



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 13

This formulary was updated on 07/01/2025.

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 07/01/2025. 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 07/01/2025 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:

	30-Day Supply			90-Day Supply		
Tier	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: 07/01/2025

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: 07/01/2025

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 20MG/0.2ML SYRINGE	5	NDS PA QL=2 EA/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
SIMLANDI 80MG/0.8ML AUTO-INJECTOR	5	NDS PA QL=2 EA/28 Days
SIMLANDI 80MG/0.8ML SYRINGE	5	NDS PA QL=2 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>diflunisal 500mg tab</i>	1	
<i>etodolac 200mg cap</i>	1	
<i>etodolac 300mg cap</i>	1	
<i>etodolac 400mg tab</i>	1	
<i>etodolac 500mg tab</i>	1	
FLURBIPROFEN 100MG TAB	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>methadone 10mg tab</i>	1	QL=360 EA/30 Days
METHADONE 1MG/ML ORAL SOLN	1	QL=3600 ML/30 Days
METHADONE 2MG/ML ORAL SOLN	1	QL=1800 ML/30 Days
<i>methadone 5mg tab</i>	1	QL=360 EA/30 Days
<i>morphine sulfate 100mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg tab</i>	1	QL=180 EA/30 Days
<i>morphine sulfate 200mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 ML/30 Days
<i>morphine sulfate 2mg/ml oral soln</i>	1	QL=1800 ML/30 Days
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>procto-med 2.5% cream</i>	1	QL=60 GM/30 Days
<i>proctosol 2.5% cream</i>	1	QL=60 GM/30 Days
<i>proctozone hc 2.5% cream</i>	1	QL=60 GM/30 Days
VASODILATING AGENTS		
<i>nitroglycerin 0.4% rectal ointment</i>	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	
ISOSORBIDE MONONITRATE 10MG TAB	1	
<i>isosorbide mononitrate 120mg er tab</i>	1	
ISOSORBIDE MONONITRATE 20MG TAB	1	
<i>isosorbide mononitrate 30mg er tab</i>	1	
<i>isosorbide mononitrate 60mg er tab</i>	1	
NITRO-BID 2% OINTMENT	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	
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
<i>buspirone 10mg tab</i>	1	
<i>buspirone 15mg tab</i>	1	
<i>buspirone 30mg tab</i>	1	
<i>buspirone 5mg tab</i>	1	
<i>buspirone 7.5mg tab</i>	1	
<i>hydroxyzine 10mg tab</i>	1	
<i>hydroxyzine 25mg tab</i>	1	
<i>hydroxyzine 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>alprazolam 0.5mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 1mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 2mg tab</i>	1	QL=150 EA/30 Days
<i>chlordiazepoxide 10mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 25mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 5mg cap</i>	1	QL=120 EA/30 Days
<i>clorazepate dipotassium 15mg tab</i>	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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		
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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, Proventil equiv)</i>	1	QL=13.40 GM/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	1	QL=17 GM/30 Days
<i>albuterol 2mg tab</i>	2	
<i>albuterol 4mg tab</i>	2	
<i>albuterol 5mg/ml (0.05%) 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>breyana 160-4.5mcg/act inhaler</i>	3	QL=10.30 GM/30 Days
<i>breyana 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<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
<i>rivaroxaban 2.5mg tab</i>	2	QL=60 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	

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: 07/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
warfarin sodium 10mg tab	1	
warfarin sodium 1mg tab	1	
warfarin sodium 2.5mg tab	1	
warfarin sodium 2mg tab	1	
warfarin sodium 3mg tab	1	
warfarin sodium 4mg tab	1	
warfarin sodium 5mg tab	1	
warfarin sodium 6mg tab	1	
warfarin sodium 7.5mg tab	1	
HEPARINS AND HEPARINOID-LIKE AGENTS		
enoxaparin sodium 100mg/1ml syringe	2	
enoxaparin sodium 120mg/0.8ml syringe	2	
enoxaparin sodium 150mg/1ml syringe	2	
enoxaparin sodium 30mg/0.3ml syringe	2	
enoxaparin sodium 40mg/0.4ml syringe	2	
enoxaparin sodium 60mg/0.6ml syringe	2	
enoxaparin sodium 80mg/0.8ml syringe	2	
fondaparinux sodium 10mg/0.8ml syringe	2	
fondaparinux sodium 2.5mg/0.5ml syringe	2	
fondaparinux sodium 5mg/0.4ml syringe	2	
fondaparinux sodium 7.5mg/0.6ml syringe	2	
heparin sodium porcine 10000unit/ml inj	2	
heparin sodium porcine 1000unit/ml inj	2	
heparin sodium porcine 20000unit/ml inj	2	
heparin sodium porcine 5000unit/ml inj	2	
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
clobazam 10mg tab	1	QL=60 EA/30 Days
clobazam 2.5mg/ml oral susp	2	QL=480 ML/30 Days
clobazam 20mg tab	1	QL=60 EA/30 Days
clonazepam 0.125mg odt	2	QL=90 EA/30 Days
clonazepam 0.25mg odt	2	QL=90 EA/30 Days
clonazepam 0.5mg odt	2	QL=90 EA/30 Days
clonazepam 0.5mg tab	1	QL=90 EA/30 Days
clonazepam 1mg odt	2	QL=90 EA/30 Days
clonazepam 1mg tab	1	QL=90 EA/30 Days
clonazepam 2mg odt	2	QL=300 EA/30 Days
clonazepam 2mg tab	1	QL=300 EA/30 Days
diazepam 10mg/2ml rectal gel	2	QL=10 EA/30 Days
DIAZEPAM 2.5MG/0.5ML RECTAL GEL	3	QL=10 EA/30 Days
diazepam 20mg/4ml rectal gel	2	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.		
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
<i>eslicarbazepine 200mg tab</i>	4	PA NSO QL=30 EA/30 Days
<i>eslicarbazepine 400mg tab</i>	4	PA NSO QL=30 EA/30 Days
<i>eslicarbazepine 600mg tab</i>	4	PA NSO QL=60 EA/30 Days
<i>eslicarbazepine 800mg tab</i>	4	PA NSO QL=60 EA/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
<i>gabapentin 100mg cap</i>	1	QL=180 EA/30 Days
<i>gabapentin 300mg cap</i>	1	QL=360 EA/30 Days
<i>gabapentin 400mg cap</i>	1	QL=270 EA/30 Days
<i>gabapentin 50mg/ml oral soln</i>	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>perampanel 10mg tab</i>	4	PA NSO QL=30 EA/30 Days
<i>perampanel 12mg tab</i>	4	PA NSO QL=30 EA/30 Days
<i>perampanel 2mg tab</i>	4	PA NSO QL=30 EA/30 Days
<i>perampanel 4mg tab</i>	4	PA NSO QL=30 EA/30 Days
<i>perampanel 6mg tab</i>	4	PA NSO QL=30 EA/30 Days
<i>perampanel 8mg tab</i>	4	PA NSO QL=30 EA/30 Days
<i>phenobarbital 100mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 15mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 16.2mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 30mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 32.4mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 4mg/ml oral soln</i>	1	QL=1500 ML/30 Days
<i>phenobarbital 60mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 64.8mg tab</i>	1	QL=120 EA/30 Days
<i>phenobarbital 97.2mg tab</i>	1	QL=120 EA/30 Days
<i>phenytoin 25mg/ml oral susp</i>	1	
<i>phenytoin 50mg chew tab</i>	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	
PAROXETINE 10MG/ML SUSP	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	
RALDESY 10MG/ML ORAL SOLN	4	PA NSO QL=1200 ML/30 Days
<i>trazodone 100mg tab</i>	1	
<i>trazodone 150mg tab</i>	1	
<i>trazodone 50mg tab</i>	1	
TRINTELLIX 10MG TAB	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>vilazodone 20mg tab</i>	2	PA NSO QL=30 EA/30 Days
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>desipramine 75mg tab</i>	2	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SYNJARDY XR 12.5-1000MG TAB	3	QL=60 EA/30 Days
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>glimepiride 1mg tab</i>	1	
<i>glimepiride 2mg tab</i>	1	
<i>glimepiride 4mg tab</i>	1	
<i>glipizide 10mg er tab</i>	1	
<i>glipizide 10mg tab</i>	1	
<i>glipizide 2.5mg er tab</i>	1	
<i>glipizide 5mg er tab</i>	1	
<i>glipizide 5mg tab</i>	1	
<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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>aprepitant 125mg cap</i>	2	PA BvD QL=3 EA/2 Days
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>icosapent ethyl 500mg cap</i>	2	QL=120 EA/30 Days
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>simvastatin 10mg tab</i>	1	
<i>simvastatin 20mg tab</i>	1	
<i>simvastatin 40mg tab</i>	1	
<i>simvastatin 5mg tab</i>	1	
<i>simvastatin 80mg tab</i>	1	
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril 10mg tab</i>	1	
<i>benazepril 20mg tab</i>	1	
<i>benazepril 40mg tab</i>	1	
<i>benazepril 5mg tab</i>	1	
<i>captopril 100mg tab</i>	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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>candesartan cilexetil 16mg tab</i>	1	
<i>candesartan cilexetil 32mg tab</i>	1	
<i>candesartan cilexetil 4mg tab</i>	1	
<i>candesartan cilexetil 8mg tab</i>	1	
<i>irbesartan 150mg tab</i>	1	
<i>irbesartan 300mg tab</i>	1	
<i>irbesartan 75mg tab</i>	1	
<i>losartan potassium 100mg tab</i>	1	
<i>losartan potassium 25mg tab</i>	1	
<i>losartan potassium 50mg tab</i>	1	
<i>olmesartan medoxomil 20mg tab</i>	1	
<i>olmesartan medoxomil 40mg tab</i>	1	
<i>olmesartan medoxomil 5mg tab</i>	1	
<i>telmisartan 20mg tab</i>	1	
<i>telmisartan 40mg tab</i>	1	
<i>telmisartan 80mg tab</i>	1	
<i>valsartan 160mg tab</i>	1	
<i>valsartan 320mg tab</i>	1	
<i>valsartan 40mg tab</i>	1	
<i>valsartan 80mg tab</i>	1	
ANTIADRENERGIC ANTIHYPERTENSIVES		
<i>clonidine 0.1mg tab</i>	1	
<i>clonidine 0.1mg/24hr weekly patch</i>	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<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	

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: 07/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	1	
ANTIHYPERTENSIVES - MISC.		
<i>aliskiren 150mg tab</i>	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/2ml inj</i>	2	
<i>clindamycin 300mg/50ml inj</i>	2	
<i>clindamycin 600mg/4ml 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>colistin 75mg/ml inj</i>	2	
<i>daptomycin 500mg inj</i>	2	
DIFICID 200MG TAB	3	PA QL=20 EA/10 Days
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	
<i>nitazoxanide 500mg tab</i>	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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CYCLOPHOSPHAMIDE 25MG TAB	3	PA BvD
CYCLOPHOSPHAMIDE 50MG TAB	3	PA BvD
GLEOSTINE 100MG CAP	3	
GLEOSTINE 10MG CAP	3	
GLEOSTINE 40MG CAP	3	
LEUKERAN 2MG TAB	5	NDS
ANTIMETABOLITES		
JYLAMVO 2MG/ML ORAL SOLN	4	PA NSO
<i>mercaptopurine 20mg/ml susp</i>	2	PA NSO QL=300 ML/30 Days
<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
TABLOID 40MG TAB	5	NDS
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	1	QL=120 EA/30 Days
<i>abirtega 250mg tab</i>	1	QL=120 EA/30 Days
AKEEGA 500-100MG TAB	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
EULEXIN 125MG CAP	5	NDS QL=180 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
GOMEKLI 1MG CAP	5	NDS PA NSO QL=42 EA/28 Days
GOMEKLI 1MG TAB FOR ORAL SUSP	5	NDS PA NSO QL=126 EA/28 Days
GOMEKLI 2MG CAP	5	NDS PA NSO QL=84 EA/28 Days
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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
<i>nilotinib 150mg cap</i>	5	NDS PA NSO QL=112 EA/28 Days
<i>nilotinib 200mg cap</i>	5	NDS PA NSO QL=112 EA/28 Days
<i>nilotinib 50mg cap</i>	5	NDS PA NSO QL=120 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

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: 07/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
ROMVIMZA 14MG CAP	5	NDS PA NSO QL=8 EA/28 Days
ROMVIMZA 20MG CAP	5	NDS PA NSO QL=8 EA/28 Days
ROMVIMZA 30MG CAP	5	NDS PA NSO QL=8 EA/28 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
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
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

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: 07/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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
REVUFORJ 25MG TAB	5	NDS PA NSO QL=240 EA/30 Days
<i>tretinoin 10mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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 (16)	5	NDS PA NSO QL=16 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		
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>	2	
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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
EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE 400-300-300MG TAB	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/rilpivirine/tenofovir disoproxil fumarate 200-25-300mg tab</i>	5	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fosamprenavir 700mg tab</i>	2	QL=120 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
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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 120MG ORAL PELLET	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
<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 PELLET	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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)	2	QL=20 EA/5 Days
PAXLOVID 150MG/100MG TAB PACK (30)	2	QL=30 EA/5 Days
PAXLOVID 300MG/100MG AND 150MG/100MG TAB DOSE PACK (11)	2	QL=11 EA/5 Days
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol 12.5mg tab</i>	1	
<i>carvedilol 25mg tab</i>	1	
<i>carvedilol 3.125mg tab</i>	1	
<i>carvedilol 6.25mg tab</i>	1	
<i>labetalol 100mg tab</i>	1	
<i>labetalol 200mg tab</i>	1	
<i>labetalol 300mg tab</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	1	
<i>acebutolol 400mg cap</i>	1	
<i>atenolol 100mg tab</i>	1	
<i>atenolol 25mg tab</i>	1	
<i>atenolol 50mg tab</i>	1	
<i>betaxolol 10mg tab</i>	1	
<i>betaxolol 20mg tab</i>	1	
<i>bisoprolol fumarate 10mg tab</i>	1	
<i>bisoprolol fumarate 5mg tab</i>	1	
<i>metoprolol succinate 100mg er tab</i>	1	
<i>metoprolol succinate 200mg er tab</i>	1	
<i>metoprolol succinate 25mg er tab</i>	1	
<i>metoprolol succinate 50mg er tab</i>	1	
<i>metoprolol tartrate 100mg tab</i>	1	
<i>metoprolol tartrate 25mg tab</i>	1	
<i>metoprolol tartrate 37.5mg tab</i>	1	
<i>metoprolol tartrate 50mg tab</i>	1	
<i>metoprolol tartrate 75mg tab</i>	1	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	1	
<i>propranolol 160mg er cap</i>	1	
<i>propranolol 20mg tab</i>	1	
<i>propranolol 40mg tab</i>	1	
PROPRANOLOL 4MG/ML ORAL SOLN	1	
<i>propranolol 60mg er cap</i>	1	
<i>propranolol 60mg tab</i>	1	
<i>propranolol 80mg er cap</i>	1	
<i>propranolol 80mg tab</i>	1	
PROPRANOLOL 8MG/ML ORAL SOLN	1	
<i>sotalol 120mg tab</i>	1	
<i>sotalol 160mg tab</i>	1	
<i>sotalol 240mg tab</i>	1	
<i>sotalol 80mg tab</i>	1	
<i>sotalol af 120mg tab</i>	1	
<i>sotalol af 160mg tab</i>	1	
<i>sotalol af 80mg tab</i>	1	
<i>timolol 10mg tab</i>	1	
<i>timolol 5mg tab</i>	1	
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine 10mg tab</i>	1	
<i>amlodipine 2.5mg tab</i>	1	
<i>amlodipine 5mg tab</i>	1	
<i>cartia 120mg er (24hr) cap</i>	1	
<i>cartia 180mg er (24hr) cap</i>	1	
<i>cartia 240mg er (24hr) cap</i>	1	
<i>cartia 300mg er (24hr) cap</i>	1	
<i>dilt 120mg er (24hr) cap</i>	1	
<i>dilt 180mg er (24hr) cap</i>	1	
<i>dilt 240mg er (24hr) cap</i>	1	
<i>diltiazem 120mg er (12hr) cap</i>	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CEFPODOXIME 10MG/ML ORAL SUSP	2	
<i>cefepodoxime 200mg tab</i>	2	
CEFPODOXIME 20MG/ML ORAL SUSP	2	
<i>ceftazidime 1gm inj</i>	2	
CEFTAZIDIME 200MG/ML INJ	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	
<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
PREDNISONE 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
MINERALOCORTICIDS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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		
<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 30mg 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
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

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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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		
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<i>hydrochlorothiazide 12.5mg tab</i>	1	
<i>hydrochlorothiazide 25mg tab</i>	1	
<i>hydrochlorothiazide 50mg tab</i>	1	
<i>indapamide 1.25mg tab</i>	1	
<i>indapamide 2.5mg tab</i>	1	
<i>metolazone 10mg tab</i>	1	
<i>metolazone 2.5mg tab</i>	1	
<i>metolazone 5mg tab</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
<i>alendronate sodium 10mg tab</i>	1	
<i>alendronate sodium 35mg tab</i>	1	
<i>alendronate sodium 70mg tab</i>	1	
<i>ibandronate 150mg tab</i>	1	QL=1 EA/30 Days
JUBBONTI 60MG/ML SYRINGE	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
WYOST 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
<i>cinacalcet 90mg tab</i>	2	QL=120 EA/30 Days
CYSTADANE 1GM POWDER FOR ORAL SOLN	5	NDS
<i>javygtor 100mg powder for oral soln</i>	1	PA
<i>javygtor 100mg tab</i>	1	PA
<i>javygtor 500mg powder for oral soln</i>	1	PA
<i>levocarnitine 100mg/ml oral soln</i>	1	
<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		

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: 07/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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>feirza 1.5/30 28-day pack</i>	2	
<i>feirza 1/20 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>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>lutra 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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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
<i>cilostazol 100mg tab</i>	1	
<i>cilostazol 50mg tab</i>	1	
<i>clopidogrel 75mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<i>ticagrelor 60mg tab</i>	3	QL=60 EA/30 Days
<i>ticagrelor 90mg tab</i>	2	QL=60 EA/30 Days
HEMATOPOIETIC AGENTS		
AGENTS FOR SICKLE CELL DISEASE		
<i>glutamine 5000mg powder for oral soln</i>	1	PA QL=180 EA/30 Days
HEMATOPOIETIC GROWTH FACTORS		
DOPTELET 20MG TAB	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
<i>eltrombopag olamine 12.5mg powder pack for susp</i>	5	NDS PA QL=90 EA/30 Days
<i>eltrombopag olamine 12.5mg tab</i>	5	NDS PA QL=30 EA/30 Days
<i>eltrombopag olamine 25mg powder pack for susp</i>	5	NDS PA QL=180 EA/30 Days
<i>eltrombopag olamine 25mg tab</i>	5	NDS PA QL=30 EA/30 Days
<i>eltrombopag olamine 50mg tab</i>	5	NDS PA QL=60 EA/30 Days
<i>eltrombopag olamine 75mg tab</i>	5	NDS PA QL=60 EA/30 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
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
GLUCOSE 50MG/ML/SODIUM CHLORIDE 2MG/ML INJ	2	
GLUCOSE 50MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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		
<i>lenalidomide 10mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 15mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 2.5mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 20mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 25mg cap</i>	1	PA NSO QL=30 EA/30 Days
<i>lenalidomide 5mg cap</i>	1	PA NSO QL=30 EA/30 Days
NEMLUVIO 30MG AUTO-INJECTOR	5	NDS PA QL=2 EA/28 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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 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
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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		
ALS AGENTS		
<i>RADICAVA 105MG/5ML ORAL SUSP</i>	5	NDS PA QL=70 ML/28 Days
<i>riluzole 50mg tab</i>	2	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
<i>EVRYSDI 0.75MG/ML ORAL SOLN</i>	5	NDS PA QL=240 ML/30 Days
<i>EVRYSDI 5MG TAB</i>	5	NDS PA QL=30 EA/30 Days
NUTRIENTS		
CARBOHYDRATES		
<i>DEXTROSE 10% INJ</i>	2	PA BvD
<i>glucose 50mg/ml inj</i>	2	
PROTEINS		
<i>CLINIMIX 4.25/10 INJ</i>	3	PA BvD
<i>CLINIMIX 4.25/5 INJ</i>	3	PA BvD
<i>CLINIMIX 5/15 INJ</i>	3	PA BvD
<i>CLINIMIX 5/20 INJ</i>	3	PA BvD
<i>clinsol 15% inj</i>	2	PA BvD
<i>plenamine 15% inj</i>	2	PA BvD
<i>PROSOL 20% INJ</i>	4	PA BvD
<i>TRAVASOL 10% INJ</i>	3	PA BvD
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPTHALMIC		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
NATACYN 5% OPHTH SUSP	3	QL=15 ML/7 Days
<i>neo-polycin 5mg-400unit-10000unit ophth ointment</i>	1	QL=7 GM/7 Days
<i>neomycin/bacitracin/polymyxin 5mg-400unit-10000unit ophth ointment</i>	1	QL=7 GM/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	1	QL=10 ML/7 Days
<i>ofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>polycin 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>polymyxin b/trimethoprim 10000 unit/ml-0.1% ophth soln</i>	1	QL=10 ML/7 Days
<i>sulfacetamide sodium 10% ophth soln</i>	1	QL=15 ML/7 Days
<i>tobramycin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
TRIFLURIDINE 1% OPHTH SOLN	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>neomycin/polymyxin/hydrocortisone</i> <i>3.5-10000unit-1% otic soln</i>	1	
<i>neomycin/polymyxin/hydrocortisone</i> <i>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	
<i>ampicillin 500mg cap</i>	1	
NATURAL PENICILLINS		
BICILLIN L-A 1200000UNIT/2ML SYRINGE	3	
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
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 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
tetrabenazine 12.5mg tab	1	QL=90 EA/30 Days
tetrabenazine 25mg tab	1	QL=120 EA/30 Days
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	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
dalfampridine 10mg er tab	1	QL=60 EA/30 Days
dimethyl fumarate 120mg dr cap	1	QL=14 EA/7 Days
dimethyl fumarate 120mg/240mg cap starter pack (60)	1	QL=60 EA/180 Days
dimethyl fumarate 240mg dr cap	1	QL=60 EA/30 Days
fingolimod 0.5mg cap	1	QL=30 EA/30 Days
glatiramer acetate 20mg/ml syringe	1	QL=30 ML/30 Days
glatiramer acetate 40mg/ml syringe	1	QL=12 ML/28 Days
glatopa 20mg/ml syringe	1	QL=30 ML/30 Days
glatopa 40mg/ml syringe	1	QL=12 ML/28 Days
KESIMPTA 20MG/0.4ML PEN INJ	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
PLEGRIDY 125MCG/0.5ML SYRINGE	5	NDS QL=1 ML/28 Days
teriflunomide 14mg tab	1	QL=30 EA/30 Days
teriflunomide 7mg tab	1	QL=30 EA/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
NUDEXTA 20-10MG CAP	3	PA QL=60 EA/30 Days
PIMOZIDE 1MG TAB	2	
PIMOZIDE 2MG TAB	2	
SMOKING DETERRENTS		
bupropion 150mg sr (12hr) tab	1	
NICOTROL 10MG/ML NASAL INHALER	3	
varenicline 0.5mg tab	2	QL=56 EA/28 Days
varenicline 0.5mg/1mg first month pack (53)	2	QL=53 EA/28 Days
varenicline 1mg tab	2	QL=56 EA/28 Days
varenicline 1mg tab pack (56)	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		
ALYFTREK 10-50-125MG TAB	5	NDS PA QL=56 EA/28 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ALYFTREK 4-20-50MG TAB	5	NDS PA QL=84 EA/28 Days
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
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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	

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: 07/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>trospium chloride 20mg tab</i>	1	QL=60 EA/30 Days
<i>trospium 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	
GEMTESA 75MG TAB	3	QL=30 EA/30 Days
<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
TRUMENBA SYRINGE	3	VAC
TYPHIM VI 25MCG/0.5ML INJ	3	VAC
TYPHIM VI 25MCG/0.5ML SYRINGE	3	VAC
VAXCHORA SUSP	3	VAC
VIVOTIF DR CAP	3	VAC
VIRAL VACCINES		
ABRYSVO 120MCG/0.5ML INJ	3	VAC
AREXVY 120MCG/0.5ML INJ	3	VAC
ENGRIX-B 10MCG/0.5ML SYRINGE	3	PA BvD VAC
ENGRIX-B 20MCG/ML INJ	3	PA BvD VAC
ENGRIX-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

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: 07/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
VIMKUNYA 40MCG/0.8ML SYRINGE	3	VAC
YF-VAX INJ	3	VAC
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<i>clindamycin 2% vaginal cream</i>	1	
<i>metronidazole 0.75% vaginal gel</i>	1	
<i>terconazole 0.4% vaginal cream</i>	1	
<i>terconazole 0.8% vaginal cream</i>	1	
<i>terconazole 80mg vaginal insert</i>	1	
VAGINAL ESTROGENS		
<i>estradiol 0.01% vaginal cream</i>	1	
<i>estradiol 0.01mg vaginal insert</i>	2	
PREMARIN 0.625MG/GM VAGINAL CREAM	3	
<i>yuvaferm 10mcg vaginal insert</i>	2	

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ALPHABETICAL LISTING OF DRUGS

A					
<i>abacavir 20mg/ml oral soln</i>	54	<i>acitretin 10mg cap</i>	63	ADVAIR 230-21MCG HFA INHALER	20
<i>abacavir 300mg tab</i>	54	<i>acitretin 17.5mg cap</i>	63	ADVAIR 45-21MCG/ACT HFA INHALER	20
<i>abacavir/lamivudine 600-300mg tab</i>	54	<i>acitretin 25mg cap</i>	63	AJOVY 225MG/1.5ML AUTO-INJECTOR	77
ABELCET 5MG/ML INJ	33	ACTEMRA	13	AJOVY 225MG/1.5ML SYRINGE	77
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	53	162MG/0.9ML SYRINGE		AKEEGA 500-100MG TAB	42
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	53	ACTHIB INJ	93	<i>ala-cort 1% cream</i>	64
ABILIFY MAINTENA 300MG INJ	53	ACTIMMUNE	47	<i>albendazole 200mg tab</i>	17
ABILIFY MAINTENA 300MG SYRINGE	53	2000000UNIT/0.5ML INJ		<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	20
ABILIFY MAINTENA 400MG INJ	53	<i>acyclovir 200mg cap</i>	56	<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	20
ABILIFY MAINTENA 400MG SYRINGE	53	<i>acyclovir 400mg tab</i>	56	<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	20
<i>abiraterone acetate 250mg tab</i>	42	<i>acyclovir 40mg/ml oral susp</i>	56	<i>albuterol 1.25mg/3ml neb soln</i>	20
<i>abirtega 250mg tab</i>	42	<i>acyclovir 5% ointment</i>	66	<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i>	20
ABRYSVO	93	<i>acyclovir 50mg/ml inj</i>	56	<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	20
<i>acamprosate calcium 333mg dr tab</i>	85	<i>acyclovir 800mg tab</i>	56	<i>albuterol 2mg tab</i>	20
<i>acarbose 100mg tab</i>	30	ADACEL INJ	91	<i>albuterol 4mg tab</i>	20
<i>acarbose 25mg tab</i>	30	ADACEL SYRINGE	91	<i>albuterol 5mg/ml (0.05%) inh soln</i>	20
<i>acarbose 50mg tab</i>	30	ADALIMUMAB-AATY 100MG/ML (0.2ML) SYRINGE	13	ALCLOMETASONE 0.05% OINT	64
<i>accutane 10mg cap</i>	62	ADALIMUMAB-AATY 100MG/ML (0.4ML) SYRINGE	13	<i>alclometasone dipropionate 0.05% cream</i>	64
<i>accutane 20mg cap</i>	62	ADALIMUMAB-AATY 100MG/ML		ALCOHOL SWAB 1X1 (DIABETIC)	77
<i>accutane 40mg cap</i>	62	AUTO-INJECTOR (0.4ML)		ALECENSA 150MG CAP	43
<i>acebutolol 200mg cap</i>	57	ADALIMUMAB-AATY 100MG/ML	13	<i>alendronate sodium 10mg tab</i>	67
<i>acebutolol 400mg cap</i>	57	AUTO-INJECTOR (0.8ML)		<i>alendronate sodium 35mg tab</i>	67
<i>acetazolamide 125mg tab</i>	66	<i>adefovir dipivoxil 10mg tab</i>	56		
<i>acetazolamide 250mg tab</i>	66	ADEMPAS 0.5MG TAB	88		
<i>acetazolamide 500mg er cap</i>	66	ADEMPAS 1.5MG TAB	88		
<i>acetic acid 2% otic soln</i>	83	ADEMPAS 1MG TAB	88		
<i>acetylcysteine 100mg/ml inh soln</i>	62	ADEMPAS 2.5MG TAB	88		
<i>acetylcysteine 200mg/ml inh soln</i>	62	ADEMPAS 2MG TAB	88		
		ADVAIR 115-21MCG HFA INHALER	20		

