



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

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

List of Covered Drugs (Formulary) **2025**

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION
ABOUT THE DRUGS WE COVER IN THIS PLAN

This formulary was updated on July 1, 2025.

For more recent information or other questions, contact
us at **1-833-522-3767** (TTY: **711**), 24 hours a day, 7 days a
week, including holidays or visit **[medicare.lacare.org](https://www.medicare.lacare.org)**.



L.A. Care Medicare Plus (HMO D-SNP) 2025 *List of Covered Drugs* (Formulary)

Introduction

This document is called the *List of Covered Drugs* (also known as the *Drug List*). It tells you which prescription drugs and over-the-counter (OTC) drugs and non-drug products and items are covered by L.A. Care Medicare Plus. The *Drug List* also tells you if there are any special rules or restrictions on any drugs covered by L.A. Care Medicare Plus. Key terms and their definitions appear in the last chapter of the *Member Handbook*.

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A. Disclaimers

This is a list of drugs that members can get in L.A. Care Medicare Plus.

- ❖ You can always check L.A. Care Medicare Plus's up-to-date *List of Covered Drugs* online at medicare.lacare.org or by calling 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays. This call is free.
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call at 1-833-522-3767 (TTY: 711) or at the numbers listed at the bottom of this page or at the numbers in the footer of this document. The call is free.

- ❖ **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.

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- ❖ 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 ਬ੍ਰੇਲ 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 निः 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)**. ຍັງມີຄວາມຊ່ວຍເຫຼືອເລະການບໍລິການສໍາລັບຄົນພິການເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນເລະມີໂຕພິມໃຫຍ່ ໃຫ້ໂທຫາເບີ **1-833-522-3767 (TTY: 711)**. ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.



❖ LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiemx 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 ទូរសព្ទទៅលេខ **1-833-522-3767** (TTY: **711**)។ ជំនួយ នឹង សេវាកម្ម សម្រាប់ ជនពិការ ដូចជាឯកសារសរសេរជា អក្សរផុស សម្រាប់ជនពិការភ្នែក ឬឯកសារសរសេរជា អក្សរពុម្ព ក៏អាចរកបានផងដែរ។ ទូរសព្ទមកលេខ **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.



- ❖ This document is available for free in Arabic, Armenian, Chinese, Punjabi, Hindi, Hmong, Japanese, Farsi, Korean, Laotian, Russian, Spanish, Tagalog, Mien, Cambodian, Thai, Ukrainian and Vietnamese.
- ❖ You can ask that we always send you information in the language or format you need. This is called a standing request. We will keep track of your standing request so you do not need to make separate requests each time we send you information. To get this document in a language other than English and/or in an alternate format, please contact Member Services at (833) 522-3767, TTY: 711, 24 hours a day, 7 days a week, including holidays. A representative can help you make or change a standing request.

B. Frequently Asked Questions (FAQ)

Find answers here to questions you have about this *List of Covered Drugs*. You can read all the FAQ to learn more or look for a question and answer.

B1. What prescription drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the “*Drug List*” for short.)

The drugs on the *List of Covered Drugs* that starts in section D are the drugs covered by L.A. Care Medicare Plus. The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

Other drugs, such as some over-the-counter (OTC) medications and certain vitamins, may be covered by Medi-Cal Rx. Please visit the Medi-Cal Rx website (www.medi-calrx.dhcs.ca.gov) for more information. You can also call the Medi-Cal Rx Customer Service Center at 800-977-2273. Please bring your Medi-Cal Beneficiary Identification Card (BIC) when getting prescriptions through Medi-Cal Rx.

- L.A. Care Medicare Plus will cover all medically necessary drugs on the *Drug List* if:
 - your doctor or other prescriber says you need them to get better or stay healthy,
 - L.A. Care Medicare Plus agrees that the drug is medically necessary for you, **and**
 - you fill the prescription at a L.A. Care Medicare Plus network pharmacy.
- In some cases, you have to do something before you can get a drug. Refer to question B4 for more information.

You can also find an up-to-date list of drugs that we cover on our website at medicare.lacare.org or call Member Services at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays.



If you have questions, please call L.A. Care Medicare Plus at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit medicare.lacare.org.
Last Update: 07/01/2025

B2. Does the *Drug List* ever change?

Yes, and L.A. Care Medicare Plus must follow Medicare and Medi-Cal rules when making changes. We may add or remove drugs on the *Drug List* during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior authorization for a drug. (Prior authorization is permission from L.A. Care Medicare Plus before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we will cover another drug.)

For more information on these drug rules, refer to question B4.

If you are taking a drug that was covered at the **beginning** of the year, we will generally not remove or change coverage of that drug **during the rest of the year** unless:

- a new, cheaper drug comes on the market that works as well as a drug on the *Drug List* now, or
- we learn that a drug is not safe, or
- a drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the *Drug List* changes.

- You can always check L.A. Care Medicare Plus's up-to-date *Drug List* online at medicare.lacare.org. Updates to the *Drug List* are posted on the website monthly.
- You can also call Member Services at 1-833-522-3767 (TTY: 711) 24 hours a day, 7 days a week, including holidays to check the current *Drug List*.

B3. What happens when there is a change to the *Drug List*?

Some changes to the *Drug List* will happen **immediately**. For example:

- **Substitutions of certain new versions of drugs.** We may immediately remove the drugs from the *Drug List* if we replace them with certain new versions of that drug, but your cost for the new drug will remain \$0. When we add a new version of a drug, we may also decide to keep the brand name drug or original biological product on the list but change its coverage rules or limits.
 - We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.



- We can make these changes only if the drug we are adding:
 - is a new generic version of a brand name drug, or
 - is a certain new biosimilar version of original biological products on the *Drug List* (for example, adding an interchangeable biosimilar that can be substituted for an original biological product without a new prescription).
 - some of these drug types may be new to you. For more information, refer to Section B14.
- You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please refer to questions B10-B12 for more information on exceptions.
- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or effective or the drug's manufacturer takes a drug off the market, we may immediately take it off the *Drug List*. If you are taking the drug, we will send you a notice after we make the change. If you get one of these letters, please speak with your doctor to find a different drug that is safe for you.

We may make other changes that affect the drugs you take. We will tell you in advance about these other changes to the *Drug List*. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We remove a brand name drug from the *Drug List* when adding a generic drug that is not new to the market, or
- we remove an original biological product when adding a biosimilar, or
- we change the coverage rules or limits for the brand name drug.

When these changes happen, we will:

- tell you at least 30 days before we make the change to the *Drug List* **or**
- let you know and give you a 30-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- if there is a similar drug on the *Drug List* you can take instead or
- whether to ask for an exception from these changes. To learn more about exceptions, refer to questions B10-B12.



B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases you or your doctor or other prescriber must do something before you can get the drug.

For example:

- **Prior authorization:** For some drugs, you or your doctor or other prescriber must get authorization from L.A. Care Medicare Plus before you fill your prescription. Prior authorization is different from a referral. L.A. Care Medicare Plus may not cover the drug if you don't get prior authorization.
- **Quantity limits:** Sometimes L.A. Care Medicare Plus limits the amount of a drug you can get.
- **Step therapy:** Sometimes L.A. Care Medicare Plus requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your prescriber thinks the first drug doesn't work for you, then we will cover the second.
- **Indication-based coverage:** If L.A. Care Medicare Plus covers a drug only for some medical conditions, we clearly identify it on the *Drug List* along with the specific medical conditions that are covered.

You can find out if your drug has any additional requirements or limits by looking in the tables in section C. You can also get more information by visiting our website at medicare.lacare.org. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the *Drug List* you can take instead or whether to ask for an exception. Refer to questions B10-B12 for more information about exceptions.

B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The table in the List of Drugs by medical condition/drug type has a column labeled "Necessary actions, restrictions, or limits on use."

B6. What happens if L.A. Care Medicare Plus changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?

In some cases, we will tell you in advance if we add or change prior authorization, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the *Drug List* change.



If you have questions, please call L.A. Care Medicare Plus at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit medicare.lacare.org.

Last Update: 07/01/2025

B7. How can I find a drug on the *Drug List*?

There are two ways to find a drug:

- you can search alphabetically, **or**
- you can search by medical condition or drug type.

To search **alphabetically**, look for your drug in the Index of Covered Drugs section. You can find it at the end of the drug list. It is called the Index. The drugs are listed in alphabetical order.

To search **by medical condition**, find the section labeled List of Drugs by Medical Condition” on page xviii. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category cardiovascular agents – Misc. That is where you will find drugs that treat heart conditions.

B8. What if the drug I want to take is not on the *Drug List*?

If you don't find your drug on the *Drug List*, call Member Services at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays and ask about it. If you learn that L.A. Care Medicare Plus will not cover the drug, you can do one of these things:

- Ask *Member Services* for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the *Drug List* that is like the one you want to take. **Or**
- You can ask L.A. Care Medicare Plus to make an exception to cover your drug. Refer to questions B10-B12 for more information about exceptions.

B9. What if I am a new L.A. Care Medicare Plus member and can't find my drug on the *Drug List* or have a problem getting my drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you are a member of L.A. Care Medicare Plus. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the *Drug List* you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we will allow multiple refills to provide up to a maximum of 30 days of medication.

We will cover a 30-day supply of your drug if:

- you are taking a drug that is not on our *Drug List*, **or**
- our plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior authorization by L.A. Care Medicare Plus, **or**
- you are taking a drug that is part of a step therapy restriction.



If you are taking a drug that L.A. Care Medicare Plus does not consider to be a Part D drug, and the drug is not on the *Drug List*, and you have a problem getting the drug, it may be covered through Medi-Cal Rx. If a Part D excluded drug requires an exception, and you have an emergency, Medi-Cal Rx will allow no less than 72-hour supply of the drug. Please visit the Medi-Cal Rx website (www.medi-calrx.dhcs.ca.gov) for more information. You can also call the Medi-Cal Rx Customer Service Center at 800-977-2273. Please bring your Medi-Cal BIC when getting prescriptions through Medi-Cal Rx.

If you are in a nursing home or other long-term care facility and need a drug that is not on the *Drug List* or if you cannot easily get the drug you need, we can help. If you have been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We will cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new L.A. Care Medicare Plus member.
- This is in addition to the temporary supply during the first 90 days you are a member of L.A. Care Medicare Plus.

Level of Care Changes

We will provide a transition supply of your drugs when you experience a change in level of care.

Examples of level of care changes may include the following:

1. Members who enter long-term care facilities from hospitals
2. Members who are discharged from a hospital to a home
3. Members who end their skilled nursing facility Medicare Part A stay and who need to revert to their Part D plan formulary
4. Members who give up hospice status to revert to standard Medicare Part A and B benefits
5. Members who end a long-term care facility stay and return to the community
6. Members who are discharged from psychiatric hospitals with drug regimens that are highly individualized

Pharmacies may contact the Pharmacy Help Desk at 1-844-268-9785 to process point-of-sale overrides to ensure members receive access to their medications without any delays.

B10. Can I ask for an exception to cover my drug?

Yes. You can ask L.A. Care Medicare Plus to make an exception to cover a drug that is not on the *Drug List*.

You can also ask us to change the rules on your drug.

- For example, L.A. Care Medicare Plus may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior authorization requirements.

If you have questions, please call L.A. Care Medicare Plus at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit medicare.lacare.org.

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B11. How can I ask for an exception?

To ask for an exception, call Member Services. A Member Services representative will work with you and your prescriber to help you ask for an exception. You can also read **Chapter 9** section G of the *Member Handbook* to learn more about exceptions.

B12. How long does it take to get an exception?

After we get a statement from your prescriber supporting your request for an exception, we will give you a decision within 72 hours. Your doctor or other prescriber can fax or mail the statement to us. Or your doctor or other prescriber can tell us on the phone, and then fax or mail a statement. You can call us at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays, for more information.

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we will give you a decision within 24 hours of getting your prescriber's supporting statement.

B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and generally work just as well. They usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA). There are generic drugs available for many brand name drugs. Generic drugs usually can be substituted for brand name drugs at the pharmacy without a new prescription—depending on state laws.

L.A. Care Medicare Plus covers both brand name drugs and generic drugs.

B14. What are original biological products and how are they related to biosimilars?

When we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have forms that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For more information on drug types, refer to **Chapter 5** of the *Member Handbook*.

B15. What are OTC drugs?

OTC stands for "over-the-counter". L.A. Care Medicare Plus covers some OTC drugs when they are written as prescriptions by your provider.

You can read the L.A. Care Medicare Plus *Drug List* to find out what OTC drugs are covered.

If you have questions, please call L.A. Care Medicare Plus at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit medicare.lacare.org.

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B16. Does L.A. Care Medicare Plus cover non-drug OTC products?

L.A. Care Medicare Plus covers some non-drug OTC products when they are written as prescriptions by your provider.

Examples of non-drug OTC products include alcohol swabs.

You can read the L.A. Care Medicare Plus *Drug List* to find out what non-drug OTC products are covered.

B17. Does L.A. Care Medicare Plus cover long-term supplies of prescriptions?

- **Mail-Order Programs.** We offer a mail-order program that allows you to get up to a 100-day supply of your prescription drugs sent directly to your home. A 100-day supply has the same copay as a one-month supply.
- **100-Day Retail Pharmacy Programs.** Some retail pharmacies may also offer up to a 100-day supply of covered prescription drugs. A 100-day supply has the same copay as a one-month supply.

B18. Can I get prescriptions delivered to my home from my local pharmacy?

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery.

B19. What is my copay?

L.A. Care Medicare Plus members have \$0 copay for prescription and OTC drugs and non-drug products if the member follows the plan's rules. Refer to questions B15 and B16 for more information about OTC drugs and non-drug products.

Tiers are groups of drugs on our *Drug List*.

- All Covered Part D Drugs (1 Tier): Your copay for a one-month (30-day) supply is \$0 per prescription.

If you have questions, call Member Services at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays.

C. Overview of the *List of Covered Drugs*

The *List of Covered Drugs* gives you information about the drugs covered by L.A. Care Medicare Plus. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins in section D. The index alphabetically lists all drugs covered by L.A. Care Medicare Plus.



COVERAGE NOTES ABBREVIATIONS

Utilization Management Restrictions

ABBREVIATION	DESCRIPTION	EXPLANATION
PA	Prior Authorization Restriction	You (or your physician) are required to get prior authorization from L.A. Care Medicare Plus before you fill your prescription for this drug. Without prior approval, L.A. Care Medicare Plus may not cover this drug.
PA BvD	Prior Authorization Restriction For Part B vs Part D Determination	This drug may be eligible for payment under Medicare Part B or Part D. You (or your physician) are required to get prior authorization from L.A. Care Medicare Plus to determine that this drug is covered under Medicare Part D before you fill your prescription for this drug. Without prior approval, L.A. Care Medicare Plus may not cover this drug.
PA NSO	Prior Authorization Restriction for New Starts Only	If this is a new prescription for you, i.e., the first time this drug is prescribed for you, you (or your physician) are required to get prior authorization from L.A. Care Medicare Plus before you fill your prescription for this drug. Without prior approval, L.A. Care Medicare Plus may not cover this drug.
QL	Quantity Limit Restriction	L.A. Care Medicare Plus limits the quantity to be covered within a specific time frame for this drug.
ST	Step Therapy Restriction	Before L.A. Care Medicare Plus will provide coverage for this drug, you must first try another drug(s) on the formulary to treat your medical condition. This drug may only be covered if the other drug(s) does not work for you.
ST NSO	Step Therapy for New Starts Only	If this is a new prescription for you, i.e., the first time this drug is prescribed for you, before L.A. Care Medicare Plus will provide coverage for this drug, you must first try another drug(s) on the formulary to treat your medical condition. This drug may only be covered if the other drug(s) does not work for you.

Other Special Requirements for Coverage

LD	Limited Distribution Drug	This prescription may be available only at certain pharmacies. For more information consult your <i>Provider/Pharmacy Directory</i> or call Member Services at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays.
NDS	Non-Extended Day Supply	Drugs noted with "NDS" are limited to a 1-month supply for both Retail and Mail Order.
INS	Insulins	Insulin products at a maximum of \$35 per month.
VAC	Vaccine	Medicare Part D Vaccines covered at \$0.



If you have questions, please call L.A. Care Medicare Plus at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit [medicare.lacare.org](https://www.medicare.lacare.org).

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Other drugs, such as some over-the-counter (OTC) medications and certain vitamins, may be covered by Medi-Cal Rx. Please visit the Medi-Cal Rx website (www.medi-calrx.dhcs.ca.gov) for more information. You can also call the Medi-Cal Rx Customer Service Center at 800-977-2273. Please bring your Medi-Cal Beneficiary Identification Card (BIC) when getting prescriptions through Medi-Cal Rx.

Appeals Under Part D

- An appeal is a formal way of asking us to review a decision we made about your coverage and to change it if you think we made a mistake.
- For example, we might decide that a drug that you want is not covered or is no longer covered by Medicare or Medi-Cal.
- If you or your prescriber disagrees with our decision, you can appeal. If you ever have a question, call Member Services at 1-833-522-3767 (TTY: 711), 24 hours a day, 7 days a week, including holidays *or* at the numbers listed at the bottom of this page or at the numbers in the footer of this document.
- You can also read **Chapter 9** of the *Member Handbook* to learn how to appeal a decision.
- Drugs that are not a Part D drug have different rules for appeals.

C1. List of Drugs by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, cardiovascular agents – Misc. That is where you will find drugs that treat heart conditions.



D. Index of Covered Drugs

In this section, you can find a drug by searching for its name alphabetically. This will tell you the page number where you can find additional coverage information for your drug.

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 20MG/0.2ML SYRINGE	1	NDS PA QL=2 EA/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
SIMLANDI 80MG/0.8ML AUTO-INJECTOR	1	NDS PA QL=2 EA/28 Days
SIMLANDI 80MG/0.8ML SYRINGE	1	NDS PA QL=2 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	

You can find information 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>ibu 600mg tab</i>	1	
<i>ibu 800mg tab</i>	1	
<i>ibuprofen 400mg tab</i>	1	
<i>ibuprofen 600mg tab</i>	1	
<i>ibuprofen 800mg tab</i>	1	
<i>ketorolac tromethamine 10mg tab</i>	1	QL=20 EA/5 Days
<i>meloxicam 15mg tab</i>	1	
<i>meloxicam 7.5mg tab</i>	1	
<i>nabumetone 500mg tab</i>	1	
<i>nabumetone 750mg tab</i>	1	
<i>naproxen 250mg tab</i>	1	
<i>naproxen 375mg dr tab</i>	1	
<i>naproxen 375mg tab</i>	1	
<i>naproxen 500mg tab</i>	1	
<i>naproxen sodium 275mg tab</i>	1	
<i>naproxen sodium 550mg tab</i>	1	
<i>piroxicam 10mg cap</i>	1	
<i>piroxicam 20mg cap</i>	1	
<i>sulindac 150mg tab</i>	1	
<i>sulindac 200mg tab</i>	1	
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

You can find information 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 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
<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		

You can find information 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>danazol 100mg cap</i>	1	
<i>danazol 200mg cap</i>	1	
<i>danazol 50mg cap</i>	1	
<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	
ISOSORBIDE MONONITRATE 10MG TAB	1	
<i>isosorbide mononitrate 120mg er tab</i>	1	
ISOSORBIDE MONONITRATE 20MG TAB	1	
<i>isosorbide mononitrate 30mg er tab</i>	1	
<i>isosorbide mononitrate 60mg er tab</i>	1	
NITRO-BID 2% OINTMENT	1	
<i>nitroglycerin 0.1mg/hr patch</i>	1	

You can find information 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 0.2mg/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	
<i>nitroglycerin 0.6mg/hr patch</i>	1	
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
<i>buspirone 10mg tab</i>	1	
<i>buspirone 15mg tab</i>	1	
<i>buspirone 30mg tab</i>	1	
<i>buspirone 5mg tab</i>	1	
<i>buspirone 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine 150mg cap</i>	1	
<i>mexiletine 200mg cap</i>	1	
<i>mexiletine 250mg cap</i>	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate 100mg tab</i>	1	
<i>flecainide acetate 150mg tab</i>	1	
<i>flecainide acetate 50mg tab</i>	1	
<i>propafenone 150mg tab</i>	1	
<i>propafenone 225mg er cap</i>	1	
<i>propafenone 225mg tab</i>	1	
<i>propafenone 300mg tab</i>	1	
<i>propafenone 325mg er cap</i>	1	
<i>propafenone 425mg er cap</i>	1	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone 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>pacерone 100mg tab</i>	1	
<i>pacерone 200mg tab</i>	1	
<i>pacерone 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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, Proventil equiv)</i>	1	QL=13.40 GM/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	1	QL=17 GM/30 Days
<i>albuterol 2mg tab</i>	1	
<i>albuterol 4mg tab</i>	1	
<i>albuterol 5mg/ml (0.05%) 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
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
<i>breynga 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
<i>rivaroxaban 2.5mg tab</i>	1	QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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

You can find information 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>clobazam 20mg tab</i>	1	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 2mg odt</i>	1	QL=300 EA/30 Days
<i>clonazepam 2mg tab</i>	1	QL=300 EA/30 Days
<i>diazepam 10mg/2ml rectal gel</i>	1	QL=10 EA/30 Days
DIAZEPAM 2.5MG/0.5ML RECTAL GEL	1	QL=10 EA/30 Days
<i>diazepam 20mg/4ml rectal gel</i>	1	QL=10 EA/30 Days
NAYZILAM 5MG/0.1ML NASAL SPRAY	1	QL=10 EA/30 Days
SYMPAZAN 10MG ORAL FILM	1	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.		
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
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

You can find information 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>epitol 200mg tab</i>	1	
EPRONTIA 25MG/ML ORAL SOLN	1	PA NSO QL=480 ML/30 Days
<i>eslicarbazepine 200mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>eslicarbazepine 400mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>eslicarbazepine 600mg tab</i>	1	PA NSO QL=60 EA/30 Days
<i>eslicarbazepine 800mg tab</i>	1	PA NSO QL=60 EA/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
<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>perampanel 10mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>perampanel 12mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>perampanel 2mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>perampanel 4mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>perampanel 6mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>perampanel 8mg tab</i>	1	PA NSO QL=30 EA/30 Days
<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

You can find information 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 30mg tab</i>	1	QL=120 EA/30 Days
<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	

You can find information 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 400mg tab</i>	1	
<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	

You can find information 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>bupropion xl 300mg (24hr) tab</i>	1	
<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>tranylcypromine 10mg tab</i>	1	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram 10mg tab</i>	1	
<i>citalopram 20mg tab</i>	1	
<i>citalopram 2mg/ml oral soln</i>	1	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
PAROXETINE 10MG/ML SUSP	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

You can find information 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 25mg tab</i>	1	
<i>sertraline 50mg tab</i>	1	
SEROTONIN MODULATORS		
NEFAZODONE 100MG TAB	1	
NEFAZODONE 150MG TAB	1	
NEFAZODONE 200MG TAB	1	
NEFAZODONE 250MG TAB	1	
NEFAZODONE 50MG TAB	1	
RALDESY 10MG/ML ORAL SOLN	1	PA NSO QL=1200 ML/30 Days
<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

You can find information 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 150mg tab</i>	1	PA NSO
<i>amitriptyline 25mg tab</i>	1	PA NSO
<i>amitriptyline 50mg tab</i>	1	PA NSO
<i>amitriptyline 75mg tab</i>	1	PA NSO
<i>amoxapine 100mg tab</i>	1	PA NSO
<i>amoxapine 150mg tab</i>	1	PA NSO
<i>amoxapine 25mg tab</i>	1	PA NSO
<i>amoxapine 50mg tab</i>	1	PA NSO
<i>clomipramine 25mg cap</i>	1	PA NSO
<i>clomipramine 50mg cap</i>	1	PA NSO
<i>clomipramine 75mg cap</i>	1	PA NSO
<i>desipramine 100mg tab</i>	1	PA NSO
<i>desipramine 10mg tab</i>	1	PA NSO
<i>desipramine 150mg tab</i>	1	PA NSO
<i>desipramine 25mg tab</i>	1	PA NSO
<i>desipramine 50mg tab</i>	1	PA NSO
<i>desipramine 75mg tab</i>	1	PA NSO
<i>doxepin 100mg cap</i>	1	PA NSO
<i>doxepin 10mg cap</i>	1	PA NSO
<i>doxepin 10mg/ml oral soln</i>	1	PA NSO
<i>doxepin 150mg cap</i>	1	PA NSO
<i>doxepin 25mg cap</i>	1	PA NSO
<i>doxepin 50mg cap</i>	1	PA NSO
<i>doxepin 75mg cap</i>	1	PA NSO
<i>imipramine 10mg tab</i>	1	PA NSO
<i>imipramine 25mg tab</i>	1	PA NSO
<i>imipramine 50mg tab</i>	1	PA NSO
<i>nortriptyline 10mg cap</i>	1	
<i>nortriptyline 25mg cap</i>	1	
<i>nortriptyline 2mg/ml oral soln</i>	1	
<i>nortriptyline 50mg cap</i>	1	
<i>nortriptyline 75mg cap</i>	1	
<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

You can find information 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 50-500MG TAB	1	QL=60 EA/30 Days
JANUMET XR 100-1000MG TAB	1	QL=30 EA/30 Days
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	

You can find information 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>pioglitazone 45mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	1	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LANTUS 100UNIT/ML INJ	1	INS
LANTUS 100UNIT/ML PEN INJ	1	INS
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ondansetron 8mg tab</i>	1	PA BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab</i>	1	
<i>meclizine 25mg tab</i>	1	
<i>scopolamine 1mg/72hr patch</i>	1	QL=10 EA/30 Days
ANTIEMETICS - MISCELLANEOUS		
<i>aprepitant 125mg cap</i>	1	PA BvD QL=3 EA/2 Days
<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	1	PA BvD QL=6 EA/4 Days
<i>aprepitant 40mg cap</i>	1	PA BvD QL=3 EA/2 Days
<i>aprepitant 80mg cap</i>	1	PA BvD QL=6 EA/4 Days
<i>dronabinol 10mg cap</i>	1	PA QL=60 EA/30 Days
<i>dronabinol 2.5mg cap</i>	1	PA QL=60 EA/30 Days
<i>dronabinol 5mg cap</i>	1	PA QL=60 EA/30 Days
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		
<i>ABELCET 5MG/ML INJ</i>	1	PA BvD
<i>AMPHOTERICIN B 50MG INJ</i>	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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>voriconazole 40mg/ml oral susp</i>	1	PA QL=400 ML/30 Days
<i>voriconazole 50mg tab</i>	1	PA QL=480 EA/30 Days
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	

You can find information 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>fluvastatin 40mg cap</i>	1	
<i>lovastatin 10mg tab</i>	1	
<i>lovastatin 20mg tab</i>	1	
<i>lovastatin 40mg tab</i>	1	
<i>pravastatin sodium 10mg tab</i>	1	
<i>pravastatin sodium 20mg tab</i>	1	
<i>pravastatin sodium 40mg tab</i>	1	
<i>pravastatin sodium 80mg tab</i>	1	
<i>rosuvastatin calcium 10mg tab</i>	1	
<i>rosuvastatin calcium 20mg tab</i>	1	
<i>rosuvastatin calcium 40mg tab</i>	1	
<i>rosuvastatin calcium 5mg tab</i>	1	
<i>simvastatin 10mg tab</i>	1	
<i>simvastatin 20mg tab</i>	1	
<i>simvastatin 40mg tab</i>	1	
<i>simvastatin 5mg tab</i>	1	
<i>simvastatin 80mg tab</i>	1	
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	

You can find information 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 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<i>quinapril 40mg tab</i>	1	
<i>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	1	
<i>ramipril 10mg cap</i>	1	
<i>ramipril 2.5mg cap</i>	1	
<i>ramipril 5mg cap</i>	1	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>prazosin 5mg cap</i>	1	
<i>terazosin 10mg cap</i>	1	
<i>terazosin 1mg cap</i>	1	
<i>terazosin 2mg cap</i>	1	
<i>terazosin 5mg cap</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<i>amlodipine/benazepril 5-40mg cap</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-12.5-160mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-25-160mg tab</i>	1	
<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	

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

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydralazine 10mg tab</i>	1	
<i>hydralazine 25mg tab</i>	1	
<i>hydralazine 50mg tab</i>	1	
<i>minoxidil 10mg tab</i>	1	
<i>minoxidil 2.5mg tab</i>	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
<i>azithromycin 20mg/ml oral susp</i>	1	
<i>azithromycin 250mg pack (6)</i>	1	
<i>azithromycin 250mg tab</i>	1	
<i>azithromycin 40mg/ml oral susp</i>	1	
<i>azithromycin 500mg inj</i>	1	
<i>azithromycin 500mg tab</i>	1	
<i>azithromycin 500mg tab pack (3)</i>	1	
<i>azithromycin 600mg tab</i>	1	
<i>aztreonam 1gm inj</i>	1	
<i>aztreonam 2gm inj</i>	1	
<i>cefepime 1000mg inj</i>	1	
<i>cefepime 2000mg inj</i>	1	
<i>clarithromycin 250mg tab</i>	1	
CLARITHROMYCIN 25MG/ML ORAL SUSP	1	
<i>clarithromycin 500mg tab</i>	1	
CLARITHROMYCIN 50MG/ML ORAL SUSP	1	
<i>clindamycin 150mg cap</i>	1	
<i>clindamycin 300mg cap</i>	1	
<i>clindamycin 300mg/2ml inj</i>	1	
<i>clindamycin 300mg/50ml inj</i>	1	
<i>clindamycin 600mg/4ml inj</i>	1	
<i>clindamycin 600mg/50ml inj</i>	1	
<i>clindamycin 75mg cap</i>	1	
<i>clindamycin 75mg/5ml oral soln</i>	1	
<i>clindamycin 900mg/50ml inj</i>	1	
<i>clindamycin 900mg/6ml inj</i>	1	
<i>colistin 75mg/ml inj</i>	1	
<i>daptomycin 500mg inj</i>	1	
DIFICID 200MG TAB	1	PA QL=20 EA/10 Days
DIFICID 40MG/ML ORAL SUSP	1	PA QL=136 ML/10 Days
<i>ery-tab 250mg dr tab</i>	1	
<i>ery-tab 333mg dr tab</i>	1	
<i>ery-tab 500mg dr tab</i>	1	
<i>erythromycin 250mg dr tab</i>	1	
<i>erythromycin 250mg tab</i>	1	
<i>erythromycin 333mg dr tab</i>	1	
<i>erythromycin 500mg dr tab</i>	1	
<i>erythromycin 500mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>erythromycin ethylsuccinate 40mg/ml oral susp</i>	1	
<i>erythromycin ethylsuccinate 80mg/ml oral susp</i>	1	
<i>linezolid 100mg/5ml oral susp</i>	1	PA QL=1800 ML/30 Days
<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	
<i>nitazoxanide 500mg tab</i>	1	PA QL=6 EA/3 Days
CARBAPENEMS		
CILASTATIN/IMIPENEM 250-250MG INJ	1	
<i>cilastatin/imipenem 500-500mg inj</i>	1	
<i>ertapenem 1gm inj</i>	1	
<i>meropenem 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	

