



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 16

This formulary was updated on 09/01/2025.

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 09/01/2025. 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 09/01/2025 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: 09/01/2025

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: 09/01/2025

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
ADALIMUMAB-AATY 80MG/0.8ML AUTO-INJECTOR PACK (3)	5	PA QL=3 EA/180 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	

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: 09/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>diclofenac sodium 50mg dr tab</i>	1	
<i>diclofenac sodium 75mg dr tab</i>	1	
<i>diflunisal 500mg tab</i>	1	
<i>etodolac 200mg cap</i>	1	
<i>etodolac 300mg cap</i>	1	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydromorphone 4mg tab</i>	1	QL=240 EA/30 Days
<i>hydromorphone 8mg tab</i>	1	QL=120 EA/30 Days
<i>methadone 10mg tab</i>	1	QL=360 EA/30 Days
METHADONE 1MG/ML ORAL SOLN	1	QL=3600 ML/30 Days
METHADONE 2MG/ML ORAL SOLN	1	QL=1800 ML/30 Days
<i>methadone 5mg tab</i>	1	QL=360 EA/30 Days
<i>morphine sulfate 100mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg tab</i>	1	QL=180 EA/30 Days
<i>morphine sulfate 200mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 ML/30 Days
MORPHINE SULFATE 2MG/ML ORAL SOLN	1	QL=1800 ML/30 Days
<i>morphine sulfate 30mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 30mg tab</i>	1	QL=180 EA/30 Days
MORPHINE SULFATE 4MG/ML ORAL SOLN	1	QL=900 ML/30 Days
<i>morphine sulfate 60mg er tab</i>	1	QL=120 EA/30 Days
<i>oxycodone 10mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 15mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 1mg/ml oral soln</i>	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/ibuprofen 7.5-200mg tab</i>	2	QL=480 EA/30 Days
<i>oxycodone/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days
<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
TESTOSTERONE 1.62% (1.25GM) GEL PACKET	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RECTAL STEROIDS		
<i>hydrocortisone 2.5% cream</i>	1	QL=60 GM/30 Days
<i>procto-med 2.5% cream</i>	1	QL=60 GM/30 Days
<i>proctosol 2.5% cream</i>	1	QL=60 GM/30 Days
<i>proctozone hc 2.5% cream</i>	1	QL=60 GM/30 Days
VASODILATING AGENTS		
<i>nitroglycerin 0.4% rectal ointment</i>	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BENZODIAZEPINES		
<i>alprazolam 0.25mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 0.5mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 1mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 2mg tab</i>	1	QL=150 EA/30 Days
<i>chlordiazepoxide 10mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 25mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 5mg cap</i>	1	QL=120 EA/30 Days
<i>clorazepate dipotassium 15mg tab</i>	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dofetilide 0.25mg cap</i>	2	
<i>dofetilide 0.5mg cap</i>	2	
MULTAQ 400MG TAB	3	
<i>pacerone 100mg tab</i>	1	
<i>pacerone 200mg tab</i>	1	
<i>pacerone 400mg tab</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ASMANEX 200MCG HFA INHALER	3	QL=13 GM/30 Days
ASMANEX 220MCG (120ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 220MCG (30ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 220MCG (60ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 50MCG HFA INHALER	3	QL=13 GM/30 Days
<i>budesonide 0.25mg/2ml inh susp</i>	2	PA_BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/2ml inh susp</i>	2	PA_BvD QL=120 ML/30 Days
<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>breyna 160-4.5mcg/act inhaler</i>	3	QL=10.30 GM/30 Days
<i>breyna 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fluticasone propionate/salmeterol 250-50mcg/act powder inhaler</i>	1	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 500-50mcg/act powder inhaler</i>	1	QL=60 EA/30 Days
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	1	PA_BvD
<i>levalbuterol 0.31mg/3ml neb soln</i>	2	PA_BvD
<i>levalbuterol 0.63mg/3ml inh soln</i>	2	PA_BvD
<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	

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: 09/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>jantoven 6mg tab</i>	1	
<i>jantoven 7.5mg tab</i>	1	
<i>warfarin sodium 10mg tab</i>	1	
<i>warfarin sodium 1mg tab</i>	1	
<i>warfarin sodium 2.5mg tab</i>	1	
<i>warfarin sodium 2mg tab</i>	1	
<i>warfarin sodium 3mg tab</i>	1	
<i>warfarin sodium 4mg tab</i>	1	
<i>warfarin sodium 5mg tab</i>	1	
<i>warfarin sodium 6mg tab</i>	1	
<i>warfarin sodium 7.5mg tab</i>	1	
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>enoxaparin sodium 100mg/1ml syringe</i>	2	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	2	
<i>enoxaparin sodium 150mg/1ml syringe</i>	2	
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	2	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	2	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	2	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	2	
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	2	
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	2	
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	2	
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	2	
<i>heparin sodium porcine 10000unit/ml inj</i>	2	
<i>heparin sodium porcine 1000unit/ml inj</i>	2	
<i>heparin sodium porcine 20000unit/ml inj</i>	2	
<i>heparin sodium porcine 5000unit/ml inj</i>	2	
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	1	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml oral susp</i>	2	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	1	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 0.5mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	2	QL=90 EA/30 Days
<i>clonazepam 1mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 2mg odt</i>	2	QL=300 EA/30 Days
<i>clonazepam 2mg tab</i>	1	QL=300 EA/30 Days
<i>diazepam 10mg/2ml rectal gel</i>	2	QL=10 EA/30 Days
DIAZEPAM 2.5MG/0.5ML RECTAL GEL	3	QL=10 EA/30 Days
<i>diazepam 20mg/4ml rectal gel</i>	2	QL=10 EA/30 Days
NAYZILAM 5MG/0.1ML NASAL SPRAY	4	QL=10 EA/30 Days
SYMPAZAN 10MG ORAL FILM	4	PA_NSO QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SYMPAZAN 20MG ORAL FILM	4	PA_NSO QL=60 EA/30 Days
SYMPAZAN 5MG ORAL FILM	4	PA_NSO QL=60 EA/30 Days
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 acetate 200mg tab</i>	2	PA_NSO QL=30 EA/30 Days
<i>eslicarbazepine acetate 400mg tab</i>	2	PA_NSO QL=30 EA/30 Days
<i>eslicarbazepine acetate 600mg tab</i>	2	PA_NSO QL=60 EA/30 Days
<i>eslicarbazepine acetate 800mg tab</i>	2	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lacosamide 100mg tab</i>	1	QL=60 EA/30 Days
<i>lacosamide 10mg/ml oral soln</i>	1	QL=1200 ML/30 Days
<i>lacosamide 150mg tab</i>	1	QL=60 EA/30 Days
<i>lacosamide 200mg tab</i>	1	QL=60 EA/30 Days
<i>lacosamide 50mg tab</i>	1	QL=120 EA/30 Days
<i>lamotrigine 100mg tab</i>	1	
<i>lamotrigine 150mg tab</i>	1	
<i>lamotrigine 200mg tab</i>	1	
<i>lamotrigine 25mg chew tab</i>	1	
<i>lamotrigine 25mg tab</i>	1	
<i>lamotrigine 5mg chew tab</i>	1	
<i>levetiracetam 1000mg tab</i>	1	
<i>levetiracetam 100mg/ml oral soln</i>	1	
<i>levetiracetam 250mg tab</i>	1	
<i>levetiracetam 500mg er tab</i>	1	
<i>levetiracetam 500mg tab</i>	1	
<i>levetiracetam 750mg er tab</i>	1	
<i>levetiracetam 750mg tab</i>	1	
<i>oxcarbazepine 150mg tab</i>	1	
<i>oxcarbazepine 300mg tab</i>	1	
<i>oxcarbazepine 600mg tab</i>	1	
<i>oxcarbazepine 60mg/ml oral susp</i>	2	
<i>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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>pregabalin 25mg cap</i>	1	QL=120 EA/30 Days
<i>pregabalin 300mg cap</i>	1	QL=60 EA/30 Days
<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 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
<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	

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: 09/01/2025

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	
<i>naloxone 0.4mg/ml syringe</i>	1	
<i>naloxone 1mg/ml syringe</i>	1	
<i>naltrexone 50mg tab</i>	1	
OPVEE 2.7MG/0.1ML NASAL SPRAY	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: 09/01/2025

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>metirosine 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>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		
<i>fosfomycin 3gm powder for oral soln</i>	2	
<i>methenamine hippurate 1gm tab</i>	2	
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>nitrofurantoin macrocrystals 100mg cap</i>	1	
<i>nitrofurantoin macrocrystals 50mg cap</i>	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone/proguanil 250-100mg tab</i>	1	
<i>atovaquone/proguanil 62.5-25mg tab</i>	1	
COARTEM 20-120MG TAB	3	
ANTIMALARIALS		
CHLOROQUINE PHOSPHATE 250MG TAB	2	
<i>chloroquine phosphate 500mg tab</i>	2	
<i>hydroxychloroquine sulfate 100mg tab</i>	1	
<i>hydroxychloroquine sulfate 200mg tab</i>	1	
<i>hydroxychloroquine sulfate 300mg tab</i>	1	
<i>hydroxychloroquine sulfate 400mg tab</i>	1	
<i>mefloquine 250mg tab</i>	2	
PRIMAQUINE PHOSPHATE 26.3MG TAB	2	
<i>pyrimethamine 25mg tab</i>	2	PA QL=90 EA/30 Days
<i>quinine sulfate 324mg cap</i>	2	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE 10MG TAB	5	NDS PA
<i>pyridostigmine bromide 60mg tab</i>	1	
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>dapsone 100mg tab</i>	1	
<i>dapsone 25mg tab</i>	1	
<i>ethambutol 100mg tab</i>	2	
<i>ethambutol 400mg tab</i>	2	
<i>isoniazid 100mg tab</i>	1	
<i>isoniazid 10mg/ml oral soln</i>	2	
<i>isoniazid 300mg tab</i>	1	
PRIFTIN 150MG TAB	3	
<i>pyrazinamide 500mg tab</i>	1	
<i>rifabutin 150mg cap</i>	2	
<i>rifampin 150mg cap</i>	2	
<i>rifampin 300mg cap</i>	2	
<i>rifampin 600mg inj</i>	2	
SIRTURO 100MG TAB	5	NDS PA
SIRTURO 20MG TAB	5	NDS PA
TRECTOR 250MG TAB	4	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE 25MG TAB	3	PA_BvD
CYCLOPHOSPHAMIDE 50MG TAB	3	PA_BvD
GLEOSTINE 100MG CAP	3	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GLEOSTINE 10MG CAP	3	
GLEOSTINE 40MG CAP	3	
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
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
ANTINEOPLASTIC COMBINATIONS		
AVMAPKI/FAKZYNJA CO-PACK (66)	5	NDS PA_NSO QL=66 EA/28 Days
INQOVI 35-100MG TAB PACK (5)	5	NDS PA_NSO QL=5 EA/28 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
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

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: 09/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
RETEVMO 40MG TAB	5	NDS PA_NSO QL=90 EA/30 Days
RETEVMO 80MG TAB	5	NDS PA_NSO QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
SCEMBLIX 100MG TAB	5	NDS PA_NSO QL=120 EA/30 Days
SCEMBLIX 20MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
SCEMBLIX 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
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
OPIPZA 10MG ORAL FILM	4	PA_NSO QL=90 EA/30 Days
OPIPZA 2MG ORAL FILM	4	PA_NSO QL=30 EA/30 Days
OPIPZA 5MG ORAL FILM	4	PA_NSO QL=30 EA/30 Days
REXULTI 0.25MG TAB	4	PA_NSO QL=30 EA/30 Days
REXULTI 0.5MG TAB	4	PA_NSO QL=30 EA/30 Days
REXULTI 1MG TAB	4	PA_NSO QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<i>fosamprenavir 700mg tab</i>	2	QL=120 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
KALETRA 80-20MG/ML ORAL SOLN	5	QL=480 ML/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>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	5	QL=4 EA/28 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>cefpodoxime 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
MINERALOCORTICOIDS		

