamot*? (Tinatawag namin ang *Listahan ng Mga Saklaw na Gamot* na “*Listahan ng Gamot*” sa maikling salita.)

Ang mga gamot sa *Listahan ng Mga Saklaw na Gamot* na nagsisimula sa seksyon D ay ang mga gamot na sinasaklaw ng L.A. Care Medicare Plus. Makukuha ang mga gamot sa mga parmasyang nasa aming network. Nasa aming network ang isang parmasya kung mayroon kaming kasunduan sa kanila na makipagtulungan sa amin at magbigay sa inyo ng mga serbisyo. Tinatawag namin ang mga parmasyang ito bilang “mga parmasyang nasa network.”

Posibleng saklawin ng Medi-Cal Rx ang ibang gamot, gaya ng mga over-the-counter (OTC) na gamot at ilang partikular na bitamina. Bisitahin ang website ng Medi-Cal Rx (www.medi-calrx.dhcs.ca.gov) para sa higit pang impormasyon. Puwede rin kayong tumawag sa Customer Service Center ng Medi-Cal Rx sa 800-977-2273. Dalhin ang inyong Card ng Pagkakakilanlan ng Benepisyaryo (Beneficiary Identification Card, BIC) ng Medi-Cal kapag kumuha kayo ng mga reseta sa pamamagitan ng Medi-Cal Rx.

- Sasaklawin ng L.A. Care Medicare Plus ang lahat ng medikal na kinakailangang gamot na nasa *Listahan ng Gamot* kung:
 - sasabihin ng inyong doktor o iba pang tagapagreseta na kailangan ninyo ang mga ito para gumaling kayo o manatili kayong malusog,
 - sasang-ayon ang L.A. Care Medicare Plus na medikal na kinakailangan para sa inyo ang nasabing gamot, **at**
 - kukunin ninyo ang reseta sa isang parmasyang nasa network ng L.A. Care Medicare Plus.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



- Sa ilang sitwasyon, mayroon kayong kailangang gawin bago ninyo makuha ang isang gamot. Sumangguni sa tanong B4 para sa higit pang impormasyon.

Makakakuha rin kayo ng updated na listahan ng mga gamot na sinasaklaw namin sa aming website sa medicare.lacare.org o sa pamamagitan ng pagtawag sa aming Mga Serbisyo sa Miyembro sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday.

B2. Nagbabago ba ang *Listahan ng Gamot*?

Oo, at dapat sundin ng L.A. Care Medicare Plus ang mga panuntunan ng Medicare at Medi-Cal sa paggawa ng mga pagbabago. Maaari kaming magdagdag o mag-alis ng mga gamot sa *Listahan ng Gamot* sa kabuuan ng taon.

Puwede rin naming baguhin ang aming mga panuntunan tungkol sa mga gamot. Halimbawa, magagawa naming:

- Magpasyang humingi o hindi humingi ng paunang pahintulot para sa isang gamot. (Ang paunang pahintulot ay isang awtorisasyon mula sa L.A. Care Medicare Plus bago kayo makakuha ng isang gamot.)
- Dagdagan o baguhin ang dami ng gamot na puwede ninyong kunin (tinatawag na mga limitasyon sa dami).
- Dagdagan o baguhin ang mga paghihigpit na step therapy sa isang gamot. (Kapag sinabing step therapy, ibig sabihin, kailangan muna ninyong subukan ang isang gamot bago kami sumaklaw ng ibang gamot.)

Para sa higit pang impormasyon tungkol sa mga panuntunang ito sa gamot, sumangguni sa tanong B4.

Kung umiinom kayo ng gamot na sinasaklaw sa **simula** ng taon, sa pangkalahatan, hindi namin aalisin o babaguhin ang saklaw sa gamot na iyon **sa natitirang bahagi ng taon** maliban na lang kung:

- magkakaroon ng bagong mas murang gamot sa pamilihan na kasimbisa ng gamot na nasa *Listahan ng Gamot* ngayon, o
- mapag-aalaman naming hindi ligtas inumin ang isang gamot, o
- aalisin ang isang gamot sa pamilihan.

May higit pang impormasyon ang mga tanong B3 at B6 sa ibaba tungkol sa kung ano ang mangyayari kapag nagbabago ang *Listahan ng Gamot*.

- Maaari ninyong tingnan ang pinakabagong *Listahan ng Gamot* ng L.A. Care Medicare Plus online anumang oras sa medicare.lacare.org. Naka-post sa website ang mga update sa *Listahan ng Gamot* buwan-buwan.
- Puwede rin kayong tumawag sa Mga Serbisyo sa Miyembro sa 1-833-522-3767 (TTY: 711) 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday, para tingnan ang kasalukuyang *Listahan ng Gamot*.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



B3. Ano ang mangyayari kapag may nagbago sa *Listahan ng Gamot*?

May ilang pagbabago sa *Listahan ng Gamot* na **agarang** mangyayari. Halimbawa:

- **Mga pagpapalit ng ilang partikular na mga bagong bersyon ng mga gamot.** Maaari naming agad na alisin ang mga gamot mula sa *Listahan ng Gamot* kung papalitan namin ang mga ito ng ilang partikular na bagong bersyon ng gamot na iyon, ngunit ang inyong gastos para sa bagong gamot ay mananatiling \$0. Kapag nagdaragdag kami ng bagong bersyon ng isang gamot, maaari rin kaming magpasyang panatilihin sa listahan ang branded na gamot o orihinal na biyolohikal na produkto pero baguhin ang mga panuntunan o limitasyon nito sa saklaw.
 - Posibleng hindi namin kayo masabihan bago namin gawin ang pagbabagong ito, pero papadalan namin kayo ng impormasyon tungkol sa partikular na pagbabagong ginawa namin kapag nagawa na ito.
 - Maaari lang naming gawin ang mga pagbabagong ito kung ang gamot na idinaragdag namin:
 - ay isang bagong generic na bersyon ng isang branded na gamot, o
 - ay isang partikular na bagong biosimilar na bersyon ng mga orihinal na biyolohikal na produkto sa *Listahan ng Gamot* (halimbawa, pagdaragdag ng mapapalitan na biosimilar na maaaring palitan ng orihinal na biyolohikal na produkto nang walang bagong reseta).
 - maaaring bago sa inyo ang ilan sa mga uri ng gamot na ito. Para sa higit pang impormasyon, sumangguni sa Seksyon B14.
 - Puwedeng humiling kayo o ang inyong provider ng pagbubukod sa mga pagbabagong ito. Papadalan namin kayo ng abiso na nagsasaad sa mga hakbang na puwede ninyong gawin para makahiling ng pagbubukod. Sumangguni sa tanong B10-B12 para sa higit pang impormasyon sa mga pagbubukod.
- **Inalis ang isang gamot sa pamilihan.** Kung sasabihin ng Food and Drug Administration (FDA) na hindi ligtas ang isang gamot na iniinom ninyo o kung aalisin ng manufacturer ng gamot ang isang gamot sa pamilihan, maaaring alisin namin kaagad ito sa *Listahan ng Gamot*. Kung iniinom ninyo ang gamot, papadalan namin kayo ng abiso pagkatapos naming gawin ang pagbabago. Kung matatanggap ninyo ang isa sa mga liham na ito, makipag-usap sa inyong doktor para makahanap ng ibang gamot na ligtas para sa inyo.

Maaari kaming gumawa ng iba pang pagbabagong makakaapekto sa mga gamot na iniinom ninyo. Ipapaalam namin sa inyo nang mas maaga ang tungkol sa iba pang pagbabagong ito sa *Listahan ng Gamot*. Puwedeng mangyari ang mga pagbabagong ito kung:

- Magbibigay ang FDA ng bagong gabay o may mga bagong klinikal na alituntunin tungkol sa isang gamot.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



- Tinatanggal namin ang isang branded na gamot mula sa *Listahan ng Gamot* kapag nagdaragdag ng isang generic na gamot na hindi bago sa pamilihan, o
- tinatanggal namin ang isang orihinal na biyolohikal na produkto kapag nagdaragdag ng isang biosimilar, o
- binabago namin ang mga panuntunan o limitasyon sa saklaw para sa branded na gamot.

Kapag nangyari ang mga pagbabagong ito, gagawin namin ang mga sumusunod:

- sasabihin namin sa inyo nang hindi bababa sa 30 araw bago namin gawin ang pagbabago sa *Listahan ng Gamot* •
- ipapaalam namin sa inyo at bibigyan kayo ng 30 araw na supply ng gamot pagkatapos ninyong humiling ng refill.

Magbibigay ito sa inyo ng panahong kausapin ang inyong doktor o iba pang tagapagreseta. Makakatulong sila sa inyong magpasya:

- kung may katulad na gamot sa *Listahan ng Gamot* na maaari ninyong inumin sa halip o
- kung hihiling man ng pagbubukod mula sa mga pagbabagong ito. Para matuto pa tungkol sa mga pagbubukod, sumangguni sa tanong B10-B12.

B4. Mayroon bang anumang paghihigpit o limitasyon sa saklaw sa gamot o anumang kinakailangang pagkilos para makuha ang ilang partikular na gamot?

Oo, may ilang gamot na may mga panuntunan sa saklaw o limitasyon sa dami ng puwede ninyong kunin. Sa ilang sitwasyon, kayo o ang inyong doktor o iba pang tagapagreseta ay may dapat gawin bago ninyo makuha ang gamot. Halimbawa:

- **Paunang pahintulot:** Para sa ilang gamot, kayo o ang inyong doktor o iba pang tagapagreseta ay dapat humingi ng pag-apruba mula sa L.A. Care Medicare Plus bago ninyo kunin ang inyong reseta. Iba ang paunang pahintulot sa referral. Posibleng hindi saklawin ng L.A. Care Medicare Plus ang gamot kung hindi kayo hihingi ng paunang pahintulot.
- **Mga limitasyon sa dami:** Kung minsan, nililimitahan ng L.A. Care Medicare Plus ang dami ng gamot na puwede ninyong kunin.
- **Step therapy:** Sa ilang pagkakataon, aatasan kayo ng L.A. Care Medicare Plus na magsagawa ng step therapy. Ibig sabihin, kakailanganin ninyong sumubok ng mga gamot sa isang partikular na pagkakasunud-sunod para sa inyong medikal na kundisyon. Posibleng kailanganin muna ninyong subukan ang isang gamot bago kami sumaklaw ng ibang gamot. Kung sa palagay ng inyong tagareseta ay hindi naging mabisa sa inyo ang unang gamot, sasaklawin namin ang pangalawang gamot.
- **Saklaw batay sa indikasyon:** Kung sinasaklaw ng L.A. Care Medicare Plus ang isang gamot para lang sa ilang medikal na kundisyon, malinaw namin itong tinutukoy sa *Listahan ng Gamot*, kasama ng mga sinasaklaw na partikular na medikal na kundisyon.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



Malalaman ninyo kung ang inyong gamot ay may karagdagang mga iniaatas o limitasyon sa pamamagitan ng pagtingin sa mga talahanayan sa seksyong C. Makakakuha rin kayo ng higit pang impormasyon sa pamamagitan ng pagbisita sa aming website sa medicare.lacare.org. Nag-post kami ng mga online na dokumento na nagpapaliwanag sa aming mga paghihigpit sa paunang pahintulot at step therapy. Puwede rin kayong humingi ng kopya sa amin.

Puwede kayong humiling ng pagbubukod sa mga limitasyong ito. Magbibigay ito sa inyo ng panahong kausapin ang inyong doktor o iba pang tagapagreseta. Matutulungan nila kayong magpasya kung may maiinom kayong katulad na gamot sa *Listahan ng Gamot* o kung hihiling ba ng pagbubukod. Sumangguni sa tanong B10-B12 para sa higit pang impormasyon tungkol sa mga pagbubukod.

B5. Paano ko malalaman kung may mga limitasyon ang gusto kong gamot o kung may mga kinakailangang pagkilos para makuha ang gamot?

Ang talahanayan sa Listahan ng Mga Gamot ayon sa medikal na kundisyon/uri ng gamot ay may column na may label na "Mga kinakailangang pagkilos, paghihigpit, o limitasyon sa paggamit."

B6. Ano ang mangyayari kung binabago ng L.A. Care Medicare Plus ang kanilang mga panuntunan tungkol sa pagsaklaw ng ilang gamot (halimbawa, mga paghihigpit sa paunang pahintulot, mga limitasyon sa dami, at/o step therapy)?

Sa ilang sitwasyon, ipapaalam namin sa inyo nang mas maaga kung may idaragdag o babaguhin kaming paghihigpit na paunang pahintulot, mga limitasyon sa dami, at/o step therapy sa isang gamot. Sumangguni sa tanong B3 para sa higit pang impormasyon tungkol sa paunang abisong ito at sa mga sitwasyon kung kailan maaaring hindi namin masabi sa inyo nang maaga kapag may magbabago sa aming mga panuntunan tungkol sa mga gamot sa *Listahan ng Gamot*.

B7. Paano ko mahahanap ang isang gamot sa *Listahan ng Gamot*?

May dalawang paraan ng paghahanap ng gamot:

- maaari kayong maghanap ayon sa alpabeto, **o**
- maaari kayong maghanap ayon sa medikal na kundisyon o uri ng gamot.

Para maghanap **ayon sa alpabeto**, hanapin ang inyong gamot sa seksyong Index ng Mga Saklaw na Gamot. Makikita ninyo ito sa dulo ng listahan ng gamot. Tinatawag itong Index. Nakalista ang mga gamot ayon sa alpabeto.

Para maghanap **ayon sa medikal na kundisyon**, hanapin ang seksyon na may label na "Listahan ng Mga Gamot ayon sa Medikal na Kundisyon" sa pahina xxi Ang mga gamot sa seksyong ito ay nakagrupo sa mga kategorya depende sa uri ng mga medikal na kundisyong ginagamot ng mga ito. Halimbawa, kung mayroon kayong kundisyon sa puso, dapat kayong maghanap sa kategoryang mga cardiovascular agent – Iba pa. Doon ninyo mahahanap ang mga gamot na nakakagamot ng mga kundisyon sa puso.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



B8. Paano kung wala sa *Listahan ng Gamot* ang gamot na gusto kong inumin?

Kung hindi ninyo makita ang inyong gamot sa *Listahan ng Gamot*, tumawag sa Mga Serbisyo sa Miyembro sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday at magtanong tungkol dito. Kung mapag-aalaman ninyong hindi sasaklawin ng L.A. Care Medicare Plus ang gamot, puwede ninyong gawin ang isa sa mga bagay na ito:

- Humiling sa *Mga Serbisyo sa Miyembro* ng listahan ng mga gamot na katulad ng gusto ninyong inumin. Pagkatapos ay ipakita ang listahan sa inyong doktor o iba pang tagapagreseta. Maaari silang magreseta ng gamot sa *Listahan ng Gamot* na katulad ng gusto ninyong inumin. **O**
- Puwede ninyong hilingin sa L.A. Care Medicare Plus na gumawa ng pagbubukod para saklawin ang inyong gamot. Sumangguni sa tanong B10-B12 para sa higit pang impormasyon tungkol sa mga pagbubukod.

B9. Paano kung bagong miyembro ako ng L.A. Care Medicare Plus at hindi ko mahanap ang aking gamot sa *Listahan ng Gamot* o nagkakaproblema ako sa pagkuha ng aking gamot?

Makakatulong kami. Maaari naming saklawin ang pansamantalang 30 araw na supply ng inyong gamot sa unang 90 araw ng pagiging miyembro ninyo sa L.A. Care Medicare Plus. Magbibigay ito sa inyo ng panahong kausapin ang inyong doktor o iba pang tagapagreseta. Matutulungan nila kayong magpasya kung may maiinom kayong katulad na gamot sa *Listahan ng Gamot* o kung hihiling ba ng pagbubukod.

Kung para sa mas kaunting araw ang inyong reseta, papayagan namin ang maraming refill para makapagbigay ng hanggang 30 araw na gamot.

Sasaklawin namin ang 30 araw na supply ng inyong gamot kung:

- umiinom kayo ng gamot na wala sa aming *Listahan ng Gamot*, **O**
- hindi kayo pinapahintulutan ng aming mga panuntunan ng plano na makuha ang daming iniatas ng inyong tagareseta, **O**
- kinakailangan para sa gamot ang paunang pahintulot ng L.A. Care Medicare Plus, **O**
- umiinom kayo ng gamot na bahagi ng paghihigpit na step therapy.

Kung umiinom kayo ng gamot na hindi itinuturing na Part D na gamot ng L.A. Care Medicare Plus, at wala sa *Listahan ng Gamot* ang gamot, at nagkakaproblema kayo sa pagkuha ng gamot, maaaring saklawin ito sa pamamagitan ng Medi-Cal Rx. Kung nangangailangan ng pagbubukod ang isang hindi kasamang gamot sa Part D, at mayroon kayong emergency, papayagan ng Medi-Cal Rx ang hindi bababa sa 72 oras na supply ng gamot. Mangyaring puntahan ang website ng Medi-Cal Rx (www.medi-calrx.dhcs.ca.gov) para sa higit pang impormasyon. Puwede rin kayong tumawag sa Customer Service Center ng Medi-Cal Rx sa 800-977-2273. Mangyaring dalhin ang inyong Medi-Cal BIC kapag kumukuha kayo ng mga reseta sa pamamagitan ng Medi-Cal Rx.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



Kung kayo ay nasa isang nursing home o iba pang pasilidad ng pangmatagalang pangangalaga at kailangan ninyo ng gamot na wala sa *Listahan ng Gamot* o kung hindi kayo madaling makakakuha ng gamot na kailangan ninyo, makakatulong kami. Kung mahigit 90 araw na kayo sa plano, nakatira kayo sa isang pasilidad ng pangmatagalang pangangalaga, at kailangan ninyo kaagad ng supply:

- Sasaklawin namin ang isang 31 araw na supply ng gamot na kailangan ninyo (maliban na lang kung para sa mas kaunting araw ang inyong reseta), bagong miyembro man kayo ng L.A. Care Medicare Plus o hindi.
- Bukod pa ito sa pansamantalang supply sa unang 90 araw ng pagiging miyembro ninyo ng L.A. Care Medicare Plus.

Mga Pagbabago sa Antas ng Pangangalaga

Magbibigay kami ng pang-transition na supply ng inyong mga gamot kapag may nagbago sa antas ng inyong pangangalaga.

Ang mga halimbawa ng mga pagbabago sa antas ng pangangalaga ay posibleng kabilangan ng mga sumusunod:

1. Mga miyembrong papasok sa mga pasilidad ng pangmatagalang pangangalaga mula sa mga ospital
2. Mga miyembrong madi-discharge na mula sa ospital at papauwiin na sa bahay
3. Mga miyembrong matatapos na sa kanilang Medicare Part A na pananatili sa pasilidad ng sanay na pag-aalaga at kailangang bumalik sa kanilang pormularyo ng plano sa Part D
4. Mga miyembrong aalis na sa hospice at babalik sa mga karaniwang benepisyo sa Medicare Part A at B
5. Mga miyembrong matatapos na sa pananatili sa pasilidad ng pangmatagalang pangangalaga at babalik sa komunidad
6. Mga miyembrong madi-discharge na mula sa isang psychiatric na ospital na may mga rehimen sa gamot na lubos na naka-personalize

Puwedeng makipag-ugnayan ang mga parmasya sa Pharmacy Help Desk sa 1-844-268-9785 para iproseso ang mga pag-override sa point-of-sale para matiyak na naa-access ng mga miyembro ang kanilang mga gamot nang walang anumang pagkaantala.

B10. Puwede ba akong humiling ng pagbubukod para saklawin ang aking gamot?

Oo. Maaari ninyong hilingin sa L.A. Care Medicare Plus na gumawa ng pagbubukod para saklawin ang isang gamot na wala sa *Listahan ng Gamot*.

Puwede rin ninyong hilingin sa aming baguhin ang mga panuntunan sa inyong gamot.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



- Halimbawa, posibleng limitahan ng L.A. Care Medicare Plus ang dami ng gamot na sasaklawin namin. Kung may limitasyon ang inyong gamot, puwede ninyong hilingin sa aming baguhin ang limitasyon at dagdagan pa ang aming saklaw.
- Iba pang halimbawa: Puwede ninyong hilingin sa aming alisin ang paghihigpit na step therapy o ang mga kinakailangan sa paunang pahintulot.

B11. Paano ako hihiling ng pagbubukod?

Para humiling ng pagbubukod, tumawag sa Mga Serbisyo sa Miyembro. Makikipagtulungan sa inyo at sa inyong tagareseta ang isang kinatawan ng Mga Serbisyo sa Miyembro upang tulungan kayong humiling ng pagbubukod. Maaari rin ninyong basahin ang **Kabanata 9** seksyon G ng *Handbook ng Miyembro* upang matuto pa tungkol sa mga pagbubukod.

B12. Gaano katagal bago makakuha ng pagbubukod?

Kapag nakatanggap na kami ng pahayag mula sa inyong tagapagreseta na sumusuporta sa inyong kahilingan para sa isang pagbubukod, bibigyan namin kayo ng pasya sa loob ng 72 oras. Puwedeng i-fax o ipadala, sa pamamagitan ng koreo, ng inyong doktor o iba pang tagapagreseta ang nasabing pahayag sa amin. O kaya, puwede itong sabihin sa amin ng inyong doktor o iba pang tagapagreseta, at pagkatapos ay puwedeng ipadala na lang ang pahayag sa pamamagitan ng fax o koreo. Maaari kayong tumawag sa amin sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday, para sa higit pang impormasyon.

Kung sa palagay ninyo o ng inyong tagapagreseta ay posibleng makasama sa inyong kalusugan kung kakailanganin ninyong maghintay ng 72 oras para sa isang pasya, puwede kayong humiling ng pinabilis na pagbubukod. Mas mabilis ang pasyang ito. Kung susuportahan ng inyong tagapagreseta ang inyong kahilingan, bibigyan namin kayo ng pasya sa loob ng 24 oras pagkatapos naming makuha ang sumusuportang pahayag ng inyong tagapagreseta.

B13. Ano ang mga generic na gamot?

Ang mga generic na gamot ay binubuo ng mga aktibong sangkap na pareho sa mga branded na gamot. Kadalasan ay mas mura ang mga ito kaysa sa branded na gamot at karaniwang gumagana nang kasinghusay. Karaniwang walang kilalang pangalan ang mga ito. Ang mga generic na gamot ay inaprubahan ng Food and Drug Administration (FDA). May mga generic na gamot na available para sa maraming branded na gamot. Karaniwang maaaring palitan ang mga generic na gamot ng mga branded na gamot sa parmasya nang walang bagong reseta—depende sa mga batas ng estado.

Sumasaklaw ang L.A. Care Medicare Plus ng mga branded at generic na gamot.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



B14. Ano ang mga orihinal na biyolohikal na produkto at paano nauugnay ang mga ito sa mga biosimilar?

Kapag tumutukoy kami ng mga gamot, maaaring mangahulugan ito na isang gamot o isang biyolohikal na produkto. Ang mga biyolohikal na produkto ay mga gamot na mas kumplikado kaysa sa mga karaniwang gamot. Dahil ang mga biyolohikal na produkto ay mas kumplikado kaysa sa mga karaniwang gamot, sa halip na magkaroon ng generic na form, mayroon silang mga form na tinatawag na mga biosimilar. Sa pangkalahatan, gumagana ang mga biosimilar nang kasinghusay ng orihinal na biyolohikal na produkto at maaaring mas mura. Mayroong mga biosimilar na alternatibo para sa ilang orihinal na biyolohikal na produkto. Ang ilang biosimilar ay mga mapapalitan ng biosimilar at, depende sa mga batas ng estado, ay maaaring palitan ng orihinal na biyolohikal na produkto sa parmasya nang hindi nangangailangan ng bagong reseta, na katulad ng mga generic na gamot na maaaring palitan ng mga branded na gamot.

Para sa higit pang impormasyon tungkol sa mga uri ng gamot, sumangguni sa **Kabanata 5** ng *Handbook ng Miyembro*.

B15. Ano ang mga OTC na gamot?

Ang ibig sabihin ng OTC ay “over-the-counter.” Sinasaklaw ng L.A. Care Medicare Plus ang ilang OTC na gamot kapag nireseta ang mga ito ng inyong provider.

Maaari ninyong basahin ang *Listahan ng Gamot* ng L.A. Care Medicare Plus para malaman kung ano ang mga sinasaklaw na OTC na gamot.

B16. Sinasaklaw ba ng L.A. Care Medicare Plus ang mga OTC na produktong hindi gamot?

Sasaklawin ng L.A. Care Medicare Plus ang ilang OTC na produktong hindi gamot kapag isinulat ng tagapagreseta ninyo ang mga ito bilang mga reseta.

Kasama sa mga halimbawa ng mga OTC na produktong hindi gamot ang mga alcohol swab.

Maaari ninyong basahin ang *Listahan ng Gamot* ng L.A. Care Medicare Plus para malaman kung ano ang mga sinasaklaw na OTC na produktong hindi gamot.

B17. Sinasaklaw ba ng L.A. Care Medicare Plus ang mga pangmatagalang supply ng mga reseta?

- **Mga Programang Mail-Order.** Nag-aalok kami ng programang mail-order na magbibigay-daan sa inyong makakuha ng hanggang 100 araw na supply ng inyong mga inireresetang gamot, na direktang ipapadala sa inyong bahay. Pareho ang copay ng 100 araw na supply sa copay ng isang buwang supply.
- **Mga Programa ng Retail na Parmasya para sa 100 Araw.** Maaari ring mag-alok ang ilang retail na parmasya ng hanggang 100 araw na supply ng mga sinasaklaw na inireresetang gamot. Pareho ang copay ng 100 araw na supply sa copay ng isang buwang supply.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



B18. Maaari ba akong magpahatid sa aking bahay ng mga reseta mula sa aking lokal na parmasya?

Posibleng maihatid ng inyong lokal na parmasya ang inyong reseta sa bahay ninyo. Puwede kayong tumawag sa inyong parmasya para malaman kung naghahatid sila sa bahay.

B19. Ano ang aking copay?

May \$0 na copay ang mga miyembro ng L.A. Care Medicare Plus para sa mga inirereseta at OTC na gamot at produktong hindi gamot kung susundin ng miyembro ang mga panuntunan ng plano. Sumangguni sa tanong B15 at B16 para sa higit pang impormasyon tungkol sa mga OTC na gamot at produktong hindi gamot.

Ang mga tier ay mga grupo ng mga gamot sa aming *Listahan ng Gamot*.

- Lahat ng Saklaw na Part D na mga Gamot (1 Tier): Ang inyong copay para sa isang buwan (30 araw) na supply ay \$0 kada reseta.

Kung mayroon kayong mga tanong, tumawag sa Mga Serbisyo sa Miyembro sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday.

C. Pangkalahatang-ideya ng *Listahan ng Mga Saklaw na Gamot*

Makakakuha kayo sa *Listahan ng Mga Saklaw na Gamot* ng impormasyon tungkol sa mga gamot na sinasaklaw ng L.A. Care Medicare Plus. Kung hindi ninyo mahanap ang inyong gamot sa listahan, pumunta sa Index ng Mga Saklaw na Gamot na nagsisimula sa seksyon D. Nakalista sa index, na nakaayos ayon sa alpabeto, ang lahat ng gamot na sinasaklaw ng L.A. Care Medicare Plus.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



MGA PAGPAPAIKLI SA MGA TALA NG SAKLAW
Mga Paghihigpit sa Pamamahala ng Mga Utility

PAGPAPAIKLI	PAGLALARAWAN	PAGPAPALIWANAG
PA	Paghihigpit na Paunang Pahintulot	Kinakailangan ninyo (o ng inyong doktor) na humingi ng paunang pahintulot sa L.A. Care Medicare Plus bago ninyo kunin ang reseta para sa gamot na ito. Kapag walang paunang pag-apruba, posibleng hindi saklawin ng L.A. Care Medicare Plus ang gamot na ito.
PA BvD	Paghihigpit na Paunang Pahintulot para sa Pagpapasya sa Part B vs Part D	Posibleng kwalipikadong bayaran ang gamot na ito sa ilalim ng Medicare Part B o Part D. Kailangan ninyo (o ng inyong doktor) na humingi ng paunang pahintulot sa L.A. Care Medicare Plus para matukoy kung sinasaklaw sa ilalim ng Medicare Part D ang gamot na ito bago ninyo kunin ang inyong reseta para sa gamot na ito. Kapag walang paunang pag-apruba, posibleng hindi saklawin ng L.A. Care Medicare Plus ang gamot na ito.
PA NSO	Paghihigpit na Paunang Pahintulot para sa Mga Kasisimula Pa Lang	Kung isa itong bagong reseta para sa inyo, ibig sabihin, ito ang unang beses na inireseta ang gamot na ito para sa inyo, kailangan ninyo (o ng inyong doktor) na humingi ng paunang pahintulot sa L.A. Care Medicare Plus bago ninyo kunin ang inyong reseta para sa gamot na ito. Kapag walang paunang pag-apruba, posibleng hindi saklawin ng L.A. Care Medicare Plus ang gamot na ito.
QL	Paghihigpit na Limitasyon sa Dami	Nililimitahan ng L.A. Care Medicare Plus ang dami ng sinasaklaw para sa isang partikular na tagal ng panahon para sa gamot na ito.
ST	Paghihigpit na Step Therapy	Bago saklawin ng L.A. Care Medicare Plus ang gamot na ito, dapat muna kayong sumubok ng ibang gamot sa pormularyo para magamot ang inyong medikal na kundisyon. Puwede lang saklawin ang gamot na ito kung hindi eepekto sa inyo ang ibang gamot.
ST NSO	Step Therapy para sa Mga Kasisimula Pa Lang	Kung isa itong bagong reseta para sa inyo, ibig sabihin, ito ang unang beses na inireseta ang gamot na ito para sa inyo, bago saklawin ng L.A. Care Medicare Plus ang gamot na ito, kailangan muna ninyong sumubok ng ibang gamot sa pormularyo para magamot ang inyong medikal na kundisyon. Puwede lang saklawin ang gamot na ito kung hindi eepekto sa inyo ang ibang gamot.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



Iba Pang Espesyal na Kinakailangan para sa Saklaw

LD	Gamot na Limitadong Ipinapamahagi	Posibleng sa ilang partikular na parmasya lang available ang resetang ito. Para sa higit pang impormasyon, sumangguni sa inyong <i>Direktoryo ng Provider/ Parmasya</i> o tumawag sa Mga Serbisyo sa Miyembro sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday.
NDS	Supply para sa Hindi Pinalawig na Araw	Ang mga gamot na may nakasulat na "NDS" ay limitado sa 1 buwang supply para sa Retail at Mail Order.
INS	Mga Insulin	Mga insulin na produkto sa maximum na \$35 kada buwan.
VAC	Bakuna	Mga Bakuna sa Medicare Part D na sinasaklaw sa \$0.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



Posibleng saklawin ng Medi-Cal Rx ang ibang gamot, gaya ng mga over-the-counter (OTC) na gamot at ilang partikular na bitamina. Mangyaring puntahan ang website ng Medi-Cal Rx (www.medi-calrx.dhcs.ca.gov) para sa higit pang impormasyon. Puwede rin kayong tumawag sa Customer Service Center ng Medi-Cal Rx sa 800-977-2273. Dalhin ang inyong Card ng Pagkakakilanlan ng Benepisyaryo (Beneficiary Identification Card, BIC) ng Medi-Cal kapag kumuha kayo ng mga reseta sa pamamagitan ng Medi-Cal Rx.

Mga Apela sa Ilalim ng Part D

- Ang pag-apela ay isang pormal na paraan ng paghiling sa amin na suriin ang isang pasyang ginawa namin tungkol sa inyong saklaw at baguhin ito kung sa palagay ninyo ay nagkamali kami.
- Halimbawa, puwede kaming magpasyang hindi sinasaklaw o hindi na sinasaklaw ng Medicare o Medi-Cal ang isang gamot na gusto ninyo.
- Kung kayo o ang inyong tagareseta ay hindi sumasang-ayon sa aming pasya, maaari kayong umapela. Kung sakaling may gusto kayong itanong, tumawag sa Mga Serbisyo sa Miyembro sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kabilang ang mga holiday o sa mga numerong nakalista sa ibabang bahagi ng pahinang ito o sa mga numero sa footer ng dokumentong ito.
- Maaari rin ninyong basahin ang **Kabanata 9** ng *Handbook ng Miyembro* upang alamin kung paano iapela ang isang pasya.
- Ang mga gamot na hindi Part D na gamot ay may iba't ibang tuntunin para sa mga apela.

C1. Listahan ng Mga Gamot ayon sa Medikal na Kundisyon

Ang mga gamot sa seksyong ito ay nakagrupo sa mga kategorya depende sa uri ng mga medikal na kundisyong ginagamot ng mga ito. Halimbawa, kung mayroon kayong kundisyon sa puso, dapat kayong maghanap sa kategoryang mga cardiovascular agent – Iba pa. Doon ninyo mahahanap ang mga gamot na nakakagamot ng mga kundisyon sa puso.

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.



D. Index ng Mga Saklaw na Gamot

Sa seksyong ito, mahahanap ninyo ang isang gamot sa pamamagitan ng paghahanap sa pangalan nito ayon sa alpabeto. Makikita ninyo rito ang page number kung saan kayo makakakuha ng karagdagang impormasyon ng saklaw para sa inyong gamot.

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 tab</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	
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
<i>armodafinil 50mg tab</i>	1	PA QL=30 EA/30 Days
<i>dexmethylphenidate 10mg tab</i>	1	
<i>dexmethylphenidate 2.5mg tab</i>	1	
<i>dexmethylphenidate 5mg tab</i>	1	
<i>methylphenidate 10mg er tab</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 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>methylphenidate 20mg tab</i>	1	
<i>methylphenidate 27mg er osmotic tab</i>	1	
<i>methylphenidate 27mg er tab</i>	1	
<i>methylphenidate 2mg/ml oral soln</i>	1	
<i>methylphenidate 36mg er osmotic tab</i>	1	
<i>methylphenidate 36mg er tab</i>	1	
<i>methylphenidate 54mg er osmotic tab</i>	1	
<i>methylphenidate 54mg er tab</i>	1	
<i>methylphenidate 5mg tab</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	
GENTAMICIN 1MG/ML INJ	1	
<i>gentamicin 40mg/ml inj</i>	1	
<i>neomycin sulfate 500mg tab</i>	1	
STREPTOMYCIN 1GM INJ	1	
TOBRAMYCIN 10MG/ML INJ	1	
<i>tobramycin 300mg/5ml inh soln</i>	1	PA QL=300 ML/30 Days
<i>tobramycin 80mg/2ml inj</i>	1	
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
<i>leflunomide 10mg tab</i>	1	
<i>leflunomide 20mg tab</i>	1	
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 1MG/ML ORAL SOLN	1	NDS PA QL=360 ML/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		
ADALIMUMAB-AATY 100MG/ML (0.2ML) SYRINGE	1	NDS PA QL=1 EA/28 Days
ADALIMUMAB-AATY 100MG/ML (0.4ML) SYRINGE	1	NDS PA 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
ADALIMUMAB-AATY 100MG/ML AUTO-INJECTOR (0.4ML)	1	NDS PA QL=3 EA/28 Days
ADALIMUMAB-AATY 100MG/ML AUTO-INJECTOR (0.8ML)	1	NDS PA QL=2 EA/28 Days
CIMZIA 200MG INJ	1	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE	1	NDS PA QL=2 EA/28 Days
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
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
SIMLANDI 40MG/0.4ML AUTO-INJECTOR	1	NDS PA QL=6 EA/28 Days
SIMLANDI 40MG/0.4ML SYRINGE	1	NDS PA QL=6 EA/28 Days
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 1.5% topical soln</i>	1	QL=300 ML/30 Days
<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>diflunisal 500mg 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 400mg 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>ibuprofen 600mg tab</i>	1	
<i>ibuprofen 800mg tab</i>	1	
<i>ketorolac tromethamine 10mg tab</i>	1	QL=20 EA/5 Days
<i>meloxicam 15mg tab</i>	1	
<i>meloxicam 7.5mg tab</i>	1	
<i>nabumetone 500mg tab</i>	1	
<i>nabumetone 750mg tab</i>	1	
<i>naproxen 250mg tab</i>	1	
<i>naproxen 375mg dr tab</i>	1	
<i>naproxen 375mg tab</i>	1	
<i>naproxen 500mg tab</i>	1	
<i>naproxen sodium 275mg tab</i>	1	
<i>naproxen sodium 550mg tab</i>	1	
<i>piroxicam 10mg cap</i>	1	
<i>piroxicam 20mg cap</i>	1	
<i>sulindac 150mg tab</i>	1	
<i>sulindac 200mg tab</i>	1	
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
ANALGESICS - OPIOID		
OPIOID AGONISTS		
<i>fentanyl 100mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 12mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 25mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 50mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 75mcg/hr patch</i>	1	QL=10 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
METHADONE 1MG/ML ORAL SOLN	1	QL=3600 ML/30 Days
METHADONE 2MG/ML ORAL SOLN	1	QL=1800 ML/30 Days
<i>methadone 5mg tab</i>	1	QL=360 EA/30 Days
<i>morphine sulfate 100mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg tab</i>	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
<i>morphine sulfate 30mg tab</i>	1	QL=180 EA/30 Days
<i>morphine sulfate 4mg/ml oral soln</i>	1	QL=900 ML/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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 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>codeine phosphate/acetaminophen 15-300mg tab</i>	1	QL=390 EA/30 Days
CODEINE PHOSPHATE/ACETAMINOPHEN 2.4-24MG/ML ORAL SOLN	1	QL=4980 ML/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 10-325mg tab</i>	1	QL=360 EA/30 Days
<i>endocet 2.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>endocet 5-325mg tab</i>	1	QL=360 EA/30 Days
<i>endocet 7.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>	1	QL=5400 ML/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
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>tramadol/acetaminophen 37.5-325mg tab</i>	1	QL=360 EA/30 Days
OPIOID PARTIAL AGONISTS		
<i>buprenorphine 2mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine 8mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 12-3mg sl film</i>	1	QL=60 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 4-1mg sl film</i>	1	QL=90 EA/30 Days
<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
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol 100mg cap</i>	1	
<i>danazol 200mg cap</i>	1	
<i>danazol 50mg 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>depo-testosterone 100mg/ml inj</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	QL=60 GM/30 Days
<i>procto-med 2.5% cream</i>	1	QL=60 GM/30 Days
<i>proctosol 2.5% cream</i>	1	QL=60 GM/30 Days
<i>proctozone hc 2.5% cream</i>	1	QL=60 GM/30 Days
VASODILATING AGENTS		
<i>nitroglycerin 0.4% rectal ointment</i>	1	QL=30 GM/30 Days
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole 200mg tab</i>	1	
<i>ivermectin 3mg tab</i>	1	PA QL=15 EA/90 Days
<i>praziquantel 600mg tab</i>	1	
ANTIANGINAL AGENTS		
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 120mg er 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/hr patch</i>	1	
<i>nitroglycerin 0.6mg sl 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>nitroglycerin 0.6mg/hr patch</i>	1	
ANTIANKXIETY AGENTS		
ANTIANKXIETY 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>clorazepate dipotassium 3.75mg tab</i>	1	QL=180 EA/30 Days
<i>clorazepate dipotassium 7.5mg tab</i>	1	QL=180 EA/30 Days
<i>diazepam 10mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 1mg/ml oral soln</i>	1	QL=1200 ML/30 Days
<i>diazepam 2mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg/ml oral soln</i>	1	QL=240 ML/30 Days
<i>lorazepam 0.5mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 1mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg tab</i>	1	QL=150 EA/30 Days
<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		

