



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 August 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)**. ຍັງມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມີໂຕພິມໃຫຍ່ 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 អក្សរធុស្សៈ 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: 08/01/2025

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: 08/01/2025

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 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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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](https://www.medicare.lacare.org).



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.



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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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.

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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
ADALIMUMAB-AATY 80MG/0.8ML AUTO-INJECTOR PACK (3)	1	PA QL=3 EA/180 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	

You can find information 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>etodolac 400mg tab</i>	1	
<i>etodolac 500mg tab</i>	1	
<i>ibu 600mg tab</i>	1	
<i>ibu 800mg tab</i>	1	
<i>ibuprofen 400mg tab</i>	1	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 ML/30 Days
<i>morphine sulfate 2mg/ml oral soln</i>	1	QL=1800 ML/30 Days
<i>morphine sulfate 30mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 30mg tab</i>	1	QL=180 EA/30 Days
<i>morphine sulfate 4mg/ml oral soln</i>	1	QL=900 ML/30 Days
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANDROGENS-ANABOLIC		
ANDROGENS		
<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
TESTOSTERONE 1.62% (1.25GM) GEL PACKET	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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
NITRO-BID 2% OINTMENT	1	
<i>nitroglycerin 0.1mg/hr patch</i>	1	
<i>nitroglycerin 0.2mg/hr patch</i>	1	
<i>nitroglycerin 0.3mg sl tab</i>	1	
<i>nitroglycerin 0.4mg sl tab</i>	1	
<i>nitroglycerin 0.4mg/hr patch</i>	1	
<i>nitroglycerin 0.6mg sl tab</i>	1	
<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 P	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
QUINIDINE SULFATE 200MG TAB	1	
QUINIDINE SULFATE 300MG TAB	1	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine 150mg cap</i>	1	
<i>mexiletine 200mg cap</i>	1	
<i>mexiletine 250mg cap</i>	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate 100mg tab</i>	1	
<i>flecainide acetate 150mg tab</i>	1	
<i>flecainide acetate 50mg tab</i>	1	
<i>propafenone 150mg tab</i>	1	
<i>propafenone 225mg er cap</i>	1	
<i>propafenone 225mg tab</i>	1	
<i>propafenone 300mg tab</i>	1	
<i>propafenone 325mg er cap</i>	1	
<i>propafenone 425mg er cap</i>	1	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone 100mg tab</i>	1	
<i>amiodarone 200mg tab</i>	1	
<i>amiodarone 400mg tab</i>	1	
<i>dofetilide 0.125mg cap</i>	1	
<i>dofetilide 0.25mg cap</i>	1	
<i>dofetilide 0.5mg cap</i>	1	
MULTAQ 400MG TAB	1	
<i>pacerone 100mg tab</i>	1	
<i>pacerone 200mg tab</i>	1	
<i>pacerone 400mg tab</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	1	NDS PA QL=4.56 ML/28 Days
DUPIXENT 200MG/1.14ML SYRINGE	1	NDS PA QL=4.56 ML/28 Days
DUPIXENT 300MG/2ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
DUPIXENT 300MG/2ML SYRINGE	1	NDS PA QL=8 ML/28 Days
FASENRA 10MG/0.5ML SYRINGE	1	PA QL=.50 ML/28 Days
FASENRA 30MG/ML AUTO-INJECTOR	1	PA QL=1 ML/28 Days
FASENRA 30MG/ML SYRINGE	1	PA QL=1 ML/28 Days
NUCALA 100MG INJ	1	NDS PA QL=3 EA/28 Days
NUCALA 100MG/ML AUTO-INJECTOR	1	NDS PA QL=3 ML/28 Days
NUCALA 100MG/ML SYRINGE	1	NDS PA QL=3 ML/28 Days
NUCALA 40MG/0.4ML SYRINGE	1	NDS PA QL=.40 ML/28 Days
XOLAIR 150MG INJ	1	NDS PA QL=2 EA/28 Days
XOLAIR 150MG/ML AUTO-INJECTOR	1	NDS PA QL=2 ML/28 Days
XOLAIR 150MG/ML SYRINGE	1	NDS PA QL=2 ML/28 Days
XOLAIR 300MG/2ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
XOLAIR 300MG/2ML SYRINGE	1	NDS PA QL=8 ML/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XOLAIR 75MG/0.5ML AUTO-INJECTOR	1	NDS PA QL=1 ML/28 Days
XOLAIR 75MG/0.5ML SYRINGE	1	NDS PA QL=1 ML/28 Days
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG HFA INHALER	1	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH POWDER INHALER	1	QL=30 EA/30 Days
<i>ipratropium bromide 0.02% inh soln</i>	1	PA BvD
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>albuterol 4mg tab</i>	1	
<i>albuterol 5mg/ml (0.05%) inh soln</i>	1	PA BvD
ANORO ELLIPTA 62.5-25MCG POWDER INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 100-25MCG POWDER INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 200-25MCG POWDER INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 50-25MCG POWDER INHALER	1	QL=60 EA/30 Days
<i>breyndra 160-4.5mcg/act inhaler</i>	1	QL=10.30 GM/30 Days
<i>breyndra 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ELIQUIS 5MG TAB	1	QL=74 EA/30 Days
<i>rivaroxaban 2.5mg tab</i>	1	QL=60 EA/30 Days
XARELTO 10MG TAB	1	QL=30 EA/30 Days
XARELTO 15MG TAB	1	QL=60 EA/30 Days
XARELTO 1MG/ML ORAL SUSP	1	QL=620 ML/30 Days
XARELTO 2.5MG TAB	1	QL=60 EA/30 Days
XARELTO 20MG TAB	1	QL=30 EA/30 Days
XARELTO TAB STARTER PACK (51)	1	QL=51 EA/30 Days
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	
ANTICONSULSANTS		
ANTICONSULSANTS - BENZODIAZEPINES		

You can find information 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 10mg tab</i>	1	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml oral susp</i>	1	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	1	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	1	QL=90 EA/30 Days
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DIACOMIT 500MG POWDER FOR ORAL SUSP	1	NDS PA NSO QL=180 EA/30 Days
EPIDIOLEX 100MG/ML ORAL SOLN	1	NDS PA NSO QL=600 ML/30 Days
<i>epitol 200mg tab</i>	1	
EPRONTIA 25MG/ML ORAL SOLN	1	PA NSO QL=480 ML/30 Days
<i>eslicarbazepine acetate 200mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>eslicarbazepine acetate 400mg tab</i>	1	PA NSO QL=30 EA/30 Days
<i>eslicarbazepine acetate 600mg tab</i>	1	PA NSO QL=60 EA/30 Days
<i>eslicarbazepine acetate 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

You can find information 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 15mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 16.2mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 30mg tab</i>	1	QL=120 EA/30 Days
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CARBAMATES		
<i>felbamate 120mg/ml oral susp</i>	1	
<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	

You can find information 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 75mg tab</i>	1	
<i>bupropion xl 150mg (24 hr) tab</i>	1	
<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

You can find information 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 100mg tab</i>	1	
<i>sertraline 20mg/ml oral soln</i>	1	QL=300 ML/30 Days
<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		

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GLYXAMBI 25-5MG TAB	1	QL=30 EA/30 Days
JANUMET 50-1000MG TAB	1	QL=60 EA/30 Days
JANUMET 50-500MG TAB	1	QL=60 EA/30 Days
JANUMET XR 100-1000MG TAB	1	QL=30 EA/30 Days
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	

You can find information 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 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	1	INS
INSULIN LISPRO 100UNIT/ML INJ	1	INS PA BvD
LANTUS 100UNIT/ML INJ	1	INS
LANTUS 100UNIT/ML PEN INJ	1	INS
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

You can find information 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>ondansetron 4mg tab</i>	1	PA BvD
<i>ondansetron 8mg odt</i>	1	PA BvD
<i>ondansetron 8mg tab</i>	1	PA BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab</i>	1	
<i>meclizine 25mg tab</i>	1	
<i>scopolamine 1mg/72hr patch</i>	1	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

You can find information 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 200mg inj</i>	1	PA
<i>voriconazole 200mg tab</i>	1	PA QL=120 EA/30 Days
<i>voriconazole 40mg/ml oral susp</i>	1	PA QL=400 ML/30 Days
<i>voriconazole 50mg tab</i>	1	PA QL=480 EA/30 Days
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	

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

You can find information 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>perindopril erbumine 4mg tab</i>	1	
PERINDOPRIL ERBUMINE 8MG TAB	1	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<i>quinapril 40mg tab</i>	1	
<i>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	1	
<i>ramipril 10mg cap</i>	1	
<i>ramipril 2.5mg cap</i>	1	
<i>ramipril 5mg cap</i>	1	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
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	

You can find information 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 1mg cap</i>	1	
<i>prazosin 2mg cap</i>	1	
<i>prazosin 5mg cap</i>	1	
<i>terazosin 10mg cap</i>	1	
<i>terazosin 1mg cap</i>	1	
<i>terazosin 2mg cap</i>	1	
<i>terazosin 5mg cap</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<i>amlodipine/benazepril 5-40mg cap</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-12.5-160mg tab</i>	1	
<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	

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

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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VASODILATORS		
<i>hydralazine 100mg tab</i>	1	
<i>hydralazine 10mg tab</i>	1	
<i>hydralazine 25mg tab</i>	1	
<i>hydralazine 50mg tab</i>	1	
<i>minoxidil 10mg tab</i>	1	
<i>minoxidil 2.5mg tab</i>	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
<i>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>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	
<i>erythromycin ethylsuccinate 40mg/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>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		
CHLOROQUINE PHOSPHATE 250MG TAB	1	
<i>chloroquine phosphate 500mg tab</i>	1	
<i>hydroxychloroquine sulfate 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>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	
ONUREG 200MG TAB	1	NDS PA NSO QL=14 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
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	
ELIGARD 22.5MG SYRINGE	1	QL=1 EA/84 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
AUGTYRO 40MG CAP	1	NDS PA NSO QL=240 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
IBRANCE 125MG CAP	1	NDS PA NSO QL=21 EA/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
IBRANCE 125MG TAB	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 75MG CAP	1	NDS PA NSO QL=21 EA/28 Days
IBRANCE 75MG TAB	1	NDS PA NSO QL=21 EA/28 Days
ICLUSIG 10MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 15MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 30MG TAB	1	NDS PA NSO QL=30 EA/30 Days
ICLUSIG 45MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IDHIFA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IDHIFA 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
<i>imatinib 100mg tab</i>	1	QL=90 EA/30 Days
<i>imatinib 400mg tab</i>	1	QL=60 EA/30 Days
IMBRUVICA 140MG CAP	1	NDS PA NSO QL=90 EA/30 Days
IMBRUVICA 420MG TAB	1	NDS PA NSO QL=30 EA/30 Days
IMBRUVICA 70MG CAP	1	NDS PA NSO QL=30 EA/30 Days
IMBRUVICA 70MG/ML ORAL SUSP	1	NDS PA NSO QL=216 ML/27 Days
IMKELDI 80MG/ML ORAL SOLN	1	NDS PA NSO QL=280 ML/28 Days
INREBIC 100MG CAP	1	NDS PA NSO QL=120 EA/30 Days
ITOVEBI 3MG TAB	1	NDS PA NSO QL=56 EA/28 Days
ITOVEBI 9MG TAB	1	NDS PA NSO QL=28 EA/28 Days
JAKAFI 10MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 15MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 20MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 25MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAKAFI 5MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAYPIRCA 100MG TAB	1	NDS PA NSO QL=60 EA/30 Days
JAYPIRCA 50MG TAB	1	NDS PA NSO QL=30 EA/30 Days
KISQALI TAB 200MG DAILY DOSE PACK (21)	1	NDS PA NSO QL=21 EA/28 Days
KISQALI TAB 400MG DAILY DOSE PACK (42)	1	NDS PA NSO QL=42 EA/28 Days
KISQALI TAB 600MG DAILY DOSE PACK (63)	1	NDS PA NSO QL=63 EA/28 Days
KOSELUGO 10MG CAP	1	NDS PA NSO QL=240 EA/30 Days
KOSELUGO 25MG CAP	1	NDS PA NSO QL=120 EA/30 Days
KRAZATI 200MG TAB	1	NDS PA NSO QL=180 EA/30 Days
<i>lapatinib 250mg tab</i>	1	PA NSO QL=180 EA/30 Days
LORBRENA 100MG TAB	1	NDS PA NSO QL=30 EA/30 Days
LORBRENA 25MG TAB	1	NDS PA NSO QL=90 EA/30 Days
LUMAKRAS 120MG TAB	1	NDS PA NSO QL=240 EA/30 Days
LUMAKRAS 240MG TAB	1	NDS PA NSO QL=120 EA/30 Days
LUMAKRAS 320MG TAB	1	NDS PA NSO QL=90 EA/30 Days
LYNPARZA 100MG TAB	1	NDS PA NSO QL=120 EA/30 Days
LYNPARZA 150MG TAB	1	NDS PA NSO QL=120 EA/30 Days
LYTGOBI TAB 12MG DAILEY DOSE PACK (21)	1	NDS PA NSO QL=84 EA/28 Days
LYTGOBI TAB 16MG DAILEY DOSE PACK (28)	1	NDS PA NSO QL=112 EA/28 Days
LYTGOBI TAB 20MG DAILEY DOSE PACK (35)	1	NDS PA NSO QL=140 EA/28 Days
MEKINIST 0.05MG/ML ORAL SOLN	1	NDS PA NSO QL=1260 ML/30 Days
MEKINIST 0.5MG TAB	1	NDS PA NSO QL=90 EA/30 Days

You can find information 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 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 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
RUBRACA 300MG TAB	1	NDS PA NSO QL=120 EA/30 Days
RYDAPT 25MG CAP	1	NDS PA NSO QL=224 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
SCEMBLIX 100MG TAB	1	NDS PA NSO QL=120 EA/30 Days
SCEMBLIX 20MG TAB	1	NDS PA NSO QL=60 EA/30 Days
SCEMBLIX 40MG TAB	1	NDS PA NSO QL=300 EA/30 Days
<i>sorafenib 200mg tab</i>	1	PA NSO QL=120 EA/30 Days
STIVARGA 40MG TAB	1	NDS PA NSO QL=84 EA/28 Days
<i>sunitinib 12.5mg cap</i>	1	PA NSO QL=28 EA/28 Days
<i>sunitinib 25mg cap</i>	1	PA NSO QL=28 EA/28 Days
<i>sunitinib 37.5mg cap</i>	1	PA NSO QL=28 EA/28 Days
<i>sunitinib 50mg cap</i>	1	PA NSO QL=28 EA/28 Days
TABRECTA 150MG TAB	1	NDS PA NSO QL=120 EA/30 Days
TABRECTA 200MG TAB	1	NDS PA NSO QL=120 EA/30 Days
TAFINLAR 10MG TAB FOR ORAL SUSP	1	NDS PA NSO QL=840 EA/28 Days
TAFINLAR 50MG CAP	1	NDS PA NSO QL=120 EA/30 Days
TAFINLAR 75MG CAP	1	NDS PA NSO QL=120 EA/30 Days
TALZENNA 0.1MG CAP	1	NDS PA NSO QL=30 EA/30 Days
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
XALKORI 200MG CAP	1	NDS PA NSO QL=60 EA/30 Days
XALKORI 20MG ORAL PELLETT	1	NDS PA NSO QL=120 EA/30 Days

You can find information 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 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
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<i>ropinirole 0.25mg tab</i>	1	
<i>ropinirole 0.5mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>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
MOLINDONE 10MG TAB	1	
MOLINDONE 25MG 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
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
<i>risperidone 0.25mg tab</i>	1	
<i>risperidone 0.5mg odt</i>	1	QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>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	
<i>olanzapine 2.5mg tab</i>	1	
<i>olanzapine 20mg odt</i>	1	QL=30 EA/30 Days

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

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>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
OPIPZA 10MG ORAL FILM	1	PA NSO QL=90 EA/30 Days
OPIPZA 2MG ORAL FILM	1	PA NSO QL=30 EA/30 Days
OPIPZA 5MG ORAL FILM	1	PA NSO QL=30 EA/30 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

You can find information 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 30-120-15MG TAB	1	QL=30 EA/30 Days
BIKTARVY 50-200-25MG TAB	1	QL=30 EA/30 Days
CIMDUO 300-300MG TAB	1	QL=30 EA/30 Days
<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
KALETRA 80-20MG/ML ORAL SOLN	1	
<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

You can find information 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>lamivudine/zidovudine 150-300mg tab</i>	1	QL=60 EA/30 Days
<i>lopinavir/ritonavir 100-25mg tab</i>	1	QL=300 EA/30 Days
<i>lopinavir/ritonavir 200-50mg tab</i>	1	QL=120 EA/30 Days
<i>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	1	QL=4 EA/28 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 PELLETT	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>valganciclovir 50mg/ml oral soln</i>	1	
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	1	QL=30 EA/30 Days
<i>entecavir 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>entecavir 1mg tab</i>	1	QL=30 EA/30 Days
<i>lamivudine 100mg tab</i>	1	QL=90 EA/30 Days
MAVYRET 100-40MG TAB	1	NDS PA QL=90 EA/30 Days
MAVYRET 50-20MG ORAL 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>carvedilol 6.25mg tab</i>	1	
<i>labetalol 100mg tab</i>	1	
<i>labetalol 200mg tab</i>	1	
<i>labetalol 300mg tab</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	1	
<i>acebutolol 400mg cap</i>	1	
<i>atenolol 100mg tab</i>	1	
<i>atenolol 25mg tab</i>	1	
<i>atenolol 50mg tab</i>	1	
<i>betaxolol 10mg tab</i>	1	
<i>betaxolol 20mg tab</i>	1	
<i>bisoprolol fumarate 10mg tab</i>	1	
<i>bisoprolol fumarate 5mg tab</i>	1	
<i>metoprolol succinate 100mg er tab</i>	1	
<i>metoprolol succinate 200mg er tab</i>	1	
<i>metoprolol succinate 25mg er tab</i>	1	
<i>metoprolol succinate 50mg er tab</i>	1	
<i>metoprolol tartrate 100mg tab</i>	1	
<i>metoprolol tartrate 25mg tab</i>	1	
<i>metoprolol tartrate 37.5mg tab</i>	1	
<i>metoprolol tartrate 50mg tab</i>	1	
<i>metoprolol tartrate 75mg tab</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	1	
<i>nadolol 40mg tab</i>	1	
<i>nadolol 80mg tab</i>	1	
<i>pindolol 10mg tab</i>	1	
<i>pindolol 5mg tab</i>	1	
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	1	
<i>propranolol 160mg er cap</i>	1	
<i>propranolol 20mg tab</i>	1	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>sotalol af 160mg tab</i>	1	
<i>sotalol af 80mg tab</i>	1	
<i>timolol 10mg tab</i>	1	
<i>timolol 5mg tab</i>	1	
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine 10mg tab</i>	1	
<i>amlodipine 2.5mg tab</i>	1	
<i>amlodipine 5mg tab</i>	1	
<i>cartia 120mg er (24hr) cap</i>	1	
<i>cartia 180mg er (24hr) cap</i>	1	
<i>cartia 240mg er (24hr) cap</i>	1	
<i>cartia 300mg er (24hr) cap</i>	1	
<i>dilt 120mg er (24hr) cap</i>	1	
<i>dilt 180mg er (24hr) cap</i>	1	
<i>dilt 240mg er (24hr) cap</i>	1	
<i>diltiazem 120mg er (12hr) cap</i>	1	
<i>diltiazem 120mg er (24hr) cap</i>	1	
<i>diltiazem 120mg tab</i>	1	
<i>diltiazem 180mg er (24hr) cap</i>	1	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tiadylt 360mg er (24hr) cap</i>	1	
<i>tiadylt 420mg er (24hr) cap</i>	1	
<i>verapamil 120mg er cap</i>	1	
<i>verapamil 120mg er tab</i>	1	
<i>verapamil 120mg tab</i>	1	
<i>verapamil 180mg er cap</i>	1	
<i>verapamil 180mg er tab</i>	1	
<i>verapamil 240mg er cap</i>	1	
<i>verapamil 240mg er tab</i>	1	
<i>verapamil 40mg tab</i>	1	
<i>verapamil 80mg tab</i>	1	
CARDIOVASCULAR AGENTS		
ALPHA-ADRENERGIC AGONISTS		
<i>droxidopa 100mg cap</i>	1	PA QL=90 EA/30 Days
<i>droxidopa 200mg cap</i>	1	PA QL=180 EA/30 Days
<i>droxidopa 300mg cap</i>	1	PA QL=180 EA/30 Days
<i>midodrine 10mg tab</i>	1	
<i>midodrine 2.5mg tab</i>	1	
<i>midodrine 5mg tab</i>	1	
CARDIOVASCULAR AGENTS, OTHER		
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cefazolin 200mg/ml inj</i>	1	
<i>cefazolin 500mg inj</i>	1	
<i>cephalexin 250mg cap</i>	1	
<i>cephalexin 25mg/ml oral susp</i>	1	
<i>cephalexin 500mg cap</i>	1	
<i>cephalexin 50mg/ml oral susp</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
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

You can find information 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>budesonide 9mg er tab</i>	1	PA QL=30 EA/30 Days
DEXAMETHASONE 0.1MG/ML ORAL SOLN	1	
<i>dexamethasone 0.5mg tab</i>	1	
<i>dexamethasone 0.75mg tab</i>	1	
<i>dexamethasone 1.5mg tab</i>	1	
<i>dexamethasone 1mg tab</i>	1	
<i>dexamethasone 2mg tab</i>	1	
<i>dexamethasone 4mg tab</i>	1	
<i>dexamethasone 6mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	1	
<i>hydrocortisone 20mg tab</i>	1	
<i>hydrocortisone 5mg tab</i>	1	
<i>methylprednisolone 16mg tab</i>	1	PA BvD
<i>methylprednisolone 32mg tab</i>	1	PA BvD
<i>methylprednisolone 4mg tab</i>	1	PA BvD
<i>methylprednisolone 4mg tab pack (21)</i>	1	
<i>methylprednisolone 8mg tab</i>	1	PA BvD
<i>prednisolone 1mg/ml oral soln</i>	1	PA BvD
<i>prednisolone 3mg/ml oral soln</i>	1	PA BvD
<i>prednisolone 5mg/ml oral soln</i>	1	PA BvD
<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 acetonide 0.1% oral paste</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
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>accutane 10mg cap</i>	1	
<i>accutane 20mg cap</i>	1	
<i>accutane 40mg cap</i>	1	
<i>amneesteem 10mg cap</i>	1	
<i>amneesteem 20mg cap</i>	1	
<i>amneesteem 30mg cap</i>	1	
<i>amneesteem 40mg cap</i>	1	
<i>claravis 10mg cap</i>	1	
<i>claravis 20mg cap</i>	1	
<i>claravis 30mg cap</i>	1	
<i>claravis 40mg cap</i>	1	
<i>clindamycin 1% gel</i>	1	QL=75 GM/30 Days
<i>clindamycin 1% gel (twice-daily)</i>	1	QL=75 GM/30 Days
<i>clindamycin 1% lotion</i>	1	QL=60 ML/30 Days
<i>clindamycin 1% topical soln</i>	1	QL=60 ML/30 Days
<i>erythromycin 2% gel</i>	1	QL=60 GM/30 Days
<i>erythromycin 2% topical soln</i>	1	QL=60 ML/30 Days
<i>isotretinoin 10mg cap</i>	1	
<i>isotretinoin 20mg cap</i>	1	
<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

You can find information 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>ketoconazole 2% cream</i>	1	QL=120 GM/30 Days
<i>ketoconazole 2% shampoo</i>	1	QL=240 ML/30 Days
<i>nyamyc 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
<i>nystatin 100000 unit/gm ointment</i>	1	QL=30 GM/30 Days
<i>nystatin 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
<i>nystatin 100000unit/ml cream</i>	1	QL=30 GM/30 Days
<i>% ointment</i>	1	QL=60 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	1	QL=60 GM/30 Days
<i>nystop 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene 1% gel</i>	1	PA NSO QL=60 GM/30 Days
<i>diclofenac sodium 3% gel</i>	1	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	1	QL=10 ML/30 Days
<i>fluorouracil 5% cream</i>	1	QL=40 GM/30 Days
<i>fluorouracil 5% topical soln</i>	1	QL=10 ML/30 Days
PANRETIN 0.1% GEL	1	NDS PA NSO QL=60 GM/30 Days
VALCHLOR 0.016% GEL	1	NDS PA NSO QL=240 GM/30 Days
ANTIPSORIATICS		
<i>acitretin 10mg cap</i>	1	
<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
STEQEYMA 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TREMFYA 200MG/2ML SYRINGE	1	NDS PA QL=2 ML/28 Days
YESINTEK 90MG/ML SYRINGE	1	PA QL=1 ML/28 Days
CORTICOSTEROIDS - TOPICAL		
<i>ala-cort 1% cream</i>	1	QL=240 GM/30 Days
ALCLOMETASONE 0.05% OINT	1	QL=120 GM/30 Days
<i>alclometasone dipropionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>betamethasone 0.05% aug cream</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% aug lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% aug ointment</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% cream</i>	1	QL=90 GM/30 Days
<i>betamethasone 0.05% lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% ointment</i>	1	QL=90 GM/30 Days
<i>betamethasone 0.1% cream</i>	1	QL=180 GM/30 Days
<i>betamethasone 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>clobetasol propionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% e cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% foam</i>	1	QL=100 GM/30 Days
<i>clobetasol propionate 0.05% gel</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% lotion</i>	1	QL=118 ML/30 Days
<i>clobetasol propionate 0.05% ointment</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% shampoo</i>	1	QL=236 ML/30 Days
<i>clobetasol propionate 0.05% topical soln</i>	1	QL=100 ML/30 Days
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HYDROCORTISONE LOTION 2.5%	1	QL=118 ML/30 Days
<i>mometasone furoate 0.1% cream</i>	1	QL=180 GM/30 Days
<i>mometasone furoate 0.1% lotion</i>	1	QL=180 ML/30 Days
<i>mometasone furoate 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>triamcinolone acetonide 0.025% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.025% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.025% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.1% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% ointment</i>	1	QL=120 GM/30 Days
<i>triderm 0.5% cream</i>	1	QL=454 GM/30 Days
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus 1% cream</i>	1	QL=100 GM/30 Days
<i>tacrolimus 0.03% ointment</i>	1	QL=100 GM/30 Days
<i>tacrolimus 0.1% ointment</i>	1	QL=100 GM/30 Days
LOCAL ANESTHETICS - TOPICAL		
<i>lidocaine 4% mucous membrane topical soln</i>	1	QL=50 ML/30 Days
<i>lidocaine 5% ointment</i>	1	PA QL=107 GM/30 Days
<i>lidocaine 5% patch</i>	1	PA QL=90 EA/30 Days
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	1	QL=30 GM/30 Days
<i>lidocaine 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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CREON 120000-24000-76000UNIT DR CAP	1	
CREON 15000-3000-9500UNIT DR CAP	1	
CREON 180000-36000-114000UNIT DR CAP	1	
CREON 30000-6000-19000UNIT DR CAP	1	
CREON 60000-12000-38000UNIT DR CAP	1	
SUCRAID 8500UNIT/ML ORAL SOLN	1	NDS PA
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide 125mg tab</i>	1	
<i>acetazolamide 250mg tab</i>	1	
<i>acetazolamide 500mg er cap</i>	1	
<i>methazolamide 25mg tab</i>	1	
<i>methazolamide 50mg tab</i>	1	
DIURETIC COMBINATIONS		
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	1	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	1	
LOOP DIURETICS		
<i>bumetanide 0.25mg/ml inj</i>	1	
<i>bumetanide 0.5mg tab</i>	1	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydrochlorothiazide 12.5mg tab</i>	1	
<i>hydrochlorothiazide 25mg tab</i>	1	
<i>hydrochlorothiazide 50mg tab</i>	1	
<i>indapamide 1.25mg tab</i>	1	
<i>indapamide 2.5mg tab</i>	1	
<i>metolazone 10mg tab</i>	1	
<i>metolazone 2.5mg tab</i>	1	
<i>metolazone 5mg tab</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
<i>alendronate sodium 10mg tab</i>	1	
<i>alendronate sodium 35mg tab</i>	1	
<i>alendronate sodium 70mg tab</i>	1	
<i>ibandronate 150mg tab</i>	1	QL=1 EA/30 Days
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>aviane tab 28-day pack</i>	1	
<i>azurette 28 day pack</i>	1	
<i>balziva tab 28-day pack</i>	1	
<i>blisovi 21 fe tab 1.5/30 28-day pack</i>	1	
<i>blisovi 24 fe tab 1/20 28-day pack</i>	1	
<i>briellyn tab 28-day pack</i>	1	
<i>camreselo tab 91-day pack</i>	1	
<i>cryselle tab 28-day pack</i>	1	
<i>cyred tab 28-day pack</i>	1	
<i>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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack</i>	1	
<i>ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25mg-mcg tab 28-day pack</i>	1	
<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35mg-mcg tab 28-day pack</i>	1	
<i>falmina tab 28-day pack</i>	1	
<i>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>jaimiess tab 91-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 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>lo jaimiess tab 91-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	

