



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

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

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

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

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

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



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

Panimula

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

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Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.
Huling Update: 10/01/2025



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A. Mga Disclaimer

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

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

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

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

- ❖ **请注意：**如果您需要以您的母语提供帮助，请致电 **1-833-522-3767 (TTY: 711)**。另外还提供针对残疾人士的帮助和服务，例如盲文和需要较大字体阅读，也是方便取用的。请致电 **1-833-522-3767 (TTY: 711)**。这些服务都是免费的。
- ❖ **ਧਿਆਨ ਦਿਓ:** ਜੇ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਮਦਦ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਾਲ ਕਰੋ **1-833-522-3767 (TTY: 711)**. ਅਪਾਹਜ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਿਵੇਂ ਕਿ 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 नः शुल्क हैं।
- ❖ **CEEB TOOM:** Yog koj xav tau kev pab txhais koj hom lus hu rau **1-833-522-3767 (TTY: 711)**. Muaj cov kev pab txhawb thiab kev pab cuam rau cov neeg xiam oob qhab, xws li puav leej muaj ua cov ntawv su thiab luam tawm ua tus ntawv loj. Hu rau **1-833-522-3767 (TTY: 711)**. Cov kev pab cuam no yog pab dawb xwb.

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

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

❖ ចំណាំ៖ បើអ្នក ត្រូវ ការជំនួយ ជាភាសា របស់អ្នក ស្នូម ទូរសព្ទទៅលេខ **1-833-522-3767** (TTY: **711**)។ ជំនួយ នឹង សេវាកម្ម សម្រាប់ ជនពិការ ដូចជាឯកសារសរសេរជា អក្សរផុស សម្រាប់ជនពិការភ្នែក ឬឯកសារសរសេរជា អក្សរពុម្ព ក៏អាចរកបានផងដែរ។ ទូរសព្ទមកលេខ **1-833-522-3767** (TTY: **711**)។ សេវាកម្មទាំងនេះមិន គិតថ្លៃឡើយ។

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

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

❖ **โปรดทราบ:** หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ กรุณาโทรศัพท์ไปที่หมายเลข **1-833-522-3767** (TTY: **711**) นอกจากนี้ ยังพร้อมให้ความช่วยเหลือและบริการต่าง ๆ สำหรับบุคคลที่มีความพิการ เช่น เอกสารต่าง ๆ ที่เป็นอักษรเบรลล์และเอกสารที่พิมพ์ด้วยตัวอักษรขนาดใหญ่ กรุณาโทรศัพท์ไปที่หมายเลข **1-833-522-3767** (TTY: **711**) ไม่มีค่าใช้จ่ายสำหรับบริการเหล่านี้

❖ **УВАГА! Якщо вам потрібна допомога вашою рідною мовою, телефонуйте на номер 1-833-522-3767 (TTY: 711).** Люди з обмеженими можливостями також можуть скористатися допоміжними засобами та послугами, наприклад, отримати документи, надруковані шрифтом Брайля та великим шрифтом. Телефонуйте на номер **1-833-522-3767 (TTY: 711)**. Ці послуги безкоштовні.

❖ **CHÚ Ý:** Nếu quý vị cần trợ giúp bằng ngôn ngữ của mình, vui lòng gọi số **1-833-522-3767 (TTY: 711)**. Chúng tôi cũng hỗ trợ và cung cấp các dịch vụ dành cho người khuyết tật, như tài liệu bằng chữ nổi Braille và chữ khổ lớn (chữ hoa). Vui lòng gọi số **1-833-522-3767 (TTY: 711)**. Các dịch vụ này đều miễn phí.

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

B. Mga Madalas Itanong (FAQ)

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

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

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

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

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

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



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

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

B2. Nagbabago ba ang *Listahan ng Gamot*?

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

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

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

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

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

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

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

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

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



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

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

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

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

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

Kung mayroon kang mga katanungan, mangyaring tumawag sa L.A. Care Medicare Plus sa 1-833-522-3767 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo, kasama ang mga holiday. Libre ang tawag. **Para sa karagdagang impormasyon**, bisitahin ang medicare.lacare.org.
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- Tinatanggal namin ang isang branded na gamot mula sa *Listahan ng Gamot* kapag nagdaragdag ng isang generic na gamot na hindi bago sa pamilihan, o
- tinatanggal namin ang isang orihinal na biyolohikal na produkto kapag nagdaragdag ng isang biosimilar, o
- binabago namin ang mga panuntunan o limitasyon sa saklaw para sa branded na gamot.

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

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

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

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

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

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

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

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



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

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

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

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

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

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

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

May dalawang paraan ng paghahanap ng gamot:

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

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

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

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

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

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

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

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

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

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

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

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

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

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



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

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

Mga Pagbabago sa Antas ng Pangangalaga

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

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

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

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

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

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

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

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



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

B11. Paano ako hihiling ng pagbubukod?

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

B12. Gaano katagal bago makakuha ng pagbubukod?

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

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

B13. Ano ang mga generic na gamot?

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

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

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



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

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

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

B15. Ano ang mga OTC na gamot?

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

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

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

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

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

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

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

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

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



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

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

B19. Ano ang aking copay?

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

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

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

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

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

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



MGA PAGPAPAIKLI SA MGA TALA NG SAKLAW

Mga Paghihigpit sa Pamamahala ng Mga Utility

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

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



Iba Pang Espesyal na Kinakailangan para sa Saklaw

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

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

Huling Update: 10/01/2025

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

Mga Apela sa Ilalim ng Part D

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

C1. Listahan ng Mga Gamot ayon sa Medikal na Kundisyon

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

D. Index ng Mga Saklaw na Gamot

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<i>amphetamine/dextroamphetamine 10mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 10mg tab</i>	1	
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	1	
<i>amphetamine/dextroamphetamine 15mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 15mg tab</i>	1	
<i>amphetamine/dextroamphetamine 20mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 20mg tab</i>	1	
<i>amphetamine/dextroamphetamine 25mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 30mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 30mg tab</i>	1	
<i>amphetamine/dextroamphetamine 5mg er cap</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	

You can find information 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 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	
<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	
GENTAMICIN 1.2MG/ML INJ	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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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	

You can find information 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>diclofenac sodium 75mg dr tab</i>	1	
<i>diflunisal 500mg tab</i>	1	
<i>etodolac 200mg cap</i>	1	
<i>etodolac 300mg cap</i>	1	
<i>etodolac 400mg tab</i>	1	
<i>etodolac 500mg tab</i>	1	
<i>ibu 600mg tab</i>	1	
<i>ibu 800mg tab</i>	1	
<i>ibuprofen 400mg tab</i>	1	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>morphine sulfate 100mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg tab</i>	1	QL=180 EA/30 Days
<i>morphine sulfate 200mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 ML/30 Days
MORPHINE SULFATE 2MG/ML ORAL SOLN	1	QL=1800 ML/30 Days
<i>morphine sulfate 30mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 30mg tab</i>	1	QL=180 EA/30 Days
MORPHINE SULFATE 4MG/ML ORAL SOLN	1	QL=900 ML/30 Days
<i>morphine sulfate 60mg er tab</i>	1	QL=120 EA/30 Days
<i>oxycodone 10mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 15mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 1mg/ml oral soln</i>	1	QL=5400 ML/30 Days
<i>oxycodone 20mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 4-1mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	1	QL=90 EA/30 Days
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol 100mg cap</i>	1	
<i>danazol 200mg cap</i>	1	
<i>danazol 50mg cap</i>	1	
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>isosorbide mononitrate 120mg er tab</i>	1	
ISOSORBIDE MONONITRATE 20MG TAB	1	
<i>isosorbide mononitrate 30mg er tab</i>	1	
<i>isosorbide mononitrate 60mg er tab</i>	1	
NITRO-BID 2% OINTMENT	1	
<i>nitroglycerin 0.1mg/hr patch</i>	1	
<i>nitroglycerin 0.2mg/hr patch</i>	1	
<i>nitroglycerin 0.3mg sl tab</i>	1	
<i>nitroglycerin 0.4mg sl tab</i>	1	
<i>nitroglycerin 0.4mg/hr patch</i>	1	
<i>nitroglycerin 0.6mg sl tab</i>	1	
<i>nitroglycerin 0.6mg/hr patch</i>	1	
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
<i>buspirone 10mg tab</i>	1	
<i>buspirone 15mg tab</i>	1	
<i>buspirone 30mg tab</i>	1	
<i>buspirone 5mg tab</i>	1	
<i>buspirone 7.5mg tab</i>	1	
<i>hydroxyzine 10mg tab</i>	1	
<i>hydroxyzine 25mg tab</i>	1	
<i>hydroxyzine 50mg tab</i>	1	
HYDROXYZINE PAMOATE 100MG CAP	1	
<i>hydroxyzine pamoate 25mg cap</i>	1	
<i>hydroxyzine pamoate 50mg cap</i>	1	
BENZODIAZEPINES		
<i>alprazolam 0.25mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 0.5mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 1mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 2mg tab</i>	1	QL=150 EA/30 Days
<i>chlordiazepoxide 10mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 25mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 5mg cap</i>	1	QL=120 EA/30 Days
<i>clorazepate dipotassium 15mg tab</i>	1	QL=180 EA/30 Days
<i>clorazepate dipotassium 3.75mg tab</i>	1	QL=180 EA/30 Days
<i>clorazepate dipotassium 7.5mg tab</i>	1	QL=180 EA/30 Days
<i>diazepam 10mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 1mg/ml oral soln</i>	1	QL=1200 ML/30 Days
<i>diazepam 2mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg/ml oral soln</i>	1	QL=240 ML/30 Days
<i>lorazepam 0.5mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 1mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg/ml oral soln</i>	1	QL=150 ML/30 Days

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

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XOLAIR 150MG/ML AUTO-INJECTOR	1	NDS PA QL=2 ML/28 Days
XOLAIR 150MG/ML SYRINGE	1	NDS PA QL=2 ML/28 Days
XOLAIR 300MG/2ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
XOLAIR 300MG/2ML SYRINGE	1	NDS PA QL=8 ML/28 Days
XOLAIR 75MG/0.5ML AUTO-INJECTOR	1	NDS PA QL=1 ML/28 Days
XOLAIR 75MG/0.5ML SYRINGE	1	NDS PA QL=1 ML/28 Days
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG HFA INHALER	1	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH POWDER INHALER	1	QL=30 EA/30 Days
<i>ipratropium bromide 0.02% inh soln</i>	1	PA_BvD
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

You can find information 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 1.25mg/3ml neb soln</i>	1	PA_BvD
<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i>	1	QL=13.40 GM/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	1	QL=17 GM/30 Days
<i>albuterol 2mg tab</i>	1	
<i>albuterol 4mg tab</i>	1	
<i>albuterol 5mg/ml (0.05%) inh soln</i>	1	PA_BvD
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>breyana 160-4.5mcg/act inhaler</i>	1	QL=10.30 GM/30 Days
<i>breyana 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTICOAGULANTS		
ANTICOAGULANTS - MISC.		
ELIQUIS 2.5MG TAB	1	QL=60 EA/30 Days
ELIQUIS 5MG 30-DAY STARTER PACK (74)	1	QL=74 EA/30 Days
ELIQUIS 5MG TAB	1	QL=74 EA/30 Days
<i>rivaroxaban 2.5mg tab</i>	1	QL=60 EA/30 Days
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>heparin sodium porcine 20000unit/ml inj</i>	1	
<i>heparin sodium porcine 5000unit/ml inj</i>	1	
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	1	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml oral susp</i>	1	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	1	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	1	QL=90 EA/30 Days
<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	

You can find information 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>carbamazepine 400mg er tab</i>	1	
DIACOMIT 250MG CAP	1	NDS PA_NSO QL=360 EA/30 Days
DIACOMIT 250MG POWDER FOR ORAL SUSP	1	NDS PA_NSO QL=360 EA/30 Days
DIACOMIT 500MG CAP	1	NDS PA_NSO QL=180 EA/30 Days
DIACOMIT 500MG POWDER FOR ORAL SUSP	1	NDS PA_NSO QL=180 EA/30 Days
EPIDIOLEX 100MG/ML ORAL SOLN	1	NDS PA_NSO QL=600 ML/30 Days
<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

You can find information 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>perampanel 4mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>perampanel 6mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>perampanel 8mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>phenobarbital 100mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 15mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 16.2mg tab</i>	1	QL=120 EA/30 Days
<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 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
<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	

You can find information 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>zonisamide 50mg cap</i>	1	
ZTALMY 50MG/ML ORAL SUSP	1	NDS PA_NSO QL=1100 ML/30 Days
CARBAMATES		
<i>felbamate 120mg/ml oral susp</i>	1	
<i>felbamate 400mg tab</i>	1	
<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	

You can find information 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 (12 hr) tab</i>	1	
<i>bupropion 200mg sr (12hr) tab</i>	1	
<i>bupropion 75mg tab</i>	1	
<i>bupropion xl 150mg (24 hr) tab</i>	1	
<i>bupropion xl 300mg (24hr) tab</i>	1	
<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

You can find information 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>paroxetine 37.5mg er tab</i>	1	PA_NSO
<i>paroxetine 40mg tab</i>	1	PA_NSO
<i>sertraline 100mg tab</i>	1	
<i>sertraline 20mg/ml oral soln</i>	1	QL=300 ML/30 Days
<i>sertraline 25mg tab</i>	1	
<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	

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

You can find information 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>glipizide/metformin 5-500mg tab</i>	1	
GLYXAMBI 10-5MG TAB	1	QL=30 EA/30 Days
GLYXAMBI 25-5MG TAB	1	QL=30 EA/30 Days
JANUMET 50-1000MG TAB	1	QL=60 EA/30 Days
JANUMET 50-500MG TAB	1	QL=60 EA/30 Days
JANUMET XR 100-1000MG TAB	1	QL=30 EA/30 Days
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

You can find information 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>nateglinide 120mg tab</i>	1	
<i>nateglinide 60mg tab</i>	1	
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<i>pioglitazone 45mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	1	
<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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HUMULIN R 500UNIT/ML PEN INJ	1	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	1	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	1	INS
INSULIN LISPRO 100UNIT/ML INJ	1	INS PA_BvD
LANTUS 100UNIT/ML INJ	1	INS
LANTUS 100UNIT/ML PEN INJ	1	INS
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	
<i>naloxone 0.4mg/ml syringe</i>	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

You can find information 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 0.8mg/ml oral soln</i>	1	PA_BvD
<i>ondansetron 4mg odt</i>	1	PA_BvD
<i>ondansetron 4mg tab</i>	1	PA_BvD
<i>ondansetron 8mg odt</i>	1	PA_BvD
<i>ondansetron 8mg tab</i>	1	PA_BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab</i>	1	
<i>meclizine 25mg tab</i>	1	
<i>scopolamine 1mg/72hr patch</i>	1	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	

You can find information 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>posaconazole 100mg dr tab</i>	1	PA QL=96 EA/30 Days
<i>posaconazole 40mg/ml oral susp</i>	1	PA QL=630 ML/30 Days
<i>voriconazole 200mg inj</i>	1	PA
<i>voriconazole 200mg tab</i>	1	PA QL=120 EA/30 Days
<i>voriconazole 40mg/ml oral susp</i>	1	PA QL=400 ML/30 Days
<i>voriconazole 50mg tab</i>	1	PA QL=480 EA/30 Days
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	

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

You can find information 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>moexipril 7.5mg tab</i>	1	
PERINDOPRIL ERBUMINE 2MG TAB	1	
<i>perindopril erbumine 4mg tab</i>	1	
PERINDOPRIL ERBUMINE 8MG TAB	1	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<i>quinapril 40mg tab</i>	1	
<i>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	1	
<i>ramipril 10mg cap</i>	1	
<i>ramipril 2.5mg cap</i>	1	
<i>ramipril 5mg cap</i>	1	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
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	

You can find information 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>doxazosin 4mg tab</i>	1	
<i>doxazosin 8mg tab</i>	1	
<i>prazosin 1mg cap</i>	1	
<i>prazosin 2mg cap</i>	1	
<i>prazosin 5mg cap</i>	1	
<i>terazosin 10mg cap</i>	1	
<i>terazosin 1mg cap</i>	1	
<i>terazosin 2mg cap</i>	1	
<i>terazosin 5mg cap</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<i>amlodipine/benazepril 5-40mg cap</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-12.5-160mg tab</i>	1	
<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	

You can find information 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>atenolol/chlorthalidone 50-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	1	
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	1	
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	1	
<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	

You can find information 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>eplerenone 50mg tab</i>	1	
<i>metirosine 250mg cap</i>	1	NDS PA
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	

You can find information 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 500mg tab</i>	1	
<i>erythromycin ethylsuccinate 40mg/ml oral susp</i>	1	
<i>erythromycin ethylsuccinate 80mg/ml oral susp</i>	1	
<i>linezolid 100mg/5ml oral susp</i>	1	PA QL=1800 ML/30 Days
<i>linezolid 600mg tab</i>	1	QL=60 EA/30 Days
<i>linezolid 600mg/300ml inj</i>	1	PA
<i>metronidazole 250mg tab</i>	1	
<i>metronidazole 500mg tab</i>	1	
<i>metronidazole 5mg/ml inj</i>	1	
<i>pentamidine isethionate 300mg inj</i>	1	
<i>pentamidine isethionate 300mg/6ml inh soln</i>	1	PA_BvD QL=1 EA/28 Days
TEFLARO 400MG INJ	1	NDS
TEFLARO 600MG INJ	1	NDS
<i>tigecycline 50mg inj</i>	1	NDS
<i>tinidazole 250mg tab</i>	1	
<i>tinidazole 500mg tab</i>	1	
<i>trimethoprim 100mg tab</i>	1	
<i>vancomycin 100mg/ml inj</i>	1	
<i>vancomycin 125mg cap</i>	1	ST QL=120 EA/30 Days
<i>vancomycin 1gm inj</i>	1	
<i>vancomycin 250mg cap</i>	1	ST QL=120 EA/30 Days
<i>vancomycin 500mg inj</i>	1	
<i>vancomycin 750mg inj</i>	1	
XIFAXAN 550MG TAB	1	PA QL=60 EA/30 Days
ANTIPROTOZOAL AGENTS		
<i>atovaquone 750mg/5ml oral susp</i>	1	
<i>nitazoxanide 500mg tab</i>	1	PA QL=6 EA/3 Days
CARBAPENEMS		
CILASTATIN/IMIPENEM 250-250MG INJ	1	
<i>cilastatin/imipenem 500-500mg inj</i>	1	
<i>ertapenem 1gm inj</i>	1	
<i>meropenem 1gm inj</i>	1	
<i>meropenem 500mg inj</i>	1	
URINARY ANTI-INFECTIVES		
<i>methenamine hippurate 1gm tab</i>	1	
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	1	
<i>nitrofurantoin macrocrystals 100mg cap</i>	1	
<i>nitrofurantoin macrocrystals 50mg cap</i>	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone/proguanil 250-100mg tab</i>	1	
<i>atovaquone/proguanil 62.5-25mg tab</i>	1	
COARTEM 20-120MG TAB	1	
ANTIMALARIALS		
CHLOROQUINE PHOSPHATE 250MG TAB	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>chloroquine phosphate 500mg tab</i>	1	
<i>hydroxychloroquine sulfate 100mg tab</i>	1	
<i>hydroxychloroquine sulfate 200mg tab</i>	1	
<i>hydroxychloroquine sulfate 300mg tab</i>	1	
<i>hydroxychloroquine sulfate 400mg tab</i>	1	
<i>mefloquine 250mg tab</i>	1	
PRIMAQUINE PHOSPHATE 26.3MG TAB	1	
<i>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
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE 25MG TAB	1	PA_BvD
CYCLOPHOSPHAMIDE 50MG TAB	1	PA_BvD
GLEOSTINE 100MG CAP	1	
GLEOSTINE 10MG CAP	1	
GLEOSTINE 40MG CAP	1	
LEUKERAN 2MG TAB	1	NDS
ANTIMETABOLITES		
JYLAMVO 2MG/ML ORAL SOLN	1	PA_NSO
<i>mercaptopurine 20mg/ml susp</i>	1	PA_NSO QL=300 ML/30 Days
<i>mercaptopurine 50mg tab</i>	1	
<i>methotrexate 2.5mg tab</i>	1	
METHOTREXATE 25MG/ML INJ	1	
<i>methotrexate 50mg/2ml inj</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ONUREG 200MG TAB	1	NDS PA_NSO QL=14 EA/28 Days
ONUREG 300MG TAB	1	NDS PA_NSO QL=14 EA/28 Days
PURIXAN 2000MG/100ML ORAL SUSP	1	PA_NSO QL=300 ML/30 Days
TABLOID 40MG TAB	1	NDS
XATMEP 2.5MG/ML ORAL SOLN	1	PA_NSO
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1MG CAP	1	NDS PA_NSO QL=84 EA/28 Days
FRUZAQLA 5MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
INLYTA 1MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
INLYTA 5MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
LENVIMA 10MG DAILY DOSE PACK (30)	1	NDS PA_NSO QL=30 EA/30 Days
LENVIMA 12MG DAILY DOSE PACK (90)	1	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 14MG DAILY DOSE PACK (60)	1	NDS PA_NSO QL=60 EA/30 Days
LENVIMA 18MG DAILY DOSE PACK (90)	1	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 20MG DAILY DOSE PACK (60)	1	NDS PA_NSO QL=60 EA/30 Days
LENVIMA 24MG DAILY DOSE PACK (90)	1	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 4MG DAILY DOSE PACK (30)	1	NDS PA_NSO QL=30 EA/30 Days
LENVIMA 8MG DAILY DOSE PACK (60)	1	NDS PA_NSO QL=60 EA/30 Days
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>erlotinib 150mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>erlotinib 25mg tab</i>	1	PA_NSO QL=90 EA/30 Days
<i>gefitinib 250mg tab</i>	1	PA_NSO QL=60 EA/30 Days
GILOTRIF 20MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
GILOTRIF 30MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
GILOTRIF 40MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
LAZCLUZE 240MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
LAZCLUZE 80MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
TAGRISSE 40MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
TAGRISSE 80MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 15MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 30MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 45MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
DAURISMO 25MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ERIVEDGE 150MG CAP	1	NDS PA_NSO QL=28 EA/28 Days
ODOMZO 200MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	1	QL=120 EA/30 Days
<i>abirtega 250mg tab</i>	1	QL=120 EA/30 Days
AKEEGA 500-100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
AKEEGA 500-50MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
<i>anastrozole 1mg tab</i>	1	
<i>bicalutamide 50mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ELIGARD 22.5MG SYRINGE	1	QL=1 EA/84 Days
ELIGARD 30MG SYRINGE	1	QL=1 EA/112 Days
ELIGARD 45MG SYRINGE	1	QL=1 EA/168 Days
ELIGARD 7.5MG SYRINGE	1	QL=1 EA/28 Days
ERLEADA 240MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ERLEADA 60MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
EULEXIN 125MG CAP	1	NDS QL=180 EA/30 Days
<i>exemestane 25mg tab</i>	1	QL=60 EA/30 Days
FIRMAGON 120MG INJ	1	PA_NSO QL=4 EA/365 Days
FIRMAGON 80MG INJ	1	PA_NSO QL=1 EA/28 Days
<i>letrozole 2.5mg tab</i>	1	
LUPRON 11.25MG SYRINGE (3 MONTH)	1	QL=1 EA/84 Days
LUPRON 3.75MG SYRINGE (1 MONTH)	1	NDS QL=1 EA/28 Days
LYSODREN 500MG TAB	1	
<i>megestrol acetate 20mg tab</i>	1	PA_NSO
<i>megestrol acetate 40mg tab</i>	1	PA_NSO
<i>megestrol acetate 40mg/ml oral susp</i>	1	PA
<i>nilutamide 150mg tab</i>	1	
NUBEQA 300MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
ORGOVYX 120MG TAB	1	NDS PA_NSO QL=30 EA/28 Days
ORSERDU 345MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ORSERDU 86MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
SOLTAMOX 10MG/5ML ORAL SOLN	1	PA_NSO QL=600 ML/30 Days
<i>tamoxifen 10mg tab</i>	1	
<i>tamoxifen 20mg tab</i>	1	
<i>toremifene 60mg tab</i>	1	QL=30 EA/30 Days
TRELSTAR 11.25MG INJ	1	QL=1 EA/84 Days
TRELSTAR 22.5MG INJ	1	QL=1 EA/168 Days
TRELSTAR 3.75MG INJ	1	QL=1 EA/28 Days
XTANDI 40MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
XTANDI 40MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
XTANDI 80MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ANTINEOPLASTIC COMBINATIONS		
AVMAPKI/FAKZYNJA CO-PACK (66)	1	NDS PA_NSO QL=66 EA/28 Days
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
AUGTYRO 160MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
AUGTYRO 40MG CAP	1	NDS PA_NSO QL=240 EA/30 Days
BALVERSA 3MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
BALVERSA 4MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
BALVERSA 5MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
BOSULIF 100MG CAP	1	NDS PA_NSO QL=180 EA/30 Days
BOSULIF 100MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
BOSULIF 400MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
BOSULIF 500MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
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 TAB	1	NDS PA_NSO QL=60 EA/30 Days
CAPRELSA 100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
CAPRELSA 300MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
COMETRIQ CAP 100MG DAILY DOSE PACK (56)	1	NDS PA_NSO QL=56 EA/28 Days
COMETRIQ CAP 140MG DAILY DOSE PACK (112)	1	NDS PA_NSO QL=112 EA/28 Days
COMETRIQ CAP 60MG DAILY DOSE PACK (84)	1	NDS PA_NSO QL=84 EA/28 Days
COPIKTRA 15MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
COPIKTRA 25MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
COTELLIC 20MG TAB	1	NDS PA_NSO QL=63 EA/28 Days
<i>dasatinib 100mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>dasatinib 140mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>dasatinib 20mg tab</i>	1	PA_NSO QL=90 EA/30 Days
<i>dasatinib 50mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>dasatinib 70mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>dasatinib 80mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>everolimus 10mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>everolimus 2.5mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>everolimus 2mg tab for oral susp</i>	1	PA_NSO QL=150 EA/30 Days
<i>everolimus 3mg tab for oral susp</i>	1	PA_NSO QL=90 EA/30 Days
<i>everolimus 5mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>everolimus 5mg tab for oral susp</i>	1	PA_NSO QL=60 EA/30 Days
<i>everolimus 7.5mg tab</i>	1	PA_NSO QL=30 EA/30 Days
FOTIVDA 0.89MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
FOTIVDA 1.34MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
GAVRETO 100MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
GOMEKLI 1MG CAP	1	NDS PA_NSO QL=42 EA/28 Days
GOMEKLI 1MG TAB FOR ORAL SUSP	1	NDS PA_NSO QL=126 EA/28 Days
GOMEKLI 2MG CAP	1	NDS PA_NSO QL=84 EA/28 Days
IBRANCE 100MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 100MG TAB	1	NDS PA_NSO QL=21 EA/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
IBRANCE 125MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 125MG TAB	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 75MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 75MG TAB	1	NDS PA_NSO QL=21 EA/28 Days
IBTROZI 200MG CAP	1	NDS PA_NSO QL=90 EA/30 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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MEKINIST 0.05MG/ML ORAL SOLN	1	NDS PA_NSO QL=1260 ML/30 Days
MEKINIST 0.5MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
MEKINIST 2MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
MEKTOVI 15MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
NERLYNX 40MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
<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 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 PELLET	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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RYDAPT 25MG CAP	1	NDS PA_NSO QL=224 EA/28 Days
SCEMBLIX 100MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
SCEMBLIX 20MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
SCEMBLIX 40MG TAB	1	NDS PA_NSO QL=300 EA/30 Days
<i>sorafenib 200mg tab</i>	1	PA_NSO QL=120 EA/30 Days
STIVARGA 40MG TAB	1	NDS PA_NSO QL=84 EA/28 Days
<i>sunitinib 12.5mg cap</i>	1	PA_NSO QL=28 EA/28 Days
<i>sunitinib 25mg cap</i>	1	PA_NSO QL=28 EA/28 Days
<i>sunitinib 37.5mg cap</i>	1	PA_NSO QL=28 EA/28 Days
<i>sunitinib 50mg cap</i>	1	PA_NSO QL=28 EA/28 Days
TABRECTA 150MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
TABRECTA 200MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
TAFINLAR 10MG TAB FOR ORAL SUSP	1	NDS PA_NSO QL=840 EA/28 Days
TAFINLAR 50MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
TAFINLAR 75MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
TALZENNA 0.1MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
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