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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>amneesteem 10mg cap</i>	2	
<i>amneesteem 20mg cap</i>	2	
<i>amneesteem 30mg cap</i>	2	
<i>amneesteem 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
STEQEYMA 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
YESINTEK 90MG/ML SYRINGE	5	PA QL=1 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% ointment</i>	1	QL=180 GM/30 Days
BETAMETHASONE 0.1% TOPICAL LOTION	1	QL=120 ML/30 Days
<i>clobetasol propionate 0.05% cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% e cream</i>	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>clobetasol propionate 0.05% topical spray</i>	2	QL=125 ML/30 Days
<i>clodan 0.05% shampoo</i>	2	QL=236 ML/30 Days
<i>desonide 0.05% ointment</i>	2	QL=120 GM/30 Days
<i>desoximetasone 0.25% cream</i>	2	QL=120 GM/30 Days
<i>desoximetasone 0.25% ointment</i>	2	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% cream</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% topical oil</i>	2	QL=120 ML/30 Days
<i>fluocinolone acetonide 0.01% topical soln</i>	1	QL=90 ML/30 Days
<i>fluocinolone acetonide 0.025% cream</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.025% ointment</i>	1	QL=120 GM/30 Days
<i>fluocinonide 0.05% cream</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% e cream</i>	1	QL=120 GM/30 Days
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tridacaine 5% patch</i>	2	PA QL=90 EA/30 Days
MISC. TOPICAL		
<i>acyclovir 5% ointment</i>	1	QL=30 GM/30 Days
<i>ammonium lactate 12% cream</i>	1	
<i>ammonium lactate 12% lotion</i>	1	
<i>imiquimod 5% cream</i>	1	QL=24 EA/30 Days
<i>malathion 0.5% lotion</i>	2	QL=59 ML/30 Days
<i>permethrin 5% cream</i>	1	QL=60 GM/30 Days
PODOFILOX 0.5% TOPICAL SOLN	2	QL=7 ML/30 Days
<i>selenium sulfide 2.5% shampoo</i>	1	QL=120 ML/30 Days
ROSACEA AGENTS		
<i>azelaic acid 15% gel</i>	2	QL=50 GM/30 Days
<i>metronidazole 0.75% cream</i>	1	QL=45 GM/30 Days
<i>metronidazole 0.75% gel</i>	1	QL=45 GM/30 Days
<i>metronidazole 1% gel</i>	2	QL=60 GM/30 Days
WOUND CARE PRODUCTS		
REGRANEX 0.01% GEL	3	PA QL=30 GM/15 Days
SANTYL 250UNIT/GM OINTMENT	3	QL=90 GM/30 Days
<i>silver sulfadiazine 1% cream</i>	1	
<i>ssd 1% cream</i>	1	
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>bumetanide 1mg tab</i>	1	
<i>bumetanide 2mg tab</i>	1	
FUROSCIX 80MG/10ML CARTRIDGE	5	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	2	
<i>furosemide 10mg/ml oral soln</i>	1	
<i>furosemide 20mg tab</i>	1	
<i>furosemide 40mg tab</i>	1	
<i>furosemide 80mg tab</i>	1	
FUROSEMIDE 8MG/ML ORAL SOLN	1	
<i>torseamide 100mg tab</i>	1	
<i>torseamide 10mg tab</i>	1	
<i>torseamide 20mg tab</i>	1	
<i>torseamide 5mg tab</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone 25mg tab</i>	1	
<i>chlorthalidone 50mg tab</i>	1	
<i>hydrochlorothiazide 12.5mg cap</i>	1	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ENDOCRINE MEDICATIONS		
OTHER ENDOCRINE DRUGS		
<i>cabergoline 0.5mg tab</i>	1	
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	2	
<i>desmopressin acetate 0.1mg tab</i>	2	
<i>desmopressin acetate 0.2mg tab</i>	2	
INCRELEX 40MG/4ML INJ	5	NDS PA
KERENDIA 10MG TAB	3	PA QL=30 EA/30 Days
KERENDIA 20MG TAB	3	PA QL=30 EA/30 Days
SOMAVERT 10MG INJ	5	NDS PA QL=60 EA/30 Days
SOMAVERT 15MG INJ	5	NDS PA QL=60 EA/30 Days
SOMAVERT 20MG INJ	5	NDS PA QL=60 EA/30 Days
SOMAVERT 25MG INJ	5	NDS PA QL=30 EA/30 Days
SOMAVERT 30MG INJ	5	NDS PA QL=30 EA/30 Days
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>abigale lo tab 0.5/0.1mg 28-day pack</i>	1	
<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>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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.02-0.1mg tab 91-day pack</i>	2	
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.03-0.15mg tab 91-day pack</i>	2	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.035-1-1mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/ethynodiol diacetate/inert ingredients 0.05-1-1mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	2	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 91-day pack</i>	2	
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack</i>	2	
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	1	
<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>jaimiess tab 91-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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>junel 1.5/30 tab 21-day pack</i>	2	
<i>junel 1/20 tab 21-day pack</i>	2	
<i>junel fe 24 1/20 28-day pack</i>	2	
<i>junel fe tab 1.5/30 28-day pack</i>	2	
<i>junel fe tab 1/20 28-day pack</i>	2	
<i>kariva tab 28-day pack</i>	2	
<i>kelnor 1mg-35mcg tab 28-day pack</i>	2	
<i>kelnor tab 1/50 28-day pack</i>	2	
<i>kurvelo tab 28-day pack</i>	2	
<i>larin 1.5/30 tab 21-day pack</i>	2	
<i>larin 1/20 tab 21-day pack</i>	2	
<i>larin fe tab 1.5/30 28-day pack</i>	2	
<i>larin fe tab 1/20 28-day pack</i>	2	
<i>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>lo jaimiess tab 91-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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PREMPRO 0.3/1.5MG 28-DAY PACK	3	
PREMPRO 0.45/1.5MG 28-DAY PACK	3	
PREMPRO 0.625/2.5MG 28-DAY PACK	3	
PREMPRO 0.625/5MG 28-DAY PACK	3	
<i>reclipsen tab 28-day pack</i>	2	
<i>setlakin tab 91-day pack</i>	2	
<i>sprintec tab 28-day pack</i>	2	
<i>sronyx tab 28-day pack</i>	2	
<i>syeda tab 28-day pack</i>	2	
<i>tarina 24 fe tab 1/20 28-day pack</i>	2	
<i>tarina fe tab 1/20 28-day pack</i>	2	
<i>tri-estarylla tab 28-day pack</i>	2	
<i>tri-lo- estarylla tab 28-day pack</i>	2	
<i>tri-lo-sprintec tab 28-day pack</i>	2	
<i>tri-mili tab 28-day pack</i>	2	
<i>tri-sprintec tab 28-day pack</i>	2	
<i>tri-vylibra lo tab 28-day pack</i>	2	
<i>tri-vylibra tab 28-day pack</i>	2	
<i>turqoz tab 28-day pack</i>	2	
<i>valtya tab 1/50 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>estradiol 0.5mg tab</i>	1	
<i>estradiol 1mg tab</i>	1	
<i>estradiol 2mg tab</i>	1	
<i>estradiol valerate 10mg/ml inj</i>	2	
<i>estradiol valerate 20mg/ml inj</i>	2	
<i>estradiol valerate 40mg/ml inj</i>	2	
<i>lyllana 0.025mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>lyllana 0.0375mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>lyllana 0.05mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>lyllana 0.075mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>lyllana 0.1mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
PREMARIN 0.3MG TAB	3	
PREMARIN 0.45MG TAB	3	
PREMARIN 0.625MG TAB	3	
PREMARIN 0.9MG TAB	3	
PREMARIN 1.25MG TAB	3	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
<i>ciprofloxacin 250mg tab</i>	1	
CIPROFLOXACIN 2MG/ML INJ	2	
<i>ciprofloxacin 500mg tab</i>	1	
<i>ciprofloxacin 750mg tab</i>	1	
<i>levofloxacin 250mg tab</i>	1	
<i>levofloxacin 25mg/ml oral soln</i>	2	
<i>levofloxacin 500mg tab</i>	1	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VOWST 30000000UNIT CAP	5	NDS PA QL=12 EA/30 Days
GASTROINTESTINAL AGENTS - MISC.		
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium 750mg cap</i>	1	
<i>mesalamine 1200mg dr tab</i>	2	QL=120 EA/30 Days
<i>mesalamine 1gm rectal supp</i>	2	QL=30 EA/30 Days
<i>mesalamine 375mg er cap</i>	2	QL=120 EA/30 Days
<i>mesalamine 400mg dr cap</i>	2	QL=180 EA/30 Days
<i>mesalamine 66.7mg/ml enema</i>	2	QL=1800 ML/30 Days
SKYRIZI 180MG/1.2ML CARTRIDGE	5	PA QL=1.20 ML/56 Days
SKYRIZI 360MG/2.4ML CARTRIDGE	5	PA QL=2.40 ML/56 Days
<i>sulfasalazine 500mg dr tab</i>	1	
<i>sulfasalazine 500mg tab</i>	1	
TREMFYA 200MG/2ML AUTO-INJECTOR INDUCTION PACK FOR CROHNS (2)	5	NDS PA QL=4 ML/28 Days
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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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>	2	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 12.5mg powder for oral susp</i>	5	NDS PA QL=90 EA/30 Days
<i>eltrombopag 12.5mg tab</i>	5	NDS PA QL=30 EA/30 Days
<i>eltrombopag 25mg powder for oral susp</i>	5	NDS PA QL=180 EA/30 Days
<i>eltrombopag 25mg tab</i>	5	NDS PA QL=30 EA/30 Days
<i>eltrombopag 50mg tab</i>	5	NDS PA QL=60 EA/30 Days
<i>eltrombopag 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>eszopiclone 2mg tab</i>	1	QL=30 EA/30 Days
<i>eszopiclone 3mg tab</i>	1	QL=30 EA/30 Days
<i>ramelteon 8mg tab</i>	2	QL=30 EA/30 Days
<i>temazepam 15mg cap</i>	1	QL=30 EA/30 Days
<i>temazepam 30mg cap</i>	1	QL=30 EA/30 Days
<i>triazolam 0.125mg tab</i>	2	QL=30 EA/30 Days
<i>triazolam 0.25mg tab</i>	2	QL=60 EA/30 Days
<i>zaleplon 10mg cap</i>	1	QL=30 EA/30 Days
<i>zaleplon 5mg cap</i>	1	QL=30 EA/30 Days
<i>zolpidem tartrate 10mg tab</i>	1	QL=30 EA/30 Days
<i>zolpidem tartrate 12.5mg er tab</i>	2	QL=30 EA/30 Days
<i>zolpidem tartrate 5mg tab</i>	1	QL=60 EA/30 Days
<i>zolpidem tartrate 6.25mg er tab</i>	2	QL=30 EA/30 Days
IMMUNOLOGICAL AGENTS		
ANGIOEDEMA (HAE) AGENTS		
BERINERT 500UNIT INJ	5	NDS PA
HAEGARDA 2000UNIT INJ	5	NDS PA
HAEGARDA 3000UNIT INJ	5	NDS PA
<i>icatibant 10mg/ml syringe</i>	1	PA QL=27 ML/30 Days
<i>sajazir 30mg/3ml syringe</i>	1	PA QL=27 ML/30 Days
TAKHZYRO 300MG/2ML INJ	5	NDS PA QL=4 ML/28 Days
TAKHZYRO 300MG/2ML SYRINGE	5	NDS PA QL=4 ML/28 Days
LAXATIVES		
LAXATIVE COMBINATIONS		
GAVILYTE-C POWDER FOR ORAL SOLN	1	
<i>gavilyte-g powder for oral soln</i>	1	
<i>gavilyte-n powder for oral soln</i>	1	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MOVANTIK 12.5MG TAB	3	PA QL=30 EA/30 Days
MOVANTIK 25MG TAB	3	PA QL=30 EA/30 Days
TRULANCE 3MG TAB	3	QL=30 EA/30 Days
MEDICAL DEVICES AND SUPPLIES		
BANDAGES-DRESSINGS-TAPE		
GAUZE PAD (2 X 2)	2	
MISC. DEVICES		
ALCOHOL SWAB 1X1 (DIABETIC)	1	
PARENTERAL THERAPY SUPPLIES		
INSULIN PEN NEEDLE	2	
INSULIN SYRINGE	2	
INSULIN SYRINGE (DISP) U-100 0.3ML	2	
INSULIN SYRINGE (DISP) U-100 1/2ML	2	
INSULIN SYRINGE (DISP) U-100 1ML	2	
MIGRAINE PRODUCTS		
MIGRAINE PRODUCTS		
AJOVY 225MG/1.5ML AUTO-INJECTOR	3	PA QL=1.50 ML/30 Days
AJOVY 225MG/1.5ML SYRINGE	3	PA QL=1.50 ML/30 Days
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	2	PA QL=16 ML/30 Days
EMGALITY 100MG/ML SYRINGE	3	PA QL=3 ML/30 Days
EMGALITY 120MG/ML AUTO-INJECTOR	3	PA QL=2 ML/30 Days
EMGALITY 120MG/ML SYRINGE	3	PA QL=2 ML/30 Days
UBRELVY 100MG TAB	3	PA QL=16 EA/30 Days
UBRELVY 50MG TAB	3	PA QL=16 EA/30 Days
ZAVZPRET 10MG/ACT NASAL SPRAY	3	PA QL=6 EA/30 Days
SEROTONIN AGONISTS		
<i>naratriptan 1mg tab</i>	2	QL=18 EA/30 Days
<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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ELECTROLYTE-148 SOLUTION	2	
GLUCOSE 100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	3	PA_BvD
GLUCOSE 100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	3	PA_BvD
<i>glucose 50mg/ml/potassium chloride 0.01meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 2.25mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 9mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.03meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 9mg/ml inj</i>	2	
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 sulfat 500mg/ml inj</i>	2	
<i>magnesium sulfat 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>potassium chloride 10meq er tab</i>	1	
<i>potassium chloride 10meq micro er tab</i>	1	
POTASSIUM CHLORIDE 10MEQ/100ML INJ	2	
POTASSIUM CHLORIDE 15MEQ ER TAB	1	
<i>potassium chloride 15meq micro er tab</i>	1	
<i>potassium chloride 2.67meq/ml oral soln</i>	2	
<i>potassium chloride 20meq er tab</i>	1	
<i>potassium chloride 20meq micro er tab</i>	1	
<i>potassium chloride 20meq powder for oral soln</i>	2	
POTASSIUM CHLORIDE 20MEQ/100ML INJ	2	
<i>potassium chloride 2meq/ml (20ml) inj</i>	2	
<i>potassium chloride 2meq/ml inj</i>	2	
POTASSIUM CHLORIDE 40MEQ/100ML INJ	2	
<i>potassium chloride 8meq er cap</i>	1	
<i>potassium chloride 8meq er tab</i>	1	
SODIUM		
<i>sodium chloride 0.45% inj</i>	2	
<i>sodium chloride 0.9% inj</i>	2	
<i>sodium chloride 3% inj</i>	2	
<i>sodium chloride 50mg/ml inj</i>	2	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
CHEMET 100MG CAP	3	
<i>deferasirox 180mg tab</i>	1	PA
<i>deferasirox 360mg tab</i>	1	PA
<i>deferasirox 90mg tab</i>	1	PA
<i>penicillamine 250mg tab</i>	2	
<i>trientine 250mg cap</i>	1	PA QL=240 EA/30 Days
IMMUNOMODULATORS		
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cyclosporine 25mg cap</i>	2	PA_BvD
<i>cyclosporine modified 100mg cap</i>	2	PA_BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	2	PA_BvD
<i>cyclosporine modified 25mg cap</i>	2	PA_BvD
<i>cyclosporine modified 50mg cap</i>	2	PA_BvD
ENVARUSUS XR 0.75MG TAB	4	PA_BvD
ENVARUSUS XR 1MG TAB	4	PA_BvD
ENVARUSUS XR 4MG TAB	4	PA_BvD
<i>everolimus 0.25mg tab</i>	2	PA_BvD QL=60 EA/30 Days
<i>everolimus 0.5mg tab</i>	2	PA_BvD QL=120 EA/30 Days
<i>everolimus 0.75mg tab</i>	2	PA_BvD QL=60 EA/30 Days
<i>everolimus 1mg tab</i>	2	PA_BvD QL=60 EA/30 Days
<i>engraf 100mg cap</i>	2	PA_BvD
<i>engraf 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>baclofen 5mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	
<i>chlorzoxazone 500mg tab</i>	2	
<i>cyclobenzaprine 10mg tab</i>	1	
<i>cyclobenzaprine 5mg tab</i>	1	
<i>metaxalone 800mg tab</i>	2	
<i>methocarbamol 500mg tab</i>	1	
<i>methocarbamol 750mg tab</i>	1	
<i>orphenadrine citrate 100mg er tab</i>	1	
<i>tizanidine 2mg cap</i>	2	
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg cap</i>	2	
<i>tizanidine 4mg tab</i>	1	
<i>tizanidine 6mg cap</i>	2	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium 100mg cap</i>	2	
<i>dantrolene sodium 25mg cap</i>	2	
<i>dantrolene sodium 50mg cap</i>	2	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	1	QL=60 ML/30 Days
<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	2	QL=50 ML/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	1	QL=32 GM/30 Days
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	1	QL=30 ML/30 Days
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	1	QL=45 ML/30 Days
<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	2	QL=30.50 GM/30 Days
NEUROMUSCULAR AGENTS		
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>clinisol 15% inj</i>	2	PA_BvD