You can find information 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>mibelas 24 fe chewable tab 28-day pack</i>	1	
<i>microgestin 1.5/30 tab 21-day pack</i>	1	
<i>microgestin 1/20 tab 21-day pack</i>	1	
<i>microgestin fe tab 1.5/30 28-day pack</i>	1	
<i>microgestin fe tab 1/20 28-day pack</i>	1	
<i>mili tab 28-day pack</i>	1	
<i>mimvey 28-day pack</i>	1	
<i>necon 0.5/35 tab 28-day pack</i>	1	
<i>nikki tab 28-day pack</i>	1	
<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	1	
<i>nortrel 0.5/35 tab 28-day pack</i>	1	
<i>nortrel 1/35 tab 21-day pack</i>	1	
<i>nortrel 1/35 tab 28-day pack</i>	1	
<i>nortrel 7/7/7 tab 28-day pack</i>	1	
<i>nylia 1/35 tab 28-day pack</i>	1	
<i>nylia 7/7/7 tab 28-day pack</i>	1	
<i>ocella tab 28-day pack</i>	1	
<i>pimtrea tab 28-day pack</i>	1	
<i>portia tab 28-day pack</i>	1	
PREMPHASE 28-DAY PACK	1	
PREMPRO 0.3/1.5MG 28-DAY PACK	1	
PREMPRO 0.45/1.5MG 28-DAY PACK	1	
PREMPRO 0.625/2.5MG 28-DAY PACK	1	
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	
<i>valtya tab 1/50 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	

You can find information 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>vyfemla tab 28-day pack</i>	1	
<i>vylibra tab 28-day pack</i>	1	
<i>xulane 150-35mcg/24hr patch</i>	1	
<i>zafemy 150-35mcg/24hr patch</i>	1	
<i>zovia 1mg-35mcg tab 28-day pack</i>	1	
ESTROGENS		
<i>dotti 0.025mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.0375mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.05mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.075mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.1mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.0025mg/hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.01mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.01mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.025mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.025mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.0375mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.0375mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.05mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.05mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.075mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.075mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.5mg tab</i>	1	
<i>estradiol 1mg tab</i>	1	
<i>estradiol 2mg tab</i>	1	
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>levofloxacin 25mg/ml oral soln</i>	1	
<i>levofloxacin 500mg tab</i>	1	
<i>levofloxacin 500mg/100ml inj</i>	1	
<i>levofloxacin 750mg tab</i>	1	
<i>levofloxacin 750mg/150ml inj</i>	1	
MOXIFLOXACIN 1.6MG/ML INJ	1	
<i>moxifloxacin 400mg tab</i>	1	
GASTROINTESTINAL AGENTS		
GASTROINTESTINAL AGENTS, OTHER		
<i>cromolyn sodium 20mg/ml oral soln</i>	1	
<i>enulose 10gm/15ml oral soln</i>	1	
GATTEX 5MG INJ	1	NDS PA
<i>generlac 10gm/15ml oral soln</i>	1	
<i>metoclopramide 10mg tab</i>	1	
<i>metoclopramide 1mg/ml oral soln</i>	1	
<i>metoclopramide 5mg tab</i>	1	
REZDIFFRA 100MG TAB	1	NDS PA QL=30 EA/30 Days
REZDIFFRA 60MG TAB	1	NDS PA QL=30 EA/30 Days
REZDIFFRA 80MG TAB	1	NDS PA QL=30 EA/30 Days
<i>ursodiol 250mg tab</i>	1	
<i>ursodiol 300mg cap</i>	1	
<i>ursodiol 500mg tab</i>	1	
VOWST 30000000UNIT CAP	1	NDS PA QL=12 EA/30 Days
GASTROINTESTINAL AGENTS - MISC.		
INFLAMMATORY BOWEL AGENTS		
<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	
TREMFYA 200MG/2ML AUTO-INJECTOR INDUCTION PACK FOR CROHNS (2)	1	NDS PA QL=4 ML/28 Days
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		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	
<i>dutasteride 0.5mg cap</i>	1	
<i>finasteride 5mg tab</i>	1	
<i>tadalafil 2.5mg tab</i>	1	PA QL=30 EA/30 Days
<i>tadalafil 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>tamsulosin 0.4mg cap</i>	1	
GOUT AGENTS		
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	1	
<i>allopurinol 300mg tab</i>	1	
<i>colchicine 0.6mg tab</i>	1	
<i>colchicine/probenecid 0.5-500mg tab</i>	1	
<i>febuxostat 40mg tab</i>	1	ST
<i>febuxostat 80mg tab</i>	1	ST
<i>probenecid 500mg tab</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide 0.5mg cap</i>	1	
<i>anagrelide 1mg cap</i>	1	
<i>aspirin/dipyridamole 25-200mg er cap</i>	1	QL=60 EA/30 Days
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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	

You can find information 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>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	1	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	1	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	1	
SUFLAVE SOLN PACK	1	
LAXATIVES - MISCELLANEOUS		
<i>constulose 10gm/15ml oral soln</i>	1	
<i>lactulose 667mg/ml oral soln</i>	1	
LINZESS 145MCG CAP	1	QL=30 EA/30 Days
LINZESS 290MCG CAP	1	QL=30 EA/30 Days
LINZESS 72MCG CAP	1	QL=30 EA/30 Days
<i>lubiprostone 24mcg cap</i>	1	QL=60 EA/30 Days
<i>lubiprostone 8mcg cap</i>	1	QL=60 EA/30 Days
MOVANTIK 12.5MG TAB	1	PA QL=30 EA/30 Days
MOVANTIK 25MG TAB	1	PA QL=30 EA/30 Days
TRULANCE 3MG TAB	1	QL=30 EA/30 Days
MEDICAL DEVICES AND SUPPLIES		
BANDAGES-DRESSINGS-TAPE		
GAUZE PAD (2 X 2)	1	
MISC. DEVICES		
ALCOHOL SWAB 1X1 (DIABETIC)	1	
PARENTERAL THERAPY SUPPLIES		
INSULIN PEN NEEDLE	1	
INSULIN SYRINGE	1	
INSULIN SYRINGE (DISP) U-100 0.3ML	1	
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

You can find information 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>sumatriptan 100mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 25mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 4mg/0.5ml cartridge</i>	1	QL=5 ML/30 Days
<i>sumatriptan 50mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 6mg/0.5ml auto-injector</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml cartridge</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml inj</i>	1	QL=5 ML/30 Days
<i>zolmitriptan 2.5mg tab</i>	1	QL=18 EA/30 Days
<i>zolmitriptan 5mg tab</i>	1	QL=18 EA/30 Days
MINERALS & ELECTROLYTES		
ELECTROLYTE MIXTURES		
ELECTROLYTE-148 SOLUTION	1	
GLUCOSE 100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	1	PA BvD
GLUCOSE 100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	1	PA BvD
<i>glucose 50mg/ml/potassium chloride 0.01meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 2.25mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 9mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.03meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 9mg/ml inj</i>	1	
GLUCOSE 50MG/ML/SODIUM CHLORIDE 2MG/ML INJ	1	
GLUCOSE 50MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	1	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	1	
GLUCOSE/SODIUM CHLORIDE 25MG/ML-4.5MG/ML INJ	1	
KCL/D5W/LR INJ 0.15%	1	
<i>kcl/nacl 20meq-0.45% inj</i>	1	
<i>kcl/nacl 20meq-0.9% inj</i>	1	
<i>kcl/nacl 40meq-9% inj</i>	1	
PLASMA-LYTE A INJ	1	
TPN ELECTROLYTES INJ	1	PA BvD
MAGNESIUM		

You can find information 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>magnesium sulfate 500mg/ml inj</i>	1	
<i>magnesium sulfate 500mg/ml syringe</i>	1	
POTASSIUM		
<i>klor-con 10meq er tab</i>	1	
<i>klor-con 10meq micro er tab</i>	1	
<i>klor-con 15meq micro er tab</i>	1	
<i>klor-con 20meq micro er tab</i>	1	
<i>klor-con 20meq powder for oral soln</i>	1	
<i>klor-con 8meq er tab</i>	1	
<i>potassium chloride 1.33meq/ml oral soln</i>	1	
<i>potassium chloride 10meq er cap</i>	1	
<i>potassium chloride 10meq er tab</i>	1	
<i>potassium chloride 10meq micro er tab</i>	1	
POTASSIUM CHLORIDE 10MEQ/100ML INJ	1	
POTASSIUM CHLORIDE 15MEQ ER TAB	1	
<i>potassium chloride 15meq micro er tab</i>	1	
<i>potassium chloride 2.67meq/ml oral soln</i>	1	
<i>potassium chloride 20meq er tab</i>	1	
<i>potassium chloride 20meq micro er tab</i>	1	
<i>potassium chloride 20meq powder for oral soln</i>	1	
POTASSIUM CHLORIDE 20MEQ/100ML INJ	1	
<i>potassium chloride 2meq/ml (20ml) inj</i>	1	
<i>potassium chloride 2meq/ml inj</i>	1	
POTASSIUM CHLORIDE 40MEQ/100ML INJ	1	
<i>potassium chloride 8meq er cap</i>	1	
<i>potassium chloride 8meq er tab</i>	1	
SODIUM		
<i>sodium chloride 0.45% inj</i>	1	
<i>sodium chloride 0.9% inj</i>	1	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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>engraft 100mg cap</i>	1	PA BvD
<i>engraft 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	1	
<i>sps 15gm/60ml susp</i>	1	
VELTASSA 16.8GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
VELTASSA 1GM POWDER FOR ORAL SUSP	1	PA QL=120 EA/30 Days
VELTASSA 25.2GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
VELTASSA 8.4GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen 10mg tab</i>	1	
<i>baclofen 20mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	PA QL=90 EA/30 Days
<i>chlorzoxazone 500mg tab</i>	1	PA
<i>cyclobenzaprine 10mg tab</i>	1	PA QL=90 EA/30 Days
<i>cyclobenzaprine 5mg tab</i>	1	PA QL=90 EA/30 Days
<i>metaxalone 800mg tab</i>	1	PA
<i>methocarbamol 500mg tab</i>	1	PA
<i>methocarbamol 750mg tab</i>	1	PA
<i>orphenadrine citrate 100mg er tab</i>	1	PA
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg tab</i>	1	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium 100mg cap</i>	1	
<i>dantrolene sodium 25mg cap</i>	1	
<i>dantrolene sodium 50mg cap</i>	1	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	1	QL=60 ML/30 Days
<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	1	QL=50 ML/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	1	QL=32 GM/30 Days
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	1	QL=30 ML/30 Days
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	1	QL=45 ML/30 Days
<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	1	QL=30.50 GM/30 Days
NEUROMUSCULAR AGENTS		
ALS AGENTS		
RADICAVA 105MG/5ML ORAL SUSP	1	NDS PA QL=70 ML/28 Days
<i>riluzole 50mg tab</i>	1	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI 0.75MG/ML ORAL SOLN	1	NDS PA QL=240 ML/30 Days
EVRYSDI 5MG TAB	1	NDS PA QL=30 EA/30 Days
NUTRIENTS		
CARBOHYDRATES		
DEXTROSE 10% INJ	1	PA BvD

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>glucose 50mg/ml inj</i>	1	
PROTEINS		
CLINIMIX 4.25/10 INJ	1	PA BvD
CLINIMIX 4.25/5 INJ	1	PA BvD
CLINIMIX 5/15 INJ	1	PA BvD
CLINIMIX 5/20 INJ	1	PA BvD
<i>clinisol 15% inj</i>	1	PA BvD
<i>plenamine 15% inj</i>	1	PA BvD
PROSOL 20% INJ	1	PA BvD
TRAVASOL 10% INJ	1	PA BvD
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPHTHALMIC		
BETAXOLOL 0.5% OPHTH SOLN	1	
<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	1	
CARTEOLOL 1% OPHTH SOLN	1	
<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	1	
<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	1	
LEVOBUNOLOL 0.5% OPHTH SOLN	1	
<i>timolol 0.25% ophth gel</i>	1	
<i>timolol 0.25% ophth soln</i>	1	
<i>timolol 0.5% ophth gel</i>	1	
<i>timolol 0.5% ophth soln</i>	1	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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% OPTH SOLN	1	QL=15 ML/7 Days
XDEMVY 0.25% OPTH SOLN	1	PA QL=10 ML/42 Days
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPTH SOLN	1	QL=5 ML/30 Days
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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

You can find information 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>penicillin v potassium 500mg tab</i>	1	
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin/clavulanate 250-125mg tab</i>	1	
<i>amoxicillin/clavulanate 500-125mg tab</i>	1	
<i>amoxicillin/clavulanate 875-125mg tab</i>	1	
<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	1	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	1	
<i>ampicillin/sulbactam 1000-500mg inj</i>	1	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	1	
<i>piperacillin/tazobactam 2000-250mg inj</i>	1	
<i>piperacillin/tazobactam 3000-375mg inj</i>	1	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	1	
<i>piperacillin/tazobactam 4000-500mg inj</i>	1	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	
<i>nafcillin 100mg/ml inj</i>	1	
<i>nafcillin 1gm inj</i>	1	
<i>nafcillin 2gm inj</i>	1	
<i>oxacillin 100mg/ml inj</i>	1	
<i>oxacillin 1gm inj</i>	1	
<i>oxacillin 2gm inj</i>	1	
PROGESTINS		
PROGESTINS		
<i>camila 0.35mg tab 28-day pack</i>	1	
<i>deblitane 0.35mg tab 28-day pack</i>	1	
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	1	
<i>errin 0.35mg tab 28-day pack</i>	1	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>nora-be 0.35mg tab 28-day pack</i>	1	
<i>norethindrone 0.35mg 28-day pack</i>	1	
<i>norethindrone acetate 5mg tab</i>	1	
<i>progesterone 100mg cap</i>	1	
<i>progesterone 200mg cap</i>	1	
<i>sharobel 0.35mg tab 28-day pack</i>	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium 333mg dr tab</i>	1	
<i>disulfiram 250mg tab</i>	1	
<i>disulfiram 500mg tab</i>	1	
ANTIDEMENTIA AGENTS		
<i>donepezil 10mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 10mg tab</i>	1	QL=60 EA/30 Days
<i>donepezil 23mg tab</i>	1	ST QL=30 EA/30 Days
<i>donepezil 5mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 5mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine 12mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine 4mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine 8mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine hydrobromide 16mg er cap</i>	1	QL=30 EA/30 Days
<i>galantamine hydrobromide 24mg er cap</i>	1	QL=30 EA/30 Days
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	1	QL=200 ML/30 Days
<i>galantamine hydrobromide 8mg er cap</i>	1	QL=30 EA/30 Days
<i>memantine 10mg tab</i>	1	QL=60 EA/30 Days
<i>memantine 14mg er cap</i>	1	ST QL=30 EA/30 Days
<i>memantine 21mg er cap</i>	1	ST QL=30 EA/30 Days
<i>memantine 28mg er cap</i>	1	ST QL=30 EA/30 Days
<i>memantine 2mg/ml oral soln</i>	1	QL=300 ML/30 Days
<i>memantine 5mg tab</i>	1	QL=60 EA/30 Days
<i>memantine 7mg er cap</i>	1	ST QL=30 EA/30 Days
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
AUSTEDO XR 24MG TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO XR 30MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 36MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 42MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 48MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 6MG TAB	1	NDS PA QL=90 EA/30 Days
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATION PACK	1	NDS PA QL=28 EA/28 Days
INGREZZA 40MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 40MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 60MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 60MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 80MG CAP	1	NDS PA QL=30 EA/30 Days
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		

You can find information 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 150mg sr (12hr) tab</i>	1	
NICOTROL 10MG/ML NASAL INHALER	1	
<i>varenicline 0.5mg tab</i>	1	QL=56 EA/28 Days
<i>varenicline 0.5mg/1mg first month pack (53)</i>	1	QL=53 EA/28 Days
<i>varenicline 1mg tab</i>	1	QL=56 EA/28 Days
<i>varenicline 1mg tab pack (56)</i>	1	QL=56 EA/28 Days
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
PROLASTIN 1000MG INJ	1	NDS PA
ZEMAIRA 1000MG INJ	1	NDS PA
CYSTIC FIBROSIS AGENTS		
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	

You can find information 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>promethazine 12.5mg tab</i>	1	
<i>promethazine 25mg tab</i>	1	
<i>promethazine 50mg tab</i>	1	
PULMONARY ANTIHYPERTENSIVES		
ADEMPAS 0.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	1	NDS PA QL=90 EA/30 Days
<i>alyq 20mg tab</i>	1	PA QL=60 EA/30 Days
<i>ambrisentan 10mg tab</i>	1	PA QL=30 EA/30 Days
<i>ambrisentan 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>bosentan 125mg tab</i>	1	PA QL=60 EA/30 Days
<i>bosentan 62.5mg tab</i>	1	PA QL=60 EA/30 Days
OPSUMIT 10MG TAB	1	NDS PA QL=30 EA/30 Days
<i>sildenafil 20mg tab</i>	1	PA QL=360 EA/30 Days
<i>tadalafil 20mg tab</i>	1	PA QL=60 EA/30 Days
WINREVAIR 45MG INJ	1	NDS PA QL=1 EA/21 Days
WINREVAIR 45MG INJ (2 VIAL PACK)	1	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ	1	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ (2 VIAL PACK)	1	NDS PA QL=1 EA/21 Days
RESPIRATORY TRACT/PULMONARY AGENTS		
PHOSPHODIESTERASE INHIBITORS, AIRWAYS DISEASE		
<i>roflumilast 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>roflumilast 250mcg tab</i>	1	QL=28 EA/365 Days
THEOPHYLLINE 100MG ER TAB	1	
THEOPHYLLINE 200MG ER TAB	1	
<i>theophylline 300mg er tab</i>	1	
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450mg er tab</i>	1	
<i>theophylline 600mg er tab</i>	1	
SLEEP DISORDER AGENTS		
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	

You can find information 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>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 inj</i>	1	
<i>doxycycline hyclate 100mg tab</i>	1	
<i>doxycycline hyclate 20mg tab</i>	1	
<i>doxycycline hyclate 50mg cap</i>	1	
<i>doxycycline monohydrate 100mg cap</i>	1	
<i>doxycycline monohydrate 100mg tab</i>	1	
<i>doxycycline monohydrate 50mg cap</i>	1	
<i>doxycycline monohydrate 50mg tab</i>	1	
<i>doxycycline monohydrate 5mg/ml oral susp</i>	1	
<i>minocycline 100mg cap</i>	1	
<i>minocycline 50mg cap</i>	1	
<i>minocycline 75mg cap</i>	1	
<i>tetracycline 250mg cap</i>	1	
<i>tetracycline 500mg cap</i>	1	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole 10mg tab</i>	1	
<i>methimazole 5mg tab</i>	1	
<i>propylthiouracil 50mg tab</i>	1	
THYROID HORMONES		
<i>euthyrox 100mcg tab</i>	1	
<i>euthyrox 112mcg tab</i>	1	
<i>euthyrox 125mcg tab</i>	1	
<i>euthyrox 137mcg tab</i>	1	
<i>euthyrox 150mcg tab</i>	1	
<i>euthyrox 175mcg tab</i>	1	
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>levothyroxine sodium 200mcg tab</i>	1	
<i>levothyroxine sodium 25mcg tab</i>	1	
<i>levothyroxine sodium 300mcg tab</i>	1	
<i>levothyroxine sodium 50mcg tab</i>	1	
<i>levothyroxine sodium 75mcg tab</i>	1	
<i>levothyroxine sodium 88mcg tab</i>	1	
<i>levoxyl 100mcg tab</i>	1	
<i>levoxyl 112mcg tab</i>	1	
<i>levoxyl 125mcg tab</i>	1	
<i>levoxyl 137mcg tab</i>	1	
<i>levoxyl 150mcg tab</i>	1	
<i>levoxyl 175mcg tab</i>	1	
<i>levoxyl 200mcg tab</i>	1	
<i>levoxyl 25mcg tab</i>	1	
<i>levoxyl 50mcg tab</i>	1	
<i>levoxyl 75mcg tab</i>	1	
<i>levoxyl 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	1	
<i>liothyronine sodium 50mcg tab</i>	1	
<i>liothyronine sodium 5mcg tab</i>	1	
<i>unithroid 100mcg tab</i>	1	
<i>unithroid 112mcg tab</i>	1	
<i>unithroid 125mcg tab</i>	1	
<i>unithroid 137mcg tab</i>	1	
<i>unithroid 150mcg tab</i>	1	
<i>unithroid 175mcg tab</i>	1	
<i>unithroid 200mcg tab</i>	1	
<i>unithroid 25mcg tab</i>	1	
<i>unithroid 300mcg tab</i>	1	
<i>unithroid 50mcg tab</i>	1	
<i>unithroid 75mcg tab</i>	1	
<i>unithroid 88mcg tab</i>	1	
TOXOIDS		
TOXOID COMBINATIONS		
ADACEL INJ	1	VAC
ADACEL SYRINGE	1	VAC
BOOSTRIX INJ	1	VAC
BOOSTRIX SYRINGE	1	VAC
DAPTACEL INJ	1	
INFANRIX SYRINGE	1	
KINRIX SYRINGE	1	
PEDIARIX SYRINGE	1	
PENTACEL 96-30-68UNIT/ML INJ	1	
QUADRACEL INJ	1	
QUADRACEL 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
TENIVAC 4-10UNIT/ML INJ	1	PA BvD VAC
TENIVAC 4-10UNIT/ML SYRINGE	1	PA BvD VAC
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>dicyclomine 10mg cap</i>	1	
<i>dicyclomine 20mg tab</i>	1	
<i>dicyclomine 2mg/ml oral soln</i>	1	
<i>glycopyrrolate 1mg tab</i>	1	
<i>glycopyrrolate 2mg tab</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine 200mg tab</i>	1	
<i>cimetidine 300mg tab</i>	1	
<i>cimetidine 400mg tab</i>	1	
<i>cimetidine 800mg tab</i>	1	
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
MISC. ANTI-ULCER		
<i>misoprostol 100mcg tab</i>	1	
<i>misoprostol 200mcg tab</i>	1	
<i>sucralfate 1000mg tab</i>	1	
<i>sucralfate 100mg/ml oral susp</i>	1	
PROTON PUMP INHIBITORS		
<i>esomeprazole 20mg dr cap</i>	1	
<i>esomeprazole 40mg dr cap</i>	1	
<i>lansoprazole 15mg dr cap</i>	1	
<i>lansoprazole 30mg dr cap</i>	1	
<i>omeprazole 10mg dr cap</i>	1	
<i>omeprazole 20mg dr cap</i>	1	
<i>omeprazole 40mg dr cap</i>	1	
<i>pantoprazole 20mg dr tab</i>	1	
<i>pantoprazole 40mg dr tab</i>	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>fesoterodine fumarate 4mg er tab</i>	1	QL=30 EA/30 Days
<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