You can find information 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 20MG ORAL PELLET	1	NDS PA_NSO QL=120 EA/30 Days
XALKORI 250MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
XALKORI 50MG ORAL PELLET	1	NDS PA_NSO QL=120 EA/30 Days
XOSPATA 40MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
ZEJULA 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ZEJULA 200MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ZEJULA 300MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ZELBORAF 240MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
ZOLINZA 100MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
ZYDELIG 100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ZYDELIG 150MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ZYKADIA 150MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000UNIT/0.5ML INJ	1	NDS PA_NSO
AYVAKIT 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 200MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 25MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 300MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 50MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
BESREMI 500MCG/ML SYRINGE	1	NDS PA_NSO QL=2 ML/28 Days
<i>bexarotene 75mg cap</i>	1	PA_NSO QL=300 EA/30 Days
<i>hydroxyurea 500mg cap</i>	1	
MATULANE 50MG CAP	1	NDS
POMALYST 1MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
POMALYST 2MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
POMALYST 3MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
POMALYST 4MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
REVUFORJ 110MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
REVUFORJ 160MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
REVUFORJ 25MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
<i>tretinoin 10mg cap</i>	1	
TUKYSA 150MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
TUKYSA 50MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
VENCLEXTA 100MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
VENCLEXTA 10MG TAB	1	PA_NSO QL=60 EA/30 Days
VENCLEXTA 50MG TAB	1	PA_NSO QL=30 EA/30 Days
VENCLEXTA TAB STARTER PACK (42)	1	NDS PA_NSO QL=42 EA/28 Days
WELIREG 40MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	1	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 40MG ONCE WEEKLY CARTON (16)	1	NDS PA_NSO QL=16 EA/28 Days
XPOVIO TAB 40MG ONCE WEEKLY CARTON (4)	1	NDS PA_NSO QL=4 EA/28 Days
XPOVIO TAB 40MG TWICE WEEKLY CARTON (8)	1	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 60MG ONCE WEEKLY CARTON (4)	1	NDS PA_NSO QL=4 EA/28 Days
XPOVIO TAB 60MG TWICE WEEKLY CARTON (24)	1	NDS PA_NSO QL=24 EA/28 Days
XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	1	NDS PA_NSO QL=8 EA/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	1	NDS PA_NSO QL=32 EA/28 Days
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
IWILFIN 192MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
<i>leucovorin 10mg tab</i>	1	
<i>leucovorin 15mg tab</i>	1	
<i>leucovorin 25mg tab</i>	1	
<i>leucovorin 5mg tab</i>	1	
<i>mesna 400mg tab</i>	1	
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa 25mg tab</i>	1	
<i>entacapone 200mg tab</i>	1	
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate 0.5mg tab</i>	1	
<i>benztropine mesylate 1mg tab</i>	1	
<i>benztropine mesylate 2mg tab</i>	1	
<i>trihexyphenidyl 2mg tab</i>	1	
<i>trihexyphenidyl 5mg tab</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine 100mg cap</i>	1	
<i>amantadine 10mg/ml oral soln</i>	1	
<i>bromocriptine 2.5mg tab</i>	1	
<i>bromocriptine 5mg cap</i>	1	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	1	
CARBIDOPA/LEVODOPA 10-100MG ODT	1	
<i>carbidopa/levodopa 10-100mg tab</i>	1	
<i>carbidopa/levodopa 25-100mg er tab</i>	1	
CARBIDOPA/LEVODOPA 25-100MG ODT	1	
<i>carbidopa/levodopa 25-100mg tab</i>	1	
CARBIDOPA/LEVODOPA 25-250MG ODT	1	
<i>carbidopa/levodopa 25-250mg tab</i>	1	
<i>carbidopa/levodopa 50-200mg er tab</i>	1	
<i>pramipexole 0.125mg tab</i>	1	
<i>pramipexole 0.25mg tab</i>	1	
<i>pramipexole 0.5mg tab</i>	1	
<i>pramipexole 0.75mg tab</i>	1	
<i>pramipexole 1.5mg tab</i>	1	
<i>pramipexole 1mg tab</i>	1	
<i>ropinirole 0.25mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ropinirole 0.5mg tab</i>	1	
<i>ropinirole 1mg tab</i>	1	
<i>ropinirole 2mg tab</i>	1	
<i>ropinirole 3mg tab</i>	1	
<i>ropinirole 4mg tab</i>	1	
<i>ropinirole 5mg tab</i>	1	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>rasagiline 1mg tab</i>	1	QL=30 EA/30 Days
<i>selegiline 5mg cap</i>	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<i>lithium carbonate 150mg cap</i>	1	
<i>lithium carbonate 300mg cap</i>	1	
<i>lithium carbonate 300mg er tab</i>	1	
<i>lithium carbonate 300mg tab</i>	1	
<i>lithium carbonate 450mg er tab</i>	1	
LITHIUM CARBONATE 600MG CAP	1	
<i>lithium citrate 60mg/ml oral soln</i>	1	
ANTIPSYCHOTICS - MISC.		
CAPLYTA 10.5MG CAP	1	PA_NSO QL=30 EA/30 Days
CAPLYTA 21MG CAP	1	PA_NSO QL=30 EA/30 Days
CAPLYTA 42MG CAP	1	PA_NSO QL=30 EA/30 Days
COBENFY 20-100MG CAP	1	PA_NSO QL=60 EA/30 Days
COBENFY 20-50MG CAP	1	PA_NSO QL=60 EA/30 Days
COBENFY 30-125MG CAP	1	PA_NSO QL=60 EA/30 Days
COBENFY CAP 28-DAY STARTER KIT PACK (56)	1	PA_NSO QL=56 EA/28 Days
<i>haloperidol 0.5mg tab</i>	1	
<i>haloperidol 10mg tab</i>	1	
<i>haloperidol 1mg tab</i>	1	
<i>haloperidol 20mg tab</i>	1	
<i>haloperidol 2mg tab</i>	1	
<i>haloperidol 2mg/ml oral soln</i>	1	
<i>haloperidol 5mg tab</i>	1	
<i>haloperidol 5mg/ml inj</i>	1	
<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	1	
<i>haloperidol decanoate 100mg/ml (5ml) inj</i>	1	
<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	1	
<i>haloperidol decanoate 50mg/ml (5ml) inj</i>	1	
<i>lurasidone 120mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>lurasidone 20mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>lurasidone 40mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>lurasidone 60mg tab</i>	1	ST_NSO QL=30 EA/30 Days
<i>lurasidone 80mg tab</i>	1	ST_NSO QL=60 EA/30 Days
MOLINDONE 10MG TAB	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MOLINDONE 25MG TAB	1	
MOLINDONE 5MG TAB	1	
NUPLAZID 10MG TAB	1	PA_NSO QL=30 EA/30 Days
NUPLAZID 34MG CAP	1	PA_NSO QL=30 EA/30 Days
<i>thiothixene 10mg cap</i>	1	
<i>thiothixene 1mg cap</i>	1	
<i>thiothixene 2mg cap</i>	1	
<i>thiothixene 5mg cap</i>	1	
VRAYLAR 1.5MG CAP	1	PA_NSO QL=30 EA/30 Days
VRAYLAR 3MG CAP	1	PA_NSO QL=30 EA/30 Days
VRAYLAR 4.5MG CAP	1	PA_NSO QL=30 EA/30 Days
VRAYLAR 6MG CAP	1	PA_NSO QL=30 EA/30 Days
<i>ziprasidone 20mg cap</i>	1	
<i>ziprasidone 20mg inj</i>	1	PA_NSO QL=60 EA/30 Days
<i>ziprasidone 40mg cap</i>	1	
<i>ziprasidone 60mg cap</i>	1	
<i>ziprasidone 80mg cap</i>	1	
BENZISOXAZOLES		
FANAPT 10MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 12MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 1MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 2MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 4MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 6MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 8MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT TAB TITRATION PACK (8)	1	PA_NSO QL=60 EA/30 Days
INVEGA HAFYERA 1092MG/3.5ML SYRINGE	1	PA_NSO QL=3.50 ML/180 Days
INVEGA HAFYERA 1560MG/5ML SYRINGE	1	PA_NSO QL=5 ML/180 Days
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	1	PA_NSO QL=.75 ML/28 Days
INVEGA SUSTENNA 156MG/ML SYRINGE	1	PA_NSO QL=1 ML/28 Days
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	1	PA_NSO QL=1.50 ML/28 Days
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	1	PA_NSO QL=.25 ML/28 Days
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	1	PA_NSO QL=.50 ML/28 Days
INVEGA TRINZA 273MG/0.875ML SYRINGE	1	PA_NSO QL=.88 ML/84 Days
INVEGA TRINZA 410MG/1.315ML SYRINGE	1	PA_NSO QL=1.32 ML/84 Days
INVEGA TRINZA 546MG/1.75ML SYRINGE	1	PA_NSO QL=1.75 ML/84 Days
INVEGA TRINZA 819MG/2.625ML SYRINGE	1	PA_NSO QL=2.63 ML/84 Days
<i>paliperidone 1.5mg er tab</i>	1	QL=30 EA/30 Days
<i>paliperidone 3mg er tab</i>	1	QL=30 EA/30 Days
<i>paliperidone 6mg er tab</i>	1	QL=60 EA/30 Days
<i>paliperidone 9mg er tab</i>	1	QL=30 EA/30 Days
PERSERIS 120MG SYRINGE	1	NDS PA_NSO QL=1 EA/28 Days
PERSERIS 90MG SYRINGE	1	NDS PA_NSO QL=1 EA/28 Days
RISPERIDONE 0.25MG ODT	1	QL=60 EA/30 Days
<i>risperidone 0.25mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>risperidone 0.5mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 0.5mg tab</i>	1	
<i>risperidone 1mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 1mg tab</i>	1	
<i>risperidone 1mg/ml oral soln</i>	1	QL=240 ML/30 Days
<i>risperidone 2mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 2mg tab</i>	1	
<i>risperidone 37.5mg inj</i>	1	PA _NSO QL=2 EA/28 Days
<i>risperidone 3mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 3mg tab</i>	1	
<i>risperidone 4mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 4mg tab</i>	1	
<i>risperidone 50mg inj</i>	1	PA _NSO QL=2 EA/28 Days
<i>risperidone microspheres 12.5mg inj</i>	1	PA _NSO QL=2 EA/28 Days
<i>risperidone microspheres 25mg inj</i>	1	PA _NSO QL=2 EA/28 Days
UZEDY 100MG/0.28ML SYRINGE	1	QL=.28 ML/30 Days
UZEDY 125MG/0.35ML SYRINGE	1	NDS QL=.35 ML/30 Days
UZEDY 150MG/0.42ML SYRINGE	1	QL=.42 ML/60 Days
UZEDY 200MG/0.56ML SYRINGE	1	QL=.56 ML/60 Days
UZEDY 250MG/0.7ML SYRINGE	1	QL=.70 ML/60 Days
UZEDY 50MG/0.14ML SYRINGE	1	NDS QL=.14 ML/30 Days
UZEDY 75MG/0.21ML SYRINGE	1	NDS QL=.21 ML/30 Days
DIBENZAPINES		
<i>asenapine 10mg sl tab</i>	1	QL=60 EA/30 Days
<i>asenapine 2.5mg sl tab</i>	1	QL=60 EA/30 Days
<i>asenapine 5mg sl tab</i>	1	QL=60 EA/30 Days
<i>clozapine 100mg odt</i>	1	QL=270 EA/30 Days
<i>clozapine 100mg tab</i>	1	
CLOZAPINE 12.5MG ODT	1	QL=90 EA/30 Days
<i>clozapine 150mg odt</i>	1	QL=180 EA/30 Days
<i>clozapine 200mg odt</i>	1	QL=120 EA/30 Days
<i>clozapine 200mg tab</i>	1	
<i>clozapine 25mg odt</i>	1	QL=270 EA/30 Days
<i>clozapine 25mg tab</i>	1	
<i>clozapine 50mg tab</i>	1	
<i>loxapine 10mg cap</i>	1	
<i>loxapine 25mg cap</i>	1	
<i>loxapine 50mg cap</i>	1	
<i>loxapine 5mg cap</i>	1	
<i>olanzapine 10mg inj</i>	1	QL=90 EA/30 Days
<i>olanzapine 10mg odt</i>	1	QL=60 EA/30 Days
<i>olanzapine 10mg tab</i>	1	
<i>olanzapine 15mg odt</i>	1	QL=30 EA/30 Days
<i>olanzapine 15mg tab</i>	1	
<i>olanzapine 2.5mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>olanzapine 20mg odt</i>	1	QL=30 EA/30 Days
<i>olanzapine 20mg tab</i>	1	
<i>olanzapine 5mg odt</i>	1	QL=30 EA/30 Days
<i>olanzapine 5mg tab</i>	1	
<i>olanzapine 7.5mg tab</i>	1	
<i>quetiapine 100mg tab</i>	1	
<i>quetiapine 150mg er tab</i>	1	QL=30 EA/30 Days
<i>quetiapine 200mg er tab</i>	1	QL=30 EA/30 Days
<i>quetiapine 200mg tab</i>	1	
<i>quetiapine 25mg tab</i>	1	
<i>quetiapine 300mg er tab</i>	1	QL=60 EA/30 Days
<i>quetiapine 300mg tab</i>	1	
<i>quetiapine 400mg er tab</i>	1	QL=60 EA/30 Days
<i>quetiapine 400mg tab</i>	1	
<i>quetiapine 50mg er tab</i>	1	QL=60 EA/30 Days
<i>quetiapine 50mg tab</i>	1	
SECUADO 3.8MG/24HR PATCH	1	PA_NSO QL=30 EA/30 Days
SECUADO 5.7MG/24HR PATCH	1	PA_NSO QL=30 EA/30 Days
SECUADO 7.6MG/24HR PATCH	1	PA_NSO QL=30 EA/30 Days
VERSACLOZ 50MG/ML ORAL SUSP	1	PA_NSO QL=600 ML/30 Days
PHENOTHIAZINES		
<i>chlorpromazine 100mg tab</i>	1	
CHLORPROMAZINE 100MG/ML ORAL SOLN	1	
<i>chlorpromazine 10mg tab</i>	1	
<i>chlorpromazine 200mg tab</i>	1	
<i>chlorpromazine 25mg tab</i>	1	
CHLORPROMAZINE 30MG/ML ORAL SOLN	1	
<i>chlorpromazine 50mg tab</i>	1	
<i>compro 25mg rectal supp</i>	1	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	1	
<i>fluphenazine 10mg tab</i>	1	
<i>fluphenazine 1mg tab</i>	1	
<i>fluphenazine 2.5mg tab</i>	1	
FLUPHENAZINE 2.5MG/ML INJ	1	
<i>fluphenazine 5mg tab</i>	1	
FLUPHENAZINE 5MG/ML ORAL SOLN	1	
<i>fluphenazine decanoate 25mg/ml inj</i>	1	
<i>perphenazine 16mg tab</i>	1	
<i>perphenazine 2mg tab</i>	1	
<i>perphenazine 4mg tab</i>	1	
<i>perphenazine 8mg tab</i>	1	
<i>prochlorperazine 10mg tab</i>	1	
<i>prochlorperazine 25mg rectal supp</i>	1	
<i>prochlorperazine 5mg tab</i>	1	
<i>thioridazine 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>thioridazine 10mg tab</i>	1	
<i>thioridazine 25mg tab</i>	1	
<i>thioridazine 50mg tab</i>	1	
<i>trifluoperazine 10mg tab</i>	1	
<i>trifluoperazine 1mg tab</i>	1	
<i>trifluoperazine 2mg tab</i>	1	
<i>trifluoperazine 5mg tab</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	1	QL=2.40 ML/56 Days
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	1	QL=3.20 ML/56 Days
ABILIFY MAINTENA 300MG INJ	1	NDS PA_NSO QL=1 EA/28 Days
ABILIFY MAINTENA 300MG SYRINGE	1	NDS PA_NSO QL=1 EA/28 Days
ABILIFY MAINTENA 400MG INJ	1	NDS PA_NSO QL=1 EA/28 Days
ABILIFY MAINTENA 400MG SYRINGE	1	NDS PA_NSO QL=1 EA/28 Days
<i>aripiprazole 10mg odt</i>	1	PA_NSO QL=60 EA/30 Days
<i>aripiprazole 10mg tab</i>	1	
<i>aripiprazole 15mg odt</i>	1	PA_NSO QL=60 EA/30 Days
<i>aripiprazole 15mg tab</i>	1	
<i>aripiprazole 1mg/ml oral soln</i>	1	PA_NSO QL=900 ML/30 Days
<i>aripiprazole 20mg tab</i>	1	
<i>aripiprazole 2mg tab</i>	1	
<i>aripiprazole 30mg tab</i>	1	
<i>aripiprazole 5mg tab</i>	1	
ARISTADA 1064MG/3.9ML SYRINGE	1	PA_NSO QL=3.90 ML/56 Days
ARISTADA 441MG/1.6ML SYRINGE	1	NDS PA_NSO QL=1.60 ML/28 Days
ARISTADA 662MG/2.4ML SYRINGE	1	NDS PA_NSO QL=2.40 ML/28 Days
ARISTADA 675MG/2.4ML SYRINGE	1	PA_NSO QL=2.40 ML/42 Days
ARISTADA 882MG/3.2ML SYRINGE	1	PA_NSO QL=3.20 ML/28 Days
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

You can find information 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>atazanavir 300mg cap</i>	1	QL=30 EA/30 Days
BIKTARVY 30-120-15MG TAB	1	QL=30 EA/30 Days
BIKTARVY 50-200-25MG TAB	1	QL=30 EA/30 Days
CIMDUO 300-300MG TAB	1	QL=30 EA/30 Days
<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 2.5MG TAB FOR ORAL SUSP	1	QL=180 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

You can find information 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 150mg tab</i>	1	QL=60 EA/30 Days
<i>lamivudine 300mg tab</i>	1	QL=30 EA/30 Days
<i>lamivudine/zidovudine 150-300mg tab</i>	1	QL=60 EA/30 Days
<i>lopinavir/ritonavir 100-25mg tab</i>	1	QL=300 EA/30 Days
<i>lopinavir/ritonavir 200-50mg tab</i>	1	QL=120 EA/30 Days
<i>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 PELLET	1	NDS PA QL=120 EA/30 Days
PREVYMIS 240MG 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
PREVYMIS 480MG TAB	1	NDS PA QL=30 EA/30 Days
<i>valganciclovir 450mg tab</i>	1	
<i>valganciclovir 50mg/ml oral soln</i>	1	
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	1	QL=30 EA/30 Days
<i>entecavir 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>entecavir 1mg tab</i>	1	QL=30 EA/30 Days
<i>lamivudine 100mg tab</i>	1	QL=90 EA/30 Days
MAVYRET 100-40MG TAB	1	NDS PA QL=90 EA/30 Days
MAVYRET 50-20MG ORAL 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	

You can find information 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>carvedilol 25mg tab</i>	1	
<i>carvedilol 3.125mg tab</i>	1	
<i>carvedilol 6.25mg tab</i>	1	
<i>labetalol 100mg tab</i>	1	
<i>labetalol 200mg tab</i>	1	
<i>labetalol 300mg tab</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	1	
<i>acebutolol 400mg cap</i>	1	
<i>atenolol 100mg tab</i>	1	
<i>atenolol 25mg tab</i>	1	
<i>atenolol 50mg tab</i>	1	
<i>betaxolol 10mg tab</i>	1	
<i>betaxolol 20mg tab</i>	1	
<i>bisoprolol fumarate 10mg tab</i>	1	
<i>bisoprolol fumarate 5mg tab</i>	1	
<i>metoprolol succinate 100mg er tab</i>	1	
<i>metoprolol succinate 200mg er tab</i>	1	
<i>metoprolol succinate 25mg er tab</i>	1	
<i>metoprolol succinate 50mg er tab</i>	1	
<i>metoprolol tartrate 100mg tab</i>	1	
<i>metoprolol tartrate 25mg tab</i>	1	
<i>metoprolol tartrate 37.5mg tab</i>	1	
<i>metoprolol tartrate 50mg tab</i>	1	
<i>metoprolol tartrate 75mg tab</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	1	
<i>nadolol 40mg tab</i>	1	
<i>nadolol 80mg tab</i>	1	
<i>pindolol 10mg tab</i>	1	
<i>pindolol 5mg tab</i>	1	
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	1	
<i>propranolol 160mg er cap</i>	1	
<i>propranolol 20mg tab</i>	1	
<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	

You can find information 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>sotalol 80mg tab</i>	1	
<i>sotalol af 120mg tab</i>	1	
<i>sotalol af 160mg tab</i>	1	
<i>sotalol af 80mg tab</i>	1	
<i>timolol 10mg tab</i>	1	
<i>timolol 5mg tab</i>	1	
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine 10mg tab</i>	1	
<i>amlodipine 2.5mg tab</i>	1	
<i>amlodipine 5mg tab</i>	1	
<i>cartia 120mg er (24hr) cap</i>	1	
<i>cartia 180mg er (24hr) cap</i>	1	
<i>cartia 240mg er (24hr) cap</i>	1	
<i>cartia 300mg er (24hr) cap</i>	1	
<i>dilt 120mg er (24hr) cap</i>	1	
<i>dilt 180mg er (24hr) cap</i>	1	
<i>dilt 240mg er (24hr) cap</i>	1	
<i>diltiazem 120mg er (12hr) cap</i>	1	
<i>diltiazem 120mg er (24hr) cap</i>	1	
<i>diltiazem 120mg tab</i>	1	
<i>diltiazem 180mg er (24hr) cap</i>	1	
<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	

You can find information 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>tiadylt 240mg er (24hr) cap</i>	1	
<i>tiadylt 300mg er (24hr) cap</i>	1	
<i>tiadylt 360mg er (24hr) cap</i>	1	
<i>tiadylt 420mg er (24hr) cap</i>	1	
<i>verapamil 120mg er cap</i>	1	
<i>verapamil 120mg er tab</i>	1	
<i>verapamil 120mg tab</i>	1	
<i>verapamil 180mg er cap</i>	1	
<i>verapamil 180mg er tab</i>	1	
<i>verapamil 240mg er cap</i>	1	
<i>verapamil 240mg er tab</i>	1	
<i>verapamil 40mg tab</i>	1	
<i>verapamil 80mg tab</i>	1	
CARDIOVASCULAR AGENTS		
ALPHA-ADRENERGIC AGONISTS		
<i>droxidopa 100mg cap</i>	1	PA QL=90 EA/30 Days
<i>droxidopa 200mg cap</i>	1	PA QL=180 EA/30 Days
<i>droxidopa 300mg cap</i>	1	PA QL=180 EA/30 Days
<i>midodrine 10mg tab</i>	1	
<i>midodrine 2.5mg tab</i>	1	
<i>midodrine 5mg tab</i>	1	
CARDIOVASCULAR AGENTS, OTHER		
ATTRUBY 356MG TAB	1	NDS PA QL=112 EA/28 Days
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	
<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	
<i>sacubitril/valsartan 24-26mg tab</i>	1	QL=60 EA/30 Days
<i>sacubitril/valsartan 49-51mg tab</i>	1	QL=60 EA/30 Days
<i>sacubitril/valsartan 97-103mg tab</i>	1	QL=60 EA/30 Days
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	

You can find information 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>cefadroxil 500mg cap</i>	1	
<i>cefadroxil 50mg/ml oral susp</i>	1	
<i>cefazolin 1000mg inj</i>	1	
<i>cefazolin 200mg/ml inj</i>	1	
<i>cefazolin 500mg inj</i>	1	
<i>cephalexin 250mg cap</i>	1	
<i>cephalexin 25mg/ml oral susp</i>	1	
<i>cephalexin 500mg cap</i>	1	
<i>cephalexin 50mg/ml oral susp</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>budesonide 3mg dr cap</i>	1	QL=90 EA/30 Days
<i>budesonide 9mg er tab</i>	1	PA QL=30 EA/30 Days
DEXAMETHASONE 0.1MG/ML ORAL SOLN	1	
<i>dexamethasone 0.5mg tab</i>	1	
<i>dexamethasone 0.75mg tab</i>	1	
<i>dexamethasone 1.5mg tab</i>	1	
<i>dexamethasone 1mg tab</i>	1	
<i>dexamethasone 2mg tab</i>	1	
<i>dexamethasone 4mg tab</i>	1	
<i>dexamethasone 6mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	1	
<i>hydrocortisone 20mg tab</i>	1	
<i>hydrocortisone 5mg tab</i>	1	
<i>methylprednisolone 16mg tab</i>	1	PA_BvD
<i>methylprednisolone 32mg tab</i>	1	PA_BvD
<i>methylprednisolone 4mg tab</i>	1	PA_BvD
<i>methylprednisolone 4mg tab pack (21)</i>	1	
<i>methylprednisolone 8mg tab</i>	1	PA_BvD
<i>prednisolone 1mg/ml oral soln</i>	1	PA_BvD
<i>prednisolone 3mg/ml oral soln</i>	1	PA_BvD
<i>prednisolone 5mg/ml oral soln</i>	1	PA_BvD
<i>prednisone 10mg tab</i>	1	PA_BvD
<i>prednisone 1mg tab</i>	1	PA_BvD
PREDNISONE 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
MINERALOCORTICIDS		
<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	

You can find information 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>pilocarpine 5mg tab</i>	1	
<i>pilocarpine 7.5mg tab</i>	1	
<i>triamcinolone acetonide 0.1% oral paste</i>	1	
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>accutane 10mg cap</i>	1	
<i>accutane 20mg cap</i>	1	
<i>accutane 40mg cap</i>	1	
<i>amnesteem 10mg cap</i>	1	
<i>amnesteem 20mg cap</i>	1	
<i>amnesteem 30mg cap</i>	1	
<i>amnesteem 40mg cap</i>	1	
<i>claravis 10mg cap</i>	1	
<i>claravis 20mg cap</i>	1	
<i>claravis 30mg cap</i>	1	
<i>claravis 40mg cap</i>	1	
<i>clindamycin 1% gel</i>	1	QL=75 GM/30 Days
<i>clindamycin 1% gel (twice-daily)</i>	1	QL=75 GM/30 Days
<i>clindamycin 1% lotion</i>	1	QL=60 ML/30 Days
<i>clindamycin 1% topical soln</i>	1	QL=60 ML/30 Days
<i>erythromycin 2% gel</i>	1	QL=60 GM/30 Days
<i>erythromycin 2% topical soln</i>	1	QL=60 ML/30 Days
<i>isotretinoin 10mg cap</i>	1	
<i>isotretinoin 20mg cap</i>	1	
<i>isotretinoin 30mg cap</i>	1	
<i>isotretinoin 40mg cap</i>	1	
<i>sulfacetamide sodium 10% lotion</i>	1	QL=118 ML/30 Days
<i>tretinoin 0.01% gel</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.025% cream</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.025% gel</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.05% cream</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.1% cream</i>	1	PA QL=45 GM/30 Days
<i>zenatane 10mg cap</i>	1	
<i>zenatane 20mg cap</i>	1	
<i>zenatane 30mg cap</i>	1	
<i>zenatane 40mg cap</i>	1	
ANTIBIOTICS - TOPICAL		
<i>gentamicin 0.1% cream</i>	1	QL=30 GM/30 Days
<i>gentamicin 0.1% ointment</i>	1	QL=120 GM/30 Days
<i>mupirocin 2% ointment</i>	1	QL=220 GM/30 Days
ANTIFUNGALS - TOPICAL		
<i>ciclopirox 0.77% cream</i>	1	QL=90 GM/30 Days
<i>ciclopirox 0.77% gel</i>	1	QL=100 GM/30 Days
<i>ciclopirox 1% shampoo</i>	1	QL=120 ML/30 Days
<i>ciclopirox 8% topical soln</i>	1	QL=13.20 ML/30 Days

You can find information 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>clotrimazole 1% cream</i>	1	QL=45 GM/30 Days
<i>clotrimazole/betamethasone 1-0.05% cream</i>	1	QL=90 GM/30 Days
<i>econazole nitrate 1% cream</i>	1	QL=85 GM/30 Days
<i>ketoconazole 2% cream</i>	1	QL=120 GM/30 Days
<i>ketoconazole 2% shampoo</i>	1	QL=240 ML/30 Days
<i>nyamyc 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
<i>nystatin 100000 unit/gm ointment</i>	1	QL=30 GM/30 Days
<i>nystatin 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
<i>nystatin 100000unit/ml cream</i>	1	QL=30 GM/30 Days
<i>% ointment</i>	1	QL=60 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	1	QL=60 GM/30 Days
<i>nystop 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene 1% gel</i>	1	PA_NSO QL=60 GM/30 Days
<i>diclofenac sodium 3% gel</i>	1	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	1	QL=10 ML/30 Days
<i>fluorouracil 5% cream</i>	1	QL=40 GM/30 Days
<i>fluorouracil 5% topical soln</i>	1	QL=10 ML/30 Days
PANRETIN 0.1% GEL	1	NDS PA_NSO QL=60 GM/30 Days
VALCHLOR 0.016% GEL	1	NDS PA_NSO QL=240 GM/30 Days
ANTIPSORIATICS		
<i>acitretin 10mg cap</i>	1	
<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

You can find information 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 100MG/ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TREMFYA 100MG/ML SYRINGE	1	PA QL=2 ML/28 Days
TREMFYA 200MG/2ML AUTO-INJECTOR	1	NDS PA QL=2 ML/28 Days
TREMFYA 200MG/2ML SYRINGE	1	NDS PA QL=2 ML/28 Days
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% ointment</i>	1	QL=180 GM/30 Days
BETAMETHASONE 0.1% TOPICAL LOTION	1	QL=120 ML/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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>halobetasol propionate 0.05% ointment</i>	1	QL=50 GM/30 Days
<i>hydrocortisone 1% cream</i>	1	QL=240 GM/30 Days
<i>hydrocortisone 2.5% ointment</i>	1	QL=240 GM/30 Days
HYDROCORTISONE LOTION 2.5%	1	QL=118 ML/30 Days
<i>mometasone furoate 0.1% cream</i>	1	QL=180 GM/30 Days
<i>mometasone furoate 0.1% lotion</i>	1	QL=180 ML/30 Days
<i>mometasone furoate 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>triamcinolone acetonide 0.025% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.025% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.025% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.1% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% ointment</i>	1	QL=120 GM/30 Days
<i>triderm 0.5% cream</i>	1	QL=454 GM/30 Days
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus 1% cream</i>	1	QL=100 GM/30 Days
<i>tacrolimus 0.03% ointment</i>	1	QL=100 GM/30 Days
<i>tacrolimus 0.1% ointment</i>	1	QL=100 GM/30 Days
LOCAL ANESTHETICS - TOPICAL		
<i>lidocaine 4% mucous membrane topical soln</i>	1	QL=50 ML/30 Days
<i>lidocaine 5% ointment</i>	1	PA QL=107 GM/30 Days
<i>lidocaine 5% patch</i>	1	PA QL=90 EA/30 Days
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	1	QL=30 GM/30 Days
<i>lidocan 5% patch</i>	1	PA QL=90 EA/30 Days
<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		
SANTYL 250UNIT/GM OINTMENT	1	QL=90 GM/30 Days
<i>silver sulfadiazine 1% cream</i>	1	
<i>ssd 1% cream</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON 120000-24000-76000UNIT DR CAP	1	
CREON 15000-3000-9500UNIT DR CAP	1	
CREON 180000-36000-114000UNIT DR CAP	1	
CREON 30000-6000-19000UNIT DR CAP	1	
CREON 60000-12000-38000UNIT DR CAP	1	
SUCRAID 8500UNIT/ML ORAL SOLN	1	NDS PA
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide 125mg tab</i>	1	
<i>acetazolamide 250mg tab</i>	1	
<i>acetazolamide 500mg er cap</i>	1	
<i>methazolamide 25mg tab</i>	1	
<i>methazolamide 50mg tab</i>	1	
DIURETIC COMBINATIONS		
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	1	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	1	
LOOP DIURETICS		
<i>bumetanide 0.25mg/ml inj</i>	1	
<i>bumetanide 0.5mg tab</i>	1	
<i>bumetanide 1mg tab</i>	1	
<i>bumetanide 2mg tab</i>	1	
FUROSCIX 80MG/10ML CARTRIDGE	1	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	1	
<i>furosemide 10mg/ml oral soln</i>	1	
<i>furosemide 20mg tab</i>	1	
<i>furosemide 40mg tab</i>	1	
<i>furosemide 80mg tab</i>	1	
FUROSEMIDE 8MG/ML ORAL SOLN	1	
<i>torseamide 100mg tab</i>	1	
<i>torseamide 10mg tab</i>	1	
<i>torseamide 20mg tab</i>	1	
<i>torseamide 5mg tab</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone 25mg tab</i>	1	