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ALPHABETICAL LISTING OF DRUGS

<i>alendronate sodium 70mg tab</i>	67	<i>amitriptyline 10mg tab</i>	28	<i>amoxapine 100mg tab</i>	28
<i>alfuzosin 10mg er tab</i>	74	<i>amitriptyline 150mg tab</i>	28	<i>amoxapine 150mg tab</i>	28
<i>aliskiren 150mg tab</i>	38	<i>amitriptyline 25mg tab</i>	28	<i>amoxapine 25mg tab</i>	28
<i>aliskiren 300mg tab</i>	38	<i>amitriptyline 50mg tab</i>	28	<i>amoxapine 50mg tab</i>	28
<i>allopurinol 100mg tab</i>	74	<i>amitriptyline 75mg tab</i>	28	AMOXICILLIN 125MG	84
<i>allopurinol 300mg tab</i>	74	<i>amlodipine 10mg tab</i>	58	CHEW TAB	
<i>alosetron 0.5mg tab</i>	32	<i>amlodipine 2.5mg tab</i>	58	<i>amoxicillin 250mg cap</i>	84
<i>alosetron 1mg tab</i>	32	<i>amlodipine 5mg tab</i>	58	AMOXICILLIN 250MG	84
<i>alprazolam 0.25mg tab</i>	17	<i>amlodipine/benazepril 10-20mg cap</i>	36	CHEW TAB	
<i>alprazolam 0.5mg tab</i>	18	<i>amlodipine/benazepril 10-40mg cap</i>	36	<i>amoxicillin 25mg/ml oral susp</i>	84
<i>alprazolam 1mg tab</i>	18	<i>amlodipine/benazepril 2.5-10mg cap</i>	36	<i>amoxicillin 40mg/ml oral susp</i>	84
<i>alprazolam 2mg tab</i>	18	<i>amlodipine/benazepril 5-10mg cap</i>	36	<i>amoxicillin 500mg cap</i>	84
<i>altavera tab 28-day pack</i>	69	<i>amlodipine/benazepril 5-20mg cap</i>	37	<i>amoxicillin 500mg tab</i>	84
ALUNBRIG 180MG TAB	43	<i>amlodipine/benazepril 5-40mg cap</i>	37	<i>amoxicillin 50mg/ml oral susp</i>	84
ALUNBRIG 30MG TAB	43	<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	37	<i>amoxicillin 80mg/ml oral susp</i>	84
ALUNBRIG 90MG TAB	43	<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	37	<i>amoxicillin 875mg tab</i>	84
ALUNBRIG TAB	43	<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	37	<i>amoxicillin/clavulanate 250-125mg tab</i>	84
INITIATION PACK (30)		<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	37	<i>amoxicillin/clavulanate 500-125mg tab</i>	84
ALVESCO 160MCG	19	<i>amlodipine/valsartan 10-160mg tab</i>	37	<i>amoxicillin/clavulanate 875-125mg tab</i>	84
INHALER		<i>amlodipine/valsartan 10-320mg tab</i>	37	<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	84
ALVESCO 80MCG	19	<i>amlodipine/valsartan 5-160mg tab</i>	37	<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	84
INHALER		<i>amlodipine/valsartan 5-320mg tab</i>	37	<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	84
<i>alyacen 1/35 tab 28-day pack</i>	69	<i>ammonium lactate 12% cream</i>	66	<i>amphetamine/dextroamph etamine 10mg er cap</i>	11
ALYFTREK	87	<i>ammonium lactate 12% lotion</i>	66	<i>amphetamine/dextroamph etamine 10mg tab</i>	11
10-50-125MG TAB		<i>amnestem 10mg cap</i>	62	<i>amphetamine/dextroamph etamine 12.5mg tab</i>	11
ALYFTREK 4-20-50MG TAB	88	<i>amnestem 20mg cap</i>	62		
<i>alyq 20mg tab</i>	88	<i>amnestem 30mg cap</i>	62		
<i>amantadine 100mg cap</i>	48	<i>amnestem 40mg cap</i>	62		
<i>amantadine 10mg/ml oral soln</i>	48				
<i>ambrisentan 10mg tab</i>	89				
<i>ambrisentan 5mg tab</i>	89				
<i>amikacin 250mg/ml inj</i>	12				
<i>amiloride 5mg tab</i>	67				
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	66				
<i>amiodarone 100mg tab</i>	18				
<i>amiodarone 200mg tab</i>	18				
<i>amiodarone 400mg tab</i>	18				
<i>amitriptyline 100mg tab</i>	28				

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ALPHABETICAL LISTING OF DRUGS

<i>amphetamine/dextroamph etamine 15mg er cap</i>	11	<i>apri tab 28-day pack</i>	69	<i>ashlyna tab 91-day pack</i>	69
<i>amphetamine/dextroamph etamine 15mg tab</i>	11	APTIVUS 250MG CAP	54	ASMANEX 100MCG HFA	19
<i>amphetamine/dextroamph etamine 20mg er cap</i>	11	<i>aranelle tab 28-day pack</i>	69	INHALER	
<i>amphetamine/dextroamph etamine 20mg tab</i>	11	ARCALYST 220MG INJ	79	ASMANEX 110MCG	19
<i>amphetamine/dextroamph etamine 25mg er cap</i>	11	AREXVY 120MCG/0.5ML INJ	93	(30ACT) TWISTHALER	
<i>amphetamine/dextroamph etamine 30mg er cap</i>	11	<i>arformoterol tartrate 15mcg/2ml neb soln</i>	20	ASMANEX 200MCG HFA	19
<i>amphetamine/dextroamph etamine 30mg tab</i>	11	ARIKAYCE	12	INHALER	
<i>amphetamine/dextroamph etamine 5mg er cap</i>	11	590MG/8.4ML INH SUSP		ASMANEX 220MCG	19
<i>amphetamine/dextroamph etamine 5mg tab</i>	11	<i>aripiprazole 10mg odt</i>	53	(120ACT) TWISTHALER	
<i>amphetamine/dextroamph etamine 7.5mg tab</i>	11	<i>aripiprazole 10mg tab</i>	53	ASMANEX 220MCG	20
AMPHOTERICIN B	33	<i>aripiprazole 15mg odt</i>	53	(30ACT) TWISTHALER	
50MG INJ		<i>aripiprazole 15mg tab</i>	53	ASMANEX 50MCG HFA	20
<i>ampicillin 1000mg inj</i>	84	<i>aripiprazole 1mg/ml oral soln</i>	53	INHALER	
<i>ampicillin 100mg/ml inj</i>	84	<i>aripiprazole 20mg tab</i>	53	<i>aspirin/dipyridamole 25-200mg er cap</i>	74
<i>ampicillin 500mg cap</i>	84	<i>aripiprazole 2mg tab</i>	53	<i>atazanavir 150mg cap</i>	54
<i>ampicillin/sulbactam 1000-500mg inj</i>	84	<i>aripiprazole 30mg tab</i>	53	<i>atazanavir 200mg cap</i>	54
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	84	<i>aripiprazole 5mg tab</i>	53	<i>atazanavir 300mg cap</i>	54
<i>ampicillin/sulbactam 2000-1000mg inj</i>	85	ARISTADA	53	<i>atenolol 100mg tab</i>	57
<i>anagrelide 0.5mg cap</i>	74	1064MG/3.9ML SYRINGE		<i>atenolol 25mg tab</i>	57
<i>anagrelide 1mg cap</i>	74	ARISTADA	53	<i>atenolol 50mg tab</i>	57
<i>anastrozole 1mg tab</i>	42	441MG/1.6ML SYRINGE		<i>atenolol/chlorthalidone 100-25mg tab</i>	37
ANORO ELLIPTA	20	ARISTADA	53	<i>atenolol/chlorthalidone 50-25mg tab</i>	37
62.5-25MCG POWDER INHALER		662MG/2.4ML SYRINGE		<i>atomoxetine 100mg cap</i>	11
<i>aprepitant 125mg cap</i>	33	ARISTADA	53	<i>atomoxetine 10mg cap</i>	11
<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	33	675MG/2.4ML SYRINGE		<i>atomoxetine 18mg cap</i>	11
<i>aprepitant 40mg cap</i>	33	ARISTADA	53	<i>atomoxetine 25mg cap</i>	11
<i>aprepitant 80mg cap</i>	33	882MG/3.2ML SYRINGE		<i>atomoxetine 40mg cap</i>	11
		<i>armodafinil 150mg tab</i>	11	<i>atomoxetine 60mg cap</i>	11
		<i>armodafinil 200mg tab</i>	11	<i>atomoxetine 80mg cap</i>	11
		<i>armodafinil 250mg tab</i>	11	<i>atorvastatin 10mg tab</i>	34
		<i>armodafinil 50mg tab</i>	11	<i>atorvastatin 20mg tab</i>	34
		ARNUITY 100MCG POWDER INHALER	19	<i>atorvastatin 40mg tab</i>	34
		ARNUITY 200MCG POWDER INHALER	19	<i>atorvastatin 80mg tab</i>	34
		ARNUITY 50MCG POWDER INHALER	19	<i>atovaquone 750mg/5ml oral susp</i>	39
		<i>asenapine 10mg sl tab</i>	51	<i>atovaquone/proguanil 250-100mg tab</i>	40
		<i>asenapine 2.5mg sl tab</i>	51	<i>atovaquone/proguanil 62.5-25mg tab</i>	40
		<i>asenapine 5mg sl tab</i>	51		

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ALPHABETICAL LISTING OF DRUGS

<i>atropine sulfate 1% ophth soln</i>	83	<i>azithromycin 20mg/ml oral susp</i>	38	<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	37
<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	32	<i>azithromycin 250mg pack (6)</i>	38	<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	37
ATROVENT 17MCG HFA INHALER	19	<i>azithromycin 250mg tab</i>	38	BENLYSTA 200MG/ML	79
<i>aubra tab 28-day pack</i>	69	<i>azithromycin 40mg/ml oral susp</i>	38	AUTO-INJECTOR	
AUGTYRO 160MG CAP	43	<i>azithromycin 500mg inj</i>	38	BENLYSTA 200MG/ML	79
AUGTYRO 40MG CAP	43	<i>azithromycin 500mg tab</i>	38	SYRINGE	
AUSTEDO 12MG TAB	86	<i>azithromycin 500mg tab pack (3)</i>	38	<i>benztropine mesylate 0.5mg tab</i>	48
AUSTEDO 6MG TAB	86	<i>azithromycin 600mg tab</i>	38	<i>benztropine mesylate 1mg tab</i>	48
AUSTEDO 9MG TAB	86	<i>aztreonam 1gm inj</i>	38	<i>benztropine mesylate 2mg tab</i>	48
AUSTEDO XR 12MG TAE	86	<i>aztreonam 2gm inj</i>	38	BERINERT 500UNIT INJ	76
AUSTEDO XR 18MG TAE	86	<i>azurette 28 day pack</i>	69	BESREMI 500MCG/ML	47
AUSTEDO XR 24MG TAE	86	B		SYRINGE	
AUSTEDO XR 30MG TAE	86	BACITRACIN	82	<i>betaine 1gm powder for oral soln</i>	68
AUSTEDO XR 36MG TAE	86	500UNIT/GM OPHTH OINTMENT		<i>betamethasone 0.05% aug cream</i>	64
AUSTEDO XR 42MG TAE	86	<i>bacitracin/polymyxin b 0.5-10unit/mg ophth ointment</i>	82	<i>betamethasone 0.05% aug lotion</i>	64
AUSTEDO XR 48MG TAE	86	<i>baclofen 10mg tab</i>	80	<i>betamethasone 0.05% aug ointment</i>	64
AUSTEDO XR 6MG TAB	86	<i>baclofen 20mg tab</i>	80	<i>betamethasone 0.05% cream</i>	64
AUSTEDO XR TAB ONCI	86	<i>baclofen 5mg tab</i>	80	BETAMETHASONE 0.05% GEL	64
DAILY 4 WEEK TITRATION PACK		<i>balsalazide disodium 750mg cap</i>	73	<i>betamethasone 0.05% lotion</i>	64
AUVELITY 105-45MG ER TAB	26	BALVERSA 3MG TAB	43	<i>betamethasone 0.05% ointment</i>	64
<i>aviane tab 28-day pack</i>	69	BALVERSA 4MG TAB	43	<i>betamethasone 0.1% cream</i>	64
AVONEX 30MCG/0.5ML	87	BALVERSA 5MG TAB	43	<i>betamethasone 0.1% lotion</i>	64
AUTO-INJECTOR		<i>balziva tab 28-day pack</i>	69	BETASERON 0.3MG INJ	87
AVONEX 30MCG/0.5ML	87	BAQSIMI 3MG/DOSE	30	BETAXOLOL 0.5% OPHTH SOLN	82
SYRINGE		NASAL POWDER		<i>betaxolol 10mg tab</i>	57
AYVAKIT 100MG TAB	47	BCG LIVE TICE STRAIN 50MG INJ	93	<i>betaxolol 20mg tab</i>	57
AYVAKIT 200MG TAB	47	<i>benazepril 10mg tab</i>	35		
AYVAKIT 25MG TAB	47	<i>benazepril 20mg tab</i>	35		
AYVAKIT 300MG TAB	47	<i>benazepril 40mg tab</i>	35		
AYVAKIT 50MG TAB	47	<i>benazepril 5mg tab</i>	35		
<i>azathioprine 50mg tab</i>	79	<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	37		
<i>azelaic acid 15% gel</i>	66	<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	37		
<i>azelastine 0.05% ophth soln</i>	83				
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	81				

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ALPHABETICAL LISTING OF DRUGS

<i>bethanechol chloride</i>	93	BOOSTRIX INJ	91	<i>bromocriptine 5mg cap</i>	48
<i>10mg tab</i>		BOOSTRIX SYRINGE	91	BRUKINSA 80MG CAP	43
<i>bethanechol chloride</i>	93	<i>bosentan 125mg tab</i>	89	<i>budesonide 0.25mg/2ml</i>	20
<i>25mg tab</i>		<i>bosentan 62.5mg tab</i>	89	<i>inh susp</i>	
<i>bethanechol chloride</i>	93	BOSULIF 100MG CAP	43	<i>budesonide 0.5mg/2ml</i>	20
<i>50mg tab</i>		BOSULIF 100MG TAB	43	<i>inh susp</i>	
<i>bethanechol chloride 5mg</i>	93	BOSULIF 400MG TAB	43	<i>budesonide 1mg/2ml inh</i>	20
<i>tab</i>		BOSULIF 500MG TAB	43	<i>susp</i>	
<i>bexarotene 1% gel</i>	63	BOSULIF 50MG CAP	43	<i>budesonide 2mg/act</i>	16
<i>bexarotene 75mg cap</i>	47	BRAFTOVI 75MG CAP	43	<i>rectal foam</i>	
BEXSERO SYRINGE	93	BREO ELLIPTA	20	<i>budesonide 3mg dr cap</i>	61
<i>bicalutamide 50mg tab</i>	42	100-25MCG POWDER		<i>budesonide 9mg er tab</i>	61
BICILLIN L-A	84	INHALER		<i>budesonide/formoterol</i>	20
1200000UNIT/2ML		BREO ELLIPTA	20	<i>fumarate 160-45mcg</i>	
SYRINGE		200-25MCG POWDER		<i>inhaler</i>	
BICILLIN L-A	84	INHALER		<i>budesonide/formoterol</i>	20
2400000UNIT/4ML		BREO ELLIPTA	20	<i>fumarate 80-45mcg</i>	
SYRINGE		50-25MCG POWDER		<i>inhaler</i>	
BICILLIN L-A	84	INHALER		<i>bumetanide 0.25mg/ml inj</i>	66
600000UNIT/ML		<i>breylna 160-4.5mcg/act</i>	20	<i>bumetanide 0.5mg tab</i>	66
SYRINGE		<i>inhaler</i>		<i>bumetanide 1mg tab</i>	66
BIKTARVY 30-120-15MG	54	<i>breylna 80-4.5mcg/act</i>	20	<i>bumetanide 2mg tab</i>	66
TAB		<i>inhaler</i>		<i>buprenorphine 10mcg/hr</i>	16
BIKTARVY 50-200-25MG	54	BREZTRI AEROSPHERE	20	<i>weekly patch</i>	
TAB		160-9-4.8MCG/ACT		<i>buprenorphine 15mcg/hr</i>	16
<i>bimatoprost 0.03% ophth</i>	83	INHALER		<i>weekly patch</i>	
<i>soln</i>		<i>brilleyln tab 28-day pack</i>	69	<i>buprenorphine 20mcg/hr</i>	16
<i>bisoprolol fumarate 10mg</i>	57	<i>brimonidine tartrate</i>	82	<i>weekly patch</i>	
<i>tab</i>		<i>0.1% ophth soln</i>		<i>buprenorphine 2mg sl tab</i>	16
<i>bisoprolol fumarate 5mg</i>	57	<i>brimonidine tartrate</i>	82	<i>buprenorphine 5mcg/hr</i>	16
<i>tab</i>		<i>0.15% ophth soln</i>		<i>weekly patch</i>	
<i>bisoprolol</i>	37	<i>brimonidine tartrate</i>	82	<i>buprenorphine 7.5mcg/hr</i>	16
<i>fumarate/hydrochlorothia</i>		<i>0.2% ophth soln</i>		<i>weekly patch</i>	
<i>zide 10-6.25mg tab</i>		<i>brimonidine</i>	82	<i>buprenorphine 8mg sl tab</i>	16
<i>bisoprolol</i>	37	<i>tartrate/timolol 0.2-0.5%</i>		<i>buprenorphine/naloxone</i>	16
<i>fumarate/hydrochlorothia</i>		<i>ophth soln</i>		<i>12-3mg sl film</i>	
<i>zide 2.5-6.25mg tab</i>		BRIVIACT 100MG TAB	23	<i>buprenorphine/naloxone</i>	16
<i>bisoprolol</i>	37	BRIVIACT 10MG TAB	23	<i>2-0.5mg sl film</i>	
<i>fumarate/hydrochlorothia</i>		BRIVIACT 10MG/ML	23	<i>buprenorphine/naloxone</i>	16
<i>zide 5-6.25mg tab</i>		ORAL SOLN		<i>2-0.5mg sl tab</i>	
<i>blisovi 21 fe tab 1.5/30</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>	
<i>blisovi 24 fe tab 1/20</i>	69	BRIVIACT 75MG TAB	23	<i>buprenorphine/naloxone</i>	16
<i>28-day pack</i>		<i>bromocriptine 2.5mg tab</i>	48	<i>8-2mg sl film</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>buprenorphine/naloxone</i>	16	CAMZYOS 10MG CAP	59	<i>carbidopa/entacapone/le</i>	48
<i>8-2mg sl tab</i>		CAMZYOS 15MG CAP	59	<i>vodopa 18.75-200-75mg</i>	
<i>bupropion 100mg sr</i>	26	CAMZYOS 2.5MG CAP	59	<i>tab</i>	
<i>(12hr) tab</i>		CAMZYOS 5MG CAP	59	<i>carbidopa/entacapone/le</i>	48
<i>bupropion 100mg tab</i>	26	<i>candesartan cilexetil</i>	36	<i>vodopa 25-200-100mg</i>	
<i>bupropion 150mg sr (12</i>	26	<i>16mg tab</i>		<i>tab</i>	
<i>hr) tab</i>		<i>candesartan cilexetil</i>	36	<i>carbidopa/entacapone/le</i>	48
<i>bupropion 150mg sr</i>	87	<i>32mg tab</i>		<i>vodopa 31.25-200-125mg</i>	
<i>(12hr) tab</i>		<i>candesartan cilexetil 4mg</i>	36	<i>tab</i>	
<i>bupropion 200mg sr</i>	26	<i>tab</i>		<i>carbidopa/entacapone/le</i>	48
<i>(12hr) tab</i>		<i>candesartan cilexetil 8mg</i>	36	<i>vodopa 37.5-200-150mg</i>	
<i>bupropion 75mg tab</i>	26	<i>tab</i>		<i>tab</i>	
<i>bupropion xl 150mg (24</i>	26	CAPLYTA 10.5MG CAP	49	<i>carbidopa/entacapone/le</i>	48
<i>hr) tab</i>		CAPLYTA 21MG CAP	49	<i>vodopa 50-200-200mg</i>	
<i>bupropion xl 300mg</i>	26	CAPLYTA 42MG CAP	49	<i>tab</i>	
<i>(24hr) tab</i>		CAPRELSA 100MG TAB	43	CARBIDOPA/LEVODOPA	48
<i>buspirone 10mg tab</i>	17	CAPRELSA 300MG TAB	43	10-100MG ODT	
<i>buspirone 15mg tab</i>	17	<i>captopril 100mg tab</i>	35	<i>carbidopa/levodopa</i>	49
<i>buspirone 30mg tab</i>	17	<i>captopril 12.5mg tab</i>	35	<i>10-100mg tab</i>	
<i>buspirone 5mg tab</i>	17	<i>captopril 25mg tab</i>	35	<i>carbidopa/levodopa</i>	49
<i>buspirone 7.5mg tab</i>	17	<i>captopril 50mg tab</i>	35	<i>25-100mg er tab</i>	
C		<i>carbamazepine 100mg</i>	23	CARBIDOPA/LEVODOPA	49
<i>cabergoline 0.5mg tab</i>	69	<i>chew tab</i>		25-100MG ODT	
CABOMETYX 20MG TAE	43	<i>carbamazepine 100mg er</i>	23	<i>carbidopa/levodopa</i>	49
CABOMETYX 40MG TAE	43	<i>cap</i>		<i>25-100mg tab</i>	
CABOMETYX 60MG TAE	43	<i>carbamazepine 100mg er</i>	23	CARBIDOPA/LEVODOPA	49
<i>calcipotriene 0.005%</i>	63	<i>tab</i>		25-250MG ODT	
<i>cream</i>		<i>carbamazepine 200mg er</i>	23	<i>carbidopa/levodopa</i>	49
<i>calcipotriene 0.005%</i>	64	<i>cap</i>		<i>25-250mg tab</i>	
<i>ointment</i>		<i>carbamazepine 200mg er</i>	23	<i>carbidopa/levodopa</i>	49
CALCIPOTRIENE 0.005%	64	<i>tab</i>		<i>50-200mg er tab</i>	
TOPICAL SOLN		<i>carbamazepine 200mg</i>	23	<i>carglumic acid 200mg tab</i>	68
<i>calcitriol 0.25mcg cap</i>	68	<i>tab</i>		<i>for oral susp</i>	
<i>calcitriol 0.5mcg cap</i>	68	<i>carbamazepine 20mg/ml</i>	23	<i>carisoprodol 350mg tab</i>	80
<i>calcitriol 1mcg/ml oral</i>	68	<i>oral susp</i>		CARTEOLOL 1% OPHTH	82
<i>soln</i>		<i>carbamazepine 300mg er</i>	23	SOLN	
CALQUENCE 100MG	43	<i>cap</i>		<i>cartia 120mg er (24hr)</i>	58
CAP		<i>carbamazepine 400mg er</i>	23	<i>cap</i>	
CALQUENCE 100MG	43	<i>tab</i>		<i>cartia 180mg er (24hr)</i>	58
TAB		<i>carbidopa 25mg tab</i>	48	<i>cap</i>	
<i>camila 0.35mg tab 28-day</i>	85	<i>carbidopa/entacapone/le</i>	48	<i>cartia 240mg er (24hr)</i>	58
<i>pack</i>		<i>vodopa 12.5-200-50mg</i>		<i>cap</i>	
<i>camreselo tab 91-day</i>	69	<i>tab</i>		<i>cartia 300mg er (24hr)</i>	58
<i>pack</i>				<i>cap</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>carvedilol 12.5mg tab</i>	57	<i>cefprozil 500mg tab</i>	60	<i>chlorpromazine 200mg</i>	52
<i>carvedilol 25mg tab</i>	57	<i>cefprozil 50mg/ml oral</i>	60	<i>tab</i>	
<i>carvedilol 3.125mg tab</i>	57	<i>susp</i>		<i>chlorpromazine 25mg tab</i>	52
<i>carvedilol 6.25mg tab</i>	57	<i>ceftazidime 1gm inj</i>	61	CHLORPROMAZINE	52
<i>caspofungin acetate 50mg</i>	33	CEFTAZIDIME	61	30MG/ML ORAL SOLN	
<i>inj</i>		200MG/ML INJ		<i>chlorpromazine 50mg tab</i>	52
<i>caspofungin acetate 70mg</i>	33	<i>ceftazidime 2gm inj</i>	61	<i>chlorthalidone 25mg tab</i>	67
<i>inj</i>		<i>ceftriaxone 10gm inj</i>	61	<i>chlorthalidone 50mg tab</i>	67
CAYSTON 75MG/ML INH	88	<i>ceftriaxone 1gm inj</i>	61	<i>chlorzoxazone 500mg tab</i>	80
SOLN		<i>ceftriaxone 250mg inj</i>	61	<i>cholestyramine resin</i>	34
CEFACLOR 250MG CAP	60	<i>ceftriaxone 2gm inj</i>	61	<i>(sugar-free) 4gm powder</i>	
CEFACLOR 500MG CAP	60	<i>ceftriaxone 500mg inj</i>	61	<i>for oral susp</i>	
<i>cefadroxil 100mg/ml oral</i>	60	<i>cefuroxime 1500mg inj</i>	60	<i>cholestyramine resin 4gm</i>	34
<i>susp</i>		<i>cefuroxime 250mg tab</i>	60	<i>powder for oral susp</i>	
<i>cefadroxil 500mg cap</i>	60	<i>cefuroxime 500mg tab</i>	60	<i>ciclopirox 0.77% cream</i>	63
<i>cefadroxil 50mg/ml oral</i>	60	<i>cefuroxime 750mg inj</i>	60	<i>ciclopirox 0.77% gel</i>	63
<i>susp</i>		<i>celecoxib 100mg cap</i>	13	<i>ciclopirox 0.77% lotion</i>	63
<i>cefazolin 1000mg inj</i>	60	<i>celecoxib 200mg cap</i>	13	<i>ciclopirox 1% shampoo</i>	63
<i>cefazolin 200mg/ml inj</i>	60	<i>celecoxib 400mg cap</i>	13	<i>ciclopirox 8% topical soln</i>	63
<i>cefazolin 500mg inj</i>	60	<i>celecoxib 50mg cap</i>	13	CILASTATIN/IMIPENEM	39
<i>cefdinir 25mg/ml oral</i>	60	<i>cephalexin 250mg cap</i>	60	250-250MG INJ	
<i>susp</i>		<i>cephalexin 25mg/ml oral</i>	60	<i>cilastatin/imipenem</i>	39
<i>cefdinir 300mg cap</i>	60	<i>susp</i>		<i>500-500mg inj</i>	
<i>cefdinir 50mg/ml oral</i>	60	<i>cephalexin 500mg cap</i>	60	<i>cilostazol 100mg tab</i>	74
<i>susp</i>		<i>cephalexin 50mg/ml oral</i>	60	<i>cilostazol 50mg tab</i>	74
<i>cefepime 1000mg inj</i>	38	<i>susp</i>		CIMDUO 300-300MG	54
<i>cefepime 2000mg inj</i>	38	<i>cevimeline 30mg cap</i>	62	TAB	
<i>cefixime 20mg/ml oral</i>	60	CHEMET 100MG CAP	79	<i>cimetidine 200mg tab</i>	92
<i>susp</i>		<i>chlordiazepoxide 10mg</i>	18	<i>cimetidine 300mg tab</i>	92
<i>cefixime 400mg cap</i>	60	<i>cap</i>		<i>cimetidine 400mg tab</i>	92
<i>cefixime 40mg/ml oral</i>	60	<i>chlordiazepoxide 25mg</i>	18	<i>cimetidine 800mg tab</i>	92
<i>susp</i>		<i>cap</i>		CIMZIA 200MG INJ	13
<i>cefoxitin 1gm inj</i>	60	<i>chlordiazepoxide 5mg cap</i>	18	CIMZIA 200MG/ML	13
<i>cefoxitin 200mg/ml inj</i>	60	<i>chlorhexidine gluconate</i>	62	SYRINGE	
<i>cefoxitin 2gm inj</i>	60	<i>0.12% mouthwash</i>		<i>cinacalcet 30mg tab</i>	68
<i>cefpodoxime 100mg tab</i>	60	<i>chloroquine phosphate</i>	40	<i>cinacalcet 60mg tab</i>	68
CEFPODOXIME	61	<i>250mg tab</i>		<i>cinacalcet 90mg tab</i>	68
10MG/ML ORAL SUSP		<i>chloroquine phosphate</i>	40	<i>ciprofloxacin 0.3% ophth</i>	82
<i>cefpodoxime 200mg tab</i>	61	<i>500mg tab</i>		<i>soln</i>	
CEFPODOXIME	61	<i>chlorpromazine 100mg</i>	52	<i>ciprofloxacin 250mg tab</i>	73
20MG/ML ORAL SUSP		<i>tab</i>		CIPROFLOXACIN	73
<i>cefprozil 250mg tab</i>	60	CHLORPROMAZINE	52	2MG/ML INJ	
<i>cefprozil 25mg/ml oral</i>	60	100MG/ML ORAL SOLN		<i>ciprofloxacin 500mg tab</i>	73
<i>susp</i>		<i>chlorpromazine 10mg tab</i>	52	<i>ciprofloxacin 750mg tab</i>	73

