



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

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

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

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

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

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



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

Panimula

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

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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.
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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.

Huling Update: 11/01/2025



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

Huling Update: 11/01/2025

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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 1mg/ml oral susp</i>	1	QL=620 ML/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	

You can find information 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 1000unit/ml inj</i>	1	
<i>heparin sodium porcine 20000unit/ml inj</i>	1	
<i>heparin sodium porcine 5000unit/ml inj</i>	1	
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	1	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml oral susp</i>	1	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	1	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	1	QL=90 EA/30 Days
<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	

You can find information 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 300mg er cap</i>	1	
<i>carbamazepine 400mg er tab</i>	1	
DIACOMIT 250MG CAP	1	NDS PA_NSO QL=360 EA/30 Days
DIACOMIT 250MG POWDER FOR ORAL SUSP	1	NDS PA_NSO QL=360 EA/30 Days
DIACOMIT 500MG CAP	1	NDS PA_NSO QL=180 EA/30 Days
DIACOMIT 500MG POWDER FOR ORAL SUSP	1	NDS PA_NSO QL=180 EA/30 Days
EPIDIOLEX 100MG/ML ORAL SOLN	1	NDS PA_NSO QL=600 ML/30 Days
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 25mg/ml oral soln</i>	1	PA_NSO QL=480 ML/30 Days
<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	

You can find information 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 25mg cap</i>	1	
<i>zonisamide 50mg cap</i>	1	
ZTALMY 50MG/ML ORAL SUSP	1	NDS PA_NSO QL=1100 ML/30 Days
CARBAMATES		
<i>felbamate 120mg/ml oral susp</i>	1	
<i>felbamate 400mg tab</i>	1	
<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	

You can find information 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 100mg tab</i>	1	
<i>bupropion 150mg sr (12 hr) tab</i>	1	
<i>bupropion 200mg sr (12hr) tab</i>	1	
<i>bupropion 75mg tab</i>	1	
<i>bupropion xl 150mg (24 hr) tab</i>	1	
<i>bupropion xl 300mg (24hr) tab</i>	1	
<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

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

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

You can find information 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 2.5-500mg tab</i>	1	
<i>glipizide/metformin 5-500mg tab</i>	1	
GLYXAMBI 10-5MG TAB	1	QL=30 EA/30 Days
GLYXAMBI 25-5MG TAB	1	QL=30 EA/30 Days
JANUMET 50-1000MG TAB	1	QL=60 EA/30 Days
JANUMET 50-500MG TAB	1	QL=60 EA/30 Days
JANUMET XR 100-1000MG TAB	1	QL=30 EA/30 Days
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	

You can find information 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>mifepristone 300mg tab</i>	1	PA QL=120 EA/30 Days
<i>nateglinide 120mg tab</i>	1	
<i>nateglinide 60mg tab</i>	1	
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<i>pioglitazone 45mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	1	
<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

You can find information 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 INJ	1	INS PA BvD
HUMULIN R 500UNIT/ML PEN INJ	1	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	1	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	1	INS
INSULIN LISPRO 100UNIT/ML INJ	1	INS PA BvD
LANTUS 100UNIT/ML INJ	1	INS
LANTUS 100UNIT/ML PEN INJ	1	INS
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	
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		
AMPHOTERICIN B 50MG INJ	1	PA_BvD
<i>flucytosine 250mg cap</i>	1	
<i>flucytosine 500mg cap</i>	1	
<i>griseofulvin 125mg tab</i>	1	
<i>griseofulvin 250mg tab</i>	1	
<i>griseofulvin 25mg/ml oral susp</i>	1	
<i>griseofulvin 500mg tab</i>	1	
<i>nystatin 500000unit tab</i>	1	
<i>terbinafine 250mg tab</i>	1	
IMIDAZOLE-RELATED ANTIFUNGALS		
<i>fluconazole 100mg tab</i>	1	
<i>fluconazole 10mg/ml oral susp</i>	1	
<i>fluconazole 150mg tab</i>	1	
<i>fluconazole 200mg tab</i>	1	
<i>fluconazole 200mg/100ml inj</i>	1	
<i>fluconazole 400mg/200ml inj</i>	1	
<i>fluconazole 40mg/ml oral susp</i>	1	
<i>fluconazole 50mg tab</i>	1	
<i>itraconazole 100mg cap</i>	1	QL=120 EA/30 Days
<i>ketoconazole 200mg tab</i>	1	
<i>posaconazole 100mg dr tab</i>	1	PA QL=96 EA/30 Days

You can find information 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 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
BILE ACID SEQUESTRANTS		
<i>cholestyramine resin (sugar-free) 4gm powder for oral susp</i>	1	
<i>cholestyramine resin 4gm powder for oral susp</i>	1	
<i>colesevelam 625mg tab</i>	1	
<i>colestipol 1gm tab</i>	1	
<i>colestipol 5000mg granules for oral susp</i>	1	
<i>prevalite 4gm powder for oral susp</i>	1	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate 134mg cap</i>	1	
<i>fenofibrate 145mg tab</i>	1	
<i>fenofibrate 160mg tab</i>	1	
<i>fenofibrate 200mg cap</i>	1	
<i>fenofibrate 48mg tab</i>	1	
<i>fenofibrate 54mg tab</i>	1	
<i>fenofibrate 67mg cap</i>	1	
<i>fenofibric acid 135mg dr cap</i>	1	
<i>fenofibric acid 45mg dr cap</i>	1	
<i>gemfibrozil 600mg tab</i>	1	QL=60 EA/30 Days
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin 10mg tab</i>	1	
<i>atorvastatin 20mg tab</i>	1	
<i>atorvastatin 40mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>atorvastatin 80mg tab</i>	1	
<i>fluvastatin 20mg cap</i>	1	
<i>fluvastatin 40mg cap</i>	1	
<i>lovastatin 10mg tab</i>	1	
<i>lovastatin 20mg tab</i>	1	
<i>lovastatin 40mg tab</i>	1	
<i>pravastatin sodium 10mg tab</i>	1	
<i>pravastatin sodium 20mg tab</i>	1	
<i>pravastatin sodium 40mg tab</i>	1	
<i>pravastatin sodium 80mg tab</i>	1	
<i>rosuvastatin calcium 10mg tab</i>	1	
<i>rosuvastatin calcium 20mg tab</i>	1	
<i>rosuvastatin calcium 40mg tab</i>	1	
<i>rosuvastatin calcium 5mg tab</i>	1	
<i>simvastatin 10mg tab</i>	1	
<i>simvastatin 20mg tab</i>	1	
<i>simvastatin 40mg tab</i>	1	
<i>simvastatin 5mg tab</i>	1	
<i>simvastatin 80mg tab</i>	1	
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril 10mg tab</i>	1	
<i>benazepril 20mg tab</i>	1	
<i>benazepril 40mg tab</i>	1	
<i>benazepril 5mg tab</i>	1	
<i>captopril 100mg tab</i>	1	
<i>captopril 12.5mg tab</i>	1	
<i>captopril 25mg tab</i>	1	
<i>captopril 50mg tab</i>	1	
<i>enalapril maleate 10mg tab</i>	1	
<i>enalapril maleate 2.5mg tab</i>	1	
<i>enalapril maleate 20mg tab</i>	1	
<i>enalapril maleate 5mg tab</i>	1	
<i>fosinopril sodium 10mg tab</i>	1	
<i>fosinopril sodium 20mg tab</i>	1	
<i>fosinopril sodium 40mg tab</i>	1	
<i>lisinopril 10mg tab</i>	1	
<i>lisinopril 2.5mg tab</i>	1	
<i>lisinopril 20mg tab</i>	1	
<i>lisinopril 30mg tab</i>	1	
<i>lisinopril 40mg tab</i>	1	
<i>lisinopril 5mg tab</i>	1	
<i>moexipril 15mg tab</i>	1	
<i>moexipril 7.5mg tab</i>	1	
PERINDOPRIL ERBUMINE 2MG TAB	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>perindopril erbumine 4mg tab</i>	1	
PERINDOPRIL ERBUMINE 8MG TAB	1	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<i>quinapril 40mg tab</i>	1	
<i>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	1	
<i>ramipril 10mg cap</i>	1	
<i>ramipril 2.5mg cap</i>	1	
<i>ramipril 5mg cap</i>	1	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil 16mg tab</i>	1	
<i>candesartan cilexetil 32mg tab</i>	1	
<i>candesartan cilexetil 4mg tab</i>	1	
<i>candesartan cilexetil 8mg tab</i>	1	
<i>irbesartan 150mg tab</i>	1	
<i>irbesartan 300mg tab</i>	1	
<i>irbesartan 75mg tab</i>	1	
<i>losartan potassium 100mg tab</i>	1	
<i>losartan potassium 25mg tab</i>	1	
<i>losartan potassium 50mg tab</i>	1	
<i>olmesartan medoxomil 20mg tab</i>	1	
<i>olmesartan medoxomil 40mg tab</i>	1	
<i>olmesartan medoxomil 5mg tab</i>	1	
<i>telmisartan 20mg tab</i>	1	
<i>telmisartan 40mg tab</i>	1	
<i>telmisartan 80mg tab</i>	1	
<i>valsartan 160mg tab</i>	1	
<i>valsartan 320mg tab</i>	1	
<i>valsartan 40mg tab</i>	1	
<i>valsartan 80mg tab</i>	1	
ANTIADRENERGIC ANTIHYPERTENSIVES		
<i>clonidine 0.1mg tab</i>	1	
<i>clonidine 0.1mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>clonidine 0.2mg tab</i>	1	
<i>clonidine 0.2mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>clonidine 0.3mg tab</i>	1	
<i>clonidine 0.3mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>doxazosin 1mg tab</i>	1	
<i>doxazosin 2mg tab</i>	1	
<i>doxazosin 4mg tab</i>	1	
<i>doxazosin 8mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>prazosin 1mg cap</i>	1	
<i>prazosin 2mg cap</i>	1	
<i>prazosin 5mg cap</i>	1	
<i>terazosin 10mg cap</i>	1	
<i>terazosin 1mg cap</i>	1	
<i>terazosin 2mg cap</i>	1	
<i>terazosin 5mg cap</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<i>amlodipine/benazepril 5-40mg cap</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-12.5-160mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-25-160mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 10-25-320mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 5-12.5-160mg tab</i>	1	
<i>amlodipine/hydrochlorothiazide/valsartan 5-25-160mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	1	
<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	1	
<i>amlodipine/valsartan 10-160mg tab</i>	1	
<i>amlodipine/valsartan 10-320mg tab</i>	1	
<i>amlodipine/valsartan 5-160mg tab</i>	1	
<i>amlodipine/valsartan 5-320mg tab</i>	1	
<i>atenolol/chlorthalidone 100-25mg tab</i>	1	
<i>atenolol/chlorthalidone 50-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	1	
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	1	
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	1	
<i>hydrochlorothiazide/telmisartan 12.5-40mg tab</i>	1	
<i>hydrochlorothiazide/telmisartan 12.5-80mg tab</i>	1	
<i>hydrochlorothiazide/telmisartan 25-80mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	1	
ANTIHYPERTENSIVES - MISC.		
<i>aliskiren 150mg tab</i>	1	
<i>aliskiren 300mg tab</i>	1	
<i>eplerenone 25mg tab</i>	1	
<i>eplerenone 50mg tab</i>	1	
<i>metyrosine 250mg cap</i>	1	NDS PA

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VASODILATORS		
<i>hydralazine 100mg tab</i>	1	
<i>hydralazine 10mg tab</i>	1	
<i>hydralazine 25mg tab</i>	1	
<i>hydralazine 50mg tab</i>	1	
<i>minoxidil 10mg tab</i>	1	
<i>minoxidil 2.5mg tab</i>	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
<i>azithromycin 20mg/ml oral susp</i>	1	
<i>azithromycin 250mg pack (6)</i>	1	
<i>azithromycin 250mg tab</i>	1	
<i>azithromycin 40mg/ml oral susp</i>	1	
<i>azithromycin 500mg inj</i>	1	
<i>azithromycin 500mg tab</i>	1	
<i>azithromycin 500mg tab pack (3)</i>	1	
<i>azithromycin 600mg tab</i>	1	
<i>aztreonam 1gm inj</i>	1	
<i>aztreonam 2gm inj</i>	1	
<i>cefepime 1000mg inj</i>	1	
<i>cefepime 2000mg inj</i>	1	
<i>clarithromycin 250mg tab</i>	1	
CLARITHROMYCIN 25MG/ML ORAL SUSP	1	
<i>clarithromycin 500mg tab</i>	1	
CLARITHROMYCIN 50MG/ML ORAL SUSP	1	
<i>clindamycin 150mg cap</i>	1	
<i>clindamycin 300mg cap</i>	1	
<i>clindamycin 300mg/2ml inj</i>	1	
<i>clindamycin 300mg/50ml inj</i>	1	
<i>clindamycin 600mg/4ml inj</i>	1	
<i>clindamycin 600mg/50ml inj</i>	1	
<i>clindamycin 75mg cap</i>	1	
<i>clindamycin 75mg/5ml oral soln</i>	1	
<i>clindamycin 900mg/50ml inj</i>	1	
<i>clindamycin 900mg/6ml inj</i>	1	
<i>colistin 75mg/ml inj</i>	1	
<i>daptomycin 500mg inj</i>	1	
DIFICID 200MG TAB	1	PA QL=20 EA/10 Days
DIFICID 40MG/ML ORAL SUSP	1	PA QL=136 ML/10 Days
<i>erythromycin 250mg dr tab</i>	1	
<i>erythromycin 250mg tab</i>	1	
<i>erythromycin 333mg dr tab</i>	1	
<i>erythromycin 500mg dr tab</i>	1	
<i>erythromycin 500mg tab</i>	1	
<i>erythromycin ethylsuccinate 40mg/ml oral susp</i>	1	

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

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydroxychloroquine sulfate 200mg tab</i>	1	
<i>hydroxychloroquine sulfate 300mg tab</i>	1	
<i>hydroxychloroquine sulfate 400mg tab</i>	1	
<i>mefloquine 250mg tab</i>	1	
PRIMAQUINE PHOSPHATE 26.3MG TAB	1	
<i>pyrimethamine 25mg tab</i>	1	PA QL=90 EA/30 Days
<i>quinine sulfate 324mg cap</i>	1	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE 10MG TAB	1	NDS PA
<i>pyridostigmine bromide 60mg tab</i>	1	
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>dapsone 100mg tab</i>	1	
<i>dapsone 25mg tab</i>	1	
<i>ethambutol 100mg tab</i>	1	
<i>ethambutol 400mg tab</i>	1	
<i>isoniazid 100mg tab</i>	1	
<i>isoniazid 10mg/ml oral soln</i>	1	
<i>isoniazid 300mg tab</i>	1	
PRIFTIN 150MG TAB	1	
<i>pyrazinamide 500mg tab</i>	1	
<i>rifabutin 150mg cap</i>	1	
<i>rifampin 150mg cap</i>	1	
<i>rifampin 300mg cap</i>	1	
<i>rifampin 600mg inj</i>	1	
SIRTURO 100MG TAB	1	NDS PA
SIRTURO 20MG TAB	1	NDS PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE 25MG TAB	1	PA_BvD
CYCLOPHOSPHAMIDE 50MG TAB	1	PA_BvD
GLEOSTINE 100MG CAP	1	
GLEOSTINE 10MG CAP	1	
GLEOSTINE 40MG CAP	1	
LEUKERAN 2MG TAB	1	NDS
ANTIMETABOLITES		
JYLAMVO 2MG/ML ORAL SOLN	1	PA_NSO
<i>mercaptopurine 20mg/ml susp</i>	1	PA_NSO QL=300 ML/30 Days
<i>mercaptopurine 50mg tab</i>	1	
<i>methotrexate 2.5mg tab</i>	1	
METHOTREXATE 25MG/ML INJ	1	
<i>methotrexate 50mg/2ml inj</i>	1	
ONUREG 200MG TAB	1	NDS PA_NSO QL=14 EA/28 Days
ONUREG 300MG TAB	1	NDS PA_NSO QL=14 EA/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PURIXAN 2000MG/100ML ORAL SUSP	1	PA_NSO QL=300 ML/30 Days
TABLOID 40MG TAB	1	NDS
XATMEP 2.5MG/ML ORAL SOLN	1	PA_NSO
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1MG CAP	1	NDS PA_NSO QL=84 EA/28 Days
FRUZAQLA 5MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
INLYTA 1MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
INLYTA 5MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
LENVIMA 10MG DAILY DOSE PACK (30)	1	NDS PA_NSO QL=30 EA/30 Days
LENVIMA 12MG DAILY DOSE PACK (90)	1	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 14MG DAILY DOSE PACK (60)	1	NDS PA_NSO QL=60 EA/30 Days
LENVIMA 18MG DAILY DOSE PACK (90)	1	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 20MG DAILY DOSE PACK (60)	1	NDS PA_NSO QL=60 EA/30 Days
LENVIMA 24MG DAILY DOSE PACK (90)	1	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 4MG DAILY DOSE PACK (30)	1	NDS PA_NSO QL=30 EA/30 Days
LENVIMA 8MG DAILY DOSE PACK (60)	1	NDS PA_NSO QL=60 EA/30 Days
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>erlotinib 150mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>erlotinib 25mg tab</i>	1	PA_NSO QL=90 EA/30 Days
<i>gefitinib 250mg tab</i>	1	PA_NSO QL=60 EA/30 Days
GILOTRIF 20MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
GILOTRIF 30MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
GILOTRIF 40MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
LAZCLUZE 240MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
LAZCLUZE 80MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
TAGRISSE 40MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
TAGRISSE 80MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 15MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 30MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 45MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
DAURISMO 25MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ERIVEDGE 150MG CAP	1	NDS PA_NSO QL=28 EA/28 Days
ODOMZO 200MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	1	QL=120 EA/30 Days
<i>abirtega 250mg tab</i>	1	QL=120 EA/30 Days
AKEEGA 500-100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
AKEEGA 500-50MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
<i>anastrozole 1mg tab</i>	1	
<i>bicalutamide 50mg tab</i>	1	
ELIGARD 22.5MG SYRINGE	1	QL=1 EA/84 Days
ELIGARD 30MG SYRINGE	1	QL=1 EA/112 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ELIGARD 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
AUGTYRO 160MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
AUGTYRO 40MG CAP	1	NDS PA_NSO QL=240 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BALVERSA 3MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
BALVERSA 4MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
BALVERSA 5MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
BOSULIF 100MG CAP	1	NDS PA_NSO QL=180 EA/30 Days
BOSULIF 100MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
BOSULIF 400MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
BOSULIF 500MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
BOSULIF 50MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
BRAFTOVI 75MG CAP	1	NDS PA_NSO QL=180 EA/30 Days
BRUKINSA 80MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
CABOMETYX 20MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
CABOMETYX 40MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
CABOMETYX 60MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
CALQUENCE 100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
CAPRELSA 100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
CAPRELSA 300MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
COMETRIQ CAP 100MG DAILY DOSE PACK (56)	1	NDS PA_NSO QL=56 EA/28 Days
COMETRIQ CAP 140MG DAILY DOSE PACK (112)	1	NDS PA_NSO QL=112 EA/28 Days
COMETRIQ CAP 60MG DAILY DOSE PACK (84)	1	NDS PA_NSO QL=84 EA/28 Days
COPIKTRA 15MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
COPIKTRA 25MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
COTELLIC 20MG TAB	1	NDS PA_NSO QL=63 EA/28 Days
<i>dasatinib 100mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>dasatinib 140mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>dasatinib 20mg tab</i>	1	PA_NSO QL=90 EA/30 Days
<i>dasatinib 50mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>dasatinib 70mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>dasatinib 80mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>everolimus 10mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>everolimus 2.5mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>everolimus 2mg tab for oral susp</i>	1	PA_NSO QL=150 EA/30 Days
<i>everolimus 3mg tab for oral susp</i>	1	PA_NSO QL=90 EA/30 Days
<i>everolimus 5mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>everolimus 5mg tab for oral susp</i>	1	PA_NSO QL=60 EA/30 Days
<i>everolimus 7.5mg tab</i>	1	PA_NSO QL=30 EA/30 Days
FOTIVDA 0.89MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
FOTIVDA 1.34MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
GAVRETO 100MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
GOMEKLI 1MG CAP	1	NDS PA_NSO QL=42 EA/28 Days
GOMEKLI 1MG TAB FOR ORAL SUSP	1	NDS PA_NSO QL=126 EA/28 Days
GOMEKLI 2MG CAP	1	NDS PA_NSO QL=84 EA/28 Days
IBRANCE 100MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 100MG TAB	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 125MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 125MG 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 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
MEKINIST 0.05MG/ML ORAL SOLN	1	NDS PA_NSO QL=1260 ML/30 Days
MEKINIST 0.5MG TAB	1	NDS PA_NSO QL=90 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MEKINIST 2MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
MEKTOVI 15MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
NERLYNX 40MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
<i>nilotinib 150mg cap</i>	1	NDS PA_NSO QL=112 EA/28 Days
<i>nilotinib 200mg cap</i>	1	NDS PA_NSO QL=112 EA/28 Days
<i>nilotinib 50mg cap</i>	1	NDS PA_NSO QL=120 EA/30 Days
NINLARO 2.3MG CAP	1	NDS PA_NSO QL=3 EA/28 Days
NINLARO 3MG CAP	1	NDS PA_NSO QL=3 EA/28 Days
NINLARO 4MG CAP	1	NDS PA_NSO QL=3 EA/28 Days
OGSIVEO 100MG TAB 7-DAY PACK (14)	1	NDS PA_NSO QL=56 EA/28 Days
OGSIVEO 150MG TAB 7-DAY PACK (14)	1	NDS PA_NSO QL=56 EA/28 Days
OGSIVEO 50MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
OJEMDA 100MG TAB	1	NDS PA_NSO QL=24 EA/28 Days
OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	1	NDS PA_NSO QL=16 EA/28 Days
OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	1	NDS PA_NSO QL=24 EA/28 Days
OJEMDA 25MG/ML POWDER FOR ORAL SUSP	1	NDS PA_NSO QL=96 ML/28 Days
OJJAARA 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
OJJAARA 150MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
OJJAARA 200MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
<i>pazopanib 200mg tab</i>	1	PA_NSO QL=120 EA/30 Days
PEMAZYRE 13.5MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
PEMAZYRE 4.5MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
PEMAZYRE 9MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
PIQRAY TAB 200MG DAILY DOSE PACK (28)	1	NDS PA_NSO QL=28 EA/28 Days
PIQRAY TAB 250MG DAILY DOSE PACK (56)	1	NDS PA_NSO QL=56 EA/28 Days
PIQRAY TAB 300MG DAILY DOSE PACK (56)	1	NDS PA_NSO QL=56 EA/28 Days
QINLOCK 50MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
RETEVMO 120MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
RETEVMO 160MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
RETEVMO 40MG 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
RYDAPT 25MG CAP	1	NDS PA_NSO QL=224 EA/28 Days
SCEMBLIX 100MG 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
SCEMBLIX 20MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
SCEMBLIX 40MG TAB	1	NDS PA_NSO QL=300 EA/30 Days
<i>sorafenib 200mg tab</i>	1	PA_NSO QL=120 EA/30 Days
STIVARGA 40MG TAB	1	NDS PA_NSO QL=84 EA/28 Days
<i>sunitinib 12.5mg cap</i>	1	PA_NSO QL=28 EA/28 Days
<i>sunitinib 25mg cap</i>	1	PA_NSO QL=28 EA/28 Days
<i>sunitinib 37.5mg cap</i>	1	PA_NSO QL=28 EA/28 Days
<i>sunitinib 50mg cap</i>	1	PA_NSO QL=28 EA/28 Days
TABRECTA 150MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
TABRECTA 200MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
TAFINLAR 10MG TAB FOR ORAL SUSP	1	NDS PA_NSO QL=840 EA/28 Days
TAFINLAR 50MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
TAFINLAR 75MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
TALZENNA 0.1MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.25MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.35MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.5MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.75MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 1MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TAZVERIK 200MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
TEPMETKO 225MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
TIBSOVO 250MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
<i>torpenz 10mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>torpenz 2.5mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>torpenz 5mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>torpenz 7.5mg tab</i>	1	PA_NSO QL=30 EA/30 Days
TRUQAP 160MG TAB	1	NDS PA_NSO QL=64 EA/28 Days
TRUQAP 200MG TAB	1	NDS PA_NSO QL=64 EA/28 Days
TURALIO 125MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
VANFLYTA 17.7MG TAB	1	NDS PA_NSO QL=28 EA/28 Days
VANFLYTA 26.5MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 100MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 150MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 200MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 50MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
VITRAKVI 100MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
VITRAKVI 20MG/ML ORAL SOLN	1	NDS PA_NSO QL=300 ML/30 Days
VITRAKVI 25MG CAP	1	NDS PA_NSO QL=180 EA/30 Days
VONJO 100MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
VORANIGO 10MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
VORANIGO 40MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
XALKORI 150MG ORAL PELLETT	1	NDS PA_NSO QL=180 EA/30 Days
XALKORI 200MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
XALKORI 20MG ORAL PELLETT	1	NDS PA_NSO QL=120 EA/30 Days
XALKORI 250MG CAP	1	NDS PA_NSO QL=120 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XALKORI 50MG ORAL PELLETT	1	NDS PA_NSO QL=120 EA/30 Days
XOSPATA 40MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
ZEJULA 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ZEJULA 200MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ZEJULA 300MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ZELBORAF 240MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
ZOLINZA 100MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
ZYDELIG 100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ZYDELIG 150MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ZYKADIA 150MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
ANTINEOPLASTICS MISC.		
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
HERNEXEOS 60MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
<i>hydroxyurea 500mg cap</i>	1	
MATULANE 50MG CAP	1	NDS
MODEYSO 125MG CAP	1	NDS PA_NSO QL=20 EA/28 Days
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
EFVIRENZ/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
ERYTHROMYCIN 2% TOPICAL GEL	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>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% 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	
BOMYNTRA 120MG/1.7ML INJ	1	NDS PA QL=1.70 ML/28 Days
BOMYNTRA 120MG/1.7ML SYRINGE	1	NDS PA QL=1.70 ML/28 Days
CONEXXENCE 60MG/ML SYRINGE	1	ST QL=1 ML/168 Days
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>calcitriol 0.5mcg cap</i>	1	PA_BvD
<i>calcitriol 1mcg/ml oral soln</i>	1	PA_BvD
<i>carglumic acid 200mg tab for oral susp</i>	1	PA
<i>cinacalcet 30mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>cinacalcet 60mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>cinacalcet 90mg tab</i>	1	PA_BvD QL=120 EA/30 Days
CYSTADANE 1GM POWDER FOR ORAL SOLN	1	NDS
<i>javygtor 100mg powder for oral soln</i>	1	PA
<i>javygtor 100mg tab</i>	1	PA
<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
KERENDIA 40MG 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		