You can find information 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 100mg tab</i>	1	
<i>hydroxychloroquine sulfate 200mg tab</i>	1	
<i>hydroxychloroquine sulfate 300mg tab</i>	1	
<i>hydroxychloroquine sulfate 400mg tab</i>	1	
<i>mefloquine 250mg tab</i>	1	
PRIMAQUINE PHOSPHATE 26.3MG TAB	1	
<i>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	
LEUKERAN 2MG TAB	1	NDS
ANTIMETABOLITES		
JYLAMVO 2MG/ML ORAL SOLN	1	PA NSO
<i>mercaptopurine 20mg/ml susp</i>	1	PA NSO QL=300 ML/30 Days
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
TABLOID 40MG TAB	1	NDS
XATMEP 2.5MG/ML ORAL SOLN	1	PA NSO
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1MG CAP	1	NDS PA NSO QL=84 EA/28 Days
FRUZAQLA 5MG CAP	1	NDS PA NSO QL=21 EA/28 Days
INLYTA 1MG TAB	1	NDS PA NSO QL=180 EA/30 Days
INLYTA 5MG TAB	1	NDS PA NSO QL=120 EA/30 Days
LENVIMA 10MG DAILY DOSE PACK (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
<i>abirtega 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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
EULEXIN 125MG CAP	1	NDS QL=180 EA/30 Days
<i>exemestane 25mg tab</i>	1	QL=60 EA/30 Days
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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
GOMEKLI 1MG CAP	1	NDS PA NSO QL=42 EA/28 Days
GOMEKLI 1MG TAB FOR ORAL SUSP	1	NDS PA NSO QL=126 EA/28 Days
GOMEKLI 2MG CAP	1	NDS PA NSO QL=84 EA/28 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
IBRANCE 125MG CAP	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 125MG TAB	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 75MG CAP	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 75MG TAB	1	NDS PA NSO QL=21 EA/28 Days
ICLUSIG 10MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 15MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 30MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 45MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IDHIFA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IDHIFA 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
<i>imatinib 100mg tab</i>	1	QL=90 EA/30 Days
<i>imatinib 400mg tab</i>	1	QL=60 EA/30 Days
IMBRUVICA 140MG CAP	1	NDS PA NSO QL=90 EA/30 Days
IMBRUVICA 420MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IMBRUVICA 70MG CAP	1	NDS PA NSO QL=30 EA/30 Days
IMBRUVICA 70MG/ML 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<i>nilotinib 150mg cap</i>	1	NDS PA NSO QL=112 EA/28 Days
<i>nilotinib 200mg cap</i>	1	NDS PA NSO QL=112 EA/28 Days
<i>nilotinib 50mg cap</i>	1	NDS PA NSO QL=120 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
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
ROMVIMZA 14MG CAP	1	NDS PA NSO QL=8 EA/28 Days
ROMVIMZA 20MG CAP	1	NDS PA NSO QL=8 EA/28 Days
ROMVIMZA 30MG CAP	1	NDS PA NSO QL=8 EA/28 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RUBRACA 300MG TAB	1	NDS PA NSO QL=120 EA/30 Days
RYDAPT 25MG CAP	1	NDS PA NSO QL=224 EA/28 Days
SCSEMBLIX 100MG TAB	1	NDS PA NSO QL=120 EA/30 Days
SCSEMBLIX 20MG TAB	1	NDS PA NSO QL=60 EA/30 Days
SCSEMBLIX 40MG TAB	1	NDS PA NSO QL=300 EA/30 Days
<i>sorafenib 200mg tab</i>	1	PA NSO QL=120 EA/30 Days
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
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
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XALKORI 200MG CAP	1	NDS PA NSO QL=60 EA/30 Days
XALKORI 20MG ORAL PELLET	1	NDS PA NSO QL=120 EA/30 Days
XALKORI 250MG CAP	1	NDS PA NSO QL=120 EA/30 Days
XALKORI 50MG ORAL PELLET	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.		
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
REVUFORJ 25MG TAB	1	NDS PA NSO QL=240 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 (16)	1	NDS PA NSO QL=16 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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	

You can find information 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>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	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MOLINDONE 10MG TAB	1	
MOLINDONE 25MG TAB	1	
MOLINDONE 5MG TAB	1	
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	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>risperidone 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
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	

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

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>thioridazine 100mg tab</i>	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
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BIKTARVY 50-200-25MG TAB	1	QL=30 EA/30 Days
CIMDUO 300-300MG 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
EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE 400-300-300MG TAB	1	QL=30 EA/30 Days
<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/rilpivirine/tenofovir disoproxil fumarate 200-25-300mg tab</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
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

You can find information 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>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
<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 120MG ORAL PELLET	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		

You can find information 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>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 PELLET	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	
<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
PAXLOVID 300MG/100MG AND 150MG/100MG TAB DOSE PACK (11)	1	QL=11 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	

You can find information 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>labetalol 200mg tab</i>	1	
<i>labetalol 300mg tab</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	1	
<i>acebutolol 400mg cap</i>	1	
<i>atenolol 100mg tab</i>	1	
<i>atenolol 25mg tab</i>	1	
<i>atenolol 50mg tab</i>	1	
<i>betaxolol 10mg tab</i>	1	
<i>betaxolol 20mg tab</i>	1	
<i>bisoprolol fumarate 10mg tab</i>	1	
<i>bisoprolol fumarate 5mg tab</i>	1	
<i>metoprolol succinate 100mg er tab</i>	1	
<i>metoprolol succinate 200mg er tab</i>	1	
<i>metoprolol succinate 25mg er tab</i>	1	
<i>metoprolol succinate 50mg er tab</i>	1	
<i>metoprolol tartrate 100mg tab</i>	1	
<i>metoprolol tartrate 25mg tab</i>	1	
<i>metoprolol tartrate 37.5mg tab</i>	1	
<i>metoprolol tartrate 50mg tab</i>	1	
<i>metoprolol tartrate 75mg tab</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	1	
<i>nadolol 40mg tab</i>	1	
<i>nadolol 80mg tab</i>	1	
<i>pindolol 10mg tab</i>	1	
<i>pindolol 5mg tab</i>	1	
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	1	
<i>propranolol 160mg er cap</i>	1	
<i>propranolol 20mg tab</i>	1	
<i>propranolol 40mg tab</i>	1	
PROPRANOLOL 4MG/ML ORAL SOLN	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	

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

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

You can find information 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>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		
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	

You can find information 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>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		
CEFACLOR 250MG CAP	1	
CEFACLOR 500MG CAP	1	
<i>cefoxitin 1gm inj</i>	1	
<i>cefoxitin 200mg/ml inj</i>	1	
<i>cefoxitin 2gm inj</i>	1	
<i>cefprozil 250mg tab</i>	1	
<i>cefprozil 25mg/ml 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	
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	
CEFPODOXIME 10MG/ML ORAL SUSP	1	
<i>cefpodoxime 200mg tab</i>	1	
CEFPODOXIME 20MG/ML ORAL SUSP	1	
<i>ceftazidime 1gm inj</i>	1	
CEFTAZIDIME 200MG/ML INJ	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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dexamethasone 0.5mg tab</i>	1	
<i>dexamethasone 0.75mg tab</i>	1	
<i>dexamethasone 1.5mg tab</i>	1	
<i>dexamethasone 1mg tab</i>	1	
<i>dexamethasone 2mg tab</i>	1	
<i>dexamethasone 4mg tab</i>	1	
<i>dexamethasone 6mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	1	
<i>hydrocortisone 20mg tab</i>	1	
<i>hydrocortisone 5mg tab</i>	1	
<i>methylprednisolone 16mg tab</i>	1	PA BvD
<i>methylprednisolone 32mg tab</i>	1	PA BvD
<i>methylprednisolone 4mg 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
<i>prednisone 10mg tab</i>	1	PA BvD
<i>prednisone 1mg tab</i>	1	PA BvD
PREDNISON 1MG/ML ORAL SOLN	1	PA BvD
<i>prednisone 2.5mg tab</i>	1	PA BvD
<i>prednisone 20mg tab</i>	1	PA BvD
<i>prednisone 50mg tab</i>	1	PA BvD
<i>prednisone 5mg tab</i>	1	PA BvD
MINERALOCORTICOIDS		
<i>fludrocortisone acetate 0.1mg tab</i>	1	
COUGH/COLD/ALLERGY		
MUCOLYTICS		
<i>acetylcysteine 100mg/ml inh soln</i>	1	PA BvD
<i>acetylcysteine 200mg/ml inh soln</i>	1	PA BvD
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 acetanide 0.1% oral paste</i>	1	
DERMATOLOGICALS		
ACNE PRODUCTS		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>accutane 10mg cap</i>	1	
<i>accutane 20mg cap</i>	1	
<i>accutane 40mg cap</i>	1	
<i>amnesteem 10mg cap</i>	1	
<i>amnesteem 20mg cap</i>	1	
<i>amnesteem 30mg cap</i>	1	
<i>amnesteem 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	
<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

You can find information 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>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	
<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
METHOXSALEN 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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
<i>fluocinonide 0.05% gel</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% ointment</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical soln</i>	1	QL=60 ML/30 Days
<i>fluocinonide 0.1% cream</i>	1	QL=60 GM/30 Days
<i>fluticasone propionate 0.005% ointment</i>	1	QL=240 GM/30 Days
<i>fluticasone propionate 0.05% cream</i>	1	QL=240 GM/30 Days
<i>halobetasol propionate 0.05% cream</i>	1	QL=50 GM/30 Days
<i>halobetasol propionate 0.05% ointment</i>	1	QL=50 GM/30 Days
<i>hydrocortisone 1% cream</i>	1	QL=240 GM/30 Days
<i>hydrocortisone 2.5% 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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>torsemide 100mg tab</i>	1	
<i>torsemide 10mg tab</i>	1	
<i>torsemide 20mg tab</i>	1	
<i>torsemide 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
JUBBONTI 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
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
WYOST 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
CYSTADANE 1GM POWDER FOR ORAL SOLN	1	NDS
<i>javygtor 100mg powder for oral soln</i>	1	PA
<i>javygtor 100mg tab</i>	1	PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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		
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ethinyl estradiol/norgestimate</i> <i>0.18-25/0.215-25/0.25-25mg-mcg tab 28-day pack</i>	1	
<i>ethinyl estradiol/norgestimate</i> <i>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>feirza 1.5/30 28-day pack</i>	1	
<i>feirza 1/20 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	
<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>lessina tab 28-day pack</i>	1	
<i>levonest tab 28-day pack</i>	1	
<i>levonorgestrel/ethinyl estradiol</i> <i>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>lutra 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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>microgestin 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	
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ESTROGENS		
<i>dotti 0.025mg/24hr 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	
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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		
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<i>cilostazol 100mg tab</i>	1	
<i>cilostazol 50mg tab</i>	1	
<i>clopidogrel 75mg tab</i>	1	
<i>prasugrel 10mg tab</i>	1	
<i>prasugrel 5mg tab</i>	1	
<i>ticagrelor 60mg tab</i>	1	QL=60 EA/30 Days
<i>ticagrelor 90mg tab</i>	1	QL=60 EA/30 Days
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
<i>eltrombopag olamine 12.5mg powder pack for susp</i>	1	NDS PA QL=90 EA/30 Days
<i>eltrombopag olamine 12.5mg tab</i>	1	NDS PA QL=30 EA/30 Days
<i>eltrombopag olamine 25mg powder pack for susp</i>	1	NDS PA QL=180 EA/30 Days
<i>eltrombopag olamine 25mg tab</i>	1	NDS PA QL=30 EA/30 Days
<i>eltrombopag olamine 50mg tab</i>	1	NDS PA QL=60 EA/30 Days
<i>eltrombopag olamine 75mg tab</i>	1	NDS PA QL=60 EA/30 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
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
zolmitriptan 2.5mg tab	1	QL=18 EA/30 Days
zolmitriptan 5mg tab	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
glucose 50mg/ml/potassium chloride 0.01meq/ml/sodium chloride 4.5mg/ml inj	1	
glucose 50mg/ml/potassium chloride 0.02meq/ml inj	1	
glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 2.25mg/ml inj	1	
glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 4.5mg/ml inj	1	
glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 9mg/ml inj	1	
glucose 50mg/ml/potassium chloride 0.03meq/ml/sodium chloride 4.5mg/ml inj	1	
glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj	1	
glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 9mg/ml inj	1	
GLUCOSE 50MG/ML/SODIUM CHLORIDE 2MG/ML INJ	1	
GLUCOSE 50MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	1	
glucose 50mg/ml/sodium chloride 9mg/ml inj	1	
GLUCOSE/SODIUM CHLORIDE 25MG/ML-4.5MG/ML INJ	1	
KCL/D5W/LR INJ 0.15%	1	
kcl/nacl 20meq-0.45% inj	1	
kcl/nacl 20meq-0.9% inj	1	
kcl/nacl 40meq-9% inj	1	
PLASMA-LYTE A INJ	1	
TPN ELECTROLYTES INJ	1	PA BvD
MAGNESIUM		
magnesium sulfate 500mg/ml inj	1	
magnesium sulfate 500mg/ml syringe	1	
POTASSIUM		
klor-con 10meq er tab	1	
klor-con 10meq micro er tab	1	
klor-con 15meq micro er tab	1	
klor-con 20meq micro er tab	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>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	
<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
NEMLUVIO 30MG AUTO-INJECTOR	1	NDS PA QL=2 EA/28 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BENLYSTA 200MG/ML AUTO-INJECTOR	1	NDS PA QL=4 ML/28 Days
BENLYSTA 200MG/ML SYRINGE	1	NDS PA QL=4 ML/28 Days
<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>engraf 100mg cap</i>	1	PA BvD
<i>engraf 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
<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		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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		
<i>RADICAVA 105MG/5ML ORAL SUSP</i>	1	NDS PA QL=70 ML/28 Days
<i>riluzole 50mg tab</i>	1	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
<i>EVRYSDI 0.75MG/ML ORAL SOLN</i>	1	NDS PA QL=240 ML/30 Days
<i>EVRYSDI 5MG TAB</i>	1	NDS PA QL=30 EA/30 Days
NUTRIENTS		
CARBOHYDRATES		
<i>DEXTROSE 10% INJ</i>	1	PA BvD
<i>glucose 50mg/ml inj</i>	1	
PROTEINS		
<i>CLINIMIX 4.25/10 INJ</i>	1	PA BvD
<i>CLINIMIX 4.25/5 INJ</i>	1	PA BvD
<i>CLINIMIX 5/15 INJ</i>	1	PA BvD
<i>CLINIMIX 5/20 INJ</i>	1	PA BvD
<i>clinisol 15% inj</i>	1	PA BvD
<i>plenamine 15% inj</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
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	
<i>timolol hemihydrate 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	
<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
NATACYN 5% OPHTH SUSP	1	QL=15 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
XDEMVIY 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ROCKLATAN 0.02-0.005% OPTH SOLN	1	QL=5 ML/30 Days
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPTH 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% OPTH SOLN	1	
<i>prednisolone acetate 1% ophth susp</i>	1	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPTH 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% OPTH SOLN	1	
<i>cyclosporine 0.05% ophth susp</i>	1	QL=60 EA/30 Days
CYSTADROPS 0.37% OPTH SOLN	1	NDS PA QL=20 ML/28 Days
CYSTARAN 0.44% OPTH 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% OPTH 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% OPTH 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% OPTH 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	

You can find information 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>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	
<i>amoxicillin 875mg tab</i>	1	
<i>ampicillin 1000mg inj</i>	1	
<i>ampicillin 100mg/ml inj</i>	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	

You can find information 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/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	
<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		

You can find information 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>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
<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 6MG TAB	1	NDS PA QL=90 EA/30 Days
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATIO PACK	1	NDS PA QL=28 EA/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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.		
NUEDEXTA 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)		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PROLASTIN 1000MG INJ	1	NDS PA
ZEMAIRA 1000MG INJ	1	NDS PA
CYSTIC FIBROSIS AGENTS		
ALYFTREK 10-50-125MG TAB	1	NDS PA QL=56 EA/28 Days
ALYFTREK 4-20-50MG TAB	1	NDS PA QL=84 EA/28 Days
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
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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		
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	

You can find information 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>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	
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>levoxyl 150mcg tab</i>	1	
<i>levoxyl 175mcg tab</i>	1	
<i>levoxyl 200mcg tab</i>	1	
<i>levoxyl 25mcg tab</i>	1	
<i>levoxyl 50mcg tab</i>	1	
<i>levoxyl 75mcg tab</i>	1	
<i>levoxyl 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	1	
<i>liothyronine sodium 50mcg tab</i>	1	
<i>liothyronine sodium 5mcg tab</i>	1	
<i>unithroid 100mcg tab</i>	1	
<i>unithroid 112mcg tab</i>	1	
<i>unithroid 125mcg tab</i>	1	
<i>unithroid 137mcg tab</i>	1	
<i>unithroid 150mcg tab</i>	1	
<i>unithroid 175mcg tab</i>	1	
<i>unithroid 200mcg tab</i>	1	
<i>unithroid 25mcg tab</i>	1	
<i>unithroid 300mcg tab</i>	1	
<i>unithroid 50mcg tab</i>	1	
<i>unithroid 75mcg tab</i>	1	
<i>unithroid 88mcg tab</i>	1	
TOXOIDS		
TOXOID COMBINATIONS		
ADACEL INJ	1	VAC
ADACEL SYRINGE	1	VAC
BOOSTRIX INJ	1	VAC
BOOSTRIX SYRINGE	1	VAC
DAPTACEL INJ	1	
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		

You can find information 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>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
<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		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
VIVOTIF DR CAP	1	VAC
VIRAL VACCINES		
ABRYSVO 120MCG/0.5ML INJ	1	VAC
AREXVY 120MCG/0.5ML INJ	1	VAC
ENGRIX-B 10MCG/0.5ML SYRINGE	1	PA BvD VAC
ENGRIX-B 20MCG/ML INJ	1	PA BvD VAC
ENGRIX-B 20MCG/ML SYRINGE	1	PA BvD VAC
GARDASIL 9 INJ	1	VAC
GARDASIL 9 SYRINGE	1	VAC
HAVRIX 1440ELU/ML SYRINGE	1	VAC
HAVRIX 720ELU/0.5ML SYRINGE	1	
HEPLISAV-B 20MCG/0.5ML SYRINGE	1	PA BvD VAC
IMOVAX 2.5UNIT/ML INJ	1	PA BvD VAC
IPOL INJ	1	VAC
IXCHIQ INJ	1	VAC
IXIARO 0.012MG/ML SYRINGE	1	VAC
JYNNEOS 0.5ML INJ	1	VAC
M-M-R II INJ	1	VAC
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
VIMKUNYA 40MCG/0.8ML SYRINGE	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 10mg cap</i>	53	ADVAIR 230-21MCG HFA INHALER	9
<i>abacavir 300mg tab</i>	43	<i>acitretin 17.5mg cap</i>	53	ADVAIR 45-21MCG/ACT HFA INHALER	9
<i>abacavir/lamivudine 600-300mg tab</i>	43	ACTEMRA 162MG/0.9ML AUTO-INJECTOR	3	AKEEGA 500-100MG TAB	31
ABELCET 5MG/ML INJ	22	ACTEMRA 162MG/0.9ML SYRINGE	3	AKEEGA 500-50MG TAB	31
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	43	ACTHIB INJ	82	<i>ala-cort 1% cream</i>	53
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	43	ACTIMMUNE 2000000UNIT/0.5ML INJ	37	<i>albendazole 200mg tab</i>	6
ABILIFY MAINTENA 300MG INJ	43	<i>acyclovir 200mg cap</i>	46	<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	9
ABILIFY MAINTENA 300MG SYRINGE	43	<i>acyclovir 400mg tab</i>	46	<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	9
ABILIFY MAINTENA 400MG INJ	43	<i>acyclovir 40mg/ml oral susp</i>	46	<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	9
ABILIFY MAINTENA 400MG SYRINGE	43	<i>acyclovir 5% ointment</i>	55	<i>albuterol 1.25mg/3ml neb soln</i>	9
<i>abiraterone acetate 250mg tab</i>	31	<i>acyclovir 50mg/ml inj</i>	46	<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i>	9
<i>abirtega 250mg tab</i>	31	<i>acyclovir 800mg tab</i>	46	<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	9
ABRYSVO 120MCG/0.5ML INJ	82	ADACEL INJ	80	<i>albuterol 2mg tab</i>	9
<i>acamprosate calcium 333mg dr tab</i>	75	ADACEL SYRINGE	80	<i>albuterol 4mg tab</i>	9
<i>acarbose 100mg tab</i>	19	ADALIMUMAB-AATY 100MG/ML (0.2ML) SYRINGE	2	<i>albuterol 5mg/ml (0.05%) inh soln</i>	9
<i>acarbose 25mg tab</i>	19	ADALIMUMAB-AATY 100MG/ML (0.4ML) SYRINGE	2	ALCLOMETASONE 0.05% OINT	54
<i>acarbose 50mg tab</i>	19	ADALIMUMAB-AATY 100MG/ML AUTO-INJECTOR (0.4ML)	3	<i>alclometasone dipropionate 0.05% cream</i>	54
<i>accutane 10mg cap</i>	52	ADALIMUMAB-AATY 100MG/ML AUTO-INJECTOR (0.8ML)	3	ALCOHOL SWAB 1X1 (DIABETIC)	66
<i>accutane 20mg cap</i>	52	<i>adefovir dipivoxil 10mg tab</i>	46	ALECENSA 150MG CAP	32
<i>accutane 40mg cap</i>	52	ADEMPAS 0.5MG TAB	77	<i>alendronate sodium 10mg tab</i>	57
<i>acebutolol 200mg cap</i>	47	ADEMPAS 1.5MG TAB	77	<i>alendronate sodium 35mg tab</i>	57
<i>acebutolol 400mg cap</i>	47	ADEMPAS 1MG TAB	77	<i>alendronate sodium 70mg tab</i>	57
<i>acetazolamide 125mg tab</i>	56	ADEMPAS 2.5MG TAB	77	<i>alfuzosin 10mg er tab</i>	63
<i>acetazolamide 250mg tab</i>	56	ADEMPAS 2MG TAB	78	<i>aliskiren 150mg tab</i>	27
<i>acetazolamide 500mg er cap</i>	56	ADVAIR 115-21MCG HFA INHALER	9	<i>aliskiren 300mg tab</i>	27
<i>acetic acid 2% otic soln</i>	72				
<i>acetylcysteine 100mg/ml inh soln</i>	51				
<i>acetylcysteine 200mg/ml inh soln</i>	51				

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>allopurinol 100mg tab</i>	64	<i>amlodipine 10mg tab</i>	48	<i>amlodipine/hydrochloroth</i>	26
<i>allopurinol 300mg tab</i>	64	<i>amlodipine 2.5mg tab</i>	48	<i>iazide/valsartan</i>	
<i>alosetron 0.5mg tab</i>	21	<i>amlodipine 5mg tab</i>	48	<i>5-12.5-160mg tab</i>	
<i>alosetron 1mg tab</i>	21	<i>amlodipine/benazepril</i>	26	<i>amlodipine/hydrochloroth</i>	26
<i>alprazolam 0.25mg tab</i>	7	<i>10-20mg cap</i>		<i>iazide/valsartan</i>	
<i>alprazolam 0.5mg tab</i>	7	<i>amlodipine/benazepril</i>	26	<i>5-25-160mg tab</i>	
<i>alprazolam 1mg tab</i>	7	<i>10-40mg cap</i>		<i>amlodipine/olmesartan</i>	26
<i>alprazolam 2mg tab</i>	7	<i>amlodipine/benazepril</i>	26	<i>medoxomil 10-20mg tab</i>	
<i>altavera tab 28-day pack</i>	58	<i>2.5-10mg cap</i>		<i>amlodipine/olmesartan</i>	26
ALUNBRIG 180MG TAB	32	<i>amlodipine/benazepril</i>	26	<i>medoxomil 10-40mg tab</i>	
ALUNBRIG 30MG TAB	32	<i>5-10mg cap</i>		<i>amlodipine/olmesartan</i>	26
ALUNBRIG 90MG TAB	32	<i>amlodipine/benazepril</i>	26	<i>medoxomil 5-20mg tab</i>	
ALUNBRIG TAB	32	<i>5-20mg cap</i>		<i>amlodipine/olmesartan</i>	26
INITIATION PACK (30)		<i>amlodipine/benazepril</i>	26	<i>medoxomil 5-40mg tab</i>	
ALVESCO 160MCG	9	<i>5-40mg cap</i>		<i>amlodipine/valsartan</i>	26
INHALER		<i>amlodipine/hydrochloroth</i>	26	<i>10-160mg tab</i>	
ALVESCO 80MCG	9	<i>iazide/olmesartan</i>		<i>amlodipine/valsartan</i>	26
INHALER		<i>medoxomil 10-12.5-40mg</i>		<i>10-320mg tab</i>	
<i>alyacen 1/35 tab 28-day</i>	58	<i>tab</i>		<i>amlodipine/valsartan</i>	26
<i>pack</i>		<i>amlodipine/hydrochloroth</i>	26	<i>5-160mg tab</i>	
ALYFTREK	77	<i>iazide/olmesartan</i>		<i>amlodipine/valsartan</i>	26
10-50-125MG TAB		<i>medoxomil 10-25-40mg</i>		<i>5-320mg tab</i>	
ALYFTREK 4-20-50MG	77	<i>tab</i>		<i>ammonium lactate 12%</i>	55
TAB		<i>amlodipine/hydrochloroth</i>	26	<i>cream</i>	
<i>alyq 20mg tab</i>	78	<i>iazide/olmesartan</i>		<i>ammonium lactate 12%</i>	55
<i>amantadine 100mg cap</i>	38	<i>medoxomil 5-12.5-20mg</i>		<i>lotion</i>	
<i>amantadine 10mg/ml oral</i>	38	<i>tab</i>		<i>amneesteem 10mg cap</i>	52
<i>soln</i>		<i>amlodipine/hydrochloroth</i>	26	<i>amneesteem 20mg cap</i>	52
<i>ambrisentan 10mg tab</i>	78	<i>iazide/olmesartan</i>		<i>amneesteem 30mg cap</i>	52
<i>ambrisentan 5mg tab</i>	78	<i>medoxomil 5-12.5-40mg</i>		<i>amneesteem 40mg cap</i>	52
<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	56	<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	73
<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>	73
<i>amiodarone 400mg tab</i>	8	<i>10-12.5-160mg tab</i>		AMOXICILLIN 250MG	73
<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>	73
<i>amitriptyline 150mg tab</i>	18	<i>10-25-160mg tab</i>		<i>susp</i>	
<i>amitriptyline 25mg tab</i>	18	<i>amlodipine/hydrochloroth</i>	26	<i>amoxicillin 40mg/ml oral</i>	73
<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>	73

