



2025

Formulary

(List of Covered Drugs)

Peak Advantage Summit (PPO)

Peak Advantage Vista (PPO)

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

25118, Version Number 9

This formulary was updated on 03/01/2025.

For more recent information or other
questions, please contact Member
Services at 1-866-270-3877 (TTY users
should call 711), 24 hours a day, 7 days a
week except for Thanksgiving and Christmas
day, or visit www.medicare.peakhealth.org.

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Note to existing members: This Formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this Drug List (Formulary) refers to “we,” “us”, or “our,” it means Peak Health Insurance Corporation. When it refers to “plan” or “our plan,” it means Peak Health Insurance.

This document includes a Drug List (formulary) for our plan which is current as of 03/01/2025. For an updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (formulary), appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2025, and from time to time during the year.

What is the Peak Health Insurance formulary?

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by Peak Health Insurance in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Peak Health Insurance will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a Peak Health Insurance network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the formulary change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the formulary during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: www.medicare.peakhealth.org.

Changes that can affect you this year: In the below cases, you will be affected by coverage changes during the year:

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our formulary if we are replacing it with a certain new version of that drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our formulary, but immediately move it to a different cost-sharing tier or add new restrictions.

We can make these immediate changes only if we are adding a new generic version of a brand name drug, or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription).

If you are currently taking the brand name drug or original biological product, we may not tell you in advance before we make an immediate change, but we will later provide you with information about the specific change(s) we have made.

If we make such a change, you or your prescriber can ask us to make an exception and continue to cover for you the drug that is being changed. For more information, see the section below titled “How do I request an exception to the Peak Health Insurance’s Formulary?”

Some of these drug types may be new to you. For more information, see the section below titled “What are original biological products and how are they related to biosimilars?”

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness

reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.

- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may remove a brand name drug from the formulary when adding a generic equivalent or remove an original biological product when adding a biosimilar. We may also apply new restrictions to the brand name drug or original biological product, or move it to a different cost-sharing tier, or both. We may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug, or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective. Alternatively, when a member requests a refill of the drug, they may receive a 30-day supply of the drug and notice of the change.

If we make these other changes, you or your prescriber can ask us to make an exception for you and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the Peak Health Insurance Formulary?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2025 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2025 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

The enclosed formulary is current as of 03/01/2025 To get updated information about the drugs covered by our plan please contact us. Our contact information appears on the front and back cover pages. If non-maintenance changes are made to the formulary during the plan year, we will communicate these changes by mailing a Notice of Formulary Change and within the monthly explanation of benefits (EOB).

How do I use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 11. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, ANTIARRHYTHMICS. If you know what your drug is used for, look for the category name in the list that begins on 11. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 95. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

Peak Health Insurance covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs work just as well as and usually cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

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

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

- For discussion of drug types, please see the Evidence of Coverage, Chapter 5, Section 3.1, “The ‘Drug List’ tells which Part D drugs are covered.”

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Our plan requires you (or your prescriber) to get prior authorization for certain drugs. This means that you will need to get approval from us before you fill your prescriptions. If you don't get approval, we may not cover the drug.
- **Quantity Limits:** For certain drugs, our plan limits the amount of the drug that we will cover. For example, our plan provides 30 tablets per prescription for ezetimibe. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, our plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 11. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online documents that explain our prior authorization restriction and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask us to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, “How do I request an exception to the Peak Health Insurance formulary?” on page 6 for information about how to request an exception.

What if my drug is not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that our plan does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by our plan. When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by our plan.
- You can ask us to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the Peak Health Insurance’s Formulary?

You can ask us to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, our plan limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.
- You can ask us to cover a formulary drug at lower cost-sharing level unless the drug is on the specialty tier. If approved, this would lower the amount you must pay for your drug.

Generally, we will only approve your request for an exception if the alternative drugs included on the plan’s formulary, the lower cost-sharing drug, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us to ask for a tiering or formulary exception, including an exception to a coverage restriction. **When you request an exception, your prescriber will need to explain the medical reasons why you need the exception.** Generally, we must make our decision within 72 hours of

getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

What can I do if my drug is not on the formulary or has a restriction?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover, or requesting a formulary exception so that we will cover the drug you take. While you and your doctor determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. If coverage is not approved after your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

Level of Care Changes

Peak Health Insurance's level of care transition process accounts for unplanned changes for members. In some instances, these changes may result in the prescribed drug regimen(s) not being available on our formulary. These instances usually occur when a member moves from one treatment setting to another. This could include members who:

- Enter long-term care (LTC) facilities with a discharge list of medications from the hospital with very short-term planning taken into account (e.g., less than 8 hours).
- Are discharged from a hospital to a home with very short-term planning taken into account.
- End their skilled nursing facility Medicare Part A stay (where payments include all pharmacy charges) and who need to go back to their Part D plan formulary.
- Give up hospice status to revert to standard Medicare Part A and Part B benefits.
- End an LTC facility stay and return to their home.
- Are discharged from psychiatric hospitals with drug regimens that are highly tailored to them.

These changes often result in members and/or prescribers using our plan's exceptions and/or appeals processes. For these types of changes, we will make coverage determinations and re-determinations as quickly as the member's health requires.

Peak Health Insurance ensures proper medication continuance for members upon discharge from an LTC facility or other facilities to ensure an effective transition of care. This may include:

- A refill upon entrance to, or discharge from, an LTC facility. The current standard of care promotes caregivers receiving outpatient Part D prescriptions before discharge from a Part A stay. Members, through no fault of their own, may not have access to the balance of their prescription.
- Our plan allows the member to access a refill upon entrance to, or discharge from, an LTC facility.

To process these transition refills, the pharmacy may need to call us (phone numbers are on the back cover of this booklet). We can help the pharmacy process an override.

For more information

For more detailed information about your Peak Health Insurance prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about our plan, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or, visit <http://www.medicare.gov>.

Peak Health Insurance Formulary

The formulary below provides coverage information about the drugs covered by our plan. If you have trouble finding your drug in the list, turn to the Index that begins on page 95.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., SYNTHROID) and generic drugs are listed in lower-case italics (e.g., *levothyroxine*).

The information in the Requirements/Limits column tells you if our plan has any special requirements for coverage of your drug.

Formulary Drug Tiers

The drug tier table provides the tier description (e.g., preferred generic) and corresponding member cost-share for prescription drugs corresponding to each drug tier at an in-network pharmacy. These co-payments apply during the initial coverage phase. For additional information on your plan, please refer to the Evidence of Coverage, or contact Member Services. Our contact information, along with the date our plan last updated the formulary, appears on the front and back cover pages.

Peak Health Insurance Formulary Drug Tiers and Cost-Sharing Amounts for 2025:

Tier	30-Day Supply			90-Day Supply		
	Preferred Retail Pharmacy	Standard Retail Pharmacy	Mail-Order Pharmacy	Preferred Retail Pharmacy	Standard Retail Pharmacy	Mail-Order Pharmacy
Tier 1 - Preferred Generic	\$0	\$15	\$0	\$0	\$45	\$0
Tier 2 - Generic	\$4	\$20	\$4	\$12	\$60	\$12
Tier 3 - Preferred Brand	\$42	\$47	\$42	\$126	\$141	\$126
Tier 4 - Non-Preferred Brand	\$95	\$100	\$95	\$285	\$300	\$285
Tier 5 – Specialty ^a	33% coinsurance	33% coinsurance	Not offered	Not offered	Not offered	Not offered
Insulins	\$35	\$35	\$35	\$105	\$105	\$105

a: Tier 5 Specialty drugs are limited to a 30-day supply per fill.

Note: Drugs are provided in a Long-Term Care Facility (LTC) for up to a 31-day supply.

List of Abbreviations:

- **Prior Authorization (PA):** The Plan requires you (or your physician) to get prior authorization for certain drugs. This means that you will need to get approval from The Plan before you fill your prescriptions. If you don't get approval, The Plan may not cover the drug.
- **Prior Authorization Restriction for Part B vs Part D Determination (PA_BvD):** This drug may be eligible for payment under Medicare Part B or Part D. You (or your physician) are required to get prior authorization from The Plan to determine that this drug is covered under Medicare Part D before you fill your prescription for this drug. Without prior approval, The Plan may not cover this drug.
- **Prior Authorization Restriction for New Starts Only (PA_NSO):** If this drug is new to you, you (or your physician) are required to get prior authorization from The Plan before you fill your prescription for this drug. Without prior approval, The Plan may not cover this drug.
- **Step Therapy (ST):** In some cases, The Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, The Plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, The Plan will then cover Drug B.
- **Step Therapy for New Starts Only (ST_NSO):** If this drug is new to you, you are required to first try certain drugs to treat your medical condition before we will cover another drug for that condition.
- **Quantity Limits (QL):** For certain drugs, The Plan limits the amount of the drug that The Plan will cover. This could include a: per fill, daily, monthly, or yearly limitation.
- **Insulins (INS):** Insulin products at a maximum \$35 per month.
- **Vaccine (VAC):** Medicare Part D Vaccines covered at \$0.
- **Non-Extended Day Supply (NDS):** You may be able to receive greater than a 1-month supply of most of the drugs on your Formulary via mail order at a reduced cost share. Drugs noted with "NDS" are limited to a 1-month supply for both Retail and Mail Order.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<i>amphetamine/dextroamphetamine 10mg er cap</i>	1	QL=30 EA/30 Days
<i>amphetamine/dextroamphetamine 10mg tab</i>	1	QL=60 EA/30 Days
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	1	QL=60 EA/30 Days
<i>amphetamine/dextroamphetamine 15mg er cap</i>	1	QL=30 EA/30 Days
<i>amphetamine/dextroamphetamine 15mg tab</i>	1	QL=60 EA/30 Days
<i>amphetamine/dextroamphetamine 20mg er cap</i>	1	QL=30 EA/30 Days
<i>amphetamine/dextroamphetamine 20mg tab</i>	1	QL=90 EA/30 Days
<i>amphetamine/dextroamphetamine 25mg er cap</i>	1	QL=30 EA/30 Days
<i>amphetamine/dextroamphetamine 30mg er cap</i>	1	QL=30 EA/30 Days
<i>amphetamine/dextroamphetamine 30mg tab</i>	1	QL=60 EA/30 Days
<i>amphetamine/dextroamphetamine 5mg er cap</i>	1	QL=30 EA/30 Days
<i>amphetamine/dextroamphetamine 5mg tab</i>	1	QL=60 EA/30 Days
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	1	QL=60 EA/30 Days
<i>dextroamphetamine sulfate 10mg tab</i>	1	
<i>dextroamphetamine sulfate 5mg tab</i>	1	
<i>lisdexamfetamine dimesylate 10mg cap</i>	2	
<i>lisdexamfetamine dimesylate 20mg cap</i>	2	
<i>lisdexamfetamine dimesylate 30mg cap</i>	2	
<i>lisdexamfetamine dimesylate 40mg cap</i>	2	
<i>lisdexamfetamine dimesylate 50mg cap</i>	2	
<i>lisdexamfetamine dimesylate 60mg cap</i>	2	
<i>lisdexamfetamine dimesylate 70mg cap</i>	2	
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	QL=60 EA/30 Days
<i>dexmethylphenidate 2.5mg tab</i>	1	QL=60 EA/30 Days
<i>dexmethylphenidate 5mg tab</i>	1	QL=60 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>methylphenidate 10mg er tab</i>	1	QL=90 EA/30 Days
<i>methylphenidate 10mg tab</i>	1	QL=90 EA/30 Days
<i>methylphenidate 18mg er osmotic tab</i>	2	QL=30 EA/30 Days
METHYLPHENIDATE 18MG ER TAB	2	QL=30 EA/30 Days
<i>methylphenidate 1mg/ml oral soln</i>	2	QL=1800 ML/30 Days
<i>methylphenidate 20mg er tab</i>	1	QL=90 EA/30 Days
<i>methylphenidate 20mg tab</i>	1	QL=90 EA/30 Days
<i>methylphenidate 27mg er osmotic tab</i>	2	QL=30 EA/30 Days
<i>methylphenidate 27mg er tab</i>	2	QL=30 EA/30 Days
<i>methylphenidate 2mg/ml oral soln</i>	2	QL=900 ML/30 Days
<i>methylphenidate 36mg er osmotic tab</i>	2	QL=30 EA/30 Days
<i>methylphenidate 36mg er tab</i>	2	QL=30 EA/30 Days
<i>methylphenidate 54mg er osmotic tab</i>	2	QL=30 EA/30 Days
<i>methylphenidate 54mg er tab</i>	2	QL=30 EA/30 Days
<i>methylphenidate 5mg tab</i>	1	QL=90 EA/30 Days
<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>	2	
ARIKAYCE 590MG/8.4ML INH SUSP	5	NDS PA QL=252 ML/30 Days
GENTAMICIN 0.8MG/ML INJ	2	
<i>gentamicin 1.2mg/ml inj</i>	2	
GENTAMICIN 1.6MG/ML INJ	2	
GENTAMICIN 1MG/ML INJ	2	
<i>gentamicin 40mg/ml inj</i>	2	
<i>neomycin sulfate 500mg tab</i>	1	
STREPTOMYCIN 1GM INJ	2	
TOBRAMYCIN 10MG/ML INJ	2	
<i>tobramycin 300mg/5ml inh soln</i>	1	PA QL=300 ML/30 Days
<i>tobramycin 80mg/2ml inj</i>	2	

ANALGESICS - ANTI-INFLAMMATORY

ANTIRHEUMATIC - ENZYME INHIBITORS

<i>leflunomide 10mg tab</i>	1	
<i>leflunomide 20mg tab</i>	1	
OLUMIANT 1MG TAB	5	NDS PA QL=30 EA/30 Days
OLUMIANT 2MG TAB	5	NDS PA QL=30 EA/30 Days
OLUMIANT 4MG TAB	5	NDS PA QL=30 EA/30 Days
RINVOQ 15MG ER TAB	5	NDS PA QL=30 EA/30 Days
RINVOQ 1MG/ML ORAL SOLN	5	NDS PA QL=360 ML/30 Days
RINVOQ 30MG ER TAB	5	NDS PA QL=30 EA/30 Days
RINVOQ 45MG ER TAB	5	NDS PA QL=30 EA/30 Days
XELJANZ 10MG TAB	5	NDS PA QL=60 EA/30 Days
XELJANZ 1MG/ML ORAL SOLN	5	NDS PA QL=300 ML/30 Days
XELJANZ 5MG TAB	5	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. Last Updated Date: 03/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XELJANZ XR 11MG TAB	5	NDS PA QL=30 EA/30 Days
XELJANZ XR 22MG TAB	5	NDS PA QL=30 EA/30 Days
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
ADALIMUMAB-AATY 100MG/ML (0.2ML) SYRINGE	5	NDS PA QL=1 EA/28 Days
ADALIMUMAB-AATY 100MG/ML (0.4ML) SYRINGE	5	NDS PA QL=3 EA/28 Days
ADALIMUMAB-AATY 100MG/ML AUTO-INJECTOR (0.4ML)	5	NDS PA QL=3 EA/28 Days
ADALIMUMAB-AATY 100MG/ML AUTO-INJECTOR (0.8ML)	5	NDS PA QL=2 EA/28 Days
CIMZIA 200MG INJ	5	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE	5	NDS PA QL=2 EA/28 Days
ENBREL 25MG/0.5ML INJ	5	NDS PA QL=8 ML/28 Days
ENBREL 25MG/0.5ML SYRINGE	5	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML AUTO-INJECTOR	5	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML CARTRIDGE	5	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML SYRINGE	5	NDS PA QL=8 ML/28 Days
HADLIMA 40MG/0.4ML AUTO-INJECTOR	5	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.4ML SYRINGE	5	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.8ML AUTO-INJECTOR	5	NDS PA QL=4.80 ML/28 Days
HADLIMA 40MG/0.8ML SYRINGE	5	NDS PA QL=4.80 ML/28 Days
SIMLANDI 40MG/0.4ML AUTO-INJECTOR	5	NDS PA QL=6 EA/28 Days
SIMLANDI 40MG/0.4ML SYRINGE	5	NDS PA QL=6 EA/28 Days
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA 162MG/0.9ML AUTO-INJECTOR	5	NDS PA QL=3.60 ML/28 Days
ACTEMRA 162MG/0.9ML SYRINGE	5	NDS PA QL=3.60 ML/28 Days
KEVZARA 150MG/1.14ML AUTO-INJECTOR	5	NDS PA QL=2.28 ML/28 Days
KEVZARA 150MG/1.14ML SYRINGE	5	NDS PA QL=2.28 ML/28 Days
KEVZARA 200MG/1.14ML AUTO-INJECTOR	5	NDS PA QL=2.28 ML/28 Days
KEVZARA 200MG/1.14ML SYRINGE	5	NDS PA QL=2.28 ML/28 Days
TYENNE 162MG/0.9ML AUTO-INJECTOR	5	NDS PA QL=3.60 ML/28 Days
TYENNE 162MG/0.9ML SYRINGE	5	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>	2	QL=300 ML/30 Days
<i>diclofenac sodium 100mg er tab</i>	1	
<i>diclofenac sodium 25mg dr tab</i>	1	
<i>diclofenac sodium 50mg dr tab</i>	1	
<i>diclofenac sodium 75mg dr tab</i>	1	
<i>diflunisal 500mg tab</i>	1	
<i>etodolac 200mg cap</i>	1	
<i>etodolac 300mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>etodolac 400mg tab</i>	1	
<i>etodolac 500mg tab</i>	1	
<i>flurbiprofen 100mg 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>indomethacin 25mg cap</i>	1	
<i>indomethacin 50mg cap</i>	1	
<i>indomethacin 75mg er cap</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>	2	
<i>naproxen 375mg tab</i>	1	
<i>naproxen 500mg tab</i>	1	
<i>naproxen sodium 275mg tab</i>	2	
<i>naproxen sodium 550mg tab</i>	2	
<i>oxaprozin 600mg tab</i>	2	
<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	5	NDS PA QL=4 ML/28 Days
ORENCIA 125MG/ML SYRINGE	5	NDS PA QL=4 ML/28 Days
ORENCIA 50MG/0.4ML SYRINGE	5	NDS PA QL=1.60 ML/28 Days
ORENCIA 87.5MG/0.7ML SYRINGE	5	NDS PA QL=2.80 ML/28 Days
ANALGESICS - OPIOID		
OPIOID AGONISTS		
<i>fentanyl 100mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>fentanyl 12mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>fentanyl 25mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>fentanyl 50mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>fentanyl 75mcg/hr patch</i>	2	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>methadone 5mg tab</i>	1	QL=360 EA/30 Days
<i>morphine sulfate 100mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg tab</i>	1	QL=180 EA/30 Days
<i>morphine sulfate 200mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 ML/30 Days
<i>morphine sulfate 2mg/ml oral soln</i>	1	QL=1800 ML/30 Days
<i>morphine sulfate 30mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 30mg tab</i>	1	QL=180 EA/30 Days
<i>morphine sulfate 4mg/ml oral soln</i>	1	QL=900 ML/30 Days
<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>	2	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
OXYCONTIN 10MG ER TAB	3	QL=60 EA/30 Days
OXYCONTIN 15MG ER TAB	3	QL=60 EA/30 Days
OXYCONTIN 20MG ER TAB	3	QL=60 EA/30 Days
OXYCONTIN 30MG ER TAB	3	QL=60 EA/30 Days
OXYCONTIN 40MG ER TAB	3	QL=60 EA/30 Days
OXYCONTIN 60MG ER TAB	3	QL=60 EA/30 Days
OXYCONTIN 80MG ER TAB	3	QL=60 EA/30 Days
<i>tramadol 100mg er tab</i>	2	QL=30 EA/30 Days
<i>tramadol 200mg er tab</i>	2	QL=30 EA/30 Days
<i>tramadol 300mg er tab</i>	2	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>hydrocodone bitartrate/ibuprofen 7.5-200mg tab</i>	2	QL=480 EA/30 Days
<i>oxycodone/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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 10mcg/hr weekly patch</i>	2	QL=4 EA/28 Days
<i>buprenorphine 15mcg/hr weekly patch</i>	2	QL=4 EA/28 Days
<i>buprenorphine 20mcg/hr weekly patch</i>	2	QL=4 EA/28 Days
<i>buprenorphine 2mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine 5mcg/hr weekly patch</i>	2	QL=4 EA/28 Days
<i>buprenorphine 7.5mcg/hr weekly patch</i>	2	QL=4 EA/28 Days
<i>buprenorphine 8mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 12-3mg sl film</i>	1	QL=60 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 4-1mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl film</i>	1	QL=90 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	1	QL=90 EA/30 Days
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol 100mg cap</i>	2	
<i>danazol 200mg cap</i>	2	
<i>danazol 50mg cap</i>	2	
<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>	2	PA QL=300 GM/30 Days
<i>testosterone 1% (25mg) gel packet</i>	2	PA QL=300 GM/30 Days
<i>testosterone 1% (50mg) gel packet</i>	2	PA QL=300 GM/30 Days
<i>testosterone 1.62% (1.25gm) gel packet</i>	2	PA QL=75 GM/30 Days
<i>testosterone 1.62% (2.5gm) gel packet</i>	2	PA QL=150 GM/30 Days
<i>testosterone 1.62% (20.25mg/act) gel pump</i>	2	PA QL=150 GM/30 Days
<i>testosterone 30mg/act topical soln</i>	2	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	2	
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide 2mg/act rectal foam</i>	2	PA
<i>hydrocortisone 1.67mg/ml enema</i>	2	
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VASODILATING AGENTS		
<i>nitroglycerin 0.4% rectal ointment</i>	2	QL=30 GM/30 Days
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole 200mg tab</i>	2	
<i>ivermectin 3mg tab</i>	2	PA QL=15 EA/90 Days
<i>praziquantel 600mg tab</i>	2	
ANTIANGINAL AGENTS		
NITRATES		
<i>isosorbide dinitrate 10mg tab</i>	1	
<i>isosorbide dinitrate 20mg tab</i>	1	
<i>isosorbide dinitrate 30mg tab</i>	1	
<i>isosorbide dinitrate 5mg tab</i>	1	
<i>isosorbide mononitrate 120mg er tab</i>	1	
<i>isosorbide mononitrate 30mg er tab</i>	1	
<i>isosorbide mononitrate 60mg er tab</i>	1	
NITRO-BID 2% OINTMENT	2	
<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	
ANTIANKXIETY AGENTS		
ANTIANKXIETY AGENTS - MISC.		
<i>bupirone 10mg tab</i>	1	
<i>bupirone 15mg tab</i>	1	
<i>bupirone 30mg tab</i>	1	
<i>bupirone 5mg tab</i>	1	
<i>bupirone 7.5mg tab</i>	1	
<i>hydroxyzine 10mg tab</i>	1	
<i>hydroxyzine 25mg tab</i>	1	
<i>hydroxyzine 2mg/ml oral soln</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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>chlordiazepoxide 5mg cap</i>	1	QL=120 EA/30 Days
<i>clorazepate dipotassium 15mg tab</i>	2	QL=180 EA/30 Days
<i>clorazepate dipotassium 3.75mg tab</i>	2	QL=180 EA/30 Days
<i>clorazepate dipotassium 7.5mg tab</i>	2	QL=180 EA/30 Days
<i>diazepam 10mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 1mg/ml oral soln</i>	1	QL=1200 ML/30 Days
<i>diazepam 2mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg/ml oral soln</i>	1	QL=240 ML/30 Days
<i>lorazepam 0.5mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 1mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg/ml oral soln</i>	1	QL=150 ML/30 Days
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide 100mg cap</i>	1	
<i>disopyramide 150mg cap</i>	1	
QUINIDINE SULFATE 200MG TAB	2	
QUINIDINE SULFATE 300MG TAB	2	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine 150mg cap</i>	2	
<i>mexiletine 200mg cap</i>	2	
<i>mexiletine 250mg cap</i>	2	
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>	2	
<i>propafenone 225mg tab</i>	1	
<i>propafenone 300mg tab</i>	1	
<i>propafenone 325mg er cap</i>	2	
<i>propafenone 425mg er cap</i>	2	
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>	2	
<i>dofetilide 0.25mg cap</i>	2	
<i>dofetilide 0.5mg cap</i>	2	
MULTAQ 400MG TAB	3	
<i>pacerone 100mg tab</i>	1	
<i>pacerone 200mg tab</i>	1	
<i>pacerone 400mg tab</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	5	NDS PA QL=4.56 ML/28 Days
DUPIXENT 200MG/1.14ML SYRINGE	5	NDS PA QL=4.56 ML/28 Days
DUPIXENT 300MG/2ML AUTO-INJECTOR	5	NDS PA QL=8 ML/28 Days
DUPIXENT 300MG/2ML SYRINGE	5	NDS PA QL=8 ML/28 Days
FASENRA 10MG/0.5ML SYRINGE	5	PA QL=.50 ML/28 Days
FASENRA 30MG/ML AUTO-INJECTOR	5	PA QL=1 ML/28 Days
FASENRA 30MG/ML SYRINGE	5	PA QL=1 ML/28 Days
NUCALA 100MG INJ	5	NDS PA QL=3 EA/28 Days
NUCALA 100MG/ML AUTO-INJECTOR	5	NDS PA QL=3 ML/28 Days
NUCALA 100MG/ML SYRINGE	5	NDS PA QL=3 ML/28 Days
NUCALA 40MG/0.4ML SYRINGE	5	NDS PA QL=.40 ML/28 Days
XOLAIR 150MG INJ	5	NDS PA QL=2 EA/28 Days
XOLAIR 150MG/ML AUTO-INJECTOR	5	NDS PA QL=2 ML/28 Days
XOLAIR 150MG/ML SYRINGE	5	NDS PA QL=2 ML/28 Days
XOLAIR 300MG/2ML AUTO-INJECTOR	5	NDS PA QL=8 ML/28 Days
XOLAIR 300MG/2ML SYRINGE	5	NDS PA QL=8 ML/28 Days
XOLAIR 75MG/0.5ML AUTO-INJECTOR	5	NDS PA QL=1 ML/28 Days
XOLAIR 75MG/0.5ML SYRINGE	5	NDS PA QL=1 ML/28 Days
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG HFA INHALER	3	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH POWDER INHALER	3	QL=30 EA/30 Days
<i>ipratropium bromide 0.02% inh soln</i>	1	PA BvD
LEUKOTRIENE MODULATORS		
<i>montelukast 10mg tab</i>	1	
<i>montelukast 4mg chew tab</i>	1	
<i>montelukast 5mg chew tab</i>	1	
<i>zafirlukast 10mg tab</i>	2	QL=60 EA/30 Days
<i>zafirlukast 20mg tab</i>	2	QL=60 EA/30 Days
STEROID INHALANTS		
ALVESCO 160MCG INHALER	3	QL=12.20 GM/30 Days
ALVESCO 80MCG INHALER	3	QL=12.20 GM/30 Days
ARNUITY 100MCG POWDER INHALER	3	QL=30 EA/30 Days
ARNUITY 200MCG POWDER INHALER	3	QL=30 EA/30 Days
ARNUITY 50MCG POWDER INHALER	3	QL=30 EA/30 Days
ASMANEX 100MCG HFA INHALER	3	QL=13 GM/30 Days
ASMANEX 110MCG (30ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 200MCG HFA INHALER	3	QL=13 GM/30 Days
ASMANEX 220MCG (120ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 220MCG (30ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 220MCG (60ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 50MCG HFA INHALER	3	QL=13 GM/30 Days
<i>budesonide 0.25mg/2ml inh susp</i>	2	PA BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/2ml inh susp</i>	2	PA BvD QL=120 ML/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>budesonide 1mg/2ml inh susp</i>	2	PA BvD QL=120 ML/30 Days
FLUTICASONE PROPIONATE 110MCG INHALER	4	QL=24 GM/30 Days
FLUTICASONE PROPIONATE 220MCG INHALER	4	QL=24 GM/30 Days
FLUTICASONE PROPIONATE 44MCG INHALER	4	QL=21.20 GM/30 Days
QVAR 40MCG REDIHALER	3	QL=21.20 GM/30 Days
QVAR 80MCG REDIHALER	3	QL=21.20 GM/30 Days
SYMPATHOMIMETICS		
ADVAIR 115-21MCG HFA INHALER	3	QL=12 GM/30 Days
ADVAIR 230-21MCG HFA INHALER	3	QL=12 GM/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER	3	QL=12 GM/30 Days
<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	1	PA BvD
<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	1	
<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	1	PA BvD
<i>albuterol 1.25mg/3ml neb soln</i>	1	PA BvD
<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	1	QL=13.40 GM/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	1	QL=17 GM/30 Days
<i>albuterol 2mg tab</i>	2	
<i>albuterol 4mg tab</i>	2	
<i>albuterol 5mg/ml (0.5%) inh soln</i>	1	PA BvD
ANORO ELLIPTA 62.5-25MCG POWDER INHALER	3	QL=60 EA/30 Days
<i>arformoterol tartrate 15mcg/2ml neb soln</i>	2	PA BvD QL=120 ML/30 Days
BREO ELLIPTA 100-25MCG POWDER INHALER	3	QL=60 EA/30 Days
BREO ELLIPTA 200-25MCG POWDER INHALER	3	QL=60 EA/30 Days
BREO ELLIPTA 50-25MCG POWDER INHALER	3	QL=60 EA/30 Days
<i>breynga 160-4.5mcg/act inhaler</i>	3	QL=10.30 GM/30 Days
<i>breynga 80-4.5mcg/act inhaler</i>	3	QL=10.30 GM/30 Days
BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	3	QL=10.70 GM/30 Days
<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	2	QL=10.20 GM/30 Days
<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	2	QL=10.20 GM/30 Days
COMBIVENT 20-100MCG/ACT INHALER	3	QL=8 GM/30 Days
DULERA 100-5MCG INHALER	3	QL=13 GM/30 Days
DULERA 200-5MCG INHALER	3	QL=13 GM/30 Days
DULERA 50-5MCG INHALER	3	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>	2	PA BvD
<i>levalbuterol 0.63mg/3ml inh soln</i>	2	PA BvD

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>levalbuterol 1.25mg/3ml neb soln</i>	2	PA BvD
LEVALBUTEROL 45MCG/ACT INHALER	4	ST QL=30 GM/30 Days
STIOLTO 2.5-2.5MCG/ACT INHALER	3	QL=4 GM/30 Days
STRIVERDI 2.5MCG/ACT INHALER	3	QL=4 GM/30 Days
<i>terbutaline sulfate 2.5mg tab</i>	2	
<i>terbutaline sulfate 5mg tab</i>	2	
TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER	3	QL=60 EA/30 Days
TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	3	QL=60 EA/30 Days
VENTOLIN 108MCG HFA INHALER	3	QL=36 GM/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	4	ST QL=30 GM/30 Days
ANTICOAGULANTS		
ANTICOAGULANTS - MISC.		
<i>dabigatran etexilate 110mg cap</i>	2	QL=60 EA/30 Days
<i>dabigatran etexilate 150mg cap</i>	2	QL=60 EA/30 Days
<i>dabigatran etexilate 75mg cap</i>	2	QL=60 EA/30 Days
ELIQUIS 2.5MG TAB	3	QL=60 EA/30 Days
ELIQUIS 5MG 30-DAY STARTER PACK (74)	3	QL=74 EA/30 Days
ELIQUIS 5MG TAB	3	QL=74 EA/30 Days
XARELTO 10MG TAB	3	QL=30 EA/30 Days
XARELTO 15MG TAB	3	QL=60 EA/30 Days
XARELTO 1MG/ML ORAL SUSP	3	QL=620 ML/30 Days
XARELTO 2.5MG TAB	3	QL=60 EA/30 Days
XARELTO 20MG TAB	3	QL=30 EA/30 Days
XARELTO TAB STARTER PACK (51)	3	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	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	2	
<i>enoxaparin sodium 150mg/1ml syringe</i>	2	
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	2	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	2	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	2	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	2	
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	2	
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	2	
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	2	
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	2	
<i>heparin sodium porcine 10000unit/ml inj</i>	2	
<i>heparin sodium porcine 1000unit/ml inj</i>	2	
<i>heparin sodium porcine 20000unit/ml inj</i>	2	
<i>heparin sodium porcine 5000unit/ml inj</i>	2	
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	1	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml oral susp</i>	2	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	1	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 0.5mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 1mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 2mg odt</i>	2	QL=300 EA/30 Days
<i>clonazepam 2mg tab</i>	1	QL=300 EA/30 Days
<i>diazepam 10mg/2ml rectal gel</i>	2	QL=10 EA/30 Days
DIAZEPAM 2.5MG/0.5ML RECTAL GEL	3	QL=10 EA/30 Days
<i>diazepam 20mg/4ml rectal gel</i>	2	QL=10 EA/30 Days
LIBERVANT 10MG BUCCAL FILM	4	PA NSO QL=10 EA/30 Days
LIBERVANT 12.5MG BUCCAL FILM	4	PA NSO QL=10 EA/30 Days
LIBERVANT 15MG BUCCAL FILM	4	PA NSO QL=10 EA/30 Days
LIBERVANT 5MG BUCCAL FILM	4	PA NSO QL=10 EA/30 Days
LIBERVANT 7.5MG BUCCAL FILM	4	PA NSO QL=10 EA/30 Days
NAYZILAM 5MG/0.1ML NASAL SPRAY	4	QL=10 EA/30 Days
SYMPAZAN 10MG ORAL FILM	4	PA NSO QL=60 EA/30 Days
SYMPAZAN 20MG ORAL FILM	4	PA NSO QL=60 EA/30 Days
SYMPAZAN 5MG ORAL FILM	4	PA NSO QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	4	QL=10 EA/30 Days
VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK	4	QL=10 EA/30 Days
VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	4	QL=10 EA/30 Days
VALTOCO 5MG (5MG/0.1ML) NASAL SPRAY DOSE PACK	4	QL=10 EA/30 Days
ANTICONVULSANTS - MISC.		
APTIOM 200MG TAB	4	PA NSO QL=30 EA/30 Days
APTIOM 400MG TAB	4	PA NSO QL=30 EA/30 Days
APTIOM 600MG TAB	4	PA NSO QL=60 EA/30 Days
APTIOM 800MG TAB	4	PA NSO QL=60 EA/30 Days
BRIVIACT 100MG TAB	4	PA NSO QL=60 EA/30 Days
BRIVIACT 10MG TAB	4	PA NSO QL=60 EA/30 Days
BRIVIACT 10MG/ML ORAL SOLN	4	PA NSO QL=600 ML/30 Days
BRIVIACT 25MG TAB	4	PA NSO QL=60 EA/30 Days
BRIVIACT 50MG TAB	4	PA NSO QL=60 EA/30 Days
BRIVIACT 75MG TAB	4	PA NSO QL=60 EA/30 Days
<i>carbamazepine 100mg chew tab</i>	1	
<i>carbamazepine 100mg er cap</i>	2	
<i>carbamazepine 100mg er tab</i>	2	
<i>carbamazepine 200mg er cap</i>	2	
<i>carbamazepine 200mg er tab</i>	2	
<i>carbamazepine 200mg tab</i>	1	
<i>carbamazepine 20mg/ml oral susp</i>	1	
<i>carbamazepine 300mg er cap</i>	2	
<i>carbamazepine 400mg er tab</i>	2	
DIACOMIT 250MG CAP	5	NDS PA NSO QL=360 EA/30 Days
DIACOMIT 250MG POWDER FOR ORAL SUSP	5	NDS PA NSO QL=360 EA/30 Days
DIACOMIT 500MG CAP	5	NDS PA NSO QL=180 EA/30 Days
DIACOMIT 500MG POWDER FOR ORAL SUSP	5	NDS PA NSO QL=180 EA/30 Days
EPIDIOLEX 100MG/ML ORAL SOLN	5	NDS PA NSO QL=600 ML/30 Days
<i>epitol 200mg tab</i>	1	
EPRONTIA 25MG/ML ORAL SOLN	4	PA NSO QL=480 ML/30 Days
FINTEPLA 2.2MG/ML ORAL SOLN	5	NDS PA NSO QL=360 ML/30 Days
FYCOMPA 0.5MG/ML ORAL SUSP	4	PA NSO QL=720 ML/30 Days
FYCOMPA 10MG TAB	4	PA NSO QL=30 EA/30 Days
FYCOMPA 12MG TAB	4	PA NSO QL=30 EA/30 Days
FYCOMPA 2MG TAB	4	PA NSO QL=30 EA/30 Days
FYCOMPA 4MG TAB	4	PA NSO QL=30 EA/30 Days
FYCOMPA 6MG TAB	4	PA NSO QL=30 EA/30 Days
FYCOMPA 8MG TAB	4	PA NSO QL=30 EA/30 Days
<i>gabapentin 100mg cap</i>	1	QL=180 EA/30 Days
<i>gabapentin 300mg cap</i>	1	QL=360 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>gabapentin 400mg cap</i>	1	QL=270 EA/30 Days
<i>gabapentin 50mg/ml oral soln</i>	2	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=90 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>	2	
<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>	2	
<i>phenytoin sodium 100mg er cap</i>	1	
<i>pregabalin 100mg cap</i>	1	QL=120 EA/30 Days
<i>pregabalin 150mg cap</i>	1	QL=120 EA/30 Days
<i>pregabalin 200mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 20mg/ml oral soln</i>	2	QL=900 ML/30 Days
<i>pregabalin 225mg cap</i>	1	QL=60 EA/30 Days
<i>pregabalin 25mg cap</i>	1	QL=120 EA/30 Days
<i>pregabalin 300mg cap</i>	1	QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>pregabalin 50mg cap</i>	1	QL=120 EA/30 Days
<i>pregabalin 75mg cap</i>	1	QL=120 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>	2	PA NSO QL=480 EA/30 Days
<i>rufinamide 400mg tab</i>	2	PA NSO QL=240 EA/30 Days
<i>rufinamide 40mg/ml oral susp</i>	2	PA NSO QL=2760 ML/30 Days
SPRITAM 1000MG TAB FOR ORAL SUSP	4	PA NSO QL=90 EA/30 Days
SPRITAM 250MG TAB FOR ORAL SUSP	4	PA NSO QL=360 EA/30 Days
SPRITAM 500MG TAB FOR ORAL SUSP	4	PA NSO QL=180 EA/30 Days
SPRITAM 750MG TAB FOR ORAL SUSP	4	PA NSO QL=120 EA/30 Days
<i>subvenite 100mg tab</i>	1	
<i>subvenite 150mg tab</i>	1	
<i>subvenite 200mg tab</i>	1	
<i>subvenite 25mg tab</i>	1	
<i>topiramate 100mg tab</i>	1	
<i>topiramate 15mg cap</i>	1	
<i>topiramate 200mg tab</i>	1	
<i>topiramate 25mg cap</i>	1	
<i>topiramate 25mg tab</i>	1	
<i>topiramate 50mg tab</i>	1	
ZONISADE 100MG/5ML ORAL SUSP	4	PA NSO QL=900 ML/30 Days
<i>zonisamide 100mg cap</i>	1	
<i>zonisamide 25mg cap</i>	1	
<i>zonisamide 50mg cap</i>	1	
ZTALMY 50MG/ML ORAL SUSP	5	NDS PA NSO QL=1100 ML/30 Days
CARBAMATES		
<i>felbamate 120mg/ml oral susp</i>	2	
<i>felbamate 400mg tab</i>	2	
<i>felbamate 600mg tab</i>	2	
XCOPRI 100MG TAB	4	PA NSO QL=30 EA/30 Days
XCOPRI 150MG TAB	4	PA NSO QL=60 EA/30 Days
XCOPRI 200MG TAB	4	PA NSO QL=60 EA/30 Days
XCOPRI 25MG TAB	4	PA NSO QL=30 EA/30 Days
XCOPRI 50MG TAB	4	PA NSO QL=30 EA/30 Days
XCOPRI TAB 100/150MG MAINTENANCE PACK (56)	4	PA NSO QL=56 EA/28 Days
XCOPRI TAB 12.5/25MG TITRATION PACK (28)	4	PA NSO QL=28 EA/28 Days
XCOPRI TAB 150/200MG PACK (56)	4	PA NSO QL=56 EA/28 Days
XCOPRI TAB 150/200MG TITRATION PACK (28)	4	PA NSO QL=28 EA/28 Days
XCOPRI TAB 50/100MG TITRATION PACK (28)	4	PA NSO QL=28 EA/28 Days
GABA MODULATORS		
<i>tiagabine 12mg tab</i>	2	
<i>tiagabine 16mg tab</i>	2	
<i>tiagabine 2mg tab</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tiagabine 4mg tab</i>	2	
<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	4	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>	2	
<i>ethosuximide 50mg/ml oral soln</i>	1	
<i>methsuximide 300mg cap</i>	2	
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	4	PA NSO QL=60 EA/30 Days
<i>bupropion 100mg sr (12hr) tab</i>	1	
<i>bupropion 100mg tab</i>	1	
<i>bupropion 150mg sr (12 hr) tab</i>	1	
<i>bupropion 200mg sr (12hr) tab</i>	1	
<i>bupropion 75mg tab</i>	1	
<i>bupropion xl 150mg (24 hr) tab</i>	1	
<i>bupropion xl 300mg (24hr) tab</i>	1	
<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	5	NDS PA NSO QL=28 EA/14 Days
ZURZUVAE 25MG CAP	5	NDS PA NSO QL=28 EA/14 Days
ZURZUVAE 30MG CAP	5	NDS PA NSO QL=14 EA/14 Days
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM 12MG/24HR PATCH	4	PA NSO QL=30 EA/30 Days
EMSAM 6MG/24HR PATCH	4	PA NSO QL=30 EA/30 Days
EMSAM 9MG/24HR PATCH	4	PA NSO QL=30 EA/30 Days
MARPLAN 10MG TAB	3	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PHENELZINE 15MG TAB	1	
<i>tranylcypromine 10mg tab</i>	2	
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>	2	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	
<i>paroxetine 10mg/5ml oral susp</i>	2	QL=900 ML/30 Days
<i>paroxetine 12.5mg er tab</i>	2	
<i>paroxetine 20mg tab</i>	1	
<i>paroxetine 25mg er tab</i>	2	
<i>paroxetine 30mg tab</i>	1	
<i>paroxetine 37.5mg er tab</i>	2	
<i>paroxetine 40mg tab</i>	1	
<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	2	
NEFAZODONE 150MG TAB	2	
NEFAZODONE 200MG TAB	2	
NEFAZODONE 250MG TAB	2	
NEFAZODONE 50MG TAB	2	
<i>trazodone 100mg tab</i>	1	
<i>trazodone 150mg tab</i>	1	
<i>trazodone 50mg tab</i>	1	
TRINTELLIX 10MG TAB	3	ST_NSO QL=30 EA/30 Days
TRINTELLIX 20MG TAB	3	ST_NSO QL=30 EA/30 Days
TRINTELLIX 5MG TAB	3	ST_NSO QL=30 EA/30 Days
<i>vilazodone 10mg tab</i>	2	PA NSO QL=30 EA/30 Days
<i>vilazodone 20mg tab</i>	2	PA NSO QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>vilazodone 40mg tab</i>	2	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	4	PA NSO QL=60 EA/30 Days
DRIZALMA 30MG DR SPRINKLE CAP	4	PA NSO QL=60 EA/30 Days
DRIZALMA 40MG DR SPRINKLE CAP	4	PA NSO QL=60 EA/30 Days
DRIZALMA 60MG DR SPRINKLE CAP	4	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	4	PA NSO QL=30 EA/30 Days
FETZIMA 20MG ER CAP	4	PA NSO QL=30 EA/30 Days
FETZIMA 40MG ER CAP	4	PA NSO QL=30 EA/30 Days
FETZIMA 80MG ER CAP	4	PA NSO QL=30 EA/30 Days
FETZIMA ER CAP TITRATION PACK (28)	4	PA NSO QL=30 EA/30 Days
<i>venlafaxine 100mg tab</i>	1	
<i>venlafaxine 150mg er cap</i>	1	
<i>venlafaxine 25mg tab</i>	1	
<i>venlafaxine 37.5mg er cap</i>	1	
<i>venlafaxine 37.5mg tab</i>	1	
<i>venlafaxine 50mg tab</i>	1	
<i>venlafaxine 75mg er cap</i>	1	
<i>venlafaxine 75mg tab</i>	1	
TRICYCLIC AGENTS		
<i>amitriptyline 100mg tab</i>	1	
<i>amitriptyline 10mg tab</i>	1	
<i>amitriptyline 150mg tab</i>	1	
<i>amitriptyline 25mg tab</i>	1	
<i>amitriptyline 50mg tab</i>	1	
<i>amitriptyline 75mg tab</i>	1	
<i>amoxapine 100mg tab</i>	1	
<i>amoxapine 150mg tab</i>	1	
<i>amoxapine 25mg tab</i>	1	
<i>amoxapine 50mg tab</i>	1	
<i>clomipramine 25mg cap</i>	2	
<i>clomipramine 50mg cap</i>	2	
<i>clomipramine 75mg cap</i>	2	
<i>desipramine 100mg tab</i>	2	
<i>desipramine 10mg tab</i>	2	
<i>desipramine 150mg tab</i>	2	
<i>desipramine 25mg tab</i>	2	
<i>desipramine 50mg tab</i>	2	
<i>desipramine 75mg tab</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>doxepin 100mg cap</i>	1	
<i>doxepin 10mg cap</i>	1	
<i>doxepin 10mg/ml oral soln</i>	1	
<i>doxepin 150mg cap</i>	1	
<i>doxepin 25mg cap</i>	1	
<i>doxepin 50mg cap</i>	1	
<i>doxepin 75mg cap</i>	1	
<i>imipramine 10mg tab</i>	1	
<i>imipramine 25mg tab</i>	1	
<i>imipramine 50mg tab</i>	1	
<i>nortriptyline 10mg cap</i>	1	
<i>nortriptyline 25mg cap</i>	1	
<i>nortriptyline 2mg/ml oral soln</i>	2	
<i>nortriptyline 50mg cap</i>	1	
<i>nortriptyline 75mg cap</i>	1	
<i>protriptyline 10mg tab</i>	2	
<i>protriptyline 5mg tab</i>	2	
<i>trimipramine 100mg cap</i>	2	
<i>trimipramine 25mg cap</i>	2	
<i>trimipramine 50mg cap</i>	2	
ANTIDIABETICS		
ANTIDIABETIC COMBINATIONS		
<i>glipizide/metformin 2.5-250mg tab</i>	1	
<i>glipizide/metformin 2.5-500mg tab</i>	1	
<i>glipizide/metformin 5-500mg tab</i>	1	
<i>glyburide/metformin 1.25-250mg tab</i>	1	
<i>glyburide/metformin 2.5-500mg tab</i>	1	
<i>glyburide/metformin 5-500mg tab</i>	1	
GLYXAMBI 10-5MG TAB	3	QL=30 EA/30 Days
GLYXAMBI 25-5MG TAB	3	QL=30 EA/30 Days
JANUMET 50-1000MG TAB	3	QL=60 EA/30 Days
JANUMET 50-500MG TAB	3	QL=60 EA/30 Days
JANUMET XR 100-1000MG TAB	3	QL=30 EA/30 Days
JANUMET XR 50-1000MG TAB	3	QL=60 EA/30 Days
JANUMET XR 50-500MG TAB	3	QL=60 EA/30 Days
JENTADUETO 2.5-1000MG TAB	3	QL=60 EA/30 Days
JENTADUETO 2.5-500MG TAB	3	QL=60 EA/30 Days
JENTADUETO XR 2.5-1000MG TAB	3	QL=60 EA/30 Days
JENTADUETO XR 5-1000MG TAB	3	QL=30 EA/30 Days
SYNJARDY 12.5-1000MG TAB	3	QL=60 EA/30 Days
SYNJARDY 12.5-500MG TAB	3	QL=60 EA/30 Days
SYNJARDY 5-1000MG TAB	3	QL=60 EA/30 Days
SYNJARDY 5-500MG TAB	3	QL=60 EA/30 Days
SYNJARDY XR 10-1000MG TAB	3	QL=30 EA/30 Days
SYNJARDY XR 12.5-1000MG TAB	3	QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SYNJARDY XR 25-1000MG TAB	3	QL=30 EA/30 Days
SYNJARDY XR 5-1000MG TAB	3	QL=60 EA/30 Days
TRIJARDY XR 10-5-1000MG TAB	3	QL=30 EA/30 Days
TRIJARDY XR 12.5-2.5-1000MG TAB	3	QL=60 EA/30 Days
TRIJARDY XR 25-5-1000MG TAB	3	QL=30 EA/30 Days
TRIJARDY XR 5-2.5-1000MG TAB	3	QL=60 EA/30 Days
XIGDUO XR 10-1000MG TAB	3	QL=30 EA/30 Days
XIGDUO XR 10-500MG TAB	3	QL=30 EA/30 Days
XIGDUO XR 2.5-1000MG TAB	3	QL=60 EA/30 Days
XIGDUO XR 5-1000MG TAB	3	QL=60 EA/30 Days
XIGDUO XR 5-500MG TAB	3	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	3	QL=2 EA/7 Days
<i>diazoxide 50mg/ml oral susp</i>	2	
GVOKE 0.5MG/0.1ML AUTO-INJECTOR	3	QL=.20 ML/7 Days
GVOKE 1MG/0.2ML AUTO-INJECTOR	3	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML INJ	3	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML SYRINGE	3	QL=.40 ML/7 Days
<i>metformin 1000mg tab</i>	1	
<i>metformin 500mg er tab</i>	1	
<i>metformin 500mg tab</i>	1	
<i>metformin 750mg er tab</i>	1	
<i>metformin 850mg tab</i>	1	
<i>mifepristone 300mg tab</i>	1	PA QL=120 EA/30 Days
<i>nateglinide 120mg tab</i>	1	
<i>nateglinide 60mg tab</i>	1	
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<i>pioglitazone 45mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	1	
<i>repaglinide 1mg tab</i>	1	
<i>repaglinide 2mg tab</i>	1	
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA 100MG TAB	3	QL=30 EA/30 Days
JANUVIA 25MG TAB	3	QL=30 EA/30 Days
JANUVIA 50MG TAB	3	QL=30 EA/30 Days
TRADJENTA 5MG TAB	3	QL=30 EA/30 Days
INCRETIN MIMETIC AGENTS		
<i>liraglutide 18mg/3ml pen inj</i>	2	PA QL=9 ML/30 Days
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
OZEMPIC 2.68MG/ML PEN INJ	3	PA QL=3 ML/28 Days
OZEMPIC 2MG/3ML PEN INJ	3	PA QL=3 ML/28 Days
OZEMPIC 4MG/3ML PEN INJ	3	PA QL=3 ML/28 Days
RYBELSUS 14MG TAB	3	PA QL=30 EA/30 Days
RYBELSUS 3MG TAB	3	PA QL=30 EA/30 Days
RYBELSUS 7MG TAB	3	PA QL=30 EA/30 Days
TRULICITY 0.75MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
TRULICITY 1.5MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
TRULICITY 3MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
TRULICITY 4.5MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
INSULIN		
HUMALOG 100UNIT/ML CARTRIDGE	3	INS
HUMALOG 100UNIT/ML KWIKPEN	3	INS
HUMALOG 200UNIT/ML KWIKPEN	3	INS
HUMALOG JUNIOR 100UNIT/ML PEN INJ	3	INS
HUMALOG MIX (50/50) 100UNIT/ML PEN INJ	3	INS
HUMALOG MIX (75/25) 100UNIT/ML INJ	3	INS
HUMALOG MIX (75/25) 100UNIT/ML KWIKPEN	3	INS
HUMULIN (70/30) 100UNIT/ML INJ	3	INS
HUMULIN (70/30) 100UNIT/ML PEN INJ	3	INS
HUMULIN N 100UNIT/ML INJ	3	INS
HUMULIN N 100UNIT/ML PEN INJ	3	INS
HUMULIN R 100UNIT/ML INJ	3	INS
HUMULIN R 500UNIT/ML INJ	3	INS PA BvD
HUMULIN R 500UNIT/ML PEN INJ	3	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	3	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	3	INS
INSULIN LISPRO 100UNIT/ML INJ	3	INS PA BvD
LANTUS 100UNIT/ML INJ	3	INS
LANTUS 100UNIT/ML PEN INJ	3	INS
TOUJEO 300UNIT/ML PEN INJ (1.5ML)	3	INS
TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	3	INS
TRESIBA 100UNIT/ML INJ	3	INS
TRESIBA 100UNIT/ML PEN INJ	3	INS
TRESIBA 200UNIT/ML PEN INJ	3	INS
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA 10MG TAB	3	QL=30 EA/30 Days
FARXIGA 5MG TAB	3	QL=30 EA/30 Days
JARDIANCE 10MG TAB	3	QL=30 EA/30 Days
JARDIANCE 25MG TAB	3	QL=30 EA/30 Days
SULFONYLUREAS		
<i>glimepiride 1mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<i>glyburide 1.25mg tab</i>	1	
GLYBURIDE 1.5MG TAB	1	
<i>glyburide 2.5mg tab</i>	1	
GLYBURIDE 3MG TAB	1	
<i>glyburide 5mg tab</i>	1	
GLYBURIDE 6MG TAB	1	
ANTIDIARRHEALS		
ANTIDIARRHEAL AGENTS - MISC.		
<i>alosetron 0.5mg tab</i>	2	QL=60 EA/30 Days
<i>alosetron 1mg tab</i>	2	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	5	NDS PA QL=84 EA/28 Days
ANTIDOTES AND SPECIFIC ANTAGONISTS		
OPIOID ANTAGONISTS		
KLOXXADO 8MG/0.1ML NASAL SPRAY	3	
NALOXONE 0.4MG/ML CARTRIDGE	2	
<i>naloxone 0.4mg/ml inj</i>	1	
NALOXONE 0.4MG/ML SYRINGE	1	
<i>naloxone 1mg/ml syringe</i>	1	
<i>naltrexone 50mg tab</i>	1	
OPVEE 2.7MG/0.1ML NASAL SPRAY	3	
VIVITROL 380MG INJ	5	NDS
ZIMHI 5MG/0.5ML SYRINGE	3	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron 1mg tab</i>	1	PA BvD QL=60 EA/30 Days
<i>ondansetron 0.8mg/ml oral soln</i>	1	PA BvD
<i>ondansetron 4mg odt</i>	1	PA BvD
<i>ondansetron 4mg tab</i>	1	PA BvD
<i>ondansetron 8mg odt</i>	1	PA BvD
<i>ondansetron 8mg tab</i>	1	PA BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab</i>	1	
<i>meclizine 25mg tab</i>	1	
<i>scopolamine 1mg/72hr patch</i>	2	QL=10 EA/30 Days
ANTIEMETICS - MISCELLANEOUS		
<i>aprepitant 125mg cap</i>	2	PA BvD QL=3 EA/2 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	2	PA BvD QL=6 EA/4 Days
<i>aprepitant 40mg cap</i>	2	PA BvD QL=3 EA/2 Days
<i>aprepitant 80mg cap</i>	2	PA BvD QL=6 EA/4 Days
<i>dronabinol 10mg cap</i>	2	PA QL=60 EA/30 Days
<i>dronabinol 2.5mg cap</i>	2	PA QL=60 EA/30 Days
<i>dronabinol 5mg cap</i>	2	PA QL=60 EA/30 Days
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
<i>caspofungin acetate 50mg inj</i>	2	
<i>caspofungin acetate 70mg inj</i>	2	
<i>micafungin sodium 100mg inj</i>	2	
<i>micafungin sodium 50mg inj</i>	2	
ANTIFUNGALS		
ABELCET 5MG/ML INJ	4	PA BvD
AMPHOTERICIN B 50MG INJ	2	PA BvD
<i>flucytosine 250mg cap</i>	2	
<i>flucytosine 500mg cap</i>	2	
<i>griseofulvin 125mg tab</i>	2	
<i>griseofulvin 250mg tab</i>	2	
<i>griseofulvin 25mg/ml oral susp</i>	2	
<i>griseofulvin 500mg tab</i>	2	
<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>	2	
<i>fluconazole 400mg/200ml inj</i>	2	
<i>fluconazole 40mg/ml oral susp</i>	1	
<i>fluconazole 50mg tab</i>	1	
<i>itraconazole 100mg cap</i>	2	QL=120 EA/30 Days
<i>ketoconazole 200mg tab</i>	1	
<i>posaconazole 100mg dr tab</i>	2	PA QL=96 EA/30 Days
<i>posaconazole 40mg/ml oral susp</i>	2	PA QL=630 ML/30 Days
<i>voriconazole 200mg inj</i>	2	PA
<i>voriconazole 200mg tab</i>	2	PA QL=120 EA/30 Days
<i>voriconazole 40mg/ml oral susp</i>	2	PA QL=400 ML/30 Days
<i>voriconazole 50mg tab</i>	2	PA QL=480 EA/30 Days
ANTIHYPERLIPIDEMICS		
ANTIHYPERLIPIDEMICS - MISC.		
<i>ezetimibe 10mg tab</i>	1	QL=30 EA/30 Days
<i>icosapent ethyl 1000mg cap</i>	2	QL=120 EA/30 Days
<i>icosapent ethyl 500mg cap</i>	2	QL=120 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
NEXLETOL 180MG TAB	3	PA QL=30 EA/30 Days
NEXLIZET 180-10MG TAB	3	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>	2	
REPATHA 140MG/ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
REPATHA 140MG/ML SYRINGE	3	PA QL=2 ML/28 Days
REPATHA 420MG/3.5ML CARTRIDGE	3	PA QL=3.50 ML/28 Days
BILE ACID SEQUESTRANTS		
<i>cholestyramine resin (sugar-free) 4gm powder for oral susp</i>	1	
<i>cholestyramine resin 4gm powder for oral susp</i>	1	
<i>colesevelam 625mg tab</i>	2	
<i>colestipol 1gm tab</i>	1	
<i>colestipol 5000mg granules for oral susp</i>	2	
<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	
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin 10mg tab</i>	1	
<i>atorvastatin 20mg tab</i>	1	
<i>atorvastatin 40mg tab</i>	1	
<i>atorvastatin 80mg tab</i>	1	
<i>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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	
<i>captopril 12.5mg tab</i>	2	
<i>captopril 25mg tab</i>	2	
<i>captopril 50mg tab</i>	2	
<i>enalapril maleate 10mg tab</i>	1	
<i>enalapril maleate 2.5mg tab</i>	1	
<i>enalapril maleate 20mg tab</i>	1	
<i>enalapril maleate 5mg tab</i>	1	
<i>fosinopril sodium 10mg tab</i>	1	
<i>fosinopril sodium 20mg tab</i>	1	
<i>fosinopril sodium 40mg tab</i>	1	
<i>lisinopril 10mg tab</i>	1	
<i>lisinopril 2.5mg tab</i>	1	
<i>lisinopril 20mg tab</i>	1	
<i>lisinopril 30mg tab</i>	1	
<i>lisinopril 40mg tab</i>	1	
<i>lisinopril 5mg tab</i>	1	
<i>moexipril 15mg tab</i>	1	
<i>moexipril 7.5mg tab</i>	1	
PERINDOPRIL ERBUMINE 2MG TAB	1	
<i>perindopril erbumine 4mg tab</i>	1	
PERINDOPRIL ERBUMINE 8MG TAB	1	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	QL=4 EA/28 Days
<i>clonidine 0.2mg tab</i>	1	
<i>clonidine 0.2mg/24hr weekly patch</i>	2	QL=4 EA/28 Days
<i>clonidine 0.3mg tab</i>	1	
<i>clonidine 0.3mg/24hr weekly patch</i>	2	QL=4 EA/28 Days
<i>doxazosin 1mg tab</i>	1	
<i>doxazosin 2mg tab</i>	1	
<i>doxazosin 4mg tab</i>	1	
<i>doxazosin 8mg tab</i>	1	
<i>guanfacine 1mg tab</i>	1	
<i>guanfacine 2mg tab</i>	1	
<i>prazosin 1mg cap</i>	1	
<i>prazosin 2mg cap</i>	1	
<i>prazosin 5mg cap</i>	1	
<i>terazosin 10mg cap</i>	1	
<i>terazosin 1mg cap</i>	1	
<i>terazosin 2mg cap</i>	1	
<i>terazosin 5mg cap</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>amlodipine/benazepril 5-40mg cap</i>	1	
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	2	
<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	2	
<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	2	
<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	2	
<i>amlodipine/valsartan 10-160mg tab</i>	2	
<i>amlodipine/valsartan 10-320mg tab</i>	2	
<i>amlodipine/valsartan 5-160mg tab</i>	2	
<i>amlodipine/valsartan 5-320mg tab</i>	2	
<i>atenolol/chlorthalidone 100-25mg tab</i>	1	
<i>atenolol/chlorthalidone 50-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	1	
<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>	2	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	2	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	2	
<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/valsartan 12.5-160mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-320mg 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. Last Updated Date: 03/01/2025