You can find information 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>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	
<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/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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack</i>	1	
<i>ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25mg-mcg tab 28-day pack</i>	1	
<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35mg-mcg tab 28-day pack</i>	1	
<i>falmina tab 28-day pack</i>	1	
<i>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>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	

You can find information 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>loestrin fe tab 1/20 28-day pack</i>	1	
<i>loryna tab 28-day pack</i>	1	
<i>low-ogestrel tab 28-day pack</i>	1	
<i>lutra tab 28-day pack</i>	1	
<i>marlissa tab 28-day pack</i>	1	
<i>mibelas 24 fe chewable tab 28-day pack</i>	1	
<i>microgestin 1.5/30 tab 21-day pack</i>	1	
<i>microgestin 1/20 tab 21-day pack</i>	1	
<i>microgestin fe tab 1.5/30 28-day pack</i>	1	
<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	

You can find information 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>valtya tab 1/50 28-day pack</i>	1	
VELIVET TAB 28-DAY PACK	1	
<i>vestura tab 3-0.02mg 28-day pack</i>	1	
<i>vienva tab 28-day pack</i>	1	
<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	

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

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

You can find information 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 15meq er tab</i>	1	
<i>potassium citrate 5meq er tab</i>	1	
<i>sodium chloride 0.9% irrigation soln</i>	1	
GENITOURINARY AGENTS - MISCELLANEOUS		
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	
<i>dutasteride 0.5mg cap</i>	1	
<i>finasteride 5mg tab</i>	1	
<i>tadalafil 2.5mg tab</i>	1	PA QL=30 EA/30 Days
<i>tadalafil 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>tamsulosin 0.4mg cap</i>	1	
GOUT AGENTS		
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	1	
<i>allopurinol 300mg tab</i>	1	
<i>colchicine 0.6mg tab</i>	1	
<i>colchicine/probenecid 0.5-500mg tab</i>	1	
<i>febuxostat 40mg tab</i>	1	ST
<i>febuxostat 80mg tab</i>	1	ST
<i>probenecid 500mg tab</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide 0.5mg cap</i>	1	
<i>anagrelide 1mg cap</i>	1	
<i>aspirin/dipyridamole 25-200mg er cap</i>	1	QL=60 EA/30 Days
<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		
<i>DOPTELET 20MG TAB</i>	1	NDS PA QL=60 EA/30 Days
<i>DOPTELET TAB 40MG DAILY DOSE PACK (10)</i>	1	NDS PA QL=10 EA/5 Days
<i>DOPTELET TAB 60MG DAILY DOSE PACK (15)</i>	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

You can find information 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/0.5ML SYRINGE	1	NDS
NIVESTYM 300MCG/ML INJ	1	NDS
NIVESTYM 480MCG/0.8ML SYRINGE	1	NDS
NIVESTYM 480MCG/1.6ML INJ	1	NDS
NYVEPRIA 6MG/0.6ML SYRINGE	1	NDS
RETACRIT 10000UNIT/ML INJ	1	PA
RETACRIT 20000UNIT/2ML INJ	1	PA
RETACRIT 20000UNIT/ML INJ	1	PA
RETACRIT 2000UNIT/ML INJ	1	PA
RETACRIT 3000UNIT/ML INJ	1	PA
RETACRIT 40000UNIT/ML INJ	1	PA
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	

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

You can find information 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 odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 10mg tab</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg tab</i>	1	QL=36 EA/60 Days
<i>sumatriptan 100mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 25mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 4mg/0.5ml cartridge</i>	1	QL=5 ML/30 Days
<i>sumatriptan 50mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 6mg/0.5ml auto-injector</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml cartridge</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml inj</i>	1	QL=5 ML/30 Days
<i>zolmitriptan 2.5mg tab</i>	1	QL=18 EA/30 Days
<i>zolmitriptan 5mg tab</i>	1	QL=18 EA/30 Days
MINERALS & ELECTROLYTES		
ELECTROLYTE MIXTURES		
<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	
GLUCOSE 50MG/ML/POTASSIUM CHLORIDE 0.02MEQ/ML/SODIUM CHLORIDE 2.25MG/ML INJ	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>kcl/nacl 40meq-9% inj</i>	1	
PLASMA-LYTE A INJ	1	
TPN ELECTROLYTES INJ	1	PA_BvD
MAGNESIUM		
<i>magnesium sulfate 500mg/ml inj</i>	1	
<i>magnesium sulfate 500mg/ml syringe</i>	1	
POTASSIUM		
<i>klor-con 10meq er tab</i>	1	
<i>klor-con 10meq micro er tab</i>	1	
<i>klor-con 15meq micro er tab</i>	1	
<i>klor-con 20meq micro er tab</i>	1	
<i>klor-con 20meq powder for oral soln</i>	1	
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

You can find information 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 2.5mg cap</i>	1	PA_NSO QL=30 EA/30 Days
<i>lenalidomide 20mg cap</i>	1	PA_NSO QL=30 EA/30 Days
<i>lenalidomide 25mg cap</i>	1	PA_NSO QL=30 EA/30 Days
<i>lenalidomide 5mg cap</i>	1	PA_NSO QL=30 EA/30 Days
NEMLUVIO 30MG AUTO-INJECTOR	1	NDS PA QL=2 EA/28 Days
REZUROCK 200MG TAB	1	NDS PA QL=30 EA/30 Days
THALOMID 100MG CAP	1	NDS QL=30 EA/30 Days
THALOMID 50MG CAP	1	NDS QL=30 EA/30 Days
IMMUNOSUPPRESSIVE AGENTS		
ARCALYST 220MG INJ	1	NDS PA
<i>azathioprine 50mg tab</i>	1	PA_BvD
BENLYSTA 200MG/ML AUTO-INJECTOR	1	NDS PA QL=4 ML/28 Days
BENLYSTA 200MG/ML SYRINGE	1	NDS PA QL=4 ML/28 Days
<i>cyclosporine 100mg cap</i>	1	PA_BvD
<i>cyclosporine 25mg cap</i>	1	PA_BvD
<i>cyclosporine modified 100mg cap</i>	1	PA_BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	1	PA_BvD
<i>cyclosporine modified 25mg cap</i>	1	PA_BvD
<i>cyclosporine modified 50mg cap</i>	1	PA_BvD
ENVARUSUS XR 0.75MG TAB	1	PA_BvD
ENVARUSUS XR 1MG TAB	1	PA_BvD
ENVARUSUS XR 4MG TAB	1	PA_BvD
<i>everolimus 0.25mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>everolimus 0.5mg tab</i>	1	PA_BvD QL=120 EA/30 Days
<i>everolimus 0.75mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>everolimus 1mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>engraft 100mg cap</i>	1	PA_BvD
<i>engraft 25mg cap</i>	1	PA_BvD
LITFULO 50MG CAP	1	NDS PA QL=28 EA/28 Days
LUPKYNIS 7.9MG CAP	1	NDS PA QL=180 EA/30 Days
<i>mycophenolate mofetil 200mg/ml oral susp</i>	1	PA_BvD
<i>mycophenolate mofetil 250mg cap</i>	1	PA_BvD
<i>mycophenolate mofetil 500mg tab</i>	1	PA_BvD
<i>mycophenolic acid 180mg dr tab</i>	1	PA_BvD
<i>mycophenolic acid 360mg dr tab</i>	1	PA_BvD
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	1	PA_BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	1	PA_BvD
<i>sirolimus 0.5mg tab</i>	1	PA_BvD
<i>sirolimus 1mg tab</i>	1	PA_BvD
<i>sirolimus 1mg/ml oral soln</i>	1	PA_BvD
<i>sirolimus 2mg tab</i>	1	PA_BvD
<i>tacrolimus 0.5mg cap</i>	1	PA_BvD
<i>tacrolimus 1mg cap</i>	1	PA_BvD
<i>tacrolimus 5mg cap</i>	1	PA_BvD
POTASSIUM REMOVING AGENTS		

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

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPTH SOLN	1	QL=10 ML/7 Days
<i>ofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>polycin 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>polymyxin b/trimethoprim 10000 unit/ml-0.1% ophth soln</i>	1	QL=10 ML/7 Days
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
XDEMVY 0.25% OPTH SOLN	1	PA QL=10 ML/42 Days
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPTH SOLN	1	QL=5 ML/30 Days
ROCKLATAN 0.02-0.005% OPTH SOLN	1	QL=5 ML/30 Days
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPTH SOLN	1	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>	1	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	1	
<i>difluprednate 0.05% ophth susp</i>	1	
<i>fluorometholone 0.1% ophth susp</i>	1	
<i>loteprednol etabonate 0.5% ophth gel</i>	1	
<i>loteprednol etabonate 0.5% ophth susp</i>	1	
<i>neo-polycin hc ophth ointment</i>	1	
<i>neomycin/polymyxin/bacitracin/hydrocortisone ophth 1% ointment</i>	1	
<i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>	1	
PREDNISOLONE 1% OPTH SOLN	1	
<i>prednisolone acetate 1% ophth susp</i>	1	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPTH SOLN	1	
OPHTHALMICS - MISC.		
<i>atropine sulfate 1% ophth soln</i>	1	
<i>azelastine 0.05% ophth soln</i>	1	
<i>bromfenac 0.07% ophth soln</i>	1	QL=12 ML/365 Days
CROMOLYN SODIUM 4% OPTH SOLN	1	
<i>cyclosporine 0.05% ophth susp</i>	1	QL=60 EA/30 Days
CYSTADROPS 0.37% OPTH SOLN	1	NDS PA QL=20 ML/28 Days
CYSTARAN 0.44% OPTH SOLN	1	NDS PA QL=60 ML/28 Days
<i>diclofenac sodium 0.1% ophth soln</i>	1	QL=20 ML/365 Days
<i>dorzolamide 2% ophth soln</i>	1	
FLURBIPROFEN SODIUM 0.03% OPTH SOLN	1	
<i>ketorolac tromethamine 0.4% ophth soln</i>	1	QL=20 ML/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	1	
<i>pilocarpine 1% ophth soln</i>	1	

You can find information 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 2% ophth soln</i>	1	
<i>pilocarpine 4% ophth soln</i>	1	
XIIDRA 5% OPTH SOLN	1	QL=60 EA/30 Days
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03% ophth soln</i>	1	QL=5 ML/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 ML/30 Days
LUMIGAN 0.01% OPTH SOLN	1	QL=5 ML/30 Days
<i>travoprost 0.004% ophth soln</i>	1	QL=5 ML/30 Days
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2% otic soln</i>	1	
<i>flac 0.01% otic soln</i>	1	
<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	

You can find information 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 g potassium 1000000unit/ml inj</i>	1	
PENICILLIN G SODIUM 100000UNIT/ML INJ	1	
<i>penicillin v potassium 250mg tab</i>	1	
PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN	1	
<i>penicillin v potassium 500mg tab</i>	1	
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin/clavulanate 250-125mg tab</i>	1	
<i>amoxicillin/clavulanate 500-125mg tab</i>	1	
<i>amoxicillin/clavulanate 875-125mg tab</i>	1	
<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	1	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	1	
<i>ampicillin/sulbactam 1000-500mg inj</i>	1	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	1	
<i>piperacillin/tazobactam 2000-250mg inj</i>	1	
<i>piperacillin/tazobactam 3000-375mg inj</i>	1	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	1	
<i>piperacillin/tazobactam 4000-500mg inj</i>	1	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	
<i>nafcillin 100mg/ml inj</i>	1	
<i>nafcillin 1gm inj</i>	1	
<i>nafcillin 2gm inj</i>	1	
<i>oxacillin 100mg/ml inj</i>	1	
<i>oxacillin 1gm inj</i>	1	
<i>oxacillin 2gm inj</i>	1	
PROGESTINS		
PROGESTINS		
<i>camila 0.35mg tab 28-day pack</i>	1	
<i>deblitane 0.35mg tab 28-day pack</i>	1	
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	1	
<i>errin 0.35mg tab 28-day pack</i>	1	
<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	

You can find information 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>medroxyprogesterone acetate 2.5mg tab</i>	1	
<i>medroxyprogesterone acetate 5mg tab</i>	1	
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 6MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 9MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO XR 12MG TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO XR 18MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 24MG TAB	1	NDS PA QL=60 EA/30 Days
AUSTEDO XR 30MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 36MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 42MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 48MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 6MG TAB	1	NDS PA QL=90 EA/30 Days
AUSTEDO XR TAB ONCE DAILY 4 WEEK 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
tetrabenazine 12.5mg tab	1	QL=90 EA/30 Days
tetrabenazine 25mg tab	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
dalfampridine 10mg er tab	1	QL=60 EA/30 Days
dimethyl fumarate 120mg dr cap	1	QL=14 EA/7 Days
dimethyl fumarate 120mg/240mg cap starter pack (60)	1	QL=60 EA/180 Days
dimethyl fumarate 240mg dr cap	1	QL=60 EA/30 Days
fingolimod 0.5mg cap	1	QL=30 EA/30 Days
glatiramer acetate 20mg/ml syringe	1	QL=30 ML/30 Days
glatiramer acetate 40mg/ml syringe	1	QL=12 ML/28 Days
glatopa 20mg/ml syringe	1	QL=30 ML/30 Days
glatopa 40mg/ml syringe	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
teriflunomide 14mg tab	1	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>teriflunomide 7mg tab</i>	1	QL=30 EA/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
NUEDEXTA 20-10MG CAP	1	PA QL=60 EA/30 Days
PIMOZIDE 1MG TAB	1	
PIMOZIDE 2MG TAB	1	
SMOKING DETERRENTS		
<i>bupropion 150mg sr (12hr) tab</i>	1	
NICOTROL 10MG/ML NASAL INHALER	1	
<i>varenicline 0.5mg tab</i>	1	QL=56 EA/28 Days
<i>varenicline 0.5mg/1mg first month pack (53)</i>	1	QL=53 EA/28 Days
<i>varenicline 1mg tab</i>	1	QL=56 EA/28 Days
<i>varenicline 1mg tab pack (56)</i>	1	QL=56 EA/28 Days
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
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 <u>BvD</u> 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

You can find information 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>pirfenidone 801mg tab</i>	1	PA QL=90 EA/30 Days
RESPIRATORY TRACT AGENTS		
ANTI-HISTAMINES		
<i>desloratadine 5mg tab</i>	1	
<i>levocetirizine 5mg tab</i>	1	
<i>promethazine 1.25mg/ml oral soln</i>	1	
<i>promethazine 12.5mg tab</i>	1	
<i>promethazine 25mg tab</i>	1	
<i>promethazine 50mg tab</i>	1	
PULMONARY ANTIHYPERTENSIVES		
ADEMPAS 0.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	1	NDS PA QL=90 EA/30 Days
<i>alyq 20mg tab</i>	1	PA QL=60 EA/30 Days
<i>ambrisentan 10mg tab</i>	1	PA QL=30 EA/30 Days
<i>ambrisentan 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>bosentan 125mg tab</i>	1	PA QL=60 EA/30 Days
<i>bosentan 62.5mg tab</i>	1	PA QL=60 EA/30 Days
OPSUMIT 10MG TAB	1	NDS PA QL=30 EA/30 Days
<i>sildenafil 20mg tab</i>	1	PA QL=360 EA/30 Days
<i>tadalafil 20mg tab</i>	1	PA QL=60 EA/30 Days
WINREVAIR 45MG INJ	1	NDS PA QL=1 EA/21 Days
WINREVAIR 45MG INJ (2 VIAL PACK)	1	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ	1	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ (2 VIAL PACK)	1	NDS PA QL=1 EA/21 Days
RESPIRATORY TRACT/PULMONARY AGENTS		
PHOSPHODIESTERASE INHIBITORS, AIRWAYS DISEASE		
<i>roflumilast 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>roflumilast 250mcg tab</i>	1	QL=28 EA/365 Days
THEOPHYLLINE 100MG ER TAB	1	
THEOPHYLLINE 200MG ER TAB	1	
<i>theophylline 300mg er tab</i>	1	
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450mg er tab</i>	1	
<i>theophylline 600mg er tab</i>	1	
SLEEP DISORDER AGENTS		
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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SUNOSI 150MG TAB	1	PA QL=30 EA/30 Days
SUNOSI 75MG TAB	1	PA QL=30 EA/30 Days
SULFONAMIDES		
SULFONAMIDES		
<i>sulfadiazine 500mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 200-40mg/5ml oral susp</i>	1	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
TETRACYCLINES		
TETRACYCLINES		
<i>doxy 100mg inj</i>	1	
<i>doxycycline hyclate 100mg cap</i>	1	
<i>doxycycline hyclate 100mg 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	

You can find information 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 100mcg tab</i>	1	
<i>levoxyl 112mcg tab</i>	1	
<i>levoxyl 125mcg tab</i>	1	
<i>levoxyl 137mcg tab</i>	1	
<i>levoxyl 150mcg tab</i>	1	
<i>levoxyl 175mcg tab</i>	1	
<i>levoxyl 200mcg tab</i>	1	
<i>levoxyl 25mcg tab</i>	1	
<i>levoxyl 50mcg tab</i>	1	
<i>levoxyl 75mcg tab</i>	1	
<i>levoxyl 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	1	
<i>liothyronine sodium 50mcg tab</i>	1	
<i>liothyronine sodium 5mcg tab</i>	1	
<i>unithroid 100mcg tab</i>	1	
<i>unithroid 112mcg tab</i>	1	
<i>unithroid 125mcg tab</i>	1	
<i>unithroid 137mcg tab</i>	1	
<i>unithroid 150mcg tab</i>	1	
<i>unithroid 175mcg tab</i>	1	
<i>unithroid 200mcg tab</i>	1	
<i>unithroid 25mcg tab</i>	1	
<i>unithroid 300mcg tab</i>	1	
<i>unithroid 50mcg tab</i>	1	
<i>unithroid 75mcg tab</i>	1	
<i>unithroid 88mcg tab</i>	1	
TOXOIDS		
TOXOID COMBINATIONS		
ADACEL INJ	1	VAC
ADACEL SYRINGE	1	VAC
BOOSTRIX INJ	1	VAC
BOOSTRIX SYRINGE	1	VAC
DAPTACEL INJ	1	
INFANRIX SYRINGE	1	
KINRIX SYRINGE	1	
PEDIARIX SYRINGE	1	
PENTACEL 96-30-68UNIT/ML INJ	1	
QUADRACEL INJ	1	
QUADRACEL SYRINGE	1	
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	

You can find information 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>dicyclomine 2mg/ml oral soln</i>	1	
<i>glycopyrrolate 1mg tab</i>	1	
<i>glycopyrrolate 2mg tab</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine 200mg tab</i>	1	
<i>cimetidine 300mg tab</i>	1	
<i>cimetidine 400mg tab</i>	1	
<i>cimetidine 800mg tab</i>	1	
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
MISC. ANTI-ULCER		
<i>misoprostol 100mcg tab</i>	1	
<i>misoprostol 200mcg tab</i>	1	
<i>sucralfate 1000mg tab</i>	1	
<i>sucralfate 100mg/ml oral susp</i>	1	
PROTON PUMP INHIBITORS		
<i>esomeprazole 20mg dr cap</i>	1	
<i>esomeprazole 40mg dr cap</i>	1	
<i>lansoprazole 15mg dr cap</i>	1	
<i>lansoprazole 30mg dr cap</i>	1	
<i>omeprazole 10mg dr cap</i>	1	
<i>omeprazole 20mg dr cap</i>	1	
<i>omeprazole 40mg dr cap</i>	1	
<i>pantoprazole 20mg dr tab</i>	1	
<i>pantoprazole 40mg dr tab</i>	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>fesoterodine fumarate 4mg er tab</i>	1	QL=30 EA/30 Days
<i>fesoterodine fumarate 8mg er tab</i>	1	QL=30 EA/30 Days
<i>oxybutynin chloride 10mg er tab</i>	1	
<i>oxybutynin chloride 15mg er tab</i>	1	
<i>oxybutynin chloride 1mg/ml oral soln</i>	1	
<i>oxybutynin chloride 5mg er tab</i>	1	
<i>oxybutynin chloride 5mg tab</i>	1	
<i>tolterodine tartrate 1mg tab</i>	1	QL=60 EA/30 Days
<i>tolterodine tartrate 2mg er cap</i>	1	QL=30 EA/30 Days
<i>tolterodine tartrate 2mg tab</i>	1	QL=60 EA/30 Days
<i>tolterodine tartrate 4mg er cap</i>	1	QL=30 EA/30 Days
<i>trospium chloride 20mg tab</i>	1	QL=60 EA/30 Days
<i>trospium 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	

You can find information 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>flavoxate 100mg tab</i>	1	
<i>mirabegron 25mg er tab</i>	1	QL=30 EA/30 Days
<i>mirabegron 50mg er tab</i>	1	QL=30 EA/30 Days
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ	1	
BCG LIVE TICE STRAIN 50MG INJ	1	VAC
BEXSERO SYRINGE	1	VAC
HIBERIX 10MCG INJ	1	
MENQUADFI INJ	1	VAC
MENVEO INJ	1	VAC
PEDVAXHIB 7.5MCG/0.5ML INJ	1	
PENBRAYA INJ	1	VAC
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
IPOL 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	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ROTATEQ ORAL SUSP	1	
SHINGRIX 50MCG/0.5ML INJ	1	QL=2 EA/365 DaysVAC
TICOVAC 1.2MCG/0.25ML SYRINGE	1	
TICOVAC 2.4MCG/0.5ML SYRINGE	1	VAC
TWINRIX SYRINGE	1	VAC
VAQTA 25UNIT/0.5ML INJ	1	
VAQTA 25UNIT/0.5ML SYRINGE	1	
VAQTA 50UNIT/ML INJ	1	VAC
VAQTA 50UNIT/ML SYRINGE	1	VAC
VARIVAX 1350PFU/0.5ML INJ	1	VAC
VIMKUNYA 40MCG/0.8ML SYRINGE	1	VAC
YF-VAX INJ	1	VAC
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<i>clindamycin 2% vaginal cream</i>	1	
<i>metronidazole 0.75% vaginal gel</i>	1	
<i>terconazole 0.4% vaginal cream</i>	1	
<i>terconazole 0.8% vaginal cream</i>	1	
<i>terconazole 80mg vaginal insert</i>	1	
VAGINAL ESTROGENS		
<i>estradiol 0.01% vaginal cream</i>	1	
PREMARIN 0.625MG/GM VAGINAL CREAM	1	