You can find information 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>trosipium chloride 60mg er cap</i>	1	QL=30 EA/30 Days
URINARY ANTISPASMODICS		
<i>bethanechol chloride 10mg tab</i>	1	
<i>bethanechol chloride 25mg tab</i>	1	
<i>bethanechol chloride 50mg tab</i>	1	
<i>bethanechol chloride 5mg tab</i>	1	
<i>flavoxate 100mg tab</i>	1	
<i>mirabegron 25mg er tab</i>	1	QL=30 EA/30 Days
<i>mirabegron 50mg er tab</i>	1	QL=30 EA/30 Days
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ	1	
BCG LIVE TICE STRAIN 50MG INJ	1	VAC
BEXSERO SYRINGE	1	VAC
HIBERIX 10MCG INJ	1	
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RECOMBIVAX 10MCG/ML INJ	1	PA BvD VAC
RECOMBIVAX 10MCG/ML SYRINGE	1	PA BvD VAC
RECOMBIVAX 40MCG/ML INJ	1	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML INJ	1	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML SYRINGE	1	PA BvD VAC
ROTARIX 667000UNIT/ML ORAL SUSP	1	
ROTATEQ ORAL SUSP	1	
SHINGRIX 50MCG/0.5ML INJ	1	QL=2 EA/365 DaysVAC
TICOVAC 1.2MCG/0.25ML SYRINGE	1	
TICOVAC 2.4MCG/0.5ML SYRINGE	1	VAC
TWINRIX SYRINGE	1	VAC
VAQTA 25UNIT/0.5ML INJ	1	
VAQTA 25UNIT/0.5ML SYRINGE	1	
VAQTA 50UNIT/ML INJ	1	VAC
VAQTA 50UNIT/ML SYRINGE	1	VAC
VARIVAX 1350PFU/0.5ML INJ	1	VAC
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	ADEMPAS 2MG TAB 78
<i>abacavir 300mg tab</i>	43	<i>acitretin 17.5mg cap</i>	53	ADVAIR 115-21MCG HFA 9
<i>abacavir/lamivudine 600-300mg tab</i>	43	<i>acitretin 25mg cap</i>	53	INHALER
ABELCET 5MG/ML INJ 22		ACTEMRA 3		ADVAIR 230-21MCG HFA INHALER 9
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE 43		162MG/0.9ML		ADVAIR 45-21MCG/ACT HFA INHALER 9
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE 43		AUTO-INJECTOR		AKEEGA 500-100MG TAB 31
ABILIFY MAINTENA 300MG INJ 43		ACTEMRA 3		AKEEGA 500-50MG TAB 31
ABILIFY MAINTENA 300MG SYRINGE 43		162MG/0.9ML SYRINGE		<i>ala-cort 1% cream</i> 54
ABILIFY MAINTENA 400MG INJ 43		ACTHIB INJ 82		<i>albendazole 200mg tab</i> 6
ABILIFY MAINTENA 400MG SYRINGE 43		ACTIMMUNE 37		<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i> 9
<i>abiraterone acetate 250mg tab</i> 31		2000000UNIT/0.5ML INJ		<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i> 9
<i>abirtega 250mg tab</i> 31		<i>acyclovir 200mg cap</i> 46		<i>albuterol 0.83mg/ml (0.083%) inh soln</i> 9
ABRYSVO 82		<i>acyclovir 400mg tab</i> 46		<i>albuterol 1.25mg/3ml neb soln</i> 9
<i>acamprosate calcium 333mg dr tab</i> 75		<i>acyclovir 40mg/ml oral susp</i> 46		<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i> 9
<i>acarbose 100mg tab</i> 19		<i>acyclovir 5% ointment</i> 55		<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i> 9
<i>acarbose 25mg tab</i> 19		<i>acyclovir 50mg/ml inj</i> 46		<i>albuterol 2mg tab</i> 9
<i>acarbose 50mg tab</i> 19		<i>acyclovir 800mg tab</i> 46		<i>albuterol 4mg tab</i> 10
<i>accutane 10mg cap</i> 52		ADACEL INJ 80		<i>albuterol 5mg/ml (0.05%) inh soln</i> 10
<i>accutane 20mg cap</i> 52		ADACEL SYRINGE 80		ALCLOMETASONE 54
<i>accutane 40mg cap</i> 52		ADALIMUMAB-AATY 2		0.05% OINT
<i>acebutolol 200mg cap</i> 47		100MG/ML (0.2ML) SYRINGE		<i>alclometasone dipropionate 0.05% cream</i> 54
<i>acebutolol 400mg cap</i> 47		ADALIMUMAB-AATY 2		ALCOHOL SWAB 1X1 (DIABETIC) 66
<i>acetazolamide 125mg tab</i> 56		100MG/ML (0.4ML) SYRINGE		ALECENSA 150MG CAP 32
<i>acetazolamide 250mg tab</i> 56		ADALIMUMAB-AATY 3		<i>alendronate sodium 10mg tab</i> 57
<i>acetazolamide 500mg er cap</i> 56		80MG/0.8ML		<i>alendronate sodium 35mg tab</i> 57
<i>acetic acid 2% otic soln</i> 73		AUTO-INJECTOR PACK (3)		<i>alendronate sodium 70mg tab</i> 57
<i>acetylcysteine 100mg/ml inh soln</i> 51		<i>adefovir dipivoxil 10mg tab</i> 46		
<i>acetylcysteine 200mg/ml inh soln</i> 51		ADEMPAS 0.5MG TAB 78		
		ADEMPAS 1.5MG TAB 78		
		ADEMPAS 1MG TAB 78		
		ADEMPAS 2.5MG TAB 78		

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

ALPHABETICAL LISTING OF DRUGS

<i>alfuzosin 10mg er tab</i>	64	<i>amitriptyline 25mg tab</i>	18	<i>amlodipine/hydrochloroth</i>	26
<i>aliskiren 150mg tab</i>	27	<i>amitriptyline 50mg tab</i>	18	<i>iazide/valsartan</i>	
<i>aliskiren 300mg tab</i>	27	<i>amitriptyline 75mg tab</i>	18	<i>10-25-320mg tab</i>	
<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>amnesteeem 10mg cap</i>	52
<i>soln</i>		<i>amlodipine/hydrochloroth</i>	26	<i>amnesteeem 20mg cap</i>	52
<i>ambrisentan 10mg tab</i>	78	<i>iazide/olmesartan</i>		<i>amnesteeem 30mg cap</i>	52
<i>ambrisentan 5mg tab</i>	78	<i>medoxomil 5-12.5-40mg</i>		<i>amnesteeem 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>	18	<i>amlodipine/hydrochloroth</i>	26	CHEW TAB	
<i>amitriptyline 10mg tab</i>	18	<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>	

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 40mg/ml oral susp</i>	73	<i>ampicillin 1000mg inj</i>	73	ARISTADA	43
<i>amoxicillin 500mg cap</i>	73	<i>ampicillin 100mg/ml inj</i>	73	441MG/1.6ML SYRINGE	
<i>amoxicillin 500mg tab</i>	73	<i>ampicillin 500mg cap</i>	73	ARISTADA	43
<i>amoxicillin 50mg/ml oral susp</i>	73	<i>ampicillin/sulbactam 1000-500mg inj</i>	74	662MG/2.4ML SYRINGE	
<i>amoxicillin 80mg/ml oral susp</i>	73	<i>ampicillin/sulbactam 100-50mg/ml inj</i>	74	ARISTADA	43
<i>amoxicillin 875mg tab</i>	73	<i>ampicillin/sulbactam 2000-1000mg inj</i>	74	675MG/2.4ML SYRINGE	
<i>amoxicillin/clavulanate 250-125mg tab</i>	74	<i>anagrelide 0.5mg cap</i>	64	ARISTADA	43
<i>amoxicillin/clavulanate 500-125mg tab</i>	74	<i>anagrelide 1mg cap</i>	64	882MG/3.2ML SYRINGE	
<i>amoxicillin/clavulanate 875-125mg tab</i>	74	<i>anastrozole 1mg tab</i>	31	<i>armodafinil 150mg tab</i>	1
<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	74	ANORO ELLIPTA	10	<i>armodafinil 200mg tab</i>	1
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	74	62.5-25MCG POWDER INHALER		<i>armodafinil 250mg tab</i>	1
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	74	APRACLONIDINE 0.5% OPTH SOLN	71	<i>armodafinil 50mg tab</i>	1
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	74	<i>aprepitant 125mg cap</i>	22	ARNUITY 100MCG POWDER INHALER	9
<i>amphetamine/dextroamphetamine 10mg tab</i>	1	<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	22	ARNUITY 200MCG POWDER INHALER	9
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	1	<i>aprepitant 40mg cap</i>	22	ARNUITY 50MCG POWDER INHALER	9
<i>amphetamine/dextroamphetamine 15mg tab</i>	1	<i>aprepitant 80mg cap</i>	22	<i>asenapine 10mg sl tab</i>	41
<i>amphetamine/dextroamphetamine 20mg tab</i>	1	<i>apri tab 28-day pack</i>	58	<i>asenapine 2.5mg sl tab</i>	41
<i>amphetamine/dextroamphetamine 25mg er cap</i>	1	APTIVUS 250MG CAP	43	<i>asenapine 5mg sl tab</i>	41
<i>amphetamine/dextroamphetamine 30mg tab</i>	1	<i>aranelle tab 28-day pack</i>	58	<i>ashlyna tab 91-day pack</i>	58
<i>amphetamine/dextroamphetamine 5mg tab</i>	1	ARCALYST 220MG INJ	69	ASMANEX 100MCG HFA INHALER	9
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	1	AREXVY 120MCG/0.5ML INJ	82	ASMANEX 110MCG (30ACT) TWISTHALER	9
AMPHOTERICIN B 50MG INJ	22	ARIKAYCE 590MG/8.4ML INH SUSP	2	ASMANEX 200MCG HFA INHALER	9
		<i>aripiprazole 10mg odt</i>	43	ASMANEX 220MCG (120ACT) TWISTHALER	9
		<i>aripiprazole 10mg tab</i>	43	ASMANEX 220MCG (30ACT) TWISTHALER	9
		<i>aripiprazole 15mg odt</i>	43	ASMANEX 220MCG (60ACT) TWISTHALER	9
		<i>aripiprazole 15mg tab</i>	43	ASMANEX 50MCG HFA INHALER	9
		<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 1064MG/3.9ML SYRINGE	43	<i>atenolol 25mg tab</i>	47
				<i>atenolol 50mg tab</i>	47

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>atenolol/chlorthalidone</i>	26	AUSTEDO XR TAB ONCI	76	<i>baclofen 10mg tab</i>	70
<i>100-25mg tab</i>		DAILY 4 WEEK		<i>baclofen 20mg tab</i>	70
<i>atenolol/chlorthalidone</i>	26	TITRATION PACK		<i>balsalazide disodium</i>	63
<i>50-25mg tab</i>		AUVELITY 105-45MG ER	15	<i>750mg cap</i>	
<i>atomoxetine 100mg cap</i>	1	TAB		BALVERSA 3MG TAB	33
<i>atomoxetine 10mg cap</i>	1	<i>aviane tab 28-day pack</i>	59	BALVERSA 4MG TAB	33
<i>atomoxetine 18mg cap</i>	1	AVONEX 30MCG/0.5ML	76	BALVERSA 5MG TAB	33
<i>atomoxetine 25mg cap</i>	1	AUTO-INJECTOR		<i>balziva tab 28-day pack</i>	59
<i>atomoxetine 40mg cap</i>	1	AVONEX 30MCG/0.5ML	76	BAQSIMI 3MG/DOSE	19
<i>atomoxetine 60mg cap</i>	1	SYRINGE		NASAL POWDER	
<i>atomoxetine 80mg cap</i>	1	AYVAKIT 100MG TAB	37	BCG LIVE TICE STRAIN	82
<i>atorvastatin 10mg tab</i>	23	AYVAKIT 200MG TAB	37	50MG INJ	
<i>atorvastatin 20mg tab</i>	23	AYVAKIT 25MG TAB	37	<i>benazepril 10mg tab</i>	24
<i>atorvastatin 40mg tab</i>	23	AYVAKIT 300MG TAB	37	<i>benazepril 20mg tab</i>	24
<i>atorvastatin 80mg tab</i>	24	AYVAKIT 50MG TAB	37	<i>benazepril 40mg tab</i>	24
<i>atovaquone 750mg/5ml</i>	29	<i>azathioprine 50mg tab</i>	69	<i>benazepril 5mg tab</i>	24
<i>oral susp</i>		<i>azelaic acid 15% gel</i>	55	<i>benazepril/hydrochloroth</i>	26
<i>atovaquone/proguanil</i>	29	<i>azelastine 0.05% ophth</i>	72	<i>iazide 10-12.5mg tab</i>	
<i>250-100mg tab</i>		<i>soln</i>		<i>benazepril/hydrochloroth</i>	27
<i>atovaquone/proguanil</i>	29	<i>azelastine 0.1%</i>	70	<i>iazide 20-12.5mg tab</i>	
<i>62.5-25mg tab</i>		<i>(137mcg/act) nasal</i>		<i>benazepril/hydrochloroth</i>	27
<i>atropine sulfate 1% ophth</i>	72	<i>inhaler</i>		<i>iazide 20-25mg tab</i>	
<i>soln</i>		<i>azithromycin 20mg/ml</i>	28	<i>benazepril/hydrochloroth</i>	27
<i>atropine</i>	21	<i>oral susp</i>		<i>iazide 5-6.25mg tab</i>	
<i>sulfate/diphenoxylate</i>		<i>azithromycin 250mg pack</i>	28	BENLYSTA 200MG/ML	69
<i>0.025-2.5mg tab</i>		<i>(6)</i>		AUTO-INJECTOR	
ATROVENT 17MCG HFA	9	<i>azithromycin 250mg tab</i>	28	BENLYSTA 200MG/ML	69
INHALER		<i>azithromycin 40mg/ml</i>	28	SYRINGE	
<i>aubra tab 28-day pack</i>	58	<i>oral susp</i>		<i>benztropine mesylate</i>	38
AUGTYRO 160MG CAP	32	<i>azithromycin 500mg inj</i>	28	<i>0.5mg tab</i>	
AUGTYRO 40MG CAP	32	<i>azithromycin 500mg tab</i>	28	<i>benztropine mesylate 1mg</i>	38
AUSTEDO 12MG TAB	75	<i>azithromycin 500mg tab</i>	28	<i>tab</i>	
AUSTEDO 6MG TAB	75	<i>pack (3)</i>		<i>benztropine mesylate 2mg</i>	38
AUSTEDO 9MG TAB	75	<i>azithromycin 600mg tab</i>	28	<i>tab</i>	
AUSTEDO XR 12MG TAE	75	<i>aztreonam 1gm inj</i>	28	BERINERT 500UNIT INJ	65
AUSTEDO XR 18MG TAE	75	<i>aztreonam 2gm inj</i>	28	BESREMI 500MCG/ML	37
AUSTEDO XR 24MG TAE	76	<i>azurette 28 day pack</i>	59	SYRINGE	
AUSTEDO XR 30MG TAE	76			<i>betaine 1gm powder for</i>	57
AUSTEDO XR 36MG TAE	76	B		<i>oral soln</i>	
AUSTEDO XR 42MG TAE	76	BACITRACIN	71	<i>betamethasone 0.05%</i>	54
AUSTEDO XR 48MG TAE	76	500UNIT/GM OPHTH		<i>aug cream</i>	
AUSTEDO XR 6MG TAB	76	OINTMENT		<i>betamethasone 0.05%</i>	54
		<i>bacitracin/polymyxin b</i>	71	<i>aug lotion</i>	
		<i>0.5-10unit/mg ophth</i>			
		<i>ointment</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>betamethasone 0.05% aug ointment</i>	54	<i>bimatoprost 0.03% ophth soln</i>	73	BREZTRI AEROSPHERE 160-9-4.8MCG/ACT	10
<i>betamethasone 0.05% cream</i>	54	<i>bisoprolol fumarate 10mg tab</i>	47	INHALER	
<i>betamethasone 0.05% lotion</i>	54	<i>bisoprolol fumarate 5mg tab</i>	47	<i>briellyn tab 28-day pack</i>	59
<i>betamethasone 0.05% ointment</i>	54	<i>bisoprolol fumarate/hydrochlorothia zide 10-6.25mg tab</i>	27	<i>brimonidine tartrate 0.1% ophth soln</i>	71
<i>betamethasone 0.1% cream</i>	54	<i>bisoprolol fumarate/hydrochlorothia zide 2.5-6.25mg tab</i>	27	<i>brimonidine tartrate 0.15% ophth soln</i>	71
<i>betamethasone 0.1% lotion</i>	54	<i>bisoprolol fumarate/hydrochlorothia zide 5-6.25mg tab</i>	27	<i>brimonidine tartrate 0.2% ophth soln</i>	71
<i>betamethasone 0.1% ointment</i>	54	<i>blisovi 21 fe tab 1.5/30 28-day pack</i>	59	<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	71
BETASERON 0.3MG INJ	76	<i>blisovi 24 fe tab 1/20 28-day pack</i>	59	BRIVIACT 100MG TAB	12
BETAXOLOL 0.5% OPHTH SOLN	71	BOOSTRIX INJ	80	BRIVIACT 10MG TAB	12
<i>betaxolol 10mg tab</i>	47	BOOSTRIX SYRINGE	80	BRIVIACT 10MG/ML	12
<i>betaxolol 20mg tab</i>	47	<i>bosentan 125mg tab</i>	78	ORAL SOLN	
<i>bethanechol chloride 10mg tab</i>	82	<i>bosentan 62.5mg tab</i>	78	BRIVIACT 25MG TAB	12
<i>bethanechol chloride 25mg tab</i>	82	BOSULIF 100MG CAP	33	BRIVIACT 50MG TAB	12
<i>bethanechol chloride 50mg tab</i>	82	BOSULIF 100MG TAB	33	BRIVIACT 75MG TAB	12
<i>bethanechol chloride 5mg tab</i>	82	BOSULIF 400MG TAB	33	<i>bromfenac 0.07% ophth soln</i>	72
<i>bexarotene 1% gel</i>	53	BOSULIF 500MG TAB	33	<i>bromocriptine 2.5mg tab</i>	38
<i>bexarotene 75mg cap</i>	37	BOSULIF 50MG CAP	33	<i>bromocriptine 5mg cap</i>	38
BEXSERO SYRINGE	82	BRAFTOVI 75MG CAP	33	BRUKINSA 80MG CAP	33
<i>bicalutamide 50mg tab</i>	31	BREO ELLIPTA 100-25MCG POWDER	10	<i>budesonide 0.25mg/2ml inh susp</i>	9
BICILLIN L-A 1200000UNIT/2ML SYRINGE	73	INHALER		<i>budesonide 0.5mg/2ml inh susp</i>	9
BICILLIN L-A 2400000UNIT/4ML SYRINGE	73	BREO ELLIPTA 200-25MCG POWDER	10	<i>budesonide 1mg/2ml inh susp</i>	9
BICILLIN L-A 600000UNIT/ML SYRINGE	73	INHALER		<i>budesonide 2mg/act rectal foam</i>	6
BIKTARVY 30-120-15MG TAB	44	<i>breyna 160-4.5mcg/act inhaler</i>	10	<i>budesonide 3mg dr cap</i>	50
BIKTARVY 50-200-25MG TAB	44	<i>breyna 80-4.5mcg/act inhaler</i>	10	<i>budesonide 9mg er tab</i>	51
				<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	10
				<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	10
				<i>bumetanide 0.25mg/ml inj</i>	56
				<i>bumetanide 0.5mg tab</i>	56
				<i>bumetanide 1mg 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

<i>bumetanide 2mg tab</i>	56	CALCIPOTRIENE 0.005%	53	<i>carbamazepine 200mg er tab</i>	12
<i>buprenorphine 2mg sl tab</i>	5	TOPICAL SOLN		<i>carbamazepine 200mg tab</i>	12
<i>buprenorphine 8mg sl tab</i>	5	<i>calcitriol 0.25mcg cap</i>	57	<i>carbamazepine 20mg/ml oral susp</i>	12
<i>buprenorphine/naloxone 12-3mg sl film</i>	5	<i>calcitriol 0.5mcg cap</i>	57	<i>carbamazepine 300mg er cap</i>	12
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	5	<i>calcitriol 1mcg/ml oral soln</i>	57	<i>carbamazepine 400mg er tab</i>	12
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	5	CALQUENCE 100MG CAP	33	<i>carbidopa 25mg tab</i>	38
<i>buprenorphine/naloxone 4-1mg sl film</i>	5	CALQUENCE 100MG TAB	33	<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	38
<i>buprenorphine/naloxone 8-2mg sl film</i>	5	<i>camila 0.35mg tab 28-day pack</i>	74	<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	38
<i>buprenorphine/naloxone 8-2mg sl tab</i>	5	<i>camreselo tab 91-day pack</i>	59	<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	38
<i>bupropion 100mg sr (12hr) tab</i>	15	CAMZYOS 10MG CAP	49	<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	38
<i>bupropion 100mg tab</i>	15	CAMZYOS 15MG CAP	49	<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	38
<i>bupropion 150mg sr (12hr) tab</i>	15	CAMZYOS 2.5MG CAP	49	<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	38
<i>bupropion 150mg sr (12hr) tab</i>	77	CAMZYOS 5MG CAP	49	CARBIDOPA/LEVODOPA 10-100MG ODT	38
<i>bupropion 200mg sr (12hr) tab</i>	15	<i>candesartan cilexetil 16mg tab</i>	25	<i>carbidopa/levodopa 25-100mg er tab</i>	38
<i>bupropion 75mg tab</i>	16	<i>candesartan cilexetil 32mg tab</i>	25	CARBIDOPA/LEVODOPA 25-100MG ODT	38
<i>bupropion xl 150mg (24hr) tab</i>	16	<i>candesartan cilexetil 4mg tab</i>	25	<i>carbidopa/levodopa 25-100mg tab</i>	38
<i>bupropion xl 300mg (24hr) tab</i>	16	<i>candesartan cilexetil 8mg tab</i>	25	CARBIDOPA/LEVODOPA 25-250MG ODT	38
<i>buspirone 10mg tab</i>	7	CAPLYTA 10.5MG CAP	39	<i>carbidopa/levodopa 25-250mg tab</i>	38
<i>buspirone 15mg tab</i>	7	CAPLYTA 21MG CAP	39		
<i>buspirone 30mg tab</i>	7	CAPLYTA 42MG CAP	39		
<i>buspirone 5mg tab</i>	7	CAPRELSA 100MG TAB	33		
<i>buspirone 7.5mg tab</i>	7	CAPRELSA 300MG TAB	33		
		<i>captopril 100mg tab</i>	24		
		<i>captopril 12.5mg tab</i>	24		
		<i>captopril 25mg tab</i>	24		
		<i>captopril 50mg tab</i>	24		
		<i>carbamazepine 100mg chew tab</i>	12		
		<i>carbamazepine 100mg er cap</i>	12		
		<i>carbamazepine 100mg er tab</i>	12		
		<i>carbamazepine 200mg er cap</i>	12		
C					
<i>cabergoline 0.5mg tab</i>	58				
CABOMETYX 20MG TAE	33				
CABOMETYX 40MG TAE	33				
CABOMETYX 60MG TAE	33				
<i>calcipotriene 0.005% cream</i>	53				
<i>calcipotriene 0.005% ointment</i>	53				

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

ALPHABETICAL LISTING OF DRUGS

<i>carbidopa/levodopa</i>	38	<i>cefixime 400mg cap</i>	50	<i>chlordiazepoxide 25mg</i>	7
<i>50-200mg er tab</i>		<i>cefixime 40mg/ml oral</i>	50	<i>cap</i>	
<i>carglumic acid 200mg tab</i>	57	<i>susp</i>		<i>chlordiazepoxide 5mg cap</i>	7
<i>for oral susp</i>		<i>cefoxitin 1gm inj</i>	50	<i>chlorhexidine gluconate</i>	51
<i>carisoprodol 350mg tab</i>	70	<i>cefoxitin 200mg/ml inj</i>	50	<i>0.12% mouthwash</i>	
CARTEOLOL 1% OPTH	71	<i>cefoxitin 2gm inj</i>	50	CHLOROQUINE	29
SOLN		<i>cefpodoxime 100mg tab</i>	50	PHOSPHATE 250MG TAB	
<i>cartia 120mg er (24hr)</i>	48	CEFPODOXIME	50	<i>chloroquine phosphate</i>	29
<i>cap</i>		10MG/ML ORAL SUSP		<i>500mg tab</i>	
<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>	47	<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>	50	<i>celecoxib 400mg cap</i>	3	250-250MG INJ	
<i>cefazolin 500mg inj</i>	50	<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

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

CIMZIA 200MG INJ	3	<i>clindamycin 600mg/4ml</i>	28	<i>clonazepam 0.5mg odt</i>	12
CIMZIA 200MG/ML	3	<i>inj</i>		<i>clonazepam 0.5mg tab</i>	12
SYRINGE		<i>clindamycin 600mg/50ml</i>	28	<i>clonazepam 1mg odt</i>	12
<i>cinacalcet 30mg tab</i>	57	<i>inj</i>		<i>clonazepam 1mg tab</i>	12
<i>cinacalcet 60mg tab</i>	57	<i>clindamycin 75mg cap</i>	28	<i>clonazepam 2mg odt</i>	12
<i>cinacalcet 90mg tab</i>	58	<i>clindamycin 75mg/5ml</i>	28	<i>clonazepam 2mg tab</i>	12
<i>ciprofloxacin 0.3% ophth</i>	71	<i>oral soln</i>		<i>clonidine 0.1mg er tab</i>	1
<i>soln</i>		<i>clindamycin 900mg/50ml</i>	28	<i>clonidine 0.1mg tab</i>	25
<i>ciprofloxacin 250mg tab</i>	62	<i>inj</i>		<i>clonidine 0.1mg/24hr</i>	25
CIPROFLOXACIN	62	<i>clindamycin 900mg/6ml</i>	28	<i>weekly patch</i>	
2MG/ML INJ		<i>inj</i>		<i>clonidine 0.2mg tab</i>	25
<i>ciprofloxacin 500mg tab</i>	62	CLINIMIX 4.25/10 INJ	71	<i>clonidine 0.2mg/24hr</i>	25
<i>ciprofloxacin 750mg tab</i>	62	CLINIMIX 4.25/5 INJ	71	<i>weekly patch</i>	
<i>ciprofloxacin/dexamethas</i>	73	CLINIMIX 5/15 INJ	71	<i>clonidine 0.3mg tab</i>	25
<i>one 0.3-0.1% otic susp</i>		CLINIMIX 5/20 INJ	71	<i>clonidine 0.3mg/24hr</i>	25
<i>citalopram 10mg tab</i>	16	<i>clinisol 15% inj</i>	71	<i>weekly patch</i>	
<i>citalopram 20mg tab</i>	16	<i>clobazam 10mg tab</i>	12	<i>clopidogrel 75mg tab</i>	64
<i>citalopram 2mg/ml oral</i>	16	<i>clobazam 2.5mg/ml oral</i>	12	<i>clorazepate dipotassium</i>	7
<i>soln</i>		<i>susp</i>		<i>15mg tab</i>	
<i>citalopram 40mg tab</i>	16	<i>clobazam 20mg tab</i>	12	<i>clorazepate dipotassium</i>	7
<i>claravis 10mg cap</i>	52	<i>clobetasol propionate</i>	54	<i>3.75mg tab</i>	
<i>claravis 20mg cap</i>	52	<i>0.05% cream</i>		<i>clorazepate dipotassium</i>	7
<i>claravis 30mg cap</i>	52	<i>clobetasol propionate</i>	54	<i>7.5mg tab</i>	
<i>claravis 40mg cap</i>	52	<i>0.05% e cream</i>		<i>clotrimazole 1% cream</i>	52
<i>clarithromycin 250mg tab</i>	28	<i>clobetasol propionate</i>	54	<i>clotrimazole 10mg</i>	51
CLARITHROMYCIN	28	<i>0.05% foam</i>		<i>lozenge</i>	
25MG/ML ORAL SUSP		<i>clobetasol propionate</i>	54	<i>clotrimazole/betamethaso</i>	52
<i>clarithromycin 500mg tab</i>	28	<i>0.05% gel</i>		<i>ne 1-0.05% cream</i>	
CLARITHROMYCIN	28	<i>clobetasol propionate</i>	54	<i>clozapine 100mg odt</i>	41
50MG/ML ORAL SUSP		<i>0.05% lotion</i>		<i>clozapine 100mg tab</i>	41
<i>clindamycin 1% gel</i>	52	<i>clobetasol propionate</i>	54	CLOZAPINE 12.5MG	41
<i>clindamycin 1% gel</i>	52	<i>0.05% ointment</i>		ODT	
<i>(twice-daily)</i>		<i>clobetasol propionate</i>	54	<i>clozapine 150mg odt</i>	41
<i>clindamycin 1% lotion</i>	52	<i>0.05% shampoo</i>		<i>clozapine 200mg odt</i>	41
<i>clindamycin 1% topical</i>	52	<i>clobetasol propionate</i>	54	<i>clozapine 200mg tab</i>	41
<i>soln</i>		<i>0.05% topical soln</i>		<i>clozapine 25mg odt</i>	41
<i>clindamycin 150mg cap</i>	28	<i>clobetasol propionate</i>	54	<i>clozapine 25mg tab</i>	41
<i>clindamycin 2% vaginal</i>	83	<i>0.05% topical spray</i>		<i>clozapine 50mg tab</i>	41
<i>cream</i>		<i>clodan 0.05% shampoo</i>	54	COARTEM 20-120MG	29
<i>clindamycin 300mg cap</i>	28	<i>clomipramine 25mg cap</i>	18	TAB	
<i>clindamycin 300mg/2ml</i>	28	<i>clomipramine 50mg cap</i>	18	COBENFY 20-100MG	39
<i>inj</i>		<i>clomipramine 75mg cap</i>	18	CAP	
<i>clindamycin 300mg/50ml</i>	28	<i>clonazepam 0.125mg odt</i>	12	COBENFY 20-50MG CAP	39
<i>inj</i>		<i>clonazepam 0.25mg odt</i>	12		