You can find information 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>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 100mg tab</i>	1	
<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 100mg tab</i>	1	
<i>pacerone 200mg tab</i>	1	
<i>pacerone 400mg tab</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
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
FASENRA 10MG/0.5ML SYRINGE	1	PA QL=.50 ML/28 Days
FASENRA 30MG/ML AUTO-INJECTOR	1	PA QL=1 ML/28 Days
FASENRA 30MG/ML SYRINGE	1	PA QL=1 ML/28 Days
NUCALA 100MG INJ	1	NDS PA QL=3 EA/28 Days
NUCALA 100MG/ML AUTO-INJECTOR	1	NDS PA QL=3 ML/28 Days
NUCALA 100MG/ML SYRINGE	1	NDS PA QL=3 ML/28 Days
NUCALA 40MG/0.4ML SYRINGE	1	NDS PA QL=.40 ML/28 Days
XOLAIR 150MG INJ	1	NDS PA QL=2 EA/28 Days
XOLAIR 150MG/ML AUTO-INJECTOR	1	NDS PA QL=2 ML/28 Days
XOLAIR 150MG/ML SYRINGE	1	NDS PA QL=2 ML/28 Days
XOLAIR 300MG/2ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
XOLAIR 300MG/2ML SYRINGE	1	NDS PA QL=8 ML/28 Days
XOLAIR 75MG/0.5ML AUTO-INJECTOR	1	NDS PA QL=1 ML/28 Days
XOLAIR 75MG/0.5ML SYRINGE	1	NDS PA QL=1 ML/28 Days
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG HFA INHALER	1	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH POWDER INHALER	1	QL=30 EA/30 Days
<i>ipratropium bromide 0.02% inh soln</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
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 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
STEROID INHALANTS		
ALVESCO 160MCG INHALER	1	QL=12.20 GM/30 Days
ALVESCO 80MCG INHALER	1	QL=12.20 GM/30 Days
ARNUITY 100MCG POWDER INHALER	1	QL=30 EA/30 Days
ARNUITY 200MCG POWDER INHALER	1	QL=30 EA/30 Days
ARNUITY 50MCG POWDER 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 0.25mg/2ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/2ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
<i>budesonide 1mg/2ml inh susp</i>	1	PA BvD QL=120 ML/30 Days
FLUTICASONE PROPIONATE 110MCG INHALER	1	QL=24 GM/30 Days
FLUTICASONE PROPIONATE 220MCG INHALER	1	QL=24 GM/30 Days
FLUTICASONE PROPIONATE 44MCG INHALER	1	QL=21.20 GM/30 Days
QVAR 40MCG REDIHALER	1	QL=21.20 GM/30 Days
QVAR 80MCG REDIHALER	1	QL=21.20 GM/30 Days
SYMPATHOMIMETICS		
ADVAIR 115-21MCG HFA INHALER	1	QL=12 GM/30 Days
ADVAIR 230-21MCG HFA INHALER	1	QL=12 GM/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER	1	QL=12 GM/30 Days
<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	1	PA BvD
<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	1	
<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	1	PA BvD
<i>albuterol 1.25mg/3ml neb soln</i>	1	PA BvD
<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 POWDER INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 100-25MCG POWDER INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 200-25MCG POWDER INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 50-25MCG POWDER INHALER	1	QL=60 EA/30 Days
<i>breynga 160-4.5mcg/act inhaler</i>	1	QL=10.30 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
<i>breyna 80-4.5mcg/act inhaler</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 INHALER	1	QL=8 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>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
<i>fluticasone propionate/salmeterol 100-50mcg/act powder inhaler</i>	1	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 250-50mcg/act powder inhaler</i>	1	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 500-50mcg/act 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/3ml neb soln</i>	1	PA BvD
LEVALBUTEROL 45MCG/ACT INHALER	1	ST QL=30 GM/30 Days
STIOLTO 2.5-2.5MCG/ACT INHALER	1	QL=4 GM/30 Days
STRIVERDI 2.5MCG/ACT INHALER	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 POWDER INHALER	1	QL=60 EA/30 Days
TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	1	QL=60 EA/30 Days
<i>wixela 100-50mcg powder inhaler</i>	1	QL=60 EA/30 Days
<i>wixela 250-50mcg powder inhaler</i>	1	QL=60 EA/30 Days
<i>wixela 500-50mcg powder inhaler</i>	1	QL=60 EA/30 Days
XOPENEX 45MCG INHALER	1	ST QL=30 GM/30 Days
ANTICOAGULANTS		
ANTICOAGULANTS - MISC.		
ELIQUIS 2.5MG TAB	1	QL=60 EA/30 Days
ELIQUIS 5MG 30-DAY STARTER PACK (74)	1	QL=74 EA/30 Days
ELIQUIS 5MG TAB	1	QL=74 EA/30 Days
XARELTO 10MG TAB	1	QL=30 EA/30 Days
XARELTO 15MG TAB	1	QL=60 EA/30 Days
XARELTO 1MG/ML ORAL SUSP	1	QL=620 ML/30 Days
XARELTO 2.5MG TAB	1	QL=60 EA/30 Days
XARELTO 20MG TAB	1	QL=30 EA/30 Days
XARELTO TAB STARTER PACK (51)	1	QL=51 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
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	
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>enoxaparin sodium 100mg/1ml syringe</i>	1	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	1	
<i>enoxaparin sodium 150mg/1ml syringe</i>	1	
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	1	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	1	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	1	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	1	
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	1	
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	1	
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	1	
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	1	
<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		
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	1	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml oral 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

You can find information 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>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	PA NSO QL=60 EA/30 Days
SYMPAZAN 20MG ORAL FILM	1	PA NSO QL=60 EA/30 Days
SYMPAZAN 5MG ORAL FILM	1	PA NSO QL=60 EA/30 Days
VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 5MG (5MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
ANTICONVULSANTS - MISC.		
APTIOM 200MG TAB	1	PA NSO QL=30 EA/30 Days
APTIOM 400MG TAB	1	PA NSO QL=30 EA/30 Days
APTIOM 600MG TAB	1	PA NSO QL=60 EA/30 Days
APTIOM 800MG TAB	1	PA NSO QL=60 EA/30 Days
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 QL=600 ML/30 Days
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 oral susp</i>	1	
<i>carbamazepine 300mg er cap</i>	1	
<i>carbamazepine 400mg er tab</i>	1	
DIACOMIT 250MG CAP	1	NDS PA NSO QL=360 EA/30 Days
DIACOMIT 250MG POWDER FOR ORAL SUSP	1	NDS PA NSO 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
DIACOMIT 500MG CAP	1	NDS PA NSO QL=180 EA/30 Days
DIACOMIT 500MG POWDER FOR ORAL SUSP	1	NDS PA NSO QL=180 EA/30 Days
EPIDIOLEX 100MG/ML ORAL SOLN	1	NDS PA NSO QL=600 ML/30 Days
<i>epitol 200mg tab</i>	1	
EPRONTIA 25MG/ML ORAL SOLN	1	PA NSO QL=480 ML/30 Days
FINTEPLA 2.2MG/ML ORAL SOLN	1	NDS PA NSO QL=360 ML/30 Days
FYCOMPA 0.5MG/ML ORAL SUSP	1	PA NSO QL=720 ML/30 Days
FYCOMPA 10MG TAB	1	PA NSO QL=30 EA/30 Days
FYCOMPA 12MG TAB	1	PA NSO QL=30 EA/30 Days
FYCOMPA 2MG TAB	1	PA NSO QL=30 EA/30 Days
FYCOMPA 4MG TAB	1	PA NSO QL=30 EA/30 Days
FYCOMPA 6MG TAB	1	PA NSO QL=30 EA/30 Days
FYCOMPA 8MG TAB	1	PA NSO QL=30 EA/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	QL=60 EA/30 Days
<i>lacosamide 10mg/ml oral soln</i>	1	QL=1200 ML/30 Days
<i>lacosamide 150mg tab</i>	1	QL=60 EA/30 Days
<i>lacosamide 200mg tab</i>	1	QL=60 EA/30 Days
<i>lacosamide 50mg tab</i>	1	QL=120 EA/30 Days
<i>lamotrigine 100mg tab</i>	1	
<i>lamotrigine 150mg tab</i>	1	
<i>lamotrigine 200mg tab</i>	1	
<i>lamotrigine 25mg chew tab</i>	1	
<i>lamotrigine 25mg tab</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 oral susp</i>	1	
<i>phenobarbital 100mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 15mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 16.2mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 30mg 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>phenobarbital 32.4mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 4mg/ml oral soln</i>	1	QL=1500 ML/30 Days
<i>phenobarbital 60mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 64.8mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 97.2mg tab</i>	1	QL=120 EA/30 Days
<i>phenytoin 25mg/ml oral susp</i>	1	
<i>phenytoin 50mg chew tab</i>	1	
<i>phenytoin sodium 100mg er cap</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	QL=900 ML/30 Days
<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	PA NSO QL=480 EA/30 Days
<i>rufinamide 400mg tab</i>	1	PA NSO QL=240 EA/30 Days
<i>rufinamide 40mg/ml oral susp</i>	1	PA NSO QL=2760 ML/30 Days
SPRITAM 1000MG TAB FOR ORAL SUSP	1	PA NSO QL=90 EA/30 Days
SPRITAM 250MG TAB FOR ORAL SUSP	1	PA NSO QL=360 EA/30 Days
SPRITAM 500MG TAB FOR ORAL SUSP	1	PA NSO QL=180 EA/30 Days
SPRITAM 750MG TAB FOR ORAL SUSP	1	PA NSO QL=120 EA/30 Days
<i>subvenite 100mg tab</i>	1	
<i>subvenite 150mg tab</i>	1	
<i>subvenite 200mg tab</i>	1	
<i>subvenite 25mg tab</i>	1	
<i>topiramate 100mg tab</i>	1	
<i>topiramate 15mg cap</i>	1	
<i>topiramate 200mg tab</i>	1	
<i>topiramate 25mg cap</i>	1	
<i>topiramate 25mg tab</i>	1	
<i>topiramate 50mg tab</i>	1	
ZONISADE 100MG/5ML ORAL SUSP	1	PA NSO QL=900 ML/30 Days
<i>zonisamide 100mg cap</i>	1	
<i>zonisamide 25mg cap</i>	1	
<i>zonisamide 50mg cap</i>	1	
ZTALMY 50MG/ML ORAL SUSP	1	NDS PA NSO QL=1100 ML/30 Days
CARBAMATES		
<i>felbamate 120mg/ml oral susp</i>	1	
<i>felbamate 400mg 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>felbamate 600mg tab</i>	1	
XCOPRI 100MG TAB	1	PA NSO QL=30 EA/30 Days
XCOPRI 150MG TAB	1	PA NSO QL=60 EA/30 Days
XCOPRI 200MG TAB	1	PA NSO QL=60 EA/30 Days
XCOPRI 25MG TAB	1	PA NSO QL=30 EA/30 Days
XCOPRI 50MG TAB	1	PA NSO QL=30 EA/30 Days
XCOPRI TAB 100/150MG MAINTENANCE PACK (56)	1	PA NSO QL=56 EA/28 Days
XCOPRI TAB 12.5/25MG TITRATION PACK (28)	1	PA NSO QL=28 EA/28 Days
XCOPRI TAB 150/200MG PACK (56)	1	PA NSO QL=56 EA/28 Days
XCOPRI TAB 150/200MG TITRATION PACK (28)	1	PA NSO QL=28 EA/28 Days
XCOPRI TAB 50/100MG TITRATION PACK (28)	1	PA NSO QL=28 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 QL=180 EA/30 Days
<i>vigabatrin 500mg tab</i>	1	PA NSO QL=180 EA/30 Days
<i>vigadrone 500mg powder for oral soln</i>	1	PA NSO QL=180 EA/30 Days
<i>vigadrone 500mg tab</i>	1	PA NSO QL=180 EA/30 Days
VIGAFYDE 100MG/ML ORAL SOLN	1	PA NSO QL=720 ML/30 Days
<i>vigpoder 500mg powder for oral soln</i>	1	PA NSO QL=180 EA/30 Days
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		
ANTIDEPRESSANTS - MISC.		
AUVELITY 105-45MG ER TAB	1	PA NSO QL=60 EA/30 Days
<i>bupropion 100mg sr (12hr) tab</i>	1	
<i>bupropion 100mg tab</i>	1	
<i>bupropion 150mg sr (12 hr) tab</i>	1	
<i>bupropion 200mg sr (12hr) tab</i>	1	
<i>bupropion 75mg tab</i>	1	
<i>bupropion xl 150mg (24 hr) tab</i>	1	
<i>bupropion xl 300mg (24hr) 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>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	
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	PA NSO QL=30 EA/30 Days
EMSAM 6MG/24HR PATCH	1	PA NSO QL=30 EA/30 Days
EMSAM 9MG/24HR PATCH	1	PA NSO QL=30 EA/30 Days
MARPLAN 10MG TAB	1	
PHENELZINE 15MG TAB	1	
<i>tranlycypromine 10mg tab</i>	1	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram 10mg tab</i>	1	
<i>citalopram 20mg tab</i>	1	
<i>citalopram 2mg/ml oral soln</i>	1	QL=600 ML/30 Days
<i>citalopram 40mg tab</i>	1	
<i>escitalopram 10mg tab</i>	1	
<i>escitalopram 1mg/ml oral soln</i>	1	QL=600 ML/30 Days
<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	QL=600 ML/30 Days
<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 10mg/5ml oral susp</i>	1	PA NSO QL=900 ML/30 Days
<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 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	QL=300 ML/30 Days
<i>sertraline 25mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>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	PA NSO QL=30 EA/30 Days
<i>vilazodone 20mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>vilazodone 40mg tab</i>	1	PA NSO QL=30 EA/30 Days
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<i>desvenlafaxine succinate 100mg er tab</i>	1	
<i>desvenlafaxine succinate 25mg er tab</i>	1	
<i>desvenlafaxine succinate 50mg er tab</i>	1	
DRIZALMA 20MG DR SPRINKLE CAP	1	PA NSO QL=60 EA/30 Days
DRIZALMA 30MG DR SPRINKLE CAP	1	PA NSO QL=60 EA/30 Days
DRIZALMA 40MG DR SPRINKLE CAP	1	PA NSO QL=60 EA/30 Days
DRIZALMA 60MG DR SPRINKLE 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	PA NSO QL=30 EA/30 Days
FETZIMA 20MG ER CAP	1	PA NSO QL=30 EA/30 Days
FETZIMA 40MG ER CAP	1	PA NSO QL=30 EA/30 Days
FETZIMA 80MG ER CAP	1	PA NSO QL=30 EA/30 Days
FETZIMA ER CAP TITRATION PACK (28)	1	PA 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

You can find information 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>amitriptyline 50mg tab</i>	1	PA NSO
<i>amitriptyline 75mg tab</i>	1	PA NSO
<i>amoxapine 100mg tab</i>	1	PA NSO
<i>amoxapine 150mg tab</i>	1	PA NSO
<i>amoxapine 25mg tab</i>	1	PA NSO
<i>amoxapine 50mg tab</i>	1	PA NSO
<i>clomipramine 25mg cap</i>	1	PA NSO
<i>clomipramine 50mg cap</i>	1	PA NSO
<i>clomipramine 75mg cap</i>	1	PA NSO
<i>desipramine 100mg tab</i>	1	PA NSO
<i>desipramine 10mg tab</i>	1	PA NSO
<i>desipramine 150mg tab</i>	1	PA NSO
<i>desipramine 25mg tab</i>	1	PA NSO
<i>desipramine 50mg tab</i>	1	PA NSO
<i>desipramine 75mg tab</i>	1	PA NSO
<i>doxepin 100mg cap</i>	1	PA NSO
<i>doxepin 10mg cap</i>	1	PA NSO
<i>doxepin 10mg/ml oral soln</i>	1	PA NSO
<i>doxepin 150mg cap</i>	1	PA NSO
<i>doxepin 25mg cap</i>	1	PA NSO
<i>doxepin 50mg cap</i>	1	PA NSO
<i>doxepin 75mg cap</i>	1	PA NSO
<i>imipramine 10mg tab</i>	1	PA NSO
<i>imipramine 25mg tab</i>	1	PA NSO
<i>imipramine 50mg tab</i>	1	PA NSO
<i>nortriptyline 10mg cap</i>	1	
<i>nortriptyline 25mg cap</i>	1	
<i>nortriptyline 2mg/ml oral soln</i>	1	
<i>nortriptyline 50mg cap</i>	1	
<i>nortriptyline 75mg cap</i>	1	
<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		
ANTIDIABETIC COMBINATIONS		
<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	
GLYXAMBI 10-5MG TAB	1	QL=30 EA/30 Days
GLYXAMBI 25-5MG TAB	1	QL=30 EA/30 Days
JANUMET 50-1000MG TAB	1	QL=60 EA/30 Days
JANUMET 50-500MG TAB	1	QL=60 EA/30 Days
JANUMET XR 100-1000MG 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
JANUMET XR 50-1000MG TAB	1	QL=60 EA/30 Days
JANUMET XR 50-500MG TAB	1	QL=60 EA/30 Days
JENTADUETO 2.5-1000MG TAB	1	QL=60 EA/30 Days
JENTADUETO 2.5-500MG TAB	1	QL=60 EA/30 Days
JENTADUETO XR 2.5-1000MG TAB	1	QL=60 EA/30 Days
JENTADUETO XR 5-1000MG TAB	1	QL=30 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 5-1000MG TAB	1	QL=60 EA/30 Days
SYNJARDY 5-500MG TAB	1	QL=60 EA/30 Days
SYNJARDY XR 10-1000MG TAB	1	QL=30 EA/30 Days
SYNJARDY XR 12.5-1000MG TAB	1	QL=60 EA/30 Days
SYNJARDY XR 25-1000MG TAB	1	QL=30 EA/30 Days
SYNJARDY XR 5-1000MG TAB	1	QL=60 EA/30 Days
TRIJARDY XR 10-5-1000MG TAB	1	QL=30 EA/30 Days
TRIJARDY XR 12.5-2.5-1000MG TAB	1	QL=60 EA/30 Days
TRIJARDY XR 25-5-1000MG TAB	1	QL=30 EA/30 Days
TRIJARDY XR 5-2.5-1000MG 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
DIABETIC OTHER		
<i>acarbose 100mg tab</i>	1	
<i>acarbose 25mg tab</i>	1	
<i>acarbose 50mg tab</i>	1	
BAQSIMI 3MG/DOSE NASAL POWDER	1	QL=2 EA/7 Days
<i>diazoxide 50mg/ml oral susp</i>	1	
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
<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	
<i>mifepristone 300mg tab</i>	1	PA QL=120 EA/30 Days
<i>nateglinide 120mg tab</i>	1	
<i>nateglinide 60mg tab</i>	1	
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<i>pioglitazone 45mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>repaglinide 1mg tab</i>	1	
<i>repaglinide 2mg tab</i>	1	
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
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
TRADJENTA 5MG TAB	1	QL=30 EA/30 Days
INCRETIN MIMETIC AGENTS		
<i>liraglutide 18mg/3ml pen inj</i>	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
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
INSULIN		
HUMALOG 100UNIT/ML CARTRIDGE	1	INS
HUMALOG 100UNIT/ML KWIKPEN	1	INS
HUMALOG 200UNIT/ML KWIKPEN	1	INS
HUMALOG JUNIOR 100UNIT/ML PEN INJ	1	INS
HUMALOG MIX (50/50) 100UNIT/ML PEN INJ	1	INS
HUMALOG MIX (75/25) 100UNIT/ML INJ	1	INS
HUMALOG MIX (75/25) 100UNIT/ML KWIKPEN	1	INS
HUMULIN (70/30) 100UNIT/ML INJ	1	INS
HUMULIN (70/30) 100UNIT/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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TOUJEO 300UNIT/ML PEN INJ (1.5ML)	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
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	
ANTIDIARRHEALS		
ANTIDIARRHEAL AGENTS - MISC.		
<i>alosetron 0.5mg tab</i>	1	QL=60 EA/30 Days
<i>alosetron 1mg tab</i>	1	QL=60 EA/30 Days
<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	1	
<i>loperamide 2mg cap</i>	1	
XERMELO 250MG TAB	1	NDS PA QL=84 EA/28 Days
ANTIDOTES AND SPECIFIC ANTAGONISTS		
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>naltrexone 50mg tab</i>	1	
OPVEE 2.7MG/0.1ML NASAL SPRAY	1	
ZIMHI 5MG/0.5ML SYRINGE	1	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron 1mg tab</i>	1	PA BvD QL=60 EA/30 Days
<i>ondansetron 0.8mg/ml oral soln</i>	1	PA BvD
<i>ondansetron 4mg odt</i>	1	PA BvD
<i>ondansetron 4mg tab</i>	1	PA BvD
<i>ondansetron 8mg odt</i>	1	PA BvD
<i>ondansetron 8mg tab</i>	1	PA BvD
ANTIEMETICS - ANTICHOLINERGIC		

You can find information 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>meclizine 12.5mg tab</i>	1	
<i>meclizine 25mg tab</i>	1	
<i>scopolamine 1mg/72hr patch</i>	1	QL=10 EA/30 Days
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
<i>caspofungin acetate 50mg inj</i>	1	PA
<i>caspofungin acetate 70mg inj</i>	1	PA
<i>micafungin sodium 100mg inj</i>	1	
<i>micafungin sodium 50mg inj</i>	1	
ANTIFUNGALS		
ABELCET 5MG/ML INJ	1	PA BvD
AMPHOTERICIN B 50MG INJ	1	PA BvD
<i>flucytosine 250mg cap</i>	1	
<i>flucytosine 500mg cap</i>	1	
<i>griseofulvin 125mg tab</i>	1	
<i>griseofulvin 250mg tab</i>	1	
<i>griseofulvin 25mg/ml oral 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 oral susp</i>	1	
<i>fluconazole 150mg tab</i>	1	
<i>fluconazole 200mg tab</i>	1	
<i>fluconazole 200mg/100ml inj</i>	1	
<i>fluconazole 400mg/200ml inj</i>	1	
<i>fluconazole 40mg/ml oral susp</i>	1	
<i>fluconazole 50mg tab</i>	1	
<i>itraconazole 100mg cap</i>	1	QL=120 EA/30 Days
<i>ketoconazole 200mg tab</i>	1	
<i>posaconazole 100mg dr tab</i>	1	PA QL=96 EA/30 Days
<i>posaconazole 40mg/ml oral susp</i>	1	PA QL=630 ML/30 Days
<i>voriconazole 200mg inj</i>	1	PA
<i>voriconazole 200mg tab</i>	1	PA QL=120 EA/30 Days
<i>voriconazole 40mg/ml oral susp</i>	1	PA QL=400 ML/30 Days
<i>voriconazole 50mg tab</i>	1	PA QL=480 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIHYPERLIPIDEMICS		
ANTIHYPERLIPIDEMICS - MISC.		
<i>ezetimibe 10mg tab</i>	1	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-10mg tab</i>	1	
<i>ezetimibe/simvastatin 10-20mg tab</i>	1	
<i>ezetimibe/simvastatin 10-40mg tab</i>	1	
<i>ezetimibe/simvastatin 10-80mg tab</i>	1	
<i>icosapent ethyl 1000mg cap</i>	1	QL=120 EA/30 Days
<i>icosapent ethyl 500mg cap</i>	1	QL=120 EA/30 Days
NEXLETOL 180MG TAB	1	PA QL=30 EA/30 Days
NEXLIZET 180-10MG TAB	1	PA QL=30 EA/30 Days
<i>niacin 1000mg er tab</i>	1	
<i>niacin 500mg er tab</i>	1	
<i>niacin 750mg er tab</i>	1	
<i>omega-3 acid ethyl esters (usp) 1gm cap</i>	1	QL=120 EA/30 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
BILE ACID SEQUESTRANTS		
<i>cholestyramine resin (sugar-free) 4gm powder for oral susp</i>	1	
<i>cholestyramine resin 4gm powder for oral susp</i>	1	
<i>colesevelam 625mg tab</i>	1	
<i>colestipol 1gm tab</i>	1	
<i>colestipol 5000mg granules for oral susp</i>	1	
<i>prevalite 4gm powder for oral susp</i>	1	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate 134mg cap</i>	1	
<i>fenofibrate 145mg tab</i>	1	
<i>fenofibrate 160mg tab</i>	1	
<i>fenofibrate 200mg cap</i>	1	
<i>fenofibrate 48mg tab</i>	1	
<i>fenofibrate 54mg tab</i>	1	
<i>fenofibrate 67mg cap</i>	1	
<i>fenofibric acid 135mg dr cap</i>	1	
<i>fenofibric acid 45mg dr cap</i>	1	
<i>gemfibrozil 600mg tab</i>	1	QL=60 EA/30 Days
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin 10mg tab</i>	1	
<i>atorvastatin 20mg tab</i>	1	
<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	

You can find information 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>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	
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>quinapril 40mg tab</i>	1	
<i>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	1	
<i>ramipril 10mg cap</i>	1	
<i>ramipril 2.5mg cap</i>	1	
<i>ramipril 5mg cap</i>	1	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil 16mg tab</i>	1	
<i>candesartan cilexetil 32mg tab</i>	1	
<i>candesartan cilexetil 4mg tab</i>	1	
<i>candesartan cilexetil 8mg tab</i>	1	
<i>irbesartan 150mg tab</i>	1	
<i>irbesartan 300mg tab</i>	1	
<i>irbesartan 75mg tab</i>	1	
<i>losartan potassium 100mg tab</i>	1	
<i>losartan potassium 25mg tab</i>	1	
<i>losartan potassium 50mg tab</i>	1	
<i>olmesartan medoxomil 20mg tab</i>	1	
<i>olmesartan medoxomil 40mg tab</i>	1	
<i>olmesartan medoxomil 5mg tab</i>	1	
<i>telmisartan 20mg tab</i>	1	
<i>telmisartan 40mg tab</i>	1	
<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	QL=4 EA/28 Days
<i>clonidine 0.2mg tab</i>	1	
<i>clonidine 0.2mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>clonidine 0.3mg tab</i>	1	
<i>clonidine 0.3mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<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	

You can find information 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>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>		
<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	

You can find information 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>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	1	
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	1	
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	1	
<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	
ANTIHYPERTENSIVES - MISC.		
<i>aliskiren 150mg tab</i>	1	
<i>aliskiren 300mg tab</i>	1	
<i>eplerenone 25mg tab</i>	1	
<i>eplerenone 50mg tab</i>	1	
<i>metyrosine 250mg cap</i>	1	NDS PA
VASODILATORS		
<i>hydralazine 100mg tab</i>	1	
<i>hydralazine 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
hydralazine 25mg tab	1	
hydralazine 50mg tab	1	
minoxidil 10mg tab	1	
minoxidil 2.5mg tab	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
azithromycin 20mg/ml oral susp	1	
azithromycin 250mg pack (6)	1	
azithromycin 250mg tab	1	
azithromycin 40mg/ml oral susp	1	
azithromycin 500mg inj	1	
azithromycin 500mg tab	1	
azithromycin 500mg tab pack (3)	1	
azithromycin 600mg tab	1	
aztreonam 1gm inj	1	
aztreonam 2gm inj	1	
cefepime 1000mg inj	1	
cefepime 2000mg inj	1	
clarithromycin 250mg tab	1	
CLARITHROMYCIN 25MG/ML ORAL SUSP	1	
clarithromycin 500mg tab	1	
CLARITHROMYCIN 50MG/ML ORAL SUSP	1	
clindamycin 150mg cap	1	
clindamycin 300mg cap	1	
clindamycin 300mg/50ml inj	1	
clindamycin 600mg/50ml inj	1	
clindamycin 75mg cap	1	
clindamycin 75mg/5ml oral soln	1	
clindamycin 900mg/50ml inj	1	
clindamycin 900mg/6ml inj	1	
colistin 75mg/ml inj	1	
daptomycin 500mg inj	1	
DIFICID 200MG TAB	1	PA QL=20 EA/10 Days
DIFICID 40MG/ML ORAL SUSP	1	PA QL=136 ML/10 Days
ery-tab 250mg dr tab	1	
ery-tab 333mg dr tab	1	
ery-tab 500mg dr tab	1	
erythromycin 250mg dr tab	1	
erythromycin 250mg tab	1	
erythromycin 333mg dr tab	1	
erythromycin 500mg dr tab	1	
erythromycin 500mg tab	1	
erythromycin ethylsuccinate 40mg/ml oral susp	1	
erythromycin ethylsuccinate 80mg/ml oral susp	1	
linezolid 100mg/5ml oral susp	1	PA QL=1800 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>linezolid 600mg tab</i>	1	QL=60 EA/30 Days
<i>linezolid 600mg/300ml inj</i>	1	PA
<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 300mg/6ml inh soln</i>	1	PA BvD QL=1 EA/28 Days
TEFLARO 400MG INJ	1	NDS
TEFLARO 600MG INJ	1	NDS
<i>tigecycline 50mg inj</i>	1	NDS
<i>tinidazole 250mg tab</i>	1	
<i>tinidazole 500mg tab</i>	1	
<i>trimethoprim 100mg tab</i>	1	
<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	
XIFAXAN 550MG TAB	1	PA QL=60 EA/30 Days
ANTIPROTOZOAL AGENTS		
<i>atovaquone 750mg/5ml oral 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 1gm inj</i>	1	
<i>meropenem 500mg inj</i>	1	
URINARY ANTI-INFECTIVES		
<i>methenamine hippurate 1gm 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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydroxychloroquine sulfate 400mg tab</i>	1	
<i>mefloquine 250mg tab</i>	1	
PRIMAQUINE PHOSPHATE 26.3MG TAB	1	
<i>pyrimethamine 25mg tab</i>	1	PA QL=90 EA/30 Days
<i>quinine sulfate 324mg cap</i>	1	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE 10MG TAB	1	NDS PA
<i>pyridostigmine bromide 60mg tab</i>	1	
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>dapsone 100mg tab</i>	1	
<i>dapsone 25mg tab</i>	1	
<i>ethambutol 100mg tab</i>	1	
<i>ethambutol 400mg tab</i>	1	
<i>isoniazid 100mg tab</i>	1	
<i>isoniazid 10mg/ml oral soln</i>	1	
<i>isoniazid 300mg tab</i>	1	
PRIFTIN 150MG TAB	1	
<i>pyrazinamide 500mg tab</i>	1	
<i>rifabutin 150mg cap</i>	1	
<i>rifampin 150mg cap</i>	1	
<i>rifampin 300mg cap</i>	1	
<i>rifampin 600mg inj</i>	1	
SIRTURO 100MG TAB	1	NDS PA
SIRTURO 20MG TAB	1	NDS PA
TRECTOR 250MG TAB	1	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE 25MG TAB	1	PA BvD
CYCLOPHOSPHAMIDE 50MG TAB	1	PA BvD
GLEOSTINE 100MG CAP	1	
GLEOSTINE 10MG CAP	1	
GLEOSTINE 40MG CAP	1	
ANTIMETABOLITES		
JYLAMVO 2MG/ML ORAL SOLN	1	PA NSO
<i>mercaptopurine 50mg tab</i>	1	
<i>methotrexate 2.5mg tab</i>	1	
METHOTREXATE 25MG/ML INJ	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 ORAL SUSP	1	PA NSO QL=300 ML/30 Days
XATMEP 2.5MG/ML ORAL SOLN	1	PA NSO
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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 (30)	1	NDS PA NSO QL=30 EA/30 Days
LENVIMA 12MG DAILY DOSE PACK (90)	1	NDS PA NSO QL=90 EA/30 Days
LENVIMA 14MG DAILY DOSE PACK (60)	1	NDS PA NSO QL=60 EA/30 Days
LENVIMA 18MG DAILY DOSE PACK (90)	1	NDS PA NSO QL=90 EA/30 Days
LENVIMA 20MG DAILY DOSE PACK (60)	1	NDS PA NSO QL=60 EA/30 Days
LENVIMA 24MG DAILY DOSE PACK (90)	1	NDS PA NSO QL=90 EA/30 Days
LENVIMA 4MG DAILY DOSE PACK (30)	1	NDS PA NSO QL=30 EA/30 Days
LENVIMA 8MG DAILY DOSE PACK (60)	1	NDS PA NSO QL=60 EA/30 Days
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>erlotinib 150mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>erlotinib 25mg tab</i>	1	PA NSO QL=90 EA/30 Days
<i>gefitinib 250mg tab</i>	1	PA NSO QL=60 EA/30 Days
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
LAZCLUZE 240MG TAB	1	NDS PA NSO QL=30 EA/30 Days
LAZCLUZE 80MG TAB	1	NDS PA NSO QL=60 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 QL=28 EA/28 Days
ODOMZO 200MG CAP	1	NDS PA NSO QL=30 EA/30 Days
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	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
FIRMAGON 120MG INJ	1	PA NSO QL=4 EA/365 Days
FIRMAGON 80MG INJ	1	PA NSO QL=1 EA/28 Days
<i>letrozole 2.5mg tab</i>	1	
LUPRON 11.25MG SYRINGE (3 MONTH)	1	QL=1 EA/84 Days
LUPRON 3.75MG SYRINGE (1 MONTH)	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 oral susp</i>	1	PA
<i>nilutamide 150mg tab</i>	1	
NUBEQA 300MG TAB	1	NDS PA NSO QL=120 EA/30 Days
ORGOVYX 120MG TAB	1	NDS PA NSO QL=30 EA/28 Days
ORSERDU 345MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ORSERDU 86MG TAB	1	NDS PA NSO QL=90 EA/30 Days
SOLTAMOX 10MG/5ML ORAL SOLN	1	PA NSO QL=600 ML/30 Days
<i>tamoxifen 10mg tab</i>	1	
<i>tamoxifen 20mg tab</i>	1	
<i>toremifene 60mg tab</i>	1	QL=30 EA/30 Days
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	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 COMBINATIONS		
INQOVI 35-100MG TAB PACK (5)	1	NDS PA NSO QL=5 EA/28 Days
KISQALI/FEMARA 400 CO-PACK (70)	1	NDS PA NSO QL=70 EA/28 Days
KISQALI/FEMARA 600 CO-PACK (91)	1	NDS PA NSO QL=91 EA/28 Days
LONSURF 6.14-15MG TAB	1	NDS PA NSO QL=100 EA/28 Days
LONSURF 8.19-20MG TAB	1	NDS PA NSO QL=80 EA/28 Days
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA 150MG CAP	1	NDS PA NSO QL=240 EA/30 Days
ALUNBRIG 180MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ALUNBRIG 30MG TAB	1	NDS PA NSO QL=120 EA/30 Days
ALUNBRIG 90MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ALUNBRIG TAB INITIATION PACK (30)	1	NDS PA NSO QL=30 EA/30 Days
AUGTYRO 160MG CAP	1	NDS PA NSO QL=60 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=180 EA/30 Days
BOSULIF 100MG TAB	1	NDS PA NSO QL=90 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BOSULIF 50MG CAP	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 (56)	1	NDS PA NSO QL=56 EA/28 Days
COMETRIQ CAP 140MG DAILY DOSE PACK (112)	1	NDS PA NSO QL=112 EA/28 Days
COMETRIQ CAP 60MG DAILY DOSE PACK (84)	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	PA NSO QL=30 EA/30 Days
<i>dasatinib 140mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>dasatinib 20mg tab</i>	1	PA NSO QL=90 EA/30 Days
<i>dasatinib 50mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>dasatinib 70mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>dasatinib 80mg tab</i>	1	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
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

You can find information 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>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 ORAL SUSP	1	NDS PA NSO QL=216 ML/27 Days
IMKELDI 80MG/ML ORAL SOLN	1	NDS PA NSO QL=280 ML/28 Days
INREBIC 100MG CAP	1	NDS PA NSO QL=120 EA/30 Days
ITOVEBI 3MG TAB	1	NDS PA NSO QL=56 EA/28 Days
ITOVEBI 9MG TAB	1	NDS PA NSO QL=28 EA/28 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 TAB 200MG DAILY DOSE PACK (21)	1	NDS PA NSO QL=21 EA/28 Days
KISQALI TAB 400MG DAILY DOSE PACK (42)	1	NDS PA NSO QL=42 EA/28 Days
KISQALI TAB 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 QL=180 EA/30 Days
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 240MG TAB	1	NDS PA NSO QL=120 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 TAB 12MG DAILEY DOSE PACK (21)	1	NDS PA NSO QL=84 EA/28 Days
LYTGOBI TAB 16MG DAILEY DOSE PACK (28)	1	NDS PA NSO QL=112 EA/28 Days
LYTGOBI TAB 20MG DAILEY DOSE PACK (35)	1	NDS PA NSO QL=140 EA/28 Days
MEKINIST 0.05MG/ML ORAL SOLN	1	NDS PA NSO QL=1260 ML/30 Days
MEKINIST 0.5MG TAB	1	NDS PA NSO QL=90 EA/30 Days
MEKINIST 2MG TAB	1	NDS PA NSO QL=30 EA/30 Days
MEKTOVI 15MG TAB	1	NDS PA NSO QL=180 EA/30 Days
NERLYNX 40MG TAB	1	NDS PA NSO QL=180 EA/30 Days
NINLARO 2.3MG CAP	1	NDS PA NSO QL=3 EA/28 Days
NINLARO 3MG CAP	1	NDS PA NSO QL=3 EA/28 Days
NINLARO 4MG CAP	1	NDS PA NSO QL=3 EA/28 Days
OGSIVEO 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	1	NDS PA NSO QL=16 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 TAB 200MG DAILY DOSE PACK (28)	1	NDS PA NSO QL=28 EA/28 Days
PIQRAY TAB 250MG DAILY DOSE PACK (56)	1	NDS PA NSO QL=56 EA/28 Days
PIQRAY TAB 300MG DAILY DOSE PACK (56)	1	NDS PA NSO QL=56 EA/28 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 QL=28 EA/28 Days
<i>sunitinib 25mg cap</i>	1	PA NSO QL=28 EA/28 Days
<i>sunitinib 37.5mg cap</i>	1	PA NSO QL=28 EA/28 Days
<i>sunitinib 50mg cap</i>	1	PA NSO QL=28 EA/28 Days
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TALZENNA 0.25MG CAP	1	NDS PA NSO QL=30 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
VORANIGO 10MG TAB	1	NDS PA NSO QL=60 EA/30 Days
VORANIGO 40MG TAB	1	NDS PA NSO QL=30 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 QL=120 EA/30 Days
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.		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ACTIMMUNE 2000000UNIT/0.5ML INJ	1	NDS PA NSO
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
BESREMI 500MCG/ML SYRINGE	1	NDS PA NSO QL=2 ML/28 Days
<i>bexarotene 75mg cap</i>	1	PA NSO QL=300 EA/30 Days
<i>hydroxyurea 500mg cap</i>	1	
MATULANE 50MG CAP	1	NDS
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
REVUFORJ 110MG TAB	1	NDS PA NSO QL=120 EA/30 Days
REVUFORJ 160MG TAB	1	NDS PA NSO QL=60 EA/30 Days
<i>tretinoin 10mg cap</i>	1	
TUKYSA 150MG TAB	1	NDS PA NSO QL=120 EA/30 Days
TUKYSA 50MG TAB	1	NDS PA NSO QL=120 EA/30 Days
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 (42)	1	NDS PA NSO QL=42 EA/28 Days
WELIREG 40MG TAB	1	NDS PA NSO QL=90 EA/30 Days
XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	1	NDS PA NSO QL=8 EA/28 Days
XPOVIO TAB 40MG ONCE WEEKLY CARTON (4)	1	NDS PA NSO QL=4 EA/28 Days
XPOVIO TAB 40MG TWICE WEEKLY CARTON (8)	1	NDS PA NSO QL=8 EA/28 Days
XPOVIO TAB 60MG ONCE WEEKLY CARTON (4)	1	NDS PA NSO QL=4 EA/28 Days
XPOVIO TAB 60MG TWICE WEEKLY CARTON (24)	1	NDS PA NSO QL=24 EA/28 Days
XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	1	NDS PA NSO QL=8 EA/28 Days
XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	1	NDS PA NSO QL=32 EA/28 Days
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	
<i>mesna 400mg tab</i>	1	
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa 25mg tab</i>	1	
<i>entacapone 200mg tab</i>	1	
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate 0.5mg tab</i>	1	
<i>benztropine mesylate 1mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>benztropine mesylate 2mg tab</i>	1	
<i>trihexyphenidyl 2mg tab</i>	1	
<i>trihexyphenidyl 5mg tab</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine 100mg cap</i>	1	
<i>amantadine 10mg/ml oral soln</i>	1	
<i>bromocriptine 2.5mg tab</i>	1	
<i>bromocriptine 5mg cap</i>	1	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	1	
CARBIDOPA/LEVODOPA 10-100MG ODT	1	
<i>carbidopa/levodopa 10-100mg tab</i>	1	
<i>carbidopa/levodopa 25-100mg er tab</i>	1	
CARBIDOPA/LEVODOPA 25-100MG ODT	1	
<i>carbidopa/levodopa 25-100mg tab</i>	1	
CARBIDOPA/LEVODOPA 25-250MG ODT	1	
<i>carbidopa/levodopa 25-250mg tab</i>	1	
<i>carbidopa/levodopa 50-200mg er tab</i>	1	
<i>pramipexole 0.125mg tab</i>	1	
<i>pramipexole 0.25mg tab</i>	1	
<i>pramipexole 0.5mg tab</i>	1	
<i>pramipexole 0.75mg tab</i>	1	
<i>pramipexole 1.5mg tab</i>	1	
<i>pramipexole 1mg tab</i>	1	
<i>ropinirole 0.25mg tab</i>	1	
<i>ropinirole 0.5mg tab</i>	1	
<i>ropinirole 1mg tab</i>	1	
<i>ropinirole 2mg tab</i>	1	
<i>ropinirole 3mg tab</i>	1	
<i>ropinirole 4mg tab</i>	1	
<i>ropinirole 5mg tab</i>	1	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>rasagiline 1mg tab</i>	1	QL=30 EA/30 Days
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lithium carbonate 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
COBENFY 20-100MG CAP	1	PA NSO QL=60 EA/30 Days
COBENFY 20-50MG CAP	1	PA NSO QL=60 EA/30 Days
COBENFY 30-125MG CAP	1	PA NSO QL=60 EA/30 Days
COBENFY CAP 28-DAY STARTER KIT PACK (56)	1	PA NSO QL=56 EA/28 Days
<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 (5ml) inj</i>	1	
<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	1	
<i>haloperidol decanoate 50mg/ml (5ml) inj</i>	1	
<i>lurasidone 120mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>lurasidone 20mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>lurasidone 40mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>lurasidone 60mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>lurasidone 80mg tab</i>	1	ST_NSO QL=60 EA/30 Days
MOLINDONE 10MG TAB	1	
MOLINDONE 25MG TAB	1	
MOLINDONE 5MG TAB	1	
NUPLAZID 10MG TAB	1	PA NSO QL=30 EA/30 Days
NUPLAZID 34MG CAP	1	PA NSO QL=30 EA/30 Days
<i>thiothixene 10mg cap</i>	1	
<i>thiothixene 1mg cap</i>	1	
<i>thiothixene 2mg cap</i>	1	
<i>thiothixene 5mg cap</i>	1	
VRAYLAR 1.5MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 3MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 4.5MG CAP	1	PA NSO QL=30 EA/30 Days
VRAYLAR 6MG CAP	1	PA NSO QL=30 EA/30 Days
<i>ziprasidone 20mg cap</i>	1	
<i>ziprasidone 20mg inj</i>	1	PA NSO QL=60 EA/30 Days
<i>ziprasidone 40mg cap</i>	1	