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

ALPHABETICAL LISTING OF DRUGS

A					
<i>abacavir 20mg/ml oral soln</i>	43	<i>acetylcysteine 100mg/ml inh soln</i>	51	ADEMPAS 0.5MG TAB	78
<i>abacavir 300mg tab</i>	43	<i>acetylcysteine 200mg/ml inh soln</i>	51	ADEMPAS 1.5MG TAB	78
<i>abacavir/lamivudine 600-300mg tab</i>	43	<i>acitretin 10mg cap</i>	53	ADEMPAS 1MG TAB	78
<i>abigale 1/0.5mg tab</i>	59	<i>acitretin 17.5mg cap</i>	53	ADEMPAS 2.5MG TAB	78
<i>28-day pack</i>		<i>acitretin 25mg cap</i>	53	ADEMPAS 2MG TAB	78
<i>abigale lo tab 0.5/0.1mg</i>	59	ACTEMRA	3	ADVAIR 115-21MCG HFA	9
<i>28-day pack</i>		162MG/0.9ML		INHALER	
ABILIFY ASIMTUFII	43	AUTO-INJECTOR		ADVAIR 230-21MCG HFA INHALER	9
720MG/2.4ML SYRINGE		ACTEMRA	3	ADVAIR 45-21MCG/ACT HFA INHALER	9
ABILIFY ASIMTUFII	43	162MG/0.9ML SYRINGE		AKEEGA 500-100MG TAB	31
960MG/3.2ML SYRINGE		ACTHIB INJ	82	AKEEGA 500-50MG TAB	31
ABILIFY MAINTENA	43	ACTIMMUNE	37	<i>ala-cort 1% cream</i>	54
300MG INJ		2000000UNIT/0.5ML INJ		<i>albendazole 200mg tab</i>	6
ABILIFY MAINTENA	43	<i>acyclovir 200mg cap</i>	46	<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	9
300MG SYRINGE		<i>acyclovir 400mg tab</i>	46	<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	9
ABILIFY MAINTENA	43	<i>acyclovir 40mg/ml oral susp</i>	46	<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	9
400MG INJ		<i>acyclovir 5% ointment</i>	55	<i>albuterol 1.25mg/3ml neb soln</i>	10
ABILIFY MAINTENA	43	<i>acyclovir 50mg/ml inj</i>	46	<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i>	10
400MG SYRINGE		<i>acyclovir 800mg tab</i>	46	<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	10
<i>abiraterone acetate 250mg tab</i>	31	ADACEL INJ	80	<i>albuterol 2mg tab</i>	10
<i>abirtega 250mg tab</i>	31	ADACEL SYRINGE	80	<i>albuterol 4mg tab</i>	10
ABRYSVO	82	ADALIMUMAB-AATY 100MG/ML (0.2ML) SYRINGE	3	<i>albuterol 5mg/ml (0.05%) inh soln</i>	10
120MCG/0.5ML INJ		ADALIMUMAB-AATY 100MG/ML (0.4ML) SYRINGE	3	ALCLOMETASONE 0.05% OINT	54
<i>acamprosate calcium 333mg dr tab</i>	75	ADALIMUMAB-AATY 100MG/ML	3	<i>alclometasone dipropionate 0.05% cream</i>	54
<i>acarbose 100mg tab</i>	19	AUTO-INJECTOR (0.4ML)		ALCOHOL SWAB 1X1 (DIABETIC)	66
<i>acarbose 25mg tab</i>	19	ADALIMUMAB-AATY 100MG/ML	3	ALECENSA 150MG CAP	32
<i>acarbose 50mg tab</i>	19	AUTO-INJECTOR (0.8ML)		<i>alendronate sodium 10mg tab</i>	57
<i>accutane 10mg cap</i>	52	ADALIMUMAB-AATY 80MG/0.8ML	3		
<i>accutane 20mg cap</i>	52	AUTO-INJECTOR PACK (3)			
<i>accutane 40mg cap</i>	52	<i>adefovir dipivoxil 10mg tab</i>	46		
<i>acebutolol 200mg cap</i>	47				
<i>acebutolol 400mg cap</i>	47				
<i>acetazolamide 125mg tab</i>	56				
<i>acetazolamide 250mg tab</i>	56				
<i>acetazolamide 500mg er cap</i>	56				
<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>amlodipine/valsartan 5-320mg tab</i>	26
<i>altavera tab 28-day pack</i>	59	<i>amlodipine/benazepril 5-10mg cap</i>	26	<i>ammonium lactate 12% cream</i>	55
ALUNBRIG 180MG TAB	32	<i>amlodipine/benazepril 5-20mg cap</i>	26	<i>ammonium lactate 12% lotion</i>	55
ALUNBRIG 30MG TAB	32	<i>amlodipine/benazepril 5-40mg cap</i>	26	<i>amnesteem 10mg cap</i>	52
ALUNBRIG 90MG TAB	32	<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	26	<i>amnesteem 20mg cap</i>	52
ALUNBRIG TAB	32	<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	26	<i>amnesteem 30mg cap</i>	52
INITIATION PACK (30)		<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	26	<i>amnesteem 40mg cap</i>	52
ALVESCO 160MCG INHALER	9	<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	26	<i>amoxapine 100mg tab</i>	18
ALVESCO 80MCG INHALER	9			<i>amoxapine 150mg tab</i>	18
<i>alyacen 1/35 tab 28-day pack</i>	59			<i>amoxapine 25mg tab</i>	18
ALYFTREK 10-50-125MG TAB	77			<i>amoxapine 50mg tab</i>	18
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>aranelle 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	32	azithromycin 500mg inj	28
ASMANEX 50MCG HFA INHALER	9	AUGTYRO 40MG CAP	32	azithromycin 500mg tab	28
aspirin/dipyridamole 25-200mg er cap	64	AUSTEDO 12MG TAB	76	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		
atenolol 50mg tab	47	AUSTEDO XR 30MG TAE	76	B	
atenolol/chlorthalidone 100-25mg tab	26	AUSTEDO XR 36MG TAE	76	BACITRACIN 500UNIT/GM OPHTH OINTMENT	71
atenolol/chlorthalidone 50-25mg tab	26	AUSTEDO XR 42MG TAE	76	bacitracin/polymyxin b 0.5-10unit/mg ophth ointment	71
atomoxetine 100mg cap	1	AUSTEDO XR 48MG TAE	76	baclofen 10mg tab	70
atomoxetine 10mg cap	1	AUSTEDO XR 6MG TAB	76	baclofen 20mg tab	70
atomoxetine 18mg cap	1	AUSTEDO XR TAB ONCI DAILY 4 WEEK TITRATION PACK	76	balsalazide disodium 750mg cap	63
atomoxetine 25mg cap	1	AUVELITY 105-45MG ER TAB	15	BALVERSA 3MG TAB	33
atomoxetine 40mg cap	1	aviane tab 28-day pack	59	BALVERSA 4MG TAB	33
atomoxetine 60mg cap	1	AVMAPKI/FAKZYNJA CO-PACK (66)	32	BALVERSA 5MG TAB	33
atomoxetine 80mg cap	1	AVONEX 30MCG/0.5ML AUTO-INJECTOR	76	balziva tab 28-day pack	59
atorvastatin 10mg tab	23	AVONEX 30MCG/0.5ML SYRINGE	76	BAQSIMI 3MG/DOSE NASAL POWDER	19
atorvastatin 20mg tab	23	AYVAKIT 100MG TAB	37	BCG LIVE TICE STRAIN 50MG INJ	82
atorvastatin 40mg tab	23	AYVAKIT 200MG TAB	37	benazepril 10mg tab	24
atorvastatin 80mg tab	24	AYVAKIT 25MG TAB	37	benazepril 20mg tab	24
atovaquone 750mg/5ml oral susp	29	AYVAKIT 300MG TAB	37	benazepril 40mg tab	24
atovaquone/proguanil 250-100mg tab	29	AYVAKIT 50MG TAB	37	benazepril 5mg tab	24
atovaquone/proguanil 62.5-25mg tab	29	azathioprine 50mg tab	69	benazepril/hydrochloroth iazide 10-12.5mg tab	26
atropine sulfate 1% ophth soln	72	azelaic acid 15% gel	55	benazepril/hydrochloroth iazide 20-12.5mg tab	27
atropine sulfate/diphenoxylate 0.025-2.5mg tab	21	azelastine 0.05% ophth soln	72	benazepril/hydrochloroth iazide 20-25mg tab	27
		azelastine 0.1% (137mcg/act) nasal inhaler	70	benazepril/hydrochloroth iazide 5-6.25mg tab	27
		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	<i>bosentan 125mg tab</i>	78
BENLYSTA 200MG/ML SYRINGE	69	<i>bexarotene 1% gel</i>	53	<i>bosentan 62.5mg tab</i>	78
<i>benztropine mesylate 0.5mg tab</i>	38	<i>bexarotene 75mg cap</i>	37	BOSULIF 100MG CAP	33
<i>benztropine mesylate 1mg tab</i>	38	BEXSERO SYRINGE	82	BOSULIF 100MG TAB	33
<i>benztropine mesylate 2mg tab</i>	38	<i>bicalutamide 50mg tab</i>	31	BOSULIF 400MG TAB	33
BERINERT 500UNIT INJ	65	BICILLIN L-A	73	BOSULIF 500MG TAB	33
BESREMI 500MCG/ML SYRINGE	37	1200000UNIT/2ML SYRINGE		BOSULIF 50MG CAP	33
<i>betaine 1gm powder for oral soln</i>	57	BICILLIN L-A	73	BRAFTOVI 75MG CAP	33
<i>betamethasone 0.05% aug cream</i>	54	2400000UNIT/4ML SYRINGE		BREO ELLIPTA	10
<i>betamethasone 0.05% aug lotion</i>	54	BICILLIN L-A	73	100-25MCG POWDER 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	200-25MCG POWDER INHALER	
<i>betamethasone 0.05% lotion</i>	54	BIKTARVY 50-200-25MG TAB	44	BREO ELLIPTA	10
<i>betamethasone 0.05% ointment</i>	54	<i>bimatoprost 0.03% ophth soln</i>	73	50-25MCG POWDER INHALER	
<i>betamethasone 0.1% cream</i>	54	<i>bisoprolol fumarate 10mg tab</i>	47	<i>breyna 160-4.5mcg/act inhaler</i>	10
<i>betamethasone 0.1% ointment</i>	54	<i>bisoprolol fumarate 5mg tab</i>	47	<i>breyna 80-4.5mcg/act inhaler</i>	10
<i>betamethasone 0.1% TOPICAL LOTION</i>	54	<i>bisoprolol</i>	27	BREZTRI AEROSPHERE	10
BETASERON 0.3MG INJ	76	<i>fumarate/hydrochlorothia zide 10-6.25mg tab</i>		160-9-4.8MCG/ACT 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>		<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>		<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 tartrate/timolol 0.2-0.5% ophth soln</i>	71
<i>bethanechol chloride 50mg tab</i>	81	<i>blisovi 24 fe tab 1/20 28-day pack</i>	59	BRIVIACT 100MG TAB	12
		BOMYNTRA	57	BRIVIACT 10MG TAB	12
		120MG/1.7ML INJ		BRIVIACT 10MG/ML	12
		BOMYNTRA	57	BRIVIACT 25MG TAB	12
		120MG/1.7ML SYRINGE		BRIVIACT 50MG TAB	12
		BOOSTRIX INJ	80	BRIVIACT 75MG TAB	12
		BOOSTRIX SYRINGE	80	<i>bromfenac 0.07% ophth soln</i>	72
				<i>bromocriptine 2.5mg 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>bromocriptine 5mg cap</i>	38	<i>bupropion 200mg sr</i>	16	<i>candesartan cilexetil 8mg</i>	25
<i>BRUKINSA 80MG CAP</i>	33	<i>(12hr) tab</i>		<i>tab</i>	
<i>budesonide 0.25mg/2ml</i>	9	<i>bupropion 75mg tab</i>	16	<i>CAPLYTA 10.5MG CAP</i>	39
<i>inh susp</i>		<i>bupropion xl 150mg (24</i>	16	<i>CAPLYTA 21MG CAP</i>	39
<i>budesonide 0.5mg/2ml</i>	9	<i>hr) tab</i>		<i>CAPLYTA 42MG CAP</i>	39
<i>inh susp</i>		<i>bupropion xl 300mg</i>	16	<i>CAPRELSA 100MG TAB</i>	33
<i>budesonide 1mg/2ml inh</i>	9	<i>(24hr) tab</i>		<i>CAPRELSA 300MG TAB</i>	33
<i>susp</i>		<i>buspirone 10mg tab</i>	7	<i>captopril 100mg tab</i>	24
<i>budesonide 2mg/act</i>	6	<i>buspirone 15mg tab</i>	7	<i>captopril 12.5mg tab</i>	24
<i>rectal foam</i>		<i>buspirone 30mg tab</i>	7	<i>captopril 25mg tab</i>	24
<i>budesonide 3mg dr cap</i>	51	<i>buspirone 5mg tab</i>	7	<i>captopril 50mg tab</i>	24
<i>budesonide 9mg er tab</i>	51	<i>buspirone 7.5mg tab</i>	7	<i>carbamazepine 100mg</i>	12
<i>budesonide/formoterol</i>	10			<i>chew tab</i>	
<i>fumarate 160-45mcg</i>		C		<i>carbamazepine 100mg er</i>	12
<i>inhaler</i>		<i>cabergoline 0.5mg tab</i>	58	<i>cap</i>	
<i>budesonide/formoterol</i>	10	<i>CABOMETYX 20MG TAE</i>	33	<i>carbamazepine 100mg er</i>	12
<i>fumarate 80-45mcg</i>		<i>CABOMETYX 40MG TAE</i>	33	<i>tab</i>	
<i>inhaler</i>		<i>CABOMETYX 60MG TAE</i>	33	<i>carbamazepine 200mg er</i>	12
<i>bumetanide 0.25mg/ml inj</i>	56	<i>calcipotriene 0.005%</i>	53	<i>cap</i>	
<i>bumetanide 0.5mg tab</i>	56	<i>cream</i>		<i>carbamazepine 200mg er</i>	12
<i>bumetanide 1mg tab</i>	56	<i>calcipotriene 0.005%</i>	53	<i>tab</i>	
<i>bumetanide 2mg tab</i>	56	<i>ointment</i>		<i>carbamazepine 200mg</i>	12
<i>buprenorphine 2mg sl tab</i>	5	<i>CALCIPOTRIENE 0.005%</i>	53	<i>tab</i>	
<i>buprenorphine 8mg sl tab</i>	5	<i>TOPICAL SOLN</i>		<i>carbamazepine 20mg/ml</i>	12
<i>buprenorphine/naloxone</i>	5	<i>calcitriol 0.25mcg cap</i>	57	<i>oral susp</i>	
<i>12-3mg sl film</i>		<i>calcitriol 0.5mcg cap</i>	58	<i>carbamazepine 300mg er</i>	13
<i>buprenorphine/naloxone</i>	5	<i>calcitriol 1mcg/ml oral</i>	58	<i>cap</i>	
<i>2-0.5mg sl film</i>		<i>soln</i>		<i>carbamazepine 400mg er</i>	13
<i>buprenorphine/naloxone</i>	6	<i>CALQUENCE 100MG</i>	33	<i>tab</i>	
<i>2-0.5mg sl tab</i>		<i>TAB</i>		<i>carbidopa 25mg tab</i>	38
<i>buprenorphine/naloxone</i>	6	<i>camila 0.35mg tab 28-day</i>	74	<i>carbidopa/entacapone/le</i>	38
<i>4-1mg sl film</i>		<i>pack</i>		<i>vodopa 12.5-200-50mg</i>	
<i>buprenorphine/naloxone</i>	6	<i>camreselo tab 91-day</i>	59	<i>tab</i>	
<i>8-2mg sl film</i>		<i>pack</i>		<i>carbidopa/entacapone/le</i>	38
<i>buprenorphine/naloxone</i>	6	<i>CAMZYOS 10MG CAP</i>	49	<i>vodopa 18.75-200-75mg</i>	
<i>8-2mg sl tab</i>		<i>CAMZYOS 15MG CAP</i>	49	<i>tab</i>	
<i>bupropion 100mg sr</i>	15	<i>CAMZYOS 2.5MG CAP</i>	49	<i>carbidopa/entacapone/le</i>	38
<i>(12hr) tab</i>		<i>CAMZYOS 5MG CAP</i>	49	<i>vodopa 25-200-100mg</i>	
<i>bupropion 100mg tab</i>	16	<i>candesartan cilexetil</i>	25	<i>tab</i>	
<i>bupropion 150mg sr (12</i>	16	<i>16mg tab</i>		<i>carbidopa/entacapone/le</i>	38
<i>hr) tab</i>		<i>candesartan cilexetil</i>	25	<i>vodopa 31.25-200-125mg</i>	
<i>bupropion 150mg sr</i>	77	<i>32mg tab</i>		<i>tab</i>	
<i>(12hr) tab</i>		<i>candesartan cilexetil 4mg</i>	25		
		<i>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>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	38	CAYSTON 75MG/ML INH SOLN	77	<i>ceftriaxone 1gm inj</i>	50
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	38	CEFACLOR 250MG CAP	50	<i>ceftriaxone 250mg inj</i>	50
CARBIDOPA/LEVODOPA 10-100MG ODT	38	CEFACLOR 500MG CAP	50	<i>ceftriaxone 2gm inj</i>	50
<i>carbidopa/levodopa 10-100mg tab</i>	38	<i>cefadroxil 100mg/ml oral susp</i>	49	<i>ceftriaxone 500mg inj</i>	50
<i>carbidopa/levodopa 25-100mg er tab</i>	38	<i>cefadroxil 500mg cap</i>	50	<i>cefuroxime 1500mg inj</i>	50
CARBIDOPA/LEVODOPA 25-100MG ODT	38	<i>cefadroxil 50mg/ml oral susp</i>	50	<i>cefuroxime 250mg tab</i>	50
<i>carbidopa/levodopa 25-100mg tab</i>	38	<i>cefazolin 1000mg inj</i>	50	<i>cefuroxime 500mg tab</i>	50
<i>carbidopa/levodopa 25-100mg er tab</i>	38	<i>cefazolin 200mg/ml inj</i>	50	<i>cefuroxime 750mg inj</i>	50
CARBIDOPA/LEVODOPA 25-100MG ODT	38	<i>cefazolin 500mg inj</i>	50	<i>celecoxib 100mg cap</i>	3
<i>carbidopa/levodopa 25-100mg tab</i>	38	<i>cefdinir 25mg/ml oral susp</i>	50	<i>celecoxib 200mg cap</i>	3
CARBIDOPA/LEVODOPA 25-250MG ODT	38	<i>cefdinir 300mg cap</i>	50	<i>celecoxib 400mg cap</i>	3
<i>carbidopa/levodopa 25-250mg tab</i>	38	<i>cefdinir 50mg/ml oral susp</i>	50	<i>celecoxib 50mg cap</i>	3
<i>carbidopa/levodopa 50-200mg er tab</i>	38	<i>cefepime 1000mg inj</i>	28	<i>cephalexin 250mg cap</i>	50
<i>carglumic acid 200mg tab for oral susp</i>	58	<i>cefepime 2000mg inj</i>	28	<i>cephalexin 25mg/ml oral susp</i>	50
<i>carisoprodol 350mg tab</i>	70	<i>cefexime 20mg/ml oral susp</i>	50	<i>cephalexin 500mg cap</i>	50
CARTEOLOL 1% OPHTH SOLN	71	<i>cefexime 400mg cap</i>	50	<i>cephalexin 50mg/ml oral susp</i>	50
<i>cartia 120mg er (24hr) cap</i>	48	<i>cefexime 40mg/ml oral susp</i>	50	<i>cevimeline 30mg cap</i>	51
<i>cartia 180mg er (24hr) cap</i>	48	<i>cefoxitin 1gm inj</i>	50	<i>chlordiazepoxide 10mg cap</i>	7
<i>cartia 240mg er (24hr) cap</i>	48	<i>cefoxitin 200mg/ml inj</i>	50	<i>chlordiazepoxide 25mg cap</i>	7
<i>cartia 300mg er (24hr) cap</i>	48	<i>cefoxitin 2gm inj</i>	50	<i>chlordiazepoxide 5mg cap</i>	7
<i>carvedilol 12.5mg tab</i>	46	<i>cefpodoxime 100mg tab</i>	50	<i>chlorhexidine gluconate 0.12% mouthwash</i>	51
<i>carvedilol 25mg tab</i>	47	CEFPODOXIME 10MG/ML ORAL SUSP	50	CHLOROQUINE PHOSPHATE 250MG TAB	29
<i>carvedilol 3.125mg tab</i>	47	<i>cefpodoxime 200mg tab</i>	50	<i>chloroquine phosphate 500mg tab</i>	29
<i>carvedilol 6.25mg tab</i>	47	CEFPODOXIME 20MG/ML ORAL SUSP	50	<i>chlorpromazine 100mg tab</i>	42
<i>caspofungin acetate 50mg inj</i>	22	<i>cefprozil 250mg tab</i>	50	CHLORPROMAZINE 100MG/ML ORAL SOLN	42
<i>caspofungin acetate 70mg inj</i>	22	<i>cefprozil 25mg/ml oral susp</i>	50	<i>chlorpromazine 10mg tab</i>	42
		<i>cefprozil 500mg tab</i>	50	<i>chlorpromazine 200mg tab</i>	42
		<i>cefprozil 50mg/ml oral susp</i>	50	<i>chlorpromazine 25mg tab</i>	42
		<i>ceftazidime 1gm inj</i>	50	CHLORPROMAZINE 30MG/ML ORAL SOLN	42
		CEFTAZIDIME 200MG/ML INJ	50	<i>chlorpromazine 50mg tab</i>	42
		<i>ceftazidime 2gm inj</i>	50	<i>chlorthalidone 25mg tab</i>	56
		<i>ceftriaxone 10gm inj</i>	50	<i>chlorthalidone 50mg tab</i>	57
				<i>chlorzoxazone 500mg tab</i>	70

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

ALPHABETICAL LISTING OF DRUGS

<i>cholestyramine resin</i>	23	<i>claravis 40mg cap</i>	52	<i>clobetasol propionate</i>	54
<i>(sugar-free) 4gm powder</i>		<i>clarithromycin 250mg tab</i>	28	<i>0.05% e cream</i>	
<i>for oral susp</i>		CLARITHROMYCIN	28	<i>clobetasol propionate</i>	54
<i>cholestyramine resin 4gm</i>	23	25MG/ML ORAL SUSP		<i>0.05% foam</i>	
<i>powder for oral susp</i>		<i>clarithromycin 500mg tab</i>	28	<i>clobetasol propionate</i>	54
<i>ciclopirox 0.77% cream</i>	52	CLARITHROMYCIN	28	<i>0.05% gel</i>	
<i>ciclopirox 0.77% gel</i>	52	50MG/ML ORAL SUSP		<i>clobetasol propionate</i>	54
<i>ciclopirox 1% shampoo</i>	52	<i>clindamycin 1% gel</i>	52	<i>0.05% lotion</i>	
<i>ciclopirox 8% topical soln</i>	52	<i>clindamycin 1% gel</i>	52	<i>clobetasol propionate</i>	54
CILASTATIN/IMIPENEM	29	<i>(twice-daily)</i>		<i>0.05% ointment</i>	
250-250MG INJ		<i>clindamycin 1% lotion</i>	52	<i>clobetasol propionate</i>	54
<i>cilastatin/imipenem</i>	29	<i>clindamycin 1% topical</i>	52	<i>0.05% shampoo</i>	
<i>500-500mg inj</i>		<i>soln</i>		<i>clobetasol propionate</i>	54
<i>cilostazol 100mg tab</i>	64	<i>clindamycin 150mg cap</i>	28	<i>0.05% topical soln</i>	
<i>cilostazol 50mg tab</i>	64	<i>clindamycin 2% vaginal</i>	83	<i>clobetasol propionate</i>	54
CIMDUO 300-300MG	44	<i>cream</i>		<i>0.05% topical spray</i>	
TAB		<i>clindamycin 300mg cap</i>	28	<i>clodan 0.05% shampoo</i>	54
<i>cimetidine 200mg tab</i>	81	<i>clindamycin 300mg/2ml</i>	28	<i>clomipramine 25mg cap</i>	18
<i>cimetidine 300mg tab</i>	81	<i>inj</i>		<i>clomipramine 50mg cap</i>	18
<i>cimetidine 400mg tab</i>	81	<i>clindamycin 300mg/50ml</i>	28	<i>clomipramine 75mg cap</i>	18
<i>cimetidine 800mg tab</i>	81	<i>inj</i>		<i>clonazepam 0.125mg odt</i>	12
CIMZIA 200MG INJ	3	<i>clindamycin 600mg/4ml</i>	28	<i>clonazepam 0.25mg odt</i>	12
CIMZIA 200MG/ML	3	<i>inj</i>		<i>clonazepam 0.5mg odt</i>	12
SYRINGE		<i>clindamycin 600mg/50ml</i>	28	<i>clonazepam 0.5mg tab</i>	12
<i>cinacalcet 30mg tab</i>	58	<i>inj</i>		<i>clonazepam 1mg odt</i>	12
<i>cinacalcet 60mg tab</i>	58	<i>clindamycin 75mg cap</i>	28	<i>clonazepam 1mg tab</i>	12
<i>cinacalcet 90mg tab</i>	58	<i>clindamycin 75mg/5ml</i>	28	<i>clonazepam 2mg odt</i>	12
<i>ciprofloxacin 0.3% ophth</i>	71	<i>oral soln</i>		<i>clonazepam 2mg tab</i>	12
<i>soln</i>		<i>clindamycin 900mg/50ml</i>	28	<i>clonidine 0.1mg er tab</i>	1
<i>ciprofloxacin 250mg tab</i>	62	<i>inj</i>		<i>clonidine 0.1mg tab</i>	25
CIPROFLOXACIN	63	<i>clindamycin 900mg/6ml</i>	28	<i>clonidine 0.1mg/24hr</i>	25
2MG/ML INJ		<i>inj</i>		<i>weekly patch</i>	
<i>ciprofloxacin 500mg tab</i>	63	CLINIMIX 4.25/10 INJ	71	<i>clonidine 0.2mg tab</i>	25
<i>ciprofloxacin 750mg tab</i>	63	CLINIMIX 4.25/5 INJ	71	<i>clonidine 0.2mg/24hr</i>	25
<i>ciprofloxacin/dexamethas</i>	73	CLINIMIX 5/15 INJ	71	<i>weekly patch</i>	
<i>one 0.3-0.1% otic susp</i>		CLINIMIX 5/20 INJ	71	<i>clonidine 0.3mg tab</i>	25
<i>citalopram 10mg tab</i>	16	<i>clinisol 15% inj</i>	71	<i>clonidine 0.3mg/24hr</i>	25
<i>citalopram 20mg tab</i>	16	<i>clobazam 10mg tab</i>	12	<i>weekly patch</i>	
<i>citalopram 2mg/ml oral</i>	16	<i>clobazam 2.5mg/ml oral</i>	12	<i>clopidogrel 75mg tab</i>	64
<i>soln</i>		<i>susp</i>		<i>clorazepate dipotassium</i>	7
<i>citalopram 40mg tab</i>	16	<i>clobazam 20mg tab</i>	12	<i>15mg tab</i>	
<i>claravis 10mg cap</i>	52	<i>clobetasol propionate</i>	54	<i>clorazepate dipotassium</i>	7
<i>claravis 20mg cap</i>	52	<i>0.05% cream</i>		<i>3.75mg tab</i>	
<i>claravis 30mg cap</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