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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DIFICID 40MG/ML ORAL SUSP	3	PA QL=136 ML/10 Days
<i>ery-tab 250mg dr tab</i>	2	
<i>ery-tab 333mg dr tab</i>	2	
<i>ery-tab 500mg dr tab</i>	2	
<i>erythromycin 250mg dr tab</i>	2	
<i>erythromycin 250mg tab</i>	2	
<i>erythromycin 333mg dr tab</i>	2	
<i>erythromycin 500mg dr tab</i>	2	
<i>erythromycin 500mg tab</i>	2	
<i>erythromycin ethylsuccinate 40mg/ml oral susp</i>	2	
<i>erythromycin ethylsuccinate 80mg/ml oral susp</i>	2	
<i>linezolid 100mg/5ml oral susp</i>	2	QL=1800 ML/30 Days
<i>linezolid 600mg tab</i>	2	QL=60 EA/30 Days
<i>linezolid 600mg/300ml inj</i>	2	
<i>metronidazole 250mg tab</i>	1	
<i>metronidazole 500mg tab</i>	1	
<i>metronidazole 5mg/ml inj</i>	2	
<i>pentamidine isethionate 300mg inj</i>	2	
<i>pentamidine isethionate 300mg/6ml inh soln</i>	2	PA BvD QL=1 EA/28 Days
TEFLARO 400MG INJ	5	NDS
TEFLARO 600MG INJ	5	NDS
<i>tigecycline 50mg inj</i>	5	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>	2	
<i>vancomycin 125mg cap</i>	1	QL=120 EA/30 Days
<i>vancomycin 1gm inj</i>	2	
<i>vancomycin 250mg cap</i>	1	QL=120 EA/30 Days
<i>vancomycin 500mg inj</i>	2	
<i>vancomycin 750mg inj</i>	2	
XIFAXAN 550MG TAB	3	PA QL=60 EA/30 Days
ANTIPROTOZOAL AGENTS		
<i>atovaquone 750mg/5ml oral susp</i>	2	
NITAZOXANIDE 500MG TAB	2	PA QL=6 EA/3 Days
CARBAPENEMS		
CILASTATIN/IMIPENEM 250-250MG INJ	2	
<i>cilastatin/imipenem 500-500mg inj</i>	2	
<i>ertapenem 1gm inj</i>	2	
<i>meropenem 1gm inj</i>	2	
<i>meropenem 500mg inj</i>	2	
URINARY ANTI-INFECTIVES		
<i>fosfomycin 3gm powder for oral soln</i>	2	
<i>methenamine hippurate 1gm tab</i>	2	
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	3	
ANTIMALARIALS		
<i>chloroquine phosphate 250mg tab</i>	2	
<i>chloroquine phosphate 500mg tab</i>	2	
<i>hydroxychloroquine sulfate 100mg tab</i>	1	
<i>hydroxychloroquine sulfate 200mg tab</i>	1	
<i>hydroxychloroquine sulfate 300mg tab</i>	1	
<i>hydroxychloroquine sulfate 400mg tab</i>	1	
<i>mefloquine 250mg tab</i>	2	
PRIMAQUINE PHOSPHATE 26.3MG TAB	2	
<i>pyrimethamine 25mg tab</i>	2	PA QL=90 EA/30 Days
<i>quinine sulfate 324mg cap</i>	2	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE 10MG TAB	5	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>	2	
<i>ethambutol 400mg tab</i>	2	
<i>isoniazid 100mg tab</i>	1	
<i>isoniazid 10mg/ml oral soln</i>	2	
<i>isoniazid 300mg tab</i>	1	
PRIFTIN 150MG TAB	3	
<i>pyrazinamide 500mg tab</i>	1	
<i>rifabutin 150mg cap</i>	2	
<i>rifampin 150mg cap</i>	2	
<i>rifampin 300mg cap</i>	2	
<i>rifampin 600mg inj</i>	2	
SIRTURO 100MG TAB	5	NDS PA
SIRTURO 20MG TAB	5	NDS PA
TRECTOR 250MG TAB	4	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE 25MG TAB	3	PA BvD
CYCLOPHOSPHAMIDE 50MG TAB	3	PA BvD
GLEOSTINE 100MG CAP	3	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GLEOSTINE 10MG CAP	3	
GLEOSTINE 40MG CAP	3	
ANTIMETABOLITES		
JYLAMVO 2MG/ML ORAL SOLN	4	PA NSO
<i>mercaptopurine 50mg tab</i>	2	
<i>methotrexate 2.5mg tab</i>	1	
METHOTREXATE 25MG/ML INJ	1	
<i>methotrexate 50mg/2ml inj</i>	1	
ONUREG 200MG TAB	5	NDS PA NSO QL=14 EA/28 Days
ONUREG 300MG TAB	5	NDS PA NSO QL=14 EA/28 Days
PURIXAN 2000MG/100ML ORAL SUSP	4	PA NSO QL=300 ML/30 Days
XATMEP 2.5MG/ML ORAL SOLN	4	PA NSO
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1MG CAP	5	NDS PA NSO QL=84 EA/28 Days
FRUZAQLA 5MG CAP	5	NDS PA NSO QL=21 EA/28 Days
INLYTA 1MG TAB	5	NDS PA NSO QL=180 EA/30 Days
INLYTA 5MG TAB	5	NDS PA NSO QL=120 EA/30 Days
LENVIMA 10MG DAILY DOSE PACK (30)	5	NDS PA NSO QL=30 EA/30 Days
LENVIMA 12MG DAILY DOSE PACK (90)	5	NDS PA NSO QL=90 EA/30 Days
LENVIMA 14MG DAILY DOSE PACK (60)	5	NDS PA NSO QL=60 EA/30 Days
LENVIMA 18MG DAILY DOSE PACK (90)	5	NDS PA NSO QL=90 EA/30 Days
LENVIMA 20MG DAILY DOSE PACK (60)	5	NDS PA NSO QL=60 EA/30 Days
LENVIMA 24MG DAILY DOSE PACK (90)	5	NDS PA NSO QL=90 EA/30 Days
LENVIMA 4MG DAILY DOSE PACK (30)	5	NDS PA NSO QL=30 EA/30 Days
LENVIMA 8MG DAILY DOSE PACK (60)	5	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	5	NDS PA NSO QL=30 EA/30 Days
GILOTRIF 30MG TAB	5	NDS PA NSO QL=30 EA/30 Days
GILOTRIF 40MG TAB	5	NDS PA NSO QL=30 EA/30 Days
LAZCLUZE 240MG TAB	5	NDS PA NSO QL=30 EA/30 Days
LAZCLUZE 80MG TAB	5	NDS PA NSO QL=60 EA/30 Days
TAGRISSE 40MG TAB	5	NDS PA NSO QL=30 EA/30 Days
TAGRISSE 80MG TAB	5	NDS PA NSO QL=30 EA/30 Days
VIZIMPRO 15MG TAB	5	NDS PA NSO QL=30 EA/30 Days
VIZIMPRO 30MG TAB	5	NDS PA NSO QL=30 EA/30 Days
VIZIMPRO 45MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	5	NDS PA NSO QL=30 EA/30 Days
DAURISMO 25MG TAB	5	NDS PA NSO QL=60 EA/30 Days
ERIVEDGE 150MG CAP	5	NDS PA NSO QL=28 EA/28 Days
ODOMZO 200MG CAP	5	NDS PA NSO QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	1	QL=120 EA/30 Days
AKEEGA 500-100MG TAB	5	NDS PA NSO QL=60 EA/30 Days
AKEEGA 500-50MG TAB	5	NDS PA NSO QL=60 EA/30 Days
<i>anastrozole 1mg tab</i>	1	
<i>bicalutamide 50mg tab</i>	1	
ELIGARD 22.5MG SYRINGE	4	QL=1 EA/84 Days
ELIGARD 30MG SYRINGE	4	QL=1 EA/112 Days
ELIGARD 45MG SYRINGE	4	QL=1 EA/168 Days
ELIGARD 7.5MG SYRINGE	4	QL=1 EA/28 Days
ERLEADA 240MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ERLEADA 60MG TAB	5	NDS PA NSO QL=120 EA/30 Days
<i>exemestane 25mg tab</i>	2	QL=60 EA/30 Days
FIRMAGON 120MG INJ	3	PA NSO QL=4 EA/365 Days
FIRMAGON 80MG INJ	3	PA NSO QL=1 EA/28 Days
<i>letrozole 2.5mg tab</i>	1	
LUPRON 11.25MG SYRINGE (3 MONTH)	5	QL=1 EA/84 Days
LUPRON 3.75MG SYRINGE (1 MONTH)	5	NDS QL=1 EA/28 Days
LYSODREN 500MG TAB	3	
<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	5	NDS PA NSO QL=120 EA/30 Days
ORGOVYX 120MG TAB	5	NDS PA NSO QL=30 EA/28 Days
ORSERDU 345MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ORSERDU 86MG TAB	5	NDS PA NSO QL=90 EA/30 Days
SOLTAMOX 10MG/5ML ORAL SOLN	4	PA NSO QL=600 ML/30 Days
<i>tamoxifen 10mg tab</i>	1	
<i>tamoxifen 20mg tab</i>	1	
<i>toremifene 60mg tab</i>	2	QL=30 EA/30 Days
TRELSTAR 11.25MG INJ	4	QL=1 EA/84 Days
TRELSTAR 22.5MG INJ	4	QL=1 EA/168 Days
TRELSTAR 3.75MG INJ	4	QL=1 EA/28 Days
XTANDI 40MG CAP	5	NDS PA NSO QL=120 EA/30 Days
XTANDI 40MG TAB	5	NDS PA NSO QL=120 EA/30 Days
XTANDI 80MG TAB	5	NDS PA NSO QL=60 EA/30 Days
ANTINEOPLASTIC COMBINATIONS		
INQOVI 35-100MG TAB PACK (5)	5	NDS PA NSO QL=5 EA/28 Days
KISQALI/FEMARA 400 CO-PACK (70)	5	NDS PA NSO QL=70 EA/28 Days
KISQALI/FEMARA 600 CO-PACK (91)	5	NDS PA NSO QL=91 EA/28 Days
LONSURF 6.14-15MG TAB	5	NDS PA NSO QL=100 EA/28 Days
LONSURF 8.19-20MG TAB	5	NDS PA NSO QL=80 EA/28 Days
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA 150MG CAP	5	NDS PA NSO QL=240 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ALUNBRIG 180MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ALUNBRIG 30MG TAB	5	NDS PA NSO QL=120 EA/30 Days
ALUNBRIG 90MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ALUNBRIG TAB INITIATION PACK (30)	5	NDS PA NSO QL=30 EA/30 Days
AUGTYRO 160MG CAP	5	NDS PA NSO QL=60 EA/30 Days
AUGTYRO 40MG CAP	5	NDS PA NSO QL=240 EA/30 Days
BALVERSA 3MG TAB	5	NDS PA NSO QL=60 EA/30 Days
BALVERSA 4MG TAB	5	NDS PA NSO QL=60 EA/30 Days
BALVERSA 5MG TAB	5	NDS PA NSO QL=30 EA/30 Days
BOSULIF 100MG CAP	5	NDS PA NSO QL=180 EA/30 Days
BOSULIF 100MG TAB	5	NDS PA NSO QL=90 EA/30 Days
BOSULIF 400MG TAB	5	NDS PA NSO QL=30 EA/30 Days
BOSULIF 500MG TAB	5	NDS PA NSO QL=30 EA/30 Days
BOSULIF 50MG CAP	5	NDS PA NSO QL=30 EA/30 Days
BRAFTOVI 75MG CAP	5	NDS PA NSO QL=180 EA/30 Days
BRUKINSA 80MG CAP	5	NDS PA NSO QL=120 EA/30 Days
CABOMETYX 20MG TAB	5	NDS PA NSO QL=30 EA/30 Days
CABOMETYX 40MG TAB	5	NDS PA NSO QL=30 EA/30 Days
CABOMETYX 60MG TAB	5	NDS PA NSO QL=30 EA/30 Days
CALQUENCE 100MG CAP	5	NDS PA NSO QL=60 EA/30 Days
CALQUENCE 100MG TAB	5	NDS PA NSO QL=60 EA/30 Days
CAPRELSA 100MG TAB	5	NDS PA NSO QL=60 EA/30 Days
CAPRELSA 300MG TAB	5	NDS PA NSO QL=30 EA/30 Days
COMETRIQ CAP 100MG DAILY DOSE PACK (56)	5	NDS PA NSO QL=56 EA/28 Days
COMETRIQ CAP 140MG DAILY DOSE PACK (112)	5	NDS PA NSO QL=112 EA/28 Days
COMETRIQ CAP 60MG DAILY DOSE PACK (84)	5	NDS PA NSO QL=84 EA/28 Days
COPIKTRA 15MG CAP	5	NDS PA NSO QL=60 EA/30 Days
COPIKTRA 25MG CAP	5	NDS PA NSO QL=60 EA/30 Days
COTELLIC 20MG TAB	5	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	5	NDS PA NSO QL=21 EA/28 Days
FOTIVDA 1.34MG CAP	5	NDS PA NSO QL=21 EA/28 Days
GAVRETO 100MG CAP	5	NDS PA NSO QL=120 EA/30 Days

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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LYTGOBI TAB 20MG DAILEY DOSE PACK (35)	5	NDS PA NSO QL=140 EA/28 Days
MEKINIST 0.05MG/ML ORAL SOLN	5	NDS PA NSO QL=1260 ML/30 Days
MEKINIST 0.5MG TAB	5	NDS PA NSO QL=90 EA/30 Days
MEKINIST 2MG TAB	5	NDS PA NSO QL=30 EA/30 Days
MEKTOVI 15MG TAB	5	NDS PA NSO QL=180 EA/30 Days
NERLYNX 40MG TAB	5	NDS PA NSO QL=180 EA/30 Days
NINLARO 2.3MG CAP	5	NDS PA NSO QL=3 EA/28 Days
NINLARO 3MG CAP	5	NDS PA NSO QL=3 EA/28 Days
NINLARO 4MG CAP	5	NDS PA NSO QL=3 EA/28 Days
OGSIVEO 100MG TAB 7-DAY PACK (14)	5	NDS PA NSO QL=56 EA/28 Days
OGSIVEO 150MG TAB 7-DAY PACK (14)	5	NDS PA NSO QL=56 EA/28 Days
OGSIVEO 50MG TAB	5	NDS PA NSO QL=180 EA/30 Days
OJEMDA 100MG TAB	5	NDS PA NSO QL=24 EA/28 Days
OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	5	NDS PA NSO QL=16 EA/28 Days
OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	5	NDS PA NSO QL=24 EA/28 Days
OJEMDA 25MG/ML POWDER FOR ORAL SUSP	5	NDS PA NSO QL=96 ML/28 Days
OJJAARA 100MG TAB	5	NDS PA NSO QL=30 EA/30 Days
OJJAARA 150MG TAB	5	NDS PA NSO QL=30 EA/30 Days
OJJAARA 200MG TAB	5	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	5	NDS PA NSO QL=30 EA/30 Days
PEMAZYRE 4.5MG TAB	5	NDS PA NSO QL=30 EA/30 Days
PEMAZYRE 9MG TAB	5	NDS PA NSO QL=30 EA/30 Days
PIQRAY TAB 200MG DAILY DOSE PACK (28)	5	NDS PA NSO QL=28 EA/28 Days
PIQRAY TAB 250MG DAILY DOSE PACK (56)	5	NDS PA NSO QL=56 EA/28 Days
PIQRAY TAB 300MG DAILY DOSE PACK (56)	5	NDS PA NSO QL=56 EA/28 Days
QINLOCK 50MG TAB	5	NDS PA NSO QL=90 EA/30 Days
RETEVMO 120MG TAB	5	NDS PA NSO QL=60 EA/30 Days
RETEVMO 160MG TAB	5	NDS PA NSO QL=60 EA/30 Days
RETEVMO 40MG CAP	5	NDS PA NSO QL=120 EA/30 Days
RETEVMO 40MG TAB	5	NDS PA NSO QL=90 EA/30 Days
RETEVMO 80MG CAP	5	NDS PA NSO QL=120 EA/30 Days
RETEVMO 80MG TAB	5	NDS PA NSO QL=60 EA/30 Days
REZLIDHIA 150MG CAP	5	NDS PA NSO QL=60 EA/30 Days
ROZLYTREK 100MG CAP	5	NDS PA NSO QL=150 EA/30 Days
ROZLYTREK 200MG CAP	5	NDS PA NSO QL=90 EA/30 Days
ROZLYTREK 50MG ORAL PELLETT	5	NDS PA NSO QL=336 EA/28 Days
RUBRACA 200MG TAB	5	NDS PA NSO QL=120 EA/30 Days
RUBRACA 250MG TAB	5	NDS PA NSO QL=120 EA/30 Days
RUBRACA 300MG TAB	5	NDS PA NSO QL=120 EA/30 Days
RYDAPT 25MG CAP	5	NDS PA NSO QL=224 EA/28 Days
SCSEMBLIX 100MG TAB	5	NDS PA NSO QL=120 EA/30 Days
SCSEMBLIX 20MG TAB	5	NDS PA NSO QL=60 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SCSEMBLIX 40MG TAB	5	NDS PA NSO QL=300 EA/30 Days
<i>sorafenib 200mg tab</i>	1	PA NSO QL=120 EA/30 Days
STIVARGA 40MG TAB	5	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	5	NDS PA NSO QL=120 EA/30 Days
TABRECTA 200MG TAB	5	NDS PA NSO QL=120 EA/30 Days
TAFINLAR 10MG TAB FOR ORAL SUSP	5	NDS PA NSO QL=840 EA/28 Days
TAFINLAR 50MG CAP	5	NDS PA NSO QL=120 EA/30 Days
TAFINLAR 75MG CAP	5	NDS PA NSO QL=120 EA/30 Days
TALZENNA 0.1MG CAP	5	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.25MG CAP	5	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.35MG CAP	5	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.5MG CAP	5	NDS PA NSO QL=30 EA/30 Days
TALZENNA 0.75MG CAP	5	NDS PA NSO QL=30 EA/30 Days
TALZENNA 1MG CAP	5	NDS PA NSO QL=30 EA/30 Days
TASIGNA 150MG CAP	5	NDS PA NSO QL=112 EA/28 Days
TASIGNA 200MG CAP	5	NDS PA NSO QL=112 EA/28 Days
TASIGNA 50MG CAP	5	NDS PA NSO QL=120 EA/30 Days
TAZVERIK 200MG TAB	5	NDS PA NSO QL=240 EA/30 Days
TEPMETKO 225MG TAB	5	NDS PA NSO QL=60 EA/30 Days
TIBSOVO 250MG TAB	5	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	5	NDS PA NSO QL=64 EA/28 Days
TRUQAP 200MG TAB	5	NDS PA NSO QL=64 EA/28 Days
TURALIO 125MG CAP	5	NDS PA NSO QL=120 EA/30 Days
VANFLYTA 17.7MG TAB	5	NDS PA NSO QL=28 EA/28 Days
VANFLYTA 26.5MG TAB	5	NDS PA NSO QL=56 EA/28 Days
VERZENIO 100MG TAB	5	NDS PA NSO QL=56 EA/28 Days
VERZENIO 150MG TAB	5	NDS PA NSO QL=56 EA/28 Days
VERZENIO 200MG TAB	5	NDS PA NSO QL=56 EA/28 Days
VERZENIO 50MG TAB	5	NDS PA NSO QL=56 EA/28 Days
VITRAKVI 100MG CAP	5	NDS PA NSO QL=60 EA/30 Days
VITRAKVI 20MG/ML ORAL SOLN	5	NDS PA NSO QL=300 ML/30 Days
VITRAKVI 25MG CAP	5	NDS PA NSO QL=180 EA/30 Days
VONJO 100MG CAP	5	NDS PA NSO QL=120 EA/30 Days
VORANIGO 10MG TAB	5	NDS PA NSO QL=60 EA/30 Days
VORANIGO 40MG TAB	5	NDS PA NSO QL=30 EA/30 Days
XALKORI 150MG ORAL PELLETT	5	NDS PA NSO QL=180 EA/30 Days
XALKORI 200MG CAP	5	NDS PA NSO QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XALKORI 20MG ORAL PELLETT	5	NDS PA NSO QL=120 EA/30 Days
XALKORI 250MG CAP	5	NDS PA NSO QL=120 EA/30 Days
XALKORI 50MG ORAL PELLETT	5	NDS PA NSO QL=120 EA/30 Days
XOSPATA 40MG TAB	5	NDS PA NSO QL=90 EA/30 Days
ZEJULA 100MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ZEJULA 200MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ZEJULA 300MG TAB	5	NDS PA NSO QL=30 EA/30 Days
ZELBORAF 240MG TAB	5	NDS PA NSO QL=240 EA/30 Days
ZOLINZA 100MG CAP	5	NDS PA NSO QL=120 EA/30 Days
ZYDELIG 100MG TAB	5	NDS PA NSO QL=60 EA/30 Days
ZYDELIG 150MG TAB	5	NDS PA NSO QL=60 EA/30 Days
ZYKADIA 150MG TAB	5	NDS PA NSO QL=90 EA/30 Days
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000UNIT/0.5ML INJ	5	NDS PA NSO
AYVAKIT 100MG TAB	5	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 200MG TAB	5	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 25MG TAB	5	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 300MG TAB	5	NDS PA NSO QL=30 EA/30 Days
AYVAKIT 50MG TAB	5	NDS PA NSO QL=30 EA/30 Days
BESREMI 500MCG/ML SYRINGE	5	NDS PA NSO QL=2 ML/28 Days
<i>bexarotene 75mg cap</i>	1	PA NSO QL=300 EA/30 Days
<i>hydroxyurea 500mg cap</i>	1	
MATULANE 50MG CAP	5	NDS
POMALYST 1MG CAP	5	NDS PA NSO QL=21 EA/28 Days
POMALYST 2MG CAP	5	NDS PA NSO QL=21 EA/28 Days
POMALYST 3MG CAP	5	NDS PA NSO QL=21 EA/28 Days
POMALYST 4MG CAP	5	NDS PA NSO QL=21 EA/28 Days
REVUFORJ 110MG TAB	5	NDS PA NSO QL=120 EA/30 Days
REVUFORJ 160MG TAB	5	NDS PA NSO QL=60 EA/30 Days
<i>tretinoin 10mg cap</i>	1	
TUKYSA 150MG TAB	5	NDS PA NSO QL=120 EA/30 Days
TUKYSA 50MG TAB	5	NDS PA NSO QL=120 EA/30 Days
VENCLEXTA 100MG TAB	5	NDS PA NSO QL=180 EA/30 Days
VENCLEXTA 10MG TAB	3	PA NSO QL=60 EA/30 Days
VENCLEXTA 50MG TAB	3	PA NSO QL=30 EA/30 Days
VENCLEXTA TAB STARTER PACK (42)	5	NDS PA NSO QL=42 EA/28 Days
WELIREG 40MG TAB	5	NDS PA NSO QL=90 EA/30 Days
XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	5	NDS PA NSO QL=8 EA/28 Days
XPOVIO TAB 40MG ONCE WEEKLY CARTON (4)	5	NDS PA NSO QL=4 EA/28 Days
XPOVIO TAB 40MG TWICE WEEKLY CARTON (8)	5	NDS PA NSO QL=8 EA/28 Days
XPOVIO TAB 60MG ONCE WEEKLY CARTON (4)	5	NDS PA NSO QL=4 EA/28 Days
XPOVIO TAB 60MG TWICE WEEKLY CARTON (24)	5	NDS PA NSO QL=24 EA/28 Days
XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	5	NDS PA NSO QL=8 EA/28 Days
XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	5	NDS PA NSO QL=32 EA/28 Days
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
IWILFIN 192MG TAB	5	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>	3	
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa 25mg tab</i>	2	
<i>entacapone 200mg tab</i>	2	
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>	2	
<i>bromocriptine 2.5mg tab</i>	2	
<i>bromocriptine 5mg cap</i>	2	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	2	
CARBIDOPA/LEVODOPA 10-100MG ODT	2	
<i>carbidopa/levodopa 10-100mg tab</i>	1	
<i>carbidopa/levodopa 25-100mg er tab</i>	1	
CARBIDOPA/LEVODOPA 25-100MG ODT	2	
<i>carbidopa/levodopa 25-100mg tab</i>	1	
CARBIDOPA/LEVODOPA 25-250MG ODT	2	
<i>carbidopa/levodopa 25-250mg tab</i>	1	
<i>carbidopa/levodopa 50-200mg er tab</i>	1	
<i>pramipexole 0.125mg tab</i>	1	
<i>pramipexole 0.25mg tab</i>	1	
<i>pramipexole 0.5mg tab</i>	1	
<i>pramipexole 0.75mg tab</i>	1	
<i>pramipexole 1.5mg tab</i>	1	
<i>pramipexole 1mg tab</i>	1	
<i>ropinirole 0.25mg tab</i>	1	
<i>ropinirole 0.5mg tab</i>	1	
<i>ropinirole 1mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	QL=30 EA/30 Days
<i>rasagiline 1mg tab</i>	2	QL=30 EA/30 Days
<i>selegiline 5mg cap</i>	1	
<i>selegiline 5mg tab</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	4	PA NSO QL=30 EA/30 Days
CAPLYTA 21MG CAP	4	PA NSO QL=30 EA/30 Days
CAPLYTA 42MG CAP	4	PA NSO QL=30 EA/30 Days
COBENFY 20-100MG CAP	4	PA NSO QL=60 EA/30 Days
COBENFY 20-50MG CAP	4	PA NSO QL=60 EA/30 Days
COBENFY 30-125MG CAP	4	PA NSO QL=60 EA/30 Days
COBENFY CAP 28-DAY STARTER KIT PACK (56)	4	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>	2	
<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	2	
<i>haloperidol decanoate 100mg/ml (5ml) inj</i>	2	
<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	2	
<i>haloperidol decanoate 50mg/ml (5ml) inj</i>	2	
<i>lurasidone 120mg tab</i>	1	QL=30 EA/30 Days
<i>lurasidone 20mg tab</i>	1	QL=30 EA/30 Days
<i>lurasidone 40mg tab</i>	1	QL=30 EA/30 Days
<i>lurasidone 60mg tab</i>	1	QL=30 EA/30 Days
<i>lurasidone 80mg tab</i>	1	QL=60 EA/30 Days
MOLINDONE 10MG TAB	2	
MOLINDONE 25MG TAB	2	