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>plenamine 15% inj</i>	2	PA_BvD
PROSOL 20% INJ	4	PA_BvD
TRAVASOL 10% INJ	3	PA_BvD
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPHTHALMIC		
BETAXOLOL 0.5% OPHTH SOLN	1	
<i>brimonidine tartrate/timolol 0.2-0.5% ophth soln</i>	2	
CARTEOLOL 1% OPHTH SOLN	1	
<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	1	
<i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i>	1	
LEVOBUNOLOL 0.5% OPHTH SOLN	1	
<i>timolol 0.25% ophth gel</i>	2	
<i>timolol 0.25% ophth soln</i>	1	
<i>timolol 0.5% ophth gel</i>	2	
<i>timolol 0.5% ophth soln</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
APRACLONIDINE 0.5% OPHTH SOLN	2	
<i>brimonidine tartrate 0.1% ophth soln</i>	2	
<i>brimonidine tartrate 0.15% ophth soln</i>	2	
<i>brimonidine tartrate 0.2% ophth soln</i>	1	
SIMBRINZA 0.2-1% OPHTH SUSP	3	
OPHTHALMIC ANTI-INFECTIVES		
BACITRACIN 500UNIT/GM OPHTH OINTMENT	2	
<i>bacitracin/polymyxin b 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>ciprofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>erythromycin 0.5% ophth ointment</i>	1	QL=7 GM/7 Days
<i>gentamicin 0.3% ophth soln</i>	1	QL=10 ML/7 Days
<i>moxifloxacin 0.5% ophth soln</i>	1	QL=6 ML/7 Days
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
XDEMVEY 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ROCKLATAN 0.02-0.005% OPTH SOLN	3	QL=5 ML/30 Days
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPTH SOLN	2	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>	1	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	1	
<i>difluprednate 0.05% ophth susp</i>	2	
<i>fluorometholone 0.1% ophth susp</i>	1	
<i>loteprednol etabonate 0.5% ophth gel</i>	2	
<i>loteprednol etabonate 0.5% ophth susp</i>	2	
<i>neo-polycin hc ophth ointment</i>	2	
<i>neomycin/polymyxin/bacitracin/hydrocortisone ophth 1% ointment</i>	2	
<i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>	1	
PREDNISOLONE 1% OPTH SOLN	1	
<i>prednisolone acetate 1% ophth susp</i>	1	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPTH SOLN	1	
OPHTHALMICS - MISC.		
<i>atropine sulfate 1% ophth soln</i>	2	
<i>azelastine 0.05% ophth soln</i>	1	
CROMOLYN SODIUM 4% OPTH SOLN	1	
<i>cyclosporine 0.05% ophth susp</i>	1	QL=60 EA/30 Days
CYSTADROPS 0.37% OPTH SOLN	5	NDS PA QL=20 ML/28 Days
CYSTARAN 0.44% OPTH 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% OPTH 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% OPTH 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% OPTH 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	

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: 09/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ofloxacin 0.3% otic soln</i>	1	
OTIC COMBINATIONS		
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	2	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	1	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
GAMUNEX 1GM/10ML INJ	5	NDS PA
OCTAGAM 1GM/20ML INJ	5	NDS PA
OCTAGAM 2GM/20ML INJ	5	NDS PA
PRIVIGEN 20GM/200ML INJ	5	NDS PA
PENICILLINS		
AMINOPENICILLINS		
AMOXICILLIN 125MG CHEW TAB	1	
<i>amoxicillin 250mg cap</i>	1	
AMOXICILLIN 250MG CHEW TAB	1	
<i>amoxicillin 25mg/ml oral susp</i>	1	
<i>amoxicillin 40mg/ml oral susp</i>	1	
<i>amoxicillin 500mg cap</i>	1	
<i>amoxicillin 500mg tab</i>	1	
<i>amoxicillin 50mg/ml oral susp</i>	1	
<i>amoxicillin 80mg/ml oral susp</i>	1	
<i>amoxicillin 875mg tab</i>	1	
<i>ampicillin 1000mg inj</i>	2	
<i>ampicillin 100mg/ml inj</i>	2	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	1	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	2	
<i>ampicillin/sulbactam 1000-500mg inj</i>	2	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	2	
<i>piperacillin/tazobactam 2000-250mg inj</i>	2	
<i>piperacillin/tazobactam 3000-375mg inj</i>	2	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	2	
<i>piperacillin/tazobactam 4000-500mg inj</i>	2	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	
<i>nafcillin 100mg/ml inj</i>	2	
<i>nafcillin 1gm inj</i>	2	
<i>nafcillin 2gm inj</i>	2	
<i>oxacillin 100mg/ml inj</i>	2	
<i>oxacillin 1gm inj</i>	2	
<i>oxacillin 2gm inj</i>	2	
PROGESTINS		
PROGESTINS		
<i>camila 0.35mg tab 28-day pack</i>	2	
<i>deblitane 0.35mg tab 28-day pack</i>	2	
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	3	
<i>errin 0.35mg tab 28-day pack</i>	2	
<i>gallifrey 5mg tab</i>	1	
<i>heather 0.35mg 28-day pack</i>	2	
<i>incassia 0.35mg tab 28-day pack</i>	2	
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	3	
<i>lyleq 0.35mg tab 28-day pack</i>	2	
<i>lyza 0.35mg tab 28-day pack</i>	2	
<i>medroxyprogesterone acetate 10mg tab</i>	1	
<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
<i>meleya 0.35mg tab 28-day pack</i>	2	
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		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>acamprosate calcium 333mg dr tab</i>	2	
<i>disulfiram 250mg tab</i>	1	
<i>disulfiram 500mg tab</i>	1	
ANTIDEMENTIA AGENTS		
<i>donepezil 10mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 10mg tab</i>	1	
<i>donepezil 23mg tab</i>	2	QL=30 EA/30 Days
<i>donepezil 5mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 5mg tab</i>	1	
<i>galantamine 12mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine 4mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine 8mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine hydrobromide 16mg er cap</i>	2	QL=30 EA/30 Days
<i>galantamine hydrobromide 24mg er cap</i>	2	QL=30 EA/30 Days
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	2	QL=200 ML/30 Days
<i>galantamine hydrobromide 8mg er cap</i>	2	QL=30 EA/30 Days
<i>memantine 10mg tab</i>	1	
<i>memantine 14mg er cap</i>	2	QL=30 EA/30 Days
<i>memantine 21mg er cap</i>	2	QL=30 EA/30 Days
<i>memantine 28mg er cap</i>	2	QL=30 EA/30 Days
<i>memantine 2mg/ml oral soln</i>	2	QL=300 ML/30 Days
<i>memantine 5mg tab</i>	1	
<i>memantine 7mg er cap</i>	2	QL=30 EA/30 Days
<i>rivastigmine 1.5mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 13.3mg/24hr patch</i>	2	QL=30 EA/30 Days
<i>rivastigmine 3mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 4.5mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 4.6mg/24hr patch</i>	2	QL=30 EA/30 Days
<i>rivastigmine 6mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 9.5mg/24hr patch</i>	2	QL=30 EA/30 Days
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
INGREZZA 40MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 40MG SPRINKLE CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 60MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 60MG SPRINKLE CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 80MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 80MG SPRINKLE CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA CAP THERAPY PACK (28)	5	NDS PA QL=28 EA/28 Days
<i>tetrabenazine 12.5mg tab</i>	1	QL=90 EA/30 Days
<i>tetrabenazine 25mg tab</i>	1	QL=120 EA/30 Days
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	5	NDS QL=1 EA/28 Days
AVONEX 30MCG/0.5ML SYRINGE	5	NDS QL=1 EA/28 Days
BETASERON 0.3MG INJ	5	NDS QL=14 EA/28 Days
<i>dalfampridine 10mg er tab</i>	1	QL=60 EA/30 Days
<i>dimethyl fumarate 120mg dr cap</i>	1	QL=14 EA/7 Days
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	1	QL=60 EA/180 Days
<i>dimethyl fumarate 240mg dr cap</i>	1	QL=60 EA/30 Days
<i>fingolimod 0.5mg cap</i>	1	QL=30 EA/30 Days
<i>glatiramer acetate 20mg/ml syringe</i>	1	QL=30 ML/30 Days
<i>glatiramer acetate 40mg/ml syringe</i>	1	QL=12 ML/28 Days
<i>glatopa 20mg/ml syringe</i>	1	QL=30 ML/30 Days
<i>glatopa 40mg/ml syringe</i>	1	QL=12 ML/28 Days
KESIMPTA 20MG/0.4ML PEN INJ	5	NDS QL=1.20 ML/28 Days
MAYZENT 0.25MG TAB	5	NDS QL=120 EA/30 Days
MAYZENT 1MG TAB	5	NDS QL=30 EA/30 Days
MAYZENT 2MG TAB	5	NDS QL=30 EA/30 Days
MAYZENT TAB STARTER PACK (12)	5	NDS QL=12 EA/28 Days
MAYZENT TAB STARTER PACK (7)	3	QL=7 EA/28 Days
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	5	NDS QL=1 ML/28 Days
PLEGRIDY 125MCG/0.5ML SYRINGE	5	NDS QL=1 ML/28 Days
<i>teriflunomide 14mg tab</i>	1	QL=30 EA/30 Days
<i>teriflunomide 7mg tab</i>	1	QL=30 EA/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
NUEDEXTA 20-10MG CAP	3	PA QL=60 EA/30 Days
PIMOZIDE 1MG TAB	2	
PIMOZIDE 2MG TAB	2	
SMOKING DETERRENTS		
<i>bupropion 150mg sr (12hr) tab</i>	1	
NICOTROL 10MG/ML NASAL INHALER	3	
<i>varenicline 0.5mg tab</i>	2	QL=56 EA/28 Days
<i>varenicline 0.5mg/1mg first month pack (53)</i>	2	QL=53 EA/28 Days
<i>varenicline 1mg tab</i>	2	QL=56 EA/28 Days
<i>varenicline 1mg tab pack (56)</i>	2	QL=56 EA/28 Days
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADEMPAS 1MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	5	NDS PA QL=90 EA/30 Days
<i>alyq 20mg tab</i>	1	PA QL=60 EA/30 Days
<i>ambrisentan 10mg tab</i>	1	PA QL=30 EA/30 Days
<i>ambrisentan 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>bosentan 125mg tab</i>	1	PA QL=60 EA/30 Days
<i>bosentan 62.5mg tab</i>	1	PA QL=60 EA/30 Days
OPSUMIT 10MG TAB	5	NDS PA QL=30 EA/30 Days
<i>sildenafil 20mg tab</i>	1	PA QL=360 EA/30 Days
<i>tadalafil 20mg tab</i>	1	PA QL=60 EA/30 Days
WINREVAIR 45MG INJ	5	NDS PA QL=1 EA/21 Days
WINREVAIR 45MG INJ (2 VIAL PACK)	5	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ	5	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ (2 VIAL PACK)	5	NDS PA QL=1 EA/21 Days
RESPIRATORY TRACT/PULMONARY AGENTS		
PHOSPHODIESTERASE INHIBITORS, AIRWAYS DISEASE		
<i>roflumilast 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>roflumilast 250mcg tab</i>	1	QL=28 EA/365 Days
THEOPHYLLINE 100MG ER TAB	2	
THEOPHYLLINE 200MG ER TAB	2	
<i>theophylline 300mg er tab</i>	2	
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450mg er tab</i>	2	
<i>theophylline 600mg er tab</i>	1	
SLEEP DISORDER AGENTS		
SLEEP DISORDERS, OTHER		
LUMRYZ 28-DAY STARTER PACK (28)	5	NDS PA QL=28 EA/28 Days
LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	5	NDS PA QL=30 EA/30 Days
LUMRYZ 6GM GRANULES FOR ORAL SUSP	5	NDS PA QL=30 EA/30 Days
LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	5	NDS PA QL=30 EA/30 Days
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>doxycycline hyclate 100mg cap</i>	1	
<i>doxycycline hyclate 100mg inj</i>	2	
<i>doxycycline hyclate 100mg tab</i>	1	
<i>doxycycline hyclate 20mg tab</i>	1	
<i>doxycycline hyclate 50mg cap</i>	1	
<i>doxycycline monohydrate 100mg cap</i>	1	
<i>doxycycline monohydrate 100mg tab</i>	1	
<i>doxycycline monohydrate 50mg cap</i>	1	
<i>doxycycline monohydrate 50mg tab</i>	1	
<i>doxycycline monohydrate 5mg/ml oral susp</i>	2	
<i>minocycline 100mg cap</i>	1	
<i>minocycline 50mg cap</i>	1	
<i>minocycline 75mg cap</i>	1	
<i>tetracycline 250mg cap</i>	2	
<i>tetracycline 500mg cap</i>	2	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole 10mg tab</i>	1	
<i>methimazole 5mg tab</i>	1	
<i>propylthiouracil 50mg tab</i>	1	
THYROID HORMONES		
<i>levothyroxine sodium 100mcg tab</i>	1	
<i>levothyroxine sodium 112mcg tab</i>	1	
<i>levothyroxine sodium 125mcg tab</i>	1	
<i>levothyroxine sodium 137mcg tab</i>	1	
<i>levothyroxine sodium 150mcg tab</i>	1	
<i>levothyroxine sodium 175mcg tab</i>	1	
<i>levothyroxine sodium 200mcg tab</i>	1	
<i>levothyroxine sodium 25mcg tab</i>	1	
<i>levothyroxine sodium 300mcg tab</i>	1	
<i>levothyroxine sodium 50mcg tab</i>	1	
<i>levothyroxine sodium 75mcg tab</i>	1	
<i>levothyroxine sodium 88mcg tab</i>	1	
<i>levoxyl 100mcg tab</i>	1	
<i>levoxyl 112mcg tab</i>	1	
<i>levoxyl 125mcg tab</i>	1	
<i>levoxyl 137mcg tab</i>	1	
<i>levoxyl 150mcg tab</i>	1	
<i>levoxyl 175mcg tab</i>	1	
<i>levoxyl 200mcg tab</i>	1	
<i>levoxyl 25mcg tab</i>	1	
<i>levoxyl 50mcg tab</i>	1	
<i>levoxyl 75mcg tab</i>	1	
<i>levoxyl 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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

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: 09/01/2025

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>trosipium chloride 20mg tab</i>	1	QL=60 EA/30 Days
<i>trosipium 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	
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
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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>yuvafem 10mcg vaginal insert</i>	2	

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ALPHABETICAL LISTING OF DRUGS