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

ALPHABETICAL LISTING OF DRUGS

COBENFY 30-125MG CAP	39	COSENTYX 75MG/0.5ML SYRINGE	53	<i>cyclosporine modified 50mg cap</i>	69
COBENFY CAP 28-DAY STARTER KIT PACK (56)	39	COSENTYX UNOREADY 300MG/2ML	53	<i>cyred tab 28-day pack</i>	59
<i>codeine phosphate/acetaminophen 15-300mg tab</i>	5	AUTO-INJECTOR		CYSTADANE 1GM POWDER FOR ORAL SOLN	58
CODEINE	5	COTELLIC 20MG TAB	33	CYSTADROPS 0.37% OPHTH SOLN	72
PHOSPHATE/ACETAMINOPHEN 2.4-24MG/ML		CREON 120000-24000-76000UNI	56	CYSTAGON 150MG CAP	63
ORAL SOLN		CREON 15000-3000-9500UNIT	56	CYSTAGON 50MG CAP	63
<i>codeine phosphate/acetaminophen 30-300mg tab</i>	5	DR CAP		CYSTARAN 0.44% OPHTH SOLN	72
<i>codeine phosphate/acetaminophen 60-300mg tab</i>	5	CREON 180000-36000-114000U	56	D	
<i>colchicine 0.6mg tab</i>	64	NIT DR CAP		<i>dalfampridine 10mg er tab</i>	76
<i>colchicine/probenecid 0.5-500mg tab</i>	64	CREON 30000-6000-19000UNIT	56	<i>danazol 100mg cap</i>	6
<i>colesevelam 625mg tab</i>	23	DR CAP		<i>danazol 200mg cap</i>	6
<i>colestipol 1gm tab</i>	23	CREON 60000-12000-38000UNIT	56	<i>danazol 50mg cap</i>	6
<i>colestipol 5000mg granules for oral susp</i>	23	DR CAP		<i>dantrolene sodium 100mg cap</i>	70
<i>colistin 75mg/ml inj</i>	28	<i>cromolyn sodium 20mg/ml oral soln</i>	63	<i>dantrolene sodium 25mg cap</i>	70
COMBIVENT 20-100MCG/ACT INHALER	10	CROMOLYN SODIUM 4% OPHTH SOLN	72	<i>dantrolene sodium 50mg cap</i>	70
COMETRIQ CAP 100MG DAILY DOSE PACK (56)	33	<i>cryselle tab 28-day pack</i>	59	<i>dapsone 100mg tab</i>	30
COMETRIQ CAP 140MG DAILY DOSE PACK (112)	33	<i>cyclobenzaprine 10mg tab</i>	70	<i>dapsone 25mg tab</i>	30
COMETRIQ CAP 60MG DAILY DOSE PACK (84)	33	<i>cyclobenzaprine 5mg tab</i>	70	DAPTACEL INJ	80
<i>compro 25mg rectal supp</i>	42	CYCLOPHOSPHAMIDE 25MG TAB	30	<i>daptomycin 500mg inj</i>	28
<i>constulose 10gm/15ml oral soln</i>	66	CYCLOPHOSPHAMIDE 50MG TAB	30	<i>darunavir 600mg tab</i>	44
COPIKTRA 15MG CAP	33	<i>cyclosporine 0.05% ophthalmic susp</i>	72	<i>darunavir 800mg tab</i>	44
COPIKTRA 25MG CAP	33	<i>cyclosporine 100mg cap</i>	69	<i>dasatinib 100mg tab</i>	33
COSENTYX 150MG/ML AUTO-INJECTOR	53	<i>cyclosporine 25mg cap</i>	69	<i>dasatinib 140mg tab</i>	33
COSENTYX 150MG/ML SYRINGE	53	<i>cyclosporine modified 100mg cap</i>	69	<i>dasatinib 20mg tab</i>	33
		<i>cyclosporine modified 100mg/ml oral soln</i>	69	<i>dasatinib 50mg tab</i>	33
		<i>cyclosporine modified 25mg cap</i>	69	<i>dasatinib 70mg tab</i>	33
				<i>dasatinib 80mg tab</i>	33
				DAURISMO 100MG TAB	31
				DAURISMO 25MG TAB	31
				<i>deblitane 0.35mg tab 28-day pack</i>	74
				<i>deferasirox 180mg tab</i>	68
				<i>deferasirox 360mg tab</i>	68
				<i>deferasirox 90mg tab</i>	68

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

DELSTRIGO	44	dexamethasone 1mg tab	51	diazepam 5mg/ml oral	7
100-300-300MG TAB		dexamethasone 2mg tab	51	soln	
DEPO-SUBQ PROVERA	74	dexamethasone 4mg tab	51	diazoxide 50mg/ml oral	19
104MG/0.65ML		dexamethasone 6mg tab	51	susp	
SYRINGE		DEXAMETHASONE	72	diclofenac potassium	3
depo-testosterone	6	PHOSPHATE 0.1%		50mg tab	
100mg/ml inj		OPHTH SOLN		diclofenac sodium 0.1%	72
depo-testosterone	6	dexamethasone/neomycin	72	ophth soln	
200mg/ml inj		/polymyxin b 0.1% ophth		diclofenac sodium 1.5%	3
DESCOVY 120-15MG	44	ointment		topical soln	
TAB		dexamethasone/tobramyc	72	diclofenac sodium 100mg	3
DESCOVY 200-25MG	44	in 0.3-0.1% ophth susp		er tab	
TAB		dexmethylphenidate	1	diclofenac sodium 25mg	3
desipramine 100mg tab	18	10mg tab		dr tab	
desipramine 10mg tab	18	dexmethylphenidate	1	diclofenac sodium 3% gel	53
desipramine 150mg tab	18	2.5mg tab		diclofenac sodium 50mg	3
desipramine 25mg tab	18	dexmethylphenidate 5mg	1	dr tab	
desipramine 50mg tab	18	tab		diclofenac sodium 75mg	3
desipramine 75mg tab	18	dextroamphetamine	1	dr tab	
desloratadine 5mg tab	77	sulfate 10mg tab		dicloxacillin 250mg cap	74
desmopressin acetate	58	dextroamphetamine	1	dicloxacillin 500mg cap	74
0.01% (0.01mg/act) nasal		sulfate 5mg tab		dicyclomine 10mg cap	81
spray		DEXTROSE 10% INJ	70	dicyclomine 20mg tab	81
desmopressin acetate	58	DIACOMIT 250MG CAP	12	dicyclomine 2mg/ml oral	81
0.1mg tab		DIACOMIT 250MG	12	soln	
desmopressin acetate	58	POWDER FOR ORAL		DIFICID 200MG TAB	28
0.2mg tab		SUSP		DIFICID 40MG/ML ORAL	28
desonide 0.05% ointment	54	DIACOMIT 500MG CAP	12	SUSP	
desoximetasone 0.25%	54	DIACOMIT 500MG	13	diflunisal 500mg tab	3
cream		POWDER FOR ORAL		difluprednate 0.05%	72
desoximetasone 0.25%	54	SUSP		ophth susp	
ointment		diazepam 10mg tab	7	digoxin 0.125mg tab	49
desvenlafaxine succinate	17	diazepam 10mg/2ml	12	digoxin 0.25mg tab	49
100mg er tab		rectal gel		dihydroergotamine	66
desvenlafaxine succinate	17	diazepam 1mg/ml oral	7	mesylate 0.5mg/act nasal	
25mg er tab		soln		inhaler	
desvenlafaxine succinate	17	DIAZEPAM	12	dilt 120mg er (24hr) cap	48
50mg er tab		2.5MG/0.5ML RECTAL		dilt 180mg er (24hr) cap	48
DEXAMETHASONE	51	GEL		dilt 240mg er (24hr) cap	48
0.1MG/ML ORAL SOLN		diazepam 20mg/4ml	12	diltiazem 120mg er (12hr)	48
dexamethasone 0.5mg tab	51	rectal gel		cap	
dexamethasone 0.75mg	51	diazepam 2mg tab	7	diltiazem 120mg er (24hr)	48
tab		diazepam 5mg tab	7	cap	
dexamethasone 1.5mg tab	51			diltiazem 120mg tab	48

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

ALPHABETICAL LISTING OF DRUGS

<i>diltiazem 180mg er (24hr) cap</i>	48	<i>donepezil 10mg tab</i>	75	<i>doxycycline hyclate 100mg tab</i>	79
<i>diltiazem 240mg er (24hr) cap</i>	48	<i>donepezil 23mg tab</i>	75	<i>doxycycline hyclate 20mg tab</i>	79
<i>diltiazem 300mg er (24hr) cap</i>	48	<i>donepezil 5mg odt</i>	75	<i>doxycycline hyclate 50mg cap</i>	79
<i>diltiazem 30mg tab</i>	48	<i>donepezil 5mg tab</i>	75	<i>doxycycline monohydrate 100mg cap</i>	79
<i>diltiazem 360mg er (24hr) cap</i>	48	DOPTELET 20MG TAB	64	<i>doxycycline monohydrate 100mg tab</i>	79
<i>diltiazem 420mg er (24hr) cap</i>	48	DOPTELET TAB 40MG	64	<i>doxycycline monohydrate 50mg cap</i>	79
<i>diltiazem 60mg er (12hr) cap</i>	48	DAILY DOSE PACK (10)		<i>doxycycline monohydrate 50mg tab</i>	79
<i>diltiazem 60mg tab</i>	48	DOPTELET TAB 60MG	64	<i>doxycycline monohydrate 5mg/ml oral susp</i>	79
<i>diltiazem 90mg er (12hr) cap</i>	48	DAILY DOSE PACK (15)		DRIZALMA 20MG DR SPRINKLE CAP	17
<i>diltiazem 90mg tab</i>	48	<i>dorzolamide 2% ophth soln</i>	72	DRIZALMA 30MG DR SPRINKLE CAP	17
<i>dimethyl fumarate 120mg dr cap</i>	76	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	71	DRIZALMA 40MG DR SPRINKLE CAP	17
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	76	<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	71	DRIZALMA 60MG DR SPRINKLE CAP	17
<i>dimethyl fumarate 240mg dr cap</i>	76	<i>dotti 0.025mg/24hr twice weekly patch</i>	62	<i>dronabinol 10mg cap</i>	22
<i>disopyramide 100mg cap</i>	7	<i>dotti 0.0375mg/24hr twice weekly patch</i>	62	<i>dronabinol 2.5mg cap</i>	22
<i>disopyramide 150mg cap</i>	7	<i>dotti 0.05mg/24hr twice weekly patch</i>	62	<i>dronabinol 5mg cap</i>	22
<i>disulfiram 250mg tab</i>	75	<i>dotti 0.075mg/24hr twice weekly patch</i>	62	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	59
<i>disulfiram 500mg tab</i>	75	<i>dotti 0.1mg/24hr twice weekly patch</i>	62	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	59
<i>divalproex sodium 125mg dr cap</i>	15	DOVATO 50-300MG TAB	44	<i>droxidopa 100mg cap</i>	49
<i>divalproex sodium 125mg dr tab</i>	15	<i>doxazosin 1mg tab</i>	25	<i>droxidopa 200mg cap</i>	49
<i>divalproex sodium 250mg dr tab</i>	15	<i>doxazosin 2mg tab</i>	25	<i>droxidopa 300mg cap</i>	49
<i>divalproex sodium 250mg er tab</i>	15	<i>doxazosin 4mg tab</i>	25	DULERA 100-5MCG INHALER	10
<i>divalproex sodium 500mg dr tab</i>	15	<i>doxazosin 8mg tab</i>	25	DULERA 200-5MCG INHALER	10
<i>divalproex sodium 500mg er tab</i>	15	<i>doxepin 100mg cap</i>	18	DULERA 50-5MCG INHALER	10
<i>dofetilide 0.125mg cap</i>	8	<i>doxepin 10mg cap</i>	18		
<i>dofetilide 0.25mg cap</i>	8	<i>doxepin 10mg/ml oral soln</i>	18		
<i>dofetilide 0.5mg cap</i>	8	<i>doxepin 150mg cap</i>	18		
<i>donepezil 10mg odt</i>	75	<i>doxepin 25mg cap</i>	18		
		<i>doxepin 50mg cap</i>	18		
		<i>doxepin 75mg cap</i>	18		
		<i>doxy 100mg inj</i>	79		
		<i>doxycycline hyclate 100mg cap</i>	79		
		<i>doxycycline hyclate 100mg inj</i>	79		

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

ALPHABETICAL LISTING OF DRUGS

<i>duloxetine 20mg dr cap</i>	17	ELIQUIS 5MG TAB	11	<i>emtricitabine/tenofovir</i>	44
<i>duloxetine 30mg dr cap</i>	17	ELMIRON 100MG CAP	63	<i>disoproxil fumarate</i>	
<i>duloxetine 60mg dr cap</i>	17	<i>eltrombopag olamine</i>	64	<i>167-250mg tab</i>	
DUPIXENT	8	<i>12.5mg powder pack for</i>		<i>emtricitabine/tenofovir</i>	44
200MG/1.14ML		<i>susp</i>		<i>disoproxil fumarate</i>	
AUTO-INJECTOR		<i>eltrombopag olamine</i>	64	<i>200-300mg tab</i>	
DUPIXENT	8	<i>12.5mg tab</i>		EMTRIVA 10MG/ML	44
200MG/1.14ML		<i>eltrombopag olamine</i>	64	ORAL SOLN	
SYRINGE		<i>25mg powder pack for</i>		<i>enalapril maleate 10mg</i>	24
DUPIXENT 300MG/2ML	8	<i>susp</i>		<i>tab</i>	
AUTO-INJECTOR		<i>eltrombopag olamine</i>	64	<i>enalapril maleate 2.5mg</i>	24
DUPIXENT 300MG/2ML	8	<i>25mg tab</i>		<i>tab</i>	
SYRINGE		<i>eltrombopag olamine</i>	64	<i>enalapril maleate 20mg</i>	24
<i>dutasteride 0.5mg cap</i>	64	<i>50mg tab</i>		<i>tab</i>	
E		<i>eltrombopag olamine</i>	64	<i>enalapril maleate 5mg</i>	24
<i>econazole nitrate 1%</i>	52	<i>75mg tab</i>		<i>tab</i>	
<i>cream</i>		<i>eluryng</i>	59	<i>enalapril</i>	27
EDURANT 25MG TAB	44	<i>0.120-0.015mg/24hr</i>		<i>maleate/hydrochlorothiaz</i>	
<i>efavirenz 600mg tab</i>	44	<i>vaginal system</i>		<i>ide 10-25mg tab</i>	
<i>efavirenz/emtricitabine/te</i>	44	EMGALITY 100MG/ML	66	<i>enalapril</i>	27
<i>nofovir disoproxil</i>		SYRINGE		<i>maleate/hydrochlorothiaz</i>	
<i>fumarate 600-200-300mg</i>		EMGALITY 120MG/ML	66	<i>ide 5-12.5mg tab</i>	
<i>tab</i>		AUTO-INJECTOR		ENBREL 25MG/0.5ML	3
EFAVIRENZ/LAMIVUDIN	44	EMGALITY 120MG/ML	66	INJ	
E/TENOFOVIR		SYRINGE		ENBREL 25MG/0.5ML	3
DISOPROXIL		EMSAM 12MG/24HR	16	SYRINGE	
FUMARATE		PATCH		ENBREL 50MG/ML	3
400-300-300MG TAB		EMSAM 6MG/24HR	16	AUTO-INJECTOR	
<i>efavirenz/lamivudine/teno</i>	44	PATCH		ENBREL 50MG/ML	3
<i>fovir disoproxil fumarate</i>		EMSAM 9MG/24HR	16	CARTRIDGE	
<i>600-300-300mg tab</i>		PATCH		ENBREL 50MG/ML	3
ELECTROLYTE-148	67	<i>emtricitabine 200mg cap</i>	44	SYRINGE	
SOLUTION		<i>emtricitabine/rilpivirine/t</i>	44	<i>endocet 10-325mg tab</i>	5
ELIGARD 22.5MG	31	<i>enofovir disoproxil</i>		<i>endocet 2.5-325mg tab</i>	5
SYRINGE		<i>fumarate 200-25-300mg</i>		<i>endocet 5-325mg tab</i>	5
ELIGARD 30MG	32	<i>tab</i>		<i>endocet 7.5-325mg tab</i>	5
SYRINGE		<i>emtricitabine/tenofovir</i>	44	ENGERIX-B	82
ELIGARD 45MG	32	<i>disoproxil fumarate</i>		10MCG/0.5ML SYRINGE	
SYRINGE		<i>100-150mg tab</i>		ENGERIX-B 20MCG/ML	82
ELIGARD 7.5MG	32	<i>emtricitabine/tenofovir</i>	44	INJ	
SYRINGE		<i>disoproxil fumarate</i>		ENGERIX-B 20MCG/ML	82
ELIQUIS 2.5MG TAB	10	<i>133-200mg tab</i>		SYRINGE	
ELIQUIS 5MG 30-DAY	10				
STARTER PACK (74)					

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

ALPHABETICAL LISTING OF DRUGS

<i>enilloring</i>	59	EPRONTIA 25MG/ML	13	<i>esomeprazole 20mg dr</i>	81
<i>0.120-0.015mg/24hr</i>		ORAL SOLN		<i>cap</i>	
<i>vaginal system</i>		ERIVEDGE 150MG CAP	31	<i>esomeprazole 40mg dr</i>	81
<i>enoxaparin sodium</i>	11	ERLEADA 240MG TAB	32	<i>cap</i>	
<i>100mg/1ml syringe</i>		ERLEADA 60MG TAB	32	<i>estarylla tab 28-day pack</i>	59
<i>enoxaparin sodium</i>	11	<i>erlotinib 100mg tab</i>	31	<i>estradiol 0.0025mg/hr</i>	62
<i>120mg/0.8ml syringe</i>		<i>erlotinib 150mg tab</i>	31	<i>weekly patch</i>	
<i>enoxaparin sodium</i>	11	<i>erlotinib 25mg tab</i>	31	<i>estradiol 0.01% vaginal</i>	83
<i>150mg/1ml syringe</i>		<i>errin 0.35mg tab 28-day</i>	74	<i>cream</i>	
<i>enoxaparin sodium</i>	11	<i>pack</i>		<i>estradiol 0.01mg/24hr</i>	62
<i>30mg/0.3ml syringe</i>		<i>ertapenem 1gm inj</i>	29	<i>twice weekly patch</i>	
<i>enoxaparin sodium</i>	11	<i>erythromycin 0.5% ophth</i>	71	<i>estradiol 0.01mg/24hr</i>	62
<i>40mg/0.4ml syringe</i>		<i>ointment</i>		<i>weekly patch</i>	
<i>enoxaparin sodium</i>	11	<i>erythromycin 2% gel</i>	52	<i>estradiol 0.025mg/24hr</i>	62
<i>60mg/0.6ml syringe</i>		<i>erythromycin 2% topical</i>	52	<i>twice weekly patch</i>	
<i>enoxaparin sodium</i>	11	<i>soln</i>		<i>estradiol 0.025mg/24hr</i>	62
<i>80mg/0.8ml syringe</i>		<i>erythromycin 250mg dr</i>	28	<i>weekly patch</i>	
<i>enpresse tab 28-day pack</i>	59	<i>tab</i>		<i>estradiol 0.0375mg/24hr</i>	62
<i>enskyce tab 28-day pack</i>	59	<i>erythromycin 250mg tab</i>	28	<i>twice weekly patch</i>	
<i>entacapone 200mg tab</i>	38	<i>erythromycin 333mg dr</i>	28	<i>estradiol 0.0375mg/24hr</i>	62
<i>entecavir 0.5mg tab</i>	46	<i>tab</i>		<i>weekly patch</i>	
<i>entecavir 1mg tab</i>	46	<i>erythromycin 500mg dr</i>	28	<i>estradiol 0.05mg/24hr</i>	62
ENTRESTO 24-26MG	49	<i>tab</i>		<i>twice weekly patch</i>	
TAB		<i>erythromycin 500mg tab</i>	28	<i>estradiol 0.05mg/24hr</i>	62
ENTRESTO 49-51MG	49	<i>erythromycin</i>	28	<i>weekly patch</i>	
TAB		<i>ethylsuccinate 40mg/ml</i>		<i>estradiol 0.075mg/24hr</i>	62
ENTRESTO 97-103MG	49	<i>oral susp</i>		<i>twice weekly patch</i>	
TAB		<i>erythromycin</i>	29	<i>estradiol 0.075mg/24hr</i>	62
<i>enulose 10gm/15ml oral</i>	63	<i>ethylsuccinate 80mg/ml</i>		<i>weekly patch</i>	
<i>soln</i>		<i>oral susp</i>		<i>estradiol 0.5mg tab</i>	62
ENVARUSUS XR 0.75MG	69	<i>escitalopram 10mg tab</i>	16	<i>estradiol 1mg tab</i>	62
TAB		<i>escitalopram 1mg/ml oral</i>	16	<i>estradiol 2mg tab</i>	62
ENVARUSUS XR 1MG TAB	69	<i>soln</i>		<i>estradiol valerate</i>	62
ENVARUSUS XR 4MG TAB	69	<i>escitalopram 20mg tab</i>	16	<i>10mg/ml inj</i>	
EPIDIOLEX 100MG/ML	13	<i>escitalopram 5mg tab</i>	16	<i>estradiol valerate</i>	62
ORAL SOLN		<i>eslicarbazepine acetate</i>	13	<i>20mg/ml inj</i>	
<i>epinephrine</i>	10	<i>200mg tab</i>		<i>estradiol valerate</i>	62
<i>0.15mg/0.3ml</i>		<i>eslicarbazepine acetate</i>	13	<i>40mg/ml inj</i>	
<i>auto-injector (2pack)</i>		<i>400mg tab</i>		<i>estradiol/norethindrone</i>	59
<i>epinephrine 0.3mg/0.3ml</i>	10	<i>eslicarbazepine acetate</i>	13	<i>acetate 0.5-0.1mg 28-day</i>	
<i>auto-injector (2pack)</i>		<i>600mg tab</i>		<i>pack</i>	
<i>epitol 200mg tab</i>	13	<i>eslicarbazepine acetate</i>	13	<i>estradiol/norethindrone</i>	59
<i>eplerenone 25mg tab</i>	27	<i>800mg tab</i>		<i>acetate 1-0.5mg 28-day</i>	
<i>eplerenone 50mg tab</i>	27			<i>pack</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>eszopiclone 1mg tab</i>	65	<i>ethinyl estradiol/inert</i>	59	<i>euthyrox 88mcg tab</i>	79
<i>eszopiclone 2mg tab</i>	65	<i>ingredients/norgestimate</i>		<i>everolimus 0.25mg tab</i>	69
<i>eszopiclone 3mg tab</i>	65	<i>0.035-1-0.25mg tab</i>		<i>everolimus 0.5mg tab</i>	69
<i>ethambutol 100mg tab</i>	30	<i>28-day pack</i>		<i>everolimus 0.75mg tab</i>	69
<i>ethambutol 400mg tab</i>	30	<i>ethinyl</i>	59	<i>everolimus 10mg tab</i>	33
<i>ethinyl estradiol/ethinyl</i>	59	<i>estradiol/norethindrone</i>		<i>everolimus 1mg tab</i>	69
<i>estradiol/levonorgestrel</i>		<i>acetate 0.0025-0.5mg</i>		<i>everolimus 2.5mg tab</i>	33
<i>0.01-0.02-0.1mg tab</i>		<i>pack</i>		<i>everolimus 2mg tab for</i>	33
<i>91-day pack</i>		<i>ethinyl</i>	59	<i>oral susp</i>	
<i>ethinyl estradiol/ethinyl</i>	59	<i>estradiol/norethindrone</i>		<i>everolimus 3mg tab for</i>	33
<i>estradiol/levonorgestrel</i>		<i>acetate 0.005-1mg 28-day</i>		<i>oral susp</i>	
<i>0.01-0.03-0.15mg tab</i>		<i>pack</i>		<i>everolimus 5mg tab</i>	33
<i>91-day pack</i>		<i>ethinyl</i>	60	<i>everolimus 5mg tab for</i>	33
<i>ethinyl</i>	59	<i>estradiol/norethindrone</i>		<i>oral susp</i>	
<i>estradiol/ethynodiol</i>		<i>acetate 0.02-1mg tab</i>		<i>everolimus 7.5mg tab</i>	33
<i>diacetate/inert</i>		<i>21-day pack</i>		EVOTAZ 300-150MG	44
<i>ingredients 0.035-1-1mg</i>		<i>ethinyl</i>	60	TAB	
<i>tab 28-day pack</i>		<i>estradiol/norgestimate</i>		EVRYSDI 0.75MG/ML	70
<i>ethinyl</i>	59	<i>0.18-25/0.215-25/0.25-25</i>		ORAL SOLN	
<i>estradiol/ethynodiol</i>		<i>mg-mcg tab 28-day pack</i>		EVRYSDI 5MG TAB	70
<i>diacetate/inert</i>		<i>ethinyl</i>	60	<i>exemestane 25mg tab</i>	32
<i>ingredients 0.05-1-1mg</i>		<i>estradiol/norgestimate</i>		<i>ezetimibe 10mg tab</i>	23
<i>tab 28-day pack</i>		<i>0.18-35/0.215-35/0.25-35</i>		<i>ezetimibe/simvastatin</i>	23
<i>ethinyl</i>	59	<i>mg-mcg tab 28-day pack</i>		<i>10-10mg tab</i>	
<i>estradiol/etonogestrel</i>		<i>ethosuximide 250mg cap</i>	15	<i>ezetimibe/simvastatin</i>	23
<i>0.120-0.015 mg/24hr</i>		<i>ethosuximide 50mg/ml</i>	15	<i>10-20mg tab</i>	
<i>vaginal system</i>		<i>oral soln</i>		<i>ezetimibe/simvastatin</i>	23
<i>ethinyl estradiol/ferrous</i>	59	<i>etodolac 200mg cap</i>	3	<i>10-40mg tab</i>	
<i>fumarate/norethindrone</i>		<i>etodolac 300mg cap</i>	3	<i>ezetimibe/simvastatin</i>	23
<i>acetate 0.02-75-1mg tab</i>		<i>etodolac 400mg tab</i>	4	<i>10-80mg tab</i>	
<i>28-day pack</i>		<i>etodolac 500mg tab</i>	4		
<i>ethinyl estradiol/inert</i>	59	<i>etravirine 100mg tab</i>	44	F	
<i>ingredients/levonorgestre</i>		<i>etravirine 200mg tab</i>	44	<i>falmina tab 28-day pack</i>	60
<i>l 0.02-1-0.1mg tab 28-day</i>		EULEXIN 125MG CAP	32	<i>famciclovir 125mg tab</i>	46
<i>pack</i>		<i>euthyrox 100mcg tab</i>	79	<i>famciclovir 250mg tab</i>	46
<i>ethinyl estradiol/inert</i>	59	<i>euthyrox 112mcg tab</i>	79	<i>famciclovir 500mg tab</i>	46
<i>ingredients/levonorgestre</i>		<i>euthyrox 125mcg tab</i>	79	<i>famotidine 20mg tab</i>	81
<i>l 0.03-1-0.15mg tab</i>		<i>euthyrox 137mcg tab</i>	79	<i>famotidine 40mg tab</i>	81
<i>28-day pack</i>		<i>euthyrox 150mcg tab</i>	79	FANAPT 10MG TAB	40
<i>ethinyl estradiol/inert</i>	59	<i>euthyrox 175mcg tab</i>	79	FANAPT 12MG TAB	40
<i>ingredients/levonorgestre</i>		<i>euthyrox 200mcg tab</i>	79	FANAPT 1MG TAB	40
<i>l 0.03-1-0.15mg tab</i>		<i>euthyrox 25mcg tab</i>	79	FANAPT 2MG TAB	40
<i>91-day pack</i>		<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>	64	<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>	15	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>	73	<i>fluocinonide 0.05%</i>	54
<i>felodipine 10mg er tab</i>	48	<i>flavoxate 100mg tab</i>	82	<i>topical soln</i>	
<i>felodipine 2.5mg er tab</i>	48	<i>flecainide acetate 100mg tab</i>	8	<i>fluocinonide 0.1% cream</i>	54
<i>felodipine 5mg er tab</i>	48	<i>flecainide acetate 150mg tab</i>	8	<i>fluorometholone 0.1% ophth susp</i>	72
<i>fenofibrate 134mg cap</i>	23	<i>flecainide acetate 50mg tab</i>	8	FLUOROURACIL 2% TOPICAL SOLN	53
<i>fenofibrate 145mg tab</i>	23	<i>fluconazole 100mg tab</i>	22	<i>fluorouracil 5% cream</i>	53
<i>fenofibrate 160mg tab</i>	23	<i>fluconazole 10mg/ml oral susp</i>	22	<i>fluorouracil 5% topical soln</i>	53
<i>fenofibrate 200mg cap</i>	23	<i>fluconazole 150mg tab</i>	22	<i>fluoxetine 10mg cap</i>	16
<i>fenofibrate 48mg tab</i>	23	<i>fluconazole 200mg tab</i>	22	<i>fluoxetine 20mg cap</i>	16
<i>fenofibrate 54mg tab</i>	23	<i>fluconazole 200mg/100ml inj</i>	22	<i>fluoxetine 40mg cap</i>	16
<i>fenofibrate 67mg cap</i>	23	<i>fluconazole 400mg/200ml inj</i>	22	<i>fluoxetine 4mg/ml oral soln</i>	16
<i>fenofibric acid 135mg dr cap</i>	23	<i>fluconazole 40mg/ml oral susp</i>	22	<i>fluoxetine 60mg tab</i>	16
<i>fenofibric acid 45mg dr cap</i>	23	<i>fluconazole 50mg tab</i>	22	FLUPHENAZINE 0.5MG/ML ORAL SOLN	42
<i>fentanyl 100mcg/hr patch</i>	4	<i>flucytosine 250mg cap</i>	22	<i>fluphenazine 10mg tab</i>	42
<i>fentanyl 12mcg/hr patch</i>	4	<i>flucytosine 500mg cap</i>	22	<i>fluphenazine 1mg tab</i>	42
<i>fentanyl 25mcg/hr patch</i>	4	<i>fludrocortisone acetate 0.1mg tab</i>	51	<i>fluphenazine 2.5mg tab</i>	42
<i>fentanyl 50mcg/hr patch</i>	4	<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	70	FLUPHENAZINE 2.5MG/ML INJ	42
<i>fentanyl 75mcg/hr patch</i>	4	<i>fluocinolone acetonide 0.01% cream</i>	54	<i>fluphenazine 5mg tab</i>	42
<i>fesoterodine fumarate 4mg er tab</i>	81	<i>fluocinolone acetonide 0.01% otic soln</i>	73	FLUPHENAZINE 5MG/ML ORAL SOLN	42
<i>fesoterodine fumarate 8mg er tab</i>	81			<i>fluphenazine decanoate</i>	42
FETZIMA 120MG ER CAP	17				
FETZIMA 20MG ER CAP	17				