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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>risperidone 0.5mg tab</i>	1	
<i>risperidone 1mg odt</i>	2	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>	2	QL=60 EA/30 Days
<i>risperidone 2mg tab</i>	1	
<i>risperidone 37.5mg inj</i>	2	QL=2 EA/28 Days
<i>risperidone 3mg odt</i>	2	QL=60 EA/30 Days
<i>risperidone 3mg tab</i>	1	
<i>risperidone 4mg odt</i>	2	QL=60 EA/30 Days
<i>risperidone 4mg tab</i>	1	
<i>risperidone 50mg inj</i>	2	QL=2 EA/28 Days
<i>risperidone microspheres 12.5mg inj</i>	2	QL=2 EA/28 Days
<i>risperidone microspheres 25mg inj</i>	2	QL=2 EA/28 Days
UZEDY 100MG/0.28ML SYRINGE	5	QL=.28 ML/30 Days
UZEDY 125MG/0.35ML SYRINGE	5	NDS QL=.35 ML/30 Days
UZEDY 150MG/0.42ML SYRINGE	5	QL=.42 ML/60 Days
UZEDY 200MG/0.56ML SYRINGE	5	QL=.56 ML/60 Days
UZEDY 250MG/0.7ML SYRINGE	5	QL=.70 ML/60 Days
UZEDY 50MG/0.14ML SYRINGE	5	NDS QL=.14 ML/30 Days
UZEDY 75MG/0.21ML SYRINGE	5	NDS QL=.21 ML/30 Days
DIBENZAPINES		
<i>asenapine 10mg sl tab</i>	2	QL=60 EA/30 Days
<i>asenapine 2.5mg sl tab</i>	2	QL=60 EA/30 Days
<i>asenapine 5mg sl tab</i>	2	QL=60 EA/30 Days
<i>clozapine 100mg odt</i>	2	QL=270 EA/30 Days
<i>clozapine 100mg tab</i>	2	
CLOZAPINE 12.5MG ODT	2	QL=90 EA/30 Days
<i>clozapine 150mg odt</i>	2	QL=180 EA/30 Days
<i>clozapine 200mg odt</i>	2	QL=120 EA/30 Days
<i>clozapine 200mg tab</i>	2	
<i>clozapine 25mg odt</i>	2	QL=270 EA/30 Days
<i>clozapine 25mg tab</i>	2	
<i>clozapine 50mg tab</i>	2	
<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>	2	QL=90 EA/30 Days
<i>olanzapine 10mg odt</i>	2	QL=60 EA/30 Days
<i>olanzapine 10mg tab</i>	1	
<i>olanzapine 15mg odt</i>	2	QL=30 EA/30 Days
<i>olanzapine 15mg tab</i>	1	
<i>olanzapine 2.5mg tab</i>	1	
<i>olanzapine 20mg odt</i>	2	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>olanzapine 20mg tab</i>	1	
<i>olanzapine 5mg odt</i>	2	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	4	PA NSO QL=30 EA/30 Days
SECUADO 5.7MG/24HR PATCH	4	PA NSO QL=30 EA/30 Days
SECUADO 7.6MG/24HR PATCH	4	PA NSO QL=30 EA/30 Days
VERSACLOZ 50MG/ML ORAL SUSP	4	PA NSO QL=600 ML/30 Days
PHENOTHIAZINES		
<i>chlorpromazine 100mg tab</i>	1	
CHLORPROMAZINE 100MG/ML ORAL SOLN	2	
<i>chlorpromazine 10mg tab</i>	1	
<i>chlorpromazine 200mg tab</i>	1	
<i>chlorpromazine 25mg tab</i>	1	
CHLORPROMAZINE 30MG/ML ORAL SOLN	2	
<i>chlorpromazine 50mg tab</i>	1	
<i>compro 25mg rectal supp</i>	1	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	2	
<i>fluphenazine 10mg tab</i>	1	
<i>fluphenazine 1mg tab</i>	1	
<i>fluphenazine 2.5mg tab</i>	1	
FLUPHENAZINE 2.5MG/ML INJ	2	
<i>fluphenazine 5mg tab</i>	1	
FLUPHENAZINE 5MG/ML ORAL SOLN	2	
<i>fluphenazine decanoate 25mg/ml inj</i>	2	
<i>perphenazine 16mg tab</i>	1	
<i>perphenazine 2mg tab</i>	1	
<i>perphenazine 4mg tab</i>	1	
<i>perphenazine 8mg tab</i>	1	
<i>prochlorperazine 10mg tab</i>	1	
<i>prochlorperazine 25mg rectal supp</i>	1	
<i>prochlorperazine 5mg tab</i>	1	
<i>thioridazine 100mg tab</i>	1	
<i>thioridazine 10mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>thioridazine 25mg tab</i>	1	
<i>thioridazine 50mg tab</i>	1	
<i>trifluoperazine 10mg tab</i>	1	
<i>trifluoperazine 1mg tab</i>	1	
<i>trifluoperazine 2mg tab</i>	1	
<i>trifluoperazine 5mg tab</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	5	QL=2.40 ML/56 Days
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	5	QL=3.20 ML/56 Days
ABILIFY MAINTENA 300MG INJ	5	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 300MG SYRINGE	5	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 400MG INJ	5	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 400MG SYRINGE	5	NDS QL=1 EA/28 Days
<i>aripiprazole 10mg odt</i>	2	PA NSO QL=60 EA/30 Days
<i>aripiprazole 10mg tab</i>	1	
<i>aripiprazole 15mg odt</i>	2	PA NSO QL=60 EA/30 Days
<i>aripiprazole 15mg tab</i>	1	
<i>aripiprazole 1mg/ml oral soln</i>	2	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	5	QL=3.90 ML/56 Days
ARISTADA 441MG/1.6ML SYRINGE	5	NDS QL=1.60 ML/28 Days
ARISTADA 662MG/2.4ML SYRINGE	5	NDS QL=2.40 ML/28 Days
ARISTADA 675MG/2.4ML SYRINGE	5	QL=2.40 ML/42 Days
ARISTADA 882MG/3.2ML SYRINGE	5	QL=3.20 ML/28 Days
REXULTI 0.25MG TAB	4	PA NSO QL=30 EA/30 Days
REXULTI 0.5MG TAB	4	PA NSO QL=30 EA/30 Days
REXULTI 1MG TAB	4	PA NSO QL=30 EA/30 Days
REXULTI 2MG TAB	4	PA NSO QL=30 EA/30 Days
REXULTI 3MG TAB	4	PA NSO QL=30 EA/30 Days
REXULTI 4MG TAB	4	PA NSO QL=30 EA/30 Days
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir 20mg/ml oral soln</i>	2	QL=960 ML/30 Days
<i>abacavir 300mg tab</i>	2	QL=60 EA/30 Days
<i>abacavir/lamivudine 600-300mg tab</i>	2	QL=30 EA/30 Days
APTIVUS 250MG CAP	5	QL=120 EA/30 Days
<i>atazanavir 150mg cap</i>	2	QL=30 EA/30 Days
<i>atazanavir 200mg cap</i>	2	QL=60 EA/30 Days
<i>atazanavir 300mg cap</i>	2	QL=30 EA/30 Days
BIKTARVY 30-120-15MG TAB	5	QL=30 EA/30 Days
BIKTARVY 50-200-25MG TAB	5	QL=30 EA/30 Days
CIMDUO 300-300MG TAB	5	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
COMPLERA 200-25-300MG TAB	5	QL=30 EA/30 Days
<i>darunavir 600mg tab</i>	2	QL=60 EA/30 Days
<i>darunavir 800mg tab</i>	2	QL=30 EA/30 Days
DELSTRIGO 100-300-300MG TAB	5	QL=30 EA/30 Days
DESCOVY 120-15MG TAB	5	QL=30 EA/30 Days
DESCOVY 200-25MG TAB	5	QL=30 EA/30 Days
DOVATO 50-300MG TAB	5	QL=30 EA/30 Days
EDURANT 25MG TAB	5	QL=30 EA/30 Days
<i>efavirenz 600mg tab</i>	2	QL=30 EA/30 Days
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	2	QL=30 EA/30 Days
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	2	QL=30 EA/30 Days
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	2	QL=30 EA/30 Days
<i>emtricitabine 200mg cap</i>	2	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	2	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	2	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	2	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	3	QL=850 ML/30 Days
<i>etravirine 100mg tab</i>	2	QL=60 EA/30 Days
<i>etravirine 200mg tab</i>	2	QL=60 EA/30 Days
EVOTAZ 300-150MG TAB	5	QL=30 EA/30 Days
<i>fosamprenavir 700mg tab</i>	2	QL=120 EA/30 Days
FUZEON 90MG INJ	5	QL=60 EA/30 Days
GENVOYA 150-150-200-10MG TAB	5	QL=30 EA/30 Days
INTELENCE 25MG TAB	3	QL=120 EA/30 Days
ISENTRESS 100MG CHEW TAB	3	QL=180 EA/30 Days
ISENTRESS 100MG GRANULES FOR ORAL SUSP	3	QL=60 EA/30 Days
ISENTRESS 25MG CHEW TAB	3	QL=180 EA/30 Days
ISENTRESS 400MG TAB	3	QL=60 EA/30 Days
ISENTRESS 600MG TAB	3	QL=60 EA/30 Days
JULUCA 50-25MG TAB	5	QL=30 EA/30 Days
<i>lamivudine 10mg/ml oral soln</i>	2	QL=960 ML/30 Days
<i>lamivudine 150mg tab</i>	2	QL=60 EA/30 Days
<i>lamivudine 300mg tab</i>	2	QL=30 EA/30 Days
<i>lamivudine/zidovudine 150-300mg tab</i>	2	QL=60 EA/30 Days
<i>lopinavir/ritonavir 100-25mg tab</i>	2	QL=300 EA/30 Days
<i>lopinavir/ritonavir 200-50mg tab</i>	2	QL=120 EA/30 Days
<i>lopinavir/ritonavir 80-20mg/ml oral soln</i>	2	QL=480 ML/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>maraviroc 150mg tab</i>	2	QL=60 EA/30 Days
<i>maraviroc 300mg tab</i>	2	QL=120 EA/30 Days
NEVIRAPINE 10MG/ML ORAL SUSP	2	QL=1200 ML/30 Days
<i>nevirapine 200mg tab</i>	1	QL=60 EA/30 Days
<i>nevirapine 400mg er tab</i>	2	QL=30 EA/30 Days
NORVIR 100MG ORAL POWDER	3	QL=360 EA/30 Days
ODEFSEY 200-25-25MG TAB	5	QL=30 EA/30 Days
PIFELTRO 100MG TAB	5	QL=30 EA/30 Days
PREZCOBIX 150-800MG TAB	5	QL=30 EA/30 Days
PREZISTA 100MG/ML ORAL SUSP	3	QL=400 ML/30 Days
PREZISTA 150MG TAB	3	QL=240 EA/30 Days
PREZISTA 75MG TAB	3	QL=480 EA/30 Days
REYATAZ 50MG ORAL POWDER	5	QL=240 EA/30 Days
<i>ritonavir 100mg tab</i>	2	QL=360 EA/30 Days
RUKOBIA 600MG ER TAB	5	QL=60 EA/30 Days
SELZENTRY 20MG/ML ORAL SOLN	5	QL=1840 ML/30 Days
STRIBILD 150-150-200-300MG TAB	5	QL=30 EA/30 Days
SUNLENCA 300MG TAB THERAPY PACK (4)	5	QL=4 EA/28 Days
SUNLENCA 300MG TAB THERAPY PACK (5)	5	QL=5 EA/28 Days
SYMTUZA 150-800-200-10MG TAB	5	QL=30 EA/30 Days
<i>tenofovir disoproxil fumarate 300mg tab</i>	2	QL=30 EA/30 Days
TIVICAY 50MG TAB	5	QL=60 EA/30 Days
TIVICAY 5MG TAB FOR ORAL SUSP	3	QL=180 EA/30 Days
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	3	QL=180 EA/30 Days
TRIUMEQ 600-50-300MG TAB	5	QL=30 EA/30 Days
TYBOST 150MG TAB	3	QL=30 EA/30 Days
VIRACEPT 250MG TAB	5	QL=300 EA/30 Days
VIRACEPT 625MG TAB	5	QL=120 EA/30 Days
VIREAD 150MG TAB	5	QL=30 EA/30 Days
VIREAD 200MG TAB	5	QL=30 EA/30 Days
VIREAD 250MG TAB	5	QL=30 EA/30 Days
VIREAD 40MG/GM ORAL POWDER	3	QL=240 GM/30 Days
<i>zidovudine 100mg cap</i>	2	QL=180 EA/30 Days
<i>zidovudine 10mg/ml oral soln</i>	2	QL=1920 ML/30 Days
<i>zidovudine 300mg tab</i>	2	QL=60 EA/30 Days
CMV AGENTS		
LIVTENCITY 200MG TAB	5	NDS PA QL=120 EA/30 Days
PREVYMIS 240MG TAB	5	NDS PA QL=30 EA/30 Days
PREVYMIS 480MG TAB	5	NDS PA QL=30 EA/30 Days
<i>valganciclovir 450mg tab</i>	2	
<i>valganciclovir 50mg/ml oral soln</i>	2	
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	2	QL=30 EA/30 Days
<i>entecavir 0.5mg tab</i>	2	QL=30 EA/30 Days
<i>entecavir 1mg tab</i>	2	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lamivudine 100mg tab</i>	2	QL=90 EA/30 Days
MAVYRET 100-40MG TAB	5	NDS PA QL=90 EA/30 Days
MAVYRET 50-20MG ORAL PELLETT	5	NDS PA QL=150 EA/30 Days
PEGASYS 180MCG/0.5ML SYRINGE	5	NDS QL=2 ML/28 Days
PEGASYS 180MCG/ML INJ	5	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	5	NDS PA QL=30 EA/30 Days
VEMLIDY 25MG TAB	5	NDS QL=30 EA/30 Days
VOSEVI 400-100-100MG TAB	5	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>	2	PA BvD
<i>acyclovir 800mg tab</i>	1	
<i>famciclovir 125mg tab</i>	2	
<i>famciclovir 250mg tab</i>	2	
<i>famciclovir 500mg tab</i>	2	
<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>	2	QL=540 ML/180 Days
<i>oseltamivir 75mg cap</i>	1	QL=42 EA/180 Days
RELENZA 5MG/BLISTER POWDER INHALER	3	QL=120 EA/30 Days
RIMANTADINE 100MG TAB	2	
XOFLUZA 40MG TAB	4	QL=2 EA/30 Days
XOFLUZA 80MG TAB	4	QL=1 EA/30 Days
MISC. ANTIVIRALS		
PAXLOVID 150MG/100MG TAB PACK (20)	3	QL=20 EA/5 Days
PAXLOVID 150MG/100MG TAB PACK (30)	3	QL=30 EA/5 Days
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol 12.5mg tab</i>	1	
<i>carvedilol 25mg tab</i>	1	
<i>carvedilol 3.125mg tab</i>	1	
<i>carvedilol 6.25mg tab</i>	1	
<i>labetalol 100mg tab</i>	1	
<i>labetalol 200mg tab</i>	1	
<i>labetalol 300mg tab</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	1	
<i>acebutolol 400mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<i>nebivolol 10mg tab</i>	2	
<i>nebivolol 2.5mg tab</i>	2	
<i>nebivolol 20mg tab</i>	2	
<i>nebivolol 5mg tab</i>	2	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	2	
<i>nadolol 40mg tab</i>	2	
<i>nadolol 80mg tab</i>	2	
<i>pindolol 10mg tab</i>	1	
<i>pindolol 5mg tab</i>	1	
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	1	
<i>propranolol 160mg er cap</i>	1	
<i>propranolol 20mg tab</i>	1	
<i>propranolol 40mg tab</i>	1	
<i>propranolol 4mg/ml oral soln</i>	1	
<i>propranolol 60mg er cap</i>	1	
<i>propranolol 60mg tab</i>	1	
<i>propranolol 80mg er cap</i>	1	
<i>propranolol 80mg tab</i>	1	
PROPRANOLOL 8MG/ML ORAL SOLN	1	
<i>sotalol 120mg tab</i>	1	
<i>sotalol 160mg tab</i>	1	
<i>sotalol 240mg tab</i>	1	
<i>sotalol 80mg tab</i>	1	
<i>sotalol af 120mg tab</i>	1	
<i>sotalol af 160mg tab</i>	1	
<i>sotalol af 80mg tab</i>	1	
<i>timolol 10mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	
<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>	2	
<i>diltiazem 60mg tab</i>	1	
<i>diltiazem 90mg er (12hr) cap</i>	2	
<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>	2	
<i>isradipine 5mg cap</i>	2	
<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>	2	
<i>tiadylt 120mg er (24hr) cap</i>	1	
<i>tiadylt 180mg er (24hr) cap</i>	1	
<i>tiadylt 240mg er (24hr) cap</i>	1	
<i>tiadylt 300mg er (24hr) cap</i>	1	
<i>tiadylt 360mg er (24hr) cap</i>	1	
<i>tiadylt 420mg er (24hr) cap</i>	1	
<i>verapamil 120mg er cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
VERAPAMIL 360MG ER CAP	2	
<i>verapamil 40mg tab</i>	1	
<i>verapamil 80mg tab</i>	1	
CARDIOVASCULAR AGENTS		
ALPHA-ADRENERGIC AGONISTS		
<i>droxidopa 100mg cap</i>	1	PA QL=90 EA/30 Days
<i>droxidopa 200mg cap</i>	1	PA QL=180 EA/30 Days
<i>droxidopa 300mg cap</i>	1	PA QL=180 EA/30 Days
<i>midodrine 10mg tab</i>	1	
<i>midodrine 2.5mg tab</i>	1	
<i>midodrine 5mg tab</i>	1	
CARDIOVASCULAR AGENTS, OTHER		
CAMZYOS 10MG CAP	5	NDS PA QL=30 EA/30 Days
CAMZYOS 15MG CAP	5	NDS PA QL=30 EA/30 Days
CAMZYOS 2.5MG CAP	5	NDS PA QL=30 EA/30 Days
CAMZYOS 5MG CAP	5	NDS PA QL=30 EA/30 Days
<i>digoxin 0.125mg tab</i>	1	
<i>digoxin 0.25mg tab</i>	1	
ENTRESTO 24-26MG TAB	3	QL=60 EA/30 Days
ENTRESTO 49-51MG TAB	3	QL=60 EA/30 Days
ENTRESTO 97-103MG TAB	3	QL=60 EA/30 Days
<i>ivabradine 5mg tab</i>	2	PA QL=60 EA/30 Days
<i>ivabradine 7.5mg tab</i>	2	PA QL=60 EA/30 Days
<i>pentoxifylline 400mg er tab</i>	1	
<i>ranolazine 1000mg er tab</i>	2	
<i>ranolazine 500mg er tab</i>	2	
VERQUVO 10MG TAB	3	PA QL=30 EA/30 Days
VERQUVO 2.5MG TAB	3	PA QL=30 EA/30 Days
VERQUVO 5MG TAB	3	PA QL=30 EA/30 Days
VYNDAMAX 61MG CAP	5	NDS PA QL=30 EA/30 Days
VYNDAQEL 20MG CAP	5	NDS PA QL=120 EA/30 Days
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil 100mg/ml oral susp</i>	1	
<i>cefadroxil 500mg cap</i>	1	
<i>cefadroxil 50mg/ml oral susp</i>	1	
<i>cefazolin 1000mg inj</i>	2	
<i>cefazolin 200mg/ml inj</i>	2	
<i>cefazolin 500mg inj</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cephalexin 250mg cap</i>	1	
<i>cephalexin 25mg/ml oral susp</i>	1	
<i>cephalexin 500mg cap</i>	1	
<i>cephalexin 50mg/ml oral susp</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
CEFACLOR 250MG CAP	2	
CEFACLOR 500MG CAP	2	
<i>cefoxitin 1gm inj</i>	2	
<i>cefoxitin 200mg/ml inj</i>	2	
<i>cefoxitin 2gm inj</i>	2	
<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>	2	
<i>cefuroxime 250mg tab</i>	1	
<i>cefuroxime 500mg tab</i>	1	
<i>cefuroxime 750mg inj</i>	2	
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>	2	
<i>cefixime 400mg cap</i>	2	
<i>cefixime 40mg/ml oral susp</i>	2	
<i>cefpodoxime 100mg tab</i>	2	
<i>cefpodoxime 10mg/ml oral susp</i>	2	
<i>cefpodoxime 200mg tab</i>	2	
<i>cefpodoxime 20mg/ml oral susp</i>	2	
<i>ceftazidime 1gm inj</i>	2	
<i>ceftazidime 200mg/ml inj</i>	2	
<i>ceftazidime 2gm inj</i>	2	
<i>ceftriaxone 10gm inj</i>	2	
<i>ceftriaxone 1gm inj</i>	2	
<i>ceftriaxone 250mg inj</i>	2	
<i>ceftriaxone 2gm inj</i>	2	
<i>ceftriaxone 500mg inj</i>	2	
<i>tazicef 1gm inj</i>	2	
<i>tazicef 2gm inj</i>	2	
TAZICEF 6GM INJ	2	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>budesonide 3mg dr cap</i>	2	QL=90 EA/30 Days
<i>budesonide 9mg er tab</i>	2	PA QL=30 EA/30 Days
DEXAMETHASONE 0.1MG/ML ORAL SOLN	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dexamethasone 0.5mg tab</i>	1	
<i>dexamethasone 0.75mg tab</i>	1	
<i>dexamethasone 1.5mg tab</i>	1	
<i>dexamethasone 1mg tab</i>	1	
<i>dexamethasone 2mg tab</i>	1	
<i>dexamethasone 4mg tab</i>	1	
<i>dexamethasone 6mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	1	
<i>hydrocortisone 20mg tab</i>	1	
<i>hydrocortisone 5mg tab</i>	1	
<i>methylprednisolone 16mg tab</i>	1	PA BvD
<i>methylprednisolone 32mg tab</i>	1	PA BvD
<i>methylprednisolone 4mg tab</i>	1	PA BvD
<i>methylprednisolone 4mg tab pack (21)</i>	1	
<i>methylprednisolone 8mg tab</i>	1	PA BvD
<i>prednisolone 1mg/ml oral soln</i>	1	PA BvD
<i>prednisolone 3mg/ml oral soln</i>	1	PA BvD
<i>prednisolone 5mg/ml oral soln</i>	2	PA BvD
<i>prednisone 10mg tab</i>	1	PA BvD
<i>prednisone 1mg tab</i>	1	PA BvD
PREDNISON 1MG/ML ORAL SOLN	2	PA BvD
<i>prednisone 2.5mg tab</i>	1	PA BvD
<i>prednisone 20mg tab</i>	1	PA BvD
<i>prednisone 50mg tab</i>	1	PA BvD
<i>prednisone 5mg tab</i>	1	PA BvD
MINERALOCORTICOIDS		
<i>fludrocortisone acetate 0.1mg tab</i>	1	
COUGH/COLD/ALLERGY		
MUCOLYTICS		
<i>acetylcysteine 100mg/ml inh soln</i>	1	PA BvD
<i>acetylcysteine 200mg/ml inh soln</i>	1	PA BvD
DENTAL AND ORAL AGENTS		
DENTAL AND ORAL AGENTS		
<i>cevimeline 30mg cap</i>	2	
<i>chlorhexidine gluconate 0.12% mouthwash</i>	1	
<i>clotrimazole 10mg lozenge</i>	1	
<i>kourzeq 0.1% oral paste</i>	1	
<i>lidocaine viscous 2% mucous membrane topical soln</i>	1	
<i>nystatin 100000unit/ml oral susp</i>	1	
<i>periogard 0.12% mouthwash</i>	1	
<i>pilocarpine 5mg tab</i>	1	
<i>pilocarpine 7.5mg tab</i>	1	
<i>triamcinolone acetonide 0.1% oral paste</i>	1	
DERMATOLOGICALS		
ACNE PRODUCTS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>accutane 10mg cap</i>	2	
<i>accutane 20mg cap</i>	2	
<i>accutane 40mg cap</i>	2	
<i>amnesteem 10mg cap</i>	2	
<i>amnesteem 20mg cap</i>	2	
<i>amnesteem 40mg cap</i>	2	
<i>claravis 10mg cap</i>	2	
<i>claravis 20mg cap</i>	2	
<i>claravis 30mg cap</i>	2	
<i>claravis 40mg cap</i>	2	
<i>clindacin 1% pad</i>	1	QL=120 EA/30 Days
<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% pad</i>	1	QL=120 EA/30 Days
<i>clindamycin 1% topical soln</i>	1	QL=60 ML/30 Days
<i>ERY 2% PAD</i>	2	QL=60 EA/30 Days
<i>erythromycin 2% gel</i>	1	QL=60 GM/30 Days
<i>erythromycin 2% topical soln</i>	1	QL=60 ML/30 Days
<i>isotretinoin 10mg cap</i>	2	
<i>isotretinoin 20mg cap</i>	2	
<i>isotretinoin 30mg cap</i>	2	
<i>isotretinoin 40mg cap</i>	2	
<i>sulfacetamide sodium 10% lotion</i>	2	QL=118 ML/30 Days
<i>tretinoin 0.01% gel</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.025% cream</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.025% gel</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.05% cream</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.1% cream</i>	2	PA QL=45 GM/30 Days
<i>zenatane 10mg cap</i>	2	
<i>zenatane 20mg cap</i>	2	
<i>zenatane 30mg cap</i>	2	
<i>zenatane 40mg cap</i>	2	
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 0.77% lotion</i>	1	QL=60 ML/30 Days
<i>ciclopirox 1% shampoo</i>	2	QL=120 ML/30 Days
<i>ciclopirox 8% topical soln</i>	1	QL=13.20 ML/30 Days
<i>clotrimazole 1% cream</i>	1	QL=45 GM/30 Days
<i>clotrimazole/betamethasone 1-0.05% cream</i>	1	QL=90 GM/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	2	QL=10 ML/30 Days
<i>fluorouracil 5% cream</i>	1	QL=40 GM/30 Days
<i>fluorouracil 5% topical soln</i>	2	QL=10 ML/30 Days
PANRETIN 0.1% GEL	5	NDS PA NSO QL=60 GM/30 Days
VALCHLOR 0.016% GEL	5	NDS PA NSO QL=240 GM/30 Days
ANTIPSORIATICS		
<i>acitretin 10mg cap</i>	2	
<i>acitretin 17.5mg cap</i>	2	
<i>acitretin 25mg cap</i>	2	
<i>calcipotriene 0.005% cream</i>	2	PA QL=120 GM/30 Days
<i>calcipotriene 0.005% ointment</i>	2	PA QL=120 GM/30 Days
CALCIPOTRIENE 0.005% TOPICAL SOLN	2	PA QL=120 ML/30 Days
COSENTYX 150MG/ML AUTO-INJECTOR	5	NDS PA QL=8 ML/28 Days
COSENTYX 150MG/ML SYRINGE	5	NDS PA QL=8 ML/28 Days
COSENTYX 75MG/0.5ML SYRINGE	5	NDS PA QL=2 ML/28 Days
COSENTYX UNOREADY 300MG/2ML AUTO-INJECTOR	5	NDS PA QL=8 ML/28 Days
METHOXSALEN 10MG CAP	2	
OTEZLA 20MG TAB	5	NDS PA QL=60 EA/30 Days
OTEZLA 30MG TAB	5	NDS PA QL=60 EA/30 Days
OTEZLA TAB 28-DAY STARTER PACK (55)	5	NDS PA QL=55 EA/28 Days
SKYRIZI 150MG/ML AUTO-INJECTOR	5	PA QL=7 ML/365 Days
SKYRIZI 150MG/ML SYRINGE	5	PA QL=7 ML/365 Days
STELARA 45MG/0.5ML INJ	5	PA QL=.50 ML/28 Days
STELARA 45MG/0.5ML SYRINGE	5	PA QL=.50 ML/28 Days
STELARA 90MG/ML SYRINGE	5	PA QL=1 ML/28 Days
<i>tazarotene 0.1% cream</i>	2	PA QL=60 GM/30 Days
TREMFYA 100MG/ML AUTO-INJECTOR	5	PA QL=2 ML/28 Days
TREMFYA 100MG/ML SYRINGE	5	PA QL=2 ML/28 Days
TREMFYA 200MG/2ML AUTO-INJECTOR	5	NDS PA QL=2 ML/28 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TREMFYA 200MG/2ML SYRINGE	5	NDS PA QL=2 ML/28 Days
CORTICOSTEROIDS - TOPICAL		
<i>ala-cort 1% cream</i>	1	QL=240 GM/30 Days
ALCLOMETASONE 0.05% OINT	2	QL=120 GM/30 Days
<i>alclometasone dipropionate 0.05% cream</i>	2	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>	2	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
BETAMETHASONE 0.05% GEL	2	QL=100 GM/30 Days
<i>betamethasone 0.05% lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% ointment</i>	2	QL=90 GM/30 Days
<i>betamethasone 0.1% cream</i>	1	QL=180 GM/30 Days
<i>betamethasone 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>clobetasol propionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% e cream</i>	2	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% foam</i>	2	QL=100 GM/30 Days
<i>clobetasol propionate 0.05% gel</i>	2	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% lotion</i>	2	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>	2	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>	2	QL=125 ML/30 Days
<i>clodan 0.05% shampoo</i>	2	QL=236 ML/30 Days
<i>desonide 0.05% ointment</i>	2	QL=120 GM/30 Days
<i>desoximetasone 0.25% cream</i>	2	QL=120 GM/30 Days
<i>desoximetasone 0.25% ointment</i>	2	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>	2	QL=120 ML/30 Days
<i>fluocinolone acetonide 0.01% topical soln</i>	1	QL=90 ML/30 Days
<i>fluocinolone acetonide 0.025% cream</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.025% ointment</i>	1	QL=120 GM/30 Days
<i>fluocinonide 0.05% cream</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% e cream</i>	1	QL=120 GM/30 Days
FLUOCINONIDE 0.05% GEL	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% ointment</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical soln</i>	1	QL=60 ML/30 Days
<i>fluocinonide 0.1% cream</i>	1	QL=60 GM/30 Days
<i>fluticasone propionate 0.005% ointment</i>	1	QL=240 GM/30 Days
<i>fluticasone propionate 0.05% cream</i>	1	QL=240 GM/30 Days
<i>halobetasol propionate 0.05% cream</i>	2	QL=50 GM/30 Days
<i>halobetasol propionate 0.05% ointment</i>	2	QL=50 GM/30 Days
<i>hydrocortisone 1% cream</i>	1	QL=240 GM/30 Days
<i>hydrocortisone 2.5% ointment</i>	1	QL=240 GM/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HYDROCORTISONE LOTION 2.5%	1	QL=118 ML/30 Days
<i>mometasone furoate 0.1% cream</i>	1	QL=180 GM/30 Days
<i>mometasone furoate 0.1% lotion</i>	1	QL=180 ML/30 Days
<i>mometasone furoate 0.1% ointment</i>	1	QL=180 GM/30 Days
<i>triamcinolone acetonide 0.025% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.025% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.025% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.1% ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% ointment</i>	1	QL=120 GM/30 Days
<i>triderm 0.5% cream</i>	1	QL=454 GM/30 Days
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus 1% cream</i>	2	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>	2	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>	2	PA QL=90 EA/30 Days
<i>tridacaine 5% patch</i>	2	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>	2	QL=59 ML/30 Days
<i>permethrin 5% cream</i>	1	QL=60 GM/30 Days
PODOFILOX 0.5% TOPICAL SOLN	2	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>	2	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>	2	QL=60 GM/30 Days
WOUND CARE PRODUCTS		
REGRANEX 0.01% GEL	3	PA QL=30 GM/15 Days
SANTYL 250UNIT/GM OINTMENT	3	QL=90 GM/30 Days
<i>silver sulfadiazine 1% cream</i>	1	
<i>ssd 1% cream</i>	1	
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CREON 120000-24000-76000UNIT DR CAP	3	
CREON 15000-3000-9500UNIT DR CAP	3	
CREON 180000-36000-114000UNIT DR CAP	3	
CREON 30000-6000-19000UNIT DR CAP	3	
CREON 60000-12000-38000UNIT DR CAP	3	
SUCRAID 8500UNIT/ML ORAL SOLN	5	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>	2	
<i>methazolamide 50mg tab</i>	2	
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>	2	
<i>bumetanide 0.5mg tab</i>	1	
<i>bumetanide 1mg tab</i>	1	
<i>bumetanide 2mg tab</i>	1	
FUROSCIX 80MG/10ML CARTRIDGE	5	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	2	
<i>furosemide 10mg/ml oral soln</i>	1	
<i>furosemide 20mg tab</i>	1	
<i>furosemide 40mg tab</i>	1	
<i>furosemide 80mg tab</i>	1	
FUROSEMIDE 8MG/ML ORAL SOLN	1	
<i>torseamide 100mg tab</i>	1	
<i>torseamide 10mg tab</i>	1	
<i>torseamide 20mg tab</i>	1	
<i>torseamide 5mg tab</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone 25mg tab</i>	1	
<i>chlorthalidone 50mg tab</i>	1	
<i>hydrochlorothiazide 12.5mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydrochlorothiazide 12.5mg tab</i>	1	
<i>hydrochlorothiazide 25mg tab</i>	1	
<i>hydrochlorothiazide 50mg tab</i>	1	
<i>indapamide 1.25mg tab</i>	1	
<i>indapamide 2.5mg tab</i>	1	
<i>metolazone 10mg tab</i>	1	
<i>metolazone 2.5mg tab</i>	1	
<i>metolazone 5mg tab</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
<i>alendronate sodium 10mg tab</i>	1	
<i>alendronate sodium 35mg tab</i>	1	
<i>alendronate sodium 70mg tab</i>	1	
<i>ibandronate 150mg tab</i>	1	QL=1 EA/30 Days
PROLIA 60MG/ML SYRINGE	4	ST QL=1 ML/168 Days
<i>raloxifene 60mg tab</i>	2	
<i>risedronate sodium 150mg tab</i>	2	
<i>risedronate sodium 30mg tab</i>	2	
<i>risedronate sodium 35mg tab</i>	2	
<i>risedronate sodium 35mg tab pack (12)</i>	2	
<i>risedronate sodium 35mg tab pack (4)</i>	2	
<i>risedronate sodium 5mg tab</i>	2	
<i>salmon calcitonin 200unit/act nasal spray</i>	1	QL=3.70 ML/28 Days
TERIPARATIDE 0.02MG/ACT PEN INJ	5	NDS QL=2.48 ML/28 Days
TYMLOS 3120MCG/1.56ML PEN INJ	5	NDS QL=1.56 ML/30 Days
XGEVA 120MG/1.7ML INJ	5	NDS PA QL=1.70 ML/28 Days
GROWTH HORMONES		
NORDITROPIN 10MG/1.5ML PEN INJ	5	NDS PA
NORDITROPIN 15MG/1.5ML PEN INJ	5	NDS PA
NORDITROPIN 30MG/3ML PEN INJ	5	NDS PA
NORDITROPIN 5MG/1.5ML PEN INJ	5	NDS PA
OMNITROPE 10MG/1.5ML CARTRIDGE	5	NDS PA
OMNITROPE 5.8MG INJ	5	NDS PA
OMNITROPE 5MG/1.5ML CARTRIDGE	5	NDS PA
SOGROYA 10MG/1.5ML PEN INJ	5	NDS PA
SOGROYA 15MG/1.5ML PEN INJ	5	NDS PA
SOGROYA 5MG/1.5ML PEN INJ	5	NDS PA
METABOLIC MODIFIERS		
<i>betaine 1gm powder for oral soln</i>	1	
<i>calcitriol 0.25mcg cap</i>	1	
<i>calcitriol 0.5mcg cap</i>	1	
<i>calcitriol 1mcg/ml oral soln</i>	1	
<i>carglumic acid 200mg tab for oral susp</i>	1	PA
<i>cinacalcet 30mg tab</i>	2	QL=60 EA/30 Days
<i>cinacalcet 60mg tab</i>	2	QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cinacalcet 90mg tab</i>	2	QL=120 EA/30 Days
<i>javygtor 100mg powder for oral soln</i>	1	PA
<i>javygtor 100mg tab</i>	1	PA
<i>javygtor 500mg powder for oral soln</i>	1	PA
<i>levocarnitine 100mg/ml oral soln</i>	1	
<i>levocarnitine 330mg tab</i>	1	
<i>paricalcitol 1mcg cap</i>	2	
<i>paricalcitol 2mcg cap</i>	2	
<i>paricalcitol 4mcg cap</i>	2	
<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>	2	
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	5	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.6MG/ML INJ	5	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.9MG/ML INJ	5	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>	2	
<i>desmopressin acetate 0.1mg tab</i>	2	
<i>desmopressin acetate 0.2mg tab</i>	2	
INCRELEX 40MG/4ML INJ	5	NDS PA
KERENDIA 10MG TAB	3	PA QL=30 EA/30 Days
KERENDIA 20MG TAB	3	PA QL=30 EA/30 Days
SOMAVERT 10MG INJ	5	NDS PA QL=60 EA/30 Days
SOMAVERT 15MG INJ	5	NDS PA QL=60 EA/30 Days
SOMAVERT 20MG INJ	5	NDS PA QL=60 EA/30 Days
SOMAVERT 25MG INJ	5	NDS PA QL=30 EA/30 Days
SOMAVERT 30MG INJ	5	NDS PA QL=30 EA/30 Days
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>altavera tab 28-day pack</i>	2	
<i>alyacen 1/35 tab 28-day pack</i>	2	
<i>apri tab 28-day pack</i>	2	
<i>aranelle tab 28-day pack</i>	2	
<i>ashlyna tab 91-day pack</i>	2	
<i>aubra tab 28-day pack</i>	2	
<i>aviane tab 28-day pack</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>azurette 28 day pack</i>	2	
<i>balziva tab 28-day pack</i>	2	
<i>blisovi 21 fe tab 1.5/30 28-day pack</i>	2	
<i>blisovi 24 fe tab 1/20 28-day pack</i>	2	
<i>briellyn tab 28-day pack</i>	2	
<i>camreselo tab 91-day pack</i>	2	
<i>cryselle tab 28-day pack</i>	2	
<i>cyred tab 28-day pack</i>	2	
<i>desogestrel/ethinyl estradiol/ethinyl estradiol 0.15-0.01-0.02mg tab 28-day pack</i>	2	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	2	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	2	
<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	2	
<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	2	
<i>enpresse tab 28-day pack</i>	2	
<i>enskyce tab 28-day pack</i>	2	
<i>estarylla tab 28-day pack</i>	2	
<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>	2	
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg tab 91-day pack</i>	2	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.035-1-1mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.05-1-1mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	2	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 91-day pack</i>	2	
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	
<i>ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25mg-mcg tab 28-day pack</i>	2	
<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35mg-mcg tab 28-day pack</i>	2	
<i>falmina tab 28-day pack</i>	2	
<i>finzala 24 fe chewable tab 28-day pack</i>	2	
<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>	2	
<i>haloette 0.120-0.015mg/24hr vaginal system</i>	2	
<i>iclevia tab 91-day pack</i>	2	
<i>introvale tab 91-day pack</i>	2	
<i>isibloom tab 28-day pack</i>	2	
<i>jasmiel tab 28-day pack</i>	2	
<i>jinteli 0.005-1mg tab</i>	1	
<i>juleber tab 28-day pack</i>	2	
<i>junel 1.5/30 tab 21-day pack</i>	2	
<i>junel 1/20 tab 21-day pack</i>	2	
<i>junel fe 24 1/20 28-day pack</i>	2	
<i>junel fe tab 1.5/30 28-day pack</i>	2	
<i>junel fe tab 1/20 28-day pack</i>	2	
<i>kariva tab 28-day pack</i>	2	
<i>kelnor 1mg-35mcg tab 28-day pack</i>	2	
<i>kelnor tab 1/50 28-day pack</i>	2	
<i>kurvelo tab 28-day pack</i>	2	
<i>larin 1.5/30 tab 21-day pack</i>	2	
<i>larin 1/20 tab 21-day pack</i>	2	
<i>larin fe tab 1.5/30 28-day pack</i>	2	
<i>larin fe tab 1/20 28-day pack</i>	2	
<i>leena tab 28-day pack</i>	2	
<i>lessina tab 28-day pack</i>	2	
<i>levonest tab 28-day pack</i>	2	
<i>levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack</i>	2	
<i>levora 0.15/30 tab 28-day pack</i>	2	
<i>loestrin fe tab 1/20 28-day pack</i>	2	
<i>loryna tab 28-day pack</i>	2	
<i>low-ogestrel tab 28-day pack</i>	2	
<i>lutera tab 28-day pack</i>	2	
<i>marlissa tab 28-day pack</i>	2	
<i>mibelas 24 fe chewable tab 28-day pack</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>microgestin 1.5/30 tab 21-day pack</i>	2	
<i>microgestin 1/20 tab 21-day pack</i>	2	
<i>microgestin fe tab 1.5/30 28-day pack</i>	2	
<i>microgestin fe tab 1/20 28-day pack</i>	2	
<i>mili tab 28-day pack</i>	2	
<i>mimvey 28-day pack</i>	1	
<i>necon 0.5/35 tab 28-day pack</i>	2	
<i>nikki tab 28-day pack</i>	2	
<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	2	
<i>nortrel 0.5/35 tab 28-day pack</i>	2	
<i>nortrel 1/35 tab 21-day pack</i>	2	
<i>nortrel 1/35 tab 28-day pack</i>	2	
<i>nortrel 7/7/7 tab 28-day pack</i>	2	
<i>nylia 1/35 tab 28-day pack</i>	2	
<i>nylia 7/7/7 tab 28-day pack</i>	2	
<i>ocella tab 28-day pack</i>	2	
<i>pimtrea tab 28-day pack</i>	2	
<i>portia tab 28-day pack</i>	2	
PREMPHASE 28-DAY PACK	3	
PREMPRO 0.3/1.5MG 28-DAY PACK	3	
PREMPRO 0.45/1.5MG 28-DAY PACK	3	
PREMPRO 0.625/2.5MG 28-DAY PACK	3	
PREMPRO 0.625/5MG 28-DAY PACK	3	
<i>reclipsen tab 28-day pack</i>	2	
<i>setlakin tab 91-day pack</i>	2	
<i>sprintec tab 28-day pack</i>	2	
<i>sronyx tab 28-day pack</i>	2	
<i>syeda tab 28-day pack</i>	2	
<i>tarina 24 fe tab 1/20 28-day pack</i>	2	
<i>tarina fe tab 1/20 28-day pack</i>	2	
<i>tri-estarylla tab 28-day pack</i>	2	
<i>tri-lo- estarylla tab 28-day pack</i>	2	
<i>tri-lo-sprintec tab 28-day pack</i>	2	
<i>tri-mili tab 28-day pack</i>	2	
<i>tri-sprintec tab 28-day pack</i>	2	
<i>tri-vylibra lo tab 28-day pack</i>	2	
<i>tri-vylibra tab 28-day pack</i>	2	
<i>trivora tab 28-day pack</i>	2	
<i>turqoz tab 28-day pack</i>	2	
VELIVET TAB 28-DAY PACK	2	
<i>vestura tab 3-0.02mg 28-day pack</i>	2	
<i>vienva tab 28-day pack</i>	2	
<i>vyfemla tab 28-day pack</i>	2	
<i>vylibra tab 28-day pack</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>xulane 150-35mcg/24hr patch</i>	2	
<i>zafemy 150-35mcg/24hr patch</i>	2	
<i>zovia 1mg-35mcg tab 28-day pack</i>	2	
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>	2	
<i>estradiol valerate 20mg/ml inj</i>	2	
<i>estradiol valerate 40mg/ml inj</i>	2	
<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	3	
PREMARIN 0.45MG TAB	3	
PREMARIN 0.625MG TAB	3	
PREMARIN 0.9MG TAB	3	
PREMARIN 1.25MG TAB	3	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
<i>ciprofloxacin 250mg tab</i>	1	
CIPROFLOXACIN 2MG/ML INJ	2	
<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>	2	
<i>levofloxacin 500mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>levofloxacin 500mg/100ml inj</i>	2	
<i>levofloxacin 750mg tab</i>	1	
<i>levofloxacin 750mg/150ml inj</i>	2	
MOXIFLOXACIN 1.6MG/ML INJ	2	
<i>moxifloxacin 400mg tab</i>	2	
GASTROINTESTINAL AGENTS		
GASTROINTESTINAL AGENTS, OTHER		
<i>cromolyn sodium 20mg/ml oral soln</i>	2	
<i>enulose 10gm/15ml oral soln</i>	1	
GATTEX 5MG INJ	5	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	5	NDS PA QL=30 EA/30 Days
REZDIFFRA 60MG TAB	5	NDS PA QL=30 EA/30 Days
REZDIFFRA 80MG TAB	5	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	5	NDS PA QL=12 EA/30 Days
GASTROINTESTINAL AGENTS - MISC.		
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium 750mg cap</i>	1	
<i>mesalamine 1200mg dr tab</i>	2	QL=120 EA/30 Days
<i>mesalamine 1gm rectal supp</i>	2	QL=30 EA/30 Days
<i>mesalamine 375mg er cap</i>	2	QL=120 EA/30 Days
<i>mesalamine 400mg dr cap</i>	2	QL=180 EA/30 Days
<i>mesalamine 66.7mg/ml enema</i>	2	QL=1800 ML/30 Days
SKYRIZI 180MG/1.2ML CARTRIDGE	5	PA QL=1.20 ML/56 Days
SKYRIZI 360MG/2.4ML CARTRIDGE	5	PA QL=2.40 ML/56 Days
<i>sulfasalazine 500mg dr tab</i>	1	
<i>sulfasalazine 500mg tab</i>	1	
GENITOURINARY AGENTS		
GENITOURINARY AGENTS, OTHER		
CYSTAGON 150MG CAP	3	
CYSTAGON 50MG CAP	3	
ELMIRON 100MG CAP	3	QL=90 EA/30 Days
<i>potassium citrate 10meq er tab</i>	2	
<i>potassium citrate 15meq er tab</i>	2	
<i>potassium citrate 5meq er tab</i>	2	
<i>sodium chloride 0.9% irrigation soln</i>	2	
GENITOURINARY AGENTS - MISCELLANEOUS		
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dutasteride 0.5mg cap</i>	1	
<i>finasteride 5mg tab</i>	1	
<i>silodosin 4mg cap</i>	1	
<i>silodosin 8mg cap</i>	1	
<i>tadalafil 2.5mg tab</i>	2	PA QL=30 EA/30 Days
<i>tadalafil 5mg tab</i>	2	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>	2	
<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>	2	QL=60 EA/30 Days
BRILINTA 60MG TAB	3	QL=60 EA/30 Days
BRILINTA 90MG TAB	3	QL=60 EA/30 Days
<i>cilostazol 100mg tab</i>	1	
<i>cilostazol 50mg tab</i>	1	
<i>clopidogrel 75mg tab</i>	1	
<i>dipyridamole 25mg tab</i>	1	
<i>dipyridamole 50mg tab</i>	1	
<i>dipyridamole 75mg tab</i>	1	
<i>prasugrel 10mg tab</i>	1	
<i>prasugrel 5mg tab</i>	1	
HEMATOPOIETIC AGENTS		
AGENTS FOR SICKLE CELL DISEASE		
<i>glutamine 5000mg powder for oral soln</i>	1	PA QL=180 EA/30 Days
HEMATOPOIETIC GROWTH FACTORS		
DOPTELET 20MG TAB	5	NDS PA QL=60 EA/30 Days
DOPTELET TAB 40MG DAILY DOSE PACK (10)	5	NDS PA QL=10 EA/5 Days
DOPTELET TAB 60MG DAILY DOSE PACK (15)	5	NDS PA QL=15 EA/5 Days
NIVESTYM 300MCG/0.5ML SYRINGE	5	NDS
NIVESTYM 300MCG/ML INJ	5	NDS
NIVESTYM 480MCG/0.8ML SYRINGE	5	NDS
NIVESTYM 480MCG/1.6ML INJ	5	NDS
NYVEPRIA 6MG/0.6ML SYRINGE	5	NDS
PROMACTA 12.5MG POWDER FOR ORAL SUSP	5	NDS PA QL=90 EA/30 Days
PROMACTA 12.5MG TAB	5	NDS PA QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PROMACTA 25MG POWDER FOR ORAL SUSP	5	NDS PA QL=180 EA/30 Days
PROMACTA 25MG TAB	5	NDS PA QL=30 EA/30 Days
PROMACTA 50MG TAB	5	NDS PA QL=60 EA/30 Days
PROMACTA 75MG TAB	5	NDS PA QL=60 EA/30 Days
RETACRIT 10000UNIT/ML INJ	3	PA
RETACRIT 20000UNIT/2ML INJ	3	PA
RETACRIT 20000UNIT/ML INJ	3	PA
RETACRIT 2000UNIT/ML INJ	3	PA
RETACRIT 3000UNIT/ML INJ	3	PA
RETACRIT 40000UNIT/ML INJ	3	PA
RETACRIT 4000UNIT/ML INJ	3	PA
STIMUFEND 6MG/0.6ML SYRINGE	5	NDS
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>tranexamic acid 650mg tab</i>	2	QL=30 EA/5 Days
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
NON-BARBITURATE HYPNOTICS		
<i>eszopiclone 1mg tab</i>	1	QL=30 EA/30 Days
<i>eszopiclone 2mg tab</i>	1	QL=30 EA/30 Days
<i>eszopiclone 3mg tab</i>	1	QL=30 EA/30 Days
<i>ramelteon 8mg tab</i>	2	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>	2	QL=30 EA/30 Days
<i>triazolam 0.25mg tab</i>	2	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	QL=30 EA/30 Days
<i>zolpidem tartrate 12.5mg er tab</i>	2	QL=30 EA/30 Days
<i>zolpidem tartrate 5mg tab</i>	1	QL=60 EA/30 Days
<i>zolpidem tartrate 6.25mg er tab</i>	2	QL=30 EA/30 Days
IMMUNOLOGICAL AGENTS		
ANGIOEDEMA (HAE) AGENTS		
BERINERT 500UNIT INJ	5	NDS PA
HAEGARDA 2000UNIT INJ	5	NDS PA
HAEGARDA 3000UNIT INJ	5	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	5	NDS PA QL=4 ML/28 Days
TAKHZYRO 300MG/2ML SYRINGE	5	NDS PA QL=4 ML/28 Days
LAXATIVES		
LAXATIVE COMBINATIONS		
GAVILYTE-C POWDER FOR ORAL SOLN	1	
<i>gavilyte-g powder for oral soln</i>	1	
<i>gavilyte-n powder for oral soln</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	1	
<i>peg 3350/electrolyte powder for oral soln</i>	1	
<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	1	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	1	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	1	
SUFLAVE SOLN PACK	3	
LAXATIVES - MISCELLANEOUS		
<i>constulose 10gm/15ml oral soln</i>	1	
<i>lactulose 667mg/ml oral soln</i>	1	
LINZESS 145MCG CAP	3	QL=30 EA/30 Days
LINZESS 290MCG CAP	3	QL=30 EA/30 Days
LINZESS 72MCG CAP	3	QL=30 EA/30 Days
<i>lubiprostone 24mcg cap</i>	2	QL=60 EA/30 Days
<i>lubiprostone 8mcg cap</i>	2	QL=60 EA/30 Days
MOVANTIK 12.5MG TAB	3	PA QL=30 EA/30 Days
MOVANTIK 25MG TAB	3	PA QL=30 EA/30 Days
TRULANCE 3MG TAB	3	QL=30 EA/30 Days
MEDICAL DEVICES AND SUPPLIES		
BANDAGES-DRESSINGS-TAPE		
GAUZE PAD (2 X 2)	2	
MISC. DEVICES		
ALCOHOL SWAB 1X1 (DIABETIC)	1	
PARENTERAL THERAPY SUPPLIES		
INSULIN PEN NEEDLE	2	
INSULIN SYRINGE	2	
INSULIN SYRINGE (DISP) U-100 0.3ML	2	
INSULIN SYRINGE (DISP) U-100 1/2ML	2	
INSULIN SYRINGE (DISP) U-100 1ML	2	
MIGRAINE PRODUCTS		
MIGRAINE PRODUCTS		
AJOVY 225MG/1.5ML AUTO-INJECTOR	3	PA QL=1.50 ML/30 Days
AJOVY 225MG/1.5ML SYRINGE	3	PA QL=1.50 ML/30 Days
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	2	PA QL=16 ML/30 Days
EMGALITY 100MG/ML SYRINGE	3	PA QL=3 ML/30 Days
EMGALITY 120MG/ML AUTO-INJECTOR	3	PA QL=2 ML/30 Days
EMGALITY 120MG/ML SYRINGE	3	PA QL=2 ML/30 Days
UBRELVY 100MG TAB	3	PA QL=16 EA/30 Days
UBRELVY 50MG TAB	3	PA QL=16 EA/30 Days
ZAVZPRET 10MG/ACT NASAL SPRAY	3	PA QL=6 EA/30 Days
SEROTONIN AGONISTS		
<i>naratriptan 1mg tab</i>	2	QL=18 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>naratriptan 2.5mg tab</i>	2	QL=18 EA/30 Days
<i>rizatriptan 10mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 10mg tab</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg tab</i>	1	QL=36 EA/60 Days
<i>sumatriptan 100mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 20mg/act nasal spray</i>	2	QL=12 EA/30 Days
<i>sumatriptan 25mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 4mg/0.5ml cartridge</i>	2	QL=5 ML/30 Days
<i>sumatriptan 50mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 5mg/act nasal spray</i>	2	QL=12 EA/30 Days
<i>sumatriptan 6mg/0.5ml auto-injector</i>	2	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml cartridge</i>	2	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml inj</i>	2	QL=5 ML/30 Days
<i>zolmitriptan 2.5mg tab</i>	2	QL=18 EA/30 Days
<i>zolmitriptan 5mg tab</i>	2	QL=18 EA/30 Days
MINERALS & ELECTROLYTES		
ELECTROLYTE MIXTURES		
ELECTROLYTE-148 SOLUTION	2	
GLUCOSE 100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	3	PA BvD
GLUCOSE 100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	3	PA BvD
<i>glucose 50mg/ml/potassium chloride 0.01meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 2.25mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 9mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.03meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 9mg/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 2mg/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	2	
GLUCOSE/SODIUM CHLORIDE 25MG/ML-4.5MG/ML INJ	2	
KCL/D5W/LR INJ 0.15%	3	
<i>kcl/nacl 20meq-0.45% inj</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>kcl/nacl 20meq-0.9% inj</i>	2	
<i>kcl/nacl 40meq-9% inj</i>	2	
PLASMA-LYTE A INJ	3	
TPN ELECTROLYTES INJ	2	PA BvD
MAGNESIUM		
<i>magnesium sulfate 500mg/ml inj</i>	2	
<i>magnesium sulfate 500mg/ml syringe</i>	2	
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>	2	
<i>klor-con 8meq er tab</i>	1	
<i>potassium chloride 1.33meq/ml oral soln</i>	2	
<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	2	
POTASSIUM CHLORIDE 15MEQ ER TAB	1	
<i>potassium chloride 15meq micro er tab</i>	1	
<i>potassium chloride 2.67meq/ml oral soln</i>	2	
<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>	2	
POTASSIUM CHLORIDE 20MEQ/100ML INJ	2	
<i>potassium chloride 2meq/ml (20ml) inj</i>	2	
<i>potassium chloride 2meq/ml inj</i>	2	
POTASSIUM CHLORIDE 40MEQ/100ML INJ	2	
<i>potassium chloride 8meq er cap</i>	1	
<i>potassium chloride 8meq er tab</i>	1	
SODIUM		
<i>sodium chloride 0.45% inj</i>	2	
<i>sodium chloride 0.9% inj</i>	2	
<i>sodium chloride 3% inj</i>	2	
<i>sodium chloride 50mg/ml inj</i>	2	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
CHEMET 100MG CAP	3	
<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>	2	
<i>trientine 250mg cap</i>	1	PA QL=240 EA/30 Days
IMMUNOMODULATORS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lenalidomide 10mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 15mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 2.5mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 20mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 25mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 5mg cap</i>	1	PA NSO QL=30 EA/30 Days
REZUROCK 200MG TAB	5	NDS PA QL=30 EA/30 Days
THALOMID 100MG CAP	5	NDS QL=30 EA/30 Days
THALOMID 50MG CAP	5	NDS QL=30 EA/30 Days
IMMUNOSUPPRESSIVE AGENTS		
ARCALYST 220MG INJ	5	NDS PA
<i>azathioprine 50mg tab</i>	1	PA BvD
BENLYSTA 200MG/ML AUTO-INJECTOR	5	NDS PA QL=4 ML/28 Days
BENLYSTA 200MG/ML SYRINGE	5	NDS PA QL=4 ML/28 Days
<i>cyclosporine 100mg cap</i>	2	PA BvD
<i>cyclosporine 25mg cap</i>	2	PA BvD
<i>cyclosporine modified 100mg cap</i>	2	PA BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	2	PA BvD
<i>cyclosporine modified 25mg cap</i>	2	PA BvD
<i>cyclosporine modified 50mg cap</i>	2	PA BvD
ENVARUSUS XR 0.75MG TAB	4	PA BvD
ENVARUSUS XR 1MG TAB	4	PA BvD
ENVARUSUS XR 4MG TAB	4	PA BvD
<i>everolimus 0.25mg tab</i>	2	PA BvD QL=60 EA/30 Days
<i>everolimus 0.5mg tab</i>	2	PA BvD QL=120 EA/30 Days
<i>everolimus 0.75mg tab</i>	2	PA BvD QL=60 EA/30 Days
<i>everolimus 1mg tab</i>	2	PA BvD QL=60 EA/30 Days
<i>gengraf 100mg cap</i>	2	PA BvD
<i>gengraf 100mg/ml oral soln</i>	2	PA BvD
<i>gengraf 25mg cap</i>	2	PA BvD
LITFULO 50MG CAP	5	NDS PA QL=28 EA/28 Days
LUPKYNIS 7.9MG CAP	5	NDS PA QL=180 EA/30 Days
<i>mycophenolate mofetil 200mg/ml oral susp</i>	2	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>	2	PA BvD
<i>mycophenolic acid 360mg dr tab</i>	2	PA BvD
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	4	PA BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	4	PA BvD
<i>sirolimus 0.5mg tab</i>	2	PA BvD
<i>sirolimus 1mg tab</i>	2	PA BvD
<i>sirolimus 1mg/ml oral soln</i>	2	PA BvD
<i>sirolimus 2mg tab</i>	2	PA BvD
<i>tacrolimus 0.5mg cap</i>	1	PA BvD
<i>tacrolimus 1mg cap</i>	1	PA BvD