You can find information 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>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 TAB TITRATION PACK (8)	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	QL=60 EA/30 Days
<i>risperidone 0.25mg tab</i>	1	
<i>risperidone 0.5mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 0.5mg tab</i>	1	
<i>risperidone 1mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 1mg tab</i>	1	
<i>risperidone 1mg/ml oral soln</i>	1	QL=240 ML/30 Days
<i>risperidone 2mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 2mg tab</i>	1	
<i>risperidone 37.5mg inj</i>	1	PA NSO QL=2 EA/28 Days
<i>risperidone 3mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 3mg tab</i>	1	
<i>risperidone 4mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 4mg tab</i>	1	
<i>risperidone 50mg inj</i>	1	PA NSO QL=2 EA/28 Days
<i>risperidone microspheres 12.5mg inj</i>	1	PA NSO QL=2 EA/28 Days
<i>risperidone microspheres 25mg 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
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
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	QL=270 EA/30 Days
<i>clozapine 100mg tab</i>	1	
CLOZAPINE 12.5MG ODT	1	QL=90 EA/30 Days
<i>clozapine 150mg odt</i>	1	QL=180 EA/30 Days
<i>clozapine 200mg odt</i>	1	QL=120 EA/30 Days
<i>clozapine 200mg tab</i>	1	
<i>clozapine 25mg odt</i>	1	QL=270 EA/30 Days
<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	QL=90 EA/30 Days
<i>olanzapine 10mg odt</i>	1	QL=60 EA/30 Days
<i>olanzapine 10mg tab</i>	1	
<i>olanzapine 15mg odt</i>	1	QL=30 EA/30 Days
<i>olanzapine 15mg tab</i>	1	
<i>olanzapine 2.5mg tab</i>	1	
<i>olanzapine 20mg odt</i>	1	QL=30 EA/30 Days
<i>olanzapine 20mg tab</i>	1	
<i>olanzapine 5mg odt</i>	1	QL=30 EA/30 Days
<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	QL=30 EA/30 Days
<i>quetiapine 200mg er tab</i>	1	QL=30 EA/30 Days
<i>quetiapine 200mg tab</i>	1	
<i>quetiapine 25mg tab</i>	1	
<i>quetiapine 300mg er tab</i>	1	QL=60 EA/30 Days
<i>quetiapine 300mg tab</i>	1	
<i>quetiapine 400mg er tab</i>	1	QL=60 EA/30 Days
<i>quetiapine 400mg tab</i>	1	
<i>quetiapine 50mg er tab</i>	1	QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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 ORAL SUSP	1	PA NSO QL=600 ML/30 Days
PHENOTHIAZINES		
<i>chlorpromazine 100mg tab</i>	1	
CHLORPROMAZINE 100MG/ML ORAL SOLN	1	
<i>chlorpromazine 10mg tab</i>	1	
<i>chlorpromazine 200mg tab</i>	1	
<i>chlorpromazine 25mg tab</i>	1	
CHLORPROMAZINE 30MG/ML ORAL SOLN	1	
<i>chlorpromazine 50mg tab</i>	1	
<i>compro 25mg rectal supp</i>	1	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	1	
<i>fluphenazine 10mg tab</i>	1	
<i>fluphenazine 1mg tab</i>	1	
<i>fluphenazine 2.5mg tab</i>	1	
FLUPHENAZINE 2.5MG/ML INJ	1	
<i>fluphenazine 5mg tab</i>	1	
FLUPHENAZINE 5MG/ML ORAL SOLN	1	
<i>fluphenazine decanoate 25mg/ml inj</i>	1	
<i>perphenazine 16mg tab</i>	1	
<i>perphenazine 2mg tab</i>	1	
<i>perphenazine 4mg tab</i>	1	
<i>perphenazine 8mg tab</i>	1	
<i>prochlorperazine 10mg tab</i>	1	
<i>prochlorperazine 25mg rectal supp</i>	1	
<i>prochlorperazine 5mg tab</i>	1	
<i>thioridazine 100mg tab</i>	1	
<i>thioridazine 10mg tab</i>	1	
<i>thioridazine 25mg tab</i>	1	
<i>thioridazine 50mg tab</i>	1	
<i>trifluoperazine 10mg tab</i>	1	
<i>trifluoperazine 1mg tab</i>	1	
<i>trifluoperazine 2mg tab</i>	1	
<i>trifluoperazine 5mg tab</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	1	QL=2.40 ML/56 Days
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	1	QL=3.20 ML/56 Days
ABILIFY MAINTENA 300MG INJ	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY MAINTENA 300MG SYRINGE	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY MAINTENA 400MG INJ	1	NDS PA NSO QL=1 EA/28 Days
ABILIFY MAINTENA 400MG SYRINGE	1	NDS PA NSO QL=1 EA/28 Days
<i>aripiprazole 10mg odt</i>	1	PA NSO QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>aripiprazole 10mg tab</i>	1	
<i>aripiprazole 15mg odt</i>	1	PA NSO QL=60 EA/30 Days
<i>aripiprazole 15mg tab</i>	1	
<i>aripiprazole 1mg/ml oral soln</i>	1	PA NSO QL=900 ML/30 Days
<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
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir 20mg/ml oral soln</i>	1	QL=960 ML/30 Days
<i>abacavir 300mg tab</i>	1	QL=60 EA/30 Days
<i>abacavir/lamivudine 600-300mg tab</i>	1	QL=30 EA/30 Days
APTIVUS 250MG CAP	1	QL=120 EA/30 Days
<i>atazanavir 150mg cap</i>	1	QL=30 EA/30 Days
<i>atazanavir 200mg cap</i>	1	QL=60 EA/30 Days
<i>atazanavir 300mg cap</i>	1	QL=30 EA/30 Days
BIKTARVY 30-120-15MG TAB	1	QL=30 EA/30 Days
BIKTARVY 50-200-25MG TAB	1	QL=30 EA/30 Days
CIMDUO 300-300MG TAB	1	QL=30 EA/30 Days
COMPLERA 200-25-300MG TAB	1	QL=30 EA/30 Days
<i>darunavir 600mg tab</i>	1	QL=60 EA/30 Days
<i>darunavir 800mg tab</i>	1	QL=30 EA/30 Days
DELSTRIGO 100-300-300MG TAB	1	QL=30 EA/30 Days
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	QL=30 EA/30 Days
EDURANT 25MG TAB	1	QL=30 EA/30 Days
<i>efavirenz 600mg tab</i>	1	QL=30 EA/30 Days
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	1	QL=30 EA/30 Days
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	1	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine 200mg cap</i>	1	QL=30 EA/30 Days
<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	QL=850 ML/30 Days
<i>etravirine 100mg tab</i>	1	QL=60 EA/30 Days
<i>etravirine 200mg tab</i>	1	QL=60 EA/30 Days
EVOTAZ 300-150MG TAB	1	QL=30 EA/30 Days
<i>fosamprenavir 700mg tab</i>	1	QL=120 EA/30 Days
FUZEON 90MG INJ	1	QL=60 EA/30 Days
GENVOYA 150-150-200-10MG TAB	1	QL=30 EA/30 Days
INTELENCE 25MG TAB	1	QL=120 EA/30 Days
ISENTRESS 100MG CHEW TAB	1	QL=180 EA/30 Days
ISENTRESS 100MG GRANULES FOR ORAL SUSP	1	QL=60 EA/30 Days
ISENTRESS 25MG CHEW TAB	1	QL=180 EA/30 Days
ISENTRESS 400MG TAB	1	QL=60 EA/30 Days
ISENTRESS 600MG TAB	1	QL=60 EA/30 Days
JULUCA 50-25MG TAB	1	QL=30 EA/30 Days
<i>lamivudine 10mg/ml oral soln</i>	1	QL=960 ML/30 Days
<i>lamivudine 150mg tab</i>	1	QL=60 EA/30 Days
<i>lamivudine 300mg tab</i>	1	QL=30 EA/30 Days
<i>lamivudine/zidovudine 150-300mg tab</i>	1	QL=60 EA/30 Days
<i>lopinavir/ritonavir 100-25mg tab</i>	1	QL=300 EA/30 Days
<i>lopinavir/ritonavir 200-50mg tab</i>	1	QL=120 EA/30 Days
<i>lopinavir/ritonavir 80-20mg/ml oral soln</i>	1	QL=480 ML/30 Days
<i>maraviroc 150mg tab</i>	1	QL=60 EA/30 Days
<i>maraviroc 300mg tab</i>	1	QL=120 EA/30 Days
NEVIRAPINE 10MG/ML ORAL SUSP	1	QL=1200 ML/30 Days
<i>nevirapine 200mg tab</i>	1	QL=60 EA/30 Days
<i>nevirapine 400mg er tab</i>	1	QL=30 EA/30 Days
NORVIR 100MG ORAL POWDER	1	QL=360 EA/30 Days
ODEFSEY 200-25-25MG TAB	1	QL=30 EA/30 Days
PIFELTRO 100MG TAB	1	QL=30 EA/30 Days
PREZCOBIX 150-800MG TAB	1	QL=30 EA/30 Days
PREZISTA 100MG/ML ORAL SUSP	1	QL=400 ML/30 Days
PREZISTA 150MG TAB	1	QL=240 EA/30 Days
PREZISTA 75MG TAB	1	QL=480 EA/30 Days
REYATAZ 50MG ORAL POWDER	1	QL=240 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ritonavir 100mg tab</i>	1	QL=360 EA/30 Days
RUKOBIA 600MG ER TAB	1	QL=60 EA/30 Days
SELZENTRY 20MG/ML ORAL SOLN	1	QL=1840 ML/30 Days
STRIBILD 150-150-200-300MG TAB	1	QL=30 EA/30 Days
SUNLENCA 300MG TAB THERAPY PACK (4)	1	QL=4 EA/28 Days
SUNLENCA 300MG TAB THERAPY PACK (5)	1	QL=5 EA/28 Days
SYMTUZA 150-800-200-10MG TAB	1	QL=30 EA/30 Days
<i>tenofovir disoproxil fumarate 300mg tab</i>	1	QL=30 EA/30 Days
TIVICAY 50MG TAB	1	QL=60 EA/30 Days
TIVICAY 5MG TAB FOR ORAL SUSP	1	QL=180 EA/30 Days
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	1	QL=180 EA/30 Days
TRIUMEQ 600-50-300MG TAB	1	QL=30 EA/30 Days
TYBOST 150MG TAB	1	QL=30 EA/30 Days
VIRACEPT 250MG TAB	1	QL=300 EA/30 Days
VIRACEPT 625MG TAB	1	QL=120 EA/30 Days
VIREAD 150MG TAB	1	QL=30 EA/30 Days
VIREAD 200MG TAB	1	QL=30 EA/30 Days
VIREAD 250MG TAB	1	QL=30 EA/30 Days
VIREAD 40MG/GM ORAL POWDER	1	QL=240 GM/30 Days
<i>zidovudine 100mg cap</i>	1	QL=180 EA/30 Days
<i>zidovudine 10mg/ml oral soln</i>	1	QL=1920 ML/30 Days
<i>zidovudine 300mg tab</i>	1	QL=60 EA/30 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	
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	1	QL=30 EA/30 Days
<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	QL=90 EA/30 Days
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 QL=2 ML/28 Days
PEGASYS 180MCG/ML INJ	1	NDS QL=4 ML/28 Days
RIBAVIRIN 200MG CAP	1	QL=210 EA/30 Days
RIBAVIRIN 200MG TAB	1	QL=210 EA/30 Days
SOFOSBUVIR/VELPATASVIR 400-100MG TAB	1	NDS PA QL=30 EA/30 Days
VEMLIDY 25MG TAB	1	NDS QL=30 EA/30 Days
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	

You can find information 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>acyclovir 40mg/ml oral susp</i>	1	
<i>acyclovir 50mg/ml inj</i>	1	PA BvD
<i>acyclovir 800mg tab</i>	1	
<i>famciclovir 125mg tab</i>	1	
<i>famciclovir 250mg tab</i>	1	
<i>famciclovir 500mg tab</i>	1	
<i>valacyclovir 1000mg tab</i>	1	
<i>valacyclovir 500mg tab</i>	1	
INFLUENZA AGENTS		
<i>oseltamivir 30mg cap</i>	1	QL=84 EA/180 Days
<i>oseltamivir 45mg cap</i>	1	QL=42 EA/180 Days
<i>oseltamivir 6mg/ml oral susp</i>	1	QL=540 ML/180 Days
<i>oseltamivir 75mg cap</i>	1	QL=42 EA/180 Days
RELENZA 5MG/BLISTER POWDER INHALER	1	QL=120 EA/30 Days
RIMANTADINE 100MG TAB	1	
XOFLUZA 40MG TAB	1	QL=2 EA/30 Days
XOFLUZA 80MG TAB	1	QL=1 EA/30 Days
MISC. ANTIVIRALS		
PAXLOVID 150MG/100MG TAB PACK (20)	1	QL=20 EA/5 Days
PAXLOVID 150MG/100MG TAB PACK (30)	1	QL=30 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	

You can find information 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>metoprolol tartrate 37.5mg tab</i>	1	
<i>metoprolol tartrate 50mg tab</i>	1	
<i>metoprolol tartrate 75mg tab</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	1	
<i>nadolol 40mg tab</i>	1	
<i>nadolol 80mg tab</i>	1	
<i>pindolol 10mg tab</i>	1	
<i>pindolol 5mg tab</i>	1	
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	1	
<i>propranolol 160mg er cap</i>	1	
<i>propranolol 20mg tab</i>	1	
<i>propranolol 40mg tab</i>	1	
<i>propranolol 4mg/ml oral soln</i>	1	
<i>propranolol 60mg er cap</i>	1	
<i>propranolol 60mg tab</i>	1	
<i>propranolol 80mg er cap</i>	1	
<i>propranolol 80mg tab</i>	1	
PROPRANOLOL 8MG/ML ORAL SOLN	1	
<i>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 (24hr) cap</i>	1	
<i>cartia 180mg er (24hr) cap</i>	1	
<i>cartia 240mg er (24hr) cap</i>	1	
<i>cartia 300mg er (24hr) cap</i>	1	
<i>dilt 120mg er (24hr) cap</i>	1	
<i>dilt 180mg er (24hr) cap</i>	1	
<i>dilt 240mg er (24hr) 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	

You can find information 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>diltiazem 240mg er (24hr) cap</i>	1	
<i>diltiazem 300mg er (24hr) cap</i>	1	
<i>diltiazem 30mg tab</i>	1	
<i>diltiazem 360mg er (24hr) cap</i>	1	
<i>diltiazem 420mg er (24hr) cap</i>	1	
<i>diltiazem 60mg er (12hr) cap</i>	1	
<i>diltiazem 60mg tab</i>	1	
<i>diltiazem 90mg er (12hr) cap</i>	1	
<i>diltiazem 90mg tab</i>	1	
<i>felodipine 10mg er tab</i>	1	
<i>felodipine 2.5mg er tab</i>	1	
<i>felodipine 5mg er tab</i>	1	
<i>isradipine 2.5mg cap</i>	1	
<i>isradipine 5mg cap</i>	1	
<i>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 (24hr) cap</i>	1	
<i>tiadylt 180mg er (24hr) cap</i>	1	
<i>tiadylt 240mg er (24hr) cap</i>	1	
<i>tiadylt 300mg er (24hr) cap</i>	1	
<i>tiadylt 360mg er (24hr) cap</i>	1	
<i>tiadylt 420mg er (24hr) 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	
CARDIOVASCULAR AGENTS		
ALPHA-ADRENERGIC AGONISTS		
<i>droxidopa 100mg cap</i>	1	PA QL=90 EA/30 Days
<i>droxidopa 200mg cap</i>	1	PA QL=180 EA/30 Days
<i>droxidopa 300mg cap</i>	1	PA QL=180 EA/30 Days
<i>midodrine 10mg tab</i>	1	
<i>midodrine 2.5mg tab</i>	1	
<i>midodrine 5mg tab</i>	1	
CARDIOVASCULAR AGENTS, OTHER		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<i>digoxin 0.125mg tab</i>	1	
<i>digoxin 0.25mg tab</i>	1	
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>ivabradine 5mg tab</i>	1	PA QL=60 EA/30 Days
<i>ivabradine 7.5mg tab</i>	1	PA QL=60 EA/30 Days
<i>pentoxifylline 400mg er tab</i>	1	
<i>ranolazine 1000mg er tab</i>	1	
<i>ranolazine 500mg er tab</i>	1	
VERQUVO 10MG TAB	1	PA QL=30 EA/30 Days
VERQUVO 2.5MG TAB	1	PA QL=30 EA/30 Days
VERQUVO 5MG TAB	1	PA QL=30 EA/30 Days
VYNDAMAX 61MG CAP	1	NDS PA QL=30 EA/30 Days
VYNDAQEL 20MG CAP	1	NDS PA QL=120 EA/30 Days
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil 100mg/ml oral susp</i>	1	
<i>cefadroxil 500mg cap</i>	1	
<i>cefadroxil 50mg/ml oral 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 oral susp</i>	1	
<i>cephalexin 500mg cap</i>	1	
<i>cephalexin 50mg/ml oral susp</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
CEFACTOR 250MG CAP	1	
CEFACTOR 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 oral susp</i>	1	
<i>cefprozil 500mg tab</i>	1	
<i>cefprozil 50mg/ml oral 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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir 25mg/ml oral susp</i>	1	
<i>cefdinir 300mg cap</i>	1	
<i>cefdinir 50mg/ml oral susp</i>	1	
<i>cefixime 20mg/ml oral susp</i>	1	
<i>cefixime 400mg cap</i>	1	
<i>cefixime 40mg/ml oral susp</i>	1	
<i>cefpodoxime 100mg tab</i>	1	
<i>cefpodoxime 10mg/ml oral susp</i>	1	
<i>cefpodoxime 200mg tab</i>	1	
<i>cefpodoxime 20mg/ml oral susp</i>	1	
<i>ceftazidime 1gm inj</i>	1	
<i>ceftazidime 200mg/ml inj</i>	1	
<i>ceftazidime 2gm inj</i>	1	
<i>ceftriaxone 10gm inj</i>	1	
<i>ceftriaxone 1gm inj</i>	1	
<i>ceftriaxone 250mg inj</i>	1	
<i>ceftriaxone 2gm inj</i>	1	
<i>ceftriaxone 500mg inj</i>	1	
<i>tazicef 1gm inj</i>	1	
<i>tazicef 2gm inj</i>	1	
TAZICEF 6GM INJ	1	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>budesonide 3mg dr cap</i>	1	QL=90 EA/30 Days
<i>budesonide 9mg er tab</i>	1	PA QL=30 EA/30 Days
DEXAMETHASONE 0.1MG/ML ORAL SOLN	1	
<i>dexamethasone 0.5mg tab</i>	1	
<i>dexamethasone 0.75mg tab</i>	1	
<i>dexamethasone 1.5mg tab</i>	1	
<i>dexamethasone 1mg tab</i>	1	
<i>dexamethasone 2mg tab</i>	1	
<i>dexamethasone 4mg tab</i>	1	
<i>dexamethasone 6mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	1	
<i>hydrocortisone 20mg tab</i>	1	
<i>hydrocortisone 5mg tab</i>	1	
<i>methylprednisolone 16mg tab</i>	1	PA BvD
<i>methylprednisolone 32mg tab</i>	1	PA BvD
<i>methylprednisolone 4mg tab</i>	1	PA BvD
<i>methylprednisolone 4mg tab pack (21)</i>	1	
<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>prednisolone 5mg/ml oral soln</i>	1	PA BvD

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>prednisone 10mg tab</i>	1	PA BvD
<i>prednisone 1mg tab</i>	1	PA BvD
PREDNISONÉ 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
DENTAL AND ORAL AGENTS		
DENTAL AND ORAL AGENTS		
<i>cevimeline 30mg cap</i>	1	
<i>chlorhexidine gluconate 0.12% mouthwash</i>	1	
<i>clotrimazole 10mg lozenge</i>	1	
<i>kourzeq 0.1% oral paste</i>	1	
<i>lidocaine viscous 2% mucous membrane topical soln</i>	1	
<i>nystatin 100000unit/ml oral susp</i>	1	
<i>periogard 0.12% mouthwash</i>	1	
<i>pilocarpine 5mg tab</i>	1	
<i>pilocarpine 7.5mg tab</i>	1	
<i>triamcinolone acetonide 0.1% oral paste</i>	1	
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>accutane 10mg cap</i>	1	
<i>accutane 20mg cap</i>	1	
<i>accutane 40mg cap</i>	1	
<i>amneesteem 10mg cap</i>	1	
<i>amneesteem 20mg cap</i>	1	
<i>amneesteem 40mg cap</i>	1	
<i>claravis 10mg cap</i>	1	
<i>claravis 20mg cap</i>	1	
<i>claravis 30mg cap</i>	1	
<i>claravis 40mg cap</i>	1	
<i>clindamycin 1% gel</i>	1	QL=75 GM/30 Days
<i>clindamycin 1% gel (twice-daily)</i>	1	QL=75 GM/30 Days
<i>clindamycin 1% lotion</i>	1	QL=60 ML/30 Days
<i>clindamycin 1% topical soln</i>	1	QL=60 ML/30 Days
<i>erythromycin 2% gel</i>	1	QL=60 GM/30 Days
<i>erythromycin 2% topical soln</i>	1	QL=60 ML/30 Days
<i>isotretinoin 10mg cap</i>	1	
<i>isotretinoin 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>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
<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
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 soln</i>	1	QL=10 ML/30 Days
PANRETIN 0.1% GEL	1	NDS PA NSO QL=60 GM/30 Days
VALCHLOR 0.016% GEL	1	NDS PA NSO QL=240 GM/30 Days
ANTIPSORIATICS		
<i>acitretin 10mg 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>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
COSENTYX 150MG/ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
COSENTYX 150MG/ML SYRINGE	1	NDS PA QL=8 ML/28 Days
COSENTYX 75MG/0.5ML SYRINGE	1	NDS PA QL=2 ML/28 Days
COSENTYX UNOREADY 300MG/2ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
METHOXSALLEN 10MG CAP	1	
OTEZLA 20MG TAB	1	NDS PA QL=60 EA/30 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
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
<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
TREMFYA 200MG/2ML AUTO-INJECTOR	1	NDS PA QL=2 ML/28 Days
TREMFYA 200MG/2ML SYRINGE	1	NDS PA QL=2 ML/28 Days
CORTICOSTEROIDS - TOPICAL		
<i>ala-cort 1% cream</i>	1	QL=240 GM/30 Days
ALCLOMETASONE 0.05% OINT	1	QL=120 GM/30 Days
<i>alclometasone dipropionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>betamethasone 0.05% aug cream</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% aug lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% aug ointment</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% cream</i>	1	QL=90 GM/30 Days
<i>betamethasone 0.05% lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% ointment</i>	1	QL=90 GM/30 Days
<i>betamethasone 0.1% cream</i>	1	QL=180 GM/30 Days
<i>betamethasone 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>clobetasol propionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% e cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% foam</i>	1	QL=100 GM/30 Days
<i>clobetasol propionate 0.05% gel</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% lotion</i>	1	QL=118 ML/30 Days
<i>clobetasol propionate 0.05% ointment</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% shampoo</i>	1	QL=236 ML/30 Days
<i>clobetasol propionate 0.05% topical soln</i>	1	QL=100 ML/30 Days

You can find information 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>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% topical oil</i>	1	QL=120 ML/30 Days
<i>fluocinolone acetonide 0.01% topical soln</i>	1	QL=90 ML/30 Days
<i>fluocinolone acetonide 0.025% cream</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.025% ointment</i>	1	QL=120 GM/30 Days
<i>fluocinonide 0.05% cream</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% e cream</i>	1	QL=120 GM/30 Days
FLUOCINONIDE 0.05% GEL	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% ointment</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical soln</i>	1	QL=60 ML/30 Days
<i>fluocinonide 0.1% cream</i>	1	QL=60 GM/30 Days
<i>fluticasone propionate 0.005% ointment</i>	1	QL=240 GM/30 Days
<i>fluticasone propionate 0.05% cream</i>	1	QL=240 GM/30 Days
<i>halobetasol propionate 0.05% cream</i>	1	QL=50 GM/30 Days
<i>halobetasol propionate 0.05% ointment</i>	1	QL=50 GM/30 Days
<i>hydrocortisone 1% cream</i>	1	QL=240 GM/30 Days
<i>hydrocortisone 2.5% ointment</i>	1	QL=240 GM/30 Days
HYDROCORTISONE LOTION 2.5%	1	QL=118 ML/30 Days
<i>mometasone furoate 0.1% cream</i>	1	QL=180 GM/30 Days
<i>mometasone furoate 0.1% lotion</i>	1	QL=180 ML/30 Days
<i>mometasone furoate 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>triamcinolone acetonide 0.025% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.025% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.025% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.1% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% ointment</i>	1	QL=120 GM/30 Days
<i>triderm 0.5% cream</i>	1	QL=454 GM/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
LOCAL ANESTHETICS - TOPICAL		
<i>lidocaine 4% mucous membrane 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

You can find information 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>tridacaine 5% patch</i>	1	PA QL=90 EA/30 Days
MISC. TOPICAL		
<i>acyclovir 5% ointment</i>	1	QL=30 GM/30 Days
<i>ammonium lactate 12% cream</i>	1	
<i>ammonium lactate 12% lotion</i>	1	
<i>imiquimod 5% cream</i>	1	QL=24 EA/30 Days
<i>malathion 0.5% lotion</i>	1	QL=59 ML/30 Days
<i>permethrin 5% cream</i>	1	QL=60 GM/30 Days
PODOFILOX 0.5% TOPICAL SOLN	1	QL=7 ML/30 Days
<i>selenium sulfide 2.5% shampoo</i>	1	QL=120 ML/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
WOUND CARE PRODUCTS		
REGRANEX 0.01% GEL	1	PA QL=30 GM/15 Days
SANTYL 250UNIT/GM OINTMENT	1	QL=90 GM/30 Days
<i>silver sulfadiazine 1% cream</i>	1	
<i>ssd 1% cream</i>	1	
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
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 0.25mg/ml inj</i>	1	
<i>bumetanide 0.5mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>bumetanide 1mg tab</i>	1	
<i>bumetanide 2mg tab</i>	1	
FUROSCIX 80MG/10ML CARTRIDGE	1	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	1	
<i>furosemide 10mg/ml oral soln</i>	1	
<i>furosemide 20mg tab</i>	1	
<i>furosemide 40mg tab</i>	1	
<i>furosemide 80mg tab</i>	1	
FUROSEMIDE 8MG/ML ORAL SOLN	1	
<i>torseamide 100mg tab</i>	1	
<i>torseamide 10mg tab</i>	1	
<i>torseamide 20mg tab</i>	1	
<i>torseamide 5mg tab</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone 25mg tab</i>	1	
<i>chlorthalidone 50mg tab</i>	1	
<i>hydrochlorothiazide 12.5mg cap</i>	1	
<i>hydrochlorothiazide 12.5mg tab</i>	1	
<i>hydrochlorothiazide 25mg tab</i>	1	
<i>hydrochlorothiazide 50mg tab</i>	1	
<i>indapamide 1.25mg tab</i>	1	
<i>indapamide 2.5mg tab</i>	1	
<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>ibandronate 150mg tab</i>	1	QL=1 EA/30 Days
PROLIA 60MG/ML SYRINGE	1	ST QL=1 ML/168 Days
<i>raloxifene 60mg tab</i>	1	QL=30 EA/30 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 pack (12)</i>	1	
<i>risedronate sodium 35mg tab pack (4)</i>	1	
<i>risedronate sodium 5mg tab</i>	1	
<i>salmon calcitonin 200unit/act nasal spray</i>	1	QL=3.70 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
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 HORMONES		
NORDITROPIN 10MG/1.5ML PEN INJ	1	NDS PA
NORDITROPIN 15MG/1.5ML PEN INJ	1	NDS PA
NORDITROPIN 30MG/3ML PEN INJ	1	NDS PA
NORDITROPIN 5MG/1.5ML PEN INJ	1	NDS PA
OMNITROPE 10MG/1.5ML CARTRIDGE	1	NDS PA
OMNITROPE 5.8MG INJ	1	NDS PA
OMNITROPE 5MG/1.5ML CARTRIDGE	1	NDS PA
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
METABOLIC MODIFIERS		
<i>betaine 1gm powder for oral soln</i>	1	
<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 QL=60 EA/30 Days
<i>cinacalcet 60mg tab</i>	1	PA BvD QL=60 EA/30 Days
<i>cinacalcet 90mg tab</i>	1	PA BvD QL=120 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>paricalcitol 1mcg cap</i>	1	PA BvD
<i>paricalcitol 2mcg cap</i>	1	PA BvD
<i>paricalcitol 4mcg cap</i>	1	PA BvD
<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
<i>sodium phenylbutyrate 3gm/tsp oral powder</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
ENDOCRINE MEDICATIONS		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
OTHER ENDOCRINE DRUGS		
<i>cabergoline 0.5mg tab</i>	1	
<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	
INCRELEX 40MG/4ML INJ	1	NDS PA
KERENDIA 10MG TAB	1	PA QL=30 EA/30 Days
KERENDIA 20MG TAB	1	PA QL=30 EA/30 Days
SOMAVERT 10MG INJ	1	NDS PA QL=60 EA/30 Days
SOMAVERT 15MG INJ	1	NDS PA QL=60 EA/30 Days
SOMAVERT 20MG INJ	1	NDS PA QL=60 EA/30 Days
SOMAVERT 25MG INJ	1	NDS PA QL=30 EA/30 Days
SOMAVERT 30MG INJ	1	NDS PA QL=30 EA/30 Days
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>altavera tab 28-day pack</i>	1	
<i>alyacen 1/35 tab 28-day pack</i>	1	
<i>apri tab 28-day pack</i>	1	
<i>aranelle tab 28-day pack</i>	1	
<i>ashlyna tab 91-day pack</i>	1	
<i>aubra tab 28-day pack</i>	1	
<i>aviane tab 28-day pack</i>	1	
<i>azurette 28 day pack</i>	1	
<i>balziva tab 28-day pack</i>	1	
<i>blisovi 21 fe tab 1.5/30 28-day pack</i>	1	
<i>blisovi 24 fe tab 1/20 28-day pack</i>	1	
<i>briellyn tab 28-day pack</i>	1	
<i>camreselo tab 91-day pack</i>	1	
<i>cryselle tab 28-day pack</i>	1	
<i>cyred tab 28-day pack</i>	1	
<i>desogestrel/ethinyl estradiol/ethinyl estradiol 0.15-0.01-0.02mg tab 28-day pack</i>	1	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	1	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	1	
<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	1	
<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	1	
<i>enpresse tab 28-day pack</i>	1	
<i>enskyce tab 28-day pack</i>	1	
<i>estarylla tab 28-day pack</i>	1	
<i>estradiol/norethindrone acetate 0.5-0.1mg 28-day pack</i>	1	
<i>estradiol/norethindrone acetate 1-0.5mg 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>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.02-0.1mg tab 91-day pack</i>	1	
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg tab 91-day pack</i>	1	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.035-1-1mg tab 28-day pack</i>	1	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.05-1-1mg tab 28-day pack</i>	1	
<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	1	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg tab 28-day pack</i>	1	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg tab 28-day pack</i>	1	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 28-day pack</i>	1	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 91-day pack</i>	1	
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack</i>	1	
<i>ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25mg-mcg tab 28-day pack</i>	1	
<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35mg-mcg tab 28-day pack</i>	1	
<i>falmina tab 28-day pack</i>	1	
<i>finzala 24 fe chewable tab 28-day pack</i>	1	
<i>fyavolv 0.0025-0.5mg tab</i>	1	
<i>fyavolv 0.005-1mg tab</i>	1	
<i>hailey 24 fe tab 28-day pack</i>	1	
<i>haloette 0.120-0.015mg/24hr vaginal system</i>	1	
<i>iclevia tab 91-day pack</i>	1	
<i>introvale tab 91-day pack</i>	1	
<i>isibloom tab 28-day pack</i>	1	
<i>jasmiel tab 28-day pack</i>	1	
<i>jinteli 0.005-1mg tab</i>	1	
<i>juleber tab 28-day pack</i>	1	
<i>junel 1.5/30 tab 21-day pack</i>	1	
<i>junel 1/20 tab 21-day pack</i>	1	
<i>junel fe 24 1/20 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>junel fe tab 1.5/30 28-day pack</i>	1	
<i>junel fe tab 1/20 28-day pack</i>	1	
<i>kariva tab 28-day pack</i>	1	
<i>kelnor 1mg-35mcg tab 28-day pack</i>	1	
<i>kelnor tab 1/50 28-day pack</i>	1	
<i>kurvelo tab 28-day pack</i>	1	
<i>larin 1.5/30 tab 21-day pack</i>	1	
<i>larin 1/20 tab 21-day pack</i>	1	
<i>larin fe tab 1.5/30 28-day pack</i>	1	
<i>larin fe tab 1/20 28-day pack</i>	1	
<i>leena tab 28-day pack</i>	1	
<i>lessina tab 28-day pack</i>	1	
<i>levonest tab 28-day pack</i>	1	
<i>levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack</i>	1	
<i>levora 0.15/30 tab 28-day pack</i>	1	
<i>loestrin fe tab 1/20 28-day pack</i>	1	
<i>loryna tab 28-day pack</i>	1	
<i>low-ogestrel tab 28-day pack</i>	1	
<i>lutera tab 28-day pack</i>	1	
<i>marlissa tab 28-day pack</i>	1	
<i>mibelas 24 fe chewable tab 28-day pack</i>	1	
<i>microgestin 1.5/30 tab 21-day pack</i>	1	
<i>microgestin 1/20 tab 21-day pack</i>	1	
<i>microgestin fe tab 1.5/30 28-day pack</i>	1	
<i>microgestin fe tab 1/20 28-day pack</i>	1	
<i>mili tab 28-day pack</i>	1	
<i>mimvey 28-day pack</i>	1	
<i>necon 0.5/35 tab 28-day pack</i>	1	
<i>nikki tab 28-day pack</i>	1	
<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	1	
<i>nortrel 0.5/35 tab 28-day pack</i>	1	
<i>nortrel 1/35 tab 21-day pack</i>	1	
<i>nortrel 1/35 tab 28-day pack</i>	1	
<i>nortrel 7/7/7 tab 28-day pack</i>	1	
<i>nylia 1/35 tab 28-day pack</i>	1	
<i>nylia 7/7/7 tab 28-day pack</i>	1	
<i>ocella tab 28-day pack</i>	1	
<i>pimtrea tab 28-day pack</i>	1	
<i>portia tab 28-day 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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PREMPRO 0.625/5MG 28-DAY PACK	1	
<i>reclipsen tab 28-day pack</i>	1	
<i>setlakin tab 91-day pack</i>	1	
<i>sprintec tab 28-day pack</i>	1	
<i>sronyx tab 28-day pack</i>	1	
<i>syeda tab 28-day pack</i>	1	
<i>tarina 24 fe tab 1/20 28-day pack</i>	1	
<i>tarina fe tab 1/20 28-day pack</i>	1	
<i>tri-estarylla tab 28-day pack</i>	1	
<i>tri-lo- estarylla tab 28-day pack</i>	1	
<i>tri-lo-sprintec tab 28-day pack</i>	1	
<i>tri-mili tab 28-day pack</i>	1	
<i>tri-sprintec tab 28-day pack</i>	1	
<i>tri-vylibra lo tab 28-day pack</i>	1	
<i>tri-vylibra tab 28-day pack</i>	1	
<i>trivora tab 28-day pack</i>	1	
<i>turqoz tab 28-day pack</i>	1	
VELIVET TAB 28-DAY PACK	1	
<i>vestura tab 3-0.02mg 28-day pack</i>	1	
<i>vienva tab 28-day pack</i>	1	
<i>vyfemla tab 28-day pack</i>	1	
<i>vylibra tab 28-day pack</i>	1	
<i>xulane 150-35mcg/24hr patch</i>	1	
<i>zafemy 150-35mcg/24hr patch</i>	1	
<i>zovia 1mg-35mcg tab 28-day pack</i>	1	
ESTROGENS		
<i>dotti 0.025mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.0375mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.05mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.075mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.1mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.0025mg/hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.01mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.01mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.025mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.025mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.0375mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.0375mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.05mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.05mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.075mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.075mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.5mg tab</i>	1	
<i>estradiol 1mg tab</i>	1	
<i>estradiol 2mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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 twice weekly patch</i>	1	QL=8 EA/28 Days
<i>lyllana 0.0375mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>lyllana 0.05mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>lyllana 0.075mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>lyllana 0.1mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
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		
<i>ciprofloxacin 250mg tab</i>	1	
CIPROFLOXACIN 2MG/ML INJ	1	
<i>ciprofloxacin 500mg tab</i>	1	
<i>ciprofloxacin 750mg tab</i>	1	
<i>levofloxacin 250mg tab</i>	1	
<i>levofloxacin 25mg/ml oral soln</i>	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	
MOXIFLOXACIN 1.6MG/ML INJ	1	
<i>moxifloxacin 400mg tab</i>	1	
GASTROINTESTINAL AGENTS		
GASTROINTESTINAL AGENTS, OTHER		
<i>cromolyn sodium 20mg/ml oral soln</i>	1	
<i>enulose 10gm/15ml oral soln</i>	1	
GATTEX 5MG INJ	1	NDS PA
<i>generlac 10gm/15ml oral soln</i>	1	
<i>metoclopramide 10mg tab</i>	1	
<i>metoclopramide 1mg/ml oral soln</i>	1	
<i>metoclopramide 5mg tab</i>	1	
REZDIFFRA 100MG TAB	1	NDS PA QL=30 EA/30 Days
REZDIFFRA 60MG TAB	1	NDS PA QL=30 EA/30 Days
REZDIFFRA 80MG TAB	1	NDS PA QL=30 EA/30 Days
<i>ursodiol 250mg tab</i>	1	
<i>ursodiol 300mg cap</i>	1	
<i>ursodiol 500mg tab</i>	1	
VOWST 30000000UNIT CAP	1	NDS PA QL=12 EA/30 Days
GASTROINTESTINAL AGENTS - MISC.		
INFLAMMATORY BOWEL 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>balsalazide disodium 750mg cap</i>	1	
<i>mesalamine 1gm rectal supp</i>	1	QL=30 EA/30 Days
<i>mesalamine 375mg er cap</i>	1	QL=120 EA/30 Days
<i>mesalamine 66.7mg/ml enema</i>	1	QL=1800 ML/30 Days
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	
GENITOURINARY AGENTS		
GENITOURINARY AGENTS, OTHER		
CYSTAGON 150MG CAP	1	
CYSTAGON 50MG CAP	1	
ELMIRON 100MG CAP	1	QL=90 EA/30 Days
<i>potassium citrate 10meq er tab</i>	1	
<i>potassium citrate 15meq er tab</i>	1	
<i>potassium citrate 5meq er tab</i>	1	
<i>sodium chloride 0.9% irrigation soln</i>	1	
GENITOURINARY AGENTS - MISCELLANEOUS		
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	
<i>dutasteride 0.5mg cap</i>	1	
<i>finasteride 5mg tab</i>	1	
<i>tadalafil 2.5mg tab</i>	1	PA QL=30 EA/30 Days
<i>tadalafil 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>tamsulosin 0.4mg cap</i>	1	
GOUT AGENTS		
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	1	
<i>allopurinol 300mg tab</i>	1	
<i>colchicine 0.6mg tab</i>	1	
<i>colchicine/probenecid 0.5-500mg tab</i>	1	
<i>febuxostat 40mg tab</i>	1	ST
<i>febuxostat 80mg tab</i>	1	ST
<i>probenecid 500mg tab</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
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	QL=60 EA/30 Days
BRILINTA 60MG TAB	1	QL=60 EA/30 Days
BRILINTA 90MG TAB	1	QL=60 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	

You can find information 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>prasugrel 5mg tab</i>	1	
HEMATOPOIETIC AGENTS		
AGENTS FOR SICKLE CELL DISEASE		
<i>glutamine 5000mg powder for oral soln</i>	1	PA QL=180 EA/30 Days
HEMATOPOIETIC GROWTH FACTORS		
DOPTELET 20MG TAB	1	NDS PA QL=60 EA/30 Days
DOPTELET TAB 40MG DAILY DOSE PACK (10)	1	NDS PA QL=10 EA/5 Days
DOPTELET TAB 60MG DAILY DOSE PACK (15)	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 QL=90 EA/30 Days
PROMACTA 12.5MG TAB	1	NDS PA QL=30 EA/30 Days
PROMACTA 25MG POWDER FOR ORAL SUSP	1	NDS PA QL=180 EA/30 Days
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
STIMUFEND 6MG/0.6ML SYRINGE	1	NDS
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>tranexamic acid 650mg tab</i>	1	QL=30 EA/5 Days
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
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>ramelteon 8mg tab</i>	1	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

You can find information 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>zolpidem tartrate 6.25mg er tab</i>	1	PA QL=30 EA/30 Days
IMMUNOLOGICAL AGENTS		
ANGIOEDEMA (HAE) AGENTS		
BERINERT 500UNIT INJ	1	NDS PA
HAEGARDA 2000UNIT INJ	1	NDS PA
HAEGARDA 3000UNIT INJ	1	NDS PA
<i>icatibant 10mg/ml syringe</i>	1	PA QL=27 ML/30 Days
<i>sajazir 30mg/3ml syringe</i>	1	PA QL=27 ML/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
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 powder for 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 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	1	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	1	
SUFLAVE SOLN PACK	1	
LAXATIVES - MISCELLANEOUS		
<i>constulose 10gm/15ml oral soln</i>	1	
<i>lactulose 667mg/ml oral soln</i>	1	
LINZESS 145MCG CAP	1	QL=30 EA/30 Days
LINZESS 290MCG CAP	1	QL=30 EA/30 Days
LINZESS 72MCG CAP	1	QL=30 EA/30 Days
<i>lubiprostone 24mcg cap</i>	1	QL=60 EA/30 Days
<i>lubiprostone 8mcg cap</i>	1	QL=60 EA/30 Days
MOVANTIK 12.5MG TAB	1	PA QL=30 EA/30 Days
MOVANTIK 25MG TAB	1	PA QL=30 EA/30 Days
TRULANCE 3MG TAB	1	QL=30 EA/30 Days
MEDICAL DEVICES AND SUPPLIES		
BANDAGES-DRESSINGS-TAPE		
GAUZE PAD (2 X 2)	1	
MISC. DEVICES		
ALCOHOL SWAB 1X1 (DIABETIC)	1	
PARENTERAL THERAPY SUPPLIES		
INSULIN PEN NEEDLE	1	
INSULIN SYRINGE	1	
INSULIN SYRINGE (DISP) U-100 0.3ML	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
INSULIN SYRINGE (DISP) U-100 1/2ML	1	
INSULIN SYRINGE (DISP) U-100 1ML	1	
MIGRAINE PRODUCTS		
MIGRAINE PRODUCTS		
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	1	PA QL=16 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
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
<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
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
<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	