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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cinacalcet 30mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>cinacalcet 60mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>cinacalcet 90mg tab</i>	1	PA_BvD QL=120 EA/30 Days
CYSTADANE 1GM POWDER FOR ORAL SOLN	1	NDS
<i>javygtor 100mg powder for oral soln</i>	1	PA
<i>javygtor 100mg tab</i>	1	PA
<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>abigale 1/0.5mg tab 28-day pack</i>	1	
<i>abigale lo tab 0.5/0.1mg 28-day pack</i>	1	
<i>altavera tab 28-day pack</i>	1	
<i>alyacen 1/35 tab 28-day pack</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>apri tab 28-day pack</i>	1	
<i>aranelle tab 28-day pack</i>	1	
<i>ashlyna tab 91-day pack</i>	1	
<i>aubra tab 28-day pack</i>	1	
<i>aviane tab 28-day pack</i>	1	
<i>azurette 28 day pack</i>	1	
<i>balziva tab 28-day pack</i>	1	
<i>blisovi 21 fe tab 1.5/30 28-day pack</i>	1	
<i>blisovi 24 fe tab 1/20 28-day pack</i>	1	
<i>brielllyn 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack</i>	1	
<i>ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25mg-mcg tab 28-day pack</i>	1	
<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35mg-mcg tab 28-day pack</i>	1	
<i>falmina tab 28-day pack</i>	1	
<i>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	

You can find information 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>loryna tab 28-day pack</i>	1	
<i>low-ogestrel tab 28-day pack</i>	1	
<i>luteru tab 28-day pack</i>	1	
<i>marlissa tab 28-day pack</i>	1	
<i>mibelas 24 fe chewable tab 28-day pack</i>	1	
<i>microgestin 1.5/30 tab 21-day pack</i>	1	
<i>microgestin 1/20 tab 21-day pack</i>	1	
<i>microgestin fe tab 1.5/30 28-day pack</i>	1	
<i>microgestin fe tab 1/20 28-day pack</i>	1	
<i>mili tab 28-day pack</i>	1	
<i>mimvey 28-day pack</i>	1	
<i>necon 0.5/35 tab 28-day pack</i>	1	
<i>nikki tab 28-day pack</i>	1	
<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	1	
<i>nortrel 0.5/35 tab 28-day pack</i>	1	
<i>nortrel 1/35 tab 21-day pack</i>	1	
<i>nortrel 1/35 tab 28-day pack</i>	1	
<i>nortrel 7/7/7 tab 28-day pack</i>	1	
<i>nylia 1/35 tab 28-day pack</i>	1	
<i>nylia 7/7/7 tab 28-day pack</i>	1	
<i>ocella tab 28-day pack</i>	1	
<i>pimtrea tab 28-day pack</i>	1	
<i>portia tab 28-day pack</i>	1	
PREMPHASE 28-DAY PACK	1	
PREMPRO 0.3/1.5MG 28-DAY PACK	1	
PREMPRO 0.45/1.5MG 28-DAY PACK	1	
PREMPRO 0.625/2.5MG 28-DAY PACK	1	
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>turqoz tab 28-day pack</i>	1	
<i>valtya tab 1/50 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
VELIVET TAB 28-DAY PACK	1	
<i>vestura tab 3-0.02mg 28-day pack</i>	1	
<i>vienva tab 28-day pack</i>	1	
<i>vyfemla tab 28-day pack</i>	1	
<i>vylibra tab 28-day pack</i>	1	
<i>xulane 150-35mcg/24hr patch</i>	1	
<i>zafemy 150-35mcg/24hr patch</i>	1	
<i>zovia 1mg-35mcg tab 28-day pack</i>	1	
ESTROGENS		
<i>dotti 0.025mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.0375mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.05mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.075mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.1mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.0025mg/hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.01mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.01mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.025mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.025mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.0375mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.0375mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.05mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.05mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.075mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.075mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.5mg tab</i>	1	
<i>estradiol 1mg tab</i>	1	
<i>estradiol 2mg tab</i>	1	
<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	

You can find information 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>ciprofloxacin 500mg tab</i>	1	
<i>ciprofloxacin 750mg tab</i>	1	
<i>levofloxacin 250mg tab</i>	1	
<i>levofloxacin 25mg/ml oral soln</i>	1	
<i>levofloxacin 500mg tab</i>	1	
<i>levofloxacin 500mg/100ml inj</i>	1	
<i>levofloxacin 750mg tab</i>	1	
<i>levofloxacin 750mg/150ml inj</i>	1	
MOXIFLOXACIN 1.6MG/ML INJ	1	
<i>moxifloxacin 400mg tab</i>	1	
GASTROINTESTINAL AGENTS		
GASTROINTESTINAL AGENTS, OTHER		
<i>cromolyn sodium 20mg/ml oral soln</i>	1	
<i>enulose 10gm/15ml oral soln</i>	1	
GATTEX 5MG INJ	1	NDS PA
<i>generlac 10gm/15ml oral soln</i>	1	
<i>metoclopramide 10mg tab</i>	1	
<i>metoclopramide 1mg/ml oral soln</i>	1	
<i>metoclopramide 5mg tab</i>	1	
REZDIFFRA 100MG TAB	1	NDS PA QL=30 EA/30 Days
REZDIFFRA 60MG TAB	1	NDS PA QL=30 EA/30 Days
REZDIFFRA 80MG TAB	1	NDS PA QL=30 EA/30 Days
<i>ursodiol 250mg tab</i>	1	
<i>ursodiol 300mg cap</i>	1	
<i>ursodiol 500mg tab</i>	1	
VOWST 30000000UNIT CAP	1	NDS PA QL=12 EA/30 Days
GASTROINTESTINAL AGENTS - MISC.		
INFLAMMATORY BOWEL AGENTS		
<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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>potassium citrate 5meq er tab</i>	1	
<i>sodium chloride 0.9% irrigation soln</i>	1	
GENITOURINARY AGENTS - MISCELLANEOUS		
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	
<i>dutasteride 0.5mg cap</i>	1	
<i>finasteride 5mg tab</i>	1	
<i>tadalafil 2.5mg tab</i>	1	PA QL=30 EA/30 Days
<i>tadalafil 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>tamsulosin 0.4mg cap</i>	1	
GOUT AGENTS		
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	1	
<i>allopurinol 300mg tab</i>	1	
<i>colchicine 0.6mg tab</i>	1	
<i>colchicine/probenecid 0.5-500mg tab</i>	1	
<i>febuxostat 40mg tab</i>	1	ST
<i>febuxostat 80mg tab</i>	1	ST
<i>probenecid 500mg tab</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide 0.5mg cap</i>	1	
<i>anagrelide 1mg cap</i>	1	
<i>aspirin/dipyridamole 25-200mg er cap</i>	1	QL=60 EA/30 Days
<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 12.5mg powder for oral susp</i>	1	NDS PA QL=90 EA/30 Days
<i>eltrombopag 12.5mg tab</i>	1	NDS PA QL=30 EA/30 Days
<i>eltrombopag 25mg powder for oral susp</i>	1	NDS PA QL=180 EA/30 Days
<i>eltrombopag 25mg tab</i>	1	NDS PA QL=30 EA/30 Days
<i>eltrombopag 50mg tab</i>	1	NDS PA QL=60 EA/30 Days
<i>eltrombopag 75mg tab</i>	1	NDS PA QL=60 EA/30 Days
NIVESTYM 300MCG/0.5ML SYRINGE	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
NIVESTYM 300MCG/ML INJ	1	NDS
NIVESTYM 480MCG/0.8ML SYRINGE	1	NDS
NIVESTYM 480MCG/1.6ML INJ	1	NDS
NYVEPRIA 6MG/0.6ML SYRINGE	1	NDS
RETACRIT 10000UNIT/ML INJ	1	PA
RETACRIT 20000UNIT/2ML INJ	1	PA
RETACRIT 20000UNIT/ML INJ	1	PA
RETACRIT 2000UNIT/ML INJ	1	PA
RETACRIT 3000UNIT/ML INJ	1	PA
RETACRIT 40000UNIT/ML INJ	1	PA
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	

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

You can find information 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>rizatriptan 10mg tab</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg tab</i>	1	QL=36 EA/60 Days
<i>sumatriptan 100mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 25mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 4mg/0.5ml cartridge</i>	1	QL=5 ML/30 Days
<i>sumatriptan 50mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 6mg/0.5ml auto-injector</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml cartridge</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml inj</i>	1	QL=5 ML/30 Days
<i>zolmitriptan 2.5mg tab</i>	1	QL=18 EA/30 Days
<i>zolmitriptan 5mg tab</i>	1	QL=18 EA/30 Days
MINERALS & ELECTROLYTES		
ELECTROLYTE MIXTURES		
<i>electrolyte-148 inj</i>	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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PLASMA-LYTE A INJ	1	
TPN ELECTROLYTES INJ	1	PA_BvD
MAGNESIUM		
MAGNESIUM SULFATE 500MG/ML INJ	1	
<i>magnesium sulfate 500mg/ml syringe</i>	1	
POTASSIUM		
KLOR-CON 10MEQ ER TAB	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	
KLOR-CON 8MEQ ER TAB	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

You can find information 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>lenalidomide 20mg cap</i>	1	PA_NSO QL=30 EA/30 Days
<i>lenalidomide 25mg cap</i>	1	PA_NSO QL=30 EA/30 Days
<i>lenalidomide 5mg cap</i>	1	PA_NSO QL=30 EA/30 Days
NEMLUVIO 30MG AUTO-INJECTOR	1	NDS PA QL=2 EA/28 Days
REZUROCK 200MG TAB	1	NDS PA QL=30 EA/30 Days
THALOMID 100MG CAP	1	NDS QL=30 EA/30 Days
THALOMID 50MG CAP	1	NDS QL=30 EA/30 Days
IMMUNOSUPPRESSIVE AGENTS		
ARCALYST 220MG INJ	1	NDS PA
<i>azathioprine 50mg tab</i>	1	PA_BvD
BENLYSTA 200MG/ML AUTO-INJECTOR	1	NDS PA QL=4 ML/28 Days
BENLYSTA 200MG/ML SYRINGE	1	NDS PA QL=4 ML/28 Days
<i>cyclosporine 100mg cap</i>	1	PA_BvD
<i>cyclosporine 25mg cap</i>	1	PA_BvD
<i>cyclosporine modified 100mg cap</i>	1	PA_BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	1	PA_BvD
<i>cyclosporine modified 25mg cap</i>	1	PA_BvD
<i>cyclosporine modified 50mg cap</i>	1	PA_BvD
ENVARUSUS XR 0.75MG TAB	1	PA_BvD
ENVARUSUS XR 1MG TAB	1	PA_BvD
ENVARUSUS XR 4MG TAB	1	PA_BvD
<i>everolimus 0.25mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>everolimus 0.5mg tab</i>	1	PA_BvD QL=120 EA/30 Days
<i>everolimus 0.75mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>everolimus 1mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>engraf 100mg cap</i>	1	PA_BvD
<i>engraf 25mg cap</i>	1	PA_BvD
LITFULO 50MG CAP	1	NDS PA QL=28 EA/28 Days
LUPKYNIS 7.9MG CAP	1	NDS PA QL=180 EA/30 Days
<i>mycophenolate mofetil 200mg/ml oral susp</i>	1	PA_BvD
<i>mycophenolate mofetil 250mg cap</i>	1	PA_BvD
<i>mycophenolate mofetil 500mg tab</i>	1	PA_BvD
<i>mycophenolic acid 180mg dr tab</i>	1	PA_BvD
<i>mycophenolic acid 360mg dr tab</i>	1	PA_BvD
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	1	PA_BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	1	PA_BvD
<i>sirolimus 0.5mg tab</i>	1	PA_BvD
<i>sirolimus 1mg tab</i>	1	PA_BvD
<i>sirolimus 1mg/ml oral soln</i>	1	PA_BvD
<i>sirolimus 2mg tab</i>	1	PA_BvD
<i>tacrolimus 0.5mg cap</i>	1	PA_BvD
<i>tacrolimus 1mg cap</i>	1	PA_BvD
<i>tacrolimus 5mg cap</i>	1	PA_BvD
POTASSIUM REMOVING AGENTS		
<i>kionex 15gm/60ml susp</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LOKELMA 10GM POWDER FOR ORAL SUSP	1	PA QL=90 EA/30 Days
LOKELMA 5GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	1	
<i>sps 15gm/60ml susp</i>	1	
VELTASSA 16.8GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
VELTASSA 1GM POWDER FOR ORAL SUSP	1	PA QL=120 EA/30 Days
VELTASSA 25.2GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
VELTASSA 8.4GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen 10mg tab</i>	1	
<i>baclofen 20mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	PA QL=90 EA/30 Days
<i>chlorzoxazone 500mg tab</i>	1	PA
<i>cyclobenzaprine 10mg tab</i>	1	PA QL=90 EA/30 Days
<i>cyclobenzaprine 5mg tab</i>	1	PA QL=90 EA/30 Days
<i>metaxalone 800mg tab</i>	1	PA
<i>methocarbamol 500mg tab</i>	1	PA
<i>methocarbamol 750mg tab</i>	1	PA
<i>orphenadrine citrate 100mg er tab</i>	1	PA
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg tab</i>	1	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium 100mg cap</i>	1	
<i>dantrolene sodium 25mg cap</i>	1	
<i>dantrolene sodium 50mg cap</i>	1	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	1	QL=60 ML/30 Days
<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	1	QL=50 ML/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	1	QL=32 GM/30 Days
<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		

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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>polycin 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>polymyxin b/trimethoprim 10000 unit/ml-0.1% ophth soln</i>	1	QL=10 ML/7 Days
SULFACETAMIDE SODIUM 10% OPTH SOLN	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
XDEMVIY 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XIIDRA 5% OPTH SOLN	1	QL=60 EA/30 Days
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03% ophth soln</i>	1	QL=5 ML/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 ML/30 Days
LUMIGAN 0.01% OPTH SOLN	1	QL=5 ML/30 Days
<i>travoprost 0.004% ophth soln</i>	1	QL=5 ML/30 Days
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2% otic soln</i>	1	
<i>flac 0.01% otic soln</i>	1	
<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	

You can find information 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 250mg tab</i>	1	
PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN	1	
<i>penicillin v potassium 500mg tab</i>	1	
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin/clavulanate 250-125mg tab</i>	1	
<i>amoxicillin/clavulanate 500-125mg tab</i>	1	
<i>amoxicillin/clavulanate 875-125mg tab</i>	1	
<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	1	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	1	
<i>ampicillin/sulbactam 1000-500mg inj</i>	1	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	1	
<i>piperacillin/tazobactam 2000-250mg inj</i>	1	
<i>piperacillin/tazobactam 3000-375mg inj</i>	1	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	1	
<i>piperacillin/tazobactam 4000-500mg inj</i>	1	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	
<i>nafcillin 100mg/ml inj</i>	1	
<i>nafcillin 1gm inj</i>	1	
<i>nafcillin 2gm inj</i>	1	
<i>oxacillin 100mg/ml inj</i>	1	
<i>oxacillin 1gm inj</i>	1	
<i>oxacillin 2gm inj</i>	1	
PROGESTINS		
PROGESTINS		
<i>camila 0.35mg tab 28-day pack</i>	1	
<i>deblitane 0.35mg tab 28-day pack</i>	1	
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	1	
<i>errin 0.35mg tab 28-day pack</i>	1	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MEGESTROL ACETATE 125MG/ML SUSP	1	PA
<i>meleya 0.35mg tab 28-day pack</i>	1	
NEXPLANON 68MG IMPLANT	1	
<i>nora-be 0.35mg tab 28-day pack</i>	1	
<i>norethindrone 0.35mg 28-day pack</i>	1	
<i>norethindrone acetate 5mg tab</i>	1	
<i>orquidea 0.35mg tab 28-day pack</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

You can find information 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 6MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 9MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO XR 12MG TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO XR 18MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 24MG TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO XR 30MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 36MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 42MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 48MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 6MG TAB	1	NDS PA QL=90 EA/30 Days
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATION PACK	1	NDS PA QL=28 EA/28 Days
INGREZZA 40MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 40MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 60MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 60MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 80MG CAP	1	NDS PA QL=30 EA/30 Days
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.		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
NUEDEXTA 20-10MG CAP	1	PA QL=60 EA/30 Days
PIMOZIDE 1MG TAB	1	
PIMOZIDE 2MG TAB	1	
SMOKING DETERRENTS		
<i>bupropion 150mg sr (12hr) tab</i>	1	
NICOTROL 10MG/ML NASAL INHALER	1	
<i>varenicline 0.5mg tab</i>	1	QL=56 EA/28 Days
<i>varenicline 0.5mg/1mg first month pack (53)</i>	1	QL=53 EA/28 Days
<i>varenicline 1mg tab</i>	1	QL=56 EA/28 Days
<i>varenicline 1mg tab pack (56)</i>	1	QL=56 EA/28 Days
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
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		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIHIISTAMINES		
<i>desloratadine 5mg tab</i>	1	
<i>levocetirizine 5mg tab</i>	1	
<i>promethazine 1.25mg/ml oral soln</i>	1	
<i>promethazine 12.5mg tab</i>	1	
<i>promethazine 25mg tab</i>	1	
<i>promethazine 50mg tab</i>	1	
PULMONARY ANTIHYPERTENSIVES		
ADEMPAS 0.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	1	NDS PA QL=90 EA/30 Days
<i>alyq 20mg tab</i>	1	PA QL=60 EA/30 Days
<i>ambrisentan 10mg tab</i>	1	PA QL=30 EA/30 Days
<i>ambrisentan 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>bosentan 125mg tab</i>	1	PA QL=60 EA/30 Days
<i>bosentan 62.5mg tab</i>	1	PA QL=60 EA/30 Days
OPSUMIT 10MG TAB	1	NDS PA QL=30 EA/30 Days
<i>sildenafil 20mg tab</i>	1	PA QL=360 EA/30 Days
<i>tadalafil 20mg tab</i>	1	PA QL=60 EA/30 Days
WINREVAIR 45MG INJ	1	NDS PA QL=1 EA/21 Days
WINREVAIR 45MG INJ (2 VIAL PACK)	1	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ	1	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ (2 VIAL PACK)	1	NDS PA QL=1 EA/21 Days
RESPIRATORY TRACT/PULMONARY AGENTS		
PHOSPHODIESTERASE INHIBITORS, AIRWAYS DISEASE		
<i>roflumilast 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>roflumilast 250mcg tab</i>	1	QL=28 EA/365 Days
THEOPHYLLINE 100MG ER TAB	1	
THEOPHYLLINE 200MG ER TAB	1	
<i>theophylline 300mg er tab</i>	1	
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450mg er tab</i>	1	
<i>theophylline 600mg er tab</i>	1	
SLEEP DISORDER AGENTS		
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SULFONAMIDES		
SULFONAMIDES		
<i>sulfadiazine 500mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 200-40mg/5ml oral susp</i>	1	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
TETRACYCLINES		
TETRACYCLINES		
<i>doxy 100mg inj</i>	1	
<i>doxycycline hyclate 100mg cap</i>	1	
<i>doxycycline hyclate 100mg 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>levothyroxine sodium 100mcg tab</i>	1	
<i>levothyroxine sodium 112mcg tab</i>	1	
<i>levothyroxine sodium 125mcg tab</i>	1	
<i>levothyroxine sodium 137mcg tab</i>	1	
<i>levothyroxine sodium 150mcg tab</i>	1	
<i>levothyroxine sodium 175mcg tab</i>	1	
<i>levothyroxine sodium 200mcg tab</i>	1	
<i>levothyroxine sodium 25mcg tab</i>	1	
<i>levothyroxine sodium 300mcg tab</i>	1	
<i>levothyroxine sodium 50mcg tab</i>	1	
<i>levothyroxine sodium 75mcg tab</i>	1	
<i>levothyroxine sodium 88mcg tab</i>	1	
<i>levoxyl 100mcg tab</i>	1	
<i>levoxyl 112mcg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>levoxyl 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	
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	

You can find information 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>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
<i>tropium chloride 60mg er cap</i>	1	QL=30 EA/30 Days
URINARY ANTISPASMODICS		
<i>bethanechol chloride 10mg tab</i>	1	
<i>bethanechol chloride 25mg tab</i>	1	
<i>bethanechol chloride 50mg tab</i>	1	
<i>bethanechol chloride 5mg tab</i>	1	
<i>flavoxate 100mg tab</i>	1	
<i>mirabegron 25mg er tab</i>	1	QL=30 EA/30 Days

You can find information 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>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
PENMENVY 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
IPOLE INJ	1	VAC
IXIARO 0.012MG/ML SYRINGE	1	VAC
JYNNEOS 0.5ML INJ	1	VAC
M-M-R II INJ	1	VAC
MRESVIA 50MCG/0.5ML SYRINGE	1	VAC
PRIORIX INJ	1	VAC
PROQUAD INJ	1	
RABAVERT 2.5UNIT/ML INJ	1	PA_BvD VAC
RECOMBIVAX 10MCG/ML INJ	1	PA_BvD VAC
RECOMBIVAX 10MCG/ML SYRINGE	1	PA_BvD VAC
RECOMBIVAX 40MCG/ML INJ	1	PA_BvD VAC
RECOMBIVAX 5MCG/0.5ML INJ	1	PA_BvD VAC
RECOMBIVAX 5MCG/0.5ML SYRINGE	1	PA_BvD VAC
ROTARIX 667000UNIT/ML ORAL SUSP	1	
ROTATEQ ORAL SUSP	1	
SHINGRIX 50MCG/0.5ML INJ	1	QL=2 EA/365 DaysVAC

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TICOVAC 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>acetylcysteine 100mg/ml inh soln</i>	51	ADEMPAS 0.5MG TAB	78
<i>abacavir 20mg/ml oral soln</i>	43	<i>acetylcysteine 200mg/ml inh soln</i>	51	ADEMPAS 1.5MG TAB	78
<i>abacavir 300mg tab</i>	43	<i>acitretin 10mg cap</i>	53	ADEMPAS 1MG TAB	78
<i>abacavir/lamivudine 600-300mg tab</i>	43	<i>acitretin 17.5mg cap</i>	53	ADEMPAS 2.5MG TAB	78
ABELCET 5MG/ML INJ	22	<i>acitretin 25mg cap</i>	53	ADEMPAS 2MG TAB	78
<i>abigale 1/0.5mg tab</i>	58	ACTEMRA	3	ADVAIR 115-21MCG HFA	9
<i>28-day pack</i>		162MG/0.9ML		INHALER	
<i>abigale lo tab 0.5/0.1mg</i>	58	AUTO-INJECTOR		ADVAIR 230-21MCG HFA INHALER	9
<i>28-day pack</i>		ACTEMRA	3	ADVAIR 45-21MCG/ACT HFA INHALER	9
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	43	162MG/0.9ML SYRINGE		AKEEGA 500-100MG TAB	31
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	43	ACTHIB INJ	82	TAB	
ABILIFY MAINTENA 300MG INJ	43	ACTIMMUNE	37	AKEEGA 500-50MG TAB	31
ABILIFY MAINTENA 300MG SYRINGE	43	2000000UNIT/0.5ML INJ		<i>ala-cort 1% cream</i>	54
ABILIFY MAINTENA 400MG INJ	43	<i>acyclovir 200mg cap</i>	46	<i>albendazole 200mg tab</i>	6
ABILIFY MAINTENA 400MG SYRINGE	43	<i>acyclovir 400mg tab</i>	46	<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	9
<i>abiraterone acetate 250mg tab</i>	31	<i>acyclovir 40mg/ml oral susp</i>	46	<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	9
<i>abirtega 250mg tab</i>	31	<i>acyclovir 5% ointment</i>	55	<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	9
ABRYSVO	82	<i>acyclovir 50mg/ml inj</i>	46	<i>albuterol 1.25mg/3ml neb soln</i>	10
<i>acamprosate calcium 333mg dr tab</i>	75	<i>acyclovir 800mg tab</i>	46	<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i>	10
<i>acarbose 100mg tab</i>	19	ADACEL INJ	80	<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	10
<i>acarbose 25mg tab</i>	19	ADACEL SYRINGE	80	<i>albuterol 2mg tab</i>	10
<i>acarbose 50mg tab</i>	19	ADALIMUMAB-AATY 100MG/ML (0.2ML) SYRINGE	3	<i>albuterol 4mg tab</i>	10
<i>accutane 10mg cap</i>	52	ADALIMUMAB-AATY 100MG/ML (0.4ML) SYRINGE	3	<i>albuterol 5mg/ml (0.05%) inh soln</i>	10
<i>accutane 20mg cap</i>	52	ADALIMUMAB-AATY 100MG/ML	3	ALCLOMETASONE 0.05% OINT	54
<i>accutane 40mg cap</i>	52	AUTO-INJECTOR (0.4ML)		<i>alclometasone dipropionate 0.05% cream</i>	54
<i>acebutolol 200mg cap</i>	47	ADALIMUMAB-AATY 100MG/ML	3	ALCOHOL SWAB 1X1 (DIABETIC)	66
<i>acebutolol 400mg cap</i>	47	AUTO-INJECTOR (0.8ML)		ALECENSA 150MG CAP	32
<i>acetazolamide 125mg tab</i>	56	ADALIMUMAB-AATY 80MG/0.8ML	3	<i>alendronate sodium 10mg tab</i>	57
<i>acetazolamide 250mg tab</i>	56	AUTO-INJECTOR PACK (3)			
<i>acetazolamide 500mg er cap</i>	56	<i>adefovir dipivoxil 10mg tab</i>	46		
<i>acetic acid 2% otic soln</i>	73				

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

ALPHABETICAL LISTING OF DRUGS

<i>alendronate sodium 35mg tab</i>	57	<i>amiodarone 400mg tab</i>	8	<i>amlodipine/hydrochlorothiazide/valsartan 10-12.5-160mg tab</i>	26
<i>alendronate sodium 70mg tab</i>	57	<i>amitriptyline 100mg tab</i>	18	<i>amlodipine/hydrochlorothiazide/valsartan 10-25-160mg tab</i>	26
<i>alfuzosin 10mg er tab</i>	64	<i>amitriptyline 10mg tab</i>	18	<i>amlodipine/hydrochlorothiazide/valsartan 10-25-320mg tab</i>	26
<i>aliskiren 150mg tab</i>	27	<i>amitriptyline 150mg tab</i>	18	<i>amlodipine/hydrochlorothiazide/valsartan 5-12.5-160mg tab</i>	26
<i>aliskiren 300mg tab</i>	27	<i>amitriptyline 25mg tab</i>	18	<i>amlodipine/hydrochlorothiazide/valsartan 5-25-160mg tab</i>	26
<i>allopurinol 100mg tab</i>	64	<i>amitriptyline 50mg tab</i>	18	<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	26
<i>allopurinol 300mg tab</i>	64	<i>amitriptyline 75mg tab</i>	18	<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	26
<i>alosetron 0.5mg tab</i>	21	<i>amlodipine 10mg tab</i>	48	<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	26
<i>alosetron 1mg tab</i>	21	<i>amlodipine 2.5mg tab</i>	48	<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	26
<i>alprazolam 0.25mg tab</i>	7	<i>amlodipine 5mg tab</i>	48	<i>amlodipine/valsartan 10-160mg tab</i>	26
<i>alprazolam 0.5mg tab</i>	7	<i>amlodipine/benazepril 10-20mg cap</i>	26	<i>amlodipine/valsartan 10-320mg tab</i>	26
<i>alprazolam 1mg tab</i>	7	<i>amlodipine/benazepril 10-40mg cap</i>	26	<i>amlodipine/valsartan 5-160mg tab</i>	26
<i>alprazolam 2mg tab</i>	7	<i>amlodipine/benazepril 2.5-10mg cap</i>	26	<i>ammonium lactate 12% cream</i>	55
<i>altavera tab 28-day pack</i>	58	<i>amlodipine/benazepril 5-10mg cap</i>	26	<i>ammonium lactate 12% lotion</i>	55
ALUNBRIG 180MG TAB	32	<i>amlodipine/benazepril 5-20mg cap</i>	26	<i>amnesteem 10mg cap</i>	52
ALUNBRIG 30MG TAB	32	<i>amlodipine/benazepril 5-40mg cap</i>	26	<i>amnesteem 20mg cap</i>	52
ALUNBRIG 90MG TAB	32	<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	26	<i>amnesteem 30mg cap</i>	52
ALUNBRIG TAB	32	<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	26	<i>amnesteem 40mg cap</i>	52
INITIATION PACK (30)				<i>amoxapine 100mg tab</i>	18
ALVESCO 160MCG	9			<i>amoxapine 150mg tab</i>	18
INHALER				<i>amoxapine 25mg tab</i>	18
ALVESCO 80MCG	9			<i>amoxapine 50mg tab</i>	18
INHALER					
<i>alyacen 1/35 tab 28-day pack</i>	58				
ALYFTREK 10-50-125MG TAB	77				
ALYFTREK 4-20-50MG TAB	77				
<i>alyq 20mg tab</i>	78				
<i>amantadine 100mg cap</i>	38				
<i>amantadine 10mg/ml oral soln</i>	38				
<i>ambrisentan 10mg tab</i>	78				
<i>ambrisentan 5mg tab</i>	78				
<i>amikacin 250mg/ml inj</i>	2				
<i>amiloride 5mg tab</i>	56				
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	56				
<i>amiodarone 100mg tab</i>	8				
<i>amiodarone 200mg tab</i>	8				