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tacrolimus 5mg cap</i>	1	PA BvD
POTASSIUM REMOVING AGENTS		
<i>kionex 15gm/60ml susp</i>	2	
LOKELMA 10GM POWDER FOR ORAL SUSP	3	PA QL=90 EA/30 Days
LOKELMA 5GM POWDER FOR ORAL SUSP	3	PA QL=30 EA/30 Days
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	2	
<i>sps 15gm/60ml susp</i>	2	
VELTASSA 16.8GM POWDER FOR ORAL SUSP	3	PA QL=30 EA/30 Days
VELTASSA 1GM POWDER FOR ORAL SUSP	3	PA QL=120 EA/30 Days
VELTASSA 25.2GM POWDER FOR ORAL SUSP	3	PA QL=30 EA/30 Days
VELTASSA 8.4GM POWDER FOR ORAL SUSP	3	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>baclofen 5mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	
<i>chlorzoxazone 500mg tab</i>	2	
<i>cyclobenzaprine 10mg tab</i>	1	
<i>cyclobenzaprine 5mg tab</i>	1	
<i>metaxalone 800mg tab</i>	2	
<i>methocarbamol 500mg tab</i>	1	
<i>methocarbamol 750mg tab</i>	1	
<i>orphenadrine citrate 100mg er tab</i>	1	
<i>tizanidine 2mg cap</i>	2	
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg cap</i>	2	
<i>tizanidine 4mg tab</i>	1	
<i>tizanidine 6mg cap</i>	2	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium 100mg cap</i>	2	
<i>dantrolene sodium 25mg cap</i>	2	
<i>dantrolene sodium 50mg cap</i>	2	
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>	2	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>	2	QL=30.50 GM/30 Days
NEUROMUSCULAR AGENTS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ALS AGENTS		
RADICAVA 105MG/5ML ORAL SUSP	5	NDS PA QL=70 ML/28 Days
<i>riluzole 50mg tab</i>	2	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI 0.75MG/ML ORAL SOLN	5	NDS PA QL=240 ML/30 Days
NUTRIENTS		
CARBOHYDRATES		
DEXTROSE 10% INJ	2	PA BvD
<i>glucose 50mg/ml inj</i>	2	
PROTEINS		
CLINIMIX 4.25/10 INJ	3	PA BvD
CLINIMIX 4.25/5 INJ	3	PA BvD
CLINIMIX 5/15 INJ	3	PA BvD
CLINIMIX 5/20 INJ	3	PA BvD
<i>clinisol 15% inj</i>	2	PA BvD
<i>plenamine 15% inj</i>	2	PA BvD
PROSOL 20% INJ	4	PA BvD
TRAVASOL 10% INJ	3	PA BvD
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPHTHALMIC		
BETAXOLOL 0.5% OPHTH SOLN	1	
<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	2	
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>	2	
<i>timolol 0.25% ophth soln</i>	1	
<i>timolol 0.5% ophth gel</i>	2	
<i>timolol 0.5% ophth soln</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
APRACLONIDINE 0.5% OPHTH SOLN	2	
<i>brimonidine tartrate 0.1% ophth soln</i>	2	
<i>brimonidine tartrate 0.15% ophth soln</i>	2	
<i>brimonidine tartrate 0.2% ophth soln</i>	1	
SIMBRINZA 0.2-1% OPHTH SUSP	3	
OPHTHALMIC ANTI-INFECTIVES		
BACITRACIN 500UNIT/GM OPHTH OINTMENT	2	
<i>bacitracin/polymyxin b 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>ciprofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>erythromycin 0.5% ophth ointment</i>	1	QL=7 GM/7 Days
<i>gentamicin 0.3% ophth soln</i>	1	QL=10 ML/7 Days
<i>moxifloxacin 0.5% ophth soln</i>	1	QL=6 ML/7 Days
<i>neo-polycin 5mg-400unit-10000unit ophth ointment</i>	1	QL=7 GM/7 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>neomycin/bacitracin/polymyxin 5mg-400unit-10000unit ophth ointment</i>	1	QL=7 GM/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	1	QL=10 ML/7 Days
<i>ofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>polycin 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>polymyxin b/trimethoprim 10000 unit/ml-0.1% ophth soln</i>	1	QL=10 ML/7 Days
<i>sulfacetamide sodium 10% ophth soln</i>	1	QL=15 ML/7 Days
<i>tobramycin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
TRIFLURIDINE 1% OPHTH SOLN	2	QL=15 ML/7 Days
XDEMVIY 0.25% OPHTH SOLN	5	PA QL=10 ML/42 Days
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPHTH SOLN	3	QL=5 ML/30 Days
ROCKLATAN 0.02-0.005% OPHTH SOLN	3	QL=5 ML/30 Days
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	2	
<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>	2	
<i>fluorometholone 0.1% ophth susp</i>	1	
<i>loteprednol etabonate 0.5% ophth gel</i>	2	
<i>loteprednol etabonate 0.5% ophth susp</i>	2	
<i>neo-polycin hc ophth ointment</i>	2	
<i>neomycin/polymyxin/bacitracin/hydrocortisone ophth 1% ointment</i>	2	
<i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>	1	
PREDNISOLONE 1% OPHTH SOLN	1	
<i>prednisolone acetate 1% ophth susp</i>	1	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN	1	
OPHTHALMICS - MISC.		
<i>atropine sulfate 1% ophth soln</i>	2	
<i>azelastine 0.05% ophth soln</i>	1	
CROMOLYN SODIUM 4% OPHTH SOLN	1	
<i>cyclosporine 0.05% ophth susp</i>	1	QL=60 EA/30 Days
CYSTADROPS 0.37% OPHTH SOLN	5	NDS PA QL=20 ML/28 Days
CYSTARAN 0.44% OPHTH SOLN	5	NDS PA QL=60 ML/28 Days
<i>diclofenac sodium 0.1% ophth soln</i>	1	QL=20 ML/365 Days
<i>dorzolamide 2% ophth soln</i>	1	
FLURBIPROFEN SODIUM 0.03% OPHTH SOLN	2	
<i>ketorolac tromethamine 0.4% ophth soln</i>	1	QL=20 ML/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>pilocarpine 1% ophth soln</i>	1	
<i>pilocarpine 2% ophth soln</i>	1	
<i>pilocarpine 4% ophth soln</i>	1	
XIIDRA 5% OPHTH SOLN	3	QL=60 EA/30 Days
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03% ophth soln</i>	2	QL=5 ML/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 ML/30 Days
LUMIGAN 0.01% OPHTH SOLN	3	QL=5 ML/30 Days
<i>travoprost 0.004% ophth soln</i>	2	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>	2	
<i>fluocinolone acetonide 0.01% otic soln</i>	2	
<i>ofloxacin 0.3% otic soln</i>	1	
OTIC COMBINATIONS		
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	2	
<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	5	NDS PA
OCTAGAM 1GM/20ML INJ	5	NDS PA
OCTAGAM 2GM/20ML INJ	5	NDS PA
PRIVIGEN 20GM/200ML INJ	5	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>	2	
<i>ampicillin 100mg/ml inj</i>	2	
AMPICILLIN 125MG INJ	2	
<i>ampicillin 500mg cap</i>	1	
NATURAL PENICILLINS		
BICILLIN L-A 1200000UNIT/2ML SYRINGE	3	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BICILLIN L-A 2400000UNIT/4ML SYRINGE	3	
BICILLIN L-A 600000UNIT/ML SYRINGE	3	
<i>penicillin g potassium 1000000unit/ml inj</i>	2	
PENICILLIN G SODIUM 100000UNIT/ML INJ	2	
<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>	2	
<i>ampicillin/sulbactam 1000-500mg inj</i>	2	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	2	
<i>piperacillin/tazobactam 2000-250mg inj</i>	2	
<i>piperacillin/tazobactam 3000-375mg inj</i>	2	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	2	
<i>piperacillin/tazobactam 4000-500mg inj</i>	2	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	
<i>nafcillin 100mg/ml inj</i>	2	
<i>nafcillin 1gm inj</i>	2	
<i>nafcillin 2gm inj</i>	2	
<i>oxacillin 100mg/ml inj</i>	2	
<i>oxacillin 1gm inj</i>	2	
<i>oxacillin 2gm inj</i>	2	
PROGESTINS		
PROGESTINS		
<i>camila 0.35mg tab 28-day pack</i>	2	
<i>deblitane 0.35mg tab 28-day pack</i>	2	
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	3	
<i>errin 0.35mg tab 28-day pack</i>	2	
<i>gallifrey 5mg tab</i>	1	
<i>heather 0.35mg 28-day pack</i>	2	
<i>incassia 0.35mg tab 28-day pack</i>	2	
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	3	
<i>lyleq 0.35mg tab 28-day pack</i>	2	
<i>lyza 0.35mg tab 28-day pack</i>	2	
<i>medroxyprogesterone acetate 10mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>medroxyprogesterone acetate 150mg/ml inj</i>	2	
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	2	
<i>medroxyprogesterone acetate 2.5mg tab</i>	1	
<i>medroxyprogesterone acetate 5mg tab</i>	1	
MEGESTROL ACETATE 125MG/ML SUSP	2	PA
NEXPLANON 68MG IMPLANT	3	
<i>nora-be 0.35mg tab 28-day pack</i>	2	
<i>norethindrone 0.35mg 28-day pack</i>	2	
<i>norethindrone acetate 5mg tab</i>	1	
<i>progesterone 100mg cap</i>	1	
<i>progesterone 200mg cap</i>	1	
<i>sharobel 0.35mg tab 28-day pack</i>	2	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium 333mg dr tab</i>	2	
<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	
<i>donepezil 23mg tab</i>	2	QL=30 EA/30 Days
<i>donepezil 5mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 5mg tab</i>	1	
<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>	2	QL=30 EA/30 Days
<i>galantamine hydrobromide 24mg er cap</i>	2	QL=30 EA/30 Days
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	2	QL=200 ML/30 Days
<i>galantamine hydrobromide 8mg er cap</i>	2	QL=30 EA/30 Days
<i>memantine 10mg tab</i>	1	
<i>memantine 14mg er cap</i>	2	QL=30 EA/30 Days
<i>memantine 21mg er cap</i>	2	QL=30 EA/30 Days
<i>memantine 28mg er cap</i>	2	QL=30 EA/30 Days
<i>memantine 2mg/ml oral soln</i>	2	QL=300 ML/30 Days
<i>memantine 5mg tab</i>	1	
<i>memantine 7mg er cap</i>	2	QL=30 EA/30 Days
<i>rivastigmine 1.5mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 13.3mg/24hr patch</i>	2	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>	2	QL=30 EA/30 Days
<i>rivastigmine 6mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 9.5mg/24hr patch</i>	2	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12MG TAB	5	NDS PA QL=120 EA/30 Days
AUSTEDO 6MG TAB	5	NDS PA QL=120 EA/30 Days
AUSTEDO 9MG TAB	5	NDS PA QL=120 EA/30 Days
AUSTEDO XR 12MG TAB	5	NDS PA QL=60 EA/30 Days
AUSTEDO XR 18MG TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO XR 24MG TAB	5	NDS PA QL=60 EA/30 Days
AUSTEDO XR 30MG TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO XR 36MG TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO XR 42MG TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO XR 48MG TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO XR 6-12-24MG TAB TITRATION PACK (42)	5	NDS PA QL=42 EA/28 Days
AUSTEDO XR 6MG TAB	5	NDS PA QL=90 EA/30 Days
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATION PACK	5	NDS PA QL=28 EA/28 Days
INGREZZA 40MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 40MG SPRINKLE CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 60MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 60MG SPRINKLE CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 80MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 80MG SPRINKLE CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA CAP THERAPY PACK (28)	5	NDS PA QL=28 EA/28 Days
<i>tetrabenazine 12.5mg tab</i>	1	QL=90 EA/30 Days
<i>tetrabenazine 25mg tab</i>	1	QL=120 EA/30 Days
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	5	NDS QL=1 EA/28 Days
AVONEX 30MCG/0.5ML SYRINGE	5	NDS QL=1 EA/28 Days
BETASERON 0.3MG INJ	5	NDS QL=14 EA/28 Days
<i>dalfampridine 10mg er tab</i>	1	QL=60 EA/30 Days
<i>dimethyl fumarate 120mg dr cap</i>	1	QL=14 EA/7 Days
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	1	QL=60 EA/180 Days
<i>dimethyl fumarate 240mg dr cap</i>	1	QL=60 EA/30 Days
<i>fingolimod 0.5mg cap</i>	1	QL=30 EA/30 Days
<i>glatiramer acetate 20mg/ml syringe</i>	1	QL=30 ML/30 Days
<i>glatiramer acetate 40mg/ml syringe</i>	1	QL=12 ML/28 Days
<i>glatopa 20mg/ml syringe</i>	1	QL=30 ML/30 Days
<i>glatopa 40mg/ml syringe</i>	1	QL=12 ML/28 Days
KESIMPTA 20MG/0.4ML PEN INJ	5	NDS QL=1.20 ML/28 Days
MAYZENT 0.25MG TAB	5	NDS QL=120 EA/30 Days
MAYZENT 1MG TAB	5	NDS QL=30 EA/30 Days
MAYZENT 2MG TAB	5	NDS QL=30 EA/30 Days
MAYZENT TAB STARTER PACK (12)	5	NDS QL=12 EA/28 Days
MAYZENT TAB STARTER PACK (7)	3	QL=7 EA/28 Days
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	5	NDS QL=1 ML/28 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PLEGRIDY 125MCG/0.5ML SYRINGE	5	NDS QL=1 ML/28 Days
<i>teriflunomide 14mg tab</i>	1	QL=30 EA/30 Days
<i>teriflunomide 7mg tab</i>	1	QL=30 EA/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
NUEDEXTA 20-10MG CAP	3	PA QL=60 EA/30 Days
PIMOZIDE 1MG TAB	2	
PIMOZIDE 2MG TAB	2	
SMOKING DETERRENTS		
<i>bupropion 150mg sr (12hr) tab</i>	1	
NICOTROL 10MG/ML NASAL INHALER	3	
<i>varenicline 0.5mg tab</i>	2	QL=56 EA/28 Days
<i>varenicline 0.5mg/1mg first month pack (53)</i>	2	QL=53 EA/28 Days
<i>varenicline 1mg tab</i>	2	QL=56 EA/28 Days
<i>varenicline 1mg tab pack (56)</i>	2	QL=56 EA/28 Days
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
PROLASTIN 1000MG INJ	5	NDS PA
ZEMAIRA 1000MG INJ	5	NDS PA
CYSTIC FIBROSIS AGENTS		
CAYSTON 75MG/ML INH SOLN	5	NDS PA QL=84 ML/28 Days
KALYDECO 13.4MG ORAL GRANULES	5	NDS PA QL=56 EA/28 Days
KALYDECO 150MG TAB	5	NDS PA QL=60 EA/30 Days
KALYDECO 25MG ORAL GRANULES	5	NDS PA QL=60 EA/30 Days
KALYDECO 5.8MG ORAL GRANULES	5	NDS PA QL=56 EA/28 Days
KALYDECO 50MG ORAL GRANULES	5	NDS PA QL=60 EA/30 Days
KALYDECO 75MG ORAL GRANULES	5	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG ORAL GRANULES	5	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG TAB	5	NDS PA QL=120 EA/30 Days
ORKAMBI 125-200MG TAB	5	NDS PA QL=120 EA/30 Days
ORKAMBI 188-150MG ORAL GRANULES	5	NDS PA QL=60 EA/30 Days
ORKAMBI 94-75MG ORAL GRANULES	5	NDS PA QL=56 EA/28 Days
PULMOZYME 1MG/ML INH SOLN	5	NDS PA BvD QL=150 ML/30 Days
SYMDEKO TAB 4-WEEK PACK (56)	5	NDS PA QL=60 EA/30 Days
SYMDEKO TAB 50-75MG/75MG PACK (56)	5	NDS PA QL=60 EA/30 Days
TRIKAFTA 100-50-75MG/150MG TAB PACK (84)	5	NDS PA QL=90 EA/30 Days
TRIKAFTA 100-50-75MG/75MG GRANULES PACK (56)	5	NDS PA QL=56 EA/28 Days
TRIKAFTA 50-37.5-25MG/75MG TAB PACK (84)	5	NDS PA QL=84 EA/28 Days
TRIKAFTA 80-40-60MG/59.5MG GRANULES PACK (56)	5	NDS PA QL=56 EA/28 Days
PULMONARY FIBROSIS AGENTS		
OFEV 100MG CAP	5	NDS PA QL=60 EA/30 Days
OFEV 150MG CAP	5	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>pirfenidone 801mg tab</i>	1	PA QL=90 EA/30 Days
RESPIRATORY TRACT AGENTS		
ANTI-HISTAMINES		
<i>cyproheptadine 0.4mg/ml oral soln</i>	1	
<i>cyproheptadine 4mg tab</i>	1	
<i>desloratadine 5mg tab</i>	2	
<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	5	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	5	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	5	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	5	NDS PA QL=1 EA/21 Days
WINREVAIR 45MG INJ (2 VIAL PACK)	5	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ	5	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ (2 VIAL PACK)	5	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	2	
THEOPHYLLINE 200MG ER TAB	2	
<i>theophylline 300mg er tab</i>	2	
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450mg er tab</i>	2	
<i>theophylline 600mg er tab</i>	1	
SLEEP DISORDER AGENTS		
SLEEP DISORDERS, OTHER		
LUMRYZ 28-DAY STARTER PACK (28)	5	NDS PA QL=28 EA/28 Days
LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	5	NDS PA QL=30 EA/30 Days
LUMRYZ 6GM GRANULES FOR ORAL SUSP	5	NDS PA QL=30 EA/30 Days
LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	5	NDS PA QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LUMRYZ 9GM GRANULES FOR ORAL SUSP	5	NDS PA QL=30 EA/30 Days
SODIUM OXYBATE 500MG/ML ORAL SOLN	5	NDS PA QL=540 ML/30 Days
SUNOSI 150MG TAB	3	PA QL=30 EA/30 Days
SUNOSI 75MG TAB	3	PA QL=30 EA/30 Days
SULFONAMIDES		
SULFONAMIDES		
<i>sulfadiazine 500mg tab</i>	2	
<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>	2	
<i>doxycycline hyclate 100mg cap</i>	1	
<i>doxycycline hyclate 100mg tab</i>	1	
<i>doxycycline hyclate 20mg tab</i>	1	
<i>doxycycline hyclate 50mg cap</i>	1	
<i>doxycycline monohydrate 100mg cap</i>	1	
<i>doxycycline monohydrate 100mg tab</i>	1	
<i>doxycycline monohydrate 50mg cap</i>	1	
<i>doxycycline monohydrate 50mg tab</i>	1	
<i>doxycycline monohydrate 5mg/ml oral susp</i>	2	
<i>minocycline 100mg cap</i>	1	
<i>minocycline 50mg cap</i>	1	
<i>minocycline 75mg cap</i>	1	
<i>tetracycline 250mg cap</i>	2	
<i>tetracycline 500mg cap</i>	2	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole 10mg tab</i>	1	
<i>methimazole 5mg tab</i>	1	
<i>propylthiouracil 50mg tab</i>	1	
THYROID HORMONES		
<i>euthyrox 100mcg tab</i>	1	
<i>euthyrox 112mcg tab</i>	1	
<i>euthyrox 125mcg tab</i>	1	
<i>euthyrox 137mcg tab</i>	1	
<i>euthyrox 150mcg tab</i>	1	
<i>euthyrox 175mcg tab</i>	1	
<i>euthyrox 200mcg tab</i>	1	
<i>euthyrox 25mcg tab</i>	1	
<i>euthyrox 50mcg tab</i>	1	
<i>euthyrox 75mcg tab</i>	1	
<i>euthyrox 88mcg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>levothyroxine sodium 100mcg tab</i>	1	
<i>levothyroxine sodium 112mcg tab</i>	1	
<i>levothyroxine sodium 125mcg tab</i>	1	
<i>levothyroxine sodium 137mcg tab</i>	1	
<i>levothyroxine sodium 150mcg tab</i>	1	
<i>levothyroxine sodium 175mcg tab</i>	1	
<i>levothyroxine sodium 200mcg tab</i>	1	
<i>levothyroxine sodium 25mcg tab</i>	1	
<i>levothyroxine sodium 300mcg tab</i>	1	
<i>levothyroxine sodium 50mcg tab</i>	1	
<i>levothyroxine sodium 75mcg tab</i>	1	
<i>levothyroxine sodium 88mcg tab</i>	1	
<i>levoxyl 100mcg tab</i>	1	
<i>levoxyl 112mcg tab</i>	1	
<i>levoxyl 125mcg tab</i>	1	
<i>levoxyl 137mcg tab</i>	1	
<i>levoxyl 150mcg tab</i>	1	
<i>levoxyl 175mcg tab</i>	1	
<i>levoxyl 200mcg tab</i>	1	
<i>levoxyl 25mcg tab</i>	1	
<i>levoxyl 50mcg tab</i>	1	
<i>levoxyl 75mcg tab</i>	1	
<i>levoxyl 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	1	
<i>liothyronine sodium 50mcg tab</i>	1	
<i>liothyronine sodium 5mcg tab</i>	1	
SYNTHROID 100MCG TAB	3	
SYNTHROID 112MCG TAB	3	
SYNTHROID 125MCG TAB	3	
SYNTHROID 137MCG TAB	3	
SYNTHROID 150MCG TAB	3	
SYNTHROID 175MCG TAB	3	
SYNTHROID 200MCG TAB	3	
SYNTHROID 25MCG TAB	3	
SYNTHROID 300MCG TAB	3	
SYNTHROID 50MCG TAB	3	
SYNTHROID 75MCG TAB	3	
SYNTHROID 88MCG TAB	3	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	3	VAC
ADACEL SYRINGE	3	VAC
BOOSTRIX INJ	3	VAC
BOOSTRIX SYRINGE	3	VAC
DAPTACEL INJ	3	
INFANRIX SYRINGE	3	
KINRIX SYRINGE	3	
PEDIARIX SYRINGE	3	
PENTACEL 96-30-68UNIT/ML INJ	3	
QUADRACEL INJ	3	
QUADRACEL SYRINGE	3	
TENIVAC 4-10UNIT/ML INJ	3	PA BvD VAC
TENIVAC 4-10UNIT/ML SYRINGE	3	PA BvD VAC
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>dicyclomine 10mg cap</i>	1	
<i>dicyclomine 20mg tab</i>	1	
<i>dicyclomine 2mg/ml oral soln</i>	2	
<i>glycopyrrolate 1mg tab</i>	2	
<i>glycopyrrolate 2mg tab</i>	2	
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>	2	
PROTON PUMP INHIBITORS		
<i>dexlansoprazole 30mg dr cap</i>	4	
<i>dexlansoprazole 60mg dr cap</i>	4	
<i>esomeprazole 20mg dr cap</i>	1	
<i>esomeprazole 40mg dr cap</i>	1	
<i>lansoprazole 15mg dr cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<i>rabeprazole sodium 20mg dr tab</i>	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>darifenacin 15mg er tab</i>	2	
<i>darifenacin 7.5mg er tab</i>	2	
<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>solifenacin succinate 10mg tab</i>	1	
<i>solifenacin succinate 5mg tab</i>	1	
<i>tolterodine tartrate 1mg tab</i>	1	QL=60 EA/30 Days
<i>tolterodine tartrate 2mg er cap</i>	1	QL=30 EA/30 Days
<i>tolterodine tartrate 2mg tab</i>	1	QL=60 EA/30 Days
<i>tolterodine tartrate 4mg er cap</i>	1	QL=30 EA/30 Days
<i>tropium chloride 20mg tab</i>	1	QL=60 EA/30 Days
<i>tropium chloride 60mg er cap</i>	2	QL=30 EA/30 Days
URINARY ANTISPASMODICS		
<i>bethanechol chloride 10mg tab</i>	1	
<i>bethanechol chloride 25mg tab</i>	1	
<i>bethanechol chloride 50mg tab</i>	1	
<i>bethanechol chloride 5mg tab</i>	1	
<i>flavoxate 100mg tab</i>	2	
<i>mirabegron 25mg er tab</i>	2	QL=30 EA/30 Days
<i>mirabegron 50mg er tab</i>	2	QL=30 EA/30 Days
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ	3	
BCG LIVE TICE STRAIN 50MG INJ	3	VAC
BEXSERO SYRINGE	3	VAC
HIBERIX 10MCG INJ	3	
MENACTRA INJ	3	VAC
MENQUADFI INJ	3	VAC
MENVEO INJ	3	VAC
PEDVAXHIB 7.5MCG/0.5ML INJ	3	
PENBRAYA INJ	3	VAC

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TRUMENBA SYRINGE	3	VAC
TYPHIM VI 25MCG/0.5ML INJ	3	VAC
TYPHIM VI 25MCG/0.5ML SYRINGE	3	VAC
VAXCHORA SUSP	3	VAC
VIRAL VACCINES		
ABRYSVO 120MCG/0.5ML INJ	3	VAC
AREXVY 120MCG/0.5ML INJ	3	VAC
ENGERIX-B 10MCG/0.5ML SYRINGE	3	PA BvD VAC
ENGERIX-B 20MCG/ML INJ	3	PA BvD VAC
ENGERIX-B 20MCG/ML SYRINGE	3	PA BvD VAC
GARDASIL 9 INJ	3	VAC
GARDASIL 9 SYRINGE	3	VAC
HAVRIX 1440ELU/ML SYRINGE	3	VAC
HAVRIX 720ELU/0.5ML SYRINGE	3	
HEPLISAV-B 20MCG/0.5ML SYRINGE	3	PA BvD VAC
IMOVAX 2.5UNIT/ML INJ	3	PA BvD VAC
IPOL INJ	3	VAC
IXCHIQ INJ	3	VAC
IXIARO 0.012MG/ML SYRINGE	3	VAC
JYNNEOS 0.5ML INJ	3	VAC
M-M-R II INJ	3	VAC
MRESVIA 50MCG/0.5ML SYRINGE	3	VAC
PRIORIX INJ	3	VAC
PROQUAD INJ	3	
RABAVERT 2.5UNIT/ML INJ	3	PA BvD VAC
RECOMBIVAX 10MCG/ML INJ	3	PA BvD VAC
RECOMBIVAX 10MCG/ML SYRINGE	3	PA BvD VAC
RECOMBIVAX 40MCG/ML INJ	3	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML INJ	3	PA BvD VAC
RECOMBIVAX 5MCG/0.5ML SYRINGE	3	PA BvD VAC
ROTARIX 667000UNIT/ML ORAL SUSP	3	
ROTATEQ ORAL SUSP	3	
SHINGRIX 50MCG/0.5ML INJ	3	QL=2 EA/365 DaysVAC
TICOVAC 1.2MCG/0.25ML SYRINGE	3	
TICOVAC 2.4MCG/0.5ML SYRINGE	3	VAC
TWINRIX SYRINGE	3	VAC
VAQTA 25UNIT/0.5ML INJ	3	
VAQTA 25UNIT/0.5ML SYRINGE	3	
VAQTA 50UNIT/ML INJ	3	VAC
VAQTA 50UNIT/ML SYRINGE	3	VAC
VARIVAX 1350PFU/0.5ML INJ	3	VAC
YF-VAX INJ	3	VAC
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<i>clindamycin 2% vaginal cream</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<i>estradiol 0.01mg vaginal insert</i>	2	
PREMARIN 0.625MG/GM VAGINAL CREAM	3	
<i>yuvafem 10mcg vaginal insert</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

A					
<i>abacavir 20mg/ml oral soln</i>	53	<i>acitretin 17.5mg cap</i>	63	ADVAIR 45-21MCG/ACT HFA INHALER	20
<i>abacavir 300mg tab</i>	53	<i>acitretin 25mg cap</i>	63	AJOVY 225MG/1.5ML	76
<i>abacavir/lamivudine 600-300mg tab</i>	53	ACTEMRA	13	AUTO-INJECTOR	
ABELCET 5MG/ML INJ	33	162MG/0.9ML		AJOVY 225MG/1.5ML	76
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	53	AUTO-INJECTOR		SYRINGE	
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	53	ACTEMRA	13	AKEEGA 500-100MG	42
ABILIFY MAINTENA 300MG INJ	53	162MG/0.9ML SYRINGE		TAB	
ABILIFY MAINTENA 300MG SYRINGE	53	ACTHIB INJ	92	AKEEGA 500-50MG TAB	42
ABILIFY MAINTENA 400MG INJ	53	ACTIMMUNE	47	<i>ala-cort 1% cream</i>	64
ABILIFY MAINTENA 400MG SYRINGE	53	2000000UNIT/0.5ML INJ		<i>albendazole 200mg tab</i>	17
<i>abiraterone acetate 250mg tab</i>	42	<i>acyclovir 200mg cap</i>	56	<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	20
ABRYSSVO	93	<i>acyclovir 400mg tab</i>	56	<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	20
<i>acamprosate calcium 333mg dr tab</i>	85	<i>acyclovir 40mg/ml oral susp</i>	56	<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	20
<i>acarbose 100mg tab</i>	30	<i>acyclovir 5% ointment</i>	65	<i>albuterol 1.25mg/3ml neb soln</i>	20
<i>acarbose 25mg tab</i>	30	<i>acyclovir 50mg/ml inj</i>	56	<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	20
<i>acarbose 50mg tab</i>	30	<i>acyclovir 800mg tab</i>	56	<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	20
<i>accutane 10mg cap</i>	62	ADACEL INJ	91	<i>albuterol 2mg tab</i>	20
<i>accutane 20mg cap</i>	62	ADACEL SYRINGE	91	<i>albuterol 4mg tab</i>	20
<i>accutane 40mg cap</i>	62	ADALIMUMAB-AATY 100MG/ML (0.2ML) SYRINGE	13	<i>albuterol 5mg/ml (0.5%) inh soln</i>	20
<i>acebutolol 200mg cap</i>	56	ADALIMUMAB-AATY 100MG/ML (0.4ML) SYRINGE	13	ALCLOMETASONE 0.05% OINT	64
<i>acebutolol 400mg cap</i>	56	ADALIMUMAB-AATY 100MG/ML	13	<i>alclometasone dipropionate 0.05% cream</i>	64
<i>acetazolamide 125mg tab</i>	66	AUTO-INJECTOR (0.4ML)		ALCOHOL SWAB 1X1 (DIABETIC)	76
<i>acetazolamide 250mg tab</i>	66	ADALIMUMAB-AATY 100MG/ML	13	ALECENSA 150MG CAP	42
<i>acetazolamide 500mg er cap</i>	66	AUTO-INJECTOR (0.8ML)		<i>alendronate sodium 10mg tab</i>	67
<i>acetic acid 2% otic soln</i>	83	<i>adefovir dipivoxil 10mg tab</i>	55	<i>alendronate sodium 35mg tab</i>	67
<i>acetylcysteine 100mg/ml inh soln</i>	61	ADEMPAS 0.5MG TAB	88	<i>alendronate sodium 70mg tab</i>	67
<i>acetylcysteine 200mg/ml inh soln</i>	61	ADEMPAS 1.5MG TAB	88	<i>alfuzosin 10mg er tab</i>	73
<i>acitretin 10mg cap</i>	63	ADEMPAS 1MG TAB	88	<i>aliskiren 150mg tab</i>	38
		ADEMPAS 2.5MG TAB	88	<i>aliskiren 300mg tab</i>	38
		ADEMPAS 2MG TAB	88		
		ADVAIR 115-21MCG HFA INHALER	20		
		ADVAIR 230-21MCG HFA INHALER	20		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>allopurinol 100mg tab</i>	74	<i>amlodipine/benazepril</i>	36	<i>amoxicillin 25mg/ml oral</i>	83
<i>allopurinol 300mg tab</i>	74	<i>10-20mg cap</i>		<i>susp</i>	
<i>alosetron 0.5mg tab</i>	32	<i>amlodipine/benazepril</i>	36	<i>amoxicillin 40mg/ml oral</i>	83
<i>alosetron 1mg tab</i>	32	<i>10-40mg cap</i>		<i>susp</i>	
<i>alprazolam 0.25mg tab</i>	17	<i>amlodipine/benazepril</i>	36	<i>amoxicillin 500mg cap</i>	83
<i>alprazolam 0.5mg tab</i>	17	<i>2.5-10mg cap</i>		<i>amoxicillin 500mg tab</i>	83
<i>alprazolam 1mg tab</i>	17	<i>amlodipine/benazepril</i>	36	<i>amoxicillin 50mg/ml oral</i>	83
<i>alprazolam 2mg tab</i>	17	<i>5-10mg cap</i>		<i>susp</i>	
<i>altavera tab 28-day pack</i>	68	<i>amlodipine/benazepril</i>	36	<i>amoxicillin 80mg/ml oral</i>	83
ALUNBRIG 180MG TAB	43	<i>5-20mg cap</i>		<i>susp</i>	
ALUNBRIG 30MG TAB	43	<i>amlodipine/benazepril</i>	37	<i>amoxicillin 875mg tab</i>	83
ALUNBRIG 90MG TAB	43	<i>5-40mg cap</i>		<i>amoxicillin/clavulanate</i>	84
ALUNBRIG TAB	43	<i>amlodipine/olmesartan</i>	37	<i>250-125mg tab</i>	
INITIATION PACK (30)		<i>medoxomil 10-20mg tab</i>		<i>amoxicillin/clavulanate</i>	84
ALVESCO 160MCG	19	<i>amlodipine/olmesartan</i>	37	<i>500-125mg tab</i>	
INHALER		<i>medoxomil 10-40mg tab</i>		<i>amoxicillin/clavulanate</i>	84
ALVESCO 80MCG	19	<i>amlodipine/olmesartan</i>	37	<i>875-125mg tab</i>	
INHALER		<i>medoxomil 5-20mg tab</i>		<i>amoxicillin/k clavulanate</i>	84
<i>alyacen 1/35 tab 28-day</i>	68	<i>amlodipine/olmesartan</i>	37	<i>200-28.5mg/5ml oral</i>	
<i>pack</i>		<i>medoxomil 5-40mg tab</i>		<i>susp</i>	
<i>alyq 20mg tab</i>	88	<i>amlodipine/valsartan</i>	37	<i>amoxicillin/k clavulanate</i>	84
<i>amantadine 100mg cap</i>	48	<i>10-160mg tab</i>		<i>250-62.5mg/5ml oral</i>	
<i>amantadine 10mg/ml oral</i>	48	<i>amlodipine/valsartan</i>	37	<i>susp</i>	
<i>soln</i>		<i>10-320mg tab</i>		<i>amoxicillin/k clavulanate</i>	84
<i>ambrisentan 10mg tab</i>	88	<i>amlodipine/valsartan</i>	37	<i>400-57mg/5ml oral susp</i>	
<i>ambrisentan 5mg tab</i>	88	<i>5-160mg tab</i>		<i>amoxicillin/k clavulanate</i>	84
<i>amikacin 250mg/ml inj</i>	12	<i>amlodipine/valsartan</i>	37	<i>600-42.9mg/5ml oral</i>	
<i>amiloride 5mg tab</i>	66	<i>5-320mg tab</i>		<i>susp</i>	
AMILORIDE/HYDROCH	66	<i>ammonium lactate 12%</i>	65	<i>amphetamine/dextroamph</i>	11
LOROTHIAZIDE 5-50MG		<i>cream</i>		<i>etamine 10mg er cap</i>	
TAB		<i>ammonium lactate 12%</i>	65	<i>amphetamine/dextroamph</i>	11
<i>amiodarone 100mg tab</i>	18	<i>lotion</i>		<i>etamine 10mg tab</i>	
<i>amiodarone 200mg tab</i>	18	<i>amnesteem 10mg cap</i>	62	<i>amphetamine/dextroamph</i>	11
<i>amiodarone 400mg tab</i>	18	<i>amnesteem 20mg cap</i>	62	<i>etamine 12.5mg tab</i>	
<i>amitriptyline 100mg tab</i>	28	<i>amnesteem 40mg cap</i>	62	<i>amphetamine/dextroamph</i>	11
<i>amitriptyline 10mg tab</i>	28	<i>amoxapine 100mg tab</i>	28	<i>etamine 15mg er cap</i>	
<i>amitriptyline 150mg tab</i>	28	<i>amoxapine 150mg tab</i>	28	<i>amphetamine/dextroamph</i>	11
<i>amitriptyline 25mg tab</i>	28	<i>amoxapine 25mg tab</i>	28	<i>etamine 15mg tab</i>	
<i>amitriptyline 50mg tab</i>	28	<i>amoxapine 50mg tab</i>	28	<i>amphetamine/dextroamph</i>	11
<i>amitriptyline 75mg tab</i>	28	AMOXICILLIN 125MG	83	<i>etamine 20mg er cap</i>	
<i>amlodipine 10mg tab</i>	58	CHEW TAB		<i>amphetamine/dextroamph</i>	11
<i>amlodipine 2.5mg tab</i>	58	<i>amoxicillin 250mg cap</i>	83	<i>etamine 20mg tab</i>	
<i>amlodipine 5mg tab</i>	58	AMOXICILLIN 250MG	83	<i>amphetamine/dextroamph</i>	11
		CHEW TAB		<i>etamine 25mg er cap</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>amphetamine/dextroamphetamine 30mg er cap</i>	11	AREXVY 120MCG/0.5ML INJ	93	ASMANEX 110MCG (30ACT) TWISTHALER	19
<i>amphetamine/dextroamphetamine 30mg tab</i>	11	<i>arformoterol tartrate 15mcg/2ml neb soln</i>	20	ASMANEX 200MCG HFA INHALER	19
<i>amphetamine/dextroamphetamine 5mg er cap</i>	11	ARIKAYCE 590MG/8.4ML INH SUSP	12	ASMANEX 220MCG (120ACT) TWISTHALER	19
<i>amphetamine/dextroamphetamine 5mg tab</i>	11	<i>aripiprazole 10mg odt</i>	53	ASMANEX 220MCG (30ACT) TWISTHALER	19
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	11	<i>aripiprazole 10mg tab</i>	53	ASMANEX 220MCG (60ACT) TWISTHALER	19
AMPHOTERICIN B 50MG INJ	33	<i>aripiprazole 15mg odt</i>	53	ASMANEX 50MCG HFA INHALER	19
<i>ampicillin 1000mg inj</i>	83	<i>aripiprazole 15mg tab</i>	53	<i>aspirin/dipyridamole 25-200mg er cap</i>	74
<i>ampicillin 100mg/ml inj</i>	83	<i>aripiprazole 1mg/ml oral soln</i>	53	<i>atazanavir 150mg cap</i>	53
AMPICILLIN 125MG INJ	83	<i>aripiprazole 20mg tab</i>	53	<i>atazanavir 200mg cap</i>	53
<i>ampicillin 500mg cap</i>	83	<i>aripiprazole 2mg tab</i>	53	<i>atazanavir 300mg cap</i>	53
<i>ampicillin/sulbactam 1000-500mg inj</i>	84	<i>aripiprazole 30mg tab</i>	53	<i>atenolol 100mg tab</i>	57
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	84	<i>aripiprazole 5mg tab</i>	53	<i>atenolol 25mg tab</i>	57
<i>ampicillin/sulbactam 2000-1000mg inj</i>	84	ARISTADA 1064MG/3.9ML SYRINGE	53	<i>atenolol 50mg tab</i>	57
<i>anagrelide 0.5mg cap</i>	74	ARISTADA 441MG/1.6ML SYRINGE	53	<i>atenolol/chlorthalidone 100-25mg tab</i>	37
<i>anagrelide 1mg cap</i>	74	ARISTADA 662MG/2.4ML SYRINGE	53	<i>atenolol/chlorthalidone 50-25mg tab</i>	37
<i>anastrozole 1mg tab</i>	42	ARISTADA 675MG/2.4ML SYRINGE	53	<i>atomoxetine 100mg cap</i>	11
ANORO ELLIPTA 62.5-25MCG POWDER INHALER	20	ARISTADA 882MG/3.2ML SYRINGE	53	<i>atomoxetine 10mg cap</i>	11
APRACLONIDINE 0.5% OPTH SOLN	81	<i>armodafinil 150mg tab</i>	11	<i>atomoxetine 18mg cap</i>	11
<i>aprepitant 125mg cap</i>	32	<i>armodafinil 200mg tab</i>	11	<i>atomoxetine 25mg cap</i>	11
<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	33	<i>armodafinil 250mg tab</i>	11	<i>atomoxetine 40mg cap</i>	11
<i>aprepitant 40mg cap</i>	33	<i>armodafinil 50mg tab</i>	11	<i>atomoxetine 60mg cap</i>	11
<i>aprepitant 80mg cap</i>	33	ARNUITY 100MCG POWDER INHALER	19	<i>atomoxetine 80mg cap</i>	11
<i>apri tab 28-day pack</i>	68	ARNUITY 200MCG POWDER INHALER	19	<i>atorvastatin 10mg tab</i>	34
APTIOM 200MG TAB	23	ARNUITY 50MCG POWDER INHALER	19	<i>atorvastatin 20mg tab</i>	34
APTIOM 400MG TAB	23	<i>asenapine 10mg sl tab</i>	51	<i>atorvastatin 40mg tab</i>	34
APTIOM 600MG TAB	23	<i>asenapine 2.5mg sl tab</i>	51	<i>atorvastatin 80mg tab</i>	34
APTIOM 800MG TAB	23	<i>asenapine 5mg sl tab</i>	51	<i>atovaquone 750mg/5ml oral susp</i>	39
APTIVUS 250MG CAP	53	<i>ashlyna tab 91-day pack</i>	68	<i>atovaquone/proguanil 250-100mg tab</i>	40
<i>aranelle tab 28-day pack</i>	68	ASMANEX 100MCG HFA INHALER	19	<i>atovaquone/proguanil 62.5-25mg tab</i>	40
ARCALYST 220MG INJ	79			<i>atropine sulfate 1% opth soln</i>	82