You can find information 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/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 9mg/ml inj</i>	1	
<i>glucose 50mg/ml/sodium chloride 2mg/ml inj</i>	1	
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	1	
GLUCOSE/SODIUM CHLORIDE 25MG/ML-4.5MG/ML INJ	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 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	
POTASSIUM CHLORIDE 15MEQ ER TAB	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	

You can find information 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>sodium chloride 3% inj</i>	1	
<i>sodium chloride 50mg/ml inj</i>	1	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
<i>deferasirox 180mg tab</i>	1	PA
<i>deferasirox 360mg tab</i>	1	PA
<i>deferasirox 90mg tab</i>	1	PA
<i>penicillamine 250mg tab</i>	1	
<i>trientine 250mg cap</i>	1	PA QL=240 EA/30 Days
IMMUNOMODULATORS		
<i>lenalidomide 10mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 15mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 2.5mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 20mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 25mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 5mg cap</i>	1	PA NSO QL=30 EA/30 Days
REZUROCK 200MG TAB	1	NDS PA QL=30 EA/30 Days
THALOMID 100MG CAP	1	NDS QL=30 EA/30 Days
THALOMID 50MG CAP	1	NDS QL=30 EA/30 Days
IMMUNOSUPPRESSIVE AGENTS		
ARCALYST 220MG INJ	1	NDS PA
<i>azathioprine 50mg tab</i>	1	PA BvD
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
<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
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 QL=60 EA/30 Days
<i>everolimus 0.5mg tab</i>	1	PA BvD QL=120 EA/30 Days
<i>everolimus 0.75mg tab</i>	1	PA BvD QL=60 EA/30 Days
<i>everolimus 1mg tab</i>	1	PA BvD QL=60 EA/30 Days
<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
LITFULO 50MG CAP	1	NDS PA QL=28 EA/28 Days
LUPKYNIS 7.9MG CAP	1	NDS PA QL=180 EA/30 Days
<i>mycophenolate mofetil 200mg/ml oral susp</i>	1	PA BvD
<i>mycophenolate mofetil 250mg cap</i>	1	PA BvD
<i>mycophenolate mofetil 500mg 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>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
<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 QL=90 EA/30 Days
LOKELMA 5GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
<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 QL=30 EA/30 Days
VELTASSA 1GM POWDER FOR ORAL SUSP	1	PA QL=120 EA/30 Days
VELTASSA 25.2GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
VELTASSA 8.4GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen 10mg tab</i>	1	
<i>baclofen 20mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	PA QL=90 EA/30 Days
<i>chlorzoxazone 500mg tab</i>	1	PA
<i>cyclobenzaprine 10mg tab</i>	1	PA QL=90 EA/30 Days
<i>cyclobenzaprine 5mg tab</i>	1	PA QL=90 EA/30 Days
<i>metaxalone 800mg tab</i>	1	PA
<i>methocarbamol 500mg tab</i>	1	PA
<i>methocarbamol 750mg tab</i>	1	PA
<i>orphenadrine citrate 100mg er tab</i>	1	PA
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg tab</i>	1	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium 100mg cap</i>	1	
<i>dantrolene sodium 25mg cap</i>	1	
<i>dantrolene sodium 50mg cap</i>	1	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	1	QL=60 ML/30 Days
<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	1	QL=50 ML/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	1	QL=32 GM/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	1	QL=30 ML/30 Days
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	1	QL=45 ML/30 Days
<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	1	QL=30.50 GM/30 Days
NEUROMUSCULAR AGENTS		
ALS AGENTS		
RADICAVA 105MG/5ML ORAL SUSP	1	NDS PA QL=70 ML/28 Days
<i>riluzole 50mg tab</i>	1	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI 0.75MG/ML ORAL SOLN	1	NDS PA QL=240 ML/30 Days
NUTRIENTS		
CARBOHYDRATES		
DEXTROSE 10% INJ	1	PA BvD
<i>glucose 50mg/ml inj</i>	1	
PROTEINS		
CLINIMIX 4.25/10 INJ	1	PA BvD
CLINIMIX 4.25/5 INJ	1	PA BvD
CLINIMIX 5/15 INJ	1	PA BvD
CLINIMIX 5/20 INJ	1	PA BvD
<i>clinisol 15% inj</i>	1	PA BvD
<i>plenamine 15% inj</i>	1	PA BvD
PROSOL 20% INJ	1	PA BvD
TRAVASOL 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	
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	

You can find information 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>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
<i>moxifloxacin 0.5% ophth soln</i>	1	QL=6 ML/7 Days
<i>neo-polycin 5mg-400unit-10000unit ophth ointment</i>	1	QL=7 GM/7 Days
<i>neomycin/bacitracin/polymyxin 5mg-400unit-10000unit ophth ointment</i>	1	QL=7 GM/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	1	QL=10 ML/7 Days
<i>ofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>polycin 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>polymyxin b/trimethoprim 10000 unit/ml-0.1% ophth soln</i>	1	QL=10 ML/7 Days
<i>sulfacetamide sodium 10% ophth soln</i>	1	QL=15 ML/7 Days
<i>tobramycin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
TRIFLURIDINE 1% OPHTH SOLN	1	QL=15 ML/7 Days
XDEMVY 0.25% OPHTH SOLN	1	PA QL=10 ML/42 Days
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPHTH SOLN	1	QL=5 ML/30 Days
ROCKLATAN 0.02-0.005% OPHTH SOLN	1	QL=5 ML/30 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	
<i>prednisolone acetate 1% ophth susp</i>	1	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN	1	
OPHTHALMICS - MISC.		
<i>atropine sulfate 1% ophth soln</i>	1	
<i>azelastine 0.05% ophth soln</i>	1	
<i>bromfenac 0.07% ophth soln</i>	1	QL=12 ML/365 Days
CROMOLYN SODIUM 4% OPHTH SOLN	1	
<i>cyclosporine 0.05% ophth susp</i>	1	QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
FLURBIPROFEN SODIUM 0.03% OPHTH SOLN	1	
<i>ketorolac tromethamine 0.4% ophth soln</i>	1	QL=20 ML/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	1	
<i>pilocarpine 1% ophth soln</i>	1	
<i>pilocarpine 2% ophth soln</i>	1	
<i>pilocarpine 4% ophth soln</i>	1	
XIIDRA 5% OPHTH SOLN	1	QL=60 EA/30 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>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	
<i>flac 0.01% otic soln</i>	1	
<i>fluocinolone acetonide 0.01% otic soln</i>	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	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
GAMUNEX 1GM/10ML INJ	1	NDS PA
OCTAGAM 1GM/20ML INJ	1	NDS PA
OCTAGAM 2GM/20ML 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 oral susp</i>	1	
<i>amoxicillin 40mg/ml oral susp</i>	1	
<i>amoxicillin 500mg cap</i>	1	
<i>amoxicillin 500mg tab</i>	1	
<i>amoxicillin 50mg/ml oral susp</i>	1	
<i>amoxicillin 80mg/ml oral susp</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>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 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/clavulanate 250-125mg tab</i>	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 oral susp</i>	1	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	1	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	1	
<i>ampicillin/sulbactam 1000-500mg inj</i>	1	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	1	
<i>piperacillin/tazobactam 2000-250mg inj</i>	1	
<i>piperacillin/tazobactam 3000-375mg inj</i>	1	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	1	
<i>piperacillin/tazobactam 4000-500mg inj</i>	1	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	
<i>nafcillin 100mg/ml inj</i>	1	
<i>nafcillin 1gm inj</i>	1	
<i>nafcillin 2gm inj</i>	1	
<i>oxacillin 100mg/ml inj</i>	1	
<i>oxacillin 1gm inj</i>	1	
<i>oxacillin 2gm inj</i>	1	
PROGESTINS		
PROGESTINS		
<i>camila 0.35mg tab 28-day pack</i>	1	
<i>deblitane 0.35mg tab 28-day pack</i>	1	
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	1	
<i>errin 0.35mg tab 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>gallifrey 5mg tab</i>	1	
<i>heather 0.35mg 28-day pack</i>	1	
<i>incassia 0.35mg tab 28-day pack</i>	1	
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	1	
<i>lyleq 0.35mg tab 28-day pack</i>	1	
<i>lyza 0.35mg tab 28-day pack</i>	1	
<i>medroxyprogesterone acetate 10mg tab</i>	1	
<i>medroxyprogesterone acetate 150mg/ml inj</i>	1	
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	1	
<i>medroxyprogesterone acetate 2.5mg tab</i>	1	
<i>medroxyprogesterone acetate 5mg tab</i>	1	
MEGESTROL ACETATE 125MG/ML SUSP	1	PA
NEXPLANON 68MG IMPLANT	1	
<i>nora-be 0.35mg tab 28-day pack</i>	1	
<i>norethindrone 0.35mg 28-day pack</i>	1	
<i>norethindrone acetate 5mg tab</i>	1	
<i>progesterone 100mg cap</i>	1	
<i>progesterone 200mg cap</i>	1	
<i>sharobel 0.35mg tab 28-day pack</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	
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	QL=60 EA/30 Days
<i>galantamine 4mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine 8mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine hydrobromide 16mg er cap</i>	1	QL=30 EA/30 Days
<i>galantamine hydrobromide 24mg er cap</i>	1	QL=30 EA/30 Days
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	1	QL=200 ML/30 Days
<i>galantamine hydrobromide 8mg er cap</i>	1	QL=30 EA/30 Days
<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 5mg tab</i>	1	QL=60 EA/30 Days
<i>memantine 7mg er cap</i>	1	ST QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>rivastigmine 1.5mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 13.3mg/24hr patch</i>	1	QL=30 EA/30 Days
<i>rivastigmine 3mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 4.5mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 4.6mg/24hr patch</i>	1	QL=30 EA/30 Days
<i>rivastigmine 6mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 9.5mg/24hr patch</i>	1	QL=30 EA/30 Days
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 6MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 9MG TAB	1	NDS PA QL=120 EA/30 Days
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 6-12-24MG TAB TITRATION PACK (42)	1	NDS PA QL=42 EA/28 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
INGREZZA 80MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA CAP THERAPY PACK (28)	1	NDS PA QL=28 EA/28 Days
<i>tetrabenazine 12.5mg tab</i>	1	QL=90 EA/30 Days
<i>tetrabenazine 25mg tab</i>	1	QL=120 EA/30 Days
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	1	NDS QL=1 EA/28 Days
AVONEX 30MCG/0.5ML SYRINGE	1	NDS QL=1 EA/28 Days
BETASERON 0.3MG INJ	1	NDS QL=14 EA/28 Days
<i>dalfampridine 10mg er tab</i>	1	QL=60 EA/30 Days
<i>dimethyl fumarate 120mg dr cap</i>	1	QL=14 EA/7 Days
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	1	QL=60 EA/180 Days
<i>dimethyl fumarate 240mg dr cap</i>	1	QL=60 EA/30 Days
<i>fingolimod 0.5mg cap</i>	1	QL=30 EA/30 Days
<i>glatiramer acetate 20mg/ml syringe</i>	1	QL=30 ML/30 Days
<i>glatiramer acetate 40mg/ml syringe</i>	1	QL=12 ML/28 Days
<i>glatopa 20mg/ml syringe</i>	1	QL=30 ML/30 Days
<i>glatopa 40mg/ml syringe</i>	1	QL=12 ML/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
KESIMPTA 20MG/0.4ML PEN INJ	1	NDS QL=1.20 ML/28 Days
MAYZENT 0.25MG TAB	1	NDS QL=120 EA/30 Days
MAYZENT 1MG TAB	1	NDS QL=30 EA/30 Days
MAYZENT 2MG TAB	1	NDS QL=30 EA/30 Days
MAYZENT TAB STARTER PACK (12)	1	NDS QL=12 EA/28 Days
MAYZENT TAB STARTER PACK (7)	1	QL=7 EA/28 Days
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	1	NDS QL=1 ML/28 Days
PLEGRIDY 125MCG/0.5ML SYRINGE	1	NDS QL=1 ML/28 Days
<i>teriflunomide 14mg tab</i>	1	QL=30 EA/30 Days
<i>teriflunomide 7mg tab</i>	1	QL=30 EA/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
NUDEXTA 20-10MG CAP	1	PA QL=60 EA/30 Days
PIMOZIDE 1MG TAB	1	
PIMOZIDE 2MG TAB	1	
SMOKING DETERRENTS		
<i>bupropion 150mg sr (12hr) tab</i>	1	
NICOTROL 10MG/ML NASAL INHALER	1	
<i>varenicline 0.5mg tab</i>	1	QL=56 EA/28 Days
<i>varenicline 0.5mg/1mg first month pack (53)</i>	1	QL=53 EA/28 Days
<i>varenicline 1mg tab</i>	1	QL=56 EA/28 Days
<i>varenicline 1mg tab pack (56)</i>	1	QL=56 EA/28 Days
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
PROLASTIN 1000MG INJ	1	NDS PA
ZEMAIRA 1000MG INJ	1	NDS PA
CYSTIC FIBROSIS AGENTS		
CAYSTON 75MG/ML INH SOLN	1	NDS PA QL=84 ML/28 Days
KALYDECO 13.4MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
KALYDECO 150MG TAB	1	NDS PA QL=60 EA/30 Days
KALYDECO 25MG ORAL GRANULES	1	NDS PA QL=60 EA/30 Days
KALYDECO 5.8MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
KALYDECO 50MG ORAL GRANULES	1	NDS PA QL=60 EA/30 Days
KALYDECO 75MG ORAL GRANULES	1	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG ORAL 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 ORAL GRANULES	1	NDS PA QL=60 EA/30 Days
ORKAMBI 94-75MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
PULMOZYME 1MG/ML INH SOLN	1	NDS PA BvD QL=150 ML/30 Days
SYMDEKO TAB 4-WEEK PACK (56)	1	NDS PA QL=60 EA/30 Days
SYMDEKO TAB 50-75MG/75MG PACK (56)	1	NDS PA QL=60 EA/30 Days
TRIKAFTA 100-50-75MG/150MG TAB PACK (84)	1	NDS PA QL=90 EA/30 Days
TRIKAFTA 100-50-75MG/75MG GRANULES PACK (56)	1	NDS PA QL=56 EA/28 Days
TRIKAFTA 50-37.5-25MG/75MG TAB PACK (84)	1	NDS PA QL=84 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
TRIKAFTA 80-40-60MG/59.5MG GRANULES PACK (56)	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
RESPIRATORY TRACT AGENTS		
ANTI-HISTAMINES		
<i>desloratadine 5mg tab</i>	1	
<i>levocetirizine 5mg tab</i>	1	
<i>promethazine 1.25mg/ml oral soln</i>	1	
<i>promethazine 12.5mg tab</i>	1	
<i>promethazine 25mg tab</i>	1	
<i>promethazine 50mg tab</i>	1	
PULMONARY ANTIHYPERTENSIVES		
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
<i>alyq 20mg tab</i>	1	PA QL=60 EA/30 Days
<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
<i>sildenafil 20mg tab</i>	1	PA QL=360 EA/30 Days
<i>tadalafil 20mg tab</i>	1	PA QL=60 EA/30 Days
WINREVAIR 45MG INJ	1	NDS PA QL=1 EA/21 Days
WINREVAIR 45MG INJ (2 VIAL PACK)	1	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ	1	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ (2 VIAL PACK)	1	NDS PA QL=1 EA/21 Days
RESPIRATORY TRACT/PULMONARY AGENTS		
PHOSPHODIESTERASE INHIBITORS, AIRWAYS DISEASE		
<i>roflumilast 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>roflumilast 250mcg tab</i>	1	QL=28 EA/365 Days
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	
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
SLEEP DISORDERS, OTHER		
LUMRYZ 28-DAY STARTER PACK (28)	1	NDS PA QL=28 EA/28 Days
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
SUNOSI 150MG TAB	1	PA QL=30 EA/30 Days
SUNOSI 75MG TAB	1	PA QL=30 EA/30 Days
SULFONAMIDES		
SULFONAMIDES		
<i>sulfadiazine 500mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 200-40mg/5ml oral susp</i>	1	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
TETRACYCLINES		
TETRACYCLINES		
<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 oral 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	

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADACEL INJ	1	VAC
ADACEL SYRINGE	1	VAC
BOOSTRIX INJ	1	VAC
BOOSTRIX SYRINGE	1	VAC
DAPTACEL INJ	1	
INFANRIX SYRINGE	1	
KINRIX SYRINGE	1	
PEDIARIX SYRINGE	1	
PENTACEL 96-30-68UNIT/ML INJ	1	
QUADRACEL INJ	1	
QUADRACEL SYRINGE	1	
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	
MISC. ANTI-ULCER		
<i>misoprostol 100mcg tab</i>	1	
<i>misoprostol 200mcg tab</i>	1	
<i>sucralfate 1000mg tab</i>	1	
<i>sucralfate 100mg/ml oral susp</i>	1	
PROTON PUMP INHIBITORS		
<i>esomeprazole 20mg dr cap</i>	1	
<i>esomeprazole 40mg dr cap</i>	1	
<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	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>fesoterodine fumarate 4mg er tab</i>	1	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fesoterodine fumarate 8mg er tab</i>	1	QL=30 EA/30 Days
<i>oxybutynin chloride 10mg er tab</i>	1	
<i>oxybutynin chloride 15mg er tab</i>	1	
<i>oxybutynin chloride 1mg/ml oral soln</i>	1	
<i>oxybutynin chloride 5mg er tab</i>	1	
<i>oxybutynin chloride 5mg tab</i>	1	
<i>tolterodine tartrate 1mg tab</i>	1	QL=60 EA/30 Days
<i>tolterodine tartrate 2mg er cap</i>	1	QL=30 EA/30 Days
<i>tolterodine tartrate 2mg tab</i>	1	QL=60 EA/30 Days
<i>tolterodine tartrate 4mg er cap</i>	1	QL=30 EA/30 Days
<i>tropium chloride 20mg tab</i>	1	QL=60 EA/30 Days
<i>tropium chloride 60mg er cap</i>	1	QL=30 EA/30 Days
URINARY ANTISPASMODICS		
<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	
<i>flavoxate 100mg tab</i>	1	
<i>mirabegron 25mg er tab</i>	1	QL=30 EA/30 Days
<i>mirabegron 50mg er tab</i>	1	QL=30 EA/30 Days
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HEPLISAV-B 20MCG/0.5ML SYRINGE	1	PA BvD VAC
IMOVAX 2.5UNIT/ML INJ	1	PA BvD VAC
IPOL INJ	1	VAC
IXCHIQ INJ	1	VAC
IXIARO 0.012MG/ML SYRINGE	1	VAC
JYNNEOS 0.5ML INJ	1	VAC
M-M-R II INJ	1	VAC
MRESVIA 50MCG/0.5ML SYRINGE	1	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 667000UNIT/ML ORAL SUSP	1	
ROTATEQ ORAL 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
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	
PREMARIN 0.625MG/GM VAGINAL CREAM	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>	43	<i>acitretin 17.5mg cap</i>	53	ADVAIR 45-21MCG/ACT HFA INHALER
<i>abacavir 300mg tab</i>	43	<i>acitretin 25mg cap</i>	53	AKEEGA 500-100MG TAB
<i>abacavir/lamivudine 600-300mg tab</i>	43	ACTEMRA	3	AKEEGA 500-50MG TAB
ABELCET 5MG/ML INJ	22	162MG/0.9ML		<i>ala-cort 1% cream</i>
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	42	AUTO-INJECTOR		<i>albendazole 200mg tab</i>
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	42	ACTEMRA	3	<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>
ABILIFY MAINTENA 300MG INJ	42	162MG/0.9ML SYRINGE		<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>
ABILIFY MAINTENA 300MG SYRINGE	42	ACTHIB INJ	81	<i>albuterol 0.83mg/ml (0.083%) inh soln</i>
ABILIFY MAINTENA 400MG INJ	42	ACTIMMUNE	37	<i>albuterol 1.25mg/3ml neb soln</i>
ABILIFY MAINTENA 400MG SYRINGE	42	2000000UNIT/0.5ML INJ		<i>albuterol 108mcg HFA inhaler (6.7gm)</i>
<i>abiraterone acetate 250mg tab</i>	31	<i>acyclovir 200mg cap</i>	45	<i>albuterol 108mcg HFA inhaler (8.5gm)</i>
ABRYSVO	81	<i>acyclovir 400mg tab</i>	45	<i>albuterol 2mg tab</i>
<i>acamprosate calcium 333mg dr tab</i>	74	<i>acyclovir 40mg/ml oral susp</i>	46	<i>albuterol 4mg tab</i>
<i>acarbose 100mg tab</i>	19	<i>acyclovir 5% ointment</i>	55	<i>albuterol 5mg/ml inh soln</i>
<i>acarbose 25mg tab</i>	19	<i>acyclovir 50mg/ml inj</i>	46	ALCLOMETASONE 0.05% OINT
<i>acarbose 50mg tab</i>	19	<i>acyclovir 800mg tab</i>	46	<i>alclometasone dipropionate 0.05% cream</i>
<i>accutane 10mg cap</i>	51	ADACEL INJ	80	ALCOHOL SWAB 1X1 (DIABETIC)
<i>accutane 20mg cap</i>	51	ADACEL SYRINGE	80	ALECENSA 150MG CAP
<i>accutane 40mg cap</i>	51	ADALIMUMAB-AATY 100MG/ML (0.2ML) SYRINGE	2	<i>alendronate sodium 10mg tab</i>
<i>acebutolol 200mg cap</i>	46	ADALIMUMAB-AATY 100MG/ML (0.4ML) SYRINGE	2	<i>alendronate sodium 35mg tab</i>
<i>acebutolol 400mg cap</i>	46	ADALIMUMAB-AATY 100MG/ML	3	<i>alendronate sodium 70mg tab</i>
<i>acetazolamide 125mg tab</i>	55	AUTO-INJECTOR (0.4ML)		<i>alfuzosin 10mg er tab</i>
<i>acetazolamide 250mg tab</i>	55	ADALIMUMAB-AATY 100MG/ML	3	<i>aliskiren 150mg tab</i>
<i>acetazolamide 500mg er cap</i>	55	AUTO-INJECTOR (0.8ML)		<i>aliskiren 300mg tab</i>
<i>acetic acid 2% otic soln</i>	72	<i>adefovir dipivoxil 10mg tab</i>	45	<i>allopurinol 100mg tab</i>
<i>acetylcysteine 100mg/ml inh soln</i>	51	ADEMPAS 0.5MG TAB	77	<i>allopurinol 300mg tab</i>
<i>acetylcysteine 200mg/ml inh soln</i>	51	ADEMPAS 1.5MG TAB	77	<i>alosectron 0.5mg tab</i>
<i>acitretin 10mg cap</i>	52	ADEMPAS 1MG TAB	77	<i>alosectron 1mg tab</i>
		ADEMPAS 2.5MG TAB	77	<i>alprazolam 0.25mg tab</i>
		ADEMPAS 2MG TAB	77	
		ADVAIR 115-21MCG HFA INHALER	9	
		ADVAIR 230-21MCG HFA INHALER	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

<i>alprazolam 0.5mg tab</i>	7	<i>amlodipine/benazepril</i>	26	<i>amlodipine/olmesartan</i>	26
<i>alprazolam 1mg tab</i>	7	<i>5-10mg cap</i>		<i>medoxomil 10-40mg tab</i>	
<i>alprazolam 2mg tab</i>	7	<i>amlodipine/benazepril</i>	26	<i>amlodipine/olmesartan</i>	26
<i>altavera tab 28-day pack</i>	58	<i>5-20mg cap</i>		<i>medoxomil 5-20mg tab</i>	
ALUNBRIG 180MG TAB	32	<i>amlodipine/benazepril</i>	26	<i>amlodipine/olmesartan</i>	26
ALUNBRIG 30MG TAB	32	<i>5-40mg cap</i>		<i>medoxomil 5-40mg tab</i>	
ALUNBRIG 90MG TAB	32	<i>amlodipine/hydrochloroth</i>	26	<i>amlodipine/valsartan</i>	26
ALUNBRIG TAB	32	<i>iazide/olmesartan</i>		<i>10-160mg tab</i>	
INITIATION PACK (30)		<i>medoxomil 10-12.5-40mg</i>		<i>amlodipine/valsartan</i>	26
ALVESCO 160MCG	9	<i>tab</i>		<i>10-320mg tab</i>	
INHALER		<i>amlodipine/hydrochloroth</i>	26	<i>amlodipine/valsartan</i>	26
ALVESCO 80MCG	9	<i>iazide/olmesartan</i>		<i>5-160mg tab</i>	
INHALER		<i>medoxomil 10-25-40mg</i>		<i>amlodipine/valsartan</i>	26
<i>alyacen 1/35 tab 28-day</i>	58	<i>tab</i>		<i>5-320mg tab</i>	
<i>pack</i>		<i>amlodipine/hydrochloroth</i>	26	<i>ammonium lactate 12%</i>	55
<i>alyq 20mg tab</i>	77	<i>iazide/olmesartan</i>		<i>cream</i>	
<i>amantadine 100mg cap</i>	38	<i>medoxomil 5-12.5-20mg</i>		<i>ammonium lactate 12%</i>	55
<i>amantadine 10mg/ml oral</i>	38	<i>tab</i>		<i>lotion</i>	
<i>soln</i>		<i>amlodipine/hydrochloroth</i>	26	<i>amnesteem 10mg cap</i>	51
<i>ambrisentan 10mg tab</i>	77	<i>iazide/olmesartan</i>		<i>amnesteem 20mg cap</i>	51
<i>ambrisentan 5mg tab</i>	77	<i>medoxomil 5-12.5-40mg</i>		<i>amnesteem 40mg cap</i>	51
<i>amikacin 250mg/ml inj</i>	2	<i>tab</i>		<i>amoxapine 100mg tab</i>	18
<i>amiloride 5mg tab</i>	56	<i>amlodipine/hydrochloroth</i>	26	<i>amoxapine 150mg tab</i>	18
AMILORIDE/HYDROCH	55	<i>iazide/olmesartan</i>		<i>amoxapine 25mg tab</i>	18
LOROTHIAZIDE 5-50MG		<i>medoxomil 5-25-40mg</i>		<i>amoxapine 50mg tab</i>	18
TAB		<i>tab</i>		AMOXICILLIN 125MG	72
<i>amiodarone 100mg tab</i>	8	<i>amlodipine/hydrochloroth</i>	26	CHEW TAB	
<i>amiodarone 200mg tab</i>	8	<i>iazide/valsartan</i>		<i>amoxicillin 250mg cap</i>	72
<i>amiodarone 400mg tab</i>	8	<i>10-12.5-160mg tab</i>		AMOXICILLIN 250MG	72
<i>amitriptyline 100mg tab</i>	17	<i>amlodipine/hydrochloroth</i>	26	CHEW TAB	
<i>amitriptyline 10mg tab</i>	17	<i>iazide/valsartan</i>		<i>amoxicillin 25mg/ml oral</i>	72
<i>amitriptyline 150mg tab</i>	17	<i>10-25-160mg tab</i>		<i>susp</i>	
<i>amitriptyline 25mg tab</i>	17	<i>amlodipine/hydrochloroth</i>	26	<i>amoxicillin 40mg/ml oral</i>	72
<i>amitriptyline 50mg tab</i>	18	<i>iazide/valsartan</i>		<i>susp</i>	
<i>amitriptyline 75mg tab</i>	18	<i>10-25-320mg tab</i>		<i>amoxicillin 500mg cap</i>	72
<i>amlodipine 10mg tab</i>	47	<i>amlodipine/hydrochloroth</i>	26	<i>amoxicillin 500mg tab</i>	72
<i>amlodipine 2.5mg tab</i>	47	<i>iazide/valsartan</i>		<i>amoxicillin 50mg/ml oral</i>	72
<i>amlodipine 5mg tab</i>	47	<i>5-12.5-160mg tab</i>		<i>susp</i>	
<i>amlodipine/benazepril</i>	26	<i>amlodipine/hydrochloroth</i>	26	<i>amoxicillin 80mg/ml oral</i>	72
<i>10-20mg cap</i>		<i>iazide/valsartan</i>		<i>susp</i>	
<i>amlodipine/benazepril</i>	26	<i>5-25-160mg tab</i>		<i>amoxicillin 875mg tab</i>	73
<i>10-40mg cap</i>		<i>amlodipine/olmesartan</i>	26	<i>amoxicillin/clavulanate</i>	73
<i>amlodipine/benazepril</i>	26	<i>medoxomil 10-20mg tab</i>		<i>250-125mg tab</i>	
<i>2.5-10mg cap</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>amoxicillin/clavulanate</i>	73	<i>anagrelide 1mg cap</i>	63	ARISTADA	43
<i>500-125mg tab</i>		<i>anastrozole 1mg tab</i>	31	882MG/3.2ML SYRINGE	
<i>amoxicillin/clavulanate</i>	73	ANORO ELLIPTA	9	<i>armodafinil 150mg tab</i>	1
<i>875-125mg tab</i>		62.5-25MCG POWDER		<i>armodafinil 200mg tab</i>	1
<i>amoxicillin/k clavulanate</i>	73	INHALER		<i>armodafinil 250mg tab</i>	1
<i>200-28.5mg/5ml oral</i>		APRACLONIDINE 0.5%	70	<i>armodafinil 50mg tab</i>	1
<i>susp</i>		OPHTH SOLN		ARNUITY 100MCG	9
<i>amoxicillin/k clavulanate</i>	73	<i>aprepitant 125mg cap</i>	22	POWDER INHALER	
<i>250-62.5mg/5ml oral</i>		<i>aprepitant 125mg/80mg</i>	22	ARNUITY 200MCG	9
<i>susp</i>		<i>cap therapy pack (3)</i>		POWDER INHALER	
<i>amoxicillin/k clavulanate</i>	73	<i>aprepitant 40mg cap</i>	22	ARNUITY 50MCG	9
<i>400-57mg/5ml oral susp</i>		<i>aprepitant 80mg cap</i>	22	POWDER INHALER	
<i>amoxicillin/k clavulanate</i>	73	<i>apri tab 28-day pack</i>	58	<i>asenapine 10mg sl tab</i>	41
<i>600-42.9mg/5ml oral</i>		APTIOM 200MG TAB	12	<i>asenapine 2.5mg sl tab</i>	41
<i>susp</i>		APTIOM 400MG TAB	12	<i>asenapine 5mg sl tab</i>	41
<i>amphetamine/dextroamph</i>	1	APTIOM 600MG TAB	12	<i>ashlyna tab 91-day pack</i>	58
<i>etamine 10mg tab</i>		APTIOM 800MG TAB	12	ASMANEX 100MCG HFA	9
<i>amphetamine/dextroamph</i>	1	APTIVUS 250MG CAP	43	INHALER	
<i>etamine 12.5mg tab</i>		<i>aranelle tab 28-day pack</i>	58	ASMANEX 110MCG	9
<i>amphetamine/dextroamph</i>	1	ARCALYST 220MG INJ	68	(30ACT) TWISTHALER	
<i>etamine 15mg tab</i>		AREXVY 120MCG/0.5ML	81	ASMANEX 200MCG HFA	9
<i>amphetamine/dextroamph</i>	1	INJ		INHALER	
<i>etamine 20mg tab</i>		ARIKAYCE	2	ASMANEX 220MCG	9
<i>amphetamine/dextroamph</i>	1	590MG/8.4ML INH SUSP		(120ACT) TWISTHALER	
<i>etamine 25mg er cap</i>		<i>aripiprazole 10mg odt</i>	42	ASMANEX 220MCG	9
<i>amphetamine/dextroamph</i>	1	<i>aripiprazole 10mg tab</i>	43	(30ACT) TWISTHALER	
<i>etamine 30mg tab</i>		<i>aripiprazole 15mg odt</i>	43	ASMANEX 220MCG	9
<i>amphetamine/dextroamph</i>	1	<i>aripiprazole 15mg tab</i>	43	(60ACT) TWISTHALER	
<i>etamine 5mg tab</i>		<i>aripiprazole 1mg/ml oral</i>	43	ASMANEX 50MCG HFA	9
<i>amphetamine/dextroamph</i>	1	<i>soln</i>		INHALER	
<i>etamine 7.5mg tab</i>		<i>aripiprazole 20mg tab</i>	43	<i>aspirin/dipyridamole</i>	63
AMPHOTERICIN B	22	<i>aripiprazole 2mg tab</i>	43	<i>25-200mg er cap</i>	
50MG INJ		<i>aripiprazole 30mg tab</i>	43	<i>atazanavir 150mg cap</i>	43
<i>ampicillin 1000mg inj</i>	73	<i>aripiprazole 5mg tab</i>	43	<i>atazanavir 200mg cap</i>	43
<i>ampicillin 100mg/ml inj</i>	73	ARISTADA	43	<i>atazanavir 300mg cap</i>	43
AMPICILLIN 125MG INJ	73	1064MG/3.9ML		<i>atenolol 100mg tab</i>	46
<i>ampicillin 500mg cap</i>	73	SYRINGE		<i>atenolol 25mg tab</i>	46
<i>ampicillin/sulbactam</i>	73	ARISTADA	43	<i>atenolol 50mg tab</i>	46
<i>1000-500mg inj</i>		441MG/1.6ML SYRINGE		<i>atenolol/chlorthalidone</i>	26
<i>ampicillin/sulbactam</i>	73	ARISTADA	43	<i>100-25mg tab</i>	
<i>100-50mg/ml inj</i>		662MG/2.4ML SYRINGE		<i>atenolol/chlorthalidone</i>	26
<i>ampicillin/sulbactam</i>	73	ARISTADA	43	<i>50-25mg tab</i>	
<i>2000-1000mg inj</i>		675MG/2.4ML SYRINGE		<i>atomoxetine 100mg cap</i>	1
<i>anagrelide 0.5mg cap</i>	63			<i>atomoxetine 10mg 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.

ALPHABETICAL LISTING OF DRUGS

<i>atomoxetine 18mg cap</i>	1	<i>aviane tab 28-day pack</i>	58	BALVERSA 4MG TAB	32
<i>atomoxetine 25mg cap</i>	1	AVONEX 30MCG/0.5ML	75	BALVERSA 5MG TAB	32
<i>atomoxetine 40mg cap</i>	1	AUTO-INJECTOR		<i>balziva tab 28-day pack</i>	58
<i>atomoxetine 60mg cap</i>	1	AVONEX 30MCG/0.5ML	75	BAQSIMI 3MG/DOSE	19
<i>atomoxetine 80mg cap</i>	1	SYRINGE		NASAL POWDER	
<i>atorvastatin 10mg tab</i>	23	AYVAKIT 100MG TAB	37	BCG LIVE TICE STRAIN	81
<i>atorvastatin 20mg tab</i>	23	AYVAKIT 200MG TAB	37	50MG INJ	
<i>atorvastatin 40mg tab</i>	23	AYVAKIT 25MG TAB	37	<i>benazepril 10mg tab</i>	24
<i>atorvastatin 80mg tab</i>	23	AYVAKIT 300MG TAB	37	<i>benazepril 20mg tab</i>	24
<i>atovaquone 750mg/5ml</i>	29	AYVAKIT 50MG TAB	37	<i>benazepril 40mg tab</i>	24
<i>oral susp</i>		<i>azathioprine 50mg tab</i>	68	<i>benazepril 5mg tab</i>	24
<i>atovaquone/proguanil</i>	29	<i>azelaic acid 15% gel</i>	55	<i>benazepril/hydrochloroth</i>	26
<i>250-100mg tab</i>		<i>azelastine 0.05% ophth</i>	71	<i>iazide 10-12.5mg tab</i>	
<i>atovaquone/proguanil</i>	29	<i>soln</i>		<i>benazepril/hydrochloroth</i>	26
<i>62.5-25mg tab</i>		<i>azelastine 0.1%</i>	69	<i>iazide 20-12.5mg tab</i>	
<i>atropine sulfate 1% ophth</i>	71	<i>(137mcg/act) nasal</i>		<i>benazepril/hydrochloroth</i>	26
<i>soln</i>		<i>inhaler</i>		<i>iazide 20-25mg tab</i>	
<i>atropine</i>	21	<i>azithromycin 20mg/ml</i>	28	<i>benazepril/hydrochloroth</i>	26
<i>sulfate/diphenoxylate</i>		<i>oral susp</i>		<i>iazide 5-6.25mg tab</i>	
<i>0.025-2.5mg tab</i>		<i>azithromycin 250mg pack</i>	28	BENLYSTA 200MG/ML	68
ATROVENT 17MCG HFA	8	<i>(6)</i>		AUTO-INJECTOR	
INHALER		<i>azithromycin 250mg tab</i>	28	BENLYSTA 200MG/ML	68
<i>aubra tab 28-day pack</i>	58	<i>azithromycin 40mg/ml</i>	28	SYRINGE	
AUGTYRO 160MG CAP	32	<i>oral susp</i>		<i>benztropine mesylate</i>	37
AUGTYRO 40MG CAP	32	<i>azithromycin 500mg inj</i>	28	<i>0.5mg tab</i>	
AUSTEDO 12MG TAB	75	<i>azithromycin 500mg tab</i>	28	<i>benztropine mesylate 1mg</i>	37
AUSTEDO 6MG TAB	75	<i>azithromycin 500mg tab</i>	28	<i>tab</i>	
AUSTEDO 9MG TAB	75	<i>pack (3)</i>		<i>benztropine mesylate 2mg</i>	38
AUSTEDO XR 12MG TAE	75	<i>azithromycin 600mg tab</i>	28	<i>tab</i>	
AUSTEDO XR 18MG TAE	75	<i>aztreonam 1gm inj</i>	28	BERINERT 500UNIT INJ	65
AUSTEDO XR 24MG TAE	75	<i>aztreonam 2gm inj</i>	28	BESREMI 500MCG/ML	37
AUSTEDO XR 30MG TAE	75	<i>azurette 28 day pack</i>	58	SYRINGE	
AUSTEDO XR 36MG TAE	75			<i>betaine 1gm powder for</i>	57
AUSTEDO XR 42MG TAE	75	B		<i>oral soln</i>	
AUSTEDO XR 48MG TAE	75	BACITRACIN	70	<i>betamethasone 0.05%</i>	53
AUSTEDO XR	75	500UNIT/GM OPHTH		<i>aug cream</i>	
6-12-24MG TAB		OINTMENT		<i>betamethasone 0.05%</i>	53
TITRATION PACK (42)		<i>bacitracin/polymyxin b</i>	71	<i>aug lotion</i>	
AUSTEDO XR 6MG TAB	75	<i>0.5-10unit/mg ophth</i>		<i>betamethasone 0.05%</i>	53
AUSTEDO XR TAB ONCI	75	<i>ointment</i>		<i>aug ointment</i>	
DAILY 4 WEEK		<i>baclofen 10mg tab</i>	69	<i>betamethasone 0.05%</i>	53
TITRATION PACK		<i>baclofen 20mg tab</i>	69	<i>cream</i>	
AUVELITY 105-45MG ER	15	<i>balsalazide disodium</i>	63	<i>betamethasone 0.05%</i>	53
TAB		<i>750mg cap</i>		<i>lotion</i>	
		BALVERSA 3MG TAB	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>betamethasone 0.05% ointment</i>	53	<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	27	<i>brimonidine tartrate 0.15% ophth soln</i>	70
<i>betamethasone 0.1% cream</i>	53	<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	27	<i>brimonidine tartrate 0.2% ophth soln</i>	70
<i>betamethasone 0.1% lotion</i>	53	<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	27	<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	70
<i>betamethasone 0.1% ointment</i>	53	<i>blisovi 21 fe tab 1.5/30 28-day pack</i>	58	BRIVIACT 100MG TAB	12
BETASERON 0.3MG INJ	75	<i>blisovi 24 fe tab 1/20 28-day pack</i>	58	BRIVIACT 10MG TAB	12
BETAXOLOL 0.5% OPTH SOLN	70	BOOSTRIX INJ	80	BRIVIACT 10MG/ML	12
<i>betaxolol 10mg tab</i>	46	BOOSTRIX SYRINGE	80	ORAL SOLN	
<i>betaxolol 20mg tab</i>	46	<i>bosentan 125mg tab</i>	77	BRIVIACT 25MG TAB	12
<i>bethanechol chloride 10mg tab</i>	81	<i>bosentan 62.5mg tab</i>	77	BRIVIACT 50MG TAB	12
<i>bethanechol chloride 25mg tab</i>	81	BOSULIF 100MG CAP	32	BRIVIACT 75MG TAB	12
<i>bethanechol chloride 50mg tab</i>	81	BOSULIF 100MG TAB	32	<i>bromfenac 0.07% ophth soln</i>	71
<i>bethanechol chloride 5mg tab</i>	81	BOSULIF 400MG TAB	32	<i>bromocriptine 2.5mg tab</i>	38
<i>bexarotene 1% gel</i>	52	BOSULIF 500MG TAB	32	<i>bromocriptine 5mg cap</i>	38
<i>bexarotene 75mg cap</i>	37	BOSULIF 50MG CAP	33	BRUKINSA 80MG CAP	33
BEXSERO SYRINGE	81	BRAFTOVI 75MG CAP	33	<i>budesonide 0.25mg/2ml inh susp</i>	9
<i>bicalutamide 50mg tab</i>	31	BREO ELLIPTA 100-25MCG POWDER INHALER	9	<i>budesonide 0.5mg/2ml inh susp</i>	9
BICILLIN L-A 1200000UNIT/2ML SYRINGE	73	BREO ELLIPTA 200-25MCG POWDER INHALER	9	<i>budesonide 1mg/2ml inh susp</i>	9
BICILLIN L-A 2400000UNIT/4ML SYRINGE	73	BREO ELLIPTA 50-25MCG POWDER INHALER	9	<i>budesonide 2mg/act rectal foam</i>	6
BICILLIN L-A 600000UNIT/ML SYRINGE	73	<i>breylna 160-4.5mcg/act inhaler</i>	9	<i>budesonide 3mg dr cap</i>	50
BIKTARVY 30-120-15MG TAB	43	<i>breylna 80-4.5mcg/act inhaler</i>	10	<i>budesonide 9mg er tab</i>	50
BIKTARVY 50-200-25MG TAB	43	BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	10	<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	10
<i>bimatoprost 0.03% ophth soln</i>	72	<i>briellyn tab 28-day pack</i>	58	<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	10
<i>bisoprolol fumarate 10mg tab</i>	46	BRILINTA 60MG TAB	63	<i>bumetanide 0.25mg/ml inj</i>	55
<i>bisoprolol fumarate 5mg tab</i>	46	BRILINTA 90MG TAB	63	<i>bumetanide 0.5mg tab</i>	55
		<i>brimonidine tartrate 0.1% ophth soln</i>	70	<i>bumetanide 1mg tab</i>	56
				<i>bumetanide 2mg tab</i>	56
				<i>buprenorphine 2mg sl tab</i>	5
				<i>buprenorphine 8mg sl tab</i>	5
				<i>buprenorphine/naloxone 12-3mg sl film</i>	5