A					
<i>abacavir 20mg/ml oral soln</i>	54	<i>acetylcysteine 200mg/ml inh soln</i>	62	ADEMPAS 1MG TAB	89
<i>abacavir 300mg tab</i>	54	<i>acitretin 10mg cap</i>	63	ADEMPAS 2.5MG TAB	89
<i>abacavir/lamivudine 600-300mg tab</i>	54	<i>acitretin 17.5mg cap</i>	63	ADEMPAS 2MG TAB	89
ABELCET 5MG/ML INJ	33	<i>acitretin 25mg cap</i>	63	ADVAIR 115-21MCG HFA	20
<i>abigale lo tab 0.5/0.1mg 28-day pack</i>	69	ACTEMRA	13	INHALER	
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	53	162MG/0.9ML		ADVAIR 230-21MCG HFA INHALER	20
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	53	AUTO-INJECTOR		ADVAIR 45-21MCG/ACT HFA INHALER	20
ABILIFY MAINTENA 300MG INJ	53	ACTEMRA	13	AJOVY 225MG/1.5ML	77
ABILIFY MAINTENA 300MG SYRINGE	53	162MG/0.9ML SYRINGE		AUTO-INJECTOR	
ABILIFY MAINTENA 400MG INJ	53	ACTHIB INJ	93	AJOVY 225MG/1.5ML SYRINGE	77
ABILIFY MAINTENA 400MG SYRINGE	53	ACTIMMUNE	47	AKEEGA 500-100MG TAB	42
<i>abiraterone acetate 250mg tab</i>	42	2000000UNIT/0.5ML INJ		AKEEGA 500-50MG TAB	42
<i>abirtega 250mg tab</i>	42	<i>acyclovir 200mg cap</i>	56	<i>ala-cort 1% cream</i>	64
ABRYSVO	93	<i>acyclovir 400mg tab</i>	56	<i>albendazole 200mg tab</i>	17
120MCG/0.5ML INJ		<i>acyclovir 40mg/ml oral susp</i>	56	<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	20
<i>acamprosate calcium 333mg dr tab</i>	86	<i>acyclovir 5% ointment</i>	66	<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	20
<i>acarbose 100mg tab</i>	30	<i>acyclovir 50mg/ml inj</i>	56	<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	20
<i>acarbose 25mg tab</i>	30	<i>acyclovir 800mg tab</i>	56	<i>albuterol 1.25mg/3ml neb soln</i>	20
<i>acarbose 50mg tab</i>	30	ADACEL INJ	91	<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i>	20
<i>accutane 10mg cap</i>	62	ADACEL SYRINGE	91	<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	20
<i>accutane 20mg cap</i>	62	ADALIMUMAB-AATY 100MG/ML (0.2ML) SYRINGE	13	<i>albuterol 2mg tab</i>	20
<i>accutane 40mg cap</i>	62	ADALIMUMAB-AATY 100MG/ML (0.4ML) SYRINGE	13	<i>albuterol 4mg tab</i>	20
<i>acebutolol 200mg cap</i>	57	ADALIMUMAB-AATY 100MG/ML		<i>albuterol 5mg/ml (0.05%) inh soln</i>	20
<i>acebutolol 400mg cap</i>	57	AUTO-INJECTOR		ALCLOMETASONE 0.05% OINT	64
<i>acetazolamide 125mg tab</i>	66	(0.4ML)		<i>alclometasone dipropionate 0.05% cream</i>	64
<i>acetazolamide 250mg tab</i>	66	ADALIMUMAB-AATY 100MG/ML	13	ALCOHOL SWAB 1X1 (DIABETIC)	77
<i>acetazolamide 500mg er cap</i>	66	AUTO-INJECTOR		ALECENSA 150MG CAP	43
<i>acetic acid 2% otic soln</i>	83	(0.8ML)			
<i>acetylcysteine 100mg/ml inh soln</i>	62	ADALIMUMAB-AATY 80MG/0.8ML	13		
		AUTO-INJECTOR PACK (3)			
		<i>adefovir dipivoxil 10mg tab</i>	56		
		ADEMPAS 0.5MG TAB	88		
		ADEMPAS 1.5MG TAB	88		

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ALPHABETICAL LISTING OF DRUGS

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

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ALPHABETICAL LISTING OF DRUGS

<i>amphetamine/dextroamph etamine 10mg tab</i>	11	<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	33	ARNUITY 50MCG POWDER INHALER	19
<i>amphetamine/dextroamph etamine 12.5mg tab</i>	11	<i>aprepitant 40mg cap</i>	33	<i>asenapine 10mg sl tab</i>	51
<i>amphetamine/dextroamph etamine 15mg er cap</i>	11	<i>aprepitant 80mg cap</i>	33	<i>asenapine 2.5mg sl tab</i>	51
<i>amphetamine/dextroamph etamine 15mg tab</i>	11	<i>apri tab 28-day pack</i>	69	<i>asenapine 5mg sl tab</i>	51
<i>amphetamine/dextroamph etamine 20mg er cap</i>	11	APTIVUS 250MG CAP	54	<i>ashlyna tab 91-day pack</i>	69
<i>amphetamine/dextroamph etamine 20mg tab</i>	11	<i>aranelle tab 28-day pack</i>	69	ASMANEX 100MCG HFA INHALER	19
<i>amphetamine/dextroamph etamine 25mg er cap</i>	11	ARCALYST 220MG INJ	79	ASMANEX 110MCG (30ACT) TWISTHALER	19
<i>amphetamine/dextroamph etamine 30mg er cap</i>	11	AREXVY 120MCG/0.5ML INJ	93	ASMANEX 200MCG HFA INHALER	20
<i>amphetamine/dextroamph etamine 30mg tab</i>	11	<i>arformoterol tartrate 15mcg/2ml neb soln</i>	20	ASMANEX 220MCG (120ACT) TWISTHALER	20
<i>amphetamine/dextroamph etamine 5mg er cap</i>	11	ARIKAYCE 590MG/8.4ML INH SUSP	12	ASMANEX 220MCG (30ACT) TWISTHALER	20
<i>amphetamine/dextroamph etamine 7.5mg tab</i>	11	<i>aripiprazole 10mg odt</i>	53	ASMANEX 220MCG (60ACT) TWISTHALER	20
AMPHOTERICIN B 50MG INJ	33	<i>aripiprazole 10mg tab</i>	53	ASMANEX 50MCG HFA INHALER	20
<i>ampicillin 1000mg inj</i>	84	<i>aripiprazole 15mg odt</i>	53	<i>aspirin/dipyridamole 25-200mg er cap</i>	75
<i>ampicillin 100mg/ml inj</i>	84	<i>aripiprazole 15mg tab</i>	53	<i>atazanavir 150mg cap</i>	54
<i>ampicillin 500mg cap</i>	84	<i>aripiprazole 1mg/ml oral soln</i>	53	<i>atazanavir 200mg cap</i>	54
<i>ampicillin/sulbactam 1000-500mg inj</i>	85	<i>aripiprazole 20mg tab</i>	53	<i>atazanavir 300mg cap</i>	54
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	85	<i>aripiprazole 2mg tab</i>	53	<i>atenolol 100mg tab</i>	57
<i>ampicillin/sulbactam 2000-1000mg inj</i>	85	<i>aripiprazole 30mg tab</i>	53	<i>atenolol 25mg tab</i>	57
<i>anagrelide 0.5mg cap</i>	75	<i>aripiprazole 5mg tab</i>	53	<i>atenolol 50mg tab</i>	57
<i>anagrelide 1mg cap</i>	75	ARISTADA 1064MG/3.9ML SYRINGE	53	<i>atenolol/chlorthalidone 100-25mg tab</i>	37
<i>anastrozole 1mg tab</i>	42	ARISTADA 441MG/1.6ML SYRINGE	53	<i>atenolol/chlorthalidone 50-25mg tab</i>	37
ANORO ELLIPTA 62.5-25MCG POWDER INHALER	20	ARISTADA 662MG/2.4ML SYRINGE	53	<i>atomoxetine 100mg cap</i>	11
APRACLONIDINE 0.5% OPHTH SOLN	82	ARISTADA 675MG/2.4ML SYRINGE	53	<i>atomoxetine 10mg cap</i>	11
<i>aprepitant 125mg cap</i>	33	ARISTADA 882MG/3.2ML SYRINGE	53	<i>atomoxetine 18mg cap</i>	11
		<i>armodafinil 150mg tab</i>	11	<i>atomoxetine 25mg cap</i>	11
		<i>armodafinil 200mg tab</i>	11	<i>atomoxetine 40mg cap</i>	11
		<i>armodafinil 250mg tab</i>	11	<i>atomoxetine 60mg cap</i>	11
		<i>armodafinil 50mg tab</i>	11	<i>atomoxetine 80mg cap</i>	11
		ARNUITY 100MCG POWDER INHALER	19	<i>atorvastatin 10mg tab</i>	34
		ARNUITY 200MCG POWDER INHALER	19	<i>atorvastatin 20mg tab</i>	34
				<i>atorvastatin 40mg tab</i>	34
				<i>atorvastatin 80mg tab</i>	34

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ALPHABETICAL LISTING OF DRUGS

<i>atovaquone 750mg/5ml oral susp</i>	39	<i>azathioprine 50mg tab</i>	79	<i>benazepril 40mg tab</i>	35
<i>atovaquone/proguanil 250-100mg tab</i>	40	<i>azelaic acid 15% gel</i>	66	<i>benazepril 5mg tab</i>	35
<i>atovaquone/proguanil 62.5-25mg tab</i>	40	<i>azelastine 0.05% ophth soln</i>	83	<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	37
<i>atropine sulfate 1% ophth soln</i>	83	<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	81	<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	37
<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	32	<i>azithromycin 20mg/ml oral susp</i>	38	<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	37
ATROVENT 17MCG HFA INHALER	19	<i>azithromycin 250mg pack (6)</i>	38	<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	37
<i>aubra tab 28-day pack</i>	69	<i>azithromycin 250mg tab</i>	38	BENLYSTA 200MG/ML	79
AUGTYRO 160MG CAP	43	<i>azithromycin 40mg/ml oral susp</i>	38	AUTO-INJECTOR	
AUGTYRO 40MG CAP	43	<i>azithromycin 500mg inj</i>	38	BENLYSTA 200MG/ML SYRINGE	79
AUSTEDO 12MG TAB	86	<i>azithromycin 500mg tab</i>	38	<i>benztropine mesylate 0.5mg tab</i>	48
AUSTEDO 6MG TAB	86	<i>azithromycin 500mg tab pack (3)</i>	38	<i>benztropine mesylate 1mg tab</i>	48
AUSTEDO 9MG TAB	86	<i>azithromycin 600mg tab</i>	38	<i>benztropine mesylate 2mg tab</i>	48
AUSTEDO XR 12MG TAE	86	<i>aztreonam 1gm inj</i>	38	BERINERT 500UNIT INJ	76
AUSTEDO XR 18MG TAE	86	<i>aztreonam 2gm inj</i>	38	BESREMI 500MCG/ML SYRINGE	47
AUSTEDO XR 24MG TAE	86	<i>azurette 28 day pack</i>	69	<i>betaine 1gm powder for oral soln</i>	68
AUSTEDO XR 30MG TAE	86	B		<i>betamethasone 0.05% aug cream</i>	64
AUSTEDO XR 36MG TAE	86	BACITRACIN 500UNIT/GM OPHTH OINTMENT	82	<i>betamethasone 0.05% aug lotion</i>	64
AUSTEDO XR 42MG TAE	86	<i>bacitracin/polymyxin b 0.5-10unit/mg ophth ointment</i>	82	<i>betamethasone 0.05% aug ointment</i>	64
AUSTEDO XR 48MG TAE	86	<i>baclofen 10mg tab</i>	80	<i>betamethasone 0.05% cream</i>	64
AUSTEDO XR 6MG TAB	86	<i>baclofen 20mg tab</i>	80	BETAMETHASONE 0.05% GEL	64
AUSTEDO XR TAB ONCI DAILY 4 WEEK TITRATION PACK	86	<i>baclofen 5mg tab</i>	81	<i>betamethasone 0.05% lotion</i>	64
AUVELITY 105-45MG ER TAB	26	<i>balsalazide disodium 750mg cap</i>	74	<i>betamethasone 0.05% ointment</i>	64
<i>aviane tab 28-day pack</i>	69	BALVERSA 3MG TAB	43	<i>betamethasone 0.1% cream</i>	64
AVMAPKI/FAKZYNJA CO-PACK (66)	42	BALVERSA 4MG TAB	43	<i>betamethasone 0.1% ointment</i>	64
AVONEX 30MCG/0.5ML	87	BALVERSA 5MG TAB	43		
AUTO-INJECTOR		<i>balziva tab 28-day pack</i>	69		
AVONEX 30MCG/0.5ML SYRINGE	87	BAQSIMI 3MG/DOSE NASAL POWDER	30		
AYVAKIT 100MG TAB	47	BCG LIVE TICE STRAIN 50MG INJ	93		
AYVAKIT 200MG TAB	47	<i>benazepril 10mg tab</i>	35		
AYVAKIT 25MG TAB	47	<i>benazepril 20mg tab</i>	35		
AYVAKIT 300MG TAB	47				
AYVAKIT 50MG TAB	47				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 09/01/2025

ALPHABETICAL LISTING OF DRUGS

BETAMETHASONE 0.1% TOPICAL LOTION	64	<i>bisoprolol</i>	37	BRIVIACT 10MG TAB	23
BETASERON 0.3MG INJ	87	<i>fumarate/hydrochlorothia</i>		BRIVIACT 10MG/ML	23
BETAXOLOL 0.5% OPHTH SOLN	82	<i>zide 5-6.25mg tab</i>		ORAL SOLN	
<i>betaxolol 10mg tab</i>	57	<i>blisovi 21 fe tab 1.5/30</i>	69	BRIVIACT 25MG TAB	23
<i>betaxolol 20mg tab</i>	57	<i>28-day pack</i>		BRIVIACT 50MG TAB	23
<i>bethanechol chloride</i>	93	<i>blisovi 24 fe tab 1/20</i>	69	BRIVIACT 75MG TAB	23
<i>10mg tab</i>		<i>28-day pack</i>		<i>bromocriptine 2.5mg tab</i>	48
<i>bethanechol chloride</i>	93	BOOSTRIX INJ	91	<i>bromocriptine 5mg cap</i>	48
<i>25mg 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>50mg tab</i>		<i>bosentan 62.5mg tab</i>	89	<i>inh susp</i>	
<i>bethanechol chloride 5mg</i>	93	BOSULIF 100MG CAP	43	<i>budesonide 0.5mg/2ml</i>	20
<i>tab</i>		BOSULIF 100MG TAB	43	<i>inh susp</i>	
<i>bexarotene 1% gel</i>	63	BOSULIF 400MG TAB	43	<i>budesonide 1mg/2ml inh</i>	20
<i>bexarotene 75mg cap</i>	47	BOSULIF 500MG TAB	43	<i>susp</i>	
BEXSERO SYRINGE	93	BOSULIF 50MG CAP	43	<i>budesonide 2mg/act</i>	16
<i>bicalutamide 50mg tab</i>	42	BRAFTOVI 75MG CAP	43	<i>rectal foam</i>	
BICILLIN L-A	84	BREO ELLIPTA	20	<i>budesonide 3mg dr cap</i>	61
1200000UNIT/2ML		100-25MCG POWDER		<i>budesonide 9mg er tab</i>	61
SYRINGE		INHALER		<i>budesonide/formoterol</i>	20
BICILLIN L-A	84	BREO ELLIPTA	20	<i>fumarate 160-45mcg</i>	
2400000UNIT/4ML		200-25MCG POWDER		<i>inhaler</i>	
SYRINGE		INHALER		<i>budesonide/formoterol</i>	20
BICILLIN L-A	84	BREO ELLIPTA	20	<i>fumarate 80-45mcg</i>	
600000UNIT/ML		50-25MCG POWDER		<i>inhaler</i>	
SYRINGE		INHALER		<i>bumetanide 0.25mg/ml inj</i>	66
BIKTARVY 30-120-15MG	54	<i>breyna 160-4.5mcg/act</i>	20	<i>bumetanide 0.5mg tab</i>	66
TAB		<i>inhaler</i>		<i>bumetanide 1mg tab</i>	67
BIKTARVY 50-200-25MG	54	<i>breyna 80-4.5mcg/act</i>	20	<i>bumetanide 2mg tab</i>	67
TAB		<i>inhaler</i>		<i>buprenorphine 10mcg/hr</i>	16
<i>bimatoprost 0.03% ophth</i>	83	BREZTRI AEROSPHERE	20	<i>weekly patch</i>	
<i>soln</i>		160-9-4.8MCG/ACT		<i>buprenorphine 15mcg/hr</i>	16
<i>bisoprolol fumarate 10mg</i>	57	INHALER		<i>weekly patch</i>	
<i>tab</i>		<i>brilleyln tab 28-day pack</i>	69	<i>buprenorphine 20mcg/hr</i>	16
<i>bisoprolol fumarate 5mg</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</i>	37	<i>brimonidine tartrate</i>	82	<i>buprenorphine 5mcg/hr</i>	16
<i>fumarate/hydrochlorothia</i>		<i>0.15% ophth soln</i>		<i>weekly patch</i>	
<i>zide 10-6.25mg tab</i>		<i>brimonidine tartrate</i>	82	<i>buprenorphine 7.5mcg/hr</i>	16
<i>bisoprolol</i>	37	<i>0.2% ophth soln</i>		<i>weekly patch</i>	
<i>fumarate/hydrochlorothia</i>		<i>brimonidine</i>	82	<i>buprenorphine 8mg sl tab</i>	16
<i>zide 2.5-6.25mg tab</i>		<i>tartrate/timolol 0.2-0.5%</i>		<i>buprenorphine/naloxone</i>	16
		<i>ophth soln</i>		<i>12-3mg sl film</i>	
		BRIVIACT 100MG TAB	23		