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ALPHABETICAL LISTING OF DRUGS

<i>atropine</i>	32	<i>azithromycin 20mg/ml</i>	38	<i>benazepril/hydrochloroth</i>	37
<i>sulfate/diphenoxylate</i>		<i>oral susp</i>		<i>iazide 20-25mg tab</i>	
<i>0.025-2.5mg tab</i>		<i>azithromycin 250mg pack</i>	38	<i>benazepril/hydrochloroth</i>	37
ATROVENT 17MCG HFA	19	<i>(6)</i>		<i>iazide 5-6.25mg tab</i>	
INHALER		<i>azithromycin 250mg tab</i>	38	BENLYSTA 200MG/ML	79
<i>aubra tab 28-day pack</i>	68	<i>azithromycin 40mg/ml</i>	38	AUTO-INJECTOR	
AUGTYRO 160MG CAP	43	<i>oral susp</i>		BENLYSTA 200MG/ML	79
AUGTYRO 40MG CAP	43	<i>azithromycin 500mg inj</i>	38	SYRINGE	
AUSTEDO 12MG TAB	86	<i>azithromycin 500mg tab</i>	38	<i>benztropine mesylate</i>	48
AUSTEDO 6MG TAB	86	<i>azithromycin 500mg tab</i>	38	<i>0.5mg tab</i>	
AUSTEDO 9MG TAB	86	<i>pack (3)</i>		<i>benztropine mesylate 1mg</i>	48
AUSTEDO XR 12MG TAE	86	<i>azithromycin 600mg tab</i>	38	<i>tab</i>	
AUSTEDO XR 18MG TAE	86	<i>aztreonam 1gm inj</i>	38	<i>benztropine mesylate 2mg</i>	48
AUSTEDO XR 24MG TAE	86	<i>aztreonam 2gm inj</i>	38	<i>tab</i>	
AUSTEDO XR 30MG TAE	86	<i>azurette 28 day pack</i>	69	BERINERT 500UNIT INJ	75
AUSTEDO XR 36MG TAE	86			BESREMI 500MCG/ML	47
AUSTEDO XR 42MG TAE	86	B		SYRINGE	
AUSTEDO XR 48MG TAE	86	BACITRACIN	81	<i>betaine 1gm powder for</i>	67
AUSTEDO XR	86	500UNIT/GM OPHTH		<i>oral soln</i>	
6-12-24MG TAB		OINTMENT		<i>betamethasone 0.05%</i>	64
TITRATION PACK (42)		<i>bacitracin/polymyxin b</i>	81	<i>aug cream</i>	
AUSTEDO XR 6MG TAB	86	<i>0.5-10unit/mg ophth</i>		<i>betamethasone 0.05%</i>	64
AUSTEDO XR TAB ONCE	86	<i>ointment</i>		<i>aug lotion</i>	
DAILY 4 WEEK		<i>baclofen 10mg tab</i>	80	<i>betamethasone 0.05%</i>	64
TITRATION PACK		<i>baclofen 20mg tab</i>	80	<i>aug ointment</i>	
AUVELITY 105-45MG ER	26	<i>baclofen 5mg tab</i>	80	<i>betamethasone 0.05%</i>	64
TAB		<i>balsalazide disodium</i>	73	<i>cream</i>	
<i>aviane tab 28-day pack</i>	68	<i>750mg cap</i>		BETAMETHASONE	64
AVONEX 30MCG/0.5ML	86	BALVERSA 3MG TAB	43	0.05% GEL	
AUTO-INJECTOR		BALVERSA 4MG TAB	43	<i>betamethasone 0.05%</i>	64
AVONEX 30MCG/0.5ML	86	BALVERSA 5MG TAB	43	<i>lotion</i>	
SYRINGE		<i>balziva tab 28-day pack</i>	69	<i>betamethasone 0.05%</i>	64
AYVAKIT 100MG TAB	47	BAQSIMI 3MG/DOSE	30	<i>ointment</i>	
AYVAKIT 200MG TAB	47	NASAL POWDER		<i>betamethasone 0.1%</i>	64
AYVAKIT 25MG TAB	47	BCG LIVE TICE STRAIN	92	<i>cream</i>	
AYVAKIT 300MG TAB	47	50MG INJ		<i>betamethasone 0.1%</i>	64
AYVAKIT 50MG TAB	47	<i>benazepril 10mg tab</i>	35	<i>lotion</i>	
<i>azathioprine 50mg tab</i>	79	<i>benazepril 20mg tab</i>	35	<i>betamethasone 0.1%</i>	64
<i>azelaic acid 15% gel</i>	65	<i>benazepril 40mg tab</i>	35	<i>ointment</i>	
<i>azelastine 0.05% ophth</i>	82	<i>benazepril 5mg tab</i>	35	BETASERON 0.3MG INJ	86
<i>soln</i>		<i>benazepril/hydrochloroth</i>	37	BETAXOLOL 0.5%	81
<i>azelastine 0.1%</i>	80	<i>iazide 10-12.5mg tab</i>		OPHTH SOLN	
<i>(137mcg/act) nasal</i>		<i>benazepril/hydrochloroth</i>	37	<i>betaxolol 10mg tab</i>	57
<i>inhaler</i>		<i>iazide 20-12.5mg tab</i>		<i>betaxolol 20mg tab</i>	57

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ALPHABETICAL LISTING OF DRUGS

<i>bethanechol chloride</i>	92	BOOSTRIX INJ	91	BRIVIACT 75MG TAB	23
<i>10mg tab</i>		BOOSTRIX SYRINGE	91	<i>bromocriptine 2.5mg tab</i>	48
<i>bethanechol chloride</i>	92	<i>bosentan 125mg tab</i>	88	<i>bromocriptine 5mg cap</i>	48
<i>25mg tab</i>		<i>bosentan 62.5mg tab</i>	88	BRUKINSA 80MG CAP	43
<i>bethanechol chloride</i>	92	BOSULIF 100MG CAP	43	<i>budesonide 0.25mg/2ml</i>	19
<i>50mg tab</i>		BOSULIF 100MG TAB	43	<i>inh susp</i>	
<i>bethanechol chloride 5mg</i>	92	BOSULIF 400MG TAB	43	<i>budesonide 0.5mg/2ml</i>	19
<i>tab</i>		BOSULIF 500MG TAB	43	<i>inh susp</i>	
<i>bexarotene 1% gel</i>	63	BOSULIF 50MG CAP	43	<i>budesonide 1mg/2ml inh</i>	20
<i>bexarotene 75mg cap</i>	47	BRAFTOVI 75MG CAP	43	<i>susp</i>	
BEXSERO SYRINGE	92	BREO ELLIPTA	20	<i>budesonide 2mg/act</i>	16
<i>bicalutamide 50mg tab</i>	42	100-25MCG POWDER		<i>rectal foam</i>	
BICILLIN L-A	83	INHALER		<i>budesonide 3mg dr cap</i>	60
1200000UNIT/2ML		BREO ELLIPTA	20	<i>budesonide 9mg er tab</i>	60
SYRINGE		200-25MCG POWDER		<i>budesonide/formoterol</i>	20
BICILLIN L-A	84	INHALER		<i>fumarate 160-45mcg</i>	
2400000UNIT/4ML		BREO ELLIPTA	20	<i>inhaler</i>	
SYRINGE		50-25MCG POWDER		<i>budesonide/formoterol</i>	20
BICILLIN L-A	84	INHALER		<i>fumarate 80-45mcg</i>	
600000UNIT/ML		<i>breynga 160-4.5mcg/act</i>	20	<i>inhaler</i>	
SYRINGE		<i>inhaler</i>		<i>bumetanide 0.25mg/ml inj</i>	66
BIKTARVY 30-120-15MG	53	<i>breynga 80-4.5mcg/act</i>	20	<i>bumetanide 0.5mg tab</i>	66
TAB		<i>inhaler</i>		<i>bumetanide 1mg tab</i>	66
BIKTARVY 50-200-25MG	53	BREZTRI AEROSPHERE	20	<i>bumetanide 2mg tab</i>	66
TAB		160-9-4.8MCG/ACT		<i>buprenorphine 10mcg/hr</i>	16
<i>bimatoprost 0.03% ophth</i>	83	INHALER		<i>weekly patch</i>	
<i>soln</i>		<i>brillyn tab 28-day pack</i>	69	<i>buprenorphine 15mcg/hr</i>	16
<i>bisoprolol fumarate 10mg</i>	57	BRILINTA 60MG TAB	74	<i>weekly patch</i>	
<i>tab</i>		BRILINTA 90MG TAB	74	<i>buprenorphine 20mcg/hr</i>	16
<i>bisoprolol fumarate 5mg</i>	57	<i>brimonidine tartrate</i>	81	<i>weekly patch</i>	
<i>tab</i>		<i>0.1% ophth soln</i>		<i>buprenorphine 2mg sl tab</i>	16
<i>bisoprolol</i>	37	<i>brimonidine tartrate</i>	81	<i>buprenorphine 5mcg/hr</i>	16
<i>fumarate/hydrochlorothia</i>		<i>0.15% ophth soln</i>		<i>weekly patch</i>	
<i>zide 10-6.25mg tab</i>		<i>brimonidine tartrate</i>	81	<i>buprenorphine 7.5mcg/hr</i>	16
<i>bisoprolol</i>	37	<i>0.2% ophth soln</i>		<i>weekly patch</i>	
<i>fumarate/hydrochlorothia</i>		<i>brimonidine</i>	81	<i>buprenorphine 8mg sl tab</i>	16
<i>zide 2.5-6.25mg tab</i>		<i>tartrate/timolol 0.2-0.5%</i>		<i>buprenorphine/naloxone</i>	16
<i>bisoprolol</i>	37	<i>ophth soln</i>		<i>12-3mg sl film</i>	
<i>fumarate/hydrochlorothia</i>		BRIVIACT 100MG TAB	23	<i>buprenorphine/naloxone</i>	16
<i>zide 5-6.25mg tab</i>		BRIVIACT 10MG TAB	23	<i>2-0.5mg sl film</i>	
<i>blisovi 21 fe tab 1.5/30</i>	69	BRIVIACT 10MG/ML	23	<i>buprenorphine/naloxone</i>	16
<i>28-day pack</i>		ORAL SOLN		<i>2-0.5mg sl tab</i>	
<i>blisovi 24 fe tab 1/20</i>	69	BRIVIACT 25MG TAB	23	<i>buprenorphine/naloxone</i>	16
<i>28-day pack</i>		BRIVIACT 50MG TAB	23	<i>4-1mg sl film</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>buprenorphine/naloxone</i>	16	<i>camreselo tab 91-day</i>	69	<i>carbidopa/entacapone/le</i>	48
<i>8-2mg sl film</i>		<i>pack</i>		<i>vodopa 12.5-200-50mg</i>	
<i>buprenorphine/naloxone</i>	16	CAMZYOS 10MG CAP	59	<i>tab</i>	
<i>8-2mg sl tab</i>		CAMZYOS 15MG CAP	59	<i>carbidopa/entacapone/le</i>	48
<i>bupropion 100mg sr</i>	26	CAMZYOS 2.5MG CAP	59	<i>vodopa 18.75-200-75mg</i>	
<i>(12hr) tab</i>		CAMZYOS 5MG CAP	59	<i>tab</i>	
<i>bupropion 100mg tab</i>	26	<i>candesartan cilexetil</i>	35	<i>carbidopa/entacapone/le</i>	48
<i>bupropion 150mg sr (12</i>	26	<i>16mg tab</i>		<i>vodopa 25-200-100mg</i>	
<i>hr) tab</i>		<i>candesartan cilexetil</i>	36	<i>tab</i>	
<i>bupropion 150mg sr</i>	87	<i>32mg tab</i>		<i>carbidopa/entacapone/le</i>	48
<i>(12hr) tab</i>		<i>candesartan cilexetil 4mg</i>	36	<i>vodopa 31.25-200-125mg</i>	
<i>bupropion 200mg sr</i>	26	<i>tab</i>		<i>tab</i>	
<i>(12hr) tab</i>		<i>candesartan cilexetil 8mg</i>	36	<i>carbidopa/entacapone/le</i>	48
<i>bupropion 75mg tab</i>	26	<i>tab</i>		<i>vodopa 37.5-200-150mg</i>	
<i>bupropion xl 150mg (24</i>	26	CAPLYTA 10.5MG CAP	49	<i>tab</i>	
<i>hr) tab</i>		CAPLYTA 21MG CAP	49	<i>carbidopa/entacapone/le</i>	48
<i>bupropion xl 300mg</i>	26	CAPLYTA 42MG CAP	49	<i>vodopa 50-200-200mg</i>	
<i>(24hr) tab</i>		CAPRELSA 100MG TAB	43	<i>tab</i>	
<i>bupirone 10mg tab</i>	17	CAPRELSA 300MG TAB	43	CARBIDOPA/LEVODOPA	48
<i>bupirone 15mg tab</i>	17	<i>captopril 100mg tab</i>	35	10-100MG ODT	
<i>bupirone 30mg tab</i>	17	<i>captopril 12.5mg tab</i>	35	<i>carbidopa/levodopa</i>	48
<i>bupirone 5mg tab</i>	17	<i>captopril 25mg tab</i>	35	<i>10-100mg tab</i>	
<i>bupirone 7.5mg tab</i>	17	<i>captopril 50mg tab</i>	35	<i>carbidopa/levodopa</i>	48
<hr/>					
C		<i>carbamazepine 100mg</i>	23	<i>25-100mg er tab</i>	
<i>cabergoline 0.5mg tab</i>	68	<i>chew tab</i>		CARBIDOPA/LEVODOPA	48
CABOMETYX 20MG TAE	43	<i>carbamazepine 100mg er</i>	23	25-100MG ODT	
CABOMETYX 40MG TAE	43	<i>cap</i>		<i>carbidopa/levodopa</i>	48
CABOMETYX 60MG TAE	43	<i>carbamazepine 100mg er</i>	23	<i>25-100mg tab</i>	
<i>calcipotriene 0.005%</i>	63	<i>tab</i>		CARBIDOPA/LEVODOPA	48
<i>cream</i>		<i>carbamazepine 200mg er</i>	23	25-250MG ODT	
<i>calcipotriene 0.005%</i>	63	<i>cap</i>		<i>carbidopa/levodopa</i>	48
<i>ointment</i>		<i>carbamazepine 200mg er</i>	23	<i>25-250mg tab</i>	
CALCIPOTRIENE 0.005%	63	<i>tab</i>		<i>carbidopa/levodopa</i>	48
TOPICAL SOLN		<i>carbamazepine 200mg</i>	23	<i>50-200mg er tab</i>	
<i>calcitriol 0.25mcg cap</i>	67	<i>tab</i>		<i>carglumic acid 200mg tab</i>	67
<i>calcitriol 0.5mcg cap</i>	67	<i>carbamazepine 20mg/ml</i>	23	<i>for oral susp</i>	
<i>calcitriol 1mcg/ml oral</i>	67	<i>oral susp</i>		<i>carisoprodol 350mg tab</i>	80
<i>soln</i>		<i>carbamazepine 300mg er</i>	23	CARTEOLOL 1% OPHTH	81
CALQUENCE 100MG	43	<i>cap</i>		SOLN	
CAP		<i>carbamazepine 400mg er</i>	23	<i>cartia 120mg er (24hr)</i>	58
CALQUENCE 100MG	43	<i>tab</i>		<i>cap</i>	
TAB		<i>carbidopa 25mg tab</i>	48	<i>cartia 180mg er (24hr)</i>	58
<i>camila 0.35mg tab 28-day</i>	84			<i>cap</i>	
<i>pack</i>					

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ALPHABETICAL LISTING OF DRUGS

<i>cartia 240mg er (24hr) cap</i>	58	<i>cefpodoxime 20mg/ml oral susp</i>	60	<i>chlorpromazine 100mg tab</i>	52
<i>cartia 300mg er (24hr) cap</i>	58	<i>cefprozil 250mg tab</i>	60	CHLORPROMAZINE 100MG/ML ORAL SOLN	52
<i>carvedilol 12.5mg tab</i>	56	<i>cefprozil 25mg/ml oral susp</i>	60	<i>chlorpromazine 10mg tab</i>	52
<i>carvedilol 25mg tab</i>	56	<i>cefprozil 500mg tab</i>	60	<i>chlorpromazine 200mg tab</i>	52
<i>carvedilol 3.125mg tab</i>	56	<i>cefprozil 50mg/ml oral susp</i>	60	<i>chlorpromazine 25mg tab</i>	52
<i>casprofungin acetate 50mg inj</i>	33	<i>ceftazidime 1gm inj</i>	60	CHLORPROMAZINE 30MG/ML ORAL SOLN	52
<i>casprofungin acetate 70mg inj</i>	33	<i>ceftazidime 200mg/ml inj</i>	60	<i>chlorpromazine 50mg tab</i>	52
CAYSTON 75MG/ML INH SOLN	87	<i>ceftazidime 2gm inj</i>	60	<i>chlorthalidone 25mg tab</i>	66
CEFACLOR 250MG CAP	60	<i>ceftriaxone 10gm inj</i>	60	<i>chlorthalidone 50mg tab</i>	66
CEFACLOR 500MG CAP	60	<i>ceftriaxone 1gm inj</i>	60	<i>chlorzoxazone 500mg tab</i>	80
<i>cefadroxil 100mg/ml oral susp</i>	59	<i>ceftriaxone 250mg inj</i>	60	<i>cholestyramine resin (sugar-free) 4gm powder for oral susp</i>	34
<i>cefadroxil 500mg cap</i>	59	<i>ceftriaxone 2gm inj</i>	60	<i>cholestyramine resin 4gm powder for oral susp</i>	34
<i>cefadroxil 50mg/ml oral susp</i>	59	<i>ceftriaxone 500mg inj</i>	60	<i>ciclopirox 0.77% cream</i>	62
<i>cefazolin 1000mg inj</i>	59	<i>cefuroxime 1500mg inj</i>	60	<i>ciclopirox 0.77% gel</i>	62
<i>cefazolin 200mg/ml inj</i>	59	<i>cefuroxime 250mg tab</i>	60	<i>ciclopirox 0.77% lotion</i>	62
<i>cefazolin 500mg inj</i>	59	<i>cefuroxime 500mg tab</i>	60	<i>ciclopirox 1% shampoo</i>	62
<i>cefdinir 25mg/ml oral susp</i>	60	<i>cefuroxime 750mg inj</i>	60	<i>ciclopirox 8% topical soln</i>	62
<i>cefdinir 300mg cap</i>	60	<i>celecoxib 100mg cap</i>	13	CILASTATIN/IMIPENEM 250-250MG INJ	39
<i>cefdinir 50mg/ml oral susp</i>	60	<i>celecoxib 200mg cap</i>	13	<i>cilastatin/imipenem 500-500mg inj</i>	39
<i>cefepime 1000mg inj</i>	38	<i>celecoxib 400mg cap</i>	13	<i>cilostazol 100mg tab</i>	74
<i>cefepime 2000mg inj</i>	38	<i>celecoxib 50mg cap</i>	13	<i>cilostazol 50mg tab</i>	74
<i>cefixime 20mg/ml oral susp</i>	60	<i>cephalexin 250mg cap</i>	60	CIMDUO 300-300MG TAB	53
<i>cefixime 400mg cap</i>	60	<i>cephalexin 25mg/ml oral susp</i>	60	<i>cimetidine 200mg tab</i>	91
<i>cefixime 40mg/ml oral susp</i>	60	<i>cephalexin 500mg cap</i>	60	<i>cimetidine 300mg tab</i>	91
<i>cefoxitin 1gm inj</i>	60	<i>cephalexin 50mg/ml oral susp</i>	60	<i>cimetidine 400mg tab</i>	91
<i>cefoxitin 200mg/ml inj</i>	60	<i>cevimeline 30mg cap</i>	61	<i>cimetidine 800mg tab</i>	91
<i>cefoxitin 2gm inj</i>	60	CHEMET 100MG CAP	78	CIMZIA 200MG INJ	13
<i>cefpodoxime 100mg tab</i>	60	<i>chlordiazepoxide 10mg cap</i>	17	CIMZIA 200MG/ML SYRINGE	13
<i>cefpodoxime 10mg/ml oral susp</i>	60	<i>chlordiazepoxide 25mg cap</i>	17	<i>cinacalcet 30mg tab</i>	67
<i>cefpodoxime 200mg tab</i>	60	<i>chlordiazepoxide 5mg cap</i>	18	<i>cinacalcet 60mg tab</i>	67
		<i>chlorhexidine gluconate 0.12% mouthwash</i>	61	<i>cinacalcet 90mg tab</i>	68
		<i>chloroquine phosphate 250mg tab</i>	40	<i>ciprofloxacin 0.3% ophth soln</i>	81
		<i>chloroquine phosphate 500mg tab</i>	40		

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ALPHABETICAL LISTING OF DRUGS

<i>ciprofloxacin 250mg tab</i>	72	<i>clindamycin 900mg/6ml</i>	38	<i>clonidine 0.1mg/24hr</i>	36
CIPROFLOXACIN	72	<i>inj</i>		<i>weekly patch</i>	
2MG/ML INJ		CLINIMIX 4.25/10 INJ	81	<i>clonidine 0.2mg tab</i>	36
<i>ciprofloxacin 500mg tab</i>	72	CLINIMIX 4.25/5 INJ	81	<i>clonidine 0.2mg/24hr</i>	36
<i>ciprofloxacin 750mg tab</i>	72	CLINIMIX 5/15 INJ	81	<i>weekly patch</i>	
<i>ciprofloxacin/dexamethas</i>	83	CLINIMIX 5/20 INJ	81	<i>clonidine 0.3mg tab</i>	36
<i>one 0.3-0.1% otic susp</i>		<i>clinisol 15% inj</i>	81	<i>clonidine 0.3mg/24hr</i>	36
<i>citalopram 10mg tab</i>	27	<i>clobazam 10mg tab</i>	22	<i>weekly patch</i>	
<i>citalopram 20mg tab</i>	27	<i>clobazam 2.5mg/ml oral</i>	22	<i>clopidogrel 75mg tab</i>	74
<i>citalopram 2mg/ml oral</i>	27	<i>susp</i>		<i>clorazepate dipotassium</i>	18
<i>soln</i>		<i>clobazam 20mg tab</i>	22	<i>15mg tab</i>	
<i>citalopram 40mg tab</i>	27	<i>clobetasol propionate</i>	64	<i>clorazepate dipotassium</i>	18
<i>claravis 10mg cap</i>	62	<i>0.05% cream</i>		<i>3.75mg tab</i>	
<i>claravis 20mg cap</i>	62	<i>clobetasol propionate</i>	64	<i>clorazepate dipotassium</i>	18
<i>claravis 30mg cap</i>	62	<i>0.05% e cream</i>		<i>7.5mg tab</i>	
<i>claravis 40mg cap</i>	62	<i>clobetasol propionate</i>	64	<i>clotrimazole 1% cream</i>	62
<i>clarithromycin 250mg tab</i>	38	<i>0.05% foam</i>		<i>clotrimazole 10mg</i>	61
CLARITHROMYCIN	38	<i>clobetasol propionate</i>	64	<i>lozenge</i>	
25MG/ML ORAL SUSP		<i>0.05% gel</i>		<i>clotrimazole/betamethaso</i>	62
<i>clarithromycin 500mg tab</i>	38	<i>clobetasol propionate</i>	64	<i>ne 1-0.05% cream</i>	
CLARITHROMYCIN	38	<i>0.05% lotion</i>		<i>clozapine 100mg odt</i>	51
50MG/ML ORAL SUSP		<i>clobetasol propionate</i>	64	<i>clozapine 100mg tab</i>	51
<i>clindacin 1% pad</i>	62	<i>0.05% ointment</i>		CLOZAPINE 12.5MG	51
<i>clindamycin 1% gel</i>	62	<i>clobetasol propionate</i>	64	ODT	
<i>clindamycin 1% gel</i>	62	<i>0.05% shampoo</i>		<i>clozapine 150mg odt</i>	51
<i>(twice-daily)</i>		<i>clobetasol propionate</i>	64	<i>clozapine 200mg odt</i>	51
<i>clindamycin 1% lotion</i>	62	<i>0.05% topical soln</i>		<i>clozapine 200mg tab</i>	51
<i>clindamycin 1% pad</i>	62	<i>clobetasol propionate</i>	64	<i>clozapine 25mg odt</i>	51
<i>clindamycin 1% topical</i>	62	<i>0.05% topical spray</i>		<i>clozapine 25mg tab</i>	51
<i>soln</i>		<i>clodan 0.05% shampoo</i>	64	<i>clozapine 50mg tab</i>	51
<i>clindamycin 150mg cap</i>	38	<i>clomipramine 25mg cap</i>	28	COARTEM 20-120MG	40
<i>clindamycin 2% vaginal</i>	93	<i>clomipramine 50mg cap</i>	28	TAB	
<i>cream</i>		<i>clomipramine 75mg cap</i>	28	COBENFY 20-100MG	49
<i>clindamycin 300mg cap</i>	38	<i>clonazepam 0.125mg odt</i>	22	CAP	
<i>clindamycin 300mg/50ml</i>	38	<i>clonazepam 0.25mg odt</i>	22	COBENFY 20-50MG CAP	49
<i>inj</i>		<i>clonazepam 0.5mg odt</i>	22	COBENFY 30-125MG	49
<i>clindamycin 600mg/50ml</i>	38	<i>clonazepam 0.5mg tab</i>	22	CAP	
<i>inj</i>		<i>clonazepam 1mg odt</i>	22	COBENFY CAP 28-DAY	49
<i>clindamycin 75mg cap</i>	38	<i>clonazepam 1mg tab</i>	22	STARTER KIT PACK (56)	
<i>clindamycin 75mg/5ml</i>	38	<i>clonazepam 2mg odt</i>	22	<i>codeine</i>	15
<i>oral soln</i>		<i>clonazepam 2mg tab</i>	22	<i>phosphate/acetaminophe</i>	
<i>clindamycin 900mg/50ml</i>	38	<i>clonidine 0.1mg er tab</i>	11	<i>n 15-300mg tab</i>	
<i>inj</i>		<i>clonidine 0.1mg tab</i>	36		

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ALPHABETICAL LISTING OF DRUGS

CODEINE	15	CREON	66	CYSTADROPS 0.37%	82
PHOSPHATE/ACETAMIN		120000-24000-76000UNI		OPHTH SOLN	
OPHEN 2.4-24MG/ML		T DR CAP		CYSTAGON 150MG CAP	73
ORAL SOLN		CREON	66	CYSTAGON 50MG CAP	73
<i>codeine</i>	15	15000-3000-9500UNIT		CYSTARAN 0.44%	82
<i>phosphate/acetaminophe</i>		DR CAP		OPHTH SOLN	
<i>n 30-300mg tab</i>		CREON	66		
<i>codeine</i>	15	180000-36000-114000U		D	
<i>phosphate/acetaminophe</i>		NIT DR CAP		<i>dabigatran etexilate</i>	21
<i>n 60-300mg tab</i>		CREON	66	<i>110mg cap</i>	
<i>colchicine 0.6mg tab</i>	74	30000-6000-19000UNIT		<i>dabigatran etexilate</i>	21
<i>colchicine/probenecid</i>	74	DR CAP		<i>150mg cap</i>	
<i>0.5-500mg tab</i>		CREON	66	<i>dabigatran etexilate</i>	21
<i>colesevelam 625mg tab</i>	34	60000-12000-38000UNIT		<i>75mg cap</i>	
<i>colestipol 1gm tab</i>	34	DR CAP		<i>dalfampridine 10mg er</i>	86
<i>colestipol 5000mg</i>	34	<i>cromolyn sodium 20mg/ml</i>	73	<i>tab</i>	
<i>granules for oral susp</i>		<i>oral soln</i>		<i>danazol 100mg cap</i>	16
<i>colistin 75mg/ml inj</i>	38	CROMOLYN SODIUM	82	<i>danazol 200mg cap</i>	16
COMBIVENT	20	4% OPHTH SOLN		<i>danazol 50mg cap</i>	16
20-100MCG/ACT		<i>cryselles tab 28-day pack</i>	69	<i>dantrolene sodium 100mg</i>	80
INHALER		<i>cyclobenzaprine 10mg</i>	80	<i>cap</i>	
COMETRIQ CAP 100MG	43	<i>tab</i>		<i>dantrolene sodium 25mg</i>	80
DAILY DOSE PACK (56)		<i>cyclobenzaprine 5mg tab</i>	80	<i>cap</i>	
COMETRIQ CAP 140MG	43	CYCLOPHOSPHAMIDE	40	<i>dantrolene sodium 50mg</i>	80
DAILY DOSE PACK (112)		25MG TAB		<i>cap</i>	
COMETRIQ CAP 60MG	43	CYCLOPHOSPHAMIDE	40	<i>dapsone 100mg tab</i>	40
DAILY DOSE PACK (84)		50MG TAB		<i>dapsone 25mg tab</i>	40
COMPLERA	54	<i>cyclosporine 0.05% ophth</i>	82	DAPTACEL INJ	91
200-25-300MG TAB		<i>susp</i>		<i>daptomycin 500mg inj</i>	38
<i>compro 25mg rectal supp</i>	52	<i>cyclosporine 100mg cap</i>	79	<i>darifenacin 15mg er tab</i>	92
<i>constulose 10gm/15ml</i>	76	<i>cyclosporine 25mg cap</i>	79	<i>darifenacin 7.5mg er tab</i>	92
<i>oral soln</i>		<i>cyclosporine modified</i>	79	<i>darunavir 600mg tab</i>	54
COPIKTRA 15MG CAP	43	<i>100mg cap</i>		<i>darunavir 800mg tab</i>	54
COPIKTRA 25MG CAP	43	<i>cyclosporine modified</i>	79	<i>dasatinib 100mg tab</i>	43
COSENTYX 150MG/ML	63	<i>100mg/ml oral soln</i>		<i>dasatinib 140mg tab</i>	43
AUTO-INJECTOR		<i>cyclosporine modified</i>	79	<i>dasatinib 20mg tab</i>	43
COSENTYX 150MG/ML	63	<i>25mg cap</i>		<i>dasatinib 50mg tab</i>	43
SYRINGE		<i>cyclosporine modified</i>	79	<i>dasatinib 70mg tab</i>	43
COSENTYX	63	<i>50mg cap</i>		<i>dasatinib 80mg tab</i>	43
75MG/0.5ML SYRINGE		<i>cyproheptadine 0.4mg/ml</i>	88	DAURISMO 100MG TAB	41
COSENTYX UNOREADY	63	<i>oral soln</i>		DAURISMO 25MG TAB	41
300MG/2ML		<i>cyproheptadine 4mg tab</i>	88	<i>deblitane 0.35mg tab</i>	84
AUTO-INJECTOR		<i>cyred tab 28-day pack</i>	69	<i>28-day pack</i>	
COTELLIC 20MG TAB	43			<i>deferasirox 180mg tab</i>	78
				<i>deferasirox 360mg tab</i>	78

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>deferasirox 90mg tab</i>	78	DEXAMETHASONE	60	<i>diazepam 1mg/ml oral soln</i>	18
DELSTRIGO	54	0.1MG/ML ORAL SOLN			
100-300-300MG TAB		<i>dexamethasone 0.5mg tab</i>	61	DIAZEPAM	22
DEPO-SUBQ PROVERA	84	<i>dexamethasone 0.75mg tab</i>	61	2.5MG/0.5ML RECTAL GEL	
104MG/0.65ML SYRINGE		<i>dexamethasone 1.5mg tab</i>	61	<i>diazepam 20mg/4ml rectal gel</i>	22
<i>depo-testosterone 100mg/ml inj</i>	16	<i>dexamethasone 1mg tab</i>	61	<i>diazepam 2mg tab</i>	18
<i>depo-testosterone 200mg/ml inj</i>	16	<i>dexamethasone 2mg tab</i>	61	<i>diazepam 5mg tab</i>	18
DESCOVY 120-15MG TAB	54	<i>dexamethasone 4mg tab</i>	61	<i>diazepam 5mg/ml oral soln</i>	18
DESCOVY 200-25MG TAB	54	<i>dexamethasone 6mg tab</i>	61	<i>diazoxide 50mg/ml oral susp</i>	30
<i>desipramine 100mg tab</i>	28	DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	82	<i>diclofenac potassium 50mg tab</i>	13
<i>desipramine 10mg tab</i>	28	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	82	<i>diclofenac sodium 0.1% ophth soln</i>	82
<i>desipramine 150mg tab</i>	28	<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	82	<i>diclofenac sodium 1.5% topical soln</i>	13
<i>desipramine 25mg tab</i>	28	<i>dexlansoprazole 30mg dr cap</i>	91	<i>diclofenac sodium 100mg er tab</i>	13
<i>desipramine 50mg tab</i>	28	<i>dexlansoprazole 60mg dr cap</i>	91	<i>diclofenac sodium 25mg dr tab</i>	13
<i>desloratadine 5mg tab</i>	88	<i>dexmethylphenidate 10mg tab</i>	11	<i>diclofenac sodium 3% gel</i>	63
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	68	<i>dexmethylphenidate 2.5mg tab</i>	11	<i>diclofenac sodium 50mg dr tab</i>	13
<i>desmopressin acetate 0.1mg tab</i>	68	<i>dexmethylphenidate 5mg tab</i>	11	<i>diclofenac sodium 75mg dr tab</i>	13
<i>desmopressin acetate 0.2mg tab</i>	68	<i>dextroamphetamine sulfate 10mg tab</i>	11	<i>dicloxacillin 250mg cap</i>	84
<i>desogestrel/ethinyl estradiol/ethinyl estradiol 0.15-0.01-0.02mg tab 28-day pack</i>	69	<i>dextroamphetamine sulfate 5mg tab</i>	11	<i>dicloxacillin 500mg cap</i>	84
<i>desonide 0.05% ointment</i>	64	DEXTROSE 10% INJ	81	<i>dicyclomine 10mg cap</i>	91
<i>desoximetasone 0.25% cream</i>	64	DIACOMIT 250MG CAP	23	<i>dicyclomine 20mg tab</i>	91
<i>desoximetasone 0.25% ointment</i>	64	DIACOMIT 250MG POWDER FOR ORAL SUSP	23	<i>dicyclomine 2mg/ml oral soln</i>	91
<i>desvenlafaxine succinate 100mg er tab</i>	28	DIACOMIT 500MG CAP	23	DIFICID 200MG TAB	38
<i>desvenlafaxine succinate 25mg er tab</i>	28	DIACOMIT 500MG POWDER FOR ORAL SUSP	23	DIFICID 40MG/ML ORAL SUSP	39
<i>desvenlafaxine succinate 50mg er tab</i>	28	<i>diazepam 10mg tab</i>	18	<i>diflunisal 500mg tab</i>	13
		<i>diazepam 10mg/2ml rectal gel</i>	22	<i>difluprednate 0.05% ophth susp</i>	82
				<i>digoxin 0.125mg tab</i>	59
				<i>digoxin 0.25mg tab</i>	59

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	76	<i>divalproex sodium 125mg dr tab</i>	26	<i>doxazosin 8mg tab</i>	36
<i>dilt 120mg er (24hr) cap</i>	58	<i>divalproex sodium 250mg dr tab</i>	26	<i>doxepin 100mg cap</i>	29
<i>dilt 180mg er (24hr) cap</i>	58	<i>divalproex sodium 250mg er tab</i>	26	<i>doxepin 10mg cap</i>	29
<i>dilt 240mg er (24hr) cap</i>	58	<i>divalproex sodium 500mg dr tab</i>	26	<i>doxepin 10mg/ml oral soln</i>	29
<i>diltiazem 120mg er (12hr) cap</i>	58	<i>divalproex sodium 500mg er tab</i>	26	<i>doxepin 150mg cap</i>	29
<i>diltiazem 120mg er (24hr) cap</i>	58	<i>dofetilide 0.125mg cap</i>	18	<i>doxepin 25mg cap</i>	29
<i>diltiazem 120mg tab</i>	58	<i>dofetilide 0.25mg cap</i>	18	<i>doxepin 50mg cap</i>	29
<i>diltiazem 180mg er (24hr) cap</i>	58	<i>dofetilide 0.5mg cap</i>	18	<i>doxepin 75mg cap</i>	29
<i>diltiazem 240mg er (24hr) cap</i>	58	<i>donepezil 10mg odt</i>	85	<i>doxy 100mg inj</i>	89
<i>diltiazem 300mg er (24hr) cap</i>	58	<i>donepezil 10mg tab</i>	85	<i>doxycycline hyclate 100mg cap</i>	89
<i>diltiazem 30mg tab</i>	58	<i>donepezil 23mg tab</i>	85	<i>doxycycline hyclate 100mg tab</i>	89
<i>diltiazem 360mg er (24hr) cap</i>	58	<i>donepezil 5mg odt</i>	85	<i>doxycycline hyclate 20mg tab</i>	89
<i>diltiazem 420mg er (24hr) cap</i>	58	<i>donepezil 5mg tab</i>	85	<i>doxycycline hyclate 50mg cap</i>	89
<i>diltiazem 60mg er (12hr) cap</i>	58	DOPTELET 20MG TAB	74	<i>doxycycline monohydrate 100mg cap</i>	89
<i>diltiazem 60mg tab</i>	58	DOPTELET TAB 40MG	74	<i>doxycycline monohydrate 100mg tab</i>	89
<i>diltiazem 90mg er (12hr) cap</i>	58	DAILY DOSE PACK (10)		<i>doxycycline monohydrate 50mg cap</i>	89
<i>diltiazem 90mg tab</i>	58	DOPTELET TAB 60MG	74	<i>doxycycline monohydrate 50mg tab</i>	89
<i>dimethyl fumarate 120mg dr cap</i>	86	DAILY DOSE PACK (15)		<i>doxycycline monohydrate 50mg cap</i>	89
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	86	<i>dorzolamide 2% ophth soln</i>	82	<i>doxycycline monohydrate 50mg tab</i>	89
<i>dimethyl fumarate 240mg dr cap</i>	86	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	81	<i>doxycycline monohydrate 5mg/ml oral susp</i>	89
<i>dipyridamole 25mg tab</i>	74	<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	81	DRIZALMA 20MG DR	28
<i>dipyridamole 50mg tab</i>	74	<i>dotti 0.025mg/24hr twice weekly patch</i>	72	SPRINKLE CAP	
<i>dipyridamole 75mg tab</i>	74	<i>dotti 0.0375mg/24hr twice weekly patch</i>	72	DRIZALMA 30MG DR	28
<i>disopyramide 100mg cap</i>	18	<i>dotti 0.05mg/24hr twice weekly patch</i>	72	SPRINKLE CAP	
<i>disopyramide 150mg cap</i>	18	<i>dotti 0.075mg/24hr twice weekly patch</i>	72	DRIZALMA 40MG DR	28
<i>disulfiram 250mg tab</i>	85	<i>dotti 0.1mg/24hr twice weekly patch</i>	72	SPRINKLE CAP	
<i>disulfiram 500mg tab</i>	85	DOVATO 50-300MG TAB	54	DRIZALMA 60MG DR	28
<i>divalproex sodium 125mg dr cap</i>	26	<i>doxazosin 1mg tab</i>	36	SPRINKLE CAP	
		<i>doxazosin 2mg tab</i>	36	<i>dronabinol 10mg cap</i>	33
		<i>doxazosin 4mg tab</i>	36	<i>dronabinol 2.5mg cap</i>	33
				<i>dronabinol 5mg cap</i>	33
				<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	69

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	69	ELIGARD 22.5MG SYRINGE	42	<i>enalapril maleate 10mg tab</i>	35
<i>droxidopa 100mg cap</i>	59	ELIGARD 30MG SYRINGE	42	<i>enalapril maleate 2.5mg tab</i>	35
<i>droxidopa 200mg cap</i>	59	ELIGARD 45MG SYRINGE	42	<i>enalapril maleate 20mg tab</i>	35
<i>droxidopa 300mg cap</i>	59	ELIGARD 7.5MG SYRINGE	42	<i>enalapril maleate 5mg tab</i>	35
DULERA 100-5MCG INHALER	20	ELIQUIS 2.5MG TAB	21	<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	37
DULERA 200-5MCG INHALER	20	ELIQUIS 5MG 30-DAY STARTER PACK (74)	21	<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	37
DULERA 50-5MCG INHALER	20	ELIQUIS 5MG TAB	21	ENBREL 25MG/0.5ML INJ	13
<i>duloxetine 20mg dr cap</i>	28	ELMIRON 100MG CAP	73	ENBREL 25MG/0.5ML SYRINGE	13
<i>duloxetine 30mg dr cap</i>	28	<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	69	ENBREL 50MG/ML AUTO-INJECTOR	13
<i>duloxetine 60mg dr cap</i>	28	EMGALITY 100MG/ML SYRINGE	76	ENBREL 50MG/ML AUTO-INJECTOR	13
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	19	EMGALITY 120MG/ML AUTO-INJECTOR	76	ENBREL 50MG/ML CARTRIDGE	13
DUPIXENT 200MG/1.14ML SYRINGE	19	EMGALITY 120MG/ML SYRINGE	76	ENBREL 50MG/ML SYRINGE	13
DUPIXENT 300MG/2ML AUTO-INJECTOR	19	EMSAM 12MG/24HR PATCH	26	<i>endocet 10-325mg tab</i>	15
DUPIXENT 300MG/2ML SYRINGE	19	EMSAM 6MG/24HR PATCH	26	<i>endocet 2.5-325mg tab</i>	15
<i>dutasteride 0.5mg cap</i>	74	EMSAM 9MG/24HR PATCH	26	<i>endocet 5-325mg tab</i>	15
E				<i>endocet 7.5-325mg tab</i>	15
<i>econazole nitrate 1% cream</i>	63	<i>emtricitabine 200mg cap</i>	54	ENGERIX-B 10MCG/0.5ML SYRINGE	93
EDURANT 25MG TAB	54	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	54	ENGERIX-B 20MCG/ML INJ	93
<i>efavirenz 600mg tab</i>	54	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	54	ENGERIX-B 20MCG/ML SYRINGE	93
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	54	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	54	<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	69
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	54	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	54	<i>enoxaparin sodium 100mg/1ml syringe</i>	22
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	54	EMTRIVA 10MG/ML ORAL SOLN	54	<i>enoxaparin sodium 120mg/0.8ml syringe</i>	22
ELECTROLYTE-148 SOLUTION	77			<i>enoxaparin sodium 150mg/1ml syringe</i>	22