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

ALPHABETICAL LISTING OF DRUGS

<i>amoxicillin 500mg tab</i>	73	<i>ampicillin/sulbactam</i>	74	ARISTADA	43
<i>amoxicillin 50mg/ml oral susp</i>	73	<i>1000-500mg inj</i>		675MG/2.4ML SYRINGE	
<i>amoxicillin 80mg/ml oral susp</i>	73	<i>ampicillin/sulbactam</i>	74	ARISTADA	43
<i>amoxicillin 875mg tab</i>	73	<i>100-50mg/ml inj</i>		882MG/3.2ML SYRINGE	
<i>amoxicillin/clavulanate 250-125mg tab</i>	73	<i>ampicillin/sulbactam</i>	74	<i>armodafinil 150mg tab</i>	1
<i>amoxicillin/clavulanate 500-125mg tab</i>	73	<i>2000-1000mg inj</i>		<i>armodafinil 200mg tab</i>	1
<i>amoxicillin/clavulanate 875-125mg tab</i>	73	<i>anagrelide 0.5mg cap</i>	64	<i>armodafinil 250mg tab</i>	1
<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	73	<i>anagrelide 1mg cap</i>	64	<i>armodafinil 50mg tab</i>	1
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	73	<i>anastrozole 1mg tab</i>	31	ARNUITY 100MCG	9
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	74	ANORO ELLIPTA	10	POWDER INHALER	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	74	62.5-25MCG POWDER INHALER		ARNUITY 200MCG	9
<i>amphetamine/dextroamphetamine 10mg tab</i>	1	APRACLONIDINE 0.5% OPTH SOLN	71	POWDER INHALER	
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	1	<i>aprepitant 125mg cap</i>	22	ARNUITY 50MCG	9
<i>amphetamine/dextroamphetamine 15mg tab</i>	1	<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	22	<i>asenapine 10mg sl tab</i>	41
<i>amphetamine/dextroamphetamine 20mg tab</i>	1	<i>aprepitant 40mg cap</i>	22	<i>asenapine 2.5mg sl tab</i>	41
<i>amphetamine/dextroamphetamine 25mg er cap</i>	1	<i>aprepitant 80mg cap</i>	22	<i>asenapine 5mg sl tab</i>	41
<i>amphetamine/dextroamphetamine 30mg tab</i>	1	<i>apri tab 28-day pack</i>	58	<i>ashlyna tab 91-day pack</i>	58
<i>amphetamine/dextroamphetamine 5mg tab</i>	1	APTIVUS 250MG CAP	43	ASMANEX 100MCG HFA	9
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	1	<i>aranelle tab 28-day pack</i>	58	INHALER	
AMPHOTERICIN B 50MG INJ	22	ARCALYST 220MG INJ	68	ASMANEX 110MCG (30ACT) TWISTHALER	9
<i>ampicillin 1000mg inj</i>	73	AREXVY 120MCG/0.5ML INJ	82	ASMANEX 200MCG HFA	9
<i>ampicillin 100mg/ml inj</i>	73	ARIKAYCE	2	INHALER	
<i>ampicillin 500mg cap</i>	73	590MG/8.4ML INH SUSP		ASMANEX 220MCG (120ACT) TWISTHALER	9
		<i>aripiprazole 10mg odt</i>	43	ASMANEX 220MCG (30ACT) TWISTHALER	9
		<i>aripiprazole 10mg tab</i>	43	ASMANEX 220MCG (60ACT) TWISTHALER	9
		<i>aripiprazole 15mg odt</i>	43	ASMANEX 50MCG HFA	9
		<i>aripiprazole 15mg tab</i>	43	INHALER	
		<i>aripiprazole 1mg/ml oral soln</i>	43	<i>aspirin/dipyridamole 25-200mg er cap</i>	64
		<i>aripiprazole 20mg tab</i>	43	<i>atazanavir 150mg cap</i>	43
		<i>aripiprazole 2mg tab</i>	43	<i>atazanavir 200mg cap</i>	43
		<i>aripiprazole 30mg tab</i>	43	<i>atazanavir 300mg cap</i>	43
		<i>aripiprazole 5mg tab</i>	43	<i>atenolol 100mg tab</i>	47
		ARISTADA	43	<i>atenolol 25mg tab</i>	47
		1064MG/3.9ML SYRINGE		<i>atenolol 50mg tab</i>	47
		ARISTADA	43	<i>atenolol/chlorthalidone 100-25mg tab</i>	26
		441MG/1.6ML SYRINGE		<i>atenolol/chlorthalidone 50-25mg tab</i>	26
		ARISTADA	43		
		662MG/2.4ML SYRINGE			

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

ALPHABETICAL LISTING OF DRUGS

<i>atomoxetine 100mg cap</i>	1	AVONEX 30MCG/0.5ML	76	BALVERSA 5MG TAB	33
<i>atomoxetine 10mg cap</i>	1	AUTO-INJECTOR		<i>balziva tab 28-day pack</i>	58
<i>atomoxetine 18mg cap</i>	1	AVONEX 30MCG/0.5ML	76	BAQSIMI 3MG/DOSE	19
<i>atomoxetine 25mg cap</i>	1	SYRINGE		NASAL POWDER	
<i>atomoxetine 40mg cap</i>	1	AYVAKIT 100MG TAB	37	BCG LIVE TICE STRAIN	82
<i>atomoxetine 60mg cap</i>	1	AYVAKIT 200MG TAB	37	50MG INJ	
<i>atomoxetine 80mg cap</i>	1	AYVAKIT 25MG TAB	37	<i>benazepril 10mg tab</i>	24
<i>atorvastatin 10mg tab</i>	23	AYVAKIT 300MG TAB	37	<i>benazepril 20mg tab</i>	24
<i>atorvastatin 20mg tab</i>	23	AYVAKIT 50MG TAB	37	<i>benazepril 40mg tab</i>	24
<i>atorvastatin 40mg tab</i>	23	<i>azathioprine 50mg tab</i>	68	<i>benazepril 5mg tab</i>	24
<i>atorvastatin 80mg tab</i>	23	<i>azelaic acid 15% gel</i>	55	<i>benazepril/hydrochloroth</i>	26
<i>atovaquone 750mg/5ml</i>	29	<i>azelastine 0.05% ophth</i>	72	<i>iazide 10-12.5mg tab</i>	
<i>oral susp</i>		<i>soln</i>		<i>benazepril/hydrochloroth</i>	26
<i>atovaquone/proguanil</i>	29	<i>azelastine 0.1%</i>	70	<i>iazide 20-12.5mg tab</i>	
<i>250-100mg tab</i>		<i>(137mcg/act) nasal</i>		<i>benazepril/hydrochloroth</i>	26
<i>atovaquone/proguanil</i>	29	<i>inhaler</i>		<i>iazide 20-25mg tab</i>	
<i>62.5-25mg tab</i>		<i>azithromycin 20mg/ml</i>	28	<i>benazepril/hydrochloroth</i>	27
<i>atropine sulfate 1% ophth</i>	72	<i>oral susp</i>		<i>iazide 5-6.25mg tab</i>	
<i>soln</i>		<i>azithromycin 250mg pack</i>	28	BENLYSTA 200MG/ML	69
<i>atropine</i>	21	<i>(6)</i>		AUTO-INJECTOR	
<i>sulfate/diphenoxylate</i>		<i>azithromycin 250mg tab</i>	28	BENLYSTA 200MG/ML	69
<i>0.025-2.5mg tab</i>		<i>azithromycin 40mg/ml</i>	28	SYRINGE	
ATROVENT 17MCG HFA	9	<i>oral susp</i>		<i>benztropine mesylate</i>	38
INHALER		<i>azithromycin 500mg inj</i>	28	<i>0.5mg tab</i>	
<i>aubra tab 28-day pack</i>	58	<i>azithromycin 500mg tab</i>	28	<i>benztropine mesylate 1mg</i>	38
AUGTYRO 160MG CAP	32	<i>azithromycin 500mg tab</i>	28	<i>tab</i>	
AUGTYRO 40MG CAP	33	<i>pack (3)</i>		<i>benztropine mesylate 2mg</i>	38
AUSTEDO 12MG TAB	75	<i>azithromycin 600mg tab</i>	28	<i>tab</i>	
AUSTEDO 6MG TAB	75	<i>aztreonam 1gm inj</i>	28	BERINERT 500UNIT INJ	65
AUSTEDO 9MG TAB	75	<i>aztreonam 2gm inj</i>	28	BESREMI 500MCG/ML	37
AUSTEDO XR 12MG TAE	75	<i>azurette 28 day pack</i>	58	SYRINGE	
AUSTEDO XR 18MG TAE	75	B		<i>betaine 1gm powder for</i>	57
AUSTEDO XR 24MG TAE	75	BACITRACIN	71	<i>oral soln</i>	
AUSTEDO XR 30MG TAE	75	500UNIT/GM OPHTH		<i>betamethasone 0.05%</i>	54
AUSTEDO XR 36MG TAE	75	OINTMENT		<i>aug cream</i>	
AUSTEDO XR 42MG TAE	75	<i>bacitracin/polymyxin b</i>	71	<i>betamethasone 0.05%</i>	54
AUSTEDO XR 48MG TAE	75	<i>0.5-10unit/mg ophth</i>		<i>aug lotion</i>	
AUSTEDO XR 6MG TAB	75	<i>ointment</i>		<i>betamethasone 0.05%</i>	54
AUSTEDO XR TAB ONCE	75	<i>baclofen 10mg tab</i>	70	<i>aug ointment</i>	
DAILY 4 WEEK		<i>baclofen 20mg tab</i>	70	<i>betamethasone 0.05%</i>	54
TITRATION PACK		<i>balsalazide disodium</i>	63	<i>cream</i>	
AUVELITY 105-45MG ER	15	<i>750mg cap</i>		<i>betamethasone 0.05%</i>	54
TAB		BALVERSA 3MG TAB	33	<i>lotion</i>	
<i>aviane tab 28-day pack</i>	58	BALVERSA 4MG TAB	33		

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

ALPHABETICAL LISTING OF DRUGS

<i>betamethasone 0.05% ointment</i>	54	<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	27	<i>brimonidine tartrate 0.2% ophth soln</i>	71
<i>betamethasone 0.1% cream</i>	54	<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	27	<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	71
<i>betamethasone 0.1% lotion</i>	54	<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	27	BRIVIACT 100MG TAB	12
<i>betamethasone 0.1% ointment</i>	54	<i>blisovi 21 fe tab 1.5/30 28-day pack</i>	58	BRIVIACT 10MG TAB	12
BETASERON 0.3MG INJ	76	<i>blisovi 24 fe tab 1/20 28-day pack</i>	59	BRIVIACT 10MG/ML	12
BETAXOLOL 0.5%	71	BOOSTRIX INJ	80	ORAL SOLN	
OPHTH SOLN		BOOSTRIX SYRINGE	80	BRIVIACT 25MG TAB	12
<i>betaxolol 10mg tab</i>	47	<i>bosentan 125mg tab</i>	78	BRIVIACT 50MG TAB	12
<i>betaxolol 20mg tab</i>	47	<i>bosentan 62.5mg tab</i>	78	BRIVIACT 75MG TAB	12
<i>bethanechol chloride 10mg tab</i>	81	BOSULIF 100MG CAP	33	<i>bromfenac 0.07% ophth soln</i>	72
<i>bethanechol chloride 25mg tab</i>	81	BOSULIF 100MG TAB	33	<i>bromocriptine 2.5mg tab</i>	38
<i>bethanechol chloride 50mg tab</i>	81	BOSULIF 400MG TAB	33	<i>bromocriptine 5mg cap</i>	38
<i>bethanechol chloride 5mg tab</i>	81	BOSULIF 500MG TAB	33	BRUKINSA 80MG CAP	33
<i>bexarotene 1% gel</i>	53	BOSULIF 50MG CAP	33	<i>budesonide 0.25mg/2ml inh susp</i>	9
<i>bexarotene 75mg cap</i>	37	BRAFTOVI 75MG CAP	33	<i>budesonide 0.5mg/2ml inh susp</i>	9
BEXSERO SYRINGE	82	BREO ELLIPTA 100-25MCG POWDER INHALER	10	<i>budesonide 1mg/2ml inh susp</i>	9
<i>bicalutamide 50mg tab</i>	31	BREO ELLIPTA 200-25MCG POWDER INHALER	10	<i>budesonide 2mg/act rectal foam</i>	6
BICILLIN L-A 1200000UNIT/2ML SYRINGE	73	<i>breyna 160-4.5mcg/act inhaler</i>	10	<i>budesonide 3mg dr cap</i>	50
BICILLIN L-A 2400000UNIT/4ML SYRINGE	73	<i>breyna 80-4.5mcg/act inhaler</i>	10	<i>budesonide 9mg er tab</i>	50
BICILLIN L-A 600000UNIT/ML SYRINGE	73	BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	10	<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	10
BIKTARVY 30-120-15MG TAB	43	<i>briellyn tab 28-day pack</i>	59	<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	10
BIKTARVY 50-200-25MG TAB	44	<i>brimonidine tartrate 0.1% ophth soln</i>	71	<i>bumetanide 0.25mg/ml inj</i>	56
<i>bimatoprost 0.03% ophth soln</i>	72	<i>brimonidine tartrate 0.15% ophth soln</i>	71	<i>bumetanide 0.5mg tab</i>	56
<i>bisoprolol fumarate 10mg tab</i>	47			<i>bumetanide 1mg tab</i>	56
<i>bisoprolol fumarate 5mg tab</i>	47			<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
				<i>buprenorphine/naloxone 2-0.5mg 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>	5	CALQUENCE 100MG	33	<i>carbamazepine 400mg er</i>	12
<i>2-0.5mg sl tab</i>		TAB		<i>tab</i>	
<i>buprenorphine/naloxone</i>	5	<i>camila 0.35mg tab 28-day</i>	74	<i>carbidopa 25mg tab</i>	38
<i>4-1mg sl film</i>		<i>pack</i>		<i>carbidopa/entacapone/le</i>	38
<i>buprenorphine/naloxone</i>	5	<i>camreselo tab 91-day</i>	59	<i>vodopa 12.5-200-50mg</i>	
<i>8-2mg sl film</i>		<i>pack</i>		<i>tab</i>	
<i>buprenorphine/naloxone</i>	5	CAMZYOS 10MG CAP	49	<i>carbidopa/entacapone/le</i>	38
<i>8-2mg sl tab</i>		CAMZYOS 15MG CAP	49	<i>vodopa 18.75-200-75mg</i>	
<i>bupropion 100mg sr</i>	15	CAMZYOS 2.5MG CAP	49	<i>tab</i>	
<i>(12hr) tab</i>		CAMZYOS 5MG CAP	49	<i>carbidopa/entacapone/le</i>	38
<i>bupropion 100mg tab</i>	15	<i>candesartan cilexetil</i>	25	<i>vodopa 25-200-100mg</i>	
<i>bupropion 150mg sr (12</i>	15	<i>16mg tab</i>		<i>tab</i>	
<i>hr) tab</i>		<i>candesartan cilexetil</i>	25	<i>carbidopa/entacapone/le</i>	38
<i>bupropion 150mg sr</i>	76	<i>32mg tab</i>		<i>vodopa 31.25-200-125mg</i>	
<i>(12hr) tab</i>		<i>candesartan cilexetil 4mg</i>	25	<i>tab</i>	
<i>bupropion 200mg sr</i>	15	<i>tab</i>		<i>carbidopa/entacapone/le</i>	38
<i>(12hr) tab</i>		<i>candesartan cilexetil 8mg</i>	25	<i>vodopa 37.5-200-150mg</i>	
<i>bupropion 75mg tab</i>	15	<i>tab</i>		<i>tab</i>	
<i>bupropion xl 150mg (24</i>	15	CAPLYTA 10.5MG CAP	39	<i>carbidopa/entacapone/le</i>	38
<i>hr) tab</i>		CAPLYTA 21MG CAP	39	<i>vodopa 50-200-200mg</i>	
<i>bupropion xl 300mg</i>	16	CAPLYTA 42MG CAP	39	<i>tab</i>	
<i>(24hr) tab</i>		CAPRELSA 100MG TAB	33	CARBIDOPA/LEVODOPA	38
<i>buspirone 10mg tab</i>	7	CAPRELSA 300MG TAB	33	10-100MG ODT	
<i>buspirone 15mg tab</i>	7	<i>captopril 100mg tab</i>	24	<i>carbidopa/levodopa</i>	38
<i>buspirone 30mg tab</i>	7	<i>captopril 12.5mg tab</i>	24	<i>10-100mg tab</i>	
<i>buspirone 5mg tab</i>	7	<i>captopril 25mg tab</i>	24	<i>carbidopa/levodopa</i>	38
<i>buspirone 7.5mg tab</i>	7	<i>captopril 50mg tab</i>	24	<i>25-100mg er tab</i>	
C		<i>carbamazepine 100mg</i>	12	CARBIDOPA/LEVODOPA	38
<i>cabergoline 0.5mg tab</i>	58	<i>chew tab</i>		25-100MG ODT	
CABOMETYX 20MG TAE	33	<i>carbamazepine 100mg er</i>	12	<i>carbidopa/levodopa</i>	38
CABOMETYX 40MG TAE	33	<i>cap</i>		<i>25-100mg tab</i>	
CABOMETYX 60MG TAE	33	<i>carbamazepine 100mg er</i>	12	CARBIDOPA/LEVODOPA	38
<i>calcipotriene 0.005%</i>	53	<i>tab</i>		25-250MG ODT	
<i>cream</i>		<i>carbamazepine 200mg er</i>	12	<i>carbidopa/levodopa</i>	38
<i>calcipotriene 0.005%</i>	53	<i>cap</i>		<i>25-250mg tab</i>	
<i>ointment</i>		<i>carbamazepine 200mg er</i>	12	<i>carbidopa/levodopa</i>	38
CALCIPOTRIENE 0.005%	53	<i>tab</i>		<i>50-200mg er tab</i>	
TOPICAL SOLN		<i>carbamazepine 200mg</i>	12	<i>carglumic acid 200mg tab</i>	57
<i>calcitriol 0.25mcg cap</i>	57	<i>tab</i>		<i>for oral susp</i>	
<i>calcitriol 0.5mcg cap</i>	57	<i>carbamazepine 20mg/ml</i>	12	<i>carisoprodol 350mg tab</i>	70
<i>calcitriol 1mcg/ml oral</i>	57	<i>oral susp</i>		CARTEOLOL 1% OPHTH	71
<i>soln</i>		<i>carbamazepine 300mg er</i>	12	SOLN	
CALQUENCE 100MG	33	<i>cap</i>		<i>cartia 120mg er (24hr)</i>	48
CAP				<i>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>cartia 180mg er (24hr)</i>	48	<i>cefpodoxime 200mg tab</i>	50	<i>chlorpromazine 100mg</i>	42
<i>cap</i>		CEFPODOXIME	50	<i>tab</i>	
<i>cartia 240mg er (24hr)</i>	48	20MG/ML ORAL SUSP		CHLORPROMAZINE	42
<i>cap</i>		<i>cefprozil 250mg tab</i>	50	100MG/ML ORAL SOLN	
<i>cartia 300mg er (24hr)</i>	48	<i>cefprozil 25mg/ml oral</i>	50	<i>chlorpromazine 10mg tab</i>	42
<i>cap</i>		<i>susp</i>		<i>chlorpromazine 200mg</i>	42
<i>carvedilol 12.5mg tab</i>	46	<i>cefprozil 500mg tab</i>	50	<i>tab</i>	
<i>carvedilol 25mg tab</i>	46	<i>cefprozil 50mg/ml oral</i>	50	<i>chlorpromazine 25mg tab</i>	42
<i>carvedilol 3.125mg tab</i>	46	<i>susp</i>		CHLORPROMAZINE	42
<i>carvedilol 6.25mg tab</i>	46	<i>ceftazidime 1gm inj</i>	50	30MG/ML ORAL SOLN	
<i>caspofungin acetate 50mg</i>	22	CEFTAZIDIME	50	<i>chlorpromazine 50mg tab</i>	42
<i>inj</i>		200MG/ML INJ		<i>chlorthalidone 25mg tab</i>	56
<i>caspofungin acetate 70mg</i>	22	<i>ceftazidime 2gm inj</i>	50	<i>chlorthalidone 50mg tab</i>	56
<i>inj</i>		<i>ceftriaxone 10gm inj</i>	50	<i>chlorzoxazone 500mg tab</i>	70
CAYSTON 75MG/ML INH	77	<i>ceftriaxone 1gm inj</i>	50	<i>cholestyramine resin</i>	23
SOLN		<i>ceftriaxone 250mg inj</i>	50	<i>(sugar-free) 4gm powder</i>	
CEFACLOR 250MG CAP	50	<i>ceftriaxone 2gm inj</i>	50	<i>for oral susp</i>	
CEFACLOR 500MG CAP	50	<i>ceftriaxone 500mg inj</i>	50	<i>cholestyramine resin 4gm</i>	23
<i>cefadroxil 100mg/ml oral</i>	49	<i>cefuroxime 1500mg inj</i>	50	<i>powder for oral susp</i>	
<i>susp</i>		<i>cefuroxime 250mg tab</i>	50	<i>ciclopirox 0.77% cream</i>	52
<i>cefadroxil 500mg cap</i>	49	<i>cefuroxime 500mg tab</i>	50	<i>ciclopirox 0.77% gel</i>	52
<i>cefadroxil 50mg/ml oral</i>	49	<i>cefuroxime 750mg inj</i>	50	<i>ciclopirox 1% shampoo</i>	52
<i>susp</i>		<i>celecoxib 100mg cap</i>	3	<i>ciclopirox 8% topical soln</i>	52
<i>cefazolin 1000mg inj</i>	49	<i>celecoxib 200mg cap</i>	3	CILASTATIN/IMIPENEM	29
<i>cefazolin 200mg/ml inj</i>	49	<i>celecoxib 400mg cap</i>	3	250-250MG INJ	
<i>cefazolin 500mg inj</i>	49	<i>celecoxib 50mg cap</i>	3	<i>cilastatin/imipenem</i>	29
<i>cefdinir 25mg/ml oral</i>	50	<i>cephalexin 250mg cap</i>	50	<i>500-500mg inj</i>	
<i>susp</i>		<i>cephalexin 25mg/ml oral</i>	50	<i>cilostazol 100mg tab</i>	64
<i>cefdinir 300mg cap</i>	50	<i>susp</i>		<i>cilostazol 50mg tab</i>	64
<i>cefdinir 50mg/ml oral</i>	50	<i>cephalexin 500mg cap</i>	50	CIMDUO 300-300MG	44
<i>susp</i>		<i>cephalexin 50mg/ml oral</i>	50	TAB	
<i>cefepime 1000mg inj</i>	28	<i>susp</i>		<i>cimetidine 200mg tab</i>	81
<i>cefepime 2000mg inj</i>	28	<i>cevimeline 30mg cap</i>	51	<i>cimetidine 300mg tab</i>	81
<i>cefixime 20mg/ml oral</i>	50	<i>chlordiazepoxide 10mg</i>	7	<i>cimetidine 400mg tab</i>	81
<i>susp</i>		<i>cap</i>		<i>cimetidine 800mg tab</i>	81
<i>cefixime 400mg cap</i>	50	<i>chlordiazepoxide 25mg</i>	7	CIMZIA 200MG INJ	3
<i>cefixime 40mg/ml oral</i>	50	<i>cap</i>		CIMZIA 200MG/ML	3
<i>susp</i>		<i>chlordiazepoxide 5mg cap</i>	7	SYRINGE	
<i>cefoxitin 1gm inj</i>	50	<i>chlorhexidine gluconate</i>	51	<i>cinacalcet 30mg tab</i>	57
<i>cefoxitin 200mg/ml inj</i>	50	<i>0.12% mouthwash</i>		<i>cinacalcet 60mg tab</i>	57
<i>cefoxitin 2gm inj</i>	50	<i>chloroquine phosphate</i>	29	<i>cinacalcet 90mg tab</i>	57
<i>cefpodoxime 100mg tab</i>	50	<i>250mg tab</i>		<i>ciprofloxacin 0.3% ophth</i>	71
CEFPODOXIME	50	<i>chloroquine phosphate</i>	29	<i>soln</i>	
10MG/ML ORAL SUSP		<i>500mg tab</i>		<i>ciprofloxacin 250mg tab</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

CIPROFLOXACIN	62	clindamycin 900mg/6ml	28	clonidine 0.1mg/24hr	25
2MG/ML INJ		inj		weekly patch	
ciprofloxacin 500mg tab	62	CLINIMIX 4.25/10 INJ	70	clonidine 0.2mg tab	25
ciprofloxacin 750mg tab	62	CLINIMIX 4.25/5 INJ	70	clonidine 0.2mg/24hr	25
ciprofloxacin/dexamethasone 0.3-0.1% otic susp	73	CLINIMIX 5/15 INJ	70	weekly patch	
citalopram 10mg tab	16	CLINIMIX 5/20 INJ	70	clonidine 0.3mg tab	25
citalopram 20mg tab	16	clinisol 15% inj	70	clonidine 0.3mg/24hr	25
citalopram 2mg/ml oral soln	16	clobazam 10mg tab	11	weekly patch	
citalopram 40mg tab	16	clobazam 2.5mg/ml oral susp	11	clopidogrel 75mg tab	64
claravis 10mg cap	52	clobazam 20mg tab	12	clorazepate dipotassium	7
claravis 20mg cap	52	clobetasol propionate 0.05% cream	54	15mg tab	
claravis 30mg cap	52	clobetasol propionate 0.05% e cream	54	clorazepate dipotassium	7
claravis 40mg cap	52	clobetasol propionate 0.05% foam	54	3.75mg tab	
clarithromycin 250mg tab	28	clobetasol propionate 0.05% gel	54	clorazepate dipotassium	7
CLARITHROMYCIN	28	clobetasol propionate 0.05% lotion	54	7.5mg tab	
25MG/ML ORAL SUSP		clobetasol propionate 0.05% ointment	54	clotrimazole 1% cream	52
clarithromycin 500mg tab	28	clobetasol propionate 0.05% shampoo	54	clotrimazole 10mg	51
CLARITHROMYCIN	28	clobetasol propionate 0.05% topical soln	54	lozenge	
50MG/ML ORAL SUSP		clobetasol propionate 0.05% topical spray	54	clotrimazole/betamethasone 1-0.05% cream	52
clindamycin 1% gel	52	clodan 0.05% shampoo	54	clozapine 100mg odt	41
clindamycin 1% gel (twice-daily)	52	clomipramine 25mg cap	18	clozapine 100mg tab	41
clindamycin 1% lotion	52	clomipramine 50mg cap	18	CLOZAPINE 12.5MG	41
clindamycin 1% topical soln	52	clomipramine 75mg cap	18	ODT	
clindamycin 150mg cap	28	clonazepam 0.125mg odt	12	clozapine 150mg odt	41
clindamycin 2% vaginal cream	83	clonazepam 0.25mg odt	12	clozapine 200mg odt	41
clindamycin 300mg cap	28	clonazepam 0.5mg odt	12	clozapine 200mg tab	41
clindamycin 300mg/2ml inj	28	clonazepam 0.5mg tab	12	clozapine 25mg odt	41
clindamycin 300mg/50ml inj	28	clonazepam 1mg odt	12	clozapine 25mg tab	41
clindamycin 600mg/4ml inj	28	clonazepam 1mg tab	12	clozapine 50mg tab	41
clindamycin 600mg/50ml inj	28	clonazepam 2mg odt	12	COARTEM 20-120MG	29
clindamycin 75mg cap	28	clonazepam 2mg tab	12	TAB	
clindamycin 75mg/5ml oral soln	28	clonidine 0.1mg er tab	1	COBENFY 20-100MG	39
clindamycin 900mg/50ml inj	28	clonidine 0.1mg tab	25	CAP	
				COBENFY 20-50MG CAP	39
				COBENFY 30-125MG	39
				CAP	
				COBENFY CAP 28-DAY	39
				STARTER KIT PACK (56)	
				codeine	5
				phosphate/acetaminophen 15-300mg 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