<i>clorazepate dipotassium</i>	7	<i>colestipol 5000mg</i>	23	<i>cromolyn sodium 20mg/ml</i>	63
<i>7.5mg tab</i>		<i>granules for oral susp</i>		<i>oral soln</i>	
<i>clotrimazole 1% cream</i>	53	<i>colistin 75mg/ml inj</i>	28	CROMOLYN SODIUM	72
<i>clotrimazole 10mg</i>	51	COMBIVENT	10	4% OPTH SOLN	
<i>lozenge</i>		20-100MCG/ACT		<i>cryselle tab 28-day pack</i>	59
<i>clotrimazole/betamethaso</i>	53	INHALER		<i>cyclobenzaprine 10mg</i>	70
<i>ne 1-0.05% cream</i>		COMETRIQ CAP 100MG	33	<i>tab</i>	
<i>clozapine 100mg odt</i>	41	DAILY DOSE PACK (56)		<i>cyclobenzaprine 5mg tab</i>	70
<i>clozapine 100mg tab</i>	41	COMETRIQ CAP 140MG	33	CYCLOPHOSPHAMIDE	30
CLOZAPINE 12.5MG	41	DAILY DOSE PACK (112)		25MG TAB	
ODT		COMETRIQ CAP 60MG	33	CYCLOPHOSPHAMIDE	30
<i>clozapine 150mg odt</i>	41	DAILY DOSE PACK (84)		50MG TAB	
<i>clozapine 200mg odt</i>	41	<i>compro 25mg rectal supp</i>	42	<i>cyclosporine 0.05% ophth</i>	72
<i>clozapine 200mg tab</i>	41	CONEXXENCE	57	<i>susp</i>	
<i>clozapine 25mg odt</i>	41	60MG/ML SYRINGE		<i>cyclosporine 100mg cap</i>	69
<i>clozapine 25mg tab</i>	41	<i>constulose 10gm/15ml</i>	66	<i>cyclosporine 25mg cap</i>	69
<i>clozapine 50mg tab</i>	41	<i>oral soln</i>		<i>cyclosporine modified</i>	69
COARTEM 20-120MG	29	COPIKTRA 15MG CAP	33	<i>100mg cap</i>	
TAB		COPIKTRA 25MG CAP	33	<i>cyclosporine modified</i>	69
COBENFY 20-100MG	39	COSENTYX 150MG/ML	53	<i>100mg/ml oral soln</i>	
CAP		AUTO-INJECTOR		<i>cyclosporine modified</i>	69
COBENFY 20-50MG CAP	39	COSENTYX 150MG/ML	53	<i>25mg cap</i>	
COBENFY 30-125MG	39	SYRINGE		<i>cyclosporine modified</i>	69
CAP		COSENTYX	53	<i>50mg cap</i>	
COBENFY CAP 28-DAY	39	75MG/0.5ML SYRINGE		<i>cyred tab 28-day pack</i>	59
STARTER KIT PACK (56)		COSENTYX UNOREADY	53	CYSTADANE 1GM	58
<i>codeine</i>	5	300MG/2ML		POWDER FOR ORAL	
<i>phosphate/acetaminophe</i>		AUTO-INJECTOR		SOLN	
<i>n 15-300mg tab</i>		COTELLIC 20MG TAB	33	CYSTADROPS 0.37%	72
CODEINE	5	CREON	56	OPHTH SOLN	
PHOSPHATE/ACETAMIN		120000-24000-76000UNI		CYSTAGON 150MG CAP	63
OPHEN 2.4-24MG/ML		T DR CAP		CYSTAGON 50MG CAP	63
ORAL SOLN		CREON	56	CYSTARAN 0.44%	72
<i>codeine</i>	5	15000-3000-9500UNIT		OPHTH SOLN	
<i>phosphate/acetaminophe</i>		DR CAP		D	
<i>n 30-300mg tab</i>		CREON	56	<i>dalfampridine 10mg er</i>	76
<i>codeine</i>	5	180000-36000-114000U		<i>tab</i>	
<i>phosphate/acetaminophe</i>		NIT DR CAP		<i>danazol 100mg cap</i>	6
<i>n 60-300mg tab</i>		CREON	56	<i>danazol 200mg cap</i>	6
<i>colchicine 0.6mg tab</i>	64	30000-6000-19000UNIT		<i>danazol 50mg cap</i>	6
<i>colchicine/probenecid</i>	64	DR CAP		<i>dantrolene sodium 100mg</i>	70
<i>0.5-500mg tab</i>		CREON	56	<i>cap</i>	
<i>colesevelam 625mg tab</i>	23	60000-12000-38000UNIT		<i>dantrolene sodium 25mg</i>	70
<i>colestipol 1gm tab</i>	23	DR CAP		<i>cap</i>	

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

ALPHABETICAL LISTING OF DRUGS

<i>dantrolene sodium 50mg cap</i>	70	<i>desmopressin acetate 0.1mg tab</i>	58	DIACOMIT 250MG CAP	13
<i>dapsone 100mg tab</i>	30	<i>desmopressin acetate 0.2mg tab</i>	58	DIACOMIT 250MG POWDER FOR ORAL SUSP	13
<i>dapsone 25mg tab</i>	30	<i>desonide 0.05% ointment</i>	54	DIACOMIT 500MG CAP	13
DAPTACEL INJ	80	<i>desoximetasone 0.25% cream</i>	54	DIACOMIT 500MG POWDER FOR ORAL SUSP	13
<i>daptomycin 500mg inj</i>	28	<i>desoximetasone 0.25% ointment</i>	54	<i>diazepam 10mg tab</i>	7
<i>darunavir 600mg tab</i>	44	<i>desvenlafaxine succinate 100mg er tab</i>	17	<i>diazepam 10mg/2ml rectal gel</i>	12
<i>darunavir 800mg tab</i>	44	<i>desvenlafaxine succinate 25mg er tab</i>	17	<i>diazepam 1mg/ml oral soln</i>	7
<i>dasatinib 100mg tab</i>	33	<i>desvenlafaxine succinate 50mg er tab</i>	17	DIAZEPAM 2.5MG/0.5ML RECTAL GEL	12
<i>dasatinib 140mg tab</i>	33	DEXAMETHASONE 0.1MG/ML ORAL SOLN	51	<i>diazepam 20mg/4ml rectal gel</i>	12
<i>dasatinib 20mg tab</i>	33	<i>dexamethasone 0.5mg tab</i>	51	<i>diazepam 2mg tab</i>	7
<i>dasatinib 50mg tab</i>	33	<i>dexamethasone 0.75mg tab</i>	51	<i>diazepam 5mg tab</i>	7
<i>dasatinib 70mg tab</i>	33	<i>dexamethasone 1.5mg tab</i>	51	<i>diazepam 5mg/ml oral soln</i>	7
<i>dasatinib 80mg tab</i>	33	<i>dexamethasone 1mg tab</i>	51	<i>diazoxide 50mg/ml oral susp</i>	19
DAURISMO 100MG TAB	31	<i>dexamethasone 2mg tab</i>	51	<i>diclofenac potassium 50mg tab</i>	3
DAURISMO 25MG TAB	31	<i>dexamethasone 4mg tab</i>	51	<i>diclofenac sodium 0.1% ophth soln</i>	72
<i>deblitane 0.35mg tab 28-day pack</i>	74	<i>dexamethasone 6mg tab</i>	51	<i>diclofenac sodium 1.5% topical soln</i>	3
<i>deferasirox 180mg tab</i>	68	DEXAMETHASONE PHOSPHATE 0.1% OPTH SOLN	72	<i>diclofenac sodium 100mg er tab</i>	3
<i>deferasirox 360mg tab</i>	68	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	72	<i>diclofenac sodium 25mg dr tab</i>	3
<i>deferasirox 90mg tab</i>	68	<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	72	<i>diclofenac sodium 3% gel</i>	53
DELSTRIGO 100-300-300MG TAB	44	<i>dexamethylphenidate 10mg tab</i>	1	<i>diclofenac sodium 50mg dr tab</i>	3
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	74	<i>dexamethylphenidate 2.5mg tab</i>	1	<i>diclofenac sodium 75mg dr tab</i>	4
<i>depo-testosterone 100mg/ml inj</i>	6	<i>dextroamphetamine sulfate 10mg tab</i>	1	<i>dicloxacillin 250mg cap</i>	74
<i>depo-testosterone 200mg/ml inj</i>	6	<i>dextroamphetamine sulfate 5mg tab</i>	1	<i>dicloxacillin 500mg cap</i>	74
DESCOVY 120-15MG TAB	44	DEXTROSE 10% INJ	71	<i>dicyclomine 10mg cap</i>	80
DESCOVY 200-25MG TAB	44			<i>dicyclomine 20mg tab</i>	80
<i>desipramine 100mg tab</i>	18				
<i>desipramine 10mg tab</i>	18				
<i>desipramine 150mg tab</i>	18				
<i>desipramine 25mg tab</i>	18				
<i>desipramine 50mg tab</i>	18				
<i>desipramine 75mg tab</i>	18				
<i>desloratadine 5mg tab</i>	78				
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	58				

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

ALPHABETICAL LISTING OF DRUGS

<i>dicyclomine 2mg/ml oral soln</i>	81	<i>dimethyl fumarate 240mg dr cap</i>	76	<i>dotti 0.075mg/24hr twice weekly patch</i>	62
DIFICID 200MG TAB	28	<i>disopyramide 100mg cap</i>	8	<i>dotti 0.1mg/24hr twice weekly patch</i>	62
DIFICID 40MG/ML ORAL SUSP	28	<i>disopyramide 150mg cap</i>	8	DOVATO 50-300MG TAB	44
<i>diflunisal 500mg tab</i>	4	<i>disulfiram 250mg tab</i>	75	<i>doxazosin 1mg tab</i>	25
<i>difluprednate 0.05% ophth susp</i>	72	<i>disulfiram 500mg tab</i>	75	<i>doxazosin 2mg tab</i>	25
<i>digoxin 0.125mg tab</i>	49	<i>divalproex sodium 125mg dr cap</i>	15	<i>doxazosin 4mg tab</i>	25
<i>digoxin 0.25mg tab</i>	49	<i>divalproex sodium 125mg dr tab</i>	15	<i>doxazosin 8mg tab</i>	25
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	66	<i>divalproex sodium 250mg dr tab</i>	15	<i>doxepin 100mg cap</i>	18
<i>dilt 120mg er (24hr) cap</i>	48	<i>divalproex sodium 250mg er tab</i>	15	<i>doxepin 10mg cap</i>	18
<i>dilt 180mg er (24hr) cap</i>	48	<i>divalproex sodium 500mg dr tab</i>	15	<i>doxepin 10mg/ml oral soln</i>	18
<i>dilt 240mg er (24hr) cap</i>	48	<i>divalproex sodium 500mg er tab</i>	15	<i>doxepin 150mg cap</i>	18
<i>diltiazem 120mg er (12hr) cap</i>	48	<i>dofetilide 0.125mg cap</i>	8	<i>doxepin 25mg cap</i>	18
<i>diltiazem 120mg er (24hr) cap</i>	48	<i>dofetilide 0.25mg cap</i>	8	<i>doxepin 50mg cap</i>	18
<i>diltiazem 120mg tab</i>	48	<i>dofetilide 0.5mg cap</i>	8	<i>doxepin 75mg cap</i>	18
<i>diltiazem 180mg er (24hr) cap</i>	48	<i>donepezil 10mg odt</i>	75	<i>doxy 100mg inj</i>	79
<i>diltiazem 240mg er (24hr) cap</i>	48	<i>donepezil 10mg tab</i>	75	<i>doxycycline hyclate 100mg cap</i>	79
<i>diltiazem 300mg er (24hr) cap</i>	48	<i>donepezil 23mg tab</i>	75	<i>doxycycline hyclate 100mg inj</i>	79
<i>diltiazem 30mg tab</i>	48	<i>donepezil 5mg odt</i>	75	<i>doxycycline hyclate 100mg tab</i>	79
<i>diltiazem 360mg er (24hr) cap</i>	48	<i>donepezil 5mg tab</i>	75	<i>doxycycline hyclate 20mg tab</i>	79
<i>diltiazem 420mg er (24hr) cap</i>	48	DOPTELET 20MG TAB	64	<i>doxycycline hyclate 50mg cap</i>	79
<i>diltiazem 60mg er (12hr) cap</i>	48	DOPTELET TAB 40MG	64	<i>doxycycline monohydrate 100mg cap</i>	79
<i>diltiazem 60mg tab</i>	48	DAILY DOSE PACK (10)		<i>doxycycline monohydrate 100mg tab</i>	79
<i>diltiazem 90mg er (12hr) cap</i>	48	DOPTELET TAB 60MG	64	<i>doxycycline monohydrate 50mg cap</i>	79
<i>diltiazem 90mg tab</i>	48	DAILY DOSE PACK (15)		<i>doxycycline monohydrate 50mg tab</i>	79
<i>dimethyl fumarate 120mg dr cap</i>	76	<i>dorzolamide 2% ophth soln</i>	72	<i>doxycycline monohydrate 5mg/ml oral susp</i>	79
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	76	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	71	DRIZALMA 20MG DR SPRINKLE CAP	17
		<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	71	DRIZALMA 30MG DR SPRINKLE CAP	17
		<i>dotti 0.025mg/24hr twice weekly patch</i>	62	DRIZALMA 40MG DR SPRINKLE CAP	17
		<i>dotti 0.0375mg/24hr twice weekly patch</i>	62		
		<i>dotti 0.05mg/24hr twice weekly patch</i>	62		

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

ALPHABETICAL LISTING OF DRUGS

DRIZALMA 60MG DR SPRINKLE CAP	17	<i>efavirenz/emtricitabine/te nofovir disoproxil fumarate 600-200-300mg tab</i>	44	EMSAM 12MG/24HR PATCH	16
<i>dronabinol 10mg cap</i>	22			EMSAM 6MG/24HR PATCH	16
<i>dronabinol 2.5mg cap</i>	22			EMSAM 9MG/24HR PATCH	16
<i>dronabinol 5mg cap</i>	22	EFAVIRENZ/LAMIVUDIN	44	<i>emtricitabine 200mg cap</i>	44
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	59	E/TENOFOVIR DISOPROXIL FUMARATE 400-300-300MG TAB		<i>emtricitabine/rilpivirine/t enofovir disoproxil fumarate 200-25-300mg tab</i>	44
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	59	<i>efavirenz/lamivudine/teno fovir disoproxil fumarate 600-300-300mg tab</i>	44	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	44
<i>droxidopa 100mg cap</i>	49	<i>electrolyte-148 inj</i>	67	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	44
<i>droxidopa 200mg cap</i>	49	ELIGARD 22.5MG	31	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	44
<i>droxidopa 300mg cap</i>	49	SYRINGE		<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	44
DULERA 100-5MCG INHALER	10	ELIGARD 30MG	31	EMTRIVA 10MG/ML ORAL SOLN	44
DULERA 200-5MCG INHALER	10	SYRINGE		<i>enalapril maleate 10mg tab</i>	24
DULERA 50-5MCG INHALER	10	ELIGARD 45MG	32	<i>enalapril maleate 2.5mg tab</i>	24
<i>duloxetine 20mg dr cap</i>	17	SYRINGE		<i>enalapril maleate 20mg tab</i>	24
<i>duloxetine 30mg dr cap</i>	17	ELIGARD 7.5MG	32	<i>enalapril maleate 5mg tab</i>	24
<i>duloxetine 60mg dr cap</i>	17	SYRINGE		<i>enalapril maleate/hydrochlorothiaz ide 10-25mg tab</i>	27
DUPIXENT	8	ELIQUIS 2.5MG TAB	11	<i>enalapril</i>	27
200MG/1.14ML AUTO-INJECTOR		ELIQUIS 5MG 30-DAY STARTER PACK (74)	11	<i>maleate/hydrochlorothiaz ide 10-25mg tab</i>	
DUPIXENT	8	ELIQUIS 5MG TAB	11	<i>enalapril</i>	27
200MG/1.14ML SYRINGE		ELMIRON 100MG CAP	63	<i>maleate/hydrochlorothiaz ide 5-12.5mg tab</i>	
DUPIXENT 300MG/2ML AUTO-INJECTOR	8	<i>eltrombopag 12.5mg powder for oral susp</i>	64	ENBREL 25MG/0.5ML INJ	3
DUPIXENT 300MG/2ML SYRINGE	8	<i>eltrombopag 12.5mg tab</i>	64	ENBREL 25MG/0.5ML SYRINGE	3
<i>dutasteride 0.5mg cap</i>	64	<i>eltrombopag 25mg powder for oral susp</i>	64		
E		<i>eltrombopag 25mg tab</i>	64		
<i>econazole nitrate 1% cream</i>	53	<i>eltrombopag 50mg tab</i>	64		
EDURANT 2.5MG TAB FOR ORAL SUSP	44	<i>eltrombopag 75mg tab</i>	64		
EDURANT 25MG TAB	44	<i>eluryng</i>	59		
<i>efavirenz 600mg tab</i>	44	<i>0.120-0.015mg/24hr vaginal system</i>			
		EMGALITY 100MG/ML SYRINGE	66		
		EMGALITY 120MG/ML AUTO-INJECTOR	66		
		EMGALITY 120MG/ML SYRINGE	66		

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

ALPHABETICAL LISTING OF DRUGS

ENBREL 50MG/ML	3	EPIDIOLEX 100MG/ML	13	<i>escitalopram 5mg tab</i>	16
AUTO-INJECTOR		ORAL SOLN		<i>eslicarbazepine acetate</i>	13
ENBREL 50MG/ML	3	<i>epinephrine</i>	10	<i>200mg tab</i>	
CARTRIDGE		<i>0.15mg/0.3ml</i>		<i>eslicarbazepine acetate</i>	13
ENBREL 50MG/ML	3	<i>auto-injector (2pack)</i>		<i>400mg tab</i>	
SYRINGE		<i>epinephrine 0.3mg/0.3ml</i>	10	<i>eslicarbazepine acetate</i>	13
<i>endocet 10-325mg tab</i>	5	<i>auto-injector (2pack)</i>		<i>600mg tab</i>	
<i>endocet 2.5-325mg tab</i>	5	<i>eplerenone 25mg tab</i>	27	<i>eslicarbazepine acetate</i>	13
<i>endocet 5-325mg tab</i>	5	<i>eplerenone 50mg tab</i>	27	<i>800mg tab</i>	
<i>endocet 7.5-325mg tab</i>	5	EPRONTIA 25MG/ML	13	<i>esomeprazole 20mg dr</i>	81
ENGERIX-B	82	ORAL SOLN		<i>cap</i>	
10MCG/0.5ML SYRINGE		ERIVEDGE 150MG CAP	31	<i>esomeprazole 40mg dr</i>	81
ENGERIX-B 20MCG/ML	82	ERLEADA 240MG TAB	32	<i>cap</i>	
INJ		ERLEADA 60MG TAB	32	<i>estarylla tab 28-day pack</i>	59
ENGERIX-B 20MCG/ML	82	<i>erlotinib 100mg tab</i>	31	<i>estradiol 0.0025mg/hr</i>	62
SYRINGE		<i>erlotinib 150mg tab</i>	31	<i>weekly patch</i>	
<i>enilloring</i>	59	<i>erlotinib 25mg tab</i>	31	<i>estradiol 0.01% vaginal</i>	83
<i>0.120-0.015mg/24hr</i>		<i>errin 0.35mg tab 28-day</i>	74	<i>cream</i>	
<i>vaginal system</i>		<i>pack</i>		<i>estradiol 0.01mg/24hr</i>	62
<i>enoxaparin sodium</i>	11	<i>ertapenem 1gm inj</i>	29	<i>twice weekly patch</i>	
<i>100mg/1ml syringe</i>		<i>erythromycin 0.5% ophth</i>	71	<i>estradiol 0.01mg/24hr</i>	62
<i>enoxaparin sodium</i>	11	<i>ointment</i>		<i>weekly patch</i>	
<i>120mg/0.8ml syringe</i>		ERYTHROMYCIN 2%	52	<i>estradiol 0.025mg/24hr</i>	62
<i>enoxaparin sodium</i>	11	TOPICAL GEL		<i>twice weekly patch</i>	
<i>150mg/1ml syringe</i>		<i>erythromycin 2% topical</i>	52	<i>estradiol 0.025mg/24hr</i>	62
<i>enoxaparin sodium</i>	11	<i>soln</i>		<i>weekly patch</i>	
<i>30mg/0.3ml syringe</i>		<i>erythromycin 250mg dr</i>	28	<i>estradiol 0.0375mg/24hr</i>	62
<i>enoxaparin sodium</i>	11	<i>tab</i>		<i>twice weekly patch</i>	
<i>40mg/0.4ml syringe</i>		<i>erythromycin 250mg tab</i>	28	<i>estradiol 0.0375mg/24hr</i>	62
<i>enoxaparin sodium</i>	11	<i>erythromycin 333mg dr</i>	28	<i>weekly patch</i>	
<i>60mg/0.6ml syringe</i>		<i>tab</i>		<i>estradiol 0.05mg/24hr</i>	62
<i>enoxaparin sodium</i>	11	<i>erythromycin 500mg dr</i>	28	<i>twice weekly patch</i>	
<i>80mg/0.8ml syringe</i>		<i>tab</i>		<i>estradiol 0.05mg/24hr</i>	62
<i>enpresse tab 28-day pack</i>	59	<i>erythromycin 500mg tab</i>	28	<i>weekly patch</i>	
<i>enskyce tab 28-day pack</i>	59	<i>erythromycin</i>	28	<i>estradiol 0.075mg/24hr</i>	62
<i>entacapone 200mg tab</i>	38	<i>ethylsuccinate 40mg/ml</i>		<i>twice weekly patch</i>	
<i>entecavir 0.5mg tab</i>	46	<i>oral susp</i>		<i>estradiol 0.075mg/24hr</i>	62
<i>entecavir 1mg tab</i>	46	<i>erythromycin</i>	29	<i>weekly patch</i>	
<i>enulose 10gm/15ml oral</i>	63	<i>ethylsuccinate 80mg/ml</i>		<i>estradiol 0.5mg tab</i>	62
<i>soln</i>		<i>oral susp</i>		<i>estradiol 1mg tab</i>	62
ENVARUSUS XR 0.75MG	69	<i>escitalopram 10mg tab</i>	16	<i>estradiol 2mg tab</i>	62
TAB		<i>escitalopram 1mg/ml oral</i>	16	<i>estradiol valerate</i>	62
ENVARUSUS XR 1MG TAB	69	<i>soln</i>		<i>10mg/ml inj</i>	
ENVARUSUS XR 4MG TAB	69	<i>escitalopram 20mg tab</i>	16		

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

ALPHABETICAL LISTING OF DRUGS

<i>estradiol valerate</i>	62	<i>ethinyl estradiol/inert</i>	59	<i>everolimus 2mg tab for</i>	33
<i>20mg/ml inj</i>		<i>ingredients/levonorgestre</i>		<i>oral susp</i>	
<i>estradiol valerate</i>	62	<i>l 0.03-1-0.15mg tab</i>		<i>everolimus 3mg tab for</i>	33
<i>40mg/ml inj</i>		<i>91-day pack</i>		<i>oral susp</i>	
<i>estradiol/norethindrone</i>	59	<i>ethinyl estradiol/inert</i>	60	<i>everolimus 5mg tab</i>	33
<i>acetate 0.5-0.1mg 28-day</i>		<i>ingredients/norgestimate</i>		<i>everolimus 5mg tab for</i>	33
<i>pack</i>		<i>0.035-1-0.25mg tab</i>		<i>oral susp</i>	
<i>estradiol/norethindrone</i>	59	<i>28-day pack</i>		<i>everolimus 7.5mg tab</i>	33
<i>acetate 1-0.5mg 28-day</i>		<i>ethinyl</i>	60	<i>EVOTAZ 300-150MG</i>	44
<i>pack</i>		<i>estradiol/norethindrone</i>		<i>TAB</i>	
<i>eszopiclone 1mg tab</i>	65	<i>acetate 0.0025-0.5mg</i>		<i>EVRYSDI 0.75MG/ML</i>	70
<i>eszopiclone 2mg tab</i>	65	<i>pack</i>		<i>ORAL SOLN</i>	
<i>eszopiclone 3mg tab</i>	65	<i>ethinyl</i>	60	<i>EVRYSDI 5MG TAB</i>	70
<i>ethambutol 100mg tab</i>	30	<i>estradiol/norethindrone</i>		<i>exemestane 25mg tab</i>	32
<i>ethambutol 400mg tab</i>	30	<i>acetate 0.005-1mg 28-day</i>		<i>ezetimibe 10mg tab</i>	23
<i>ethinyl estradiol/ethinyl</i>	59	<i>pack</i>		<i>ezetimibe/simvastatin</i>	23
<i>estradiol/levonorgestrel</i>		<i>ethinyl</i>	60	<i>10-10mg tab</i>	
<i>0.01-0.02-0.1mg tab</i>		<i>estradiol/norethindrone</i>		<i>ezetimibe/simvastatin</i>	23
<i>91-day pack</i>		<i>acetate 0.02-1mg tab</i>		<i>10-20mg tab</i>	
<i>ethinyl estradiol/ethinyl</i>	59	<i>21-day pack</i>		<i>ezetimibe/simvastatin</i>	23
<i>estradiol/levonorgestrel</i>		<i>ethinyl</i>	60	<i>10-40mg tab</i>	
<i>0.01-0.03-0.15mg tab</i>		<i>estradiol/norgestimate</i>		<i>ezetimibe/simvastatin</i>	23
<i>91-day pack</i>		<i>0.18-25/0.215-25/0.25-25</i>		<i>10-80mg tab</i>	
<i>ethinyl</i>	59	<i>mg-mcg tab 28-day pack</i>			
<i>estradiol/ethynodiol</i>		<i>ethinyl</i>	60	F	
<i>diacetate/inert</i>		<i>estradiol/norgestimate</i>		<i>falmina tab 28-day pack</i>	60
<i>ingredients 0.035-1-1mg</i>		<i>0.18-35/0.215-35/0.25-35</i>		<i>famciclovir 125mg tab</i>	46
<i>tab 28-day pack</i>		<i>mg-mcg tab 28-day pack</i>		<i>famciclovir 250mg tab</i>	46
<i>ethinyl</i>	59	<i>ethosuximide 250mg cap</i>	15	<i>famciclovir 500mg tab</i>	46
<i>estradiol/etonogestrel</i>		<i>ethosuximide 50mg/ml</i>	15	<i>famotidine 20mg tab</i>	81
<i>0.120-0.015 mg/24hr</i>		<i>oral soln</i>		<i>famotidine 40mg tab</i>	81
<i>vaginal system</i>		<i>etodolac 200mg cap</i>	4	<i>FANAPT 10MG TAB</i>	40
<i>ethinyl estradiol/ferrous</i>	59	<i>etodolac 300mg cap</i>	4	<i>FANAPT 12MG TAB</i>	40
<i>fumarate/norethindrone</i>		<i>etodolac 400mg tab</i>	4	<i>FANAPT 1MG TAB</i>	40
<i>acetate 0.02-75-1mg tab</i>		<i>etodolac 500mg tab</i>	4	<i>FANAPT 2MG TAB</i>	40
<i>28-day pack</i>		<i>etravirine 100mg tab</i>	44	<i>FANAPT 4MG TAB</i>	40
<i>ethinyl estradiol/inert</i>	59	<i>etravirine 200mg tab</i>	44	<i>FANAPT 6MG TAB</i>	40
<i>ingredients/levonorgestre</i>		<i>EULEXIN 125MG CAP</i>	32	<i>FANAPT 8MG TAB</i>	40
<i>l 0.02-1-0.1mg tab 28-day</i>		<i>everolimus 0.25mg tab</i>	69	<i>FANAPT TAB TITRATION</i>	40
<i>pack</i>		<i>everolimus 0.5mg tab</i>	69	<i>PACK (8)</i>	
<i>ethinyl estradiol/inert</i>	59	<i>everolimus 0.75mg tab</i>	69	<i>FARXIGA 10MG TAB</i>	21
<i>ingredients/levonorgestre</i>		<i>everolimus 10mg tab</i>	33	<i>FARXIGA 5MG TAB</i>	21
<i>l 0.03-1-0.15mg tab</i>		<i>everolimus 1mg tab</i>	69	<i>FASENRA 10MG/0.5ML</i>	8
<i>28-day pack</i>		<i>everolimus 2.5mg tab</i>	33	<i>SYRINGE</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