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>enoxaparin sodium</i> 30mg/0.3ml syringe	22	<i>errin 0.35mg tab 28-day</i> pack	84	<i>estradiol 0.01mg/24hr</i> weekly patch	72
<i>enoxaparin sodium</i> 40mg/0.4ml syringe	22	<i>ertapenem 1gm inj</i>	39	<i>estradiol 0.025mg/24hr</i> twice weekly patch	72
<i>enoxaparin sodium</i> 60mg/0.6ml syringe	22	ERY 2% PAD	62	<i>estradiol 0.025mg/24hr</i> weekly patch	72
<i>enoxaparin sodium</i> 80mg/0.8ml syringe	22	<i>ery-tab 250mg dr tab</i>	39	<i>estradiol 0.0375mg/24hr</i> twice weekly patch	72
<i>enpresse tab 28-day pack</i>	69	<i>ery-tab 333mg dr tab</i>	39	<i>estradiol 0.0375mg/24hr</i> weekly patch	72
<i>enskyce tab 28-day pack</i>	69	<i>ery-tab 500mg dr tab</i>	39	<i>estradiol 0.0375mg/24hr</i> twice weekly patch	72
<i>entacapone 200mg tab</i>	48	<i>erythromycin 0.5% ophth</i> ointment	81	<i>estradiol 0.0375mg/24hr</i> weekly patch	72
<i>entecavir 0.5mg tab</i>	55	<i>erythromycin 2% gel</i>	62	<i>estradiol 0.05mg/24hr</i> twice weekly patch	72
<i>entecavir 1mg tab</i>	55	<i>erythromycin 2% topical</i> soln	62	<i>estradiol 0.05mg/24hr</i> weekly patch	72
ENTRESTO 24-26MG TAB	59	<i>erythromycin 250mg dr</i> tab	39	<i>estradiol 0.05mg/24hr</i> twice weekly patch	72
ENTRESTO 49-51MG TAB	59	<i>erythromycin 250mg tab</i>	39	<i>estradiol 0.075mg/24hr</i> twice weekly patch	72
ENTRESTO 97-103MG TAB	59	<i>erythromycin 333mg dr</i> tab	39	<i>estradiol 0.075mg/24hr</i> weekly patch	72
<i>enulose 10gm/15ml oral</i> soln	73	<i>erythromycin 500mg dr</i> tab	39	<i>estradiol 0.5mg tab</i>	72
ENVARUSUS XR 0.75MG TAB	79	<i>erythromycin 500mg tab</i>	39	<i>estradiol 1mg tab</i>	72
ENVARUSUS XR 1MG TAB	79	<i>erythromycin</i>	39	<i>estradiol 2mg tab</i>	72
ENVARUSUS XR 4MG TAB	79	<i>ethylsuccinate 40mg/ml</i> oral susp		<i>estradiol valerate</i> 10mg/ml inj	72
EPIDIOLEX 100MG/ML ORAL SOLN	23	<i>erythromycin</i>	39	<i>estradiol valerate</i> 20mg/ml inj	72
<i>epinephrine</i> 0.15mg/0.3ml auto-injector (2pack)	20	<i>ethylsuccinate 80mg/ml</i> oral susp		<i>estradiol valerate</i> 40mg/ml inj	72
<i>epinephrine 0.3mg/0.3ml</i> auto-injector (2pack)	20	<i>escitalopram 10mg tab</i>	27	<i>estradiol/norethindrone</i> acetate 0.5-0.1mg 28-day pack	69
<i>epitol 200mg tab</i>	23	<i>escitalopram 1mg/ml oral</i> soln	27	<i>estradiol/norethindrone</i> acetate 1-0.5mg 28-day pack	69
<i>eplerenone 25mg tab</i>	38	<i>escitalopram 20mg tab</i>	27	<i>eszopiclone 1mg tab</i>	75
<i>eplerenone 50mg tab</i>	38	<i>escitalopram 5mg tab</i>	27	<i>eszopiclone 2mg tab</i>	75
EPRONTIA 25MG/ML ORAL SOLN	23	<i>esomeprazole 20mg dr</i> cap	91	<i>eszopiclone 3mg tab</i>	75
ERIVEDGE 150MG CAP	41	<i>estarylla tab 28-day pack</i>	69	<i>ethambutol 100mg tab</i>	40
ERLEADA 240MG TAB	42	<i>estradiol 0.0025mg/hr</i> weekly patch	72	<i>ethambutol 400mg tab</i>	40
ERLEADA 60MG TAB	42	<i>estradiol 0.01% vaginal</i> cream	94	<i>ethinyl estradiol/ethinyl</i> estradiol/levonorgestrel 0.01-0.02-0.1mg tab 91-day pack	69
<i>erlotinib 100mg tab</i>	41	<i>estradiol 0.01mg vaginal</i> insert	94		
<i>erlotinib 150mg tab</i>	41	<i>estradiol 0.01mg/24hr</i> twice weekly patch	72		
<i>erlotinib 25mg tab</i>	41				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg tab 91-day pack</i>	69	<i>ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack</i>	70	<i>everolimus 3mg tab for oral susp</i>	43
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.035-1-1mg tab 28-day pack</i>	69	<i>ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack</i>	70	<i>everolimus 5mg tab</i>	43
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.05-1-1mg tab 28-day pack</i>	69	<i>ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25 mg-mcg tab 28-day pack</i>	70	<i>everolimus 5mg tab for oral susp</i>	43
<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	69	<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35 mg-mcg tab 28-day pack</i>	70	<i>EVOTAZ 300-150MG TAB</i>	54
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg tab 28-day pack</i>	69	<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35 mg-mcg tab 28-day pack</i>	70	<i>EVRYSDI 0.75MG/ML ORAL SOLN</i>	81
<i>ethinyl estradiol/inert ingredients/levonorgestrel 1 0.02-1-0.1mg tab 28-day pack</i>	69	<i>ethosuximide 250mg cap</i>	26	<i>exemestane 25mg tab</i>	42
<i>ethinyl estradiol/inert ingredients/levonorgestrel 1 0.03-1-0.15mg tab 28-day pack</i>	69	<i>ethosuximide 50mg/ml oral soln</i>	26	<i>ezetimibe 10mg tab</i>	33
<i>ethinyl estradiol/inert ingredients/levonorgestrel 1 0.03-1-0.15mg tab 91-day pack</i>	69	<i>etodolac 200mg cap</i>	13	F	
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack</i>	69	<i>etodolac 300mg cap</i>	13	<i>falmina tab 28-day pack</i>	70
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	69	<i>etodolac 400mg tab</i>	14	<i>famciclovir 125mg tab</i>	56
		<i>etodolac 500mg tab</i>	14	<i>famciclovir 250mg tab</i>	56
		<i>etravirine 100mg tab</i>	54	<i>famciclovir 500mg tab</i>	56
		<i>etravirine 200mg tab</i>	54	<i>famotidine 20mg tab</i>	91
		<i>euthyrox 100mcg tab</i>	89	<i>famotidine 40mg tab</i>	91
		<i>euthyrox 112mcg tab</i>	89	<i>FANAPT 10MG TAB</i>	50
		<i>euthyrox 125mcg tab</i>	89	<i>FANAPT 12MG TAB</i>	50
		<i>euthyrox 137mcg tab</i>	89	<i>FANAPT 1MG TAB</i>	50
		<i>euthyrox 150mcg tab</i>	89	<i>FANAPT 2MG TAB</i>	50
		<i>euthyrox 175mcg tab</i>	89	<i>FANAPT 4MG TAB</i>	50
		<i>euthyrox 200mcg tab</i>	89	<i>FANAPT 6MG TAB</i>	50
		<i>euthyrox 25mcg tab</i>	89	<i>FANAPT 8MG TAB</i>	50
		<i>euthyrox 50mcg tab</i>	89	<i>FANAPT TAB TITRATION PACK (8)</i>	50
		<i>euthyrox 75mcg tab</i>	89	<i>FARXIGA 10MG TAB</i>	31
		<i>euthyrox 88mcg tab</i>	89	<i>FARXIGA 5MG TAB</i>	31
		<i>everolimus 0.25mg tab</i>	79	<i>FASENRA 10MG/0.5ML SYRINGE</i>	19
		<i>everolimus 0.5mg tab</i>	79	<i>FASENRA 30MG/ML AUTO-INJECTOR</i>	19
		<i>everolimus 0.75mg tab</i>	79	<i>FASENRA 30MG/ML SYRINGE</i>	19
		<i>everolimus 10mg tab</i>	43	<i>febuxostat 40mg tab</i>	74
		<i>everolimus 1mg tab</i>	79	<i>febuxostat 80mg tab</i>	74
		<i>everolimus 2.5mg tab</i>	43	<i>felbamate 120mg/ml oral susp</i>	25
		<i>everolimus 2mg tab for oral susp</i>	43	<i>felbamate 400mg tab</i>	25
				<i>felbamate 600mg tab</i>	25
				<i>felodipine 10mg er tab</i>	58
				<i>felodipine 2.5mg er tab</i>	58

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>felodipine 5mg er tab</i>	58	<i>flecainide acetate 50mg tab</i>	18	FLUOROURACIL 2% TOPICAL SOLN	63
<i>fenofibrate 134mg cap</i>	34	<i>fluconazole 100mg tab</i>	33	<i>fluorouracil 5% cream</i>	63
<i>fenofibrate 145mg tab</i>	34	<i>fluconazole 10mg/ml oral susp</i>	33	<i>fluorouracil 5% topical soln</i>	63
<i>fenofibrate 160mg tab</i>	34	<i>fluconazole 150mg tab</i>	33	<i>fluoxetine 10mg cap</i>	27
<i>fenofibrate 200mg cap</i>	34	<i>fluconazole 200mg tab</i>	33	<i>fluoxetine 20mg cap</i>	27
<i>fenofibrate 48mg tab</i>	34	<i>fluconazole 200mg/100ml inj</i>	33	<i>fluoxetine 40mg cap</i>	27
<i>fenofibrate 54mg tab</i>	34	<i>fluconazole 400mg/200ml inj</i>	33	<i>fluoxetine 4mg/ml oral soln</i>	27
<i>fenofibrate 67mg cap</i>	34	<i>fluconazole 40mg/ml oral susp</i>	33	<i>fluoxetine 60mg tab</i>	27
<i>fenofibric acid 135mg dr cap</i>	34	<i>fluconazole 50mg tab</i>	33	FLUPHENAZINE 0.5MG/ML ORAL SOLN	52
<i>fenofibric acid 45mg dr cap</i>	34	<i>flucytosine 250mg cap</i>	33	<i>fluphenazine 10mg tab</i>	52
<i>fentanyl 100mcg/hr patch</i>	14	<i>flucytosine 500mg cap</i>	33	<i>fluphenazine 1mg tab</i>	52
<i>fentanyl 12mcg/hr patch</i>	14	<i>fludrocortisone acetate 0.1mg tab</i>	61	<i>fluphenazine 2.5mg tab</i>	52
<i>fentanyl 25mcg/hr patch</i>	14	<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	80	FLUPHENAZINE 2.5MG/ML INJ	52
<i>fentanyl 50mcg/hr patch</i>	14	<i>fluocinolone acetonide 0.01% cream</i>	64	<i>fluphenazine 5mg tab</i>	52
<i>fentanyl 75mcg/hr patch</i>	14	<i>fluocinolone acetonide 0.01% otic soln</i>	83	FLUPHENAZINE 5MG/ML ORAL SOLN	52
<i>fesoterodine fumarate 4mg er tab</i>	92	<i>fluocinolone acetonide 0.01% topical oil</i>	64	<i>fluphenazine decanoate 25mg/ml inj</i>	52
<i>fesoterodine fumarate 8mg er tab</i>	92	<i>fluocinolone acetonide 0.01% topical soln</i>	64	<i>flurbiprofen 100mg tab</i>	14
FETZIMA 120MG ER CAP	28	<i>fluocinolone acetonide 0.025% cream</i>	64	FLURBIPROFEN SODIUM 0.03% OPHTH SOLN	82
FETZIMA 20MG ER CAP	28	<i>fluocinolone acetonide 0.025% ointment</i>	64	<i>fluticasone propionate 0.005% ointment</i>	64
FETZIMA 40MG ER CAP	28	<i>fluocinolone acetonide 0.025% ointment</i>	64	<i>fluticasone propionate 0.05% cream</i>	64
FETZIMA 80MG ER CAP	28	<i>fluocinonide 0.05% cream</i>	64	FLUTICASONE PROPIONATE 110MCG INHALER	20
FETZIMA ER CAP	28	<i>fluocinonide 0.05% e cream</i>	64	FLUTICASONE PROPIONATE 220MCG INHALER	20
TITRATION PACK (28)		FLUOCINONIDE 0.05% GEL	64	FLUTICASONE PROPIONATE 44MCG INHALER	20
<i>finasteride 5mg tab</i>	74	<i>fluocinonide 0.05% topical soln</i>	64	<i>fluticasone propionate 50mcg/act nasal inhaler</i>	80
<i>finzala 24 fe chewable tab 28-day pack</i>	70	<i>fluorometholone 0.1% ophth susp</i>	82		
FIRDAPSE 10MG TAB	40				
FIRMAGON 120MG INJ	42				
FIRMAGON 80MG INJ	42				
<i>flac 0.01% otic soln</i>	83				
<i>flavoxate 100mg tab</i>	92				
<i>flecainide acetate 100mg tab</i>	18				
<i>flecainide acetate 150mg tab</i>	18				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>fluticasone</i>	20	FRUZAQLA 5MG CAP	41	<i>galantamine</i>	85
<i>propionate/salmeterol</i>		FUROSCIX 80MG/10ML	66	<i>hydrobromide 8mg er cap</i>	
<i>100-50mcg/act powder</i>		CARTRIDGE		<i>gallifrey 5mg tab</i>	84
<i>inhaler</i>		<i>furosemide 10mg/ml inj</i>	66	GAMUNEX 1GM/10ML	83
<i>fluticasone</i>	20	<i>furosemide 10mg/ml oral</i>	66	INJ	
<i>propionate/salmeterol</i>		<i>soln</i>		GARDASIL 9 INJ	93
<i>250-50mcg/act powder</i>		<i>furosemide 20mg tab</i>	66	GARDASIL 9 SYRINGE	93
<i>inhaler</i>		<i>furosemide 40mg tab</i>	66	GATTEX 5MG INJ	73
<i>fluticasone</i>	20	<i>furosemide 80mg tab</i>	66	GAUZE PAD (2 X 2)	76
<i>propionate/salmeterol</i>		FUROSEMIDE 8MG/ML	66	GAVILYTE-C POWDER	75
<i>500-50mcg/act powder</i>		ORAL SOLN		FOR ORAL SOLN	
<i>inhaler</i>		FUZEON 90MG INJ	54	<i>gavilyte-g powder for</i>	75
<i>fluvoxamine maleate</i>	27	<i>fyavolv 0.0025-0.5mg tab</i>	70	<i>oral soln</i>	
<i>100mg tab</i>		<i>fyavolv 0.005-1mg tab</i>	70	<i>gavilyte-n powder for</i>	75
<i>fluvoxamine maleate</i>	27	FYCOMPA 0.5MG/ML	23	<i>oral soln</i>	
<i>25mg tab</i>		ORAL SUSP		GAVRETO 100MG CAP	43
<i>fluvoxamine maleate</i>	27	FYCOMPA 10MG TAB	23	<i>gefitinib 250mg tab</i>	41
<i>50mg tab</i>		FYCOMPA 12MG TAB	23	<i>gemfibrozil 600mg tab</i>	34
<i>fondaparinux sodium</i>	22	FYCOMPA 2MG TAB	23	<i>generlac 10gm/15ml oral</i>	73
<i>10mg/0.8ml syringe</i>		FYCOMPA 4MG TAB	23	<i>soln</i>	
<i>fondaparinux sodium</i>	22	FYCOMPA 6MG TAB	23	<i>gengraf 100mg cap</i>	79
<i>2.5mg/0.5ml syringe</i>		FYCOMPA 8MG TAB	23	<i>gengraf 100mg/ml oral</i>	79
<i>fondaparinux sodium</i>	22			<i>soln</i>	
<i>5mg/0.4ml syringe</i>		G		<i>gengraf 25mg cap</i>	79
<i>fondaparinux sodium</i>	22	<i>gabapentin 100mg cap</i>	23	<i>gentamicin 0.1% cream</i>	62
<i>7.5mg/0.6ml syringe</i>		<i>gabapentin 300mg cap</i>	23	<i>gentamicin 0.1% ointment</i>	62
<i>fosamprenavir 700mg tab</i>	54	<i>gabapentin 400mg cap</i>	24	<i>gentamicin 0.3% ophth</i>	81
<i>fosfomycin 3gm powder</i>	39	<i>gabapentin 50mg/ml oral</i>	24	<i>soln</i>	
<i>for oral soln</i>		<i>soln</i>		GENTAMICIN 0.8MG/ML	12
<i>fosinopril sodium 10mg</i>	35	<i>gabapentin 600mg tab</i>	24	INJ	
<i>tab</i>		<i>(Neurontin equiv)</i>		<i>gentamicin 1.2mg/ml inj</i>	12
<i>fosinopril sodium 20mg</i>	35	<i>gabapentin 800mg tab</i>	24	GENTAMICIN 1.6MG/ML	12
<i>tab</i>		<i>galantamine 12mg tab</i>	85	INJ	
<i>fosinopril sodium 40mg</i>	35	<i>galantamine 4mg tab</i>	85	GENTAMICIN 1MG/ML	12
<i>tab</i>		<i>galantamine 8mg tab</i>	85	INJ	
<i>fosinopril</i>	37	<i>galantamine</i>	85	<i>gentamicin 40mg/ml inj</i>	12
<i>sodium/hydrochlorothiazide</i>		<i>hydrobromide 16mg er</i>		GENVOYA	54
<i>de 10-12.5mg tab</i>		<i>cap</i>		150-150-200-10MG TAB	
<i>fosinopril</i>	37	<i>galantamine</i>	85	GILOTRIF 20MG TAB	41
<i>sodium/hydrochlorothiazide</i>		<i>hydrobromide 24mg er</i>		GILOTRIF 30MG TAB	41
<i>de 20-12.5mg tab</i>		<i>cap</i>		GILOTRIF 40MG TAB	41
FOTIVDA 0.89MG CAP	43	GALANTAMINE	85	<i>glatiramer acetate</i>	86
FOTIVDA 1.34MG CAP	43	HYDROBROMIDE		<i>20mg/ml syringe</i>	
FRUZAQLA 1MG CAP	41	4MG/ML ORAL SOLN			

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>glatiramer acetate</i>	86	<i>glucose</i>	77	<i>glyburide/metformin</i>	29
<i>40mg/ml syringe</i>		<i>50mg/ml/potassium</i>		<i>1.25-250mg tab</i>	
<i>glatopa 20mg/ml syringe</i>	86	<i>chloride</i>		<i>glyburide/metformin</i>	29
<i>glatopa 40mg/ml syringe</i>	86	<i>0.02meq/ml/sodium</i>		<i>2.5-500mg tab</i>	
GLEOSTINE 100MG CAP	40	<i>chloride 4.5mg/ml inj</i>		<i>glyburide/metformin</i>	29
GLEOSTINE 10MG CAP	41	<i>glucose</i>	77	<i>5-500mg tab</i>	
GLEOSTINE 40MG CAP	41	<i>50mg/ml/potassium</i>		<i>glycopyrrolate 1mg tab</i>	91
<i>glimepiride 1mg tab</i>	31	<i>chloride</i>		<i>glycopyrrolate 2mg tab</i>	91
<i>glimepiride 2mg tab</i>	32	<i>0.02meq/ml/sodium</i>		GLYXAMBI 10-5MG TAB	29
<i>glimepiride 4mg tab</i>	32	<i>chloride 9mg/ml inj</i>		GLYXAMBI 25-5MG TAB	29
<i>glipizide 10mg er tab</i>	32	<i>glucose</i>	77	<i>granisetron 1mg tab</i>	32
<i>glipizide 10mg tab</i>	32	<i>50mg/ml/potassium</i>		<i>griseofulvin 125mg tab</i>	33
<i>glipizide 2.5mg er tab</i>	32	<i>chloride</i>		<i>griseofulvin 250mg tab</i>	33
<i>glipizide 5mg er tab</i>	32	<i>0.03meq/ml/sodium</i>		<i>griseofulvin 25mg/ml oral</i>	33
<i>glipizide 5mg tab</i>	32	<i>chloride 4.5mg/ml inj</i>		<i>susp</i>	
<i>glipizide/metformin</i>	29	<i>glucose</i>	77	<i>griseofulvin 500mg tab</i>	33
<i>2.5-250mg tab</i>		<i>50mg/ml/potassium</i>		<i>guanfacine 1mg er tab</i>	11
<i>glipizide/metformin</i>	29	<i>chloride</i>		<i>guanfacine 1mg tab</i>	36
<i>2.5-500mg tab</i>		<i>0.04meq/ml/sodium</i>		<i>guanfacine 2mg er tab</i>	11
<i>glipizide/metformin</i>	29	<i>chloride 4.5mg/ml inj</i>		<i>guanfacine 2mg tab</i>	36
<i>5-500mg tab</i>		<i>glucose</i>	77	<i>guanfacine 3mg er tab</i>	11
GLUCOSE	77	<i>50mg/ml/potassium</i>		<i>guanfacine 4mg er tab</i>	11
100MG/ML/SODIUM		<i>chloride</i>		GVOKE 0.5MG/0.1ML	30
CHLORIDE 2MG/ML INJ		<i>0.04meq/ml/sodium</i>		AUTO-INJECTOR	
GLUCOSE	77	<i>chloride 9mg/ml inj</i>		GVOKE 1MG/0.2ML	30
100MG/ML/SODIUM		<i>glucose 50mg/ml/sodium</i>	77	AUTO-INJECTOR	
CHLORIDE 4.5MG/ML		<i>chloride 2mg/ml inj</i>		GVOKE 1MG/0.2ML INJ	30
INJ		<i>glucose 50mg/ml/sodium</i>	77	GVOKE 1MG/0.2ML	30
<i>glucose 50mg/ml inj</i>	81	<i>chloride 4.5mg/ml inj</i>		SYRINGE	
<i>glucose</i>	77	<i>glucose 50mg/ml/sodium</i>	77	<hr/>	
<i>50mg/ml/potassium</i>		<i>chloride 9mg/ml inj</i>		H	
<i>chloride</i>		GLUCOSE/SODIUM	77	HADLIMA 40MG/0.4ML	13
<i>0.01meq/ml/sodium</i>		CHLORIDE		AUTO-INJECTOR	
<i>chloride 4.5mg/ml inj</i>		25MG/ML-4.5MG/ML		HADLIMA 40MG/0.4ML	13
<i>glucose</i>	77	INJ		SYRINGE	
<i>50mg/ml/potassium</i>		<i>glutamine 5000mg</i>	74	HADLIMA 40MG/0.8ML	13
<i>chloride 0.02meq/ml inj</i>		<i>powder for oral soln</i>		AUTO-INJECTOR	
<i>glucose</i>	77	<i>glyburide 1.25mg tab</i>	32	HADLIMA 40MG/0.8ML	13
<i>50mg/ml/potassium</i>		GLYBURIDE 1.5MG TAB	32	SYRINGE	
<i>chloride</i>		<i>glyburide 2.5mg tab</i>	32	HAEGARDA 2000UNIT	75
<i>0.02meq/ml/sodium</i>		GLYBURIDE 3MG TAB	32	INJ	
<i>chloride 2.25mg/ml inj</i>		<i>glyburide 5mg tab</i>	32	HAEGARDA 3000UNIT	75
		GLYBURIDE 6MG TAB	32	INJ	
				<i>hailey 24 fe tab 28-day</i>	70
				<i>pack</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>halobetasol propionate</i> 0.05% cream	64	HUMALOG 100UNIT/ML KWIKPEN	31	<i>hydrochlorothiazide/lisin</i> <i>opril 12.5-20mg tab</i>	37
<i>halobetasol propionate</i> 0.05% ointment	64	HUMALOG 200UNIT/ML KWIKPEN	31	<i>hydrochlorothiazide/lisin</i> <i>opril 25-20mg tab</i>	37
<i>haloette</i> 0.120-0.015mg/24hr vaginal system	70	HUMALOG JUNIOR 100UNIT/ML PEN INJ HUMALOG MIX (50/50)	31	<i>hydrochlorothiazide/losar</i> <i>tan potassium</i> <i>12.5-100mg tab</i>	37
<i>haloperidol 0.5mg tab</i>	49	100UNIT/ML PEN INJ	31	<i>hydrochlorothiazide/losar</i> <i>tan potassium 12.5-50mg</i> <i>tab</i>	37
<i>haloperidol 10mg tab</i>	49	HUMALOG MIX (75/25)	31	<i>hydrochlorothiazide/losar</i> <i>tan potassium 25-100mg</i> <i>tab</i>	37
<i>haloperidol 1mg tab</i>	49	100UNIT/ML INJ	31	<i>hydrochlorothiazide/meto</i> <i>prolol tartrate 25-100mg</i> <i>tab</i>	37
<i>haloperidol 20mg tab</i>	49	HUMALOG MIX (75/25)	31	<i>hydrochlorothiazide/meto</i> <i>prolol tartrate 25-50mg</i> <i>tab</i>	37
<i>haloperidol 2mg tab</i>	49	100UNIT/ML KWIKPEN	31	<i>hydrochlorothiazide/meto</i> <i>prolol tartrate 50-100mg</i> <i>tab</i>	37
<i>haloperidol 2mg/ml oral</i> <i>soln</i>	49	HUMULIN (70/30) 100UNIT/ML INJ	31	<i>hydrochlorothiazide/olme</i> <i>sartan medoxomil</i> <i>12.5-20mg tab</i>	37
<i>haloperidol 5mg tab</i>	49	HUMULIN (70/30)	31	<i>hydrochlorothiazide/olme</i> <i>sartan medoxomil</i> <i>12.5-40mg tab</i>	37
<i>haloperidol 5mg/ml inj</i>	49	100UNIT/ML PEN INJ	31	<i>hydrochlorothiazide/olme</i> <i>sartan medoxomil</i> <i>25-40mg tab</i>	37
<i>haloperidol decanoate</i> 100mg/ml (1ml) inj	49	HUMULIN N 100UNIT/ML INJ	31	<i>hydrochlorothiazide/spiro</i> <i>nolactone 25-25mg tab</i>	66
<i>haloperidol decanoate</i> 100mg/ml (5ml) inj	49	HUMULIN N 100UNIT/ML PEN INJ	31	<i>hydrochlorothiazide/tria</i> <i>nterene 25-37.5mg cap</i>	66
<i>haloperidol decanoate</i> 50mg/ml (1ml) inj	49	HUMULIN R 100UNIT/ML INJ	31	<i>hydrochlorothiazide/tria</i> <i>nterene 25-37.5mg tab</i>	66
<i>haloperidol decanoate</i> 50mg/ml (5ml) inj	49	HUMULIN R 500UNIT/ML INJ	31	<i>hydrochlorothiazide/tria</i> <i>nterene 50-75mg tab</i>	66
HAVRIX 1440ELU/ML SYRINGE	93	HUMULIN R 500UNIT/ML PEN INJ	31	<i>hydrochlorothiazide/vals</i> <i>artan 12.5-160mg tab</i>	37
HAVRIX 720ELU/0.5ML SYRINGE	93	<i>hydralazine 100mg tab</i>	38	<i>hydrochlorothiazide/vals</i> <i>artan 12.5-320mg tab</i>	37
<i>heather 0.35mg 28-day</i> <i>pack</i>	84	<i>hydralazine 10mg tab</i>	38		
<i>heparin sodium porcine</i> 10000unit/ml inj	22	<i>hydralazine 25mg tab</i>	38		
<i>heparin sodium porcine</i> 1000unit/ml inj	22	<i>hydralazine 50mg tab</i>	38		
<i>heparin sodium porcine</i> 20000unit/ml inj	22	<i>hydrochlorothiazide</i> <i>12.5mg cap</i>	66		
<i>heparin sodium porcine</i> 5000unit/ml inj	22	<i>hydrochlorothiazide</i> <i>12.5mg tab</i>	67		
HEPLISAV-B 20MCG/0.5ML SYRINGE	93	<i>hydrochlorothiazide</i> <i>25mg tab</i>	67		
HIBERIX 10MCG INJ	92	<i>hydrochlorothiazide</i> <i>50mg tab</i>	67		
HUMALOG 100UNIT/ML CARTRIDGE	31	<i>hydrochlorothiazide/irbes</i> <i>artan 12.5-150mg tab</i>	37		
		<i>hydrochlorothiazide/irbes</i> <i>artan 12.5-300mg tab</i>	37		
		<i>hydrochlorothiazide/lisin</i> <i>opril 12.5-10mg tab</i>	37		

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ALPHABETICAL LISTING OF DRUGS

<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	38	<i>hydroxyurea 500mg cap</i>	47	<i>imipramine 10mg tab</i>	29
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	38	<i>hydroxyzine 10mg tab</i>	17	<i>imipramine 25mg tab</i>	29
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	38	<i>hydroxyzine 25mg tab</i>	17	<i>imipramine 50mg tab</i>	29
<i>hydrocodone</i>	15	<i>hydroxyzine 2mg/ml oral soln</i>	17	<i>imiquimod 5% cream</i>	65
<i>bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>	15	<i>hydroxyzine 50mg tab</i>	17	IMKELDI 80MG/ML	44
<i>hydrocodone</i>	15	HYDROXYZINE	17	ORAL SOLN	
<i>bitartrate/acetaminophen 10-325mg tab</i>	15	PAMOATE 100MG CAP		IMOVAX 2.5UNIT/ML INJ	93
<i>hydrocodone</i>	15	<i>hydroxyzine pamoate 25mg cap</i>	17	<i>incassia 0.35mg tab 28-day pack</i>	84
<i>bitartrate/acetaminophen 5-325mg tab</i>	15	<i>hydroxyzine pamoate 50mg cap</i>	17	INCRELEX 40MG/4ML	68
<i>hydrocodone</i>	15			INJ	
<i>bitartrate/acetaminophen 7.5-325mg tab</i>	15	I		INCRUSE ELLIPTA	19
<i>hydrocodone</i>	15	<i>ibandronate 150mg tab</i>	67	62.5MCG/INH POWDER	
<i>bitartrate/acetaminophen 7.5-325mg tab</i>	15	IBRANCE 100MG CAP	44	INHALER	
<i>hydrocodone</i>	15	IBRANCE 100MG TAB	44	<i>indapamide 1.25mg tab</i>	67
<i>bitartrate/acetaminophen 7.5-325mg tab</i>	15	IBRANCE 125MG CAP	44	<i>indapamide 2.5mg tab</i>	67
<i>hydrocodone</i>	15	IBRANCE 125MG TAB	44	<i>indomethacin 25mg cap</i>	14
<i>bitartrate/ibuprofen 7.5-200mg tab</i>	15	IBRANCE 75MG CAP	44	<i>indomethacin 50mg cap</i>	14
<i>hydrocortisone 1% cream</i>	64	IBRANCE 75MG TAB	44	<i>indomethacin 75mg er cap</i>	14
<i>hydrocortisone 1.67mg/ml enema</i>	16	<i>ibu 600mg tab</i>	14	INFANRIX SYRINGE	91
<i>hydrocortisone 10mg tab</i>	61	<i>ibu 800mg tab</i>	14	INGREZZA 40MG CAP	86
<i>hydrocortisone 2.5% cream</i>	16	<i>ibuprofen 400mg tab</i>	14	INGREZZA 40MG	86
<i>hydrocortisone 2.5% ointment</i>	64	<i>ibuprofen 600mg tab</i>	14	SPRINKLE CAP	
<i>hydrocortisone 20mg tab</i>	61	<i>ibuprofen 800mg tab</i>	14	INGREZZA 60MG CAP	86
<i>hydrocortisone 5mg tab</i>	61	<i>icatibant 10mg/ml syringe</i>	75	INGREZZA 60MG	86
HYDROCORTISONE	65	<i>iclevia tab 91-day pack</i>	70	SPRINKLE CAP	
LOTION 2.5%		ICLUSIG 10MG TAB	44	INGREZZA 80MG CAP	86
<i>hydromorphone 2mg tab</i>	14	ICLUSIG 15MG TAB	44	INGREZZA 80MG	86
<i>hydromorphone 4mg tab</i>	14	ICLUSIG 30MG TAB	44	SPRINKLE CAP	
<i>hydromorphone 8mg tab</i>	14	ICLUSIG 45MG TAB	44	INGREZZA CAP	86
<i>hydroxychloroquine sulfate 100mg tab</i>	40	<i>icosapent ethyl 1000mg cap</i>	33	THERAPY PACK (28)	
<i>hydroxychloroquine sulfate 200mg tab</i>	40	<i>icosapent ethyl 500mg cap</i>	33	INLYTA 1MG TAB	41
<i>hydroxychloroquine sulfate 300mg tab</i>	40	IDHIFA 100MG TAB	44	INLYTA 5MG TAB	41
<i>hydroxychloroquine sulfate 400mg tab</i>	40	IDHIFA 50MG TAB	44	INQOVI 35-100MG TAB	42
		<i>imatinib 100mg tab</i>	44	PACK (5)	
		<i>imatinib 400mg tab</i>	44	INREBIC 100MG CAP	44
		IMBRUVICA 140MG CAP	44	INSULIN GLARGINE	31
		IMBRUVICA 420MG TAB	44	300UNIT/ML PEN INJ	
		IMBRUVICA 70MG CAP	44	(1.5ML)	
		IMBRUVICA 70MG/ML	44	INSULIN GLARGINE	31
		ORAL SUSP		300UNIT/ML PEN INJ	
				(3ML)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

INSULIN LISPRO 100UNIT/ML INJ	31	<i>ipratropium bromide</i> 0.03% (0.021mg/act)	80	<i>isradipine 5mg cap</i>	58
INSULIN PEN NEEDLE	76	<i>nasal inhaler</i>		ITOVEBI 3MG TAB	44
INSULIN SYRINGE	76	<i>ipratropium bromide</i> 0.06% (0.042mg/act)	80	ITOVEBI 9MG TAB	44
INSULIN SYRINGE (DISP) U-100 0.3ML	76	<i>nasal inhaler</i>		<i>itraconazole 100mg cap</i>	33
INSULIN SYRINGE (DISP) U-100 1/2ML	76	<i>ipratropium/albuterol</i> 0.5-2.5mg/3ml inh soln	20	<i>ivabradine 5mg tab</i>	59
INSULIN SYRINGE (DISP) U-100 1ML	76	<i>irbesartan 150mg tab</i>	36	<i>ivabradine 7.5mg tab</i>	59
INTELENCE 25MG TAB	54	<i>irbesartan 300mg tab</i>	36	<i>ivermectin 3mg tab</i>	17
<i>introvale tab 91-day pack</i>	70	<i>irbesartan 75mg tab</i>	36	IWILFIN 192MG TAB	48
INVEGA HAFYERA 1092MG/3.5ML SYRINGE	50	ISENTRESS 100MG CHEW TAB	54	IXCHIQ INJ	93
INVEGA HAFYERA 1560MG/5ML SYRINGE	50	ISENTRESS 100MG GRANULES FOR ORAL SUSP	54	IXIARO 0.012MG/ML SYRINGE	93
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	50	ISENTRESS 25MG CHEW TAB	54	J	
INVEGA SUSTENNA 156MG/ML SYRINGE	50	ISENTRESS 400MG TAB	54	JAKAFI 10MG TAB	44
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	50	ISENTRESS 600MG TAB	54	JAKAFI 15MG TAB	44
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	50	<i>isibloom tab 28-day pack</i>	70	JAKAFI 20MG TAB	44
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	50	<i>isoniazid 100mg tab</i>	40	JAKAFI 25MG TAB	44
INVEGA TRINZA 273MG/0.875ML SYRINGE	50	<i>isoniazid 10mg/ml oral soln</i>	40	JAKAFI 5MG TAB	44
INVEGA TRINZA 410MG/1.315ML SYRINGE	50	<i>isoniazid 300mg tab</i>	40	<i>jantoven 10mg tab</i>	21
INVEGA TRINZA 546MG/1.75ML SYRINGE	50	<i>isosorbide dinitrate 10mg tab</i>	17	<i>jantoven 1mg tab</i>	21
INVEGA TRINZA 819MG/2.625ML SYRINGE	50	<i>isosorbide dinitrate 20mg tab</i>	17	<i>jantoven 2.5mg tab</i>	21
IPOL INJ	93	<i>isosorbide dinitrate 30mg tab</i>	17	<i>jantoven 2mg tab</i>	21
<i>ipratropium bromide</i> 0.02% inh soln	19	<i>isosorbide dinitrate 5mg tab</i>	17	<i>jantoven 3mg tab</i>	21
		<i>isosorbide mononitrate</i> 120mg er tab	17	<i>jantoven 4mg tab</i>	21
		<i>isosorbide mononitrate</i> 30mg er tab	17	<i>jantoven 5mg tab</i>	21
		<i>isosorbide mononitrate</i> 60mg er tab	17	<i>jantoven 6mg tab</i>	21
		<i>isotretinoin 10mg cap</i>	62	<i>jantoven 7.5mg tab</i>	21
		<i>isotretinoin 20mg cap</i>	62	JANUMET 50-1000MG TAB	29
		<i>isotretinoin 30mg cap</i>	62	JANUMET 50-500MG TAB	29
		<i>isotretinoin 40mg cap</i>	62	JANUMET XR	29
		<i>isradipine 2.5mg cap</i>	58	100-1000MG TAB	29
				JANUMET XR	29
				50-1000MG TAB	29
				JANUMET XR 50-500MG TAB	29
				JANUVIA 100MG TAB	30
				JANUVIA 25MG TAB	30
				JANUVIA 50MG TAB	30
				JARDIANCE 10MG TAB	31
				JARDIANCE 25MG TAB	31
				<i>jasmiel tab 28-day pack</i>	70
				<i>javygtor 100mg powder for oral soln</i>	68

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>javygtor 100mg tab</i>	68	<i>kcl/nacl 20meq-0.9% inj</i>	78	<i>klor-con 10meq er tab</i>	78
<i>javygtor 500mg powder for oral soln</i>	68	<i>kcl/nacl 40meq-9% inj</i>	78	<i>klor-con 10meq micro er tab</i>	78
JAYPIRCA 100MG TAB	44	<i>kelnor 1mg-35mcg tab 28-day pack</i>	70	<i>klor-con 15meq micro er tab</i>	78
JAYPIRCA 50MG TAB	44	<i>kelnor tab 1/50 28-day pack</i>	70	<i>klor-con 20meq micro er tab</i>	78
JENTADUETO	29	KERENDIA 10MG TAB	68	<i>klor-con 20meq powder for oral soln</i>	78
2.5-1000MG TAB		KERENDIA 20MG TAB	68	<i>klor-con 8meq er tab</i>	78
JENTADUETO	29	KESIMPTA 20MG/0.4ML	86	KLOXXADO 8MG/0.1ML	32
2.5-500MG TAB		PEN INJ		NASAL SPRAY	
JENTADUETO XR	29	<i>ketoconazole 2% cream</i>	63	KOSELUGO 10MG CAP	44
2.5-1000MG TAB		<i>ketoconazole 2% shampoo</i>	63	KOSELUGO 25MG CAP	44
JENTADUETO XR	29	<i>ketoconazole 200mg tab</i>	33	<i>kourzeq 0.1% oral paste</i>	61
5-1000MG TAB		<i>ketorolac tromethamine 0.4% ophth soln</i>	82	KRAZATI 200MG TAB	44
<i>jinteli 0.005-1mg tab</i>	70	<i>ketorolac tromethamine 0.5% ophth soln</i>	82	<i>kurvelo tab 28-day pack</i>	70
<i>juleber tab 28-day pack</i>	70	<i>ketorolac tromethamine 10mg tab</i>	14	L	
JULUCA 50-25MG TAB	54	KEVZARA	13	<i>labetalol 100mg tab</i>	56
<i>junel 1.5/30 tab 21-day pack</i>	70	150MG/1.14ML		<i>labetalol 200mg tab</i>	56
<i>junel 1/20 tab 21-day pack</i>	70	AUTO-INJECTOR		<i>labetalol 300mg tab</i>	56
<i>junel fe 24 1/20 28-day pack</i>	70	KEVZARA	13	<i>lacosamide 100mg tab</i>	24
<i>junel fe tab 1.5/30 28-day pack</i>	70	150MG/1.14ML		<i>lacosamide 10mg/ml oral soln</i>	24
JYLAMVO 2MG/ML	41	SYRINGE		<i>lacosamide 150mg tab</i>	24
ORAL SOLN		KEVZARA	13	<i>lacosamide 200mg tab</i>	24
JYNNEOS 0.5ML INJ	93	200MG/1.14ML		<i>lacosamide 50mg tab</i>	24
K		AUTO-INJECTOR		<i>lactulose 667mg/ml oral soln</i>	76
KALYDECO 13.4MG ORAL GRANULES	87	KEVZARA	13	<i>lamivudine 100mg tab</i>	56
KALYDECO 150MG TAB	87	200MG/1.14ML		<i>lamivudine 10mg/ml oral soln</i>	54
KALYDECO 25MG ORAL GRANULES	87	SYRINGE		<i>lamivudine 150mg tab</i>	54
KALYDECO 5.8MG ORAL GRANULES	87	KINRIX SYRINGE	91	<i>lamivudine 300mg tab</i>	54
KALYDECO 50MG ORAL GRANULES	87	<i>kionex 15gm/60ml susp</i>	80	<i>lamivudine/zidovudine 150-300mg tab</i>	54
KALYDECO 75MG ORAL GRANULES	87	KISQALI TAB 200MG DAILY DOSE PACK (21)	44	<i>lamotrigine 100mg tab</i>	24
<i>kariva tab 28-day pack</i>	70	KISQALI TAB 400MG DAILY DOSE PACK (42)	44	<i>lamotrigine 150mg tab</i>	24
KCL/D5W/LR INJ 0.15%	77	KISQALI TAB 600MG DAILY DOSE PACK (63)	44	<i>lamotrigine 200mg tab</i>	24
<i>kcl/nacl 20meq-0.45% inj</i>	77	KISQALI/FEMARA 400 CO-PACK (70)	42	<i>lamotrigine 25mg chew tab</i>	24
		KISQALI/FEMARA 600 CO-PACK (91)	42	<i>lamotrigine 25mg tab</i>	24
				<i>lamotrigine 5mg chew tab</i>	24
				<i>lansoprazole 15mg dr cap</i>	91

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ALPHABETICAL LISTING OF DRUGS