CODEINE	5	CREON	55	CYSTADROPS 0.37%	72
PHOSPHATE/ACETAMIN		120000-24000-76000UNI		OPHTH SOLN	
OPHEN 2.4-24MG/ML		T DR CAP		CYSTAGON 150MG CAP	63
ORAL SOLN		CREON	55	CYSTAGON 50MG CAP	63
<i>codeine</i>	5	15000-3000-9500UNIT		CYSTARAN 0.44%	72
<i>phosphate/acetaminophe</i>		DR CAP		OPHTH SOLN	
<i>n 30-300mg tab</i>		CREON	55	D	
<i>codeine</i>	5	180000-36000-114000U		<i>dalfampridine 10mg er</i>	76
<i>phosphate/acetaminophe</i>		NIT DR CAP		<i>tab</i>	
<i>n 60-300mg tab</i>		CREON	55	<i>danazol 100mg cap</i>	6
<i>colchicine 0.6mg tab</i>	64	30000-6000-19000UNIT		<i>danazol 200mg cap</i>	6
<i>colchicine/probenecid</i>	64	DR CAP		<i>danazol 50mg cap</i>	6
<i>0.5-500mg tab</i>		CREON	56	<i>dantrolene sodium 100mg</i>	70
<i>colesevelam 625mg tab</i>	23	60000-12000-38000UNIT		<i>cap</i>	
<i>colestipol 1gm tab</i>	23	DR CAP		<i>dantrolene sodium 25mg</i>	70
<i>colestipol 5000mg</i>	23	<i>cromolyn sodium 20mg/ml</i>	63	<i>cap</i>	
<i>granules for oral susp</i>		<i>oral soln</i>		<i>dantrolene sodium 50mg</i>	70
<i>colistin 75mg/ml inj</i>	28	CROMOLYN SODIUM	72	<i>cap</i>	
COMBIVENT	10	4% OPHTH SOLN		<i>dapsone 100mg tab</i>	30
20-100MCG/ACT		<i>cryselle tab 28-day pack</i>	59	<i>dapsone 25mg tab</i>	30
INHALER		<i>cyclobenzaprine 10mg</i>	70	DAPTACEL INJ	80
COMETRIQ CAP 100MG	33	<i>tab</i>		<i>daptomycin 500mg inj</i>	28
DAILY DOSE PACK (56)		<i>cyclobenzaprine 5mg tab</i>	70	<i>darunavir 600mg tab</i>	44
COMETRIQ CAP 140MG	33	CYCLOPHOSPHAMIDE	30	<i>darunavir 800mg tab</i>	44
DAILY DOSE PACK (112)		25MG TAB		<i>dasatinib 100mg tab</i>	33
COMETRIQ CAP 60MG	33	CYCLOPHOSPHAMIDE	30	<i>dasatinib 140mg tab</i>	33
DAILY DOSE PACK (84)		50MG TAB		<i>dasatinib 20mg tab</i>	33
<i>compro 25mg rectal supp</i>	42	<i>cyclosporine 0.05% ophth</i>	72	<i>dasatinib 50mg tab</i>	33
<i>constulose 10gm/15ml</i>	66	<i>susp</i>		<i>dasatinib 70mg tab</i>	33
<i>oral soln</i>		<i>cyclosporine 100mg cap</i>	69	<i>dasatinib 80mg tab</i>	33
COPIKTRA 15MG CAP	33	<i>cyclosporine 25mg cap</i>	69	DAURISMO 100MG TAB	31
COPIKTRA 25MG CAP	33	<i>cyclosporine modified</i>	69	DAURISMO 25MG TAB	31
COSENTYX 150MG/ML	53	<i>100mg cap</i>		<i>deblitane 0.35mg tab</i>	74
AUTO-INJECTOR		<i>cyclosporine modified</i>	69	<i>28-day pack</i>	
COSENTYX 150MG/ML	53	<i>100mg/ml oral soln</i>		<i>deferasirox 180mg tab</i>	68
SYRINGE		<i>cyclosporine modified</i>	69	<i>deferasirox 360mg tab</i>	68
COSENTYX	53	<i>25mg cap</i>		<i>deferasirox 90mg tab</i>	68
75MG/0.5ML SYRINGE		<i>cyclosporine modified</i>	69	DELSTRIGO	44
COSENTYX UNOREADY	53	<i>50mg cap</i>		100-300-300MG TAB	
300MG/2ML		<i>cyred tab 28-day pack</i>	59	DEPO-SUBQ PROVERA	74
AUTO-INJECTOR		CYSTADANE 1GM	57	104MG/0.65ML	
COTELLIC 20MG TAB	33	POWDER FOR ORAL		SYRINGE	
		SOLN		<i>depo-testosterone</i>	6
				<i>100mg/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>depo-testosterone</i>	6	<i>dexamethasone 4mg tab</i>	51	<i>diazoxide 50mg/ml oral</i>	19
<i>200mg/ml inj</i>		<i>dexamethasone 6mg tab</i>	51	<i>susp</i>	
DESCOVY 120-15MG	44	DEXAMETHASONE	72	<i>diclofenac potassium</i>	3
TAB		PHOSPHATE 0.1%		<i>50mg tab</i>	
DESCOVY 200-25MG	44	OPHTH SOLN		<i>diclofenac sodium 0.1%</i>	72
TAB		<i>dexamethasone/neomycin</i>	72	<i>ophth soln</i>	
<i>desipramine 100mg tab</i>	18	<i>/polymyxin b 0.1% ophth</i>		<i>diclofenac sodium 1.5%</i>	3
<i>desipramine 10mg tab</i>	18	<i>ointment</i>		<i>topical soln</i>	
<i>desipramine 150mg tab</i>	18	<i>dexamethasone/tobramyc</i>	72	<i>diclofenac sodium 100mg</i>	3
<i>desipramine 25mg tab</i>	18	<i>in 0.3-0.1% ophth susp</i>		<i>er tab</i>	
<i>desipramine 50mg tab</i>	18	<i>dexmethylphenidate</i>	1	<i>diclofenac sodium 25mg</i>	3
<i>desipramine 75mg tab</i>	18	<i>10mg tab</i>		<i>dr tab</i>	
<i>desloratadine 5mg tab</i>	77	<i>dexmethylphenidate</i>	1	<i>diclofenac sodium 3% gel</i>	53
<i>desmopressin acetate</i>	58	<i>2.5mg tab</i>		<i>diclofenac sodium 50mg</i>	3
<i>0.01% (0.01mg/act) nasal</i>		<i>dexmethylphenidate 5mg</i>	1	<i>dr tab</i>	
<i>spray</i>		<i>tab</i>		<i>diclofenac sodium 75mg</i>	3
<i>desmopressin acetate</i>	58	<i>dextroamphetamine</i>	1	<i>dr tab</i>	
<i>0.1mg tab</i>		<i>sulfate 10mg tab</i>		<i>dicloxacillin 250mg cap</i>	74
<i>desmopressin acetate</i>	58	<i>dextroamphetamine</i>	1	<i>dicloxacillin 500mg cap</i>	74
<i>0.2mg tab</i>		<i>sulfate 5mg tab</i>		<i>dicyclomine 10mg cap</i>	80
<i>desogestrel/ethinyl</i>	59	DEXTROSE 10% INJ	70	<i>dicyclomine 20mg tab</i>	80
<i>estradiol/ethinyl</i>		DIACOMIT 250MG CAP	12	<i>dicyclomine 2mg/ml oral</i>	80
<i>estradiol</i>		DIACOMIT 250MG	12	<i>soln</i>	
<i>0.15-0.01-0.02mg tab</i>		POWDER FOR ORAL		DIFICID 200MG TAB	28
<i>28-day pack</i>		SUSP		DIFICID 40MG/ML ORAL	28
<i>desonide 0.05% ointment</i>	54	DIACOMIT 500MG CAP	12	SUSP	
<i>desoximetasone 0.25%</i>	54	DIACOMIT 500MG	12	<i>diflunisal 500mg tab</i>	3
<i>cream</i>		POWDER FOR ORAL		<i>difluprednate 0.05%</i>	72
<i>desoximetasone 0.25%</i>	54	SUSP		<i>ophth susp</i>	
<i>ointment</i>		<i>diazepam 10mg tab</i>	7	<i>digoxin 0.125mg tab</i>	49
<i>desvenlafaxine succinate</i>	17	<i>diazepam 10mg/2ml</i>	12	<i>digoxin 0.25mg tab</i>	49
<i>100mg er tab</i>		<i>rectal gel</i>		<i>dihydroergotamine</i>	66
<i>desvenlafaxine succinate</i>	17	<i>diazepam 1mg/ml oral</i>	7	<i>mesylate 0.5mg/act nasal</i>	
<i>25mg er tab</i>		<i>soln</i>		<i>inhaler</i>	
<i>desvenlafaxine succinate</i>	17	DIAZEPAM	12	<i>dilt 120mg er (24hr) cap</i>	48
<i>50mg er tab</i>		2.5MG/0.5ML RECTAL		<i>dilt 180mg er (24hr) cap</i>	48
DEXAMETHASONE	50	GEL		<i>dilt 240mg er (24hr) cap</i>	48
0.1MG/ML ORAL SOLN		<i>diazepam 20mg/4ml</i>	12	<i>diltiazem 120mg er (12hr)</i>	48
<i>dexamethasone 0.5mg tab</i>	51	<i>rectal gel</i>		<i>cap</i>	
<i>dexamethasone 0.75mg</i>	51	<i>diazepam 2mg tab</i>	7	<i>diltiazem 120mg er (24hr)</i>	48
<i>tab</i>		<i>diazepam 5mg tab</i>	7	<i>cap</i>	
<i>dexamethasone 1.5mg tab</i>	51	<i>diazepam 5mg/ml oral</i>	7	<i>diltiazem 120mg tab</i>	48
<i>dexamethasone 1mg tab</i>	51	<i>soln</i>		<i>diltiazem 180mg er (24hr)</i>	48
<i>dexamethasone 2mg tab</i>	51			<i>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>diltiazem 240mg er (24hr) cap</i>	48	<i>donepezil 5mg odt</i>	75	<i>doxycycline hyclate 50mg cap</i>	79
<i>diltiazem 300mg er (24hr) cap</i>	48	<i>donepezil 5mg tab</i>	75	<i>doxycycline monohydrate 100mg cap</i>	79
<i>diltiazem 30mg tab</i>	48	DOPTELET 20MG TAB	64	<i>doxycycline monohydrate 100mg tab</i>	79
<i>diltiazem 360mg er (24hr) cap</i>	48	DOPTELET TAB 40MG	64	<i>doxycycline monohydrate 50mg cap</i>	79
<i>diltiazem 420mg er (24hr) cap</i>	48	DAILY DOSE PACK (10)		<i>doxycycline monohydrate 50mg tab</i>	79
<i>diltiazem 60mg er (12hr) cap</i>	48	DOPTELET TAB 60MG	64	<i>doxycycline monohydrate 5mg/ml oral susp</i>	79
<i>diltiazem 60mg tab</i>	48	DAILY DOSE PACK (15)		DRIZALMA 20MG DR	17
<i>diltiazem 90mg er (12hr) cap</i>	48	<i>dorzolamide 2% ophth soln</i>	72	SPRINKLE CAP	
<i>diltiazem 90mg tab</i>	48	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	71	DRIZALMA 30MG DR	17
<i>dimethyl fumarate 120mg dr cap</i>	76	<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	71	SPRINKLE CAP	
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	76	<i>dotti 0.025mg/24hr twice weekly patch</i>	62	DRIZALMA 40MG DR	17
<i>dimethyl fumarate 240mg dr cap</i>	76	<i>dotti 0.0375mg/24hr twice weekly patch</i>	62	SPRINKLE CAP	
<i>disopyramide 100mg cap</i>	7	<i>dotti 0.05mg/24hr twice weekly patch</i>	62	DRIZALMA 60MG DR	17
<i>disopyramide 150mg cap</i>	7	<i>dotti 0.075mg/24hr twice weekly patch</i>	62	SPRINKLE CAP	
<i>disulfiram 250mg tab</i>	75	<i>dotti 0.1mg/24hr twice weekly patch</i>	62	<i>dronabinol 10mg cap</i>	22
<i>disulfiram 500mg tab</i>	75	DOVATO 50-300MG TAB	44	<i>dronabinol 2.5mg cap</i>	22
<i>divalproex sodium 125mg dr cap</i>	15	<i>doxazosin 1mg tab</i>	25	<i>dronabinol 5mg cap</i>	22
<i>divalproex sodium 125mg dr tab</i>	15	<i>doxazosin 2mg tab</i>	25	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	59
<i>divalproex sodium 250mg dr tab</i>	15	<i>doxazosin 4mg tab</i>	25	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	59
<i>divalproex sodium 250mg er tab</i>	15	<i>doxazosin 8mg tab</i>	25	<i>droxidopa 100mg cap</i>	49
<i>divalproex sodium 500mg dr tab</i>	15	<i>doxepin 100mg cap</i>	18	<i>droxidopa 200mg cap</i>	49
<i>divalproex sodium 500mg er tab</i>	15	<i>doxepin 10mg cap</i>	18	<i>droxidopa 300mg cap</i>	49
<i>dofetilide 0.125mg cap</i>	8	<i>doxepin 10mg/ml oral soln</i>	18	DULERA 100-5MCG	10
<i>dofetilide 0.25mg cap</i>	8	<i>doxepin 150mg cap</i>	18	INHALER	
<i>dofetilide 0.5mg cap</i>	8	<i>doxepin 25mg cap</i>	18	DULERA 200-5MCG	10
<i>donepezil 10mg odt</i>	75	<i>doxepin 50mg cap</i>	18	INHALER	
<i>donepezil 10mg tab</i>	75	<i>doxepin 75mg cap</i>	18	DULERA 50-5MCG	10
<i>donepezil 23mg tab</i>	75	<i>doxy 100mg inj</i>	78	INHALER	
		<i>doxycycline hyclate 100mg cap</i>	78	<i>duloxetine 20mg dr cap</i>	17
		<i>doxycycline hyclate 20mg tab</i>	79	<i>duloxetine 30mg dr cap</i>	17
				<i>duloxetine 60mg dr cap</i>	17

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

ALPHABETICAL LISTING OF DRUGS

DUPIXENT 200MG/1.14ML AUTO-INJECTOR	8	<i>eltrombopag olamine 12.5mg powder pack for susp</i>	64	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	44
DUPIXENT 200MG/1.14ML SYRINGE	8	<i>eltrombopag olamine 12.5mg tab</i>	64	EMTRIVA 10MG/ML ORAL SOLN	44
DUPIXENT 300MG/2ML AUTO-INJECTOR	8	<i>eltrombopag olamine 25mg powder pack for susp</i>	64	<i>enalapril maleate 10mg tab</i>	24
DUPIXENT 300MG/2ML SYRINGE	8	<i>eltrombopag olamine 25mg tab</i>	64	<i>enalapril maleate 2.5mg tab</i>	24
<i>dutasteride 0.5mg cap</i>	63	<i>eltrombopag olamine 50mg tab</i>	64	<i>enalapril maleate 20mg tab</i>	24
E		<i>eltrombopag olamine 75mg tab</i>	64	<i>enalapril maleate 5mg tab</i>	24
<i>econazole nitrate 1% cream</i>	52	<i>eluryng</i>	59	<i>enalapril maleate/hydrochlorothiaz ide 10-25mg tab</i>	27
EDURANT 25MG TAB	44	<i>0.120-0.015mg/24hr vaginal system</i>	66	<i>enalapril maleate/hydrochlorothiaz ide 5-12.5mg tab</i>	27
<i>efavirenz 600mg tab</i>	44	EMGALITY 100MG/ML SYRINGE	66	ENBREL 25MG/0.5ML INJ	3
<i>efavirenz/emtricitabine/te nofovir disoproxil fumarate 600-200-300mg tab</i>	44	EMGALITY 120MG/ML AUTO-INJECTOR	66	ENBREL 25MG/0.5ML SYRINGE	3
EFAVIRENZ/LAMIVUDIN	44	EMGALITY 120MG/ML SYRINGE	16	ENBREL 50MG/ML AUTO-INJECTOR	3
E/TENOFOVIR		EMSAM 12MG/24HR PATCH	16	ENBREL 50MG/ML CARTRIDGE	3
DISOPROXIL FUMARATE		EMSAM 6MG/24HR PATCH	16	ENBREL 50MG/ML SYRINGE	3
400-300-300MG TAB		EMSAM 9MG/24HR PATCH	44	<i>endocet 10-325mg tab</i>	5
<i>efavirenz/lamivudine/teno fovir disoproxil fumarate 600-300-300mg tab</i>	44	<i>emtricitabine 200mg cap</i>	44	<i>endocet 2.5-325mg tab</i>	5
ELECTROLYTE-148 SOLUTION	67	<i>emtricitabine/rilpivirine/t enofovir disoproxil fumarate 200-25-300mg tab</i>	44	<i>endocet 5-325mg tab</i>	5
ELIGARD 22.5MG SYRINGE	32	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	44	<i>endocet 7.5-325mg tab</i>	5
ELIGARD 30MG SYRINGE	32	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	44	ENERGIX-B	82
ELIGARD 45MG SYRINGE	32	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	44	10MCG/0.5ML SYRINGE	82
ELIGARD 7.5MG SYRINGE	32			ENERGIX-B 20MCG/ML INJ	82
ELIQUIS 2.5MG TAB	10			ENERGIX-B 20MCG/ML SYRINGE	82
ELIQUIS 5MG 30-DAY STARTER PACK (74)	10			<i>enilloring</i>	59
ELIQUIS 5MG TAB	10			<i>0.120-0.015mg/24hr vaginal system</i>	
ELMIRON 100MG CAP	63			<i>enoxaparin sodium 100mg/1ml syringe</i>	11

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

ALPHABETICAL LISTING OF DRUGS

<i>enoxaparin sodium</i>	11	<i>erlotinib 100mg tab</i>	31	<i>esomeprazole 40mg dr</i>	81
<i>120mg/0.8ml syringe</i>		<i>erlotinib 150mg tab</i>	31	<i>cap</i>	
<i>enoxaparin sodium</i>	11	<i>erlotinib 25mg tab</i>	31	<i>estarylla tab 28-day pack</i>	59
<i>150mg/1ml syringe</i>		<i>errin 0.35mg tab 28-day</i>	74	<i>estradiol 0.0025mg/hr</i>	62
<i>enoxaparin sodium</i>	11	<i>pack</i>		<i>weekly patch</i>	
<i>30mg/0.3ml syringe</i>		<i>ertapenem 1gm inj</i>	29	<i>estradiol 0.01% vaginal</i>	83
<i>enoxaparin sodium</i>	11	<i>ery-tab 250mg dr tab</i>	28	<i>cream</i>	
<i>40mg/0.4ml syringe</i>		<i>ery-tab 333mg dr tab</i>	28	<i>estradiol 0.01mg/24hr</i>	62
<i>enoxaparin sodium</i>	11	<i>ery-tab 500mg dr tab</i>	28	<i>twice weekly patch</i>	
<i>60mg/0.6ml syringe</i>		<i>erythromycin 0.5% ophth</i>	71	<i>estradiol 0.01mg/24hr</i>	62
<i>enoxaparin sodium</i>	11	<i>ointment</i>		<i>weekly patch</i>	
<i>80mg/0.8ml syringe</i>		<i>erythromycin 2% gel</i>	52	<i>estradiol 0.025mg/24hr</i>	62
<i>enpresse tab 28-day pack</i>	59	<i>erythromycin 2% topical</i>	52	<i>twice weekly patch</i>	
<i>enskyce tab 28-day pack</i>	59	<i>soln</i>		<i>estradiol 0.025mg/24hr</i>	62
<i>entacapone 200mg tab</i>	38	<i>erythromycin 250mg dr</i>	28	<i>weekly patch</i>	
<i>entecavir 0.5mg tab</i>	46	<i>tab</i>		<i>estradiol 0.0375mg/24hr</i>	62
<i>entecavir 1mg tab</i>	46	<i>erythromycin 250mg tab</i>	28	<i>twice weekly patch</i>	
ENTRESTO 24-26MG	49	<i>erythromycin 333mg dr</i>	28	<i>estradiol 0.0375mg/24hr</i>	62
TAB		<i>tab</i>		<i>weekly patch</i>	
ENTRESTO 49-51MG	49	<i>erythromycin 500mg dr</i>	28	<i>estradiol 0.05mg/24hr</i>	62
TAB		<i>tab</i>		<i>twice weekly patch</i>	
ENTRESTO 97-103MG	49	<i>erythromycin 500mg tab</i>	28	<i>estradiol 0.05mg/24hr</i>	62
TAB		<i>erythromycin</i>	29	<i>weekly patch</i>	
<i>enulose 10gm/15ml oral</i>	63	<i>ethylsuccinate 40mg/ml</i>		<i>estradiol 0.075mg/24hr</i>	62
<i>soln</i>		<i>oral susp</i>		<i>twice weekly patch</i>	
ENVARUSUS XR 0.75MG	69	<i>erythromycin</i>	29	<i>estradiol 0.075mg/24hr</i>	62
TAB		<i>ethylsuccinate 80mg/ml</i>		<i>weekly patch</i>	
ENVARUSUS XR 1MG TAB	69	<i>oral susp</i>		<i>estradiol 0.5mg tab</i>	62
ENVARUSUS XR 4MG TAB	69	<i>escitalopram 10mg tab</i>	16	<i>estradiol 1mg tab</i>	62
EPIDIOLEX 100MG/ML	12	<i>escitalopram 1mg/ml oral</i>	16	<i>estradiol 2mg tab</i>	62
ORAL SOLN		<i>soln</i>		<i>estradiol valerate</i>	62
<i>epinephrine</i>	10	<i>escitalopram 20mg tab</i>	16	<i>10mg/ml inj</i>	
<i>0.15mg/0.3ml</i>		<i>escitalopram 5mg tab</i>	16	<i>estradiol valerate</i>	62
<i>auto-injector (2pack)</i>		<i>eslicarbazepine 200mg</i>	13	<i>20mg/ml inj</i>	
<i>epinephrine 0.3mg/0.3ml</i>	10	<i>tab</i>		<i>estradiol valerate</i>	62
<i>auto-injector (2pack)</i>		<i>eslicarbazepine 400mg</i>	13	<i>40mg/ml inj</i>	
<i>epitol 200mg tab</i>	13	<i>tab</i>		<i>estradiol/norethindrone</i>	59
<i>eplerenone 25mg tab</i>	27	<i>eslicarbazepine 600mg</i>	13	<i>acetate 0.5-0.1mg 28-day</i>	
<i>eplerenone 50mg tab</i>	27	<i>tab</i>		<i>pack</i>	
EPRONTIA 25MG/ML	13	<i>eslicarbazepine 800mg</i>	13	<i>estradiol/norethindrone</i>	59
ORAL SOLN		<i>tab</i>		<i>acetate 1-0.5mg 28-day</i>	
ERIVEDGE 150MG CAP	31	<i>esomeprazole 20mg dr</i>	81	<i>pack</i>	
ERLEADA 240MG TAB	32	<i>cap</i>		<i>eszopiclone 1mg tab</i>	65
ERLEADA 60MG TAB	32			<i>eszopiclone 2mg tab</i>	65

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>eszopiclone 3mg tab</i>	65	<i>ethinyl estradiol/inert</i>	59	<i>euthyrox 88mcg tab</i>	79
<i>ethambutol 100mg tab</i>	30	<i>ingredients/norgestimate</i>		<i>everolimus 0.25mg tab</i>	69
<i>ethambutol 400mg tab</i>	30	<i>0.035-1-0.25mg tab</i>		<i>everolimus 0.5mg tab</i>	69
<i>ethinyl estradiol/ethinyl</i>	59	<i>28-day pack</i>		<i>everolimus 0.75mg tab</i>	69
<i>estradiol/levonorgestrel</i>		<i>ethinyl</i>	59	<i>everolimus 10mg tab</i>	33
<i>0.01-0.02-0.1mg tab</i>		<i>estradiol/norethindrone</i>		<i>everolimus 1mg tab</i>	69
<i>91-day pack</i>		<i>acetate 0.0025-0.5mg</i>		<i>everolimus 2.5mg tab</i>	33
<i>ethinyl estradiol/ethinyl</i>	59	<i>pack</i>		<i>everolimus 2mg tab for</i>	33
<i>estradiol/levonorgestrel</i>		<i>ethinyl</i>	59	<i>oral susp</i>	
<i>0.01-0.03-0.15mg tab</i>		<i>estradiol/norethindrone</i>		<i>everolimus 3mg tab for</i>	33
<i>91-day pack</i>		<i>acetate 0.005-1mg 28-day</i>		<i>oral susp</i>	
<i>ethinyl</i>	59	<i>pack</i>		<i>everolimus 5mg tab</i>	33
<i>estradiol/ethynodiol</i>		<i>ethinyl</i>	59	<i>everolimus 5mg tab for</i>	33
<i>diacetate/inert</i>		<i>estradiol/norethindrone</i>		<i>oral susp</i>	
<i>ingredients 0.035-1-1mg</i>		<i>acetate 0.02-1mg tab</i>		<i>everolimus 7.5mg tab</i>	33
<i>tab 28-day pack</i>		<i>21-day pack</i>		EVOTAZ 300-150MG	44
<i>ethinyl</i>	59	<i>ethinyl</i>	60	TAB	
<i>estradiol/ethynodiol</i>		<i>estradiol/norgestimate</i>		EVRYSDI 0.75MG/ML	70
<i>diacetate/inert</i>		<i>0.18-25/0.215-25/0.25-25</i>		ORAL SOLN	
<i>ingredients 0.05-1-1mg</i>		<i>mg-mcg tab 28-day pack</i>		EVRYSDI 5MG TAB	70
<i>tab 28-day pack</i>		<i>ethinyl</i>	60	<i>exemestane 25mg tab</i>	32
<i>ethinyl</i>	59	<i>estradiol/norgestimate</i>		<i>ezetimibe 10mg tab</i>	23
<i>estradiol/etonogestrel</i>		<i>0.18-35/0.215-35/0.25-35</i>		<i>ezetimibe/simvastatin</i>	23
<i>0.120-0.015 mg/24hr</i>		<i>mg-mcg tab 28-day pack</i>		<i>10-10mg tab</i>	
<i>vaginal system</i>		<i>ethosuximide 250mg cap</i>	15	<i>ezetimibe/simvastatin</i>	23
<i>ethinyl estradiol/ferrous</i>	59	<i>ethosuximide 50mg/ml</i>	15	<i>10-20mg tab</i>	
<i>fumarate/norethindrone</i>		<i>oral soln</i>		<i>ezetimibe/simvastatin</i>	23
<i>acetate 0.02-75-1mg tab</i>		<i>etodolac 200mg cap</i>	3	<i>10-40mg tab</i>	
<i>28-day pack</i>		<i>etodolac 300mg cap</i>	3	<i>ezetimibe/simvastatin</i>	23
<i>ethinyl estradiol/inert</i>	59	<i>etodolac 400mg tab</i>	3	<i>10-80mg tab</i>	
<i>ingredients/levonorgestre</i>		<i>etodolac 500mg tab</i>	3		
<i>l 0.02-1-0.1mg tab 28-day</i>		<i>etravirine 100mg tab</i>	44	F	
<i>pack</i>		<i>etravirine 200mg tab</i>	44	<i>falmina tab 28-day pack</i>	60
<i>ethinyl estradiol/inert</i>	59	EULEXIN 125MG CAP	32	<i>famciclovir 125mg tab</i>	46
<i>ingredients/levonorgestre</i>		<i>euthyrox 100mcg tab</i>	79	<i>famciclovir 250mg tab</i>	46
<i>l 0.03-1-0.15mg tab</i>		<i>euthyrox 112mcg tab</i>	79	<i>famciclovir 500mg tab</i>	46
<i>28-day pack</i>		<i>euthyrox 125mcg tab</i>	79	<i>famotidine 20mg tab</i>	81
<i>ethinyl estradiol/inert</i>	59	<i>euthyrox 137mcg tab</i>	79	<i>famotidine 40mg tab</i>	81
<i>ingredients/levonorgestre</i>		<i>euthyrox 150mcg tab</i>	79	FANAPT 10MG TAB	40
<i>l 0.03-1-0.15mg tab</i>		<i>euthyrox 175mcg tab</i>	79	FANAPT 12MG TAB	40
<i>91-day pack</i>		<i>euthyrox 200mcg tab</i>	79	FANAPT 1MG TAB	40
		<i>euthyrox 25mcg tab</i>	79	FANAPT 2MG TAB	40
		<i>euthyrox 50mcg tab</i>	79	FANAPT 4MG TAB	40
		<i>euthyrox 75mcg tab</i>	79	FANAPT 6MG TAB	40
				FANAPT 8MG TAB	40

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

FANAPT TAB TITRATION PACK (8)	40	FETZIMA 40MG ER CAP	17	<i>fluocinolone acetonide</i>	54
FARXIGA 10MG TAB	21	FETZIMA 80MG ER CAP	17	<i>0.01% topical oil</i>	
FARXIGA 5MG TAB	21	FETZIMA ER CAP	17	<i>fluocinolone acetonide</i>	54
FASENRA 10MG/0.5ML SYRINGE	8	TITRATION PACK (28)		<i>0.01% topical soln</i>	
FASENRA 30MG/ML AUTO-INJECTOR	8	<i>finasteride 5mg tab</i>	63	<i>fluocinolone acetonide</i>	54
FASENRA 30MG/ML SYRINGE	8	<i>finolimid 0.5mg cap</i>	76	<i>0.025% cream</i>	
<i>febuxostat 40mg tab</i>	64	FINTEPLA 2.2MG/ML ORAL SOLN	13	<i>fluocinolone acetonide</i>	54
<i>febuxostat 80mg tab</i>	64	<i>finzala 24 fe chewable tab</i>	60	<i>0.025% ointment</i>	
<i>feirza 1.5/30 28-day pack</i>	60	<i>28-day pack</i>		<i>fluocinonide 0.05% cream</i>	54
<i>feirza 1/20 28-day pack</i>	60	FIRDAPSE 10MG TAB	30	<i>fluocinonide 0.05% e</i>	54
<i>felbamate 120mg/ml oral susp</i>	14	FIRMAGON 120MG INJ	32	<i>cream</i>	
<i>felbamate 400mg tab</i>	15	FIRMAGON 80MG INJ	32	<i>fluocinonide 0.05% gel</i>	54
<i>felbamate 600mg tab</i>	15	<i>flac 0.01% otic soln</i>	72	<i>fluocinonide 0.05%</i>	54
<i>felodipine 10mg er tab</i>	48	<i>flavoxate 100mg tab</i>	81	<i>ointment</i>	
<i>felodipine 2.5mg er tab</i>	48	<i>flecainide acetate 100mg tab</i>	8	<i>fluocinonide 0.05%</i>	54
<i>felodipine 5mg er tab</i>	48	<i>flecainide acetate 150mg tab</i>	8	<i>topical soln</i>	
<i>fenofibrate 134mg cap</i>	23	<i>flecainide acetate 50mg tab</i>	8	<i>fluocinonide 0.1% cream</i>	54
<i>fenofibrate 145mg tab</i>	23	<i>fluconazole 100mg tab</i>	22	<i>fluorometholone 0.1% ophth susp</i>	72
<i>fenofibrate 160mg tab</i>	23	<i>fluconazole 10mg/ml oral susp</i>	22	FLUOROURACIL 2% TOPICAL SOLN	53
<i>fenofibrate 200mg cap</i>	23	<i>fluconazole 150mg tab</i>	22	<i>fluorouracil 5% cream</i>	53
<i>fenofibrate 48mg tab</i>	23	<i>fluconazole 200mg tab</i>	22	<i>fluorouracil 5% topical soln</i>	53
<i>fenofibrate 54mg tab</i>	23	<i>fluconazole 200mg/100ml inj</i>	22	<i>fluoxetine 10mg cap</i>	16
<i>fenofibrate 67mg cap</i>	23	<i>fluconazole 400mg/200ml inj</i>	22	<i>fluoxetine 20mg cap</i>	16
<i>fenofibric acid 135mg dr cap</i>	23	<i>fluconazole 40mg/ml oral susp</i>	22	<i>fluoxetine 40mg cap</i>	16
<i>fenofibric acid 45mg dr cap</i>	23	<i>fluconazole 50mg tab</i>	22	<i>fluoxetine 4mg/ml oral soln</i>	16
<i>fentanyl 100mcg/hr patch</i>	4	<i>flucytosine 250mg cap</i>	22	<i>fluoxetine 60mg tab</i>	16
<i>fentanyl 12mcg/hr patch</i>	4	<i>flucytosine 500mg cap</i>	22	FLUPHENAZINE	42
<i>fentanyl 25mcg/hr patch</i>	4	<i>fludrocortisone acetate 0.1mg tab</i>	51	<i>0.5MG/ML ORAL SOLN</i>	
<i>fentanyl 50mcg/hr patch</i>	4	<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	70	<i>fluphenazine 10mg tab</i>	42
<i>fentanyl 75mcg/hr patch</i>	4	<i>fluocinolone acetonide 0.01% cream</i>	54	<i>fluphenazine 1mg tab</i>	42
<i>fesoterodine fumarate 4mg er tab</i>	81	<i>fluocinolone acetonide 0.01% otic soln</i>	73	<i>fluphenazine 2.5mg tab</i>	42
<i>fesoterodine fumarate 8mg er tab</i>	81			FLUPHENAZINE	42
FETZIMA 120MG ER CAP	17			<i>2.5MG/ML INJ</i>	
FETZIMA 20MG ER CAP	17			<i>fluphenazine 5mg tab</i>	42
				FLUPHENAZINE	42
				<i>5MG/ML ORAL SOLN</i>	
				<i>fluphenazine decanoate 25mg/ml inj</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