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>	82	<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>flunisolide 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>furosemide 20mg tab</i>	56	<i>gavilyte-g powder for</i>	65
<i>fluticasone</i>	10	<i>furosemide 40mg tab</i>	56	<i>oral soln</i>	
<i>propionate/salmeterol</i>		<i>furosemide 80mg tab</i>	56	<i>gavilyte-n powder for</i>	66
<i>250-50mcg/act powder</i>		FUROSEMIDE 8MG/ML	56	<i>oral soln</i>	
<i>inhaler</i>		ORAL SOLN		GAVRETO 100MG CAP	33
<i>fluticasone</i>	10	<i>fyavolv 0.0025-0.5mg tab</i>	60	<i>gefitinib 250mg tab</i>	31
<i>propionate/salmeterol</i>		<i>fyavolv 0.005-1mg tab</i>	60	<i>gemfibrozil 600mg tab</i>	23
<i>500-50mcg/act powder</i>		FYCOMPA 0.5MG/ML	13	<i>generlac 10gm/15ml oral</i>	63
<i>inhaler</i>		ORAL SUSP		<i>soln</i>	
<i>fluvastatin 20mg cap</i>	24			<i>gengraf 100mg cap</i>	69
<i>fluvastatin 40mg cap</i>	24			<i>gengraf 25mg cap</i>	69
<i>fluvoxamine maleate</i>	16			<i>gentamicin 0.1% cream</i>	52
<i>100mg tab</i>				<i>gentamicin 0.1% ointment</i>	52
<i>fluvoxamine maleate</i>	16	G		<i>gentamicin 0.3% ophth</i>	71
<i>25mg tab</i>		<i>gabapentin 100mg cap</i>	13	<i>soln</i>	
<i>fluvoxamine maleate</i>	16	<i>gabapentin 300mg cap</i>	13	GENTAMICIN 0.8MG/ML	2
<i>50mg tab</i>		<i>gabapentin 400mg cap</i>	13	INJ	
<i>fondaparinux sodium</i>	11	<i>gabapentin 50mg/ml oral</i>	13	GENTAMICIN 1.2MG/ML	2
<i>10mg/0.8ml syringe</i>		<i>soln</i>		INJ	
<i>fondaparinux sodium</i>	11	<i>gabapentin 600mg tab</i>	13	GENTAMICIN 1.6MG/ML	2
<i>2.5mg/0.5ml syringe</i>		<i>(Neurontin equiv)</i>		INJ	
<i>fondaparinux sodium</i>	11	<i>gabapentin 800mg tab</i>	13	GENTAMICIN 1MG/ML	2
<i>5mg/0.4ml syringe</i>		<i>galantamine 12mg tab</i>	75	INJ	
<i>fondaparinux sodium</i>	11	<i>galantamine 4mg tab</i>	75	<i>gentamicin 40mg/ml inj</i>	2
<i>7.5mg/0.6ml syringe</i>		<i>galantamine 8mg tab</i>	75	GENVOYA	44
<i>fosamprenavir 700mg tab</i>	44	<i>galantamine</i>	75	150-150-200-10MG TAB	
<i>fosinopril sodium 10mg</i>	24	<i>hydrobromide 16mg er</i>		GILOTRIF 20MG TAB	31
<i>tab</i>		<i>cap</i>		GILOTRIF 30MG TAB	31
<i>fosinopril sodium 20mg</i>	24	<i>galantamine</i>	75	GILOTRIF 40MG TAB	31
<i>tab</i>		<i>hydrobromide 24mg er</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	GLUCOSE	67	<i>glutamine 5000mg</i>	64
<i>20mg/ml syringe</i>		50MG/ML/POTASSIUM		<i>powder for oral soln</i>	
<i>glatiramer acetate</i>	76	CHLORIDE		<i>glycopyrrolate 1mg tab</i>	81
<i>40mg/ml syringe</i>		0.02MEQ/ML/SODIUM		<i>glycopyrrolate 2mg tab</i>	81
<i>glatopa 20mg/ml syringe</i>	76	CHLORIDE 2.25MG/ML		GLYXAMBI 10-5MG TAB	19
<i>glatopa 40mg/ml syringe</i>	76	INJ		GLYXAMBI 25-5MG TAB	19
GLEOSTINE 100MG CAP	30	<i>glucose</i>	67	GOMEKLI 1MG CAP	33
GLEOSTINE 10MG CAP	30	<i>50mg/ml/potassium</i>		GOMEKLI 1MG TAB	33
GLEOSTINE 40MG CAP	30	<i>chloride</i>		FOR ORAL SUSP	
<i>glimepiride 1mg tab</i>	21	<i>0.02meq/ml/sodium</i>		GOMEKLI 2MG CAP	33
<i>glimepiride 2mg tab</i>	21	<i>chloride 4.5mg/ml inj</i>		<i>granisetron 1mg tab</i>	21
<i>glimepiride 4mg tab</i>	21	<i>glucose</i>	67	<i>griseofulvin 125mg tab</i>	22
<i>glipizide 10mg er tab</i>	21	<i>50mg/ml/potassium</i>		<i>griseofulvin 250mg tab</i>	22
<i>glipizide 10mg tab</i>	21	<i>chloride</i>		<i>griseofulvin 25mg/ml oral</i>	22
<i>glipizide 2.5mg er tab</i>	21	<i>0.02meq/ml/sodium</i>		<i>susp</i>	
<i>glipizide 5mg er tab</i>	21	<i>chloride 9mg/ml inj</i>		<i>griseofulvin 500mg tab</i>	22
<i>glipizide 5mg tab</i>	21	<i>glucose</i>	67	<i>guanfacine 1mg er tab</i>	1
<i>glipizide/metformin</i>	18	<i>50mg/ml/potassium</i>		<i>guanfacine 2mg er tab</i>	1
<i>2.5-250mg tab</i>		<i>chloride</i>		<i>guanfacine 3mg er tab</i>	1
<i>glipizide/metformin</i>	19	<i>0.03meq/ml/sodium</i>		<i>guanfacine 4mg er tab</i>	1
<i>2.5-500mg tab</i>		<i>chloride 4.5mg/ml inj</i>		GVOKE 0.5MG/0.1ML	19
<i>glipizide/metformin</i>	19	<i>glucose</i>	67	AUTO-INJECTOR	
<i>5-500mg tab</i>		<i>50mg/ml/potassium</i>		GVOKE 1MG/0.2ML	19
GLUCOSE	67	<i>chloride</i>		AUTO-INJECTOR	
100MG/ML/SODIUM		<i>0.04meq/ml/sodium</i>		GVOKE 1MG/0.2ML INJ	19
CHLORIDE 2MG/ML INJ		<i>chloride 4.5mg/ml inj</i>		GVOKE 1MG/0.2ML	19
GLUCOSE	67	<i>glucose</i>	67	SYRINGE	
100MG/ML/SODIUM		<i>50mg/ml/potassium</i>			
CHLORIDE 4.5MG/ML		<i>chloride</i>		H	
INJ		<i>0.04meq/ml/sodium</i>		HADLIMA 40MG/0.4ML	3
<i>glucose 50mg/ml inj</i>	71	<i>chloride 9mg/ml inj</i>		AUTO-INJECTOR	
<i>glucose</i>	67	GLUCOSE	67	HADLIMA 40MG/0.4ML	3
<i>50mg/ml/potassium</i>		50MG/ML/SODIUM		SYRINGE	
<i>chloride</i>		CHLORIDE 2MG/ML INJ		HADLIMA 40MG/0.8ML	3
<i>0.01meq/ml/sodium</i>		GLUCOSE	67	AUTO-INJECTOR	
<i>chloride 4.5mg/ml inj</i>		50MG/ML/SODIUM		HADLIMA 40MG/0.8ML	3
<i>glucose</i>	67	CHLORIDE 4.5MG/ML		SYRINGE	
<i>50mg/ml/potassium</i>		INJ		HAEGARDA 2000UNIT	65
<i>chloride 0.02meq/ml inj</i>		<i>glucose 50mg/ml/sodium</i>	67	INJ	
		<i>chloride 9mg/ml inj</i>		HAEGARDA 3000UNIT	65
		GLUCOSE/SODIUM	67	INJ	
		CHLORIDE		<i>hailey 24 fe tab 28-day</i>	60
		25MG/ML-4.5MG/ML		<i>pack</i>	
		INJ		<i>halobetasol propionate</i>	54
				<i>0.05% cream</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>halobetasol propionate</i>	55	HUMALOG 200UNIT/ML	20	<i>hydrochlorothiazide/lisin</i>	27
<i>0.05% ointment</i>		KWIKPEN		<i>opril 25-20mg tab</i>	
<i>haloette</i>	60	HUMALOG JUNIOR	20	<i>hydrochlorothiazide/losar</i>	27
<i>0.120-0.015mg/24hr</i>		100UNIT/ML PEN INJ		<i>tan potassium</i>	
<i>vaginal system</i>		HUMALOG MIX (50/50)	20	<i>12.5-100mg tab</i>	
<i>haloperidol 0.5mg tab</i>	39	100UNIT/ML PEN INJ		<i>hydrochlorothiazide/losar</i>	27
<i>haloperidol 10mg tab</i>	39	HUMALOG MIX (75/25)	20	<i>tan potassium 12.5-50mg</i>	
<i>haloperidol 1mg tab</i>	39	100UNIT/ML INJ		<i>tab</i>	
<i>haloperidol 20mg tab</i>	39	HUMALOG MIX (75/25)	20	<i>hydrochlorothiazide/losar</i>	27
<i>haloperidol 2mg tab</i>	39	100UNIT/ML KWIKPEN		<i>tan potassium 25-100mg</i>	
<i>haloperidol 2mg/ml oral</i>	39	HUMULIN (70/30)	20	<i>tab</i>	
<i>soln</i>		100UNIT/ML INJ		<i>hydrochlorothiazide/meto</i>	27
<i>haloperidol 5mg tab</i>	39	HUMULIN (70/30)	20	<i>prolol tartrate 25-100mg</i>	
<i>haloperidol 5mg/ml inj</i>	39	100UNIT/ML PEN INJ		<i>tab</i>	
<i>haloperidol decanoate</i>	39	HUMULIN N	20	<i>hydrochlorothiazide/meto</i>	27
<i>100mg/ml (1ml) inj</i>		100UNIT/ML INJ		<i>prolol tartrate 25-50mg</i>	
<i>haloperidol decanoate</i>	39	HUMULIN N	20	<i>tab</i>	
<i>100mg/ml (5ml) inj</i>		100UNIT/ML PEN INJ		<i>hydrochlorothiazide/meto</i>	27
<i>haloperidol decanoate</i>	39	HUMULIN R	20	<i>prolol tartrate 50-100mg</i>	
<i>50mg/ml (1ml) inj</i>		100UNIT/ML INJ		<i>tab</i>	
<i>haloperidol decanoate</i>	39	HUMULIN R	21	<i>hydrochlorothiazide/olme</i>	27
<i>50mg/ml (5ml) inj</i>		500UNIT/ML INJ		<i>sartan medoxomil</i>	
HAVRIX 1440ELU/ML	82	HUMULIN R	21	<i>12.5-20mg tab</i>	
SYRINGE		500UNIT/ML PEN INJ		<i>hydrochlorothiazide/olme</i>	27
HAVRIX 720ELU/0.5ML	82	<i>hydralazine 100mg tab</i>	28	<i>sartan medoxomil</i>	
SYRINGE		<i>hydralazine 10mg tab</i>	28	<i>12.5-40mg tab</i>	
<i>heather 0.35mg 28-day</i>	74	<i>hydralazine 25mg tab</i>	28	<i>hydrochlorothiazide/olme</i>	27
<i>pack</i>		<i>hydralazine 50mg tab</i>	28	<i>sartan medoxomil</i>	
<i>heparin sodium porcine</i>	11	<i>hydrochlorothiazide</i>	57	<i>25-40mg tab</i>	
<i>10000unit/ml inj</i>		<i>12.5mg cap</i>		<i>hydrochlorothiazide/spiro</i>	56
<i>heparin sodium porcine</i>	12	<i>hydrochlorothiazide</i>	57	<i>nolactone 25-25mg tab</i>	
<i>1000unit/ml inj</i>		<i>12.5mg tab</i>		<i>hydrochlorothiazide/telmi</i>	27
<i>heparin sodium porcine</i>	12	<i>hydrochlorothiazide</i>	57	<i>sartan 12.5-40mg tab</i>	
<i>20000unit/ml inj</i>		<i>25mg tab</i>		<i>hydrochlorothiazide/telmi</i>	27
<i>heparin sodium porcine</i>	12	<i>hydrochlorothiazide</i>	57	<i>sartan 12.5-80mg tab</i>	
<i>5000unit/ml inj</i>		<i>50mg tab</i>		<i>hydrochlorothiazide/telmi</i>	27
HEPLISAV-B	82	<i>hydrochlorothiazide/irbes</i>	27	<i>sartan 25-80mg tab</i>	
20MCG/0.5ML SYRINGE		<i>artan 12.5-150mg tab</i>		<i>hydrochlorothiazide/tria</i>	56
HERNEXEOS 60MG TAB	37	<i>hydrochlorothiazide/irbes</i>	27	<i>nterene 25-37.5mg cap</i>	
HIBERIX 10MCG INJ	82	<i>artan 12.5-300mg tab</i>		<i>hydrochlorothiazide/tria</i>	56
HUMALOG 100UNIT/ML	20	<i>hydrochlorothiazide/lisin</i>	27	<i>nterene 25-37.5mg tab</i>	
CARTRIDGE		<i>opril 12.5-10mg tab</i>		<i>hydrochlorothiazide/tria</i>	56
HUMALOG 100UNIT/ML	20	<i>hydrochlorothiazide/lisin</i>	27	<i>nterene 50-75mg tab</i>	
KWIKPEN		<i>opril 12.5-20mg tab</i>			

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

ALPHABETICAL LISTING OF DRUGS

<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	27	<i>hydroxychloroquine sulfate 400mg tab</i>	30	IMBRUVICA 70MG/ML ORAL SUSP	34
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	27	<i>hydroxyurea 500mg cap</i>	37	<i>imipramine 10mg tab</i>	18
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	27	<i>hydroxyzine 10mg tab</i>	7	<i>imipramine 25mg tab</i>	18
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	27	<i>hydroxyzine 25mg tab</i>	7	<i>imipramine 50mg tab</i>	18
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	27	<i>hydroxyzine 50mg tab</i>	7	<i>imiquimod 5% cream</i>	55
<i>hydrocodone bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>	5	HYDROXYZINE PAMOATE 100MG CAP	7	IMKELDI 80MG/ML ORAL SOLN	34
<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	5	<i>hydroxyzine pamoate 25mg cap</i>	7	IMOVAX 2.5UNIT/ML INJ	82
<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	5	<i>hydroxyzine pamoate 50mg cap</i>	7	<i>incassia 0.35mg tab</i>	74
<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	5	I		<i>28-day pack</i>	
<i>hydrocortisone 1% cream</i>	55	<i>ibandronate 150mg tab</i>	57	INCRELEX 40MG/4ML INJ	58
<i>hydrocortisone 1.67mg/ml enema</i>	6	IBRANCE 100MG CAP	33	INCRUSE ELLIPTA 62.5MCG/INH POWDER	9
<i>hydrocortisone 10mg tab</i>	51	IBRANCE 100MG TAB	33	INHALER	
<i>hydrocortisone 2.5% cream</i>	6	IBRANCE 125MG CAP	33	<i>indapamide 1.25mg tab</i>	57
<i>hydrocortisone 2.5% ointment</i>	55	IBRANCE 125MG TAB	33	<i>indapamide 2.5mg tab</i>	57
<i>hydrocortisone 20mg tab</i>	51	IBRANCE 75MG CAP	34	INFANRIX SYRINGE	80
<i>hydrocortisone 5mg tab</i>	51	IBRANCE 75MG TAB	34	INGREZZA 40MG CAP	76
HYDROCORTISONE LOTION 2.5%	55	IBTROZI 200MG CAP	34	INGREZZA 40MG SPRINKLE CAP	76
<i>hydromorphone 2mg tab</i>	4	<i>ibu 600mg tab</i>	4	INGREZZA 60MG CAP	76
<i>hydromorphone 4mg tab</i>	4	<i>ibu 800mg tab</i>	4	INGREZZA 60MG SPRINKLE CAP	76
<i>hydromorphone 8mg tab</i>	4	<i>ibuprofen 400mg tab</i>	4	INGREZZA 80MG CAP	76
<i>hydroxychloroquine sulfate 100mg tab</i>	29	<i>ibuprofen 600mg tab</i>	4	INGREZZA 80MG SPRINKLE CAP	76
<i>hydroxychloroquine sulfate 200mg tab</i>	30	<i>ibuprofen 800mg tab</i>	4	INGREZZA CAP	76
<i>hydroxychloroquine sulfate 300mg tab</i>	30	<i>icatibant 10mg/ml syringe</i>	65	THERAPY PACK (28)	
		<i>iclevia tab 91-day pack</i>	60	INLYTA 1MG TAB	31
		ICLUSIG 10MG TAB	34	INLYTA 5MG TAB	31
		ICLUSIG 15MG TAB	34	INQOVI 35-100MG TAB	32
		ICLUSIG 30MG TAB	34	PACK (5)	
		ICLUSIG 45MG TAB	34	INREBIC 100MG CAP	34
		<i>icosapent ethyl 1000mg cap</i>	23	INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	
		<i>icosapent ethyl 500mg cap</i>	23	INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	21
		IDHIFA 100MG TAB	34	INSULIN LISPRO 100UNIT/ML INJ	21
		IDHIFA 50MG TAB	34	INSULIN PEN NEEDLE	66
		<i>imatinib 100mg tab</i>	34		
		<i>imatinib 400mg tab</i>	34		
		IMBRUVICA 140MG CAP	34		
		IMBRUVICA 420MG TAB	34		
		IMBRUVICA 70MG CAP	34		

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

ALPHABETICAL LISTING OF DRUGS

INSULIN SYRINGE	66	<i>ipratropium bromide</i>	70	<i>isotretinoin 30mg cap</i>	52
INSULIN SYRINGE	66	<i>0.06% (0.042mg/act)</i>		<i>isotretinoin 40mg cap</i>	52
(DISP) U-100 0.3ML		<i>nasal inhaler</i>		<i>isradipine 2.5mg cap</i>	48
INSULIN SYRINGE	66	<i>ipratropium/albuterol</i>	10	<i>isradipine 5mg cap</i>	48
(DISP) U-100 1/2ML		<i>0.5-2.5mg/3ml inh soln</i>		ITOVEBI 3MG TAB	34
INSULIN SYRINGE	66	<i>irbesartan 150mg tab</i>	25	ITOVEBI 9MG TAB	34
(DISP) U-100 1ML		<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	44	<i>ivabradine 7.5mg tab</i>	49
INVEGA HAFYERA	40	CHEW TAB		<i>ivermectin 3mg tab</i>	6
1092MG/3.5ML		ISENTRESS 100MG	44	IWILFIN 192MG TAB	38
SYRINGE		GRANULES FOR ORAL		IXIARO 0.012MG/ML	82
INVEGA HAFYERA	40	SUSP		SYRINGE	
1560MG/5ML SYRINGE		ISENTRESS 25MG	44	J	
INVEGA SUSTENNA	40	CHEW TAB		<i>jaimiess tab 91-day pack</i>	60
117MG/0.75ML		ISENTRESS 400MG TAB	44	JAKAFI 10MG TAB	34
SYRINGE		ISENTRESS 600MG TAB	44	JAKAFI 15MG TAB	34
INVEGA SUSTENNA	40	<i>isibloom tab 28-day pack</i>	60	JAKAFI 20MG TAB	34
156MG/ML SYRINGE		<i>isoniazid 100mg tab</i>	30	JAKAFI 25MG TAB	34
INVEGA SUSTENNA	40	<i>isoniazid 10mg/ml oral</i>	30	JAKAFI 5MG TAB	34
234MG/1.5ML SYRINGE		<i>soln</i>		<i>jantoven 10mg tab</i>	11
INVEGA SUSTENNA	40	<i>isoniazid 300mg tab</i>	30	<i>jantoven 1mg tab</i>	11
39MG/0.25ML SYRINGE		<i>isosorbide dinitrate 10mg</i>	6	<i>jantoven 2.5mg tab</i>	11
INVEGA SUSTENNA	40	<i>tab</i>		<i>jantoven 2mg tab</i>	11
78MG/0.5ML SYRINGE		<i>isosorbide dinitrate 20mg</i>	6	<i>jantoven 3mg tab</i>	11
INVEGA TRINZA	40	<i>tab</i>		<i>jantoven 4mg tab</i>	11
273MG/0.875ML		<i>isosorbide dinitrate 30mg</i>	6	<i>jantoven 5mg tab</i>	11
SYRINGE		<i>tab</i>		<i>jantoven 6mg tab</i>	11
INVEGA TRINZA	40	<i>isosorbide dinitrate 5mg</i>	6	<i>jantoven 7.5mg tab</i>	11
410MG/1.315ML		<i>tab</i>		JANUMET 50-1000MG	19
SYRINGE		ISOSORBIDE	6	TAB	
INVEGA TRINZA	40	MONONITRATE 10MG		JANUMET 50-500MG	19
546MG/1.75ML		TAB		TAB	
SYRINGE		<i>isosorbide mononitrate</i>	7	JANUMET XR	19
INVEGA TRINZA	40	<i>120mg er tab</i>		100-1000MG TAB	
819MG/2.625ML		ISOSORBIDE	7	JANUMET XR	19
SYRINGE		MONONITRATE 20MG		50-1000MG TAB	
IPOL INJ	82	TAB		JANUMET XR 50-500MG	19
<i>ipratropium bromide</i>	9	<i>isosorbide mononitrate</i>	7	TAB	
<i>0.02% inh soln</i>		<i>30mg er tab</i>		JANUVIA 100MG TAB	20
<i>ipratropium bromide</i>	70	<i>isosorbide mononitrate</i>	7	JANUVIA 25MG TAB	20
<i>0.03% (0.021mg/act)</i>		<i>60mg er tab</i>		JANUVIA 50MG TAB	20
<i>nasal inhaler</i>		<i>isotretinoin 10mg cap</i>	52	JARDIANCE 10MG TAB	21
		<i>isotretinoin 20mg cap</i>	52	JARDIANCE 25MG TAB	21

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

ALPHABETICAL LISTING OF DRUGS

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

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

ALPHABETICAL LISTING OF DRUGS

<i>lamotrigine 150mg tab</i>	13	LENVIMA 24MG DAILY	31	<i>levofloxacin</i>	63
<i>lamotrigine 200mg tab</i>	13	DOSE PACK (90)		<i>750mg/150ml inj</i>	
<i>lamotrigine 25mg chew tab</i>	13	LENVIMA 4MG DAILY	31	<i>levonest tab 28-day pack</i>	60
		DOSE PACK (30)		<i>levonorgestrel/ethinyl</i>	60
<i>lamotrigine 25mg tab</i>	13	LENVIMA 8MG DAILY	31	<i>estradiol</i>	
<i>lamotrigine 5mg chew tab</i>	13	DOSE PACK (60)		<i>0.05-30/0.075-40/0.125-3</i>	
<i>lansoprazole 15mg dr cap</i>	81	<i>lessina tab 28-day pack</i>	60	<i>0mg-mcg tab 28-day pack</i>	
<i>lansoprazole 30mg dr cap</i>	81	<i>letrozole 2.5mg tab</i>	32	<i>levora 0.15/30 tab 28-day</i>	60
LANTUS 100UNIT/ML	21	<i>leucovorin 10mg tab</i>	38	<i>pack</i>	
INJ		<i>leucovorin 15mg tab</i>	38	<i>levothyroxine sodium</i>	79
LANTUS 100UNIT/ML	21	<i>leucovorin 25mg tab</i>	38	<i>100mcg tab</i>	
PEN INJ		<i>leucovorin 5mg tab</i>	38	<i>levothyroxine sodium</i>	79
<i>lapatinib 250mg tab</i>	34	LEUKERAN 2MG TAB	30	<i>112mcg tab</i>	
<i>larin 1.5/30 tab 21-day</i>	60	<i>levalbuterol 0.31mg/3ml</i>	10	<i>levothyroxine sodium</i>	79
<i>pack</i>		<i>neb soln</i>		<i>125mcg tab</i>	
<i>larin 1/20 tab 21-day</i>	60	<i>levalbuterol 0.63mg/3ml</i>	10	<i>levothyroxine sodium</i>	79
<i>pack</i>		<i>inh soln</i>		<i>137mcg tab</i>	
<i>larin fe tab 1.5/30 28-day</i>	60	<i>levalbuterol 1.25mg/3ml</i>	10	<i>levothyroxine sodium</i>	79
<i>pack</i>		<i>neb soln</i>		<i>150mcg tab</i>	
<i>larin fe tab 1/20 28-day</i>	60	LEVALBUTEROL	10	<i>levothyroxine sodium</i>	79
<i>pack</i>		45MCG/ACT INHALER		<i>175mcg tab</i>	
<i>latanoprost 0.005% ophth</i>	73	<i>levetiracetam 1000mg tab</i>	13	<i>levothyroxine sodium</i>	79
<i>soln</i>		<i>levetiracetam 100mg/ml</i>	13	<i>200mcg tab</i>	
LAZCLUZE 240MG TAB	31	<i>oral soln</i>		<i>levothyroxine sodium</i>	79
LAZCLUZE 80MG TAB	31	<i>levetiracetam 250mg tab</i>	13	<i>25mcg tab</i>	
<i>leflunomide 10mg tab</i>	2	<i>levetiracetam 500mg er</i>	13	<i>levothyroxine sodium</i>	79
<i>leflunomide 20mg tab</i>	2	<i>tab</i>		<i>300mcg tab</i>	
<i>lenalidomide 10mg cap</i>	68	<i>levetiracetam 500mg tab</i>	13	<i>levothyroxine sodium</i>	79
<i>lenalidomide 15mg cap</i>	68	<i>levetiracetam 750mg er</i>	13	<i>50mcg tab</i>	
<i>lenalidomide 2.5mg cap</i>	69	<i>tab</i>		<i>levothyroxine sodium</i>	79
<i>lenalidomide 20mg cap</i>	69	<i>levetiracetam 750mg tab</i>	13	<i>75mcg tab</i>	
<i>lenalidomide 25mg cap</i>	69	LEVOBUNOLOL 0.5%	71	<i>levothyroxine sodium</i>	79
<i>lenalidomide 5mg cap</i>	69	OPHTH SOLN		<i>88mcg tab</i>	
LENVIMA 10MG DAILY	31	<i>levocarnitine 100mg/ml</i>	58	<i>levoxyl 100mcg tab</i>	80
DOSE PACK (30)		<i>oral soln</i>		<i>levoxyl 112mcg tab</i>	80
LENVIMA 12MG DAILY	31	<i>levocarnitine 330mg tab</i>	58	<i>levoxyl 125mcg tab</i>	80
DOSE PACK (90)		<i>levocetirizine 5mg tab</i>	78	<i>levoxyl 137mcg tab</i>	80
LENVIMA 14MG DAILY	31	<i>levofloxacin 250mg tab</i>	63	<i>levoxyl 150mcg tab</i>	80
DOSE PACK (60)		<i>levofloxacin 25mg/ml</i>	63	<i>levoxyl 175mcg tab</i>	80
LENVIMA 18MG DAILY	31	<i>oral soln</i>		<i>levoxyl 200mcg tab</i>	80
DOSE PACK (90)		<i>levofloxacin 500mg tab</i>	63	<i>levoxyl 25mcg tab</i>	80
LENVIMA 20MG DAILY	31	<i>levofloxacin</i>	63	<i>levoxyl 50mcg tab</i>	80
DOSE PACK (60)		<i>500mg/100ml inj</i>		<i>levoxyl 75mcg tab</i>	80
		<i>levofloxacin 750mg tab</i>	63	<i>levoxyl 88mcg tab</i>	80