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ALPHABETICAL LISTING OF DRUGS

<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	83	CLINIMIX 4.25/10 INJ	81	<i>clonidine 0.2mg/24hr weekly patch</i>	36
<i>citalopram 10mg tab</i>	27	CLINIMIX 4.25/5 INJ	81	<i>clonidine 0.3mg tab</i>	36
<i>citalopram 20mg tab</i>	27	CLINIMIX 5/15 INJ	81	<i>clonidine 0.3mg/24hr weekly patch</i>	36
<i>citalopram 2mg/ml oral soln</i>	27	CLINIMIX 5/20 INJ	81	<i>clobazam 10mg tab</i>	74
<i>citalopram 40mg tab</i>	27	<i>clinisol 15% inj</i>	81	<i>clobazam 2.5mg/ml oral susp</i>	18
<i>claravis 10mg cap</i>	62	<i>clobazam 10mg tab</i>	22	<i>clorazepate dipotassium 15mg tab</i>	18
<i>claravis 20mg cap</i>	62	<i>clobazam 20mg tab</i>	22	<i>clorazepate dipotassium 3.75mg tab</i>	18
<i>claravis 30mg cap</i>	62	<i>clobetasol propionate 0.05% cream</i>	64	<i>clorazepate dipotassium 7.5mg tab</i>	18
<i>claravis 40mg cap</i>	62	<i>clobetasol propionate 0.05% e cream</i>	64	<i>clotrimazole 1% cream</i>	63
<i>clarithromycin 250mg tab</i>	38	<i>clobetasol propionate 0.05% foam</i>	64	<i>clotrimazole 10mg lozenge</i>	62
CLARITHROMYCIN 25MG/ML ORAL SUSP	38	<i>clobetasol propionate 0.05% gel</i>	64	<i>clotrimazole/betamethasone 1-0.05% cream</i>	63
<i>clarithromycin 500mg tab</i>	38	<i>clobetasol propionate 0.05% lotion</i>	64	<i>clozapine 100mg odt</i>	51
CLARITHROMYCIN 50MG/ML ORAL SUSP	38	<i>clobetasol propionate 0.05% ointment</i>	64	<i>clozapine 100mg tab</i>	51
<i>clindacin 1% pad</i>	62	<i>clobetasol propionate 0.05% topical soln</i>	64	CLOZAPINE 12.5MG ODT	51
<i>clindamycin 1% gel</i>	62	<i>clobetasol propionate 0.05% shampoo</i>	64	<i>clozapine 150mg odt</i>	51
<i>clindamycin 1% gel (twice-daily)</i>	62	<i>clodan 0.05% shampoo</i>	64	<i>clozapine 200mg odt</i>	52
<i>clindamycin 1% lotion</i>	62	<i>clomipramine 25mg cap</i>	28	<i>clozapine 200mg tab</i>	52
<i>clindamycin 1% pad</i>	62	<i>clomipramine 50mg cap</i>	28	<i>clozapine 25mg odt</i>	52
<i>clindamycin 1% topical soln</i>	62	<i>clomipramine 75mg cap</i>	28	<i>clozapine 25mg tab</i>	52
<i>clindamycin 150mg cap</i>	38	<i>clonazepam 0.125mg odt</i>	22	<i>clozapine 50mg tab</i>	52
<i>clindamycin 2% vaginal cream</i>	94	<i>clonazepam 0.25mg odt</i>	22	COARTEM 20-120MG TAB	40
<i>clindamycin 300mg cap</i>	38	<i>clonazepam 0.5mg odt</i>	22	COBENFY 20-100MG CAP	49
<i>clindamycin 300mg/2ml inj</i>	38	<i>clonazepam 0.5mg tab</i>	22	COBENFY 20-50MG CAP	49
<i>clindamycin 300mg/50ml inj</i>	38	<i>clonazepam 1mg odt</i>	22	COBENFY 30-125MG CAP	49
<i>clindamycin 600mg/4ml inj</i>	38	<i>clonazepam 1mg tab</i>	22	COBENFY CAP 28-DAY STARTER KIT PACK (56)	49
<i>clindamycin 600mg/50ml inj</i>	38	<i>clonazepam 2mg odt</i>	22	<i>codeine phosphate/acetaminophen 15-300mg tab</i>	15
<i>clindamycin 75mg cap</i>	38	<i>clonazepam 2mg tab</i>	22	CODEINE	15
<i>clindamycin 75mg/5ml oral soln</i>	38	<i>clonidine 0.1mg er tab</i>	11	PHOSPHATE/ACETAMINOPHEN 2.4-24MG/ML ORAL SOLN	
<i>clindamycin 900mg/50ml inj</i>	38	<i>clonidine 0.1mg tab</i>	36		
<i>clindamycin 900mg/6ml inj</i>	38	<i>clonidine 0.1mg/24hr weekly patch</i>	36		
		<i>clonidine 0.2mg tab</i>	36		

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ALPHABETICAL LISTING OF DRUGS

<i>codeine</i>	15	CREON	66	CYSTARAN 0.44%	83
<i>phosphate/acetaminophe</i>		180000-36000-114000U		OPHTH SOLN	
<i>n 30-300mg tab</i>		NIT DR CAP		D	
<i>codeine</i>	15	CREON	66	<i>dabigatran etexilate</i>	21
<i>phosphate/acetaminophe</i>		30000-6000-19000UNIT		<i>110mg cap</i>	
<i>n 60-300mg tab</i>		DR CAP		<i>dabigatran etexilate</i>	21
<i>colchicine 0.6mg tab</i>	74	CREON	66	<i>150mg cap</i>	
<i>colchicine/probenecid</i>	74	60000-12000-38000UNIT		<i>dabigatran etexilate</i>	21
<i>0.5-500mg tab</i>		DR CAP		<i>75mg cap</i>	
<i>colesevelam 625mg tab</i>	34	<i>cromolyn sodium 20mg/ml</i>	73	<i>dalfampridine 10mg er</i>	87
<i>colestipol 1gm tab</i>	34	<i>oral soln</i>		<i>tab</i>	
<i>colestipol 5000mg</i>	34	CROMOLYN SODIUM	83	<i>danazol 100mg cap</i>	16
<i>granules for oral susp</i>		4% OPHTH SOLN		<i>danazol 200mg cap</i>	16
<i>colistin 75mg/ml inj</i>	39	<i>cryselle tab 28-day pack</i>	69	<i>danazol 50mg cap</i>	16
COMBIVENT	20	<i>cyclobenzaprine 10mg</i>	80	<i>dantrolene sodium 100mg</i>	81
20-100MCG/ACT		<i>tab</i>		<i>cap</i>	
INHALER		<i>cyclobenzaprine 5mg tab</i>	80	<i>dantrolene sodium 25mg</i>	81
COMETRIQ CAP 100MG	43	CYCLOPHOSPHAMIDE	41	<i>cap</i>	
DAILY DOSE PACK (56)		25MG TAB		<i>dantrolene sodium 50mg</i>	81
COMETRIQ CAP 140MG	43	CYCLOPHOSPHAMIDE	41	<i>cap</i>	
DAILY DOSE PACK (112)		50MG TAB		<i>dapsone 100mg tab</i>	40
COMETRIQ CAP 60MG	43	<i>cyclosporine 0.05% ophth</i>	83	<i>dapsone 25mg tab</i>	40
DAILY DOSE PACK (84)		<i>susp</i>		DAPTACEL INJ	91
<i>compro 25mg rectal supp</i>	52	<i>cyclosporine 100mg cap</i>	79	<i>daptomycin 500mg inj</i>	39
<i>constulose 10gm/15ml</i>	76	<i>cyclosporine 25mg cap</i>	79	<i>darifenacin 15mg er tab</i>	92
<i>oral soln</i>		<i>cyclosporine modified</i>	79	<i>darifenacin 7.5mg er tab</i>	92
COPIKTRA 15MG CAP	43	<i>100mg cap</i>		<i>darunavir 600mg tab</i>	54
COPIKTRA 25MG CAP	43	<i>cyclosporine modified</i>	79	<i>darunavir 800mg tab</i>	54
COSENTYX 150MG/ML	64	<i>100mg/ml oral soln</i>		<i>dasatinib 100mg tab</i>	43
AUTO-INJECTOR		<i>cyclosporine modified</i>	79	<i>dasatinib 140mg tab</i>	43
COSENTYX 150MG/ML	64	<i>25mg cap</i>		<i>dasatinib 20mg tab</i>	43
SYRINGE		<i>cyclosporine modified</i>	79	<i>dasatinib 50mg tab</i>	43
COSENTYX	64	<i>50mg cap</i>		<i>dasatinib 70mg tab</i>	43
75MG/0.5ML SYRINGE		<i>cyproheptadine 0.4mg/ml</i>	88	<i>dasatinib 80mg tab</i>	43
COSENTYX UNOREADY	64	<i>oral soln</i>		DAURISMO 100MG TAB	42
300MG/2ML		<i>cyproheptadine 4mg tab</i>	88	DAURISMO 25MG TAB	42
AUTO-INJECTOR		<i>cyred tab 28-day pack</i>	69	<i>deblitane 0.35mg tab</i>	85
COTELLIC 20MG TAB	43	CYSTADANE 1GM	68	<i>28-day pack</i>	
CREON	66	POWDER FOR ORAL		<i>deferasirox 180mg tab</i>	79
120000-24000-76000UNI		SOLN		<i>deferasirox 360mg tab</i>	79
T DR CAP		CYSTADROPS 0.37%	83	<i>deferasirox 90mg tab</i>	79
CREON	66	OPHTH SOLN		DELSTRIGO	54
15000-3000-9500UNIT		CYSTAGON 150MG CAP	74	100-300-300MG TAB	
DR CAP		CYSTAGON 50MG CAP	74		

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: 07/01/2025

ALPHABETICAL LISTING OF DRUGS

DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	85	<i>dexamethasone 0.75mg tab</i>	61	DIAZEPAM 2.5MG/0.5ML RECTAL GEL	22
<i>depo-testosterone 100mg/ml inj</i>	16	<i>dexamethasone 1.5mg tab</i>	61	<i>diazepam 20mg/4ml rectal gel</i>	22
<i>depo-testosterone 200mg/ml inj</i>	16	<i>dexamethasone 1mg tab</i>	61	<i>diazepam 2mg tab</i>	18
DESCOVY 120-15MG TAB	54	<i>dexamethasone 2mg tab</i>	61	<i>diazepam 5mg tab</i>	18
DESCOVY 200-25MG TAB	54	<i>dexamethasone 4mg tab</i>	61	<i>diazepam 5mg/ml oral soln</i>	18
<i>desipramine 100mg tab</i>	28	<i>dexamethasone 6mg tab</i>	61	<i>diazoxide 50mg/ml oral susp</i>	30
<i>desipramine 10mg tab</i>	28	DEXAMETHASONE PHOSPHATE 0.1%	82	<i>diclofenac potassium 50mg tab</i>	13
<i>desipramine 150mg tab</i>	28	OPHTH SOLN		<i>diclofenac sodium 0.1% ophth soln</i>	83
<i>desipramine 25mg tab</i>	28	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	83	<i>diclofenac sodium 1.5% topical soln</i>	13
<i>desipramine 50mg tab</i>	28	<i>dexamethasone/tobramyc in 0.3-0.1% ophth susp</i>	83	<i>diclofenac sodium 100mg er tab</i>	13
<i>desipramine 75mg tab</i>	29	<i>dexlansoprazole 30mg dr cap</i>	92	<i>diclofenac sodium 25mg dr tab</i>	13
<i>desloratadine 5mg tab</i>	88	<i>dexlansoprazole 60mg dr cap</i>	92	<i>diclofenac sodium 3% gel</i>	63
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	69	<i>dexmethylphenidate 10mg tab</i>	11	<i>diclofenac sodium 50mg dr tab</i>	13
<i>desmopressin acetate 0.1mg tab</i>	69	<i>dexmethylphenidate 2.5mg tab</i>	11	<i>diclofenac sodium 75mg dr tab</i>	13
<i>desmopressin acetate 0.2mg tab</i>	69	<i>dexmethylphenidate 5mg tab</i>	11	<i>dicloxacillin 250mg cap</i>	85
<i>desogestrel/ethinyl estradiol/ethinyl estradiol</i>	69	<i>dextroamphetamine sulfate 10mg tab</i>	11	<i>dicloxacillin 500mg cap</i>	85
<i>0.15-0.01-0.02mg tab 28-day pack</i>		<i>dextroamphetamine sulfate 5mg tab</i>	11	<i>dicyclomine 10mg cap</i>	92
<i>desonide 0.05% ointment</i>	65	DEXTROSE 10% INJ	81	<i>dicyclomine 20mg tab</i>	92
<i>desoximetasone 0.25% cream</i>	65	DIACOMIT 250MG CAP	23	<i>dicyclomine 2mg/ml oral soln</i>	92
<i>desoximetasone 0.25% ointment</i>	65	DIACOMIT 250MG POWDER FOR ORAL SUSP	23	DIFICID 200MG TAB	39
<i>desvenlafaxine succinate 100mg er tab</i>	28	DIACOMIT 500MG CAP	23	DIFICID 40MG/ML ORAL SUSP	39
<i>desvenlafaxine succinate 25mg er tab</i>	28	DIACOMIT 500MG POWDER FOR ORAL SUSP	23	<i>diflunisal 500mg tab</i>	14
<i>desvenlafaxine succinate 50mg er tab</i>	28	<i>diazepam 10mg tab</i>	18	<i>difluprednate 0.05% ophth susp</i>	83
DEXAMETHASONE 0.1MG/ML ORAL SOLN	61	<i>diazepam 10mg/2ml rectal gel</i>	22	<i>digoxin 0.125mg tab</i>	59
<i>dexamethasone 0.5mg tab</i>	61	<i>diazepam 1mg/ml oral soln</i>	18	<i>digoxin 0.25mg tab</i>	59
				<i>dihydroergotamine</i>	77
				<i>mesylate 0.5mg/act nasal inhaler</i>	
				<i>dilt 120mg er (24hr) cap</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: 07/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>dilt 180mg er (24hr) cap</i>	58	<i>divalproex sodium 250mg</i>	26	<i>doxepin 10mg/ml oral</i>	29
<i>dilt 240mg er (24hr) cap</i>	58	<i>er tab</i>		<i>soln</i>	
<i>diltiazem 120mg er (12hr)</i>	58	<i>divalproex sodium 500mg</i>	26	<i>doxepin 150mg cap</i>	29
<i>cap</i>		<i>dr tab</i>		<i>doxepin 25mg cap</i>	29
<i>diltiazem 120mg er (24hr)</i>	58	<i>divalproex sodium 500mg</i>	26	<i>doxepin 50mg cap</i>	29
<i>cap</i>		<i>er tab</i>		<i>doxepin 75mg cap</i>	29
<i>diltiazem 120mg tab</i>	58	<i>dofetilide 0.125mg cap</i>	18	<i>doxy 100mg inj</i>	89
<i>diltiazem 180mg er (24hr)</i>	58	<i>dofetilide 0.25mg cap</i>	18	<i>doxycycline hyclate</i>	89
<i>cap</i>		<i>dofetilide 0.5mg cap</i>	18	<i>100mg cap</i>	
<i>diltiazem 240mg er (24hr)</i>	58	<i>donepezil 10mg odt</i>	86	<i>doxycycline hyclate</i>	89
<i>cap</i>		<i>donepezil 10mg tab</i>	86	<i>100mg tab</i>	
<i>diltiazem 300mg er (24hr)</i>	58	<i>donepezil 23mg tab</i>	86	<i>doxycycline hyclate 20mg</i>	89
<i>cap</i>		<i>donepezil 5mg odt</i>	86	<i>tab</i>	
<i>diltiazem 30mg tab</i>	58	<i>donepezil 5mg tab</i>	86	<i>doxycycline hyclate 50mg</i>	89
<i>diltiazem 360mg er (24hr)</i>	58	DOPTELET 20MG TAB	75	<i>cap</i>	
<i>cap</i>		DOPTELET TAB 40MG	75	<i>doxycycline monohydrate</i>	90
<i>diltiazem 420mg er (24hr)</i>	58	DAILY DOSE PACK (10)		<i>100mg cap</i>	
<i>cap</i>		DOPTELET TAB 60MG	75	<i>doxycycline monohydrate</i>	90
<i>diltiazem 60mg er (12hr)</i>	58	DAILY DOSE PACK (15)		<i>100mg tab</i>	
<i>cap</i>		<i>dorzolamide 2% ophth</i>	83	<i>doxycycline monohydrate</i>	90
<i>diltiazem 60mg tab</i>	58	<i>soln</i>		<i>50mg cap</i>	
<i>diltiazem 90mg er (12hr)</i>	58	<i>dorzolamide/timolol</i>	82	<i>doxycycline monohydrate</i>	90
<i>cap</i>		<i>22.3-6.8mg/ml ophth soln</i>		<i>50mg tab</i>	
<i>diltiazem 90mg tab</i>	58	<i>dorzolamide/timolol</i>	82	<i>doxycycline monohydrate</i>	90
<i>dimethyl fumarate 120mg</i>	87	<i>maleate 2%-0.5% ophth</i>		<i>5mg/ml oral susp</i>	
<i>dr cap</i>		<i>soln (preservative-free)</i>		DRIZALMA 20MG DR	28
<i>dimethyl fumarate</i>	87	<i>dotti 0.025mg/24hr twice</i>	72	SPRINKLE CAP	
<i>120mg/240mg cap starter</i>		<i>weekly patch</i>		DRIZALMA 30MG DR	28
<i>pack (60)</i>		<i>dotti 0.0375mg/24hr</i>	72	SPRINKLE CAP	
<i>dimethyl fumarate 240mg</i>	87	<i>twice weekly patch</i>		DRIZALMA 40MG DR	28
<i>dr cap</i>		<i>dotti 0.05mg/24hr twice</i>	72	SPRINKLE CAP	
<i>dipyridamole 25mg tab</i>	75	<i>weekly patch</i>		DRIZALMA 60MG DR	28
<i>dipyridamole 50mg tab</i>	75	<i>dotti 0.075mg/24hr twice</i>	72	SPRINKLE CAP	
<i>dipyridamole 75mg tab</i>	75	<i>weekly patch</i>		<i>dronabinol 10mg cap</i>	33
<i>disopyramide 100mg cap</i>	18	<i>dotti 0.1mg/24hr twice</i>	72	<i>dronabinol 2.5mg cap</i>	33
<i>disopyramide 150mg cap</i>	18	<i>weekly patch</i>		<i>dronabinol 5mg cap</i>	33
<i>disulfiram 250mg tab</i>	85	DOVATO 50-300MG TAB	54	<i>drospirenone/ethinyl</i>	69
<i>disulfiram 500mg tab</i>	85	<i>doxazosin 1mg tab</i>	36	<i>estradiol/inert</i>	
<i>divalproex sodium 125mg</i>	26	<i>doxazosin 2mg tab</i>	36	<i>ingredients 3-0.02-1mg</i>	
<i>dr cap</i>		<i>doxazosin 4mg tab</i>	36	<i>tab 28-day pack</i>	
<i>divalproex sodium 125mg</i>	26	<i>doxazosin 8mg tab</i>	36	<i>drospirenone/ethinyl</i>	69
<i>dr tab</i>		<i>doxepin 100mg cap</i>	29	<i>estradiol/inert</i>	
<i>divalproex sodium 250mg</i>	26	<i>doxepin 10mg cap</i>	29	<i>ingredients 3-0.03-1mg</i>	
<i>dr tab</i>				<i>tab 28-day pack</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>droxidopa 100mg cap</i>	59	ELIGARD 30MG	42	<i>emtricitabine/rilpivirine/t</i>	54
<i>droxidopa 200mg cap</i>	59	SYRINGE		<i>enofovir disoproxil</i>	
<i>droxidopa 300mg cap</i>	59	ELIGARD 45MG	42	<i>fumarate 200-25-300mg</i>	
DULERA 100-5MCG	20	SYRINGE		<i>tab</i>	
INHALER		ELIGARD 7.5MG	42	<i>emtricitabine/tenofovir</i>	54
DULERA 200-5MCG	20	SYRINGE		<i>disoproxil fumarate</i>	
INHALER		ELIQUIS 2.5MG TAB	21	<i>100-150mg tab</i>	
DULERA 50-5MCG	20	ELIQUIS 5MG 30-DAY	21	<i>emtricitabine/tenofovir</i>	54
INHALER		STARTER PACK (74)		<i>disoproxil fumarate</i>	
<i>duloxetine 20mg dr cap</i>	28	ELIQUIS 5MG TAB	21	<i>133-200mg tab</i>	
<i>duloxetine 30mg dr cap</i>	28	ELMIRON 100MG CAP	74	<i>emtricitabine/tenofovir</i>	54
<i>duloxetine 60mg dr cap</i>	28	<i>eltrombopag olamine</i>	75	<i>disoproxil fumarate</i>	
DUPIXENT	19	<i>12.5mg powder pack for</i>		<i>167-250mg tab</i>	
200MG/1.14ML		<i>susp</i>		<i>emtricitabine/tenofovir</i>	54
AUTO-INJECTOR		<i>eltrombopag olamine</i>	75	<i>disoproxil fumarate</i>	
DUPIXENT	19	<i>12.5mg tab</i>		<i>200-300mg tab</i>	
200MG/1.14ML		<i>eltrombopag olamine</i>	75	EMTRIVA 10MG/ML	54
SYRINGE		<i>25mg powder pack for</i>		ORAL SOLN	
DUPIXENT 300MG/2ML	19	<i>susp</i>		<i>enalapril maleate 10mg</i>	35
AUTO-INJECTOR		<i>eltrombopag olamine</i>	75	<i>tab</i>	
DUPIXENT 300MG/2ML	19	<i>25mg tab</i>		<i>enalapril maleate 2.5mg</i>	35
SYRINGE		<i>eltrombopag olamine</i>	75	<i>tab</i>	
<i>dutasteride 0.5mg cap</i>	74	<i>50mg tab</i>		<i>enalapril maleate 20mg</i>	35
E		<i>eltrombopag olamine</i>	75	<i>tab</i>	
<i>econazole nitrate 1%</i>	63	<i>75mg tab</i>		<i>enalapril maleate 5mg</i>	35
<i>cream</i>		<i>eluryng</i>	69	<i>tab</i>	
EDURANT 25MG TAB	54	<i>0.120-0.015mg/24hr</i>		<i>enalapril</i>	37
<i>efavirenz 600mg tab</i>	54	<i>vaginal system</i>		<i>maleate/hydrochlorothiaz</i>	
<i>efavirenz/emtricitabine/te</i>	54	EMGALITY 100MG/ML	77	<i>ide 10-25mg tab</i>	
<i>nofovir disoproxil</i>		SYRINGE		<i>enalapril</i>	37
<i>fumarate 600-200-300mg</i>		EMGALITY 120MG/ML	77	<i>maleate/hydrochlorothiaz</i>	
<i>tab</i>		AUTO-INJECTOR		<i>ide 5-12.5mg tab</i>	
EFAVIRENZ/LAMIVUDIN	54	EMGALITY 120MG/ML	77	ENBREL 25MG/0.5ML	13
E/TENOFOVIR		SYRINGE		INJ	
DISOPROXIL		EMSAM 12MG/24HR	26	ENBREL 25MG/0.5ML	13
FUMARATE		PATCH		SYRINGE	
400-300-300MG TAB		EMSAM 6MG/24HR	26	ENBREL 50MG/ML	13
<i>efavirenz/lamivudine/teno</i>	54	PATCH		AUTO-INJECTOR	
<i>fovir disoproxil fumarate</i>		EMSAM 9MG/24HR	26	ENBREL 50MG/ML	13
<i>600-300-300mg tab</i>		PATCH		CARTRIDGE	
ELECTROLYTE-148	77	<i>emtricitabine 200mg cap</i>	54	ENBREL 50MG/ML	13
SOLUTION				SYRINGE	
ELIGARD 22.5MG	42			<i>endocet 10-325mg tab</i>	15
SYRINGE				<i>endocet 2.5-325mg tab</i>	15

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ALPHABETICAL LISTING OF DRUGS