FLURBIPROFEN	72	<i>fondaparinux sodium</i>	11	<i>galantamine 8mg tab</i>	75
SODIUM 0.03% OPTH		<i>7.5mg/0.6ml syringe</i>		<i>galantamine</i>	75
SOLN		<i>fosamprenavir 700mg tab</i>	44	<i>hydrobromide 16mg er</i>	
<i>fluticasone propionate</i>	54	<i>fosinopril sodium 10mg</i>	24	<i>cap</i>	
<i>0.005% ointment</i>		<i>tab</i>		<i>galantamine</i>	75
<i>fluticasone propionate</i>	54	<i>fosinopril sodium 20mg</i>	24	<i>hydrobromide 24mg er</i>	
<i>0.05% cream</i>		<i>tab</i>		<i>cap</i>	
FLUTICASONE	9	<i>fosinopril sodium 40mg</i>	24	GALANTAMINE	75
PROPIONATE 110MCG		<i>tab</i>		HYDROBROMIDE	
INHALER		<i>fosinopril</i>	27	4MG/ML ORAL SOLN	
FLUTICASONE	9	<i>sodium/hydrochlorothiazide 10-12.5mg tab</i>		<i>galantamine</i>	75
PROPIONATE 220MCG		<i>fosinopril</i>	27	<i>hydrobromide 8mg er cap</i>	
INHALER		<i>sodium/hydrochlorothiazide 20-12.5mg tab</i>		<i>gallifrey 5mg tab</i>	74
FLUTICASONE	9	FOTIVDA 0.89MG CAP	33	GAMUNEX 1GM/10ML	73
PROPIONATE 44MCG		FOTIVDA 1.34MG CAP	33	INJ	
INHALER		FRUZAQLA 1MG CAP	31	GARDASIL 9 INJ	82
<i>fluticasone propionate</i>	70	FRUZAQLA 5MG CAP	31	GARDASIL 9 SYRINGE	82
<i>50mcg/act nasal inhaler</i>		FUROSCIX 80MG/10ML	56	GATTEX 5MG INJ	63
<i>fluticasone</i>	10	CARTRIDGE		GAUZE PAD (2 X 2)	66
<i>propionate/salmeterol</i>		<i>furosemide 10mg/ml inj</i>	56	GAVILYTE-C POWDER	65
<i>100-50mcg/act powder</i>		<i>furosemide 10mg/ml oral</i>	56	FOR ORAL SOLN	
<i>inhaler</i>		<i>soln</i>		<i>gavilyte-g powder for</i>	65
<i>fluticasone</i>	10	<i>furosemide 20mg tab</i>	56	<i>oral soln</i>	
<i>propionate/salmeterol</i>		<i>furosemide 40mg tab</i>	56	<i>gavilyte-n powder for</i>	65
<i>250-50mcg/act powder</i>		<i>furosemide 80mg tab</i>	56	<i>oral soln</i>	
<i>inhaler</i>		FUROSEMIDE 8MG/ML	56	GAVRETO 100MG CAP	33
<i>fluticasone</i>	10	ORAL SOLN		<i>gefitinib 250mg tab</i>	31
<i>propionate/salmeterol</i>		<i>fyavolv 0.0025-0.5mg tab</i>	60	<i>gemfibrozil 600mg tab</i>	23
<i>500-50mcg/act powder</i>		<i>fyavolv 0.005-1mg tab</i>	60	<i>generlac 10gm/15ml oral</i>	63
<i>inhaler</i>		FYCOMPA 0.5MG/ML	13	<i>soln</i>	
<i>fluvastatin 20mg cap</i>	23	ORAL SUSP		<i>gengraf 100mg cap</i>	69
<i>fluvastatin 40mg cap</i>	24			<i>gengraf 25mg cap</i>	69
<i>fluvoxamine maleate</i>	16			<i>gentamicin 0.1% cream</i>	52
<i>100mg tab</i>				<i>gentamicin 0.1% ointment</i>	52
<i>fluvoxamine maleate</i>	16	G		<i>gentamicin 0.3% ophth</i>	71
<i>25mg tab</i>		<i>gabapentin 100mg cap</i>	13	<i>soln</i>	
<i>fluvoxamine maleate</i>	16	<i>gabapentin 300mg cap</i>	13	GENTAMICIN 0.8MG/ML	2
<i>50mg tab</i>		<i>gabapentin 400mg cap</i>	13	INJ	
<i>fondaparinux sodium</i>	11	<i>gabapentin 50mg/ml oral</i>	13	<i>gentamicin 1.2mg/ml inj</i>	2
<i>10mg/0.8ml syringe</i>		<i>soln</i>		GENTAMICIN 1.6MG/ML	2
<i>fondaparinux sodium</i>	11	<i>gabapentin 600mg tab</i>	13	INJ	
<i>2.5mg/0.5ml syringe</i>		<i>(Neurontin equiv)</i>		GENTAMICIN 1MG/ML	2
<i>fondaparinux sodium</i>	11	<i>gabapentin 800mg tab</i>	13	INJ	
<i>5mg/0.4ml syringe</i>		<i>galantamine 12mg tab</i>	75	<i>gentamicin 40mg/ml inj</i>	2
		<i>galantamine 4mg tab</i>	75		

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

ALPHABETICAL LISTING OF DRUGS

GENVOYA	44	glucose	67	glutamine 5000mg	64
150-150-200-10MG TAB		50mg/ml/potassium		powder for oral soln	
GILOTRIF 20MG TAB	31	chloride		glycopyrrolate 1mg tab	80
GILOTRIF 30MG TAB	31	0.02meq/ml/sodium		glycopyrrolate 2mg tab	80
GILOTRIF 40MG TAB	31	chloride 2.25mg/ml inj		GLYXAMBI 10-5MG TAB	18
glatiramer acetate	76	glucose	67	GLYXAMBI 25-5MG TAB	18
20mg/ml syringe		50mg/ml/potassium		GOMEKLI 1MG CAP	33
glatiramer acetate	76	chloride		GOMEKLI 1MG TAB	33
40mg/ml syringe		0.02meq/ml/sodium		FOR ORAL SUSP	
glatopa 20mg/ml syringe	76	chloride 4.5mg/ml inj		GOMEKLI 2MG CAP	33
glatopa 40mg/ml syringe	76	glucose	67	granisetron 1mg tab	21
GLEOSTINE 100MG CAP	30	50mg/ml/potassium		griseofulvin 125mg tab	22
GLEOSTINE 10MG CAP	30	chloride		griseofulvin 250mg tab	22
GLEOSTINE 40MG CAP	30	0.02meq/ml/sodium		griseofulvin 25mg/ml oral	22
glimepiride 1mg tab	21	chloride 9mg/ml inj		susp	
glimepiride 2mg tab	21	glucose	67	griseofulvin 500mg tab	22
glimepiride 4mg tab	21	50mg/ml/potassium		guanfacine 1mg er tab	1
glipizide 10mg er tab	21	chloride		guanfacine 2mg er tab	1
glipizide 10mg tab	21	0.03meq/ml/sodium		guanfacine 3mg er tab	1
glipizide 2.5mg er tab	21	chloride 4.5mg/ml inj		guanfacine 4mg er tab	1
glipizide 5mg er tab	21	glucose	67	GVOKE 0.5MG/0.1ML	19
glipizide 5mg tab	21	50mg/ml/potassium		AUTO-INJECTOR	
glipizide/metformin	18	chloride		GVOKE 1MG/0.2ML	19
2.5-250mg tab		0.04meq/ml/sodium		AUTO-INJECTOR	
glipizide/metformin	18	chloride 4.5mg/ml inj		GVOKE 1MG/0.2ML INJ	19
2.5-500mg tab		glucose	67	GVOKE 1MG/0.2ML	19
glipizide/metformin	18	50mg/ml/potassium		SYRINGE	
5-500mg tab		chloride			
GLUCOSE	67	0.04meq/ml/sodium		H	
100MG/ML/SODIUM		chloride 9mg/ml inj		HADLIMA 40MG/0.4ML	3
CHLORIDE 2MG/ML INJ		GLUCOSE	67	AUTO-INJECTOR	
GLUCOSE	67	50MG/ML/SODIUM		HADLIMA 40MG/0.4ML	3
100MG/ML/SODIUM		CHLORIDE 2MG/ML INJ		SYRINGE	
CHLORIDE 4.5MG/ML		GLUCOSE	67	HADLIMA 40MG/0.8ML	3
INJ		50MG/ML/SODIUM		AUTO-INJECTOR	
glucose 50mg/ml inj	70	CHLORIDE 4.5MG/ML		HADLIMA 40MG/0.8ML	3
glucose	67	INJ		SYRINGE	
50mg/ml/potassium		glucose 50mg/ml/sodium	67	HAEGARDA 2000UNIT	65
chloride		chloride 9mg/ml inj		INJ	
0.01meq/ml/sodium		GLUCOSE/SODIUM	67	HAEGARDA 3000UNIT	65
chloride 4.5mg/ml inj		CHLORIDE		INJ	
glucose	67	25MG/ML-4.5MG/ML		hailey 24 fe tab 28-day	60
50mg/ml/potassium		INJ		pack	
chloride 0.02meq/ml inj				halobetasol propionate	54
				0.05% cream	

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>halobetasol propionate</i>	54	HUMALOG 200UNIT/ML	20	<i>hydrochlorothiazide/lisin</i>	27
<i>0.05% ointment</i>		KWIKPEN		<i>opril 25-20mg tab</i>	
<i>haloette</i>	60	HUMALOG JUNIOR	20	<i>hydrochlorothiazide/losar</i>	27
<i>0.120-0.015mg/24hr</i>		100UNIT/ML PEN INJ		<i>tan potassium</i>	
<i>vaginal system</i>		HUMALOG MIX (50/50)	20	<i>12.5-100mg tab</i>	
<i>haloperidol 0.5mg tab</i>	39	100UNIT/ML PEN INJ		<i>hydrochlorothiazide/losar</i>	27
<i>haloperidol 10mg tab</i>	39	HUMALOG MIX (75/25)	20	<i>tan potassium 12.5-50mg</i>	
<i>haloperidol 1mg tab</i>	39	100UNIT/ML INJ		<i>tab</i>	
<i>haloperidol 20mg tab</i>	39	HUMALOG MIX (75/25)	20	<i>hydrochlorothiazide/losar</i>	27
<i>haloperidol 2mg tab</i>	39	100UNIT/ML KWIKPEN		<i>tan potassium 25-100mg</i>	
<i>haloperidol 2mg/ml oral</i>	39	HUMULIN (70/30)	20	<i>tab</i>	
<i>soln</i>		100UNIT/ML INJ		<i>hydrochlorothiazide/meto</i>	27
<i>haloperidol 5mg tab</i>	39	HUMULIN (70/30)	20	<i>prolol tartrate 25-100mg</i>	
<i>haloperidol 5mg/ml inj</i>	39	100UNIT/ML PEN INJ		<i>tab</i>	
<i>haloperidol decanoate</i>	39	HUMULIN N	20	<i>hydrochlorothiazide/meto</i>	27
<i>100mg/ml (1ml) inj</i>		100UNIT/ML INJ		<i>prolol tartrate 25-50mg</i>	
<i>haloperidol decanoate</i>	39	HUMULIN N	20	<i>tab</i>	
<i>100mg/ml (5ml) inj</i>		100UNIT/ML PEN INJ		<i>hydrochlorothiazide/meto</i>	27
<i>haloperidol decanoate</i>	39	HUMULIN R	20	<i>prolol tartrate 50-100mg</i>	
<i>50mg/ml (1ml) inj</i>		100UNIT/ML INJ		<i>tab</i>	
<i>haloperidol decanoate</i>	39	HUMULIN R	20	<i>hydrochlorothiazide/olme</i>	27
<i>50mg/ml (5ml) inj</i>		500UNIT/ML INJ		<i>sartan medoxomil</i>	
HAVRIX 1440ELU/ML	82	HUMULIN R	20	<i>12.5-20mg tab</i>	
SYRINGE		500UNIT/ML PEN INJ		<i>hydrochlorothiazide/olme</i>	27
HAVRIX 720ELU/0.5ML	82	<i>hydralazine 100mg tab</i>	27	<i>sartan medoxomil</i>	
SYRINGE		<i>hydralazine 10mg tab</i>	28	<i>12.5-40mg tab</i>	
<i>heather 0.35mg 28-day</i>	74	<i>hydralazine 25mg tab</i>	28	<i>hydrochlorothiazide/olme</i>	27
<i>pack</i>		<i>hydralazine 50mg tab</i>	28	<i>sartan medoxomil</i>	
<i>heparin sodium porcine</i>	11	<i>hydrochlorothiazide</i>	56	<i>25-40mg tab</i>	
<i>10000unit/ml inj</i>		<i>12.5mg cap</i>		<i>hydrochlorothiazide/spiro</i>	56
<i>heparin sodium porcine</i>	11	<i>hydrochlorothiazide</i>	56	<i>nolactone 25-25mg tab</i>	
<i>1000unit/ml inj</i>		<i>12.5mg tab</i>		<i>hydrochlorothiazide/telmi</i>	27
<i>heparin sodium porcine</i>	11	<i>hydrochlorothiazide</i>	56	<i>sartan 12.5-40mg tab</i>	
<i>20000unit/ml inj</i>		<i>25mg tab</i>		<i>hydrochlorothiazide/telmi</i>	27
<i>heparin sodium porcine</i>	11	<i>hydrochlorothiazide</i>	56	<i>sartan 12.5-80mg tab</i>	
<i>5000unit/ml inj</i>		<i>50mg tab</i>		<i>hydrochlorothiazide/telmi</i>	27
HEPLISAV-B	82	<i>hydrochlorothiazide/irbes</i>	27	<i>sartan 25-80mg tab</i>	
20MCG/0.5ML SYRINGE		<i>artan 12.5-150mg tab</i>		<i>hydrochlorothiazide/tria</i>	56
HIBERIX 10MCG INJ	82	<i>hydrochlorothiazide/irbes</i>	27	<i>nterene 25-37.5mg cap</i>	
HUMALOG 100UNIT/ML	20	<i>artan 12.5-300mg tab</i>		<i>hydrochlorothiazide/tria</i>	56
CARTRIDGE		<i>hydrochlorothiazide/lisin</i>	27	<i>nterene 25-37.5mg tab</i>	
HUMALOG 100UNIT/ML	20	<i>opril 12.5-10mg tab</i>		<i>hydrochlorothiazide/tria</i>	56
KWIKPEN		<i>hydrochlorothiazide/lisin</i>	27	<i>nterene 50-75mg tab</i>	
		<i>opril 12.5-20mg 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>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	27	<i>hydroxychloroquine sulfate 400mg tab</i>	30	<i>imipramine 10mg tab</i>	18
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	27	<i>hydroxyurea 500mg cap</i>	37	<i>imipramine 25mg tab</i>	18
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	27	<i>hydroxyzine 10mg tab</i>	7	<i>imipramine 50mg tab</i>	18
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	27	<i>hydroxyzine 25mg tab</i>	7	<i>imiquimod 5% cream</i>	55
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	27	<i>hydroxyzine 50mg tab</i>	7	IMKELDI 80MG/ML	34
<i>hydrocodone</i>	5	HYDROXYZINE	7	ORAL SOLN	
<i>bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>	5	PAMOATE 100MG CAP		IMOVAX 2.5UNIT/ML INJ	82
<i>hydrocodone</i>	5	<i>hydroxyzine pamoate 25mg cap</i>	7	<i>incassia 0.35mg tab</i>	74
<i>bitartrate/acetaminophen 10-325mg tab</i>	5	<i>hydroxyzine pamoate 50mg cap</i>	7	<i>28-day pack</i>	
<i>hydrocodone</i>	5			INCRELEX 40MG/4ML	58
<i>bitartrate/acetaminophen 5-325mg tab</i>	5			INJ	
<i>hydrocodone</i>	5			INCRUSE ELLIPTA	9
<i>bitartrate/acetaminophen 7.5-325mg tab</i>	5			62.5MCG/INH POWDER	
<i>hydrocortisone 1% cream</i>	54	I		INHALER	
<i>hydrocortisone 1.67mg/ml enema</i>	6	<i>ibandronate 150mg tab</i>	57	<i>indapamide 1.25mg tab</i>	56
<i>hydrocortisone 10mg tab</i>	51	IBRANCE 100MG CAP	33	<i>indapamide 2.5mg tab</i>	57
<i>hydrocortisone 2.5% cream</i>	6	IBRANCE 100MG TAB	33	INFANRIX SYRINGE	80
<i>hydrocortisone 2.5% ointment</i>	54	IBRANCE 125MG CAP	34	INGREZZA 40MG CAP	76
<i>hydrocortisone 20mg tab</i>	51	IBRANCE 125MG TAB	34	INGREZZA 40MG	76
<i>hydrocortisone 5mg tab</i>	51	IBRANCE 75MG CAP	34	SPRINKLE CAP	
HYDROCORTISONE	54	IBRANCE 75MG TAB	34	INGREZZA 60MG CAP	76
<i>LOTION 2.5%</i>		<i>ibu 600mg tab</i>	4	INGREZZA 60MG	76
<i>hydromorphone 2mg tab</i>	4	<i>ibu 800mg tab</i>	4	SPRINKLE CAP	
<i>hydromorphone 4mg tab</i>	4	<i>ibuprofen 400mg tab</i>	4	INGREZZA 80MG CAP	76
<i>hydromorphone 8mg tab</i>	4	<i>ibuprofen 600mg tab</i>	4	INGREZZA 80MG	76
<i>hydroxychloroquine sulfate 100mg tab</i>	30	<i>ibuprofen 800mg tab</i>	4	SPRINKLE CAP	
<i>hydroxychloroquine sulfate 200mg tab</i>	30	<i>icatibant 10mg/ml syringe</i>	65	INGREZZA CAP	76
<i>hydroxychloroquine sulfate 300mg tab</i>	30	<i>iclevia tab 91-day pack</i>	60	THERAPY PACK (28)	
		ICLUSIG 10MG TAB	34	INLYTA 1MG TAB	31
		ICLUSIG 15MG TAB	34	INLYTA 5MG TAB	31
		ICLUSIG 30MG TAB	34	INQOVI 35-100MG TAB	32
		ICLUSIG 45MG TAB	34	PACK (5)	
		<i>icosapent ethyl 1000mg cap</i>	23	INREBIC 100MG CAP	34
		<i>icosapent ethyl 500mg cap</i>	23	INSULIN GLARGINE	20
		IDHIFA 100MG TAB	34	300UNIT/ML PEN INJ	
		IDHIFA 50MG TAB	34	(1.5ML)	
		<i>imatinib 100mg tab</i>	34	INSULIN GLARGINE	20
		<i>imatinib 400mg tab</i>	34	300UNIT/ML PEN INJ	
		IMBRUVICA 140MG CAP	34	(3ML)	
		IMBRUVICA 420MG TAB	34	INSULIN LISPRO	20
		IMBRUVICA 70MG CAP	34	100UNIT/ML INJ	
		IMBRUVICA 70MG/ML	34	INSULIN PEN NEEDLE	66
		ORAL SUSP		INSULIN SYRINGE	66

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

ALPHABETICAL LISTING OF DRUGS

INSULIN SYRINGE (DISP) U-100 0.3ML	66	<i>ipratropium bromide</i> 0.06% (0.042mg/act)	70	<i>isotretinoin 30mg cap</i>	52
INSULIN SYRINGE (DISP) U-100 1/2ML	66	<i>nasal inhaler</i>		<i>isotretinoin 40mg cap</i>	52
INSULIN SYRINGE (DISP) U-100 1ML	66	<i>ipratropium/albuterol</i> 0.5-2.5mg/3ml inh soln	10	<i>isradipine 2.5mg cap</i>	48
INTELENCE 25MG TAB	44	<i>irbesartan 150mg tab</i>	25	<i>isradipine 5mg cap</i>	48
<i>introvale tab 91-day pack</i>	60	<i>irbesartan 300mg tab</i>	25	ITOVEBI 3MG TAB	34
INVEGA HAFYERA 1092MG/3.5ML	40	<i>irbesartan 75mg tab</i>	25	ITOVEBI 9MG TAB	34
SYRINGE		ISENTRESS 100MG CHEW TAB	44	<i>itraconazole 100mg cap</i>	22
INVEGA HAFYERA 1560MG/5ML SYRINGE	40	ISENTRESS 100MG GRANULES FOR ORAL SUSP	44	<i>ivabradine 5mg tab</i>	49
INVEGA SUSTENNA 117MG/0.75ML	40	ISENTRESS 25MG CHEW TAB	44	<i>ivabradine 7.5mg tab</i>	49
SYRINGE		ISENTRESS 400MG TAB	44	<i>ivermectin 3mg tab</i>	6
INVEGA SUSTENNA 156MG/ML SYRINGE	40	ISENTRESS 600MG TAB	44	IWILFIN 192MG TAB	38
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	40	<i>isibloom tab 28-day pack</i>	60	IXCHIQ INJ	82
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	40	<i>isoniazid 100mg tab</i>	30	IXIARO 0.012MG/ML SYRINGE	82
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	40	<i>isoniazid 10mg/ml oral soln</i>	30	J	
INVEGA TRINZA 273MG/0.875ML	40	<i>isoniazid 300mg tab</i>	30	JAKAFI 10MG TAB	34
SYRINGE		<i>isosorbide dinitrate 10mg tab</i>	6	JAKAFI 15MG TAB	34
INVEGA TRINZA 410MG/1.315ML	40	<i>isosorbide dinitrate 20mg tab</i>	6	JAKAFI 20MG TAB	34
SYRINGE		<i>isosorbide dinitrate 30mg tab</i>	6	JAKAFI 25MG TAB	34
INVEGA TRINZA 546MG/1.75ML	40	<i>isosorbide dinitrate 5mg tab</i>	6	JAKAFI 5MG TAB	34
SYRINGE		ISOSORBIDE MONONITRATE 10MG TAB	6	<i>jantoven 10mg tab</i>	11
INVEGA TRINZA 819MG/2.625ML	40	<i>isosorbide mononitrate 120mg er tab</i>	6	<i>jantoven 1mg tab</i>	11
SYRINGE		ISOSORBIDE MONONITRATE 20MG TAB	6	<i>jantoven 2.5mg tab</i>	11
IPOL INJ	82	<i>isosorbide mononitrate 60mg er tab</i>	6	<i>jantoven 2mg tab</i>	11
<i>ipratropium bromide</i> 0.02% inh soln	9	<i>isotretinoin 10mg cap</i>	52	<i>jantoven 3mg tab</i>	11
<i>ipratropium bromide</i> 0.03% (0.021mg/act) <i>nasal inhaler</i>	70	<i>isotretinoin 20mg cap</i>	52	<i>jantoven 4mg tab</i>	11
				<i>jantoven 5mg tab</i>	11
				<i>jantoven 6mg tab</i>	11
				<i>jantoven 7.5mg tab</i>	11
				JANUMET 50-1000MG TAB	18
				JANUMET 50-500MG TAB	19
				JANUMET XR 100-1000MG TAB	19
				JANUMET XR 50-1000MG TAB	19
				JANUMET XR 50-500MG TAB	19
				JANUVIA 100MG TAB	20
				JANUVIA 25MG TAB	20
				JANUVIA 50MG TAB	20
				JARDIANCE 10MG TAB	21
				JARDIANCE 25MG TAB	21

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>jasmiel tab 28-day pack</i>	60	KALYDECO 75MG ORAL	77	KISQALI TAB 600MG	34
<i>javygtor 100mg powder</i>	57	GRANULES		DAILY DOSE PACK (63)	
<i>for oral soln</i>		<i>kariva tab 28-day pack</i>	60	KISQALI/FEMARA 400	32
<i>javygtor 100mg tab</i>	57	KCL/D5W/LR INJ 0.15%	67	CO-PACK (70)	
<i>javygtor 500mg powder</i>	58	<i>kcl/nacl 20meq-0.45% inj</i>	67	KISQALI/FEMARA 600	32
<i>for oral soln</i>		<i>kcl/nacl 20meq-0.9% inj</i>	67	CO-PACK (91)	
JAYPIRCA 100MG TAB	34	<i>kcl/nacl 40meq-9% inj</i>	67	<i>klor-con 10meq er tab</i>	67
JAYPIRCA 50MG TAB	34	<i>kelnor 1mg-35mcg tab</i>	60	<i>klor-con 10meq micro er</i>	67
JENTADUETO	19	<i>28-day pack</i>		<i>tab</i>	
2.5-1000MG TAB		<i>kelnor tab 1/50 28-day</i>	60	<i>klor-con 15meq micro er</i>	67
JENTADUETO	19	<i>pack</i>		<i>tab</i>	
2.5-500MG TAB		KERENDIA 10MG TAB	58	<i>klor-con 20meq micro er</i>	67
JENTADUETO XR	19	KERENDIA 20MG TAB	58	<i>tab</i>	
2.5-1000MG TAB		KESIMPTA 20MG/0.4ML	76	<i>klor-con 20meq powder</i>	68
JENTADUETO XR	19	PEN INJ		<i>for oral soln</i>	
5-1000MG TAB		<i>ketoconazole 2% cream</i>	52	<i>klor-con 8meq er tab</i>	68
<i>jinteli 0.005-1mg tab</i>	60	<i>ketoconazole 2%</i>	52	KLOXXADO 8MG/0.1ML	21
JUBBONTI 60MG/ML	57	<i>shampoo</i>		NASAL SPRAY	
SYRINGE		<i>ketoconazole 200mg tab</i>	22	KOSELUGO 10MG CAP	34
<i>juleber tab 28-day pack</i>	60	<i>ketorolac tromethamine</i>	72	KOSELUGO 25MG CAP	34
JULUCA 50-25MG TAB	44	<i>0.4% ophth soln</i>		<i>kourzeq 0.1% oral paste</i>	51
<i>junel 1.5/30 tab 21-day</i>	60	<i>ketorolac tromethamine</i>	72	KRAZATI 200MG TAB	34
<i>pack</i>		<i>0.5% ophth soln</i>		<i>kurvelo tab 28-day pack</i>	60
<i>junel 1/20 tab 21-day</i>	60	<i>ketorolac tromethamine</i>	4		
<i>pack</i>		<i>10mg tab</i>		L	
<i>junel fe 24 1/20 28-day</i>	60	KEVZARA	3	<i>labetalol 100mg tab</i>	46
<i>pack</i>		150MG/1.14ML		<i>labetalol 200mg tab</i>	47
<i>junel fe tab 1.5/30 28-day</i>	60	AUTO-INJECTOR		<i>labetalol 300mg tab</i>	47
<i>pack</i>		KEVZARA	3	<i>lacosamide 100mg tab</i>	13
<i>junel fe tab 1/20 28-day</i>	60	150MG/1.14ML		<i>lacosamide 10mg/ml oral</i>	13
<i>pack</i>		SYRINGE		<i>soln</i>	
JYLAMVO 2MG/ML	30	KEVZARA	3	<i>lacosamide 150mg tab</i>	13
ORAL SOLN		200MG/1.14ML		<i>lacosamide 200mg tab</i>	13
JYNNEOS 0.5ML INJ	82	AUTO-INJECTOR		<i>lacosamide 50mg tab</i>	13
		KEVZARA	3	<i>lactulose 667mg/ml oral</i>	66
K		200MG/1.14ML		<i>soln</i>	
KALYDECO 13.4MG	77	SYRINGE		<i>lamivudine 100mg tab</i>	46
ORAL GRANULES		KINRIX SYRINGE	80	<i>lamivudine 10mg/ml oral</i>	44
KALYDECO 150MG TAB	77	<i>kionex 15gm/60ml susp</i>	69	<i>soln</i>	
KALYDECO 25MG ORAL	77	KISQALI TAB 200MG	34	<i>lamivudine 150mg tab</i>	44
GRANULES		DAILY DOSE PACK (21)		<i>lamivudine 300mg tab</i>	44
KALYDECO 5.8MG	77	KISQALI TAB 400MG	34	<i>lamivudine/zidovudine</i>	44
ORAL GRANULES		DAILY DOSE PACK (42)		<i>150-300mg tab</i>	
KALYDECO 50MG ORAL	77			<i>lamotrigine 100mg tab</i>	13
GRANULES				<i>lamotrigine 150mg tab</i>	13