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

ALPHABETICAL LISTING OF DRUGS

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>	24	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	81
GILOTRIF 30MG TAB	31	0.02meq/ml/sodium		glycopyrrolate 2mg tab	81
GILOTRIF 40MG TAB	31	chloride 2.25mg/ml inj		GLYXAMBI 10-5MG TAB	18
glatiramer acetate	76	glucose	67	GLYXAMBI 25-5MG TAB	19
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	71	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>	28	<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>	57	<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>	57	<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>	57	<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>		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>		<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>				INJ	
<i>hydrocodone</i>	5			INCRUSE ELLIPTA	9
<i>bitartrate/acetaminophen 7.5-325mg tab</i>				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>	57
<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	33	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	55	IBRANCE 75MG TAB	34	INGREZZA 60MG CAP	76
LOTION 2.5%		<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>	29	<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	21
		<i>imatinib 400mg tab</i>	34	300UNIT/ML PEN INJ	
		IMBRUVICA 140MG CAP	34	(3ML)	
		IMBRUVICA 420MG TAB	34	INSULIN LISPRO	21
		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 0.06% (0.042mg/act)</i>	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 0.5-2.5mg/3ml inh soln</i>	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 SYRINGE	40	<i>irbesartan 75mg tab</i>	25	ITOVEBI 9MG TAB	34
INVEGA HAFYERA 1560MG/5ML SYRINGE	40	ISENTRESS 100MG CHEW TAB	44	<i>itraconazole 100mg cap</i>	22
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	40	ISENTRESS 100MG GRANULES FOR ORAL SUSP	44	<i>ivabradine 5mg tab</i>	49
INVEGA SUSTENNA 156MG/ML SYRINGE	40	ISENTRESS 25MG CHEW TAB	44	<i>ivabradine 7.5mg tab</i>	49
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	40	ISENTRESS 400MG TAB	44	<i>ivermectin 3mg tab</i>	6
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	40	ISENTRESS 600MG TAB	44	IWILFIN 192MG TAB	38
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	40	<i>isibloom tab 28-day pack</i>	60	IXCHIQ INJ	82
INVEGA TRINZA 273MG/0.875ML SYRINGE	40	<i>isoniazid 100mg tab</i>	30	IXIARO 0.012MG/ML SYRINGE	82
INVEGA TRINZA 410MG/1.315ML SYRINGE	40	<i>isoniazid 10mg/ml oral soln</i>	30		
INVEGA TRINZA 546MG/1.75ML SYRINGE	40	<i>isoniazid 300mg tab</i>	30	J	
IPOL INJ	82	<i>isosorbide dinitrate 10mg tab</i>	6	<i>jaimiess tab 91-day pack</i>	60
<i>ipratropium bromide 0.02% inh soln</i>	9	<i>isosorbide dinitrate 20mg tab</i>	6	JAKAFI 10MG TAB	34
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	70	<i>isosorbide dinitrate 30mg tab</i>	6	JAKAFI 15MG TAB	34
		<i>isosorbide dinitrate 5mg tab</i>	6	JAKAFI 20MG TAB	34
		ISOSORBIDE MONONITRATE 10MG TAB	6	JAKAFI 25MG TAB	34
		<i>isosorbide mononitrate 120mg er tab</i>	6	JAKAFI 5MG TAB	34
		ISOSORBIDE MONONITRATE 20MG TAB	6	<i>jantoven 10mg tab</i>	11
		<i>isosorbide mononitrate 30mg er tab</i>	6	<i>jantoven 1mg tab</i>	11
		<i>isosorbide mononitrate 60mg er tab</i>	6	<i>jantoven 2.5mg tab</i>	11
		<i>isotretinoin 10mg cap</i>	52	<i>jantoven 2mg tab</i>	11
		<i>isotretinoin 20mg cap</i>	52	<i>jantoven 3mg tab</i>	11
				<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	19
				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

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

JARDIANCE 25MG TAB	21	KALYDECO 5.8MG	77	KISQALI TAB 200MG	34
<i>jasmiel tab 28-day pack</i>	60	ORAL GRANULES		DAILY DOSE PACK (21)	
<i>javygtor 100mg powder</i>	58	KALYDECO 50MG ORAL	77	KISQALI TAB 400MG	34
<i>for oral soln</i>		GRANULES		DAILY DOSE PACK (42)	
<i>javygtor 100mg tab</i>	58	KALYDECO 75MG ORAL	77	KISQALI TAB 600MG	34
<i>javygtor 500mg powder</i>	58	GRANULES		DAILY DOSE PACK (63)	
<i>for oral soln</i>		<i>kariva tab 28-day pack</i>	60	KISQALI/FEMARA 400	32
JAYPIRCA 100MG TAB	34	KCL/D5W/LR INJ 0.15%	67	CO-PACK (70)	
JAYPIRCA 50MG TAB	34	<i>kcl/nacl 20meq-0.45% inj</i>	67	KISQALI/FEMARA 600	32
JENTADUETO	19	<i>kcl/nacl 20meq-0.9% inj</i>	67	CO-PACK (91)	
2.5-1000MG TAB		<i>kcl/nacl 40meq-9% inj</i>	67	<i>klor-con 10meq er tab</i>	68
JENTADUETO	19	<i>kelnor 1mg-35mcg tab</i>	60	<i>klor-con 10meq micro er</i>	68
2.5-500MG TAB		<i>28-day pack</i>		<i>tab</i>	
JENTADUETO XR	19	<i>kelnor tab 1/50 28-day</i>	60	<i>klor-con 15meq micro er</i>	68
2.5-1000MG TAB		<i>pack</i>		<i>tab</i>	
JENTADUETO XR	19	KERENDIA 10MG TAB	58	<i>klor-con 20meq micro er</i>	68
5-1000MG TAB		KERENDIA 20MG TAB	58	<i>tab</i>	
<i>jinteli 0.005-1mg tab</i>	60	KESIMPTA 20MG/0.4ML	76	<i>klor-con 20meq powder</i>	68
JUBBONTI 60MG/ML	57	PEN INJ		<i>for oral soln</i>	
SYRINGE		<i>ketoconazole 2% cream</i>	53	<i>klor-con 8meq er tab</i>	68
<i>juleber tab 28-day pack</i>	60	<i>ketoconazole 2%</i>	53	KLOXXADO 8MG/0.1ML	21
JULUCA 50-25MG TAB	44	<i>shampoo</i>		NASAL SPRAY	
<i>junel 1.5/30 tab 21-day</i>	60	<i>ketoconazole 200mg tab</i>	22	KOSELUGO 10MG CAP	34
<i>pack</i>		<i>ketorolac tromethamine</i>	72	KOSELUGO 25MG CAP	34
<i>junel 1/20 tab 21-day</i>	60	<i>0.4% ophth soln</i>		<i>kourzeq 0.1% oral paste</i>	51
<i>pack</i>		<i>ketorolac tromethamine</i>	72	KRAZATI 200MG TAB	34
<i>junel fe 24 1/20 28-day</i>	60	<i>0.5% ophth soln</i>		<i>kurvelo tab 28-day pack</i>	60
<i>pack</i>		<i>ketorolac tromethamine</i>	4		
<i>junel fe tab 1.5/30 28-day</i>	60	<i>10mg tab</i>		L	
<i>pack</i>		KEVZARA	3	<i>labetalol 100mg tab</i>	47
<i>junel fe tab 1/20 28-day</i>	60	150MG/1.14ML		<i>labetalol 200mg tab</i>	47
<i>pack</i>		AUTO-INJECTOR		<i>labetalol 300mg tab</i>	47
JYLAMVO 2MG/ML	30	KEVZARA	3	<i>lacosamide 100mg tab</i>	13
ORAL SOLN		150MG/1.14ML		<i>lacosamide 10mg/ml oral</i>	13
JYNNEOS 0.5ML INJ	82	SYRINGE		<i>soln</i>	
K		KEVZARA	3	<i>lacosamide 150mg tab</i>	13
KALETRA 80-20MG/ML	44	200MG/1.14ML		<i>lacosamide 200mg tab</i>	13
ORAL SOLN		AUTO-INJECTOR		<i>lacosamide 50mg tab</i>	13
KALYDECO 13.4MG	77	KEVZARA	3	<i>lactulose 667mg/ml oral</i>	66
ORAL GRANULES		200MG/1.14ML		<i>soln</i>	
KALYDECO 150MG TAB	77	SYRINGE		<i>lamivudine 100mg tab</i>	46
KALYDECO 25MG ORAL	77	KINRIX SYRINGE	80	<i>lamivudine 10mg/ml oral</i>	44
GRANULES		<i>kionex 15gm/60ml susp</i>	69	<i>soln</i>	
				<i>lamivudine 150mg tab</i>	44
				<i>lamivudine 300mg tab</i>	44

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

ALPHABETICAL LISTING OF DRUGS

<i>lamivudine/zidovudine</i>	45	LENVIMA 20MG DAILY	31	<i>levofloxacin</i>	63
<i>150-300mg tab</i>		DOSE PACK (60)		<i>500mg/100ml inj</i>	
<i>lamotrigine 100mg tab</i>	13	LENVIMA 24MG DAILY	31	<i>levofloxacin 750mg tab</i>	63
<i>lamotrigine 150mg tab</i>	13	DOSE PACK (90)		<i>levofloxacin</i>	63
<i>lamotrigine 200mg tab</i>	13	LENVIMA 4MG DAILY	31	<i>750mg/150ml inj</i>	
<i>lamotrigine 25mg chew</i>	13	DOSE PACK (30)		<i>levonest tab 28-day pack</i>	60
<i>tab</i>		LENVIMA 8MG DAILY	31	<i>levonorgestrel/ethinyl</i>	60
<i>lamotrigine 25mg tab</i>	13	DOSE PACK (60)		<i>estradiol</i>	
<i>lamotrigine 5mg chew tab</i>	13	<i>lessina tab 28-day pack</i>	60	<i>0.05-30/0.075-40/0.125-3</i>	
<i>lansoprazole 15mg dr cap</i>	81	<i>letrozole 2.5mg tab</i>	32	<i>0mg-mcg tab 28-day pack</i>	
<i>lansoprazole 30mg dr cap</i>	81	<i>leucovorin 10mg tab</i>	38	<i>levora 0.15/30 tab 28-day</i>	60
LANTUS 100UNIT/ML	21	<i>leucovorin 15mg tab</i>	38	<i>pack</i>	
INJ		<i>leucovorin 25mg tab</i>	38	<i>levothyroxine sodium</i>	79
LANTUS 100UNIT/ML	21	<i>leucovorin 5mg tab</i>	38	<i>100mcg tab</i>	
PEN INJ		LEUKERAN 2MG TAB	30	<i>levothyroxine sodium</i>	79
<i>lapatinib 250mg tab</i>	34	<i>levalbuterol 0.31mg/3ml</i>	10	<i>112mcg tab</i>	
<i>larin 1.5/30 tab 21-day</i>	60	<i>neb soln</i>		<i>levothyroxine sodium</i>	79
<i>pack</i>		<i>levalbuterol 0.63mg/3ml</i>	10	<i>125mcg tab</i>	
<i>larin 1/20 tab 21-day</i>	60	<i>inh soln</i>		<i>levothyroxine sodium</i>	79
<i>pack</i>		<i>levalbuterol 1.25mg/3ml</i>	10	<i>137mcg tab</i>	
<i>larin fe tab 1.5/30 28-day</i>	60	<i>neb soln</i>		<i>levothyroxine sodium</i>	79
<i>pack</i>		LEVALBUTEROL	10	<i>150mcg tab</i>	
<i>larin fe tab 1/20 28-day</i>	60	45MCG/ACT INHALER		<i>levothyroxine sodium</i>	79
<i>pack</i>		<i>levetiracetam 1000mg tab</i>	13	<i>175mcg tab</i>	
<i>latanoprost 0.005% ophth</i>	73	<i>levetiracetam 100mg/ml</i>	13	<i>levothyroxine sodium</i>	80
<i>soln</i>		<i>oral soln</i>		<i>200mcg tab</i>	
LAZCLUZE 240MG TAB	31	<i>levetiracetam 250mg tab</i>	13	<i>levothyroxine sodium</i>	80
LAZCLUZE 80MG TAB	31	<i>levetiracetam 500mg er</i>	13	<i>25mcg tab</i>	
<i>leflunomide 10mg tab</i>	2	<i>tab</i>		<i>levothyroxine sodium</i>	80
<i>leflunomide 20mg tab</i>	2	<i>levetiracetam 500mg tab</i>	13	<i>300mcg tab</i>	
<i>lenalidomide 10mg cap</i>	68	<i>levetiracetam 750mg er</i>	13	<i>levothyroxine sodium</i>	80
<i>lenalidomide 15mg cap</i>	68	<i>tab</i>		<i>50mcg tab</i>	
<i>lenalidomide 2.5mg cap</i>	68	<i>levetiracetam 750mg tab</i>	13	<i>levothyroxine sodium</i>	80
<i>lenalidomide 20mg cap</i>	68	LEVOBUNOLOL 0.5%	71	<i>75mcg tab</i>	
<i>lenalidomide 25mg cap</i>	68	OPHTH SOLN		<i>levothyroxine sodium</i>	80
<i>lenalidomide 5mg cap</i>	68	<i>levocarnitine 100mg/ml</i>	58	<i>88mcg tab</i>	
LENVIMA 10MG DAILY	31	<i>oral soln</i>		<i>levoxyl 100mcg tab</i>	80
DOSE PACK (30)		<i>levocarnitine 330mg tab</i>	58	<i>levoxyl 112mcg tab</i>	80
LENVIMA 12MG DAILY	31	<i>levocetirizine 5mg tab</i>	77	<i>levoxyl 125mcg tab</i>	80
DOSE PACK (90)		<i>levofloxacin 250mg tab</i>	62	<i>levoxyl 137mcg tab</i>	80
LENVIMA 14MG DAILY	31	<i>levofloxacin 25mg/ml</i>	63	<i>levoxyl 150mcg tab</i>	80
DOSE PACK (60)		<i>oral soln</i>		<i>levoxyl 175mcg tab</i>	80
LENVIMA 18MG DAILY	31	<i>levofloxacin 500mg tab</i>	63	<i>levoxyl 200mcg tab</i>	80
DOSE PACK (90)				<i>levoxyl 25mcg tab</i>	80

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>levoxyl 50mcg tab</i>	80	<i>lisdexamfetamine</i>	1	<i>lorazepam 1mg tab</i>	7
<i>levoxyl 75mcg tab</i>	80	<i>dimesylate 70mg cap</i>		<i>lorazepam 2mg tab</i>	7
<i>levoxyl 88mcg tab</i>	80	<i>lisinopril 10mg tab</i>	24	<i>lorazepam 2mg/ml oral</i>	7
<i>lidocaine 4% mucous</i>	55	<i>lisinopril 2.5mg tab</i>	24	<i>soln</i>	
<i>membrane topical soln</i>		<i>lisinopril 20mg tab</i>	24	LORBRENA 100MG TAB	34
<i>lidocaine 5% ointment</i>	55	<i>lisinopril 30mg tab</i>	24	LORBRENA 25MG TAB	34
<i>lidocaine 5% patch</i>	55	<i>lisinopril 40mg tab</i>	24	<i>loryna tab 28-day pack</i>	60
<i>lidocaine viscous 2%</i>	51	<i>lisinopril 5mg tab</i>	24	<i>losartan potassium</i>	25
<i>mucous membrane topical</i>		LITFULO 50MG CAP	69	<i>100mg tab</i>	
<i>soln</i>		<i>lithium carbonate 150mg</i>	39	<i>losartan potassium 25mg</i>	25
<i>lidocaine/prilocaine</i>	55	<i>cap</i>		<i>tab</i>	
<i>2.5-2.5% cream</i>		<i>lithium carbonate 300mg</i>	39	<i>losartan potassium 50mg</i>	25
<i>lidocan 5% patch</i>	55	<i>cap</i>		<i>tab</i>	
LILETTA 20.1MCG/DAY	74	<i>lithium carbonate 300mg</i>	39	<i>loteprednol etabonate</i>	72
INTRAUTERINE SYSTEM		<i>er tab</i>		<i>0.5% ophth gel</i>	
<i>linezolid 100mg/5ml oral</i>	29	<i>lithium carbonate 300mg</i>	39	<i>loteprednol etabonate</i>	72
<i>susp</i>		<i>tab</i>		<i>0.5% ophth susp</i>	
<i>linezolid 600mg tab</i>	29	<i>lithium carbonate 450mg</i>	39	<i>lovastatin 10mg tab</i>	24
<i>linezolid 600mg/300ml</i>	29	<i>er tab</i>		<i>lovastatin 20mg tab</i>	24
<i>inj</i>		LITHIUM CARBONATE	39	<i>lovastatin 40mg tab</i>	24
LINZESS 145MCG CAP	66	600MG CAP		<i>low-ogestrel tab 28-day</i>	60
LINZESS 290MCG CAP	66	<i>lithium citrate 60mg/ml</i>	39	<i>pack</i>	
LINZESS 72MCG CAP	66	<i>oral soln</i>		<i>loxapine 10mg cap</i>	41
<i>liothyronine sodium</i>	80	LIVTENCITY 200MG TAF	45	<i>loxapine 25mg cap</i>	41
<i>25mcg tab</i>		<i>lo jaimiess tab 91-day</i>	60	<i>loxapine 50mg cap</i>	41
<i>liothyronine sodium</i>	80	<i>pack</i>		<i>loxapine 5mg cap</i>	41
<i>50mcg tab</i>		<i>loestrin fe tab 1/20</i>	60	<i>lubiprostone 24mcg cap</i>	66
<i>liothyronine sodium 5mcg</i>	80	<i>28-day pack</i>		<i>lubiprostone 8mcg cap</i>	66
<i>tab</i>		LOKELMA 10GM	69	LUMAKRAS 120MG TAB	34
<i>liraglutide 18mg/3ml pen</i>	20	POWDER FOR ORAL		LUMAKRAS 240MG TAB	34
<i>inj</i>		SUSP		LUMAKRAS 320MG TAB	34
<i>lisdexamfetamine</i>	1	LOKELMA 5GM	69	LUMIGAN 0.01% OPHTH	73
<i>dimesylate 10mg cap</i>		POWDER FOR ORAL		SOLN	
<i>lisdexamfetamine</i>	1	SUSP		LUMRYZ 28-DAY	78
<i>dimesylate 20mg cap</i>		LONSURF 6.14-15MG	32	STARTER PACK (28)	
<i>lisdexamfetamine</i>	1	TAB		LUMRYZ 4.5GM	78
<i>dimesylate 30mg cap</i>		LONSURF 8.19-20MG	32	GRANULES FOR ORAL	
<i>lisdexamfetamine</i>	1	TAB		SUSP	
<i>dimesylate 40mg cap</i>		<i>loperamide 2mg cap</i>	21	LUMRYZ 6GM	78
<i>lisdexamfetamine</i>	1	<i>lopinavir/ritonavir</i>	45	GRANULES FOR ORAL	
<i>dimesylate 50mg cap</i>		<i>100-25mg tab</i>		SUSP	
<i>lisdexamfetamine</i>	1	<i>lopinavir/ritonavir</i>	45	LUMRYZ 7.5GM	78
<i>dimesylate 60mg cap</i>		<i>200-50mg tab</i>		GRANULES FOR ORAL	
		<i>lorazepam 0.5mg tab</i>	7	SUSP	