<i>endocet 5-325mg tab</i>	15	<i>epinephrine</i>	20	<i>escitalopram 1mg/ml oral</i>	27
<i>endocet 7.5-325mg tab</i>	15	<i>0.15mg/0.3ml</i>		<i>soln</i>	
ENERGIX-B	93	<i>auto-injector (2pack)</i>		<i>escitalopram 20mg tab</i>	27
10MCG/0.5ML SYRINGE		<i>epinephrine 0.3mg/0.3ml</i>	20	<i>escitalopram 5mg tab</i>	27
ENERGIX-B 20MCG/ML	93	<i>auto-injector (2pack)</i>		<i>eslicarbazepine 200mg</i>	23
INJ		<i>epitol 200mg tab</i>	23	<i>tab</i>	
ENERGIX-B 20MCG/ML	93	<i>epiphenone 25mg tab</i>	38	<i>eslicarbazepine 400mg</i>	23
SYRINGE		<i>epiphenone 50mg tab</i>	38	<i>tab</i>	
<i>enilloring</i>	69	EPRONTIA 25MG/ML	23	<i>eslicarbazepine 600mg</i>	23
<i>0.120-0.015mg/24hr</i>		ORAL SOLN		<i>tab</i>	
<i>vaginal system</i>		ERIVEDGE 150MG CAP	42	<i>eslicarbazepine 800mg</i>	23
<i>enoxaparin sodium</i>	22	ERLEADA 240MG TAB	42	<i>tab</i>	
<i>100mg/1ml syringe</i>		ERLEADA 60MG TAB	42	<i>esomeprazole 20mg dr</i>	92
<i>enoxaparin sodium</i>	22	<i>erlotinib 100mg tab</i>	41	<i>cap</i>	
<i>120mg/0.8ml syringe</i>		<i>erlotinib 150mg tab</i>	41	<i>esomeprazole 40mg dr</i>	92
<i>enoxaparin sodium</i>	22	<i>erlotinib 25mg tab</i>	41	<i>cap</i>	
<i>150mg/1ml syringe</i>		<i>errin 0.35mg tab 28-day</i>	85	<i>estarylla tab 28-day pack</i>	69
<i>enoxaparin sodium</i>	22	<i>pack</i>		<i>estradiol 0.0025mg/hr</i>	72
<i>30mg/0.3ml syringe</i>		<i>ertapenem 1gm inj</i>	39	<i>weekly patch</i>	
<i>enoxaparin sodium</i>	22	ERY 2% PAD	62	<i>estradiol 0.01% vaginal</i>	94
<i>40mg/0.4ml syringe</i>		<i>ery-tab 250mg dr tab</i>	39	<i>cream</i>	
<i>enoxaparin sodium</i>	22	<i>ery-tab 333mg dr tab</i>	39	<i>estradiol 0.01mg vaginal</i>	94
<i>60mg/0.6ml syringe</i>		<i>ery-tab 500mg dr tab</i>	39	<i>insert</i>	
<i>enoxaparin sodium</i>	22	<i>erythromycin 0.5% ophth</i>	82	<i>estradiol 0.01mg/24hr</i>	72
<i>80mg/0.8ml syringe</i>		<i>ointment</i>		<i>twice weekly patch</i>	
<i>enpresse tab 28-day pack</i>	69	<i>erythromycin 2% gel</i>	62	<i>estradiol 0.01mg/24hr</i>	72
<i>enskyce tab 28-day pack</i>	69	<i>erythromycin 2% topical</i>	62	<i>weekly patch</i>	
<i>entacapone 200mg tab</i>	48	<i>soln</i>		<i>estradiol 0.025mg/24hr</i>	72
<i>entecavir 0.5mg tab</i>	56	<i>erythromycin 250mg dr</i>	39	<i>twice weekly patch</i>	
<i>entecavir 1mg tab</i>	56	<i>tab</i>		<i>estradiol 0.025mg/24hr</i>	72
ENTRESTO 24-26MG	59	<i>erythromycin 250mg tab</i>	39	<i>weekly patch</i>	
TAB		<i>erythromycin 333mg dr</i>	39	<i>estradiol 0.0375mg/24hr</i>	72
ENTRESTO 49-51MG	59	<i>tab</i>		<i>twice weekly patch</i>	
TAB		<i>erythromycin 500mg dr</i>	39	<i>estradiol 0.0375mg/24hr</i>	72
ENTRESTO 97-103MG	60	<i>tab</i>		<i>weekly patch</i>	
TAB		<i>erythromycin 500mg tab</i>	39	<i>estradiol 0.05mg/24hr</i>	72
<i>enulose 10gm/15ml oral</i>	73	<i>erythromycin</i>	39	<i>twice weekly patch</i>	
<i>soln</i>		<i>ethylsuccinate 40mg/ml</i>		<i>estradiol 0.05mg/24hr</i>	72
ENVARUSUS XR 0.75MG	80	<i>oral susp</i>		<i>weekly patch</i>	
TAB		<i>erythromycin</i>	39	<i>estradiol 0.075mg/24hr</i>	72
ENVARUSUS XR 1MG TAB	80	<i>ethylsuccinate 80mg/ml</i>		<i>twice weekly patch</i>	
ENVARUSUS XR 4MG TAB	80	<i>oral susp</i>		<i>estradiol 0.075mg/24hr</i>	72
EPIDIOLEX 100MG/ML	23	<i>escitalopram 10mg tab</i>	27	<i>weekly patch</i>	
ORAL SOLN				<i>estradiol 0.5mg tab</i>	72

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ALPHABETICAL LISTING OF DRUGS

<i>estradiol 1mg tab</i>	72	<i>ethinyl estradiol/ferrous</i>	70	<i>etodolac 300mg cap</i>	14
<i>estradiol 2mg tab</i>	72	<i>fumarate/norethindrone</i>		<i>etodolac 400mg tab</i>	14
<i>estradiol valerate</i>	72	<i>acetate 0.02-75-1mg tab</i>		<i>etodolac 500mg tab</i>	14
<i>10mg/ml inj</i>		<i>28-day pack</i>		<i>etravirine 100mg tab</i>	54
<i>estradiol valerate</i>	73	<i>ethinyl estradiol/inert</i>	70	<i>etravirine 200mg tab</i>	54
<i>20mg/ml inj</i>		<i>ingredients/levonorgestre</i>		EULEXIN 125MG CAP	42
<i>estradiol valerate</i>	73	<i>l 0.02-1-0.1mg tab 28-day</i>		<i>euthyrox 100mcg tab</i>	90
<i>40mg/ml inj</i>		<i>pack</i>		<i>euthyrox 112mcg tab</i>	90
<i>estradiol/norethindrone</i>	69	<i>ethinyl estradiol/inert</i>	70	<i>euthyrox 125mcg tab</i>	90
<i>acetate 0.5-0.1mg 28-day</i>		<i>ingredients/levonorgestre</i>		<i>euthyrox 137mcg tab</i>	90
<i>pack</i>		<i>l 0.03-1-0.15mg tab</i>		<i>euthyrox 150mcg tab</i>	90
<i>estradiol/norethindrone</i>	69	<i>28-day pack</i>		<i>euthyrox 175mcg tab</i>	90
<i>acetate 1-0.5mg 28-day</i>		<i>ethinyl estradiol/inert</i>	70	<i>euthyrox 200mcg tab</i>	90
<i>pack</i>		<i>ingredients/levonorgestre</i>		<i>euthyrox 25mcg tab</i>	90
<i>eszopiclone 1mg tab</i>	75	<i>l 0.03-1-0.15mg tab</i>		<i>euthyrox 50mcg tab</i>	90
<i>eszopiclone 2mg tab</i>	75	<i>91-day pack</i>		<i>euthyrox 75mcg tab</i>	90
<i>eszopiclone 3mg tab</i>	75	<i>ethinyl estradiol/inert</i>	70	<i>euthyrox 88mcg tab</i>	90
<i>ethambutol 100mg tab</i>	40	<i>ingredients/norgestimate</i>		<i>everolimus 0.25mg tab</i>	80
<i>ethambutol 400mg tab</i>	40	<i>0.035-1-0.25mg tab</i>		<i>everolimus 0.5mg tab</i>	80
<i>ethinyl estradiol/ethinyl</i>	69	<i>28-day pack</i>		<i>everolimus 0.75mg tab</i>	80
<i>estradiol/levonorgestrel</i>		<i>ethinyl</i>	70	<i>everolimus 10mg tab</i>	43
<i>0.01-0.02-0.1mg tab</i>		<i>estradiol/norethindrone</i>		<i>everolimus 1mg tab</i>	80
<i>91-day pack</i>		<i>acetate 0.0025-0.5mg</i>		<i>everolimus 2.5mg tab</i>	43
<i>ethinyl estradiol/ethinyl</i>	70	<i>pack</i>		<i>everolimus 2mg tab for</i>	44
<i>estradiol/levonorgestrel</i>		<i>ethinyl</i>	70	<i>oral susp</i>	
<i>0.01-0.03-0.15mg tab</i>		<i>estradiol/norethindrone</i>		<i>everolimus 3mg tab for</i>	44
<i>91-day pack</i>		<i>acetate 0.005-1mg 28-day</i>		<i>oral susp</i>	
<i>ethinyl</i>	70	<i>pack</i>		<i>everolimus 5mg tab</i>	44
<i>estradiol/ethynodiol</i>		<i>ethinyl</i>	70	<i>everolimus 5mg tab for</i>	44
<i>diacetate/inert</i>		<i>estradiol/norethindrone</i>		<i>oral susp</i>	
<i>ingredients 0.035-1-1mg</i>		<i>acetate 0.02-1mg tab</i>		<i>everolimus 7.5mg tab</i>	44
<i>tab 28-day pack</i>		<i>21-day pack</i>		EVOTAZ 300-150MG	54
<i>ethinyl</i>	70	<i>ethinyl</i>	70	TAB	
<i>estradiol/ethynodiol</i>		<i>estradiol/norgestimate</i>		EVRYSDI 0.75MG/ML	81
<i>diacetate/inert</i>		<i>0.18-25/0.215-25/0.25-25</i>		ORAL SOLN	
<i>ingredients 0.05-1-1mg</i>		<i>mg-mcg tab 28-day pack</i>		EVRYSDI 5MG TAB	81
<i>tab 28-day pack</i>		<i>ethinyl</i>	70	<i>exemestane 25mg tab</i>	42
<i>ethinyl</i>	70	<i>estradiol/norgestimate</i>		<i>ezetimibe 10mg tab</i>	33
<i>estradiol/etonogestrel</i>		<i>0.18-35/0.215-35/0.25-35</i>			
<i>0.120-0.015 mg/24hr</i>		<i>mg-mcg tab 28-day pack</i>		F	
<i>vaginal system</i>		<i>ethosuximide 250mg cap</i>	26	<i>falmina tab 28-day pack</i>	70
		<i>ethosuximide 50mg/ml</i>	26	<i>famciclovir 125mg tab</i>	56
		<i>oral soln</i>		<i>famciclovir 250mg tab</i>	56
		<i>etodolac 200mg cap</i>	14	<i>famciclovir 500mg tab</i>	56
				<i>famotidine 20mg tab</i>	92

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: 07/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>famotidine 40mg tab</i>	92	<i>fentanyl 75mcg/hr patch</i>	14	<i>fludrocortisone acetate</i>	62
FANAPT 10MG TAB	50	<i>fesoterodine fumarate</i>	92	<i>0.1mg tab</i>	
FANAPT 12MG TAB	50	<i>4mg er tab</i>		<i>flunisolide 25%</i>	81
FANAPT 1MG TAB	50	<i>fesoterodine fumarate</i>	92	<i>(25mcg/act) nasal inhaler</i>	
FANAPT 2MG TAB	50	<i>8mg er tab</i>		<i>fluocinolone acetonide</i>	65
FANAPT 4MG TAB	50	FETZIMA 120MG ER	28	<i>0.01% cream</i>	
FANAPT 6MG TAB	50	CAP		<i>fluocinolone acetonide</i>	83
FANAPT 8MG TAB	50	FETZIMA 20MG ER CAP	28	<i>0.01% otic soln</i>	
FANAPT TAB TITRATION	50	FETZIMA 40MG ER CAP	28	<i>fluocinolone acetonide</i>	65
PACK (8)		FETZIMA 80MG ER CAP	28	<i>0.01% topical oil</i>	
FARXIGA 10MG TAB	31	FETZIMA ER CAP	28	<i>fluocinolone acetonide</i>	65
FARXIGA 5MG TAB	31	TITRATION PACK (28)		<i>0.01% topical soln</i>	
FASENRA 10MG/0.5ML	19	<i>finasteride 5mg tab</i>	74	<i>fluocinolone acetonide</i>	65
SYRINGE		<i>ingolimod 0.5mg cap</i>	87	<i>0.025% cream</i>	
FASENRA 30MG/ML	19	FINTEPLA 2.2MG/ML	23	<i>fluocinolone acetonide</i>	65
AUTO-INJECTOR		ORAL SOLN		<i>0.025% ointment</i>	
FASENRA 30MG/ML	19	<i>finzala 24 fe chewable tab</i>	70	<i>fluocinonide 0.05% cream</i>	65
SYRINGE		<i>28-day pack</i>		<i>fluocinonide 0.05% e</i>	65
<i>febuxostat 40mg tab</i>	74	FIRDAPSE 10MG TAB	40	<i>cream</i>	
<i>febuxostat 80mg tab</i>	74	FIRMAGON 120MG INJ	42	<i>fluocinonide 0.05% gel</i>	65
<i>feirza 1.5/30 28-day pack</i>	70	FIRMAGON 80MG INJ	42	<i>fluocinonide 0.05%</i>	65
<i>feirza 1/20 28-day pack</i>	70	<i>flac 0.01% otic soln</i>	83	<i>ointment</i>	
<i>felbamate 120mg/ml oral</i>	25	<i>flavoxate 100mg tab</i>	93	<i>fluocinonide 0.05%</i>	65
<i>susp</i>		<i>flecainide acetate 100mg</i>	18	<i>topical soln</i>	
<i>felbamate 400mg tab</i>	25	<i>tab</i>		<i>fluocinonide 0.1% cream</i>	65
<i>felbamate 600mg tab</i>	25	<i>flecainide acetate 150mg</i>	18	<i>fluorometholone 0.1%</i>	83
<i>felodipine 10mg er tab</i>	59	<i>tab</i>		<i>ophth susp</i>	
<i>felodipine 2.5mg er tab</i>	59	<i>flecainide acetate 50mg</i>	18	FLUOROURACIL 2%	63
<i>felodipine 5mg er tab</i>	59	<i>tab</i>		TOPICAL SOLN	
<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</i>	33	<i>fluorouracil 5% topical</i>	63
<i>fenofibrate 160mg tab</i>	34	<i>susp</i>		<i>soln</i>	
<i>fenofibrate 200mg cap</i>	34	<i>fluconazole 150mg tab</i>	33	<i>fluoxetine 10mg cap</i>	27
<i>fenofibrate 48mg tab</i>	34	<i>fluconazole 200mg tab</i>	33	<i>fluoxetine 20mg cap</i>	27
<i>fenofibrate 54mg tab</i>	34	<i>fluconazole 200mg/100ml</i>	33	<i>fluoxetine 40mg cap</i>	27
<i>fenofibrate 67mg cap</i>	34	<i>inj</i>		<i>fluoxetine 4mg/ml oral</i>	27
<i>fenofibric acid 135mg dr</i>	34	<i>fluconazole 400mg/200ml</i>	33	<i>soln</i>	
<i>cap</i>		<i>inj</i>		<i>fluoxetine 60mg tab</i>	27
<i>fenofibric acid 45mg dr</i>	34	<i>fluconazole 40mg/ml oral</i>	33	FLUPHENAZINE	52
<i>cap</i>		<i>susp</i>		0.5MG/ML ORAL SOLN	
<i>fentanyl 100mcg/hr patch</i>	14	<i>fluconazole 50mg tab</i>	33	<i>fluphenazine 10mg tab</i>	53
<i>fentanyl 12mcg/hr patch</i>	14	<i>flucytosine 250mg cap</i>	33	<i>fluphenazine 1mg tab</i>	53
<i>fentanyl 25mcg/hr patch</i>	14	<i>flucytosine 500mg cap</i>	33	<i>fluphenazine 2.5mg tab</i>	53
<i>fentanyl 50mcg/hr patch</i>	14				

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ALPHABETICAL LISTING OF DRUGS

FLUPHENAZINE	53	<i>fluvoxamine maleate</i>	27	<i>gabapentin 100mg cap</i>	23
2.5MG/ML INJ		<i>50mg tab</i>		<i>gabapentin 300mg cap</i>	23
<i>fluphenazine 5mg tab</i>	53	<i>fondaparinux sodium</i>	22	<i>gabapentin 400mg cap</i>	23
FLUPHENAZINE	53	<i>10mg/0.8ml syringe</i>		<i>gabapentin 50mg/ml oral</i>	23
5MG/ML ORAL SOLN		<i>fondaparinux sodium</i>	22	<i>soln</i>	
<i>fluphenazine decanoate</i>	53	<i>2.5mg/0.5ml syringe</i>		<i>gabapentin 600mg tab</i>	23
<i>25mg/ml inj</i>		<i>fondaparinux sodium</i>	22	<i>(Neurontin equiv)</i>	
FLURBIPROFEN 100MG	14	<i>5mg/0.4ml syringe</i>		<i>gabapentin 800mg tab</i>	23
TAB		<i>fondaparinux sodium</i>	22	<i>galantamine 12mg tab</i>	86
FLURBIPROFEN	83	<i>7.5mg/0.6ml syringe</i>		<i>galantamine 4mg tab</i>	86
SODIUM 0.03% OPHTH		<i>fosamprenavir 700mg tab</i>	55	<i>galantamine 8mg tab</i>	86
SOLN		<i>fosfomycin 3gm powder</i>	40	<i>galantamine</i>	86
<i>fluticasone propionate</i>	65	<i>for oral soln</i>		<i>hydrobromide 16mg er</i>	
<i>0.005% ointment</i>		<i>fosinopril sodium 10mg</i>	35	<i>cap</i>	
<i>fluticasone propionate</i>	65	<i>tab</i>		<i>galantamine</i>	86
<i>0.05% cream</i>		<i>fosinopril sodium 20mg</i>	35	<i>hydrobromide 24mg er</i>	
FLUTICASONE	20	<i>tab</i>		<i>cap</i>	
PROPIONATE 110MCG		<i>fosinopril sodium 40mg</i>	35	GALANTAMINE	86
INHALER		<i>tab</i>		HYDROBROMIDE	
FLUTICASONE	20	<i>fosinopril</i>	37	4MG/ML ORAL SOLN	
PROPIONATE 220MCG		<i>sodium/hydrochlorothiazide 10-12.5mg tab</i>		<i>galantamine</i>	86
INHALER		<i>fosinopril</i>	37	<i>hydrobromide 8mg er cap</i>	
FLUTICASONE	20	<i>sodium/hydrochlorothiazide 20-12.5mg tab</i>		<i>gallifrey 5mg tab</i>	85
PROPIONATE 44MCG				GAMUNEX 1GM/10ML	84
INHALER				INJ	
<i>fluticasone propionate</i>	81	FOTIVDA 0.89MG CAP	44	GARDASIL 9 INJ	93
<i>50mcg/act nasal inhaler</i>		FOTIVDA 1.34MG CAP	44	GARDASIL 9 SYRINGE	93
<i>fluticasone</i>	20	FRUZAQLA 1MG CAP	41	GATTEX 5MG INJ	73
<i>propionate/salmeterol</i>		FRUZAQLA 5MG CAP	41	GAUZE PAD (2 X 2)	76
<i>100-50mcg/act powder</i>		FUROSCIX 80MG/10ML	67	GAVILYTE-C POWDER	76
<i>inhaler</i>		CARTRIDGE		FOR ORAL SOLN	
<i>fluticasone</i>	20	<i>furosemide 10mg/ml inj</i>	67	<i>gavilyte-g powder for</i>	76
<i>propionate/salmeterol</i>		<i>furosemide 10mg/ml oral</i>	67	<i>oral soln</i>	
<i>250-50mcg/act powder</i>		<i>soln</i>		<i>gavilyte-n powder for</i>	76
<i>inhaler</i>		<i>furosemide 20mg tab</i>	67	<i>oral soln</i>	
<i>fluticasone</i>	21	<i>furosemide 40mg tab</i>	67	GAVRETO 100MG CAP	44
<i>propionate/salmeterol</i>		<i>furosemide 80mg tab</i>	67	<i>gefitinib 250mg tab</i>	41
<i>500-50mcg/act powder</i>		FUROSEMIDE 8MG/ML	67	<i>gemfibrozil 600mg tab</i>	34
<i>inhaler</i>		ORAL SOLN		GEMTESA 75MG TAB	93
<i>fluvoxamine maleate</i>	27	<i>fyavolv 0.0025-0.5mg tab</i>	70	<i>generlac 10gm/15ml oral</i>	73
<i>100mg tab</i>		<i>fyavolv 0.005-1mg tab</i>	70	<i>soln</i>	
<i>fluvoxamine maleate</i>	27	FYCOMPA 0.5MG/ML	23	<i>gengraf 100mg cap</i>	80
<i>25mg tab</i>		ORAL SUSP		<i>gengraf 25mg cap</i>	80
				<i>gentamicin 0.1% cream</i>	63

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ALPHABETICAL LISTING OF DRUGS

<i>gentamicin 0.1% ointment</i>	63	GLUCOSE	77	GLUCOSE	78
<i>gentamicin 0.3% ophth soln</i>	82	100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ		50MG/ML/SODIUM CHLORIDE 2MG/ML INJ	
GENTAMICIN 0.8MG/ML INJ	12	<i>glucose 50mg/ml inj</i>	81	GLUCOSE	78
<i>gentamicin 1.2mg/ml inj</i>	12	<i>glucose</i>	78	50MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	
GENTAMICIN 1.6MG/ML INJ	12	<i>50mg/ml/potassium chloride</i>		<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	78
GENTAMICIN 1MG/ML INJ	12	<i>0.01meq/ml/sodium chloride 4.5mg/ml inj</i>		GLUCOSE/SODIUM CHLORIDE	78
<i>gentamicin 40mg/ml inj</i>	12	<i>glucose</i>	78	25MG/ML-4.5MG/ML INJ	
GENVOYA	55	<i>50mg/ml/potassium chloride 0.02meq/ml inj</i>		<i>glutamine 5000mg powder for oral soln</i>	75
150-150-200-10MG TAB		<i>glucose</i>	78	<i>glyburide 1.25mg tab</i>	32
GILOTRIF 20MG TAB	41	<i>50mg/ml/potassium chloride</i>		GLYBURIDE 1.5MG TAB	32
GILOTRIF 30MG TAB	41	<i>0.02meq/ml/sodium chloride 2.25mg/ml inj</i>		<i>glyburide 2.5mg tab</i>	32
GILOTRIF 40MG TAB	41	<i>glucose</i>	78	GLYBURIDE 3MG TAB	32
<i>glatiramer acetate 20mg/ml syringe</i>	87	<i>50mg/ml/potassium chloride</i>		<i>glyburide 5mg tab</i>	32
<i>glatiramer acetate 40mg/ml syringe</i>	87	<i>0.02meq/ml/sodium chloride 4.5mg/ml inj</i>		GLYBURIDE 6MG TAB	32
<i>glatopa 20mg/ml syringe</i>	87	<i>glucose</i>	78	<i>glyburide/metformin 1.25-250mg tab</i>	29
<i>glatopa 40mg/ml syringe</i>	87	<i>50mg/ml/potassium chloride</i>		<i>glyburide/metformin 2.5-500mg tab</i>	29
GLEOSTINE 100MG CAP	41	<i>0.02meq/ml/sodium chloride 9mg/ml inj</i>		<i>glyburide/metformin 5-500mg tab</i>	29
GLEOSTINE 10MG CAP	41	<i>glucose</i>	78	<i>glycopyrrolate 1mg tab</i>	92
GLEOSTINE 40MG CAP	41	<i>50mg/ml/potassium chloride</i>		<i>glycopyrrolate 2mg tab</i>	92
<i>glimepiride 1mg tab</i>	32	<i>0.02meq/ml/sodium chloride 9mg/ml inj</i>		GLYXAMBI 10-5MG TAB	29
<i>glimepiride 2mg tab</i>	32	<i>glucose</i>	78	GLYXAMBI 25-5MG TAB	29
<i>glimepiride 4mg tab</i>	32	<i>50mg/ml/potassium chloride</i>		GOMEKLI 1MG CAP	44
<i>glipizide 10mg er tab</i>	32	<i>0.03meq/ml/sodium chloride 4.5mg/ml inj</i>		GOMEKLI 1MG TAB	44
<i>glipizide 10mg tab</i>	32	<i>glucose</i>	78	FOR ORAL SUSP	
<i>glipizide 2.5mg er tab</i>	32	<i>50mg/ml/potassium chloride</i>		GOMEKLI 2MG CAP	44
<i>glipizide 5mg er tab</i>	32	<i>0.04meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>granisetron 1mg tab</i>	32
<i>glipizide/metformin 2.5-250mg tab</i>	29	<i>glucose</i>	78	<i>griseofulvin 125mg tab</i>	33
<i>glipizide/metformin 2.5-500mg tab</i>	29	<i>50mg/ml/potassium chloride</i>		<i>griseofulvin 250mg tab</i>	33
<i>glipizide/metformin 5-500mg tab</i>	29	<i>0.04meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>griseofulvin 25mg/ml oral susp</i>	33
GLUCOSE	77	<i>glucose</i>	78	<i>griseofulvin 500mg tab</i>	33
100MG/ML/SODIUM CHLORIDE 2MG/ML INJ		<i>50mg/ml/potassium chloride</i>		<i>guanfacine 1mg er tab</i>	11
		<i>0.04meq/ml/sodium chloride 9mg/ml inj</i>		<i>guanfacine 1mg tab</i>	36
				<i>guanfacine 2mg er tab</i>	11

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ALPHABETICAL LISTING OF DRUGS