<i>lansoprazole 30mg dr cap</i>	92	<i>letrozole 2.5mg tab</i>	42	<i>levora 0.15/30 tab 28-day pack</i>	70
LANTUS 100UNIT/ML INJ	31	<i>leucovorin 10mg tab</i>	48	<i>levothyroxine sodium 100mcg tab</i>	90
LANTUS 100UNIT/ML PEN INJ	31	<i>leucovorin 15mg tab</i>	48	<i>levothyroxine sodium 112mcg tab</i>	90
<i>lapatinib 250mg tab</i>	44	<i>leucovorin 25mg tab</i>	48	<i>levothyroxine sodium 125mcg tab</i>	90
<i>larin 1.5/30 tab 21-day pack</i>	70	<i>leucovorin 5mg tab</i>	48	<i>levothyroxine sodium 137mcg tab</i>	90
<i>larin 1/20 tab 21-day pack</i>	70	<i>levalbuterol 0.31mg/3ml neb soln</i>	20	<i>levothyroxine sodium 150mcg tab</i>	90
<i>larin fe tab 1.5/30 28-day pack</i>	70	<i>levalbuterol 0.63mg/3ml inh soln</i>	20	<i>levothyroxine sodium 175mcg tab</i>	90
<i>larin fe tab 1/20 28-day pack</i>	70	<i>levalbuterol 1.25mg/3ml neb soln</i>	21	<i>levothyroxine sodium 200mcg tab</i>	90
<i>latanoprost 0.005% ophth soln</i>	83	LEVALBUTEROL	21	<i>levothyroxine sodium 25mcg tab</i>	90
LAZCLUZE 240MG TAB	41	45MCG/ACT INHALER		<i>levothyroxine sodium 300mcg tab</i>	90
LAZCLUZE 80MG TAB	41	<i>levetiracetam 1000mg tab</i>	24	<i>levothyroxine sodium 50mcg tab</i>	90
<i>leena tab 28-day pack</i>	70	<i>levetiracetam 100mg/ml oral soln</i>	24	<i>levothyroxine sodium 75mcg tab</i>	90
<i>leflunomide 10mg tab</i>	12	<i>levetiracetam 250mg tab</i>	24	<i>levothyroxine sodium 88mcg tab</i>	90
<i>leflunomide 20mg tab</i>	12	<i>levetiracetam 500mg er tab</i>	24	<i>levoxyl 100mcg tab</i>	90
<i>lenalidomide 10mg cap</i>	79	<i>levetiracetam 500mg tab</i>	24	<i>levoxyl 112mcg tab</i>	90
<i>lenalidomide 15mg cap</i>	79	<i>levetiracetam 750mg er tab</i>	24	<i>levoxyl 125mcg tab</i>	90
<i>lenalidomide 2.5mg cap</i>	79	<i>levetiracetam 750mg tab</i>	24	<i>levoxyl 137mcg tab</i>	90
<i>lenalidomide 20mg cap</i>	79	LEVOBUNOLOL 0.5%	81	<i>levoxyl 150mcg tab</i>	90
<i>lenalidomide 25mg cap</i>	79	OPHTH SOLN		<i>levoxyl 175mcg tab</i>	90
<i>lenalidomide 5mg cap</i>	79	<i>levocarnitine 100mg/ml oral soln</i>	68	<i>levoxyl 200mcg tab</i>	90
LENVIMA 10MG DAILY DOSE PACK (30)	41	<i>levocarnitine 330mg tab</i>	68	<i>levoxyl 25mcg tab</i>	90
LENVIMA 12MG DAILY DOSE PACK (90)	41	<i>levocetirizine 5mg tab</i>	88	<i>levoxyl 50mcg tab</i>	90
LENVIMA 14MG DAILY DOSE PACK (60)	41	<i>levofloxacin 250mg tab</i>	72	<i>levoxyl 75mcg tab</i>	90
LENVIMA 18MG DAILY DOSE PACK (90)	41	<i>levofloxacin 25mg/ml oral soln</i>	72	<i>levoxyl 88mcg tab</i>	90
LENVIMA 20MG DAILY DOSE PACK (60)	41	<i>levofloxacin 500mg tab</i>	72	LIBERVANT 10MG BUCCAL FILM	22
LENVIMA 24MG DAILY DOSE PACK (90)	41	<i>levofloxacin</i>	73	LIBERVANT 12.5MG BUCCAL FILM	22
LENVIMA 4MG DAILY DOSE PACK (30)	41	<i>500mg/100ml inj</i>		LIBERVANT 15MG BUCCAL FILM	22
LENVIMA 8MG DAILY DOSE PACK (60)	41	<i>levofloxacin 750mg tab</i>	73		
<i>lessina tab 28-day pack</i>	70	<i>levofloxacin</i>	73		
		<i>750mg/150ml inj</i>			
		<i>levonest tab 28-day pack</i>	70		
		<i>levonorgestrel/ethinyl estradiol</i>	70		
		<i>0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack</i>			

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

LIBERVANT 5MG BUCCAL FILM	22	<i>lisdexamfetamine dimesylate 70mg cap</i>	11	<i>lorazepam 1mg tab</i>	18
LIBERVANT 7.5MG BUCCAL FILM	22	<i>lisinopril 10mg tab</i>	35	<i>lorazepam 2mg tab</i>	18
<i>lidocaine 4% mucous membrane topical soln</i>	65	<i>lisinopril 2.5mg tab</i>	35	<i>lorazepam 2mg/ml oral soln</i>	18
<i>lidocaine 5% ointment</i>	65	<i>lisinopril 20mg tab</i>	35	LORBRENA 100MG TAB	44
<i>lidocaine 5% patch</i>	65	<i>lisinopril 30mg tab</i>	35	LORBRENA 25MG TAB	44
<i>lidocaine viscous 2% mucous membrane topical soln</i>	61	<i>lisinopril 40mg tab</i>	35	<i>loryna tab 28-day pack</i>	70
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	65	<i>lisinopril 5mg tab</i>	35	<i>losartan potassium 100mg tab</i>	36
<i>lidocan 5% patch</i>	65	LITFULO 50MG CAP	79	<i>losartan potassium 25mg tab</i>	36
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	84	<i>lithium carbonate 150mg cap</i>	49	<i>losartan potassium 50mg tab</i>	36
<i>linezolid 100mg/5ml oral susp</i>	39	<i>lithium carbonate 300mg cap</i>	49	<i>loteprednol etabonate 0.5% ophth gel</i>	82
<i>linezolid 600mg tab</i>	39	<i>lithium carbonate 300mg er tab</i>	49	<i>loteprednol etabonate 0.5% ophth susp</i>	82
<i>linezolid 600mg/300ml inj</i>	39	<i>lithium carbonate 300mg tab</i>	49	<i>lovastatin 10mg tab</i>	34
LINZESS 145MCG CAP	76	<i>lithium carbonate 450mg er tab</i>	49	<i>lovastatin 20mg tab</i>	34
LINZESS 290MCG CAP	76	LITHIUM CARBONATE 600MG CAP	49	<i>lovastatin 40mg tab</i>	34
LINZESS 72MCG CAP	76	<i>lithium citrate 60mg/ml oral soln</i>	49	<i>low-ogestrel tab 28-day pack</i>	70
<i>liothyronine sodium 25mcg tab</i>	90	LIVTENCITY 200MG TAE	55	<i>loxapine 10mg cap</i>	51
<i>liothyronine sodium 50mcg tab</i>	90	<i>loestrin fe tab 1/20 28-day pack</i>	70	<i>loxapine 25mg cap</i>	51
<i>liothyronine sodium 5mcg tab</i>	90	LOKELMA 10GM POWDER FOR ORAL SUSP	80	<i>loxapine 50mg cap</i>	51
<i>liraglutide 18mg/3ml pen inj</i>	30	LOKELMA 5GM POWDER FOR ORAL SUSP	80	<i>loxapine 5mg cap</i>	51
<i>lisdexamfetamine dimesylate 10mg cap</i>	11	LONSURF 6.14-15MG TAB	42	<i>lubiprostone 24mcg cap</i>	76
<i>lisdexamfetamine dimesylate 20mg cap</i>	11	LONSURF 8.19-20MG TAB	42	<i>lubiprostone 8mcg cap</i>	76
<i>lisdexamfetamine dimesylate 30mg cap</i>	11	<i>loperamide 2mg cap</i>	32	LUMAKRAS 120MG TAB	44
<i>lisdexamfetamine dimesylate 40mg cap</i>	11	<i>lopinavir/ritonavir 100-25mg tab</i>	54	LUMAKRAS 240MG TAB	44
<i>lisdexamfetamine dimesylate 50mg cap</i>	11	<i>lopinavir/ritonavir 200-50mg tab</i>	54	LUMAKRAS 320MG TAB	44
<i>lisdexamfetamine dimesylate 60mg cap</i>	11	<i>lopinavir/ritonavir 80-20mg/ml oral soln</i>	54	LUMIGAN 0.01% OPHTH SOLN	83
		<i>lorazepam 0.5mg tab</i>	18	LUMRYZ 28-DAY STARTER PACK (28)	88
				LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	88
				LUMRYZ 6GM GRANULES FOR ORAL SUSP	88
				LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	88

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

LUMRYZ 9GM	89	<i>maraviroc 300mg tab</i>	55	<i>memantine 14mg er cap</i>	85
GRANULES FOR ORAL SUSP		<i>marlissa tab 28-day pack</i>	70	<i>memantine 21mg er cap</i>	85
LUPKYNIS 7.9MG CAP	79	MARPLAN 10MG TAB	26	<i>memantine 28mg er cap</i>	85
LUPRON 11.25MG SYRINGE (3 MONTH)	42	MATULANE 50MG CAP	47	<i>memantine 2mg/ml oral soln</i>	85
LUPRON 3.75MG SYRINGE (1 MONTH)	42	MAVYRET 100-40MG TAB	56	<i>memantine 5mg tab</i>	85
<i>lurasidone 120mg tab</i>	49	MAVYRET 50-20MG ORAL PELLETT	56	<i>memantine 7mg er cap</i>	85
<i>lurasidone 20mg tab</i>	49	MAYZENT 0.25MG TAB	86	MENACTRA INJ	92
<i>lurasidone 40mg tab</i>	49	MAYZENT 1MG TAB	86	MENQUADFI INJ	92
<i>lurasidone 60mg tab</i>	49	MAYZENT 2MG TAB	86	MENVEO INJ	92
<i>lurasidone 80mg tab</i>	49	MAYZENT TAB STARTEI PACK (12)	86	<i>mercaptapurine 50mg tab</i>	41
<i>lutra tab 28-day pack</i>	70	MAYZENT TAB STARTEI PACK (7)	86	<i>meropenem 1gm inj</i>	39
<i>lyleq 0.35mg tab 28-day pack</i>	84	<i>meclizine 12.5mg tab</i>	32	<i>meropenem 500mg inj</i>	39
<i>lyllana 0.025mg/24hr twice weekly patch</i>	72	<i>meclizine 25mg tab</i>	32	<i>mesalamine 1200mg dr tab</i>	73
<i>lyllana 0.0375mg/24hr twice weekly patch</i>	72	<i>medroxyprogesterone acetate 10mg tab</i>	84	<i>mesalamine 1gm rectal supp</i>	73
<i>lyllana 0.05mg/24hr twice weekly patch</i>	72	<i>medroxyprogesterone acetate 150mg/ml inj</i>	85	<i>mesalamine 375mg er cap</i>	73
<i>lyllana 0.075mg/24hr twice weekly patch</i>	72	<i>medroxyprogesterone acetate 150mg/ml syringe</i>	85	<i>mesalamine 400mg dr cap</i>	73
<i>lyllana 0.1mg/24hr twice weekly patch</i>	72	<i>medroxyprogesterone acetate 2.5mg tab</i>	85	<i>mesalamine 66.7mg/ml enema</i>	73
LYNPARZA 100MG TAB	44	<i>medroxyprogesterone acetate 5mg tab</i>	85	<i>mesna 400mg tab</i>	48
LYNPARZA 150MG TAB	44	<i>mefloquine 250mg tab</i>	40	<i>metaxalone 800mg tab</i>	80
LYSODREN 500MG TAB	42	MEGESTROL ACETATE 125MG/ML SUSP	85	<i>metformin 1000mg tab</i>	30
LYTGOBI TAB 12MG DAILEY DOSE PACK (21)	44	<i>megestrol acetate 20mg tab</i>	42	<i>metformin 500mg er tab</i>	30
LYTGOBI TAB 16MG DAILEY DOSE PACK (28)	44	<i>megestrol acetate 40mg tab</i>	42	<i>metformin 500mg tab</i>	30
LYTGOBI TAB 20MG DAILEY DOSE PACK (35)	45	<i>megestrol acetate 40mg/ml oral susp</i>	42	<i>metformin 750mg er tab</i>	30
<i>lyza 0.35mg tab 28-day pack</i>	84	MEKINIST 0.05MG/ML ORAL SOLN	45	<i>metformin 850mg tab</i>	30
M		MEKINIST 0.5MG TAB	45	<i>methadone 10mg tab</i>	14
<i>magnesium sulfate 500mg/ml inj</i>	78	MEKINIST 2MG TAB	45	METHADONE 1MG/ML ORAL SOLN	14
<i>magnesium sulfate 500mg/ml syringe</i>	78	MEKTOVI 15MG TAB	45	METHADONE 2MG/ML ORAL SOLN	14
<i>malathion 0.5% lotion</i>	65	<i>meloxicam 15mg tab</i>	14	<i>methadone 5mg tab</i>	15
<i>maraviroc 150mg tab</i>	55	<i>meloxicam 7.5mg tab</i>	14	<i>methazolamide 25mg tab</i>	66
		<i>memantine 10mg tab</i>	85	<i>methazolamide 50mg tab</i>	66
				<i>methenamine hippurate 1gm tab</i>	39
				<i>methimazole 10mg tab</i>	89
				<i>methimazole 5mg tab</i>	89
				<i>methocarbamol 500mg tab</i>	80
				<i>methocarbamol 750mg 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. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>methotrexate 2.5mg tab</i>	41	<i>methylprednisolone 4mg</i>	61	<i>micafungin sodium</i>	33
METHOTREXATE	41	<i>tab pack (21)</i>		<i>100mg inj</i>	
25MG/ML INJ		<i>methylprednisolone 8mg</i>	61	<i>micafungin sodium 50mg</i>	33
<i>methotrexate 50mg/2ml</i>	41	<i>tab</i>		<i>inj</i>	
<i>inj</i>		<i>metoclopramide 10mg tab</i>	73	<i>microgestin 1.5/30 tab</i>	71
METHOXSALEN 10MG	63	<i>metoclopramide 1mg/ml</i>	73	<i>21-day pack</i>	
CAP		<i>oral soln</i>		<i>microgestin 1/20 tab</i>	71
<i>methsuximide 300mg cap</i>	26	<i>metoclopramide 5mg tab</i>	73	<i>21-day pack</i>	
<i>methylphenidate 10mg er</i>	12	<i>metolazone 10mg tab</i>	67	<i>microgestin fe tab 1.5/30</i>	71
<i>tab</i>		<i>metolazone 2.5mg tab</i>	67	<i>28-day pack</i>	
<i>methylphenidate 10mg</i>	12	<i>metolazone 5mg tab</i>	67	<i>microgestin fe tab 1/20</i>	71
<i>tab</i>		<i>metoprolol succinate</i>	57	<i>28-day pack</i>	
<i>methylphenidate 18mg er</i>	12	<i>100mg er tab</i>		<i>midodrine 10mg tab</i>	59
<i>osmotic tab</i>		<i>metoprolol succinate</i>	57	<i>midodrine 2.5mg tab</i>	59
METHYLPHENIDATE	12	<i>200mg er tab</i>		<i>midodrine 5mg tab</i>	59
18MG ER TAB		<i>metoprolol succinate</i>	57	<i>mifepristone 300mg tab</i>	30
<i>methylphenidate 1mg/ml</i>	12	<i>25mg er tab</i>		<i>mili tab 28-day pack</i>	71
<i>oral soln</i>		<i>metoprolol succinate</i>	57	<i>mimvey 28-day pack</i>	71
<i>methylphenidate 20mg er</i>	12	<i>50mg er tab</i>		<i>minocycline 100mg cap</i>	89
<i>tab</i>		<i>metoprolol tartrate</i>	57	<i>minocycline 50mg cap</i>	89
<i>methylphenidate 20mg</i>	12	<i>100mg tab</i>		<i>minocycline 75mg cap</i>	89
<i>tab</i>		<i>metoprolol tartrate 25mg</i>	57	<i>minoxidil 10mg tab</i>	38
<i>methylphenidate 27mg er</i>	12	<i>tab</i>		<i>minoxidil 2.5mg tab</i>	38
<i>osmotic tab</i>		<i>metoprolol tartrate</i>	57	<i>mirabegron 25mg er tab</i>	92
<i>methylphenidate 27mg er</i>	12	<i>37.5mg tab</i>		<i>mirabegron 50mg er tab</i>	92
<i>tab</i>		<i>metoprolol tartrate 50mg</i>	57	<i>mirtazapine 15mg odt</i>	26
<i>methylphenidate 2mg/ml</i>	12	<i>tab</i>		<i>mirtazapine 15mg tab</i>	26
<i>oral soln</i>		<i>metoprolol tartrate 75mg</i>	57	<i>mirtazapine 30mg odt</i>	26
<i>methylphenidate 36mg er</i>	12	<i>tab</i>		<i>mirtazapine 30mg tab</i>	26
<i>osmotic tab</i>		<i>metronidazole 0.75%</i>	65	<i>mirtazapine 45mg odt</i>	26
<i>methylphenidate 36mg er</i>	12	<i>cream</i>		<i>mirtazapine 45mg tab</i>	26
<i>tab</i>		<i>metronidazole 0.75% gel</i>	65	<i>mirtazapine 7.5mg tab</i>	26
<i>methylphenidate 54mg er</i>	12	<i>metronidazole 0.75%</i>	94	<i>misoprostol 100mcg tab</i>	91
<i>osmotic tab</i>		<i>vaginal gel</i>		<i>misoprostol 200mcg tab</i>	91
<i>methylphenidate 54mg er</i>	12	<i>metronidazole 1% gel</i>	65	M-M-R II INJ	93
<i>tab</i>		<i>metronidazole 250mg tab</i>	39	<i>modafinil 100mg tab</i>	12
<i>methylphenidate 5mg tab</i>	12	<i>metronidazole 500mg tab</i>	39	<i>modafinil 200mg tab</i>	12
<i>methylprednisolone 16mg</i>	61	<i>metronidazole 5mg/ml inj</i>	39	<i>moexipril 15mg tab</i>	35
<i>tab</i>		<i>metyrosine 250mg cap</i>	38	<i>moexipril 7.5mg tab</i>	35
<i>methylprednisolone 32mg</i>	61	<i>mexiletine 150mg cap</i>	18	MOLINDONE 10MG TAB	49
<i>tab</i>		<i>mexiletine 200mg cap</i>	18	MOLINDONE 25MG TAB	49
<i>methylprednisolone 4mg</i>	61	<i>mexiletine 250mg cap</i>	18	MOLINDONE 5MG TAB	50
<i>tab</i>		<i>mibelas 24 fe chewable</i>	70	<i>mometasone furoate 0.1%</i>	65
		<i>tab 28-day pack</i>		<i>cream</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>mometasone furoate 0.1% lotion</i>	65	MOUNJARO 7.5MG/0.5ML	31	<i>naproxen sodium 275mg tab</i>	14	
<i>mometasone furoate 0.1% ointment</i>	65	AUTO-INJECTOR		<i>naproxen sodium 550mg tab</i>	14	
<i>montelukast 10mg tab</i>	19	MOVANTIK 12.5MG TAB	76	<i>naratriptan 1mg tab</i>	76	
<i>montelukast 4mg chew tab</i>	19	MOVANTIK 25MG TAB	76	<i>naratriptan 2.5mg tab</i>	77	
<i>montelukast 5mg chew tab</i>	19	<i>moxifloxacin 0.5% ophth soln</i>	81	<i>nateglinide 120mg tab</i>	30	
<i>morphine sulfate 100mg er tab</i>	15	MOXIFLOXACIN 1.6MG/ML INJ	73	<i>nateglinide 60mg tab</i>	30	
<i>morphine sulfate 15mg er tab</i>	15	<i>moxifloxacin 400mg tab</i>	73	NAYZILAM 5MG/0.1ML	22	
<i>morphine sulfate 15mg tab</i>	15	MRESVIA 50MCG/0.5ML	93	NASAL SPRAY		
<i>morphine sulfate 200mg er tab</i>	15	SYRINGE		<i>neбиволol 10mg tab</i>	57	
<i>morphine sulfate 20mg/ml oral soln</i>	15	MULTAQ 400MG TAB	18	<i>neбиволol 2.5mg tab</i>	57	
<i>morphine sulfate 2mg/ml oral soln</i>	15	<i>mupirocin 2% ointment</i>	62	<i>neбиволol 20mg tab</i>	57	
<i>morphine sulfate 30mg er tab</i>	15	<i>mycophenolate mofetil 200mg/ml oral susp</i>	79	<i>neбиволol 5mg tab</i>	57	
<i>morphine sulfate 30mg tab</i>	15	<i>mycophenolate mofetil 250mg cap</i>	79	<i>necon 0.5/35 tab 28-day pack</i>	71	
<i>morphine sulfate 4mg/ml oral soln</i>	15	<i>mycophenolate mofetil 500mg tab</i>	79	NEFAZODONE 100MG TAB	27	
<i>morphine sulfate 60mg er tab</i>	15	<i>mycophenolate mofetil 500mg tab</i>	79	NEFAZODONE 150MG TAB	27	
MOUNJARO 10MG/0.5ML	30	<i>mycophenolic acid 180mg dr tab</i>	79	NEFAZODONE 200MG TAB	27	
AUTO-INJECTOR		<i>mycophenolic acid 360mg dr tab</i>	79	NEFAZODONE 250MG TAB	27	
MOUNJARO 12.5MG/0.5ML	30	N			NEFAZODONE 50MG TAB	27
AUTO-INJECTOR		<i>nabumetone 500mg tab</i>	14	<i>neomycin sulfate 500mg tab</i>	12	
MOUNJARO 15MG/0.5ML	30	<i>nabumetone 750mg tab</i>	14	<i>neomycin/bacitracin/poly myxin 5mg-400unit-10000unit ophth ointment</i>	82	
AUTO-INJECTOR		<i>nadolol 20mg tab</i>	57	NEOMYCIN/POLYMYXIN 82		
MOUNJARO 2.5MG/0.5ML	31	<i>nadolol 40mg tab</i>	57	N B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN		
AUTO-INJECTOR		<i>nadolol 80mg tab</i>	57	<i>neomycin/polymyxin/bacitracin/hydrocortisone ophth 1% ointment</i>		
MOUNJARO 5MG/0.5ML	31	<i>nafacillin 100mg/ml inj</i>	84	<i>neomycin/polymyxin/dexa methasone 0.1% ophth susp</i>	82	
AUTO-INJECTOR		<i>nafacillin 1gm inj</i>	84			
		<i>nafacillin 2gm inj</i>	84			
		NALOXONE 0.4MG/ML CARTRIDGE	32			
		<i>naloxone 0.4mg/ml inj</i>	32			
		NALOXONE 0.4MG/ML SYRINGE	32			
		<i>naloxone 1mg/ml syringe</i>	32			
		<i>naltrexone 50mg tab</i>	32			
		<i>naproxen 250mg tab</i>	14			
		<i>naproxen 375mg dr tab</i>	14			
		<i>naproxen 375mg tab</i>	14			
		<i>naproxen 500mg tab</i>	14			

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ALPHABETICAL LISTING OF DRUGS

<i>neomycin/polymyxin/hydr</i>	83	NITAZOXANIDE 500MG	39	<i>norelgestromin/ethinyl</i>	71
<i>ocortisone</i>		TAB		<i>estradiol 150-35</i>	
<i>3.5-10000unit-1% otic</i>		NITRO-BID 2%	17	<i>mcg/24hr patch</i>	
<i>soln</i>		OINTMENT		<i>norethindrone 0.35mg</i>	85
<i>neomycin/polymyxin/hydr</i>	83	<i>nitrofurantoin</i>	39	<i>28-day pack</i>	
<i>ocortisone</i>		<i>macro/nitrofurantoin</i>		<i>norethindrone acetate</i>	85
<i>3.5-10000unit-1% otic</i>		<i>mono 100mg cap</i>		<i>5mg tab</i>	
<i>susp</i>		<i>nitrofurantoin</i>	40	<i>nortrel 0.5/35 tab 28-day</i>	71
<i>neo-polycin</i>	81	<i>macrocrystals 100mg cap</i>		<i>pack</i>	
<i>5mg-400unit-10000unit</i>		<i>nitrofurantoin</i>	40	<i>nortrel 1/35 tab 21-day</i>	71
<i>ophth ointment</i>		<i>macrocrystals 50mg cap</i>		<i>pack</i>	
<i>neo-polycin hc ophth</i>	82	<i>nitroglycerin 0.1mg/hr</i>	17	<i>nortrel 1/35 tab 28-day</i>	71
<i>ointment</i>		<i>patch</i>		<i>pack</i>	
NERLYNX 40MG TAB	45	<i>nitroglycerin 0.2mg/hr</i>	17	<i>nortrel 7/7/7 tab 28-day</i>	71
NEVIRAPINE 10MG/ML	55	<i>patch</i>		<i>pack</i>	
ORAL SUSP		<i>nitroglycerin 0.3mg sl tab</i>	17	<i>nortriptyline 10mg cap</i>	29
<i>nevirapine 200mg tab</i>	55	<i>nitroglycerin 0.4% rectal</i>	17	<i>nortriptyline 25mg cap</i>	29
<i>nevirapine 400mg er tab</i>	55	<i>ointment</i>		<i>nortriptyline 2mg/ml oral</i>	29
NEXLETOL 180MG TAB	34	<i>nitroglycerin 0.4mg sl tab</i>	17	<i>soln</i>	
NEXLIZET 180-10MG	34	<i>nitroglycerin 0.4mg/hr</i>	17	<i>nortriptyline 50mg cap</i>	29
TAB		<i>patch</i>		<i>nortriptyline 75mg cap</i>	29
NEXPLANON 68MG	85	<i>nitroglycerin 0.6mg sl tab</i>	17	NORVIR 100MG ORAL	55
IMPLANT		<i>nitroglycerin 0.6mg/hr</i>	17	POWDER	
<i>niacin 1000mg er tab</i>	34	<i>patch</i>		NUBEQA 300MG TAB	42
<i>niacin 500mg er tab</i>	34	NIVESTYM	74	NUCALA 100MG INJ	19
<i>niacin 750mg er tab</i>	34	300MCG/0.5ML		NUCALA 100MG/ML	19
NICOTROL 10MG/ML	87	SYRINGE		AUTO-INJECTOR	
NASAL INHALER		NIVESTYM 300MCG/ML	74	NUCALA 100MG/ML	19
<i>nifedipine 30mg er tab</i>	58	INJ		SYRINGE	
<i>nifedipine 30mg osmotic</i>	58	NIVESTYM	74	NUCALA 40MG/0.4ML	19
<i>er tab</i>		480MCG/0.8ML		SYRINGE	
<i>nifedipine 60mg er tab</i>	58	SYRINGE		NUDEXTA 20-10MG	87
<i>nifedipine 60mg osmotic</i>	58	NIVESTYM	74	CAP	
<i>er tab</i>		480MCG/1.6ML INJ		NUPLAZID 10MG TAB	50
<i>nifedipine 90mg er tab</i>	58	<i>nora-be 0.35mg tab</i>	85	NUPLAZID 34MG CAP	50
<i>nifedipine 90mg osmotic</i>	58	<i>28-day pack</i>		<i>nyamyc 100000unit/gm</i>	63
<i>er tab</i>		NORDITROPIN	67	<i>topical powder</i>	
<i>nikki tab 28-day pack</i>	71	10MG/1.5ML PEN INJ		<i>nylia 1/35 tab 28-day</i>	71
<i>nilutamide 150mg tab</i>	42	NORDITROPIN	67	<i>pack</i>	
<i>nimodipine 30mg cap</i>	58	15MG/1.5ML PEN INJ		<i>nylia 7/7/7 tab 28-day</i>	71
NINLARO 2.3MG CAP	45	NORDITROPIN	67	<i>pack</i>	
NINLARO 3MG CAP	45	30MG/3ML PEN INJ		<i>nystatin 100000 unit/gm</i>	63
NINLARO 4MG CAP	45	NORDITROPIN	67	<i>ointment</i>	
		5MG/1.5ML PEN INJ			

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ALPHABETICAL LISTING OF DRUGS

<i>nystatin 100000unit/gm topical powder</i>	63	OJEMDA 100MG TAB	45	OMNITROPE	67
<i>nystatin 100000unit/ml cream</i>	63	PACK (400MG ONCE WEEKLY) (16)		5MG/1.5ML CARTRIDGE	
<i>nystatin 100000unit/ml oral susp</i>	61	OJEMDA 100MG TAB	45	<i>ondansetron 0.8mg/ml oral soln</i>	32
<i>nystatin 500000unit tab</i>	33	PACK (600MG ONCE WEEKLY) (24)		<i>ondansetron 4mg odt</i>	32
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	63	OJEMDA 25MG/ML	45	<i>ondansetron 4mg tab</i>	32
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	63	POWDER FOR ORAL SUSP		<i>ondansetron 8mg odt</i>	32
<i>nystop 100000unit/gm topical powder</i>	63	OJJAARA 100MG TAB	45	<i>ondansetron 8mg tab</i>	32
NYVEPRIA 6MG/0.6ML SYRINGE	74	OJJAARA 150MG TAB	45	ONUREG 200MG TAB	41
<hr/>					
O		OJJAARA 200MG TAB	45	ONUREG 300MG TAB	41
<i>ocella tab 28-day pack</i>	71	<i>olanzapine 10mg inj</i>	51	OPSUMIT 10MG TAB	88
OCTAGAM 1GM/20ML INJ	83	<i>olanzapine 10mg odt</i>	51	OPVEE 2.7MG/0.1ML	32
OCTAGAM 2GM/20ML INJ	83	<i>olanzapine 10mg tab</i>	51	NASAL SPRAY	
<i>octreotide 0.05mg/ml inj</i>	68	<i>olanzapine 15mg odt</i>	51	ORENCIA 125MG/ML	14
<i>octreotide 0.1mg/ml inj</i>	68	<i>olanzapine 15mg tab</i>	51	AUTO-INJECTOR	
<i>octreotide 0.2mg/ml inj</i>	68	<i>olanzapine 2.5mg tab</i>	51	ORENCIA 125MG/ML	14
<i>octreotide 0.5mg/ml inj</i>	68	<i>olanzapine 20mg odt</i>	51	SYRINGE	
<i>octreotide 1mg/ml inj</i>	68	<i>olanzapine 20mg tab</i>	51	ORENCIA 50MG/0.4ML	14
ODEFSEY 200-25-25MG TAB	55	<i>olanzapine 20mg tab</i>	52	SYRINGE	
ODOMZO 200MG CAP	41	<i>olanzapine 5mg odt</i>	52	ORENCIA 87.5MG/0.7ML	14
OFEV 100MG CAP	87	<i>olanzapine 5mg tab</i>	52	SYRINGE	
OFEV 150MG CAP	87	<i>olanzapine 7.5mg tab</i>	52	ORGOVYX 120MG TAB	42
<i>ofloxacin 0.3% ophth soln</i>	82	<i>olmesartan medoxomil 20mg tab</i>	36	ORKAMBI 125-100MG	87
<i>ofloxacin 0.3% otic soln</i>	83	<i>olmesartan medoxomil 40mg tab</i>	36	ORAL GRANULES	
OGSIVEO 100MG TAB	45	<i>olmesartan medoxomil 5mg tab</i>	36	ORKAMBI 125-100MG	87
7-DAY PACK (14)		<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	80	TAB	
OGSIVEO 150MG TAB	45	OLUMIANT 1MG TAB	12	ORKAMBI 125-200MG	87
7-DAY PACK (14)		OLUMIANT 2MG TAB	12	TAB	
OGSIVEO 50MG TAB	45	OLUMIANT 4MG TAB	12	ORKAMBI 188-150MG	87
OJEMDA 100MG TAB	45	<i>omega-3 acid ethyl esters (usp) 1gm cap</i>	34	ORAL GRANULES	
		<i>omeprazole 10mg dr cap</i>	92	ORKAMBI 94-75MG	87
		<i>omeprazole 20mg dr cap</i>	92	ORAL GRANULES	
		<i>omeprazole 40mg dr cap</i>	92	<i>orphenadrine citrate 100mg er tab</i>	80
		OMNITROPE	67	ORSERDU 345MG TAB	42
		10MG/1.5ML		ORSERDU 86MG TAB	42
		CARTRIDGE		<i>oseltamivir 30mg cap</i>	56
		OMNITROPE 5.8MG INJ	67	<i>oseltamivir 45mg cap</i>	56
				<i>oseltamivir 6mg/ml oral susp</i>	56
				<i>oseltamivir 75mg cap</i>	56
				OTEZLA 20MG TAB	63
				OTEZLA 30MG TAB	63

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ALPHABETICAL LISTING OF DRUGS

OTEZLA TAB 28-DAY STARTER PACK (55)	63	OXYCONTIN 40MG ER TAB	15	PEDVAXHIB 7.5MCG/0.5ML INJ	92
<i>oxacillin 100mg/ml inj</i>	84	OXYCONTIN 60MG ER TAB	15	<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	76
<i>oxacillin 1gm inj</i>	84	OXYCONTIN 80MG ER TAB	15	<i>peg 3350/electrolyte powder for oral soln</i>	76
<i>oxacillin 2gm inj</i>	84	OZEMPIC 2.68MG/ML PEN INJ	31	<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	76
<i>oxaprozin 600mg tab</i>	14	OZEMPIC 2MG/3ML PEN INJ	31	PEGASYS 180MCG/0.5ML SYRINGE	56
<i>oxcarbazepine 150mg tab</i>	24	OZEMPIC 4MG/3ML PEN INJ	31	PEGASYS 180MCG/ML INJ	56
<i>oxcarbazepine 300mg tab</i>	24	P		PEMAZYRE 13.5MG TAB	45
<i>oxcarbazepine 600mg tab</i>	24	<i>pacerone 100mg tab</i>	18	PEMAZYRE 4.5MG TAB	45
<i>oxcarbazepine 60mg/ml oral susp</i>	24	<i>pacerone 200mg tab</i>	18	PEMAZYRE 9MG TAB	45
<i>oxybutynin chloride 10mg er tab</i>	92	<i>pacerone 400mg tab</i>	18	PENBRAYA INJ	92
<i>oxybutynin chloride 15mg er tab</i>	92	<i>paliperidone 1.5mg er tab</i>	50	<i>penicillamine 250mg tab</i>	78
<i>oxybutynin chloride 1mg/ml oral soln</i>	92	<i>paliperidone 3mg er tab</i>	50	<i>penicillin g potassium 1000000unit/ml inj</i>	84
<i>oxybutynin chloride 5mg er tab</i>	92	<i>paliperidone 6mg er tab</i>	50	PENICILLIN G SODIUM 100000UNIT/ML INJ	84
<i>oxybutynin chloride 5mg tab</i>	92	<i>paliperidone 9mg er tab</i>	50	<i>penicillin v potassium 250mg tab</i>	84
<i>oxycodone 10mg tab</i>	15	PANRETIN 0.1% GEL	63	PENICILLIN V 84	84
<i>oxycodone 15mg tab</i>	15	<i>pantoprazole 20mg dr tab</i>	92	POTASSIUM 25MG/ML ORAL SOLN	
<i>oxycodone 1mg/ml oral soln</i>	15	<i>pantoprazole 40mg dr tab</i>	92	<i>penicillin v potassium 500mg tab</i>	84
<i>oxycodone 20mg tab</i>	15	<i>paricalcitol 1mcg cap</i>	68	PENICILLIN V 84	84
<i>oxycodone 30mg tab</i>	15	<i>paricalcitol 2mcg cap</i>	68	POTASSIUM 50MG/ML ORAL SOLN	
<i>oxycodone 5mg tab</i>	15	<i>paricalcitol 4mcg cap</i>	68	PENTACEL 91	91
<i>oxycodone/acetaminophen 10-325mg tab</i>	15	<i>paroxetine 10mg tab</i>	27	96-30-68UNIT/ML INJ	
<i>oxycodone/acetaminophen 10-325mg tab</i>	15	<i>paroxetine 10mg/5ml oral susp</i>	27	<i>pentamidine isethionate 300mg inj</i>	39
<i>oxycodone/acetaminophen 16-325mg tab</i>	16	<i>paroxetine 12.5mg er tab</i>	27	<i>pentamidine isethionate 300mg/6ml inh soln</i>	39
<i>oxycodone/acetaminophen 16-325mg tab</i>	16	<i>paroxetine 20mg tab</i>	27	<i>pentoxifylline 400mg er tab</i>	59
<i>oxycodone/acetaminophen 16-325mg tab</i>	16	<i>paroxetine 25mg er tab</i>	27		
<i>oxycodone/acetaminophen 16-325mg tab</i>	16	<i>paroxetine 30mg tab</i>	27		
<i>oxycodone/acetaminophen 16-325mg tab</i>	16	<i>paroxetine 37.5mg er tab</i>	27		
<i>oxycodone/acetaminophen 16-325mg tab</i>	16	<i>paroxetine 40mg tab</i>	27		
OXYCONTIN 10MG ER TAB	15	PAXLOVID 150MG/100MG TAB PACK (20)	56		
OXYCONTIN 15MG ER TAB	15	PAXLOVID 150MG/100MG TAB PACK (30)	56		
OXYCONTIN 20MG ER TAB	15	<i>pazopanib 200mg tab</i>	45		
OXYCONTIN 30MG ER TAB	15	PEDIARIX SYRINGE	91		

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ALPHABETICAL LISTING OF DRUGS

PERINDOPRIL	35	PIMOZIDE 2MG TAB	87	POMALYST 4MG CAP	47
ERBUMINE 2MG TAB		<i>pimtree tab 28-day pack</i>	71	<i>portia tab 28-day pack</i>	71
<i>perindopril erbumine</i>	35	<i>pindolol 10mg tab</i>	57	<i>posaconazole 100mg dr</i>	33
<i>4mg tab</i>		<i>pindolol 5mg tab</i>	57	<i>tab</i>	
PERINDOPRIL	35	<i>pioglitazone 15mg tab</i>	30	<i>posaconazole 40mg/ml</i>	33
ERBUMINE 8MG TAB		<i>pioglitazone 30mg tab</i>	30	<i>oral susp</i>	
<i>periogard 0.12%</i>	61	<i>pioglitazone 45mg tab</i>	30	<i>potassium chloride</i>	78
<i>mouthwash</i>		<i>piperacillin/tazobactam</i>	84	<i>1.33meq/ml oral soln</i>	
<i>permethrin 5% cream</i>	65	<i>2000-250mg inj</i>		<i>potassium chloride</i>	78
<i>perphenazine 16mg tab</i>	52	<i>piperacillin/tazobactam</i>	84	<i>10meq er cap</i>	
<i>perphenazine 2mg tab</i>	52	<i>3000-375mg inj</i>		<i>potassium chloride</i>	78
<i>perphenazine 4mg tab</i>	52	<i>piperacillin/tazobactam</i>	84	<i>10meq er tab</i>	
<i>perphenazine 8mg tab</i>	52	<i>36-4.5gm inj</i>		<i>potassium chloride</i>	78
PERSERIS 120MG	50	<i>piperacillin/tazobactam</i>	84	<i>10meq micro er tab</i>	
SYRINGE		<i>4000-500mg inj</i>		POTASSIUM CHLORIDE	78
PERSERIS 90MG	50	PIQRAY TAB 200MG	45	10MEQ/100ML INJ	
SYRINGE		DAILY DOSE PACK (28)		POTASSIUM CHLORIDE	78
PHENELZINE 15MG TAB	27	PIQRAY TAB 250MG	45	15MEQ ER TAB	
<i>phenobarbital 100mg tab</i>	24	DAILY DOSE PACK (56)		<i>potassium chloride</i>	78
<i>phenobarbital 15mg tab</i>	24	PIQRAY TAB 300MG	45	<i>15meq micro er tab</i>	
<i>phenobarbital 16.2mg tab</i>	24	DAILY DOSE PACK (56)		<i>potassium chloride</i>	78
<i>phenobarbital 30mg tab</i>	24	<i>pirfenidone 267mg cap</i>	87	<i>2.67meq/ml oral soln</i>	
<i>phenobarbital 32.4mg tab</i>	24	<i>pirfenidone 267mg tab</i>	87	<i>potassium chloride</i>	78
<i>phenobarbital 4mg/ml</i>	24	<i>pirfenidone 801mg tab</i>	88	<i>20meq er tab</i>	
<i>oral soln</i>		<i>piroxicam 10mg cap</i>	14	<i>potassium chloride</i>	78
<i>phenobarbital 60mg tab</i>	24	<i>piroxicam 20mg cap</i>	14	<i>20meq micro er tab</i>	
<i>phenobarbital 64.8mg tab</i>	24	PLASMA-LYTE A INJ	78	<i>potassium chloride</i>	78
<i>phenobarbital 97.2mg tab</i>	24	PLEGRIDY	86	<i>20meq powder for oral</i>	
<i>phenytoin 25mg/ml oral</i>	24	125MCG/0.5ML		<i>soln</i>	
<i>susp</i>		AUTO-INJECTOR		POTASSIUM CHLORIDE	78
<i>phenytoin 50mg chew tab</i>	24	PLEGRIDY	87	20MEQ/100ML INJ	
<i>phenytoin sodium 100mg</i>	24	125MCG/0.5ML		<i>potassium chloride</i>	78
<i>er cap</i>		SYRINGE		<i>2meq/ml (20ml) inj</i>	
PIFELTRO 100MG TAB	55	<i>plenamine 15% inj</i>	81	<i>potassium chloride</i>	78
<i>pilocarpine 1% ophth</i>	83	PODOFILOX 0.5%	65	<i>2meq/ml inj</i>	
<i>soln</i>		TOPICAL SOLN		POTASSIUM CHLORIDE	78
<i>pilocarpine 2% ophth</i>	83	<i>polycin 0.5-10unit/mg</i>	82	40MEQ/100ML INJ	
<i>soln</i>		<i>ophth ointment</i>		<i>potassium chloride 8meq</i>	78
<i>pilocarpine 4% ophth</i>	83	<i>polymyxin b/trimethoprim</i>	82	<i>er cap</i>	
<i>soln</i>		<i>10000 unit/ml-0.1%</i>		<i>potassium chloride 8meq</i>	78
<i>pilocarpine 5mg tab</i>	61	<i>ophth soln</i>		<i>er tab</i>	
<i>pilocarpine 7.5mg tab</i>	61	POMALYST 1MG CAP	47	<i>potassium citrate 10meq</i>	73
<i>pimecrolimus 1% cream</i>	65	POMALYST 2MG CAP	47	<i>er tab</i>	
PIMOZIDE 1MG TAB	87	POMALYST 3MG CAP	47		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>potassium citrate 15meq er tab</i>	73	<i>pregabalin 200mg cap</i>	24	PRIVIGEN 20GM/200ML	83
<i>potassium citrate 5meq er tab</i>	73	<i>pregabalin 20mg/ml oral soln</i>	24	INJ	
<i>pramipexole 0.125mg tab</i>	48	<i>pregabalin 225mg cap</i>	24	<i>probenecid 500mg tab</i>	74
<i>pramipexole 0.25mg tab</i>	48	<i>pregabalin 25mg cap</i>	24	<i>prochlorperazine 10mg tab</i>	52
<i>pramipexole 0.5mg tab</i>	48	<i>pregabalin 300mg cap</i>	24	<i>prochlorperazine 25mg rectal supp</i>	52
<i>pramipexole 0.75mg tab</i>	48	<i>pregabalin 50mg cap</i>	25	<i>prochlorperazine 5mg tab</i>	52
<i>pramipexole 1.5mg tab</i>	48	<i>pregabalin 75mg cap</i>	25	<i>procto-med 2.5% cream</i>	16
<i>pramipexole 1mg tab</i>	48	PREMARIN 0.3MG TAB	72	<i>proctosol 2.5% cream</i>	16
<i>prasugrel 10mg tab</i>	74	PREMARIN 0.45MG TAB	72	<i>proctozone hc 2.5% cream</i>	16
<i>prasugrel 5mg tab</i>	74	PREMARIN 0.625MG TAB	72	<i>progesterone 100mg cap</i>	85
<i>pravastatin sodium 10mg tab</i>	34	PREMARIN 0.625MG VAGINAL CREAM	94	<i>progesterone 200mg cap</i>	85
<i>pravastatin sodium 20mg tab</i>	34	PREMARIN 0.9MG TAB	72	PROGRAF 0.2MG GRANULES FOR ORAL SUSP	
<i>pravastatin sodium 40mg tab</i>	34	PREMARIN 1.25MG TAB	72	PROGRAF 1MG GRANULES FOR ORAL SUSP	79
<i>pravastatin sodium 80mg tab</i>	34	PREMPHASE 28-DAY PACK	71	PROLASTIN 1000MG INJ	87
<i>praziquantel 600mg tab</i>	17	PREMPRO 0.3/1.5MG 28-DAY PACK	71	PROLIA 60MG/ML SYRINGE	67
<i>prazosin 1mg cap</i>	36	PREMPRO 0.45/1.5MG 28-DAY PACK	71	PROMACTA 12.5MG POWDER FOR ORAL SUSP	74
<i>prazosin 2mg cap</i>	36	PREMPRO 0.625/2.5MG 28-DAY PACK	71	PROMACTA 12.5MG TAB	74
<i>prazosin 5mg cap</i>	36	PREMPRO 0.625/5MG 28-DAY PACK	71	PROMACTA 25MG POWDER FOR ORAL SUSP	75
PREDNISOLONE 1% OPTH SOLN	82	<i>prevalite 4gm powder for oral susp</i>	34	PROMACTA 25MG TAB	75
<i>prednisolone 1mg/ml oral soln</i>	61	PREVYMIS 240MG TAB	55	PROMACTA 50MG TAB	75
<i>prednisolone 3mg/ml oral soln</i>	61	PREVYMIS 480MG TAB	55	PROMACTA 75MG TAB	75
<i>prednisolone 5mg/ml oral soln</i>	61	PREZCOBIX 150-800MG TAB	55	<i>promethazine 1.25mg/ml oral soln</i>	88
<i>prednisolone acetate 1% ophth susp</i>	82	PREZISTA 100MG/ML ORAL SUSP	55	<i>promethazine 12.5mg tab</i>	88
<i>prednisone 10mg tab</i>	61	PREZISTA 150MG TAB	55	<i>promethazine 25mg tab</i>	88
<i>prednisone 1mg tab</i>	61	PREZISTA 75MG TAB	55	<i>promethazine 50mg tab</i>	88
PREDNISONE 1MG/ML ORAL SOLN	61	PRIFTIN 150MG TAB	40	<i>propafenone 150mg tab</i>	18
<i>prednisone 2.5mg tab</i>	61	PRIMAQUINE	40	<i>propafenone 225mg er cap</i>	18
<i>prednisone 20mg tab</i>	61	PHOSPHATE 26.3MG TAB		<i>propafenone 225mg tab</i>	18
<i>prednisone 50mg tab</i>	61	<i>primidone 250mg tab</i>	25	<i>propafenone 300mg tab</i>	18
<i>prednisone 5mg tab</i>	61	<i>primidone 50mg tab</i>	25	<i>propafenone 325mg er cap</i>	18
<i>pregabalin 100mg cap</i>	24	PRIORIX INJ	93		
<i>pregabalin 150mg cap</i>	24				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>propafenone 425mg er cap</i>	18	<i>quetiapine 400mg tab</i>	52	RECOMBIVAX	93
<i>propranolol 10mg tab</i>	57	<i>quetiapine 50mg er tab</i>	52	5MCG/0.5ML SYRINGE	
<i>propranolol 120mg er cap</i>	57	<i>quetiapine 50mg tab</i>	52	REGRANEX 0.01% GEL	65
<i>propranolol 160mg er cap</i>	57	<i>quinapril 10mg tab</i>	35	RELENZA 5MG/BLISTER POWDER INHALER	56
<i>propranolol 20mg tab</i>	57	<i>quinapril 20mg tab</i>	35	<i>repaglinide 0.5mg tab</i>	30
<i>propranolol 40mg tab</i>	57	<i>quinapril 40mg tab</i>	35	<i>repaglinide 1mg tab</i>	30
<i>propranolol 4mg/ml oral soln</i>	57	<i>quinapril 5mg tab</i>	35	<i>repaglinide 2mg tab</i>	30
<i>propranolol 60mg er cap</i>	57	QUINIDINE SULFATE 200MG TAB	18	REPATHA 140MG/ML	34
<i>propranolol 60mg tab</i>	57	QUINIDINE SULFATE 300MG TAB	18	AUTO-INJECTOR	
<i>propranolol 80mg er cap</i>	57	<i>quinine sulfate 324mg cap</i>	40	REPATHA 140MG/ML SYRINGE	34
<i>propranolol 80mg tab</i>	57	QVAR 40MCG	20	REPATHA 420MG/3.5ML CARTRIDGE	34
PROPRANOLOL 8MG/ML ORAL SOLN	57	REDIHALER		RETACRIT	75
<i>propylthiouracil 50mg tab</i>	89	QVAR 80MCG	20	10000UNIT/ML INJ	
PROQUAD INJ	93	REDIHALER		RETACRIT	75
PROSOL 20% INJ	81	<hr/>		20000UNIT/2ML INJ	
<i>protriptyline 10mg tab</i>	29	R		RETACRIT	75
<i>protriptyline 5mg tab</i>	29	RABAVERT 2.5UNIT/ML INJ	93	20000UNIT/ML INJ	
PULMOZYME 1MG/ML INH SOLN	87	<i>rabeprazole sodium 20mg dr tab</i>	92	RETACRIT 2000UNIT/ML INJ	75
PURIXAN 2000MG/100ML ORAL SUSP	41	RADICAVA 105MG/5ML ORAL SUSP	81	RETACRIT 3000UNIT/ML INJ	75
<i>pyrazinamide 500mg tab</i>	40	<i>raloxifene 60mg tab</i>	67	RETACRIT	75
<i>pyridostigmine bromide 60mg tab</i>	40	<i>ramelteon 8mg tab</i>	75	40000UNIT/ML INJ	
<i>pyrimethamine 25mg tab</i>	40	<i>ramipril 1.25mg cap</i>	35	RETACRIT 4000UNIT/ML INJ	75
<hr/>		<i>ramipril 10mg cap</i>	35	RETEVMO 120MG TAB	45
Q		<i>ramipril 2.5mg cap</i>	35	RETEVMO 160MG TAB	45
QINLOCK 50MG TAB	45	<i>ramipril 5mg cap</i>	35	RETEVMO 40MG CAP	45
QUADRACEL INJ	91	<i>ranolazine 1000mg er tab</i>	59	RETEVMO 40MG TAB	45
QUADRACEL SYRINGE	91	<i>ranolazine 500mg er tab</i>	59	RETEVMO 80MG CAP	45
<i>quetiapine 100mg tab</i>	52	<i>rasagiline 0.5mg tab</i>	49	RETEVMO 80MG TAB	45
<i>quetiapine 150mg er tab</i>	52	<i>rasagiline 1mg tab</i>	49	REVUFORJ 110MG TAB	47
<i>quetiapine 200mg er tab</i>	52	<i>reclipsen tab 28-day pack</i>	71	REVUFORJ 160MG TAB	47
<i>quetiapine 200mg tab</i>	52	RECOMBIVAX 10MCG/ML INJ	93	REXULTI 0.25MG TAB	53
<i>quetiapine 25mg tab</i>	52	RECOMBIVAX 10MCG/ML SYRINGE	93	REXULTI 0.5MG TAB	53
<i>quetiapine 300mg er tab</i>	52	RECOMBIVAX 40MCG/ML INJ	93	REXULTI 1MG TAB	53
<i>quetiapine 300mg tab</i>	52	RECOMBIVAX 5MCG/0.5ML INJ	93	REXULTI 2MG TAB	53
<i>quetiapine 400mg er tab</i>	52			REXULTI 3MG TAB	53
				REXULTI 4MG TAB	53
				REYATAZ 50MG ORAL POWDER	55