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

ALPHABETICAL LISTING OF DRUGS

<i>lamotrigine 200mg tab</i>	13	LENVIMA 4MG DAILY	31	<i>levonest tab 28-day pack</i>	60
<i>lamotrigine 25mg chew tab</i>	13	DOSE PACK (30)		<i>levonorgestrel/ethinyl</i>	60
		LENVIMA 8MG DAILY	31	<i>estradiol</i>	
<i>lamotrigine 25mg tab</i>	13	DOSE PACK (60)		<i>0.05-30/0.075-40/0.125-3</i>	
<i>lamotrigine 5mg chew tab</i>	13	<i>lessina tab 28-day pack</i>	60	<i>0mg-mcg tab 28-day pack</i>	
<i>lansoprazole 15mg dr cap</i>	81	<i>letrozole 2.5mg tab</i>	32	<i>levora 0.15/30 tab 28-day</i>	60
<i>lansoprazole 30mg dr cap</i>	81	<i>leucovorin 10mg tab</i>	38	<i>pack</i>	
LANTUS 100UNIT/ML	21	<i>leucovorin 15mg tab</i>	38	<i>levothyroxine sodium</i>	79
INJ		<i>leucovorin 25mg tab</i>	38	<i>100mcg tab</i>	
LANTUS 100UNIT/ML	21	<i>leucovorin 5mg tab</i>	38	<i>levothyroxine sodium</i>	79
PEN INJ		LEUKERAN 2MG TAB	30	<i>112mcg tab</i>	
<i>lapatinib 250mg tab</i>	34	<i>levalbuterol 0.31mg/3ml</i>	10	<i>levothyroxine sodium</i>	79
<i>larin 1.5/30 tab 21-day</i>	60	<i>neb soln</i>		<i>125mcg tab</i>	
<i>pack</i>		<i>levalbuterol 0.63mg/3ml</i>	10	<i>levothyroxine sodium</i>	79
<i>larin 1/20 tab 21-day</i>	60	<i>inh soln</i>		<i>137mcg tab</i>	
<i>pack</i>		<i>levalbuterol 1.25mg/3ml</i>	10	<i>levothyroxine sodium</i>	79
<i>larin fe tab 1.5/30 28-day</i>	60	<i>neb soln</i>		<i>150mcg tab</i>	
<i>pack</i>		LEVALBUTEROL	10	<i>levothyroxine sodium</i>	79
<i>larin fe tab 1/20 28-day</i>	60	45MCG/ACT INHALER		<i>175mcg tab</i>	
<i>pack</i>		<i>levetiracetam 1000mg tab</i>	13	<i>levothyroxine sodium</i>	79
<i>latanoprost 0.005% ophth</i>	72	<i>levetiracetam 100mg/ml</i>	13	<i>200mcg tab</i>	
<i>soln</i>		<i>oral soln</i>		<i>levothyroxine sodium</i>	79
LAZCLUZE 240MG TAB	31	<i>levetiracetam 250mg tab</i>	13	<i>25mcg tab</i>	
LAZCLUZE 80MG TAB	31	<i>levetiracetam 500mg er</i>	13	<i>levothyroxine sodium</i>	79
<i>leflunomide 10mg tab</i>	2	<i>tab</i>		<i>300mcg tab</i>	
<i>leflunomide 20mg tab</i>	2	<i>levetiracetam 500mg tab</i>	13	<i>levothyroxine sodium</i>	79
<i>lenalidomide 10mg cap</i>	68	<i>levetiracetam 750mg er</i>	13	<i>50mcg tab</i>	
<i>lenalidomide 15mg cap</i>	68	<i>tab</i>		<i>levothyroxine sodium</i>	79
<i>lenalidomide 2.5mg cap</i>	68	<i>levetiracetam 750mg tab</i>	13	<i>75mcg tab</i>	
<i>lenalidomide 20mg cap</i>	68	LEVOBUNOLOL 0.5%	71	<i>levothyroxine sodium</i>	79
<i>lenalidomide 25mg cap</i>	68	OPHTH SOLN		<i>88mcg tab</i>	
<i>lenalidomide 5mg cap</i>	68	<i>levocarnitine 100mg/ml</i>	58	<i>levoxyl 100mcg tab</i>	79
LENVIMA 10MG DAILY	31	<i>oral soln</i>		<i>levoxyl 112mcg tab</i>	79
DOSE PACK (30)		<i>levocarnitine 330mg tab</i>	58	<i>levoxyl 125mcg tab</i>	79
LENVIMA 12MG DAILY	31	<i>levocetirizine 5mg tab</i>	77	<i>levoxyl 137mcg tab</i>	79
DOSE PACK (90)		<i>levofloxacin 250mg tab</i>	62	<i>levoxyl 150mcg tab</i>	80
LENVIMA 14MG DAILY	31	<i>levofloxacin 25mg/ml</i>	62	<i>levoxyl 175mcg tab</i>	80
DOSE PACK (60)		<i>oral soln</i>		<i>levoxyl 200mcg tab</i>	80
LENVIMA 18MG DAILY	31	<i>levofloxacin 500mg tab</i>	62	<i>levoxyl 25mcg tab</i>	80
DOSE PACK (90)		<i>levofloxacin</i>	62	<i>levoxyl 50mcg tab</i>	80
LENVIMA 20MG DAILY	31	<i>500mg/100ml inj</i>		<i>levoxyl 75mcg tab</i>	80
DOSE PACK (60)		<i>levofloxacin 750mg tab</i>	62	<i>levoxyl 88mcg tab</i>	80
LENVIMA 24MG DAILY	31	<i>levofloxacin</i>	62	<i>lidocaine 4% mucous</i>	55
DOSE PACK (90)		<i>750mg/150ml inj</i>		<i>membrane topical 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>lidocaine 5% ointment</i>	55	<i>lisinopril 40mg tab</i>	24	<i>loryna tab 28-day pack</i>	60
<i>lidocaine 5% patch</i>	55	<i>lisinopril 5mg tab</i>	24	<i>losartan potassium</i>	25
<i>lidocaine viscous 2%</i>	51	LITFULO 50MG CAP	69	<i>100mg tab</i>	
<i>mucous membrane topical soln</i>		<i>lithium carbonate 150mg cap</i>	39	<i>losartan potassium 25mg tab</i>	25
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	55	<i>lithium carbonate 300mg cap</i>	39	<i>losartan potassium 50mg tab</i>	25
<i>lidocan 5% patch</i>	55	<i>lithium carbonate 300mg er tab</i>	39	<i>loteprednol etabonate 0.5% ophth gel</i>	72
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	74	<i>lithium carbonate 300mg tab</i>	39	<i>loteprednol etabonate 0.5% ophth susp</i>	72
<i>linezolid 100mg/5ml oral susp</i>	29	<i>lithium carbonate 450mg er tab</i>	39	<i>lovastatin 10mg tab</i>	24
<i>linezolid 600mg tab</i>	29	LITHIUM CARBONATE 600MG CAP	39	<i>lovastatin 20mg tab</i>	24
<i>linezolid 600mg/300ml inj</i>	29	<i>lithium citrate 60mg/ml oral soln</i>	39	<i>lovastatin 40mg tab</i>	24
LINZESS 145MCG CAP	66	LIVTENCITY 200MG TAF	45	<i>low-ogestrel tab 28-day pack</i>	60
LINZESS 290MCG CAP	66	<i>loestrin fe tab 1/20 28-day pack</i>	60	<i>loxapine 10mg cap</i>	41
LINZESS 72MCG CAP	66	LOKELMA 10GM POWDER FOR ORAL SUSP	69	<i>loxapine 25mg cap</i>	41
<i>liothyronine sodium 25mcg tab</i>	80	LOKELMA 5GM POWDER FOR ORAL SUSP	69	<i>loxapine 50mg cap</i>	41
<i>liothyronine sodium 50mcg tab</i>	80	LONSURF 6.14-15MG TAB	32	<i>loxapine 5mg cap</i>	41
<i>liothyronine sodium 5mcg tab</i>	80	LONSURF 8.19-20MG TAB	32	<i>lubiprostone 24mcg cap</i>	66
<i>liraglutide 18mg/3ml pen inj</i>	20	<i>loperamide 2mg cap</i>	21	<i>lubiprostone 8mcg cap</i>	66
<i>lisdexamfetamine dimesylate 10mg cap</i>	1	<i>lopinavir/ritonavir 100-25mg tab</i>	44	LUMAKRAS 120MG TAB	34
<i>lisdexamfetamine dimesylate 20mg cap</i>	1	<i>lopinavir/ritonavir 200-50mg tab</i>	45	LUMAKRAS 240MG TAB	34
<i>lisdexamfetamine dimesylate 30mg cap</i>	1	<i>lorazepam 0.5mg tab</i>	7	LUMAKRAS 320MG TAB	34
<i>lisdexamfetamine dimesylate 40mg cap</i>	1	<i>lorazepam 1mg tab</i>	7	LUMIGAN 0.01% OPHTH SOLN	72
<i>lisdexamfetamine dimesylate 50mg cap</i>	1	<i>lorazepam 2mg tab</i>	7	LUMRYZ 28-DAY STARTER PACK (28)	78
<i>lisdexamfetamine dimesylate 60mg cap</i>	1	<i>lorazepam 2mg/ml oral soln</i>	7	LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	78
<i>lisdexamfetamine dimesylate 70mg cap</i>	1	LORBRENA 100MG TAB	34	LUMRYZ 6GM GRANULES FOR ORAL SUSP	78
<i>lisinopril 10mg tab</i>	24	LORBRENA 25MG TAB	34	LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	78
<i>lisinopril 2.5mg tab</i>	24			LUMRYZ 9GM GRANULES FOR ORAL SUSP	78
<i>lisinopril 20mg tab</i>	24			LUPKYNIS 7.9MG CAP	69
<i>lisinopril 30mg tab</i>	24			LUPRON 11.25MG SYRINGE (3 MONTH)	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

LUPRON 3.75MG	32	MAVYRET 50-20MG	46	memantine 7mg er cap	75
SYRINGE (1 MONTH)		ORAL PELLETS		MENACTRA INJ	82
<i>lurasidone 120mg tab</i>	39	MAYZENT 0.25MG TAB	76	MENQUADFI INJ	82
<i>lurasidone 20mg tab</i>	39	MAYZENT 1MG TAB	76	MENVEO INJ	82
<i>lurasidone 40mg tab</i>	39	MAYZENT 2MG TAB	76	mercaptopurine 20mg/ml	30
<i>lurasidone 60mg tab</i>	39	MAYZENT TAB STARTEI	76	susp	
<i>lurasidone 80mg tab</i>	39	PACK (12)		mercaptopurine 50mg tab	30
<i>luteria tab 28-day pack</i>	60	MAYZENT TAB STARTEI	76	meropenem 1gm inj	29
<i>lyleq 0.35mg tab 28-day</i>	74	PACK (7)		meropenem 500mg inj	29
<i>pack</i>		<i>meclizine 12.5mg tab</i>	22	mesalamine 1gm rectal	63
<i>lyllana 0.025mg/24hr</i>	62	<i>meclizine 25mg tab</i>	22	supp	
<i>twice weekly patch</i>		medroxyprogesterone	74	mesalamine 375mg er cap	63
<i>lyllana 0.0375mg/24hr</i>	62	<i>acetate 10mg tab</i>		mesalamine 66.7mg/ml	63
<i>twice weekly patch</i>		medroxyprogesterone	74	enema	
<i>lyllana 0.05mg/24hr twice</i>	62	<i>acetate 150mg/ml inj</i>		mesna 400mg tab	38
<i>weekly patch</i>		medroxyprogesterone	74	metaxalone 800mg tab	70
<i>lyllana 0.075mg/24hr</i>	62	<i>acetate 150mg/ml syringe</i>		metformin 1000mg tab	19
<i>twice weekly patch</i>		medroxyprogesterone	74	metformin 500mg er tab	19
<i>lyllana 0.1mg/24hr twice</i>	62	<i>acetate 2.5mg tab</i>		metformin 500mg tab	19
<i>weekly patch</i>		medroxyprogesterone	74	metformin 750mg er tab	19
LYNPARZA 100MG TAB	34	<i>acetate 5mg tab</i>		metformin 850mg tab	19
LYNPARZA 150MG TAB	34	mefloquine 250mg tab	30	methadone 10mg tab	4
LYSODREN 500MG TAB	32	MEGESTROL ACETATE	74	METHADONE 1MG/ML	4
LYTGOBI TAB 12MG	34	125MG/ML SUSP		ORAL SOLN	
DAILEY DOSE PACK (21)		<i>megestrol acetate 20mg</i>	32	METHADONE 2MG/ML	4
LYTGOBI TAB 16MG	34	<i>tab</i>		ORAL SOLN	
DAILEY DOSE PACK (28)		<i>megestrol acetate 40mg</i>	32	<i>methadone 5mg tab</i>	4
LYTGOBI TAB 20MG	34	<i>tab</i>		<i>methazolamide 25mg tab</i>	56
DAILEY DOSE PACK (35)		<i>megestrol acetate</i>	32	<i>methazolamide 50mg tab</i>	56
<i>lyza 0.35mg tab 28-day</i>	74	<i>40mg/ml oral susp</i>		<i>methenamine hippurate</i>	29
<i>pack</i>		MEKINIST 0.05MG/ML	34	<i>1gm tab</i>	
M		ORAL SOLN		<i>methimazole 10mg tab</i>	79
<i>magnesium sulfate</i>	67	MEKINIST 0.5MG TAB	35	<i>methimazole 5mg tab</i>	79
<i>500mg/ml inj</i>		MEKINIST 2MG TAB	35	<i>methocarbamol 500mg</i>	70
<i>magnesium sulfate</i>	67	MEKTOVI 15MG TAB	35	<i>tab</i>	
<i>500mg/ml syringe</i>		<i>meloxicam 15mg tab</i>	4	<i>methocarbamol 750mg</i>	70
<i>malathion 0.5% lotion</i>	55	<i>meloxicam 7.5mg tab</i>	4	<i>tab</i>	
<i>maraviroc 150mg tab</i>	45	<i>memantine 10mg tab</i>	75	<i>methotrexate 2.5mg tab</i>	30
<i>maraviroc 300mg tab</i>	45	<i>memantine 14mg er cap</i>	75	METHOTREXATE	30
<i>marlissa tab 28-day pack</i>	60	<i>memantine 21mg er cap</i>	75	25MG/ML INJ	
MARPLAN 10MG TAB	16	<i>memantine 28mg er cap</i>	75	<i>methotrexate 50mg/2ml</i>	30
MATULANE 50MG CAP	37	<i>memantine 2mg/ml oral</i>	75	<i>inj</i>	
MAVYRET 100-40MG	46	<i>soln</i>		METHOXSALLEN 10MG	53
TAB		<i>memantine 5mg tab</i>	75	CAP	

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

ALPHABETICAL LISTING OF DRUGS

<i>methsuximide 300mg cap</i>	15	<i>metolazone 5mg tab</i>	57	<i>microgestin fe tab 1/20</i>	61
<i>methylphenidate 10mg er tab</i>	1	<i>metoprolol succinate 100mg er tab</i>	47	<i>28-day pack</i>	
<i>methylphenidate 10mg tab</i>	1	<i>metoprolol succinate 200mg er tab</i>	47	<i>midodrine 10mg tab</i>	49
<i>methylphenidate 18mg er osmotic tab</i>	1	<i>metoprolol succinate 25mg er tab</i>	47	<i>midodrine 2.5mg tab</i>	49
<i>methylphenidate 1mg/ml oral soln</i>	1	<i>metoprolol succinate 50mg er tab</i>	47	<i>midodrine 5mg tab</i>	49
<i>methylphenidate 20mg er tab</i>	1	<i>metoprolol tartrate 100mg tab</i>	47	<i>mifepristone 300mg tab</i>	19
<i>methylphenidate 20mg tab</i>	2	<i>metoprolol tartrate 25mg tab</i>	47	<i>mili tab 28-day pack</i>	61
<i>methylphenidate 27mg er osmotic tab</i>	2	<i>metoprolol tartrate 37.5mg tab</i>	47	<i>mimvey 28-day pack</i>	61
<i>methylphenidate 27mg er tab</i>	2	<i>metoprolol tartrate 50mg tab</i>	47	<i>minocycline 100mg cap</i>	79
<i>methylphenidate 2mg/ml oral soln</i>	2	<i>metoprolol tartrate 75mg tab</i>	47	<i>minocycline 50mg cap</i>	79
<i>methylphenidate 36mg er osmotic tab</i>	2	<i>metronidazole 0.75% cream</i>	55	<i>minocycline 75mg cap</i>	79
<i>methylphenidate 36mg er tab</i>	2	<i>metronidazole 0.75% gel</i>	55	<i>minoxidil 10mg tab</i>	28
<i>methylphenidate 54mg er osmotic tab</i>	2	<i>metronidazole 0.75% vaginal gel</i>	83	<i>minoxidil 2.5mg tab</i>	28
<i>methylphenidate 54mg er tab</i>	2	<i>metronidazole 1% gel</i>	55	<i>mirabegron 25mg er tab</i>	81
<i>methylphenidate 5mg tab</i>	2	<i>metronidazole 250mg tab</i>	29	<i>mirabegron 50mg er tab</i>	81
<i>methylprednisolone 16mg tab</i>	51	<i>metronidazole 500mg tab</i>	29	<i>mirtazapine 15mg odt</i>	16
<i>methylprednisolone 32mg tab</i>	51	<i>metronidazole 5mg/ml inj</i>	29	<i>mirtazapine 15mg tab</i>	16
<i>methylprednisolone 4mg tab</i>	51	<i>metyrosine 250mg cap</i>	27	<i>mirtazapine 30mg odt</i>	16
<i>methylprednisolone 4mg tab pack (21)</i>	51	<i>mexiletine 150mg cap</i>	8	<i>mirtazapine 30mg tab</i>	16
<i>methylprednisolone 8mg tab</i>	51	<i>mexiletine 200mg cap</i>	8	<i>mirtazapine 45mg odt</i>	16
<i>metoclopramide 10mg tab</i>	63	<i>mexiletine 250mg cap</i>	8	<i>mirtazapine 45mg tab</i>	16
<i>metoclopramide 1mg/ml oral soln</i>	63	<i>mibelas 24 fe chewable tab 28-day pack</i>	60	<i>mirtazapine 7.5mg tab</i>	16
<i>metoclopramide 5mg tab</i>	63	<i>micafungin sodium 100mg inj</i>	22	<i>misoprostol 100mcg tab</i>	81
<i>metolazone 10mg tab</i>	57	<i>micafungin sodium 50mg inj</i>	22	<i>misoprostol 200mcg tab</i>	81
<i>metolazone 2.5mg tab</i>	57	<i>microgestin 1.5/30 tab 21-day pack</i>	60	<i>M-M-R II INJ</i>	82
		<i>microgestin 1/20 tab 21-day pack</i>	60	<i>modafinil 100mg tab</i>	2
		<i>microgestin fe tab 1.5/30 28-day pack</i>	60	<i>modafinil 200mg tab</i>	2
				<i>moexipril 15mg tab</i>	24
				<i>moexipril 7.5mg tab</i>	24
				<i>MOLINDONE 10MG TAB</i>	40
				<i>MOLINDONE 25MG TAB</i>	40
				<i>MOLINDONE 5MG TAB</i>	40
				<i>mometasone furoate 0.1% cream</i>	54
				<i>mometasone furoate 0.1% lotion</i>	54
				<i>mometasone furoate 0.1% ointment</i>	54
				<i>montelukast 10mg tab</i>	9
				<i>montelukast 4mg chew tab</i>	9
				<i>montelukast 5mg chew tab</i>	9

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

ALPHABETICAL LISTING OF DRUGS

<i>morphine sulfate 100mg er tab</i>	4	MRESVIA 50MCG/0.5ML SYRINGE	82	NAYZILAM 5MG/0.1ML NASAL SPRAY	12
<i>morphine sulfate 15mg er tab</i>	4	MULTAQ 400MG TAB	8	<i>necon 0.5/35 tab 28-day pack</i>	61
<i>morphine sulfate 15mg tab</i>	4	<i>mupirocin 2% ointment</i>	52	NEFAZODONE 100MG TAB	17
<i>morphine sulfate 200mg er tab</i>	4	<i>mycophenolate mofetil 200mg/ml oral susp</i>	69	NEFAZODONE 150MG TAB	17
<i>morphine sulfate 20mg/ml oral soln</i>	4	<i>mycophenolate mofetil 250mg cap</i>	69	NEFAZODONE 200MG TAB	17
<i>morphine sulfate 2mg/ml oral soln</i>	4	<i>mycophenolate mofetil 500mg tab</i>	69	NEFAZODONE 250MG TAB	17
<i>morphine sulfate 30mg er tab</i>	5	<i>mycophenolic acid 180mg dr tab</i>	69	NEFAZODONE 50MG TAB	17
<i>morphine sulfate 30mg tab</i>	5	<i>mycophenolic acid 360mg dr tab</i>	69	NEMLUVIO 30MG AUTO-INJECTOR	68
<i>morphine sulfate 4mg/ml oral soln</i>	5	N		<i>neomycin sulfate 500mg tab</i>	2
<i>morphine sulfate 60mg er tab</i>	5	<i>nabumetone 500mg tab</i>	4	<i>neomycin/bacitracin/poly myxin</i>	71
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	20	<i>nabumetone 750mg tab</i>	4	<i>5mg-400unit-10000unit ophth ointment</i>	
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	20	<i>nadolol 20mg tab</i>	47	NEOMYCIN/POLYMYXI	71
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	20	<i>nadolol 40mg tab</i>	47	N B/GRAMICIDIN	
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	20	<i>nadolol 80mg tab</i>	47	1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	20	<i>nafacillin 100mg/ml inj</i>	74	<i>neomycin/polymyxin/bacit racin/hydrocortisone ophth 1% ointment</i>	72
MOVANTIK 12.5MG TAB	66	<i>nafacillin 1gm inj</i>	74	<i>neomycin/polymyxin/dexa methasone 0.1% ophth susp</i>	72
MOVANTIK 25MG TAB	66	<i>nafacillin 2gm inj</i>	74	<i>neomycin/polymyxin/hydr ocortisone</i>	73
<i>moxifloxacin 0.5% ophth soln</i>	71	NALOXONE 0.4MG/ML CARTRIDGE	21	<i>3.5-10000unit-1% otic soln</i>	
MOXIFLOXACIN 1.6MG/ML INJ	63	<i>naloxone 0.4mg/ml inj</i>	21	<i>neomycin/polymyxin/hydr ocortisone</i>	73
<i>moxifloxacin 400mg tab</i>	63	NALOXONE 0.4MG/ML SYRINGE	21	<i>3.5-10000unit-1% otic susp</i>	
		<i>naloxone 1mg/ml syringe</i>	21	<i>neo-polycin</i>	71
		<i>naltrexone 50mg tab</i>	21	<i>5mg-400unit-10000unit ophth ointment</i>	
		<i>naproxen 250mg tab</i>	4		
		<i>naproxen 375mg dr tab</i>	4		
		<i>naproxen 375mg tab</i>	4		
		<i>naproxen 500mg tab</i>	4		
		<i>naproxen sodium 275mg tab</i>	4		
		<i>naproxen sodium 550mg tab</i>	4		
		<i>naratriptan 1mg tab</i>	66		
		<i>naratriptan 2.5mg tab</i>	66		
		NATACYN 5% OPHTH SUSP	71		
		<i>nateglinide 120mg tab</i>	19		
		<i>nateglinide 60mg tab</i>	19		

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

ALPHABETICAL LISTING OF DRUGS

<i>neo-polycin hc ophth ointment</i>	72	<i>nitrofurantoin macrocrystals 50mg cap</i>	29	<i>nortrel 1/35 tab 21-day pack</i>	61
NERLYNX 40MG TAB	35	<i>nitroglycerin 0.1mg/hr patch</i>	6	<i>nortrel 1/35 tab 28-day pack</i>	61
NEVIRAPINE 10MG/ML	45	<i>nitroglycerin 0.2mg/hr patch</i>	7	<i>nortrel 7/7/7 tab 28-day pack</i>	61
ORAL SUSP		<i>nitroglycerin 0.3mg sl tab</i>	7	<i>nortriptyline 10mg cap</i>	18
<i>nevirapine 200mg tab</i>	45	<i>nitroglycerin 0.4% rectal ointment</i>	6	<i>nortriptyline 25mg cap</i>	18
<i>nevirapine 400mg er tab</i>	45	<i>nitroglycerin 0.4mg sl tab</i>	7	<i>nortriptyline 2mg/ml oral soln</i>	18
NEXLETOL 180MG TAB	23	<i>nitroglycerin 0.4mg/hr patch</i>	7	<i>nortriptyline 50mg cap</i>	18
NEXLIZET 180-10MG TAB	23	<i>nitroglycerin 0.6mg sl tab</i>	7	<i>nortriptyline 75mg cap</i>	18
NEXPLANON 68MG IMPLANT	74	<i>nitroglycerin 0.6mg/hr patch</i>	7	NORVIR 100MG ORAL	45
<i>niacin 1000mg er tab</i>	23	NIVESTYM	64	POWDER	
<i>niacin 500mg er tab</i>	23	300MCG/0.5ML		NUBEQA 300MG TAB	32
<i>niacin 750mg er tab</i>	23	SYRINGE		NUCALA 100MG INJ	8
NICOTROL 10MG/ML	76	NIVESTYM 300MCG/ML	64	NUCALA 100MG/ML	8
NASAL INHALER		INJ		AUTO-INJECTOR	
<i>nifedipine 30mg er tab</i>	48	NIVESTYM	64	NUCALA 100MG/ML	8
<i>nifedipine 30mg osmotic er tab</i>	48	480MCG/0.8ML		SYRINGE	
<i>nifedipine 60mg er tab</i>	48	SYRINGE		NUCALA 40MG/0.4ML	8
<i>nifedipine 60mg osmotic er tab</i>	48	NIVESTYM	64	SYRINGE	
<i>nifedipine 90mg er tab</i>	48	480MCG/1.6ML INJ		NUDEXTA 20-10MG	76
<i>nifedipine 90mg osmotic er tab</i>	48	<i>nora-be 0.35mg tab</i>	74	CAP	
<i>nikki tab 28-day pack</i>	61	<i>28-day pack</i>		NUPLAZID 10MG TAB	40
<i>nilotinib 150mg cap</i>	35	NORDITROPIN	57	NUPLAZID 34MG CAP	40
<i>nilotinib 200mg cap</i>	35	10MG/1.5ML PEN INJ		<i>nyamyc 100000unit/gm topical powder</i>	53
<i>nilotinib 50mg cap</i>	35	NORDITROPIN	57	<i>nylia 1/35 tab 28-day pack</i>	61
<i>nilutamide 150mg tab</i>	32	15MG/1.5ML PEN INJ		<i>nylia 7/7/7 tab 28-day pack</i>	61
<i>nimodipine 30mg cap</i>	48	NORDITROPIN	57	<i>nystatin 100000 unit/gm ointment</i>	53
NINLARO 2.3MG CAP	35	30MG/3ML PEN INJ		<i>nystatin 100000unit/gm topical powder</i>	53
NINLARO 3MG CAP	35	NORDITROPIN	57	<i>nystatin 100000unit/ml cream</i>	53
NINLARO 4MG CAP	35	5MG/1.5ML PEN INJ		<i>nystatin 100000unit/ml oral susp</i>	51
<i>nitazoxanide 500mg tab</i>	29	<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	61	<i>nystatin 500000unit tab</i>	22
NITRO-BID 2%	6	<i>norethindrone 0.35mg 28-day pack</i>	74	<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	53
OINTMENT		<i>norethindrone acetate 5mg tab</i>	74		
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	29	<i>nortrel 0.5/35 tab 28-day pack</i>	61		
<i>nitrofurantoin macrocrystals 100mg cap</i>	29				

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

ALPHABETICAL LISTING OF DRUGS

<i>nystatin/triamcinolone</i>	53	<i>olanzapine 10mg inj</i>	41	OPVEE 2.7MG/0.1ML	21
<i>acetonide</i>		<i>olanzapine 10mg odt</i>	41	NASAL SPRAY	
<i>100000-0.1unit/gm-%</i>		<i>olanzapine 10mg tab</i>	41	ORENCIA 125MG/ML	4
<i>cream</i>		<i>olanzapine 15mg odt</i>	41	AUTO-INJECTOR	
<i>nystop 100000unit/gm</i>	53	<i>olanzapine 15mg tab</i>	41	ORENCIA 125MG/ML	4
<i>topical powder</i>		<i>olanzapine 2.5mg tab</i>	42	SYRINGE	
NYVEPRIA 6MG/0.6ML	64	<i>olanzapine 20mg odt</i>	42	ORENCIA 50MG/0.4ML	4
SYRINGE		<i>olanzapine 20mg tab</i>	42	SYRINGE	
O		<i>olanzapine 5mg odt</i>	42	ORENCIA 87.5MG/0.7ML	4
<i>ocella tab 28-day pack</i>	61	<i>olanzapine 5mg tab</i>	42	SYRINGE	
OCTAGAM 1GM/20ML	73	<i>olanzapine 7.5mg tab</i>	42	ORGOVYX 120MG TAB	32
INJ		<i>olmesartan medoxomil</i>	25	ORKAMBI 125-100MG	77
OCTAGAM 2GM/20ML	73	<i>20mg tab</i>		ORAL GRANULES	
INJ		<i>olmesartan medoxomil</i>	25	ORKAMBI 125-100MG	77
<i>octreotide 0.05mg/ml inj</i>	58	<i>40mg tab</i>		TAB	
<i>octreotide 0.1mg/ml inj</i>	58	<i>olmesartan medoxomil</i>	25	ORKAMBI 125-200MG	77
<i>octreotide 0.2mg/ml inj</i>	58	<i>5mg tab</i>		TAB	
<i>octreotide 0.5mg/ml inj</i>	58	<i>olopatadine 0.6%</i>	70	ORKAMBI 188-150MG	77
<i>octreotide 1mg/ml inj</i>	58	<i>(0.665mg/act) nasal</i>		ORAL GRANULES	
ODEFSEY 200-25-25MG	45	<i>inhaler</i>		ORKAMBI 94-75MG	77
TAB		OLUMIANT 1MG TAB	2	ORAL GRANULES	
ODOMZO 200MG CAP	31	OLUMIANT 2MG TAB	2	<i>orphenadrine citrate</i>	70
OFEV 100MG CAP	77	OLUMIANT 4MG TAB	2	<i>100mg er tab</i>	
OFEV 150MG CAP	77	<i>omega-3 acid ethyl esters</i>	23	ORSERDU 345MG TAB	32
<i>ofloxacin 0.3% ophth soln</i>	71	<i>(usp) 1gm cap</i>		ORSERDU 86MG TAB	32
<i>ofloxacin 0.3% otic soln</i>	73	<i>omeprazole 10mg dr cap</i>	81	<i>oseltamivir 30mg cap</i>	46
OGSIVEO 100MG TAB	35	<i>omeprazole 20mg dr cap</i>	81	<i>oseltamivir 45mg cap</i>	46
7-DAY PACK (14)		<i>omeprazole 40mg dr cap</i>	81	<i>oseltamivir 6mg/ml oral</i>	46
OGSIVEO 150MG TAB	35	OMNITROPE	57	<i>susp</i>	
7-DAY PACK (14)		10MG/1.5ML		<i>oseltamivir 75mg cap</i>	46
OGSIVEO 50MG TAB	35	CARTRIDGE		OTEZLA 20MG TAB	53
OJEMDA 100MG TAB	35	OMNITROPE 5.8MG INJ	57	OTEZLA 30MG TAB	53
OJEMDA 100MG TAB	35	OMNITROPE	57	OTEZLA TAB 28-DAY	53
PACK (400MG ONCE		5MG/1.5ML CARTRIDGE		STARTER PACK (55)	
WEEKLY) (16)		<i>ondansetron 0.8mg/ml</i>	21	<i>oxacillin 100mg/ml inj</i>	74
OJEMDA 100MG TAB	35	<i>oral soln</i>		<i>oxacillin 1gm inj</i>	74
PACK (600MG ONCE		<i>ondansetron 4mg odt</i>	21	<i>oxacillin 2gm inj</i>	74
WEEKLY) (24)		<i>ondansetron 4mg tab</i>	21	<i>oxcarbazepine 150mg tab</i>	13
OJEMDA 25MG/ML	35	<i>ondansetron 8mg odt</i>	21	<i>oxcarbazepine 300mg tab</i>	13
POWDER FOR ORAL		<i>ondansetron 8mg tab</i>	22	<i>oxcarbazepine 600mg tab</i>	13
SUSP		ONUREG 200MG TAB	31	<i>oxcarbazepine 60mg/ml</i>	13
OJJAARA 100MG TAB	35	ONUREG 300MG TAB	31	<i>oral susp</i>	
OJJAARA 150MG TAB	35	OPSUMIT 10MG TAB	78	<i>oxybutynin chloride 10mg</i>	81
OJJAARA 200MG TAB	35			<i>er tab</i>	