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

ALPHABETICAL LISTING OF DRUGS

<i>buprenorphine/naloxone</i> 2-0.5mg sl film	5	CALQUENCE 100MG CAP	33	<i>carbamazepine 300mg er</i> <i>cap</i>	12
<i>buprenorphine/naloxone</i> 2-0.5mg sl tab	5	CALQUENCE 100MG TAB	33	<i>carbamazepine 400mg er</i> <i>tab</i>	12
<i>buprenorphine/naloxone</i> 4-1mg sl film	5	<i>camila 0.35mg tab 28-day</i> <i>pack</i>	73	<i>carbidopa 25mg tab</i>	37
<i>buprenorphine/naloxone</i> 8-2mg sl film	5	<i>camreselo tab 91-day</i> <i>pack</i>	58	<i>carbidopa/entacapone/le</i> <i>vodopa 12.5-200-50mg</i> <i>tab</i>	38
<i>buprenorphine/naloxone</i> 8-2mg sl tab	5	CAMZYOS 10MG CAP	49	<i>carbidopa/entacapone/le</i> <i>vodopa 18.75-200-75mg</i> <i>tab</i>	38
<i>bupropion 100mg sr</i> (12hr) tab	15	CAMZYOS 15MG CAP	49	<i>carbidopa/entacapone/le</i> <i>vodopa 25-200-100mg</i> <i>tab</i>	38
<i>bupropion 100mg tab</i>	15	CAMZYOS 2.5MG CAP	49	<i>carbidopa/entacapone/le</i> <i>vodopa 25-200-100mg</i> <i>tab</i>	38
<i>bupropion 150mg sr</i> (12 hr) tab	15	CAMZYOS 5MG CAP	49	<i>carbidopa/entacapone/le</i> <i>vodopa 25-200-100mg</i> <i>tab</i>	38
<i>bupropion 150mg sr</i> (12hr) tab	76	<i>candesartan cilexetil</i> 16mg tab	25	<i>carbidopa/entacapone/le</i> <i>vodopa 31.25-200-125mg</i> <i>tab</i>	38
<i>bupropion 200mg sr</i> (12hr) tab	15	<i>candesartan cilexetil</i> 32mg tab	25	<i>carbidopa/entacapone/le</i> <i>vodopa 31.25-200-125mg</i> <i>tab</i>	38
<i>bupropion 75mg tab</i>	15	<i>candesartan cilexetil 4mg</i> tab	25	<i>carbidopa/entacapone/le</i> <i>vodopa 37.5-200-150mg</i> <i>tab</i>	38
<i>bupropion xl 150mg</i> (24 hr) tab	15	<i>candesartan cilexetil 8mg</i> tab	25	<i>carbidopa/entacapone/le</i> <i>vodopa 50-200-200mg</i> <i>tab</i>	38
<i>bupropion xl 300mg</i> (24hr) tab	15	CAPLYTA 10.5MG CAP	39	CARBIDOPA/LEVODOPA	38
<i>bupirone 10mg tab</i>	7	CAPLYTA 21MG CAP	39	10-100MG ODT	
<i>bupirone 15mg tab</i>	7	CAPLYTA 42MG CAP	39	<i>carbidopa/levodopa</i>	38
<i>bupirone 30mg tab</i>	7	CAPRELSA 100MG TAB	33	10-100mg tab	
<i>bupirone 5mg tab</i>	7	CAPRELSA 300MG TAB	33	<i>carbidopa/levodopa</i>	38
<i>bupirone 7.5mg tab</i>	7	<i>captopril 100mg tab</i>	24	25-100mg er tab	
		<i>captopril 12.5mg tab</i>	24	CARBIDOPA/LEVODOPA	38
C		<i>captopril 25mg tab</i>	24	25-100MG ODT	
<i>cabergoline 0.5mg tab</i>	58	<i>captopril 50mg tab</i>	24	<i>carbidopa/levodopa</i>	38
CABOMETYX 20MG TAE	33	<i>carbamazepine 100mg</i> <i>chew tab</i>	12	25-100MG ODT	
CABOMETYX 40MG TAE	33	<i>carbamazepine 100mg er</i> <i>cap</i>	12	<i>carbidopa/levodopa</i>	38
CABOMETYX 60MG TAE	33	<i>carbamazepine 100mg er</i> <i>tab</i>	12	25-100mg tab	
<i>calcipotriene 0.005%</i> <i>cream</i>	53	<i>carbamazepine 200mg er</i> <i>cap</i>	12	CARBIDOPA/LEVODOPA	38
<i>calcipotriene 0.005%</i> <i>ointment</i>	53	<i>carbamazepine 200mg er</i> <i>tab</i>	12	25-250MG ODT	
CALCIPOTRIENE 0.005% TOPICAL SOLN	53	<i>carbamazepine 200mg</i> <i>tab</i>	12	<i>carbidopa/levodopa</i>	38
<i>calcitriol 0.25mcg cap</i>	57	<i>carbamazepine 200mg</i> <i>tab</i>	12	<i>carbidopa/levodopa</i> 50-200mg er tab	38
<i>calcitriol 0.5mcg cap</i>	57	<i>carbamazepine 20mg/ml</i> <i>oral susp</i>	12	<i>carglumic acid 200mg tab</i>	57
<i>calcitriol 1mcg/ml oral</i> <i>soln</i>	57			<i>for oral susp</i>	
				<i>carisoprodol 350mg tab</i>	69
				CARTEOLOL 1% OPHTH SOLN	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>cartia 120mg er (24hr) cap</i>	47	<i>cefpodoxime 10mg/ml oral susp</i>	50	<i>chloroquine phosphate 500mg tab</i>	29
<i>cartia 180mg er (24hr) cap</i>	47	<i>cefpodoxime 200mg tab</i>	50	<i>chlorpromazine 100mg tab</i>	42
<i>cartia 240mg er (24hr) cap</i>	47	<i>cefpodoxime 20mg/ml oral susp</i>	50	CHLORPROMAZINE	42
<i>cartia 300mg er (24hr) cap</i>	47	<i>cefprozil 250mg tab</i>	49	100MG/ML ORAL SOLN	
<i>carvedilol 12.5mg tab</i>	46	<i>cefprozil 25mg/ml oral susp</i>	49	<i>chlorpromazine 10mg tab</i>	42
<i>carvedilol 25mg tab</i>	46	<i>cefprozil 500mg tab</i>	49	<i>chlorpromazine 200mg tab</i>	42
<i>carvedilol 3.125mg tab</i>	46	<i>cefprozil 50mg/ml oral susp</i>	49	CHLORPROMAZINE	42
<i>carvedilol 6.25mg tab</i>	46	<i>ceftazidime 1gm inj</i>	50	30MG/ML ORAL SOLN	
<i>caspofungin acetate 50mg inj</i>	22	<i>ceftazidime 200mg/ml inj</i>	50	<i>chlorpromazine 50mg tab</i>	42
<i>caspofungin acetate 70mg inj</i>	22	<i>ceftazidime 2gm inj</i>	50	<i>chlorthalidone 25mg tab</i>	56
CAYSTON 75MG/ML INH SOLN	76	<i>ceftriaxone 10gm inj</i>	50	<i>chlorthalidone 50mg tab</i>	56
CEFACTOR 250MG CAP	49	<i>ceftriaxone 1gm inj</i>	50	<i>chlorzoxazone 500mg tab</i>	69
CEFACTOR 500MG CAP	49	<i>ceftriaxone 250mg inj</i>	50	<i>cholestyramine resin (sugar-free) 4gm powder for oral susp</i>	23
<i>cefadroxil 100mg/ml oral susp</i>	49	<i>ceftriaxone 2gm inj</i>	50	<i>cholestyramine resin 4gm powder for oral susp</i>	23
<i>cefadroxil 500mg cap</i>	49	<i>ceftriaxone 500mg inj</i>	50	<i>ciclopirox 0.77% cream</i>	52
<i>cefadroxil 50mg/ml oral susp</i>	49	<i>cefuroxime 1500mg inj</i>	49	<i>ciclopirox 0.77% gel</i>	52
<i>cefazolin 1000mg inj</i>	49	<i>cefuroxime 250mg tab</i>	49	<i>ciclopirox 1% shampoo</i>	52
<i>cefazolin 200mg/ml inj</i>	49	<i>cefuroxime 500mg tab</i>	49	<i>ciclopirox 8% topical soln</i>	52
<i>cefazolin 500mg inj</i>	49	<i>cefuroxime 750mg inj</i>	49	CILASTATIN/IMIPENEM	29
<i>cefdinir 25mg/ml oral susp</i>	50	<i>celecoxib 100mg cap</i>	3	250-250MG INJ	
<i>cefdinir 300mg cap</i>	50	<i>celecoxib 200mg cap</i>	3	<i>cilastatin/imipenem 500-500mg inj</i>	29
<i>cefdinir 50mg/ml oral susp</i>	50	<i>celecoxib 400mg cap</i>	3	<i>cilostazol 100mg tab</i>	63
<i>cefepime 1000mg inj</i>	28	<i>celecoxib 50mg cap</i>	3	<i>cilostazol 50mg tab</i>	63
<i>cefepime 2000mg inj</i>	28	<i>cephalexin 250mg cap</i>	49	CIMDUO 300-300MG TAB	43
<i>cefixime 20mg/ml oral susp</i>	50	<i>cephalexin 25mg/ml oral susp</i>	49	<i>cimetidine 200mg tab</i>	80
<i>cefixime 400mg cap</i>	50	<i>cephalexin 500mg cap</i>	49	<i>cimetidine 300mg tab</i>	80
<i>cefixime 40mg/ml oral susp</i>	50	<i>cephalexin 50mg/ml oral susp</i>	49	<i>cimetidine 400mg tab</i>	80
<i>cefoxitin 1gm inj</i>	49	<i>cevimeline 30mg cap</i>	51	<i>cimetidine 800mg tab</i>	80
<i>cefoxitin 200mg/ml inj</i>	49	<i>chlordiazepoxide 10mg cap</i>	7	CIMZIA 200MG INJ	3
<i>cefoxitin 2gm inj</i>	49	<i>chlordiazepoxide 25mg cap</i>	7	CIMZIA 200MG/ML SYRINGE	3
<i>cefpodoxime 100mg tab</i>	50	<i>chlorthalidone gluconate 0.12% mouthwash</i>	51	<i>cinacalcet 30mg tab</i>	57
		<i>chloroquine phosphate 250mg tab</i>	29	<i>cinacalcet 60mg tab</i>	57
				<i>cinacalcet 90mg tab</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>ciprofloxacin 0.3% ophth soln</i>	71	<i>clindamycin 900mg/6ml inj</i>	28	<i>clonidine 0.1mg/24hr weekly patch</i>	25
<i>ciprofloxacin 250mg tab</i>	62	CLINIMIX 4.25/10 INJ	70	<i>clonidine 0.2mg tab</i>	25
CIPROFLOXACIN	62	CLINIMIX 4.25/5 INJ	70	<i>clonidine 0.2mg/24hr weekly patch</i>	25
2MG/ML INJ		CLINIMIX 5/15 INJ	70	<i>clonidine 0.3mg tab</i>	25
<i>ciprofloxacin 500mg tab</i>	62	CLINIMIX 5/20 INJ	70	<i>clonidine 0.3mg/24hr weekly patch</i>	25
<i>ciprofloxacin 750mg tab</i>	62	<i>clinisol 15% inj</i>	70	<i>clonidine 0.3mg/24hr weekly patch</i>	25
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	72	<i>clobazam 10mg tab</i>	11	<i>clonidine 0.3mg/24hr weekly patch</i>	25
<i>citalopram 10mg tab</i>	16	<i>clobazam 2.5mg/ml oral susp</i>	11	<i>clopidogrel 75mg tab</i>	63
<i>citalopram 20mg tab</i>	16	<i>clobazam 20mg tab</i>	11	<i>clorazepate dipotassium 15mg tab</i>	7
<i>citalopram 2mg/ml oral soln</i>	16	<i>clobetasol propionate 0.05% cream</i>	53	<i>clorazepate dipotassium 3.75mg tab</i>	7
<i>citalopram 40mg tab</i>	16	<i>clobetasol propionate 0.05% e cream</i>	53	<i>clorazepate dipotassium 7.5mg tab</i>	7
<i>claravis 10mg cap</i>	51	<i>clobetasol propionate 0.05% foam</i>	53	<i>clotrimazole 1% cream</i>	52
<i>claravis 20mg cap</i>	51	<i>clobetasol propionate 0.05% gel</i>	53	<i>clotrimazole 10mg lozenge</i>	51
<i>claravis 30mg cap</i>	51	<i>clobetasol propionate 0.05% gel</i>	53	<i>clotrimazole/betamethasone 1-0.05% cream</i>	52
<i>claravis 40mg cap</i>	51	<i>clobetasol propionate 0.05% lotion</i>	53	<i>clozapine 100mg odt</i>	41
<i>clarithromycin 250mg tab</i>	28	<i>clobetasol propionate 0.05% ointment</i>	53	<i>clozapine 100mg tab</i>	41
CLARITHROMYCIN	28	<i>clobetasol propionate 0.05% ointment</i>	53	CLOZAPINE 12.5MG	41
25MG/ML ORAL SUSP		<i>clobetasol propionate 0.05% shampoo</i>	53	ODT	
<i>clarithromycin 500mg tab</i>	28	<i>clobetasol propionate 0.05% topical soln</i>	53	<i>clozapine 150mg odt</i>	41
CLARITHROMYCIN	28	<i>clobetasol propionate 0.05% topical spray</i>	54	<i>clozapine 200mg odt</i>	41
50MG/ML ORAL SUSP		<i>clodan 0.05% shampoo</i>	54	<i>clozapine 200mg tab</i>	41
<i>clindamycin 1% gel</i>	51	<i>clomipramine 25mg cap</i>	18	<i>clozapine 25mg odt</i>	41
<i>clindamycin 1% gel (twice-daily)</i>	51	<i>clomipramine 50mg cap</i>	18	<i>clozapine 25mg tab</i>	41
<i>clindamycin 1% lotion</i>	51	<i>clomipramine 75mg cap</i>	18	<i>clozapine 50mg tab</i>	41
<i>clindamycin 1% topical soln</i>	51	<i>clonazepam 0.125mg odt</i>	11	COARTEM 20-120MG	29
<i>clindamycin 150mg cap</i>	28	<i>clonazepam 0.25mg odt</i>	11	TAB	
<i>clindamycin 2% vaginal cream</i>	82	<i>clonazepam 0.5mg odt</i>	11	COBENFY 20-100MG	39
<i>clindamycin 300mg cap</i>	28	<i>clonazepam 0.5mg tab</i>	11	CAP	
<i>clindamycin 300mg/50ml inj</i>	28	<i>clonazepam 1mg odt</i>	11	COBENFY 20-50MG CAP	39
<i>clindamycin 600mg/50ml inj</i>	28	<i>clonazepam 1mg tab</i>	12	COBENFY 30-125MG	39
<i>clindamycin 75mg cap</i>	28	<i>clonazepam 2mg odt</i>	12	CAP	
<i>clindamycin 75mg/5ml oral soln</i>	28	<i>clonazepam 2mg tab</i>	12	COBENFY CAP 28-DAY	39
<i>clindamycin 900mg/50ml inj</i>	28	<i>clonidine 0.1mg er tab</i>	1	STARTER KIT PACK (56)	
		<i>clonidine 0.1mg tab</i>	25	<i>codeine phosphate/acetaminophen 15-300mg tab</i>	5

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

ALPHABETICAL LISTING OF DRUGS

CODEINE	5	CREON	55	CYSTARAN 0.44%	72
PHOSPHATE/ACETAMIN		120000-24000-76000UNI		OPHTH SOLN	
OPHEN 2.4-24MG/ML		T DR CAP		D	
ORAL SOLN		CREON	55	<i>dalfampridine 10mg er</i>	75
<i>codeine</i>	5	15000-3000-9500UNIT		<i>tab</i>	
<i>phosphate/acetaminophe</i>		DR CAP		<i>danazol 100mg cap</i>	5
<i>n 30-300mg tab</i>		CREON	55	<i>danazol 200mg cap</i>	5
<i>codeine</i>	5	180000-36000-114000U		<i>danazol 50mg cap</i>	5
<i>phosphate/acetaminophe</i>		NIT DR CAP		<i>dantrolene sodium 100mg</i>	69
<i>n 60-300mg tab</i>		CREON	55	<i>cap</i>	
<i>colchicine 0.6mg tab</i>	63	30000-6000-19000UNIT		<i>dantrolene sodium 25mg</i>	69
<i>colchicine/probenecid</i>	63	DR CAP		<i>cap</i>	
<i>0.5-500mg tab</i>		CREON	55	<i>dantrolene sodium 50mg</i>	69
<i>colesevelam 625mg tab</i>	23	60000-12000-38000UNIT		<i>cap</i>	
<i>colestipol 1gm tab</i>	23	DR CAP		<i>dapsone 100mg tab</i>	30
<i>colestipol 5000mg</i>	23	<i>cromolyn sodium 20mg/ml</i>	62	<i>dapsone 25mg tab</i>	30
<i>granules for oral susp</i>		<i>oral soln</i>		DAPTACEL INJ	80
<i>colistin 75mg/ml inj</i>	28	CROMOLYN SODIUM	71	<i>daptomycin 500mg inj</i>	28
COMBIVENT	10	4% OPHTH SOLN		<i>darunavir 600mg tab</i>	43
20-100MCG/ACT		<i>cryselle tab 28-day pack</i>	58	<i>darunavir 800mg tab</i>	43
INHALER		<i>cyclobenzaprine 10mg</i>	69	<i>dasatinib 100mg tab</i>	33
COMETRIQ CAP 100MG	33	<i>tab</i>		<i>dasatinib 140mg tab</i>	33
DAILY DOSE PACK (56)		<i>cyclobenzaprine 5mg tab</i>	69	<i>dasatinib 20mg tab</i>	33
COMETRIQ CAP 140MG	33	CYCLOPHOSPHAMIDE	30	<i>dasatinib 50mg tab</i>	33
DAILY DOSE PACK (112)		25MG TAB		<i>dasatinib 70mg tab</i>	33
COMETRIQ CAP 60MG	33	CYCLOPHOSPHAMIDE	30	<i>dasatinib 80mg tab</i>	33
DAILY DOSE PACK (84)		50MG TAB		DAURISMO 100MG TAB	31
COMPLERA	43	<i>cyclosporine 0.05% ophth</i>	71	DAURISMO 25MG TAB	31
200-25-300MG TAB		<i>susp</i>		<i>deblitane 0.35mg tab</i>	73
<i>compro 25mg rectal supp</i>	42	<i>cyclosporine 100mg cap</i>	68	<i>28-day pack</i>	
<i>constulose 10gm/15ml</i>	65	<i>cyclosporine 25mg cap</i>	68	<i>deferasirox 180mg tab</i>	68
<i>oral soln</i>		<i>cyclosporine modified</i>	68	<i>deferasirox 360mg tab</i>	68
COPIKTRA 15MG CAP	33	<i>100mg cap</i>		<i>deferasirox 90mg tab</i>	68
COPIKTRA 25MG CAP	33	<i>cyclosporine modified</i>	68	DELSTRIGO	43
COSENTYX 150MG/ML	53	<i>100mg/ml oral soln</i>		100-300-300MG TAB	
AUTO-INJECTOR		<i>cyclosporine modified</i>	68	DEPO-SUBQ PROVERA	73
COSENTYX 150MG/ML	53	<i>25mg cap</i>		104MG/0.65ML	
SYRINGE		<i>cyclosporine modified</i>	68	SYRINGE	
COSENTYX	53	<i>50mg cap</i>		<i>depo-testosterone</i>	6
75MG/0.5ML SYRINGE		<i>cyred tab 28-day pack</i>	58	<i>100mg/ml inj</i>	
COSENTYX UNOREADY	53	CYSTADROPS 0.37%	72	<i>depo-testosterone</i>	6
300MG/2ML		OPHTH SOLN		<i>200mg/ml inj</i>	
AUTO-INJECTOR		CYSTAGON 150MG CAP	63	DESCOVY 120-15MG	43
COTELLIC 20MG TAB	33	CYSTAGON 50MG CAP	63	TAB	

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

DESCOVY 200-25MG TAB	43	DEXAMETHASONE PHOSPHATE 0.1%	71	<i>diclofenac potassium</i> 50mg tab	3
<i>desipramine 100mg tab</i>	18	OPHTH SOLN		<i>diclofenac sodium 0.1%</i>	72
<i>desipramine 10mg tab</i>	18	<i>dexamethasone/neomycin</i> /polymyxin b 0.1% ophth ointment	71	<i>ophth soln</i>	
<i>desipramine 150mg tab</i>	18	<i>dexamethasone/tobramyc</i> in 0.3-0.1% ophth susp	71	<i>diclofenac sodium 1.5%</i> topical soln	3
<i>desipramine 25mg tab</i>	18	<i>dexmethylphenidate</i> 10mg tab	1	<i>diclofenac sodium 100mg</i> er tab	3
<i>desipramine 50mg tab</i>	18	<i>dexmethylphenidate</i> 2.5mg tab	1	<i>diclofenac sodium 25mg</i> dr tab	3
<i>desipramine 75mg tab</i>	18	<i>dexmethylphenidate</i> 5mg tab	1	<i>diclofenac sodium 3% gel</i>	52
<i>desloratadine 5mg tab</i>	77	<i>dextroamphetamine</i> sulfate 10mg tab	1	<i>diclofenac sodium 50mg</i> dr tab	3
<i>desmopressin acetate</i> 0.01% (0.01mg/act) nasal spray	58	<i>dextroamphetamine</i> sulfate 5mg tab	1	<i>diclofenac sodium 75mg</i> dr tab	3
<i>desmopressin acetate</i> 0.1mg tab	58	DEXTROSE 10% INJ	70	<i>dicloxacillin 250mg cap</i>	73
<i>desmopressin acetate</i> 0.2mg tab	58	DIACOMIT 250MG CAP	12	<i>dicloxacillin 500mg cap</i>	73
<i>desogestrel/ethinyl</i> <i>estradiol/ethinyl</i> <i>estradiol</i> 0.15-0.01-0.02mg tab 28-day pack	58	DIACOMIT 250MG POWDER FOR ORAL SUSP	12	<i>dicyclomine 10mg cap</i>	80
<i>desonide 0.05% ointment</i>	54	DIACOMIT 500MG CAP	13	<i>dicyclomine 20mg tab</i>	80
<i>desoximetasone 0.25%</i> cream	54	DIACOMIT 500MG POWDER FOR ORAL SUSP	13	<i>dicyclomine 2mg/ml oral</i> soln	80
<i>desoximetasone 0.25%</i> ointment	54	<i>diazepam 10mg tab</i>	7	DIFICID 200MG TAB	28
<i>desvenlafaxine succinate</i> 100mg er tab	17	<i>diazepam 10mg/2ml</i> rectal gel	12	DIFICID 40MG/ML ORAL SUSP	28
<i>desvenlafaxine succinate</i> 25mg er tab	17	<i>diazepam 1mg/ml oral</i> soln	7	<i>diflunisal 500mg tab</i>	3
<i>desvenlafaxine succinate</i> 50mg er tab	17	DIAZEPAM 2.5MG/0.5ML RECTAL GEL	12	<i>difluprednate 0.05%</i> ophth susp	71
DEXAMETHASONE 0.1MG/ML ORAL SOLN	50	<i>diazepam 20mg/4ml</i> rectal gel	12	<i>digoxin 0.125mg tab</i>	49
<i>dexamethasone 0.5mg tab</i>	50	<i>diazepam 2mg tab</i>	7	<i>digoxin 0.25mg tab</i>	49
<i>dexamethasone 0.75mg</i> tab	50	<i>diazepam 5mg tab</i>	7	<i>dihydroergotamine</i>	66
<i>dexamethasone 1.5mg tab</i>	50	<i>diazepam 5mg/ml oral</i> soln	7	<i>mesylate 0.5mg/act nasal</i> inhaler	
<i>dexamethasone 1mg tab</i>	50	<i>diazoxide 50mg/ml oral</i> susp	19	<i>dilt 120mg er (24hr) cap</i>	47
<i>dexamethasone 2mg tab</i>	50			<i>dilt 180mg er (24hr) cap</i>	47
<i>dexamethasone 4mg tab</i>	50			<i>dilt 240mg er (24hr) cap</i>	47
<i>dexamethasone 6mg tab</i>	50			<i>diltiazem 120mg er (12hr)</i> cap	47
				<i>diltiazem 120mg er (24hr)</i> cap	47
				<i>diltiazem 120mg tab</i>	47
				<i>diltiazem 180mg er (24hr)</i>	47
				<i>diltiazem 240mg er (24hr)</i> cap	48

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

ALPHABETICAL LISTING OF DRUGS

<i>diltiazem 300mg er (24hr) cap</i>	48	DOPTELET 20MG TAB	64	<i>doxycycline monohydrate 100mg cap</i>	78
<i>diltiazem 30mg tab</i>	48	DOPTELET TAB 40MG	64	<i>doxycycline monohydrate 100mg tab</i>	78
<i>diltiazem 360mg er (24hr) cap</i>	48	DAILY DOSE PACK (10)		<i>doxycycline monohydrate 50mg cap</i>	78
<i>diltiazem 420mg er (24hr) cap</i>	48	DOPTELET TAB 60MG	64	<i>doxycycline monohydrate 50mg tab</i>	78
<i>diltiazem 60mg er (12hr) cap</i>	48	DAILY DOSE PACK (15)		<i>doxycycline monohydrate 5mg/ml oral susp</i>	78
<i>diltiazem 60mg tab</i>	48	<i>dorzolamide 2% ophth soln</i>	72	DRIZALMA 20MG DR	17
<i>diltiazem 90mg er (12hr) cap</i>	48	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	70	SPRINKLE CAP	
<i>diltiazem 90mg tab</i>	48	<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	70	DRIZALMA 30MG DR	17
<i>dimethyl fumarate 120mg dr cap</i>	75	<i>dotti 0.025mg/24hr twice weekly patch</i>	61	SPRINKLE CAP	
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	75	<i>dotti 0.0375mg/24hr twice weekly patch</i>	61	DRIZALMA 40MG DR	17
<i>dimethyl fumarate 240mg dr cap</i>	75	<i>dotti 0.05mg/24hr twice weekly patch</i>	61	SPRINKLE CAP	
<i>disopyramide 100mg cap</i>	7	<i>dotti 0.075mg/24hr twice weekly patch</i>	61	DRIZALMA 60MG DR	17
<i>disopyramide 150mg cap</i>	7	<i>dotti 0.1mg/24hr twice weekly patch</i>	61	SPRINKLE CAP	
<i>disulfiram 250mg tab</i>	74	DOVATO 50-300MG TAB	43	<i>dronabinol 10mg cap</i>	22
<i>disulfiram 500mg tab</i>	74	<i>doxazosin 1mg tab</i>	25	<i>dronabinol 2.5mg cap</i>	22
<i>divalproex sodium 125mg dr cap</i>	15	<i>doxazosin 2mg tab</i>	25	<i>dronabinol 5mg cap</i>	22
<i>divalproex sodium 125mg dr tab</i>	15	<i>doxazosin 4mg tab</i>	25	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	
<i>divalproex sodium 250mg dr tab</i>	15	<i>doxazosin 8mg tab</i>	25	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	
<i>divalproex sodium 250mg er tab</i>	15	<i>doxepin 100mg cap</i>	18	<i>droxidopa 100mg cap</i>	48
<i>divalproex sodium 500mg dr tab</i>	15	<i>doxepin 10mg cap</i>	18	<i>droxidopa 200mg cap</i>	48
<i>divalproex sodium 500mg er tab</i>	15	<i>doxepin 10mg/ml oral soln</i>	18	<i>droxidopa 300mg cap</i>	48
<i>dofetilide 0.125mg cap</i>	8	<i>doxepin 150mg cap</i>	18	DULERA 100-5MCG	10
<i>dofetilide 0.25mg cap</i>	8	<i>doxepin 25mg cap</i>	18	INHALER	
<i>dofetilide 0.5mg cap</i>	8	<i>doxepin 50mg cap</i>	18	DULERA 200-5MCG	10
<i>donepezil 10mg odt</i>	74	<i>doxepin 75mg cap</i>	18	INHALER	
<i>donepezil 10mg tab</i>	74	<i>doxy 100mg inj</i>	78	DULERA 50-5MCG	10
<i>donepezil 23mg tab</i>	74	<i>doxycycline hyclate 100mg cap</i>	78	INHALER	
<i>donepezil 5mg odt</i>	74	<i>doxycycline hyclate 100mg tab</i>	78	<i>duloxetine 20mg dr cap</i>	17
<i>donepezil 5mg tab</i>	74	<i>doxycycline hyclate 20mg tab</i>	78	<i>duloxetine 30mg dr cap</i>	17
		<i>doxycycline hyclate 50mg cap</i>	78	<i>duloxetine 60mg dr cap</i>	17
				DUPIXENT	8
				200MG/1.14ML	
				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

DUPIXENT 200MG/1.14ML SYRINGE	8	EMGALITY 120MG/ML AUTO-INJECTOR	66	ENBREL 50MG/ML AUTO-INJECTOR	3
DUPIXENT 300MG/2ML AUTO-INJECTOR	8	EMGALITY 120MG/ML SYRINGE	66	ENBREL 50MG/ML CARTRIDGE	3
DUPIXENT 300MG/2ML SYRINGE	8	EMSAM 12MG/24HR PATCH	16	ENBREL 50MG/ML SYRINGE	3
<i>dutasteride 0.5mg cap</i>	63	EMSAM 6MG/24HR PATCH	16	<i>endocet 10-325mg tab</i>	5
E		EMSAM 9MG/24HR PATCH	16	<i>endocet 2.5-325mg tab</i>	5
<i>econazole nitrate 1% cream</i>	52	EMTRICITABINE 200mg cap	44	<i>endocet 5-325mg tab</i>	5
EDURANT 25MG TAB	43	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	44	<i>endocet 7.5-325mg tab</i>	5
<i>efavirenz 600mg tab</i>	43	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	44	ENGERIX-B	81
<i>efavirenz/emtricitabine/te nofovir disoproxil fumarate 600-200-300mg tab</i>	43	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	44	10MCG/0.5ML SYRINGE	
<i>efavirenz/lamivudine/teno fovir disoproxil fumarate 400-300-300mg tab</i>	43	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	44	ENGERIX-B 20MCG/ML INJ	81
<i>efavirenz/lamivudine/teno fovir disoproxil fumarate 600-300-300mg tab</i>	44	EMTRIVA 10MG/ML ORAL SOLN	44	ENGERIX-B 20MCG/ML SYRINGE	81
ELECTROLYTE-148 SOLUTION	66	<i>enalapril maleate 10mg tab</i>	24	<i>enilloring</i>	58
ELIGARD 22.5MG SYRINGE	31	<i>enalapril maleate 2.5mg tab</i>	24	<i>0.120-0.015mg/24hr vaginal system</i>	
ELIGARD 30MG SYRINGE	31	<i>enalapril maleate 20mg tab</i>	24	<i>enoxaparin sodium 100mg/1ml syringe</i>	11
ELIGARD 45MG SYRINGE	31	<i>enalapril maleate 5mg tab</i>	24	<i>enoxaparin sodium 120mg/0.8ml syringe</i>	11
ELIGARD 7.5MG SYRINGE	31	<i>enalapril</i>	27	<i>enoxaparin sodium 150mg/1ml syringe</i>	11
ELIQUIS 2.5MG TAB	10	<i>maleate/hydrochlorothiaz ide 10-25mg tab</i>	27	<i>enoxaparin sodium 30mg/0.3ml syringe</i>	11
ELIQUIS 5MG 30-DAY STARTER PACK (74)	10	<i>enalapril</i>	27	<i>enoxaparin sodium 40mg/0.4ml syringe</i>	11
ELIQUIS 5MG TAB	10	<i>maleate/hydrochlorothiaz ide 5-12.5mg tab</i>	27	<i>enoxaparin sodium 60mg/0.6ml syringe</i>	11
ELMIRON 100MG CAP	63	ENBREL 25MG/0.5ML INJ	3	<i>enoxaparin sodium 80mg/0.8ml syringe</i>	11
<i>eluryng</i>	58	ENBREL 25MG/0.5ML SYRINGE	3	<i>enpresse tab 28-day pack</i>	58
<i>0.120-0.015mg/24hr vaginal system</i>				<i>enskyce tab 28-day pack</i>	58
EMGALITY 100MG/ML SYRINGE	66			<i>entacapone 200mg tab</i>	37
				<i>entecavir 0.5mg tab</i>	45
				<i>entecavir 1mg tab</i>	45
				ENTRESTO 24-26MG TAB	49
				ENTRESTO 49-51MG TAB	49
				ENTRESTO 97-103MG TAB	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>enulose 10gm/15ml oral soln</i>	62	<i>erythromycin</i>	28	<i>estradiol valerate 10mg/ml inj</i>	62
ENVARUSUS XR 0.75MG TAB	68	<i>ethylsuccinate 40mg/ml oral susp</i>		<i>estradiol valerate 20mg/ml inj</i>	62
ENVARUSUS XR 1MG TAB	68	<i>erythromycin</i>	28	<i>estradiol valerate 40mg/ml inj</i>	62
ENVARUSUS XR 4MG TAB	68	<i>ethylsuccinate 80mg/ml oral susp</i>		<i>estradiol/norethindrone acetate 0.5-0.1mg 28-day pack</i>	58
EPIDIOLEX 100MG/ML ORAL SOLN	13	<i>escitalopram 10mg tab</i>	16	<i>estradiol/norethindrone acetate 1-0.5mg 28-day pack</i>	58
<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	10	<i>escitalopram 1mg/ml oral soln</i>	16	<i>eszopiclone 1mg tab</i>	64
<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	10	<i>escitalopram 20mg tab</i>	16	<i>eszopiclone 2mg tab</i>	64
<i>epitol 200mg tab</i>	13	<i>escitalopram 5mg tab</i>	16	<i>eszopiclone 3mg tab</i>	64
<i>eplerenone 25mg tab</i>	27	<i>esomeprazole 20mg dr cap</i>	80	<i>ethambutol 100mg tab</i>	30
<i>eplerenone 50mg tab</i>	27	<i>esomeprazole 40mg dr cap</i>	80	<i>ethambutol 400mg tab</i>	30
EPRONTIA 25MG/ML ORAL SOLN	13	<i>estarylla tab 28-day pack</i>	58	<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.02-0.1mg tab 91-day pack</i>	59
ERIVEDGE 150MG CAP	31	<i>estradiol 0.0025mg/hr weekly patch</i>	61	<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg tab 91-day pack</i>	59
ERLEADA 240MG TAB	31	<i>estradiol 0.01% vaginal cream</i>	82	<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.035-1-1mg tab 28-day pack</i>	59
ERLEADA 60MG TAB	31	<i>estradiol 0.01mg/24hr twice weekly patch</i>	61	<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.05-1-1mg tab 28-day pack</i>	59
<i>erlotinib 100mg tab</i>	31	<i>estradiol 0.01mg/24hr weekly patch</i>	61	<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg tab 28-day pack</i>	59
<i>erlotinib 150mg tab</i>	31	<i>estradiol 0.025mg/24hr twice weekly patch</i>	61		
<i>erlotinib 25mg tab</i>	31	<i>estradiol 0.025mg/24hr weekly patch</i>	61		
<i>errin 0.35mg tab 28-day pack</i>	73	<i>estradiol 0.0375mg/24hr twice weekly patch</i>	61		
<i>ertapenem 1gm inj</i>	29	<i>estradiol 0.0375mg/24hr weekly patch</i>	61		
<i>ery-tab 250mg dr tab</i>	28	<i>estradiol 0.05mg/24hr twice weekly patch</i>	61		
<i>ery-tab 333mg dr tab</i>	28	<i>estradiol 0.05mg/24hr weekly patch</i>	61		
<i>ery-tab 500mg dr tab</i>	28	<i>estradiol 0.075mg/24hr twice weekly patch</i>	61		
<i>erythromycin 0.5% ophth ointment</i>	71	<i>estradiol 0.075mg/24hr weekly patch</i>	61		
<i>erythromycin 2% gel</i>	51	<i>estradiol 0.5mg tab</i>	61		
<i>erythromycin 2% topical soln</i>	51	<i>estradiol 1mg tab</i>	61		
<i>erythromycin 250mg dr tab</i>	28	<i>estradiol 2mg tab</i>	61		
<i>erythromycin 250mg tab</i>	28				
<i>erythromycin 333mg dr tab</i>	28				
<i>erythromycin 500mg dr tab</i>	28				
<i>erythromycin 500mg 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>ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg tab 28-day pack</i>	59	<i>etravirine 200mg tab</i>	44	<i>famciclovir 500mg tab</i>	46
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 28-day pack</i>	59	<i>euthyrox 100mcg tab</i>	78	<i>famotidine 20mg tab</i>	80
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 91-day pack</i>	59	<i>euthyrox 112mcg tab</i>	78	<i>famotidine 40mg tab</i>	80
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack</i>	59	<i>euthyrox 125mcg tab</i>	78	FANAPT 10MG TAB	40
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	59	<i>euthyrox 137mcg tab</i>	78	FANAPT 12MG TAB	40
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack</i>	59	<i>euthyrox 150mcg tab</i>	78	FANAPT 1MG TAB	40
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack</i>	59	<i>euthyrox 175mcg tab</i>	78	FANAPT 2MG TAB	40
<i>ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25 mg-mcg tab 28-day pack</i>	59	<i>euthyrox 200mcg tab</i>	79	FANAPT 4MG TAB	40
<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35 mg-mcg tab 28-day pack</i>	59	<i>euthyrox 25mcg tab</i>	79	FANAPT 6MG TAB	40
<i>ethosuximide 250mg cap</i>	15	<i>euthyrox 50mcg tab</i>	79	FANAPT 8MG TAB	40
<i>ethosuximide 50mg/ml oral soln</i>	15	<i>euthyrox 75mcg tab</i>	79	FANAPT TAB TITRATION PACK (8)	40
<i>etodolac 200mg cap</i>	3	<i>euthyrox 88mcg tab</i>	79	FARXIGA 10MG TAB	21
<i>etodolac 300mg cap</i>	3	<i>everolimus 0.25mg tab</i>	68	FARXIGA 5MG TAB	21
<i>etodolac 400mg tab</i>	3	<i>everolimus 0.5mg tab</i>	68	FASENRA 10MG/0.5ML SYRINGE	8
<i>etodolac 500mg tab</i>	3	<i>everolimus 0.75mg tab</i>	68	FASENRA 30MG/ML AUTO-INJECTOR	8
<i>etravirine 100mg tab</i>	44	<i>everolimus 10mg tab</i>	33	FASENRA 30MG/ML SYRINGE	8
		<i>everolimus 1mg tab</i>	68	<i>febuxostat 40mg tab</i>	63
		<i>everolimus 2.5mg tab</i>	33	<i>febuxostat 80mg tab</i>	63
		<i>everolimus 2mg tab for oral susp</i>	33	<i>felbamate 120mg/ml oral susp</i>	14
		<i>everolimus 3mg tab for oral susp</i>	33	<i>felbamate 400mg tab</i>	14
		<i>everolimus 5mg tab</i>	33	<i>felbamate 600mg tab</i>	15
		<i>everolimus 5mg tab for oral susp</i>	33	<i>felodipine 10mg er tab</i>	48
		<i>everolimus 7.5mg tab</i>	33	<i>felodipine 2.5mg er tab</i>	48
		EVOTAZ 300-150MG TAB	44	<i>felodipine 5mg er tab</i>	48
		EVRYSIDI 0.75MG/ML ORAL SOLN	70	<i>fenofibrate 134mg cap</i>	23
		<i>exemestane 25mg tab</i>	31	<i>fenofibrate 145mg tab</i>	23
		<i>ezetimibe 10mg tab</i>	23	<i>fenofibrate 160mg tab</i>	23
		<i>ezetimibe/simvastatin 10-10mg tab</i>	23	<i>fenofibrate 200mg cap</i>	23
		<i>ezetimibe/simvastatin 10-20mg tab</i>	23	<i>fenofibrate 48mg tab</i>	23
		<i>ezetimibe/simvastatin 10-40mg tab</i>	23	<i>fenofibrate 54mg tab</i>	23
		<i>ezetimibe/simvastatin 10-80mg tab</i>	23	<i>fenofibrate 67mg cap</i>	23
		F		<i>fenofibric acid 135mg dr cap</i>	23
		<i>falmina tab 28-day pack</i>	59	<i>fenofibric acid 45mg dr cap</i>	23
		<i>famciclovir 125mg tab</i>	46	<i>fentanyl 100mcg/hr patch</i>	4
		<i>famciclovir 250mg tab</i>	46	<i>fentanyl 12mcg/hr patch</i>	4
				<i>fentanyl 25mcg/hr patch</i>	4
				<i>fentanyl 50mcg/hr patch</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>fentanyl 75mcg/hr patch</i>	4	<i>fludrocortisone acetate</i>	51	FLUPHENAZINE	42
<i>fesoterodine fumarate</i>	80	<i>0.1mg tab</i>		2.5MG/ML INJ	
<i>4mg er tab</i>		<i>flunisolide 25%</i>	69	<i>fluphenazine 5mg tab</i>	42
<i>fesoterodine fumarate</i>	81	<i>(25mcg/act) nasal inhaler</i>		FLUPHENAZINE	42
<i>8mg er tab</i>		<i>fluocinolone acetonide</i>	54	5MG/ML ORAL SOLN	
FETZIMA 120MG ER	17	<i>0.01% cream</i>		<i>fluphenazine decanoate</i>	42
CAP		<i>fluocinolone acetonide</i>	72	<i>25mg/ml inj</i>	
FETZIMA 20MG ER CAP	17	<i>0.01% otic soln</i>		FLURBIPROFEN	72
FETZIMA 40MG ER CAP	17	<i>fluocinolone acetonide</i>	54	SODIUM 0.03% OPHTH	
FETZIMA 80MG ER CAP	17	<i>0.01% topical oil</i>		SOLN	
FETZIMA ER CAP	17	<i>fluocinolone acetonide</i>	54	<i>fluticasone propionate</i>	54
TITRATION PACK (28)		<i>0.01% topical soln</i>		<i>0.005% ointment</i>	
<i>finasteride 5mg tab</i>	63	<i>fluocinolone acetonide</i>	54	<i>fluticasone propionate</i>	54
<i>fingolimod 0.5mg cap</i>	75	<i>0.025% cream</i>		<i>0.05% cream</i>	
FINTEPLA 2.2MG/ML	13	<i>fluocinolone acetonide</i>	54	FLUTICASONE	9
ORAL SOLN		<i>0.025% ointment</i>		PROPIONATE 110MCG	
<i>finzala 24 fe chewable tab</i>	59	<i>fluocinonide 0.05% cream</i>	54	INHALER	
<i>28-day pack</i>		<i>fluocinonide 0.05% e</i>	54	FLUTICASONE	9
FIRDAPSE 10MG TAB	30	<i>cream</i>		PROPIONATE 220MCG	
FIRMAGON 120MG INJ	32	FLUOCINONIDE 0.05%	54	INHALER	
FIRMAGON 80MG INJ	32	GEL		FLUTICASONE	9
<i>flac 0.01% otic soln</i>	72	<i>fluocinonide 0.05%</i>	54	PROPIONATE 44MCG	
<i>flavoxate 100mg tab</i>	81	<i>ointment</i>		INHALER	
<i>flecainide acetate 100mg</i>	8	<i>fluocinonide 0.05%</i>	54	<i>fluticasone propionate</i>	69
<i>tab</i>		<i>topical soln</i>		<i>50mcg/act nasal inhaler</i>	
<i>flecainide acetate 150mg</i>	8	<i>fluocinonide 0.1% cream</i>	54	<i>fluticasone</i>	10
<i>tab</i>		<i>fluorometholone 0.1%</i>	71	<i>propionate/salmeterol</i>	
<i>flecainide acetate 50mg</i>	8	<i>ophth susp</i>		<i>100-50mcg/act powder</i>	
<i>tab</i>		FLUOROURACIL 2%	52	<i>inhaler</i>	
<i>fluconazole 100mg tab</i>	22	TOPICAL SOLN		<i>fluticasone</i>	10
<i>fluconazole 10mg/ml oral</i>	22	<i>fluorouracil 5% cream</i>	52	<i>propionate/salmeterol</i>	
<i>susp</i>		<i>fluorouracil 5% topical</i>	52	<i>250-50mcg/act powder</i>	
<i>fluconazole 150mg tab</i>	22	<i>soln</i>		<i>inhaler</i>	
<i>fluconazole 200mg tab</i>	22	<i>fluoxetine 10mg cap</i>	16	<i>fluticasone</i>	10
<i>fluconazole 200mg/100ml</i>	22	<i>fluoxetine 20mg cap</i>	16	<i>propionate/salmeterol</i>	
<i>inj</i>		<i>fluoxetine 40mg cap</i>	16	<i>500-50mcg/act powder</i>	
<i>fluconazole 400mg/200ml</i>	22	<i>fluoxetine 4mg/ml oral</i>	16	<i>inhaler</i>	
<i>inj</i>		<i>soln</i>		<i>fluvastatin 20mg cap</i>	23
<i>fluconazole 40mg/ml oral</i>	22	<i>fluoxetine 60mg tab</i>	16	<i>fluvastatin 40mg cap</i>	23
<i>susp</i>		FLUPHENAZINE	42	<i>fluvoxamine maleate</i>	16
<i>fluconazole 50mg tab</i>	22	0.5MG/ML ORAL SOLN		<i>100mg tab</i>	
<i>flucytosine 250mg cap</i>	22	<i>fluphenazine 10mg tab</i>	42	<i>fluvoxamine maleate</i>	16
<i>flucytosine 500mg cap</i>	22	<i>fluphenazine 1mg tab</i>	42	<i>25mg tab</i>	
		<i>fluphenazine 2.5mg tab</i>	42		