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

ALPHABETICAL LISTING OF DRUGS

LUMRYZ 9GM	78	<i>maraviroc 300mg tab</i>	45	<i>memantine 14mg er cap</i>	75
GRANULES FOR ORAL SUSP		<i>marlissa tab 28-day pack</i>	60	<i>memantine 21mg er cap</i>	75
LUPKYNIS 7.9MG CAP	69	MARPLAN 10MG TAB	16	<i>memantine 28mg er cap</i>	75
LUPRON 11.25MG	32	MATULANE 50MG CAP	37	<i>memantine 2mg/ml oral soln</i>	75
SYRINGE (3 MONTH)		MAVYRET 100-40MG TAB	46	<i>memantine 5mg tab</i>	75
LUPRON 3.75MG	32	MAVYRET 50-20MG	46	<i>memantine 7mg er cap</i>	75
SYRINGE (1 MONTH)		ORAL PELLETT		MENQUADFI INJ	82
<i>lurasidone 120mg tab</i>	39	MAYZENT 0.25MG TAB	76	MENVEO INJ	82
<i>lurasidone 20mg tab</i>	39	MAYZENT 1MG TAB	76	<i>mercaptopurine 20mg/ml susp</i>	30
<i>lurasidone 40mg tab</i>	39	MAYZENT 2MG TAB	76	<i>mercaptopurine 50mg tab</i>	30
<i>lurasidone 60mg tab</i>	39	MAYZENT TAB STARTEI	76	<i>meropenem 1gm inj</i>	29
<i>lurasidone 80mg tab</i>	39	PACK (12)		<i>meropenem 500mg inj</i>	29
<i>lutra tab 28-day pack</i>	60	MAYZENT TAB STARTEI	76	<i>mesalamine 1gm rectal supp</i>	63
<i>lyleq 0.35mg tab 28-day pack</i>	74	PACK (7)		<i>mesalamine 375mg er cap</i>	63
<i>lyllana 0.025mg/24hr twice weekly patch</i>	62	<i>meclizine 12.5mg tab</i>	22	<i>mesalamine 66.7mg/ml enema</i>	
<i>lyllana 0.0375mg/24hr twice weekly patch</i>	62	<i>meclizine 25mg tab</i>	22	<i>mesna 400mg tab</i>	38
<i>lyllana 0.05mg/24hr twice weekly patch</i>	62	<i>medroxyprogesterone acetate 10mg tab</i>	74	<i>metaxalone 800mg tab</i>	70
<i>lyllana 0.075mg/24hr twice weekly patch</i>	62	<i>medroxyprogesterone acetate 150mg/ml inj</i>	74	<i>metformin 1000mg tab</i>	19
<i>lyllana 0.1mg/24hr twice weekly patch</i>	62	<i>medroxyprogesterone acetate 150mg/ml syringe</i>	74	<i>metformin 500mg er tab</i>	19
LYNPARZA 100MG TAB	34	<i>medroxyprogesterone acetate 2.5mg tab</i>	74	<i>metformin 500mg tab</i>	19
LYNPARZA 150MG TAB	34	<i>medroxyprogesterone acetate 5mg tab</i>	74	<i>metformin 750mg er tab</i>	19
LYSODREN 500MG TAB	32	<i>mefloquine 250mg tab</i>	30	<i>metformin 850mg tab</i>	19
LYTGOBI TAB 12MG	34	MEGESTROL ACETATE	74	<i>methadone 10mg tab</i>	4
DAILEY DOSE PACK (21)		125MG/ML SUSP		METHADONE 1MG/ML	4
LYTGOBI TAB 16MG	34	<i>megestrol acetate 20mg tab</i>	32	ORAL SOLN	
DAILEY DOSE PACK (28)		<i>megestrol acetate 40mg tab</i>	32	METHADONE 2MG/ML	4
LYTGOBI TAB 20MG	34	<i>megestrol acetate</i>	32	ORAL SOLN	
DAILEY DOSE PACK (35)		<i>40mg/ml oral susp</i>	32	<i>methadone 5mg tab</i>	4
<i>lyza 0.35mg tab 28-day pack</i>	74	MEKINIST 0.05MG/ML	34	<i>methazolamide 25mg tab</i>	56
M		ORAL SOLN		<i>methazolamide 50mg tab</i>	56
<i>magnesium sulfate</i>	68	MEKINIST 0.5MG TAB	34	<i>methenamine hippurate 1gm tab</i>	29
<i>500mg/ml inj</i>		MEKINIST 2MG TAB	35	<i>methimazole 10mg tab</i>	79
<i>magnesium sulfate</i>	68	MEKTOVI 15MG TAB	35	<i>methimazole 5mg tab</i>	79
<i>500mg/ml syringe</i>		<i>meloxicam 15mg tab</i>	4	<i>methocarbamol 500mg tab</i>	70
<i>malathion 0.5% lotion</i>	55	<i>meloxicam 7.5mg tab</i>	4	<i>methocarbamol 750mg tab</i>	70
<i>maraviroc 150mg tab</i>	45	<i>memantine 10mg tab</i>	75	<i>methotrexate 2.5mg tab</i>	30

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ALPHABETICAL LISTING OF DRUGS

METHOTREXATE	30	metoclopramide 10mg tab	63	microgestin 1.5/30 tab	61
25MG/ML INJ		metoclopramide 1mg/ml	63	21-day pack	
methotrexate 50mg/2ml	30	oral soln		microgestin 1/20 tab	61
inj		metoclopramide 5mg tab	63	21-day pack	
METHOXSALLEN 10MG	53	metolazone 10mg tab	57	microgestin fe tab 1.5/30	61
CAP		metolazone 2.5mg tab	57	28-day pack	
methsuximide 300mg cap	15	metolazone 5mg tab	57	microgestin fe tab 1/20	61
methylphenidate 10mg er	1	metoprolol succinate	47	28-day pack	
tab		100mg er tab		midodrine 10mg tab	49
methylphenidate 10mg	1	metoprolol succinate	47	midodrine 2.5mg tab	49
tab		200mg er tab		midodrine 5mg tab	49
methylphenidate 18mg er	1	metoprolol succinate	47	mifepristone 300mg tab	19
osmotic tab		25mg er tab		mili tab 28-day pack	61
methylphenidate 1mg/ml	1	metoprolol succinate	47	mimvey 28-day pack	61
oral soln		50mg er tab		minocycline 100mg cap	79
methylphenidate 20mg er	1	metoprolol tartrate	47	minocycline 50mg cap	79
tab		100mg tab		minocycline 75mg cap	79
methylphenidate 20mg	2	metoprolol tartrate 25mg	47	minoxidil 10mg tab	28
tab		tab		minoxidil 2.5mg tab	28
methylphenidate 27mg er	2	metoprolol tartrate	47	mirabegron 25mg er tab	82
osmotic tab		37.5mg tab		mirabegron 50mg er tab	82
methylphenidate 27mg er	2	metoprolol tartrate 50mg	47	mirtazapine 15mg odt	16
tab		tab		mirtazapine 15mg tab	16
methylphenidate 2mg/ml	2	metoprolol tartrate 75mg	47	mirtazapine 30mg odt	16
oral soln		tab		mirtazapine 30mg tab	16
methylphenidate 36mg er	2	metronidazole 0.75%	55	mirtazapine 45mg odt	16
osmotic tab		cream		mirtazapine 45mg tab	16
methylphenidate 36mg er	2	metronidazole 0.75% gel	55	mirtazapine 7.5mg tab	16
tab		metronidazole 0.75%	83	misoprostol 100mcg tab	81
methylphenidate 54mg er	2	vaginal gel		misoprostol 200mcg tab	81
osmotic tab		metronidazole 1% gel	55	M-M-R II INJ	82
methylphenidate 54mg er	2	metronidazole 250mg tab	29	modafinil 100mg tab	2
tab		metronidazole 500mg tab	29	modafinil 200mg tab	2
methylphenidate 5mg tab	2	metronidazole 5mg/ml inj	29	moexipril 15mg tab	24
methylprednisolone 16mg	51	metyrosine 250mg cap	27	moexipril 7.5mg tab	24
tab		mexiletine 150mg cap	8	MOLINDONE 10MG TAB	39
methylprednisolone 32mg	51	mexiletine 200mg cap	8	MOLINDONE 25MG TAB	39
tab		mexiletine 250mg cap	8	MOLINDONE 5MG TAB	40
methylprednisolone 4mg	51	mibelas 24 fe chewable	61	mometasone furoate 0.1%	55
tab		tab 28-day pack		cream	
methylprednisolone 4mg	51	micafungin sodium	22	mometasone furoate 0.1%	55
tab pack (21)		100mg inj		lotion	
methylprednisolone 8mg	51	micafungin sodium 50mg	22	mometasone furoate 0.1%	55
tab		inj		ointment	

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>montelukast 10mg tab</i>	9	<i>moxifloxacin 0.5% ophth</i>	71	<i>naratriptan 2.5mg tab</i>	66
<i>montelukast 4mg chew</i>	9	<i>soln</i>		NATACYN 5% OPHTH	71
<i>tab</i>		MOXIFLOXACIN	63	SUSP	
<i>montelukast 5mg chew</i>	9	1.6MG/ML INJ		<i>nateglinide 120mg tab</i>	19
<i>tab</i>		<i>moxifloxacin 400mg tab</i>	63	<i>nateglinide 60mg tab</i>	19
<i>morphine sulfate 100mg</i>	4	MRESVIA 50MCG/0.5ML	82	NAYZILAM 5MG/0.1ML	12
<i>er tab</i>		SYRINGE		NASAL SPRAY	
<i>morphine sulfate 15mg er</i>	4	MULTAQ 400MG TAB	8	<i>necon 0.5/35 tab 28-day</i>	61
<i>tab</i>		<i>mupirocin 2% ointment</i>	52	<i>pack</i>	
<i>morphine sulfate 15mg</i>	4	<i>mycophenolate mofetil</i>	69	NEFAZODONE 100MG	17
<i>tab</i>		200mg/ml oral susp		TAB	
<i>morphine sulfate 200mg</i>	4	<i>mycophenolate mofetil</i>	69	NEFAZODONE 150MG	17
<i>er tab</i>		250mg cap		TAB	
<i>morphine sulfate 20mg/ml</i>	5	<i>mycophenolate mofetil</i>	69	NEFAZODONE 200MG	17
<i>oral soln</i>		500mg tab		TAB	
<i>morphine sulfate 2mg/ml</i>	5	<i>mycophenolic acid 180mg</i>	69	NEFAZODONE 250MG	17
<i>oral soln</i>		<i>dr tab</i>		TAB	
<i>morphine sulfate 30mg er</i>	5	<i>mycophenolic acid 360mg</i>	69	NEFAZODONE 50MG	17
<i>tab</i>		<i>dr tab</i>		TAB	
<i>morphine sulfate 30mg</i>	5	N		NEMLUVIO 30MG	69
<i>tab</i>		<i>nabumetone 500mg tab</i>	4	AUTO-INJECTOR	
<i>morphine sulfate 4mg/ml</i>	5	<i>nabumetone 750mg tab</i>	4	<i>neomycin sulfate 500mg</i>	2
<i>oral soln</i>		<i>nadolol 20mg tab</i>	47	<i>tab</i>	
<i>morphine sulfate 60mg er</i>	5	<i>nadolol 40mg tab</i>	47	<i>neomycin/bacitracin/poly</i>	71
<i>tab</i>		<i>nadolol 80mg tab</i>	47	<i>myxin</i>	
MOUNJARO	20	<i>nafacillin 100mg/ml inj</i>	74	5mg-400unit-10000unit	
10MG/0.5ML		<i>nafacillin 1gm inj</i>	74	<i>ophth ointment</i>	
AUTO-INJECTOR		<i>nafacillin 2gm inj</i>	74	NEOMYCIN/POLYMYXI	71
MOUNJARO	20	NALOXONE 0.4MG/ML	21	N B/GRAMICIDIN	
12.5MG/0.5ML		CARTRIDGE		1.75-10000-0.025MG-UN	
AUTO-INJECTOR		<i>naloxone 0.4mg/ml inj</i>	21	T-MG/ML OPHTH SOLN	
MOUNJARO	20	NALOXONE 0.4MG/ML	21	<i>neomycin/polymyxin/bacit</i>	72
15MG/0.5ML		SYRINGE		<i>racin/hydrocortisone</i>	
AUTO-INJECTOR		<i>naloxone 1mg/ml syringe</i>	21	<i>ophth 1% ointment</i>	
MOUNJARO	20	<i>naltrexone 50mg tab</i>	21	<i>neomycin/polymyxin/dexa</i>	72
2.5MG/0.5ML		<i>naproxen 250mg tab</i>	4	<i>methasone 0.1% ophth</i>	
AUTO-INJECTOR		<i>naproxen 375mg dr tab</i>	4	<i>susp</i>	
MOUNJARO 5MG/0.5ML	20	<i>naproxen 375mg tab</i>	4	<i>neomycin/polymyxin/hydr</i>	73
AUTO-INJECTOR		<i>naproxen 500mg tab</i>	4	<i>ocortisone</i>	
MOUNJARO	20	<i>naproxen sodium 275mg</i>	4	3.5-10000unit-1% otic	
7.5MG/0.5ML		<i>tab</i>		<i>soln</i>	
AUTO-INJECTOR		<i>naproxen sodium 550mg</i>	4		
MOVANTIK 12.5MG TAB	66	<i>tab</i>			
MOVANTIK 25MG TAB	66	<i>naratriptan 1mg tab</i>	66		

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

ALPHABETICAL LISTING OF DRUGS

<i>neomycin/polymyxin/hydr</i>	73	NITRO-BID 2%	7	<i>norelgestromin/ethinyl</i>	61
<i>ocortisone</i>		OINTMENT		<i>estradiol 150-35</i>	
<i>3.5-10000unit-1% otic</i>		<i>nitrofurantoin</i>	29	<i>mcg/24hr patch</i>	
<i>susp</i>		<i>macro/nitrofurantoin</i>		<i>norethindrone 0.35mg</i>	75
<i>neo-polycin</i>	71	<i>mono 100mg cap</i>		<i>28-day pack</i>	
<i>5mg-400unit-10000unit</i>		<i>nitrofurantoin</i>	29	<i>norethindrone acetate</i>	75
<i>ophth ointment</i>		<i>macrocrystals 100mg cap</i>		<i>5mg tab</i>	
<i>neo-polycin hc ophth</i>	72	<i>nitrofurantoin</i>	29	<i>nortrel 0.5/35 tab 28-day</i>	61
<i>ointment</i>		<i>macrocrystals 50mg cap</i>		<i>pack</i>	
NERLYNX 40MG TAB	35	<i>nitroglycerin 0.1mg/hr</i>	7	<i>nortrel 1/35 tab 21-day</i>	61
NEVIRAPINE 10MG/ML	45	<i>patch</i>		<i>pack</i>	
ORAL SUSP		<i>nitroglycerin 0.2mg/hr</i>	7	<i>nortrel 1/35 tab 28-day</i>	61
<i>nevirapine 200mg tab</i>	45	<i>patch</i>		<i>pack</i>	
<i>nevirapine 400mg er tab</i>	45	<i>nitroglycerin 0.3mg sl tab</i>	7	<i>nortrel 7/7/7 tab 28-day</i>	61
NEXLETOL 180MG TAB	23	<i>nitroglycerin 0.4% rectal</i>	6	<i>pack</i>	
NEXLIZET 180-10MG	23	<i>ointment</i>		<i>nortriptyline 10mg cap</i>	18
TAB		<i>nitroglycerin 0.4mg sl tab</i>	7	<i>nortriptyline 25mg cap</i>	18
NEXPLANON 68MG	74	<i>nitroglycerin 0.4mg/hr</i>	7	<i>nortriptyline 2mg/ml oral</i>	18
IMPLANT		<i>patch</i>		<i>soln</i>	
<i>niacin 1000mg er tab</i>	23	<i>nitroglycerin 0.6mg sl tab</i>	7	<i>nortriptyline 50mg cap</i>	18
<i>niacin 500mg er tab</i>	23	<i>nitroglycerin 0.6mg/hr</i>	7	<i>nortriptyline 75mg cap</i>	18
<i>niacin 750mg er tab</i>	23	<i>patch</i>		NORVIR 100MG ORAL	45
NICOTROL 10MG/ML	77	NIVESTYM	64	POWDER	
NASAL INHALER		300MCG/0.5ML		NUBEQA 300MG TAB	32
<i>nifedipine 30mg er tab</i>	48	SYRINGE		NUCALA 100MG INJ	8
<i>nifedipine 30mg osmotic</i>	48	NIVESTYM 300MCG/ML	64	NUCALA 100MG/ML	8
<i>er tab</i>		INJ		AUTO-INJECTOR	
<i>nifedipine 60mg er tab</i>	48	NIVESTYM	64	NUCALA 100MG/ML	8
<i>nifedipine 60mg osmotic</i>	48	480MCG/0.8ML		SYRINGE	
<i>er tab</i>		SYRINGE		NUCALA 40MG/0.4ML	8
<i>nifedipine 90mg er tab</i>	48	NIVESTYM	64	SYRINGE	
<i>nifedipine 90mg osmotic</i>	48	480MCG/1.6ML INJ		NUDEXTA 20-10MG	76
<i>er tab</i>		<i>nora-be 0.35mg tab</i>	75	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</i>	53
<i>nilotinib 50mg cap</i>	35	NORDITROPIN	57	<i>topical powder</i>	
<i>nilutamide 150mg tab</i>	32	15MG/1.5ML PEN INJ		<i>nylia 1/35 tab 28-day</i>	61
<i>nimodipine 30mg cap</i>	48	NORDITROPIN	57	<i>pack</i>	
NINLARO 2.3MG CAP	35	30MG/3ML PEN INJ		<i>nylia 7/7/7 tab 28-day</i>	61
NINLARO 3MG CAP	35	NORDITROPIN	57	<i>pack</i>	
NINLARO 4MG CAP	35	5MG/1.5ML PEN INJ		<i>nystatin 100000 unit/gm</i>	53
<i>nitazoxanide 500mg tab</i>	29			<i>ointment</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>nystatin 100000unit/gm topical powder</i>	53	OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	35	OMNITROPE 5MG/1.5ML CARTRIDGE	57
<i>nystatin 100000unit/ml cream</i>	53	OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	35	<i>ondansetron 0.8mg/ml oral soln</i>	21
<i>nystatin 100000unit/ml oral susp</i>	51	OJEMDA 25MG/ML POWDER FOR ORAL SUSP	35	<i>ondansetron 4mg odt</i>	21
<i>nystatin 500000unit tab</i>	22	OJJAARA 100MG TAB	35	<i>ondansetron 4mg tab</i>	22
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	53	OJJAARA 150MG TAB	35	<i>ondansetron 8mg odt</i>	22
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	53	OJJAARA 200MG TAB	35	<i>ondansetron 8mg tab</i>	22
<i>nystop 100000unit/gm topical powder</i>	53	<i>olanzapine 10mg inj</i>	41	ONUREG 200MG TAB	30
NYVEPRIA 6MG/0.6ML SYRINGE	65	<i>olanzapine 10mg odt</i>	41	ONUREG 300MG TAB	31
O		<i>olanzapine 10mg tab</i>	41	OPIPZA 10MG ORAL FILM	43
<i>ocella tab 28-day pack</i>	61	<i>olanzapine 15mg odt</i>	41	OPIPZA 2MG ORAL FILM	43
OCTAGAM 1GM/20ML INJ	73	<i>olanzapine 15mg tab</i>	41	OPIPZA 5MG ORAL FILM	43
OCTAGAM 2GM/20ML INJ	73	<i>olanzapine 2.5mg tab</i>	41	OPSUMIT 10MG TAB	78
<i>octreotide 0.05mg/ml inj</i>	58	<i>olanzapine 20mg odt</i>	41	OPVEE 2.7MG/0.1ML NASAL SPRAY	21
<i>octreotide 0.1mg/ml inj</i>	58	<i>olanzapine 20mg tab</i>	42	ORENCIA 125MG/ML AUTO-INJECTOR	4
<i>octreotide 0.2mg/ml inj</i>	58	<i>olanzapine 5mg odt</i>	42	ORENCIA 125MG/ML SYRINGE	4
<i>octreotide 0.5mg/ml inj</i>	58	<i>olanzapine 5mg tab</i>	42	ORENCIA 50MG/0.4ML SYRINGE	4
<i>octreotide 1mg/ml inj</i>	58	<i>olanzapine 7.5mg tab</i>	42	ORENCIA 87.5MG/0.7ML SYRINGE	4
ODEFSEY 200-25-25MG TAB	45	<i>olmesartan medoxomil 20mg tab</i>	25	ORGOVYX 120MG TAB	32
ODOMZO 200MG CAP	31	<i>olmesartan medoxomil 40mg tab</i>	25	ORKAMBI 125-100MG	77
OFEV 100MG CAP	77	<i>olmesartan medoxomil 5mg tab</i>	25	ORKAMBI 125-100MG TAB	77
OFEV 150MG CAP	77	<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	70	ORKAMBI 125-200MG TAB	77
<i>ofloxacin 0.3% ophth soln</i>	71	OLUMIANT 1MG TAB	2	ORKAMBI 188-150MG	77
<i>ofloxacin 0.3% otic soln</i>	73	OLUMIANT 2MG TAB	2	ORAL GRANULES	
OGSIVEO 100MG TAB 7-DAY PACK (14)	35	OLUMIANT 4MG TAB	2	ORKAMBI 94-75MG	77
OGSIVEO 150MG TAB 7-DAY PACK (14)	35	<i>omega-3 acid ethyl esters (usp) 1gm cap</i>	23	ORAL GRANULES	
OGSIVEO 50MG TAB	35	<i>omeprazole 10mg dr cap</i>	81	<i>orphenadrine citrate 100mg er tab</i>	70
OJEMDA 100MG TAB	35	<i>omeprazole 20mg dr cap</i>	81	ORSERDU 345MG TAB	32
		<i>omeprazole 40mg dr cap</i>	81	ORSERDU 86MG TAB	32
		OMNITROPE 10MG/1.5ML CARTRIDGE	57	<i>oseltamivir 30mg cap</i>	46
		OMNITROPE 5.8MG INJ	57	<i>oseltamivir 45mg cap</i>	46