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

ALPHABETICAL LISTING OF DRUGS

AMOXICILLIN 125MG CHEW TAB	73	<i>amphetamine/dextroamphetamine 20mg er cap</i>	1	AREXVY 120MCG/0.5ML INJ	82
<i>amoxicillin 250mg cap</i>	73	<i>amphetamine/dextroamphetamine 20mg tab</i>	1	ARIKAYCE 590MG/8.4ML INH SUSP	2
AMOXICILLIN 250MG CHEW TAB	73	<i>amphetamine/dextroamphetamine 25mg er cap</i>	1	<i>aripiprazole 10mg odt</i>	43
<i>amoxicillin 25mg/ml oral susp</i>	73	<i>amphetamine/dextroamphetamine 30mg er cap</i>	1	<i>aripiprazole 10mg tab</i>	43
<i>amoxicillin 40mg/ml oral susp</i>	73	<i>amphetamine/dextroamphetamine 30mg tab</i>	1	<i>aripiprazole 15mg odt</i>	43
<i>amoxicillin 500mg cap</i>	73	<i>amphetamine/dextroamphetamine 5mg er cap</i>	1	<i>aripiprazole 15mg tab</i>	43
<i>amoxicillin 500mg tab</i>	73	<i>amphetamine/dextroamphetamine 5mg tab</i>	1	<i>aripiprazole 1mg/ml oral soln</i>	43
<i>amoxicillin 50mg/ml oral susp</i>	73	<i>amphetamine/dextroamphetamine 7.5mg tab</i>	1	<i>aripiprazole 20mg tab</i>	43
<i>amoxicillin 80mg/ml oral susp</i>	73	AMPHOTERICIN B 50MG INJ	22	<i>aripiprazole 2mg tab</i>	43
<i>amoxicillin 875mg tab</i>	73	<i>ampicillin 1000mg inj</i>	73	<i>aripiprazole 30mg tab</i>	43
<i>amoxicillin/clavulanate 250-125mg tab</i>	74	<i>ampicillin 100mg/ml inj</i>	73	<i>aripiprazole 5mg tab</i>	43
<i>amoxicillin/clavulanate 500-125mg tab</i>	74	<i>ampicillin 500mg cap</i>	73	ARISTADA 1064MG/3.9ML SYRINGE	43
<i>amoxicillin/clavulanate 875-125mg tab</i>	74	<i>ampicillin/sulbactam 1000-500mg inj</i>	74	<i>aristada 441MG/1.6ML SYRINGE</i>	43
<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	74	<i>ampicillin/sulbactam 100-50mg/ml inj</i>	74	ARISTADA 662MG/2.4ML SYRINGE	43
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	74	<i>ampicillin/sulbactam 2000-1000mg inj</i>	74	<i>aristada 675MG/2.4ML SYRINGE</i>	43
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	74	<i>anagrelide 0.5mg cap</i>	64	<i>aristada 882MG/3.2ML SYRINGE</i>	43
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	74	<i>anagrelide 1mg cap</i>	64	<i>armodafinil 150mg tab</i>	1
<i>amphetamine/dextroamphetamine 10mg er cap</i>	1	<i>anastrozole 1mg tab</i>	31	<i>armodafinil 200mg tab</i>	1
<i>amphetamine/dextroamphetamine 10mg tab</i>	1	ANORO ELLIPTA 62.5-25MCG POWDER INHALER	10	<i>armodafinil 250mg tab</i>	1
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	1	APRACLONIDINE 0.5% OPTH SOLN	71	<i>armodafinil 50mg tab</i>	1
<i>amphetamine/dextroamphetamine 15mg er cap</i>	1	<i>aprepitant 125mg cap</i>	22	ARNUITY 100MCG POWDER INHALER	9
<i>amphetamine/dextroamphetamine 15mg tab</i>	1	<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	22	ARNUITY 200MCG POWDER INHALER	9
		<i>aprepitant 40mg cap</i>	22	ARNUITY 50MCG POWDER INHALER	9
		<i>aprepitant 80mg cap</i>	22	<i>asenapine 10mg sl tab</i>	41
		<i>apri tab 28-day pack</i>	59	<i>asenapine 2.5mg sl tab</i>	41
		APTIVUS 250MG CAP	43	<i>asenapine 5mg sl tab</i>	41
		<i>aranella tab 28-day pack</i>	59	<i>ashlyna tab 91-day pack</i>	59
		ARCALYST 220MG INJ	69	ASMANEX 100MCG HFA INHALER	9
				ASMANEX 110MCG (30ACT) TWISTHALER	9

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

ALPHABETICAL LISTING OF DRUGS

ASMANEX 200MCG HFA INHALER	9	ATROVENT 17MCG HFA INHALER	9	azithromycin 250mg pack (6)	28
ASMANEX 220MCG (120ACT) TWISTHALER	9	ATTRUBY 356MG TAB	49	azithromycin 250mg tab	28
ASMANEX 220MCG (30ACT) TWISTHALER	9	aubra tab 28-day pack	59	azithromycin 40mg/ml oral susp	28
ASMANEX 220MCG (60ACT) TWISTHALER	9	AUGTYRO 160MG CAP	33	azithromycin 500mg inj	28
ASMANEX 50MCG HFA INHALER	9	AUGTYRO 40MG CAP	33	azithromycin 500mg tab	28
aspirin/dipyridamole 25-200mg er cap	64	AUSTEDO 12MG TAB	75	azithromycin 500mg tab pack (3)	28
atazanavir 150mg cap	43	AUSTEDO 6MG TAB	76	azithromycin 600mg tab	28
atazanavir 200mg cap	43	AUSTEDO 9MG TAB	76	aztreonam 1gm inj	28
atazanavir 300mg cap	44	AUSTEDO XR 12MG TAE	76	aztreonam 2gm inj	28
atenolol 100mg tab	47	AUSTEDO XR 18MG TAE	76	azurette 28 day pack	59
atenolol 25mg tab	47	AUSTEDO XR 24MG TAE	76	B	
atenolol 50mg tab	47	AUSTEDO XR 30MG TAE	76	BACITRACIN 500UNIT/GM OPHTH OINTMENT	71
atenolol/chlorthalidone 100-25mg tab	26	AUSTEDO XR 36MG TAE	76	bacitracin/polymyxin b 0.5-10unit/mg ophth ointment	71
atenolol/chlorthalidone 50-25mg tab	27	AUSTEDO XR 42MG TAE	76	baclofen 10mg tab	70
atomoxetine 100mg cap	1	AUSTEDO XR 48MG TAE	76	baclofen 20mg tab	70
atomoxetine 10mg cap	1	AUSTEDO XR 6MG TAB	76	balsalazide disodium 750mg cap	63
atomoxetine 18mg cap	1	AUSTEDO XR TAB ONCI DAILY 4 WEEK TITRATION PACK	76	BALVERSA 3MG TAB	33
atomoxetine 25mg cap	1	AUVELITY 105-45MG ER TAB	15	BALVERSA 4MG TAB	33
atomoxetine 40mg cap	1	aviane tab 28-day pack	59	BALVERSA 5MG TAB	33
atomoxetine 60mg cap	1	AVMAPKI/FAKZYNJA CO-PACK (66)	32	balziva tab 28-day pack	59
atomoxetine 80mg cap	1	AVONEX 30MCG/0.5ML AUTO-INJECTOR	76	BAQSIMI 3MG/DOSE NASAL POWDER	19
atorvastatin 10mg tab	23	AVONEX 30MCG/0.5ML SYRINGE	76	BCG LIVE TICE STRAIN 50MG INJ	82
atorvastatin 20mg tab	24	AYVAKIT 100MG TAB	37	benazepril 10mg tab	24
atorvastatin 40mg tab	24	AYVAKIT 200MG TAB	37	benazepril 20mg tab	24
atorvastatin 80mg tab	24	AYVAKIT 25MG TAB	37	benazepril 40mg tab	24
atovaquone 750mg/5ml oral susp	29	AYVAKIT 300MG TAB	37	benazepril 5mg tab	24
atovaquone/proguanil 250-100mg tab	29	AYVAKIT 50MG TAB	37	benazepril/hydrochlorothiazide 10-12.5mg tab	27
atovaquone/proguanil 62.5-25mg tab	29	azathioprine 50mg tab	69	benazepril/hydrochlorothiazide 20-12.5mg tab	27
atropine sulfate 1% ophth soln	72	azelaic acid 15% gel	55	benazepril/hydrochlorothiazide 20-25mg tab	27
atropine sulfate/diphenoxylate 0.025-2.5mg tab	21	azelastine 0.05% ophth soln	72	benazepril/hydrochlorothiazide 5-6.25mg tab	27
		azelastine 0.1% (137mcg/act) nasal inhaler	70		
		azithromycin 20mg/ml oral susp	28		

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

ALPHABETICAL LISTING OF DRUGS

BENLYSTA 200MG/ML AUTO-INJECTOR	69	<i>bethanechol chloride 5mg tab</i>	81	BOSULIF 400MG TAB	33
BENLYSTA 200MG/ML SYRINGE	69	<i>bexarotene 1% gel</i>	53	BOSULIF 500MG TAB	33
<i>benztropine mesylate 0.5mg tab</i>	38	<i>bexarotene 75mg cap</i>	37	BOSULIF 50MG CAP	33
<i>benztropine mesylate 1mg tab</i>	38	BEXSERO SYRINGE	82	BRAFTOVI 75MG CAP	33
<i>benztropine mesylate 2mg tab</i>	38	<i>bicalutamide 50mg tab</i>	31	BREO ELLIPTA	10
BERINERT 500UNIT INJ	65	BICILLIN L-A	73	100-25MCG POWDER	
BESREMI 500MCG/ML SYRINGE	37	1200000UNIT/2ML SYRINGE		INHALER	
<i>betaine 1gm powder for oral soln</i>	57	BICILLIN L-A	73	BREO ELLIPTA	10
<i>betamethasone 0.05% aug cream</i>	54	2400000UNIT/4ML SYRINGE		200-25MCG POWDER	
<i>betamethasone 0.05% aug lotion</i>	54	BICILLIN L-A	73	INHALER	
<i>betamethasone 0.05% aug ointment</i>	54	600000UNIT/ML SYRINGE		BREO ELLIPTA	10
<i>betamethasone 0.05% cream</i>	54	BIKTARVY 30-120-15MG TAB	44	50-25MCG POWDER	
<i>betamethasone 0.05% lotion</i>	54	BIKTARVY 50-200-25MG TAB	44	INHALER	
<i>betamethasone 0.05% ointment</i>	54	<i>bimatoprost 0.03% ophth soln</i>	73	<i>breyna 160-4.5mcg/act inhaler</i>	10
<i>betamethasone 0.1% cream</i>	54	<i>bisoprolol fumarate 10mg tab</i>	47	<i>breyna 80-4.5mcg/act inhaler</i>	10
<i>betamethasone 0.1% ointment</i>	54	<i>bisoprolol fumarate 5mg tab</i>	47	BREZTRI AEROSPHERE	10
<i>betamethasone 0.1% TOPICAL LOTION</i>	54	<i>bisoprolol</i>	27	160-9-4.8MCG/ACT	
BETASERON 0.3MG INJ	76	<i>fumarate/hydrochlorothia zide 10-6.25mg tab</i>	73	INHALER	
BETAXOLOL 0.5% OPHTH SOLN	71	<i>bisoprolol</i>	27	<i>briellyn tab 28-day pack</i>	59
<i>betaxolol 10mg tab</i>	47	<i>fumarate/hydrochlorothia zide 2.5-6.25mg tab</i>	27	<i>brimonidine tartrate 0.1% ophth soln</i>	71
<i>betaxolol 20mg tab</i>	47	<i>bisoprolol</i>	27	<i>brimonidine tartrate 0.15% ophth soln</i>	71
<i>bethanechol chloride 10mg tab</i>	81	<i>fumarate/hydrochlorothia zide 5-6.25mg tab</i>	27	<i>brimonidine tartrate 0.2% ophth soln</i>	71
<i>bethanechol chloride 25mg tab</i>	81	<i>blisovi 21 fe tab 1.5/30 28-day pack</i>	59	<i>brimonidine</i>	71
<i>bethanechol chloride 50mg tab</i>	81	<i>blisovi 24 fe tab 1/20 28-day pack</i>	59	<i>tartrate/timolol 0.2-0.5% ophth soln</i>	
		BOOSTRIX INJ	80	BRIVIACT 100MG TAB	12
		BOOSTRIX SYRINGE	80	BRIVIACT 10MG TAB	12
		<i>bosentan 125mg tab</i>	78	BRIVIACT 10MG/ML	12
		<i>bosentan 62.5mg tab</i>	78	ORAL SOLN	
		BOSULIF 100MG CAP	33	BRIVIACT 25MG TAB	12
		BOSULIF 100MG TAB	33	BRIVIACT 50MG TAB	12
				BRIVIACT 75MG TAB	12
				<i>bromfenac 0.07% ophth soln</i>	72
				<i>bromocriptine 2.5mg tab</i>	38
				<i>bromocriptine 5mg cap</i>	38
				BRUKINSA 80MG CAP	33
				<i>budesonide 0.25mg/2ml inh susp</i>	9

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

ALPHABETICAL LISTING OF DRUGS

<i>budesonide 0.5mg/2ml inh susp</i>	9	<i>bupropion xl 300mg (24hr) tab</i>	16	CAPRELSA 300MG TAB	33
<i>budesonide 1mg/2ml inh susp</i>	9	<i>buspirone 10mg tab</i>	7	<i>captopril 100mg tab</i>	24
<i>budesonide 2mg/act rectal foam</i>	6	<i>buspirone 15mg tab</i>	7	<i>captopril 12.5mg tab</i>	24
<i>budesonide 3mg dr cap</i>	51	<i>buspirone 30mg tab</i>	7	<i>captopril 25mg tab</i>	24
<i>budesonide 9mg er tab</i>	51	<i>buspirone 5mg tab</i>	7	<i>captopril 50mg tab</i>	24
<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	10	<i>buspirone 7.5mg tab</i>	7	<i>carbamazepine 100mg chew tab</i>	12
<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	10	C		<i>carbamazepine 100mg er cap</i>	12
<i>bumetanide 0.25mg/ml inj</i>	56	<i>cabergoline 0.5mg tab</i>	58	<i>carbamazepine 100mg er tab</i>	12
<i>bumetanide 0.5mg tab</i>	56	CABOMETYX 20MG TAE	33	<i>carbamazepine 200mg er cap</i>	12
<i>bumetanide 1mg tab</i>	56	CABOMETYX 40MG TAE	33	<i>carbamazepine 200mg er tab</i>	12
<i>bumetanide 2mg tab</i>	56	CABOMETYX 60MG TAE	33	<i>carbamazepine 20mg/ml oral susp</i>	12
<i>buprenorphine 2mg sl tab</i>	5	<i>calcipotriene 0.005% cream</i>	53	<i>carbamazepine 300mg er cap</i>	12
<i>buprenorphine 8mg sl tab</i>	5	<i>calcipotriene 0.005% ointment</i>	53	<i>carbamazepine 400mg er tab</i>	13
<i>buprenorphine/naloxone 12-3mg sl film</i>	5	CALCIPOTRIENE 0.005% TOPICAL SOLN	53	<i>carbidopa 25mg tab</i>	38
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	5	<i>calcitriol 0.25mcg cap</i>	57	<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	38
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	6	<i>calcitriol 0.5mcg cap</i>	57	<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	38
<i>buprenorphine/naloxone 4-1mg sl film</i>	6	<i>calcitriol 1mcg/ml oral soln</i>	57	<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	38
<i>buprenorphine/naloxone 8-2mg sl film</i>	6	CALQUENCE 100MG TAB	33	<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	38
<i>buprenorphine/naloxone 8-2mg sl tab</i>	6	<i>camila 0.35mg tab 28-day pack</i>	74	<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	38
<i>bupropion 100mg sr (12hr) tab</i>	15	<i>camreselo tab 91-day pack</i>	59	CARBIDOPA/LEVODOPA 10-100MG ODT	38
<i>bupropion 100mg tab</i>	15	CAMZYOS 10MG CAP	49		
<i>bupropion 150mg sr (12 hr) tab</i>	16	CAMZYOS 15MG CAP	49		
<i>bupropion 150mg sr (12hr) tab</i>	77	CAMZYOS 2.5MG CAP	49		
<i>bupropion 200mg sr (12hr) tab</i>	16	CAMZYOS 5MG CAP	49		
<i>bupropion 75mg tab</i>	16	<i>candesartan cilexetil 16mg tab</i>	25		
<i>bupropion xl 150mg (24 hr) tab</i>	16	<i>candesartan cilexetil 32mg tab</i>	25		
		<i>candesartan cilexetil 4mg tab</i>	25		
		<i>candesartan cilexetil 8mg tab</i>	25		
		CAPLYTA 10.5MG CAP	39		
		CAPLYTA 21MG CAP	39		
		CAPLYTA 42MG CAP	39		
		CAPRELSA 100MG TAB	33		

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

ALPHABETICAL LISTING OF DRUGS

<i>carbidopa/levodopa</i>	38	<i>cefazolin 1000mg inj</i>	50	<i>celecoxib 200mg cap</i>	3
<i>10-100mg tab</i>		<i>cefazolin 200mg/ml inj</i>	50	<i>celecoxib 400mg cap</i>	3
<i>carbidopa/levodopa</i>	38	<i>cefazolin 500mg inj</i>	50	<i>celecoxib 50mg cap</i>	3
<i>25-100mg er tab</i>		<i>cefdinir 25mg/ml oral</i>	50	<i>cephalexin 250mg cap</i>	50
CARBIDOPA/LEVODOPA	38	<i>susp</i>		<i>cephalexin 25mg/ml oral</i>	50
25-100MG ODT		<i>cefdinir 300mg cap</i>	50	<i>susp</i>	
<i>carbidopa/levodopa</i>	38	<i>cefdinir 50mg/ml oral</i>	50	<i>cephalexin 500mg cap</i>	50
<i>25-100mg tab</i>		<i>susp</i>		<i>cephalexin 50mg/ml oral</i>	50
CARBIDOPA/LEVODOPA	38	<i>cefepime 1000mg inj</i>	28	<i>susp</i>	
25-250MG ODT		<i>cefepime 2000mg inj</i>	28	<i>cevimeline 30mg cap</i>	51
<i>carbidopa/levodopa</i>	38	<i>cefixime 20mg/ml oral</i>	50	<i>chlordiazepoxide 10mg</i>	7
<i>25-250mg tab</i>		<i>susp</i>		<i>cap</i>	
<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% OPHTH	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>	30
<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>	47	<i>cefprozil 50mg/ml oral</i>	50	<i>chlorpromazine 25mg tab</i>	42
<i>carvedilol 3.125mg tab</i>	47	<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>	57
<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>	50	<i>cefuroxime 500mg tab</i>	50	<i>ciclopirox 0.77% gel</i>	52
<i>cefadroxil 50mg/ml oral</i>	50	<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

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

CILASTATIN/IMIPENEM 250-250MG INJ	29	<i>clindamycin 1% gel (twice-daily)</i>	52	<i>clobetasol propionate 0.05% ointment</i>	54
<i>cilastatin/imipenem 500-500mg inj</i>	29	<i>clindamycin 1% lotion</i>	52	<i>clobetasol propionate 0.05% shampoo</i>	54
<i>cilostazol 100mg tab</i>	64	<i>clindamycin 1% topical soln</i>	52	<i>clobetasol propionate 0.05% topical soln</i>	54
<i>cilostazol 50mg tab</i>	64	<i>clindamycin 150mg cap</i>	28	<i>clobetasol propionate 0.05% topical spray</i>	54
CIMDUO 300-300MG TAB	44	<i>clindamycin 2% vaginal cream</i>	83	<i>clodan 0.05% shampoo</i>	54
<i>cimetidine 200mg tab</i>	81	<i>clindamycin 300mg cap</i>	28	<i>clomipramine 25mg cap</i>	18
<i>cimetidine 300mg tab</i>	81	<i>clindamycin 300mg/2ml inj</i>	28	<i>clomipramine 50mg cap</i>	18
<i>cimetidine 400mg tab</i>	81	<i>clindamycin 300mg/50ml inj</i>	28	<i>clomipramine 75mg cap</i>	18
<i>cimetidine 800mg tab</i>	81	<i>clindamycin 600mg/4ml inj</i>	28	<i>clonazepam 0.125mg odt</i>	12
CIMZIA 200MG INJ	3	<i>clindamycin 600mg/50ml inj</i>	28	<i>clonazepam 0.25mg odt</i>	12
CIMZIA 200MG/ML SYRINGE	3	<i>clindamycin 600mg/50ml inj</i>	28	<i>clonazepam 0.5mg odt</i>	12
<i>cinacalcet 30mg tab</i>	58	<i>clindamycin 75mg cap</i>	28	<i>clonazepam 0.5mg tab</i>	12
<i>cinacalcet 60mg tab</i>	58	<i>clindamycin 75mg/5ml oral soln</i>	28	<i>clonazepam 1mg odt</i>	12
<i>cinacalcet 90mg tab</i>	58	<i>clindamycin 900mg/50ml inj</i>	28	<i>clonazepam 1mg tab</i>	12
<i>ciprofloxacin 0.3% ophth soln</i>	71	<i>CLINIMIX 4.25/10 INJ</i>	71	<i>clonazepam 2mg odt</i>	12
<i>ciprofloxacin 250mg tab</i>	62	<i>CLINIMIX 4.25/5 INJ</i>	71	<i>clonazepam 2mg tab</i>	12
CIPROFLOXACIN 2MG/ML INJ	62	<i>CLINIMIX 5/15 INJ</i>	71	<i>clonidine 0.1mg er tab</i>	1
<i>ciprofloxacin 500mg tab</i>	63	<i>CLINIMIX 5/20 INJ</i>	71	<i>clonidine 0.1mg tab</i>	25
<i>ciprofloxacin 750mg tab</i>	63	<i>clinisol 15% inj</i>	71	<i>clonidine 0.1mg/24hr weekly patch</i>	25
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	73	<i>clobazam 10mg tab</i>	12	<i>clonidine 0.2mg tab</i>	25
<i>citalopram 10mg tab</i>	16	<i>clobazam 2.5mg/ml oral susp</i>	12	<i>clonidine 0.2mg/24hr weekly patch</i>	25
<i>citalopram 20mg tab</i>	16	<i>clobetasol propionate 0.05% cream</i>	54	<i>clonidine 0.3mg tab</i>	25
<i>citalopram 2mg/ml oral soln</i>	16	<i>clobetasol propionate 0.05% e cream</i>	54	<i>clonidine 0.3mg/24hr weekly patch</i>	25
<i>citalopram 40mg tab</i>	16	<i>clobetasol propionate 0.05% foam</i>	54	<i>clopidogrel 75mg tab</i>	64
<i>claravis 10mg cap</i>	52	<i>clobetasol propionate 0.05% gel</i>	54	<i>clorazepate dipotassium 15mg tab</i>	7
<i>claravis 20mg cap</i>	52	<i>clobetasol propionate 0.05% lotion</i>	54	<i>clorazepate dipotassium 3.75mg tab</i>	7
<i>claravis 30mg cap</i>	52			<i>clorazepate dipotassium 7.5mg tab</i>	7
<i>claravis 40mg cap</i>	52			<i>clotrimazole 1% cream</i>	53
<i>clarithromycin 250mg tab</i>	28			<i>clotrimazole 10mg lozenge</i>	51
CLARITHROMYCIN 25MG/ML ORAL SUSP	28			<i>clotrimazole/betamethasone 1-0.05% cream</i>	53
<i>clarithromycin 500mg tab</i>	28			<i>clozapine 100mg odt</i>	41
CLARITHROMYCIN 50MG/ML ORAL SUSP	28			<i>clozapine 100mg tab</i>	41
<i>clindamycin 1% gel</i>	52				

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

ALPHABETICAL LISTING OF DRUGS

CLOZAPINE 12.5MG ODT	41	COMETRIQ CAP 140MG DAILY DOSE PACK (112)	33	CYCLOPHOSPHAMIDE 50MG TAB	30
<i>clozapine 150mg odt</i>	41	COMETRIQ CAP 60MG DAILY DOSE PACK (84)	33	<i>cyclosporine 0.05% ophth susp</i>	72
<i>clozapine 200mg odt</i>	41	<i>compro 25mg rectal supp</i>	42	<i>cyclosporine 100mg cap</i>	69
<i>clozapine 200mg tab</i>	41	<i>constulose 10gm/15ml oral soln</i>	66	<i>cyclosporine 25mg cap</i>	69
<i>clozapine 25mg odt</i>	41	COPIKTRA 15MG CAP	33	<i>cyclosporine modified 100mg cap</i>	69
<i>clozapine 25mg tab</i>	41	COPIKTRA 25MG CAP	33	<i>cyclosporine modified 100mg/ml oral soln</i>	69
<i>clozapine 50mg tab</i>	41	COSENTYX 150MG/ML AUTO-INJECTOR	53	<i>cyclosporine modified 25mg cap</i>	69
COARTEM 20-120MG TAB	29	COSENTYX 150MG/ML SYRINGE	53	<i>cyclosporine modified 50mg cap</i>	69
COBENFY 20-100MG CAP	39	COSENTYX 75MG/0.5ML SYRINGE	53	<i>cyred tab 28-day pack</i>	59
COBENFY 20-50MG CAP	39	COSENTYX UNOREADY 300MG/2ML	53	CYSTADANE 1GM POWDER FOR ORAL SOLN	58
COBENFY 30-125MG CAP	39	AUTO-INJECTOR		CYSTADROPS 0.37% OPTH SOLN	72
COBENFY CAP 28-DAY STARTER KIT PACK (56)	39	COTELLIC 20MG TAB	33	CYSTAGON 150MG CAP	63
<i>codeine</i>	5	CREON	56	CYSTAGON 50MG CAP	63
<i>phosphate/acetaminophen 15-300mg tab</i>		120000-24000-76000UNIT DR CAP		CYSTARAN 0.44% OPTH SOLN	72
CODEINE	5	CREON	56		
PHOSPHATE/ACETAMINOPHEN 2.4-24MG/ML ORAL SOLN		15000-3000-9500UNIT DR CAP		D	
<i>codeine</i>	5	CREON	56	<i>dalfampridine 10mg er tab</i>	76
<i>phosphate/acetaminophen 30-300mg tab</i>		180000-36000-114000UNIT DR CAP		<i>danazol 100mg cap</i>	6
<i>codeine</i>	5	NIT DR CAP		<i>danazol 200mg cap</i>	6
<i>phosphate/acetaminophen 60-300mg tab</i>		CREON	56	<i>danazol 50mg cap</i>	6
<i>colchicine 0.6mg tab</i>	64	30000-6000-19000UNIT DR CAP		<i>dantrolene sodium 100mg cap</i>	70
<i>colchicine/probenecid 0.5-500mg tab</i>	64	CREON	56	<i>dantrolene sodium 25mg cap</i>	70
<i>colesevelam 625mg tab</i>	23	60000-12000-38000UNIT DR CAP		<i>dantrolene sodium 50mg cap</i>	70
<i>colestipol 1gm tab</i>	23	<i>cromolyn sodium 20mg/ml oral soln</i>	63	<i>dapsone 100mg tab</i>	30
<i>colestipol 5000mg granules for oral susp</i>	23	CROMOLYN SODIUM 4% OPTH SOLN	72	<i>dapsone 25mg tab</i>	30
<i>colistin 75mg/ml inj</i>	28	<i>cryselle tab 28-day pack</i>	59	DAPTACEL INJ	80
COMBIVENT 20-100MCG/ACT INHALER	10	<i>cyclobenzaprine 10mg tab</i>	70	<i>daptomycin 500mg inj</i>	28
COMETRIQ CAP 100MG DAILY DOSE PACK (56)	33	<i>cyclobenzaprine 5mg tab</i>	70	<i>darunavir 600mg tab</i>	44
		CYCLOPHOSPHAMIDE 25MG TAB	30	<i>darunavir 800mg tab</i>	44
				<i>dasatinib 100mg tab</i>	33
				<i>dasatinib 140mg tab</i>	33

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

ALPHABETICAL LISTING OF DRUGS

<i>dasatinib 20mg tab</i>	33	<i>desvenlafaxine succinate</i>	17	<i>diazepam 10mg/2ml</i>	12
<i>dasatinib 50mg tab</i>	33	<i>100mg er tab</i>		<i>rectal gel</i>	
<i>dasatinib 70mg tab</i>	33	<i>desvenlafaxine succinate</i>	17	<i>diazepam 1mg/ml oral</i>	7
<i>dasatinib 80mg tab</i>	33	<i>25mg er tab</i>		<i>soln</i>	
DAURISMO 100MG TAB	31	<i>desvenlafaxine succinate</i>	17	DIAZEPAM	12
DAURISMO 25MG TAB	31	<i>50mg er tab</i>		2.5MG/0.5ML RECTAL	
<i>deblitane 0.35mg tab</i>	74	DEXAMETHASONE	51	GEL	
<i>28-day pack</i>		0.1MG/ML ORAL SOLN		<i>diazepam 20mg/4ml</i>	12
<i>deferasirox 180mg tab</i>	68	<i>dexamethasone 0.5mg tab</i>	51	<i>rectal gel</i>	
<i>deferasirox 360mg tab</i>	68	<i>dexamethasone 0.75mg</i>	51	<i>diazepam 2mg tab</i>	7
<i>deferasirox 90mg tab</i>	68	<i>tab</i>		<i>diazepam 5mg tab</i>	7
DELSTRIGO	44	<i>dexamethasone 1.5mg tab</i>	51	<i>diazepam 5mg/ml oral</i>	7
100-300-300MG TAB		<i>dexamethasone 1mg tab</i>	51	<i>soln</i>	
DEPO-SUBQ PROVERA	74	<i>dexamethasone 2mg tab</i>	51	<i>diazoxide 50mg/ml oral</i>	19
104MG/0.65ML		<i>dexamethasone 4mg tab</i>	51	<i>susp</i>	
SYRINGE		<i>dexamethasone 6mg tab</i>	51	<i>diclofenac potassium</i>	3
<i>depo-testosterone</i>	6	DEXAMETHASONE	72	<i>50mg tab</i>	
<i>100mg/ml inj</i>		PHOSPHATE 0.1%		<i>diclofenac sodium 0.1%</i>	72
<i>depo-testosterone</i>	6	OPHTH SOLN		<i>ophth soln</i>	
<i>200mg/ml inj</i>		<i>dexamethasone/neomycin</i>	72	<i>diclofenac sodium 1.5%</i>	3
DESCOVY 120-15MG	44	<i>/polymyxin b 0.1% ophth</i>		<i>topical soln</i>	
TAB		<i>ointment</i>		<i>diclofenac sodium 100mg</i>	3
DESCOVY 200-25MG	44	<i>dexamethasone/tobramyc</i>	72	<i>er tab</i>	
TAB		<i>in 0.3-0.1% ophth susp</i>		<i>diclofenac sodium 25mg</i>	3
<i>desipramine 100mg tab</i>	18	<i>dexmethylphenidate</i>	1	<i>dr tab</i>	
<i>desipramine 10mg tab</i>	18	<i>10mg tab</i>		<i>diclofenac sodium 3% gel</i>	53
<i>desipramine 150mg tab</i>	18	<i>dexmethylphenidate</i>	1	<i>diclofenac sodium 50mg</i>	3
<i>desipramine 25mg tab</i>	18	<i>2.5mg tab</i>		<i>dr tab</i>	
<i>desipramine 50mg tab</i>	18	<i>dexmethylphenidate 5mg</i>	1	<i>diclofenac sodium 75mg</i>	4
<i>desipramine 75mg tab</i>	18	<i>tab</i>		<i>dr tab</i>	
<i>desloratadine 5mg tab</i>	78	<i>dextroamphetamine</i>	1	<i>dicloxacillin 250mg cap</i>	74
<i>desmopressin acetate</i>	58	<i>sulfate 10mg tab</i>		<i>dicloxacillin 500mg cap</i>	74
<i>0.01% (0.01mg/act) nasal</i>		<i>dextroamphetamine</i>	1	<i>dicyclomine 10mg cap</i>	80
<i>spray</i>		<i>sulfate 5mg tab</i>		<i>dicyclomine 20mg tab</i>	80
<i>desmopressin acetate</i>	58	DEXTROSE 10% INJ	71	<i>dicyclomine 2mg/ml oral</i>	80
<i>0.1mg tab</i>		DIACOMIT 250MG CAP	13	<i>soln</i>	
<i>desmopressin acetate</i>	58	DIACOMIT 250MG	13	DIFICID 200MG TAB	28
<i>0.2mg tab</i>		POWDER FOR ORAL		DIFICID 40MG/ML ORAL	28
<i>desonide 0.05% ointment</i>	54	SUSP		SUSP	
<i>desoximetasone 0.25%</i>	54	DIACOMIT 500MG CAP	13	<i>diflunisal 500mg tab</i>	4
<i>cream</i>		DIACOMIT 500MG	13	<i>difluprednate 0.05%</i>	72
<i>desoximetasone 0.25%</i>	54	POWDER FOR ORAL		<i>ophth susp</i>	
<i>ointment</i>		SUSP		<i>digoxin 0.125mg tab</i>	49
		<i>diazepam 10mg tab</i>	7	<i>digoxin 0.25mg tab</i>	49