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

ALPHABETICAL LISTING OF DRUGS

<i>fluvoxamine maleate</i>	16	FYCOMPA 2MG TAB	13	<i>generlac 10gm/15ml oral</i>	62
<i>50mg tab</i>		FYCOMPA 4MG TAB	13	<i>soln</i>	
<i>fondaparinux sodium</i>	11	FYCOMPA 6MG TAB	13	<i>gengraf 100mg cap</i>	68
<i>10mg/0.8ml syringe</i>		FYCOMPA 8MG TAB	13	<i>gengraf 100mg/ml oral</i>	68
<i>fondaparinux sodium</i>	11	<hr/>			
<i>2.5mg/0.5ml syringe</i>		G		<i>soln</i>	
<i>fondaparinux sodium</i>	11	<i>gabapentin 100mg cap</i>	13	<i>gengraf 25mg cap</i>	68
<i>5mg/0.4ml syringe</i>		<i>gabapentin 300mg cap</i>	13	<i>gentamicin 0.1% cream</i>	52
<i>fondaparinux sodium</i>	11	<i>gabapentin 400mg cap</i>	13	<i>gentamicin 0.1% ointment</i>	52
<i>7.5mg/0.6ml syringe</i>		<i>gabapentin 50mg/ml oral</i>	13	<i>gentamicin 0.3% ophth</i>	71
<i>fosamprenavir 700mg tab</i>	44	<i>soln</i>		<i>soln</i>	
<i>fosinopril sodium 10mg</i>	24	<i>gabapentin 600mg tab</i>	13	GENTAMICIN 0.8MG/ML	2
<i>tab</i>		<i>(Neurontin equiv)</i>		INJ	
<i>fosinopril sodium 20mg</i>	24	<i>gabapentin 800mg tab</i>	13	<i>gentamicin 1.2mg/ml inj</i>	2
<i>tab</i>		<i>galantamine 12mg tab</i>	74	GENTAMICIN 1.6MG/ML	2
<i>fosinopril sodium 40mg</i>	24	<i>galantamine 4mg tab</i>	74	INJ	
<i>tab</i>		<i>galantamine 8mg tab</i>	74	GENTAMICIN 1MG/ML	2
<i>fosinopril</i>	27	<i>galantamine</i>	74	INJ	
<i>sodium/hydrochlorothiazide</i>		<i>hydrobromide 16mg er</i>		<i>gentamicin 40mg/ml inj</i>	2
<i>de 10-12.5mg tab</i>		<i>cap</i>		GENVOYA	44
<i>fosinopril</i>	27	<i>galantamine</i>	74	150-150-200-10MG TAB	
<i>sodium/hydrochlorothiazide</i>		<i>hydrobromide 24mg er</i>		GILOTRIF 20MG TAB	31
<i>de 20-12.5mg tab</i>		<i>cap</i>		GILOTRIF 30MG TAB	31
FOTIVDA 0.89MG CAP	33	GALANTAMINE	74	GILOTRIF 40MG TAB	31
FOTIVDA 1.34MG CAP	33	HYDROBROMIDE		<i>glatiramer acetate</i>	75
FRUZAQLA 1MG CAP	31	4MG/ML ORAL SOLN		<i>20mg/ml syringe</i>	
FRUZAQLA 5MG CAP	31	<i>galantamine</i>	74	<i>glatiramer acetate</i>	75
FUROSCIX 80MG/10ML	56	<i>hydrobromide 8mg er cap</i>		<i>40mg/ml syringe</i>	
CARTRIDGE		<i>gallifrey 5mg tab</i>	74	<i>glatopa 20mg/ml syringe</i>	75
<i>furosemide 10mg/ml inj</i>	56	GAMUNEX 1GM/10ML	72	<i>glatopa 40mg/ml syringe</i>	75
<i>furosemide 10mg/ml oral</i>	56	INJ		GLEOSTINE 100MG CAP	30
<i>soln</i>		GARDASIL 9 INJ	81	GLEOSTINE 10MG CAP	30
<i>furosemide 20mg tab</i>	56	GARDASIL 9 SYRINGE	81	GLEOSTINE 40MG CAP	30
<i>furosemide 40mg tab</i>	56	GATTEX 5MG INJ	62	<i>glimepiride 1mg tab</i>	21
<i>furosemide 80mg tab</i>	56	GAUZE PAD (2 X 2)	65	<i>glimepiride 2mg tab</i>	21
FUROSEMIDE 8MG/ML	56	GAVILYTE-C POWDER	65	<i>glimepiride 4mg tab</i>	21
ORAL SOLN		FOR ORAL SOLN		<i>glipizide 10mg er tab</i>	21
FUZEON 90MG INJ	44	<i>gavilyte-g powder for</i>	65	<i>glipizide 10mg tab</i>	21
<i>fyavolv 0.0025-0.5mg tab</i>	59	<i>oral soln</i>		<i>glipizide 2.5mg er tab</i>	21
<i>fyavolv 0.005-1mg tab</i>	59	<i>gavilyte-n powder for</i>	65	<i>glipizide 5mg er tab</i>	21
FYCOMPA 0.5MG/ML	13	<i>oral soln</i>		<i>glipizide 5mg tab</i>	21
ORAL SUSP		GAVRETO 100MG CAP	33	<i>glipizide/metformin</i>	18
FYCOMPA 10MG TAB	13	<i>gefitinib 250mg tab</i>	31	<i>2.5-250mg tab</i>	
FYCOMPA 12MG TAB	13	<i>gemfibrozil 600mg tab</i>	23	<i>glipizide/metformin</i>	18
				<i>2.5-500mg tab</i>	

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

ALPHABETICAL LISTING OF DRUGS

<i>glipizide/metformin</i>	18	<i>glucose</i>	67	HADLIMA 40MG/0.8ML	3
<i>5-500mg tab</i>		<i>50mg/ml/potassium</i>		AUTO-INJECTOR	
GLUCOSE	66	<i>chloride</i>		HADLIMA 40MG/0.8ML	3
100MG/ML/SODIUM		<i>0.04meq/ml/sodium</i>		SYRINGE	
CHLORIDE 2MG/ML INJ		<i>chloride 9mg/ml inj</i>		HAEGARDA 2000UNIT	65
GLUCOSE	66	<i>glucose 50mg/ml/sodium</i>	67	INJ	
100MG/ML/SODIUM		<i>chloride 2mg/ml inj</i>		HAEGARDA 3000UNIT	65
CHLORIDE 4.5MG/ML		<i>glucose 50mg/ml/sodium</i>	67	INJ	
INJ		<i>chloride 4.5mg/ml inj</i>		<i>hailey 24 fe tab 28-day</i>	59
<i>glucose 50mg/ml inj</i>	70	<i>glucose 50mg/ml/sodium</i>	67	<i>pack</i>	
<i>glucose</i>	66	<i>chloride 9mg/ml inj</i>		<i>halobetasol propionate</i>	54
<i>50mg/ml/potassium</i>		GLUCOSE/SODIUM	67	<i>0.05% cream</i>	
<i>chloride</i>		CHLORIDE		<i>halobetasol propionate</i>	54
<i>0.01meq/ml/sodium</i>		25MG/ML-4.5MG/ML		<i>0.05% ointment</i>	
<i>chloride 4.5mg/ml inj</i>		INJ		<i>haloette</i>	59
<i>glucose</i>	66	<i>glutamine 5000mg</i>	64	<i>0.120-0.015mg/24hr</i>	
<i>50mg/ml/potassium</i>		<i>powder for oral soln</i>		<i>vaginal system</i>	
<i>chloride 0.02meq/ml inj</i>		<i>glycopyrrolate 1mg tab</i>	80	<i>haloperidol 0.5mg tab</i>	39
<i>glucose</i>	66	<i>glycopyrrolate 2mg tab</i>	80	<i>haloperidol 10mg tab</i>	39
<i>50mg/ml/potassium</i>		GLYXAMBI 10-5MG TAB	18	<i>haloperidol 1mg tab</i>	39
<i>chloride</i>		GLYXAMBI 25-5MG TAB	18	<i>haloperidol 20mg tab</i>	39
<i>0.02meq/ml/sodium</i>		<i>granisetron 1mg tab</i>	21	<i>haloperidol 2mg tab</i>	39
<i>chloride 2.25mg/ml inj</i>		<i>griseofulvin 125mg tab</i>	22	<i>haloperidol 2mg/ml oral</i>	39
<i>glucose</i>	66	<i>griseofulvin 250mg tab</i>	22	<i>soln</i>	
<i>50mg/ml/potassium</i>		<i>griseofulvin 25mg/ml oral</i>	22	<i>haloperidol 5mg tab</i>	39
<i>chloride</i>		<i>susp</i>		<i>haloperidol 5mg/ml inj</i>	39
<i>0.02meq/ml/sodium</i>		<i>griseofulvin 500mg tab</i>	22	<i>haloperidol decanoate</i>	39
<i>chloride 4.5mg/ml inj</i>		<i>guanfacine 1mg er tab</i>	1	<i>100mg/ml (1ml) inj</i>	
<i>glucose</i>	66	<i>guanfacine 2mg er tab</i>	1	<i>haloperidol decanoate</i>	39
<i>50mg/ml/potassium</i>		<i>guanfacine 3mg er tab</i>	1	<i>100mg/ml (5ml) inj</i>	
<i>chloride</i>		<i>guanfacine 4mg er tab</i>	1	<i>haloperidol decanoate</i>	39
<i>0.02meq/ml/sodium</i>		GVOKE 0.5MG/0.1ML	19	<i>50mg/ml (1ml) inj</i>	
<i>chloride 9mg/ml inj</i>		AUTO-INJECTOR		<i>haloperidol decanoate</i>	39
<i>glucose</i>	66	GVOKE 1MG/0.2ML	19	<i>50mg/ml (5ml) inj</i>	
<i>50mg/ml/potassium</i>		AUTO-INJECTOR		HAVRIX 1440ELU/ML	81
<i>chloride</i>		GVOKE 1MG/0.2ML INJ	19	SYRINGE	
<i>0.03meq/ml/sodium</i>		GVOKE 1MG/0.2ML	19	HAVRIX 720ELU/0.5ML	81
<i>chloride 4.5mg/ml inj</i>		SYRINGE		SYRINGE	
<i>glucose</i>	67	<hr/>		<i>heather 0.35mg 28-day</i>	74
<i>50mg/ml/potassium</i>		H		<i>pack</i>	
<i>chloride</i>		HADLIMA 40MG/0.4ML	3	<i>heparin sodium porcine</i>	11
<i>0.04meq/ml/sodium</i>		AUTO-INJECTOR		<i>10000unit/ml inj</i>	
<i>chloride 4.5mg/ml inj</i>		HADLIMA 40MG/0.4ML	3	<i>heparin sodium porcine</i>	11
		SYRINGE		<i>1000unit/ml inj</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>heparin sodium porcine</i>	11	<i>hydrochlorothiazide</i>	56	<i>hydrochlorothiazide/telmi</i>	27
<i>20000unit/ml inj</i>		<i>25mg tab</i>		<i>sartan 12.5-40mg tab</i>	
<i>heparin sodium porcine</i>	11	<i>hydrochlorothiazide</i>	56	<i>hydrochlorothiazide/telmi</i>	27
<i>5000unit/ml inj</i>		<i>50mg tab</i>		<i>sartan 12.5-80mg tab</i>	
HEPLISAV-B	82	<i>hydrochlorothiazide/irbes</i>	27	<i>hydrochlorothiazide/telmi</i>	27
20MCG/0.5ML SYRINGE		<i>artan 12.5-150mg tab</i>		<i>sartan 25-80mg tab</i>	
HIBERIX 10MCG INJ	81	<i>hydrochlorothiazide/irbes</i>	27	<i>hydrochlorothiazide/tria</i>	55
HUMALOG 100UNIT/ML	20	<i>artan 12.5-300mg tab</i>		<i>mterene 25-37.5mg cap</i>	
CARTRIDGE		<i>hydrochlorothiazide/lisin</i>	27	<i>hydrochlorothiazide/tria</i>	55
HUMALOG 100UNIT/ML	20	<i>opril 12.5-10mg tab</i>		<i>mterene 25-37.5mg tab</i>	
KWIKPEN		<i>hydrochlorothiazide/lisin</i>	27	<i>hydrochlorothiazide/tria</i>	55
HUMALOG 200UNIT/ML	20	<i>opril 12.5-20mg tab</i>		<i>mterene 50-75mg tab</i>	
KWIKPEN		<i>hydrochlorothiazide/lisin</i>	27	<i>hydrochlorothiazide/vals</i>	27
HUMALOG JUNIOR	20	<i>opril 25-20mg tab</i>		<i>artan 12.5-160mg tab</i>	
100UNIT/ML PEN INJ		<i>hydrochlorothiazide/losar</i>	27	<i>hydrochlorothiazide/vals</i>	27
HUMALOG MIX (50/50)	20	<i>tan potassium</i>		<i>artan 12.5-320mg tab</i>	
100UNIT/ML PEN INJ		<i>12.5-100mg tab</i>		<i>hydrochlorothiazide/vals</i>	27
HUMALOG MIX (75/25)	20	<i>hydrochlorothiazide/losar</i>	27	<i>artan 12.5-80mg tab</i>	
100UNIT/ML INJ		<i>tan potassium 12.5-50mg</i>		<i>hydrochlorothiazide/vals</i>	27
HUMALOG MIX (75/25)	20	<i>tab</i>		<i>artan 25-160mg tab</i>	
100UNIT/ML KWIKPEN		<i>hydrochlorothiazide/losar</i>	27	<i>hydrochlorothiazide/vals</i>	27
HUMULIN (70/30)	20	<i>tan potassium 25-100mg</i>		<i>artan 25-320mg tab</i>	
100UNIT/ML INJ		<i>tab</i>		<i>hydrocodone</i>	5
HUMULIN (70/30)	20	<i>hydrochlorothiazide/meto</i>	27	<i>bitartrate/acetaminophen</i>	
100UNIT/ML PEN INJ		<i>prolol tartrate 25-100mg</i>		<i>0.5-21.7mg/ml oral soln</i>	
HUMULIN N	20	<i>tab</i>		<i>hydrocodone</i>	5
100UNIT/ML INJ		<i>hydrochlorothiazide/meto</i>	27	<i>bitartrate/acetaminophen</i>	
HUMULIN N	20	<i>prolol tartrate 25-50mg</i>		<i>10-325mg tab</i>	
100UNIT/ML PEN INJ		<i>tab</i>		<i>hydrocodone</i>	5
HUMULIN R	20	<i>hydrochlorothiazide/meto</i>	27	<i>bitartrate/acetaminophen</i>	
100UNIT/ML INJ		<i>prolol tartrate 50-100mg</i>		<i>5-325mg tab</i>	
HUMULIN R	20	<i>tab</i>		<i>hydrocodone</i>	5
500UNIT/ML INJ		<i>hydrochlorothiazide/olme</i>	27	<i>bitartrate/acetaminophen</i>	
HUMULIN R	20	<i>sartan medoxomil</i>		<i>7.5-325mg tab</i>	
500UNIT/ML PEN INJ		<i>12.5-20mg tab</i>		<i>hydrocortisone 1% cream</i>	54
<i>hydralazine 100mg tab</i>	27	<i>hydrochlorothiazide/olme</i>	27	<i>hydrocortisone 1.67mg/ml</i>	6
<i>hydralazine 10mg tab</i>	27	<i>sartan medoxomil</i>		<i>enema</i>	
<i>hydralazine 25mg tab</i>	28	<i>12.5-40mg tab</i>		<i>hydrocortisone 10mg tab</i>	50
<i>hydralazine 50mg tab</i>	28	<i>hydrochlorothiazide/olme</i>	27	<i>hydrocortisone 2.5%</i>	6
<i>hydrochlorothiazide</i>	56	<i>sartan medoxomil</i>		<i>cream</i>	
<i>12.5mg cap</i>		<i>25-40mg tab</i>		<i>hydrocortisone 2.5%</i>	54
<i>hydrochlorothiazide</i>	56	<i>hydrochlorothiazide/spiro</i>	55	<i>ointment</i>	
<i>12.5mg tab</i>		<i>nolactone 25-25mg tab</i>		<i>hydrocortisone 20mg tab</i>	50
				<i>hydrocortisone 5mg tab</i>	50

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

ALPHABETICAL LISTING OF DRUGS

HYDROCORTISONE LOTION 2.5%	54	<i>icosapent ethyl 500mg cap</i>	23	INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	20
<i>hydromorphone 2mg tab</i>	4	IDHIFA 100MG TAB	33	INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	20
<i>hydromorphone 4mg tab</i>	4	IDHIFA 50MG TAB	33	INSULIN LISPRO 100UNIT/ML INJ	20
<i>hydromorphone 8mg tab</i>	4	<i>imatinib 100mg tab</i>	33	INSULIN PEN NEEDLE	65
<i>hydroxychloroquine sulfate 100mg tab</i>	29	<i>imatinib 400mg tab</i>	34	INSULIN SYRINGE	65
<i>hydroxychloroquine sulfate 200mg tab</i>	29	IMBRUVICA 140MG CAP	34	INSULIN SYRINGE (DISP) U-100 0.3ML	66
<i>hydroxychloroquine sulfate 300mg tab</i>	29	IMBRUVICA 420MG TAB	34	INSULIN SYRINGE (DISP) U-100 1/2ML	66
<i>hydroxychloroquine sulfate 400mg tab</i>	30	IMBRUVICA 70MG CAP	34	INSULIN SYRINGE (DISP) U-100 1ML	66
<i>hydroxyurea 500mg cap</i>	37	IMBRUVICA 70MG/ML ORAL SUSP	34	INTELENCE 25MG TAB	44
<i>hydroxyzine 10mg tab</i>	7	<i>imipramine 10mg tab</i>	18	<i>introvale tab 91-day pack</i>	59
<i>hydroxyzine 25mg tab</i>	7	<i>imipramine 25mg tab</i>	18	INVEGA HAFYERA 1092MG/3.5ML SYRINGE	40
<i>hydroxyzine 50mg tab</i>	7	<i>imipramine 50mg tab</i>	18	INVEGA HAFYERA 1560MG/5ML SYRINGE	40
HYDROXYZINE PAMOATE 100MG CAP	7	<i>imiquimod 5% cream</i>	55	INVEGA SUSTENNA 117MG/0.75ML SYRINGE	40
<i>hydroxyzine pamoate 25mg cap</i>	7	IMKELDI 80MG/ML ORAL SOLN	34	INVEGA SUSTENNA 156MG/ML SYRINGE	40
<i>hydroxyzine pamoate 50mg cap</i>	7	IMOVAX 2.5UNIT/ML INJ	82	INVEGA SUSTENNA 234MG/1.5ML SYRINGE	40
		<i>incassia 0.35mg tab 28-day pack</i>	74	INVEGA SUSTENNA 39MG/0.25ML SYRINGE	40
		INCRELEX 40MG/4ML INJ	58	INVEGA SUSTENNA 78MG/0.5ML SYRINGE	40
		INCRUSE ELLIPTA 62.5MCG/INH POWDER	8	INVEGA TRINZA 273MG/0.875ML SYRINGE	40
I		INHALER		INVEGA TRINZA 410MG/1.315ML SYRINGE	40
<i>ibandronate 150mg tab</i>	56	<i>indapamide 1.25mg tab</i>	56	INVEGA TRINZA 546MG/1.75ML SYRINGE	40
IBRANCE 100MG CAP	33	<i>indapamide 2.5mg tab</i>	56		
IBRANCE 100MG TAB	33	INFANRIX SYRINGE	80		
IBRANCE 125MG CAP	33	INGREZZA 40MG CAP	75		
IBRANCE 125MG TAB	33	INGREZZA 40MG SPRINKLE CAP	75		
IBRANCE 75MG CAP	33	INGREZZA 60MG CAP	75		
IBRANCE 75MG TAB	33	INGREZZA 60MG SPRINKLE CAP	75		
<i>ibu 600mg tab</i>	3	INGREZZA 80MG CAP	75		
<i>ibu 800mg tab</i>	3	INGREZZA 80MG SPRINKLE CAP	75		
<i>ibuprofen 400mg tab</i>	3	INGREZZA CAP	75		
<i>ibuprofen 600mg tab</i>	4	THERAPY PACK (28)			
<i>ibuprofen 800mg tab</i>	4	INLYTA 1MG TAB	31		
<i>icatibant 10mg/ml syringe</i>	65	INLYTA 5MG TAB	31		
<i>iclevia tab 91-day pack</i>	59	INQOVI 35-100MG TAB PACK (5)	32		
ICLUSIG 10MG TAB	33	INREBIC 100MG CAP	34		
ICLUSIG 15MG TAB	33				
ICLUSIG 30MG TAB	33				
ICLUSIG 45MG TAB	33				
<i>icosapent ethyl 1000mg cap</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

INVEGA TRINZA 819MG/2.625ML SYRINGE	40	<i>isosorbide mononitrate</i> <i>60mg er tab</i>	6	JANUVIA 25MG TAB	20
IPOL INJ	82	<i>isotretinoin 10mg cap</i>	51	JANUVIA 50MG TAB	20
<i>ipratropium bromide</i> <i>0.02% inh soln</i>	8	<i>isotretinoin 20mg cap</i>	51	JARDIANCE 10MG TAB	21
<i>ipratropium bromide</i> <i>0.03% (0.021mg/act)</i> <i>nasal inhaler</i>	70	<i>isotretinoin 30mg cap</i>	52	JARDIANCE 25MG TAB	21
<i>ipratropium bromide</i> <i>0.06% (0.042mg/act)</i> <i>nasal inhaler</i>	70	<i>isotretinoin 40mg cap</i>	52	<i>jasmiel tab 28-day pack</i>	59
<i>ipratropium/albuterol</i> <i>0.5-2.5mg/3ml inh soln</i>	10	<i>isradipine 2.5mg cap</i>	48	<i>javygtor 100mg powder</i> <i>for oral soln</i>	57
<i>irbesartan 150mg tab</i>	25	<i>isradipine 5mg cap</i>	48	<i>javygtor 100mg tab</i>	57
<i>irbesartan 300mg tab</i>	25	ITOVEBI 3MG TAB	34	<i>javygtor 500mg powder</i> <i>for oral soln</i>	57
<i>irbesartan 75mg tab</i>	25	ITOVEBI 9MG TAB	34	JAYPIRCA 100MG TAB	34
ISENTRESS 100MG CHEW TAB	44	<i>itraconazole 100mg cap</i>	22	JAYPIRCA 50MG TAB	34
ISENTRESS 100MG GRANULES FOR ORAL SUSP	44	<i>ivabradine 5mg tab</i>	49	JENTADUETO	19
ISENTRESS 25MG CHEW TAB	44	<i>ivabradine 7.5mg tab</i>	49	2.5-1000MG TAB	
ISENTRESS 400MG TAB	44	<i>ivermectin 3mg tab</i>	6	JENTADUETO	19
ISENTRESS 600MG TAB	44	IWILFIN 192MG TAB	37	2.5-500MG TAB	
<i>isibloom tab 28-day pack</i>	59	IXCHIQ INJ	82	JENTADUETO XR	19
<i>isoniazid 100mg tab</i>	30	IXIARO 0.012MG/ML SYRINGE	82	2.5-1000MG TAB	
<i>isoniazid 10mg/ml oral</i> <i>soln</i>	30			JENTADUETO XR	19
<i>isoniazid 300mg tab</i>	30	J		5-1000MG TAB	
<i>isosorbide dinitrate 10mg</i> <i>tab</i>	6	JAKAFI 10MG TAB	34	<i>jinteli 0.005-1mg tab</i>	59
<i>isosorbide dinitrate 20mg</i> <i>tab</i>	6	JAKAFI 15MG TAB	34	<i>juleber tab 28-day pack</i>	59
<i>isosorbide dinitrate 30mg</i> <i>tab</i>	6	JAKAFI 20MG TAB	34	JULUCA 50-25MG TAB	44
<i>isosorbide dinitrate 5mg</i> <i>tab</i>	6	JAKAFI 25MG TAB	34	<i>junel 1.5/30 tab 21-day</i> <i>pack</i>	59
<i>isosorbide mononitrate</i> <i>120mg er tab</i>	6	JAKAFI 5MG TAB	34	<i>junel 1/20 tab 21-day</i> <i>pack</i>	59
<i>isosorbide mononitrate</i> <i>30mg er tab</i>	6	<i>jantoven 10mg tab</i>	11	<i>junel fe 24 1/20 28-day</i> <i>pack</i>	59
		<i>jantoven 1mg tab</i>	11	<i>junel fe tab 1.5/30 28-day</i> <i>pack</i>	60
		<i>jantoven 2.5mg tab</i>	11	<i>junel fe tab 1/20 28-day</i> <i>pack</i>	60
		<i>jantoven 2mg tab</i>	11	JYLAMVO 2MG/ML ORAL SOLN	30
		<i>jantoven 3mg tab</i>	11	JYNNEOS 0.5ML INJ	82
		<i>jantoven 4mg tab</i>	11		
		<i>jantoven 5mg tab</i>	11	K	
		<i>jantoven 6mg tab</i>	11	KALYDECO 13.4MG ORAL GRANULES	76
		<i>jantoven 7.5mg tab</i>	11	KALYDECO 150MG TAB	76
		JANUMET 50-1000MG TAB	18	KALYDECO 25MG ORAL GRANULES	76
		JANUMET 50-500MG TAB	18	KALYDECO 5.8MG ORAL GRANULES	76
		JANUMET XR 100-1000MG TAB	18		
		JANUMET XR 50-1000MG TAB	19		
		JANUMET XR 50-500MG TAB	19		
		JANUVIA 100MG 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

KALYDECO 50MG ORAL GRANULES	76	KISQALI TAB 400MG DAILY DOSE PACK (42)	34	<i>lamotrigine 100mg tab</i>	13
KALYDECO 75MG ORAL GRANULES	76	KISQALI TAB 600MG DAILY DOSE PACK (63)	34	<i>lamotrigine 150mg tab</i>	13
<i>kariva tab 28-day pack</i>	60	KISQALI/FEMARA 400 CO-PACK (70)	32	<i>lamotrigine 200mg tab</i>	13
KCL/D5W/LR INJ 0.15%	67	KISQALI/FEMARA 600 CO-PACK (91)	32	<i>lamotrigine 25mg chew tab</i>	13
<i>kcl/nacl 20meq-0.45% inj</i>	67	<i>klor-con 10meq er tab</i>	67	<i>lamotrigine 5mg chew tab</i>	13
<i>kcl/nacl 20meq-0.9% inj</i>	67	<i>klor-con 10meq micro er tab</i>	67	<i>lansoprazole 15mg dr cap</i>	80
<i>kcl/nacl 40meq-9% inj</i>	67	<i>klor-con 15meq micro er tab</i>	67	<i>lansoprazole 30mg dr cap</i>	80
<i>kelnor 1mg-35mcg tab 28-day pack</i>	60	<i>klor-con 20meq micro er tab</i>	67	LANTUS 100UNIT/ML INJ	20
<i>kelnor tab 1/50 28-day pack</i>	60	<i>klor-con 20meq powder for oral soln</i>	67	LANTUS 100UNIT/ML PEN INJ	20
KERENDIA 10MG TAB	58	<i>klor-con 8meq er tab</i>	67	<i>lapatinib 250mg tab</i>	34
KERENDIA 20MG TAB	58	KLOXXADO 8MG/0.1ML NASAL SPRAY	21	<i>larin 1.5/30 tab 21-day pack</i>	60
KESIMPTA 20MG/0.4ML PEN INJ	76	KOSELUGO 10MG CAP	34	<i>larin 1/20 tab 21-day pack</i>	60
<i>ketoconazole 2% cream</i>	52	KOSELUGO 25MG CAP	34	<i>larin fe tab 1.5/30 28-day pack</i>	60
<i>ketoconazole 2% shampoo</i>	52	<i>kourzeq 0.1% oral paste</i>	51	<i>larin fe tab 1/20 28-day pack</i>	60
<i>ketoconazole 200mg tab</i>	22	KRAZATI 200MG TAB	34	<i>latanoprost 0.005% ophth soln</i>	72
<i>ketorolac tromethamine 0.4% ophth soln</i>	72	<i>kurvelo tab 28-day pack</i>	60	LAZCLUZE 240MG TAB	31
<i>ketorolac tromethamine 0.5% ophth soln</i>	72	L		LAZCLUZE 80MG TAB	31
<i>ketorolac tromethamine 10mg tab</i>	4	<i>labetalol 100mg tab</i>	46	<i>leena tab 28-day pack</i>	60
KEVZARA 150MG/1.14ML AUTO-INJECTOR	3	<i>labetalol 200mg tab</i>	46	<i>leflunomide 10mg tab</i>	2
KEVZARA 150MG/1.14ML SYRINGE	3	<i>labetalol 300mg tab</i>	46	<i>leflunomide 20mg tab</i>	2
KEVZARA 200MG/1.14ML AUTO-INJECTOR	3	<i>lacosamide 100mg tab</i>	13	<i>lenalidomide 10mg cap</i>	68
KEVZARA 200MG/1.14ML SYRINGE	3	<i>lacosamide 10mg/ml oral soln</i>	13	<i>lenalidomide 15mg cap</i>	68
KINRIX SYRINGE	80	<i>lacosamide 150mg tab</i>	13	<i>lenalidomide 2.5mg cap</i>	68
<i>kionex 15gm/60ml susp</i>	69	<i>lacosamide 200mg tab</i>	13	<i>lenalidomide 20mg cap</i>	68
KISQALI TAB 200MG DAILY DOSE PACK (21)	34	<i>lacosamide 50mg tab</i>	13	<i>lenalidomide 25mg cap</i>	68
		<i>lactulose 667mg/ml oral soln</i>	65	<i>lenalidomide 5mg cap</i>	68
		<i>lamivudine 100mg tab</i>	45	LENVIMA 10MG DAILY DOSE PACK (30)	31
		<i>lamivudine 10mg/ml oral soln</i>	44	LENVIMA 12MG DAILY DOSE PACK (90)	31
		<i>lamivudine 150mg tab</i>	44	LENVIMA 14MG DAILY DOSE PACK (60)	31
		<i>lamivudine 300mg tab</i>	44	LENVIMA 18MG DAILY DOSE PACK (90)	31
		<i>lamivudine/zidovudine 150-300mg tab</i>	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

LENVIMA 20MG DAILY DOSE PACK (60)	31	<i>levofloxacin 750mg tab</i>	62	<i>levoxyl 88mcg tab</i>	79
LENVIMA 24MG DAILY DOSE PACK (90)	31	<i>levofloxacin 750mg/150ml inj</i>	62	LIBERVANT 10MG BUCCAL FILM	12
LENVIMA 4MG DAILY DOSE PACK (30)	31	<i>levonest tab 28-day pack</i>	60	LIBERVANT 12.5MG BUCCAL FILM	12
LENVIMA 8MG DAILY DOSE PACK (60)	31	<i>levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack</i>	60	LIBERVANT 15MG BUCCAL FILM	12
<i>lessina tab 28-day pack</i>	60	<i>levora 0.15/30 tab 28-day pack</i>	60	LIBERVANT 5MG BUCCAL FILM	12
<i>letrozole 2.5mg tab</i>	32			LIBERVANT 7.5MG BUCCAL FILM	12
<i>leucovorin 10mg tab</i>	37	<i>levothyroxine sodium 100mcg tab</i>	79	<i>lidocaine 4% mucous membrane topical soln</i>	54
<i>leucovorin 15mg tab</i>	37	<i>levothyroxine sodium 112mcg tab</i>	79	<i>lidocaine 5% ointment</i>	54
<i>leucovorin 25mg tab</i>	37	<i>levothyroxine sodium 125mcg tab</i>	79	<i>lidocaine 5% patch</i>	54
<i>leucovorin 5mg tab</i>	37	<i>levothyroxine sodium 137mcg tab</i>	79	<i>lidocaine viscous 2%</i>	51
<i>levalbuterol 0.31mg/3ml neb soln</i>	10	<i>levothyroxine sodium 150mcg tab</i>	79	<i>lidocaine/prilocaine 2.5-2.5% cream</i>	54
<i>levalbuterol 0.63mg/3ml inh soln</i>	10	<i>levothyroxine sodium 175mcg tab</i>	79	<i>lidocan 5% patch</i>	54
<i>levalbuterol 1.25mg/3ml neb soln</i>	10	<i>levothyroxine sodium 200mcg tab</i>	79	LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	74
LEVALBUTEROL 45MCG/ACT INHALER	10	<i>levothyroxine sodium 25mcg tab</i>	79	<i>linezolid 100mg/5ml oral susp</i>	28
<i>levetiracetam 1000mg tab</i>	13	<i>levothyroxine sodium 300mcg tab</i>	79	<i>linezolid 600mg tab</i>	29
<i>levetiracetam 100mg/ml oral soln</i>	13	<i>levothyroxine sodium 50mcg tab</i>	79	<i>linezolid 600mg/300ml inj</i>	29
<i>levetiracetam 250mg tab</i>	13	<i>levothyroxine sodium 75mcg tab</i>	79	LINZESS 145MCG CAP	65
<i>levetiracetam 500mg er tab</i>	13	<i>levothyroxine sodium 88mcg tab</i>	79	LINZESS 290MCG CAP	65
<i>levetiracetam 500mg tab</i>	13	<i>levoxyl 100mcg tab</i>	79	LINZESS 72MCG CAP	65
<i>levetiracetam 750mg er tab</i>	13	<i>levoxyl 112mcg tab</i>	79	<i>liothyronine sodium 25mcg tab</i>	79
<i>levetiracetam 750mg tab</i>	13	<i>levoxyl 125mcg tab</i>	79	<i>liothyronine sodium 50mcg tab</i>	79
LEVOBUNOLOL 0.5% OPHTH SOLN	70	<i>levoxyl 137mcg tab</i>	79	<i>liothyronine sodium 5mcg tab</i>	79
<i>levocarnitine 100mg/ml oral soln</i>	57	<i>levoxyl 150mcg tab</i>	79	<i>liraglutide 18mg/3ml pen inj</i>	20
<i>levocarnitine 330mg tab</i>	57	<i>levoxyl 175mcg tab</i>	79	<i>lisdexamfetamine dimesylate 10mg cap</i>	1
<i>levocetirizine 5mg tab</i>	77	<i>levoxyl 200mcg tab</i>	79	<i>lisdexamfetamine dimesylate 20mg cap</i>	1
<i>levofloxacin 250mg tab</i>	62	<i>levoxyl 25mcg tab</i>	79		
<i>levofloxacin 25mg/ml oral soln</i>	62	<i>levoxyl 50mcg tab</i>	79		
<i>levofloxacin 500mg tab</i>	62	<i>levoxyl 75mcg tab</i>	79		
<i>levofloxacin 500mg/100ml inj</i>	62				