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

ALPHABETICAL LISTING OF DRUGS

<i>oxybutynin chloride 15mg er tab</i>	81	PAROXETINE 10MG/ML SUSP	16	PENICILLIN G SODIUM 100000UNIT/ML INJ	73
<i>oxybutynin chloride 1mg/ml oral soln</i>	81	<i>paroxetine 12.5mg er tab</i>	16	<i>penicillin v potassium 250mg tab</i>	73
<i>oxybutynin chloride 5mg er tab</i>	81	<i>paroxetine 20mg tab</i>	16	PENICILLIN V	73
<i>oxybutynin chloride 5mg tab</i>	81	<i>paroxetine 25mg er tab</i>	16	POTASSIUM 25MG/ML ORAL SOLN	
<i>oxycodone 10mg tab</i>	5	<i>paroxetine 30mg tab</i>	16	<i>penicillin v potassium 500mg tab</i>	73
<i>oxycodone 15mg tab</i>	5	<i>paroxetine 37.5mg er tab</i>	16	PENICILLIN V	73
<i>oxycodone 1mg/ml oral soln</i>	5	<i>paroxetine 40mg tab</i>	16	POTASSIUM 50MG/ML ORAL SOLN	
<i>oxycodone 20mg tab</i>	5	PAXLOVID	46	PENTACEL	80
<i>oxycodone 30mg tab</i>	5	150MG/100MG TAB		96-30-68UNIT/ML INJ	
<i>oxycodone 5mg tab</i>	5	PACK (20)		<i>pentamidine isethionate 300mg inj</i>	29
<i>oxycodone/acetaminophen 10-325mg tab</i>	5	PAXLOVID	46	<i>pentamidine isethionate 300mg/6ml inh soln</i>	29
<i>oxycodone/acetaminophen 2.5-325mg tab</i>	5	150MG/100MG TAB		<i>pentoxifylline 400mg er tab</i>	49
<i>oxycodone/acetaminophen 5-325mg tab</i>	5	PACK (30)		<i>perampanel 10mg tab</i>	13
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	5	PAXLOVID	46	<i>perampanel 12mg tab</i>	13
OZEMPIC 2.68MG/ML PEN INJ	20	300MG/100MG AND 150MG/100MG TAB		<i>perampanel 2mg tab</i>	13
OZEMPIC 2MG/3ML PEN INJ	20	DOSE PACK (11)		<i>perampanel 4mg tab</i>	13
OZEMPIC 4MG/3ML PEN INJ	20	<i>pazopanib 200mg tab</i>	35	<i>perampanel 6mg tab</i>	13
		PEDIARIX SYRINGE	80	<i>perampanel 8mg tab</i>	13
		PEDVAXHIB	82	PERINDOPRIL	24
		7.5MCG/0.5ML INJ		ERBUMINE 2MG TAB	
		<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	65	<i>perindopril erbumine 4mg tab</i>	24
		<i>peg 3350/electrolyte powder for oral soln</i>	65	PERINDOPRIL	24
		<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	65	ERBUMINE 8MG TAB	
P				<i>periogard 0.12% mouthwash</i>	51
<i>pacerone 100mg tab</i>	8	PEGASYS	46	<i>permethrin 5% cream</i>	55
<i>pacerone 200mg tab</i>	8	180MCG/0.5ML SYRINGE		<i>perphenazine 16mg tab</i>	42
<i>pacerone 400mg tab</i>	8	PEGASYS 180MCG/ML INJ	46	<i>perphenazine 2mg tab</i>	42
<i>paliperidone 1.5mg er tab</i>	40	PEMAZYRE 13.5MG TAB	35	<i>perphenazine 4mg tab</i>	42
<i>paliperidone 3mg er tab</i>	40	PEMAZYRE 4.5MG TAB	35	<i>perphenazine 8mg tab</i>	42
<i>paliperidone 6mg er tab</i>	40	PEMAZYRE 9MG TAB	35	PERSERIS 120MG SYRINGE	40
<i>paliperidone 9mg er tab</i>	40	PENBRAYA INJ	82	PERSERIS 90MG SYRINGE	40
PANRETIN 0.1% GEL	53	<i>penicillamine 250mg tab</i>	68	PHENELZINE 15MG TAB	16
<i>pantoprazole 20mg dr tab</i>	81	<i>penicillin g potassium 1000000unit/ml inj</i>	73		
<i>pantoprazole 40mg dr tab</i>	81				
<i>paricalcitol 1mcg cap</i>	58				
<i>paricalcitol 2mcg cap</i>	58				
<i>paricalcitol 4mcg cap</i>	58				
<i>paroxetine 10mg tab</i>	16				

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

ALPHABETICAL LISTING OF DRUGS

<i>phenobarbital 100mg tab</i>	13	PIQRAY TAB 250MG	35	POTASSIUM CHLORIDE	68
<i>phenobarbital 15mg tab</i>	13	DAILY DOSE PACK (56)		15MEQ ER TAB	
<i>phenobarbital 16.2mg tab</i>	13	PIQRAY TAB 300MG	35	<i>potassium chloride</i>	68
<i>phenobarbital 30mg tab</i>	14	DAILY DOSE PACK (56)		<i>15meq micro er tab</i>	
<i>phenobarbital 32.4mg tab</i>	14	<i>pirfenidone 267mg cap</i>	77	<i>potassium chloride</i>	68
<i>phenobarbital 4mg/ml</i>	14	<i>pirfenidone 267mg tab</i>	77	<i>2.67meq/ml oral soln</i>	
<i>oral soln</i>		<i>pirfenidone 801mg tab</i>	77	<i>potassium chloride</i>	68
<i>phenobarbital 60mg tab</i>	14	<i>piroxicam 10mg cap</i>	4	<i>20meq er tab</i>	
<i>phenobarbital 64.8mg tab</i>	14	<i>piroxicam 20mg cap</i>	4	<i>potassium chloride</i>	68
<i>phenobarbital 97.2mg tab</i>	14	PLASMA-LYTE A INJ	67	<i>20meq micro er tab</i>	
<i>phenytoin 25mg/ml oral</i>	14	PLEGRIDY	76	<i>potassium chloride</i>	68
<i>susp</i>		125MCG/0.5ML		<i>20meq powder for oral</i>	
<i>phenytoin 50mg chew tab</i>	14	AUTO-INJECTOR		<i>soln</i>	
<i>phenytoin sodium 100mg</i>	14	PLEGRIDY	76	POTASSIUM CHLORIDE	68
<i>er cap</i>		125MCG/0.5ML		20MEQ/100ML INJ	
PIFELTRO 100MG TAB	45	SYRINGE		<i>potassium chloride</i>	68
<i>pilocarpine 1% ophth</i>	72	<i>plenamine 15% inj</i>	70	<i>2meq/ml (20ml) inj</i>	
<i>soln</i>		PODOFILOX 0.5%	55	<i>potassium chloride</i>	68
<i>pilocarpine 2% ophth</i>	72	TOPICAL SOLN		<i>2meq/ml inj</i>	
<i>soln</i>		<i>polycin 0.5-10unit/mg</i>	71	POTASSIUM CHLORIDE	68
<i>pilocarpine 4% ophth</i>	72	<i>ophth ointment</i>		40MEQ/100ML INJ	
<i>soln</i>		<i>polymyxin b/trimethoprim</i>	71	<i>potassium chloride 8meq</i>	68
<i>pilocarpine 5mg tab</i>	51	<i>10000 unit/ml-0.1%</i>		<i>er cap</i>	
<i>pilocarpine 7.5mg tab</i>	51	<i>ophth soln</i>		<i>potassium chloride 8meq</i>	68
<i>pimecrolimus 1% cream</i>	55	POMALYST 1MG CAP	37	<i>er tab</i>	
PIMOZIDE 1MG TAB	76	POMALYST 2MG CAP	37	<i>potassium citrate 10meq</i>	63
PIMOZIDE 2MG TAB	76	POMALYST 3MG CAP	37	<i>er tab</i>	
<i>pimtrea tab 28-day pack</i>	61	POMALYST 4MG CAP	37	<i>potassium citrate 15meq</i>	63
<i>pindolol 10mg tab</i>	47	<i>portia tab 28-day pack</i>	61	<i>er tab</i>	
<i>pindolol 5mg tab</i>	47	<i>posaconazole 100mg dr</i>	22	<i>potassium citrate 5meq er</i>	63
<i>pioglitazone 15mg tab</i>	19	<i>tab</i>		<i>tab</i>	
<i>pioglitazone 30mg tab</i>	19	<i>posaconazole 40mg/ml</i>	22	<i>pramipexole 0.125mg tab</i>	38
<i>pioglitazone 45mg tab</i>	20	<i>oral susp</i>		<i>pramipexole 0.25mg tab</i>	38
<i>piperacillin/tazobactam</i>	74	<i>potassium chloride</i>	68	<i>pramipexole 0.5mg tab</i>	38
<i>2000-250mg inj</i>		<i>1.33meq/ml oral soln</i>		<i>pramipexole 0.75mg tab</i>	38
<i>piperacillin/tazobactam</i>	74	<i>potassium chloride</i>	68	<i>pramipexole 1.5mg tab</i>	38
<i>3000-375mg inj</i>		<i>10meq er cap</i>		<i>pramipexole 1mg tab</i>	38
<i>piperacillin/tazobactam</i>	74	<i>potassium chloride</i>	68	<i>prasugrel 10mg tab</i>	64
<i>36-4.5gm inj</i>		<i>10meq er tab</i>		<i>prasugrel 5mg tab</i>	64
<i>piperacillin/tazobactam</i>	74	<i>potassium chloride</i>	68	<i>pravastatin sodium 10mg</i>	24
<i>4000-500mg inj</i>		<i>10meq micro er tab</i>		<i>tab</i>	
PIQRAY TAB 200MG	35	POTASSIUM CHLORIDE	68	<i>pravastatin sodium 20mg</i>	24
DAILY DOSE PACK (28)		10MEQ/100ML INJ		<i>tab</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>pravastatin sodium 40mg tab</i>	24	PREMARIN 1.25MG TAB	62	PROGRAF 0.2MG GRANULES FOR ORAL SUSP	69
<i>pravastatin sodium 80mg tab</i>	24	PREMPHASE 28-DAY PACK	61	PROGRAF 1MG GRANULES FOR ORAL SUSP	69
<i>praziquantel 600mg tab</i>	6	PREMPRO 0.3/1.5MG 28-DAY PACK	61	PROLASTIN 1000MG INJ	77
<i>prazosin 1mg cap</i>	25	PREMPRO 0.45/1.5MG 28-DAY PACK	61	<i>promethazine 1.25mg/ml oral soln</i>	77
<i>prazosin 2mg cap</i>	25	PREMPRO 0.625/2.5MG 28-DAY PACK	61	<i>promethazine 12.5mg tab</i>	77
<i>prazosin 5mg cap</i>	26	PREMPRO 0.625/5MG 28-DAY PACK	61	<i>promethazine 25mg tab</i>	77
PREDNISOLONE 1% OPTH SOLN	72	<i>prevalite 4gm powder for oral susp</i>	23	<i>promethazine 50mg tab</i>	77
<i>prednisolone 1mg/ml oral soln</i>	51	PREVYMIS 120MG ORAL PELLET	45	<i>propafenone 150mg tab</i>	8
<i>prednisolone 3mg/ml oral soln</i>	51	PREVYMIS 240MG TAB	45	<i>propafenone 225mg er cap</i>	8
<i>prednisolone 5mg/ml oral soln</i>	51	PREVYMIS 480MG TAB	45	<i>propafenone 225mg tab</i>	8
<i>prednisolone acetate 1% ophth susp</i>	72	PREZCOBIX 150-800MG TAB	45	<i>propafenone 300mg tab</i>	8
<i>prednisone 10mg tab</i>	51	PREZISTA 100MG/ML ORAL SUSP	45	<i>propafenone 325mg er cap</i>	8
<i>prednisone 1mg tab</i>	51	PREZISTA 150MG TAB	45	<i>propafenone 425mg er cap</i>	8
PREDNISON 1MG/ML ORAL SOLN	51	PREZISTA 75MG TAB	45	<i>propranolol 10mg tab</i>	47
<i>prednisone 2.5mg tab</i>	51	PRIFTIN 150MG TAB	30	<i>propranolol 120mg er cap</i>	47
<i>prednisone 20mg tab</i>	51	PRIMAQUINE	30	<i>propranolol 160mg er cap</i>	47
<i>prednisone 50mg tab</i>	51	PHOSPHATE 26.3MG TAB		<i>propranolol 20mg tab</i>	47
<i>prednisone 5mg tab</i>	51	<i>primidone 250mg tab</i>	14	<i>propranolol 40mg tab</i>	47
<i>pregabalin 100mg cap</i>	14	<i>primidone 50mg tab</i>	14	PROPRANOLOL 4MG/ML ORAL SOLN	47
<i>pregabalin 150mg cap</i>	14	PRIORIX INJ	82	<i>propranolol 60mg er cap</i>	47
<i>pregabalin 200mg cap</i>	14	PRIVIGEN 20GM/200ML INJ	73	<i>propranolol 60mg tab</i>	47
<i>pregabalin 20mg/ml oral soln</i>	14	<i>probenecid 500mg tab</i>	64	<i>propranolol 80mg er cap</i>	47
<i>pregabalin 225mg cap</i>	14	<i>prochlorperazine 10mg tab</i>	42	<i>propranolol 80mg tab</i>	47
<i>pregabalin 25mg cap</i>	14	<i>prochlorperazine 25mg rectal supp</i>	42	PROPRANOLOL 8MG/ML ORAL SOLN	47
<i>pregabalin 300mg cap</i>	14	<i>prochlorperazine 5mg tab</i>	42	<i>propylthiouracil 50mg tab</i>	79
<i>pregabalin 50mg cap</i>	14	<i>procto-med 2.5% cream</i>	6	PROQUAD INJ	82
<i>pregabalin 75mg cap</i>	14	<i>proctosol 2.5% cream</i>	6	PROSOL 20% INJ	71
PREMARIN 0.3MG TAB	62	<i>proctozone hc 2.5% cream</i>	6	<i>protriptyline 10mg tab</i>	18
PREMARIN 0.45MG TAB	62	<i>progesterone 100mg cap</i>	74	<i>protriptyline 5mg tab</i>	18
PREMARIN 0.625MG TAB	62	<i>progesterone 200mg cap</i>	74	PULMOZYME 1MG/ML INH SOLN	77
PREMARIN 0.625MG/GM VAGINAL CREAM	83				
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

PURIXAN	31	<i>raloxifene 60mg tab</i>	57	RETACRIT	64
2000MG/100ML ORAL SUSP		<i>ramelteon 8mg tab</i>	65	40000UNIT/ML INJ	
<i>pyrazinamide 500mg tab</i>	30	<i>ramipril 1.25mg cap</i>	25	RETACRIT 4000UNIT/ML INJ	65
<i>pyridostigmine bromide 60mg tab</i>	30	<i>ramipril 10mg cap</i>	25	RETEVMO 120MG TAB	35
<i>pyrimethamine 25mg tab</i>	30	<i>ramipril 2.5mg cap</i>	25	RETEVMO 160MG TAB	35
		<i>ramipril 5mg cap</i>	25	RETEVMO 40MG CAP	35
Q		<i>ranolazine 1000mg er tab</i>	49	RETEVMO 40MG TAB	35
QINLOCK 50MG TAB	35	<i>ranolazine 500mg er tab</i>	49	RETEVMO 80MG CAP	35
QUADRACEL INJ	80	<i>rasagiline 0.5mg tab</i>	39	RETEVMO 80MG TAB	35
QUADRACEL SYRINGE	80	<i>rasagiline 1mg tab</i>	39	REVUFORJ 110MG TAB	37
<i>quetiapine 100mg tab</i>	42	<i>reclipsen tab 28-day pack</i>	61	REVUFORJ 160MG TAB	37
<i>quetiapine 150mg er tab</i>	42	RECOMBIVAX	82	REVUFORJ 25MG TAB	37
<i>quetiapine 200mg er tab</i>	42	10MCG/ML INJ		REXULTI 0.25MG TAB	43
<i>quetiapine 200mg tab</i>	42	RECOMBIVAX	82	REXULTI 0.5MG TAB	43
<i>quetiapine 25mg tab</i>	42	10MCG/ML SYRINGE		REXULTI 1MG TAB	43
<i>quetiapine 300mg er tab</i>	42	RECOMBIVAX	82	REXULTI 2MG TAB	43
<i>quetiapine 300mg tab</i>	42	40MCG/ML INJ		REXULTI 3MG TAB	43
<i>quetiapine 400mg er tab</i>	42	RECOMBIVAX	82	REXULTI 4MG TAB	43
<i>quetiapine 400mg tab</i>	42	5MCG/0.5ML INJ		REYATAZ 50MG ORAL POWDER	45
<i>quetiapine 50mg er tab</i>	42	RECOMBIVAX	82	REZDIFFRA 100MG TAB	63
<i>quetiapine 50mg tab</i>	42	5MCG/0.5ML SYRINGE		REZDIFFRA 60MG TAB	63
<i>quinapril 10mg tab</i>	25	REGRANEX 0.01% GEL	55	REZDIFFRA 80MG TAB	63
<i>quinapril 20mg tab</i>	25	RELENZA 5MG/BLISTER	46	REZLIDHIA 150MG CAP	35
<i>quinapril 40mg tab</i>	25	POWDER INHALER		REZUROCK 200MG TAB	68
<i>quinapril 5mg tab</i>	25	<i>repaglinide 0.5mg tab</i>	20	RHOPRESSA 0.02%	71
QUINIDINE SULFATE 200MG TAB	7	<i>repaglinide 1mg tab</i>	20	OPHTH SOLN	
QUINIDINE SULFATE 300MG TAB	7	<i>repaglinide 2mg tab</i>	20	RIBAVIRIN 200MG CAP	46
<i>quinine sulfate 324mg cap</i>	30	REPATHA 140MG/ML	23	RIBAVIRIN 200MG TAB	46
QVAR 40MCG	9	AUTO-INJECTOR		<i>rifabutin 150mg cap</i>	30
REDIHALER		REPATHA 140MG/ML	23	<i>rifampin 150mg cap</i>	30
QVAR 80MCG	9	SYRINGE		<i>rifampin 300mg cap</i>	30
REDIHALER		REPATHA 420MG/3.5ML	23	<i>rifampin 600mg inj</i>	30
R		CARTRIDGE		<i>riluzole 50mg tab</i>	70
RABAVERT 2.5UNIT/ML INJ	82	RETACRIT	64	RIMANTADINE 100MG TAB	46
RADICAVA 105MG/5ML	70	10000UNIT/ML INJ		RINVOQ 15MG ER TAB	2
ORAL SUSP		RETACRIT	64	RINVOQ 1MG/ML ORAL SOLN	2
RALDESY 10MG/ML	17	20000UNIT/2ML INJ		RINVOQ 30MG ER TAB	2
ORAL SOLN		RETACRIT	64	RINVOQ 45MG ER TAB	2
		2000UNIT/ML INJ		<i>risedronate sodium 150mg 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>risedronate sodium 30mg tab</i>	57	<i>rizatriptan 10mg tab</i>	66	RUKOBIA 600MG ER	45
<i>risedronate sodium 35mg tab</i>	57	<i>rizatriptan 5mg odt</i>	66	TAB	
<i>risedronate sodium 35mg tab pack (12)</i>	57	<i>rizatriptan 5mg tab</i>	66	RYBELSUS 14MG TAB	20
<i>risedronate sodium 35mg tab pack (4)</i>	57	ROCKLATAN	72	RYBELSUS 3MG TAB	20
<i>risedronate sodium 5mg tab</i>	57	0.02-0.005% OPTH SOLN		RYBELSUS 7MG TAB	20
RISPERIDONE 0.25MG ODT	40	<i>roflumilast 0.5mg tab</i>	78	RYDAPT 25MG CAP	36
<i>risperidone 0.25mg tab</i>	41	<i>roflumilast 250mcg tab</i>	78	S	
<i>risperidone 0.5mg odt</i>	41	ROMVIMZA 14MG CAP	35	<i>sajazir 30mg/3ml syringe</i>	65
<i>risperidone 0.5mg tab</i>	41	ROMVIMZA 20MG CAP	35	<i>salmon calcitonin 200unit/act nasal spray</i>	57
<i>risperidone 1mg odt</i>	41	ROMVIMZA 30MG CAP	35	SANTYL 250UNIT/GM OINTMENT	55
<i>risperidone 1mg tab</i>	41	<i>ropinirole 0.25mg tab</i>	39	<i>sapropterin 100mg powder for oral soln</i>	58
<i>risperidone 1mg/ml oral soln</i>	41	<i>ropinirole 0.5mg tab</i>	39	<i>sapropterin 100mg tab</i>	58
<i>risperidone 2mg odt</i>	41	<i>ropinirole 1mg tab</i>	39	<i>sapropterin 500mg powder for oral soln</i>	58
<i>risperidone 2mg tab</i>	41	<i>ropinirole 2mg tab</i>	39	SCSEMBLIX 100MG TAB	36
<i>risperidone 37.5mg inj</i>	41	<i>ropinirole 3mg tab</i>	39	SCSEMBLIX 20MG TAB	36
<i>risperidone 3mg odt</i>	41	<i>ropinirole 4mg tab</i>	39	SCSEMBLIX 40MG TAB	36
<i>risperidone 3mg tab</i>	41	<i>ropinirole 5mg tab</i>	39	<i>scopolamine 1mg/72hr patch</i>	22
<i>risperidone 4mg odt</i>	41	<i>rosuvastatin calcium 10mg tab</i>	24	SECUADO 3.8MG/24HR PATCH	42
<i>risperidone 4mg tab</i>	41	<i>rosuvastatin calcium 20mg tab</i>	24	SECUADO 5.7MG/24HR PATCH	42
<i>risperidone 50mg inj</i>	41	<i>rosuvastatin calcium 40mg tab</i>	24	SECUADO 7.6MG/24HR PATCH	42
<i>risperidone microspheres 12.5mg inj</i>	41	<i>rosuvastatin calcium 5mg tab</i>	24	<i>selegiline 5mg cap</i>	39
<i>risperidone microspheres 25mg inj</i>	41	ROTARIX	82	<i>selenium sulfide 2.5% shampoo</i>	55
<i>ritonavir 100mg tab</i>	45	667000UNIT/ML ORAL SUSP	82	SELZENTRY 20MG/ML ORAL SOLN	45
<i>rivaroxaban 2.5mg tab</i>	10	<i>roweepra 500mg tab</i>	14	<i>sertraline 100mg tab</i>	16
<i>rivastigmine 1.5mg cap</i>	75	ROZLYTREK 100MG CAP	35	<i>sertraline 20mg/ml oral soln</i>	16
<i>rivastigmine 13.3mg/24hr patch</i>	75	ROZLYTREK 200MG CAP	35	<i>sertraline 25mg tab</i>	17
<i>rivastigmine 3mg cap</i>	75	ROZLYTREK 50MG ORAL PELLET	35	<i>sertraline 50mg tab</i>	17
<i>rivastigmine 4.5mg cap</i>	75	RUBRACA 200MG TAB	35	<i>setlakin tab 91-day pack</i>	61
<i>rivastigmine 4.6mg/24hr patch</i>	75	RUBRACA 250MG TAB	35	<i>sharobel 0.35mg tab 28-day pack</i>	74
<i>rivastigmine 6mg cap</i>	75	RUBRACA 300MG TAB	36	SHINGRIX	82
<i>rivastigmine 9.5mg/24hr patch</i>	75	<i>rufinamide 200mg tab</i>	14	50MCG/0.5ML INJ	
<i>rizatriptan 10mg odt</i>	66	<i>rufinamide 400mg tab</i>	14	SIGNIFOR 0.3MG/ML INJ	58
		<i>rufinamide 40mg/ml oral susp</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

SIGNIFOR 0.6MG/ML INJ	58	<i>sodium chloride 50mg/ml</i>	68	SPRITAM 1000MG TAB	14
SIGNIFOR 0.9MG/ML INJ	58	<i>inj</i>		FOR ORAL SUSP	
<i>sildenafil 20mg tab</i>	78	SODIUM OXYBATE	78	SPRITAM 250MG TAB	14
<i>silver sulfadiazine 1% cream</i>	55	500MG/ML ORAL SOLN		FOR ORAL SUSP	
SIMBRINZA 0.2-1%	71	<i>sodium phenylbutyrate</i>	58	SPRITAM 500MG TAB	14
OPHTH SUSP		<i>3gm/tsp oral powder</i>		FOR ORAL SUSP	
SIMLANDI 20MG/0.2ML	3	<i>sodium polystyrene</i>	69	SPRITAM 750MG TAB	14
SYRINGE		<i>sulfonate 15000mg</i>		FOR ORAL SUSP	
SIMLANDI 40MG/0.4ML	3	<i>powder for oral susp</i>		<i>sps 15gm/60ml susp</i>	69
AUTO-INJECTOR		<i>sodium sulfate/potassium</i>	65	<i>sronyx tab 28-day pack</i>	61
SIMLANDI 40MG/0.4ML	3	<i>sulfate/magnesium sulfate</i>		<i>ssd 1% cream</i>	55
SYRINGE		<i>17.5-3.13-1.6 gm/177ml</i>		STELARA 45MG/0.5ML	53
SIMLANDI 80MG/0.8ML	3	<i>oral soln prep kit</i>		INJ	
AUTO-INJECTOR		<i>sodium sulfate/potassium</i>	65	STELARA 45MG/0.5ML	53
SIMLANDI 80MG/0.8ML	3	<i>sulfate/magnesium sulfate</i>		SYRINGE	
SYRINGE		<i>17.5-3.13-1.6 gm/177ml</i>		STELARA 90MG/ML	53
<i>simvastatin 10mg tab</i>	24	<i>oral soln prep kit (480ml)</i>		SYRINGE	
<i>simvastatin 20mg tab</i>	24	SOFOSBUVIR/VELPATAS	46	STIMUFEND 6MG/0.6ML	65
<i>simvastatin 40mg tab</i>	24	VIR 400-100MG TAB		SYRINGE	
<i>simvastatin 5mg tab</i>	24	SOGROYA 10MG/1.5ML	57	STIOLTO	10
<i>simvastatin 80mg tab</i>	24	PEN INJ		2.5-2.5MCG/ACT	
<i>sirolimus 0.5mg tab</i>	69	SOGROYA 15MG/1.5ML	57	INHALER	
<i>sirolimus 1mg tab</i>	69	PEN INJ		STIVARGA 40MG TAB	36
<i>sirolimus 1mg/ml oral soln</i>	69	SOGROYA 5MG/1.5ML	57	STREPTOMYCIN 1GM	2
<i>sirolimus 2mg tab</i>	69	PEN INJ		INJ	
SIRTURO 100MG TAB	30	SOLTAMOX 10MG/5ML	32	STRIBILD	45
SIRTURO 20MG TAB	30	ORAL SOLN		150-150-200-300MG	
SKYRIZI 150MG/ML	53	SOMAVERT 10MG INJ	58	TAB	
AUTO-INJECTOR		SOMAVERT 15MG INJ	58	STRIVERDI 2.5MCG/ACT	10
SKYRIZI 150MG/ML	53	SOMAVERT 20MG INJ	58	INHALER	
SYRINGE		SOMAVERT 25MG INJ	58	<i>subvenite 100mg tab</i>	14
SKYRIZI 180MG/1.2ML	63	SOMAVERT 30MG INJ	58	<i>subvenite 150mg tab</i>	14
CARTRIDGE		<i>sorafenib 200mg tab</i>	36	<i>subvenite 200mg tab</i>	14
SKYRIZI 360MG/2.4ML	63	<i>sotalol 120mg tab</i>	47	<i>subvenite 25mg tab</i>	14
CARTRIDGE		<i>sotalol 160mg tab</i>	47	SUCRAID 8500UNIT/ML	56
<i>sodium chloride 0.45% inj</i>	68	<i>sotalol 240mg tab</i>	47	ORAL SOLN	
<i>sodium chloride 0.9% inj</i>	68	<i>sotalol 80mg tab</i>	47	<i>sucrafate 1000mg tab</i>	81
<i>sodium chloride 0.9% irrigation soln</i>	63	<i>sotalol af 120mg tab</i>	47	<i>sucrafate 100mg/ml oral susp</i>	81
<i>sodium chloride 3% inj</i>	68	<i>sotalol af 160mg tab</i>	47	SUFLAVE SOLN PACK	65
		<i>sotalol af 80mg tab</i>	47	<i>sulfacetamide sodium 10% lotion</i>	
		<i>spironolactone 100mg tab</i>	56	<i>sulfacetamide sodium 10% ophth soln</i>	71
		<i>spironolactone 25mg tab</i>	56		
		<i>spironolactone 50mg tab</i>	56		
		<i>sprintec tab 28-day pack</i>	61		