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

ALPHABETICAL LISTING OF DRUGS

<i>dihydroergotamine</i>	66	<i>divalproex sodium 250mg</i>	15	<i>doxepin 10mg cap</i>	18
<i>mesylate 0.5mg/act nasal</i>		<i>dr tab</i>		<i>doxepin 10mg/ml oral</i>	18
<i>inhaler</i>		<i>divalproex sodium 250mg</i>	15	<i>soln</i>	
<i>dilt 120mg er (24hr) cap</i>	48	<i>er tab</i>		<i>doxepin 150mg cap</i>	18
<i>dilt 180mg er (24hr) cap</i>	48	<i>divalproex sodium 500mg</i>	15	<i>doxepin 25mg cap</i>	18
<i>dilt 240mg er (24hr) cap</i>	48	<i>dr tab</i>		<i>doxepin 50mg cap</i>	18
<i>diltiazem 120mg er (12hr)</i>	48	<i>divalproex sodium 500mg</i>	15	<i>doxepin 75mg cap</i>	18
<i>cap</i>		<i>er tab</i>		<i>doxy 100mg inj</i>	79
<i>diltiazem 120mg er (24hr)</i>	48	<i>dofetilide 0.125mg cap</i>	8	<i>doxycycline hyclate</i>	79
<i>cap</i>		<i>dofetilide 0.25mg cap</i>	8	<i>100mg cap</i>	
<i>diltiazem 120mg tab</i>	48	<i>dofetilide 0.5mg cap</i>	8	<i>doxycycline hyclate</i>	79
<i>diltiazem 180mg er (24hr)</i>	48	<i>donepezil 10mg odt</i>	75	<i>100mg inj</i>	
<i>cap</i>		<i>donepezil 10mg tab</i>	75	<i>doxycycline hyclate</i>	79
<i>diltiazem 240mg er (24hr)</i>	48	<i>donepezil 23mg tab</i>	75	<i>100mg tab</i>	
<i>cap</i>		<i>donepezil 5mg odt</i>	75	<i>doxycycline hyclate 20mg</i>	79
<i>diltiazem 300mg er (24hr)</i>	48	<i>donepezil 5mg tab</i>	75	<i>tab</i>	
<i>cap</i>		DOPTELET 20MG TAB	64	<i>doxycycline hyclate 50mg</i>	79
<i>diltiazem 30mg tab</i>	48	DOPTELET TAB 40MG	64	<i>cap</i>	
<i>diltiazem 360mg er (24hr)</i>	48	DAILY DOSE PACK (10)		<i>doxycycline monohydrate</i>	79
<i>cap</i>		DOPTELET TAB 60MG	64	<i>100mg cap</i>	
<i>diltiazem 420mg er (24hr)</i>	48	DAILY DOSE PACK (15)		<i>doxycycline monohydrate</i>	79
<i>cap</i>		<i>dorzolamide 2% ophth</i>	72	<i>100mg tab</i>	
<i>diltiazem 60mg er (12hr)</i>	48	<i>soln</i>		<i>doxycycline monohydrate</i>	79
<i>cap</i>		<i>dorzolamide/timolol</i>	71	<i>50mg cap</i>	
<i>diltiazem 60mg tab</i>	48	<i>22.3-6.8mg/ml ophth soln</i>		<i>doxycycline monohydrate</i>	79
<i>diltiazem 90mg er (12hr)</i>	48	<i>dorzolamide/timolol</i>	71	<i>50mg tab</i>	
<i>cap</i>		<i>maleate 2%-0.5% ophth</i>		<i>doxycycline monohydrate</i>	79
<i>diltiazem 90mg tab</i>	48	<i>soln (preservative-free)</i>		<i>5mg/ml oral susp</i>	
<i>dimethyl fumarate 120mg</i>	76	<i>dotti 0.025mg/24hr twice</i>	62	DRIZALMA 20MG DR	17
<i>dr cap</i>		<i>weekly patch</i>		SPRINKLE CAP	
<i>dimethyl fumarate</i>	76	<i>dotti 0.0375mg/24hr</i>	62	DRIZALMA 30MG DR	17
<i>120mg/240mg cap starter</i>		<i>twice weekly patch</i>		SPRINKLE CAP	
<i>pack (60)</i>		<i>dotti 0.05mg/24hr twice</i>	62	DRIZALMA 40MG DR	17
<i>dimethyl fumarate 240mg</i>	76	<i>weekly patch</i>		SPRINKLE CAP	
<i>dr cap</i>		<i>dotti 0.075mg/24hr twice</i>	62	DRIZALMA 60MG DR	17
<i>disopyramide 100mg cap</i>	8	<i>weekly patch</i>		SPRINKLE CAP	
<i>disopyramide 150mg cap</i>	8	<i>dotti 0.1mg/24hr twice</i>	62	<i>dronabinol 10mg cap</i>	22
<i>disulfiram 250mg tab</i>	75	<i>weekly patch</i>		<i>dronabinol 2.5mg cap</i>	22
<i>disulfiram 500mg tab</i>	75	DOVATO 50-300MG TAB	44	<i>dronabinol 5mg cap</i>	22
<i>divalproex sodium 125mg</i>	15	<i>doxazosin 1mg tab</i>	25	<i>drospirenone/ethinyl</i>	59
<i>dr cap</i>		<i>doxazosin 2mg tab</i>	25	<i>estradiol/inert</i>	
<i>divalproex sodium 125mg</i>	15	<i>doxazosin 4mg tab</i>	26	<i>ingredients 3-0.02-1mg</i>	
<i>dr tab</i>		<i>doxazosin 8mg tab</i>	26	<i>tab 28-day pack</i>	
		<i>doxepin 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>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	59	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	44	<i>emtricitabine/rilpivirine/tenofovir disoproxil fumarate 200-25-300mg tab</i>	44
<i>droxidopa 100mg cap</i>	49	<i>electrolyte-148 inj</i>	67	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	44
<i>droxidopa 200mg cap</i>	49	ELIGARD 22.5MG	32	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	44
<i>droxidopa 300mg cap</i>	49	SYRINGE		<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	44
DULERA 100-5MCG	10	ELIGARD 30MG	32	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	44
INHALER		SYRINGE		EMTRIVA 10MG/ML	44
DULERA 200-5MCG	10	ELIGARD 45MG	32	ORAL SOLN	
INHALER		SYRINGE		<i>enalapril maleate 10mg tab</i>	24
DULERA 50-5MCG	10	ELIGARD 7.5MG	32	<i>enalapril maleate 2.5mg tab</i>	24
INHALER		SYRINGE		<i>enalapril maleate 20mg tab</i>	24
<i>duloxetine 20mg dr cap</i>	17	ELIQUIS 2.5MG TAB	11	<i>enalapril maleate 5mg tab</i>	24
<i>duloxetine 30mg dr cap</i>	17	ELIQUIS 5MG 30-DAY	11	<i>enalapril</i>	27
<i>duloxetine 60mg dr cap</i>	17	STARTER PACK (74)		<i>maleate/hydrochlorothiazide 10-25mg tab</i>	27
DUPIXENT	8	ELIQUIS 5MG TAB	11	<i>enalapril</i>	27
200MG/1.14ML		ELMIRON 100MG CAP	63	<i>maleate/hydrochlorothiazide 5-12.5mg tab</i>	3
AUTO-INJECTOR		<i>eltrombopag 12.5mg powder for oral susp</i>	64	ENBREL 25MG/0.5ML	3
DUPIXENT	8	<i>eltrombopag 12.5mg tab</i>	64	INJ	
200MG/1.14ML		<i>eltrombopag 25mg powder for oral susp</i>	64	ENBREL 25MG/0.5ML	3
SYRINGE		<i>eltrombopag 25mg tab</i>	64	SYRINGE	
DUPIXENT 300MG/2ML	8	<i>eltrombopag 50mg tab</i>	64	ENBREL 50MG/ML	3
AUTO-INJECTOR		<i>eltrombopag 75mg tab</i>	64	AUTO-INJECTOR	
DUPIXENT 300MG/2ML	8	<i>eluryng</i>	59	ENBREL 50MG/ML	3
SYRINGE		<i>0.120-0.015mg/24hr vaginal system</i>		CARTRIDGE	
<i>dutasteride 0.5mg cap</i>	64	EMGALITY 100MG/ML	66	ENBREL 50MG/ML	3
E		SYRINGE		SYRINGE	
<i>econazole nitrate 1% cream</i>	53	EMGALITY 120MG/ML	66	<i>endocet 10-325mg tab</i>	5
EDURANT 2.5MG TAB	44	AUTO-INJECTOR		<i>endocet 2.5-325mg tab</i>	5
FOR ORAL SUSP		EMGALITY 120MG/ML	66		
EDURANT 25MG TAB	44	SYRINGE			
<i>efavirenz 600mg tab</i>	44	EMSAM 12MG/24HR	16		
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	44	PATCH			
EFAVIRENZ/LAMIVUDINE/TENOFOVIR	44	EMSAM 6MG/24HR	16		
DISOPROXIL		PATCH			
FUMARATE		EMSAM 9MG/24HR	16		
400-300-300MG TAB		PATCH			
		<i>emtricitabine 200mg cap</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>endocet 5-325mg tab</i>	5	<i>eplerenone 25mg tab</i>	27	<i>eslicarbazepine acetate</i>	13
<i>endocet 7.5-325mg tab</i>	5	<i>eplerenone 50mg tab</i>	28	<i>800mg tab</i>	
ENERGIX-B	82	EPRONTIA 25MG/ML	13	<i>esomeprazole 20mg dr</i>	81
10MCG/0.5ML SYRINGE		ORAL SOLN		<i>cap</i>	
ENERGIX-B 20MCG/ML	82	ERIVEDGE 150MG CAP	31	<i>esomeprazole 40mg dr</i>	81
INJ		ERLEADA 240MG TAB	32	<i>cap</i>	
ENERGIX-B 20MCG/ML	82	ERLEADA 60MG TAB	32	<i>estarylla tab 28-day pack</i>	59
SYRINGE		<i>erlotinib 100mg tab</i>	31	<i>estradiol 0.0025mg/hr</i>	62
<i>enilloring</i>	59	<i>erlotinib 150mg tab</i>	31	<i>weekly patch</i>	
<i>0.120-0.015mg/24hr</i>		<i>erlotinib 25mg tab</i>	31	<i>estradiol 0.01% vaginal</i>	83
<i>vaginal system</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>100mg/1ml 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>120mg/0.8ml 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>150mg/1ml 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>30mg/0.3ml syringe</i>		<i>erythromycin 250mg dr</i>	28	<i>weekly patch</i>	
<i>enoxaparin sodium</i>	11	<i>tab</i>		<i>estradiol 0.0375mg/24hr</i>	62
<i>40mg/0.4ml syringe</i>		<i>erythromycin 250mg tab</i>	28	<i>twice weekly patch</i>	
<i>enoxaparin sodium</i>	11	<i>erythromycin 333mg dr</i>	28	<i>estradiol 0.0375mg/24hr</i>	62
<i>60mg/0.6ml syringe</i>		<i>tab</i>		<i>weekly patch</i>	
<i>enoxaparin sodium</i>	11	<i>erythromycin 500mg dr</i>	28	<i>estradiol 0.05mg/24hr</i>	62
<i>80mg/0.8ml syringe</i>		<i>tab</i>		<i>twice weekly patch</i>	
<i>enpresse tab 28-day pack</i>	59	<i>erythromycin 500mg tab</i>	29	<i>estradiol 0.05mg/24hr</i>	62
<i>enskyce tab 28-day pack</i>	59	<i>erythromycin</i>	29	<i>weekly patch</i>	
<i>entacapone 200mg tab</i>	38	<i>ethylsuccinate 40mg/ml</i>		<i>estradiol 0.075mg/24hr</i>	62
<i>entecavir 0.5mg tab</i>	46	<i>oral susp</i>		<i>twice weekly patch</i>	
<i>entecavir 1mg tab</i>	46	<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				

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

ALPHABETICAL LISTING OF DRUGS

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

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<i>falmina tab 28-day pack</i>	60
<i>famciclovir 125mg tab</i>	46
<i>famciclovir 250mg tab</i>	46
<i>famciclovir 500mg tab</i>	46
<i>famotidine 20mg tab</i>	81
<i>famotidine 40mg tab</i>	81
FANAPT 10MG TAB	40
FANAPT 12MG TAB	40
FANAPT 1MG TAB	40
FANAPT 2MG TAB	40
FANAPT 4MG TAB	40
FANAPT 6MG TAB	40
FANAPT 8MG TAB	40
FANAPT TAB TITRATION PACK (8)	40
FARXIGA 10MG TAB	21
FARXIGA 5MG TAB	21
FASENRA 10MG/0.5ML SYRINGE	8

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

ALPHABETICAL LISTING OF DRUGS

FASENRA 30MG/ML AUTO-INJECTOR	8	FINTEPLA 2.2MG/ML ORAL SOLN	13	<i>fluocinolone acetone</i> <i>0.025% ointment</i>	54
FASENRA 30MG/ML SYRINGE	8	<i>finzala 24 fe chewable tab</i> <i>28-day pack</i>	60	<i>fluocinonide 0.05% cream</i>	54
<i>febuxostat 40mg tab</i>	64	FIRDAPSE 10MG TAB	30	<i>fluocinonide 0.05% e</i> <i>cream</i>	54
<i>febuxostat 80mg tab</i>	64	FIRMAGON 120MG INJ	32	<i>fluocinonide 0.05% gel</i>	54
<i>feirza 1.5/30 28-day pack</i>	60	FIRMAGON 80MG INJ	32	<i>fluocinonide 0.05%</i>	54
<i>feirza 1/20 28-day pack</i>	60	<i>flac 0.01% otic soln</i>	73	<i>ointment</i>	
<i>felbamate 120mg/ml oral</i> <i>susp</i>	15	<i>flavoxate 100mg tab</i>	81	<i>fluocinonide 0.05%</i>	54
<i>felbamate 400mg tab</i>	15	<i>flecainide acetate 100mg</i> <i>tab</i>	8	<i>topical soln</i>	
<i>felbamate 600mg tab</i>	15	<i>flecainide acetate 150mg</i> <i>tab</i>	8	<i>fluocinonide 0.1% cream</i>	54
<i>felodipine 10mg er tab</i>	48	<i>flecainide acetate 50mg</i> <i>tab</i>	8	<i>fluorometholone 0.1%</i> <i>ophth susp</i>	72
<i>felodipine 2.5mg er tab</i>	48	<i>fluconazole 100mg tab</i>	22	FLUOROURACIL 2% TOPICAL SOLN	53
<i>felodipine 5mg er tab</i>	48	<i>fluconazole 10mg/ml oral</i> <i>susp</i>	22	<i>fluorouracil 5% cream</i>	53
<i>fenofibrate 134mg cap</i>	23	<i>fluconazole 150mg tab</i>	22	<i>fluorouracil 5% topical</i> <i>soln</i>	53
<i>fenofibrate 145mg tab</i>	23	<i>fluconazole 200mg tab</i>	22	<i>fluoxetine 10mg cap</i>	16
<i>fenofibrate 160mg tab</i>	23	<i>fluconazole 200mg/100ml</i> <i>inj</i>	22	<i>fluoxetine 20mg cap</i>	16
<i>fenofibrate 200mg cap</i>	23	<i>fluconazole 400mg/200ml</i> <i>inj</i>	22	<i>fluoxetine 40mg cap</i>	16
<i>fenofibrate 48mg tab</i>	23	<i>fluconazole 40mg/ml oral</i> <i>susp</i>	22	<i>fluoxetine 4mg/ml oral</i> <i>soln</i>	16
<i>fenofibrate 54mg tab</i>	23	<i>fluconazole 50mg tab</i>	22	<i>fluoxetine 60mg tab</i>	16
<i>fenofibrate 67mg cap</i>	23	<i>flucytosine 250mg cap</i>	22	FLUPHENAZINE 0.5MG/ML ORAL SOLN	42
<i>fenofibric acid 135mg dr</i> <i>cap</i>	23	<i>flucytosine 500mg cap</i>	22	<i>fluphenazine 10mg tab</i>	42
<i>fenofibric acid 45mg dr</i> <i>cap</i>	23	<i>fludrocortisone acetate</i> <i>0.1mg tab</i>	51	<i>fluphenazine 1mg tab</i>	42
<i>fentanyl 100mcg/hr patch</i>	4	<i>flunisolid 25%</i> <i>(25mcg/act) nasal inhaler</i>	70	<i>fluphenazine 2.5mg tab</i>	42
<i>fentanyl 12mcg/hr patch</i>	4	<i>fluocinolone acetone</i> <i>0.01% cream</i>	54	FLUPHENAZINE 2.5MG/ML INJ	42
<i>fentanyl 25mcg/hr patch</i>	4	<i>fluocinolone acetone</i> <i>0.01% otic soln</i>	73	<i>fluphenazine 5mg tab</i>	42
<i>fentanyl 50mcg/hr patch</i>	4	<i>fluocinolone acetone</i> <i>0.01% topical oil</i>	54	FLUPHENAZINE 5MG/ML ORAL SOLN	42
<i>fentanyl 75mcg/hr patch</i>	4	<i>fluocinolone acetone</i> <i>0.01% topical soln</i>	54	<i>fluphenazine decanoate</i> <i>25mg/ml inj</i>	42
<i>fesoterodine fumarate</i> <i>4mg er tab</i>	81	<i>fluocinolone acetone</i> <i>0.025% cream</i>	54	FLURBIPROFEN	72
<i>fesoterodine fumarate</i> <i>8mg er tab</i>	81			SODIUM 0.03% OPHTH SOLN	
FETZIMA 120MG ER CAP	17			<i>fluticasone propionate</i> <i>0.005% ointment</i>	54
FETZIMA 20MG ER CAP	17			<i>fluticasone propionate</i> <i>0.05% cream</i>	54
FETZIMA 40MG ER CAP	17				
FETZIMA 80MG ER CAP	17				
FETZIMA ER CAP	17				
TITRATION PACK (28)					
<i>finasteride 5mg tab</i>	64				
<i>fingolimod 0.5mg cap</i>	76				

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

ALPHABETICAL LISTING OF DRUGS

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>		G		<i>gentamicin 0.1% ointment</i>	52
<i>fluvoxamine maleate</i>	16	<i>gabapentin 100mg cap</i>	13	<i>gentamicin 0.3% ophth</i>	71
<i>25mg tab</i>		<i>gabapentin 300mg cap</i>	13	<i>soln</i>	
<i>fluvoxamine maleate</i>	16	<i>gabapentin 400mg cap</i>	13	GENTAMICIN 0.8MG/ML	2
<i>50mg tab</i>		<i>gabapentin 50mg/ml oral</i>	13	INJ	
<i>fondaparinux sodium</i>	11	<i>soln</i>		GENTAMICIN 1.2MG/ML	2
<i>10mg/0.8ml syringe</i>		<i>gabapentin 600mg tab</i>	13	INJ	
<i>fondaparinux sodium</i>	11	<i>(Neurontin equiv)</i>		GENTAMICIN 1.6MG/ML	2
<i>2.5mg/0.5ml syringe</i>		<i>gabapentin 800mg tab</i>	13	INJ	
<i>fondaparinux sodium</i>	11	<i>galantamine 12mg tab</i>	75	GENTAMICIN 1MG/ML	2
<i>5mg/0.4ml syringe</i>		<i>galantamine 4mg tab</i>	75	INJ	
<i>fondaparinux sodium</i>	11	<i>galantamine 8mg tab</i>	75	<i>gentamicin 40mg/ml inj</i>	2
<i>7.5mg/0.6ml syringe</i>		<i>galantamine</i>	75	GENVOYA	44
<i>fosamprenavir 700mg tab</i>	44	<i>hydrobromide 16mg er</i>		150-150-200-10MG TAB	
<i>fosinopril sodium 10mg</i>	24	<i>cap</i>		GILOTRIF 20MG TAB	31
<i>tab</i>		<i>galantamine</i>	75	GILOTRIF 30MG TAB	31
<i>fosinopril sodium 20mg</i>	24	<i>hydrobromide 24mg er</i>		GILOTRIF 40MG TAB	31
<i>tab</i>		<i>cap</i>			

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

ALPHABETICAL LISTING OF DRUGS

<i>glatiramer acetate</i>	76	<i>glucose</i>	67	GOMEKLI 1MG CAP	33
<i>20mg/ml syringe</i>		<i>50mg/ml/potassium</i>		GOMEKLI 1MG TAB	33
<i>glatiramer acetate</i>	76	<i>chloride</i>		FOR ORAL SUSP	
<i>40mg/ml syringe</i>		<i>0.02meq/ml/sodium</i>		GOMEKLI 2MG CAP	33
<i>glatopa 20mg/ml syringe</i>	76	<i>chloride 4.5mg/ml inj</i>		<i>granisetron 1mg tab</i>	21
<i>glatopa 40mg/ml syringe</i>	76	<i>glucose</i>	67	<i>griseofulvin 125mg tab</i>	22
GLEOSTINE 100MG CAP	30	<i>50mg/ml/potassium</i>		<i>griseofulvin 250mg tab</i>	22
GLEOSTINE 10MG CAP	30	<i>chloride</i>		<i>griseofulvin 25mg/ml oral</i>	22
GLEOSTINE 40MG CAP	30	<i>0.02meq/ml/sodium</i>		<i>susp</i>	
<i>glimepiride 1mg tab</i>	21	<i>chloride 9mg/ml inj</i>		<i>griseofulvin 500mg tab</i>	22
<i>glimepiride 2mg tab</i>	21	<i>glucose</i>	67	<i>guanfacine 1mg er tab</i>	1
<i>glimepiride 4mg tab</i>	21	<i>50mg/ml/potassium</i>		<i>guanfacine 2mg er tab</i>	1
<i>glipizide 10mg er tab</i>	21	<i>chloride</i>		<i>guanfacine 3mg er tab</i>	1
<i>glipizide 10mg tab</i>	21	<i>0.03meq/ml/sodium</i>		<i>guanfacine 4mg er tab</i>	1
<i>glipizide 2.5mg er tab</i>	21	<i>chloride 4.5mg/ml inj</i>		GVOKE 0.5MG/0.1ML	19
<i>glipizide 5mg er tab</i>	21	<i>glucose</i>	67	AUTO-INJECTOR	
<i>glipizide 5mg tab</i>	21	<i>50mg/ml/potassium</i>		GVOKE 1MG/0.2ML	19
<i>glipizide/metformin</i>	18	<i>chloride</i>		AUTO-INJECTOR	
<i>2.5-250mg tab</i>		<i>0.04meq/ml/sodium</i>		GVOKE 1MG/0.2ML INJ	19
<i>glipizide/metformin</i>	18	<i>chloride 4.5mg/ml inj</i>		GVOKE 1MG/0.2ML	19
<i>2.5-500mg tab</i>		<i>glucose</i>	67	SYRINGE	
<i>glipizide/metformin</i>	19	<i>50mg/ml/potassium</i>		H	
<i>5-500mg tab</i>		<i>chloride</i>		HADLIMA 40MG/0.4ML	3
GLUCOSE	67	<i>0.04meq/ml/sodium</i>		AUTO-INJECTOR	
100MG/ML/SODIUM		<i>chloride 9mg/ml inj</i>		HADLIMA 40MG/0.4ML	3
CHLORIDE 2MG/ML INJ		GLUCOSE	67	SYRINGE	
GLUCOSE	67	50MG/ML/SODIUM		HADLIMA 40MG/0.8ML	3
100MG/ML/SODIUM		CHLORIDE 2MG/ML INJ		AUTO-INJECTOR	
CHLORIDE 4.5MG/ML		GLUCOSE	67	HADLIMA 40MG/0.8ML	3
INJ		50MG/ML/SODIUM		SYRINGE	
<i>glucose 50mg/ml inj</i>	71	CHLORIDE 4.5MG/ML		HAEGARDA 2000UNIT	65
<i>glucose</i>	67	INJ		INJ	
<i>50mg/ml/potassium</i>		<i>glucose 50mg/ml/sodium</i>	67	HAEGARDA 3000UNIT	65
<i>chloride</i>		<i>chloride 9mg/ml inj</i>		INJ	
<i>0.01meq/ml/sodium</i>		GLUCOSE/SODIUM	67	<i>hailey 24 fe tab 28-day</i>	60
<i>chloride 4.5mg/ml inj</i>		CHLORIDE		<i>pack</i>	
<i>glucose</i>	67	25MG/ML-4.5MG/ML		<i>halobetasol propionate</i>	54
<i>50mg/ml/potassium</i>		INJ		<i>0.05% cream</i>	
<i>chloride 0.02meq/ml inj</i>		<i>glutamine 5000mg</i>	64	<i>halobetasol propionate</i>	55
<i>glucose</i>	67	<i>powder for oral soln</i>		<i>0.05% ointment</i>	
<i>50mg/ml/potassium</i>		<i>glycopyrrolate 1mg tab</i>	80	<i>haloette</i>	60
<i>chloride</i>		<i>glycopyrrolate 2mg tab</i>	81	<i>0.120-0.015mg/24hr</i>	
<i>0.02meq/ml/sodium</i>		GLYXAMBI 10-5MG TAB	19	<i>vaginal system</i>	
<i>chloride 2.25mg/ml inj</i>		GLYXAMBI 25-5MG TAB	19	<i>haloperidol 0.5mg tab</i>	39

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>haloperidol 10mg tab</i>	39	HUMALOG MIX (75/25)	20	<i>hydrochlorothiazide/losar</i>	27
<i>haloperidol 1mg tab</i>	39	100UNIT/ML INJ		<i>tan potassium 12.5-50mg</i>	
<i>haloperidol 20mg tab</i>	39	HUMALOG MIX (75/25)	20	<i>tab</i>	
<i>haloperidol 2mg tab</i>	39	100UNIT/ML KWIKPEN		<i>hydrochlorothiazide/losar</i>	27
<i>haloperidol 2mg/ml oral</i>	39	HUMULIN (70/30)	20	<i>tan potassium 25-100mg</i>	
<i>soln</i>		100UNIT/ML INJ		<i>tab</i>	
<i>haloperidol 5mg tab</i>	39	HUMULIN (70/30)	20	<i>hydrochlorothiazide/meto</i>	27
<i>haloperidol 5mg/ml inj</i>	39	100UNIT/ML PEN INJ		<i>prolol tartrate 25-100mg</i>	
<i>haloperidol decanoate</i>	39	HUMULIN N	20	<i>tab</i>	
<i>100mg/ml (1ml) inj</i>		100UNIT/ML INJ		<i>hydrochlorothiazide/meto</i>	27
<i>haloperidol decanoate</i>	39	HUMULIN N	20	<i>prolol tartrate 25-50mg</i>	
<i>100mg/ml (5ml) inj</i>		100UNIT/ML PEN INJ		<i>tab</i>	
<i>haloperidol decanoate</i>	39	HUMULIN R	20	<i>hydrochlorothiazide/meto</i>	27
<i>50mg/ml (1ml) inj</i>		100UNIT/ML INJ		<i>prolol tartrate 50-100mg</i>	
<i>haloperidol decanoate</i>	39	HUMULIN R	20	<i>tab</i>	
<i>50mg/ml (5ml) inj</i>		500UNIT/ML INJ		<i>hydrochlorothiazide/olme</i>	27
HAVRIX 1440ELU/ML	82	HUMULIN R	21	<i>sartan medoxomil</i>	
SYRINGE		500UNIT/ML PEN INJ		<i>12.5-20mg tab</i>	
HAVRIX 720ELU/0.5ML	82	<i>hydralazine 100mg tab</i>	28	<i>hydrochlorothiazide/olme</i>	27
SYRINGE		<i>hydralazine 10mg tab</i>	28	<i>sartan medoxomil</i>	
<i>heather 0.35mg 28-day</i>	74	<i>hydralazine 25mg tab</i>	28	<i>12.5-40mg tab</i>	
<i>pack</i>		<i>hydralazine 50mg tab</i>	28	<i>hydrochlorothiazide/olme</i>	27
<i>heparin sodium porcine</i>	11	<i>hydrochlorothiazide</i>	57	<i>sartan medoxomil</i>	
<i>10000unit/ml inj</i>		<i>12.5mg cap</i>		<i>25-40mg tab</i>	
<i>heparin sodium porcine</i>	11	<i>hydrochlorothiazide</i>	57	<i>hydrochlorothiazide/spiro</i>	56
<i>1000unit/ml inj</i>		<i>12.5mg tab</i>		<i>nolactone 25-25mg tab</i>	
<i>heparin sodium porcine</i>	12	<i>hydrochlorothiazide</i>	57	<i>hydrochlorothiazide/telmi</i>	27
<i>20000unit/ml inj</i>		<i>25mg tab</i>		<i>sartan 12.5-40mg tab</i>	
<i>heparin sodium porcine</i>	12	<i>hydrochlorothiazide</i>	57	<i>hydrochlorothiazide/telmi</i>	27
<i>5000unit/ml inj</i>		<i>50mg tab</i>		<i>sartan 12.5-80mg tab</i>	
HEPLISAV-B	82	<i>hydrochlorothiazide/irbes</i>	27	<i>hydrochlorothiazide/telmi</i>	27
20MCG/0.5ML SYRINGE		<i>artan 12.5-150mg tab</i>		<i>sartan 25-80mg tab</i>	
HIBERIX 10MCG INJ	82	<i>hydrochlorothiazide/irbes</i>	27	<i>hydrochlorothiazide/tria</i>	56
HUMALOG 100UNIT/ML	20	<i>artan 12.5-300mg tab</i>		<i>mterene 25-37.5mg cap</i>	
CARTRIDGE		<i>hydrochlorothiazide/lisin</i>	27	<i>hydrochlorothiazide/tria</i>	56
HUMALOG 100UNIT/ML	20	<i>opril 12.5-10mg tab</i>		<i>mterene 25-37.5mg tab</i>	
KWIKPEN		<i>hydrochlorothiazide/lisin</i>	27	<i>hydrochlorothiazide/tria</i>	56
HUMALOG 200UNIT/ML	20	<i>opril 12.5-20mg tab</i>		<i>mterene 50-75mg tab</i>	
KWIKPEN		<i>hydrochlorothiazide/lisin</i>	27	<i>hydrochlorothiazide/vals</i>	27
HUMALOG JUNIOR	20	<i>opril 25-20mg tab</i>		<i>artan 12.5-160mg tab</i>	
100UNIT/ML PEN INJ		<i>hydrochlorothiazide/losar</i>	27	<i>hydrochlorothiazide/vals</i>	27
HUMALOG MIX (50/50)	20	<i>tan potassium</i>		<i>artan 12.5-320mg tab</i>	
100UNIT/ML PEN INJ		<i>12.5-100mg tab</i>		<i>hydrochlorothiazide/vals</i>	27
				<i>artan 12.5-80mg 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 25-160mg tab</i>	27	HYDROXYZINE	7	IMKELDI 80MG/ML	34
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	27	PAMOATE 100MG CAP		ORAL SOLN	
<i>hydrocodone</i>	5	<i>hydroxyzine pamoate 25mg cap</i>	7	IMOVAX 2.5UNIT/ML INJ	82
<i>bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>		<i>hydroxyzine pamoate 50mg cap</i>	7	<i>incassia 0.35mg tab</i>	74
<i>hydrocodone</i>	5			<i>28-day pack</i>	
<i>bitartrate/acetaminophen 10-325mg tab</i>				INCRELEX 40MG/4ML	58
<i>hydrocodone</i>	5			INJ	
<i>bitartrate/acetaminophen 5-325mg tab</i>				INCRUSE ELLIPTA	9
<i>hydrocodone</i>	5			62.5MCG/INH POWDER	
<i>bitartrate/acetaminophen 7.5-325mg tab</i>				INHALER	
<i>hydrocortisone 1% cream</i>	55			<i>indapamide 1.25mg tab</i>	57
<i>hydrocortisone 1.67mg/ml enema</i>	6			<i>indapamide 2.5mg tab</i>	57
<i>hydrocortisone 10mg tab</i>	51			INFANRIX SYRINGE	80
<i>hydrocortisone 2.5% cream</i>	6			INGREZZA 40MG CAP	76
<i>hydrocortisone 2.5% ointment</i>	55			INGREZZA 40MG	76
<i>hydrocortisone 20mg tab</i>	51			SPRINKLE CAP	
<i>hydrocortisone 5mg tab</i>	51			INGREZZA 60MG CAP	76
HYDROCORTISONE	55			INGREZZA 60MG	76
LOTION 2.5%				SPRINKLE CAP	
<i>hydromorphone 2mg tab</i>	4			INGREZZA 80MG CAP	76
<i>hydromorphone 4mg tab</i>	4			INGREZZA 80MG	76
<i>hydromorphone 8mg tab</i>	4			SPRINKLE CAP	
<i>hydroxychloroquine sulfate 100mg tab</i>	30			INGREZZA 80MG CAP	76
<i>hydroxychloroquine sulfate 200mg tab</i>	30			INGREZZA 80MG	76
<i>hydroxychloroquine sulfate 300mg tab</i>	30			SPRINKLE CAP	
<i>hydroxychloroquine sulfate 400mg tab</i>	30			INGREZZA CAP	76
<i>hydroxyurea 500mg cap</i>	37			THERAPY PACK (28)	
<i>hydroxyzine 10mg tab</i>	7			INLYTA 1MG TAB	31
<i>hydroxyzine 25mg tab</i>	7			INLYTA 5MG TAB	31
<i>hydroxyzine 50mg tab</i>	7			INQOVI 35-100MG TAB	32
				PACK (5)	
				INREBIC 100MG CAP	34
				INSULIN GLARGINE	21
				300UNIT/ML PEN INJ	
				(1.5ML)	
				INSULIN GLARGINE	21
				300UNIT/ML PEN INJ	
				(3ML)	
				INSULIN LISPRO	21
				100UNIT/ML INJ	
				INSULIN PEN NEEDLE	66
				INSULIN SYRINGE	66
				INSULIN SYRINGE	66
				(DISP) U-100 0.3ML	
				INSULIN SYRINGE	66
				(DISP) U-100 1/2ML	