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ALPHABETICAL LISTING OF DRUGS

REZDIFFRA 100MG TAB	73	<i>risperidone 37.5mg inj</i>	51	<i>rosuvastatin calcium 5mg</i>	34
REZDIFFRA 60MG TAB	73	<i>risperidone 3mg odt</i>	51	<i>tab</i>	
REZDIFFRA 80MG TAB	73	<i>risperidone 3mg tab</i>	51	ROTARIX	93
REZLIDHIA 150MG CAP	45	<i>risperidone 4mg odt</i>	51	667000UNIT/ML ORAL	
REZUROCK 200MG TAB	79	<i>risperidone 4mg tab</i>	51	SUSP	
RHOPRESSA 0.02%	82	<i>risperidone 50mg inj</i>	51	ROTATEQ ORAL SUSP	93
OPHTH SOLN		<i>risperidone microspheres</i>	51	<i>roweepra 500mg tab</i>	25
RIBAVIRIN 200MG CAP	56	<i>12.5mg inj</i>		ROZLYTREK 100MG	45
RIBAVIRIN 200MG TAB	56	<i>risperidone microspheres</i>	51	CAP	
<i>rifabutin 150mg cap</i>	40	<i>25mg inj</i>		ROZLYTREK 200MG	45
<i>rifampin 150mg cap</i>	40	<i>ritonavir 100mg tab</i>	55	CAP	
<i>rifampin 300mg cap</i>	40	<i>rivastigmine 1.5mg cap</i>	85	ROZLYTREK 50MG	45
<i>rifampin 600mg inj</i>	40	<i>rivastigmine 13.3mg/24hr</i>	85	ORAL PELLETT	
<i>riluzole 50mg tab</i>	81	<i>patch</i>		RUBRACA 200MG TAB	45
RIMANTADINE 100MG	56	<i>rivastigmine 3mg cap</i>	85	RUBRACA 250MG TAB	45
TAB		<i>rivastigmine 4.5mg cap</i>	85	RUBRACA 300MG TAB	45
RINVOQ 15MG ER TAB	12	<i>rivastigmine 4.6mg/24hr</i>	85	<i>rufinamide 200mg tab</i>	25
RINVOQ 1MG/ML ORAL	12	<i>patch</i>		<i>rufinamide 400mg tab</i>	25
SOLN		<i>rivastigmine 6mg cap</i>	85	<i>rufinamide 40mg/ml oral</i>	25
RINVOQ 30MG ER TAB	12	<i>rivastigmine 9.5mg/24hr</i>	85	<i>susp</i>	
RINVOQ 45MG ER TAB	12	<i>patch</i>		RUKOBIA 600MG ER	55
<i>risedronate sodium</i>	67	<i>rizatriptan 10mg odt</i>	77	TAB	
<i>150mg tab</i>		<i>rizatriptan 10mg tab</i>	77	RYBELSUS 14MG TAB	31
<i>risedronate sodium 30mg</i>	67	<i>rizatriptan 5mg odt</i>	77	RYBELSUS 3MG TAB	31
<i>tab</i>		<i>rizatriptan 5mg tab</i>	77	RYBELSUS 7MG TAB	31
<i>risedronate sodium 35mg</i>	67	ROCKLATAN	82	RYDAPT 25MG CAP	45
<i>tab</i>		0.02-0.005% OPTH			
<i>risedronate sodium 35mg</i>	67	SOLN		S	
<i>tab pack (12)</i>		<i>roflumilast 0.5mg tab</i>	88	<i>sajazir 30mg/3ml syringe</i>	75
<i>risedronate sodium 35mg</i>	67	<i>roflumilast 250mcg tab</i>	88	<i>salmon calcitonin</i>	67
<i>tab pack (4)</i>		<i>ropinirole 0.25mg tab</i>	48	<i>200unit/act nasal spray</i>	
<i>risedronate sodium 5mg</i>	67	<i>ropinirole 0.5mg tab</i>	48	SANTYL 250UNIT/GM	65
<i>tab</i>		<i>ropinirole 1mg tab</i>	48	OINTMENT	
RISPERIDONE 0.25MG	50	<i>ropinirole 1mg tab</i>	48	<i>sapropterin 100mg</i>	68
ODT		<i>ropinirole 2mg tab</i>	49	<i>powder for oral soln</i>	
<i>risperidone 0.25mg tab</i>	50	<i>ropinirole 3mg tab</i>	49	<i>sapropterin 100mg tab</i>	68
<i>risperidone 0.5mg odt</i>	50	<i>ropinirole 4mg tab</i>	49	<i>sapropterin 500mg</i>	68
<i>risperidone 0.5mg tab</i>	51	<i>ropinirole 5mg tab</i>	49	<i>powder for oral soln</i>	
<i>risperidone 1mg odt</i>	51	<i>rosuvastatin calcium</i>	34	SCSEMBLIX 100MG TAB	45
<i>risperidone 1mg tab</i>	51	<i>10mg tab</i>		SCSEMBLIX 20MG TAB	45
<i>risperidone 1mg/ml oral</i>	51	<i>rosuvastatin calcium</i>	34	SCSEMBLIX 40MG TAB	46
<i>soln</i>		<i>20mg tab</i>		<i>scopolamine 1mg/72hr</i>	32
<i>risperidone 2mg odt</i>	51	<i>rosuvastatin calcium</i>	34	<i>patch</i>	
<i>risperidone 2mg tab</i>	51	<i>40mg tab</i>		SECUADO 3.8MG/24HR	52
				PATCH	

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ALPHABETICAL LISTING OF DRUGS

SECUADO 5.7MG/24HR PATCH	52	SIRTURO 100MG TAB	40	<i>solifenacin succinate 5mg tab</i>	92
SECUADO 7.6MG/24HR PATCH	52	SIRTURO 20MG TAB	40	SOLTAMOX 10MG/5ML ORAL SOLN	42
<i>selegiline 5mg cap</i>	49	SKYRIZI 150MG/ML AUTO-INJECTOR	63	SOMAVERT 10MG INJ	68
<i>selegiline 5mg tab</i>	49	SKYRIZI 150MG/ML SYRINGE	63	SOMAVERT 15MG INJ	68
<i>selenium sulfide 2.5% shampoo</i>	65	SKYRIZI 180MG/1.2ML CARTRIDGE	73	SOMAVERT 20MG INJ	68
SELZENTRY 20MG/ML ORAL SOLN	55	SKYRIZI 360MG/2.4ML CARTRIDGE	73	SOMAVERT 25MG INJ	68
<i>sertraline 100mg tab</i>	27	<i>sodium chloride 0.45% inj</i>	78	SOMAVERT 30MG INJ	68
<i>sertraline 20mg/ml oral soln</i>	27	<i>sodium chloride 0.9% inj</i>	78	<i>sorafenib 200mg tab</i>	46
<i>sertraline 25mg tab</i>	27	<i>sodium chloride 0.9% irrigation soln</i>	73	<i>sotalol 120mg tab</i>	57
<i>sertraline 50mg tab</i>	27	<i>sodium chloride 3% inj</i>	78	<i>sotalol 160mg tab</i>	57
<i>setlakin tab 91-day pack</i>	71	<i>sodium chloride 50mg/ml inj</i>	78	<i>sotalol 240mg tab</i>	57
<i>sharobel 0.35mg tab 28-day pack</i>	85	SODIUM OXYBATE 500MG/ML ORAL SOLN	89	<i>sotalol 80mg tab</i>	57
SHINGRIX	93	<i>sodium phenylbutyrate 3gm/tsp oral powder</i>	68	<i>sotalol af 120mg tab</i>	57
50MCG/0.5ML INJ		<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	80	<i>sotalol af 160mg tab</i>	57
SIGNIFOR 0.3MG/ML INJ	68	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	76	<i>sotalol af 80mg tab</i>	57
SIGNIFOR 0.6MG/ML INJ	68	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	76	<i>spironolactone 100mg tab</i>	66
SIGNIFOR 0.9MG/ML INJ	68	SOFOSBUVIR/VELPATAS	56	<i>spironolactone 25mg tab</i>	66
<i>sildenafil 20mg tab</i>	88	VIR 400-100MG TAB		<i>spironolactone 50mg tab</i>	66
<i>silodosin 4mg cap</i>	74	SOGROYA 10MG/1.5ML PEN INJ	67	<i>sprintec tab 28-day pack</i>	71
<i>silodosin 8mg cap</i>	74	SOGROYA 15MG/1.5ML PEN INJ	67	SPRITAM 1000MG TAB FOR ORAL SUSP	25
<i>silver sulfadiazine 1% cream</i>	65	SOGROYA 5MG/1.5ML PEN INJ	67	SPRITAM 250MG TAB FOR ORAL SUSP	25
SIMBRINZA 0.2-1% OPHTH SUSP	81	<i>solifenacin succinate 10mg tab</i>	92	SPRITAM 500MG TAB FOR ORAL SUSP	25
SIMLANDI 40MG/0.4ML AUTO-INJECTOR	13			SPRITAM 750MG TAB FOR ORAL SUSP	25
SIMLANDI 40MG/0.4ML SYRINGE	13			<i>sps 15gm/60ml susp</i>	80
<i>simvastatin 10mg tab</i>	34			<i>sronyx tab 28-day pack</i>	71
<i>simvastatin 20mg tab</i>	35			<i>ssd 1% cream</i>	65
<i>simvastatin 40mg tab</i>	35			STELARA 45MG/0.5ML INJ	63
<i>simvastatin 5mg tab</i>	35			STELARA 45MG/0.5ML SYRINGE	63
<i>simvastatin 80mg tab</i>	35			STELARA 90MG/ML SYRINGE	63
<i>sirolimus 0.5mg tab</i>	79			STIMUFEND 6MG/0.6ML	75
<i>sirolimus 1mg tab</i>	79			SYRINGE	
<i>sirolimus 1mg/ml oral soln</i>	79			STIOLTO	21
<i>sirolimus 2mg tab</i>	79			2.5-2.5MCG/ACT INHALER	
				STIVARGA 40MG TAB	46

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

STREPTOMYCIN 1GM INJ	12	<i>sumatriptan 5mg/act nasal spray</i>	77	SYNJARDY XR 25-1000MG TAB	30
STRIBILD 150-150-200-300MG TAB	55	<i>sumatriptan 6mg/0.5ml auto-injector</i>	77	SYNJARDY XR 5-1000MG TAB	30
STRIVERDI 2.5MCG/ACT INHALER	21	<i>sumatriptan 6mg/0.5ml cartridge</i>	77	SYNTHROID 100MCG TAB	90
<i>subvenite 100mg tab</i>	25	<i>sumatriptan 6mg/0.5ml inj</i>	77	SYNTHROID 112MCG TAB	90
<i>subvenite 150mg tab</i>	25	<i>sunitinib 12.5mg cap</i>	46	SYNTHROID 125MCG TAB	90
<i>subvenite 200mg tab</i>	25	<i>sunitinib 25mg cap</i>	46	TAB	
<i>subvenite 25mg tab</i>	25	<i>sunitinib 37.5mg cap</i>	46	SYNTHROID 137MCG TAB	90
SUCRAID 8500UNIT/ML ORAL SOLN	66	<i>sunitinib 50mg cap</i>	46	TAB	
<i>sucralfate 1000mg tab</i>	91	SUNLENCA 300MG TAB	55	SYNTHROID 150MCG TAB	90
<i>sucralfate 100mg/ml oral susp</i>	91	THERAPY PACK (4)		SYNTHROID 175MCG TAB	90
SUFLAVE SOLN PACK	76	SUNLENCA 300MG TAB	55	SYNTHROID 200MCG TAB	90
<i>sulfacetamide sodium 10% lotion</i>	62	THERAPY PACK (5)		SYNTHROID 25MCG TAB	90
<i>sulfacetamide sodium 10% ophth soln</i>	82	SUNOSI 150MG TAB	89	SYNTHROID 300MCG TAB	90
SULFACETAMIDE/PRED NISOLONE 10-0.25% OPTH SOLN	82	SUNOSI 75MG TAB	89	SYNTHROID 50MCG TAB	90
<i>sulfadiazine 500mg tab</i>	89	<i>syeda tab 28-day pack</i>	71	SYNTHROID 75MCG TAB	90
<i>sulfamethoxazole/trimeth oprim 200-40mg/5ml oral susp</i>	89	SYMDEKO TAB 4-WEEK PACK (56)	87	SYNTHROID 88MCG TAB	90
<i>sulfamethoxazole/trimeth oprim 400-80mg tab</i>	89	SYMDEKO TAB 50-75MG/75MG PACK (56)	87		
<i>sulfamethoxazole/trimeth oprim 800-160mg tab</i>	89	SYMPAZAN 10MG ORAL FILM	22		
<i>sulfasalazine 500mg dr tab</i>	73	SYMPAZAN 20MG ORAL FILM	22		
<i>sulfasalazine 500mg tab</i>	73	SYMPAZAN 5MG ORAL FILM	22		
<i>sulindac 150mg tab</i>	14	SYMTUZA 150-800-200-10MG TAB	55		
<i>sulindac 200mg tab</i>	14	SYNJARDY 12.5-1000MG TAB	29		
<i>sumatriptan 100mg tab</i>	77	SYNJARDY 12.5-500MG TAB	29		
<i>sumatriptan 20mg/act nasal spray</i>	77	SYNJARDY 5-1000MG TAB	29		
<i>sumatriptan 25mg tab</i>	77	SYNJARDY 5-500MG TAB	29		
<i>sumatriptan 4mg/0.5ml cartridge</i>	77	SYNJARDY XR 10-1000MG TAB	29		
<i>sumatriptan 50mg tab</i>	77	SYNJARDY XR 12.5-1000MG TAB	29		
				T	
				TABRECTA 150MG TAB	46
				TABRECTA 200MG TAB	46
				<i>tacrolimus 0.03% ointment</i>	65
				<i>tacrolimus 0.1% ointment</i>	65
				<i>tacrolimus 0.5mg cap</i>	79
				<i>tacrolimus 1mg cap</i>	79
				<i>tacrolimus 5mg cap</i>	80
				<i>tadalafil 2.5mg tab</i>	74
				<i>tadalafil 20mg tab</i>	88
				<i>tadalafil 5mg tab</i>	74
				TAFINLAR 10MG TAB FOR ORAL SUSP	46
				TAFINLAR 50MG CAP	46
				TAFINLAR 75MG CAP	46

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2025

ALPHABETICAL LISTING OF DRUGS

TAGRISSE 40MG TAB	41	<i>terazosin 5mg cap</i>	36	THALOMID 50MG CAP	79
TAGRISSE 80MG TAB	41	<i>terbinafine 250mg tab</i>	33	THEOPHYLLINE 100MG	88
TAKHZYRO 300MG/2ML	75	<i>terbutaline sulfate 2.5mg</i>	21	ER TAB	
INJ		<i>tab</i>		THEOPHYLLINE 200MG	88
TAKHZYRO 300MG/2ML	75	<i>terbutaline sulfate 5mg</i>	21	ER TAB	
SYRINGE		<i>tab</i>		<i>theophylline 300mg er</i>	88
TALZENNA 0.1MG CAP	46	<i>terconazole 0.4% vaginal</i>	94	<i>tab</i>	
TALZENNA 0.25MG CAP	46	<i>cream</i>		<i>theophylline 400mg er</i>	88
TALZENNA 0.35MG CAP	46	<i>terconazole 0.8% vaginal</i>	94	<i>tab</i>	
TALZENNA 0.5MG CAP	46	<i>cream</i>		<i>theophylline 450mg er</i>	88
TALZENNA 0.75MG CAP	46	<i>terconazole 80mg vaginal</i>	94	<i>tab</i>	
TALZENNA 1MG CAP	46	<i>insert</i>		<i>theophylline 600mg er</i>	88
<i>tamoxifen 10mg tab</i>	42	<i>teriflunomide 14mg tab</i>	87	<i>tab</i>	
<i>tamoxifen 20mg tab</i>	42	<i>teriflunomide 7mg tab</i>	87	<i>thioridazine 100mg tab</i>	52
<i>tamsulosin 0.4mg cap</i>	74	TERIPARATIDE	67	<i>thioridazine 10mg tab</i>	52
<i>tarina 24 fe tab 1/20</i>	71	0.02MG/ACT PEN INJ		<i>thioridazine 25mg tab</i>	53
<i>28-day pack</i>		<i>testosterone 1%</i>	16	<i>thioridazine 50mg tab</i>	53
<i>tarina fe tab 1/20 28-day</i>	71	<i>(12.5mg/act) gel pump</i>		<i>thiothixene 10mg cap</i>	50
<i>pack</i>		<i>testosterone 1% (25mg)</i>	16	<i>thiothixene 1mg cap</i>	50
TASIGNA 150MG CAP	46	<i>gel packet</i>		<i>thiothixene 2mg cap</i>	50
TASIGNA 200MG CAP	46	<i>testosterone 1% (50mg)</i>	16	<i>thiothixene 5mg cap</i>	50
TASIGNA 50MG CAP	46	<i>gel packet</i>		<i>tiadylt 120mg er (24hr)</i>	58
<i>tazarotene 0.1% cream</i>	63	<i>testosterone 1.62%</i>	16	<i>cap</i>	
<i>tazicef 1gm inj</i>	60	<i>(1.25gm) gel packet</i>		<i>tiadylt 180mg er (24hr)</i>	58
<i>tazicef 2gm inj</i>	60	<i>testosterone 1.62%</i>	16	<i>cap</i>	
TAZICEF 6GM INJ	60	<i>(2.5gm) gel packet</i>		<i>tiadylt 240mg er (24hr)</i>	58
TAZVERIK 200MG TAB	46	<i>testosterone 1.62%</i>	16	<i>cap</i>	
TEFLARO 400MG INJ	39	<i>(20.25mg/act) gel pump</i>		<i>tiadylt 300mg er (24hr)</i>	58
TEFLARO 600MG INJ	39	<i>testosterone 30mg/act</i>	16	<i>cap</i>	
<i>telmisartan 20mg tab</i>	36	<i>topical soln</i>		<i>tiadylt 360mg er (24hr)</i>	58
<i>telmisartan 40mg tab</i>	36	<i>testosterone cypionate</i>	16	<i>cap</i>	
<i>telmisartan 80mg tab</i>	36	<i>100mg/ml inj</i>		<i>tiadylt 420mg er (24hr)</i>	58
<i>temazepam 15mg cap</i>	75	<i>testosterone cypionate</i>	16	<i>cap</i>	
<i>temazepam 30mg cap</i>	75	<i>200mg/ml (1ml) inj</i>		<i>tiagabine 12mg tab</i>	25
TENIVAC 4-10UNIT/ML	91	<i>testosterone cypionate</i>	16	<i>tiagabine 16mg tab</i>	25
INJ		<i>200mg/ml inj</i>		<i>tiagabine 2mg tab</i>	25
TENIVAC 4-10UNIT/ML	91	TESTOSTERONE	16	<i>tiagabine 4mg tab</i>	26
SYRINGE		ENANTHATE 200MG/ML		TIBSOVO 250MG TAB	46
<i>tenofovir disoproxil</i>	55	INJ		TICOVAC	93
<i>fumarate 300mg tab</i>		<i>tetrabenazine 12.5mg tab</i>	86	1.2MCG/0.25ML	
TEPMETKO 225MG TAB	46	<i>tetrabenazine 25mg tab</i>	86	SYRINGE	
<i>terazosin 10mg cap</i>	36	<i>tetracycline 250mg cap</i>	89	TICOVAC 2.4MCG/0.5ML	93
<i>terazosin 1mg cap</i>	36	<i>tetracycline 500mg cap</i>	89	SYRINGE	
<i>terazosin 2mg cap</i>	36	THALOMID 100MG CAP	79	<i>tigecycline 50mg inj</i>	39

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ALPHABETICAL LISTING OF DRUGS

<i>timolol 0.25% ophth gel</i>	81	<i>torse mide 20mg tab</i>	66	TREMFYA 200MG/2ML	64
<i>timolol 0.25% ophth soln</i>	81	<i>torse mide 5mg tab</i>	66	SYRINGE	
<i>timolol 0.5% ophth gel</i>	81	TOUJEO 300UNIT/ML	31	TRESIBA 100UNIT/ML	31
<i>timolol 0.5% ophth soln</i>	81	PEN INJ (1.5ML)		INJ	
<i>timolol 10mg tab</i>	57	TOUJEO MAX	31	TRESIBA 100UNIT/ML	31
<i>timolol 5mg tab</i>	58	300UNIT/ML PEN INJ		PEN INJ	
<i>tinidazole 250mg tab</i>	39	(3ML)		TRESIBA 200UNIT/ML	31
<i>tinidazole 500mg tab</i>	39	TPN ELECTROLYTES INJ	78	PEN INJ	
TIVICAY 50MG TAB	55	TRADJENTA 5MG TAB	30	<i>tretinoin 0.01% gel</i>	62
TIVICAY 5MG TAB FOR	55	<i>tramadol 100mg er tab</i>	15	<i>tretinoin 0.025% cream</i>	62
ORAL SUSP		<i>tramadol 200mg er tab</i>	15	<i>tretinoin 0.025% gel</i>	62
<i>tizanidine 2mg cap</i>	80	<i>tramadol 300mg er tab</i>	15	<i>tretinoin 0.05% cream</i>	62
<i>tizanidine 2mg tab</i>	80	<i>tramadol 50mg tab</i>	15	<i>tretinoin 0.1% cream</i>	62
<i>tizanidine 4mg cap</i>	80	<i>tramadol/acetaminophen</i>	16	<i>tretinoin 10mg cap</i>	47
<i>tizanidine 4mg tab</i>	80	<i>37.5-325mg tab</i>		<i>triamcinolone acetamide</i>	65
<i>tizanidine 6mg cap</i>	80	<i>trandolapril 1mg tab</i>	35	<i>0.025% cream</i>	
<i>tobramycin 0.3% ophth</i>	82	<i>trandolapril 2mg tab</i>	35	<i>triamcinolone acetamide</i>	65
<i>soln</i>		<i>trandolapril 4mg tab</i>	35	<i>0.025% lotion</i>	
TOBRAMYCIN	12	<i>tranexamic acid 650mg</i>	75	<i>triamcinolone acetamide</i>	65
10MG/ML INJ		<i>tab</i>		<i>0.025% ointment</i>	
<i>tobramycin 300mg/5ml</i>	12	<i>tranylcypromine 10mg</i>	27	<i>triamcinolone acetamide</i>	65
<i>inh soln</i>		<i>tab</i>		<i>0.1% cream</i>	
<i>tobramycin 80mg/2ml inj</i>	12	TRAVASOL 10% INJ	81	<i>triamcinolone acetamide</i>	65
<i>tolterodine tartrate 1mg</i>	92	<i>travoprost 0.004% ophth</i>	83	<i>0.1% lotion</i>	
<i>tab</i>		<i>soln</i>		<i>triamcinolone acetamide</i>	65
<i>tolterodine tartrate 2mg</i>	92	<i>trazodone 100mg tab</i>	27	<i>0.1% ointment</i>	
<i>er cap</i>		<i>trazodone 150mg tab</i>	27	<i>triamcinolone acetamide</i>	61
<i>tolterodine tartrate 2mg</i>	92	<i>trazodone 50mg tab</i>	27	<i>0.1% oral paste</i>	
<i>tab</i>		TRECTOR 250MG TAB	40	<i>triamcinolone acetamide</i>	65
<i>tolterodine tartrate 4mg</i>	92	TRELEGY ELLIPTA	21	<i>0.5% cream</i>	
<i>er cap</i>		100-62.5-25MCG		<i>triamcinolone acetamide</i>	65
<i>topiramate 100mg tab</i>	25	POWDER INHALER		<i>0.5% ointment</i>	
<i>topiramate 15mg cap</i>	25	TRELEGY ELLIPTA	21	<i>triazolam 0.125mg tab</i>	75
<i>topiramate 200mg tab</i>	25	200-62.5-25MCG		<i>triazolam 0.25mg tab</i>	75
<i>topiramate 25mg cap</i>	25	POWDER INHALER		<i>tridacaine 5% patch</i>	65
<i>topiramate 25mg tab</i>	25	TRELSTAR 11.25MG INJ	42	<i>triderm 0.5% cream</i>	65
<i>topiramate 50mg tab</i>	25	TRELSTAR 22.5MG INJ	42	<i>trientine 250mg cap</i>	78
<i>toremifene 60mg tab</i>	42	TRELSTAR 3.75MG INJ	42	<i>tri-estarylla tab 28-day</i>	71
<i>torpenz 10mg tab</i>	46	TREMFYA 100MG/ML	63	<i>pack</i>	
<i>torpenz 2.5mg tab</i>	46	AUTO-INJECTOR		<i>trifluoperazine 10mg tab</i>	53
<i>torpenz 5mg tab</i>	46	TREMFYA 100MG/ML	63	<i>trifluoperazine 1mg tab</i>	53
<i>torpenz 7.5mg tab</i>	46	SYRINGE		<i>trifluoperazine 2mg tab</i>	53
<i>torse mide 100mg tab</i>	66	TREMFYA 200MG/2ML	63	<i>trifluoperazine 5mg tab</i>	53
<i>torse mide 10mg tab</i>	66	AUTO-INJECTOR			

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ALPHABETICAL LISTING OF DRUGS

TRIFLURIDINE 1% OPTH SOLN	82	<i>tri-vylibra lo tab 28-day pack</i>	71	<i>unithroid 112mcg tab</i>	90
<i>trihexyphenidyl 2mg tab</i>	48	<i>tri-vylibra tab 28-day pack</i>	71	<i>unithroid 125mcg tab</i>	90
<i>trihexyphenidyl 5mg tab</i>	48			<i>unithroid 137mcg tab</i>	90
TRIJARDY XR	30	<i>trospium chloride 20mg tab</i>	92	<i>unithroid 150mcg tab</i>	90
10-5-1000MG TAB				<i>unithroid 175mcg tab</i>	90
TRIJARDY XR	30	<i>trospium chloride 60mg er cap</i>	92	<i>unithroid 200mcg tab</i>	90
12.5-2.5-1000MG TAB				<i>unithroid 25mcg tab</i>	91
TRIJARDY XR	30	TRULANCE 3MG TAB	76	<i>unithroid 300mcg tab</i>	91
25-5-1000MG TAB		TRULICITY	31	<i>unithroid 50mcg tab</i>	91
TRIJARDY XR	30	0.75MG/0.5ML		<i>unithroid 75mcg tab</i>	91
5-2.5-1000MG TAB		AUTO-INJECTOR		<i>unithroid 88mcg tab</i>	91
TRIKAFTA	87	TRULICITY	31	<i>ursodiol 250mg tab</i>	73
100-50-75MG/150MG TAB PACK (84)		1.5MG/0.5ML		<i>ursodiol 300mg cap</i>	73
TRIKAFTA	87	AUTO-INJECTOR		<i>ursodiol 500mg tab</i>	73
100-50-75MG/75MG GRANULES PACK (56)		TRULICITY 3MG/0.5ML	31	UZEDY 100MG/0.28ML	51
TRIKAFTA	87	AUTO-INJECTOR		SYRINGE	
50-37.5-25MG/75MG TAB PACK (84)		TRULICITY	31	UZEDY 125MG/0.35ML	51
TRIKAFTA	87	4.5MG/0.5ML		SYRINGE	
80-40-60MG/59.5MG GRANULES PACK (56)		AUTO-INJECTOR		UZEDY 150MG/0.42ML	51
<i>tri-lo- estarylla tab 28-day pack</i>	71	TRUMENBA SYRINGE	93	SYRINGE	
<i>tri-lo-sprintec tab 28-day pack</i>	71	TRUQAP 160MG TAB	46	UZEDY 200MG/0.56ML	51
<i>trimethoprim 100mg tab</i>	39	TRUQAP 200MG TAB	46	SYRINGE	
<i>tri-mili tab 28-day pack</i>	71	TUKYSA 150MG TAB	47	UZEDY 250MG/0.7ML	51
<i>trimipramine 100mg cap</i>	29	TUKYSA 50MG TAB	47	SYRINGE	
<i>trimipramine 25mg cap</i>	29	TURALIO 125MG CAP	46	UZEDY 50MG/0.14ML	51
<i>trimipramine 50mg cap</i>	29	<i>turqoz tab 28-day pack</i>	71	SYRINGE	
TRINTELLIX 10MG TAB	27	TWINRIX SYRINGE	93	UZEDY 75MG/0.21ML	51
TRINTELLIX 20MG TAB	27	TYBOST 150MG TAB	55	SYRINGE	
TRINTELLIX 5MG TAB	27	TYENNE 162MG/0.9ML	13		
<i>tri-sprintec tab 28-day pack</i>	71	AUTO-INJECTOR		V	
TRIUMEQ	55	TYENNE 162MG/0.9ML	13	<i>valacyclovir 1000mg tab</i>	56
600-50-300MG TAB		SYRINGE		<i>valacyclovir 500mg tab</i>	56
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	55	TYMLOS	67	VALCHLOR 0.016% GEL	63
<i>trivora tab 28-day pack</i>	71	3120MCG/1.56ML PEN		<i>valganciclovir 450mg tab</i>	55
		INJ		<i>valganciclovir 50mg/ml oral soln</i>	55
		TYPHIM VI	93	<i>valproic acid 250mg cap</i>	26
		25MCG/0.5ML INJ		<i>valproic acid 50mg/ml oral soln</i>	26
		TYPHIM VI	93	<i>valsartan 160mg tab</i>	36
		25MCG/0.5ML SYRINGE		<i>valsartan 320mg tab</i>	36
		U		<i>valsartan 40mg tab</i>	36
		UBRELVY 100MG TAB	76	<i>valsartan 80mg tab</i>	36
		UBRELVY 50MG TAB	76		
		<i>unithroid 100mcg tab</i>	90		

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ALPHABETICAL LISTING OF DRUGS

VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	23	VELTASSA 25.2GM POWDER FOR ORAL SUSP	80	<i>vestura tab 3-0.02mg 28-day pack</i>	71
VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK	23	VELTASSA 8.4GM POWDER FOR ORAL SUSP	80	<i>vienna tab 28-day pack</i>	71
VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	23	VEMLIDY 25MG TAB	56	<i>vigabatrin 500mg powder for oral soln</i>	26
VALTOCO 5MG (5MG/0.1ML) NASAL SPRAY DOSE PACK	23	VENCLEXTA 100MG TAB	47	<i>vigabatrin 500mg tab</i>	26
<i>vancomycin 100mg/ml inj</i>	39	VENCLEXTA 10MG TAB	47	<i>vigadrone 500mg powder for oral soln</i>	26
<i>vancomycin 125mg cap</i>	39	VENCLEXTA 50MG TAB	47	<i>vigadrone 500mg tab</i>	26
<i>vancomycin 1gm inj</i>	39	VENCLEXTA TAB	47	VIGAFYDE 100MG/ML ORAL SOLN	26
<i>vancomycin 250mg cap</i>	39	VENCLEXTA TAB STARTER PACK (42)	47	<i>vigpoder 500mg powder for oral soln</i>	26
<i>vancomycin 500mg inj</i>	39	<i>venlafaxine 100mg tab</i>	28	<i>vilazodone 10mg tab</i>	27
<i>vancomycin 750mg inj</i>	39	<i>venlafaxine 150mg er cap</i>	28	<i>vilazodone 20mg tab</i>	27
VANFLYTA 17.7MG TAB	46	<i>venlafaxine 25mg tab</i>	28	<i>vilazodone 40mg tab</i>	28
VANFLYTA 26.5MG TAB	46	<i>venlafaxine 37.5mg er cap</i>	28	VIRACEPT 250MG TAB	55
VAQTA 25UNIT/0.5ML INJ	93	<i>venlafaxine 37.5mg tab</i>	28	VIRACEPT 625MG TAB	55
VAQTA 25UNIT/0.5ML SYRINGE	93	<i>venlafaxine 50mg tab</i>	28	VIREAD 150MG TAB	55
VAQTA 50UNIT/ML INJ	93	<i>venlafaxine 75mg er cap</i>	28	VIREAD 200MG TAB	55
VAQTA 50UNIT/ML SYRINGE	93	<i>venlafaxine 75mg tab</i>	28	VIREAD 250MG TAB	55
<i>varenicline 0.5mg tab</i>	87	VENTOLIN 108MCG HFA INHALER	21	VIREAD 40MG/GM ORAL POWDER	55
<i>varenicline 0.5mg/1mg first month pack (53)</i>	87	<i>verapamil 120mg er cap</i>	58	VITRAKVI 100MG CAP	46
<i>varenicline 1mg tab</i>	87	<i>verapamil 120mg er tab</i>	59	VITRAKVI 20MG/ML ORAL SOLN	46
<i>varenicline 1mg tab pack (56)</i>	87	<i>verapamil 120mg tab</i>	59	VITRAKVI 25MG CAP	46
VARIVAX 1350PFU/0.5ML INJ	93	<i>verapamil 180mg er cap</i>	59	VIVITROL 380MG INJ	32
VAXCHORA SUSP	93	<i>verapamil 180mg er tab</i>	59	VIZIMPRO 15MG TAB	41
VELIVET TAB 28-DAY PACK	71	<i>verapamil 240mg er cap</i>	59	VIZIMPRO 30MG TAB	41
VELTASSA 16.8GM POWDER FOR ORAL SUSP	80	<i>verapamil 240mg er tab</i>	59	VIZIMPRO 45MG TAB	41
VELTASSA 1GM POWDER FOR ORAL SUSP	80	VERAPAMIL 360MG ER CAP	59	VONJO 100MG CAP	46
		<i>verapamil 40mg tab</i>	59	VORANIGO 10MG TAB	46
		<i>verapamil 80mg tab</i>	59	VORANIGO 40MG TAB	46
		VERQUOVO 10MG TAB	59	<i>voriconazole 200mg inj</i>	33
		VERQUOVO 2.5MG TAB	59	<i>voriconazole 200mg tab</i>	33
		VERQUOVO 5MG TAB	59	<i>voriconazole 40mg/ml oral susp</i>	33
		VERSACLOZ 50MG/ML ORAL SUSP	52	<i>voriconazole 50mg tab</i>	33
		VERZENIO 100MG TAB	46	VOSEVI 400-100-100MG TAB	56
		VERZENIO 150MG TAB	46	VOWST 30000000UNIT CAP	73
		VERZENIO 200MG TAB	46	VRAYLAR 1.5MG CAP	50
		VERZENIO 50MG TAB	46		

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ALPHABETICAL LISTING OF DRUGS

VRAYLAR 3MG CAP	50	XARELTO 15MG TAB	21	XIGDUO XR 5-1000MG	30
VRAYLAR 4.5MG CAP	50	XARELTO 1MG/ML	21	TAB	
VRAYLAR 6MG CAP	50	ORAL SUSP		XIGDUO XR 5-500MG	30
<i>vyfemla tab 28-day pack</i>	71	XARELTO 2.5MG TAB	21	TAB	
<i>vylibra tab 28-day pack</i>	71	XARELTO 20MG TAB	21	XIIDRA 5% OPHTH	83
VYNDAMAX 61MG CAP	59	XARELTO TAB STARTER	21	SOLN	
VYNDAQEL 20MG CAP	59	PACK (51)		XOFLUZA 40MG TAB	56
W		XATMEP 2.5MG/ML	41	XOFLUZA 80MG TAB	56
<i>warfarin sodium 10mg tab</i>	21	ORAL SOLN		XOLAIR 150MG INJ	19
<i>warfarin sodium 1mg tab</i>	21	XCOPRI 100MG TAB	25	XOLAIR 150MG/ML	19
<i>warfarin sodium 2.5mg tab</i>	21	XCOPRI 150MG TAB	25	AUTO-INJECTOR	
<i>warfarin sodium 2mg tab</i>	21	XCOPRI 200MG TAB	25	XOLAIR 150MG/ML	19
<i>warfarin sodium 3mg tab</i>	21	XCOPRI 25MG TAB	25	SYRINGE	
<i>warfarin sodium 4mg tab</i>	21	XCOPRI 50MG TAB	25	XOLAIR 300MG/2ML	19
<i>warfarin sodium 5mg tab</i>	22	XCOPRI TAB 100/150MG	25	AUTO-INJECTOR	
<i>warfarin sodium 6mg tab</i>	22	MAINTENANCE PACK		XOLAIR 300MG/2ML	19
<i>warfarin sodium 7.5mg tab</i>	22	(56)		SYRINGE	
WELIREG 40MG TAB	47	XCOPRI TAB 12.5/25MG	25	XOLAIR 75MG/0.5ML	19
WINREVAIR 45MG INJ	88	TITRATION PACK (28)		AUTO-INJECTOR	
WINREVAIR 45MG INJ	88	XCOPRI TAB 150/200MG	25	XOLAIR 75MG/0.5ML	19
(2 VIAL PACK)		PACK (56)		SYRINGE	
WINREVAIR 60MG INJ	88	XCOPRI TAB 150/200MG	25	XOPENEX 45MCG	21
WINREVAIR 60MG INJ	88	TITRATION PACK (28)		INHALER	
(2 VIAL PACK)		XCOPRI TAB 50/100MG	25	XOSPATA 40MG TAB	47
<i>wixela 100-50mcg powder inhaler</i>	21	TITRATION PACK (28)		XPOVIO TAB 100MG	47
<i>wixela 250-50mcg powder inhaler</i>	21	XDEMVY 0.25% OPHTH	82	ONCE WEEKLY CARTON	
<i>wixela 500-50mcg powder inhaler</i>	21	SOLN		(8)	
X		XELJANZ 10MG TAB	12	XPOVIO TAB 40MG	47
XALKORI 150MG ORAL	46	XELJANZ 1MG/ML	12	ONCE WEEKLY CARTON	
PELLET		ORAL SOLN		(4)	
XALKORI 200MG CAP	46	XELJANZ 5MG TAB	12	XPOVIO TAB 40MG	47
XALKORI 20MG ORAL	47	XELJANZ XR 11MG TAB	13	TWICE WEEKLY	
PELLET		XELJANZ XR 22MG TAB	13	CARTON (8)	
XALKORI 250MG CAP	47	XERMELO 250MG TAB	32	XPOVIO TAB 60MG	47
XALKORI 50MG ORAL	47	XGEVA 120MG/1.7ML	67	ONCE WEEKLY CARTON	
PELLET		INJ		(4)	
XARELTO 10MG TAB	21	XIFAXAN 550MG TAB	39	XPOVIO TAB 60MG	47
		XIGDUO XR 10-1000MG	30	TWICE WEEKLY	
		TAB		CARTON (24)	
		XIGDUO XR 10-500MG	30	XPOVIO TAB 80MG	47
		TAB		ONCE WEEKLY CARTON	
		XIGDUO XR	30	(8)	
		2.5-1000MG TAB			

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ALPHABETICAL LISTING OF DRUGS

XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	47	<i>zolmitriptan 5mg tab</i>	77
XTANDI 40MG CAP	42	<i>zolpidem tartrate 10mg tab</i>	75
XTANDI 40MG TAB	42	<i>zolpidem tartrate 12.5mg er tab</i>	75
XTANDI 80MG TAB	42	<i>zolpidem tartrate 5mg tab</i>	75
<i>xulane 150-35mcg/24hr patch</i>	72	<i>zolpidem tartrate 6.25mg er tab</i>	75
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Y		ZONISADE 100MG/5ML	25
YF-VAX INJ	93	ORAL SUSP	
<i>yuvafem 10mcg vaginal insert</i>	94	<i>zonisamide 100mg cap</i>	25
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Z		<i>zonisamide 25mg cap</i>	25
<i>zafemy 150-35mcg/24hr patch</i>	72	<i>zonisamide 50mg cap</i>	25
<i>zafirlukast 10mg tab</i>	19	<i>zovia 1mg-35mcg tab 28-day pack</i>	72
<i>zafirlukast 20mg tab</i>	19	ZTALMY 50MG/ML	25
<i>zaleplon 10mg cap</i>	75	ORAL SUSP	
<i>zaleplon 5mg cap</i>	75	ZURZUVAE 20MG CAP	26
ZAVZPRET 10MG/ACT NASAL SPRAY	76	ZURZUVAE 25MG CAP	26
ZEJULA 100MG TAB	47	ZURZUVAE 30MG CAP	26
ZEJULA 200MG TAB	47	ZYDELIG 100MG TAB	47
ZEJULA 300MG TAB	47	ZYDELIG 150MG TAB	47
ZELBORAF 240MG TAB	47	ZYKADIA 150MG TAB	47
ZEMAIRA 1000MG INJ	87		
<i>zenatane 10mg cap</i>	62		
<i>zenatane 20mg cap</i>	62		
<i>zenatane 30mg cap</i>	62		
<i>zenatane 40mg cap</i>	62		
<i>zidovudine 100mg cap</i>	55		
<i>zidovudine 10mg/ml oral soln</i>	55		
<i>zidovudine 300mg tab</i>	55		
ZIMHI 5MG/0.5ML SYRINGE	32		
<i>ziprasidone 20mg cap</i>	50		
<i>ziprasidone 20mg inj</i>	50		
<i>ziprasidone 40mg cap</i>	50		
<i>ziprasidone 60mg cap</i>	50		
<i>ziprasidone 80mg cap</i>	50		
ZOLINZA 100MG CAP	47		
<i>zolmitriptan 2.5mg tab</i>	77		

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This formulary was updated on 03/01/2025. For more recent information or other questions, please contact Member Services at 1-866-270-3877 (TTY users should call 711), 24 hours a day, 7 days a week except Thanksgiving and Christmas Day, or visit www.medicare.peakhealth.org

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