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

ALPHABETICAL LISTING OF DRUGS

<i>oseltamivir 6mg/ml oral susp</i>	46	OZEMPIC 4MG/3ML PEN INJ	20	<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	66
<i>oseltamivir 75mg cap</i>	46	P		PEGASYS	46
OTEZLA 20MG TAB	53	<i>pacerone 100mg tab</i>	8	180MCG/0.5ML SYRINGE	
OTEZLA 30MG TAB	53	<i>pacerone 200mg tab</i>	8	PEGASYS 180MCG/ML INJ	46
OTEZLA TAB 28-DAY STARTER PACK (55)	53	<i>pacerone 400mg tab</i>	8	PEMAZYRE 13.5MG TAB	35
<i>oxacillin 100mg/ml inj</i>	74	<i>paliperidone 1.5mg er tab</i>	40	PEMAZYRE 4.5MG TAB	35
<i>oxacillin 1gm inj</i>	74	<i>paliperidone 3mg er tab</i>	40	PEMAZYRE 9MG TAB	35
<i>oxacillin 2gm inj</i>	74	<i>paliperidone 6mg er tab</i>	40	PENBRAYA INJ	82
<i>oxcarbazepine 150mg tab</i>	13	<i>paliperidone 9mg er tab</i>	40	<i>penicillamine 250mg tab</i>	68
<i>oxcarbazepine 300mg tab</i>	13	PANRETIN 0.1% GEL	53	<i>penicillin g potassium 1000000unit/ml inj</i>	73
<i>oxcarbazepine 600mg tab</i>	13	<i>pantoprazole 20mg dr tab</i>	81	PENICILLIN G SODIUM 100000UNIT/ML INJ	73
<i>oxcarbazepine 60mg/ml oral susp</i>	13	<i>pantoprazole 40mg dr tab</i>	81	<i>penicillin v potassium 250mg tab</i>	73
<i>oxybutynin chloride 10mg er tab</i>	81	<i>paricalcitol 1mcg cap</i>	58	PENICILLIN V	73
<i>oxybutynin chloride 15mg er tab</i>	81	<i>paricalcitol 2mcg cap</i>	58	POTASSIUM 25MG/ML ORAL SOLN	
<i>oxybutynin chloride 1mg/ml oral soln</i>	81	<i>paricalcitol 4mcg cap</i>	58	<i>penicillin v potassium 500mg tab</i>	74
<i>oxybutynin chloride 5mg er tab</i>	81	<i>paroxetine 10mg tab</i>	16	PENICILLIN V	74
<i>oxybutynin chloride 5mg tab</i>	81	PAROXETINE 10MG/ML SUSP	16	POTASSIUM 50MG/ML ORAL SOLN	
<i>oxycodone 10mg tab</i>	5	<i>paroxetine 12.5mg er tab</i>	16	PENTACEL	80
<i>oxycodone 15mg tab</i>	5	<i>paroxetine 20mg tab</i>	16	96-30-68UNIT/ML INJ	
<i>oxycodone 1mg/ml oral soln</i>	5	<i>paroxetine 25mg er tab</i>	16	<i>pentamidine isethionate 300mg inj</i>	29
<i>oxycodone 20mg tab</i>	5	<i>paroxetine 30mg tab</i>	16	<i>pentamidine isethionate 300mg/6ml inh soln</i>	29
<i>oxycodone 30mg tab</i>	5	<i>paroxetine 37.5mg er tab</i>	16	<i>pentoxifylline 400mg er tab</i>	49
<i>oxycodone 5mg tab</i>	5	<i>paroxetine 40mg tab</i>	16	<i>perampanel 10mg tab</i>	13
<i>oxycodone/acetaminophen 10-325mg tab</i>	5	PAXLOVID	46	<i>perampanel 12mg tab</i>	13
<i>oxycodone/acetaminophen 2.5-325mg tab</i>	5	150MG/100MG TAB PACK (20)		<i>perampanel 2mg tab</i>	13
<i>oxycodone/acetaminophen 5-325mg tab</i>	5	PAXLOVID	46	<i>perampanel 4mg tab</i>	13
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	5	150MG/100MG TAB PACK (30)		<i>perampanel 6mg tab</i>	13
OZEMPIC 2.68MG/ML PEN INJ	20	PAXLOVID	46	<i>perampanel 8mg tab</i>	13
OZEMPIC 2MG/3ML PEN INJ	20	300MG/100MG AND 150MG/100MG TAB DOSE PACK (11)		PERINDOPRIL	24
		<i>pazopanib 200mg tab</i>	35	ERBUMINE 2MG TAB	
		PEDIARIX SYRINGE	80		
		PEDVAXHIB	82		
		7.5MCG/0.5ML INJ			
		<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	65		
		<i>peg 3350/electrolyte powder for oral soln</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>perindopril erbumine</i>	25	<i>pindolol 10mg tab</i>	47	<i>posaconazole 100mg dr</i>	22
<i>4mg tab</i>		<i>pindolol 5mg tab</i>	47	<i>tab</i>	
PERINDOPRIL	25	<i>pioglitazone 15mg tab</i>	20	<i>posaconazole 40mg/ml</i>	22
ERBUMINE 8MG TAB		<i>pioglitazone 30mg tab</i>	20	<i>oral susp</i>	
<i>periogard 0.12%</i>	51	<i>pioglitazone 45mg tab</i>	20	<i>potassium chloride</i>	68
<i>mouthwash</i>		<i>piperacillin/tazobactam</i>	74	<i>1.33meq/ml oral soln</i>	
<i>permethrin 5% cream</i>	55	<i>2000-250mg inj</i>		<i>potassium chloride</i>	68
<i>perphenazine 16mg tab</i>	42	<i>piperacillin/tazobactam</i>	74	<i>10meq er cap</i>	
<i>perphenazine 2mg tab</i>	42	<i>3000-375mg inj</i>		<i>potassium chloride</i>	68
<i>perphenazine 4mg tab</i>	42	<i>piperacillin/tazobactam</i>	74	<i>10meq er tab</i>	
<i>perphenazine 8mg tab</i>	42	<i>36-4.5gm inj</i>		<i>potassium chloride</i>	68
PERSERIS 120MG	40	<i>piperacillin/tazobactam</i>	74	<i>10meq micro er tab</i>	
SYRINGE		<i>4000-500mg inj</i>		POTASSIUM CHLORIDE	68
PERSERIS 90MG	40	PIQRAY TAB 200MG	35	10MEQ/100ML INJ	
SYRINGE		DAILY DOSE PACK (28)		POTASSIUM CHLORIDE	68
PHENELZINE 15MG TAB	16	PIQRAY TAB 250MG	35	15MEQ ER TAB	
<i>phenobarbital 100mg tab</i>	13	DAILY DOSE PACK (56)		<i>potassium chloride</i>	68
<i>phenobarbital 15mg tab</i>	14	PIQRAY TAB 300MG	35	<i>15meq micro er tab</i>	
<i>phenobarbital 16.2mg tab</i>	14	DAILY DOSE PACK (56)		<i>potassium chloride</i>	68
<i>phenobarbital 30mg tab</i>	14	<i>pirfenidone 267mg cap</i>	77	<i>2.67meq/ml oral soln</i>	
<i>phenobarbital 32.4mg tab</i>	14	<i>pirfenidone 267mg tab</i>	77	<i>potassium chloride</i>	68
<i>phenobarbital 4mg/ml</i>	14	<i>pirfenidone 801mg tab</i>	77	<i>20meq er tab</i>	
<i>oral soln</i>		<i>piroxicam 10mg cap</i>	4	<i>potassium chloride</i>	68
<i>phenobarbital 60mg tab</i>	14	<i>piroxicam 20mg cap</i>	4	<i>20meq micro er tab</i>	
<i>phenobarbital 64.8mg tab</i>	14	PLASMA-LYTE A INJ	67	<i>potassium chloride</i>	68
<i>phenobarbital 97.2mg tab</i>	14	PLEGRIDY	76	<i>20meq powder for oral</i>	
<i>phenytoin 25mg/ml oral</i>	14	125MCG/0.5ML		<i>soln</i>	
<i>susp</i>		AUTO-INJECTOR		POTASSIUM CHLORIDE	68
<i>phenytoin 50mg chew tab</i>	14	PLEGRIDY	76	20MEQ/100ML INJ	
<i>phenytoin sodium 100mg</i>	14	125MCG/0.5ML		<i>potassium chloride</i>	68
<i>er cap</i>		SYRINGE		<i>2meq/ml (20ml) inj</i>	
PIFELTRO 100MG TAB	45	<i>plenamine 15% inj</i>	71	<i>potassium chloride</i>	68
<i>pilocarpine 1% ophth</i>	72	PODOFILOX 0.5%	55	<i>2meq/ml inj</i>	
<i>soln</i>		TOPICAL SOLN		POTASSIUM CHLORIDE	68
<i>pilocarpine 2% ophth</i>	72	<i>polycin 0.5-10unit/mg</i>	71	40MEQ/100ML INJ	
<i>soln</i>		<i>ophth ointment</i>		<i>potassium chloride 8meq</i>	68
<i>pilocarpine 4% ophth</i>	72	<i>polymyxin b/trimethoprim</i>	72	<i>er cap</i>	
<i>soln</i>		<i>10000 unit/ml-0.1%</i>		<i>potassium chloride 8meq</i>	68
<i>pilocarpine 5mg tab</i>	51	<i>ophth soln</i>		<i>er tab</i>	
<i>pilocarpine 7.5mg tab</i>	51	POMALYST 1MG CAP	37	<i>potassium citrate 10meq</i>	63
<i>pimecrolimus 1% cream</i>	55	POMALYST 2MG CAP	37	<i>er tab</i>	
PIMOZIDE 1MG TAB	76	POMALYST 3MG CAP	37	<i>potassium citrate 15meq</i>	63
PIMOZIDE 2MG TAB	76	POMALYST 4MG CAP	37	<i>er tab</i>	
<i>pimtrea tab 28-day pack</i>	61	<i>portia 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>potassium citrate 5meq er tab</i>	63	<i>pregabalin 20mg/ml oral soln</i>	14	PRIORIX INJ	82
<i>pramipexole 0.125mg tab</i>	38	<i>pregabalin 225mg cap</i>	14	PRIVIGEN 20GM/200ML INJ	73
<i>pramipexole 0.25mg tab</i>	38	<i>pregabalin 25mg cap</i>	14	<i>probenecid 500mg tab</i>	64
<i>pramipexole 0.5mg tab</i>	38	<i>pregabalin 300mg cap</i>	14	<i>prochlorperazine 10mg tab</i>	42
<i>pramipexole 0.75mg tab</i>	38	<i>pregabalin 50mg cap</i>	14	<i>prochlorperazine 25mg rectal supp</i>	42
<i>pramipexole 1.5mg tab</i>	38	<i>pregabalin 75mg cap</i>	14	<i>prochlorperazine 5mg tab</i>	42
<i>pramipexole 1mg tab</i>	38	PREMARIN 0.3MG TAB	62	<i>procto-med 2.5% cream</i>	6
<i>prasugrel 10mg tab</i>	64	PREMARIN 0.45MG TAB	62	<i>proctosol 2.5% cream</i>	6
<i>prasugrel 5mg tab</i>	64	PREMARIN 0.625MG TAB	62	<i>proctozone hc 2.5% cream</i>	6
<i>pravastatin sodium 10mg tab</i>	24	PREMARIN	83	<i>progesterone 100mg cap</i>	75
<i>pravastatin sodium 20mg tab</i>	24	0.625MG/GM VAGINAL CREAM		<i>progesterone 200mg cap</i>	75
<i>pravastatin sodium 40mg tab</i>	24	PREMARIN 0.9MG TAB	62	PROGRAF 0.2MG GRANULES FOR ORAL SUSP	69
<i>pravastatin sodium 80mg tab</i>	24	PREMARIN 1.25MG TAB	62	PROGRAF 1MG GRANULES FOR ORAL SUSP	69
<i>praziquantel 600mg tab</i>	6	PREMPHASE 28-DAY PACK	61	PROLASTIN 1000MG INJ	77
<i>prazosin 1mg cap</i>	26	PREMPRO 0.3/1.5MG 28-DAY PACK	61	<i>promethazine 1.25mg/ml oral soln</i>	77
<i>prazosin 2mg cap</i>	26	PREMPRO 0.45/1.5MG 28-DAY PACK	61	<i>promethazine 12.5mg tab</i>	78
<i>prazosin 5mg cap</i>	26	PREMPRO 0.625/2.5MG 28-DAY PACK	61	<i>promethazine 25mg tab</i>	78
PREDNISOLONE 1% OPHTH SOLN	72	PREMPRO 0.625/5MG 28-DAY PACK	61	<i>promethazine 50mg tab</i>	78
<i>prednisolone 1mg/ml oral soln</i>	51	<i>prevalite 4gm powder for oral susp</i>	23	<i>propafenone 150mg tab</i>	8
<i>prednisolone 3mg/ml oral soln</i>	51	PREVYMIS 120MG ORAL PELLET	45	<i>propafenone 225mg er cap</i>	8
<i>prednisolone 5mg/ml oral soln</i>	51	PREVYMIS 240MG TAB	45	<i>propafenone 225mg tab</i>	8
<i>prednisolone acetate 1% ophth susp</i>	72	PREVYMIS 480MG TAB	45	<i>propafenone 300mg tab</i>	8
<i>prednisone 10mg tab</i>	51	PREZCOBIX 150-800MG TAB	45	<i>propafenone 325mg er cap</i>	8
<i>prednisone 1mg tab</i>	51	PREZISTA 100MG/ML ORAL SUSP	45	<i>propafenone 425mg er cap</i>	8
PREDNISONE 1MG/ML ORAL SOLN	51	PREZISTA 150MG TAB	45	<i>propranolol 10mg tab</i>	47
<i>prednisone 2.5mg tab</i>	51	PREZISTA 75MG TAB	45	<i>propranolol 120mg er cap</i>	47
<i>prednisone 20mg tab</i>	51	PRIFTIN 150MG TAB	30	<i>propranolol 160mg er cap</i>	47
<i>prednisone 50mg tab</i>	51	PRIMAQUINE	30	<i>propranolol 20mg tab</i>	47
<i>prednisone 5mg tab</i>	51	PHOSPHATE 26.3MG TAB		<i>propranolol 40mg tab</i>	47
<i>pregabalin 100mg cap</i>	14	<i>primidone 250mg tab</i>	14	PROPRANOLOL	47
<i>pregabalin 150mg cap</i>	14	<i>primidone 50mg tab</i>	14	4MG/ML ORAL SOLN	
<i>pregabalin 200mg cap</i>	14				

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

ALPHABETICAL LISTING OF DRUGS

<i>propranolol 60mg er cap</i>	47	<i>quinine sulfate 324mg cap</i>	30	REPATHA 420MG/3.5ML	23
<i>propranolol 60mg tab</i>	47	QVAR 40MCG	9	CARTRIDGE	
<i>propranolol 80mg er cap</i>	47	REDIHALER		RETACRIT	65
<i>propranolol 80mg tab</i>	47	QVAR 80MCG	9	10000UNIT/ML INJ	
PROPRANOLOL	47	REDIHALER		RETACRIT	65
8MG/ML ORAL SOLN				20000UNIT/2ML INJ	
<i>propylthiouracil 50mg tab</i>	79	R		RETACRIT	65
PROQUAD INJ	82	RABAVERT 2.5UNIT/ML	82	20000UNIT/ML INJ	
PROSOL 20% INJ	71	INJ		RETACRIT 2000UNIT/ML	65
<i>protriptyline 10mg tab</i>	18	RADICAVA 105MG/5ML	70	INJ	
<i>protriptyline 5mg tab</i>	18	ORAL SUSP		RETACRIT 3000UNIT/ML	65
PULMOZYME 1MG/ML	77	RALDESY 10MG/ML	17	INJ	
INH SOLN		ORAL SOLN		RETACRIT	65
PURIXAN	31	<i>raloxifene 60mg tab</i>	57	40000UNIT/ML INJ	
2000MG/100ML ORAL		<i>ramelteon 8mg tab</i>	65	RETACRIT 4000UNIT/ML	65
SUSP		<i>ramipril 1.25mg cap</i>	25	INJ	
<i>pyrazinamide 500mg tab</i>	30	<i>ramipril 10mg cap</i>	25	RETEVMO 120MG TAB	35
<i>pyridostigmine bromide 60mg tab</i>	30	<i>ramipril 2.5mg cap</i>	25	RETEVMO 160MG TAB	35
<i>pyrimethamine 25mg tab</i>	30	<i>ramipril 5mg cap</i>	25	RETEVMO 40MG CAP	35
		<i>ranolazine 1000mg er tab</i>	49	RETEVMO 40MG TAB	35
		<i>ranolazine 500mg er tab</i>	49	RETEVMO 80MG TAB	35
		<i>rasagiline 0.5mg tab</i>	39	REVUFORJ 110MG TAB	37
Q		<i>rasagiline 1mg tab</i>	39	REVUFORJ 160MG TAB	37
QINLOCK 50MG TAB	35	<i>reclipsen tab 28-day pack</i>	61	REVUFORJ 25MG TAB	37
QUADRACEL INJ	80	RECOMBIVAX	83	REXULTI 0.25MG TAB	43
QUADRACEL SYRINGE	80	10MCG/ML INJ		REXULTI 0.5MG TAB	43
<i>quetiapine 100mg tab</i>	42	RECOMBIVAX	83	REXULTI 1MG TAB	43
<i>quetiapine 150mg er tab</i>	42	10MCG/ML SYRINGE		REXULTI 2MG TAB	43
<i>quetiapine 200mg er tab</i>	42	RECOMBIVAX	83	REXULTI 3MG TAB	43
<i>quetiapine 200mg tab</i>	42	40MCG/ML INJ		REXULTI 4MG TAB	43
<i>quetiapine 25mg tab</i>	42	RECOMBIVAX	83	REYATAZ 50MG ORAL	45
<i>quetiapine 300mg er tab</i>	42	5MCG/0.5ML INJ		POWDER	
<i>quetiapine 300mg tab</i>	42	RECOMBIVAX	83	REZDIFFRA 100MG TAB	63
<i>quetiapine 400mg er tab</i>	42	5MCG/0.5ML SYRINGE		REZDIFFRA 60MG TAB	63
<i>quetiapine 400mg tab</i>	42	REGRANEX 0.01% GEL	55	REZDIFFRA 80MG TAB	63
<i>quetiapine 50mg er tab</i>	42	RELENZA 5MG/BLISTER	46	REZLIDHIA 150MG CAP	35
<i>quetiapine 50mg tab</i>	42	POWDER INHALER		REZUROCK 200MG TAB	69
<i>quinapril 10mg tab</i>	25	<i>repaglinide 0.5mg tab</i>	20	RHOPRESSA 0.02%	72
<i>quinapril 20mg tab</i>	25	<i>repaglinide 1mg tab</i>	20	OPHTH SOLN	
<i>quinapril 40mg tab</i>	25	<i>repaglinide 2mg tab</i>	20	RIBAVIRIN 200MG CAP	46
<i>quinapril 5mg tab</i>	25	REPATHA 140MG/ML	23	RIBAVIRIN 200MG TAB	46
QUINIDINE SULFATE	8	AUTO-INJECTOR		<i>rifabutin 150mg cap</i>	30
200MG TAB		REPATHA 140MG/ML	23	<i>rifampin 150mg cap</i>	30
QUINIDINE SULFATE	8	SYRINGE		<i>rifampin 300mg cap</i>	30
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

<i>rifampin 600mg inj</i>	30	<i>rivastigmine 1.5mg cap</i>	75	ROZLYTREK 200MG	35
<i>riluzole 50mg tab</i>	70	<i>rivastigmine 13.3mg/24hr</i>	75	CAP	
RIMANTADINE 100MG	46	<i>patch</i>		ROZLYTREK 50MG	35
TAB		<i>rivastigmine 3mg cap</i>	75	ORAL PELLET	
RINVOQ 15MG ER TAB	2	<i>rivastigmine 4.5mg cap</i>	75	RUBRACA 200MG TAB	35
RINVOQ 1MG/ML ORAL	2	<i>rivastigmine 4.6mg/24hr</i>	75	RUBRACA 250MG TAB	35
SOLN		<i>patch</i>		RUBRACA 300MG TAB	35
RINVOQ 30MG ER TAB	2	<i>rivastigmine 6mg cap</i>	75	<i>rufinamide 200mg tab</i>	14
RINVOQ 45MG ER TAB	2	<i>rivastigmine 9.5mg/24hr</i>	75	<i>rufinamide 400mg tab</i>	14
<i>risedronate sodium</i>	57	<i>patch</i>		<i>rufinamide 40mg/ml oral</i>	14
<i>150mg tab</i>		<i>rizatriptan 10mg odt</i>	66	<i>susp</i>	
<i>risedronate sodium 30mg</i>	57	<i>rizatriptan 10mg tab</i>	66	RUKOBIA 600MG ER	45
<i>tab</i>		<i>rizatriptan 5mg odt</i>	66	TAB	
<i>risedronate sodium 35mg</i>	57	<i>rizatriptan 5mg tab</i>	66	RYBELSUS 14MG TAB	20
<i>tab</i>		ROCKLATAN	72	RYBELSUS 3MG TAB	20
<i>risedronate sodium 35mg</i>	57	0.02-0.005% OPTH		RYBELSUS 7MG TAB	20
<i>tab pack (12)</i>		SOLN		RYDAPT 25MG CAP	35
<i>risedronate sodium 35mg</i>	57	<i>roflumilast 0.5mg tab</i>	78	S	
<i>tab pack (4)</i>		<i>roflumilast 250mcg tab</i>	78	<i>sajazir 30mg/3ml syringe</i>	65
<i>risedronate sodium 5mg</i>	57	ROMVIMZA 14MG CAP	35	<i>salmon calcitonin</i>	57
<i>tab</i>		ROMVIMZA 20MG CAP	35	<i>200unit/act nasal spray</i>	
RISPERIDONE 0.25MG	40	ROMVIMZA 30MG CAP	35	SANTYL 250UNIT/GM	55
ODT		<i>ropinirole 0.25mg tab</i>	38	OINTMENT	
<i>risperidone 0.25mg tab</i>	40	<i>ropinirole 0.5mg tab</i>	38	<i>sapropterin 100mg</i>	58
<i>risperidone 0.5mg odt</i>	40	<i>ropinirole 1mg tab</i>	39	<i>powder for oral soln</i>	
<i>risperidone 0.5mg tab</i>	41	<i>ropinirole 2mg tab</i>	39	<i>sapropterin 100mg tab</i>	58
<i>risperidone 1mg odt</i>	41	<i>ropinirole 3mg tab</i>	39	<i>sapropterin 500mg</i>	58
<i>risperidone 1mg tab</i>	41	<i>ropinirole 4mg tab</i>	39	<i>powder for oral soln</i>	
<i>risperidone 1mg/ml oral</i>	41	<i>ropinirole 5mg tab</i>	39	SCEMBLIX 100MG TAB	36
<i>soln</i>		<i>rosuvastatin calcium</i>	24	SCEMBLIX 20MG TAB	36
<i>risperidone 2mg odt</i>	41	<i>10mg tab</i>		SCEMBLIX 40MG TAB	36
<i>risperidone 2mg tab</i>	41	<i>rosuvastatin calcium</i>	24	<i>scopolamine 1mg/72hr</i>	22
<i>risperidone 37.5mg inj</i>	41	<i>20mg tab</i>		<i>patch</i>	
<i>risperidone 3mg odt</i>	41	<i>rosuvastatin calcium</i>	24	SECUADO 3.8MG/24HR	42
<i>risperidone 3mg tab</i>	41	<i>40mg tab</i>		PATCH	
<i>risperidone 4mg odt</i>	41	<i>rosuvastatin calcium 5mg</i>	24	SECUADO 5.7MG/24HR	42
<i>risperidone 4mg tab</i>	41	<i>tab</i>		PATCH	
<i>risperidone 50mg inj</i>	41	ROTARIX	83	SECUADO 7.6MG/24HR	42
<i>risperidone microspheres</i>	41	667000UNIT/ML ORAL		PATCH	
<i>12.5mg inj</i>		SUSP		<i>selegiline 5mg cap</i>	39
<i>risperidone microspheres</i>	41	ROTATEQ ORAL SUSP	83	<i>selenium sulfide 2.5%</i>	55
<i>25mg inj</i>		<i>roweepra 500mg tab</i>	14	<i>shampoo</i>	
<i>ritonavir 100mg tab</i>	45	ROZLYTREK 100MG	35	SELZENTRY 20MG/ML	45
<i>rivaroxaban 2.5mg tab</i>	11	CAP		ORAL SOLN	

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>sertraline 100mg tab</i>	17	SKYRIZI 180MG/1.2ML	63	<i>sotalol 160mg tab</i>	47
<i>sertraline 20mg/ml oral soln</i>	17	CARTRIDGE		<i>sotalol 240mg tab</i>	47
<i>sertraline 25mg tab</i>	17	SKYRIZI 360MG/2.4ML	63	<i>sotalol 80mg tab</i>	47
<i>sertraline 50mg tab</i>	17	CARTRIDGE		<i>sotalol af 120mg tab</i>	47
<i>setlakin tab 91-day pack</i>	61	<i>sodium chloride 0.45% inj</i>	68	<i>sotalol af 160mg tab</i>	48
<i>sharobel 0.35mg tab</i>	75	<i>sodium chloride 0.9% inj</i>	68	<i>sotalol af 80mg tab</i>	48
<i>28-day pack</i>		<i>sodium chloride 0.9%</i>	63	<i>spironolactone 100mg tab</i>	56
SHINGRIX	83	<i>irrigation soln</i>		<i>spironolactone 25mg tab</i>	56
50MCG/0.5ML INJ		<i>sodium chloride 3% inj</i>	68	<i>spironolactone 50mg tab</i>	56
SIGNIFOR 0.3MG/ML INJ	58	<i>sodium chloride 50mg/ml inj</i>	68	<i>sprintec tab 28-day pack</i>	61
SIGNIFOR 0.6MG/ML INJ	58	SODIUM OXYBATE	78	SPRITAM 1000MG TAB	14
SIGNIFOR 0.9MG/ML INJ	58	500MG/ML ORAL SOLN		FOR ORAL SUSP	
<i>sildenafil 20mg tab</i>	78	<i>sodium phenylbutyrate 3gm/tsp oral powder</i>	58	SPRITAM 250MG TAB	14
<i>silver sulfadiazine 1% cream</i>	55	<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	70	FOR ORAL SUSP	
SIMBRINZA 0.2-1%	71	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	66	SPRITAM 500MG TAB	14
OPHTH SUSP		<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	66	FOR ORAL SUSP	
SIMLANDI 20MG/0.2ML SYRINGE	3	SOFOSBUVIR/VELPATAS	46	SPRITAM 750MG TAB	14
SIMLANDI 40MG/0.4ML AUTO-INJECTOR	3	VIR 400-100MG TAB		FOR ORAL SUSP	
SIMLANDI 40MG/0.4ML SYRINGE	3	SOGROYA 10MG/1.5ML	57	<i>sps 15gm/60ml susp</i>	70
SIMLANDI 80MG/0.8ML AUTO-INJECTOR	3	PEN INJ		<i>sronyx tab 28-day pack</i>	61
SIMLANDI 80MG/0.8ML SYRINGE	3	SOGROYA 15MG/1.5ML	57	<i>ssd 1% cream</i>	55
<i>simvastatin 10mg tab</i>	24	PEN INJ		STELARA 45MG/0.5ML INJ	53
<i>simvastatin 20mg tab</i>	24	SOGROYA 5MG/1.5ML	57	STELARA 45MG/0.5ML SYRINGE	53
<i>simvastatin 40mg tab</i>	24	PEN INJ		STELARA 90MG/ML SYRINGE	53
<i>simvastatin 5mg tab</i>	24	SOLTAMOX 10MG/5ML	32	STEQEYMA 90MG/ML SYRINGE	53
<i>simvastatin 80mg tab</i>	24	ORAL SOLN		STIMUFEND 6MG/0.6ML	65
<i>sirolimus 0.5mg tab</i>	69	SOMAVERT 10MG INJ	58	SYRINGE	
<i>sirolimus 1mg tab</i>	69	SOMAVERT 15MG INJ	58	STIOLTO	10
<i>sirolimus 1mg/ml oral soln</i>	69	SOMAVERT 20MG INJ	58	2.5-2.5MCG/ACT	
<i>sirolimus 2mg tab</i>	69	SOMAVERT 25MG INJ	58	INHALER	
SIRTURO 100MG TAB	30	SOMAVERT 30MG INJ	58	STIVARGA 40MG TAB	36
SIRTURO 20MG TAB	30	<i>sorafenib 200mg tab</i>	36	STREPTOMYCIN 1GM INJ	2
SKYRIZI 150MG/ML AUTO-INJECTOR	53	<i>sotalol 120mg tab</i>	47	STRIBILD	45
SKYRIZI 150MG/ML SYRINGE	53			150-150-200-300MG TAB	
				STRIVERDI 2.5MCG/ACT	10
				INHALER	
				<i>subvenite 100mg tab</i>	14
				<i>subvenite 150mg tab</i>	14

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

ALPHABETICAL LISTING OF DRUGS

<i>subvenite 200mg tab</i>	14	SUNLENCA 300MG TAB	45	<i>tacrolimus 1mg cap</i>	69
<i>subvenite 25mg tab</i>	14	THERAPY PACK (4)		<i>tacrolimus 5mg cap</i>	69
SUCRAID 8500UNIT/ML	56	SUNLENCA 300MG TAB	45	<i>tadalafil 2.5mg tab</i>	64
ORAL SOLN		THERAPY PACK (5)		<i>tadalafil 20mg tab</i>	78
<i>sucralfate 1000mg tab</i>	81	SUNOSI 150MG TAB	78	<i>tadalafil 5mg tab</i>	64
<i>sucralfate 100mg/ml oral</i>	81	SUNOSI 75MG TAB	78	TAFINLAR 10MG TAB	36
<i>susp</i>		<i>syeda tab 28-day pack</i>	61	FOR ORAL SUSP	
SUFLAVE SOLN PACK	66	SYMDEKO TAB 4-WEEK	77	TAFINLAR 50MG CAP	36
<i>sulfacetamide sodium</i>	52	PACK (56)		TAFINLAR 75MG CAP	36
<i>10% lotion</i>		SYMDEKO TAB	77	TAGRISSO 40MG TAB	31
<i>sulfacetamide sodium</i>	72	50-75MG/75MG PACK		TAGRISSO 80MG TAB	31
<i>10% ophth soln</i>		(56)		TAKHZYRO 300MG/2ML	65
SULFACETAMIDE/PRED	72	SYMPAZAN 10MG ORAL	12	INJ	
NISOLONE 10-0.25%		FILM		TAKHZYRO 300MG/2ML	65
OPHTH SOLN		SYMPAZAN 20MG ORAL	12	SYRINGE	
<i>sulfadiazine 500mg tab</i>	78	FILM		TALZENNA 0.1MG CAP	36
<i>sulfamethoxazole/trimeth</i>	79	SYMPAZAN 5MG ORAL	12	TALZENNA 0.25MG CAP	36
<i>oprim 200-40mg/5ml oral</i>		FILM		TALZENNA 0.35MG CAP	36
<i>susp</i>		SYMTUZA	45	TALZENNA 0.5MG CAP	36
<i>sulfamethoxazole/trimeth</i>	79	150-800-200-10MG TAB		TALZENNA 0.75MG CAP	36
<i>oprim 400-80mg tab</i>		SYNJARDY	19	TALZENNA 1MG CAP	36
<i>sulfamethoxazole/trimeth</i>	79	12.5-1000MG TAB		<i>tamoxifen 10mg tab</i>	32
<i>oprim 800-160mg tab</i>		SYNJARDY 12.5-500MG	19	<i>tamoxifen 20mg tab</i>	32
<i>sulfasalazine 500mg dr</i>	63	TAB		<i>tamsulosin 0.4mg cap</i>	64
<i>tab</i>		SYNJARDY 5-1000MG	19	<i>tarina 24 fe tab 1/20</i>	61
<i>sulfasalazine 500mg tab</i>	63	TAB		<i>28-day pack</i>	
<i>sulindac 150mg tab</i>	4	SYNJARDY 5-500MG	19	<i>tarina fe tab 1/20 28-day</i>	61
<i>sulindac 200mg tab</i>	4	TAB		<i>pack</i>	
<i>sumatriptan 100mg tab</i>	67	SYNJARDY XR	19	<i>tazarotene 0.1% cream</i>	53
<i>sumatriptan 25mg tab</i>	67	10-1000MG TAB		<i>tazicef 1gm inj</i>	50
<i>sumatriptan 4mg/0.5ml</i>	67	SYNJARDY XR	19	<i>tazicef 2gm inj</i>	50
<i>cartridge</i>		12.5-1000MG TAB		TAZICEF 6GM INJ	50
<i>sumatriptan 50mg tab</i>	67	SYNJARDY XR	19	TAZVERIK 200MG TAB	36
<i>sumatriptan 6mg/0.5ml</i>	67	25-1000MG TAB		TEFLARO 400MG INJ	29
<i>auto-injector</i>		SYNJARDY XR	19	TEFLARO 600MG INJ	29
<i>sumatriptan 6mg/0.5ml</i>	67	5-1000MG TAB		<i>telmisartan 20mg tab</i>	25
<i>cartridge</i>				<i>telmisartan 40mg tab</i>	25
<i>sumatriptan 6mg/0.5ml</i>	67	T		<i>telmisartan 80mg tab</i>	25
<i>inj</i>		TABLOID 40MG TAB	31	<i>temazepam 15mg cap</i>	65
<i>sunitinib 12.5mg cap</i>	36	TABRECTA 150MG TAB	36	<i>temazepam 30mg cap</i>	65
<i>sunitinib 25mg cap</i>	36	TABRECTA 200MG TAB	36	TENIVAC 4-10UNIT/ML	81
<i>sunitinib 37.5mg cap</i>	36	<i>tacrolimus 0.03%</i>	55	INJ	
<i>sunitinib 50mg cap</i>	36	<i>ointment</i>		TENIVAC 4-10UNIT/ML	81
SUNLENCA 300MG TAB	45	<i>tacrolimus 0.1% ointment</i>	55	SYRINGE	
		<i>tacrolimus 0.5mg cap</i>	69		