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: 09/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>buprenorphine/naloxone</i>	16	CALQUENCE 100MG	43	<i>carbamazepine 300mg er</i>	23
<i>2-0.5mg sl film</i>		CAP		<i>cap</i>	
<i>buprenorphine/naloxone</i>	16	CALQUENCE 100MG	43	<i>carbamazepine 400mg er</i>	23
<i>2-0.5mg sl tab</i>		TAB		<i>tab</i>	
<i>buprenorphine/naloxone</i>	16	<i>camila 0.35mg tab 28-day</i>	85	<i>carbidopa 25mg tab</i>	48
<i>4-1mg sl film</i>		<i>pack</i>		<i>carbidopa/entacapone/le</i>	48
<i>buprenorphine/naloxone</i>	16	<i>camreselo tab 91-day</i>	69	<i>vodopa 12.5-200-50mg</i>	
<i>8-2mg sl film</i>		<i>pack</i>		<i>tab</i>	
<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>	48
<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>	48
<i>buspirone 7.5mg tab</i>	17	<i>captopril 50mg tab</i>	35	<i>25-100mg er tab</i>	
		<i>carbamazepine 100mg</i>	23	CARBIDOPA/LEVODOPA	48
C		<i>chew tab</i>		25-100MG ODT	
<i>cabergoline 0.5mg tab</i>	69	<i>carbamazepine 100mg er</i>	23	<i>carbidopa/levodopa</i>	48
CABOMETYX 20MG TAE	43	<i>cap</i>		<i>25-100mg tab</i>	
CABOMETYX 40MG TAE	43	<i>carbamazepine 100mg er</i>	23	CARBIDOPA/LEVODOPA	49
CABOMETYX 60MG TAE	43	<i>tab</i>		25-250MG ODT	
<i>calcipotriene 0.005%</i>	63	<i>carbamazepine 200mg er</i>	23	<i>carbidopa/levodopa</i>	49
<i>cream</i>		<i>cap</i>		<i>25-250mg tab</i>	
<i>calcipotriene 0.005%</i>	64	<i>carbamazepine 200mg er</i>	23	<i>carbidopa/levodopa</i>	49
<i>ointment</i>		<i>tab</i>		<i>50-200mg er tab</i>	
CALCIPOTRIENE 0.005%	64	<i>carbamazepine 200mg</i>	23	<i>carglumic acid 200mg tab</i>	68
TOPICAL SOLN		<i>tab</i>		<i>for oral susp</i>	
<i>calcitriol 0.25mcg cap</i>	68	<i>carbamazepine 20mg/ml</i>	23	<i>carisoprodol 350mg tab</i>	81
<i>calcitriol 0.5mcg cap</i>	68	<i>oral susp</i>		CARTEOLOL 1% OPHTH	82
<i>calcitriol 1mcg/ml oral</i>	68			SOLN	
<i>soln</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: 09/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>cartia 120mg er (24hr)</i>	58	CEFPODOXIME	61	CHLOROQUINE	40
<i>cap</i>		10MG/ML ORAL SUSP		PHOSPHATE 250MG TAB	
<i>cartia 180mg er (24hr)</i>	58	<i>cefpodoxime 200mg tab</i>	61	<i>chloroquine phosphate</i>	40
<i>cap</i>		CEFPODOXIME	61	<i>500mg tab</i>	
<i>cartia 240mg er (24hr)</i>	58	20MG/ML ORAL SUSP		<i>chlorpromazine 100mg</i>	52
<i>cap</i>		<i>cefprozil 250mg tab</i>	60	<i>tab</i>	
<i>cartia 300mg er (24hr)</i>	58	<i>cefprozil 25mg/ml oral</i>	60	CHLORPROMAZINE	52
<i>cap</i>		<i>susp</i>		100MG/ML ORAL SOLN	
<i>carvedilol 12.5mg tab</i>	57	<i>cefprozil 500mg tab</i>	60	<i>chlorpromazine 10mg tab</i>	52
<i>carvedilol 25mg tab</i>	57	<i>cefprozil 50mg/ml oral</i>	60	<i>chlorpromazine 200mg</i>	52
<i>carvedilol 3.125mg tab</i>	57	<i>susp</i>		<i>tab</i>	
<i>carvedilol 6.25mg tab</i>	57	<i>ceftazidime 1gm inj</i>	61	<i>chlorpromazine 25mg tab</i>	52
<i>caspofungin acetate 50mg</i>	33	CEFTAZIDIME	61	CHLORPROMAZINE	52
<i>inj</i>		200MG/ML INJ		30MG/ML ORAL SOLN	
<i>caspofungin acetate 70mg</i>	33	<i>ceftazidime 2gm inj</i>	61	<i>chlorpromazine 50mg tab</i>	52
<i>inj</i>		<i>ceftriaxone 10gm inj</i>	61	<i>chlorthalidone 25mg tab</i>	67
CAYSTON 75MG/ML INH	88	<i>ceftriaxone 1gm inj</i>	61	<i>chlorthalidone 50mg tab</i>	67
SOLN		<i>ceftriaxone 250mg inj</i>	61	<i>chlorzoxazone 500mg tab</i>	81
CEFACLOR 250MG CAP	60	<i>ceftriaxone 2gm inj</i>	61	<i>cholestyramine resin</i>	34
CEFACLOR 500MG CAP	60	<i>ceftriaxone 500mg inj</i>	61	<i>(sugar-free) 4gm powder</i>	
<i>cefadroxil 100mg/ml oral</i>	60	<i>cefuroxime 1500mg inj</i>	60	<i>for oral susp</i>	
<i>susp</i>		<i>cefuroxime 250mg tab</i>	60	<i>cholestyramine resin 4gm</i>	34
<i>cefadroxil 500mg cap</i>	60	<i>cefuroxime 500mg tab</i>	60	<i>powder for oral susp</i>	
<i>cefadroxil 50mg/ml oral</i>	60	<i>cefuroxime 750mg inj</i>	60	<i>ciclopirox 0.77% cream</i>	63
<i>susp</i>		<i>celecoxib 100mg cap</i>	13	<i>ciclopirox 0.77% gel</i>	63
<i>cefazolin 1000mg inj</i>	60	<i>celecoxib 200mg cap</i>	13	<i>ciclopirox 0.77% lotion</i>	63
<i>cefazolin 200mg/ml inj</i>	60	<i>celecoxib 400mg cap</i>	13	<i>ciclopirox 1% shampoo</i>	63
<i>cefazolin 500mg inj</i>	60	<i>celecoxib 50mg cap</i>	13	<i>ciclopirox 8% topical soln</i>	63
<i>cefdinir 25mg/ml oral</i>	60	<i>cephalexin 250mg cap</i>	60	CILASTATIN/IMIPENEM	39
<i>susp</i>		<i>cephalexin 25mg/ml oral</i>	60	250-250MG INJ	
<i>cefdinir 300mg cap</i>	60	<i>susp</i>		<i>cilastatin/imipenem</i>	39
<i>cefdinir 50mg/ml oral</i>	60	<i>cephalexin 500mg cap</i>	60	<i>500-500mg inj</i>	
<i>susp</i>		<i>cephalexin 50mg/ml oral</i>	60	<i>cilostazol 100mg tab</i>	75
<i>cefepime 1000mg inj</i>	38	<i>susp</i>		<i>cilostazol 50mg tab</i>	75
<i>cefepime 2000mg inj</i>	38	<i>cevimeline 30mg cap</i>	62	CIMDUO 300-300MG	54
<i>cefixime 20mg/ml oral</i>	60	CHEMET 100MG CAP	79	TAB	
<i>susp</i>		<i>chlordiazepoxide 10mg</i>	18	<i>cimetidine 200mg tab</i>	92
<i>cefixime 400mg cap</i>	60	<i>cap</i>		<i>cimetidine 300mg tab</i>	92
<i>cefixime 40mg/ml oral</i>	60	<i>chlordiazepoxide 25mg</i>	18	<i>cimetidine 400mg tab</i>	92
<i>susp</i>		<i>cap</i>		<i>cimetidine 800mg tab</i>	92
<i>cefoxitin 1gm inj</i>	60	<i>chlordiazepoxide 5mg cap</i>	18	CIMZIA 200MG INJ	13
<i>cefoxitin 200mg/ml inj</i>	60	<i>chlorhexidine gluconate</i>	62	CIMZIA 200MG/ML	13
<i>cefoxitin 2gm inj</i>	60	<i>0.12% mouthwash</i>		SYRINGE	
<i>cefpodoxime 100mg tab</i>	60			<i>cinacalcet 30mg tab</i>	68

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ALPHABETICAL LISTING OF DRUGS

<i>cinacalcet 60mg tab</i>	68	<i>clindamycin 600mg/50ml</i>	38	<i>clonazepam 1mg odt</i>	22
<i>cinacalcet 90mg tab</i>	68	<i>inj</i>		<i>clonazepam 1mg tab</i>	22
<i>ciprofloxacin 0.3% ophth soln</i>	82	<i>clindamycin 75mg cap</i>	38	<i>clonazepam 2mg odt</i>	22
<i>ciprofloxacin 250mg tab</i>	73	<i>clindamycin 75mg/5ml</i>	38	<i>clonazepam 2mg tab</i>	22
CIPROFLOXACIN	73	<i>oral soln</i>		<i>clonidine 0.1mg er tab</i>	11
2MG/ML INJ		<i>clindamycin 900mg/50ml</i>	38	<i>clonidine 0.1mg tab</i>	36
<i>ciprofloxacin 500mg tab</i>	73	<i>inj</i>		<i>clonidine 0.1mg/24hr</i>	36
<i>ciprofloxacin 750mg tab</i>	73	<i>clindamycin 900mg/6ml</i>	38	<i>weekly patch</i>	
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	84	<i>inj</i>		<i>clonidine 0.2mg tab</i>	36
<i>citalopram 10mg tab</i>	27	CLINIMIX 4.25/10 INJ	81	<i>clonidine 0.2mg/24hr</i>	36
<i>citalopram 20mg tab</i>	27	CLINIMIX 4.25/5 INJ	81	<i>weekly patch</i>	
<i>citalopram 2mg/ml oral soln</i>	27	CLINIMIX 5/15 INJ	81	<i>clonidine 0.3mg tab</i>	36
<i>citalopram 40mg tab</i>	27	CLINIMIX 5/20 INJ	81	<i>clonidine 0.3mg/24hr</i>	36
<i>claravis 10mg cap</i>	62	<i>clinisol 15% inj</i>	81	<i>weekly patch</i>	
<i>claravis 20mg cap</i>	62	<i>clobazam 10mg tab</i>	22	<i>clopidogrel 75mg tab</i>	75
<i>claravis 30mg cap</i>	62	<i>clobazam 2.5mg/ml oral susp</i>	22	<i>clorazepate dipotassium 15mg tab</i>	18
<i>claravis 40mg cap</i>	62	<i>clobazam 20mg tab</i>	22	<i>clorazepate dipotassium 3.75mg tab</i>	18
<i>clarithromycin 250mg tab</i>	38	<i>clobetasol propionate 0.05% cream</i>	64	<i>clorazepate dipotassium 7.5mg tab</i>	18
CLARITHROMYCIN	38	<i>clobetasol propionate 0.05% e cream</i>	64	<i>clotrimazole 1% cream</i>	63
25MG/ML ORAL SUSP		<i>clobetasol propionate 0.05% foam</i>	64	<i>clotrimazole 10mg lozenge</i>	62
<i>clarithromycin 500mg tab</i>	38	<i>clobetasol propionate 0.05% gel</i>	64	<i>clotrimazole/betamethasone 1-0.05% cream</i>	63
CLARITHROMYCIN	38	<i>clobetasol propionate 0.05% lotion</i>	64	<i>clozapine 100mg odt</i>	51
50MG/ML ORAL SUSP		<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% shampoo</i>	64	CLOZAPINE 12.5MG ODT	51
<i>clindamycin 1% gel</i>	62	<i>clobetasol propionate 0.05% topical soln</i>	64	<i>clozapine 150mg odt</i>	51
<i>clindamycin 1% gel (twice-daily)</i>	62	<i>clobetasol propionate 0.05% topical spray</i>	65	<i>clozapine 200mg odt</i>	51
<i>clindamycin 1% lotion</i>	62	<i>clodan 0.05% shampoo</i>	65	<i>clozapine 200mg tab</i>	51
<i>clindamycin 1% pad</i>	62	<i>clomipramine 25mg cap</i>	28	<i>clozapine 25mg odt</i>	51
<i>clindamycin 1% topical soln</i>	62	<i>clomipramine 50mg cap</i>	28	<i>clozapine 25mg tab</i>	51
<i>clindamycin 150mg cap</i>	38	<i>clomipramine 75mg cap</i>	28	<i>clozapine 50mg tab</i>	52
<i>clindamycin 2% vaginal cream</i>	94	<i>clonazepam 0.125mg odt</i>	22	COARTEM 20-120MG TAB	40
<i>clindamycin 300mg cap</i>	38	<i>clonazepam 0.25mg odt</i>	22	COBENFY 20-100MG CAP	49
<i>clindamycin 300mg/2ml inj</i>	38	<i>clonazepam 0.5mg odt</i>	22	COBENFY 20-50MG CAP	49
<i>clindamycin 300mg/50ml inj</i>	38	<i>clonazepam 0.5mg tab</i>	22	COBENFY 30-125MG CAP	49
<i>clindamycin 600mg/4ml inj</i>	38				

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ALPHABETICAL LISTING OF DRUGS