<i>guanfacine 2mg tab</i>	36	<i>haloperidol decanoate</i>	50	HUMULIN N	31
<i>guanfacine 3mg er tab</i>	11	<i>100mg/ml (5ml) inj</i>		100UNIT/ML PEN INJ	
<i>guanfacine 4mg er tab</i>	11	<i>haloperidol decanoate</i>	50	HUMULIN R	31
GVOKE 0.5MG/0.1ML	30	<i>50mg/ml (1ml) inj</i>		100UNIT/ML INJ	
AUTO-INJECTOR		<i>haloperidol decanoate</i>	50	HUMULIN R	31
GVOKE 1MG/0.2ML	30	<i>50mg/ml (5ml) inj</i>		500UNIT/ML INJ	
AUTO-INJECTOR		HAVRIX 1440ELU/ML	93	HUMULIN R	31
GVOKE 1MG/0.2ML INJ	30	SYRINGE		500UNIT/ML PEN INJ	
GVOKE 1MG/0.2ML	30	HAVRIX 720ELU/0.5ML	93	<i>hydralazine 100mg tab</i>	38
SYRINGE		SYRINGE		<i>hydralazine 10mg tab</i>	38
H		<i>heather 0.35mg 28-day</i>	85	<i>hydralazine 25mg tab</i>	38
HADLIMA 40MG/0.4ML	13	<i>pack</i>		<i>hydralazine 50mg tab</i>	38
AUTO-INJECTOR		<i>heparin sodium porcine</i>	22	<i>hydrochlorothiazide</i>	67
HADLIMA 40MG/0.4ML	13	<i>10000unit/ml inj</i>		<i>12.5mg cap</i>	
SYRINGE		<i>heparin sodium porcine</i>	22	<i>hydrochlorothiazide</i>	67
HADLIMA 40MG/0.8ML	13	<i>1000unit/ml inj</i>		<i>12.5mg tab</i>	
AUTO-INJECTOR		<i>heparin sodium porcine</i>	22	<i>hydrochlorothiazide</i>	67
HADLIMA 40MG/0.8ML	13	<i>20000unit/ml inj</i>		<i>25mg tab</i>	
SYRINGE		<i>heparin sodium porcine</i>	22	<i>hydrochlorothiazide</i>	67
HAEGARDA 2000UNIT	76	<i>5000unit/ml inj</i>		<i>50mg tab</i>	
INJ		HEPLISAV-B	93	<i>hydrochlorothiazide/irbes</i>	37
HAEGARDA 3000UNIT	76	20MCG/0.5ML SYRINGE		<i>artan 12.5-150mg tab</i>	
INJ		HIBERIX 10MCG INJ	93	<i>hydrochlorothiazide/irbes</i>	37
<i>hailey 24 fe tab 28-day</i>	70	HUMALOG 100UNIT/ML	31	<i>artan 12.5-300mg tab</i>	
<i>pack</i>		CARTRIDGE		<i>hydrochlorothiazide/lisin</i>	37
<i>halobetasol propionate</i>	65	HUMALOG 100UNIT/ML	31	<i>opril 12.5-10mg tab</i>	
<i>0.05% cream</i>		KWIKPEN		<i>hydrochlorothiazide/lisin</i>	37
<i>halobetasol propionate</i>	65	HUMALOG 200UNIT/ML	31	<i>opril 12.5-20mg tab</i>	
<i>0.05% ointment</i>		KWIKPEN		<i>hydrochlorothiazide/lisin</i>	37
<i>haloette</i>	70	HUMALOG JUNIOR	31	<i>opril 25-20mg tab</i>	
<i>0.120-0.015mg/24hr</i>		100UNIT/ML PEN INJ		<i>hydrochlorothiazide/losar</i>	37
<i>vaginal system</i>		HUMALOG MIX (50/50)	31	<i>tan potassium</i>	
<i>haloperidol 0.5mg tab</i>	49	100UNIT/ML PEN INJ		<i>12.5-100mg tab</i>	
<i>haloperidol 10mg tab</i>	49	HUMALOG MIX (75/25)	31	<i>hydrochlorothiazide/losar</i>	37
<i>haloperidol 1mg tab</i>	49	100UNIT/ML INJ		<i>tan potassium 12.5-50mg</i>	
<i>haloperidol 20mg tab</i>	50	HUMALOG MIX (75/25)	31	<i>tab</i>	
<i>haloperidol 2mg tab</i>	50	100UNIT/ML KWIKPEN		<i>hydrochlorothiazide/losar</i>	37
<i>haloperidol 2mg/ml oral</i>	50	HUMULIN (70/30)	31	<i>tan potassium 25-100mg</i>	
<i>soln</i>		100UNIT/ML INJ		<i>tab</i>	
<i>haloperidol 5mg tab</i>	50	HUMULIN (70/30)	31	<i>hydrochlorothiazide/meto</i>	37
<i>haloperidol 5mg/ml inj</i>	50	100UNIT/ML PEN INJ		<i>prolol tartrate 25-100mg</i>	
<i>haloperidol decanoate</i>	50	HUMULIN N	31	<i>tab</i>	
<i>100mg/ml (1ml) inj</i>		100UNIT/ML INJ			

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: 07/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	37	<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	16	IBRANCE 100MG TAB	44
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	37	<i>hydrocodone bitartrate/ibuprofen 7.5-200mg tab</i>	16	IBRANCE 125MG CAP	44
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	37	<i>hydrocortisone 1% cream</i>	65	IBRANCE 125MG TAB	44
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	37	<i>hydrocortisone 1.67mg/ml enema</i>	16	IBRANCE 75MG CAP	44
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	37	<i>hydrocortisone 10mg tab</i>	61	IBRANCE 75MG TAB	44
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	66	<i>hydrocortisone 2.5% cream</i>	16	<i>ibu 600mg tab</i>	14
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	66	<i>hydrocortisone 2.5% ointment</i>	65	<i>ibu 800mg tab</i>	14
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	66	<i>hydrocortisone 20mg tab</i>	61	<i>ibuprofen 400mg tab</i>	14
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	66	<i>hydrocortisone 5mg tab</i>	61	<i>ibuprofen 600mg tab</i>	14
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	37	<i>HYDROCORTISONE LOTION 2.5%</i>	65	<i>ibuprofen 800mg tab</i>	14
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	38	<i>hydromorphone 2mg tab</i>	14	<i>icatibant 10mg/ml syringe</i>	76
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	38	<i>hydromorphone 4mg tab</i>	14	<i>iclevia tab 91-day pack</i>	70
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	38	<i>hydromorphone 8mg tab</i>	14	ICLUSIG 10MG TAB	44
<i>hydrocodone bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>	15	<i>hydroxychloroquine sulfate 100mg tab</i>	40	ICLUSIG 15MG TAB	44
<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	15	<i>hydroxychloroquine sulfate 200mg tab</i>	40	ICLUSIG 30MG TAB	44
<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	15	<i>hydroxychloroquine sulfate 300mg tab</i>	40	ICLUSIG 45MG TAB	44
		<i>hydroxychloroquine sulfate 400mg tab</i>	40	<i>icosapent ethyl 1000mg cap</i>	33
		<i>hydroxyurea 500mg cap</i>	47	<i>icosapent ethyl 500mg cap</i>	34
		<i>hydroxyzine 10mg tab</i>	17	IDHIFA 100MG TAB	44
		<i>hydroxyzine 25mg tab</i>	17	IDHIFA 50MG TAB	44
		<i>hydroxyzine 2mg/ml oral soln</i>	17	<i>imatinib 100mg tab</i>	44
		<i>hydroxyzine 50mg tab</i>	17	<i>imatinib 400mg tab</i>	44
		<i>HYDROXYZINE PAMOATE 100MG CAP</i>	17	IMBRUVICA 140MG CAP	44
		<i>hydroxyzine pamoate 25mg cap</i>	17	IMBRUVICA 420MG TAB	44
		<i>hydroxyzine pamoate 50mg cap</i>	17	IMBRUVICA 70MG CAP	44
				IMBRUVICA 70MG/ML ORAL SUSP	44
				<i>imipramine 10mg tab</i>	29
				<i>imipramine 25mg tab</i>	29
				<i>imipramine 50mg tab</i>	29
				<i>imiquimod 5% cream</i>	66
				IMKELDI 80MG/ML	44
				ORAL SOLN	
				IMOVAX 2.5UNIT/ML INJ	93
				<i>incassia 0.35mg tab</i>	85
				<i>28-day pack</i>	
				INCRELEX 40MG/4ML	69
				INJ	
				INCRUSE ELLIPTA	19
				62.5MCG/INH POWDER	
				INHALER	
				<i>indapamide 1.25mg tab</i>	67
		<i>ibandronate 150mg tab</i>	67		
		IBRANCE 100MG CAP	44		

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ALPHABETICAL LISTING OF DRUGS

<i>indapamide 2.5mg tab</i>	67	INVEGA HAFYERA	50	ISENTRESS 25MG	55
<i>indomethacin 25mg cap</i>	14	1560MG/5ML SYRINGE		CHEW TAB	
<i>indomethacin 50mg cap</i>	14	INVEGA SUSTENNA	50	ISENTRESS 400MG TAB	55
<i>indomethacin 75mg er cap</i>	14	117MG/0.75ML SYRINGE		ISENTRESS 600MG TAB	55
INFANRIX SYRINGE	91	INVEGA SUSTENNA	50	<i>isibloom tab 28-day pack</i>	70
INGREZZA 40MG CAP	86	156MG/ML SYRINGE		<i>isoniazid 100mg tab</i>	40
INGREZZA 40MG SPRINKLE CAP	86	INVEGA SUSTENNA	51	<i>isoniazid 10mg/ml oral soln</i>	40
INGREZZA 60MG CAP	86	234MG/1.5ML SYRINGE		<i>isoniazid 300mg tab</i>	40
INGREZZA 60MG SPRINKLE CAP	86	INVEGA SUSTENNA	51	<i>isosorbide dinitrate 10mg tab</i>	17
INGREZZA 80MG CAP	87	39MG/0.25ML SYRINGE		<i>isosorbide dinitrate 20mg tab</i>	17
INGREZZA 80MG SPRINKLE CAP	87	INVEGA SUSTENNA	51	<i>isosorbide dinitrate 30mg tab</i>	17
INGREZZA CAP	87	78MG/0.5ML SYRINGE		<i>isosorbide dinitrate 5mg tab</i>	17
THERAPY PACK (28)		INVEGA TRINZA	51	ISOSORBIDE	17
INLYTA 1MG TAB	41	273MG/0.875ML SYRINGE		MONONITRATE 10MG	
INLYTA 5MG TAB	41	INVEGA TRINZA	51	TAB	
INQOVI 35-100MG TAB	43	410MG/1.315ML SYRINGE		<i>isosorbide mononitrate 120mg er tab</i>	17
PACK (5)		INVEGA TRINZA	51	ISOSORBIDE	17
INREBIC 100MG CAP	44	546MG/1.75ML SYRINGE		MONONITRATE 20MG	
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	31	INVEGA TRINZA	51	TAB	
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	31	819MG/2.625ML SYRINGE		<i>isosorbide mononitrate 30mg er tab</i>	17
INSULIN LISPRO 100UNIT/ML INJ	31	IPOL INJ	94	<i>isosorbide mononitrate 60mg er tab</i>	17
INSULIN PEN NEEDLE	77	<i>ipratropium bromide 0.02% inh soln</i>	19	<i>isotretinoin 10mg cap</i>	62
INSULIN SYRINGE	77	<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	81	<i>isotretinoin 20mg cap</i>	62
INSULIN SYRINGE (DISP) U-100 0.3ML	77	<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	81	<i>isotretinoin 30mg cap</i>	62
INSULIN SYRINGE (DISP) U-100 1/2ML	77	<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	21	<i>isotretinoin 40mg cap</i>	62
INSULIN SYRINGE (DISP) U-100 1ML	77	<i>irbesartan 150mg tab</i>	36	<i>isradipine 2.5mg cap</i>	59
INTELENCE 25MG TAB	55	<i>irbesartan 300mg tab</i>	36	<i>isradipine 5mg cap</i>	59
<i>introvale tab 91-day pack</i>	70	<i>irbesartan 75mg tab</i>	36	ITOVEBI 3MG TAB	44
INVEGA HAFYERA	50	ISENTRESS 100MG	55	ITOVEBI 9MG TAB	44
1092MG/3.5ML SYRINGE		CHEW TAB		<i>itraconazole 100mg cap</i>	33
		ISENTRESS 100MG	55	<i>ivabradine 5mg tab</i>	60
		GRANULES FOR ORAL SUSP		<i>ivabradine 7.5mg tab</i>	60
				<i>ivermectin 3mg tab</i>	17
				IWILFIN 192MG TAB	48
				IXCHIQ INJ	94

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ALPHABETICAL LISTING OF DRUGS

IXIARO 0.012MG/ML SYRINGE	94	JENTADUETO XR 2.5-1000MG TAB	29	KERENDIA 20MG TAB	69
J		JENTADUETO XR 5-1000MG TAB	29	KESIMPTA 20MG/0.4ML	87
JAKAFI 10MG TAB	44	<i>jinteli 0.005-1mg tab</i>	70	PEN INJ	
JAKAFI 15MG TAB	44	JUBBONTI 60MG/ML	67	<i>ketoconazole 2% cream</i>	63
JAKAFI 20MG TAB	44	SYRINGE		<i>ketoconazole 2%</i>	63
JAKAFI 25MG TAB	44	<i>juleber tab 28-day pack</i>	70	<i>shampoo</i>	
JAKAFI 5MG TAB	44	JULUCA 50-25MG TAB	55	<i>ketoconazole 200mg tab</i>	33
<i>jantoven 10mg tab</i>	21	<i>junel 1.5/30 tab 21-day</i>	70	<i>ketorolac tromethamine</i>	83
<i>jantoven 1mg tab</i>	21	<i>pack</i>		<i>0.4% ophth soln</i>	
<i>jantoven 2.5mg tab</i>	21	<i>junel 1/20 tab 21-day</i>	70	<i>ketorolac tromethamine</i>	83
<i>jantoven 2mg tab</i>	21	<i>pack</i>		<i>0.5% ophth soln</i>	
<i>jantoven 3mg tab</i>	21	<i>junel fe 24 1/20 28-day</i>	70	<i>ketorolac tromethamine</i>	14
<i>jantoven 4mg tab</i>	21	<i>pack</i>		<i>10mg tab</i>	
<i>jantoven 5mg tab</i>	21	<i>junel fe tab 1.5/30 28-day</i>	71	KEVZARA	13
<i>jantoven 6mg tab</i>	21	<i>pack</i>		150MG/1.14ML	
<i>jantoven 7.5mg tab</i>	21	<i>junel fe tab 1/20 28-day</i>	71	AUTO-INJECTOR	
JANUMET 50-1000MG TAB	29	<i>pack</i>		KEVZARA	13
JANUMET 50-500MG TAB	29	JYLAMVO 2MG/ML	41	150MG/1.14ML	
JANUMET XR	29	ORAL SOLN		SYRINGE	
100-1000MG TAB		JYNNEOS 0.5ML INJ	94	KEVZARA	13
JANUMET XR	29	K		200MG/1.14ML	
50-1000MG TAB		KALYDECO 13.4MG	88	AUTO-INJECTOR	
JANUMET XR 50-500MG TAB	29	ORAL GRANULES		KEVZARA	13
JANUVIA 100MG TAB	30	KALYDECO 150MG TAB	88	200MG/1.14ML	
JANUVIA 25MG TAB	30	KALYDECO 25MG ORAL	88	SYRINGE	
JANUVIA 50MG TAB	30	GRANULES		KINRIX SYRINGE	91
JARDIANCE 10MG TAB	31	KALYDECO 5.8MG	88	<i>kionex 15gm/60ml susp</i>	80
JARDIANCE 25MG TAB	31	ORAL GRANULES		KISQALI TAB 200MG	44
<i>jasmiel tab 28-day pack</i>	70	KALYDECO 50MG ORAL	88	DAILY DOSE PACK (21)	
<i>javygtor 100mg powder</i>	68	GRANULES		KISQALI TAB 400MG	44
<i>for oral soln</i>		KALYDECO 75MG ORAL	88	DAILY DOSE PACK (42)	
<i>javygtor 100mg tab</i>	68	GRANULES		KISQALI TAB 600MG	44
<i>javygtor 500mg powder</i>	68	<i>kariva tab 28-day pack</i>	71	DAILY DOSE PACK (63)	
<i>for oral soln</i>		KCL/D5W/LR INJ 0.15%	78	KISQALI/FEMARA 400	43
JAYPIRCA 100MG TAB	44	<i>kcl/nacl 20meq-0.45% inj</i>	78	CO-PACK (70)	
JAYPIRCA 50MG TAB	44	<i>kcl/nacl 20meq-0.9% inj</i>	78	KISQALI/FEMARA 600	43
JENTADUETO	29	<i>kcl/nacl 40meq-9% inj</i>	78	CO-PACK (91)	
2.5-1000MG TAB		<i>kelnor 1mg-35mcg tab</i>	71	<i>klor-con 10meq er tab</i>	78
JENTADUETO	29	<i>28-day pack</i>		<i>klor-con 10meq micro er</i>	78
2.5-500MG TAB		<i>kelnor tab 1/50 28-day</i>	71	<i>tab</i>	
		<i>pack</i>		<i>klor-con 15meq micro er</i>	78
		KERENDIA 10MG TAB	69	<i>tab</i>	
				<i>klor-con 20meq micro er</i>	78
				<i>tab</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>klor-con 20meq powder for oral soln</i>	78	<i>larin 1.5/30 tab 21-day pack</i>	71	<i>levalbuterol 0.31mg/3ml neb soln</i>	21
<i>klor-con 8meq er tab</i>	78	<i>larin 1/20 tab 21-day pack</i>	71	<i>levalbuterol 0.63mg/3ml inh soln</i>	21
KLOXXADO 8MG/0.1ML NASAL SPRAY	32	<i>larin fe tab 1.5/30 28-day pack</i>	71	<i>levalbuterol 1.25mg/3ml neb soln</i>	21
KOSELUGO 10MG CAP	44	<i>larin fe tab 1/20 28-day pack</i>	71	LEVALBUTEROL	21
KOSELUGO 25MG CAP	44	<i>latanoprost 0.005% ophth soln</i>	83	45MCG/ACT INHALER	
<i>kourzeq 0.1% oral paste</i>	62	LAZCLUZE 240MG TAB	41	<i>levetiracetam 1000mg tab</i>	24
KRAZATI 200MG TAB	45	LAZCLUZE 80MG TAB	41	<i>levetiracetam 100mg/ml oral soln</i>	24
<i>kurvelo tab 28-day pack</i>	71	<i>leflunomide 10mg tab</i>	12	<i>levetiracetam 250mg tab</i>	24
L		<i>leflunomide 20mg tab</i>	12	<i>levetiracetam 500mg er tab</i>	24
<i>labetalol 100mg tab</i>	57	<i>lenalidomide 10mg cap</i>	79	<i>levetiracetam 500mg tab</i>	24
<i>labetalol 200mg tab</i>	57	<i>lenalidomide 15mg cap</i>	79	<i>levetiracetam 750mg er tab</i>	24
<i>labetalol 300mg tab</i>	57	<i>lenalidomide 2.5mg cap</i>	79	<i>levetiracetam 750mg tab</i>	24
<i>lacosamide 100mg tab</i>	23	<i>lenalidomide 20mg cap</i>	79	LEVOBUNOLOL 0.5%	82
<i>lacosamide 10mg/ml oral soln</i>	23	<i>lenalidomide 25mg cap</i>	79	OPHTH SOLN	
<i>lacosamide 150mg tab</i>	24	<i>lenalidomide 5mg cap</i>	79	<i>levocarnitine 100mg/ml oral soln</i>	68
<i>lacosamide 200mg tab</i>	24	LENVIMA 10MG DAILY DOSE PACK (30)	41	<i>levocarnitine 330mg tab</i>	68
<i>lacosamide 50mg tab</i>	24	LENVIMA 12MG DAILY DOSE PACK (90)	41	<i>levocetirizine 5mg tab</i>	88
<i>lactulose 667mg/ml oral soln</i>	76	LENVIMA 14MG DAILY DOSE PACK (60)	41	<i>levofloxacin 250mg tab</i>	73
<i>lamivudine 100mg tab</i>	56	LENVIMA 18MG DAILY DOSE PACK (90)	41	<i>levofloxacin 25mg/ml oral soln</i>	73
<i>lamivudine 10mg/ml oral soln</i>	55	LENVIMA 20MG DAILY DOSE PACK (60)	41	<i>levofloxacin 500mg tab</i>	73
<i>lamivudine 150mg tab</i>	55	LENVIMA 24MG DAILY DOSE PACK (90)	41	<i>levofloxacin 500mg/100ml inj</i>	73
<i>lamivudine 300mg tab</i>	55	LENVIMA 4MG DAILY DOSE PACK (30)	41	<i>levofloxacin 750mg tab</i>	73
<i>lamivudine/zidovudine 150-300mg tab</i>	55	LENVIMA 8MG DAILY DOSE PACK (60)	41	<i>levofloxacin 750mg/150ml inj</i>	71
<i>lamotrigine 100mg tab</i>	24	<i>lessina tab 28-day pack</i>	71	<i>levonest tab 28-day pack</i>	71
<i>lamotrigine 150mg tab</i>	24	<i>letrozole 2.5mg tab</i>	42	<i>levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack</i>	71
<i>lamotrigine 200mg tab</i>	24	<i>leucovorin 10mg tab</i>	48	<i>levora 0.15/30 tab 28-day pack</i>	71
<i>lamotrigine 25mg chew tab</i>	24	<i>leucovorin 15mg tab</i>	48	<i>levothyroxine sodium 100mcg tab</i>	90
<i>lamotrigine 25mg tab</i>	24	<i>leucovorin 25mg tab</i>	48	<i>levothyroxine sodium 112mcg tab</i>	90
<i>lamotrigine 5mg chew tab</i>	24	<i>leucovorin 5mg tab</i>	48		
<i>lansoprazole 15mg dr cap</i>	92	LEUKERAN 2MG TAB	41		
<i>lansoprazole 30mg dr cap</i>	92				
LANTUS 100UNIT/ML INJ	31				
LANTUS 100UNIT/ML PEN INJ	31				
<i>lapatinib 250mg tab</i>	45				

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ALPHABETICAL LISTING OF DRUGS

<i>levothyroxine sodium</i>	90	<i>linezolid 100mg/5ml oral</i>	39	<i>lithium carbonate 300mg</i>	49
<i>125mcg tab</i>		<i>susp</i>		<i>tab</i>	
<i>levothyroxine sodium</i>	90	<i>linezolid 600mg tab</i>	39	<i>lithium carbonate 450mg</i>	49
<i>137mcg tab</i>		<i>linezolid 600mg/300ml</i>	39	<i>er tab</i>	
<i>levothyroxine sodium</i>	90	<i>inj</i>		LITHIUM CARBONATE	49
<i>150mcg tab</i>		LINZESS 145MCG CAP	76	600MG CAP	
<i>levothyroxine sodium</i>	90	LINZESS 290MCG CAP	76	<i>lithium citrate 60mg/ml</i>	49
<i>175mcg tab</i>		LINZESS 72MCG CAP	76	<i>oral soln</i>	
<i>levothyroxine sodium</i>	90	<i>liothyronine sodium</i>	91	LIVTENCITY 200MG TAE	56
<i>200mcg tab</i>		<i>25mcg tab</i>		<i>loestrin fe tab 1/20</i>	71
<i>levothyroxine sodium</i>	90	<i>liothyronine sodium</i>	91	<i>28-day pack</i>	
<i>25mcg tab</i>		<i>50mcg tab</i>		LOKELMA 10GM	80
<i>levothyroxine sodium</i>	90	<i>liothyronine sodium 5mcg</i>	91	POWDER FOR ORAL	
<i>300mcg tab</i>		<i>tab</i>		SUSP	
<i>levothyroxine sodium</i>	90	<i>liraglutide 18mg/3ml pen</i>	30	LOKELMA 5GM	80
<i>50mcg tab</i>		<i>inj</i>		POWDER FOR ORAL	
<i>levothyroxine sodium</i>	90	<i>lisdexamfetamine</i>	11	SUSP	
<i>75mcg tab</i>		<i>dimesylate 10mg cap</i>		LONSURF 6.14-15MG	43
<i>levothyroxine sodium</i>	90	<i>lisdexamfetamine</i>	11	TAB	
<i>88mcg tab</i>		<i>dimesylate 20mg cap</i>		LONSURF 8.19-20MG	43
<i>levoxyl 100mcg tab</i>	90	<i>lisdexamfetamine</i>	11	TAB	
<i>levoxyl 112mcg tab</i>	90	<i>dimesylate 30mg cap</i>		<i>loperamide 2mg cap</i>	32
<i>levoxyl 125mcg tab</i>	90	<i>lisdexamfetamine</i>	11	<i>lopinavir/ritonavir</i>	55
<i>levoxyl 137mcg tab</i>	90	<i>dimesylate 40mg cap</i>		<i>100-25mg tab</i>	
<i>levoxyl 150mcg tab</i>	90	<i>lisdexamfetamine</i>	11	<i>lopinavir/ritonavir</i>	55
<i>levoxyl 175mcg tab</i>	90	<i>dimesylate 50mg cap</i>		<i>200-50mg tab</i>	
<i>levoxyl 200mcg tab</i>	91	<i>lisdexamfetamine</i>	11	<i>lopinavir/ritonavir</i>	55
<i>levoxyl 25mcg tab</i>	91	<i>dimesylate 60mg cap</i>		<i>80-20mg/ml oral soln</i>	
<i>levoxyl 50mcg tab</i>	91	<i>lisdexamfetamine</i>	11	<i>lorazepam 0.5mg tab</i>	18
<i>levoxyl 75mcg tab</i>	91	<i>dimesylate 70mg cap</i>		<i>lorazepam 1mg tab</i>	18
<i>levoxyl 88mcg tab</i>	91	<i>lisinopril 10mg tab</i>	35	<i>lorazepam 2mg tab</i>	18
<i>lidocaine 4% mucous</i>	65	<i>lisinopril 2.5mg tab</i>	35	<i>lorazepam 2mg/ml oral</i>	18
<i>membrane topical soln</i>		<i>lisinopril 20mg tab</i>	35	<i>soln</i>	
<i>lidocaine 5% ointment</i>	65	<i>lisinopril 30mg tab</i>	35	LORBRENA 100MG TAB	45
<i>lidocaine 5% patch</i>	65	<i>lisinopril 40mg tab</i>	35	LORBRENA 25MG TAB	45
<i>lidocaine viscous 2%</i>	62	<i>lisinopril 5mg tab</i>	35	<i>loryna tab 28-day pack</i>	71
<i>mucous membrane topical</i>		LITFULO 50MG CAP	80	<i>losartan potassium</i>	36
<i>soln</i>		<i>lithium carbonate 150mg</i>	49	<i>100mg tab</i>	
<i>lidocaine/prilocaine</i>	65	<i>cap</i>		<i>losartan potassium 25mg</i>	36
<i>2.5-2.5% cream</i>		<i>lithium carbonate 300mg</i>	49	<i>tab</i>	
<i>lidocan 5% patch</i>	65	<i>cap</i>		<i>losartan potassium 50mg</i>	36
LILETTA 20.1MCG/DAY	85	<i>lithium carbonate 300mg</i>	49	<i>tab</i>	
INTRAUTERINE SYSTEM		<i>er tab</i>		<i>loteprednol etabonate</i>	83
				<i>0.5% ophth gel</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: 07/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>loteprednol etabonate</i>	83	<i>lyleq 0.35mg tab 28-day pack</i>	85	MAYZENT TAB STARTER	87
<i>0.5% ophth susp</i>		<i>lyllana 0.025mg/24hr</i>	73	PACK (7)	
<i>lovastatin 10mg tab</i>	34	<i>twice weekly patch</i>		<i>meclizine 12.5mg tab</i>	32
<i>lovastatin 20mg tab</i>	34	<i>lyllana 0.0375mg/24hr</i>	73	<i>meclizine 25mg tab</i>	32
<i>lovastatin 40mg tab</i>	34	<i>twice weekly patch</i>		<i>medroxyprogesterone acetate 10mg tab</i>	85
<i>low-ogestrel tab 28-day pack</i>	71	<i>lyllana 0.05mg/24hr twice weekly patch</i>	73	<i>medroxyprogesterone acetate 150mg/ml inj</i>	85
<i>loxapine 10mg cap</i>	52	<i>lyllana 0.075mg/24hr</i>	73	<i>medroxyprogesterone acetate 150mg/ml syringe</i>	85
<i>loxapine 25mg cap</i>	52	<i>twice weekly patch</i>		<i>medroxyprogesterone acetate 2.5mg tab</i>	85
<i>loxapine 50mg cap</i>	52	<i>lyllana 0.1mg/24hr twice weekly patch</i>	73	<i>medroxyprogesterone acetate 5mg tab</i>	85
<i>loxapine 5mg cap</i>	52	LYNPARZA 100MG TAB	45	<i>mefloquine 250mg tab</i>	40
<i>lubiprostone 24mcg cap</i>	76	LYNPARZA 150MG TAB	45	MEGESTROL ACETATE	85
<i>lubiprostone 8mcg cap</i>	76	LYSODREN 500MG TAB	42	125MG/ML SUSP	
LUMAKRAS 120MG TAB	45	LYTGOBI TAB 12MG	45	<i>megestrol acetate 20mg tab</i>	42
LUMAKRAS 240MG TAB	45	DAILEY DOSE PACK (21)		<i>megestrol acetate 40mg tab</i>	42
LUMAKRAS 320MG TAB	45	LYTGOBI TAB 16MG	45	<i>megestrol acetate 40mg/ml oral susp</i>	42
LUMIGAN 0.01% OPTH SOLN	83	DAILEY DOSE PACK (28)		MEKINIST 0.05MG/ML ORAL SOLN	45
LUMRYZ 28-DAY STARTER PACK (28)	89	LYTGOBI TAB 20MG	45	MEKINIST 0.5MG TAB	45
LUMRYZ 4.5GM	89	DAILEY DOSE PACK (35)		MEKINIST 2MG TAB	45
GRANULES FOR ORAL SUSP		<i>lyza 0.35mg tab 28-day pack</i>	85	MEKTOVI 15MG TAB	45
LUMRYZ 6GM	89	M		<i>meloxicam 15mg tab</i>	14
GRANULES FOR ORAL SUSP		<i>magnesium sulfate 500mg/ml inj</i>	78	<i>meloxicam 7.5mg tab</i>	14
LUMRYZ 7.5GM	89	<i>magnesium sulfate 500mg/ml syringe</i>	78	<i>memantine 10mg tab</i>	86
GRANULES FOR ORAL SUSP		<i>malathion 0.5% lotion</i>	66	<i>memantine 14mg er cap</i>	86
LUMRYZ 9GM	89	<i>maraviroc 150mg tab</i>	55	<i>memantine 21mg er cap</i>	86
GRANULES FOR ORAL SUSP		<i>maraviroc 300mg tab</i>	55	<i>memantine 28mg er cap</i>	86
LUPKYNIS 7.9MG CAP	80	<i>marlissa tab 28-day pack</i>	71	<i>memantine 2mg/ml oral soln</i>	86
LUPRON 11.25MG	42	MARPLAN 10MG TAB	26	<i>memantine 5mg tab</i>	86
SYRINGE (3 MONTH)		MATULANE 50MG CAP	47	<i>memantine 7mg er cap</i>	86
LUPRON 3.75MG	42	MAVYRET 100-40MG TAB	56	MENACTRA INJ	93
SYRINGE (1 MONTH)		MAVYRET 50-20MG	56	MENQUADFI INJ	93
<i>lurasidone 120mg tab</i>	50	ORAL PELLET		MENVEO INJ	93
<i>lurasidone 20mg tab</i>	50	MAYZENT 0.25MG TAB	87	<i>mercaptopurine 20mg/ml susp</i>	41
<i>lurasidone 40mg tab</i>	50	MAYZENT 1MG TAB	87	<i>mercaptopurine 50mg tab</i>	41
<i>lurasidone 60mg tab</i>	50	MAYZENT 2MG TAB	87		
<i>lurasidone 80mg tab</i>	50	MAYZENT TAB STARTER	87		
<i>lutera tab 28-day pack</i>	71	PACK (12)			