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

ALPHABETICAL LISTING OF DRUGS

<i>lisdexamfetamine</i>	1	<i>loperamide 2mg cap</i>	21	LUMRYZ 4.5GM	78
<i>dimesylate 30mg cap</i>		<i>lopinavir/ritonavir</i>	44	GRANULES FOR ORAL	
<i>lisdexamfetamine</i>	1	<i>100-25mg tab</i>		SUSP	
<i>dimesylate 40mg cap</i>		<i>lopinavir/ritonavir</i>	44	LUMRYZ 6GM	78
<i>lisdexamfetamine</i>	1	<i>200-50mg tab</i>		GRANULES FOR ORAL	
<i>dimesylate 50mg cap</i>		<i>lopinavir/ritonavir</i>	44	SUSP	
<i>lisdexamfetamine</i>	1	<i>80-20mg/ml oral soln</i>		LUMRYZ 7.5GM	78
<i>dimesylate 60mg cap</i>		<i>lorazepam 0.5mg tab</i>	7	GRANULES FOR ORAL	
<i>lisdexamfetamine</i>	1	<i>lorazepam 1mg tab</i>	7	SUSP	
<i>dimesylate 70mg cap</i>		<i>lorazepam 2mg tab</i>	7	LUMRYZ 9GM	78
<i>lisinopril 10mg tab</i>	24	<i>lorazepam 2mg/ml oral</i>	7	GRANULES FOR ORAL	
<i>lisinopril 2.5mg tab</i>	24	<i>soln</i>		SUSP	
<i>lisinopril 20mg tab</i>	24	LORBRENA 100MG TAB	34	LUPKYNIS 7.9MG CAP	68
<i>lisinopril 30mg tab</i>	24	LORBRENA 25MG TAB	34	LUPRON 11.25MG	32
<i>lisinopril 40mg tab</i>	24	<i>loryna tab 28-day pack</i>	60	SYRINGE (3 MONTH)	
<i>lisinopril 5mg tab</i>	24	<i>losartan potassium</i>	25	LUPRON 3.75MG	32
LITFULO 50MG CAP	68	<i>100mg tab</i>		SYRINGE (1 MONTH)	
<i>lithium carbonate 150mg</i>	38	<i>losartan potassium 25mg</i>	25	<i>lurasidone 120mg tab</i>	39
<i>cap</i>		<i>tab</i>		<i>lurasidone 20mg tab</i>	39
<i>lithium carbonate 300mg</i>	38	<i>losartan potassium 50mg</i>	25	<i>lurasidone 40mg tab</i>	39
<i>cap</i>		<i>tab</i>		<i>lurasidone 60mg tab</i>	39
<i>lithium carbonate 300mg</i>	38	<i>loteprednol etabonate</i>	71	<i>lurasidone 80mg tab</i>	39
<i>er tab</i>		<i>0.5% ophth gel</i>		<i>lutra tab 28-day pack</i>	60
<i>lithium carbonate 300mg</i>	39	<i>loteprednol etabonate</i>	71	<i>lyleq 0.35mg tab 28-day</i>	74
<i>tab</i>		<i>0.5% ophth susp</i>		<i>pack</i>	
<i>lithium carbonate 450mg</i>	39	<i>lovastatin 10mg tab</i>	23	<i>lyllana 0.025mg/24hr</i>	62
<i>er tab</i>		<i>lovastatin 20mg tab</i>	24	<i>twice weekly patch</i>	
LITHIUM CARBONATE	39	<i>lovastatin 40mg tab</i>	24	<i>lyllana 0.0375mg/24hr</i>	62
600MG CAP		<i>low-ogestrel tab 28-day</i>	60	<i>twice weekly patch</i>	
<i>lithium citrate 60mg/ml</i>	39	<i>pack</i>		<i>lyllana 0.05mg/24hr twice</i>	62
<i>oral soln</i>		<i>loxapine 10mg cap</i>	41	<i>weekly patch</i>	
LIVTENCITY 200MG TAE	45	<i>loxapine 25mg cap</i>	41	<i>lyllana 0.075mg/24hr</i>	62
<i>loestrin fe tab 1/20</i>	60	<i>loxapine 50mg cap</i>	41	<i>twice weekly patch</i>	
<i>28-day pack</i>		<i>loxapine 5mg cap</i>	41	<i>lyllana 0.1mg/24hr twice</i>	62
LOKELMA 10GM	69	<i>lubiprostone 24mcg cap</i>	65	<i>weekly patch</i>	
POWDER FOR ORAL		<i>lubiprostone 8mcg cap</i>	65	LYNPARZA 100MG TAB	34
SUSP		LUMAKRAS 120MG TAB	34	LYNPARZA 150MG TAB	34
LOKELMA 5GM	69	LUMAKRAS 240MG TAB	34	LYSODREN 500MG TAB	32
POWDER FOR ORAL		LUMAKRAS 320MG TAB	34	LYTGOBI TAB 12MG	34
SUSP		LUMIGAN 0.01% OPHTH	72	DAILEY DOSE PACK (21)	
LONSURF 6.14-15MG	32	SOLN		LYTGOBI TAB 16MG	34
TAB		LUMRYZ 28-DAY	78	DAILEY DOSE PACK (28)	
LONSURF 8.19-20MG	32	STARTER PACK (28)		LYTGOBI TAB 20MG	34
TAB				DAILEY DOSE PACK (35)	

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

ALPHABETICAL LISTING OF DRUGS

<i>lyza 0.35mg tab 28-day pack</i>	74	<i>megestrol acetate 40mg/ml oral susp</i>	32	<i>methenamine hippurate 1gm tab</i>	29
<hr/>					
M		MEKINIST 0.05MG/ML ORAL SOLN	34	<i>methimazole 10mg tab</i>	78
<i>magnesium sulfate 500mg/ml inj</i>	67	MEKINIST 0.5MG TAB	34	<i>methimazole 5mg tab</i>	78
<i>magnesium sulfate 500mg/ml syringe</i>	67	MEKINIST 2MG TAB	34	<i>methocarbamol 500mg tab</i>	69
<i>malathion 0.5% lotion</i>	55	MEKTOVI 15MG TAB	34	<i>methocarbamol 750mg tab</i>	69
<i>maraviroc 150mg tab</i>	44	<i>meloxicam 15mg tab</i>	4	<i>methotrexate 2.5mg tab</i>	30
<i>maraviroc 300mg tab</i>	44	<i>meloxicam 7.5mg tab</i>	4	METHOTREXATE 25MG/ML INJ	30
<i>marlissa tab 28-day pack</i>	60	<i>memantine 10mg tab</i>	74	<i>methotrexate 50mg/2ml inj</i>	30
MARPLAN 10MG TAB	16	<i>memantine 14mg er cap</i>	74	METHOXSALEN 10MG CAP	53
MATULANE 50MG CAP	37	<i>memantine 21mg er cap</i>	74	<i>methsuximide 300mg cap</i>	15
MAVYRET 100-40MG TAB	45	<i>memantine 28mg er cap</i>	74	<i>methylphenidate 10mg er tab</i>	1
MAVYRET 50-20MG ORAL PELLETT	45	<i>memantine 2mg/ml oral soln</i>	74	<i>methylphenidate 10mg tab</i>	1
MAYZENT 0.25MG TAB	76	<i>memantine 5mg tab</i>	74	<i>methylphenidate 18mg er osmotic tab</i>	1
MAYZENT 1MG TAB	76	<i>memantine 7mg er cap</i>	74	<i>methylphenidate 1mg/ml oral soln</i>	1
MAYZENT 2MG TAB	76	MENACTRA INJ	81	<i>methylphenidate 20mg er tab</i>	1
MAYZENT TAB STARTEI PACK (12)	76	MENQUADFI INJ	81	<i>methylphenidate 20mg tab</i>	2
MAYZENT TAB STARTEI PACK (7)	76	MENVEO INJ	81	<i>methylphenidate 27mg er osmotic tab</i>	2
<i>meclizine 12.5mg tab</i>	22	<i>mercaptapurine 50mg tab</i>	30	<i>methylphenidate 2mg/ml oral soln</i>	2
<i>meclizine 25mg tab</i>	22	<i>meropenem 1gm inj</i>	29	<i>methylphenidate 36mg er osmotic tab</i>	2
<i>medroxyprogesterone acetate 10mg tab</i>	74	<i>meropenem 500mg inj</i>	29	<i>methylphenidate 36mg er tab</i>	2
<i>medroxyprogesterone acetate 150mg/ml inj</i>	74	<i>mesalamine 1gm rectal supp</i>	63	<i>methylphenidate 54mg er osmotic tab</i>	2
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	74	<i>mesalamine 375mg er cap</i>	63	<i>methylphenidate 54mg er tab</i>	2
<i>medroxyprogesterone acetate 2.5mg tab</i>	74	<i>mesalamine 66.7mg/ml enema</i>	63	<i>methylphenidate 5mg tab</i>	2
<i>medroxyprogesterone acetate 5mg tab</i>	74	<i>mesna 400mg tab</i>	37		
<i>mefloquine 250mg tab</i>	30	<i>metaxalone 800mg tab</i>	69		
MEGESTROL ACETATE 125MG/ML SUSP	74	<i>metformin 1000mg tab</i>	19		
<i>megestrol acetate 20mg tab</i>	32	<i>metformin 500mg er tab</i>	19		
<i>megestrol acetate 40mg tab</i>	32	<i>metformin 500mg tab</i>	19		
		<i>metformin 750mg er tab</i>	19		
		<i>metformin 850mg tab</i>	19		
		<i>methadone 10mg tab</i>	4		
		METHADONE 1MG/ML ORAL SOLN	4		
		METHADONE 2MG/ML ORAL SOLN	4		
		<i>methadone 5mg tab</i>	4		
		<i>methazolamide 25mg tab</i>	55		
		<i>methazolamide 50mg tab</i>	55		

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

ALPHABETICAL LISTING OF DRUGS

<i>methylprednisolone 16mg tab</i>	50	<i>metyrosine 250mg cap</i>	27	<i>moexipril 7.5mg tab</i>	24
<i>methylprednisolone 32mg tab</i>	50	<i>mexiletine 150mg cap</i>	7	MOLINDONE 10MG TAB	39
<i>methylprednisolone 4mg tab</i>	50	<i>mexiletine 200mg cap</i>	7	MOLINDONE 25MG TAB	39
<i>methylprednisolone 4mg tab pack (21)</i>	50	<i>mexiletine 250mg cap</i>	7	MOLINDONE 5MG TAB	39
<i>methylprednisolone 8mg tab</i>	50	<i>mibelas 24 fe chewable tab 28-day pack</i>	60	<i>mometasone furoate 0.1% cream</i>	54
<i>metoclopramide 10mg tab</i>	62	<i>micafungin sodium 100mg inj</i>	22	<i>mometasone furoate 0.1% lotion</i>	54
<i>metoclopramide 1mg/ml oral soln</i>	62	<i>micafungin sodium 50mg inj</i>	22	<i>mometasone furoate 0.1% ointment</i>	54
<i>metoclopramide 5mg tab</i>	62	<i>microgestin 1.5/30 tab 21-day pack</i>	60	<i>montelukast 10mg tab</i>	9
<i>metolazone 10mg tab</i>	56	<i>microgestin 1/20 tab 21-day pack</i>	60	<i>montelukast 4mg chew tab</i>	9
<i>metolazone 2.5mg tab</i>	56	<i>microgestin fe tab 1.5/30 28-day pack</i>	60	<i>montelukast 5mg chew tab</i>	9
<i>metolazone 5mg tab</i>	56	<i>microgestin fe tab 1/20 28-day pack</i>	60	<i>morphine sulfate 100mg er tab</i>	4
<i>metoprolol succinate 100mg er tab</i>	46	<i>midodrine 10mg tab</i>	48	<i>morphine sulfate 15mg er tab</i>	4
<i>metoprolol succinate 200mg er tab</i>	46	<i>midodrine 2.5mg tab</i>	48	<i>morphine sulfate 15mg tab</i>	4
<i>metoprolol succinate 25mg er tab</i>	46	<i>midodrine 5mg tab</i>	48	<i>morphine sulfate 200mg er tab</i>	4
<i>metoprolol succinate 50mg er tab</i>	46	<i>mifepristone 300mg tab</i>	19	<i>morphine sulfate 20mg/ml oral soln</i>	4
<i>metoprolol tartrate 100mg tab</i>	46	<i>mili tab 28-day pack</i>	60	<i>morphine sulfate 2mg/ml oral soln</i>	4
<i>metoprolol tartrate 25mg tab</i>	46	<i>mimvey 28-day pack</i>	60	<i>morphine sulfate 30mg er tab</i>	4
<i>metoprolol tartrate 37.5mg tab</i>	47	<i>minocycline 100mg cap</i>	78	<i>morphine sulfate 30mg tab</i>	4
<i>metoprolol tartrate 50mg tab</i>	47	<i>minocycline 50mg cap</i>	78	<i>morphine sulfate 4mg/ml oral soln</i>	4
<i>metoprolol tartrate 75mg tab</i>	47	<i>minocycline 75mg cap</i>	78	<i>morphine sulfate 60mg er tab</i>	5
<i>metronidazole 0.75% cream</i>	55	<i>minoxidil 10mg tab</i>	28	MOUNJARO	20
<i>metronidazole 0.75% gel</i>	55	<i>minoxidil 2.5mg tab</i>	28	10MG/0.5ML	
<i>metronidazole 0.75% vaginal gel</i>	82	<i>mirabegron 25mg er tab</i>	81	AUTO-INJECTOR	
<i>metronidazole 1% gel</i>	55	<i>mirabegron 50mg er tab</i>	81	MOUNJARO	20
<i>metronidazole 250mg tab</i>	29	<i>mirtazapine 15mg odt</i>	16	12.5MG/0.5ML	
<i>metronidazole 500mg tab</i>	29	<i>mirtazapine 15mg tab</i>	16	AUTO-INJECTOR	
<i>metronidazole 5mg/ml inj</i>	29	<i>mirtazapine 30mg odt</i>	16	MOUNJARO	20
		<i>mirtazapine 30mg tab</i>	16	15MG/0.5ML	
		<i>mirtazapine 45mg odt</i>	16	AUTO-INJECTOR	
		<i>mirtazapine 45mg tab</i>	16		
		<i>mirtazapine 7.5mg tab</i>	16		
		<i>misoprostol 100mcg tab</i>	80		
		<i>misoprostol 200mcg tab</i>	80		
		M-M-R II INJ	82		
		<i>modafinil 100mg tab</i>	2		
		<i>modafinil 200mg tab</i>	2		
		<i>moexipril 15mg 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

MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	20	<i>naltrexone 50mg tab</i>	21	<i>neomycin/polymyxin/hydr</i>	72
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	20	<i>naproxen 250mg tab</i>	4	<i>ocortisone</i>	
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	20	<i>naproxen 375mg dr tab</i>	4	<i>3.5-10000unit-1% otic</i>	
MOVANTIK 12.5MG TAB	65	<i>naproxen 375mg tab</i>	4	<i>soln</i>	
MOVANTIK 25MG TAB	65	<i>naproxen 500mg tab</i>	4	<i>neomycin/polymyxin/hydr</i>	72
<i>moxifloxacin 0.5% ophth</i>	71	<i>naproxen sodium 275mg</i>	4	<i>ocortisone</i>	
MOXIFLOXACIN 1.6MG/ML INJ	62	<i>tab</i>		<i>3.5-10000unit-1% otic</i>	
<i>moxifloxacin 400mg tab</i>	62	<i>naproxen sodium 550mg</i>	4	<i>susp</i>	
MRESVIA 50MCG/0.5ML SYRINGE	82	<i>tab</i>		<i>neo-polycin</i>	71
MULTAQ 400MG TAB	8	<i>naratriptan 1mg tab</i>	66	<i>5mg-400unit-10000unit</i>	
<i>mupirocin 2% ointment</i>	52	<i>naratriptan 2.5mg tab</i>	66	<i>ophth ointment</i>	
<i>mycophenolate mofetil</i>	68	<i>nateglinide 120mg tab</i>	19	<i>neo-polycin hc ophth</i>	71
<i>200mg/ml oral susp</i>		<i>nateglinide 60mg tab</i>	19	<i>ointment</i>	
<i>mycophenolate mofetil</i>	68	NAYZILAM 5MG/0.1ML	12	NERLYNX 40MG TAB	34
<i>250mg cap</i>		NASAL SPRAY		NEVIRAPINE 10MG/ML	44
<i>mycophenolate mofetil</i>	68	<i>necon 0.5/35 tab 28-day</i>	60	ORAL SUSP	
<i>500mg tab</i>		<i>pack</i>		<i>nevirapine 200mg tab</i>	44
<i>mycophenolic acid 180mg</i>	69	NEFAZODONE 100MG	17	<i>nevirapine 400mg er tab</i>	44
<i>dr tab</i>		TAB		NEXLETOL 180MG TAB	23
<i>mycophenolic acid 360mg</i>	69	NEFAZODONE 150MG	17	NEXLIZET 180-10MG	23
<i>dr tab</i>		TAB		TAB	
		NEFAZODONE 200MG	17	NEXPLANON 68MG	74
N		TAB		IMPLANT	
<i>nabumetone 500mg tab</i>	4	NEFAZODONE 250MG	17	<i>niacin 1000mg er tab</i>	23
<i>nabumetone 750mg tab</i>	4	TAB		<i>niacin 500mg er tab</i>	23
<i>nadolol 20mg tab</i>	47	NEFAZODONE 50MG	17	<i>niacin 750mg er tab</i>	23
<i>nadolol 40mg tab</i>	47	TAB		NICOTROL 10MG/ML	76
<i>nadolol 80mg tab</i>	47	<i>neomycin sulfate 500mg</i>	2	NASAL INHALER	
<i>nafcillin 100mg/ml inj</i>	73	<i>tab</i>		<i>nifedipine 30mg er tab</i>	48
<i>nafcillin 1gm inj</i>	73	<i>neomycin/bacitracin/poly</i>	71	<i>nifedipine 30mg osmotic</i>	48
<i>nafcillin 2gm inj</i>	73	<i>myxin</i>		<i>nifedipine 60mg er tab</i>	48
NALOXONE 0.4MG/ML CARTRIDGE	21	<i>5mg-400unit-10000unit</i>		<i>nifedipine 60mg osmotic</i>	48
<i>naloxone 0.4mg/ml inj</i>	21	<i>ophth ointment</i>		<i>er tab</i>	
NALOXONE 0.4MG/ML SYRINGE	21	NEOMYCIN/POLYMYXI	71	<i>nifedipine 90mg er tab</i>	48
<i>naloxone 1mg/ml syringe</i>	21	N B/GRAMICIDIN		<i>nifedipine 90mg osmotic</i>	48
		1.75-10000-0.025MG-UN		<i>er tab</i>	
		T-MG/ML OPHTH SOLN		<i>nikki tab 28-day pack</i>	60
		<i>neomycin/polymyxin/bacit</i>	71	<i>nilutamide 150mg tab</i>	32
		<i>racin/hydrocortisone</i>		<i>nimodipine 30mg cap</i>	48
		<i>ophth 1% ointment</i>		NINLARO 2.3MG CAP	34
		<i>neomycin/polymyxin/dexa</i>	71	NINLARO 3MG CAP	34
		<i>methasone 0.1% ophth</i>		NINLARO 4MG CAP	34
		<i>susp</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

NITAZOXANIDE 500MG TAB	29	<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	60	<i>nystatin 100000unit/gm topical powder</i>	52
NITRO-BID 2% OINTMENT	6	<i>norethindrone 0.35mg 28-day pack</i>	74	<i>nystatin 100000unit/ml cream</i>	52
<i>nitrofurantoin</i>	29	<i>norethindrone acetate 5mg tab</i>	74	<i>nystatin 100000unit/ml oral susp</i>	51
<i>macro/nitrofurantoin mono 100mg cap</i>	29	<i>nortrel 0.5/35 tab 28-day pack</i>	60	<i>nystatin 500000unit tab</i>	22
<i>nitrofurantoin</i>	29	<i>nortrel 1/35 tab 21-day pack</i>	60	<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	52
<i>macrocrystals 100mg cap</i>	29	<i>nortrel 1/35 tab 28-day pack</i>	60	<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	52
<i>nitrofurantoin</i>	29	<i>nortrel 7/7/7 tab 28-day pack</i>	60	<i>nystop 100000unit/gm topical powder</i>	52
<i>nitroglycerin 0.1mg/hr patch</i>	6	<i>nortriptyline 10mg cap</i>	18	NYVEPRIA 6MG/0.6ML SYRINGE	64
<i>nitroglycerin 0.2mg/hr patch</i>	6	<i>nortriptyline 25mg cap</i>	18		
<i>nitroglycerin 0.3mg sl tab</i>	6	<i>nortriptyline 2mg/ml oral soln</i>	18	O	
<i>nitroglycerin 0.4% rectal ointment</i>	6	<i>nortriptyline 50mg cap</i>	18	<i>ocella tab 28-day pack</i>	60
<i>nitroglycerin 0.4mg sl tab</i>	6	<i>nortriptyline 75mg cap</i>	18	OCTAGAM 1GM/20ML INJ	72
<i>nitroglycerin 0.4mg/hr patch</i>	6	NORVIR 100MG ORAL POWDER	44	OCTAGAM 2GM/20ML INJ	72
<i>nitroglycerin 0.6mg sl tab</i>	6	NUBEQA 300MG TAB	32	<i>octreotide 0.05mg/ml inj</i>	57
<i>nitroglycerin 0.6mg/hr patch</i>	7	NUCALA 100MG INJ	8	<i>octreotide 0.1mg/ml inj</i>	57
NIVESTYM	64	NUCALA 100MG/ML AUTO-INJECTOR	8	<i>octreotide 0.2mg/ml inj</i>	57
300MCG/0.5ML SYRINGE		NUCALA 100MG/ML SYRINGE	8	<i>octreotide 0.5mg/ml inj</i>	57
NIVESTYM 300MCG/ML INJ	64	NUCALA 40MG/0.4ML SYRINGE	8	<i>octreotide 1mg/ml inj</i>	57
NIVESTYM	64	NUEDEXTA 20-10MG CAP	76	ODEFSEY 200-25-25MG TAB	44
480MCG/0.8ML SYRINGE		NUPLAZID 10MG TAB	39	ODOMZO 200MG CAP	31
NIVESTYM	64	NUPLAZID 34MG CAP	39	OFEV 100MG CAP	77
480MCG/1.6ML INJ		<i>nyamyc 100000unit/gm topical powder</i>	52	OFEV 150MG CAP	77
<i>nora-be 0.35mg tab 28-day pack</i>	74	<i>nylia 1/35 tab 28-day pack</i>	60	<i>ofloxacin 0.3% ophth soln</i>	71
NORDITROPIN	57	<i>nylia 7/7/7 tab 28-day pack</i>	60	<i>ofloxacin 0.3% otic soln</i>	72
10MG/1.5ML PEN INJ		<i>nystatin 100000 unit/gm ointment</i>	52	OGSIVEO 100MG TAB 7-DAY PACK (14)	34
NORDITROPIN	57			OGSIVEO 150MG TAB 7-DAY PACK (14)	34
15MG/1.5ML PEN INJ				OGSIVEO 50MG TAB	34
NORDITROPIN	57			OJEMDA 100MG TAB	34
30MG/3ML PEN INJ					
NORDITROPIN	57				
5MG/1.5ML 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

OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	35	OMNITROPE 5MG/1.5ML CARTRIDGE	57	OTEZLA TAB 28-DAY STARTER PACK (55)	53
OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	35	<i>ondansetron 0.8mg/ml oral soln</i>	21	<i>oxacillin 100mg/ml inj</i>	73
OJEMDA 25MG/ML POWDER FOR ORAL SUSP	35	<i>ondansetron 4mg odt</i>	21	<i>oxacillin 1gm inj</i>	73
OJJAARA 100MG TAB	35	<i>ondansetron 4mg tab</i>	21	<i>oxacillin 2gm inj</i>	73
OJJAARA 150MG TAB	35	<i>ondansetron 8mg odt</i>	21	<i>oxcarbazepine 150mg tab</i>	13
OJJAARA 200MG TAB	35	<i>ondansetron 8mg tab</i>	21	<i>oxcarbazepine 300mg tab</i>	13
<i>olanzapine 10mg inj</i>	41	ONUREG 200MG TAB	30	<i>oxcarbazepine 600mg tab</i>	13
<i>olanzapine 10mg odt</i>	41	ONUREG 300MG TAB	30	<i>oxcarbazepine 60mg/ml oral susp</i>	13
<i>olanzapine 10mg tab</i>	41	OPSUMIT 10MG TAB	77	<i>oxybutynin chloride 10mg er tab</i>	81
<i>olanzapine 15mg odt</i>	41	OPVEE 2.7MG/0.1ML NASAL SPRAY	21	<i>oxybutynin chloride 15mg er tab</i>	81
<i>olanzapine 15mg tab</i>	41	ORENCIA 125MG/ML AUTO-INJECTOR	4	<i>oxybutynin chloride 1mg/ml oral soln</i>	81
<i>olanzapine 2.5mg tab</i>	41	ORENCIA 125MG/ML SYRINGE	4	<i>oxybutynin chloride 5mg er tab</i>	81
<i>olanzapine 20mg odt</i>	41	ORENCIA 50MG/0.4ML SYRINGE	4	<i>oxybutynin chloride 5mg tab</i>	81
<i>olanzapine 20mg tab</i>	41	ORENCIA 87.5MG/0.7ML SYRINGE	4	<i>oxycodone 10mg tab</i>	5
<i>olanzapine 5mg odt</i>	41	ORGOVYX 120MG TAB	32	<i>oxycodone 15mg tab</i>	5
<i>olanzapine 5mg tab</i>	41	ORKAMBI 125-100MG	76	<i>oxycodone 1mg/ml oral soln</i>	5
<i>olanzapine 7.5mg tab</i>	41	ORAL GRANULES		<i>oxycodone 20mg tab</i>	5
<i>olmesartan medoxomil 20mg tab</i>	25	ORKAMBI 125-100MG TAB	76	<i>oxycodone 30mg tab</i>	5
<i>olmesartan medoxomil 40mg tab</i>	25	ORKAMBI 125-200MG TAB	76	<i>oxycodone 5mg tab</i>	5
<i>olmesartan medoxomil 5mg tab</i>	25	ORKAMBI 188-150MG ORAL GRANULES	76	<i>oxycodone/acetaminophe n 10-325mg tab</i>	5
<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	70	ORKAMBI 94-75MG ORAL GRANULES	76	<i>oxycodone/acetaminophe n 2.5-325mg tab</i>	5
OLUMIANT 1MG TAB	2	<i>orphenadrine citrate 100mg er tab</i>	69	<i>oxycodone/acetaminophe n 5-325mg tab</i>	5
OLUMIANT 2MG TAB	2	ORSERDU 345MG TAB	32	<i>oxycodone/acetaminophe n 7.5-325mg tab</i>	5
OLUMIANT 4MG TAB	2	ORSERDU 86MG TAB	32	OZEMPIC 2.68MG/ML PEN INJ	20
<i>omega-3 acid ethyl esters (usp) 1gm cap</i>	23	<i>oseltamivir 30mg cap</i>	46	OZEMPIC 2MG/3ML PEN INJ	20
<i>omeprazole 10mg dr cap</i>	80	<i>oseltamivir 45mg cap</i>	46	OZEMPIC 4MG/3ML PEN INJ	20
<i>omeprazole 20mg dr cap</i>	80	<i>oseltamivir 6mg/ml oral susp</i>	46		
<i>omeprazole 40mg dr cap</i>	80	<i>oseltamivir 75mg cap</i>	46		
OMNITROPE	57	OTEZLA 20MG TAB	53		
10MG/1.5ML CARTRIDGE		OTEZLA 30MG TAB	53		
OMNITROPE 5.8MG INJ	57			P	
				<i>pacerone 100mg tab</i>	8
				<i>pacerone 200mg tab</i>	8

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

ALPHABETICAL LISTING OF DRUGS

<i>pacerone 400mg tab</i>	8	PEMAZYRE 13.5MG TAB	35	PHENELZINE 15MG TAB	16
<i>paliperidone 1.5mg er tab</i>	40	PEMAZYRE 4.5MG TAB	35	<i>phenobarbital 100mg tab</i>	13
<i>paliperidone 3mg er tab</i>	40	PEMAZYRE 9MG TAB	35	<i>phenobarbital 15mg tab</i>	13
<i>paliperidone 6mg er tab</i>	40	PENBRAYA INJ	81	<i>phenobarbital 16.2mg tab</i>	13
<i>paliperidone 9mg er tab</i>	40	<i>penicillamine 250mg tab</i>	68	<i>phenobarbital 30mg tab</i>	13
PANRETIN 0.1% GEL	52	<i>penicillin g potassium</i>	73	<i>phenobarbital 32.4mg tab</i>	14
<i>pantoprazole 20mg dr tab</i>	80	<i>1000000unit/ml inj</i>		<i>phenobarbital 4mg/ml</i>	14
<i>pantoprazole 40mg dr tab</i>	80	PENICILLIN G SODIUM	73	<i>oral soln</i>	
<i>paricalcitol 1mcg cap</i>	57	100000UNIT/ML INJ		<i>phenobarbital 60mg tab</i>	14
<i>paricalcitol 2mcg cap</i>	57	<i>penicillin v potassium</i>	73	<i>phenobarbital 64.8mg tab</i>	14
<i>paricalcitol 4mcg cap</i>	57	<i>250mg tab</i>		<i>phenobarbital 97.2mg tab</i>	14
<i>paroxetine 10mg tab</i>	16	PENICILLIN V	73	<i>phenytoin 25mg/ml oral</i>	14
<i>paroxetine 10mg/5ml oral</i>	16	POTASSIUM 25MG/ML		<i>susp</i>	
<i>susp</i>		ORAL SOLN		<i>phenytoin 50mg chew tab</i>	14
<i>paroxetine 12.5mg er tab</i>	16	<i>penicillin v potassium</i>	73	<i>phenytoin sodium 100mg</i>	14
<i>paroxetine 20mg tab</i>	16	<i>500mg tab</i>		<i>er cap</i>	
<i>paroxetine 25mg er tab</i>	16	PENICILLIN V	73	PIFELTRO 100MG TAB	44
<i>paroxetine 30mg tab</i>	16	POTASSIUM 50MG/ML		<i>pilocarpine 1% ophth</i>	72
<i>paroxetine 37.5mg er tab</i>	16	ORAL SOLN		<i>soln</i>	
<i>paroxetine 40mg tab</i>	16	PENTACEL	80	<i>pilocarpine 2% ophth</i>	72
PAXLOVID	46	96-30-68UNIT/ML INJ		<i>soln</i>	
150MG/100MG TAB		<i>pentamidine isethionate</i>	29	<i>pilocarpine 4% ophth</i>	72
PACK (20)		<i>300mg inj</i>		<i>soln</i>	
PAXLOVID	46	<i>pentamidine isethionate</i>	29	<i>pilocarpine 5mg tab</i>	51
150MG/100MG TAB		<i>300mg/6ml inh soln</i>		<i>pilocarpine 7.5mg tab</i>	51
PACK (30)		<i>pentoxifylline 400mg er</i>	49	<i>pimecrolimus 1% cream</i>	54
<i>pazopanib 200mg tab</i>	35	<i>tab</i>		PIMOZIDE 1MG TAB	76
PEDIARIX SYRINGE	80	PERINDOPRIL	24	PIMOZIDE 2MG TAB	76
PEDVAXHIB	81	ERBUMINE 2MG TAB		<i>pimtrea tab 28-day pack</i>	60
7.5MCG/0.5ML INJ		<i>perindopril erbumine</i>	24	<i>pindolol 10mg tab</i>	47
<i>peg 3350 powder for oral</i>	65	<i>4mg tab</i>		<i>pindolol 5mg tab</i>	47
<i>soln (100gm Moviprep</i>		PERINDOPRIL	24	<i>pioglitazone 15mg tab</i>	19
<i>equiv)</i>		ERBUMINE 8MG TAB		<i>pioglitazone 30mg tab</i>	19
<i>peg 3350/electrolyte</i>	65	<i>periogard 0.12%</i>	51	<i>pioglitazone 45mg tab</i>	19
<i>powder for oral soln</i>		<i>mouthwash</i>		<i>piperacillin/tazobactam</i>	73
<i>peg 3350/kcl/sodium</i>	65	<i>permethrin 5% cream</i>	55	<i>2000-250mg inj</i>	
<i>bicarbonate/sodium</i>		<i>perphenazine 16mg tab</i>	42	<i>piperacillin/tazobactam</i>	73
<i>chloride powder for oral</i>		<i>perphenazine 2mg tab</i>	42	<i>3000-375mg inj</i>	
<i>soln</i>		<i>perphenazine 4mg tab</i>	42	<i>piperacillin/tazobactam</i>	73
PEGASYS	45	<i>perphenazine 8mg tab</i>	42	<i>36-4.5gm inj</i>	
180MCG/0.5ML		PERSERIS 120MG	40	<i>piperacillin/tazobactam</i>	73
SYRINGE		SYRINGE		<i>4000-500mg inj</i>	
PEGASYS 180MCG/ML	45	PERSERIS 90MG	40	PIQRAY TAB 200MG	35
INJ		SYRINGE		DAILY DOSE PACK (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

PIQRAY TAB 250MG DAILY DOSE PACK (56)	35	POTASSIUM CHLORIDE 15MEQ ER TAB	67	<i>pravastatin sodium 40mg tab</i>	24
PIQRAY TAB 300MG DAILY DOSE PACK (56)	35	<i>potassium chloride 15meq micro er tab</i>	67	<i>pravastatin sodium 80mg tab</i>	24
<i>pirfenidone 267mg cap</i>	77	<i>potassium chloride</i>	67	<i>praziquantel 600mg tab</i>	6
<i>pirfenidone 267mg tab</i>	77	<i>2.67meq/ml oral soln</i>		<i>prazosin 1mg cap</i>	25
<i>pirfenidone 801mg tab</i>	77	<i>potassium chloride</i>	67	<i>prazosin 2mg cap</i>	25
<i>piroxicam 10mg cap</i>	4	<i>20meq er tab</i>		<i>prazosin 5mg cap</i>	25
<i>piroxicam 20mg cap</i>	4	<i>potassium chloride</i>	67	PREDNISOLONE 1% OPHTH SOLN	71
PLASMA-LYTE A INJ	67	<i>20meq micro er tab</i>		<i>prednisolone 1mg/ml oral soln</i>	50
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	76	<i>potassium chloride</i>	67	<i>prednisolone 3mg/ml oral soln</i>	50
PLEGRIDY 125MCG/0.5ML SYRINGE	76	POTASSIUM CHLORIDE 20MEQ/100ML INJ	67	<i>prednisolone 5mg/ml oral soln</i>	50
<i>plenamine 15% inj</i>	70	<i>potassium chloride</i>	67	<i>prednisolone acetate 1%</i>	71
PODOFILOX 0.5% TOPICAL SOLN	55	<i>2meq/ml (20ml) inj</i>		<i>ophth susp</i>	
<i>polycin 0.5-10unit/mg ophth ointment</i>	71	<i>potassium chloride</i>	67	<i>prednisone 10mg tab</i>	51
<i>polymyxin b/trimethoprim 10000 unit/ml-0.1% ophth soln</i>	71	POTASSIUM CHLORIDE 40MEQ/100ML INJ	67	<i>prednisone 1mg tab</i>	51
POMALYST 1MG CAP	37	<i>potassium chloride 8meq er cap</i>	67	PREDNISONE 1MG/ML ORAL SOLN	51
POMALYST 2MG CAP	37	<i>potassium chloride 8meq er tab</i>	67	<i>prednisone 2.5mg tab</i>	51
POMALYST 3MG CAP	37	<i>potassium citrate 10meq er tab</i>	63	<i>prednisone 20mg tab</i>	51
POMALYST 4MG CAP	37	<i>potassium citrate 15meq er tab</i>	63	<i>prednisone 50mg tab</i>	51
<i>portia tab 28-day pack</i>	60	<i>potassium citrate 5meq er tab</i>	63	<i>pregabalin 100mg cap</i>	14
<i>posaconazole 100mg dr tab</i>	22	<i>pramipexole 0.125mg tab</i>	38	<i>pregabalin 150mg cap</i>	14
<i>posaconazole 40mg/ml oral susp</i>	22	<i>pramipexole 0.25mg tab</i>	38	<i>pregabalin 200mg cap</i>	14
<i>potassium chloride</i>	67	<i>pramipexole 0.5mg tab</i>	38	<i>pregabalin 20mg/ml oral soln</i>	14
<i>1.33meq/ml oral soln</i>		<i>pramipexole 0.75mg tab</i>	38	<i>pregabalin 225mg cap</i>	14
<i>potassium chloride</i>	67	<i>pramipexole 1.5mg tab</i>	38	<i>pregabalin 25mg cap</i>	14
<i>10meq er cap</i>		<i>pramipexole 1mg tab</i>	38	<i>pregabalin 300mg cap</i>	14
<i>potassium chloride</i>	67	<i>prasugrel 10mg tab</i>	63	<i>pregabalin 50mg cap</i>	14
<i>10meq er tab</i>		<i>prasugrel 5mg tab</i>	64	<i>pregabalin 75mg cap</i>	14
<i>potassium chloride</i>	67	<i>pravastatin sodium 10mg tab</i>	24	PREMARIN 0.3MG TAB	62
<i>10meq micro er tab</i>		<i>pravastatin sodium 20mg tab</i>	24	PREMARIN 0.45MG TAB	62
POTASSIUM CHLORIDE 10MEQ/100ML INJ	67			PREMARIN 0.625MG TAB	62
				PREMARIN	82
				0.625MG/GM VAGINAL CREAM	
				PREMARIN 0.9MG TAB	62

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

PREMARIN 1.25MG TAB	62	PROGRAF 1MG	69	PROPRANOLOL	47
PREMPHASE 28-DAY	60	GRANULES FOR ORAL		8MG/ML ORAL SOLN	
PACK		SUSP		<i>propylthiouracil 50mg</i>	78
PREMPRO 0.3/1.5MG	60	PROLASTIN 1000MG INJ	76	<i>tab</i>	
28-DAY PACK		PROLIA 60MG/ML	56	PROQUAD INJ	82
PREMPRO 0.45/1.5MG	60	SYRINGE		PROSOL 20% INJ	70
28-DAY PACK		PROMACTA 12.5MG	64	<i>protriptyline 10mg tab</i>	18
PREMPRO 0.625/2.5MG	60	POWDER FOR ORAL		<i>protriptyline 5mg tab</i>	18
28-DAY PACK		SUSP		PULMOZYME 1MG/ML	76
PREMPRO 0.625/5MG	61	PROMACTA 12.5MG TAB	64	INH SOLN	
28-DAY PACK		PROMACTA 25MG	64	PURIXAN	30
<i>prevalite 4gm powder for</i>	23	POWDER FOR ORAL		2000MG/100ML ORAL	
<i>oral susp</i>		SUSP		SUSP	
PREVYMIS 240MG TAB	45	PROMACTA 25MG TAB	64	<i>pyrazinamide 500mg tab</i>	30
PREVYMIS 480MG TAB	45	PROMACTA 50MG TAB	64	<i>pyridostigmine bromide</i>	30
PREZCOBIX 150-800MG	44	PROMACTA 75MG TAB	64	<i>60mg tab</i>	
TAB		<i>promethazine 1.25mg/ml</i>	77	<i>pyrimethamine 25mg tab</i>	30
PREZISTA 100MG/ML	44	<i>oral soln</i>			
ORAL SUSP		<i>promethazine 12.5mg tab</i>	77	Q	
PREZISTA 150MG TAB	44	<i>promethazine 25mg tab</i>	77	QINLOCK 50MG TAB	35
PREZISTA 75MG TAB	44	<i>promethazine 50mg tab</i>	77	QUADRACEL INJ	80
PRIFTIN 150MG TAB	30	<i>promethazine 150mg tab</i>	8	QUADRACEL SYRINGE	80
PRIMAQUINE	30	<i>propafenone 150mg tab</i>	8	<i>quetiapine 100mg tab</i>	41
PHOSPHATE 26.3MG		<i>propafenone 225mg er</i>	8	<i>quetiapine 150mg er tab</i>	41
TAB		<i>cap</i>		<i>quetiapine 200mg er tab</i>	41
<i>primidone 250mg tab</i>	14	<i>propafenone 225mg tab</i>	8	<i>quetiapine 200mg tab</i>	41
<i>primidone 50mg tab</i>	14	<i>propafenone 300mg tab</i>	8	<i>quetiapine 25mg tab</i>	41
PRIORIX INJ	82	<i>propafenone 325mg er</i>	8	<i>quetiapine 300mg er tab</i>	41
PRIVIGEN 20GM/200ML	72	<i>cap</i>		<i>quetiapine 300mg tab</i>	41
INJ		<i>propafenone 425mg er</i>	8	<i>quetiapine 400mg er tab</i>	41
<i>probenecid 500mg tab</i>	63	<i>cap</i>		<i>quetiapine 400mg tab</i>	41
<i>prochlorperazine 10mg</i>	42	<i>propranolol 10mg tab</i>	47	<i>quetiapine 50mg er tab</i>	41
<i>tab</i>		<i>propranolol 120mg er</i>	47	<i>quetiapine 50mg tab</i>	42
<i>prochlorperazine 25mg</i>	42	<i>cap</i>		<i>quinapril 10mg tab</i>	24
<i>rectal supp</i>		<i>propranolol 160mg er</i>	47	<i>quinapril 20mg tab</i>	24
<i>prochlorperazine 5mg tab</i>	42	<i>cap</i>		<i>quinapril 40mg tab</i>	25
<i>procto-med 2.5% cream</i>	6	<i>propranolol 20mg tab</i>	47	<i>quinapril 5mg tab</i>	25
<i>proctosol 2.5% cream</i>	6	<i>propranolol 40mg tab</i>	47	QUINIDINE SULFATE	7
<i>proctozone hc 2.5% cream</i>	6	<i>propranolol 4mg/ml oral</i>	47	200MG TAB	
<i>progesterone 100mg cap</i>	74	<i>soln</i>		QUINIDINE SULFATE	7
<i>progesterone 200mg cap</i>	74	<i>propranolol 60mg er cap</i>	47	300MG TAB	
PROGRAF 0.2MG	69	<i>propranolol 60mg tab</i>	47	<i>quinine sulfate 324mg</i>	30
GRANULES FOR ORAL		<i>propranolol 80mg er cap</i>	47	<i>cap</i>	
SUSP		<i>propranolol 80mg tab</i>	47	QVAR 40MCG	9
				REDIHALER	