COBENFY CAP 28-DAY STARTER KIT PACK (56)	49	COSENTYX UNOREADY 300MG/2ML	64	<i>cyproheptadine 0.4mg/ml oral soln</i>	88
<i>codeine</i>	15	AUTO-INJECTOR		<i>cyproheptadine 4mg tab</i>	88
<i>phosphate/acetaminophe n 15-300mg tab</i>		COTELLIC 20MG TAB	43	<i>cyred tab 28-day pack</i>	69
CODEINE	15	CREON	66	CYSTADANE 1GM POWDER FOR ORAL SOLN	68
PHOSPHATE/ACETAMIN OPHEN 2.4-24MG/ML		120000-24000-76000UNI T DR CAP		CYSTADROPS 0.37%	83
ORAL SOLN		CREON	66	OPHTH SOLN	
<i>codeine</i>	15	15000-3000-9500UNIT DR CAP		CYSTAGON 150MG CAP	74
<i>phosphate/acetaminophe n 30-300mg tab</i>		CREON	66	CYSTAGON 50MG CAP	74
<i>codeine</i>	15	180000-36000-114000U NIT DR CAP		CYSTARAN 0.44%	83
<i>phosphate/acetaminophe n 60-300mg tab</i>		CREON	66	OPHTH SOLN	
<i>colchicine 0.6mg tab</i>	74	30000-6000-19000UNIT DR CAP		D	
<i>colchicine/probenecid 0.5-500mg tab</i>	74	CREON	66	<i>dabigatran etexilate 110mg cap</i>	21
<i>colesevelam 625mg tab</i>	34	60000-12000-38000UNIT DR CAP		<i>dabigatran etexilate 150mg cap</i>	21
<i>colestipol 1gm tab</i>	34	<i>cromolyn sodium 20mg/ml oral soln</i>	73	<i>dabigatran etexilate 75mg cap</i>	21
<i>colestipol 5000mg granules for oral susp</i>	34	CROMOLYN SODIUM	83	<i>dalfampridine 10mg er tab</i>	87
<i>colistin 75mg/ml inj</i>	39	4% OPHTH SOLN		<i>danazol 100mg cap</i>	16
COMBIVENT	20	<i>cryselle tab 28-day pack</i>	69	<i>danazol 200mg cap</i>	16
20-100MCG/ACT		<i>cyclobenzaprine 10mg tab</i>	81	<i>danazol 50mg cap</i>	16
INHALER		<i>cyclobenzaprine 5mg tab</i>	81	<i>dantrolene sodium 100mg cap</i>	81
COMETRIQ CAP 100MG	43	CYCLOPHOSPHAMIDE	40	<i>dantrolene sodium 25mg cap</i>	81
DAILY DOSE PACK (56)		25MG TAB		<i>dantrolene sodium 50mg cap</i>	81
COMETRIQ CAP 140MG	43	CYCLOPHOSPHAMIDE	40	<i>dapsone 100mg tab</i>	40
DAILY DOSE PACK (112)		50MG TAB		<i>dapsone 25mg tab</i>	40
COMETRIQ CAP 60MG	43	<i>cyclosporine 0.05% ophth susp</i>	83	DAPTACEL INJ	91
DAILY DOSE PACK (84)		<i>cyclosporine 100mg cap</i>	79	<i>daptomycin 500mg inj</i>	39
<i>compro 25mg rectal supp</i>	52	<i>cyclosporine 25mg cap</i>	80	<i>darifenacin 15mg er tab</i>	92
<i>constulose 10gm/15ml oral soln</i>	76	<i>cyclosporine modified 100mg cap</i>	80	<i>darifenacin 7.5mg er tab</i>	92
COPIKTRA 15MG CAP	43	<i>cyclosporine modified 100mg/ml oral soln</i>	80	<i>darunavir 600mg tab</i>	54
COPIKTRA 25MG CAP	43	<i>cyclosporine modified 25mg cap</i>	80	<i>darunavir 800mg tab</i>	54
COSENTYX 150MG/ML	64	<i>cyclosporine modified 50mg cap</i>	80	<i>dasatinib 100mg tab</i>	43
AUTO-INJECTOR				<i>dasatinib 140mg tab</i>	43
COSENTYX 150MG/ML	64			<i>dasatinib 20mg tab</i>	43
SYRINGE				<i>dasatinib 50mg tab</i>	43
COSENTYX	64			<i>dasatinib 70mg tab</i>	43
75MG/0.5ML SYRINGE					

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: 09/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>dasatinib 80mg tab</i>	43	<i>desvenlafaxine succinate</i>	28	<i>diazepam 10mg/2ml</i>	22
DAURISMO 100MG TAB	41	<i>50mg er tab</i>		<i>rectal gel</i>	
DAURISMO 25MG TAB	42	DEXAMETHASONE	61	<i>diazepam 1mg/ml oral</i>	18
<i>deblitane 0.35mg tab</i>	85	0.1MG/ML ORAL SOLN		<i>soln</i>	
<i>28-day pack</i>		<i>dexamethasone 0.5mg tab</i>	61	DIAZEPAM	22
<i>deferasirox 180mg tab</i>	79	<i>dexamethasone 0.75mg</i>	61	2.5MG/0.5ML RECTAL	
<i>deferasirox 360mg tab</i>	79	<i>tab</i>		GEL	
<i>deferasirox 90mg tab</i>	79	<i>dexamethasone 1.5mg tab</i>	61	<i>diazepam 20mg/4ml</i>	22
DELSTRIGO	54	<i>dexamethasone 1mg tab</i>	61	<i>rectal gel</i>	
100-300-300MG TAB		<i>dexamethasone 2mg tab</i>	61	<i>diazepam 2mg tab</i>	18
DEPO-SUBQ PROVERA	85	<i>dexamethasone 4mg tab</i>	61	<i>diazepam 5mg tab</i>	18
104MG/0.65ML		<i>dexamethasone 6mg tab</i>	61	<i>diazepam 5mg/ml oral</i>	18
SYRINGE		DEXAMETHASONE	83	<i>soln</i>	
<i>depo-testosterone</i>	16	PHOSPHATE 0.1%		<i>diazoxide 50mg/ml oral</i>	30
<i>100mg/ml inj</i>		OPHTH SOLN		<i>susp</i>	
<i>depo-testosterone</i>	16	<i>dexamethasone/neomycin</i>	83	<i>diclofenac potassium</i>	13
<i>200mg/ml inj</i>		<i>/polymyxin b 0.1% ophth</i>		<i>50mg tab</i>	
DESCOVY 120-15MG	54	<i>ointment</i>		<i>diclofenac sodium 0.1%</i>	83
TAB		<i>dexamethasone/tobramyc</i>	83	<i>ophth soln</i>	
DESCOVY 200-25MG	54	<i>in 0.3-0.1% ophth susp</i>		<i>diclofenac sodium 1.5%</i>	13
TAB		<i>dexlansoprazole 30mg dr</i>	92	<i>topical soln</i>	
<i>desipramine 100mg tab</i>	28	<i>cap</i>		<i>diclofenac sodium 100mg</i>	13
<i>desipramine 10mg tab</i>	28	<i>dexlansoprazole 60mg dr</i>	92	<i>er tab</i>	
<i>desipramine 150mg tab</i>	28	<i>cap</i>		<i>diclofenac sodium 25mg</i>	13
<i>desipramine 25mg tab</i>	28	<i>dexmethylphenidate</i>	11	<i>dr tab</i>	
<i>desipramine 50mg tab</i>	28	<i>10mg tab</i>		<i>diclofenac sodium 3% gel</i>	63
<i>desipramine 75mg tab</i>	29	<i>dexmethylphenidate</i>	11	<i>diclofenac sodium 50mg</i>	14
<i>desloratadine 5mg tab</i>	88	<i>2.5mg tab</i>		<i>dr tab</i>	
<i>desmopressin acetate</i>	69	<i>dexmethylphenidate 5mg</i>	11	<i>diclofenac sodium 75mg</i>	14
<i>0.01% (0.01mg/act) nasal</i>		<i>tab</i>		<i>dr tab</i>	
<i>spray</i>		<i>dextroamphetamine</i>	11	<i>dicloxacillin 250mg cap</i>	85
<i>desmopressin acetate</i>	69	<i>sulfate 10mg tab</i>		<i>dicloxacillin 500mg cap</i>	85
<i>0.1mg tab</i>		<i>dextroamphetamine</i>	11	<i>dicyclomine 10mg cap</i>	91
<i>desmopressin acetate</i>	69	<i>sulfate 5mg tab</i>		<i>dicyclomine 20mg tab</i>	91
<i>0.2mg tab</i>		DEXTROSE 10% INJ	81	<i>dicyclomine 2mg/ml oral</i>	92
<i>desonide 0.05% ointment</i>	65	DIACOMIT 250MG CAP	23	<i>soln</i>	
<i>desoximetasone 0.25%</i>	65	DIACOMIT 250MG	23	DIFICID 200MG TAB	39
<i>cream</i>		POWDER FOR ORAL		DIFICID 40MG/ML ORAL	39
<i>desoximetasone 0.25%</i>	65	SUSP		SUSP	
<i>ointment</i>		DIACOMIT 500MG CAP	23	<i>diflunisal 500mg tab</i>	14
<i>desvenlafaxine succinate</i>	28	DIACOMIT 500MG	23	<i>difluprednate 0.05%</i>	83
<i>100mg er tab</i>		POWDER FOR ORAL		<i>ophth susp</i>	
<i>desvenlafaxine succinate</i>	28	SUSP		<i>digoxin 0.125mg tab</i>	59
<i>25mg er tab</i>		<i>diazepam 10mg tab</i>	18	<i>digoxin 0.25mg tab</i>	59

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 09/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>dihydroergotamine</i>	77	<i>divalproex sodium 125mg</i>	26	<i>doxazosin 8mg tab</i>	36
<i>mesylate 0.5mg/act nasal</i>		<i>dr tab</i>		<i>doxepin 100mg cap</i>	29
<i>inhaler</i>		<i>divalproex sodium 250mg</i>	26	<i>doxepin 10mg cap</i>	29
<i>dilt 120mg er (24hr) cap</i>	58	<i>dr tab</i>		<i>doxepin 10mg/ml oral</i>	29
<i>dilt 180mg er (24hr) cap</i>	58	<i>divalproex sodium 250mg</i>	26	<i>soln</i>	
<i>dilt 240mg er (24hr) cap</i>	58	<i>er tab</i>		<i>doxepin 150mg cap</i>	29
<i>diltiazem 120mg er (12hr)</i>	58	<i>divalproex sodium 500mg</i>	26	<i>doxepin 25mg cap</i>	29
<i>cap</i>		<i>dr tab</i>		<i>doxepin 50mg cap</i>	29
<i>diltiazem 120mg er (24hr)</i>	58	<i>divalproex sodium 500mg</i>	26	<i>doxepin 75mg cap</i>	29
<i>cap</i>		<i>er tab</i>		<i>doxy 100mg inj</i>	89
<i>diltiazem 120mg tab</i>	58	<i>dofetilide 0.125mg cap</i>	18	<i>doxycycline hyclate</i>	90
<i>diltiazem 180mg er (24hr)</i>	58	<i>dofetilide 0.25mg cap</i>	19	<i>100mg cap</i>	
<i>cap</i>		<i>dofetilide 0.5mg cap</i>	19	<i>doxycycline hyclate</i>	90
<i>diltiazem 240mg er (24hr)</i>	58	<i>donepezil 10mg odt</i>	86	<i>100mg inj</i>	
<i>cap</i>		<i>donepezil 10mg tab</i>	86	<i>doxycycline hyclate</i>	90
<i>diltiazem 300mg er (24hr)</i>	58	<i>donepezil 23mg tab</i>	86	<i>100mg tab</i>	
<i>cap</i>		<i>donepezil 5mg odt</i>	86	<i>doxycycline hyclate 20mg</i>	90
<i>diltiazem 30mg tab</i>	58	<i>donepezil 5mg tab</i>	86	<i>tab</i>	
<i>diltiazem 360mg er (24hr)</i>	58	DOPTelet 20MG TAB	75	<i>doxycycline hyclate 50mg</i>	90
<i>cap</i>		DOPTelet TAB 40MG	75	<i>cap</i>	
<i>diltiazem 420mg er (24hr)</i>	58	DAILY DOSE PACK (10)		<i>doxycycline monohydrate</i>	90
<i>cap</i>		DOPTelet TAB 60MG	75	<i>100mg cap</i>	
<i>diltiazem 60mg er (12hr)</i>	58	DAILY DOSE PACK (15)		<i>doxycycline monohydrate</i>	90
<i>cap</i>		<i>dorzolamide 2% ophth</i>	83	<i>100mg tab</i>	
<i>diltiazem 60mg tab</i>	58	<i>soln</i>		<i>doxycycline monohydrate</i>	90
<i>diltiazem 90mg er (12hr)</i>	58	<i>dorzolamide/timolol</i>	82	<i>50mg cap</i>	
<i>cap</i>		<i>22.3-6.8mg/ml ophth soln</i>		<i>doxycycline monohydrate</i>	90
<i>diltiazem 90mg tab</i>	58	<i>dorzolamide/timolol</i>	82	<i>50mg tab</i>	
<i>dimethyl fumarate 120mg</i>	87	<i>maleate 2%-0.5% ophth</i>		<i>doxycycline monohydrate</i>	90
<i>dr cap</i>		<i>soln (preservative-free)</i>		<i>5mg/ml oral susp</i>	
<i>dimethyl fumarate</i>	87	<i>dotti 0.025mg/24hr twice</i>	72	DRIZALMA 20MG DR	28
<i>120mg/240mg cap starter</i>		<i>weekly patch</i>		SPRINKLE CAP	
<i>pack (60)</i>		<i>dotti 0.0375mg/24hr</i>	72	DRIZALMA 30MG DR	28
<i>dimethyl fumarate 240mg</i>	87	<i>twice weekly patch</i>		SPRINKLE CAP	
<i>dr cap</i>		<i>dotti 0.05mg/24hr twice</i>	72	DRIZALMA 40MG DR	28
<i>dipyridamole 25mg tab</i>	75	<i>weekly patch</i>		SPRINKLE CAP	
<i>dipyridamole 50mg tab</i>	75	<i>dotti 0.075mg/24hr twice</i>	72	DRIZALMA 60MG DR	28
<i>dipyridamole 75mg tab</i>	75	<i>weekly patch</i>		SPRINKLE CAP	
<i>disopyramide 100mg cap</i>	18	<i>dotti 0.1mg/24hr twice</i>	72	<i>dronabinol 10mg cap</i>	33
<i>disopyramide 150mg cap</i>	18	<i>weekly patch</i>		<i>dronabinol 2.5mg cap</i>	33
<i>disulfiram 250mg tab</i>	86	DOVATO 50-300MG TAB	54	<i>dronabinol 5mg cap</i>	33
<i>disulfiram 500mg tab</i>	86	<i>doxazosin 1mg tab</i>	36		
<i>divalproex sodium 125mg</i>	26	<i>doxazosin 2mg tab</i>	36		
<i>dr cap</i>		<i>doxazosin 4mg tab</i>	36		

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ALPHABETICAL LISTING OF DRUGS