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: 07/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>meropenem 1gm inj</i>	39	<i>methylphenidate 10mg</i>	12	<i>metoprolol succinate</i>	57
<i>meropenem 500mg inj</i>	39	<i>tab</i>		<i>100mg er tab</i>	
<i>mesalamine 1200mg dr</i>	74	<i>methylphenidate 18mg er</i>	12	<i>metoprolol succinate</i>	57
<i>tab</i>		<i>osmotic tab</i>		<i>200mg er tab</i>	
<i>mesalamine 1gm rectal</i>	74	METHYLPHENIDATE	12	<i>metoprolol succinate</i>	57
<i>supp</i>		18MG ER TAB		<i>25mg er tab</i>	
<i>mesalamine 375mg er cap</i>	74	<i>methylphenidate 1mg/ml</i>	12	<i>metoprolol succinate</i>	57
<i>mesalamine 400mg dr cap</i>	74	<i>oral soln</i>		<i>50mg er tab</i>	
<i>mesalamine 66.7mg/ml</i>	74	<i>methylphenidate 20mg er</i>	12	<i>metoprolol tartrate</i>	57
<i>enema</i>		<i>tab</i>		<i>100mg tab</i>	
<i>mesna 400mg tab</i>	48	<i>methylphenidate 20mg</i>	12	<i>metoprolol tartrate 25mg</i>	57
<i>metaxalone 800mg tab</i>	81	<i>tab</i>		<i>tab</i>	
<i>metformin 1000mg tab</i>	30	<i>methylphenidate 27mg er</i>	12	<i>metoprolol tartrate</i>	57
<i>metformin 500mg er tab</i>	30	<i>osmotic tab</i>		<i>37.5mg tab</i>	
<i>metformin 500mg tab</i>	30	<i>methylphenidate 27mg er</i>	12	<i>metoprolol tartrate 50mg</i>	57
<i>metformin 750mg er tab</i>	30	<i>tab</i>		<i>tab</i>	
<i>metformin 850mg tab</i>	30	<i>methylphenidate 2mg/ml</i>	12	<i>metoprolol tartrate 75mg</i>	57
<i>methadone 10mg tab</i>	15	<i>oral soln</i>		<i>tab</i>	
METHADONE 1MG/ML	15	<i>methylphenidate 36mg er</i>	12	<i>metronidazole 0.75%</i>	66
ORAL SOLN		<i>osmotic tab</i>		<i>cream</i>	
METHADONE 2MG/ML	15	<i>methylphenidate 36mg er</i>	12	<i>metronidazole 0.75% gel</i>	66
ORAL SOLN		<i>tab</i>		<i>metronidazole 0.75%</i>	94
<i>methadone 5mg tab</i>	15	<i>methylphenidate 54mg er</i>	12	<i>vaginal gel</i>	
<i>methazolamide 25mg tab</i>	66	<i>osmotic tab</i>		<i>metronidazole 1% gel</i>	66
<i>methazolamide 50mg tab</i>	66	<i>methylphenidate 54mg er</i>	12	<i>metronidazole 250mg tab</i>	39
<i>methenamine hippurate</i>	40	<i>tab</i>		<i>metronidazole 500mg tab</i>	39
<i>1gm tab</i>		<i>methylphenidate 5mg tab</i>	12	<i>metronidazole 5mg/ml inj</i>	39
<i>methimazole 10mg tab</i>	90	<i>methylprednisolone 16mg</i>	61	<i>metyrosine 250mg cap</i>	38
<i>methimazole 5mg tab</i>	90	<i>tab</i>		<i>mexiletine 150mg cap</i>	18
<i>methocarbamol 500mg</i>	81	<i>methylprednisolone 32mg</i>	61	<i>mexiletine 200mg cap</i>	18
<i>tab</i>		<i>tab</i>		<i>mexiletine 250mg cap</i>	18
<i>methocarbamol 750mg</i>	81	<i>methylprednisolone 4mg</i>	61	<i>mibelas 24 fe chewable</i>	71
<i>tab</i>		<i>tab</i>		<i>tab 28-day pack</i>	
<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
METHOXSALLEN 10MG	64	<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>metolazone 5mg tab</i>	67		

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: 07/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>microgestin fe tab 1/20 28-day pack</i>	71	<i>morphine sulfate 100mg er tab</i>	15	MRESVIA 50MCG/0.5ML SYRINGE	94
<i>midodrine 10mg tab</i>	59	<i>morphine sulfate 15mg er tab</i>	15	MULTAQ 400MG TAB	19
<i>midodrine 2.5mg tab</i>	59	<i>morphine sulfate 15mg tab</i>	15	<i>mupirocin 2% ointment</i>	63
<i>midodrine 5mg tab</i>	59	<i>morphine sulfate 200mg er tab</i>	15	<i>mycophenolate mofetil 200mg/ml oral susp</i>	80
<i>mifepristone 300mg tab</i>	30	<i>morphine sulfate 20mg/ml oral soln</i>	15	<i>mycophenolate mofetil 250mg cap</i>	80
<i>mili tab 28-day pack</i>	71	<i>morphine sulfate 2mg/ml oral soln</i>	15	<i>mycophenolate mofetil 500mg tab</i>	80
<i>mimvey 28-day pack</i>	71	<i>morphine sulfate 30mg er tab</i>	15	<i>mycophenolic acid 180mg dr tab</i>	80
<i>minocycline 100mg cap</i>	90	<i>morphine sulfate 30mg tab</i>	15	N	
<i>minocycline 50mg cap</i>	90	<i>morphine sulfate 4mg/ml oral soln</i>	15	<i>nabumetone 500mg tab</i>	14
<i>minocycline 75mg cap</i>	90	<i>morphine sulfate 60mg er tab</i>	15	<i>nabumetone 750mg tab</i>	14
<i>minoxidil 10mg tab</i>	38	MOUNJARO	30	<i>nadolol 20mg tab</i>	57
<i>minoxidil 2.5mg tab</i>	38	10MG/0.5ML		<i>nadolol 40mg tab</i>	57
<i>mirabegron 25mg er tab</i>	93	AUTO-INJECTOR		<i>nadolol 80mg tab</i>	57
<i>mirabegron 50mg er tab</i>	93	MOUNJARO	30	<i>nafacillin 100mg/ml inj</i>	85
<i>mirtazapine 15mg odt</i>	26	12.5MG/0.5ML		<i>nafacillin 1gm inj</i>	85
<i>mirtazapine 15mg tab</i>	26	AUTO-INJECTOR		<i>nafacillin 2gm inj</i>	85
<i>mirtazapine 30mg odt</i>	26	MOUNJARO	31	NALOXONE 0.4MG/ML CARTRIDGE	32
<i>mirtazapine 30mg tab</i>	26	15MG/0.5ML		<i>naloxone 0.4mg/ml inj</i>	32
<i>mirtazapine 45mg odt</i>	26	AUTO-INJECTOR		NALOXONE 0.4MG/ML SYRINGE	32
<i>mirtazapine 45mg tab</i>	26	MOUNJARO	31	<i>naloxone 1mg/ml syringe</i>	32
<i>mirtazapine 7.5mg tab</i>	26	2.5MG/0.5ML		<i>naltrexone 50mg tab</i>	32
<i>misoprostol 100mcg tab</i>	92	AUTO-INJECTOR		<i>naproxen 250mg tab</i>	14
<i>misoprostol 200mcg tab</i>	92	MOUNJARO 5MG/0.5ML	31	<i>naproxen 375mg dr tab</i>	14
M-M-R II INJ	94	AUTO-INJECTOR		<i>naproxen 375mg tab</i>	14
<i>modafinil 100mg tab</i>	12	MOUNJARO	31	<i>naproxen 500mg tab</i>	14
<i>modafinil 200mg tab</i>	12	7.5MG/0.5ML		<i>naproxen sodium 275mg tab</i>	14
<i>moexipril 15mg tab</i>	35	AUTO-INJECTOR		<i>naproxen sodium 550mg tab</i>	14
<i>moexipril 7.5mg tab</i>	35	MOVANTIK 12.5MG TAB	76	<i>naratriptan 1mg tab</i>	77
MOLINDONE 10MG TAB	50	MOVANTIK 25MG TAB	76	<i>naratriptan 2.5mg tab</i>	77
MOLINDONE 25MG TAB	50	<i>moxifloxacin 0.5% ophth soln</i>	82	NATACYN 5% OPHTH SUSP	82
MOLINDONE 5MG TAB	50	MOXIFLOXACIN	73	<i>nateglinide 120mg tab</i>	30
<i>mometasone furoate 0.1% cream</i>	65	1.6MG/ML INJ		<i>nateglinide 60mg tab</i>	30
<i>mometasone furoate 0.1% lotion</i>	65	<i>moxifloxacin 400mg tab</i>	73		
<i>mometasone furoate 0.1% ointment</i>	65				
<i>montelukast 10mg tab</i>	19				
<i>montelukast 4mg chew tab</i>	19				
<i>montelukast 5mg chew tab</i>	19				

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ALPHABETICAL LISTING OF DRUGS

NAYZILAM 5MG/0.1ML	22	neo-polycin	82	nitrofurantoin	40
NASAL SPRAY		5mg-400unit-10000unit		macrocrystals 100mg cap	
nebivolol 10mg tab	57	ophth ointment		nitrofurantoin	40
nebivolol 2.5mg tab	57	neo-polycin hc ophth	83	macrocrystals 50mg cap	
nebivolol 20mg tab	57	ointment		nitroglycerin 0.1mg/hr	17
nebivolol 5mg tab	57	NERLYNX 40MG TAB	45	patch	
necon 0.5/35 tab 28-day	71	NEVIRAPINE 10MG/ML	55	nitroglycerin 0.2mg/hr	17
pack		ORAL SUSP		patch	
NEFAZODONE 100MG	27	nevirapine 200mg tab	55	nitroglycerin 0.3mg sl tab	17
TAB		nevirapine 400mg er tab	55	nitroglycerin 0.4% rectal	17
NEFAZODONE 150MG	27	NEXLETOL 180MG TAB	34	ointment	
TAB		NEXLIZET 180-10MG	34	nitroglycerin 0.4mg sl tab	17
NEFAZODONE 200MG	27	TAB		nitroglycerin 0.4mg/hr	17
TAB		NEXPLANON 68MG	85	patch	
NEFAZODONE 250MG	27	IMPLANT		nitroglycerin 0.6mg sl tab	17
TAB		niacin 1000mg er tab	34	nitroglycerin 0.6mg/hr	17
NEFAZODONE 50MG	27	niacin 500mg er tab	34	patch	
TAB		niacin 750mg er tab	34	NIVESTYM	75
NEMLUVIO 30MG	79	NICOTROL 10MG/ML	87	300MCG/0.5ML	
AUTO-INJECTOR		NASAL INHALER		SYRINGE	
neomycin sulfate 500mg	12	nifedipine 30mg er tab	59	NIVESTYM 300MCG/ML	75
tab		nifedipine 30mg osmotic	59	INJ	
neomycin/bacitracin/poly	82	er tab		NIVESTYM	75
myxin		nifedipine 60mg er tab	59	480MCG/0.8ML	
5mg-400unit-10000unit		nifedipine 60mg osmotic	59	SYRINGE	
ophth ointment		er tab		NIVESTYM	75
NEOMYCIN/POLYMYXI	82	nifedipine 90mg er tab	59	480MCG/1.6ML INJ	
N B/GRAMICIDIN		nifedipine 90mg osmotic	59	nora-be 0.35mg tab	85
1.75-10000-0.025MG-UN		er tab		28-day pack	
T-MG/ML OPTH SOLN		nikki tab 28-day pack	71	NORDITROPIN	68
neomycin/polymyxin/bacit	83	nilotinib 150mg cap	45	10MG/1.5ML PEN INJ	
racin/hydrocortisone		nilotinib 200mg cap	45	NORDITROPIN	68
ophth 1% ointment		nilotinib 50mg cap	45	15MG/1.5ML PEN INJ	
neomycin/polymyxin/dexa	83	nilutamide 150mg tab	42	NORDITROPIN	68
methasone 0.1% ophth		nimodipine 30mg cap	59	30MG/3ML PEN INJ	
susp		NINLARO 2.3MG CAP	45	NORDITROPIN	68
neomycin/polymyxin/hydr	84	NINLARO 3MG CAP	45	5MG/1.5ML PEN INJ	
ocortisone		NINLARO 4MG CAP	45	norelgestromin/ethinyl	71
3.5-10000unit-1% otic		nitazoxanide 500mg tab	39	estradiol 150-35	
soln		NITRO-BID 2%	17	mcg/24hr patch	
neomycin/polymyxin/hydr	84	OINTMENT		norethindrone 0.35mg	85
ocortisone		nitrofurantoin	40	28-day pack	
3.5-10000unit-1% otic		macro/nitrofurantoin		norethindrone acetate	85
susp		mono 100mg cap		5mg tab	

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ALPHABETICAL LISTING OF DRUGS

<i>nortrel 0.5/35 tab 28-day pack</i>	71	<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	63	OJJAARA 100MG TAB	45
<i>nortrel 1/35 tab 21-day pack</i>	71	<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	63	OJJAARA 150MG TAB	45
<i>nortrel 1/35 tab 28-day pack</i>	71	<i>nystop 100000unit/gm topical powder</i>	63	OJJAARA 200MG TAB	45
<i>nortrel 7/7/7 tab 28-day pack</i>	71	NYVEPRIA 6MG/0.6ML SYRINGE	75	<i>olanzapine 10mg inj</i>	52
<i>nortriptyline 10mg cap</i>	29	O		<i>olanzapine 10mg odt</i>	52
<i>nortriptyline 25mg cap</i>	29	<i>ocella tab 28-day pack</i>	71	<i>olanzapine 10mg tab</i>	52
<i>nortriptyline 2mg/ml oral soln</i>	29	OCTAGAM 1GM/20ML INJ	84	<i>olanzapine 15mg odt</i>	52
<i>nortriptyline 50mg cap</i>	29	OCTAGAM 2GM/20ML INJ	84	<i>olanzapine 15mg tab</i>	52
<i>nortriptyline 75mg cap</i>	29	<i>octreotide 0.05mg/ml inj</i>	68	<i>olanzapine 2.5mg tab</i>	52
NORVIR 100MG ORAL POWDER	55	<i>octreotide 0.1mg/ml inj</i>	68	<i>olanzapine 20mg odt</i>	52
NUBEQA 300MG TAB	42	<i>octreotide 0.2mg/ml inj</i>	68	<i>olanzapine 20mg tab</i>	52
NUCALA 100MG INJ	19	<i>octreotide 0.5mg/ml inj</i>	68	<i>olanzapine 5mg odt</i>	52
NUCALA 100MG/ML AUTO-INJECTOR	19	<i>octreotide 1mg/ml inj</i>	68	<i>olanzapine 5mg tab</i>	52
NUCALA 100MG/ML SYRINGE	19	ODEFSEY 200-25-25MG TAB	55	<i>olanzapine 7.5mg tab</i>	52
NUCALA 40MG/0.4ML SYRINGE	19	ODOMZO 200MG CAP	42	<i>olmesartan medoxomil 20mg tab</i>	36
NUEDEXTA 20-10MG CAP	87	OFEV 100MG CAP	88	<i>olmesartan medoxomil 40mg tab</i>	36
NUPLAZID 10MG TAB	50	OFEV 150MG CAP	88	<i>olmesartan medoxomil 5mg tab</i>	36
NUPLAZID 34MG CAP	50	<i>ofloxacin 0.3% ophth soln</i>	82	<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	81
<i>nyamyc 100000unit/gm topical powder</i>	63	<i>ofloxacin 0.3% otic soln</i>	83	OLUMIANT 1MG TAB	12
<i>nylia 1/35 tab 28-day pack</i>	71	OGSIVEO 100MG TAB 7-DAY PACK (14)	45	OLUMIANT 2MG TAB	12
<i>nylia 7/7/7 tab 28-day pack</i>	71	OGSIVEO 150MG TAB 7-DAY PACK (14)	45	OLUMIANT 4MG TAB	12
<i>nystatin 100000 unit/gm ointment</i>	63	OGSIVEO 50MG TAB	45	<i>omega-3 acid ethyl esters (usp) 1gm cap</i>	34
<i>nystatin 100000unit/gm topical powder</i>	63	OJEMDA 100MG TAB	45	<i>omeprazole 10mg dr cap</i>	92
<i>nystatin 100000unit/ml cream</i>	63	OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	45	<i>omeprazole 20mg dr cap</i>	92
<i>nystatin 100000unit/ml oral susp</i>	62	OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	45	<i>omeprazole 40mg dr cap</i>	92
<i>nystatin 500000unit tab</i>	33	OJEMDA 25MG/ML POWDER FOR ORAL SUSP	45	OMNITROPE	68
				10MG/1.5ML CARTRIDGE	68
				OMNITROPE 5.8MG INJ	68
				OMNITROPE 5MG/1.5ML CARTRIDGE	68
				<i>ondansetron 0.8mg/ml oral soln</i>	32
				<i>ondansetron 4mg odt</i>	32
				<i>ondansetron 4mg tab</i>	32
				<i>ondansetron 8mg odt</i>	32
				<i>ondansetron 8mg tab</i>	32
				ONUREG 200MG TAB	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: 07/01/2025

ALPHABETICAL LISTING OF DRUGS

ONUREG 300MG TAB	41	<i>oxcarbazepine 60mg/ml</i>	24	OZEMPIC 2MG/3ML	31
OPSUMIT 10MG TAB	89	<i>oral susp</i>		PEN INJ	
OPVEE 2.7MG/0.1ML	32	<i>oxybutynin chloride 10mg</i>	92	OZEMPIC 4MG/3ML	31
NASAL SPRAY		<i>er tab</i>		PEN INJ	
ORENCIA 125MG/ML	14	<i>oxybutynin chloride 15mg</i>	92	P	
AUTO-INJECTOR		<i>er tab</i>		<i>pacerone 100mg tab</i>	19
ORENCIA 125MG/ML	14	<i>oxybutynin chloride</i>	92	<i>pacerone 200mg tab</i>	19
SYRINGE		<i>1mg/ml oral soln</i>		<i>pacerone 400mg tab</i>	19
ORENCIA 50MG/0.4ML	14	<i>oxybutynin chloride 5mg</i>	92	<i>paliperidone 1.5mg er tab</i>	51
SYRINGE		<i>er tab</i>		<i>paliperidone 3mg er tab</i>	51
ORENCIA 87.5MG/0.7ML	14	<i>oxybutynin chloride 5mg</i>	92	<i>paliperidone 6mg er tab</i>	51
SYRINGE		<i>tab</i>		<i>paliperidone 9mg er tab</i>	51
ORGOVYX 120MG TAB	42	<i>oxycodone 10mg tab</i>	15	PANRETIN 0.1% GEL	63
ORKAMBI 125-100MG	88	<i>oxycodone 15mg tab</i>	15	<i>pantoprazole 20mg dr tab</i>	92
ORAL GRANULES		<i>oxycodone 1mg/ml oral</i>	15	<i>pantoprazole 40mg dr tab</i>	92
ORKAMBI 125-100MG	88	<i>soln</i>		<i>paricalcitol 1mcg cap</i>	68
TAB		<i>oxycodone 20mg tab</i>	15	<i>paricalcitol 2mcg cap</i>	68
ORKAMBI 125-200MG	88	<i>oxycodone 30mg tab</i>	15	<i>paricalcitol 4mcg cap</i>	68
TAB		<i>oxycodone 5mg tab</i>	15	<i>paroxetine 10mg tab</i>	27
ORKAMBI 188-150MG	88	<i>oxycodone/acetaminophe</i>	16	PAROXETINE 10MG/ML	27
ORAL GRANULES		<i>n 10-325mg tab</i>		SUSP	
ORKAMBI 94-75MG	88	<i>oxycodone/acetaminophe</i>	16	<i>paroxetine 12.5mg er tab</i>	27
ORAL GRANULES		<i>n 2.5-325mg tab</i>		<i>paroxetine 20mg tab</i>	27
<i>orphenadrine citrate</i>	81	<i>oxycodone/acetaminophe</i>	16	<i>paroxetine 25mg er tab</i>	27
<i>100mg er tab</i>		<i>n 5-325mg tab</i>		<i>paroxetine 30mg tab</i>	27
ORSERDU 345MG TAB	42	<i>oxycodone/acetaminophe</i>	16	<i>paroxetine 37.5mg er tab</i>	27
ORSERDU 86MG TAB	42	<i>n 7.5-325mg tab</i>		<i>paroxetine 40mg tab</i>	27
<i>oseltamivir 30mg cap</i>	56	OXYCONTIN 10MG ER	15	PAXLOVID	57
<i>oseltamivir 45mg cap</i>	56	TAB		150MG/100MG TAB	
<i>oseltamivir 6mg/ml oral</i>	56	OXYCONTIN 15MG ER	15	PACK (20)	
<i>susp</i>		TAB		PAXLOVID	57
<i>oseltamivir 75mg cap</i>	56	OXYCONTIN 20MG ER	15	150MG/100MG TAB	
OTEZLA 20MG TAB	64	TAB		PACK (30)	
OTEZLA 30MG TAB	64	OXYCONTIN 30MG ER	15	PAXLOVID	57
OTEZLA TAB 28-DAY	64	TAB		300MG/100MG AND	
STARTER PACK (55)		OXYCONTIN 40MG ER	15	150MG/100MG TAB	
<i>oxacillin 100mg/ml inj</i>	85	TAB		DOSE PACK (11)	
<i>oxacillin 1gm inj</i>	85	OXYCONTIN 60MG ER	15	<i>pazopanib 200mg tab</i>	45
<i>oxacillin 2gm inj</i>	85	TAB		PEDIARIX SYRINGE	91
<i>oxaprozin 600mg tab</i>	14	OXYCONTIN 80MG ER	15	PEDVAXHIB	93
<i>oxcarbazepine 150mg tab</i>	24	TAB		7.5MCG/0.5ML INJ	
<i>oxcarbazepine 300mg tab</i>	24	OZEMPIC 2.68MG/ML	31	<i>peg 3350 powder for oral</i>	76
<i>oxcarbazepine 600mg tab</i>	24	PEN INJ		<i>soln (100gm Moviprep</i>	
				<i>equiv)</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: 07/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>peg 3350/electrolyte</i>	76	PERINDOPRIL	35	PIMOZIDE 2MG TAB	87
<i>powder for oral soln</i>		ERBUMINE 2MG TAB		<i>pimtrex tab 28-day pack</i>	71
<i>peg 3350/kcl/sodium</i>	76	<i>perindopril erbumine</i>	35	<i>pindolol 10mg tab</i>	57
<i>bicarbonate/sodium</i>		<i>4mg tab</i>		<i>pindolol 5mg tab</i>	57
<i>chloride powder for oral</i>		PERINDOPRIL	35	<i>pioglitazone 15mg tab</i>	30
<i>soln</i>		ERBUMINE 8MG TAB		<i>pioglitazone 30mg tab</i>	30
PEGASYS	56	<i>periogard 0.12%</i>	62	<i>pioglitazone 45mg tab</i>	30
180MCG/0.5ML		<i>mouthwash</i>		<i>piperacillin/tazobactam</i>	85
SYRINGE		<i>permethrin 5% cream</i>	66	<i>2000-250mg inj</i>	
PEGASYS 180MCG/ML	56	<i>perphenazine 16mg tab</i>	53	<i>piperacillin/tazobactam</i>	85
INJ		<i>perphenazine 2mg tab</i>	53	<i>3000-375mg inj</i>	
PEMAZYRE 13.5MG TAB	45	<i>perphenazine 4mg tab</i>	53	<i>piperacillin/tazobactam</i>	85
PEMAZYRE 4.5MG TAB	45	<i>perphenazine 8mg tab</i>	53	<i>36-4.5gm inj</i>	
PEMAZYRE 9MG TAB	45	PERSERIS 120MG	51	<i>piperacillin/tazobactam</i>	85
PENBRAYA INJ	93	SYRINGE		<i>4000-500mg inj</i>	
<i>penicillamine 250mg tab</i>	79	PERSERIS 90MG	51	PIQRAY TAB 200MG	45
<i>penicillin g potassium</i>	84	SYRINGE		DAILY DOSE PACK (28)	
<i>1000000unit/ml inj</i>		PHENELZINE 15MG TAB	27	PIQRAY TAB 250MG	45
PENICILLIN G SODIUM	84	<i>phenobarbital 100mg tab</i>	24	DAILY DOSE PACK (56)	
100000UNIT/ML INJ		<i>phenobarbital 15mg tab</i>	24	PIQRAY TAB 300MG	45
<i>penicillin v potassium</i>	84	<i>phenobarbital 16.2mg tab</i>	24	DAILY DOSE PACK (56)	
<i>250mg tab</i>		<i>phenobarbital 30mg tab</i>	24	<i>pirfenidone 267mg cap</i>	88
PENICILLIN V	84	<i>phenobarbital 32.4mg tab</i>	24	<i>pirfenidone 267mg tab</i>	88
POTASSIUM 25MG/ML		<i>phenobarbital 4mg/ml</i>	24	<i>pirfenidone 801mg tab</i>	88
ORAL SOLN		<i>oral soln</i>		<i>piroxicam 10mg cap</i>	14
<i>penicillin v potassium</i>	84	<i>phenobarbital 60mg tab</i>	24	<i>piroxicam 20mg cap</i>	14
<i>500mg tab</i>		<i>phenobarbital 64.8mg tab</i>	24	PLASMA-LYTE A INJ	78
PENICILLIN V	84	<i>phenobarbital 97.2mg tab</i>	24	PLEGRIDY	87
POTASSIUM 50MG/ML		<i>phenytoin 25mg/ml oral</i>	24	125MCG/0.5ML	
ORAL SOLN		<i>susp</i>		AUTO-INJECTOR	
PENTACEL	91	<i>phenytoin 50mg chew tab</i>	24	PLEGRIDY	87
96-30-68UNIT/ML INJ		<i>phenytoin sodium 100mg</i>	24	125MCG/0.5ML	
<i>pentamidine isethionate</i>	39	<i>er cap</i>		SYRINGE	
<i>300mg inj</i>		PIFELTRO 100MG TAB	55	<i>plenamine 15% inj</i>	81
<i>pentamidine isethionate</i>	39	<i>pilocarpine 1% ophth</i>	83	PODOFILOX 0.5%	66
<i>300mg/6ml inh soln</i>		<i>soln</i>		TOPICAL SOLN	
<i>pentoxifylline 400mg er</i>	60	<i>pilocarpine 2% ophth</i>	83	<i>polycin 0.5-10unit/mg</i>	82
<i>tab</i>		<i>soln</i>		<i>ophth ointment</i>	
<i>perampanel 10mg tab</i>	24	<i>pilocarpine 4% ophth</i>	83	<i>polymyxin b/trimethoprim</i>	82
<i>perampanel 12mg tab</i>	24	<i>soln</i>		<i>10000 unit/ml-0.1%</i>	
<i>perampanel 2mg tab</i>	24	<i>pilocarpine 5mg tab</i>	62	<i>ophth soln</i>	
<i>perampanel 4mg tab</i>	24	<i>pilocarpine 7.5mg tab</i>	62	POMALYST 1MG CAP	47
<i>perampanel 6mg tab</i>	24	<i>pimecrolimus 1% cream</i>	65	POMALYST 2MG CAP	47
<i>perampanel 8mg tab</i>	24	PIMOZIDE 1MG TAB	87	POMALYST 3MG CAP	47