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 1ML	66	<i>irbesartan 300mg tab</i>	25	<i>itraconazole 100mg cap</i>	22
INTELENCE 25MG TAB	44	<i>irbesartan 75mg tab</i>	25	<i>ivabradine 5mg tab</i>	49
<i>introvale tab 91-day pack</i>	60	ISENTRESS 100MG CHEW TAB	44	<i>ivabradine 7.5mg tab</i>	49
INVEGA HAFYERA 1092MG/3.5ML SYRINGE	40	ISENTRESS 100MG GRANULES FOR ORAL SUSP	44	<i>ivermectin 3mg tab</i>	6
INVEGA HAFYERA 1560MG/5ML SYRINGE	40	ISENTRESS 25MG CHEW TAB	44	IWILFIN 192MG TAB	38
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	40	ISENTRESS 400MG TAB	44	IXIARO 0.012MG/ML SYRINGE	82
INVEGA SUSTENNA 156MG/ML SYRINGE	40	ISENTRESS 600MG TAB	44	J	
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	40	<i>isibloom tab 28-day pack</i>	60	<i>jaimiess tab 91-day pack</i>	60
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	40	<i>isoniazid 100mg tab</i>	30	JAKAFI 10MG TAB	34
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	40	<i>isoniazid 10mg/ml oral soln</i>	30	JAKAFI 15MG TAB	34
INVEGA TRINZA 273MG/0.875ML SYRINGE	40	<i>isoniazid 300mg tab</i>	30	JAKAFI 20MG TAB	34
INVEGA TRINZA 410MG/1.315ML SYRINGE	40	<i>isosorbide dinitrate 10mg tab</i>	6	JAKAFI 25MG TAB	34
INVEGA TRINZA 546MG/1.75ML SYRINGE	40	<i>isosorbide dinitrate 20mg tab</i>	6	JAKAFI 5MG TAB	34
INVEGA TRINZA 819MG/2.625ML SYRINGE	40	<i>isosorbide dinitrate 30mg tab</i>	6	<i>jantoven 10mg tab</i>	11
IPOL INJ	82	<i>isosorbide dinitrate 5mg tab</i>	6	<i>jantoven 1mg tab</i>	11
<i>ipratropium bromide 0.02% inh soln</i>	9	ISOSORBIDE MONONITRATE 10MG TAB	6	<i>jantoven 2.5mg tab</i>	11
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	70	<i>isosorbide mononitrate 120mg er tab</i>	7	<i>jantoven 2mg tab</i>	11
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	70	ISOSORBIDE MONONITRATE 20MG TAB	7	<i>jantoven 3mg tab</i>	11
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	10	<i>isosorbide mononitrate 30mg er tab</i>	7	<i>jantoven 4mg tab</i>	11
<i>irbesartan 150mg tab</i>	25	<i>isosorbide mononitrate 60mg er tab</i>	7	<i>jantoven 5mg tab</i>	11
		<i>isotretinoin 10mg cap</i>	52	<i>jantoven 6mg tab</i>	11
		<i>isotretinoin 20mg cap</i>	52	<i>jantoven 7.5mg tab</i>	11
		<i>isotretinoin 30mg cap</i>	52	JANUMET 50-1000MG TAB	19
		<i>isotretinoin 40mg cap</i>	52	JANUMET 50-500MG TAB	19
		<i>isradipine 2.5mg cap</i>	48	JANUMET XR	19
		<i>isradipine 5mg cap</i>	48	JANUMET XR 100-1000MG TAB	19
		ITOVEBI 3MG TAB	34	JANUMET XR 50-500MG TAB	19
		ITOVEBI 9MG TAB	34	JANUVIA 100MG TAB	20
				JANUVIA 25MG TAB	20
				JANUVIA 50MG TAB	20
				JARDIANCE 10MG TAB	21
				JARDIANCE 25MG TAB	21
				<i>jasmiel tab 28-day pack</i>	60
				<i>javygtor 100mg powder for oral soln</i>	58
				<i>javygtor 100mg tab</i>	58
				<i>javygtor 500mg powder for oral soln</i>	58

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

ALPHABETICAL LISTING OF DRUGS

JAYPIRCA 100MG TAB	34	<i>kcl/nacl 20meq-0.45% inj</i>	67	KISQALI/FEMARA 600	32
JAYPIRCA 50MG TAB	34	<i>kcl/nacl 20meq-0.9% inj</i>	67	CO-PACK (91)	
JENTADUETO	19	<i>kcl/nacl 40meq-9% inj</i>	67	KLOR-CON 10MEQ ER	68
2.5-1000MG TAB		<i>kelnor 1mg-35mcg tab</i>	60	TAB	
JENTADUETO	19	<i>28-day pack</i>		<i>klor-con 10meq micro er</i>	68
2.5-500MG TAB		<i>kelnor tab 1/50 28-day</i>	60	<i>tab</i>	
JENTADUETO XR	19	<i>pack</i>		<i>klor-con 15meq micro er</i>	68
2.5-1000MG TAB		KERENDIA 10MG TAB	58	<i>tab</i>	
JENTADUETO XR	19	KERENDIA 20MG TAB	58	<i>klor-con 20meq micro er</i>	68
5-1000MG TAB		KESIMPTA 20MG/0.4ML	76	<i>tab</i>	
<i>jinteli 0.005-1mg tab</i>	60	PEN INJ		<i>klor-con 20meq powder</i>	68
JUBBONTI 60MG/ML	57	<i>ketoconazole 2% cream</i>	53	<i>for oral soln</i>	
SYRINGE		<i>ketoconazole 2%</i>	53	KLOR-CON 8MEQ ER	68
<i>juleber tab 28-day pack</i>	60	<i>shampoo</i>		TAB	
JULUCA 50-25MG TAB	44	<i>ketoconazole 200mg tab</i>	22	KLOXXADO 8MG/0.1ML	21
<i>junel 1.5/30 tab 21-day</i>	60	<i>ketorolac tromethamine</i>	72	NASAL SPRAY	
<i>pack</i>		<i>0.4% ophth soln</i>		KOSELUGO 10MG CAP	34
<i>junel 1/20 tab 21-day</i>	60	<i>ketorolac tromethamine</i>	72	KOSELUGO 25MG CAP	34
<i>pack</i>		<i>0.5% ophth soln</i>		<i>kourzeq 0.1% oral paste</i>	51
<i>junel fe 24 1/20 28-day</i>	60	<i>ketorolac tromethamine</i>	4	KRAZATI 200MG TAB	34
<i>pack</i>		<i>10mg tab</i>		<i>kurvelo tab 28-day pack</i>	60
<i>junel fe tab 1.5/30 28-day</i>	60	KEVZARA	3		
<i>pack</i>		150MG/1.14ML		L	
<i>junel fe tab 1/20 28-day</i>	60	AUTO-INJECTOR		<i>labetalol 100mg tab</i>	47
<i>pack</i>		KEVZARA	3	<i>labetalol 200mg tab</i>	47
JYLAMVO 2MG/ML	30	150MG/1.14ML		<i>labetalol 300mg tab</i>	47
ORAL SOLN		SYRINGE		<i>lacosamide 100mg tab</i>	13
JYNNEOS 0.5ML INJ	82	KEVZARA	3	<i>lacosamide 10mg/ml oral</i>	13
		200MG/1.14ML		<i>soln</i>	
K		AUTO-INJECTOR		<i>lacosamide 150mg tab</i>	13
KALETRA 80-20MG/ML	44	KEVZARA	3	<i>lacosamide 200mg tab</i>	13
ORAL SOLN		200MG/1.14ML		<i>lacosamide 50mg tab</i>	13
KALYDECO 13.4MG	77	SYRINGE		<i>lactulose 667mg/ml oral</i>	66
ORAL GRANULES		KINRIX SYRINGE	80	<i>soln</i>	
KALYDECO 150MG TAB	77	<i>kionex 15gm/60ml susp</i>	69	<i>lamivudine 100mg tab</i>	46
KALYDECO 25MG ORAL	77	KISQALI TAB 200MG	34	<i>lamivudine 10mg/ml oral</i>	44
GRANULES		DAILY DOSE PACK (21)		<i>soln</i>	
KALYDECO 5.8MG	77	KISQALI TAB 400MG	34	<i>lamivudine 150mg tab</i>	45
ORAL GRANULES		DAILY DOSE PACK (42)		<i>lamivudine 300mg tab</i>	45
KALYDECO 50MG ORAL	77	KISQALI TAB 600MG	34	<i>lamivudine/zidovudine</i>	45
GRANULES		DAILY DOSE PACK (63)		<i>150-300mg tab</i>	
KALYDECO 75MG ORAL	77	KISQALI/FEMARA 400	32	<i>lamotrigine 100mg tab</i>	13
GRANULES		CO-PACK (70)		<i>lamotrigine 150mg tab</i>	13
<i>kariva tab 28-day pack</i>	60			<i>lamotrigine 200mg tab</i>	13
KCL/D5W/LR INJ 0.15%	67				

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

ALPHABETICAL LISTING OF DRUGS

<i>lamotrigine 25mg chew tab</i>	13	LENVIMA 4MG DAILY DOSE PACK (30)	31	<i>levonest tab 28-day pack</i>	60
<i>lamotrigine 25mg tab</i>	13	LENVIMA 8MG DAILY DOSE PACK (60)	31	<i>levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack</i>	60
<i>lamotrigine 5mg chew tab</i>	13	<i>lessina tab 28-day pack</i>	60	<i>levora 0.15/30 tab 28-day pack</i>	60
<i>lansoprazole 15mg dr cap</i>	81	<i>letrozole 2.5mg tab</i>	32		
<i>lansoprazole 30mg dr cap</i>	81	<i>leucovorin 10mg tab</i>	38	<i>levothyroxine sodium 100mcg tab</i>	79
LANTUS 100UNIT/ML INJ	21	<i>leucovorin 15mg tab</i>	38	<i>levothyroxine sodium 112mcg tab</i>	79
LANTUS 100UNIT/ML PEN INJ	21	<i>leucovorin 25mg tab</i>	38	<i>levothyroxine sodium 125mcg tab</i>	79
<i>lapatinib 250mg tab</i>	34	<i>leucovorin 5mg tab</i>	38	<i>levothyroxine sodium 137mcg tab</i>	79
<i>larin 1.5/30 tab 21-day pack</i>	60	LEUKERAN 2MG TAB	30	<i>levothyroxine sodium 150mcg tab</i>	79
<i>larin 1/20 tab 21-day pack</i>	60	<i>levalbuterol 0.31mg/3ml neb soln</i>	10	<i>levothyroxine sodium 175mcg tab</i>	79
<i>larin fe tab 1.5/30 28-day pack</i>	60	<i>levalbuterol 0.63mg/3ml inh soln</i>	10	<i>levothyroxine sodium 200mcg tab</i>	79
<i>larin fe tab 1/20 28-day pack</i>	60	<i>levalbuterol 1.25mg/3ml neb soln</i>	10	<i>levothyroxine sodium 25mcg tab</i>	79
<i>latanoprost 0.005% ophth soln</i>	73	LEVALBUTEROL 45MCG/ACT INHALER	10	<i>levothyroxine sodium 300mcg tab</i>	79
LAZCLUZE 240MG TAB	31	<i>levetiracetam 1000mg tab</i>	13	<i>levothyroxine sodium 50mcg tab</i>	79
LAZCLUZE 80MG TAB	31	<i>levetiracetam 100mg/ml oral soln</i>	13	<i>levothyroxine sodium 75mcg tab</i>	79
<i>leflunomide 10mg tab</i>	2	<i>levetiracetam 250mg tab</i>	13	<i>levothyroxine sodium 88mcg tab</i>	79
<i>leflunomide 20mg tab</i>	2	<i>levetiracetam 500mg er tab</i>	13	<i>levoxyl 100mcg tab</i>	79
<i>lenalidomide 10mg cap</i>	68	<i>levetiracetam 500mg tab</i>	13	<i>levoxyl 112mcg tab</i>	79
<i>lenalidomide 15mg cap</i>	68	<i>levetiracetam 750mg er tab</i>	13	<i>levoxyl 125mcg tab</i>	80
<i>lenalidomide 2.5mg cap</i>	68	<i>levetiracetam 750mg tab</i>	13	<i>levoxyl 137mcg tab</i>	80
<i>lenalidomide 20mg cap</i>	69	LEVOBUNOLOL 0.5% OPTH SOLN	71	<i>levoxyl 150mcg tab</i>	80
<i>lenalidomide 25mg cap</i>	69	<i>levocarnitine 100mg/ml oral soln</i>	58	<i>levoxyl 175mcg tab</i>	80
<i>lenalidomide 5mg cap</i>	69	<i>levocarnitine 330mg tab</i>	58	<i>levoxyl 200mcg tab</i>	80
LENVIMA 10MG DAILY DOSE PACK (30)	31	<i>levocetirizine 5mg tab</i>	78	<i>levoxyl 25mcg tab</i>	80
LENVIMA 12MG DAILY DOSE PACK (90)	31	<i>levofloxacin 250mg tab</i>	63	<i>levoxyl 50mcg tab</i>	80
LENVIMA 14MG DAILY DOSE PACK (60)	31	<i>levofloxacin 25mg/ml oral soln</i>	63	<i>levoxyl 75mcg tab</i>	80
LENVIMA 18MG DAILY DOSE PACK (90)	31	<i>levofloxacin 500mg tab</i>	63	<i>levoxyl 88mcg tab</i>	80
LENVIMA 20MG DAILY DOSE PACK (60)	31	<i>levofloxacin 500mg/100ml inj</i>	63	<i>lidocaine 4% mucous membrane topical soln</i>	55
LENVIMA 24MG DAILY DOSE PACK (90)	31	<i>levofloxacin 750mg tab</i>	63		
		<i>levofloxacin 750mg/150ml inj</i>	63		

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

ALPHABETICAL LISTING OF DRUGS

<i>lidocaine 5% ointment</i>	55	<i>lisinopril 40mg tab</i>	24	<i>loryna tab 28-day pack</i>	61
<i>lidocaine 5% patch</i>	55	<i>lisinopril 5mg tab</i>	24	<i>losartan potassium</i>	25
<i>lidocaine viscous 2%</i>	51	LITFULO 50MG CAP	69	<i>100mg tab</i>	
<i>mucous membrane topical soln</i>		<i>lithium carbonate 150mg cap</i>	39	<i>losartan potassium 25mg tab</i>	25
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	55	<i>lithium carbonate 300mg cap</i>	39	<i>losartan potassium 50mg tab</i>	25
<i>lidocan 5% patch</i>	55	<i>lithium carbonate 300mg er tab</i>	39	<i>loteprednol etabonate 0.5% ophth gel</i>	72
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	74	<i>lithium carbonate 300mg tab</i>	39	<i>loteprednol etabonate 0.5% ophth susp</i>	72
<i>linezolid 100mg/5ml oral susp</i>	29	<i>lithium carbonate 450mg er tab</i>	39	<i>lovastatin 10mg tab</i>	24
<i>linezolid 600mg tab</i>	29	LITHIUM CARBONATE 600MG CAP	39	<i>lovastatin 20mg tab</i>	24
<i>linezolid 600mg/300ml inj</i>	29	<i>lithium citrate 60mg/ml oral soln</i>	39	<i>lovastatin 40mg tab</i>	24
LINZESS 145MCG CAP	66	LIVTENCITY 200MG TAF	45	<i>low-ogestrel tab 28-day pack</i>	61
LINZESS 290MCG CAP	66	<i>lo jaimiess tab 91-day pack</i>	60	<i>loxapine 10mg cap</i>	41
LINZESS 72MCG CAP	66	<i>loestrin fe tab 1/20 28-day pack</i>	60	<i>loxapine 25mg cap</i>	41
<i>liothyronine sodium 25mcg tab</i>	80	LOKELMA 10GM POWDER FOR ORAL SUSP	70	<i>loxapine 50mg cap</i>	41
<i>liothyronine sodium 50mcg tab</i>	80	LOKELMA 5GM POWDER FOR ORAL SUSP	70	<i>loxapine 5mg cap</i>	41
<i>liothyronine sodium 5mcg tab</i>	80	LONSURF 6.14-15MG TAB	32	<i>lubiprostone 24mcg cap</i>	66
<i>liraglutide 18mg/3ml pen inj</i>	20	LONSURF 8.19-20MG TAB	32	<i>lubiprostone 8mcg cap</i>	66
<i>lisdexamfetamine dimesylate 10mg cap</i>	1	<i>loperamide 2mg cap</i>	21	LUMAKRAS 120MG TAB	34
<i>lisdexamfetamine dimesylate 20mg cap</i>	1	<i>lopinavir/ritonavir 100-25mg tab</i>	45	LUMAKRAS 240MG TAB	34
<i>lisdexamfetamine dimesylate 30mg cap</i>	1	<i>lopinavir/ritonavir 200-50mg tab</i>	45	LUMAKRAS 320MG TAB	34
<i>lisdexamfetamine dimesylate 40mg cap</i>	1	<i>lorazepam 0.5mg tab</i>	7	LUMIGAN 0.01% OPHTH SOLN	73
<i>lisdexamfetamine dimesylate 50mg cap</i>	1	<i>lorazepam 1mg tab</i>	7	LUMRYZ 28-DAY STARTER PACK (28)	78
<i>lisdexamfetamine dimesylate 60mg cap</i>	1	<i>lorazepam 2mg tab</i>	7	LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	78
<i>lisdexamfetamine dimesylate 70mg cap</i>	1	<i>lorazepam 2mg/ml oral soln</i>	7	LUMRYZ 6GM GRANULES FOR ORAL SUSP	78
<i>lisinopril 10mg tab</i>	24	LORBRENA 100MG TAB	34	LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	78
<i>lisinopril 2.5mg tab</i>	24	LORBRENA 25MG TAB	34	LUPKYNIS 7.9MG CAP	69
<i>lisinopril 20mg tab</i>	24			LUPRON 11.25MG SYRINGE (3 MONTH)	32
<i>lisinopril 30mg tab</i>	24				

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

ALPHABETICAL LISTING OF DRUGS

LUPRON 3.75MG SYRINGE (1 MONTH)	32	MAVYRET 50-20MG ORAL PELLET	46	memantine 2mg/ml oral soln	75
<i>lurasidone 120mg tab</i>	39	MAYZENT 0.25MG TAB	76	<i>memantine 5mg tab</i>	75
<i>lurasidone 20mg tab</i>	39	MAYZENT 1MG TAB	76	<i>memantine 7mg er cap</i>	75
<i>lurasidone 40mg tab</i>	39	MAYZENT 2MG TAB	76	MENQUADFI INJ	82
<i>lurasidone 60mg tab</i>	39	MAYZENT TAB STARTEI	76	MENVEO INJ	82
<i>lurasidone 80mg tab</i>	39	PACK (12)		<i>mercaptopurine 20mg/ml susp</i>	30
<i>luteru tab 28-day pack</i>	61	MAYZENT TAB STARTEI	76	<i>mercaptopurine 50mg tab</i>	30
<i>lyleq 0.35mg tab 28-day pack</i>	74	PACK (7)		<i>meropenem 1gm inj</i>	29
<i>lyllana 0.025mg/24hr twice weekly patch</i>	62	<i>meclizine 12.5mg tab</i>	22	<i>meropenem 500mg inj</i>	29
<i>lyllana 0.0375mg/24hr twice weekly patch</i>	62	<i>meclizine 25mg tab</i>	22	<i>mesalamine 1gm rectal supp</i>	63
<i>lyllana 0.05mg/24hr twice weekly patch</i>	62	<i>medroxyprogesterone acetate 10mg tab</i>	74	<i>mesalamine 375mg er cap</i>	63
<i>lyllana 0.075mg/24hr twice weekly patch</i>	62	<i>medroxyprogesterone acetate 150mg/ml inj</i>	74	<i>mesalamine 66.7mg/ml enema</i>	63
<i>lyllana 0.1mg/24hr twice weekly patch</i>	62	<i>medroxyprogesterone acetate 150mg/ml syringe</i>	74	<i>mesna 400mg tab</i>	38
LYNPARZA 100MG TAB	34	<i>medroxyprogesterone acetate 2.5mg tab</i>	74	<i>metaxalone 800mg tab</i>	70
LYNPARZA 150MG TAB	34	<i>medroxyprogesterone acetate 5mg tab</i>	74	<i>metformin 1000mg tab</i>	19
LYSODREN 500MG TAB	32	<i>mefloquine 250mg tab</i>	30	<i>metformin 500mg er tab</i>	19
LYTGOBI TAB 12MG	34	MEGESTROL ACETATE 125MG/ML SUSP	75	<i>metformin 500mg tab</i>	19
DAILEY DOSE PACK (21)		<i>megestrol acetate 20mg tab</i>	32	<i>metformin 750mg er tab</i>	19
LYTGOBI TAB 16MG	34	<i>megestrol acetate 40mg tab</i>	32	<i>metformin 850mg tab</i>	19
DAILEY DOSE PACK (28)		<i>megestrol acetate 40mg/ml oral susp</i>	32	<i>methadone 10mg tab</i>	4
LYTGOBI TAB 20MG	34	MEKINIST 0.05MG/ML ORAL SOLN	35	METHADONE 1MG/ML ORAL SOLN	4
DAILEY DOSE PACK (35)		MEKINIST 0.5MG TAB	35	METHADONE 2MG/ML ORAL SOLN	4
<i>lyza 0.35mg tab 28-day pack</i>	74	MEKINIST 2MG TAB	35	<i>methadone 5mg tab</i>	4
M		MEKTOVI 15MG TAB	35	<i>methazolamide 25mg tab</i>	56
MAGNESIUM SULFATE 500MG/ML INJ	68	<i>meleya 0.35mg tab 28-day pack</i>	75	<i>methazolamide 50mg tab</i>	56
<i>magnesium sulfate 500mg/ml syringe</i>	68	<i>meloxicam 15mg tab</i>	4	<i>methenamine hippurate 1gm tab</i>	29
<i>malathion 0.5% lotion</i>	55	<i>meloxicam 7.5mg tab</i>	4	<i>methimazole 10mg tab</i>	79
<i>maraviroc 150mg tab</i>	45	<i>memantine 10mg tab</i>	75	<i>methimazole 5mg tab</i>	79
<i>maraviroc 300mg tab</i>	45	<i>memantine 14mg er cap</i>	75	<i>methocarbamol 500mg tab</i>	70
<i>marlissa tab 28-day pack</i>	61	<i>memantine 21mg er cap</i>	75	<i>methocarbamol 750mg tab</i>	70
MARPLAN 10MG TAB	16	<i>memantine 28mg er cap</i>	75	<i>methotrexate 2.5mg tab</i>	30
MATULANE 50MG CAP	37			METHOTREXATE 25MG/ML INJ	30
MAVYRET 100-40MG TAB	46			<i>methotrexate 50mg/2ml inj</i>	30

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

ALPHABETICAL LISTING OF DRUGS

METHOXSALLEN 10MG CAP	53	metolazone 10mg tab	57	microgestin fe tab 1.5/30 28-day pack	61
methsuximide 300mg cap	15	metolazone 2.5mg tab	57	microgestin fe tab 1/20 28-day pack	61
methylphenidate 10mg er tab	2	metolazone 5mg tab	57	midodrine 10mg tab	49
methylphenidate 10mg tab	2	metoprolol succinate 100mg er tab	47	midodrine 2.5mg tab	49
methylphenidate 18mg er osmotic tab	2	metoprolol succinate 200mg er tab	47	midodrine 5mg tab	49
methylphenidate 1mg/ml oral soln	2	metoprolol succinate 25mg er tab	47	mifepristone 300mg tab	19
methylphenidate 20mg er tab	2	metoprolol succinate 50mg er tab	47	mili tab 28-day pack	61
methylphenidate 20mg tab	2	metoprolol tartrate 100mg tab	47	mimvey 28-day pack	61
methylphenidate 27mg er osmotic tab	2	metoprolol tartrate 25mg tab	47	minocycline 100mg cap	79
methylphenidate 27mg er tab	2	metoprolol tartrate 37.5mg tab	47	minocycline 50mg cap	79
methylphenidate 2mg/ml oral soln	2	metoprolol tartrate 50mg tab	47	minocycline 75mg cap	79
methylphenidate 36mg er osmotic tab	2	metoprolol tartrate 75mg tab	47	minoxidil 10mg tab	28
methylphenidate 36mg er tab	2	metronidazole 0.75% cream	55	minoxidil 2.5mg tab	28
methylphenidate 54mg er osmotic tab	2	metronidazole 0.75% gel	55	mirabegron 25mg er tab	81
methylphenidate 54mg er tab	2	metronidazole 0.75% vaginal gel	83	mirabegron 50mg er tab	82
methylphenidate 5mg tab	2	metronidazole 1% gel	55	mirtazapine 15mg odt	16
methylprednisolone 16mg tab	51	metronidazole 250mg tab	29	mirtazapine 15mg tab	16
methylprednisolone 32mg tab	51	metronidazole 500mg tab	29	mirtazapine 30mg odt	16
methylprednisolone 4mg tab	51	metronidazole 5mg/ml inj	29	mirtazapine 30mg tab	16
methylprednisolone 4mg tab pack (21)	51	metyrosine 250mg cap	28	mirtazapine 45mg odt	16
methylprednisolone 8mg tab	51	mexiletine 150mg cap	8	mirtazapine 45mg tab	16
metoclopramide 10mg tab	63	mexiletine 200mg cap	8	mirtazapine 7.5mg tab	16
metoclopramide 1mg/ml oral soln	63	mexiletine 250mg cap	8	misoprostol 100mcg tab	81
metoclopramide 5mg tab	63	mibelas 24 fe chewable tab 28-day pack	61	misoprostol 200mcg tab	81
		micafungin sodium 100mg inj	22	M-M-R II INJ	82
		micafungin sodium 50mg inj	22	modafinil 100mg tab	2
		microgestin 1.5/30 tab 21-day pack	61	modafinil 200mg tab	2
		microgestin 1/20 tab 21-day pack	61	moexipril 15mg tab	24
				moexipril 7.5mg tab	25
				MOLINDONE 10MG TAB	39
				MOLINDONE 25MG TAB	40
				MOLINDONE 5MG TAB	40
				mometasone furoate 0.1% cream	55
				mometasone furoate 0.1% lotion	55
				mometasone furoate 0.1% ointment	55
				montelukast 10mg tab	9
				montelukast 4mg chew tab	9