<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	69	EFAVIRENZ/LAMIVUDIN E/TENOFOVIR DISOPROXIL FUMARATE 400-300-300MG TAB	54	EMSAM 9MG/24HR PATCH	26
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	69	<i>efavirenz/lamivudine/teno fovir disoproxil fumarate 600-300-300mg tab</i>	54	<i>emtricitabine 200mg cap</i>	54
<i>droxidopa 100mg cap</i>	59	ELECTROLYTE-148 SOLUTION	78	<i>emtricitabine/rilpivirine/t enofovir disoproxil fumarate 200-25-300mg tab</i>	54
<i>droxidopa 200mg cap</i>	59	ELIGARD 22.5MG SYRINGE	42	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	54
<i>droxidopa 300mg cap</i>	59	ELIGARD 30MG SYRINGE	42	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	54
DULERA 100-5MCG INHALER	20	ELIGARD 45MG SYRINGE	42	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	54
DULERA 200-5MCG INHALER	20	ELIGARD 7.5MG SYRINGE	42	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	54
DULERA 50-5MCG INHALER	20	ELIQUIS 2.5MG TAB	21	EMTRIVA 10MG/ML ORAL SOLN	54
<i>duloxetine 20mg dr cap</i>	28	ELIQUIS 5MG 30-DAY STARTER PACK (74)	21	<i>enalapril maleate 10mg tab</i>	35
<i>duloxetine 30mg dr cap</i>	28	ELIQUIS 5MG TAB	21	<i>enalapril maleate 2.5mg tab</i>	35
<i>duloxetine 60mg dr cap</i>	28	ELMIRON 100MG CAP	74	<i>enalapril maleate 20mg tab</i>	35
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	19	<i>eltrombopag 12.5mg powder for oral susp eltrombopag 12.5mg tab</i>	75	<i>enalapril maleate 5mg tab</i>	35
DUPIXENT 200MG/1.14ML SYRINGE	19	<i>eltrombopag 25mg powder for oral susp eltrombopag 25mg tab</i>	75	<i>enalapril</i>	37
DUPIXENT 300MG/2ML AUTO-INJECTOR	19	<i>eltrombopag 50mg tab</i>	75	<i>maleate/hydrochlorothiaz ide 10-25mg tab</i>	37
DUPIXENT 300MG/2ML SYRINGE	19	<i>eltrombopag 75mg tab</i>	75	<i>enalapril</i>	37
<i>dutasteride 0.5mg cap</i>	74	<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	69	<i>maleate/hydrochlorothiaz ide 5-12.5mg tab</i>	13
E		EMGALITY 100MG/ML SYRINGE	77	ENBREL 25MG/0.5ML INJ	13
<i>econazole nitrate 1% cream</i>	63	EMGALITY 120MG/ML AUTO-INJECTOR	77	ENBREL 25MG/0.5ML SYRINGE	13
EDURANT 25MG TAB	54	EMGALITY 120MG/ML SYRINGE	77	ENBREL 50MG/ML	13
<i>efavirenz 600mg tab</i>	54	EMSAM 12MG/24HR PATCH	26	AUTO-INJECTOR	
<i>efavirenz/emtricitabine/te nofovir disoproxil fumarate 600-200-300mg tab</i>	54	EMSAM 6MG/24HR PATCH	26	ENBREL 50MG/ML CARTRIDGE	13

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ALPHABETICAL LISTING OF DRUGS

ENBREL 50MG/ML SYRINGE	13	ENVARUSUS XR 1MG TAE	80	escitalopram 1mg/ml oral soln	27
endocet 10-325mg tab	15	ENVARUSUS XR 4MG TAE	80	escitalopram 20mg tab	27
endocet 2.5-325mg tab	15	EPIDIOLEX 100MG/ML	23	escitalopram 5mg tab	27
endocet 5-325mg tab	15	ORAL SOLN		eslicarbazepine acetate 200mg tab	23
endocet 7.5-325mg tab	15	epinephrine 0.15mg/0.3ml auto-injector (2pack)	20	eslicarbazepine acetate 400mg tab	23
ENERGIX-B 10MCG/0.5ML SYRINGE	93	epinephrine 0.3mg/0.3ml auto-injector (2pack)	20	eslicarbazepine acetate 600mg tab	23
ENERGIX-B 20MCG/ML INJ	93	epitol 200mg tab	23	eslicarbazepine acetate 800mg tab	23
ENERGIX-B 20MCG/ML SYRINGE	93	epplerenone 25mg tab	38	esomeprazole 20mg dr cap	92
enilloring 0.120-0.015mg/24hr vaginal system	69	epplerenone 50mg tab	38	esomeprazole 40mg dr cap	92
enoxaparin sodium 100mg/1ml syringe	22	EPRONTIA 25MG/ML ORAL SOLN	23	estarylla tab 28-day pack	69
enoxaparin sodium 120mg/0.8ml syringe	22	ERIVEDGE 150MG CAP	42	estradiol 0.0025mg/hr weekly patch	72
enoxaparin sodium 150mg/1ml syringe	22	ERLEADA 240MG TAB	42	estradiol 0.01% vaginal cream	94
enoxaparin sodium 30mg/0.3ml syringe	22	ERLEADA 60MG TAB	42	estradiol 0.01mg vaginal insert	94
enoxaparin sodium 40mg/0.4ml syringe	22	erlotinib 100mg tab	41	estradiol 0.01mg/24hr twice weekly patch	72
enoxaparin sodium 60mg/0.6ml syringe	22	erlotinib 150mg tab	41	estradiol 0.01mg/24hr weekly patch	72
enoxaparin sodium 80mg/0.8ml syringe	22	erlotinib 25mg tab	41	estradiol 0.025mg/24hr twice weekly patch	72
enpresse tab 28-day pack	69	errin 0.35mg tab 28-day pack	85	estradiol 0.025mg/24hr weekly patch	72
enskyce tab 28-day pack	69	ertapenem 1gm inj	39	estradiol 0.0375mg/24hr twice weekly patch	72
entacapone 200mg tab	48	ERY 2% PAD	62	estradiol 0.0375mg/24hr weekly patch	72
entecavir 0.5mg tab	56	erythromycin 0.5% ophth ointment	82	estradiol 0.05mg/24hr twice weekly patch	72
entecavir 1mg tab	56	erythromycin 2% gel	62	estradiol 0.05mg/24hr weekly patch	72
ENTRESTO 24-26MG TAB	59	erythromycin 2% topical soln	62	estradiol 0.075mg/24hr twice weekly patch	72
ENTRESTO 49-51MG TAB	59	erythromycin 250mg dr tab	39	estradiol 0.075mg/24hr weekly patch	72
ENTRESTO 97-103MG TAB	60	erythromycin 250mg tab	39	estradiol 0.075mg/24hr weekly patch	72
enulose 10gm/15ml oral soln	73	erythromycin 333mg dr tab	39	estradiol 0.075mg/24hr weekly patch	72
ENVARUSUS XR 0.75MG TAB	80	erythromycin 500mg dr tab	39	estradiol 0.5mg tab	73
		erythromycin 500mg tab	39		
		erythromycin	39		
		ethylsuccinate 40mg/ml oral susp			
		erythromycin	39		
		ethylsuccinate 80mg/ml oral susp			
		escitalopram 10mg tab	27		

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ALPHABETICAL LISTING OF DRUGS

<i>estradiol 1mg tab</i>	73	<i>ethinyl estradiol/ferrous</i>	70	<i>etodolac 300mg cap</i>	14
<i>estradiol 2mg tab</i>	73	<i>fumarate/norethindrone</i>		<i>etodolac 400mg tab</i>	14
<i>estradiol valerate</i>	73	<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>everolimus 0.25mg tab</i>	80
<i>40mg/ml inj</i>		<i>pack</i>		<i>everolimus 0.5mg tab</i>	80
<i>estradiol/norethindrone</i>	69	<i>ethinyl estradiol/inert</i>	70	<i>everolimus 0.75mg tab</i>	80
<i>acetate 0.5-0.1mg 28-day</i>		<i>ingredients/levonorgestre</i>		<i>everolimus 10mg tab</i>	43
<i>pack</i>		<i>l 0.03-1-0.15mg tab</i>		<i>everolimus 1mg tab</i>	80
<i>estradiol/norethindrone</i>	69	<i>28-day pack</i>		<i>everolimus 2.5mg tab</i>	43
<i>acetate 1-0.5mg 28-day</i>		<i>ethinyl estradiol/inert</i>	70	<i>everolimus 2mg tab for</i>	43
<i>pack</i>		<i>ingredients/levonorgestre</i>		<i>oral susp</i>	
<i>eszopiclone 1mg tab</i>	75	<i>l 0.03-1-0.15mg tab</i>		<i>everolimus 3mg tab for</i>	43
<i>eszopiclone 2mg tab</i>	76	<i>91-day pack</i>		<i>oral susp</i>	
<i>eszopiclone 3mg tab</i>	76	<i>ethinyl estradiol/inert</i>	70	<i>everolimus 5mg tab</i>	44
<i>ethambutol 100mg tab</i>	40	<i>ingredients/norgestimate</i>		<i>everolimus 5mg tab for</i>	44
<i>ethambutol 400mg tab</i>	40	<i>0.035-1-0.25mg tab</i>		<i>oral susp</i>	
<i>ethinyl estradiol/ethinyl</i>	70	<i>28-day pack</i>		<i>everolimus 7.5mg tab</i>	44
<i>estradiol/levonorgestrel</i>		<i>ethinyl</i>	70	EVOTAZ 300-150MG	54
<i>0.01-0.02-0.1mg tab</i>		<i>estradiol/norethindrone</i>		TAB	
<i>91-day pack</i>		<i>acetate 0.0025-0.5mg</i>		EVRYSDI 0.75MG/ML	81
<i>ethinyl estradiol/ethinyl</i>	70	<i>pack</i>		ORAL SOLN	
<i>estradiol/levonorgestrel</i>		<i>ethinyl</i>	70	EVRYSDI 5MG TAB	81
<i>0.01-0.03-0.15mg tab</i>		<i>estradiol/norethindrone</i>		<i>exemestane 25mg tab</i>	42
<i>91-day pack</i>		<i>acetate 0.005-1mg 28-day</i>		<i>ezetimibe 10mg tab</i>	33
<i>ethinyl</i>	70	<i>pack</i>			
<i>estradiol/ethynodiol</i>		<i>ethinyl</i>	70	F	
<i>diacetate/inert</i>		<i>estradiol/norethindrone</i>		<i>falmina tab 28-day pack</i>	70
<i>ingredients 0.035-1-1mg</i>		<i>acetate 0.02-1mg tab</i>		<i>famciclovir 125mg tab</i>	56
<i>tab 28-day pack</i>		<i>21-day pack</i>		<i>famciclovir 250mg tab</i>	56
<i>ethinyl</i>	70	<i>ethinyl</i>	70	<i>famciclovir 500mg tab</i>	56
<i>estradiol/ethynodiol</i>		<i>estradiol/norgestimate</i>		<i>famotidine 20mg tab</i>	92
<i>diacetate/inert</i>		<i>0.18-25/0.215-25/0.25-25</i>		<i>famotidine 40mg tab</i>	92
<i>ingredients 0.05-1-1mg</i>		<i>mg-mcg tab 28-day pack</i>		FANAPT 10MG TAB	50
<i>tab 28-day pack</i>		<i>ethinyl</i>	70	FANAPT 12MG TAB	50
<i>ethinyl</i>	70	<i>estradiol/norgestimate</i>		FANAPT 1MG TAB	50
<i>estradiol/etonogestrel</i>		<i>0.18-35/0.215-35/0.25-35</i>		FANAPT 2MG TAB	50
<i>0.120-0.015 mg/24hr</i>		<i>mg-mcg tab 28-day pack</i>		FANAPT 4MG TAB	50
<i>vaginal system</i>		<i>ethosuximide 250mg cap</i>	26	FANAPT 6MG TAB	50
		<i>ethosuximide 50mg/ml</i>	26	FANAPT 8MG TAB	50
		<i>oral soln</i>		FANAPT TAB TITRATION	50
		<i>etodolac 200mg cap</i>	14	PACK (8)	
				FARXIGA 10MG TAB	31

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: 09/01/2025

ALPHABETICAL LISTING OF DRUGS

FARXIGA 5MG TAB	31	FETZIMA ER CAP	28	<i>fluocinolone acetone</i>	65
FASENRA 10MG/0.5ML	19	TITRATION PACK (28)		<i>0.01% topical soln</i>	
SYRINGE		<i>finasteride 5mg tab</i>	74	<i>fluocinolone acetone</i>	65
FASENRA 30MG/ML	19	<i>finolimid 0.5mg cap</i>	87	<i>0.025% cream</i>	
AUTO-INJECTOR		FINTEPLA 2.2MG/ML	23	<i>fluocinolone acetone</i>	65
FASENRA 30MG/ML	19	ORAL SOLN		<i>0.025% ointment</i>	
SYRINGE		<i>finzala 24 fe chewable tab</i>	70	<i>fluocinonide 0.05% cream</i>	65
<i>febuxostat 40mg tab</i>	74	<i>28-day pack</i>		<i>fluocinonide 0.05% e</i>	65
<i>febuxostat 80mg tab</i>	74	FIRDAPSE 10MG TAB	40	<i>cream</i>	
<i>feirza 1.5/30 28-day pack</i>	70	FIRMAGON 120MG INJ	42	<i>fluocinonide 0.05% gel</i>	65
<i>feirza 1/20 28-day pack</i>	70	FIRMAGON 80MG INJ	42	<i>fluocinonide 0.05%</i>	65
<i>felbamate 120mg/ml oral</i>	25	<i>flac 0.01% otic soln</i>	83	<i>ointment</i>	
<i>susp</i>		<i>flavoxate 100mg tab</i>	93	<i>fluocinonide 0.05%</i>	65
<i>felbamate 400mg tab</i>	25	<i>flecainide acetate 100mg</i>	18	<i>topical soln</i>	
<i>felbamate 600mg tab</i>	25	<i>tab</i>		<i>fluocinonide 0.1% cream</i>	65
<i>felodipine 10mg er tab</i>	59	<i>flecainide acetate 150mg</i>	18	<i>fluorometholone 0.1%</i>	83
<i>felodipine 2.5mg er tab</i>	59	<i>tab</i>		<i>ophth susp</i>	
<i>felodipine 5mg er tab</i>	59	<i>flecainide acetate 50mg</i>	18	FLUOROURACIL 2%	63
<i>fenofibrate 134mg cap</i>	34	<i>tab</i>		TOPICAL SOLN	
<i>fenofibrate 145mg tab</i>	34	<i>fluconazole 100mg tab</i>	33	<i>fluorouracil 5% cream</i>	63
<i>fenofibrate 160mg tab</i>	34	<i>fluconazole 10mg/ml oral</i>	33	<i>fluorouracil 5% topical</i>	63
<i>fenofibrate 200mg cap</i>	34	<i>susp</i>		<i>soln</i>	
<i>fenofibrate 48mg tab</i>	34	<i>fluconazole 150mg tab</i>	33	<i>fluoxetine 10mg cap</i>	27
<i>fenofibrate 54mg tab</i>	34	<i>fluconazole 200mg tab</i>	33	<i>fluoxetine 20mg cap</i>	27
<i>fenofibrate 67mg cap</i>	34	<i>fluconazole 200mg/100ml</i>	33	<i>fluoxetine 40mg cap</i>	27
<i>fenofibric acid 135mg dr</i>	34	<i>inj</i>		<i>fluoxetine 4mg/ml oral</i>	27
<i>cap</i>		<i>fluconazole 400mg/200ml</i>	33	<i>soln</i>	
<i>fenofibric acid 45mg dr</i>	34	<i>inj</i>		<i>fluoxetine 60mg tab</i>	27
<i>cap</i>		<i>fluconazole 40mg/ml oral</i>	33	FLUPHENAZINE	52
<i>fentanyl 100mcg/hr patch</i>	14	<i>susp</i>		0.5MG/ML ORAL SOLN	
<i>fentanyl 12mcg/hr patch</i>	14	<i>fluconazole 50mg tab</i>	33	<i>fluphenazine 10mg tab</i>	52
<i>fentanyl 25mcg/hr patch</i>	14	<i>flucytosine 250mg cap</i>	33	<i>fluphenazine 1mg tab</i>	52
<i>fentanyl 50mcg/hr patch</i>	14	<i>flucytosine 500mg cap</i>	33	<i>fluphenazine 2.5mg tab</i>	52
<i>fentanyl 75mcg/hr patch</i>	14	<i>fludrocortisone acetate</i>	62	FLUPHENAZINE	52
<i>fesoterodine fumarate</i>	92	<i>0.1mg tab</i>		2.5MG/ML INJ	
<i>4mg er tab</i>		<i>flunisolide 25%</i>	81	<i>fluphenazine 5mg tab</i>	53
<i>fesoterodine fumarate</i>	92	<i>(25mcg/act) nasal inhaler</i>		FLUPHENAZINE	53
<i>8mg er tab</i>		<i>fluocinolone acetone</i>	65	5MG/ML ORAL SOLN	
FETZIMA 120MG ER	28	<i>0.01% cream</i>		<i>fluphenazine decanoate</i>	53
CAP		<i>fluocinolone acetone</i>	83	<i>25mg/ml inj</i>	
FETZIMA 20MG ER CAP	28	<i>0.01% otic soln</i>		FLURBIPROFEN 100MG	14
FETZIMA 40MG ER CAP	28	<i>fluocinolone acetone</i>	65	TAB	
FETZIMA 80MG ER CAP	28	<i>0.01% topical oil</i>			