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ALPHABETICAL LISTING OF DRUGS

POMALYST 4MG CAP	47	potassium citrate 15meq	74	pregabalin 200mg cap	24
portia tab 28-day pack	71	er tab		pregabalin 20mg/ml oral	24
posaconazole 100mg dr	33	potassium citrate 5meq er	74	soln	
tab		tab		pregabalin 225mg cap	24
posaconazole 40mg/ml	33	pramipexole 0.125mg tab	49	pregabalin 25mg cap	24
oral susp		pramipexole 0.25mg tab	49	pregabalin 300mg cap	24
potassium chloride	78	pramipexole 0.5mg tab	49	pregabalin 50mg cap	25
1.33meq/ml oral soln		pramipexole 0.75mg tab	49	pregabalin 75mg cap	25
potassium chloride	78	pramipexole 1.5mg tab	49	PREMARIN 0.3MG TAB	73
10meq er cap		pramipexole 1mg tab	49	PREMARIN 0.45MG TAB	73
potassium chloride	78	prasugrel 10mg tab	75	PREMARIN 0.625MG	73
10meq er tab		prasugrel 5mg tab	75	TAB	
potassium chloride	78	pravastatin sodium 10mg	34	PREMARIN	94
10meq micro er tab		tab		0.625MG/GM VAGINAL	
POTASSIUM CHLORIDE	78	pravastatin sodium 20mg	34	CREAM	
10MEQ/100ML INJ		tab		PREMARIN 0.9MG TAB	73
POTASSIUM CHLORIDE	78	pravastatin sodium 40mg	34	PREMARIN 1.25MG TAB	73
15MEQ ER TAB		tab		PREMPHASE 28-DAY	71
potassium chloride	78	pravastatin sodium 80mg	34	PACK	
15meq micro er tab		tab		PREMPRO 0.3/1.5MG	71
potassium chloride	79	praziquantel 600mg tab	17	28-DAY PACK	
2.67meq/ml oral soln		prazosin 1mg cap	36	PREMPRO 0.45/1.5MG	71
potassium chloride	79	prazosin 2mg cap	36	28-DAY PACK	
20meq er tab		prazosin 5mg cap	36	PREMPRO 0.625/2.5MG	71
potassium chloride	79	PREDNISOLONE 1%	83	28-DAY PACK	
20meq micro er tab		OPHTH SOLN		PREMPRO 0.625/5MG	71
potassium chloride	79	prednisolone 1mg/ml oral	61	28-DAY PACK	
20meq powder for oral		soln		prevalite 4gm powder for	34
soln		prednisolone 3mg/ml oral	61	oral susp	
POTASSIUM CHLORIDE	79	soln		PREVYMIS 120MG	56
20MEQ/100ML INJ		prednisolone 5mg/ml oral	61	ORAL PELLET	
potassium chloride	79	soln		PREVYMIS 240MG TAB	56
2meq/ml (20ml) inj		prednisolone acetate 1%	83	PREVYMIS 480MG TAB	56
potassium chloride	79	ophth susp		PREZCOBIX 150-800MG	55
2meq/ml inj		prednisone 10mg tab	61	TAB	
POTASSIUM CHLORIDE	79	prednisone 1mg tab	61	PREZISTA 100MG/ML	55
40MEQ/100ML INJ		PREDNISONE 1MG/ML	61	ORAL SUSP	
potassium chloride 8meq	79	ORAL SOLN		PREZISTA 150MG TAB	55
er cap		prednisone 2.5mg tab	61	PREZISTA 75MG TAB	55
potassium chloride 8meq	79	prednisone 20mg tab	61	PRIFTIN 150MG TAB	40
er tab		prednisone 50mg tab	61	PRIMAQUINE	40
potassium citrate 10meq	74	prednisone 5mg tab	61	PHOSPHATE 26.3MG	
er tab		pregabalin 100mg cap	24	TAB	
		pregabalin 150mg cap	24	primidone 250mg tab	25

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ALPHABETICAL LISTING OF DRUGS

<i>primidone 50mg tab</i>	25	PROPRANOLOL	58	QUINIDINE SULFATE	18
PRIORIX INJ	94	4MG/ML ORAL SOLN		300MG TAB	
PRIVIGEN 20GM/200ML	84	<i>propranolol 60mg er cap</i>	58	<i>quinine sulfate 324mg</i>	40
INJ		<i>propranolol 60mg tab</i>	58	<i>cap</i>	
<i>probenecid 500mg tab</i>	74	<i>propranolol 80mg er cap</i>	58	QVAR 40MCG	20
<i>prochlorperazine 10mg</i>	53	<i>propranolol 80mg tab</i>	58	REDIHALER	
<i>tab</i>		PROPRANOLOL	58	QVAR 80MCG	20
<i>prochlorperazine 25mg</i>	53	8MG/ML ORAL SOLN		REDIHALER	
<i>rectal supp</i>		<i>propylthiouracil 50mg</i>	90	R	
<i>prochlorperazine 5mg tab</i>	53	<i>tab</i>		RABAVERT 2.5UNIT/ML	94
<i>procto-med 2.5% cream</i>	17	PROQUAD INJ	94	INJ	
<i>proctosol 2.5% cream</i>	17	PROSOL 20% INJ	81	<i>rabeprazole sodium 20mg</i>	92
<i>proctozone hc 2.5% cream</i>	17	<i>protriptyline 10mg tab</i>	29	<i>dr tab</i>	
<i>progesterone 100mg cap</i>	85	<i>protriptyline 5mg tab</i>	29	RADICAVA 105MG/5ML	81
<i>progesterone 200mg cap</i>	85	PULMOZYME 1MG/ML	88	ORAL SUSP	
PROGRAF 0.2MG	80	INH SOLN		RALDESY 10MG/ML	27
GRANULES FOR ORAL		PURIXAN	41	ORAL SOLN	
SUSP		2000MG/100ML ORAL		<i>raloxifene 60mg tab</i>	67
PROGRAF 1MG	80	SUSP		<i>ramelteon 8mg tab</i>	75
GRANULES FOR ORAL		<i>pyrazinamide 500mg tab</i>	40	<i>ramipril 1.25mg cap</i>	35
SUSP		<i>pyridostigmine bromide</i>	40	<i>ramipril 10mg cap</i>	35
PROLASTIN 1000MG INJ	87	<i>60mg tab</i>		<i>ramipril 2.5mg cap</i>	35
<i>promethazine 1.25mg/ml</i>	88	<i>pyrimethamine 25mg tab</i>	40	<i>ramipril 5mg cap</i>	35
<i>oral soln</i>		Q		<i>ranolazine 1000mg er tab</i>	60
<i>promethazine 12.5mg tab</i>	88	QINLOCK 50MG TAB	45	<i>ranolazine 500mg er tab</i>	60
<i>promethazine 25mg tab</i>	88	QUADRACEL INJ	91	<i>rasagiline 0.5mg tab</i>	49
<i>promethazine 50mg tab</i>	88	QUADRACEL SYRINGE	91	<i>rasagiline 1mg tab</i>	49
<i>propafenone 150mg tab</i>	18	<i>quetiapine 100mg tab</i>	52	<i>reclipsen tab 28-day pack</i>	72
<i>propafenone 225mg er</i>	18	<i>quetiapine 150mg er tab</i>	52	RECOMBIVAX	94
<i>cap</i>		<i>quetiapine 200mg er tab</i>	52	10MCG/ML INJ	
<i>propafenone 225mg tab</i>	18	<i>quetiapine 200mg tab</i>	52	RECOMBIVAX	94
<i>propafenone 300mg tab</i>	18	<i>quetiapine 25mg tab</i>	52	10MCG/ML SYRINGE	
<i>propafenone 325mg er</i>	18	<i>quetiapine 300mg er tab</i>	52	RECOMBIVAX	94
<i>cap</i>		<i>quetiapine 300mg tab</i>	52	40MCG/ML INJ	
<i>propafenone 425mg er</i>	18	<i>quetiapine 400mg er tab</i>	52	RECOMBIVAX	94
<i>cap</i>		<i>quetiapine 400mg tab</i>	52	5MCG/0.5ML INJ	
<i>propranolol 10mg tab</i>	58	<i>quetiapine 50mg er tab</i>	52	RECOMBIVAX	94
<i>propranolol 120mg er</i>	58	<i>quetiapine 50mg tab</i>	52	5MCG/0.5ML SYRINGE	
<i>cap</i>		<i>quinapril 10mg tab</i>	35	REGRANEX 0.01% GEL	66
<i>propranolol 160mg er</i>	58	<i>quinapril 20mg tab</i>	35	RELENZA 5MG/BLISTER	56
<i>cap</i>		<i>quinapril 40mg tab</i>	35	POWDER INHALER	
<i>propranolol 20mg tab</i>	58	<i>quinapril 5mg tab</i>	35	<i>repaglinide 0.5mg tab</i>	30
<i>propranolol 40mg tab</i>	58	QUINIDINE SULFATE	18	<i>repaglinide 1mg tab</i>	30
		200MG TAB		<i>repaglinide 2mg tab</i>	30

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ALPHABETICAL LISTING OF DRUGS

REPATHA 140MG/ML AUTO-INJECTOR	34	RIBAVIRIN 200MG CAP	56	<i>risperidone microspheres</i>	51
REPATHA 140MG/ML SYRINGE	34	RIBAVIRIN 200MG TAB	56	<i>12.5mg inj</i>	
REPATHA 420MG/3.5ML CARTRIDGE	34	<i>rifabutin 150mg cap</i>	40	<i>risperidone microspheres</i>	51
RETACRIT	75	<i>rifampin 150mg cap</i>	40	<i>25mg inj</i>	
10000UNIT/ML INJ		<i>rifampin 300mg cap</i>	40	<i>ritonavir 100mg tab</i>	55
RETACRIT	75	<i>rifampin 600mg inj</i>	40	<i>rivaroxaban 2.5mg tab</i>	21
20000UNIT/2ML INJ		<i>riluzole 50mg tab</i>	81	<i>rivastigmine 1.5mg cap</i>	86
RETACRIT	75	RIMANTADINE 100MG TAB	56	<i>rivastigmine 13.3mg/24hr patch</i>	86
20000UNIT/ML INJ		RINVOQ 15MG ER TAB	12	<i>rivastigmine 3mg cap</i>	86
RETACRIT	75	RINVOQ 1MG/ML ORAL SOLN	12	<i>rivastigmine 4.5mg cap</i>	86
20000UNIT/ML INJ		RINVOQ 30MG ER TAB	12	<i>rivastigmine 4.6mg/24hr patch</i>	86
RETACRIT 2000UNIT/ML INJ	75	RINVOQ 45MG ER TAB	12	<i>rivastigmine 6mg cap</i>	86
RETACRIT 3000UNIT/ML INJ	75	<i>risedronate sodium</i>	67	<i>rivastigmine 9.5mg/24hr patch</i>	86
RETACRIT	75	<i>150mg tab</i>		<i>rizatriptan 10mg odt</i>	77
40000UNIT/ML INJ		<i>risedronate sodium 30mg tab</i>	67	<i>rizatriptan 10mg tab</i>	77
RETACRIT 4000UNIT/ML INJ	75	<i>risedronate sodium 35mg tab</i>	67	<i>rizatriptan 5mg odt</i>	77
RETEVMO 120MG TAB	45	<i>risedronate sodium 35mg tab pack (12)</i>	67	<i>rizatriptan 5mg tab</i>	77
RETEVMO 160MG TAB	45	<i>risedronate sodium 35mg tab pack (4)</i>	67	ROCKLATAN	82
RETEVMO 40MG CAP	46	<i>risedronate sodium 5mg tab</i>	67	0.02-0.005% OPHTH SOLN	
RETEVMO 40MG TAB	46			<i>roflumilast 0.5mg tab</i>	89
RETEVMO 80MG CAP	46			<i>roflumilast 250mcg tab</i>	89
RETEVMO 80MG TAB	46			ROMVIMZA 14MG CAP	46
REVUFORJ 110MG TAB	47			ROMVIMZA 20MG CAP	46
REVUFORJ 160MG TAB	47	RISPERIDONE 0.25MG ODT	51	ROMVIMZA 30MG CAP	46
REVUFORJ 25MG TAB	47	<i>risperidone 0.25mg tab</i>	51	<i>ropinirole 0.25mg tab</i>	49
REXULTI 0.25MG TAB	53	<i>risperidone 0.5mg odt</i>	51	<i>ropinirole 0.5mg tab</i>	49
REXULTI 0.5MG TAB	53	<i>risperidone 0.5mg tab</i>	51	<i>ropinirole 1mg tab</i>	49
REXULTI 1MG TAB	54	<i>risperidone 1mg odt</i>	51	<i>ropinirole 2mg tab</i>	49
REXULTI 2MG TAB	54	<i>risperidone 1mg tab</i>	51	<i>ropinirole 3mg tab</i>	49
REXULTI 3MG TAB	54	<i>risperidone 1mg/ml oral soln</i>	51	<i>ropinirole 4mg tab</i>	49
REXULTI 4MG TAB	54	<i>risperidone 2mg odt</i>	51	<i>ropinirole 5mg tab</i>	49
REYATAZ 50MG ORAL POWDER	55	<i>risperidone 2mg tab</i>	51	<i>rosuvastatin calcium</i>	34
REZDIFFRA 100MG TAB	73	<i>risperidone 37.5mg inj</i>	51	<i>10mg tab</i>	
REZDIFFRA 60MG TAB	73	<i>risperidone 3mg odt</i>	51	<i>rosuvastatin calcium</i>	34
REZDIFFRA 80MG TAB	73	<i>risperidone 3mg tab</i>	51	<i>20mg tab</i>	
REZLIDHIA 150MG CAP	46	<i>risperidone 4mg odt</i>	51	<i>rosuvastatin calcium</i>	34
REZUROCK 200MG TAB	79	<i>risperidone 4mg tab</i>	51	<i>40mg tab</i>	
RHOPRESSA 0.02% OPHTH SOLN	82	<i>risperidone 50mg inj</i>	51	<i>rosuvastatin calcium 5mg tab</i>	34

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ALPHABETICAL LISTING OF DRUGS

ROTARIX	94	SECUADO 7.6MG/24HR	52	<i>sirolimus 1mg tab</i>	80
667000UNIT/ML ORAL		PATCH		<i>sirolimus 1mg/ml oral</i>	80
SUSP		<i>selegiline 5mg cap</i>	49	<i>soln</i>	
ROTATEQ ORAL SUSP	94	<i>selegiline 5mg tab</i>	49	<i>sirolimus 2mg tab</i>	80
<i>roweepra 500mg tab</i>	25	<i>selenium sulfide 2.5%</i>	66	SIRTURO 100MG TAB	40
ROZLYTREK 100MG	46	<i>shampoo</i>		SIRTURO 20MG TAB	40
CAP		SELZENTRY 20MG/ML	55	SKYRIZI 150MG/ML	64
ROZLYTREK 200MG	46	ORAL SOLN		AUTO-INJECTOR	
CAP		<i>sertraline 100mg tab</i>	27	SKYRIZI 150MG/ML	64
ROZLYTREK 50MG	46	<i>sertraline 20mg/ml oral</i>	27	SYRINGE	
ORAL PELLET		<i>soln</i>		SKYRIZI 180MG/1.2ML	74
RUBRACA 200MG TAB	46	<i>sertraline 25mg tab</i>	27	CARTRIDGE	
RUBRACA 250MG TAB	46	<i>sertraline 50mg tab</i>	27	SKYRIZI 360MG/2.4ML	74
RUBRACA 300MG TAB	46	<i>setlakin tab 91-day pack</i>	72	CARTRIDGE	
<i>rufinamide 200mg tab</i>	25	<i>sharobel 0.35mg tab</i>	85	<i>sodium chloride 0.45%</i>	79
<i>rufinamide 400mg tab</i>	25	<i>28-day pack</i>		<i>inj</i>	
<i>rufinamide 40mg/ml oral</i>	25	SHINGRIX	94	<i>sodium chloride 0.9% inj</i>	79
<i>susp</i>		50MCG/0.5ML INJ		<i>sodium chloride 0.9%</i>	74
RUKOBIA 600MG ER	55	SIGNIFOR 0.3MG/ML INJ	68	<i>irrigation soln</i>	
TAB		SIGNIFOR 0.6MG/ML INJ	68	<i>sodium chloride 3% inj</i>	79
RYBELSUS 14MG TAB	31	SIGNIFOR 0.9MG/ML INJ	68	<i>sodium chloride 50mg/ml</i>	79
RYBELSUS 3MG TAB	31	<i>sildenafil 20mg tab</i>	89	<i>inj</i>	
RYBELSUS 7MG TAB	31	<i>silodosin 4mg cap</i>	74	SODIUM OXYBATE	89
RYDAPT 25MG CAP	46	<i>silodosin 8mg cap</i>	74	500MG/ML ORAL SOLN	
S		<i>silver sulfadiazine 1%</i>	66	<i>sodium phenylbutyrate</i>	68
<i>sajazir 30mg/3ml syringe</i>	76	<i>cream</i>		<i>3gm/tsp oral powder</i>	
<i>salmon calcitonin</i>	67	SIMBRINZA 0.2-1%	82	<i>sodium polystyrene</i>	80
<i>200unit/act nasal spray</i>		OPHTH SUSP		<i>sulfonate 15000mg</i>	
SANTYL 250UNIT/GM	66	SIMLANDI 20MG/0.2ML	13	<i>powder for oral susp</i>	
OINTMENT		SYRINGE		<i>sodium sulfate/potassium</i>	76
<i>sapropterin 100mg</i>	68	SIMLANDI 40MG/0.4ML	13	<i>sulfate/magnesium sulfate</i>	
<i>powder for oral soln</i>		AUTO-INJECTOR		<i>17.5-3.13-1.6 gm/177ml</i>	
<i>sapropterin 100mg tab</i>	68	SIMLANDI 40MG/0.4ML	13	<i>oral soln prep kit</i>	
<i>sapropterin 500mg</i>	68	SYRINGE		<i>sodium sulfate/potassium</i>	76
<i>powder for oral soln</i>		SIMLANDI 80MG/0.8ML	13	<i>sulfate/magnesium sulfate</i>	
SCSEMBLIX 100MG TAB	46	AUTO-INJECTOR		<i>17.5-3.13-1.6 gm/177ml</i>	
SCSEMBLIX 20MG TAB	46	SIMLANDI 80MG/0.8ML	13	<i>oral soln prep kit (480ml)</i>	
SCSEMBLIX 40MG TAB	46	SYRINGE		SOFOBUIR/VELPATAS	56
<i>scopolamine 1mg/72hr</i>	32	<i>simvastatin 10mg tab</i>	35	VIR 400-100MG TAB	
<i>patch</i>		<i>simvastatin 20mg tab</i>	35	SOGROYA 10MG/1.5ML	68
SECUADO 3.8MG/24HR	52	<i>simvastatin 40mg tab</i>	35	PEN INJ	
PATCH		<i>simvastatin 5mg tab</i>	35	SOGROYA 15MG/1.5ML	68
SECUADO 5.7MG/24HR	52	<i>simvastatin 80mg tab</i>	35	PEN INJ	
PATCH		<i>sirolimus 0.5mg tab</i>	80		

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ALPHABETICAL LISTING OF DRUGS

SOGROYA 5MG/1.5ML	68	STIOLTO	21	<i>sumatriptan 25mg tab</i>	77
PEN INJ		2.5-2.5MCG/ACT		<i>sumatriptan 4mg/0.5ml</i>	77
<i>solifenacin succinate</i>	93	INHALER		<i>cartridge</i>	
<i>10mg tab</i>		STIVARGA 40MG TAB	46	<i>sumatriptan 50mg tab</i>	77
<i>solifenacin succinate 5mg</i>	93	STREPTOMYCIN 1GM	12	<i>sumatriptan 5mg/act</i>	77
<i>tab</i>		INJ		<i>nasal spray</i>	
SOLTAMOX 10MG/5ML	42	STRIBILD	55	<i>sumatriptan 6mg/0.5ml</i>	77
ORAL SOLN		150-150-200-300MG		<i>auto-injector</i>	
SOMAVERT 10MG INJ	69	TAB		<i>sumatriptan 6mg/0.5ml</i>	77
SOMAVERT 15MG INJ	69	STRIVERDI 2.5MCG/ACT	21	<i>cartridge</i>	
SOMAVERT 20MG INJ	69	INHALER		<i>sumatriptan 6mg/0.5ml</i>	77
SOMAVERT 25MG INJ	69	<i>subvenite 100mg tab</i>	25	<i>inj</i>	
SOMAVERT 30MG INJ	69	<i>subvenite 150mg tab</i>	25	<i>sunitinib 12.5mg cap</i>	46
<i>sorafenib 200mg tab</i>	46	<i>subvenite 200mg tab</i>	25	<i>sunitinib 25mg cap</i>	46
<i>sotalol 120mg tab</i>	58	<i>subvenite 25mg tab</i>	25	<i>sunitinib 37.5mg cap</i>	46
<i>sotalol 160mg tab</i>	58	SUCRAID 8500UNIT/ML	66	<i>sunitinib 50mg cap</i>	46
<i>sotalol 240mg tab</i>	58	ORAL SOLN		SUNLENCA 300MG TAB	55
<i>sotalol 80mg tab</i>	58	<i>sucralfate 1000mg tab</i>	92	THERAPY PACK (4)	
<i>sotalol af 120mg tab</i>	58	<i>sucralfate 100mg/ml oral</i>	92	SUNLENCA 300MG TAB	55
<i>sotalol af 160mg tab</i>	58	<i>susp</i>		THERAPY PACK (5)	
<i>sotalol af 80mg tab</i>	58	SUFLAVE SOLN PACK	76	SUNOSI 150MG TAB	89
<i>spironolactone 100mg tab</i>	67	<i>sulfacetamide sodium</i>	62	SUNOSI 75MG TAB	89
<i>spironolactone 25mg tab</i>	67	<i>10% lotion</i>		<i>syeda tab 28-day pack</i>	72
<i>spironolactone 50mg tab</i>	67	<i>sulfacetamide sodium</i>	82	SYMDEKO TAB 4-WEEK	88
<i>sprintec tab 28-day pack</i>	72	<i>10% ophth soln</i>		PACK (56)	
SPRITAM 1000MG TAB	25	SULFACETAMIDE/PRED	83	SYMDEKO TAB	88
FOR ORAL SUSP		NISOLONE 10-0.25%		50-75MG/75MG PACK	
SPRITAM 250MG TAB	25	OPHTH SOLN		(56)	
FOR ORAL SUSP		<i>sulfadiazine 500mg tab</i>	89	SYMPAZAN 10MG ORAL	22
SPRITAM 500MG TAB	25	<i>sulfamethoxazole/trimeth</i>	89	FILM	
FOR ORAL SUSP		<i>oprim 200-40mg/5ml oral</i>		SYMPAZAN 20MG ORAL	22
SPRITAM 750MG TAB	25	<i>susp</i>		FILM	
FOR ORAL SUSP		<i>sulfamethoxazole/trimeth</i>	89	SYMPAZAN 5MG ORAL	22
<i>sps 15gm/60ml susp</i>	80	<i>oprim 400-80mg tab</i>		FILM	
<i>sronyx tab 28-day pack</i>	72	<i>sulfamethoxazole/trimeth</i>	89	SYMTUZA	55
<i>ssd 1% cream</i>	66	<i>oprim 800-160mg tab</i>		150-800-200-10MG TAB	
STELARA 45MG/0.5ML	64	<i>sulfasalazine 500mg dr</i>	74	SYNJARDY	29
INJ		<i>tab</i>		12.5-1000MG TAB	
STELARA 45MG/0.5ML	64	<i>sulfasalazine 500mg tab</i>	74	SYNJARDY 12.5-500MG	29
SYRINGE		<i>sulindac 150mg tab</i>	14	TAB	
STELARA 90MG/ML	64	<i>sulindac 200mg tab</i>	14	SYNJARDY 5-1000MG	29
SYRINGE		<i>sumatriptan 100mg tab</i>	77	TAB	
STIMUFEND 6MG/0.6ML	75	<i>sumatriptan 20mg/act</i>	77	SYNJARDY 5-500MG	29
SYRINGE		<i>nasal spray</i>		TAB	

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ALPHABETICAL LISTING OF DRUGS