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

ALPHABETICAL LISTING OF DRUGS

<i>lidocaine 4% mucous membrane topical soln</i>	55	<i>lisinopril 20mg tab</i>	24	LORBRENA 100MG TAB	34
<i>lidocaine 5% ointment</i>	55	<i>lisinopril 30mg tab</i>	24	LORBRENA 25MG TAB	34
<i>lidocaine 5% patch</i>	55	<i>lisinopril 40mg tab</i>	24	<i>loryna tab 28-day pack</i>	61
<i>lidocaine viscous 2%</i>	51	<i>lisinopril 5mg tab</i>	24	<i>losartan potassium 100mg tab</i>	25
<i>mucous membrane topical soln</i>		LITFULO 50MG CAP	69	<i>losartan potassium 25mg tab</i>	25
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	55	<i>lithium carbonate 150mg cap</i>	39	<i>losartan potassium 50mg tab</i>	25
<i>lidocan 5% patch</i>	55	<i>lithium carbonate 300mg cap</i>	39	<i>loteprednol etabonate 0.5% ophth gel</i>	72
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	74	<i>lithium carbonate 300mg er tab</i>	39	<i>loteprednol etabonate 0.5% ophth susp</i>	72
<i>linezolid 100mg/5ml oral susp</i>	29	<i>lithium carbonate 300mg tab</i>	39	<i>lovastatin 10mg tab</i>	24
<i>linezolid 600mg tab</i>	29	<i>lithium carbonate 450mg er tab</i>	39	<i>lovastatin 20mg tab</i>	24
<i>linezolid 600mg/300ml inj</i>	29	LITHIUM CARBONATE 600MG CAP	39	<i>lovastatin 40mg tab</i>	24
LINZESS 145MCG CAP	66	<i>lithium citrate 60mg/ml oral soln</i>	39	<i>low-ogestrel tab 28-day pack</i>	61
LINZESS 290MCG CAP	66	LIVTENCITY 200MG TAF	45	<i>loxapine 10mg cap</i>	41
LINZESS 72MCG CAP	66	<i>lo jaimiess tab 91-day pack</i>	60	<i>loxapine 25mg cap</i>	41
<i>liothyronine sodium 25mcg tab</i>	80	<i>loestrin fe tab 1/20 28-day pack</i>	61	<i>loxapine 50mg cap</i>	41
<i>liothyronine sodium 50mcg tab</i>	80	LOKELMA 10GM POWDER FOR ORAL SUSP	70	<i>loxapine 5mg cap</i>	41
<i>liothyronine sodium 5mcg tab</i>	80	LOKELMA 5GM POWDER FOR ORAL SUSP	70	<i>lubiprostone 24mcg cap</i>	66
<i>liraglutide 18mg/3ml pen inj</i>	20	LONSURF 6.14-15MG TAB	32	<i>lubiprostone 8mcg cap</i>	66
<i>lisdexamfetamine dimesylate 10mg cap</i>	1	LONSURF 8.19-20MG TAB	32	LUMAKRAS 120MG TAB	34
<i>lisdexamfetamine dimesylate 20mg cap</i>	1	<i>loperamide 2mg cap</i>	21	LUMAKRAS 240MG TAB	34
<i>lisdexamfetamine dimesylate 30mg cap</i>	1	<i>lopinavir/ritonavir 100-25mg tab</i>	45	LUMAKRAS 320MG TAB	34
<i>lisdexamfetamine dimesylate 40mg cap</i>	1	<i>lopinavir/ritonavir 200-50mg tab</i>	45	LUMIGAN 0.01% OPHTH SOLN	73
<i>lisdexamfetamine dimesylate 50mg cap</i>	1	<i>lorazepam 0.5mg tab</i>	7	LUMRYZ 28-DAY STARTER PACK (28)	78
<i>lisdexamfetamine dimesylate 60mg cap</i>	1	<i>lorazepam 1mg tab</i>	7	LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	78
<i>lisdexamfetamine dimesylate 70mg cap</i>	1	<i>lorazepam 2mg tab</i>	7	LUMRYZ 6GM GRANULES FOR ORAL SUSP	78
<i>lisinopril 10mg tab</i>	24	<i>lorazepam 2mg/ml oral soln</i>	7	LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	78
<i>lisinopril 2.5mg tab</i>	24			LUMRYZ 9GM GRANULES FOR ORAL SUSP	78
				LUPKYNIS 7.9MG CAP	69

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

ALPHABETICAL LISTING OF DRUGS

LUPRON 11.25MG SYRINGE (3 MONTH)	32	MAVYRET 100-40MG TAB	46	<i>memantine 28mg er cap</i>	75
LUPRON 3.75MG SYRINGE (1 MONTH)	32	MAVYRET 50-20MG ORAL PELLET	46	<i>memantine 2mg/ml oral soln</i>	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>lutra 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>	
<i>lyllana 0.1mg/24hr twice weekly patch</i>	62	<i>medroxyprogesterone acetate 150mg/ml syringe</i>	75	<i>mesna 400mg tab</i>	38
LYNPARZA 100MG TAB	34	<i>medroxyprogesterone acetate 2.5mg tab</i>	75	<i>metaxalone 800mg tab</i>	70
LYNPARZA 150MG TAB	34	<i>medroxyprogesterone acetate 5mg tab</i>	30	<i>metformin 1000mg tab</i>	19
LYSODREN 500MG TAB	32	<i>mefloquine 250mg tab</i>	75	<i>metformin 500mg er tab</i>	19
LYTGOBI TAB 12MG	34	MEGESTROL ACETATE 125MG/ML SUSP	32	<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	34	METHADONE 1MG/ML ORAL SOLN	4
DAILEY DOSE PACK (35)		MEKINIST 0.5MG TAB	34	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
<i>magnesium sulfate 500mg/ml inj</i>	68	<i>meleva 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>methotrexate 2.5mg tab</i>	30
MATULANE 50MG CAP	37			METHOTREXATE 25MG/ML INJ	30

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

ALPHABETICAL LISTING OF DRUGS

<i>methotrexate 50mg/2ml inj</i>	30	<i>metoclopramide 1mg/ml oral soln</i>	63	<i>microgestin 1.5/30 tab 21-day pack</i>	61
METHOXSALEN 10MG CAP	53	<i>metoclopramide 5mg tab</i>	63	<i>microgestin 1/20 tab 21-day pack</i>	61
<i>methsuximide 300mg cap</i>	15	<i>metolazone 10mg tab</i>	57	<i>microgestin fe tab 1.5/30 28-day pack</i>	61
<i>methylphenidate 10mg er tab</i>	2	<i>metolazone 2.5mg tab</i>	57	<i>microgestin fe tab 1/20 28-day pack</i>	61
<i>methylphenidate 10mg tab</i>	2	<i>metoprolol succinate 100mg er tab</i>	47	<i>midodrine 10mg tab</i>	49
<i>methylphenidate 18mg er osmotic tab</i>	2	<i>metoprolol succinate 200mg er tab</i>	47	<i>midodrine 2.5mg tab</i>	49
<i>methylphenidate 1mg/ml oral soln</i>	2	<i>metoprolol succinate 25mg er tab</i>	47	<i>midodrine 5mg tab</i>	49
<i>methylphenidate 20mg er tab</i>	2	<i>metoprolol succinate 50mg er tab</i>	47	<i>mifepristone 300mg tab</i>	20
<i>methylphenidate 20mg tab</i>	2	<i>metoprolol tartrate 100mg tab</i>	47	<i>mili tab 28-day pack</i>	61
<i>methylphenidate 27mg er osmotic tab</i>	2	<i>metoprolol tartrate 25mg tab</i>	47	<i>mimvey 28-day pack</i>	61
<i>methylphenidate 27mg er tab</i>	2	<i>metoprolol tartrate 37.5mg tab</i>	47	<i>minocycline 100mg cap</i>	79
<i>methylphenidate 2mg/ml oral soln</i>	2	<i>metoprolol tartrate 50mg tab</i>	47	<i>minocycline 50mg cap</i>	79
<i>methylphenidate 36mg er osmotic tab</i>	2	<i>metoprolol tartrate 75mg tab</i>	47	<i>minocycline 75mg cap</i>	79
<i>methylphenidate 36mg er tab</i>	2	<i>metronidazole 0.75% cream</i>	55	<i>minoxidil 10mg tab</i>	28
<i>methylphenidate 54mg er osmotic tab</i>	2	<i>metronidazole 0.75% gel</i>	55	<i>minoxidil 2.5mg tab</i>	28
<i>methylphenidate 54mg er tab</i>	2	<i>metronidazole 0.75% vaginal gel</i>	83	<i>mirabegron 25mg er tab</i>	82
<i>methylphenidate 5mg tab</i>	2	<i>metronidazole 1% gel</i>	55	<i>mirabegron 50mg er tab</i>	82
<i>methylprednisolone 16mg tab</i>	51	<i>metronidazole 250mg tab</i>	29	<i>mirtazapine 15mg odt</i>	16
<i>methylprednisolone 32mg tab</i>	51	<i>metronidazole 500mg tab</i>	29	<i>mirtazapine 15mg tab</i>	16
<i>methylprednisolone 4mg tab</i>	51	<i>metronidazole 5mg/ml inj</i>	29	<i>mirtazapine 30mg odt</i>	16
<i>methylprednisolone 4mg tab pack (21)</i>	51	<i>metyrosine 250mg cap</i>	27	<i>mirtazapine 30mg tab</i>	16
<i>methylprednisolone 8mg tab</i>	51	<i>mexiletine 150mg cap</i>	8	<i>mirtazapine 45mg odt</i>	16
<i>metoclopramide 10mg tab</i>	63	<i>mexiletine 200mg cap</i>	8	<i>mirtazapine 45mg tab</i>	16
		<i>mexiletine 250mg cap</i>	8	<i>mirtazapine 7.5mg tab</i>	16
		<i>mibelas 24 fe chewable tab 28-day pack</i>	61	<i>misoprostol 100mcg tab</i>	81
		<i>micafungin sodium 100mg inj</i>	22	<i>misoprostol 200mcg tab</i>	81
		<i>micafungin sodium 50mg inj</i>	22	M-M-R II INJ	82
				<i>modafinil 100mg tab</i>	2
				<i>modafinil 200mg tab</i>	2
				MODEYSO 125MG CAP	37
				<i>moexipril 15mg tab</i>	24
				<i>moexipril 7.5mg tab</i>	24
				MOLINDONE 10MG TAB	39
				MOLINDONE 25MG TAB	40
				MOLINDONE 5MG TAB	40
				<i>mometasone furoate 0.1% cream</i>	55
				<i>mometasone furoate 0.1% lotion</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>mometasone furoate 0.1% ointment</i>	55	MOVANTIK 12.5MG TAB	66	<i>naproxen sodium 550mg tab</i>	4
<i>montelukast 10mg tab</i>	9	MOVANTIK 25MG TAB	66	<i>naratriptan 1mg tab</i>	66
<i>montelukast 4mg chew tab</i>	9	<i>moxifloxacin 0.5% ophth soln</i>	71	<i>naratriptan 2.5mg tab</i>	66
<i>montelukast 5mg chew tab</i>	9	MOXIFLOXACIN	63	NATACYN 5% OPHTH SUSP	71
<i>morphine sulfate 100mg er tab</i>	5	1.6MG/ML INJ		<i>nateglinide 120mg tab</i>	20
<i>morphine sulfate 15mg er tab</i>	5	<i>moxifloxacin 400mg tab</i>	63	<i>nateglinide 60mg tab</i>	20
<i>morphine sulfate 15mg tab</i>	5	MRESVIA 50MCG/0.5ML SYRINGE	82	NAYZILAM 5MG/0.1ML	12
<i>morphine sulfate 200mg er tab</i>	5	MULTAQ 400MG TAB	8	NASAL SPRAY	
<i>morphine sulfate 20mg/ml oral soln</i>	5	<i>mupirocin 2% ointment</i>	52	<i>necon 0.5/35 tab 28-day pack</i>	61
MORPHINE SULFATE 2MG/ML ORAL SOLN	5	<i>mycophenolate mofetil 200mg/ml oral susp</i>	69	NEFAZODONE 100MG TAB	17
<i>morphine sulfate 30mg er tab</i>	5	<i>mycophenolate mofetil 250mg cap</i>	69	NEFAZODONE 150MG TAB	17
<i>morphine sulfate 30mg tab</i>	5	<i>mycophenolate mofetil 500mg tab</i>	69	NEFAZODONE 200MG TAB	17
MORPHINE SULFATE 4MG/ML ORAL SOLN	5	<i>mycophenolic acid 180mg dr tab</i>	69	NEFAZODONE 250MG TAB	17
<i>morphine sulfate 60mg er tab</i>	5	<i>mycophenolic acid 360mg dr tab</i>	69	NEFAZODONE 50MG TAB	17
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	20			NEMLUVIO 30MG AUTO-INJECTOR	69
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	20	N		<i>neomycin sulfate 500mg tab</i>	2
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	20	<i>nabumetone 500mg tab</i>	4	<i>neomycin/bacitracin/poly myxin 5mg-400unit-10000unit ophth ointment</i>	71
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	20	<i>nabumetone 750mg tab</i>	4	NEOMYCIN/POLYMYXI N B/GRAMICIDIN	72
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	20	<i>nadolol 20mg tab</i>	47	1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	20	<i>nadolol 40mg tab</i>	47	<i>neomycin/polymyxin/bacit racin/hydrocortisone ophth 1% ointment</i>	72
		<i>nadolol 80mg tab</i>	47	<i>neomycin/polymyxin/dexa methasone 0.1% ophth susp</i>	73
		<i>nafacillin 100mg/ml inj</i>	74	<i>neomycin/polymyxin/hydr ocortisone 3.5-10000unit-1% otic soln</i>	
		<i>nafacillin 1gm inj</i>	74		
		<i>nafacillin 2gm inj</i>	74		
		NALOXONE 0.4MG/ML CARTRIDGE	21		
		<i>naloxone 0.4mg/ml inj</i>	21		
		<i>naloxone 0.4mg/ml syringe</i>	21		
		<i>naloxone 1mg/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		

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

ALPHABETICAL LISTING OF DRUGS

<i>neomycin/polymyxin/hydr</i>	73	NITRO-BID 2%	7	<i>norelgestromin/ethinyl</i>	61
<i>ocortisone</i>		OINTMENT		<i>estradiol 150-35</i>	
<i>3.5-10000unit-1% otic</i>		<i>nitrofurantoin</i>	29	<i>mcg/24hr patch</i>	
<i>susp</i>		<i>macro/nitrofurantoin</i>		<i>norethindrone 0.35mg</i>	75
<i>neo-polycin</i>	71	<i>mono 100mg cap</i>		<i>28-day pack</i>	
<i>5mg-400unit-10000unit</i>		<i>nitrofurantoin</i>	29	<i>norethindrone acetate</i>	75
<i>ophth ointment</i>		<i>macrocrystals 100mg cap</i>		<i>5mg tab</i>	
<i>neo-polycin hc ophth</i>	72	<i>nitrofurantoin</i>	29	<i>nortrel 0.5/35 tab 28-day</i>	61
<i>ointment</i>		<i>macrocrystals 50mg cap</i>		<i>pack</i>	
NERLYNX 40MG TAB	35	<i>nitroglycerin 0.1mg/hr</i>	7	<i>nortrel 1/35 tab 21-day</i>	61
NEVIRAPINE 10MG/ML	45	<i>patch</i>		<i>pack</i>	
ORAL SUSP		<i>nitroglycerin 0.2mg/hr</i>	7	<i>nortrel 1/35 tab 28-day</i>	61
<i>nevirapine 200mg tab</i>	45	<i>patch</i>		<i>pack</i>	
<i>nevirapine 400mg er tab</i>	45	<i>nitroglycerin 0.3mg sl tab</i>	7	<i>nortrel 7/7/7 tab 28-day</i>	61
NEXLETOL 180MG TAB	23	<i>nitroglycerin 0.4% rectal</i>	6	<i>pack</i>	
NEXLIZET 180-10MG	23	<i>ointment</i>		<i>nortriptyline 10mg cap</i>	18
TAB		<i>nitroglycerin 0.4mg sl tab</i>	7	<i>nortriptyline 25mg cap</i>	18
NEXPLANON 68MG	75	<i>nitroglycerin 0.4mg/hr</i>	7	<i>nortriptyline 2mg/ml oral</i>	18
IMPLANT		<i>patch</i>		<i>soln</i>	
<i>niacin 1000mg er tab</i>	23	<i>nitroglycerin 0.6mg sl tab</i>	7	<i>nortriptyline 50mg cap</i>	18
<i>niacin 500mg er tab</i>	23	<i>nitroglycerin 0.6mg/hr</i>	7	<i>nortriptyline 75mg cap</i>	18
<i>niacin 750mg er tab</i>	23	<i>patch</i>		NORVIR 100MG ORAL	45
NICOTROL 10MG/ML	77	NIVESTYM	65	POWDER	
NASAL INHALER		300MCG/0.5ML		NUBEQA 300MG TAB	32
<i>nifedipine 30mg er tab</i>	48	SYRINGE		NUCALA 100MG INJ	8
<i>nifedipine 30mg osmotic</i>	48	NIVESTYM 300MCG/ML	65	NUCALA 100MG/ML	8
<i>er tab</i>		INJ		AUTO-INJECTOR	
<i>nifedipine 60mg er tab</i>	48	NIVESTYM	65	NUCALA 100MG/ML	8
<i>nifedipine 60mg osmotic</i>	48	480MCG/0.8ML		SYRINGE	
<i>er tab</i>		SYRINGE		NUCALA 40MG/0.4ML	8
<i>nifedipine 90mg er tab</i>	48	NIVESTYM	65	SYRINGE	
<i>nifedipine 90mg osmotic</i>	48	480MCG/1.6ML INJ		NUDEXTA 20-10MG	77
<i>er tab</i>		<i>nora-be 0.35mg tab</i>	75	CAP	
<i>nikki tab 28-day pack</i>	61	<i>28-day pack</i>		NUPLAZID 10MG TAB	40
<i>nilotinib 150mg cap</i>	35	NORDITROPIN	57	NUPLAZID 34MG CAP	40
<i>nilotinib 200mg cap</i>	35	10MG/1.5ML PEN INJ		<i>nyamyc 100000unit/gm</i>	53
<i>nilotinib 50mg cap</i>	35	NORDITROPIN	57	<i>topical powder</i>	
<i>nilutamide 150mg tab</i>	32	15MG/1.5ML PEN INJ		<i>nylia 1/35 tab 28-day</i>	61
<i>nimodipine 30mg cap</i>	48	NORDITROPIN	57	<i>pack</i>	
NINLARO 2.3MG CAP	35	30MG/3ML PEN INJ		<i>nylia 7/7/7 tab 28-day</i>	61
NINLARO 3MG CAP	35	NORDITROPIN	57	<i>pack</i>	
NINLARO 4MG CAP	35	5MG/1.5ML PEN INJ		<i>nystatin 100000 unit/gm</i>	53
<i>nitazoxanide 500mg tab</i>	29			<i>ointment</i>	

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

ALPHABETICAL LISTING OF DRUGS

<i>nystatin 100000unit/gm topical powder</i>	53	OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	35	OMNITROPE 5MG/1.5ML CARTRIDGE	57
<i>nystatin 100000unit/ml cream</i>	53	OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	35	<i>ondansetron 0.8mg/ml oral soln</i>	22
<i>nystatin 100000unit/ml oral susp</i>	51	OJEMDA 25MG/ML POWDER FOR ORAL SUSP	35	<i>ondansetron 4mg odt</i>	22
<i>nystatin 500000unit tab</i>	22	OJJAARA 100MG TAB	35	<i>ondansetron 4mg tab</i>	22
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	53	OJJAARA 150MG TAB	35	<i>ondansetron 8mg odt</i>	22
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	53	OJJAARA 200MG TAB	35	<i>ondansetron 8mg tab</i>	22
<i>nystop 100000unit/gm topical powder</i>	53	<i>olanzapine 10mg inj</i>	41	ONUREG 200MG TAB	30
NYVEPRIA 6MG/0.6ML SYRINGE	65	<i>olanzapine 10mg odt</i>	41	ONUREG 300MG TAB	30
O		<i>olanzapine 10mg tab</i>	41	OPIPZA 10MG ORAL FILM	43
<i>ocella tab 28-day pack</i>	61	<i>olanzapine 15mg odt</i>	41	OPIPZA 2MG ORAL FILM	43
OCTAGAM 1GM/20ML INJ	73	<i>olanzapine 15mg tab</i>	41	OPIPZA 5MG ORAL FILM	43
OCTAGAM 2GM/20ML INJ	73	<i>olanzapine 2.5mg tab</i>	41	OPSUMIT 10MG TAB	78
<i>octreotide 0.05mg/ml inj</i>	58	<i>olanzapine 20mg odt</i>	42	OPVEE 2.7MG/0.1ML NASAL SPRAY	21
<i>octreotide 0.1mg/ml inj</i>	58	<i>olanzapine 20mg tab</i>	42	ORENCIA 125MG/ML AUTO-INJECTOR	4
<i>octreotide 0.2mg/ml inj</i>	58	<i>olanzapine 5mg odt</i>	42	ORENCIA 125MG/ML SYRINGE	4
<i>octreotide 0.5mg/ml inj</i>	58	<i>olanzapine 5mg tab</i>	42	ORENCIA 50MG/0.4ML SYRINGE	4
<i>octreotide 1mg/ml inj</i>	58	<i>olanzapine 7.5mg tab</i>	42	ORENCIA 87.5MG/0.7ML SYRINGE	4
ODEFSEY 200-25-25MG TAB	45	<i>olmesartan medoxomil 20mg tab</i>	25	ORGOVYX 120MG TAB	32
ODOMZO 200MG CAP	31	<i>olmesartan medoxomil 40mg tab</i>	25	ORKAMBI 125-100MG	77
OFEV 100MG CAP	77	<i>olmesartan medoxomil 5mg tab</i>	25	ORAL GRANULES	77
OFEV 150MG CAP	77	<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	70	ORKAMBI 125-100MG TAB	77
<i>ofloxacin 0.3% ophth soln</i>	72	OLUMIANT 1MG TAB	2	ORKAMBI 125-200MG TAB	77
<i>ofloxacin 0.3% otic soln</i>	73	OLUMIANT 2MG TAB	2	ORKAMBI 188-150MG	77
OGSIVEO 100MG TAB 7-DAY PACK (14)	35	OLUMIANT 4MG TAB	2	ORAL GRANULES	77
OGSIVEO 150MG TAB 7-DAY PACK (14)	35	<i>omega-3 acid ethyl esters (usp) 1gm cap</i>	23	ORKAMBI 94-75MG	77
OGSIVEO 50MG TAB	35	<i>omeprazole 10mg dr cap</i>	81	ORAL GRANULES	77
OJEMDA 100MG TAB	35	<i>omeprazole 20mg dr cap</i>	81	<i>orphenadrine citrate 100mg er tab</i>	70
		<i>omeprazole 40mg dr cap</i>	81	<i>orquidea 0.35mg tab 28-day pack</i>	75
		OMNITROPE 10MG/1.5ML CARTRIDGE	57	ORSERDU 345MG TAB	32
		OMNITROPE 5.8MG INJ	57	ORSERDU 86MG TAB	32