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

ALPHABETICAL LISTING OF DRUGS

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

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

ALPHABETICAL LISTING OF DRUGS

<i>neo-polycin</i>	71	<i>nitrofurantoin</i>	29	<i>nortrel 0.5/35 tab 28-day pack</i>	61
<i>5mg-400unit-10000unit ophth ointment</i>		<i>macrocrystals 100mg cap</i>		<i>nortrel 1/35 tab 21-day pack</i>	61
<i>neo-polycin hc ophth ointment</i>	72	<i>nitrofurantoin</i>	29	<i>nortrel 1/35 tab 28-day pack</i>	61
NERLYNX 40MG TAB	35	<i>nitroglycerin 0.1mg/hr patch</i>	7	<i>nortrel 7/7/7 tab 28-day pack</i>	61
NEVIRAPINE 10MG/ML ORAL SUSP	45	<i>nitroglycerin 0.2mg/hr patch</i>	7	<i>nortriptyline 10mg cap</i>	18
<i>nevirapine 200mg tab</i>	45	<i>nitroglycerin 0.3mg sl tab</i>	7	<i>nortriptyline 25mg cap</i>	18
<i>nevirapine 400mg er tab</i>	45	<i>nitroglycerin 0.4% rectal ointment</i>	6	<i>nortriptyline 2mg/ml oral soln</i>	18
NEXLETOL 180MG TAB	23	<i>nitroglycerin 0.4mg sl tab</i>	7	<i>nortriptyline 50mg cap</i>	18
NEXLIZET 180-10MG TAB	23	<i>nitroglycerin 0.4mg/hr patch</i>	7	<i>nortriptyline 75mg cap</i>	18
NEXPLANON 68MG IMPLANT	75	<i>nitroglycerin 0.6mg sl tab</i>	7	NORVIR 100MG ORAL POWDER	45
<i>niacin 1000mg er tab</i>	23	<i>nitroglycerin 0.6mg/hr patch</i>	7	NUBEQA 300MG TAB	32
<i>niacin 500mg er tab</i>	23	NIVESTYM	64	NUCALA 100MG INJ	8
<i>niacin 750mg er tab</i>	23	300MCG/0.5ML SYRINGE		NUCALA 100MG/ML AUTO-INJECTOR	8
NICOTROL 10MG/ML NASAL INHALER	77	NIVESTYM 300MCG/ML INJ	65	NUCALA 100MG/ML SYRINGE	8
<i>nifedipine 30mg er tab</i>	48	NIVESTYM	65	NUCALA 40MG/0.4ML SYRINGE	8
<i>nifedipine 30mg osmotic er tab</i>	48	480MCG/0.8ML SYRINGE		NUDEXTA 20-10MG CAP	77
<i>nifedipine 60mg er tab</i>	48	NIVESTYM	65	NUPLAZID 10MG TAB	40
<i>nifedipine 60mg osmotic er tab</i>	48	480MCG/1.6ML INJ		NUPLAZID 34MG CAP	40
<i>nifedipine 90mg er tab</i>	48	<i>nora-be 0.35mg tab 28-day pack</i>	75	<i>nyamyc 100000unit/gm topical powder</i>	53
<i>nifedipine 90mg osmotic er tab</i>	48	NORDITROPIN	57	<i>nylia 1/35 tab 28-day pack</i>	61
<i>nikki tab 28-day pack</i>	61	10MG/1.5ML PEN INJ		<i>nylia 7/7/7 tab 28-day pack</i>	61
<i>nilotinib 150mg cap</i>	35	NORDITROPIN	57	<i>nystatin 100000 unit/gm ointment</i>	53
<i>nilotinib 200mg cap</i>	35	15MG/1.5ML PEN INJ		<i>nystatin 100000unit/gm topical powder</i>	53
<i>nilotinib 50mg cap</i>	35	NORDITROPIN	57	<i>nystatin 100000unit/ml cream</i>	53
<i>nilutamide 150mg tab</i>	32	30MG/3ML PEN INJ		<i>nystatin 100000unit/ml oral susp</i>	51
<i>nimodipine 30mg cap</i>	48	NORDITROPIN	57	<i>nystatin 500000unit tab</i>	22
NINLARO 2.3MG CAP	35	5MG/1.5ML PEN INJ			
NINLARO 3MG CAP	35	<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	61		
NINLARO 4MG CAP	35	<i>norethindrone 0.35mg 28-day pack</i>	75		
<i>nitazoxanide 500mg tab</i>	29	<i>norethindrone acetate 5mg tab</i>	75		
NITRO-BID 2%	7				
OINTMENT					
<i>nitrofurantoin</i>	29				
<i>macro/nitrofurantoin mono 100mg cap</i>					

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

ALPHABETICAL LISTING OF DRUGS

<i>nystatin/triamcinolone</i>	53	OJJAARA 100MG TAB	35	ONUREG 300MG TAB	31
<i>acetonide 100000-0.1</i>		OJJAARA 150MG TAB	35	OPIPZA 10MG ORAL	43
<i>unit/gm-% ointment</i>		OJJAARA 200MG TAB	35	FILM	
<i>nystatin/triamcinolone</i>	53	<i>olanzapine 10mg inj</i>	41	OPIPZA 2MG ORAL	43
<i>acetonide</i>		<i>olanzapine 10mg odt</i>	41	FILM	
<i>100000-0.1unit/gm-%</i>		<i>olanzapine 10mg tab</i>	41	OPIPZA 5MG ORAL	43
<i>cream</i>		<i>olanzapine 15mg odt</i>	41	FILM	
<i>nystop 100000unit/gm</i>	53	<i>olanzapine 15mg tab</i>	41	OPSUMIT 10MG TAB	78
<i>topical powder</i>		<i>olanzapine 2.5mg tab</i>	41	OPVEE 2.7MG/0.1ML	21
NYVEPRIA 6MG/0.6ML	65	<i>olanzapine 20mg odt</i>	42	NASAL SPRAY	
SYRINGE		<i>olanzapine 20mg tab</i>	42	ORENCIA 125MG/ML	4
O		<i>olanzapine 5mg odt</i>	42	AUTO-INJECTOR	
<i>ocella tab 28-day pack</i>	61	<i>olanzapine 5mg tab</i>	42	ORENCIA 125MG/ML	4
OCTAGAM 1GM/20ML	73	<i>olanzapine 7.5mg tab</i>	42	SYRINGE	
INJ		<i>olmesartan medoxomil</i>	25	ORENCIA 50MG/0.4ML	4
OCTAGAM 2GM/20ML	73	<i>20mg tab</i>		SYRINGE	
INJ		<i>olmesartan medoxomil</i>	25	ORENCIA 87.5MG/0.7ML	4
<i>octreotide 0.05mg/ml inj</i>	58	<i>40mg tab</i>		SYRINGE	
<i>octreotide 0.1mg/ml inj</i>	58	<i>olmesartan medoxomil</i>	25	ORGOVYX 120MG TAB	32
<i>octreotide 0.2mg/ml inj</i>	58	<i>5mg tab</i>		ORKAMBI 125-100MG	77
<i>octreotide 0.5mg/ml inj</i>	58	<i>olopatadine 0.6%</i>	70	ORAL GRANULES	
<i>octreotide 1mg/ml inj</i>	58	<i>(0.665mg/act) nasal</i>		ORKAMBI 125-100MG	77
ODEFSEY 200-25-25MG	45	<i>inhaler</i>		TAB	
TAB		OLUMIANT 1MG TAB	2	ORKAMBI 125-200MG	77
ODOMZO 200MG CAP	31	OLUMIANT 2MG TAB	2	TAB	
OFEV 100MG CAP	77	OLUMIANT 4MG TAB	2	ORKAMBI 188-150MG	77
OFEV 150MG CAP	77	<i>omega-3 acid ethyl esters</i>	23	ORAL GRANULES	
<i>ofloxacin 0.3% ophth soln</i>	72	<i>(usp) 1gm cap</i>		ORKAMBI 94-75MG	77
<i>ofloxacin 0.3% otic soln</i>	73	<i>omeprazole 10mg dr cap</i>	81	ORAL GRANULES	
OGSIVEO 100MG TAB	35	<i>omeprazole 20mg dr cap</i>	81	<i>orphenadrine citrate</i>	70
7-DAY PACK (14)		<i>omeprazole 40mg dr cap</i>	81	<i>100mg er tab</i>	
OGSIVEO 150MG TAB	35	OMNITROPE	57	<i>orquidea 0.35mg tab</i>	75
7-DAY PACK (14)		10MG/1.5ML		<i>28-day pack</i>	
OGSIVEO 50MG TAB	35	CARTRIDGE		ORSERDU 345MG TAB	32
OJEMDA 100MG TAB	35	OMNITROPE 5.8MG INJ	57	ORSERDU 86MG TAB	32
OJEMDA 100MG TAB	35	OMNITROPE	57	<i>oseltamivir 30mg cap</i>	46
PACK (400MG ONCE		5MG/1.5ML CARTRIDGE		<i>oseltamivir 45mg cap</i>	46
WEEKLY) (16)		<i>ondansetron 0.8mg/ml</i>	22	<i>oseltamivir 6mg/ml oral</i>	46
OJEMDA 100MG TAB	35	<i>oral soln</i>		<i>susp</i>	
PACK (600MG ONCE		<i>ondansetron 4mg odt</i>	22	<i>oseltamivir 75mg cap</i>	46
WEEKLY) (24)		<i>ondansetron 4mg tab</i>	22	OTEZLA 20MG TAB	53
OJEMDA 25MG/ML	35	<i>ondansetron 8mg odt</i>	22	OTEZLA 30MG TAB	53
POWDER FOR ORAL		<i>ondansetron 8mg tab</i>	22	OTEZLA TAB 28-DAY	53
SUSP		ONUREG 200MG TAB	31	STARTER PACK (55)	

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

ALPHABETICAL LISTING OF DRUGS

<i>oxacillin 100mg/ml inj</i>	74	<i>paliperidone 3mg er tab</i>	40	PEGASYS 180MCG/ML	46
<i>oxacillin 1gm inj</i>	74	<i>paliperidone 6mg er tab</i>	40	INJ	
<i>oxacillin 2gm inj</i>	74	<i>paliperidone 9mg er tab</i>	40	PEMAZYRE 13.5MG TAB	35
<i>oxcarbazepine 150mg tab</i>	13	PANRETIN 0.1% GEL	53	PEMAZYRE 4.5MG TAB	35
<i>oxcarbazepine 300mg tab</i>	13	<i>pantoprazole 20mg dr tab</i>	81	PEMAZYRE 9MG TAB	35
<i>oxcarbazepine 600mg tab</i>	13	<i>pantoprazole 40mg dr tab</i>	81	PENBRAYA INJ	82
<i>oxcarbazepine 60mg/ml</i>	13	<i>paricalcitol 1mcg cap</i>	58	<i>penicillamine 250mg tab</i>	68
<i>oral susp</i>		<i>paricalcitol 2mcg cap</i>	58	<i>penicillin g potassium</i>	73
<i>oxybutynin chloride 10mg</i>	81	<i>paricalcitol 4mcg cap</i>	58	<i>1000000unit/ml inj</i>	
<i>er tab</i>		<i>paroxetine 10mg tab</i>	16	PENICILLIN G SODIUM	73
<i>oxybutynin chloride 15mg</i>	81	PAROXETINE 10MG/ML	16	100000UNIT/ML INJ	
<i>er tab</i>		SUSP		<i>penicillin v potassium</i>	74
<i>oxybutynin chloride</i>	81	<i>paroxetine 12.5mg er tab</i>	16	<i>250mg tab</i>	
<i>1mg/ml oral soln</i>		<i>paroxetine 20mg tab</i>	16	PENICILLIN V	74
<i>oxybutynin chloride 5mg</i>	81	<i>paroxetine 25mg er tab</i>	16	POTASSIUM 25MG/ML	
<i>er tab</i>		<i>paroxetine 30mg tab</i>	16	ORAL SOLN	
<i>oxybutynin chloride 5mg</i>	81	<i>paroxetine 37.5mg er tab</i>	17	<i>penicillin v potassium</i>	74
<i>tab</i>		<i>paroxetine 40mg tab</i>	17	<i>500mg tab</i>	
<i>oxycodone 10mg tab</i>	5	PAXLOVID	46	PENICILLIN V	74
<i>oxycodone 15mg tab</i>	5	150MG/100MG TAB		POTASSIUM 50MG/ML	
<i>oxycodone 1mg/ml oral</i>	5	PACK (20)		ORAL SOLN	
<i>soln</i>		PAXLOVID	46	PENMENVY INJ	82
<i>oxycodone 20mg tab</i>	5	150MG/100MG TAB		PENTACEL	80
<i>oxycodone 30mg tab</i>	5	PACK (30)		96-30-68UNIT/ML INJ	
<i>oxycodone 5mg tab</i>	5	PAXLOVID	46	<i>pentamidine isethionate</i>	29
<i>oxycodone/acetaminophe</i>	5	300MG/100MG AND		<i>300mg inj</i>	
<i>n 10-325mg tab</i>		150MG/100MG TAB		<i>pentamidine isethionate</i>	29
<i>oxycodone/acetaminophe</i>	5	DOSE PACK (11)		<i>300mg/6ml inh soln</i>	
<i>n 2.5-325mg tab</i>		<i>pazopanib 200mg tab</i>	35	<i>pentoxifylline 400mg er</i>	49
<i>oxycodone/acetaminophe</i>	5	PEDIARIX SYRINGE	80	<i>tab</i>	
<i>n 5-325mg tab</i>		PEDVAXHIB	82	<i>perampanel 10mg tab</i>	13
<i>oxycodone/acetaminophe</i>	5	7.5MCG/0.5ML INJ		<i>perampanel 12mg tab</i>	13
<i>n 7.5-325mg tab</i>		<i>peg 3350 powder for oral</i>	66	<i>perampanel 2mg tab</i>	13
OZEMPIC 2.68MG/ML	20	<i>soln (100gm Moviprep</i>		<i>perampanel 4mg tab</i>	14
PEN INJ		<i>equiv)</i>		<i>perampanel 6mg tab</i>	14
OZEMPIC 2MG/3ML	20	<i>peg 3350/electrolyte</i>	66	<i>perampanel 8mg tab</i>	14
PEN INJ		<i>powder for oral soln</i>		PERINDOPRIL	25
OZEMPIC 4MG/3ML	20	<i>peg 3350/kcl/sodium</i>	66	ERBUMINE 2MG TAB	
PEN INJ		<i>bicarbonate/sodium</i>		<i>perindopril erbumine</i>	25
P		<i>chloride powder for oral</i>		<i>4mg tab</i>	
<i>pacerone 100mg tab</i>	8	<i>soln</i>		PERINDOPRIL	25
<i>pacerone 200mg tab</i>	8	PEGASYS	46	ERBUMINE 8MG TAB	
<i>pacerone 400mg tab</i>	8	180MCG/0.5ML		<i>periogard 0.12%</i>	51
<i>paliperidone 1.5mg er tab</i>	40	SYRINGE		<i>mouthwash</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>permethrin 5% cream</i>	55	<i>piperacillin/tazobactam</i>	74	<i>potassium chloride</i>	68
<i>perphenazine 16mg tab</i>	42	<i>2000-250mg inj</i>		<i>1.33meq/ml oral soln</i>	
<i>perphenazine 2mg tab</i>	42	<i>piperacillin/tazobactam</i>	74	<i>potassium chloride</i>	68
<i>perphenazine 4mg tab</i>	42	<i>3000-375mg inj</i>		<i>10meq er cap</i>	
<i>perphenazine 8mg tab</i>	42	<i>piperacillin/tazobactam</i>	74	<i>potassium chloride</i>	68
<i>PERSERIS 120MG</i>	40	<i>36-4.5gm inj</i>		<i>10meq er tab</i>	
<i>SYRINGE</i>		<i>piperacillin/tazobactam</i>	74	<i>potassium chloride</i>	68
<i>PERSERIS 90MG</i>	40	<i>4000-500mg inj</i>		<i>10meq micro er tab</i>	
<i>SYRINGE</i>		<i>PIQRAY TAB 200MG</i>	35	<i>POTASSIUM CHLORIDE</i>	68
<i>PHENELZINE 15MG TAB</i>	16	<i>DAILY DOSE PACK (28)</i>		<i>10MEQ/100ML INJ</i>	
<i>phenobarbital 100mg tab</i>	14	<i>PIQRAY TAB 250MG</i>	35	<i>POTASSIUM CHLORIDE</i>	68
<i>phenobarbital 15mg tab</i>	14	<i>DAILY DOSE PACK (56)</i>		<i>15MEQ ER TAB</i>	
<i>phenobarbital 16.2mg tab</i>	14	<i>PIQRAY TAB 300MG</i>	35	<i>potassium chloride</i>	68
<i>phenobarbital 30mg tab</i>	14	<i>DAILY DOSE PACK (56)</i>		<i>15meq micro er tab</i>	
<i>phenobarbital 32.4mg tab</i>	14	<i>pirfenidone 267mg cap</i>	77	<i>potassium chloride</i>	68
<i>phenobarbital 4mg/ml</i>	14	<i>pirfenidone 267mg tab</i>	77	<i>2.67meq/ml oral soln</i>	
<i>oral soln</i>		<i>pirfenidone 801mg tab</i>	77	<i>potassium chloride</i>	68
<i>phenobarbital 60mg tab</i>	14	<i>piroxicam 10mg cap</i>	4	<i>20meq er tab</i>	
<i>phenobarbital 64.8mg tab</i>	14	<i>piroxicam 20mg cap</i>	4	<i>potassium chloride</i>	68
<i>phenobarbital 97.2mg tab</i>	14	<i>PLASMA-LYTE A INJ</i>	68	<i>20meq micro er tab</i>	
<i>phenytoin 25mg/ml oral</i>	14	<i>PLEGRIDY</i>	76	<i>potassium chloride</i>	68
<i>susp</i>		<i>125MCG/0.5ML</i>		<i>20meq powder for oral</i>	
<i>phenytoin 50mg chew tab</i>	14	<i>AUTO-INJECTOR</i>		<i>soln</i>	
<i>phenytoin sodium 100mg</i>	14	<i>PLEGRIDY</i>	76	<i>POTASSIUM CHLORIDE</i>	68
<i>er cap</i>		<i>125MCG/0.5ML</i>		<i>20MEQ/100ML INJ</i>	
<i>PIFELTRO 100MG TAB</i>	45	<i>SYRINGE</i>		<i>potassium chloride</i>	68
<i>pilocarpine 1% ophth</i>	72	<i>plenamine 15% inj</i>	71	<i>2meq/ml (20ml) inj</i>	
<i>soln</i>		<i>PODOFILOX 0.5%</i>	55	<i>potassium chloride</i>	68
<i>pilocarpine 2% ophth</i>	72	<i>TOPICAL SOLN</i>		<i>2meq/ml inj</i>	
<i>soln</i>		<i>polycin 0.5-10unit/mg</i>	72	<i>POTASSIUM CHLORIDE</i>	68
<i>pilocarpine 4% ophth</i>	72	<i>ophth ointment</i>		<i>40MEQ/100ML INJ</i>	
<i>soln</i>		<i>polymyxin b/trimethoprim</i>	72	<i>potassium chloride 8meq</i>	68
<i>pilocarpine 5mg tab</i>	52	<i>10000 unit/ml-0.1%</i>		<i>er cap</i>	
<i>pilocarpine 7.5mg tab</i>	52	<i>ophth soln</i>		<i>potassium chloride 8meq</i>	68
<i>pimecrolimus 1% cream</i>	55	<i>POMALYST 1MG CAP</i>	37	<i>er tab</i>	
<i>PIMOZIDE 1MG TAB</i>	77	<i>POMALYST 2MG CAP</i>	37	<i>potassium citrate 10meq</i>	63
<i>PIMOZIDE 2MG TAB</i>	77	<i>POMALYST 3MG CAP</i>	37	<i>er tab</i>	
<i>pimtrea tab 28-day pack</i>	61	<i>POMALYST 4MG CAP</i>	37	<i>potassium citrate 15meq</i>	63
<i>pindolol 10mg tab</i>	47	<i>portia tab 28-day pack</i>	61	<i>er tab</i>	
<i>pindolol 5mg tab</i>	47	<i>posaconazole 100mg dr</i>	23	<i>potassium citrate 5meq er</i>	64
<i>pioglitazone 15mg tab</i>	20	<i>tab</i>		<i>tab</i>	
<i>pioglitazone 30mg tab</i>	20	<i>posaconazole 40mg/ml</i>	23	<i>pramipexole 0.125mg tab</i>	38
<i>pioglitazone 45mg tab</i>	20	<i>oral susp</i>		<i>pramipexole 0.25mg tab</i>	38
				<i>pramipexole 0.5mg tab</i>	38

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>pramipexole 0.75mg tab</i>	38	<i>pregabalin 75mg cap</i>	14	<i>prochlorperazine 25mg</i>	42
<i>pramipexole 1.5mg tab</i>	38	PREMARIN 0.3MG TAB	62	<i>rectal supp</i>	
<i>pramipexole 1mg tab</i>	38	PREMARIN 0.45MG TAB	62	<i>prochlorperazine 5mg tab</i>	42
<i>prasugrel 10mg tab</i>	64	PREMARIN 0.625MG	62	<i>procto-med 2.5% cream</i>	6
<i>prasugrel 5mg tab</i>	64	TAB		<i>proctosol 2.5% cream</i>	6
<i>pravastatin sodium 10mg</i>	24	PREMARIN	83	<i>proctozone hc 2.5% cream</i>	6
<i>tab</i>		0.625MG/GM VAGINAL		<i>progesterone 100mg cap</i>	75
<i>pravastatin sodium 20mg</i>	24	CREAM		<i>progesterone 200mg cap</i>	75
<i>tab</i>		PREMARIN 0.9MG TAB	62	PROGRAF 0.2MG	69
<i>pravastatin sodium 40mg</i>	24	PREMARIN 1.25MG TAB	62	GRANULES FOR ORAL	
<i>tab</i>		PREMPHASE 28-DAY	61	SUSP	
<i>pravastatin sodium 80mg</i>	24	PACK		PROGRAF 1MG	69
<i>tab</i>		PREMPRO 0.3/1.5MG	61	GRANULES FOR ORAL	
<i>praziquantel 600mg tab</i>	6	28-DAY PACK		SUSP	
<i>prazosin 1mg cap</i>	26	PREMPRO 0.45/1.5MG	61	PROLASTIN 1000MG INJ	77
<i>prazosin 2mg cap</i>	26	28-DAY PACK		<i>promethazine 1.25mg/ml</i>	78
<i>prazosin 5mg cap</i>	26	PREMPRO 0.625/2.5MG	61	<i>oral soln</i>	
PREDNISOLONE 1%	72	28-DAY PACK		<i>promethazine 12.5mg tab</i>	78
OPHTH SOLN		PREMPRO 0.625/5MG	61	<i>promethazine 25mg tab</i>	78
<i>prednisolone 1mg/ml oral</i>	51	28-DAY PACK		<i>promethazine 50mg tab</i>	78
<i>soln</i>		<i>prevalite 4gm powder for</i>	23	<i>propafenone 150mg tab</i>	8
<i>prednisolone 3mg/ml oral</i>	51	<i>oral susp</i>		<i>propafenone 225mg er</i>	8
<i>soln</i>		PREVYMIS 120MG	45	<i>cap</i>	
<i>prednisolone 5mg/ml oral</i>	51	ORAL PELLET		<i>propafenone 225mg tab</i>	8
<i>soln</i>		PREVYMIS 240MG TAB	45	<i>propafenone 300mg tab</i>	8
<i>prednisolone acetate 1%</i>	72	PREVYMIS 480MG TAB	46	<i>propafenone 325mg er</i>	8
<i>ophth susp</i>		PREZCOBIX 150-800MG	45	<i>cap</i>	
<i>prednisone 10mg tab</i>	51	TAB		<i>propafenone 425mg er</i>	8
<i>prednisone 1mg tab</i>	51	PREZISTA 100MG/ML	45	<i>cap</i>	
PREDNISON 1MG/ML	51	ORAL SUSP		<i>propranolol 10mg tab</i>	47
ORAL SOLN		PREZISTA 150MG TAB	45	<i>propranolol 120mg er</i>	47
<i>prednisone 2.5mg tab</i>	51	PREZISTA 75MG TAB	45	<i>cap</i>	
<i>prednisone 20mg tab</i>	51	PRIFTIN 150MG TAB	30	<i>propranolol 160mg er</i>	47
<i>prednisone 50mg tab</i>	51	PRIMAQUINE	30	<i>cap</i>	
<i>prednisone 5mg tab</i>	51	PHOSPHATE 26.3MG		<i>propranolol 20mg tab</i>	47
<i>pregabalin 100mg cap</i>	14	TAB		<i>propranolol 40mg tab</i>	47
<i>pregabalin 150mg cap</i>	14	<i>primidone 250mg tab</i>	14	PROPRANOLOL	47
<i>pregabalin 200mg cap</i>	14	<i>primidone 50mg tab</i>	14	4MG/ML ORAL SOLN	
<i>pregabalin 20mg/ml oral</i>	14	PRIORIX INJ	82	<i>propranolol 60mg er cap</i>	47
<i>soln</i>		PRIVIGEN 20GM/200ML	73	<i>propranolol 60mg tab</i>	47
<i>pregabalin 225mg cap</i>	14	INJ		<i>propranolol 80mg er cap</i>	47
<i>pregabalin 25mg cap</i>	14	<i>probenecid 500mg tab</i>	64	<i>propranolol 80mg tab</i>	47
<i>pregabalin 300mg cap</i>	14	<i>prochlorperazine 10mg</i>	42	PROPRANOLOL	47
<i>pregabalin 50mg cap</i>	14	<i>tab</i>		8MG/ML 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>propylthiouracil 50mg tab</i>	79	R		RETACRIT	65
PROQUAD INJ	82	RABAVERT 2.5UNIT/ML INJ	82	20000UNIT/ML INJ	
PROSOL 20% INJ	71	RADICAVA 105MG/5ML	70	RETACRIT 2000UNIT/ML INJ	65
<i>protriptyline 10mg tab</i>	18	ORAL SUSP		RETACRIT 3000UNIT/ML INJ	65
<i>protriptyline 5mg tab</i>	18	RALDESY 10MG/ML	17	RETACRIT	65
PULMOZYME 1MG/ML	77	ORAL SOLN		40000UNIT/ML INJ	
INH SOLN		<i>raloxifene 60mg tab</i>	57	RETACRIT 4000UNIT/ML INJ	65
PURIXAN	31	<i>ramelteon 8mg tab</i>	65		
2000MG/100ML ORAL SUSP		<i>ramipril 1.25mg cap</i>	25	RETEVMO 120MG TAB	35
<i>pyrazinamide 500mg tab</i>	30	<i>ramipril 10mg cap</i>	25	RETEVMO 160MG TAB	35
<i>pyridostigmine bromide 60mg tab</i>	30	<i>ramipril 2.5mg cap</i>	25	RETEVMO 40MG TAB	35
<i>pyrimethamine 25mg tab</i>	30	<i>ramipril 5mg cap</i>	25	RETEVMO 80MG TAB	35
Q		<i>ranolazine 1000mg er tab</i>	49	REVUFORJ 110MG TAB	37
QINLOCK 50MG TAB	35	<i>ranolazine 500mg er tab</i>	49	REVUFORJ 160MG TAB	37
QUADRACEL INJ	80	<i>rasagiline 0.5mg tab</i>	39	REVUFORJ 25MG TAB	37
QUADRACEL SYRINGE	80	<i>rasagiline 1mg tab</i>	39	REXULTI 0.25MG TAB	43
<i>quetiapine 100mg tab</i>	42	<i>reclipsen tab 28-day pack</i>	61	REXULTI 0.5MG TAB	43
<i>quetiapine 150mg er tab</i>	42	RECOMBIVAX	82	REXULTI 1MG TAB	43
<i>quetiapine 200mg er tab</i>	42	10MCG/ML INJ		REXULTI 2MG TAB	43
<i>quetiapine 200mg tab</i>	42	RECOMBIVAX	82	REXULTI 3MG TAB	43
<i>quetiapine 25mg tab</i>	42	10MCG/ML SYRINGE		REXULTI 4MG TAB	43
<i>quetiapine 300mg er tab</i>	42	RECOMBIVAX	82	REYATAZ 50MG ORAL POWDER	45
<i>quetiapine 300mg tab</i>	42	40MCG/ML INJ		REZDIFFRA 100MG TAB	63
<i>quetiapine 400mg er tab</i>	42	RECOMBIVAX	82	REZDIFFRA 60MG TAB	63
<i>quetiapine 400mg tab</i>	42	5MCG/0.5ML INJ		REZDIFFRA 80MG TAB	63
<i>quetiapine 50mg er tab</i>	42	RECOMBIVAX	82	REZLIDHIA 150MG CAP	35
<i>quetiapine 50mg tab</i>	42	5MCG/0.5ML SYRINGE		REZUROCK 200MG TAB	69
<i>quinapril 10mg tab</i>	25	RELENZA 5MG/BLISTER	46	RHOPRESSA 0.02%	72
<i>quinapril 20mg tab</i>	25	POWDER INHALER		OPHTH SOLN	
<i>quinapril 40mg tab</i>	25	<i>repaglinide 0.5mg tab</i>	20	RIBAVIRIN 200MG CAP	46
<i>quinapril 5mg tab</i>	25	<i>repaglinide 1mg tab</i>	20	RIBAVIRIN 200MG TAB	46
QUINIDINE SULFATE 200MG TAB	8	<i>repaglinide 2mg tab</i>	20	<i>rifabutin 150mg cap</i>	30
QUINIDINE SULFATE 300MG TAB	8	REPATHA 140MG/ML	23	<i>rifampin 150mg cap</i>	30
<i>quinine sulfate 324mg cap</i>	30	AUTO-INJECTOR		<i>rifampin 300mg cap</i>	30
QVAR 40MCG	9	REPATHA 140MG/ML SYRINGE		<i>rifampin 600mg inj</i>	30
REDIHALER		REPATHA 420MG/3.5ML	23	<i>riluzole 50mg tab</i>	70
QVAR 80MCG	9	CARTRIDGE		RIMANTADINE 100MG TAB	46
REDIHALER		RETACRIT	65		
		10000UNIT/ML INJ		RINVOQ 15MG ER TAB	2
		RETACRIT	65	RINVOQ 1MG/ML ORAL SOLN	2
		20000UNIT/2ML INJ			