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

ALPHABETICAL LISTING OF DRUGS

QVAR 80MCG REDIHALER	9	RETACRIT 20000UNIT/ML INJ	64	RINVOQ 1MG/ML ORAL SOLN	2
R		RETACRIT 2000UNIT/ML INJ	64	RINVOQ 30MG ER TAB	2
RABAVERT 2.5UNIT/ML INJ	82	RETACRIT 3000UNIT/ML INJ	64	RINVOQ 45MG ER TAB	2
RADICAVA 105MG/5ML ORAL SUSP	70	RETACRIT 40000UNIT/ML INJ	64	<i>risedronate sodium</i> 150mg tab	56
<i>raloxifene 60mg tab</i>	56	RETACRIT 4000UNIT/ML INJ	64	<i>risedronate sodium 30mg</i> tab	56
<i>ramelteon 8mg tab</i>	64	RETEVMO 120MG TAB	35	<i>risedronate sodium 35mg</i> tab	56
<i>ramipril 1.25mg cap</i>	25	RETEVMO 160MG TAB	35	<i>risedronate sodium 35mg</i> tab pack (12)	56
<i>ramipril 10mg cap</i>	25	RETEVMO 40MG CAP	35	<i>risedronate sodium 35mg</i> tab pack (4)	56
<i>ramipril 2.5mg cap</i>	25	RETEVMO 40MG TAB	35	<i>risedronate sodium 5mg</i> tab	56
<i>ramipril 5mg cap</i>	25	RETEVMO 80MG CAP	35	RISPERIDONE 0.25MG ODT	40
<i>ranolazine 1000mg er tab</i>	49	RETEVMO 80MG TAB	35	<i>risperidone 0.25mg tab</i>	40
<i>ranolazine 500mg er tab</i>	49	REVUFORJ 110MG TAB	37	<i>risperidone 0.5mg odt</i>	40
<i>rasagiline 0.5mg tab</i>	38	REVUFORJ 160MG TAB	37	<i>risperidone 0.5mg tab</i>	40
<i>rasagiline 1mg tab</i>	38	REXULTI 0.25MG TAB	43	<i>risperidone 1mg odt</i>	40
<i>reclipsen tab 28-day pack</i>	61	REXULTI 0.5MG TAB	43	<i>risperidone 1mg tab</i>	40
RECOMBIVAX 10MCG/ML INJ	82	REXULTI 1MG TAB	43	<i>risperidone 1mg/ml oral</i> soln	40
RECOMBIVAX 10MCG/ML SYRINGE	82	REXULTI 2MG TAB	43	<i>risperidone 2mg odt</i>	40
RECOMBIVAX 40MCG/ML INJ	82	REXULTI 3MG TAB	43	<i>risperidone 2mg tab</i>	40
RECOMBIVAX 5MCG/0.5ML INJ	82	REXULTI 4MG TAB	43	<i>risperidone 37.5mg inj</i>	40
RECOMBIVAX 5MCG/0.5ML SYRINGE	82	REYATAZ 50MG ORAL POWDER	44	<i>risperidone 3mg odt</i>	40
REGANEX 0.01% GEL	55	REZDIFFRA 100MG TAB	62	<i>risperidone 3mg tab</i>	40
RELENZA 5MG/BLISTER POWDER INHALER	46	REZDIFFRA 60MG TAB	62	<i>risperidone 4mg odt</i>	40
<i>repaglinide 0.5mg tab</i>	19	REZDIFFRA 80MG TAB	62	<i>risperidone 4mg tab</i>	40
<i>repaglinide 1mg tab</i>	20	REZLIDHIA 150MG CAP	35	<i>risperidone 50mg inj</i>	40
<i>repaglinide 2mg tab</i>	20	REZUROCK 200MG TAB	68	<i>risperidone microspheres</i> 12.5mg inj	40
REPATHA 140MG/ML AUTO-INJECTOR	23	RHOPRESSA 0.02% OPHTH SOLN	71	<i>risperidone microspheres</i> 25mg inj	40
REPATHA 140MG/ML SYRINGE	23	RIBAVIRIN 200MG CAP	45	<i>ritonavir 100mg tab</i>	45
REPATHA 420MG/3.5ML CARTRIDGE	23	RIBAVIRIN 200MG TAB	45	<i>rivastigmine 1.5mg cap</i>	75
RETACRIT 10000UNIT/ML INJ	64	<i>rifabutin 150mg cap</i>	30	<i>rivastigmine 13.3mg/24hr</i> patch	75
RETACRIT 20000UNIT/2ML INJ	64	<i>rifampin 150mg cap</i>	30	<i>rivastigmine 3mg cap</i>	75
		<i>rifampin 300mg cap</i>	30	<i>rivastigmine 4.5mg cap</i>	75
		<i>rifampin 600mg inj</i>	30		
		<i>riluzole 50mg tab</i>	70		
		RIMANTADINE 100MG TAB	46		
		RINVOQ 15MG ER TAB	2		

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

ALPHABETICAL LISTING OF DRUGS

<i>rivastigmine 4.6mg/24hr patch</i>	75	<i>rufinamide 400mg tab</i>	14	SHINGRIX	82
<i>rivastigmine 6mg cap</i>	75	<i>rufinamide 40mg/ml oral susp</i>	14	50MCG/0.5ML INJ	
<i>rivastigmine 9.5mg/24hr patch</i>	75	RUKOBIA 600MG ER TAB	45	SIGNIFOR 0.3MG/ML INJ	57
<i>rizatriptan 10mg odt</i>	66	RYBELSUS 14MG TAB	20	SIGNIFOR 0.6MG/ML INJ	57
<i>rizatriptan 10mg tab</i>	66	RYBELSUS 3MG TAB	20	SIGNIFOR 0.9MG/ML INJ	57
<i>rizatriptan 5mg odt</i>	66	RYBELSUS 7MG TAB	20	<i>sildenafil 20mg tab</i>	77
<i>rizatriptan 5mg tab</i>	66	RYDAPT 25MG CAP	35	<i>silver sulfadiazine 1% cream</i>	55
ROCKLATAN	71			SIMBRINZA 0.2-1% OPTH SUSP	70
0.02-0.005% OPTH SOLN		S		SIMLANDI 40MG/0.4ML AUTO-INJECTOR	3
<i>roflumilast 0.5mg tab</i>	77	<i>sajazir 30mg/3ml syringe</i>	65	SIMLANDI 40MG/0.4ML SYRINGE	3
<i>roflumilast 250mcg tab</i>	77	<i>salmon calcitonin 200unit/act nasal spray</i>	56	<i>simvastatin 10mg tab</i>	24
<i>ropinirole 0.25mg tab</i>	38	SANTYL 250UNIT/GM OINTMENT	55	<i>simvastatin 20mg tab</i>	24
<i>ropinirole 0.5mg tab</i>	38	<i>sapropterin 100mg powder for oral soln</i>	57	<i>simvastatin 40mg tab</i>	24
<i>ropinirole 1mg tab</i>	38	<i>sapropterin 100mg tab</i>	57	<i>simvastatin 5mg tab</i>	24
<i>ropinirole 2mg tab</i>	38	<i>sapropterin 500mg powder for oral soln</i>	57	<i>simvastatin 80mg tab</i>	24
<i>ropinirole 3mg tab</i>	38	SCSEMBLIX 100MG TAB	35	<i>sirolimus 0.5mg tab</i>	69
<i>ropinirole 4mg tab</i>	38	SCSEMBLIX 20MG TAB	35	<i>sirolimus 1mg tab</i>	69
<i>ropinirole 5mg tab</i>	38	SCSEMBLIX 40MG TAB	35	<i>sirolimus 1mg/ml oral soln</i>	69
<i>rosuvastatin calcium 10mg tab</i>	24	<i>scopolamine 1mg/72hr patch</i>	22	SIRTURO 100MG TAB	30
<i>rosuvastatin calcium 20mg tab</i>	24	SECUADO 3.8MG/24HR PATCH	42	SIRTURO 20MG TAB	30
<i>rosuvastatin calcium 40mg tab</i>	24	SECUADO 5.7MG/24HR PATCH	42	SKYRIZI 150MG/ML AUTO-INJECTOR	53
<i>rosuvastatin calcium 5mg tab</i>	24	SECUADO 7.6MG/24HR PATCH	42	SKYRIZI 150MG/ML SYRINGE	53
ROTARIX	82	<i>selegiline 5mg cap</i>	38	SKYRIZI 180MG/1.2ML CARTRIDGE	63
667000UNIT/ML ORAL SUSP		<i>selenium sulfide 2.5% shampoo</i>	55	SKYRIZI 360MG/2.4ML CARTRIDGE	63
ROTATEQ ORAL SUSP	82	SELZENTRY 20MG/ML ORAL SOLN	45	<i>sodium chloride 0.45% inj</i>	67
<i>roweepra 500mg tab</i>	14	<i>sertraline 100mg tab</i>	16	<i>sodium chloride 0.9% inj</i>	67
ROZLYTREK 100MG CAP	35	<i>sertraline 20mg/ml oral soln</i>	16	<i>sodium chloride 0.9% irrigation soln</i>	63
ROZLYTREK 200MG CAP	35	<i>sertraline 25mg tab</i>	16	<i>sodium chloride 3% inj</i>	68
ROZLYTREK 50MG ORAL PELLET	35	<i>sertraline 50mg tab</i>	17	<i>sodium chloride 50mg/ml inj</i>	68
RUBRACA 200MG TAB	35	<i>setlakin tab 91-day pack</i>	61	SODIUM OXYBATE 500MG/ML ORAL SOLN	78
RUBRACA 250MG TAB	35	<i>sharobel 0.35mg tab 28-day pack</i>	74		
RUBRACA 300MG TAB	35				
<i>rufinamide 200mg tab</i>	14				

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>sodium phenylbutyrate</i>	57	SPRITAM 500MG TAB	14	<i>sulfamethoxazole/trimeth</i>	78
<i>3gm/tsp oral powder</i>		FOR ORAL SUSP		<i>oprim 200-40mg/5ml oral</i>	
<i>sodium polystyrene</i>	69	SPRITAM 750MG TAB	14	<i>susp</i>	
<i>sulfonate 15000mg</i>		FOR ORAL SUSP		<i>sulfamethoxazole/trimeth</i>	78
<i>powder for oral susp</i>		<i>sps 15gm/60ml susp</i>	69	<i>oprim 400-80mg tab</i>	
<i>sodium sulfate/potassium</i>	65	<i>sronyx tab 28-day pack</i>	61	<i>sulfamethoxazole/trimeth</i>	78
<i>sulfate/magnesium sulfate</i>		<i>ssd 1% cream</i>	55	<i>oprim 800-160mg tab</i>	
<i>17.5-3.13-1.6 gm/177ml</i>		STELARA 45MG/0.5ML	53	<i>sulfasalazine 500mg dr</i>	63
<i>oral soln prep kit</i>		INJ		<i>tab</i>	
<i>sodium sulfate/potassium</i>	65	STELARA 45MG/0.5ML	53	<i>sulfasalazine 500mg tab</i>	63
<i>sulfate/magnesium sulfate</i>		SYRINGE		<i>sulindac 150mg tab</i>	4
<i>17.5-3.13-1.6 gm/177ml</i>		STELARA 90MG/ML	53	<i>sulindac 200mg tab</i>	4
<i>oral soln prep kit (480ml)</i>		SYRINGE		<i>sumatriptan 100mg tab</i>	66
SOFOSBUVIR/VELPATAS	45	STIMUFEND 6MG/0.6ML	64	<i>sumatriptan 25mg tab</i>	66
VIR 400-100MG TAB		SYRINGE		<i>sumatriptan 4mg/0.5ml</i>	66
SOGROYA 10MG/1.5ML	57	STIOLTO	10	<i>cartridge</i>	
PEN INJ		2.5-2.5MCG/ACT		<i>sumatriptan 50mg tab</i>	66
SOGROYA 15MG/1.5ML	57	INHALER		<i>sumatriptan 6mg/0.5ml</i>	66
PEN INJ		STIVARGA 40MG TAB	35	<i>auto-injector</i>	
SOGROYA 5MG/1.5ML	57	STREPTOMYCIN 1GM	2	<i>sumatriptan 6mg/0.5ml</i>	66
PEN INJ		INJ		<i>cartridge</i>	
SOLTAMOX 10MG/5ML	32	STRIBILD	45	<i>sumatriptan 6mg/0.5ml</i>	66
ORAL SOLN		150-150-200-300MG		<i>inj</i>	
SOMAVERT 10MG INJ	58	TAB		<i>sunitinib 12.5mg cap</i>	35
SOMAVERT 15MG INJ	58	STRIVERDI 2.5MCG/ACT	10	<i>sunitinib 25mg cap</i>	35
SOMAVERT 20MG INJ	58	INHALER		<i>sunitinib 37.5mg cap</i>	35
SOMAVERT 25MG INJ	58	<i>subvenite 100mg tab</i>	14	<i>sunitinib 50mg cap</i>	35
SOMAVERT 30MG INJ	58	<i>subvenite 150mg tab</i>	14	SUNLENCA 300MG TAB	45
<i>sorafenib 200mg tab</i>	35	<i>subvenite 200mg tab</i>	14	THERAPY PACK (4)	
<i>sotalol 120mg tab</i>	47	<i>subvenite 25mg tab</i>	14	SUNLENCA 300MG TAB	45
<i>sotalol 160mg tab</i>	47	SUCRAID 8500UNIT/ML	55	THERAPY PACK (5)	
<i>sotalol 240mg tab</i>	47	ORAL SOLN		SUNOSI 150MG TAB	78
<i>sotalol 80mg tab</i>	47	<i>sucralfate 1000mg tab</i>	80	SUNOSI 75MG TAB	78
<i>sotalol af 120mg tab</i>	47	<i>sucralfate 100mg/ml oral</i>	80	<i>syeda tab 28-day pack</i>	61
<i>sotalol af 160mg tab</i>	47	<i>susp</i>		SYMDEKO TAB 4-WEEK	76
<i>sotalol af 80mg tab</i>	47	SUFLAVE SOLN PACK	65	PACK (56)	
<i>spironolactone 100mg tab</i>	56	<i>sulfacetamide sodium</i>	52	SYMDEKO TAB	76
<i>spironolactone 25mg tab</i>	56	<i>10% lotion</i>		50-75MG/75MG PACK	
<i>spironolactone 50mg tab</i>	56	<i>sulfacetamide sodium</i>	71	(56)	
<i>sprintec tab 28-day pack</i>	61	<i>10% ophth soln</i>		SYMPAZAN 10MG ORAL	12
SPRITAM 1000MG TAB	14	SULFACETAMIDE/PRED	71	FILM	
FOR ORAL SUSP		NISOLONE 10-0.25%		SYMPAZAN 20MG ORAL	12
SPRITAM 250MG TAB	14	OPHTH SOLN		FILM	
FOR ORAL SUSP		<i>sulfadiazine 500mg tab</i>	78		

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

ALPHABETICAL LISTING OF DRUGS

SYMPAZAN 5MG ORAL FILM	12	TALZENNA 0.35MG CAP	36	<i>terconazole 0.8% vaginal cream</i>	82
SYMTUZA 150-800-200-10MG TAB	45	TALZENNA 0.5MG CAP	36	<i>terconazole 80mg vaginal insert</i>	82
SYNJARDY 12.5-1000MG TAB	19	TALZENNA 0.75MG CAP	36	<i>teriflunomide 14mg tab</i>	76
SYNJARDY 12.5-500MG TAB	19	TALZENNA 1MG CAP	36	<i>teriflunomide 7mg tab</i>	76
SYNJARDY 5-1000MG TAB	19	<i>tamoxifen 10mg tab</i>	32	TERIPARATIDE 0.02MG/ACT PEN INJ	57
SYNJARDY 5-500MG TAB	19	<i>tamoxifen 20mg tab</i>	32	<i>testosterone 1% (12.5mg/act) gel pump</i>	6
SYNJARDY XR 10-1000MG TAB	19	<i>tamsulosin 0.4mg cap</i>	63	<i>testosterone 1% (25mg) gel packet</i>	6
SYNJARDY XR 12.5-1000MG TAB	19	<i>tarina 24 fe tab 1/20 28-day pack</i>	61	<i>testosterone 1% (50mg) gel packet</i>	6
SYNJARDY XR 25-1000MG TAB	19	<i>tarina fe tab 1/20 28-day pack</i>	61	<i>testosterone 1.62% (1.25gm) gel packet</i>	6
SYNJARDY XR 5-1000MG TAB	19	TASIGNA 150MG CAP	36	<i>testosterone 1.62% (2.5gm) gel packet</i>	6
T		TASIGNA 200MG CAP	36	<i>testosterone 1.62% (20.25mg/act) gel pump</i>	6
TABRECTA 150MG TAB	35	TASIGNA 50MG CAP	36	<i>testosterone 30mg/act topical soln</i>	6
TABRECTA 200MG TAB	35	<i>tazarotene 0.1% cream</i>	53	<i>testosterone cypionate 100mg/ml inj</i>	6
<i>tacrolimus 0.03% ointment</i>	54	<i>tazicef 1gm inj</i>	50	<i>testosterone cypionate 200mg/ml (1ml) inj</i>	6
<i>tacrolimus 0.1% ointment</i>	54	<i>tazicef 2gm inj</i>	50	<i>testosterone cypionate 200mg/ml inj</i>	6
<i>tacrolimus 0.5mg cap</i>	69	TAZICEF 6GM INJ	50	TESTOSTERONE ENANTHATE 200MG/ML INJ	6
<i>tacrolimus 1mg cap</i>	69	TAZVERIK 200MG TAB	36	<i>tetrabenazine 12.5mg tab</i>	75
<i>tacrolimus 5mg cap</i>	69	TEFLARO 400MG INJ	29	<i>tetrabenazine 25mg tab</i>	75
<i>tadalafil 2.5mg tab</i>	63	TEFLARO 600MG INJ	29	<i>tetracycline 250mg cap</i>	78
<i>tadalafil 20mg tab</i>	77	<i>telmisartan 20mg tab</i>	25	<i>tetracycline 500mg cap</i>	78
<i>tadalafil 5mg tab</i>	63	<i>telmisartan 40mg tab</i>	25	THALOMID 100MG CAP	68
TAFINLAR 10MG TAB FOR ORAL SUSP	35	<i>telmisartan 80mg tab</i>	25	THALOMID 50MG CAP	68
TAFINLAR 50MG CAP	35	<i>temazepam 15mg cap</i>	64	THEOPHYLLINE 100MG ER TAB	77
TAFINLAR 75MG CAP	35	<i>temazepam 30mg cap</i>	64	THEOPHYLLINE 200MG ER TAB	77
TAGRISSO 40MG TAB	31	TENIVAC 4-10UNIT/ML INJ	80	<i>theophylline 300mg er tab</i>	77
TAGRISSO 80MG TAB	31	TENIVAC 4-10UNIT/ML SYRINGE	80		
TAKHZYRO 300MG/2ML INJ	65	<i>tenofovir disoproxil fumarate 300mg tab</i>	45		
TAKHZYRO 300MG/2ML SYRINGE	65	TEPMETKO 225MG TAB	36		
TALZENNA 0.1MG CAP	35	<i>terazosin 10mg cap</i>	25		
TALZENNA 0.25MG CAP	36	<i>terazosin 1mg cap</i>	26		
		<i>terazosin 2mg cap</i>	26		
		<i>terazosin 5mg cap</i>	26		
		<i>terbinafine 250mg tab</i>	22		
		<i>terbutaline sulfate 2.5mg tab</i>	10		
		<i>terbutaline sulfate 5mg tab</i>	10		
		<i>terconazole 0.4% vaginal cream</i>	82		

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>theophylline 400mg er tab</i>	77	<i>tinidazole 500mg tab</i>	29	<i>tramadol 200mg er tab</i>	5
<i>theophylline 450mg er tab</i>	77	TIVICAY 50MG TAB	45	<i>tramadol 300mg er tab</i>	5
<i>theophylline 600mg er tab</i>	77	TIVICAY 5MG TAB FOR ORAL SUSP	45	<i>tramadol 50mg tab</i>	5
<i>thioridazine 100mg tab</i>	42	<i>tizanidine 2mg tab</i>	69	<i>tramadol/acetaminophen 37.5-325mg tab</i>	5
<i>thioridazine 10mg tab</i>	42	<i>tizanidine 4mg tab</i>	69	<i>trandolapril 1mg tab</i>	25
<i>thioridazine 25mg tab</i>	42	<i>tobramycin 0.3% ophth soln</i>	71	<i>trandolapril 2mg tab</i>	25
<i>thioridazine 50mg tab</i>	42	TOBRAMYCIN 10MG/ML INJ	2	<i>trandolapril 4mg tab</i>	25
<i>thiothixene 10mg cap</i>	39	<i>tobramycin 300mg/5ml inh soln</i>	2	<i>tranexamic acid 650mg tab</i>	64
<i>thiothixene 1mg cap</i>	39	<i>tobramycin 80mg/2ml inj</i>	2	<i>tranylcypramine 10mg tab</i>	16
<i>thiothixene 2mg cap</i>	39	<i>tolterodine tartrate 1mg tab</i>	81	TRAVASOL 10% INJ	70
<i>thiothixene 5mg cap</i>	39	<i>tolterodine tartrate 2mg er cap</i>	81	<i>travoprost 0.004% ophth soln</i>	72
<i>tiadylt 120mg er (24hr) cap</i>	48	<i>tolterodine tartrate 2mg er cap</i>	81	<i>trazodone 100mg tab</i>	17
<i>tiadylt 180mg er (24hr) cap</i>	48	<i>tolterodine tartrate 2mg tab</i>	81	<i>trazodone 150mg tab</i>	17
<i>tiadylt 240mg er (24hr) cap</i>	48	<i>tolterodine tartrate 4mg er cap</i>	81	<i>trazodone 50mg tab</i>	17
<i>tiadylt 300mg er (24hr) cap</i>	48	<i>topiramate 100mg tab</i>	14	TRECTOR 250MG TAB	30
<i>tiadylt 360mg er (24hr) cap</i>	48	<i>topiramate 15mg cap</i>	14	TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER	10
<i>tiadylt 420mg er (24hr) cap</i>	48	<i>topiramate 200mg tab</i>	14	TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	10
<i>tiagabine 12mg tab</i>	15	<i>topiramate 25mg cap</i>	14	TRELSTAR 11.25MG INJ	32
<i>tiagabine 16mg tab</i>	15	<i>topiramate 25mg tab</i>	14	TRELSTAR 22.5MG INJ	32
<i>tiagabine 2mg tab</i>	15	<i>topiramate 50mg tab</i>	14	TRELSTAR 3.75MG INJ	32
<i>tiagabine 4mg tab</i>	15	<i>toremifene 60mg tab</i>	32	TREMFYA 100MG/ML AUTO-INJECTOR	53
TIBSOVO 250MG TAB	36	<i>torpenz 10mg tab</i>	36	TREMFYA 100MG/ML SYRINGE	53
TICOVAC 1.2MCG/0.25ML SYRINGE	82	<i>torpenz 2.5mg tab</i>	36	TREMFYA 200MG/2ML AUTO-INJECTOR	53
TICOVAC 2.4MCG/0.5ML SYRINGE	82	<i>torpenz 5mg tab</i>	36	TREMFYA 200MG/2ML SYRINGE	53
<i>tigecycline 50mg inj</i>	29	<i>torpenz 7.5mg tab</i>	36	TRESIBA 100UNIT/ML INJ	21
<i>timolol 0.25% ophth gel</i>	70	<i>torseamide 100mg tab</i>	56	TRESIBA 100UNIT/ML PEN INJ	21
<i>timolol 0.25% ophth soln</i>	70	<i>torseamide 10mg tab</i>	56	TRESIBA 200UNIT/ML PEN INJ	21
<i>timolol 0.5% ophth gel</i>	70	<i>torseamide 20mg tab</i>	56	TRESIBA 200UNIT/ML PEN INJ	21
<i>timolol 0.5% ophth soln</i>	70	<i>torseamide 5mg tab</i>	56	<i>tretinoin 0.01% gel</i>	52
<i>timolol 10mg tab</i>	47	TOUJEO 300UNIT/ML PEN INJ (1.5ML)	21	<i>tretinoin 0.025% cream</i>	52
<i>timolol 5mg tab</i>	47	TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	21		
<i>tinidazole 250mg tab</i>	29	TPN ELECTROLYTES INJ	67		
		TRADJENTA 5MG TAB	20		
		<i>tramadol 100mg er tab</i>	5		

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

ALPHABETICAL LISTING OF DRUGS

<i>tretinoin 0.025% gel</i>	52	TRIJARDY XR	19	TRULICITY	20
<i>tretinoin 0.05% cream</i>	52	5-2.5-1000MG TAB		0.75MG/0.5ML	
<i>tretinoin 0.1% cream</i>	52	TRIKAFTA	76	AUTO-INJECTOR	
<i>tretinoin 10mg cap</i>	37	100-50-75MG/150MG		TRULICITY	20
<i>triamcinolone acetone</i>	54	TAB PACK (84)		1.5MG/0.5ML	
<i>0.025% cream</i>		TRIKAFTA	76	AUTO-INJECTOR	
<i>triamcinolone acetone</i>	54	100-50-75MG/75MG		TRULICITY 3MG/0.5ML	20
<i>0.025% lotion</i>		GRANULES PACK (56)		AUTO-INJECTOR	
<i>triamcinolone acetone</i>	54	TRIKAFTA	76	TRULICITY	20
<i>0.025% ointment</i>		50-37.5-25MG/75MG		4.5MG/0.5ML	
<i>triamcinolone acetone</i>	54	TAB PACK (84)		AUTO-INJECTOR	
<i>0.1% cream</i>		TRIKAFTA	77	TRUMENBA SYRINGE	81
<i>triamcinolone acetone</i>	54	80-40-60MG/59.5MG		TRUQAP 160MG TAB	36
<i>0.1% lotion</i>		GRANULES PACK (56)		TRUQAP 200MG TAB	36
<i>triamcinolone acetone</i>	54	<i>tri-lo- estarylla tab</i>	61	TUKYSA 150MG TAB	37
<i>0.1% ointment</i>		<i>28-day pack</i>		TUKYSA 50MG TAB	37
<i>triamcinolone acetone</i>	51	<i>tri-lo-sprintec tab 28-day</i>	61	TURALIO 125MG CAP	36
<i>0.1% oral paste</i>		<i>pack</i>		<i>turqoz tab 28-day pack</i>	61
<i>triamcinolone acetone</i>	54	<i>trimethoprim 100mg tab</i>	29	TWINRIX SYRINGE	82
<i>0.5% cream</i>		<i>tri-mili tab 28-day pack</i>	61	TYBOST 150MG TAB	45
<i>triamcinolone acetone</i>	54	<i>trimipramine 100mg cap</i>	18	TYENNE 162MG/0.9ML	3
<i>0.5% ointment</i>		<i>trimipramine 25mg cap</i>	18	AUTO-INJECTOR	
<i>triazolam 0.125mg tab</i>	64	<i>trimipramine 50mg cap</i>	18	TYENNE 162MG/0.9ML	3
<i>triazolam 0.25mg tab</i>	64	TRINTELLIX 10MG TAB	17	SYRINGE	
<i>tridacaine 5% patch</i>	55	TRINTELLIX 20MG TAB	17	TYMLOS	57
<i>triderm 0.5% cream</i>	54	TRINTELLIX 5MG TAB	17	3120MCG/1.56ML PEN	
<i>trientine 250mg cap</i>	68	<i>tri-sprintec tab 28-day</i>	61	INJ	
<i>tri-estarylla tab 28-day</i>	61	<i>pack</i>		TYPHIM VI	81
<i>pack</i>		TRIUMEQ	45	25MCG/0.5ML INJ	
<i>trifluoperazine 10mg tab</i>	42	600-50-300MG TAB		TYPHIM VI	81
<i>trifluoperazine 1mg tab</i>	42	TRIUMEQ 60-5-30MG	45	25MCG/0.5ML SYRINGE	
<i>trifluoperazine 2mg tab</i>	42	TAB FOR ORAL SUSP			
<i>trifluoperazine 5mg tab</i>	42	<i>trivora tab 28-day pack</i>	61	U	
TRIFLURIDINE 1%	71	<i>tri-vylibra lo tab 28-day</i>	61	UBRELVY 100MG TAB	66
OPHTH SOLN		<i>pack</i>		UBRELVY 50MG TAB	66
<i>trihexyphenidyl 2mg tab</i>	38	<i>tri-vylibra tab 28-day</i>	61	<i>unithroid 100mcg tab</i>	79
<i>trihexyphenidyl 5mg tab</i>	38	<i>pack</i>		<i>unithroid 112mcg tab</i>	79
TRIJARDY XR	19	<i>trospium chloride 20mg</i>	81	<i>unithroid 125mcg tab</i>	79
10-5-1000MG TAB		<i>tab</i>		<i>unithroid 137mcg tab</i>	79
TRIJARDY XR	19	<i>trospium chloride 60mg</i>	81	<i>unithroid 150mcg tab</i>	79
12.5-2.5-1000MG TAB		<i>er cap</i>		<i>unithroid 175mcg tab</i>	79
TRIJARDY XR	19	TRULANCE 3MG TAB	65	<i>unithroid 200mcg tab</i>	79
25-5-1000MG TAB				<i>unithroid 25mcg tab</i>	79
				<i>unithroid 300mcg tab</i>	79
				<i>unithroid 50mcg tab</i>	79

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

ALPHABETICAL LISTING OF DRUGS

<i>unithroid 75mcg tab</i>	79	VALTOCO 5MG	12	VENCLEXTA 10MG TAB	37
<i>unithroid 88mcg tab</i>	79	(5MG/0.1ML) NASAL		VENCLEXTA 50MG TAB	37
<i>ursodiol 250mg tab</i>	62	SPRAY DOSE PACK		VENCLEXTA TAB	37
<i>ursodiol 300mg cap</i>	62	<i>vancomycin 100mg/ml inj</i>	29	STARTER PACK (42)	
<i>ursodiol 500mg tab</i>	62	<i>vancomycin 125mg cap</i>	29	<i>venlafaxine 100mg tab</i>	17
UZEDY 100MG/0.28ML	41	<i>vancomycin 1gm inj</i>	29	<i>venlafaxine 150mg er cap</i>	17
SYRINGE		<i>vancomycin 250mg cap</i>	29	<i>venlafaxine 25mg tab</i>	17
UZEDY 125MG/0.35ML	41	<i>vancomycin 500mg inj</i>	29	<i>venlafaxine 37.5mg er</i>	17
SYRINGE		<i>vancomycin 750mg inj</i>	29	<i>cap</i>	
UZEDY 150MG/0.42ML	41	VANFLYTA 17.7MG TAB	36	<i>venlafaxine 37.5mg tab</i>	17
SYRINGE		VANFLYTA 26.5MG TAB	36	<i>venlafaxine 50mg tab</i>	17
UZEDY 200MG/0.56ML	41	VAQTA 25UNIT/0.5ML	82	<i>venlafaxine 75mg er cap</i>	17
SYRINGE		INJ		<i>venlafaxine 75mg tab</i>	17
UZEDY 250MG/0.7ML	41	VAQTA 25UNIT/0.5ML	82	<i>verapamil 120mg er cap</i>	48
SYRINGE		SYRINGE		<i>verapamil 120mg er tab</i>	48
UZEDY 50MG/0.14ML	41	VAQTA 50UNIT/ML INJ	82	<i>verapamil 120mg tab</i>	48
SYRINGE		VAQTA 50UNIT/ML	82	<i>verapamil 180mg er cap</i>	48
UZEDY 75MG/0.21ML	41	SYRINGE		<i>verapamil 180mg er tab</i>	48
SYRINGE		<i>varenicline 0.5mg tab</i>	76	<i>verapamil 240mg er cap</i>	48
<hr/>					
V		<i>varenicline 0.5mg/1mg</i>	76	<i>verapamil 240mg er tab</i>	48
<i>valacyclovir 1000mg tab</i>	46	<i>first month pack (53)</i>		<i>verapamil 40mg tab</i>	48
<i>valacyclovir 500mg tab</i>	46	<i>varenicline 1mg tab</i>	76	<i>verapamil 80mg tab</i>	48
VALCHLOR 0.016% GEL	52	<i>varenicline 1mg tab pack</i>	76	VERQUVO 10MG TAB	49
<i>valganciclovir 450mg tab</i>	45	(56)		VERQUVO 2.5MG TAB	49
<i>valganciclovir 50mg/ml</i>	45	VARIVAX	82	VERQUVO 5MG TAB	49
<i>oral soln</i>		1350PFU/0.5ML INJ		VERSACLOZ 50MG/ML	42
<i>valproic acid 250mg cap</i>	15	VAXCHORA SUSP	81	ORAL SUSP	
<i>valproic acid 50mg/ml</i>	15	VELIVET TAB 28-DAY	61	VERZENIO 100MG TAB	36
<i>oral soln</i>		PACK		VERZENIO 150MG TAB	36
<i>valsartan 160mg tab</i>	25	VELTASSA 16.8GM	69	VERZENIO 200MG TAB	36
<i>valsartan 320mg tab</i>	25	POWDER FOR ORAL		VERZENIO 50MG TAB	36
<i>valsartan 40mg tab</i>	25	SUSP		<i>vestura tab 3-0.02mg</i>	61
<i>valsartan 80mg tab</i>	25	VELTASSA 1GM	69	<i>28-day pack</i>	
VALTOCO 10MG	12	POWDER FOR ORAL		<i>vienna tab 28-day pack</i>	61
(10MG/0.1ML) NASAL		SUSP		<i>vigabatrin 500mg powder</i>	15
SPRAY DOSE PACK		VELTASSA 25.2GM	69	<i>for oral soln</i>	
VALTOCO 15MG	12	POWDER FOR ORAL		<i>vigabatrin 500mg tab</i>	15
(7.5MG/0.1ML) NASAL		SUSP		<i>vigadrone 500mg powder</i>	15
SPRAY DOSE PACK		VELTASSA 8.4GM	69	<i>for oral soln</i>	
VALTOCO 20MG	12	POWDER FOR ORAL		<i>vigadrone 500mg tab</i>	15
(10MG/0.1ML) NASAL		SUSP		VIGAFYDE 100MG/ML	15
SPRAY DOSE PACK		VEMLIDY 25MG TAB	45	ORAL SOLN	
		VENCLEXTA 100MG	37	<i>vigpoder 500mg powder</i>	15
		TAB		<i>for 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

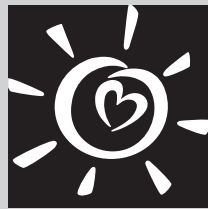
<i>vilazodone 10mg tab</i>	17	<i>warfarin sodium 3mg tab</i>	11	XCOPRI TAB 100/150MG	15
<i>vilazodone 20mg tab</i>	17	<i>warfarin sodium 4mg tab</i>	11	MAINTENANCE PACK	
<i>vilazodone 40mg tab</i>	17	<i>warfarin sodium 5mg tab</i>	11	(56)	
VIRACEPT 250MG TAB	45	<i>warfarin sodium 6mg tab</i>	11	XCOPRI TAB 12.5/25MG	15
VIRACEPT 625MG TAB	45	<i>warfarin sodium 7.5mg</i>	11	TITRATION PACK (28)	
VIREAD 150MG TAB	45	<i>tab</i>		XCOPRI TAB 150/200MG	15
VIREAD 200MG TAB	45	WELIREG 40MG TAB	37	PACK (56)	
VIREAD 250MG TAB	45	WINREVAIR 45MG INJ	77	XCOPRI TAB 150/200MG	15
VIREAD 40MG/GM	45	WINREVAIR 45MG INJ	77	TITRATION PACK (28)	
ORAL POWDER		(2 VIAL PACK)		XCOPRI TAB 50/100MG	15
VITRAKVI 100MG CAP	36	WINREVAIR 60MG INJ	77	TITRATION PACK (28)	
VITRAKVI 20MG/ML	36	WINREVAIR 60MG INJ	77	XDEMVY 0.25% OPHTH	71
ORAL SOLN		(2 VIAL PACK)		SOLN	
VITRAKVI 25MG CAP	36	<i>wixela 100-50mcg</i>	10	XELJANZ 10MG TAB	2
VIZIMPRO 15MG TAB	31	<i>powder inhaler</i>		XELJANZ 1MG/ML	2
VIZIMPRO 30MG TAB	31	<i>wixela 250-50mcg</i>	10	ORAL SOLN	
VIZIMPRO 45MG TAB	31	<i>powder inhaler</i>		XELJANZ 5MG TAB	2
VONJO 100MG CAP	36	<i>wixela 500-50mcg</i>	10	XELJANZ XR 11MG TAB	2
VORANIGO 10MG TAB	36	<i>powder inhaler</i>		XELJANZ XR 22MG TAB	2
VORANIGO 40MG TAB	36			XERMELO 250MG TAB	21
<i>voriconazole 200mg inj</i>	22	X		XGEVA 120MG/1.7ML	57
<i>voriconazole 200mg tab</i>	22	XALKORI 150MG ORAL	36	INJ	
<i>voriconazole 40mg/ml</i>	22	PELLET		XIFAXAN 550MG TAB	29
<i>oral susp</i>		XALKORI 200MG CAP	36	XIGDUO XR 10-1000MG	19
<i>voriconazole 50mg tab</i>	22	XALKORI 20MG ORAL	36	TAB	
VOSEVI 400-100-100MG	45	PELLET		XIGDUO XR 10-500MG	19
TAB		XALKORI 250MG CAP	36	TAB	
VOWST 30000000UNIT	62	XALKORI 50MG ORAL	36	XIGDUO XR	19
CAP		PELLET		2.5-1000MG TAB	
VRAYLAR 1.5MG CAP	39	XARELTO 10MG TAB	10	XIGDUO XR 5-1000MG	19
VRAYLAR 3MG CAP	39	XARELTO 15MG TAB	10	TAB	
VRAYLAR 4.5MG CAP	39	XARELTO 1MG/ML	10	XIGDUO XR 5-500MG	19
VRAYLAR 6MG CAP	39	ORAL SUSP		TAB	
<i>vyfemla tab 28-day pack</i>	61	XARELTO 2.5MG TAB	10	XIIDRA 5% OPHTH	72
<i>vylibra tab 28-day pack</i>	61	XARELTO 20MG TAB	10	SOLN	
VYNDAMAX 61MG CAP	49	XARELTO TAB STARTER	10	XOFLUZA 40MG TAB	46
VYNDAQEL 20MG CAP	49	PACK (51)		XOFLUZA 80MG TAB	46
		XATMEP 2.5MG/ML	30	XOLAIR 150MG INJ	8
W		ORAL SOLN		XOLAIR 150MG/ML	8
<i>warfarin sodium 10mg</i>	11	XCOPRI 100MG TAB	15	AUTO-INJECTOR	
<i>tab</i>		XCOPRI 150MG TAB	15	XOLAIR 150MG/ML	8
<i>warfarin sodium 1mg tab</i>	11	XCOPRI 200MG TAB	15	SYRINGE	
<i>warfarin sodium 2.5mg</i>	11	XCOPRI 25MG TAB	15	XOLAIR 300MG/2ML	8
<i>tab</i>		XCOPRI 50MG TAB	15	AUTO-INJECTOR	
<i>warfarin sodium 2mg tab</i>	11				

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

ALPHABETICAL LISTING OF DRUGS

XOLAIR 300MG/2ML SYRINGE	8	<i>zaleplon 5mg cap</i>	64	ZURZUVAE 30MG CAP	16
XOLAIR 75MG/0.5ML AUTO-INJECTOR	8	ZAVZPRET 10MG/ACT NASAL SPRAY	66	ZYDELIG 100MG TAB	36
XOLAIR 75MG/0.5ML SYRINGE	8	ZEJULA 100MG TAB	36	ZYDELIG 150MG TAB	36
XOPENEX 45MCG INHALER	10	ZEJULA 200MG TAB	36	ZYKADIA 150MG TAB	36
XOSPATA 40MG TAB	36	ZEJULA 300MG TAB	36		
XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	37	ZELBORAF 240MG TAB	36		
XPOVIO TAB 40MG ONCE WEEKLY CARTON (4)	37	ZEMAIRA 1000MG INJ	76		
XPOVIO TAB 40MG TWICE WEEKLY CARTON (8)	37	<i>zenatane 10mg cap</i>	52		
XPOVIO TAB 60MG ONCE WEEKLY CARTON (4)	37	<i>zenatane 20mg cap</i>	52		
XPOVIO TAB 60MG TWICE WEEKLY CARTON (24)	37	<i>zenatane 30mg cap</i>	52		
XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	37	<i>zenatane 40mg cap</i>	52		
XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	37	<i>zidovudine 100mg cap</i>	45		
XTANDI 40MG CAP	32	<i>zidovudine 10mg/ml oral soln</i>	45		
XTANDI 40MG TAB	32	<i>zidovudine 300mg tab</i>	45		
XTANDI 80MG TAB	32	ZIMHI 5MG/0.5ML SYRINGE	21		
<i>xulane 150-35mcg/24hr patch</i>	61	<i>ziprasidone 20mg cap</i>	39		
Y		<i>ziprasidone 20mg inj</i>	39		
YF-VAX INJ	82	<i>ziprasidone 40mg cap</i>	39		
Z		<i>ziprasidone 60mg cap</i>	40		
<i>zafemy 150-35mcg/24hr patch</i>	61	<i>ziprasidone 80mg cap</i>	40		
<i>zafirlukast 10mg tab</i>	9	ZOLINZA 100MG CAP	36		
<i>zafirlukast 20mg tab</i>	9	<i>zolmitriptan 2.5mg tab</i>	66		
<i>zaleplon 10mg cap</i>	64	<i>zolmitriptan 5mg tab</i>	66		
		<i>zolpidem tartrate 10mg tab</i>	64		
		<i>zolpidem tartrate 12.5mg er tab</i>	64		
		<i>zolpidem tartrate 5mg tab</i>	64		
		<i>zolpidem tartrate 6.25mg er tab</i>	65		
		ZONISADE 100MG/5ML ORAL SUSP	14		
		<i>zonisamide 100mg cap</i>	14		
		<i>zonisamide 25mg cap</i>	14		
		<i>zonisamide 50mg cap</i>	14		
		<i>zovia 1mg-35mcg tab 28-day pack</i>	61		
		ZTALMY 50MG/ML ORAL SUSP	14		
		ZURZUVAE 20MG CAP	16		
		ZURZUVAE 25MG CAP	16		

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



L.A. Care
HEALTH PLAN®

For All of L.A.

Na-update ang formulary na ito noong 3/1/2025. Mahalagang Mensahe Tungkol sa Kung Ano ang Binabayaran Ninyo para sa mga Bakuna – Itinuturing na medikal na mga benepisyo ang ilang bakuna. Itinuturing ang ilang mga bakuna na mga gamot ng Bahagi D. Sinasaklaw ng aming plano ang karamihan sa mga bakuna ng Part D nang libre para sa inyo.

Para sa mas bagong impormasyon o iba pang tanong, makipag-ugnayan sa amin sa **1.833.522.3767** (TTY: **711**), 24 na oras sa isang araw, 7 araw sa isang linggo, kabilang ang mga holiday, o pumunta sa **medicare.lacare.org**.