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

ALPHABETICAL LISTING OF DRUGS

<i>oseltamivir 30mg cap</i>	46	OZEMPIC 2MG/3ML	20	<i>peg 3350/electrolyte</i>	66
<i>oseltamivir 45mg cap</i>	46	PEN INJ		<i>powder for oral soln</i>	
<i>oseltamivir 6mg/ml oral susp</i>	46	OZEMPIC 4MG/3ML	20	<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	66
<i>oseltamivir 75mg cap</i>	46	P		PEGASYS	46
OTEZLA 20MG TAB	53	<i>pacerone 100mg tab</i>	8	180MCG/0.5ML	
OTEZLA 30MG TAB	53	<i>pacerone 200mg tab</i>	8	SYRINGE	
OTEZLA TAB 28-DAY STARTER PACK (55)	53	<i>pacerone 400mg tab</i>	8	PEGASYS 180MCG/ML	46
<i>oxacillin 100mg/ml inj</i>	74	<i>paliperidone 1.5mg er tab</i>	40	INJ	
<i>oxacillin 1gm inj</i>	74	<i>paliperidone 3mg er tab</i>	40	PEMAZYRE 13.5MG TAB	35
<i>oxacillin 2gm inj</i>	74	<i>paliperidone 6mg er tab</i>	40	PEMAZYRE 4.5MG TAB	35
<i>oxcarbazepine 150mg tab</i>	13	<i>paliperidone 9mg er tab</i>	40	PEMAZYRE 9MG TAB	35
<i>oxcarbazepine 300mg tab</i>	13	PANRETIN 0.1% GEL	53	PENBRAYA INJ	82
<i>oxcarbazepine 600mg tab</i>	13	<i>pantoprazole 20mg dr tab</i>	81	<i>penicillamine 250mg tab</i>	68
<i>oxcarbazepine 60mg/ml oral susp</i>	13	<i>pantoprazole 40mg dr tab</i>	81	<i>penicillin g potassium 1000000unit/ml inj</i>	74
<i>oxybutynin chloride 10mg er tab</i>	81	<i>paricalcitol 1mcg cap</i>	58	PENICILLIN G SODIUM	74
<i>oxybutynin chloride 15mg er tab</i>	81	<i>paricalcitol 2mcg cap</i>	58	100000UNIT/ML INJ	
<i>oxybutynin chloride 1mg/ml oral soln</i>	81	<i>paricalcitol 4mcg cap</i>	58	PENICILLIN V POTASSIUM	74
<i>oxybutynin chloride 5mg er tab</i>	81	<i>paroxetine 10mg tab</i>	16	250mg tab	
<i>oxybutynin chloride 5mg tab</i>	81	PAROXETINE 10MG/ML SUSP	16	PENICILLIN V	74
<i>oxycodone 10mg tab</i>	5	<i>paroxetine 12.5mg er tab</i>	16	POTASSIUM 25MG/ML ORAL SOLN	
<i>oxycodone 15mg tab</i>	5	<i>paroxetine 20mg tab</i>	16	<i>penicillin v potassium 500mg tab</i>	74
<i>oxycodone 1mg/ml oral soln</i>	5	<i>paroxetine 25mg er tab</i>	16	PENICILLIN V	74
<i>oxycodone 20mg tab</i>	5	<i>paroxetine 30mg tab</i>	17	POTASSIUM 50MG/ML ORAL SOLN	
<i>oxycodone 30mg tab</i>	5	<i>paroxetine 37.5mg er tab</i>	17	PENMENVY INJ	82
<i>oxycodone 5mg tab</i>	5	<i>paroxetine 40mg tab</i>	17	PENTACEL	80
<i>oxycodone/acetaminophen 10-325mg tab</i>	5	PAXLOVID	46	96-30-68UNIT/ML INJ	
<i>oxycodone/acetaminophen 2.5-325mg tab</i>	5	150MG/100MG TAB		<i>pentamidine isethionate 300mg inj</i>	29
<i>oxycodone/acetaminophen 5-325mg tab</i>	5	PACK (20)		<i>pentamidine isethionate 300mg/6ml inh soln</i>	29
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	5	PAXLOVID	46	<i>pentoxifylline 400mg er tab</i>	49
OZEMPIC 2.68MG/ML PEN INJ	20	300MG/100MG AND 150MG/100MG TAB DOSE PACK (11)		<i>perampanel 10mg tab</i>	13
		<i>pazopanib 200mg tab</i>	35	<i>perampanel 12mg tab</i>	13
		PEDIARIX SYRINGE	80	<i>perampanel 2mg tab</i>	13
		PEDVAXHIB	82	<i>perampanel 4mg tab</i>	14
		7.5MCG/0.5ML INJ		<i>perampanel 6mg tab</i>	14
		<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</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>perampanel 8mg tab</i>	14	PIMOZIDE 1MG TAB	77	POMALYST 3MG CAP	37
PERINDOPRIL	24	PIMOZIDE 2MG TAB	77	POMALYST 4MG CAP	37
ERBUMINE 2MG TAB		<i>pimtrea tab 28-day pack</i>	61	<i>portia tab 28-day pack</i>	61
<i>perindopril erbumine</i>	25	<i>pindolol 10mg tab</i>	47	<i>posaconazole 100mg dr</i>	22
<i>4mg tab</i>		<i>pindolol 5mg tab</i>	47	<i>tab</i>	
PERINDOPRIL	25	<i>pioglitazone 15mg tab</i>	20	<i>posaconazole 40mg/ml</i>	23
ERBUMINE 8MG TAB		<i>pioglitazone 30mg tab</i>	20	<i>oral susp</i>	
<i>periogard 0.12%</i>	51	<i>pioglitazone 45mg tab</i>	20	<i>potassium chloride</i>	68
<i>mouthwash</i>		<i>piperacillin/tazobactam</i>	74	<i>1.33meq/ml oral soln</i>	
<i>permethrin 5% cream</i>	55	<i>2000-250mg inj</i>		<i>potassium chloride</i>	68
<i>perphenazine 16mg tab</i>	42	<i>piperacillin/tazobactam</i>	74	<i>10meq er cap</i>	
<i>perphenazine 2mg tab</i>	42	<i>3000-375mg inj</i>		<i>potassium chloride</i>	68
<i>perphenazine 4mg tab</i>	42	<i>piperacillin/tazobactam</i>	74	<i>10meq er tab</i>	
<i>perphenazine 8mg tab</i>	42	<i>36-4.5gm inj</i>		<i>potassium chloride</i>	68
PERSERIS 120MG	40	<i>piperacillin/tazobactam</i>	74	<i>10meq micro er tab</i>	
SYRINGE		<i>4000-500mg inj</i>		POTASSIUM CHLORIDE	68
PERSERIS 90MG	40	PIQRAY TAB 200MG	35	10MEQ/100ML INJ	
SYRINGE		DAILY DOSE PACK (28)		POTASSIUM CHLORIDE	68
PHENELZINE 15MG TAB	16	PIQRAY TAB 250MG	35	15MEQ ER TAB	
<i>phenobarbital 100mg tab</i>	14	DAILY DOSE PACK (56)		<i>potassium chloride</i>	68
<i>phenobarbital 15mg tab</i>	14	PIQRAY TAB 300MG	35	<i>15meq micro er tab</i>	
<i>phenobarbital 16.2mg tab</i>	14	DAILY DOSE PACK (56)		<i>potassium chloride</i>	68
<i>phenobarbital 30mg tab</i>	14	<i>pirfenidone 267mg cap</i>	77	<i>2.67meq/ml oral soln</i>	
<i>phenobarbital 32.4mg tab</i>	14	<i>pirfenidone 267mg tab</i>	77	<i>potassium chloride</i>	68
<i>phenobarbital 4mg/ml</i>	14	<i>pirfenidone 801mg tab</i>	78	<i>20meq er tab</i>	
<i>oral soln</i>		<i>piroxicam 10mg cap</i>	4	<i>potassium chloride</i>	68
<i>phenobarbital 60mg tab</i>	14	<i>piroxicam 20mg cap</i>	4	<i>20meq micro er tab</i>	
<i>phenobarbital 64.8mg tab</i>	14	PLASMA-LYTE A INJ	68	<i>potassium chloride</i>	68
<i>phenobarbital 97.2mg tab</i>	14	PLEGRIDY	76	<i>20meq powder for oral</i>	
<i>phenytoin 25mg/ml oral</i>	14	125MCG/0.5ML		<i>soln</i>	
<i>susp</i>		AUTO-INJECTOR		POTASSIUM CHLORIDE	68
<i>phenytoin 50mg chew tab</i>	14	PLEGRIDY	76	20MEQ/100ML INJ	
<i>phenytoin sodium 100mg</i>	14	125MCG/0.5ML		<i>potassium chloride</i>	68
<i>er cap</i>		SYRINGE		<i>2meq/ml (20ml) inj</i>	
PIFELTRO 100MG TAB	45	<i>plenamine 15% inj</i>	71	<i>potassium chloride</i>	68
<i>pilocarpine 1% ophth</i>	72	PODOFILOX 0.5%	55	<i>2meq/ml inj</i>	
<i>soln</i>		TOPICAL SOLN		POTASSIUM CHLORIDE	68
<i>pilocarpine 2% ophth</i>	73	<i>polycin 0.5-10unit/mg</i>	72	40MEQ/100ML INJ	
<i>soln</i>		<i>ophth ointment</i>		<i>potassium chloride 8meq</i>	68
<i>pilocarpine 4% ophth</i>	73	<i>polymyxin b/trimethoprim</i>	72	<i>er cap</i>	
<i>soln</i>		<i>10000 unit/ml-0.1%</i>		<i>potassium chloride 8meq</i>	68
<i>pilocarpine 5mg tab</i>	52	<i>ophth soln</i>		<i>er tab</i>	
<i>pilocarpine 7.5mg tab</i>	52	POMALYST 1MG CAP	37	<i>potassium citrate 10meq</i>	63
<i>pimecrolimus 1% cream</i>	55	POMALYST 2MG CAP	37	<i>er tab</i>	

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

ALPHABETICAL LISTING OF DRUGS

<i>potassium citrate 15meq er tab</i>	64	<i>pregabalin 200mg cap</i>	14	<i>primidone 50mg tab</i>	14
<i>potassium citrate 5meq er tab</i>	64	<i>pregabalin 20mg/ml oral soln</i>	14	PRIORIX INJ	82
<i>pramipexole 0.125mg tab</i>	38	<i>pregabalin 225mg cap</i>	14	PRIVIGEN 20GM/200ML INJ	73
<i>pramipexole 0.25mg tab</i>	38	<i>pregabalin 25mg cap</i>	14	<i>probenecid 500mg tab</i>	64
<i>pramipexole 0.5mg tab</i>	38	<i>pregabalin 300mg cap</i>	14	<i>prochlorperazine 10mg tab</i>	42
<i>pramipexole 0.75mg tab</i>	38	<i>pregabalin 50mg cap</i>	14	<i>prochlorperazine 25mg rectal supp</i>	42
<i>pramipexole 1.5mg tab</i>	38	<i>pregabalin 75mg cap</i>	14	<i>prochlorperazine 5mg tab</i>	42
<i>pramipexole 1mg tab</i>	38	PREMARIN 0.3MG TAB	62	<i>procto-med 2.5% cream</i>	6
<i>prasugrel 10mg tab</i>	64	PREMARIN 0.45MG TAB	62	<i>proctosol 2.5% cream</i>	6
<i>prasugrel 5mg tab</i>	64	PREMARIN 0.625MG TAB	62	<i>proctozone hc 2.5% cream</i>	6
<i>pravastatin sodium 10mg tab</i>	24	PREMARIN 0.625MG/GM VAGINAL CREAM	83	<i>progesterone 100mg cap</i>	75
<i>pravastatin sodium 20mg tab</i>	24	PREMARIN 0.9MG TAB	62	<i>progesterone 200mg cap</i>	75
<i>pravastatin sodium 40mg tab</i>	24	PREMARIN 1.25MG TAB	62	PROGRAF 0.2MG GRANULES FOR ORAL SUSP	69
<i>pravastatin sodium 80mg tab</i>	24	PREMPHASE 28-DAY PACK	61	PROGRAF 1MG GRANULES FOR ORAL SUSP	69
<i>praziquantel 600mg tab</i>	6	PREMPRO 0.3/1.5MG 28-DAY PACK	61	PROLASTIN 1000MG INJ	77
<i>prazosin 1mg cap</i>	26	PREMPRO 0.45/1.5MG 28-DAY PACK	61	<i>promethazine 1.25mg/ml oral soln</i>	78
<i>prazosin 2mg cap</i>	26	PREMPRO 0.625/2.5MG 28-DAY PACK	61	<i>promethazine 12.5mg tab</i>	78
<i>prazosin 5mg cap</i>	26	PREMPRO 0.625/5MG 28-DAY PACK	61	<i>promethazine 25mg tab</i>	78
PREDNISOLONE 1% OPTH SOLN	72	<i>prevalite 4gm powder for oral susp</i>	23	<i>promethazine 50mg tab</i>	78
<i>prednisolone 1mg/ml oral soln</i>	51	PREVYMIS 120MG ORAL PELLET	45	<i>propafenone 150mg tab</i>	8
<i>prednisolone 3mg/ml oral soln</i>	51	PREVYMIS 240MG TAB	45	<i>propafenone 225mg er cap</i>	8
<i>prednisolone 5mg/ml oral soln</i>	51	PREVYMIS 480MG TAB	46	<i>propafenone 225mg tab</i>	8
<i>prednisolone acetate 1% ophth susp</i>	72	PREZCOBIX 150-800MG TAB	45	<i>propafenone 300mg tab</i>	8
<i>prednisone 10mg tab</i>	51	PREZISTA 100MG/ML ORAL SUSP	45	<i>propafenone 325mg er cap</i>	8
<i>prednisone 1mg tab</i>	51	PREZISTA 150MG TAB	45	<i>propafenone 425mg er cap</i>	8
PREDNISONONE 1MG/ML ORAL SOLN	51	PREZISTA 75MG TAB	45	<i>propranolol 10mg tab</i>	47
<i>prednisone 2.5mg tab</i>	51	PRIFTIN 150MG TAB	30	<i>propranolol 120mg er cap</i>	47
<i>prednisone 20mg tab</i>	51	PRIMAQUINE	30	<i>propranolol 160mg er cap</i>	47
<i>prednisone 50mg tab</i>	51	PHOSPHATE 26.3MG TAB		<i>propranolol 20mg tab</i>	47
<i>prednisone 5mg tab</i>	51	<i>primidone 250mg tab</i>	14	<i>propranolol 40mg tab</i>	47
<i>pregabalin 100mg cap</i>	14				
<i>pregabalin 150mg cap</i>	14				

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

ALPHABETICAL LISTING OF DRUGS

PROPRANOLOL	47	QUINIDINE SULFATE	8	REPATHA 140MG/ML	23
4MG/ML ORAL SOLN		300MG TAB		SYRINGE	
<i>propranolol 60mg er cap</i>	47	<i>quinine sulfate 324mg</i>	30	RETACRIT	65
<i>propranolol 60mg tab</i>	47	<i>cap</i>		10000UNIT/ML INJ	
<i>propranolol 80mg er cap</i>	47	QVAR 40MCG	9	RETACRIT	65
<i>propranolol 80mg tab</i>	47	REDIHALER		20000UNIT/2ML INJ	
PROPRANOLOL	47	QVAR 80MCG	9	RETACRIT	65
8MG/ML ORAL SOLN		REDIHALER		20000UNIT/ML INJ	
<i>propylthiouracil 50mg</i>	79			RETACRIT 2000UNIT/ML	65
<i>tab</i>		R		INJ	
PROQUAD INJ	82	RABAVERT 2.5UNIT/ML	82	RETACRIT 3000UNIT/ML	65
PROSOL 20% INJ	71	INJ		INJ	
<i>protriptyline 10mg tab</i>	18	RADICAVA 105MG/5ML	70	RETACRIT	65
<i>protriptyline 5mg tab</i>	18	ORAL SUSP		40000UNIT/ML INJ	
PULMOZYME 1MG/ML	77	RALDESY 10MG/ML	17	RETACRIT 4000UNIT/ML	65
INH SOLN		ORAL SOLN		INJ	
PURIXAN	31	<i>raloxifene 60mg tab</i>	57	RETEVMO 120MG TAB	35
2000MG/100ML ORAL		<i>ramelteon 8mg tab</i>	65	RETEVMO 160MG TAB	35
SUSP		<i>ramipril 1.25mg cap</i>	25	RETEVMO 40MG TAB	35
<i>pyrazinamide 500mg tab</i>	30	<i>ramipril 10mg cap</i>	25	RETEVMO 80MG TAB	35
<i>pyridostigmine bromide</i>	30	<i>ramipril 2.5mg cap</i>	25	REVUFORJ 110MG TAB	37
<i>60mg tab</i>		<i>ramipril 5mg cap</i>	25	REVUFORJ 160MG TAB	37
<i>pyrimethamine 25mg tab</i>	30	<i>ranolazine 1000mg er tab</i>	49	REVUFORJ 25MG TAB	37
		<i>ranolazine 500mg er tab</i>	49	REXULTI 0.25MG TAB	43
Q		<i>rasagiline 0.5mg tab</i>	39	REXULTI 0.5MG TAB	43
QINLOCK 50MG TAB	35	<i>rasagiline 1mg tab</i>	39	REXULTI 1MG TAB	43
QUADRACEL INJ	80	<i>reclipsen tab 28-day pack</i>	61	REXULTI 2MG TAB	43
QUADRACEL SYRINGE	80	RECOMBIVAX	82	REXULTI 3MG TAB	43
<i>quetiapine 100mg tab</i>	42	10MCG/ML INJ		REXULTI 4MG TAB	43
<i>quetiapine 150mg er tab</i>	42	RECOMBIVAX	82	REYATAZ 50MG ORAL	45
<i>quetiapine 200mg er tab</i>	42	10MCG/ML SYRINGE		POWDER	
<i>quetiapine 200mg tab</i>	42	RECOMBIVAX	82	REZDIFFRA 100MG TAB	63
<i>quetiapine 25mg tab</i>	42	40MCG/ML INJ		REZDIFFRA 60MG TAB	63
<i>quetiapine 300mg er tab</i>	42	RECOMBIVAX	82	REZDIFFRA 80MG TAB	63
<i>quetiapine 300mg tab</i>	42	5MCG/0.5ML INJ		REZLIDHIA 150MG CAP	35
<i>quetiapine 400mg er tab</i>	42	RECOMBIVAX	82	REZUROCK 200MG TAB	69
<i>quetiapine 400mg tab</i>	42	5MCG/0.5ML SYRINGE		RHOPRESSA 0.02%	72
<i>quetiapine 50mg er tab</i>	42	RELENZA 5MG/BLISTER	46	OPHTH SOLN	
<i>quetiapine 50mg tab</i>	42	POWDER INHALER		RIBAVIRIN 200MG CAP	46
<i>quinapril 10mg tab</i>	25	<i>repaglinide 0.5mg tab</i>	20	RIBAVIRIN 200MG TAB	46
<i>quinapril 20mg tab</i>	25	<i>repaglinide 1mg tab</i>	20	<i>rifabutin 150mg cap</i>	30
<i>quinapril 40mg tab</i>	25	<i>repaglinide 2mg tab</i>	20	<i>rifampin 150mg cap</i>	30
<i>quinapril 5mg tab</i>	25	REPATHA 140MG/ML	23	<i>rifampin 300mg cap</i>	30
QUINIDINE SULFATE	8	AUTO-INJECTOR		<i>rifampin 600mg inj</i>	30
200MG TAB					

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

ALPHABETICAL LISTING OF DRUGS

<i>riluzole 50mg tab</i>	70	<i>rivaroxaban 2.5mg tab</i>	11	ROZLYTREK 100MG	35
RIMANTADINE 100MG	46	<i>rivastigmine 1.5mg cap</i>	75	CAP	
TAB		<i>rivastigmine 13.3mg/24hr</i>	75	ROZLYTREK 200MG	35
RINVOQ 15MG ER TAB	2	<i>patch</i>		CAP	
RINVOQ 1MG/ML ORAL	2	<i>rivastigmine 3mg cap</i>	75	ROZLYTREK 50MG	35
SOLN		<i>rivastigmine 4.5mg cap</i>	75	ORAL PELLET	
RINVOQ 30MG ER TAB	2	<i>rivastigmine 4.6mg/24hr</i>	75	RUBRACA 200MG TAB	35
RINVOQ 45MG ER TAB	2	<i>patch</i>		RUBRACA 250MG TAB	35
<i>risedronate sodium</i>	57	<i>rivastigmine 6mg cap</i>	75	RUBRACA 300MG TAB	35
<i>150mg tab</i>		<i>rivastigmine 9.5mg/24hr</i>	75	<i>rufinamide 200mg tab</i>	14
<i>risedronate sodium 30mg</i>	57	<i>patch</i>		<i>rufinamide 400mg tab</i>	14
<i>tab</i>		<i>rizatriptan 10mg odt</i>	67	<i>rufinamide 40mg/ml oral</i>	14
<i>risedronate sodium 35mg</i>	57	<i>rizatriptan 10mg tab</i>	67	<i>susp</i>	
<i>tab</i>		<i>rizatriptan 5mg odt</i>	67	RUKOBIA 600MG ER	45
<i>risedronate sodium 35mg</i>	57	<i>rizatriptan 5mg tab</i>	67	TAB	
<i>tab pack (12)</i>		ROCKLATAN	72	RYBELSUS 14MG TAB	20
<i>risedronate sodium 35mg</i>	57	0.02-0.005% OPTH		RYBELSUS 3MG TAB	20
<i>tab pack (4)</i>		SOLN		RYBELSUS 7MG TAB	20
<i>risedronate sodium 5mg</i>	57	<i>roflumilast 0.5mg tab</i>	78	RYDAPT 25MG CAP	35
<i>tab</i>		<i>roflumilast 250mcg tab</i>	78		
RISPERIDONE 0.25MG	40	ROMVIMZA 14MG CAP	35	S	
ODT		ROMVIMZA 20MG CAP	35	<i>sacubitril/valsartan</i>	49
<i>risperidone 0.25mg tab</i>	40	ROMVIMZA 30MG CAP	35	<i>24-26mg tab</i>	
<i>risperidone 0.5mg odt</i>	41	<i>ropinirole 0.25mg tab</i>	38	<i>sacubitril/valsartan</i>	49
<i>risperidone 0.5mg tab</i>	41	<i>ropinirole 0.5mg tab</i>	39	<i>49-51mg tab</i>	
<i>risperidone 1mg odt</i>	41	<i>ropinirole 1mg tab</i>	39	<i>sacubitril/valsartan</i>	49
<i>risperidone 1mg tab</i>	41	<i>ropinirole 2mg tab</i>	39	<i>97-103mg tab</i>	
<i>risperidone 1mg/ml oral</i>	41	<i>ropinirole 3mg tab</i>	39	<i>sajazir 30mg/3ml syringe</i>	65
<i>soln</i>		<i>ropinirole 4mg tab</i>	39	<i>salmon calcitonin</i>	57
<i>risperidone 2mg odt</i>	41	<i>ropinirole 5mg tab</i>	39	<i>200unit/act nasal spray</i>	
<i>risperidone 2mg tab</i>	41	<i>rosuvastatin calcium</i>	24	SANTYL 250UNIT/GM	55
<i>risperidone 37.5mg inj</i>	41	<i>10mg tab</i>		OINTMENT	
<i>risperidone 3mg odt</i>	41	<i>rosuvastatin calcium</i>	24	<i>sapropterin 100mg</i>	58
<i>risperidone 3mg tab</i>	41	<i>20mg tab</i>		<i>powder for oral soln</i>	
<i>risperidone 4mg odt</i>	41	<i>rosuvastatin calcium</i>	24	<i>sapropterin 100mg tab</i>	58
<i>risperidone 4mg tab</i>	41	<i>40mg tab</i>		<i>sapropterin 500mg</i>	58
<i>risperidone 50mg inj</i>	41	<i>rosuvastatin calcium 5mg</i>	24	<i>powder for oral soln</i>	
<i>risperidone microspheres</i>	41	<i>tab</i>		SCEMBLIX 100MG TAB	35
<i>12.5mg inj</i>		ROTARIX	82	SCEMBLIX 20MG TAB	36
<i>risperidone microspheres</i>	41	667000UNIT/ML ORAL		SCEMBLIX 40MG TAB	36
<i>25mg inj</i>		SUSP		<i>scopolamine 1mg/72hr</i>	22
<i>ritonavir 100mg tab</i>	45	ROTATEQ ORAL SUSP	83	<i>patch</i>	
<i>rivaroxaban 1mg/ml oral</i>	11	<i>roweepra 500mg tab</i>	14	SECUADO 3.8MG/24HR	42
<i>susp</i>				PATCH	