SYNJARDY XR	29	<i>tadalafil 5mg tab</i>	74	<i>terazosin 1mg cap</i>	36
10-1000MG TAB		TAFINLAR 10MG TAB	46	<i>terazosin 2mg cap</i>	36
SYNJARDY XR	30	FOR ORAL SUSP		<i>terazosin 5mg cap</i>	36
12.5-1000MG TAB		TAFINLAR 50MG CAP	46	<i>terbinafine 250mg tab</i>	33
SYNJARDY XR	30	TAFINLAR 75MG CAP	46	<i>terbutaline sulfate 2.5mg tab</i>	21
25-1000MG TAB		TAGRISSO 40MG TAB	41	<i>terbutaline sulfate 5mg tab</i>	21
SYNJARDY XR	30	TAGRISSO 80MG TAB	41	<i>terconazole 0.4% vaginal cream</i>	94
5-1000MG TAB		TAKHZYRO 300MG/2ML INJ	76	<i>terconazole 0.8% vaginal cream</i>	94
SYNTHROID 100MCG TAB	91	TAKHZYRO 300MG/2ML SYRINGE	76	<i>terconazole 80mg vaginal insert</i>	94
SYNTHROID 112MCG TAB	91	TALZENNA 0.1MG CAP	46	<i>teriflunomide 14mg tab</i>	87
SYNTHROID 125MCG TAB	91	TALZENNA 0.25MG CAP	46	<i>teriflunomide 7mg tab</i>	87
SYNTHROID 137MCG TAB	91	TALZENNA 0.35MG CAP	46	TERIPARATIDE	67
SYNTHROID 150MCG TAB	91	TALZENNA 0.5MG CAP	46	0.02MG/ACT PEN INJ	
SYNTHROID 175MCG TAB	91	TALZENNA 0.75MG CAP	46	<i>testosterone 1% (12.5mg/act) gel pump</i>	16
SYNTHROID 200MCG TAB	91	TALZENNA 1MG CAP	46	<i>testosterone 1% (25mg) gel packet</i>	16
SYNTHROID 25MCG TAB	91	<i>tamoxifen 10mg tab</i>	42	<i>testosterone 1% (50mg) gel packet</i>	16
SYNTHROID 175MCG TAB	91	<i>tamoxifen 20mg tab</i>	42	<i>testosterone 1.62% (1.25gm) gel packet</i>	16
SYNTHROID 200MCG TAB	91	<i>tamsulosin 0.4mg cap</i>	74	<i>testosterone 1.62% (2.5gm) gel packet</i>	16
SYNTHROID 25MCG TAB	91	<i>tarina 24 fe tab 1/20 28-day pack</i>	72	<i>testosterone 1.62% (20.25mg/act) gel pump</i>	16
SYNTHROID 300MCG TAB	91	<i>tarina fe tab 1/20 28-day pack</i>	72	<i>testosterone 30mg/act topical soln</i>	16
SYNTHROID 50MCG TAB	91	<i>tazarotene 0.1% cream</i>	64	<i>testosterone cypionate 100mg/ml inj</i>	16
SYNTHROID 75MCG TAB	91	<i>tazicef 1gm inj</i>	61	<i>testosterone cypionate 200mg/ml (1ml) inj</i>	16
SYNTHROID 88MCG TAB	91	<i>tazicef 2gm inj</i>	61	<i>testosterone cypionate 200mg/ml inj</i>	16
		TAZICEF 6GM INJ	61	TESTOSTERONE	16
		TAZVERIK 200MG TAB	46	ENANTHATE 200MG/ML INJ	
		TEFLARO 400MG INJ	39	<i>tetrabenazine 12.5mg tab</i>	87
		TEFLARO 600MG INJ	39	<i>tetrabenazine 25mg tab</i>	87
		<i>telmisartan 20mg tab</i>	36	<i>tetracycline 250mg cap</i>	90
		<i>telmisartan 40mg tab</i>	36		
		<i>telmisartan 80mg tab</i>	36		
		<i>temazepam 15mg cap</i>	75		
		<i>temazepam 30mg cap</i>	75		
		TENIVAC 4-10UNIT/ML INJ	92		
		TENIVAC 4-10UNIT/ML SYRINGE	92		
		<i>tenofovir disoproxil fumarate 300mg tab</i>	55		
		TEPMETKO 225MG TAB	46		
		<i>terazosin 10mg cap</i>	36		
T					
TABLOID 40MG TAB	41				
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>	80				
<i>tacrolimus 1mg cap</i>	80				
<i>tacrolimus 5mg cap</i>	80				
<i>tadalafil 2.5mg tab</i>	74				
<i>tadalafil 20mg tab</i>	89				

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ALPHABETICAL LISTING OF DRUGS

<i>tetracycline 500mg cap</i>	90	TICOVAC	94	<i>torpenz 10mg tab</i>	46
THALOMID 100MG CAP	79	1.2MCG/0.25ML		<i>torpenz 2.5mg tab</i>	46
THALOMID 50MG CAP	79	SYRINGE		<i>torpenz 5mg tab</i>	46
THEOPHYLLINE 100MG	89	TICOVAC 2.4MCG/0.5ML	94	<i>torpenz 7.5mg tab</i>	46
ER TAB		SYRINGE		<i>torsemide 100mg tab</i>	67
THEOPHYLLINE 200MG	89	<i>tigecycline 50mg inj</i>	39	<i>torsemide 10mg tab</i>	67
ER TAB		<i>timolol 0.25% ophth gel</i>	82	<i>torsemide 20mg tab</i>	67
<i>theophylline 300mg er</i>	89	<i>timolol 0.25% ophth soln</i>	82	<i>torsemide 5mg tab</i>	67
<i>tab</i>		<i>timolol 0.5% ophth gel</i>	82	TOUJEO 300UNIT/ML	31
<i>theophylline 400mg er</i>	89	<i>timolol 0.5% ophth soln</i>	82	PEN INJ (1.5ML)	
<i>tab</i>		<i>timolol 10mg tab</i>	58	TOUJEO MAX	31
<i>theophylline 450mg er</i>	89	<i>timolol 5mg tab</i>	58	300UNIT/ML PEN INJ	
<i>tab</i>		<i>tinidazole 250mg tab</i>	39	(3ML)	
<i>theophylline 600mg er</i>	89	<i>tinidazole 500mg tab</i>	39	TPN ELECTROLYTES INJ	78
<i>tab</i>		TIVICAY 50MG TAB	55	TRADJENTA 5MG TAB	30
<i>thioridazine 100mg tab</i>	53	TIVICAY 5MG TAB FOR	55	<i>tramadol 100mg er tab</i>	15
<i>thioridazine 10mg tab</i>	53	ORAL SUSP		<i>tramadol 200mg er tab</i>	15
<i>thioridazine 25mg tab</i>	53	<i>tizanidine 2mg cap</i>	81	<i>tramadol 300mg er tab</i>	15
<i>thioridazine 50mg tab</i>	53	<i>tizanidine 2mg tab</i>	81	<i>tramadol 50mg tab</i>	15
<i>thiothixene 10mg cap</i>	50	<i>tizanidine 4mg cap</i>	81	<i>tramadol/acetaminophen</i>	16
<i>thiothixene 1mg cap</i>	50	<i>tizanidine 4mg tab</i>	81	<i>37.5-325mg tab</i>	
<i>thiothixene 2mg cap</i>	50	<i>tizanidine 6mg cap</i>	81	<i>trandolapril 1mg tab</i>	35
<i>thiothixene 5mg cap</i>	50	<i>tobramycin 0.3% ophth</i>	82	<i>trandolapril 2mg tab</i>	35
<i>tiadylt 120mg er (24hr)</i>	59	<i>soln</i>		<i>trandolapril 4mg tab</i>	35
<i>cap</i>		TOBRAMYCIN	12	<i>tranexamic acid 650mg</i>	75
<i>tiadylt 180mg er (24hr)</i>	59	10MG/ML INJ		<i>tab</i>	
<i>cap</i>		<i>tobramycin 300mg/5ml</i>	12	<i>tranylcypromine 10mg</i>	27
<i>tiadylt 240mg er (24hr)</i>	59	<i>inh soln</i>		<i>tab</i>	
<i>cap</i>		<i>tobramycin 80mg/2ml inj</i>	12	TRAVASOL 10% INJ	81
<i>tiadylt 300mg er (24hr)</i>	59	<i>tolterodine tartrate 1mg</i>	93	<i>travoprost 0.004% ophth</i>	83
<i>cap</i>		<i>tab</i>		<i>soln</i>	
<i>tiadylt 360mg er (24hr)</i>	59	<i>tolterodine tartrate 2mg</i>	93	<i>trazodone 100mg tab</i>	27
<i>cap</i>		<i>er cap</i>		<i>trazodone 150mg tab</i>	27
<i>tiadylt 420mg er (24hr)</i>	59	<i>tolterodine tartrate 2mg</i>	93	<i>trazodone 50mg tab</i>	27
<i>cap</i>		<i>tab</i>		TRECTOR 250MG TAB	40
<i>tiagabine 12mg tab</i>	25	<i>tolterodine tartrate 4mg</i>	93	TRELEGY ELLIPTA	21
<i>tiagabine 16mg tab</i>	25	<i>er cap</i>		100-62.5-25MCG	
<i>tiagabine 2mg tab</i>	25	<i>topiramate 100mg tab</i>	25	POWDER INHALER	
<i>tiagabine 4mg tab</i>	26	<i>topiramate 15mg cap</i>	25	TRELEGY ELLIPTA	21
TIBSOVO 250MG TAB	46	<i>topiramate 200mg tab</i>	25	200-62.5-25MCG	
<i>ticagrelor 60mg tab</i>	75	<i>topiramate 25mg cap</i>	25	POWDER INHALER	
<i>ticagrelor 90mg tab</i>	75	<i>topiramate 25mg tab</i>	25	TRELSTAR 11.25MG INJ	42
		<i>topiramate 50mg tab</i>	25	TRELSTAR 22.5MG INJ	42
		<i>toremifene 60mg tab</i>	42	TRELSTAR 3.75MG INJ	42

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ALPHABETICAL LISTING OF DRUGS

TREMFYA 100MG/ML AUTO-INJECTOR	64	<i>tri-estarylla tab 28-day pack</i>	72	TRIUMEQ 600-50-300MG TAB	55
TREMFYA 100MG/ML SYRINGE	64	<i>trifluoperazine 10mg tab</i>	53	TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	55
TREMFYA 200MG/2ML AUTO-INJECTOR	64	<i>trifluoperazine 1mg tab</i>	53	<i>trivora tab 28-day pack</i>	72
TREMFYA 200MG/2ML SYRINGE	64	<i>trifluoperazine 2mg tab</i>	53	<i>tri-vylibra lo tab 28-day pack</i>	72
TRESIBA 100UNIT/ML INJ	31	<i>trifluoperazine 5mg tab</i>	53	<i>tri-vylibra tab 28-day pack</i>	72
TRESIBA 100UNIT/ML PEN INJ	31	TRIFLURIDINE 1%	82	<i>trospium chloride 20mg tab</i>	93
TRESIBA 200UNIT/ML PEN INJ	31	OPHTH SOLN		<i>trospium chloride 60mg er cap</i>	93
<i>tretinoin 0.01% gel</i>	62	<i>trihexyphenidyl 2mg tab</i>	48	TRULANCE 3MG TAB	76
<i>tretinoin 0.025% cream</i>	63	<i>trihexyphenidyl 5mg tab</i>	48	TRULICITY	31
<i>tretinoin 0.025% gel</i>	63	TRIJARDY XR	30	0.75MG/0.5ML AUTO-INJECTOR	
<i>tretinoin 0.05% cream</i>	63	10-5-1000MG TAB		TRULICITY	31
<i>tretinoin 0.1% cream</i>	63	TRIJARDY XR	30	1.5MG/0.5ML AUTO-INJECTOR	
<i>tretinoin 10mg cap</i>	47	12.5-2.5-1000MG TAB		TRULICITY 3MG/0.5ML	31
<i>triamcinolone acetone 0.025% cream</i>	65	TRIJARDY XR	30	AUTO-INJECTOR	
<i>triamcinolone acetone 0.025% lotion</i>	65	25-5-1000MG TAB		TRULICITY	31
<i>triamcinolone acetone 0.025% ointment</i>	65	TRIJARDY XR	30	4.5MG/0.5ML AUTO-INJECTOR	
<i>triamcinolone acetone 0.1% cream</i>	65	5-2.5-1000MG TAB		TRUMENBA SYRINGE	93
<i>triamcinolone acetone 0.1% lotion</i>	65	TRIKAFTA	88	TRUQAP 160MG TAB	46
<i>triamcinolone acetone 0.1% ointment</i>	65	100-50-75MG/150MG TAB PACK (84)		TRUQAP 200MG TAB	46
<i>triamcinolone acetone 0.1% oral paste</i>	65	TRIKAFTA	88	TUKYSA 150MG TAB	48
<i>triamcinolone acetone 0.5% cream</i>	65	100-50-75MG/75MG GRANULES PACK (56)		TUKYSA 50MG TAB	48
<i>triamcinolone acetone 0.5% ointment</i>	65	TRIKAFTA	88	TURALIO 125MG CAP	46
<i>triazolam 0.125mg tab</i>	75	50-37.5-25MG/75MG TAB PACK (84)		<i>turqoz tab 28-day pack</i>	72
<i>triazolam 0.25mg tab</i>	76	TRIKAFTA	88	TWINRIX SYRINGE	94
<i>tridacaine 5% patch</i>	65	80-40-60MG/59.5MG GRANULES PACK (56)		TYBOST 150MG TAB	55
<i>triderm 0.5% cream</i>	65	<i>tri-lo- estarylla tab 28-day pack</i>	72	TYENNE 162MG/0.9ML AUTO-INJECTOR	13
<i>trientine 250mg cap</i>	79	<i>tri-lo-sprintec tab 28-day pack</i>	72	TYENNE 162MG/0.9ML SYRINGE	13
		<i>trimethoprim 100mg tab</i>	39	TYMLOS	67
		<i>tri-mili tab 28-day pack</i>	72	3120MCG/1.56ML PEN INJ	
		<i>trimipramine 100mg cap</i>	29	TYPHIM VI	93
		<i>trimipramine 25mg cap</i>	29	25MCG/0.5ML INJ	
		<i>trimipramine 50mg cap</i>	29		
		TRINTELLIX 10MG TAB	27		
		TRINTELLIX 20MG TAB	27		
		TRINTELLIX 5MG TAB	27		
		<i>tri-sprintec tab 28-day pack</i>	72		

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ALPHABETICAL LISTING OF DRUGS

TYPHIM VI 25MCG/0.5ML SYRINGE	93	<i>valproic acid 50mg/ml oral soln</i>	26	VELTASSA 16.8GM POWDER FOR ORAL SUSP	80
U		<i>valsartan 160mg tab</i>	36	VELTASSA 1GM POWDER FOR ORAL SUSP	80
UBRELVY 100MG TAB	77	<i>valsartan 320mg tab</i>	36	VELTASSA 25.2GM POWDER FOR ORAL SUSP	80
UBRELVY 50MG TAB	77	<i>valsartan 40mg tab</i>	36	VELTASSA 8.4GM POWDER FOR ORAL SUSP	80
<i>unithroid 100mcg tab</i>	91	<i>valsartan 80mg tab</i>	36	VEMLIDY 25MG TAB	56
<i>unithroid 112mcg tab</i>	91	VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	23	VENCLEXTA 100MG TAB	48
<i>unithroid 125mcg tab</i>	91	VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK	23	VENCLEXTA 10MG TAB	48
<i>unithroid 137mcg tab</i>	91	VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	23	VENCLEXTA 50MG TAB	48
<i>unithroid 150mcg tab</i>	91	VALTOCO 5MG (5MG/0.1ML) NASAL SPRAY DOSE PACK	23	VENCLEXTA TAB	48
<i>unithroid 175mcg tab</i>	91	<i>vancomycin 100mg/ml inj</i>	39	STARTER PACK (42)	
<i>unithroid 200mcg tab</i>	91	<i>vancomycin 125mg cap</i>	39	<i>venlafaxine 100mg tab</i>	28
<i>unithroid 25mcg tab</i>	91	<i>vancomycin 1gm inj</i>	39	<i>venlafaxine 150mg er cap</i>	28
<i>unithroid 300mcg tab</i>	91	<i>vancomycin 250mg cap</i>	39	<i>venlafaxine 25mg tab</i>	28
<i>unithroid 50mcg tab</i>	91	<i>vancomycin 500mg inj</i>	39	<i>venlafaxine 37.5mg er cap</i>	28
<i>unithroid 75mcg tab</i>	91	<i>vancomycin 750mg inj</i>	39	<i>venlafaxine 37.5mg tab</i>	28
<i>unithroid 88mcg tab</i>	91	VANFLYTA 17.7MG TAB	47	<i>venlafaxine 50mg tab</i>	28
<i>ursodiol 250mg tab</i>	73	VANFLYTA 26.5MG TAB	47	<i>venlafaxine 75mg er cap</i>	28
<i>ursodiol 300mg cap</i>	73	VAQTA 25UNIT/0.5ML INJ	94	<i>venlafaxine 75mg tab</i>	28
<i>ursodiol 500mg tab</i>	73	VAQTA 25UNIT/0.5ML SYRINGE	94	VENTOLIN 108MCG HFA INHALER	21
UZEDY 100MG/0.28ML SYRINGE	51	VAQTA 50UNIT/ML INJ	94	<i>verapamil 120mg er cap</i>	59
UZEDY 125MG/0.35ML SYRINGE	51	VAQTA 50UNIT/ML SYRINGE	94	<i>verapamil 120mg er tab</i>	59
UZEDY 150MG/0.42ML SYRINGE	51	<i>varenicline 0.5mg tab</i>	87	<i>verapamil 120mg tab</i>	59
UZEDY 200MG/0.56ML SYRINGE	51	<i>varenicline 0.5mg/1mg first month pack (53)</i>	87	<i>verapamil 180mg er cap</i>	59
UZEDY 250MG/0.7ML SYRINGE	51	<i>varenicline 1mg tab</i>	87	<i>verapamil 180mg er tab</i>	59
UZEDY 50MG/0.14ML SYRINGE	51	<i>varenicline 1mg tab pack (56)</i>	87	<i>verapamil 240mg er cap</i>	59
UZEDY 75MG/0.21ML SYRINGE	51	VARIVAX 1350PFU/0.5ML INJ	94	<i>verapamil 240mg er tab</i>	59
V		VAXCHORA SUSP	93	VERAPAMIL 360MG ER CAP	59
<i>valacyclovir 1000mg tab</i>	56	VELIVET TAB 28-DAY PACK	72	<i>verapamil 40mg tab</i>	59
<i>valacyclovir 500mg tab</i>	56			<i>verapamil 80mg tab</i>	59
VALCHLOR 0.016% GEL	63			VERQUVO 10MG TAB	60
<i>valganciclovir 450mg tab</i>	56			VERQUVO 2.5MG TAB	60
<i>valganciclovir 50mg/ml oral soln</i>	56			VERQUVO 5MG TAB	60
<i>valproic acid 250mg cap</i>	26				

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: 07/01/2025

ALPHABETICAL LISTING OF DRUGS

VERSACLOZ 50MG/ML	52	<i>voriconazole 200mg tab</i>	33	X	
ORAL SUSP		<i>voriconazole 40mg/ml</i>	33	XALKORI 150MG ORAL	47
VERZENIO 100MG TAB	47	<i>oral susp</i>		PELLET	
VERZENIO 150MG TAB	47	<i>voriconazole 50mg tab</i>	33	XALKORI 200MG CAP	47
VERZENIO 200MG TAB	47	VOSEVI 400-100-100MG	56	XALKORI 20MG ORAL	47
VERZENIO 50MG TAB	47	TAB		PELLET	
<i>vestura tab 3-0.02mg</i>	72	VOWST 30000000UNIT	73	XALKORI 250MG CAP	47
<i>28-day pack</i>		CAP		XALKORI 50MG ORAL	47
<i>vienva tab 28-day pack</i>	72	VRAYLAR 1.5MG CAP	50	PELLET	
<i>vigabatrin 500mg powder</i>	26	VRAYLAR 3MG CAP	50	XARELTO 10MG TAB	21
<i>for oral soln</i>		VRAYLAR 4.5MG CAP	50	XARELTO 15MG TAB	21
<i>vigabatrin 500mg tab</i>	26	VRAYLAR 6MG CAP	50	XARELTO 1MG/ML	21
<i>vigadrone 500mg powder</i>	26	<i>vyfemla tab 28-day pack</i>	72	ORAL SUSP	
<i>for oral soln</i>		<i>vylibra tab 28-day pack</i>	72	XARELTO 2.5MG TAB	21
<i>vigadrone 500mg tab</i>	26	VYNDAMAX 61MG CAP	60	XARELTO 20MG TAB	21
VIGAFYDE 100MG/ML	26	VYNDAQEL 20MG CAP	60	XARELTO TAB STARTER	21
ORAL SOLN				PACK (51)	
<i>vigpoder 500mg powder</i>	26	W		XATMEP 2.5MG/ML	41
<i>for oral soln</i>		<i>warfarin sodium 10mg</i>	22	ORAL SOLN	
<i>vilazodone 10mg tab</i>	27	<i>tab</i>		XCOPRI 100MG TAB	25
<i>vilazodone 20mg tab</i>	28	<i>warfarin sodium 1mg tab</i>	22	XCOPRI 150MG TAB	25
<i>vilazodone 40mg tab</i>	28	<i>warfarin sodium 2.5mg</i>	22	XCOPRI 200MG TAB	25
VIMKUNYA	94	<i>tab</i>		XCOPRI 25MG TAB	25
40MCG/0.8ML SYRINGE		<i>warfarin sodium 2mg tab</i>	22	XCOPRI 50MG TAB	25
VIRACEPT 250MG TAB	55	<i>warfarin sodium 3mg tab</i>	22	XCOPRI TAB 100/150MG	25
VIRACEPT 625MG TAB	55	<i>warfarin sodium 4mg tab</i>	22	MAINTENANCE PACK	
VIREAD 150MG TAB	55	<i>warfarin sodium 5mg tab</i>	22	(56)	
VIREAD 200MG TAB	56	<i>warfarin sodium 6mg tab</i>	22	XCOPRI TAB 12.5/25MG	25
VIREAD 250MG TAB	56	<i>warfarin sodium 7.5mg</i>	22	TITRATION PACK (28)	
VIREAD 40MG/GM	56	<i>tab</i>		XCOPRI TAB 150/200MG	25
ORAL POWDER		WELIREG 40MG TAB	48	PACK (56)	
VITRAKVI 100MG CAP	47	WINREVAIR 45MG INJ	89	XCOPRI TAB 150/200MG	25
VITRAKVI 20MG/ML	47	WINREVAIR 45MG INJ	89	TITRATION PACK (28)	
ORAL SOLN		(2 VIAL PACK)		XCOPRI TAB 50/100MG	25
VITRAKVI 25MG CAP	47	WINREVAIR 60MG INJ	89	TITRATION PACK (28)	
VIVITROL 380MG INJ	32	WINREVAIR 60MG INJ	89	XDEMVEY 0.25% OPHTH	82
VIVOTIF DR CAP	93	(2 VIAL PACK)		SOLN	
VIZIMPRO 15MG TAB	41	<i>wixela 100-50mcg</i>	21	XELJANZ 10MG TAB	12
VIZIMPRO 30MG TAB	41	<i>powder inhaler</i>		XELJANZ 1MG/ML	12
VIZIMPRO 45MG TAB	42	<i>wixela 250-50mcg</i>	21	ORAL SOLN	
VONJO 100MG CAP	47	<i>powder inhaler</i>		XELJANZ 5MG TAB	12
VORANIGO 10MG TAB	47	<i>wixela 500-50mcg</i>	21	XELJANZ XR 11MG TAB	13
VORANIGO 40MG TAB	47	<i>powder inhaler</i>		XELJANZ XR 22MG TAB	13
<i>voriconazole 200mg inj</i>	33	WYOST 120MG/1.7ML	68	XERMELO 250MG TAB	32
		INJ			

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ALPHABETICAL LISTING OF DRUGS

XIFAXAN 550MG TAB	39	XPOVIO TAB 60MG	48	ZIMHI 5MG/0.5ML	32
XIGDUO XR 10-1000MG TAB	30	ONCE WEEKLY CARTON (4)		SYRINGE	
XIGDUO XR 10-500MG TAB	30	XPOVIO TAB 60MG	48	<i>ziprasidone 20mg cap</i>	50
XIGDUO XR	30	TWICE WEEKLY		<i>ziprasidone 20mg inj</i>	50
2.5-1000MG TAB		CARTON (24)		<i>ziprasidone 40mg cap</i>	50
XIGDUO XR 5-1000MG TAB	30	XPOVIO TAB 80MG	48	<i>ziprasidone 60mg cap</i>	50
XIGDUO XR 5-500MG TAB	30	ONCE WEEKLY CARTON (8)		<i>ziprasidone 80mg cap</i>	50
XIIDRA 5% OPHTH SOLN	83	XPOVIO TAB 80MG	48	ZOLINZA 100MG CAP	47
XOFLUZA 40MG TAB	57	TWICE WEEKLY		<i>zolmitriptan 2.5mg tab</i>	77
XOFLUZA 80MG TAB	57	CARTON (32)		<i>zolmitriptan 5mg tab</i>	77
XOLAIR 150MG INJ	19	XTANDI 40MG CAP	42	<i>zolpidem tartrate 10mg tab</i>	76
XOLAIR 150MG/ML	19	XTANDI 40MG TAB	42	<i>zolpidem tartrate 12.5mg er tab</i>	76
AUTO-INJECTOR		XTANDI 80MG TAB	42	<i>zolpidem tartrate 5mg tab</i>	76
XOLAIR 150MG/ML	19	<i>xulane 150-35mcg/24hr patch</i>	72	<i>zolpidem tartrate 6.25mg er tab</i>	76
SYRINGE		Y		ZONISADE 100MG/5ML	25
XOLAIR 300MG/2ML	19	YF-VAX INJ	94	ORAL SUSP	
AUTO-INJECTOR		<i>yuvafem 10mcg vaginal insert</i>	94	<i>zonisamide 100mg cap</i>	25
XOLAIR 300MG/2ML	19	Z		<i>zonisamide 25mg cap</i>	25
SYRINGE		<i>zafemy 150-35mcg/24hr patch</i>	72	<i>zonisamide 50mg cap</i>	25
XOLAIR 75MG/0.5ML	19	<i>zafirlukast 10mg tab</i>	19	<i>zovia 1mg-35mcg tab 28-day pack</i>	72
AUTO-INJECTOR		<i>zafirlukast 20mg tab</i>	19	ZTALMY 50MG/ML	25
XOLAIR 75MG/0.5ML	19	<i>zaleplon 10mg cap</i>	76	ORAL SUSP	
SYRINGE		<i>zaleplon 5mg cap</i>	76	ZURZUVAE 20MG CAP	26
XOPENEX 45MCG	21	ZAVZPRET 10MG/ACT	77	ZURZUVAE 25MG CAP	26
INHALER		NASAL SPRAY		ZURZUVAE 30MG CAP	26
XOSPATA 40MG TAB	47	ZEJULA 100MG TAB	47	ZYDELIG 100MG TAB	47
XPOVIO TAB 100MG	48	ZEJULA 200MG TAB	47	ZYDELIG 150MG TAB	47
ONCE WEEKLY CARTON (8)		ZEJULA 300MG TAB	47	ZYKADIA 150MG TAB	47
XPOVIO TAB 40MG	48	ZELBORAF 240MG TAB	47		
ONCE WEEKLY CARTON (16)		ZEMAIRA 1000MG INJ	87		
XPOVIO TAB 40MG	48	<i>zenatane 10mg cap</i>	63		
ONCE WEEKLY CARTON (4)		<i>zenatane 20mg cap</i>	63		
XPOVIO TAB 40MG	48	<i>zenatane 30mg cap</i>	63		
TWICE WEEKLY		<i>zenatane 40mg cap</i>	63		
CARTON (8)		<i>zidovudine 100mg cap</i>	56		
		<i>zidovudine 10mg/ml oral soln</i>	56		
		<i>zidovudine 300mg tab</i>	56		

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This formulary was updated on 07/01/2025. 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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