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

ALPHABETICAL LISTING OF DRUGS

<i>tenofovir disoproxil fumarate 300mg tab</i>	45	TESTOSTERONE	6	<i>tiagabine 4mg tab</i>	15
TEPMETKO 225MG TAB	36	ENANTHATE 200MG/ML		TIBSOVO 250MG TAB	36
<i>terazosin 10mg cap</i>	26	INJ		<i>ticagrelor 60mg tab</i>	64
<i>terazosin 1mg cap</i>	26	<i>tetrabenazine 12.5mg tab</i>	76	<i>ticagrelor 90mg tab</i>	64
<i>terazosin 2mg cap</i>	26	<i>tetrabenazine 25mg tab</i>	76	TICOVAC	83
<i>terazosin 5mg cap</i>	26	<i>tetracycline 250mg cap</i>	79	1.2MCG/0.25ML	
<i>terbinafine 250mg tab</i>	22	<i>tetracycline 500mg cap</i>	79	SYRINGE	
<i>terbutaline sulfate 2.5mg tab</i>	10	THALOMID 100MG CAP	69	TICOVAC 2.4MCG/0.5ML	83
<i>terbutaline sulfate 5mg tab</i>	10	THALOMID 50MG CAP	69	SYRINGE	
<i>terconazole 0.4% vaginal cream</i>	83	THEOPHYLLINE 100MG	78	<i>tigecycline 50mg inj</i>	29
<i>terconazole 0.8% vaginal cream</i>	83	ER TAB		<i>timolol 0.25% ophth gel</i>	71
<i>terconazole 80mg vaginal insert</i>	83	THEOPHYLLINE 200MG	78	<i>timolol 0.25% ophth soln</i>	71
<i>teriflunomide 14mg tab</i>	76	ER TAB		<i>timolol 0.5% ophth gel</i>	71
<i>teriflunomide 7mg tab</i>	76	<i>theophylline 300mg er tab</i>	78	<i>timolol 0.5% ophth soln</i>	71
TERIPARATIDE	57	<i>theophylline 400mg er tab</i>	78	<i>timolol 10mg tab</i>	48
0.02MG/ACT PEN INJ		<i>theophylline 450mg er tab</i>	78	<i>timolol 5mg tab</i>	48
<i>testosterone 1% (12.5mg/act) gel pump</i>	6	<i>theophylline 600mg er tab</i>	78	<i>timolol hemihydrate 0.5% ophth soln</i>	71
<i>testosterone 1% (25mg) gel packet</i>	6	<i>thioridazine 100mg tab</i>	42	<i>tinidazole 250mg tab</i>	29
<i>testosterone 1% (50mg) gel packet</i>	6	<i>thioridazine 10mg tab</i>	42	<i>tinidazole 500mg tab</i>	29
TESTOSTERONE 1.62% (1.25GM) GEL PACKET	6	<i>thioridazine 25mg tab</i>	43	TIVICAY 50MG TAB	45
<i>testosterone 1.62% (2.5gm) gel packet</i>	6	<i>thioridazine 50mg tab</i>	43	TIVICAY 5MG TAB FOR	45
<i>testosterone 1.62% (20.25mg/act) gel pump</i>	6	<i>thiothixene 10mg cap</i>	40	ORAL SUSP	
<i>testosterone 30mg/act topical soln</i>	6	<i>thiothixene 1mg cap</i>	40	<i>tizanidine 2mg tab</i>	70
<i>testosterone cypionate 100mg/ml inj</i>	6	<i>thiothixene 2mg cap</i>	40	<i>tizanidine 4mg tab</i>	70
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	6	<i>thiothixene 5mg cap</i>	40	<i>tobramycin 0.3% ophth soln</i>	72
<i>testosterone cypionate 200mg/ml inj</i>	6	<i>tiadylt 120mg er (24hr) cap</i>	48	TOBRAMYCIN	2
		<i>tiadylt 180mg er (24hr) cap</i>	48	10MG/ML INJ	
		<i>tiadylt 240mg er (24hr) cap</i>	48	<i>tobramycin 300mg/5ml inh soln</i>	2
		<i>tiadylt 300mg er (24hr) cap</i>	48	<i>tobramycin 80mg/2ml inj</i>	2
		<i>tiadylt 360mg er (24hr) cap</i>	49	<i>tolterodine tartrate 1mg tab</i>	81
		<i>tiadylt 420mg er (24hr) cap</i>	49	<i>tolterodine tartrate 2mg er cap</i>	81
		<i>tiagabine 12mg tab</i>	15	<i>tolterodine tartrate 2mg tab</i>	81
		<i>tiagabine 16mg tab</i>	15	<i>tolterodine tartrate 4mg er cap</i>	81
		<i>tiagabine 2mg tab</i>	15	<i>topiramate 100mg tab</i>	14
				<i>topiramate 15mg cap</i>	14
				<i>topiramate 200mg tab</i>	14
				<i>topiramate 25mg cap</i>	14

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

ALPHABETICAL LISTING OF DRUGS

<i>topiramate 25mg tab</i>	14	TRELSTAR 11.25MG INJ	32	<i>triamcinolone acetoneide</i>	55
<i>topiramate 50mg tab</i>	14	TRELSTAR 22.5MG INJ	32	<i>0.5% ointment</i>	
<i>toremifene 60mg tab</i>	32	TRELSTAR 3.75MG INJ	32	<i>triazolam 0.125mg tab</i>	65
<i>torpenz 10mg tab</i>	36	TREMFYA 100MG/ML	53	<i>triazolam 0.25mg tab</i>	65
<i>torpenz 2.5mg tab</i>	36	AUTO-INJECTOR		<i>tridacaine 5% patch</i>	55
<i>torpenz 5mg tab</i>	36	TREMFYA 100MG/ML	53	<i>triderm 0.5% cream</i>	55
<i>torpenz 7.5mg tab</i>	36	SYRINGE		<i>trientine 250mg cap</i>	68
<i>torsemide 100mg tab</i>	56	TREMFYA 200MG/2ML	53	<i>tri-estarylla tab 28-day</i>	61
<i>torsemide 10mg tab</i>	56	AUTO-INJECTOR		<i>pack</i>	
<i>torsemide 20mg tab</i>	56	TREMFYA 200MG/2ML	63	<i>trifluoperazine 10mg tab</i>	43
<i>torsemide 5mg tab</i>	56	AUTO-INJECTOR		<i>trifluoperazine 1mg tab</i>	43
TOUJEO 300UNIT/ML	21	INDUCTION PACK FOR		<i>trifluoperazine 2mg tab</i>	43
PEN INJ (1.5ML)		CROHNS (2)		<i>trifluoperazine 5mg tab</i>	43
TOUJEO MAX	21	TREMFYA 200MG/2ML	54	TRIFLURIDINE 1%	72
300UNIT/ML PEN INJ		SYRINGE		OPHTH SOLN	
(3ML)		TRESIBA 100UNIT/ML	21	<i>trihexyphenidyl 2mg tab</i>	38
TPN ELECTROLYTES INJ	67	INJ		<i>trihexyphenidyl 5mg tab</i>	38
TRADJENTA 5MG TAB	20	TRESIBA 100UNIT/ML	21	TRIJARDY XR	19
<i>tramadol 100mg er tab</i>	5	PEN INJ		10-5-1000MG TAB	
<i>tramadol 200mg er tab</i>	5	TRESIBA 200UNIT/ML	21	TRIJARDY XR	19
<i>tramadol 300mg er tab</i>	5	PEN INJ		12.5-2.5-1000MG TAB	
<i>tramadol 50mg tab</i>	5	<i>tretinoin 0.01% gel</i>	52	TRIJARDY XR	19
<i>tramadol/acetaminophen</i>	5	<i>tretinoin 0.025% cream</i>	52	25-5-1000MG TAB	
<i>37.5-325mg tab</i>		<i>tretinoin 0.025% gel</i>	52	TRIJARDY XR	19
<i>trandolapril 1mg tab</i>	25	<i>tretinoin 0.05% cream</i>	52	5-2.5-1000MG TAB	
<i>trandolapril 2mg tab</i>	25	<i>tretinoin 0.1% cream</i>	52	TRIKAFTA	77
<i>trandolapril 4mg tab</i>	25	<i>tretinoin 10mg cap</i>	37	100-50-75MG/150MG	
<i>tranexamic acid 650mg</i>	65	<i>triamcinolone acetoneide</i>	55	TAB PACK (84)	
<i>tab</i>		<i>0.025% cream</i>		TRIKAFTA	77
<i>tranylcypramine 10mg</i>	16	<i>triamcinolone acetoneide</i>	55	100-50-75MG/75MG	
<i>tab</i>		<i>0.025% lotion</i>		GRANULES PACK (56)	
TRAVASOL 10% INJ	71	<i>triamcinolone acetoneide</i>	55	TRIKAFTA	77
<i>travoprost 0.004% ophth</i>	73	<i>0.025% ointment</i>		50-37.5-25MG/75MG	
<i>soln</i>		<i>triamcinolone acetoneide</i>	55	TAB PACK (84)	
<i>trazodone 100mg tab</i>	17	<i>0.1% cream</i>		TRIKAFTA	77
<i>trazodone 150mg tab</i>	17	<i>triamcinolone acetoneide</i>	55	80-40-60MG/59.5MG	
<i>trazodone 50mg tab</i>	17	<i>0.1% lotion</i>		GRANULES PACK (56)	
TRECATOR 250MG TAB	30	<i>triamcinolone acetoneide</i>	55	<i>tri-lo- estarylla tab</i>	61
TRELEGY ELLIPTA	10	<i>0.1% ointment</i>		<i>28-day pack</i>	
100-62.5-25MCG		<i>triamcinolone acetoneide</i>	51	<i>tri-lo-sprintec tab 28-day</i>	61
POWDER INHALER		<i>0.1% oral paste</i>		<i>pack</i>	
TRELEGY ELLIPTA	10	<i>triamcinolone acetoneide</i>	55	<i>trimethoprim 100mg tab</i>	29
200-62.5-25MCG		<i>0.5% cream</i>		<i>tri-mili tab 28-day pack</i>	61
POWDER INHALER				<i>trimipramine 100mg cap</i>	18

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>trimipramine 25mg cap</i>	18	TYENNE 162MG/0.9ML	3	<i>valacyclovir 500mg tab</i>	46
<i>trimipramine 50mg cap</i>	18	SYRINGE		VALCHLOR 0.016% GEL	53
TRINTELLIX 10MG TAB	17	TYMLOS	57	<i>valganciclovir 450mg tab</i>	45
TRINTELLIX 20MG TAB	17	3120MCG/1.56ML PEN		<i>valganciclovir 50mg/ml</i>	46
TRINTELLIX 5MG TAB	17	INJ		<i>oral soln</i>	
<i>tri-sprintec tab 28-day pack</i>	61	TYPHIM VI	82	<i>valproic acid 250mg cap</i>	15
TRIUMEQ	45	25MCG/0.5ML INJ		<i>valproic acid 50mg/ml</i>	15
600-50-300MG TAB		TYPHIM VI	82	<i>oral soln</i>	
TRIUMEQ 60-5-30MG	45	25MCG/0.5ML SYRINGE		<i>valsartan 160mg tab</i>	25
TAB FOR ORAL SUSP		U		<i>valsartan 320mg tab</i>	25
<i>trivora tab 28-day pack</i>	61	UBRELVY 100MG TAB	66	<i>valsartan 40mg tab</i>	25
<i>tri-vylibra lo tab 28-day pack</i>	61	UBRELVY 50MG TAB	66	<i>valsartan 80mg tab</i>	25
<i>tri-vylibra tab 28-day pack</i>	61	<i>unithroid 100mcg tab</i>	80	VALTOCO 10MG	12
<i>trospium chloride 20mg tab</i>	81	<i>unithroid 112mcg tab</i>	80	(10MG/0.1ML) NASAL	
<i>trospium chloride 60mg er cap</i>	82	<i>unithroid 125mcg tab</i>	80	SPRAY DOSE PACK	
TRULANCE 3MG TAB	66	<i>unithroid 137mcg tab</i>	80	VALTOCO 15MG	12
TRULICITY	20	<i>unithroid 150mcg tab</i>	80	(7.5MG/0.1ML) NASAL	
0.75MG/0.5ML		<i>unithroid 175mcg tab</i>	80	SPRAY DOSE PACK	
AUTO-INJECTOR		<i>unithroid 200mcg tab</i>	80	VALTOCO 20MG	12
TRULICITY	20	<i>unithroid 25mcg tab</i>	80	(10MG/0.1ML) NASAL	
1.5MG/0.5ML		<i>unithroid 300mcg tab</i>	80	SPRAY DOSE PACK	
AUTO-INJECTOR		<i>unithroid 50mcg tab</i>	80	VALTOCO 5MG	12
TRULICITY 3MG/0.5ML	20	<i>unithroid 75mcg tab</i>	80	(5MG/0.1ML) NASAL	
AUTO-INJECTOR		<i>unithroid 88mcg tab</i>	80	SPRAY DOSE PACK	
TRULICITY	20	<i>ursodiol 250mg tab</i>	63	<i>valtya tab 1/50 28-day pack</i>	61
4.5MG/0.5ML		<i>ursodiol 300mg cap</i>	63	<i>vancomycin 100mg/ml inj</i>	29
AUTO-INJECTOR		<i>ursodiol 500mg tab</i>	63	<i>vancomycin 125mg cap</i>	29
TRUMENBA SYRINGE	82	UZEDY 100MG/0.28ML	41	<i>vancomycin 1gm inj</i>	29
TRUQAP 160MG TAB	36	SYRINGE		<i>vancomycin 250mg cap</i>	29
TRUQAP 200MG TAB	36	UZEDY 125MG/0.35ML	41	<i>vancomycin 500mg inj</i>	29
TUKYSA 150MG TAB	37	SYRINGE		<i>vancomycin 750mg inj</i>	29
TUKYSA 50MG TAB	37	UZEDY 150MG/0.42ML	41	VANFLYTA 17.7MG TAB	36
TURALIO 125MG CAP	36	SYRINGE		VANFLYTA 26.5MG TAB	36
<i>turqoz tab 28-day pack</i>	61	UZEDY 200MG/0.56ML	41	VAQTA 25UNIT/0.5ML	83
TWINRIX SYRINGE	83	SYRINGE		INJ	
TYBOST 150MG TAB	45	UZEDY 250MG/0.7ML	41	VAQTA 25UNIT/0.5ML	83
TYENNE 162MG/0.9ML	3	SYRINGE		SYRINGE	
AUTO-INJECTOR		UZEDY 50MG/0.14ML	41	VAQTA 50UNIT/ML INJ	83
		SYRINGE	41	VAQTA 50UNIT/ML	83
		V		SYRINGE	
		<i>valacyclovir 1000mg tab</i>	46	<i>varenicline 0.5mg tab</i>	77
				<i>varenicline 0.5mg/1mg</i>	77
				<i>first month pack (53)</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>varenicline 1mg tab</i>	77	<i>verapamil 80mg tab</i>	49	VORANIGO 10MG TAB	36
<i>varenicline 1mg tab pack (56)</i>	77	VERQUVO 10MG TAB	49	VORANIGO 40MG TAB	36
VARIVAX	83	VERQUVO 2.5MG TAB	49	<i>voriconazole 200mg inj</i>	23
1350PFU/0.5ML INJ		VERQUVO 5MG TAB	49	<i>voriconazole 200mg tab</i>	23
VAXCHORA SUSP	82	VERSACLOZ 50MG/ML	42	<i>voriconazole 40mg/ml oral susp</i>	23
VELIVET TAB 28-DAY PACK	61	ORAL SUSP		<i>voriconazole 50mg tab</i>	23
VELTASSA 16.8GM	70	VERZENIO 100MG TAB	36	VOSEVI 400-100-100MG TAB	46
POWDER FOR ORAL SUSP		VERZENIO 150MG TAB	36	VOWST 30000000UNIT CAP	63
VELTASSA 1GM	70	VERZENIO 200MG TAB	36	VRAYLAR 1.5MG CAP	40
POWDER FOR ORAL SUSP		VERZENIO 50MG TAB	36	VRAYLAR 3MG CAP	40
VELTASSA 25.2GM	70	<i>vestura tab 3-0.02mg 28-day pack</i>	61	VRAYLAR 4.5MG CAP	40
POWDER FOR ORAL SUSP		<i>vienva tab 28-day pack</i>	61	VRAYLAR 6MG CAP	40
VELTASSA 8.4GM	70	<i>vigabatrin 500mg powder for oral soln</i>	15	<i>vyfemla tab 28-day pack</i>	62
POWDER FOR ORAL SUSP		<i>vigabatrin 500mg tab</i>	15	<i>vylibra tab 28-day pack</i>	62
		<i>vigadrone 500mg powder for oral soln</i>	15	VYNDAMAX 61MG CAP	49
		<i>vigadrone 500mg tab</i>	15	VYNDAQEL 20MG CAP	49
		VIGAFYDE 100MG/ML	15		
VEMLIDY 25MG TAB	46	ORAL SOLN		W	
VENCLEXTA 100MG TAB	37	<i>vigpoder 500mg powder for oral soln</i>	15	<i>warfarin sodium 10mg tab</i>	11
VENCLEXTA 10MG TAB	37	<i>vilazodone 10mg tab</i>	17	<i>warfarin sodium 1mg tab</i>	11
VENCLEXTA 50MG TAB	37	<i>vilazodone 20mg tab</i>	17	<i>warfarin sodium 2.5mg tab</i>	11
VENCLEXTA TAB	37	<i>vilazodone 40mg tab</i>	17	<i>warfarin sodium 2mg tab</i>	11
STARTER PACK (42)		VIMKUNYA	83	<i>warfarin sodium 3mg tab</i>	11
<i>venlafaxine 100mg tab</i>	17	40MCG/0.8ML SYRINGE		<i>warfarin sodium 4mg tab</i>	11
<i>venlafaxine 150mg er cap</i>	17	VIRACEPT 250MG TAB	45	<i>warfarin sodium 5mg tab</i>	11
<i>venlafaxine 25mg tab</i>	17	VIRACEPT 625MG TAB	45	<i>warfarin sodium 6mg tab</i>	11
<i>venlafaxine 37.5mg er cap</i>	17	VIREAD 150MG TAB	45	<i>warfarin sodium 7.5mg tab</i>	11
<i>venlafaxine 37.5mg tab</i>	17	VIREAD 200MG TAB	45	WELIREG 40MG TAB	37
<i>venlafaxine 50mg tab</i>	17	VIREAD 250MG TAB	45	WINREVAIR 45MG INJ	78
<i>venlafaxine 75mg er cap</i>	17	VIREAD 40MG/GM	45	WINREVAIR 45MG INJ (2 VIAL PACK)	78
<i>venlafaxine 75mg tab</i>	17	ORAL POWDER		WINREVAIR 60MG INJ	78
<i>verapamil 120mg er cap</i>	49	VITRAKVI 100MG CAP	36	WINREVAIR 60MG INJ (2 VIAL PACK)	78
<i>verapamil 120mg er tab</i>	49	VITRAKVI 20MG/ML	36	<i>wixela 100-50mcg powder inhaler</i>	10
<i>verapamil 120mg tab</i>	49	ORAL SOLN		<i>wixela 250-50mcg powder inhaler</i>	10
<i>verapamil 180mg er cap</i>	49	VITRAKVI 25MG CAP	36		
<i>verapamil 180mg er tab</i>	49	VIVOTIF DR CAP	82		
<i>verapamil 240mg er cap</i>	49	VIZIMPRO 15MG TAB	31		
<i>verapamil 240mg er tab</i>	49	VIZIMPRO 30MG TAB	31		
<i>verapamil 40mg tab</i>	49	VIZIMPRO 45MG TAB	31		
		VONJO 100MG CAP	36		

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

ALPHABETICAL LISTING OF DRUGS

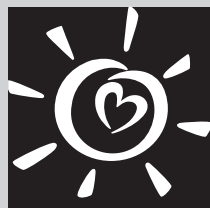
<i>wixela 500-50mcg</i>	10	XELJANZ 5MG TAB	2	XPOVIO TAB 40MG	37
<i>powder inhaler</i>		XELJANZ XR 11MG TAB	2	TWICE WEEKLY	
WYOST 120MG/1.7ML	57	XELJANZ XR 22MG TAB	2	CARTON (8)	
INJ		XERMELO 250MG TAB	21	XPOVIO TAB 60MG	37
X		XIFAXAN 550MG TAB	29	ONCE WEEKLY CARTON	
XALKORI 150MG ORAL	36	XIGDUO XR 10-1000MG	19	(4)	
PELLET		TAB		XPOVIO TAB 60MG	37
XALKORI 200MG CAP	36	XIGDUO XR 10-500MG	19	TWICE WEEKLY	
XALKORI 20MG ORAL	36	TAB		CARTON (24)	
PELLET		XIGDUO XR	19	XPOVIO TAB 80MG	37
XALKORI 250MG CAP	37	2.5-1000MG TAB		ONCE WEEKLY CARTON	
XALKORI 50MG ORAL	37	XIGDUO XR 5-1000MG	19	(8)	
PELLET		TAB		XPOVIO TAB 80MG	37
XARELTO 10MG TAB	11	XIGDUO XR 5-500MG	19	TWICE WEEKLY	
XARELTO 15MG TAB	11	TAB		CARTON (32)	
XARELTO 1MG/ML	11	XIIDRA 5% OPTH	72	XTANDI 40MG CAP	32
ORAL SUSP		SOLN		XTANDI 40MG TAB	32
XARELTO 2.5MG TAB	11	XOFLUZA 40MG TAB	46	XTANDI 80MG TAB	32
XARELTO 20MG TAB	11	XOFLUZA 80MG TAB	46	<i>xulane 150-35mcg/24hr</i>	62
XARELTO TAB STARTER	11	XOLAIR 150MG INJ	8	<i>patch</i>	
PACK (51)		XOLAIR 150MG/ML	8	Y	
XATMEP 2.5MG/ML	31	AUTO-INJECTOR		YESINTEK 90MG/ML	54
ORAL SOLN		XOLAIR 150MG/ML	8	SYRINGE	
XCOPRI 100MG TAB	15	SYRINGE		YF-VAX INJ	83
XCOPRI 150MG TAB	15	XOLAIR 300MG/2ML	8	Z	
XCOPRI 200MG TAB	15	AUTO-INJECTOR		<i>zafemy 150-35mcg/24hr</i>	62
XCOPRI 25MG TAB	15	XOLAIR 300MG/2ML	8	<i>patch</i>	
XCOPRI 50MG TAB	15	SYRINGE		<i>zafirlukast 10mg tab</i>	9
XCOPRI TAB 100/150MG	15	XOLAIR 75MG/0.5ML	9	<i>zafirlukast 20mg tab</i>	9
MAINTENANCE PACK		AUTO-INJECTOR		<i>zaleplon 10mg cap</i>	65
(56)		XOLAIR 75MG/0.5ML	9	<i>zaleplon 5mg cap</i>	65
XCOPRI TAB 12.5/25MG	15	SYRINGE		ZAVZPRET 10MG/ACT	66
TITRATION PACK (28)		XOPENEX 45MCG	10	NASAL SPRAY	
XCOPRI TAB 150/200MG	15	INHALER		ZEJULA 100MG TAB	37
PACK (56)		XOSPATA 40MG TAB	37	ZEJULA 200MG TAB	37
XCOPRI TAB 150/200MG	15	XPOVIO TAB 100MG	37	ZEJULA 300MG TAB	37
TITRATION PACK (28)		ONCE WEEKLY CARTON		ZELBORAF 240MG TAB	37
XCOPRI TAB 50/100MG	15	(8)		ZEMAIRA 1000MG INJ	77
TITRATION PACK (28)		XPOVIO TAB 40MG	37	<i>zenatane 10mg cap</i>	52
XDEMVEY 0.25% OPTH	72	ONCE WEEKLY CARTON		<i>zenatane 20mg cap</i>	52
SOLN		(16)		<i>zenatane 30mg cap</i>	52
XELJANZ 10MG TAB	2	XPOVIO TAB 40MG	37	<i>zenatane 40mg cap</i>	52
XELJANZ 1MG/ML	2	ONCE WEEKLY CARTON		<i>zidovudine 100mg cap</i>	45
ORAL SOLN		(4)			

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

ALPHABETICAL LISTING OF DRUGS

<i>zidovudine 10mg/ml oral soln</i>	45
<i>zidovudine 300mg tab</i>	45
ZIMHI 5MG/0.5ML SYRINGE	21
<i>ziprasidone 20mg cap</i>	40
<i>ziprasidone 20mg inj</i>	40
<i>ziprasidone 40mg cap</i>	40
<i>ziprasidone 60mg cap</i>	40
<i>ziprasidone 80mg cap</i>	40
ZOLINZA 100MG CAP	37
<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
ZONISADE 100MG/5ML ORAL SUSP	14
<i>zonisamide 100mg cap</i>	14
<i>zonisamide 25mg cap</i>	14
<i>zonisamide 50mg cap</i>	14
<i>zovia 1mg-35mcg tab 28-day pack</i>	62
ZTALMY 50MG/ML ORAL SUSP	14
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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L.A. Care
HEALTH PLAN®

For All of L.A.

This formulary was updated on 8/1/2025. 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.

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)**.