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

SECUADO 5.7MG/24HR PATCH	42	<i>sirolimus 1mg/ml oral soln</i>	69	SOLTAMOX 10MG/5ML ORAL SOLN	32
SECUADO 7.6MG/24HR PATCH	42	<i>sirolimus 2mg tab</i>	69	SOMAVERT 10MG INJ	58
<i>selegiline 5mg cap</i>	39	SIRTURO 100MG TAB	30	SOMAVERT 15MG INJ	58
<i>selenium sulfide 2.5% shampoo</i>	55	SIRTURO 20MG TAB	30	SOMAVERT 20MG INJ	58
SELZENTRY 20MG/ML ORAL SOLN	45	SKYRIZI 150MG/ML AUTO-INJECTOR	53	SOMAVERT 25MG INJ	58
<i>sertraline 100mg tab</i>	17	SKYRIZI 150MG/ML SYRINGE	53	SOMAVERT 30MG INJ	58
<i>sertraline 20mg/ml oral soln</i>	17	SKYRIZI 180MG/1.2ML	63	<i>sorafenib 200mg tab</i>	36
<i>sertraline 25mg tab</i>	17	CARTRIDGE		<i>sotalol 120mg tab</i>	47
<i>sertraline 50mg tab</i>	17	SKYRIZI 360MG/2.4ML	63	<i>sotalol 160mg tab</i>	47
<i>setlakin tab 91-day pack</i>	61	CARTRIDGE		<i>sotalol 240mg tab</i>	47
<i>sharobel 0.35mg tab 28-day pack</i>	75	SKYRIZI 360MG/2.4ML CARTRIDGE	63	<i>sotalol 80mg tab</i>	48
SHINGRIX	83	<i>sodium chloride 0.45% inj</i>	68	<i>sotalol af 120mg tab</i>	48
50MCG/0.5ML INJ		<i>sodium chloride 0.9% inj</i>	68	<i>sotalol af 160mg tab</i>	48
SIGNIFOR 0.3MG/ML INJ	58	<i>sodium chloride 0.9% irrigation soln</i>	64	<i>sotalol af 80mg tab</i>	48
SIGNIFOR 0.6MG/ML INJ	58	<i>sodium chloride 3% inj</i>	68	<i>spironolactone 100mg tab</i>	56
SIGNIFOR 0.9MG/ML INJ	58	<i>sodium chloride 50mg/ml inj</i>	68	<i>spironolactone 25mg tab</i>	56
<i>sildenafil 20mg tab</i>	78	SODIUM OXYBATE	78	<i>spironolactone 50mg tab</i>	56
<i>silver sulfadiazine 1% cream</i>	55	500MG/ML ORAL SOLN		<i>sprintec tab 28-day pack</i>	61
SIMBRINZA 0.2-1% OPHTH SUSP	71	<i>sodium phenylbutyrate 3gm/tsp oral powder</i>	58	SPRITAM 250MG TAB	14
SIMLANDI 20MG/0.2ML SYRINGE	3	<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	70	FOR ORAL SUSP	
SIMLANDI 40MG/0.4ML AUTO-INJECTOR	3	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml</i>	66	SPRITAM 500MG TAB	14
SIMLANDI 40MG/0.4ML SYRINGE	3	<i>oral soln prep kit</i>		FOR ORAL SUSP	
SIMLANDI 80MG/0.8ML AUTO-INJECTOR	3	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml</i>	66	<i>sps 15gm/60ml susp</i>	70
SIMLANDI 80MG/0.8ML SYRINGE	3	<i>oral soln prep kit (480ml)</i>		<i>sronyx tab 28-day pack</i>	61
<i>simvastatin 10mg tab</i>	24	SOFOSBUVIR/VELPATASVIR	46	<i>ssd 1% cream</i>	55
<i>simvastatin 20mg tab</i>	24	VIR 400-100MG TAB		STELARA 45MG/0.5ML INJ	53
<i>simvastatin 40mg tab</i>	24	SOGROYA 10MG/1.5ML	57	STELARA 45MG/0.5ML SYRINGE	53
<i>simvastatin 5mg tab</i>	24	PEN INJ		STELARA 90MG/ML SYRINGE	53
<i>simvastatin 80mg tab</i>	24	SOGROYA 15MG/1.5ML	57	STEQEYMA 90MG/ML SYRINGE	53
<i>sirolimus 0.5mg tab</i>	69	PEN INJ		STIMUFEND 6MG/0.6ML SYRINGE	65
<i>sirolimus 1mg tab</i>	69	SOGROYA 5MG/1.5ML	57	STIOLTO	10
		PEN INJ		2.5-2.5MCG/ACT INHALER	
				STIVARGA 40MG TAB	36
				STREPTOMYCIN 1GM INJ	2

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

ALPHABETICAL LISTING OF DRUGS

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

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

ALPHABETICAL LISTING OF DRUGS

TEFLARO 600MG INJ	29	testosterone 30mg/act	6	tiadylt 300mg er (24hr)	49
telmisartan 20mg tab	25	topical soln		cap	
telmisartan 40mg tab	25	testosterone cypionate	6	tiadylt 360mg er (24hr)	49
telmisartan 80mg tab	25	100mg/ml inj		cap	
temazepam 15mg cap	65	testosterone cypionate	6	tiadylt 420mg er (24hr)	49
temazepam 30mg cap	65	200mg/ml (1ml) inj		cap	
TENIVAC 4-10UNIT/ML	80	testosterone cypionate	6	tiagabine 12mg tab	15
INJ		200mg/ml inj		tiagabine 16mg tab	15
TENIVAC 4-10UNIT/ML	80	TESTOSTERONE	6	tiagabine 2mg tab	15
SYRINGE		ENANTHATE 200MG/ML		tiagabine 4mg tab	15
tenofovir disoproxil	45	INJ		TIBSOVO 250MG TAB	36
fumarate 300mg tab		tetrabenazine 12.5mg tab	76	ticagrelor 60mg tab	64
TEPMETKO 225MG TAB	36	tetrabenazine 25mg tab	76	ticagrelor 90mg tab	64
terazosin 10mg cap	26	tetracycline 250mg cap	79	TICOVAC	83
terazosin 1mg cap	26	tetracycline 500mg cap	79	1.2MCG/0.25ML	
terazosin 2mg cap	26	THALOMID 100MG CAP	69	SYRINGE	
terazosin 5mg cap	26	THALOMID 50MG CAP	69	TICOVAC 2.4MCG/0.5ML	83
terbinafine 250mg tab	22	THEOPHYLLINE 100MG	78	SYRINGE	
terbutaline sulfate 2.5mg	10	ER TAB		tigecycline 50mg inj	29
tab		THEOPHYLLINE 200MG	78	timolol 0.25% ophth gel	71
terbutaline sulfate 5mg	10	ER TAB		timolol 0.25% ophth soln	71
tab		theophylline 300mg er	78	timolol 0.5% ophth gel	71
terconazole 0.4% vaginal	83	tab		timolol 0.5% ophth soln	71
cream		theophylline 400mg er	78	timolol 10mg tab	48
terconazole 0.8% vaginal	83	tab		timolol 5mg tab	48
cream		theophylline 450mg er	78	timolol hemihydrate 0.5%	71
terconazole 80mg vaginal	83	tab		ophth soln	
insert		theophylline 600mg er	78	tinidazole 250mg tab	29
teriflunomide 14mg tab	76	tab		tinidazole 500mg tab	29
teriflunomide 7mg tab	77	thioridazine 100mg tab	42	TIVICAY 50MG TAB	45
TERIPARATIDE	57	thioridazine 10mg tab	43	TIVICAY 5MG TAB FOR	45
0.02MG/ACT PEN INJ		thioridazine 25mg tab	43	ORAL SUSP	
testosterone 1%	6	thioridazine 50mg tab	43	tizanidine 2mg tab	70
(12.5mg/act) gel pump		thiothixene 10mg cap	40	tizanidine 4mg tab	70
testosterone 1% (25mg)	6	thiothixene 1mg cap	40	tobramycin 0.3% ophth	72
gel packet		thiothixene 2mg cap	40	soln	
testosterone 1% (50mg)	6	thiothixene 5mg cap	40	TOBRAMYCIN	2
gel packet		tiadylt 120mg er (24hr)	48	10MG/ML INJ	
TESTOSTERONE 1.62%	6	cap		tobramycin 300mg/5ml	2
(1.25GM) GEL PACKET		tiadylt 180mg er (24hr)	48	inh soln	
testosterone 1.62%	6	cap		tobramycin 80mg/2ml inj	2
(2.5gm) gel packet		tiadylt 240mg er (24hr)	49	tolterodine tartrate 1mg	81
testosterone 1.62%	6	cap		tab	
(20.25mg/act) gel pump					

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>tolterodine tartrate 2mg er cap</i>	81	<i>travoprost 0.004% ophth soln</i>	73	<i>triamcinolone acetonide 0.1% cream</i>	55
<i>tolterodine tartrate 2mg tab</i>	81	<i>trazodone 100mg tab</i>	17	<i>triamcinolone acetonide 0.1% lotion</i>	55
<i>tolterodine tartrate 4mg er cap</i>	81	<i>trazodone 150mg tab</i>	17	<i>triamcinolone acetonide 0.1% ointment</i>	55
<i>topiramate 100mg tab</i>	14	TRELEGY ELLIPTA	10	<i>triamcinolone acetonide 0.1% oral paste</i>	52
<i>topiramate 15mg cap</i>	14	100-62.5-25MCG		<i>triamcinolone acetonide 0.5% cream</i>	55
<i>topiramate 200mg tab</i>	14	POWDER INHALER		<i>triamcinolone acetonide 0.5% ointment</i>	55
<i>topiramate 25mg cap</i>	14	TRELEGY ELLIPTA	10	<i>triazolam 0.125mg tab</i>	65
<i>topiramate 25mg tab</i>	14	200-62.5-25MCG		<i>triazolam 0.25mg tab</i>	65
<i>topiramate 25mg/ml oral soln</i>	14	POWDER INHALER		<i>tridacaine 5% patch</i>	55
<i>topiramate 50mg tab</i>	14	TRELSTAR 11.25MG INJ	32	<i>triderm 0.5% cream</i>	55
<i>toremifene 60mg tab</i>	32	TRELSTAR 22.5MG INJ	32	<i>trientine 250mg cap</i>	68
<i>torpenz 10mg tab</i>	36	TRELSTAR 3.75MG INJ	32	<i>tri-estarylla tab 28-day pack</i>	61
<i>torpenz 2.5mg tab</i>	36	TREMFYA 100MG/ML	54	<i>trifluoperazine 10mg tab</i>	43
<i>torpenz 5mg tab</i>	36	AUTO-INJECTOR		<i>trifluoperazine 1mg tab</i>	43
<i>torpenz 7.5mg tab</i>	36	TREMFYA 100MG/ML	54	<i>trifluoperazine 2mg tab</i>	43
<i>torse mide 100mg tab</i>	56	SYRINGE		<i>trifluoperazine 5mg tab</i>	43
<i>torse mide 10mg tab</i>	56	TREMFYA 200MG/2ML	54	TRIFLURIDINE 1%	72
<i>torse mide 20mg tab</i>	56	AUTO-INJECTOR		OPHTH SOLN	
<i>torse mide 5mg tab</i>	56	TREMFYA 200MG/2ML	63	<i>trihexyphenidyl 2mg tab</i>	38
TOUJEO 300UNIT/ML PEN INJ (1.5ML)	21	AUTO-INJECTOR		<i>trihexyphenidyl 5mg tab</i>	38
TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	21	INDUCTION PACK FOR CROHNS (2)		TRIJARDY XR	19
TPN ELECTROLYTES INJ	68	TREMFYA 200MG/2ML	54	10-5-1000MG TAB	
TRADJENTA 5MG TAB	20	SYRINGE		TRIJARDY XR	19
<i>tramadol 100mg er tab</i>	5	TRESIBA 100UNIT/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	TRESIBA 200UNIT/ML	21	25-5-1000MG TAB	
<i>tramadol 50mg tab</i>	5	PEN INJ		TRIJARDY XR	19
<i>tramadol/acetaminophen 37.5-325mg tab</i>	5	<i>tretinoin 0.01% gel</i>	52	5-2.5-1000MG TAB	
<i>trandolapril 1mg tab</i>	25	<i>tretinoin 0.025% cream</i>	52	TRIKAFTA	77
<i>trandolapril 2mg tab</i>	25	<i>tretinoin 0.025% gel</i>	52	100-50-75MG/150MG	
<i>trandolapril 4mg tab</i>	25	<i>tretinoin 0.05% cream</i>	52	TAB PACK (84)	
<i>tranexamic acid 650mg tab</i>	65	<i>tretinoin 0.1% cream</i>	52	TRIKAFTA	77
<i>tranylcypromine 10mg tab</i>	16	<i>tretinoin 10mg cap</i>	37	100-50-75MG/75MG	
TRAVASOL 10% INJ	71	<i>triamcinolone acetonide 0.025% cream</i>	55	GRANULES PACK (56)	
		<i>triamcinolone acetonide 0.025% lotion</i>	55	TRIKAFTA	77
		<i>triamcinolone acetonide 0.025% ointment</i>	55	50-37.5-25MG/75MG	
				TAB PACK (84)	

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

ALPHABETICAL LISTING OF DRUGS

TRIKAFTA	77	TUKYSA 150MG TAB	37	UZEDY 250MG/0.7ML	41
80-40-60MG/59.5MG		TUKYSA 50MG TAB	37	SYRINGE	
GRANULES PACK (56)		TURALIO 125MG CAP	36	UZEDY 50MG/0.14ML	41
<i>tri-lo- estarylla tab</i>	61	<i>turqoz tab 28-day pack</i>	61	SYRINGE	
<i>28-day pack</i>		TWINRIX SYRINGE	83	UZEDY 75MG/0.21ML	41
<i>tri-lo-sprintec tab 28-day</i>	61	TYBOST 150MG TAB	45	SYRINGE	
<i>pack</i>		TYENNE 162MG/0.9ML	3		
<i>trimethoprim 100mg tab</i>	29	AUTO-INJECTOR		V	
<i>tri-mili tab 28-day pack</i>	61	TYENNE 162MG/0.9ML	3	<i>valacyclovir 1000mg tab</i>	46
<i>trimipramine 100mg cap</i>	18	SYRINGE		<i>valacyclovir 500mg tab</i>	46
<i>trimipramine 25mg cap</i>	18	TYMLOS	57	VALCHLOR 0.016% GEL	53
<i>trimipramine 50mg cap</i>	18	3120MCG/1.56ML PEN		<i>valganciclovir 450mg tab</i>	46
TRINTELLIX 10MG TAB	17	INJ		<i>valganciclovir 50mg/ml</i>	46
TRINTELLIX 20MG TAB	17	TYPHIM VI	82	<i>oral soln</i>	
TRINTELLIX 5MG TAB	17	25MCG/0.5ML INJ		<i>valproic acid 250mg cap</i>	15
<i>tri-sprintec tab 28-day</i>	61	TYPHIM VI	82	<i>valproic acid 50mg/ml</i>	15
<i>pack</i>		25MCG/0.5ML SYRINGE		<i>oral soln</i>	
TRIUMEQ	45			<i>valsartan 160mg tab</i>	25
600-50-300MG TAB		U		<i>valsartan 320mg tab</i>	25
TRIUMEQ 60-5-30MG	45	UBRELVY 100MG TAB	66	<i>valsartan 40mg tab</i>	25
TAB FOR ORAL SUSP		UBRELVY 50MG TAB	66	<i>valsartan 80mg tab</i>	25
<i>tri-vylibra lo tab 28-day</i>	61	<i>unithroid 100mcg tab</i>	80	VALTOCO 10MG	12
<i>pack</i>		<i>unithroid 112mcg tab</i>	80	(10MG/0.1ML) NASAL	
<i>tri-vylibra tab 28-day</i>	61	<i>unithroid 125mcg tab</i>	80	SPRAY DOSE PACK	
<i>pack</i>		<i>unithroid 137mcg tab</i>	80	VALTOCO 15MG	12
<i>trospium chloride 20mg</i>	81	<i>unithroid 150mcg tab</i>	80	(7.5MG/0.1ML) NASAL	
<i>tab</i>		<i>unithroid 175mcg tab</i>	80	SPRAY DOSE PACK	
<i>trospium chloride 60mg</i>	81	<i>unithroid 200mcg tab</i>	80	VALTOCO 20MG	12
<i>er cap</i>		<i>unithroid 25mcg tab</i>	80	(10MG/0.1ML) NASAL	
TRULANCE 3MG TAB	66	<i>unithroid 300mcg tab</i>	80	SPRAY DOSE PACK	
TRULICITY	20	<i>unithroid 50mcg tab</i>	80	VALTOCO 5MG	12
0.75MG/0.5ML		<i>unithroid 75mcg tab</i>	80	(5MG/0.1ML) NASAL	
AUTO-INJECTOR		<i>unithroid 88mcg tab</i>	80	SPRAY DOSE PACK	
TRULICITY	20	<i>ursodiol 250mg tab</i>	63	<i>valtya tab 1/50 28-day</i>	62
1.5MG/0.5ML		<i>ursodiol 300mg cap</i>	63	<i>pack</i>	
AUTO-INJECTOR		<i>ursodiol 500mg tab</i>	63	<i>vancomycin 100mg/ml inj</i>	29
TRULICITY 3MG/0.5ML	20	UZEDY 100MG/0.28ML	41	<i>vancomycin 125mg cap</i>	29
AUTO-INJECTOR		SYRINGE		<i>vancomycin 1gm inj</i>	29
TRULICITY	20	UZEDY 125MG/0.35ML	41	<i>vancomycin 250mg cap</i>	29
4.5MG/0.5ML		SYRINGE		<i>vancomycin 500mg inj</i>	29
AUTO-INJECTOR		UZEDY 150MG/0.42ML	41	<i>vancomycin 750mg inj</i>	29
TRUMENBA SYRINGE	82	SYRINGE		VANFLYTA 17.7MG TAB	36
TRUQAP 160MG TAB	36	UZEDY 200MG/0.56ML	41	VANFLYTA 26.5MG TAB	36
TRUQAP 200MG TAB	36	SYRINGE		VAQTA 25UNIT/0.5ML	83
				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

VAQTA 25UNIT/0.5ML SYRINGE	83	<i>verapamil 120mg er cap</i>	49	VITRAKVI 20MG/ML ORAL SOLN	36
VAQTA 50UNIT/ML INJ	83	<i>verapamil 120mg er tab</i>	49	VITRAKVI 25MG CAP	36
VAQTA 50UNIT/ML SYRINGE	83	<i>verapamil 120mg tab</i>	49	VIVOTIF DR CAP	82
<i>varenicline 0.5mg tab</i>	77	<i>verapamil 180mg er cap</i>	49	VIZIMPRO 15MG TAB	31
<i>varenicline 0.5mg/1mg first month pack (53)</i>	77	<i>verapamil 180mg er tab</i>	49	VIZIMPRO 30MG TAB	31
<i>varenicline 1mg tab</i>	77	<i>verapamil 240mg er cap</i>	49	VIZIMPRO 45MG TAB	31
<i>varenicline 1mg tab pack (56)</i>	77	<i>verapamil 240mg er tab</i>	49	VONJO 100MG CAP	36
VARIVAX	83	<i>verapamil 40mg tab</i>	49	VORANIGO 10MG TAB	36
1350PFU/0.5ML INJ		<i>verapamil 80mg tab</i>	49	VORANIGO 40MG TAB	36
VAXCHORA SUSP	82	VERQUVO 10MG TAB	49	<i>voriconazole 200mg inj</i>	23
VELIVET TAB 28-DAY PACK	62	VERQUVO 2.5MG TAB	49	<i>voriconazole 200mg tab</i>	23
VELTASSA 16.8GM POWDER FOR ORAL SUSP	70	VERQUVO 5MG TAB	49	<i>voriconazole 40mg/ml oral susp</i>	23
VELTASSA 1GM POWDER FOR ORAL SUSP	70	VERSACLOZ 50MG/ML ORAL SUSP	42	<i>voriconazole 50mg tab</i>	23
VELTASSA 25.2GM POWDER FOR ORAL SUSP	70	VERZENIO 100MG TAB	36	VOSEVI 400-100-100MG TAB	46
VELTASSA 8.4GM POWDER FOR ORAL SUSP	70	VERZENIO 150MG TAB	36	VOWST 30000000UNIT CAP	63
VEMLIDY 25MG TAB	46	VERZENIO 200MG TAB	36	VRAYLAR 1.5MG CAP	40
VENCLEXTA 100MG TAB	37	VERZENIO 50MG TAB	36	VRAYLAR 3MG CAP	40
VENCLEXTA 10MG TAB	37	<i>vestura tab 3-0.02mg 28-day pack</i>	62	VRAYLAR 4.5MG CAP	40
VENCLEXTA 50MG TAB	37	<i>vienva tab 28-day pack</i>	62	VRAYLAR 6MG CAP	40
VENCLEXTA TAB STARTER PACK (42)	37	<i>vigabatrin 500mg powder for oral soln</i>	15	<i>vyfemla tab 28-day pack</i>	62
<i>venlafaxine 100mg tab</i>	17	<i>vigabatrin 500mg tab</i>	15	<i>vylibra tab 28-day pack</i>	62
<i>venlafaxine 150mg er cap</i>	17	<i>vigadrone 500mg powder for oral soln</i>	15	VYNDAMAX 61MG CAP	49
<i>venlafaxine 25mg tab</i>	17	<i>vigadrone 500mg tab</i>	15	VYNDAQEL 20MG CAP	49
<i>venlafaxine 37.5mg er cap</i>	17	VIGAFYDE 100MG/ML ORAL SOLN	15	W	
<i>venlafaxine 37.5mg tab</i>	17	<i>vigpoder 500mg powder for oral soln</i>	15	<i>warfarin sodium 10mg tab</i>	11
<i>venlafaxine 50mg tab</i>	17	<i>vilazodone 10mg tab</i>	17	<i>warfarin sodium 1mg tab</i>	11
<i>venlafaxine 75mg er cap</i>	18	<i>vilazodone 20mg tab</i>	17	<i>warfarin sodium 2.5mg tab</i>	11
<i>venlafaxine 75mg tab</i>	18	<i>vilazodone 40mg tab</i>	17	<i>warfarin sodium 2mg tab</i>	11
		VIMKUNYA	83	<i>warfarin sodium 3mg tab</i>	11
		40MCG/0.8ML SYRINGE		<i>warfarin sodium 4mg tab</i>	11
		VIRACEPT 250MG TAB	45	<i>warfarin sodium 5mg tab</i>	11
		VIRACEPT 625MG TAB	45	<i>warfarin sodium 6mg tab</i>	11
		VIREAD 150MG TAB	45	<i>warfarin sodium 7.5mg tab</i>	11
		VIREAD 200MG TAB	45	WELIREG 40MG TAB	37
		VIREAD 250MG TAB	45	WINREVAIR 45MG INJ	78
		VIREAD 40MG/GM	45	WINREVAIR 45MG INJ (2 VIAL PACK)	78
		ORAL POWDER			
		VITRAKVI 100MG CAP	36		

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

ALPHABETICAL LISTING OF DRUGS

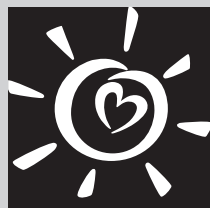
WINREVAIR 60MG INJ	78	XCOPRI TAB 50/100MG	15	XPOVIO TAB 100MG	37
WINREVAIR 60MG INJ (2 VIAL PACK)	78	TITRATION PACK (28)		ONCE WEEKLY CARTON	
<i>wixela 100-50mcg</i>	10	XDEMVIY 0.25% OPHTH	72	(8)	
<i>powder inhaler</i>		SOLN		XPOVIO TAB 40MG	37
<i>wixela 250-50mcg</i>	10	XELJANZ 10MG TAB	2	ONCE WEEKLY CARTON	
<i>powder inhaler</i>		XELJANZ 1MG/ML	2	(16)	
<i>wixela 500-50mcg</i>	10	ORAL SOLN		XPOVIO TAB 40MG	37
<i>powder inhaler</i>		XELJANZ 5MG TAB	2	ONCE WEEKLY CARTON	
WYOST 120MG/1.7ML	57	XELJANZ XR 11MG TAB	2	(4)	
INJ		XELJANZ XR 22MG TAB	3	XPOVIO TAB 40MG	37
		XERMELO 250MG TAB	21	TWICE WEEKLY	
X		XIFAXAN 550MG TAB	29	CARTON (8)	
XALKORI 150MG ORAL	36	XIGDUO XR 10-1000MG	19	XPOVIO TAB 60MG	37
PELLET		TAB		ONCE WEEKLY CARTON	
XALKORI 200MG CAP	36	XIGDUO XR 10-500MG	19	(4)	
XALKORI 20MG ORAL	36	TAB		XPOVIO TAB 60MG	37
PELLET		XIGDUO XR	19	TWICE WEEKLY	
XALKORI 250MG CAP	36	2.5-1000MG TAB		CARTON (24)	
XALKORI 50MG ORAL	37	XIGDUO XR 5-1000MG	19	XPOVIO TAB 80MG	37
PELLET		TAB		ONCE WEEKLY CARTON	
XARELTO 10MG TAB	11	XIGDUO XR 5-500MG	19	(8)	
XARELTO 15MG TAB	11	TAB		XPOVIO TAB 80MG	38
XARELTO 1MG/ML	11	XIIDRA 5% OPHTH	73	TWICE WEEKLY	
ORAL SUSP		SOLN		CARTON (32)	
XARELTO 2.5MG TAB	11	XOFLUZA 40MG TAB	46	XTANDI 40MG CAP	32
XARELTO 20MG TAB	11	XOFLUZA 80MG TAB	46	XTANDI 40MG TAB	32
XARELTO TAB STARTER	11	XOLAIR 150MG INJ	8	XTANDI 80MG TAB	32
PACK (51)		XOLAIR 150MG/ML	9	<i>xulane 150-35mcg/24hr</i>	62
XATMEP 2.5MG/ML	31	AUTO-INJECTOR		<i>patch</i>	
ORAL SOLN		XOLAIR 150MG/ML	9		
XCOPRI 100MG TAB	15	SYRINGE		Y	
XCOPRI 150MG TAB	15	XOLAIR 300MG/2ML	9	YESINTEK 90MG/ML	54
XCOPRI 200MG TAB	15	AUTO-INJECTOR		SYRINGE	
XCOPRI 25MG TAB	15	XOLAIR 300MG/2ML	9	YF-VAX INJ	83
XCOPRI 50MG TAB	15	SYRINGE			
XCOPRI TAB 100/150MG	15	XOLAIR 75MG/0.5ML	9	Z	
MAINTENANCE PACK		AUTO-INJECTOR		<i>zafemy 150-35mcg/24hr</i>	62
(56)		XOLAIR 75MG/0.5ML	9	<i>patch</i>	
XCOPRI TAB 12.5/25MG	15	SYRINGE		<i>zafirlukast 10mg tab</i>	9
TITRATION PACK (28)		XOPENEX 45MCG	10	<i>zafirlukast 20mg tab</i>	9
XCOPRI TAB 150/200MG	15	INHALER		<i>zaleplon 10mg cap</i>	65
PACK (56)		XOSPATA 40MG TAB	37	<i>zaleplon 5mg cap</i>	65
XCOPRI TAB 150/200MG	15			ZAVZPRET 10MG/ACT	66
TITRATION PACK (28)				NASAL SPRAY	
				ZEJULA 100MG TAB	37

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

ALPHABETICAL LISTING OF DRUGS

ZEJULA 200MG TAB	37
ZEJULA 300MG TAB	37
ZELBORAF 240MG TAB	37
ZEMAIRA 1000MG INJ	77
<i>zenatane 10mg cap</i>	52
<i>zenatane 20mg cap</i>	52
<i>zenatane 30mg cap</i>	52
<i>zenatane 40mg cap</i>	52
<i>zidovudine 100mg cap</i>	45
<i>zidovudine 10mg/ml oral soln</i>	45
<i>zidovudine 300mg tab</i>	45
<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>	15
<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

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



L.A. Care
HEALTH PLAN®

For All of L.A.

Na-update ang formulary na ito noong 11/1/2025. 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**.