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

ALPHABETICAL LISTING OF DRUGS

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>	67	RUKOBIA 600MG ER	45
<i>tab</i>		<i>rizatriptan 5mg odt</i>	67	TAB	
<i>risedronate sodium 35mg</i>	57	<i>rizatriptan 5mg tab</i>	67	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	36
<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>sacubitril/valsartan</i>	49
<i>risedronate sodium 5mg</i>	57	ROMVIMZA 14MG CAP	35	<i>24-26mg tab</i>	
<i>tab</i>		ROMVIMZA 20MG CAP	35	<i>sacubitril/valsartan</i>	49
RISPERIDONE 0.25MG	40	ROMVIMZA 30MG CAP	35	<i>49-51mg tab</i>	
ODT		<i>ropinirole 0.25mg tab</i>	38	<i>sacubitril/valsartan</i>	49
<i>risperidone 0.25mg tab</i>	40	<i>ropinirole 0.5mg tab</i>	39	<i>97-103mg tab</i>	
<i>risperidone 0.5mg odt</i>	41	<i>ropinirole 1mg tab</i>	39	<i>sajazir 30mg/3ml syringe</i>	65
<i>risperidone 0.5mg tab</i>	41	<i>ropinirole 2mg tab</i>	39	<i>salmon calcitonin</i>	57
<i>risperidone 1mg odt</i>	41	<i>ropinirole 3mg tab</i>	39	<i>200unit/act nasal spray</i>	
<i>risperidone 1mg tab</i>	41	<i>ropinirole 4mg tab</i>	39	SANTYL 250UNIT/GM	55
<i>risperidone 1mg/ml oral</i>	41	<i>ropinirole 5mg tab</i>	39	OINTMENT	
<i>soln</i>		<i>rosuvastatin calcium</i>	24	<i>sapropterin 100mg</i>	58
<i>risperidone 2mg odt</i>	41	<i>10mg tab</i>		<i>powder for oral soln</i>	
<i>risperidone 2mg tab</i>	41	<i>rosuvastatin calcium</i>	24	<i>sapropterin 100mg tab</i>	58
<i>risperidone 37.5mg inj</i>	41	<i>20mg tab</i>		<i>sapropterin 500mg</i>	58
<i>risperidone 3mg odt</i>	41	<i>rosuvastatin calcium</i>	24	<i>powder for oral soln</i>	
<i>risperidone 3mg tab</i>	41	<i>40mg tab</i>		SCSEMBLIX 100MG TAB	36
<i>risperidone 4mg odt</i>	41	<i>rosuvastatin calcium 5mg</i>	24	SCSEMBLIX 20MG TAB	36
<i>risperidone 4mg tab</i>	41	<i>tab</i>		SCSEMBLIX 40MG TAB	36
<i>risperidone 50mg inj</i>	41	ROTARIX	82	<i>scopolamine 1mg/72hr</i>	22
<i>risperidone microspheres</i>	41	667000UNIT/ML ORAL		<i>patch</i>	
<i>12.5mg inj</i>		SUSP		SECUADO 3.8MG/24HR	42
<i>risperidone microspheres</i>	41	ROTATEQ ORAL SUSP	82	PATCH	
<i>25mg inj</i>		<i>roweepra 500mg tab</i>	14	SECUADO 5.7MG/24HR	42
<i>ritonavir 100mg tab</i>	45	ROZLYTREK 100MG	35	PATCH	
<i>rivaroxaban 2.5mg tab</i>	11	CAP		SECUADO 7.6MG/24HR	42
<i>rivastigmine 1.5mg cap</i>	75	ROZLYTREK 200MG	35	PATCH	
<i>rivastigmine 13.3mg/24hr</i>	75	CAP		<i>selegiline 5mg cap</i>	39
<i>patch</i>		ROZLYTREK 50MG	35	<i>selenium sulfide 2.5%</i>	55
<i>rivastigmine 3mg cap</i>	75	ORAL PELLETT		<i>shampoo</i>	
<i>rivastigmine 4.5mg cap</i>	75	RUBRACA 200MG TAB	35	SELZENTRY 20MG/ML	45
<i>rivastigmine 4.6mg/24hr</i>	75	RUBRACA 250MG TAB	35	ORAL SOLN	
<i>patch</i>		RUBRACA 300MG TAB	35	<i>sertraline 100mg tab</i>	17

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

ALPHABETICAL LISTING OF DRUGS

<i>sertraline 20mg/ml oral soln</i>	17	SKYRIZI 180MG/1.2ML CARTRIDGE	63	<i>sotalol 160mg tab</i>	47
<i>sertraline 25mg tab</i>	17	SKYRIZI 360MG/2.4ML CARTRIDGE	63	<i>sotalol 240mg tab</i>	47
<i>sertraline 50mg tab</i>	17			<i>sotalol 80mg tab</i>	48
<i>setlakin tab 91-day pack</i>	61	<i>sodium chloride 0.45% inj</i>	68	<i>sotalol af 120mg tab</i>	48
<i>sharobel 0.35mg tab</i>	75	<i>sodium chloride 0.9% inj</i>	68	<i>sotalol af 160mg tab</i>	48
<i>28-day pack</i>		<i>sodium chloride 0.9% irrigation soln</i>	64	<i>sotalol af 80mg tab</i>	48
SHINGRIX	82	<i>sodium chloride 3% inj</i>	68	<i>spironolactone 100mg tab</i>	56
50MCG/0.5ML INJ		<i>sodium chloride 50mg/ml inj</i>	68	<i>spironolactone 25mg tab</i>	56
SIGNIFOR 0.3MG/ML INJ	58	SODIUM OXYBATE	78	<i>spironolactone 50mg tab</i>	56
SIGNIFOR 0.6MG/ML INJ	58	500MG/ML ORAL SOLN		<i>sprintec tab 28-day pack</i>	61
SIGNIFOR 0.9MG/ML INJ	58	<i>sodium phenylbutyrate 3gm/tsp oral powder</i>	58	SPRITAM 250MG TAB	14
<i>sildenafil 20mg tab</i>	78	<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	70	FOR ORAL SUSP	
<i>silver sulfadiazine 1% cream</i>	55	<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
SIMBRINZA 0.2-1% OPTH SUSP	71	<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 VIR 400-100MG TAB	46	<i>sps 15gm/60ml susp</i>	70
SIMLANDI 40MG/0.4ML AUTO-INJECTOR	3	SOGROYA 10MG/1.5ML PEN INJ	57	<i>sronyx tab 28-day pack</i>	61
SIMLANDI 40MG/0.4ML SYRINGE	3	SOGROYA 15MG/1.5ML PEN INJ	57	<i>ssd 1% cream</i>	55
SIMLANDI 80MG/0.8ML AUTO-INJECTOR	3	SOGROYA 5MG/1.5ML PEN INJ	57	STELARA 45MG/0.5ML INJ	53
SIMLANDI 80MG/0.8ML SYRINGE	3	SOLTAMOX 10MG/5ML ORAL SOLN	32	STELARA 45MG/0.5ML SYRINGE	53
<i>simvastatin 10mg tab</i>	24	SOMAVERT 10MG INJ	58	STELARA 90MG/ML SYRINGE	53
<i>simvastatin 20mg tab</i>	24	SOMAVERT 15MG INJ	58	STEQEYMA 90MG/ML SYRINGE	53
<i>simvastatin 40mg tab</i>	24	SOMAVERT 20MG INJ	58	STIMUFEND 6MG/0.6ML SYRINGE	65
<i>simvastatin 5mg tab</i>	24	SOMAVERT 25MG INJ	58	STIOLTO	10
<i>simvastatin 80mg tab</i>	24	SOMAVERT 30MG INJ	58	2.5-2.5MCG/ACT	
<i>sirolimus 0.5mg tab</i>	69	<i>sorafenib 200mg tab</i>	36	INHALER	
<i>sirolimus 1mg tab</i>	69	<i>sotalol 120mg tab</i>	47	STIVARGA 40MG TAB	36
<i>sirolimus 1mg/ml oral soln</i>	69			STREPTOMYCIN 1GM INJ	2
<i>sirolimus 2mg tab</i>	69			STRIBILD	45
SIRTURO 100MG TAB	30			150-150-200-300MG TAB	
SIRTURO 20MG TAB	30			STRIVERDI 2.5MCG/ACT	10
SKYRIZI 150MG/ML AUTO-INJECTOR	53			INHALER	
SKYRIZI 150MG/ML SYRINGE	53			<i>subvenite 100mg tab</i>	14
				<i>subvenite 150mg tab</i>	14
				<i>subvenite 200mg tab</i>	14
				<i>subvenite 25mg tab</i>	14
				SUCRAID 8500UNIT/ML	56
				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>sucralfate 1000mg tab</i>	81	SUNLENCA 300MG TAB	45	<i>tadalafil 2.5mg tab</i>	64
<i>sucralfate 100mg/ml oral</i>	81	THERAPY PACK (5)		<i>tadalafil 20mg tab</i>	78
<i>susp</i>		SUNOSI 150MG TAB	78	<i>tadalafil 5mg tab</i>	64
SUFLAVE SOLN PACK	66	SUNOSI 75MG TAB	78	TAFINLAR 10MG TAB	36
<i>sulfacetamide sodium</i>	52	<i>syeda tab 28-day pack</i>	61	FOR ORAL SUSP	
<i>10% lotion</i>		SYMDEKO TAB 4-WEEK	77	TAFINLAR 50MG CAP	36
SULFACETAMIDE	72	PACK (56)		TAFINLAR 75MG CAP	36
SODIUM 10% OPTH		SYMDEKO TAB	77	TAGRISSE 40MG TAB	31
SOLN		50-75MG/75MG PACK		TAGRISSE 80MG TAB	31
SULFACETAMIDE/PRED	72	(56)		TAKHZYRO 300MG/2ML	65
NISOLONE 10-0.25%		SYMPAZAN 10MG ORAL	12	INJ	
OPTH SOLN		FILM		TAKHZYRO 300MG/2ML	65
<i>sulfadiazine 500mg tab</i>	79	SYMPAZAN 20MG ORAL	12	SYRINGE	
<i>sulfamethoxazole/trimeth</i>	79	FILM		TALZENNA 0.1MG CAP	36
<i>oprim 200-40mg/5ml oral</i>		SYMPAZAN 5MG ORAL	12	TALZENNA 0.25MG CAP	36
<i>susp</i>		FILM		TALZENNA 0.35MG CAP	36
<i>sulfamethoxazole/trimeth</i>	79	SYMTUZA	45	TALZENNA 0.5MG CAP	36
<i>oprim 400-80mg tab</i>		150-800-200-10MG TAB		TALZENNA 0.75MG CAP	36
<i>sulfamethoxazole/trimeth</i>	79	SYNJARDY	19	TALZENNA 1MG CAP	36
<i>oprim 800-160mg tab</i>		12.5-1000MG TAB		<i>tamoxifen 10mg tab</i>	32
<i>sulfasalazine 500mg dr</i>	63	SYNJARDY 12.5-500MG	19	<i>tamoxifen 20mg tab</i>	32
<i>tab</i>		TAB		<i>tamsulosin 0.4mg cap</i>	64
<i>sulfasalazine 500mg tab</i>	63	SYNJARDY 5-1000MG	19	<i>tarina 24 fe tab 1/20</i>	61
<i>sulindac 150mg tab</i>	4	TAB		<i>28-day pack</i>	
<i>sulindac 200mg tab</i>	4	SYNJARDY 5-500MG	19	<i>tarina fe tab 1/20 28-day</i>	61
<i>sumatriptan 100mg tab</i>	67	TAB		<i>pack</i>	
<i>sumatriptan 25mg tab</i>	67	SYNJARDY XR	19	<i>tazarotene 0.1% cream</i>	53
<i>sumatriptan 4mg/0.5ml</i>	67	10-1000MG TAB		<i>tazicef 1gm inj</i>	50
<i>cartridge</i>		SYNJARDY XR	19	<i>tazicef 2gm inj</i>	50
<i>sumatriptan 50mg tab</i>	67	12.5-1000MG TAB		TAZICEF 6GM INJ	50
<i>sumatriptan 6mg/0.5ml</i>	67	SYNJARDY XR	19	TAZVERIK 200MG TAB	36
<i>auto-injector</i>		25-1000MG TAB		TEFLARO 400MG INJ	29
<i>sumatriptan 6mg/0.5ml</i>	67	SYNJARDY XR	19	TEFLARO 600MG INJ	29
<i>cartridge</i>		5-1000MG TAB		<i>telmisartan 20mg tab</i>	25
<i>sumatriptan 6mg/0.5ml</i>	67	T		<i>telmisartan 40mg tab</i>	25
<i>inj</i>		TABLOID 40MG TAB	31	<i>telmisartan 80mg tab</i>	25
<i>sunitinib 12.5mg cap</i>	36	TABRECTA 150MG TAB	36	<i>temazepam 15mg cap</i>	65
<i>sunitinib 25mg cap</i>	36	TABRECTA 200MG TAB	36	<i>temazepam 30mg cap</i>	65
<i>sunitinib 37.5mg cap</i>	36	<i>tacrolimus 0.03%</i>	55	TENIVAC 4-10UNIT/ML	80
<i>sunitinib 50mg cap</i>	36	<i>ointment</i>		INJ	
SUNLENCA 300MG TAB	45	<i>tacrolimus 0.1% ointment</i>	55	TENIVAC 4-10UNIT/ML	80
SUNLENCA 300MG TAB	45	<i>tacrolimus 0.5mg cap</i>	69	SYRINGE	
THERAPY PACK (4)		<i>tacrolimus 1mg cap</i>	69	<i>tenofovir disoproxil</i>	45
		<i>tacrolimus 5mg cap</i>	69	<i>fumarate 300mg 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

TEPMETKO 225MG TAB	36	tetrabenazine 25mg tab	76	TICOVAC	83
terazosin 10mg cap	26	tetracycline 250mg cap	79	1.2MCG/0.25ML	
terazosin 1mg cap	26	tetracycline 500mg cap	79	SYRINGE	
terazosin 2mg cap	26	THALOMID 100MG CAP	69	TICOVAC 2.4MCG/0.5ML	83
terazosin 5mg cap	26	THALOMID 50MG CAP	69	SYRINGE	
terbinafine 250mg tab	22	THEOPHYLLINE 100MG	78	tigecycline 50mg inj	29
terbutaline sulfate 2.5mg	10	ER TAB		timolol 0.25% ophth gel	71
tab		THEOPHYLLINE 200MG	78	timolol 0.25% ophth soln	71
terbutaline sulfate 5mg	10	ER TAB		timolol 0.5% ophth gel	71
tab		theophylline 300mg er	78	timolol 0.5% ophth soln	71
terconazole 0.4% vaginal	83	tab		timolol 10mg tab	48
cream		theophylline 400mg er	78	timolol 5mg tab	48
terconazole 0.8% vaginal	83	tab		timolol hemihydrate 0.5%	71
cream		theophylline 450mg er	78	ophth soln	
terconazole 80mg vaginal	83	tab		tinidazole 250mg tab	29
insert		theophylline 600mg er	78	tinidazole 500mg tab	29
teriflunomide 14mg tab	76	tab		TIVICAY 50MG TAB	45
teriflunomide 7mg tab	76	thioridazine 100mg tab	42	TIVICAY 5MG TAB FOR	45
TERIPARATIDE	57	thioridazine 10mg tab	43	ORAL SUSP	
0.02MG/ACT PEN INJ		thioridazine 25mg tab	43	tizanidine 2mg tab	70
testosterone 1%	6	thioridazine 50mg tab	43	tizanidine 4mg tab	70
(12.5mg/act) gel pump		thiothixene 10mg cap	40	tobramycin 0.3% ophth	72
testosterone 1% (25mg)	6	thiothixene 1mg cap	40	soln	
gel packet		thiothixene 2mg cap	40	TOBRAMYCIN	2
testosterone 1% (50mg)	6	thiothixene 5mg cap	40	10MG/ML INJ	
gel packet		tiadylt 120mg er (24hr)	48	tobramycin 300mg/5ml	2
TESTOSTERONE 1.62%	6	cap		inh soln	
(1.25GM) GEL PACKET		tiadylt 180mg er (24hr)	48	tobramycin 80mg/2ml inj	2
testosterone 1.62%	6	cap		tolterodine tartrate 1mg	81
(2.5gm) gel packet		tiadylt 240mg er (24hr)	49	tab	
testosterone 1.62%	6	cap		tolterodine tartrate 2mg	81
(20.25mg/act) gel pump		tiadylt 300mg er (24hr)	49	er cap	
testosterone 30mg/act	6	cap		tolterodine tartrate 2mg	81
topical soln		tiadylt 360mg er (24hr)	49	tab	
testosterone cypionate	6	cap		tolterodine tartrate 4mg	81
100mg/ml inj		tiadylt 420mg er (24hr)	49	er cap	
testosterone cypionate	6	cap		topiramate 100mg tab	14
200mg/ml (1ml) inj		tiagabine 12mg tab	15	topiramate 15mg cap	14
testosterone cypionate	6	tiagabine 16mg tab	15	topiramate 200mg tab	14
200mg/ml inj		tiagabine 2mg tab	15	topiramate 25mg cap	14
TESTOSTERONE	6	tiagabine 4mg tab	15	topiramate 25mg tab	14
ENANTHATE 200MG/ML		TIBSOVO 250MG TAB	36	topiramate 50mg tab	14
INJ		ticagrelor 60mg tab	64	toremifene 60mg tab	32
tetrabenazine 12.5mg tab	76	ticagrelor 90mg tab	64	torpenz 10mg tab	36

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

ALPHABETICAL LISTING OF DRUGS

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

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

ALPHABETICAL LISTING OF DRUGS

<i>tri-sprintec tab 28-day pack</i>	61	TYPHIM VI 25MCG/0.5ML SYRINGE	82	<i>valproic acid 50mg/ml oral soln</i>	15
TRIUMEQ	45	U		<i>valsartan 160mg tab</i>	25
600-50-300MG TAB		UBRELVY 100MG TAB	66	<i>valsartan 320mg tab</i>	25
TRIUMEQ 60-5-30MG	45	UBRELVY 50MG TAB	66	<i>valsartan 40mg tab</i>	25
TAB FOR ORAL SUSP		<i>unithroid 100mcg tab</i>	80	<i>valsartan 80mg tab</i>	25
<i>tri-vylibra lo tab 28-day pack</i>	61	<i>unithroid 112mcg tab</i>	80	VALTOCO 10MG	12
<i>tri-vylibra tab 28-day pack</i>	61	<i>unithroid 125mcg tab</i>	80	(10MG/0.1ML) NASAL SPRAY DOSE PACK	
<i>trospium chloride 20mg tab</i>	81	<i>unithroid 137mcg tab</i>	80	VALTOCO 15MG	12
<i>trospium chloride 60mg er cap</i>	81	<i>unithroid 150mcg tab</i>	80	(7.5MG/0.1ML) NASAL SPRAY DOSE PACK	
TRULANCE 3MG TAB	66	<i>unithroid 175mcg tab</i>	80	VALTOCO 20MG	12
TRULICITY	20	<i>unithroid 200mcg tab</i>	80	(10MG/0.1ML) NASAL SPRAY DOSE PACK	
0.75MG/0.5ML		<i>unithroid 25mcg tab</i>	80	VALTOCO 5MG	12
AUTO-INJECTOR		<i>unithroid 300mcg tab</i>	80	(5MG/0.1ML) NASAL SPRAY DOSE PACK	
TRULICITY	20	<i>unithroid 50mcg tab</i>	80	<i>valtya tab 1/50 28-day pack</i>	61
1.5MG/0.5ML		<i>unithroid 75mcg tab</i>	80	<i>vancomycin 100mg/ml inj</i>	29
AUTO-INJECTOR		<i>unithroid 88mcg tab</i>	80	<i>vancomycin 125mg cap</i>	29
TRULICITY	20	<i>ursodiol 250mg tab</i>	63	<i>vancomycin 1gm inj</i>	29
4.5MG/0.5ML		<i>ursodiol 300mg cap</i>	63	<i>vancomycin 250mg cap</i>	29
AUTO-INJECTOR		<i>ursodiol 500mg tab</i>	63	<i>vancomycin 500mg inj</i>	29
TRULICITY 3MG/0.5ML	20	UZEDY 100MG/0.28ML SYRINGE	41	<i>vancomycin 750mg inj</i>	29
AUTO-INJECTOR		UZEDY 125MG/0.35ML SYRINGE	41	VANFLYTA 17.7MG TAB	36
TRULICITY	20	UZEDY 150MG/0.42ML SYRINGE	41	VANFLYTA 26.5MG TAB	36
4.5MG/0.5ML		UZEDY 200MG/0.56ML SYRINGE	41	VAQTA 25UNIT/0.5ML INJ	83
AUTO-INJECTOR		UZEDY 250MG/0.7ML SYRINGE	41	VAQTA 25UNIT/0.5ML SYRINGE	83
TRUMENBA SYRINGE	82	UZEDY 50MG/0.14ML SYRINGE	41	VAQTA 50UNIT/ML INJ	83
TRUQAP 160MG TAB	36	UZEDY 75MG/0.21ML SYRINGE	41	VAQTA 50UNIT/ML SYRINGE	83
TRUQAP 200MG TAB	36			<i>varenicline 0.5mg tab</i>	77
TUKYSA 150MG TAB	37			<i>varenicline 0.5mg/1mg first month pack (53)</i>	77
TUKYSA 50MG TAB	37			<i>varenicline 1mg tab</i>	77
TURALIO 125MG CAP	36			<i>varenicline 1mg tab pack (56)</i>	77
<i>turqoz tab 28-day pack</i>	61			VARIVAX	83
TWINRIX SYRINGE	83			1350PFU/0.5ML INJ	
TYBOST 150MG TAB	45			VAXCHORA SUSP	82
TYENNE 162MG/0.9ML AUTO-INJECTOR	3	V			
TYENNE 162MG/0.9ML SYRINGE	3	<i>valacyclovir 1000mg tab</i>	46		
TYMLOS	57	<i>valacyclovir 500mg tab</i>	46		
3120MCG/1.56ML PEN INJ		VALCHLOR 0.016% GEL	53		
TYPHIM VI	82	<i>valganciclovir 450mg tab</i>	46		
25MCG/0.5ML INJ		<i>valganciclovir 50mg/ml oral soln</i>	46		
		<i>valproic acid 250mg cap</i>	15		

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

VELIVET TAB 28-DAY PACK	62	VERZENIO 100MG TAB	36	<i>voriconazole 50mg tab</i>	23
VELTASSA 16.8GM POWDER FOR ORAL SUSP	70	VERZENIO 150MG TAB	36	VOSEVI 400-100-100MG TAB	46
VELTASSA 1GM POWDER FOR ORAL SUSP	70	VERZENIO 200MG TAB	36	VOWST 30000000UNIT CAP	63
VELTASSA 25.2GM POWDER FOR ORAL SUSP	70	VERZENIO 50MG TAB	36	VRAYLAR 1.5MG CAP	40
VELTASSA 8.4GM POWDER FOR ORAL SUSP	70	<i>vestura tab 3-0.02mg 28-day pack</i>	62	VRAYLAR 3MG CAP	40
VEMLIDY 25MG TAB	46	<i>vienva tab 28-day pack</i>	62	VRAYLAR 4.5MG CAP	40
VENCLEXTA 100MG TAB	37	<i>vigabatrin 500mg powder for oral soln</i>	15	VRAYLAR 6MG CAP	40
VENCLEXTA 10MG TAB	37	<i>vigabatrin 500mg tab</i>	15	<i>vyfemla tab 28-day pack</i>	62
VENCLEXTA 50MG TAB	37	<i>vigadrone 500mg powder for oral soln</i>	15	<i>vylibra tab 28-day pack</i>	62
VENCLEXTA TAB STARTER PACK (42)	37	<i>vigadrone 500mg tab</i>	15	VYNDAMAX 61MG CAP	49
<i>venlafaxine 100mg tab</i>	17	VIGAFYDE 100MG/ML	15	VYNDAQEL 20MG CAP	49
<i>venlafaxine 150mg er cap</i>	17	ORAL SOLN		W	
<i>venlafaxine 25mg tab</i>	17	<i>vigpoder 500mg powder for oral soln</i>	15	<i>warfarin sodium 10mg tab</i>	11
<i>venlafaxine 37.5mg er cap</i>	17	<i>vilazodone 10mg tab</i>	17	<i>warfarin sodium 1mg tab</i>	11
<i>venlafaxine 37.5mg tab</i>	17	<i>vilazodone 20mg tab</i>	17	<i>warfarin sodium 2.5mg tab</i>	11
<i>venlafaxine 50mg tab</i>	17	<i>vilazodone 40mg tab</i>	17	<i>warfarin sodium 2mg tab</i>	11
<i>venlafaxine 75mg er cap</i>	17	VIMKUNYA	83	<i>warfarin sodium 3mg tab</i>	11
<i>venlafaxine 75mg tab</i>	18	40MCG/0.8ML SYRINGE		<i>warfarin sodium 4mg tab</i>	11
<i>verapamil 120mg er cap</i>	49	VIRACEPT 250MG TAB	45	<i>warfarin sodium 5mg tab</i>	11
<i>verapamil 120mg er tab</i>	49	VIRACEPT 625MG TAB	45	<i>warfarin sodium 6mg tab</i>	11
<i>verapamil 120mg tab</i>	49	VIREAD 150MG TAB	45	<i>warfarin sodium 7.5mg tab</i>	11
<i>verapamil 180mg er cap</i>	49	VIREAD 200MG TAB	45	WELIREG 40MG TAB	37
<i>verapamil 180mg er tab</i>	49	VIREAD 250MG TAB	45	WINREVAIR 45MG INJ	78
<i>verapamil 240mg er cap</i>	49	VIREAD 40MG/GM	45	WINREVAIR 45MG INJ	78
<i>verapamil 240mg er tab</i>	49	ORAL POWDER		(2 VIAL PACK)	
<i>verapamil 40mg tab</i>	49	VITRAKVI 100MG CAP	36	WINREVAIR 60MG INJ	78
<i>verapamil 80mg tab</i>	49	VITRAKVI 20MG/ML	36	WINREVAIR 60MG INJ	78
VERQUVO 10MG TAB	49	ORAL SOLN		(2 VIAL PACK)	
VERQUVO 2.5MG TAB	49	VITRAKVI 25MG CAP	36	<i>wixela 100-50mcg powder inhaler</i>	10
VERQUVO 5MG TAB	49	VIVOTIF DR CAP	82	<i>wixela 250-50mcg powder inhaler</i>	10
VERSACLOZ 50MG/ML ORAL SUSP	42	VIZIMPRO 15MG TAB	31	<i>wixela 500-50mcg powder inhaler</i>	10
		VIZIMPRO 30MG TAB	31	WYOST 120MG/1.7ML INJ	57
		VIZIMPRO 45MG TAB	31		
		VONJO 100MG CAP	36	X	
		VORANIGO 10MG TAB	36		
		VORANIGO 40MG TAB	36		
		<i>voriconazole 200mg inj</i>	23		
		<i>voriconazole 200mg tab</i>	23		
		<i>voriconazole 40mg/ml oral susp</i>	23		

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ALPHABETICAL LISTING OF DRUGS

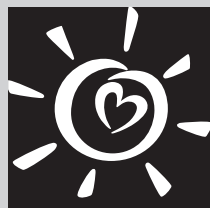
XALKORI 150MG ORAL PELLET	36	XIGDUO XR 10-1000MG TAB	19	XPOVIO TAB 60MG ONCE WEEKLY CARTON	37
XALKORI 200MG CAP	36	XIGDUO XR 10-500MG TAB	19	(4)	
XALKORI 20MG ORAL PELLET	37	XIGDUO XR 2.5-1000MG TAB	19	XPOVIO TAB 60MG TWICE WEEKLY CARTON (24)	37
XALKORI 250MG CAP	37	XIGDUO XR 5-1000MG TAB	19	XPOVIO TAB 80MG ONCE WEEKLY CARTON	37
XALKORI 50MG ORAL PELLET	37	XIGDUO XR 5-500MG TAB	19	(8)	
XARELTO 10MG TAB	11	XIIDRA 5% OPHTH SOLN	73	XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	38
XARELTO 15MG TAB	11	XOFLUZA 40MG TAB	46	XTANDI 40MG CAP	32
XARELTO 1MG/ML ORAL SUSP	11	XOFLUZA 80MG TAB	46	XTANDI 40MG TAB	32
XARELTO 2.5MG TAB	11	XOLAIR 150MG INJ	8	XTANDI 80MG TAB	32
XARELTO 20MG TAB	11	XOLAIR 150MG/ML AUTO-INJECTOR	9	<i>xulane 150-35mcg/24hr patch</i>	62
XARELTO TAB STARTER PACK (51)	11	XOLAIR 150MG/ML SYRINGE	9	Y	
XATMEP 2.5MG/ML ORAL SOLN	31	XOLAIR 300MG/2ML AUTO-INJECTOR	9	YESINTEK 90MG/ML SYRINGE	54
XCOPRI 100MG TAB	15	XOLAIR 300MG/2ML SYRINGE	9	YF-VAX INJ	83
XCOPRI 150MG TAB	15	XOLAIR 75MG/0.5ML AUTO-INJECTOR	9	Z	
XCOPRI 200MG TAB	15	XOLAIR 75MG/0.5ML SYRINGE	9	<i>zafemy 150-35mcg/24hr patch</i>	62
XCOPRI 25MG TAB	15	XOPENEX 45MCG INHALER	10	<i>zafirlukast 10mg tab</i>	9
XCOPRI 50MG TAB	15	XOSPATA 40MG TAB	37	<i>zafirlukast 20mg tab</i>	9
XCOPRI TAB 100/150MG MAINTENANCE PACK (56)	15	XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	37	<i>zaleplon 10mg cap</i>	65
XCOPRI TAB 12.5/25MG TITRATION PACK (28)	15	XPOVIO TAB 40MG ONCE WEEKLY CARTON (16)	37	<i>zaleplon 5mg cap</i>	65
XCOPRI TAB 150/200MG PACK (56)	15	XPOVIO TAB 40MG ONCE WEEKLY CARTON (4)	37	ZAVZPRET 10MG/ACT NASAL SPRAY	66
XCOPRI TAB 150/200MG TITRATION PACK (28)	15	XPOVIO TAB 40MG TWICE WEEKLY CARTON (8)	37	ZEJULA 100MG TAB	37
XCOPRI TAB 50/100MG TITRATION PACK (28)	15			ZEJULA 200MG TAB	37
XDEMVEY 0.25% OPHTH SOLN	72			ZEJULA 300MG TAB	37
XELJANZ 10MG TAB	2			ZELBORAF 240MG TAB	37
XELJANZ 1MG/ML ORAL SOLN	2			ZEMAIRA 1000MG INJ	77
XELJANZ 5MG TAB	2			<i>zenatane 10mg cap</i>	52
XELJANZ XR 11MG TAB	2			<i>zenatane 20mg cap</i>	52
XELJANZ XR 22MG TAB	3			<i>zenatane 30mg cap</i>	52
XERMELO 250MG TAB	21			<i>zenatane 40mg cap</i>	52
XIFAXAN 550MG TAB	29			<i>zidovudine 100mg cap</i>	45
				<i>zidovudine 10mg/ml oral soln</i>	45
				<i>zidovudine 300mg tab</i>	45

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ALPHABETICAL LISTING OF DRUGS

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>	15
<i>zovia 1mg-35mcg tab 28-day pack</i>	62
ZTALMY 50MG/ML ORAL SUSP	15
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.

Na-update ang formulary na ito noong 10/1/2025. Mahalagang Mensahe Tungkol sa Kung Ano ang Binabayaran Ninyo para sa mga Bakuna – Itinuturing na medikal na mga benepisyo ang ilang bakuna. Itinuturing ang ilang mga bakuna na mga gamot ng Bahagi D. Sinasaklaw ng aming plano ang karamihan sa mga bakuna ng Part D nang libre para sa inyo.

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