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

ALPHABETICAL LISTING OF DRUGS

SULFACETAMIDE/PRED	72	SYMPAZAN 10MG ORAL	12	TAKHZYRO 300MG/2ML	65
NISOLONE 10-0.25%		FILM		INJ	
OPHTH SOLN		SYMPAZAN 20MG ORAL	12	TAKHZYRO 300MG/2ML	65
<i>sulfadiazine 500mg tab</i>	78	FILM		SYRINGE	
<i>sulfamethoxazole/trimeth</i>	78	SYMPAZAN 5MG ORAL	12	TALZENNA 0.1MG CAP	36
<i>oprim 200-40mg/5ml oral</i>		FILM		TALZENNA 0.25MG CAP	36
<i>susp</i>		SYMTUZA	45	TALZENNA 0.35MG CAP	36
<i>sulfamethoxazole/trimeth</i>	78	150-800-200-10MG TAB		TALZENNA 0.5MG CAP	36
<i>oprim 400-80mg tab</i>		SYNJARDY	19	TALZENNA 0.75MG CAP	36
<i>sulfamethoxazole/trimeth</i>	78	12.5-1000MG TAB		TALZENNA 1MG CAP	36
<i>oprim 800-160mg tab</i>		SYNJARDY 12.5-500MG	19	<i>tamoxifen 10mg tab</i>	32
<i>sulfasalazine 500mg dr</i>	63	TAB		<i>tamoxifen 20mg tab</i>	32
<i>tab</i>		SYNJARDY 5-1000MG	19	<i>tamsulosin 0.4mg cap</i>	63
<i>sulfasalazine 500mg tab</i>	63	TAB		<i>tarina 24 fe tab 1/20</i>	61
<i>sulindac 150mg tab</i>	4	SYNJARDY 5-500MG	19	<i>28-day pack</i>	
<i>sulindac 200mg tab</i>	4	TAB		<i>tarina fe tab 1/20 28-day</i>	61
<i>sumatriptan 100mg tab</i>	66	SYNJARDY XR	19	<i>pack</i>	
<i>sumatriptan 25mg tab</i>	66	10-1000MG TAB		<i>tazarotene 0.1% cream</i>	53
<i>sumatriptan 4mg/0.5ml</i>	66	SYNJARDY XR	19	<i>tazicef 1gm inj</i>	50
<i>cartridge</i>		12.5-1000MG TAB		<i>tazicef 2gm inj</i>	50
<i>sumatriptan 50mg tab</i>	66	SYNJARDY XR	19	TAZICEF 6GM INJ	50
<i>sumatriptan 6mg/0.5ml</i>	66	25-1000MG TAB		TAZVERIK 200MG TAB	36
<i>auto-injector</i>		SYNJARDY XR	19	TEFLARO 400MG INJ	29
<i>sumatriptan 6mg/0.5ml</i>	66	5-1000MG TAB		TEFLARO 600MG INJ	29
<i>cartridge</i>				<i>telmisartan 20mg tab</i>	25
<i>sumatriptan 6mg/0.5ml</i>	66	T		<i>telmisartan 40mg tab</i>	25
<i>inj</i>		TABLOID 40MG TAB	31	<i>telmisartan 80mg tab</i>	25
<i>sunitinib 12.5mg cap</i>	36	TABRECTA 150MG TAB	36	<i>temazepam 15mg cap</i>	65
<i>sunitinib 25mg cap</i>	36	TABRECTA 200MG TAB	36	<i>temazepam 30mg cap</i>	65
<i>sunitinib 37.5mg cap</i>	36	<i>tacrolimus 0.03%</i>	55	TENIVAC 4-10UNIT/ML	80
<i>sunitinib 50mg cap</i>	36	<i>ointment</i>		INJ	
SUNLENCA 300MG TAB	45	<i>tacrolimus 0.1% ointment</i>	55	TENIVAC 4-10UNIT/ML	80
THERAPY PACK (4)		<i>tacrolimus 0.5mg cap</i>	69	SYRINGE	
SUNLENCA 300MG TAB	45	<i>tacrolimus 1mg cap</i>	69	<i>tenofovir disoproxil</i>	45
THERAPY PACK (5)		<i>tacrolimus 5mg cap</i>	69	<i>fumarate 300mg tab</i>	
SUNOSI 150MG TAB	78	<i>tadalafil 2.5mg tab</i>	63	TEPMETKO 225MG TAB	36
SUNOSI 75MG TAB	78	<i>tadalafil 20mg tab</i>	78	<i>terazosin 10mg cap</i>	26
<i>syeda tab 28-day pack</i>	61	<i>tadalafil 5mg tab</i>	63	<i>terazosin 1mg cap</i>	26
SYMDEKO TAB 4-WEEK	77	TAFINLAR 10MG TAB	36	<i>terazosin 2mg cap</i>	26
PACK (56)		FOR ORAL SUSP		<i>terazosin 5mg cap</i>	26
SYMDEKO TAB	77	TAFINLAR 50MG CAP	36	<i>terbinafine 250mg tab</i>	22
50-75MG/75MG PACK		TAFINLAR 75MG CAP	36	<i>terbutaline sulfate 2.5mg</i>	10
(56)		TAGRISSO 40MG TAB	31	<i>tab</i>	
		TAGRISSO 80MG TAB	31		

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

ALPHABETICAL LISTING OF DRUGS

<i>terbutaline sulfate 5mg tab</i>	10	THEOPHYLLINE 200MG ER TAB	78	<i>timolol 0.25% ophth soln</i>	71
<i>terconazole 0.4% vaginal cream</i>	83	<i>theophylline 300mg er tab</i>	78	<i>timolol 0.5% ophth gel</i>	71
<i>terconazole 0.8% vaginal cream</i>	83	<i>theophylline 400mg er tab</i>	78	<i>timolol 0.5% ophth soln</i>	71
<i>terconazole 80mg vaginal insert</i>	83	<i>theophylline 450mg er tab</i>	78	<i>timolol 10mg tab</i>	48
<i>teriflunomide 14mg tab</i>	76	<i>theophylline 600mg er tab</i>	78	<i>timolol 5mg tab</i>	48
<i>teriflunomide 7mg tab</i>	76	<i>thioridazine 100mg tab</i>	43	<i>timolol hemihydrate 0.5% ophth soln</i>	71
TERIPARATIDE	57	<i>thioridazine 10mg tab</i>	43	<i>tinidazole 250mg tab</i>	29
0.02MG/ACT PEN INJ		<i>thioridazine 25mg tab</i>	43	<i>tinidazole 500mg tab</i>	29
<i>testosterone 1% (12.5mg/act) gel pump</i>	6	<i>thioridazine 50mg tab</i>	43	TIVICAY 50MG TAB	45
<i>testosterone 1% (25mg) gel packet</i>	6	<i>thiothixene 10mg cap</i>	40	TIVICAY 5MG TAB FOR ORAL SUSP	45
<i>testosterone 1% (50mg) gel packet</i>	6	<i>thiothixene 1mg cap</i>	40	<i>tizanidine 2mg tab</i>	70
<i>testosterone 1.62% (1.25gm) gel packet</i>	6	<i>thiothixene 2mg cap</i>	40	<i>tizanidine 4mg tab</i>	70
<i>testosterone 1.62% (2.5gm) gel packet</i>	6	<i>thiothixene 5mg cap</i>	40	<i>tobramycin 0.3% ophth soln</i>	71
<i>testosterone 1.62% (20.25mg/act) gel pump</i>	6	<i>tiadylt 120mg er (24hr) cap</i>	48	TOBRAMYCIN	2
<i>testosterone 30mg/act topical soln</i>	6	<i>tiadylt 180mg er (24hr) cap</i>	48	10MG/ML INJ	
<i>testosterone cypionate 100mg/ml inj</i>	6	<i>tiadylt 240mg er (24hr) cap</i>	48	<i>tobramycin 300mg/5ml inh soln</i>	2
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	6	<i>tiadylt 300mg er (24hr) cap</i>	48	<i>tobramycin 80mg/2ml inj</i>	2
<i>testosterone cypionate 200mg/ml inj</i>	6	<i>tiadylt 360mg er (24hr) cap</i>	48	<i>tolterodine tartrate 1mg tab</i>	81
TESTOSTERONE	6	<i>tiadylt 420mg er (24hr) cap</i>	48	<i>tolterodine tartrate 2mg er cap</i>	81
ENANTHATE 200MG/ML INJ		<i>tiagabine 12mg tab</i>	15	<i>tolterodine tartrate 2mg tab</i>	81
<i>tetrabenazine 12.5mg tab</i>	76	<i>tiagabine 16mg tab</i>	15	<i>tolterodine tartrate 4mg er cap</i>	81
<i>tetrabenazine 25mg tab</i>	76	<i>tiagabine 2mg tab</i>	15	<i>topiramate 100mg tab</i>	14
<i>tetracycline 250mg cap</i>	79	<i>tiagabine 4mg tab</i>	15	<i>topiramate 15mg cap</i>	14
<i>tetracycline 500mg cap</i>	79	TIBSOVO 250MG TAB	36	<i>topiramate 200mg tab</i>	14
THALOMID 100MG CAP	68	<i>ticagrelor 60mg tab</i>	64	<i>topiramate 25mg cap</i>	14
THALOMID 50MG CAP	68	<i>ticagrelor 90mg tab</i>	64	<i>topiramate 25mg tab</i>	14
THEOPHYLLINE 100MG ER TAB	78	TICOVAC	82	<i>topiramate 50mg tab</i>	14
		1.2MCG/0.25ML SYRINGE		<i>toremifene 60mg tab</i>	32
		TICOVAC 2.4MCG/0.5ML SYRINGE	83	<i>torpenz 10mg tab</i>	36
		<i>tigecycline 50mg inj</i>	29	<i>torpenz 2.5mg tab</i>	36
		<i>timolol 0.25% ophth gel</i>	71	<i>torpenz 5mg tab</i>	36
				<i>torpenz 7.5mg tab</i>	36
				<i>torseamide 100mg tab</i>	56
				<i>torseamide 10mg tab</i>	56
				<i>torseamide 20mg tab</i>	56
				<i>torseamide 5mg tab</i>	56

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

ALPHABETICAL LISTING OF DRUGS

TOUJEO 300UNIT/ML PEN INJ (1.5ML)	21	TRESIBA 100UNIT/ML INJ	21	<i>trihexyphenidyl 5mg tab</i>	38
TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	21	TRESIBA 100UNIT/ML PEN INJ	21	TRIJARDY XR	19
TPN ELECTROLYTES INJ	67	TRESIBA 200UNIT/ML PEN INJ	21	10-5-1000MG TAB	
TRADJENTA 5MG TAB	20	<i>tretinoin 0.01% gel</i>	52	TRIJARDY XR	19
<i>tramadol 100mg er tab</i>	5	<i>tretinoin 0.025% cream</i>	52	12.5-2.5-1000MG TAB	
<i>tramadol 200mg er tab</i>	5	<i>tretinoin 0.025% gel</i>	52	TRIJARDY XR	19
<i>tramadol 300mg er tab</i>	5	<i>tretinoin 0.05% cream</i>	52	5-2.5-1000MG TAB	
<i>tramadol 50mg tab</i>	5	<i>tretinoin 0.1% cream</i>	52	TRIKAFTA	77
<i>tramadol/acetaminophen 37.5-325mg tab</i>	5	<i>tretinoin 10mg cap</i>	37	100-50-75MG/150MG TAB PACK (84)	
<i>trandolapril 1mg tab</i>	25	<i>triamcinolone acetonide 0.025% cream</i>	55	TRIKAFTA	77
<i>trandolapril 2mg tab</i>	25	<i>triamcinolone acetonide 0.025% lotion</i>	55	100-50-75MG/75MG GRANULES PACK (56)	
<i>trandolapril 4mg tab</i>	25	<i>triamcinolone acetonide 0.025% ointment</i>	55	TRIKAFTA	77
<i>tranexamic acid 650mg tab</i>	65	<i>triamcinolone acetonide 0.1% cream</i>	55	50-37.5-25MG/75MG TAB PACK (84)	
<i>tranylcypromine 10mg tab</i>	16	<i>triamcinolone acetonide 0.1% lotion</i>	55	TRIKAFTA	77
TRAVASOL 10% INJ	71	<i>triamcinolone acetonide 0.1% ointment</i>	55	80-40-60MG/59.5MG GRANULES PACK (56)	
<i>travoprost 0.004% ophth soln</i>	72	<i>triamcinolone acetonide 0.1% oral paste</i>	51	<i>tri-lo- estarylla tab</i>	61
<i>trazodone 100mg tab</i>	17	<i>triamcinolone acetonide 0.5% cream</i>	55	<i>28-day pack</i>	
<i>trazodone 150mg tab</i>	17	<i>triamcinolone acetonide 0.5% ointment</i>	55	<i>tri-lo-sprintec tab 28-day pack</i>	61
<i>trazodone 50mg tab</i>	17	<i>triazolam 0.125mg tab</i>	65	<i>trimethoprim 100mg tab</i>	29
TRECATOR 250MG TAB	30	<i>triazolam 0.25mg tab</i>	65	<i>tri-mili tab 28-day pack</i>	61
TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER	10	<i>tridacaine 5% patch</i>	55	<i>trimipramine 100mg cap</i>	18
TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	10	<i>triderm 0.5% cream</i>	55	<i>trimipramine 25mg cap</i>	18
TRELSTAR 11.25MG INJ	32	<i>trientine 250mg cap</i>	68	<i>trimipramine 50mg cap</i>	18
TRELSTAR 22.5MG INJ	32	<i>tri-estarylla tab 28-day pack</i>	61	TRINTELLIX 10MG TAB	17
TRELSTAR 3.75MG INJ	32	<i>trifluoperazine 10mg tab</i>	43	TRINTELLIX 20MG TAB	17
TREMFYA 100MG/ML AUTO-INJECTOR	53	<i>trifluoperazine 1mg tab</i>	43	TRINTELLIX 5MG TAB	17
TREMFYA 100MG/ML SYRINGE	53	<i>trifluoperazine 2mg tab</i>	43	<i>tri-sprintec tab 28-day pack</i>	61
TREMFYA 200MG/2ML AUTO-INJECTOR	53	<i>trifluoperazine 5mg tab</i>	43	TRIUMEQ	45
TREMFYA 200MG/2ML SYRINGE	53	TRIFLURIDINE 1%	71	600-50-300MG TAB	
		OPHTH SOLN		TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	45
		<i>trihexyphenidyl 2mg tab</i>	38	<i>trivora tab 28-day pack</i>	61
				<i>tri-vylibra lo tab 28-day pack</i>	61

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

ALPHABETICAL LISTING OF DRUGS

<i>trosipium chloride 20mg tab</i>	81	<i>unithroid 175mcg tab</i>	80	VALTOCO 20MG	12
<i>trosipium chloride 60mg er cap</i>	81	<i>unithroid 200mcg tab</i>	80	(10MG/0.1ML) NASAL	
TRULANCE 3MG TAB	66	<i>unithroid 25mcg tab</i>	80	SPRAY DOSE PACK	
TRULICITY	20	<i>unithroid 300mcg tab</i>	80	VALTOCO 5MG	12
0.75MG/0.5ML		<i>unithroid 50mcg tab</i>	80	(5MG/0.1ML) NASAL	
AUTO-INJECTOR		<i>unithroid 75mcg tab</i>	80	SPRAY DOSE PACK	
TRULICITY	20	<i>unithroid 88mcg tab</i>	80	<i>vancomycin 100mg/ml inj</i>	29
1.5MG/0.5ML		<i>ursodiol 250mg tab</i>	63	<i>vancomycin 125mg cap</i>	29
AUTO-INJECTOR		<i>ursodiol 300mg cap</i>	63	<i>vancomycin 1gm inj</i>	29
TRULICITY 3MG/0.5ML	20	<i>ursodiol 500mg tab</i>	63	<i>vancomycin 250mg cap</i>	29
AUTO-INJECTOR		UZEDY 100MG/0.28ML	41	<i>vancomycin 500mg inj</i>	29
TRULICITY 3MG/0.5ML	20	SYRINGE		<i>vancomycin 750mg inj</i>	29
AUTO-INJECTOR		UZEDY 125MG/0.35ML	41	VANFLYTA 17.7MG TAB	36
TRULICITY	20	SYRINGE		VANFLYTA 26.5MG TAB	36
4.5MG/0.5ML		UZEDY 150MG/0.42ML	41	VAQTA 25UNIT/0.5ML	83
AUTO-INJECTOR		SYRINGE		INJ	
TRUMENBA SYRINGE	82	UZEDY 200MG/0.56ML	41	VAQTA 25UNIT/0.5ML	83
TRUQAP 160MG TAB	36	SYRINGE		SYRINGE	
TRUQAP 200MG TAB	36	UZEDY 250MG/0.7ML	41	VAQTA 50UNIT/ML INJ	83
TUKYSA 150MG TAB	37	SYRINGE		VAQTA 50UNIT/ML	83
TUKYSA 50MG TAB	37	UZEDY 50MG/0.14ML	41	SYRINGE	
TURALIO 125MG CAP	36	SYRINGE		<i>varenicline 0.5mg tab</i>	76
<i>turqoz tab 28-day pack</i>	61	UZEDY 75MG/0.21ML	41	<i>varenicline 0.5mg/1mg</i>	76
TWINRIX SYRINGE	83	SYRINGE		<i>first month pack (53)</i>	
TYBOST 150MG TAB	45			<i>varenicline 1mg tab</i>	76
TYENNE 162MG/0.9ML	3	V		<i>varenicline 1mg tab pack</i>	76
AUTO-INJECTOR		<i>valacyclovir 1000mg tab</i>	46	(56)	
TYENNE 162MG/0.9ML	3	<i>valacyclovir 500mg tab</i>	46	VARIVAX	83
SYRINGE		VALCHLOR 0.016% GEL	53	1350PFU/0.5ML INJ	
TYMLOS	57	<i>valganciclovir 450mg tab</i>	45	VAXCHORA SUSP	82
3120MCG/1.56ML PEN		<i>valganciclovir 50mg/ml</i>	45	VELIVET TAB 28-DAY	61
INJ		<i>oral soln</i>		PACK	
TYPHIM VI	82	<i>valproic acid 250mg cap</i>	15	VELTASSA 16.8GM	69
25MCG/0.5ML INJ		<i>valproic acid 50mg/ml</i>	15	POWDER FOR ORAL	
TYPHIM VI	82	<i>oral soln</i>		SUSP	
25MCG/0.5ML SYRINGE		<i>valsartan 160mg tab</i>	25	VELTASSA 1GM	69
		<i>valsartan 320mg tab</i>	25	POWDER FOR ORAL	
U		<i>valsartan 40mg tab</i>	25	SUSP	
UBRELVY 100MG TAB	66	<i>valsartan 80mg tab</i>	25	VELTASSA 25.2GM	69
UBRELVY 50MG TAB	66	VALTOCO 10MG	12	POWDER FOR ORAL	
<i>unithroid 100mcg tab</i>	80	(10MG/0.1ML) NASAL		SUSP	
<i>unithroid 112mcg tab</i>	80	SPRAY DOSE PACK		VELTASSA 8.4GM	69
<i>unithroid 125mcg tab</i>	80	VALTOCO 15MG	12	POWDER FOR ORAL	
<i>unithroid 137mcg tab</i>	80	(7.5MG/0.1ML) NASAL		SUSP	
<i>unithroid 150mcg tab</i>	80	SPRAY DOSE PACK			

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

ALPHABETICAL LISTING OF DRUGS

VEMLIDY 25MG TAB	46	VIGAFYDE 100MG/ML	15	W	
VENCLEXTA 100MG TAB	37	ORAL SOLN		<i>warfarin sodium 10mg tab</i>	11
VENCLEXTA 10MG TAB	37	<i>vigpoder 500mg powder for oral soln</i>	15	<i>warfarin sodium 1mg tab</i>	11
VENCLEXTA 50MG TAB	37	<i>vilazodone 10mg tab</i>	17	<i>warfarin sodium 2.5mg tab</i>	11
VENCLEXTA TAB	37	<i>vilazodone 20mg tab</i>	17	<i>warfarin sodium 2mg tab</i>	11
STARTER PACK (42)		<i>vilazodone 40mg tab</i>	17	<i>warfarin sodium 3mg tab</i>	11
<i>venlafaxine 100mg tab</i>	17	VIMKUNYA	83	<i>warfarin sodium 4mg tab</i>	11
<i>venlafaxine 150mg er cap</i>	17	40MCG/0.8ML SYRINGE		<i>warfarin sodium 5mg tab</i>	11
<i>venlafaxine 25mg tab</i>	17	VIRACEPT 250MG TAB	45	<i>warfarin sodium 6mg tab</i>	11
<i>venlafaxine 37.5mg er cap</i>	17	VIRACEPT 625MG TAB	45	<i>warfarin sodium 7.5mg tab</i>	11
<i>venlafaxine 37.5mg tab</i>	17	VIREAD 150MG TAB	45	WELIREG 40MG TAB	37
<i>venlafaxine 50mg tab</i>	17	VIREAD 200MG TAB	45	WINREVAIR 45MG INJ	78
<i>venlafaxine 75mg er cap</i>	17	VIREAD 40MG/GM	45	WINREVAIR 45MG INJ	78
<i>venlafaxine 75mg tab</i>	17	ORAL POWDER		(2 VIAL PACK)	
<i>verapamil 120mg er cap</i>	49	VITRAKVI 100MG CAP	36	WINREVAIR 60MG INJ	78
<i>verapamil 120mg er tab</i>	49	VITRAKVI 20MG/ML	36	WINREVAIR 60MG INJ	78
<i>verapamil 120mg tab</i>	49	ORAL SOLN		(2 VIAL PACK)	
<i>verapamil 180mg er cap</i>	49	VITRAKVI 25MG CAP	36	<i>wixela 100-50mcg powder inhaler</i>	10
<i>verapamil 180mg er tab</i>	49	VIVOTIF DR CAP	82	<i>wixela 250-50mcg powder inhaler</i>	10
<i>verapamil 240mg er cap</i>	49	VIZIMPRO 15MG TAB	31	<i>wixela 500-50mcg powder inhaler</i>	10
<i>verapamil 240mg er tab</i>	49	VIZIMPRO 30MG TAB	31	WYOST 120MG/1.7ML INJ	57
<i>verapamil 40mg tab</i>	49	VIZIMPRO 45MG TAB	31		
<i>verapamil 80mg tab</i>	49	VONJO 100MG CAP	36	X	
VERQUVO 10MG TAB	49	VORANIGO 10MG TAB	36	XALKORI 150MG ORAL PELLET	36
VERQUVO 2.5MG TAB	49	VORANIGO 40MG TAB	36	XALKORI 200MG CAP	37
VERQUVO 5MG TAB	49	<i>voriconazole 200mg inj</i>	22	XALKORI 20MG ORAL PELLET	37
VERSACLOZ 50MG/ML	42	<i>voriconazole 200mg tab</i>	22	XALKORI 250MG CAP	37
ORAL SUSP		<i>voriconazole 40mg/ml oral susp</i>	23	XALKORI 50MG ORAL PELLET	37
VERZENIO 100MG TAB	36	<i>voriconazole 50mg tab</i>	23	XARELTO 10MG TAB	11
VERZENIO 150MG TAB	36	VOSEVI 400-100-100MG TAB	46	XARELTO 15MG TAB	11
VERZENIO 200MG TAB	36			XARELTO 1MG/ML	11
VERZENIO 50MG TAB	36			ORAL SUSP	
<i>vestura tab 3-0.02mg 28-day pack</i>	61	VOWST 30000000UNIT CAP	63	XARELTO 2.5MG TAB	11
<i>vienva tab 28-day pack</i>	61	VRAYLAR 1.5MG CAP	40	XARELTO 20MG TAB	11
<i>vigabatrin 500mg powder for oral soln</i>	15	VRAYLAR 3MG CAP	40		
<i>vigabatrin 500mg tab</i>	15	VRAYLAR 4.5MG CAP	40		
<i>vigadrone 500mg powder for oral soln</i>	15	VRAYLAR 6MG CAP	40		
<i>vigadrone 500mg tab</i>	15	<i>vyfemla tab 28-day pack</i>	61		
		<i>vylibra tab 28-day pack</i>	61		
		VYNDAMAX 61MG CAP	49		
		VYNDAQEL 20MG CAP	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

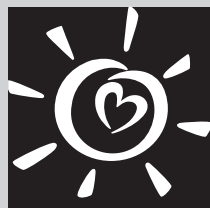
XARELTO TAB STARTER PACK (51)	11	XOLAIR 150MG INJ	8	<i>xulane 150-35mcg/24hr patch</i>	61
XATMEP 2.5MG/ML ORAL SOLN	31	XOLAIR 150MG/ML	8		
XCOPRI 100MG TAB	15	AUTO-INJECTOR		Y	
XCOPRI 150MG TAB	15	XOLAIR 150MG/ML	8	YF-VAX INJ	83
XCOPRI 200MG TAB	15	SYRINGE		Z	
XCOPRI 25MG TAB	15	XOLAIR 300MG/2ML	8	<i>zafemy 150-35mcg/24hr patch</i>	61
XCOPRI 50MG TAB	15	AUTO-INJECTOR		<i>zafirlukast 10mg tab</i>	9
XCOPRI TAB 100/150MG MAINTENANCE PACK (56)	15	XOLAIR 300MG/2ML	8	<i>zafirlukast 20mg tab</i>	9
XCOPRI TAB 12.5/25MG TITRATION PACK (28)	15	SYRINGE		<i>zaleplon 10mg cap</i>	65
XCOPRI TAB 150/200MG PACK (56)	15	XOLAIR 75MG/0.5ML	8	<i>zaleplon 5mg cap</i>	65
XCOPRI TAB 150/200MG TITRATION PACK (28)	15	AUTO-INJECTOR		ZAVZPRET 10MG/ACT	66
XCOPRI TAB 50/100MG TITRATION PACK (28)	15	XOLAIR 75MG/0.5ML	8	NASAL SPRAY	
XDEMVIY 0.25% OPHTH SOLN	71	SYRINGE		ZEJULA 100MG TAB	37
XELJANZ 10MG TAB	2	XOPENEX 45MCG	10	ZEJULA 200MG TAB	37
XELJANZ 1MG/ML ORAL SOLN	2	INHALER		ZEJULA 300MG TAB	37
XELJANZ 5MG TAB	2	XOSPATA 40MG TAB	37	ZELBORAF 240MG TAB	37
XELJANZ XR 11MG TAB	2	XPOVIO TAB 100MG	37	ZEMAIRA 1000MG INJ	77
XELJANZ XR 22MG TAB	2	ONCE WEEKLY CARTON (8)		<i>zenatane 10mg cap</i>	52
XERMELO 250MG TAB	21	XPOVIO TAB 40MG	37	<i>zenatane 20mg cap</i>	52
XIFAXAN 550MG TAB	29	ONCE WEEKLY CARTON (16)		<i>zenatane 30mg cap</i>	52
XIGDUO XR 10-1000MG TAB	19	XPOVIO TAB 40MG	37	<i>zenatane 40mg cap</i>	52
XIGDUO XR 10-500MG TAB	19	ONCE WEEKLY CARTON (4)		<i>zidovudine 100mg cap</i>	45
XIGDUO XR 2.5-1000MG TAB	19	XPOVIO TAB 60MG	37	<i>zidovudine 10mg/ml oral soln</i>	45
XIGDUO XR 5-1000MG TAB	19	TWICE WEEKLY CARTON (8)		<i>zidovudine 300mg tab</i>	45
XIGDUO XR 5-500MG TAB	19	XPOVIO TAB 60MG	37	ZIMHI 5MG/0.5ML	21
XIIDRA 5% OPHTH SOLN	72	TWICE WEEKLY CARTON (24)		SYRINGE	
XOFLUZA 40MG TAB	46	XPOVIO TAB 80MG	38	<i>ziprasidone 20mg cap</i>	40
XOFLUZA 80MG TAB	46	ONCE WEEKLY CARTON (8)		<i>ziprasidone 20mg inj</i>	40
		XPOVIO TAB 80MG	38	<i>ziprasidone 40mg cap</i>	40
		TWICE WEEKLY CARTON (32)		<i>ziprasidone 60mg cap</i>	40
		XTANDI 40MG CAP	32	<i>ziprasidone 80mg cap</i>	40
		XTANDI 40MG TAB	32	ZOLINZA 100MG CAP	37
		XTANDI 80MG TAB	32	<i>zolmitriptan 2.5mg tab</i>	67
				<i>zolmitriptan 5mg tab</i>	67
				<i>zolpidem tartrate 10mg tab</i>	65
				<i>zolpidem tartrate 12.5mg er tab</i>	65
				<i>zolpidem tartrate 5mg tab</i>	65
				<i>zolpidem tartrate 6.25mg er tab</i>	65

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

ZONISADE 100MG/5ML	14
ORAL SUSP	
<i>zonisamide 100mg cap</i>	14
<i>zonisamide 25mg cap</i>	14
<i>zonisamide 50mg cap</i>	14
<i>zovia 1mg-35mcg tab</i>	61
<i>28-day pack</i>	
ZTALMY 50MG/ML	14
ORAL SUSP	
ZURZUVAE 20MG CAP	16
ZURZUVAE 25MG CAP	16
ZURZUVAE 30MG CAP	16
ZYDELIG 100MG TAB	37
ZYDELIG 150MG TAB	37
ZYKADIA 150MG TAB	37

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For All of L.A.

This formulary was updated on 7/1/2025. Important Message About What You Pay for Vaccines – Some vaccines are considered medical benefits. Other vaccines are considered Part D drugs. Our plan covers most Part D vaccines at no cost to you.

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