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ALPHABETICAL LISTING OF DRUGS

FLURBIPROFEN	83	<i>fosamprenavir 700mg tab</i>	54	<i>galantamine 8mg tab</i>	86
SODIUM 0.03% OPTH		<i>fosfomycin 3gm powder</i>	39	<i>galantamine</i>	86
SOLN		<i>for oral soln</i>		<i>hydrobromide 16mg er cap</i>	
<i>fluticasone propionate 0.005% ointment</i>	65	<i>fosinopril sodium 10mg tab</i>	35	<i>galantamine</i>	86
<i>fluticasone propionate 0.05% cream</i>	65	<i>fosinopril sodium 20mg tab</i>	35	<i>hydrobromide 24mg er cap</i>	
FLUTICASONE	20	<i>fosinopril sodium 40mg tab</i>	35	GALANTAMINE	86
PROPIONATE 110MCG		<i>fosinopril</i>	37	HYDROBROMIDE	
INHALER		<i>sodium/hydrochlorothiazide 10-12.5mg tab</i>		4MG/ML ORAL SOLN	
FLUTICASONE	20	<i>fosinopril</i>	37	<i>galantamine</i>	86
PROPIONATE 220MCG		<i>sodium/hydrochlorothiazide 20-12.5mg tab</i>		<i>hydrobromide 8mg er cap</i>	
INHALER		FOTIVDA 0.89MG CAP	44	<i>gallifrey 5mg tab</i>	85
FLUTICASONE	20	FOTIVDA 1.34MG CAP	44	GAMUNEX 1GM/10ML	84
PROPIONATE 44MCG		FRUZAQLA 1MG CAP	41	INJ	
INHALER		FRUZAQLA 5MG CAP	41	GARDASIL 9 INJ	93
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	81	FUROSCIX 80MG/10ML	67	GARDASIL 9 SYRINGE	93
<i>fluticasone propionate/salmeterol 100-50mcg/act powder inhaler</i>	20	CARTRIDGE		GATTEX 5MG INJ	73
<i>fluticasone propionate/salmeterol 250-50mcg/act powder inhaler</i>	21	<i>furosemide 10mg/ml inj</i>	67	GAUZE PAD (2 X 2)	77
<i>fluticasone propionate/salmeterol 500-50mcg/act powder inhaler</i>	21	<i>furosemide 10mg/ml oral soln</i>	67	GAVILYTE-C POWDER	76
<i>fluvoxamine maleate 100mg tab</i>	27	<i>furosemide 20mg tab</i>	67	FOR ORAL SOLN	
<i>fluvoxamine maleate 25mg tab</i>	27	<i>furosemide 40mg tab</i>	67	<i>gavilyte-g powder for oral soln</i>	76
<i>fluvoxamine maleate 50mg tab</i>	27	<i>furosemide 80mg tab</i>	67	<i>gavilyte-n powder for oral soln</i>	76
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	22	FUROSEMIDE 8MG/ML	67	GAVRETO 100MG CAP	44
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	22	ORAL SOLN		<i>gefitinib 250mg tab</i>	41
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	22	<i>fyavolv 0.0025-0.5mg tab</i>	70	<i>gemfibrozil 600mg tab</i>	34
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	22	<i>fyavolv 0.005-1mg tab</i>	70	GEMTESA 75MG TAB	93
		FYCOMPA 0.5MG/ML	23	<i>generlac 10gm/15ml oral soln</i>	73
		ORAL SUSP		<i>gengraf 100mg cap</i>	80
		G		<i>gengraf 25mg cap</i>	80
		<i>gabapentin 100mg cap</i>	23	<i>gentamicin 0.1% cream</i>	63
		<i>gabapentin 300mg cap</i>	23	<i>gentamicin 0.1% ointment</i>	63
		<i>gabapentin 400mg cap</i>	23	<i>gentamicin 0.3% ophth soln</i>	82
		<i>gabapentin 50mg/ml oral soln</i>	23	GENTAMICIN 0.8MG/ML	12
		<i>gabapentin 600mg tab (Neurontin equiv)</i>	23	INJ	
		<i>gabapentin 800mg tab</i>	23	<i>gentamicin 1.2mg/ml inj</i>	12
		<i>galantamine 12mg tab</i>	86	GENTAMICIN 1.6MG/ML	12
		<i>galantamine 4mg tab</i>	86	INJ	
				GENTAMICIN 1MG/ML	12
				INJ	

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ALPHABETICAL LISTING OF DRUGS

<i>gentamicin 40mg/ml inj</i>	12	<i>glucose</i>	78	GLUCOSE/SODIUM	78
GENVOYA	55	<i>50mg/ml/potassium</i>		CHLORIDE	
150-150-200-10MG TAB		<i>chloride 0.02meq/ml inj</i>		25MG/ML-4.5MG/ML	
GILOTRIF 20MG TAB	41	<i>glucose</i>	78	INJ	
GILOTRIF 30MG TAB	41	<i>50mg/ml/potassium</i>		<i>glutamine 5000mg</i>	75
GILOTRIF 40MG TAB	41	<i>chloride</i>		<i>powder for oral soln</i>	
<i>glatiramer acetate</i>	87	<i>0.02meq/ml/sodium</i>		<i>glyburide 1.25mg tab</i>	32
<i>20mg/ml syringe</i>		<i>chloride 2.25mg/ml inj</i>		GLYBURIDE 1.5MG TAB	32
<i>glatiramer acetate</i>	87	<i>glucose</i>	78	<i>glyburide 2.5mg tab</i>	32
<i>40mg/ml syringe</i>		<i>50mg/ml/potassium</i>		GLYBURIDE 3MG TAB	32
<i>glatopa 20mg/ml syringe</i>	87	<i>chloride</i>		<i>glyburide 5mg tab</i>	32
<i>glatopa 40mg/ml syringe</i>	87	<i>0.02meq/ml/sodium</i>		GLYBURIDE 6MG TAB	32
GLEOSTINE 100MG CAP	40	<i>chloride 4.5mg/ml inj</i>		<i>glyburide/metformin</i>	29
GLEOSTINE 10MG CAP	41	<i>glucose</i>	78	<i>1.25-250mg tab</i>	
GLEOSTINE 40MG CAP	41	<i>50mg/ml/potassium</i>		<i>glyburide/metformin</i>	29
<i>glimepiride 1mg tab</i>	32	<i>chloride</i>		<i>2.5-500mg tab</i>	
<i>glimepiride 2mg tab</i>	32	<i>0.02meq/ml/sodium</i>		<i>glyburide/metformin</i>	29
<i>glimepiride 4mg tab</i>	32	<i>chloride 9mg/ml inj</i>		<i>5-500mg tab</i>	
<i>glipizide 10mg er tab</i>	32	<i>glucose</i>	78	<i>glycopyrrolate 1mg tab</i>	92
<i>glipizide 10mg tab</i>	32	<i>50mg/ml/potassium</i>		<i>glycopyrrolate 2mg tab</i>	92
<i>glipizide 2.5mg er tab</i>	32	<i>chloride</i>		GLYXAMBI 10-5MG TAB	29
<i>glipizide 5mg er tab</i>	32	<i>0.03meq/ml/sodium</i>		GLYXAMBI 25-5MG TAB	29
<i>glipizide 5mg tab</i>	32	<i>chloride 4.5mg/ml inj</i>		GOMEKLI 1MG CAP	44
<i>glipizide/metformin</i>	29	<i>glucose</i>	78	GOMEKLI 1MG TAB	44
<i>2.5-250mg tab</i>		<i>50mg/ml/potassium</i>		FOR ORAL SUSP	
<i>glipizide/metformin</i>	29	<i>chloride</i>		GOMEKLI 2MG CAP	44
<i>2.5-500mg tab</i>		<i>0.04meq/ml/sodium</i>		<i>granisetron 1mg tab</i>	32
<i>glipizide/metformin</i>	29	<i>chloride 4.5mg/ml inj</i>		<i>griseofulvin 125mg tab</i>	33
<i>5-500mg tab</i>		<i>glucose</i>	78	<i>griseofulvin 250mg tab</i>	33
GLUCOSE	78	<i>50mg/ml/potassium</i>		<i>griseofulvin 25mg/ml oral</i>	33
100MG/ML/SODIUM		<i>chloride</i>		<i>susp</i>	
CHLORIDE 2MG/ML INJ		<i>0.04meq/ml/sodium</i>		<i>griseofulvin 500mg tab</i>	33
GLUCOSE	78	<i>chloride 9mg/ml inj</i>		<i>guanfacine 1mg er tab</i>	11
100MG/ML/SODIUM		GLUCOSE	78	<i>guanfacine 1mg tab</i>	36
CHLORIDE 4.5MG/ML		50MG/ML/SODIUM		<i>guanfacine 2mg er tab</i>	11
INJ		CHLORIDE 2MG/ML INJ		<i>guanfacine 2mg tab</i>	36
<i>glucose 50mg/ml inj</i>	81	GLUCOSE	78	<i>guanfacine 3mg er tab</i>	11
<i>glucose</i>	78	50MG/ML/SODIUM		<i>guanfacine 4mg er tab</i>	11
<i>50mg/ml/potassium</i>		CHLORIDE 4.5MG/ML		GVOKE 0.5MG/0.1ML	30
<i>chloride</i>		INJ		AUTO-INJECTOR	
<i>0.01meq/ml/sodium</i>		<i>glucose 50mg/ml/sodium</i>	78	GVOKE 1MG/0.2ML	30
<i>chloride 4.5mg/ml inj</i>		<i>chloride 9mg/ml inj</i>		AUTO-INJECTOR	
				GVOKE 1MG/0.2ML INJ	30

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ALPHABETICAL LISTING OF DRUGS

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

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ALPHABETICAL LISTING OF DRUGS

hydrochlorothiazide/olme	37	hydrocortisone 2.5%	17	icatibant 10mg/ml syringe	76
sartan medoxomil		cream		iclevia tab 91-day pack	70
12.5-40mg tab		hydrocortisone 2.5%	65	ICLUSIG 10MG TAB	44
hydrochlorothiazide/olme	37	ointment		ICLUSIG 15MG TAB	44
sartan medoxomil		hydrocortisone 20mg tab	61	ICLUSIG 30MG TAB	44
25-40mg tab		hydrocortisone 5mg tab	61	ICLUSIG 45MG TAB	44
hydrochlorothiazide/spiro	66	HYDROCORTISONE	65	icosapent ethyl 1000mg	33
nolactone 25-25mg tab		LOTION 2.5%		cap	
hydrochlorothiazide/tria	66	hydromorphone 2mg tab	14	icosapent ethyl 500mg	34
terene 25-37.5mg cap		hydromorphone 4mg tab	15	cap	
hydrochlorothiazide/tria	66	hydromorphone 8mg tab	15	IDHIFA 100MG TAB	44
terene 25-37.5mg tab		hydroxychloroquine	40	IDHIFA 50MG TAB	44
hydrochlorothiazide/tria	66	sulfate 100mg tab		imatinib 100mg tab	44
terene 50-75mg tab		hydroxychloroquine	40	imatinib 400mg tab	44
hydrochlorothiazide/vals	37	sulfate 200mg tab		IMBRUVICA 140MG CAP	44
artan 12.5-160mg tab		hydroxychloroquine	40	IMBRUVICA 420MG TAB	44
hydrochlorothiazide/vals	38	sulfate 300mg tab		IMBRUVICA 70MG CAP	44
artan 12.5-320mg tab		hydroxychloroquine	40	IMBRUVICA 70MG/ML	44
hydrochlorothiazide/vals	38	sulfate 400mg tab		ORAL SUSP	
artan 12.5-80mg tab		hydroxyurea 500mg cap	47	imipramine 10mg tab	29
hydrochlorothiazide/vals	38	hydroxyzine 10mg tab	17	imipramine 25mg tab	29
artan 25-160mg tab		hydroxyzine 25mg tab	17	imipramine 50mg tab	29
hydrochlorothiazide/vals	38	hydroxyzine 2mg/ml oral	17	imiquimod 5% cream	66
artan 25-320mg tab		soln		IMKELDI 80MG/ML	44
hydrocodone	15	hydroxyzine 50mg tab	17	ORAL SOLN	
bitartrate/acetaminophen		HYDROXYZINE	17	IMOVAX 2.5UNIT/ML INJ	93
0.5-21.7mg/ml oral soln		PAMOATE 100MG CAP		incassia 0.35mg tab	85
hydrocodone	16	hydroxyzine pamoate	17	28-day pack	
bitartrate/acetaminophen		25mg cap		INCRELEX 40MG/4ML	69
10-325mg tab		hydroxyzine pamoate	17	INJ	
hydrocodone	16	50mg cap		INCRUSE ELLIPTA	19
bitartrate/acetaminophen				62.5MCG/INH POWDER	
5-325mg tab		I		INHALER	
hydrocodone	16	ibandronate 150mg tab	67	indapamide 1.25mg tab	67
bitartrate/acetaminophen		IBRANCE 100MG CAP	44	indapamide 2.5mg tab	67
7.5-325mg tab		IBRANCE 100MG TAB	44	indomethacin 25mg cap	14
hydrocodone	16	IBRANCE 125MG CAP	44	indomethacin 50mg cap	14
bitartrate/ibuprofen		IBRANCE 125MG TAB	44	indomethacin 75mg er	14
7.5-200mg tab		IBRANCE 75MG CAP	44	cap	
hydrocortisone 1% cream	65	IBRANCE 75MG TAB	44	INFANRIX SYRINGE	91
hydrocortisone 1.67mg/ml	16	ibu 600mg tab	14	INGREZZA 40MG CAP	87
enema		ibu 800mg tab	14	INGREZZA 40MG	87
hydrocortisone 10mg tab	61	ibuprofen 400mg tab	14	SPRINKLE CAP	
		ibuprofen 600mg tab	14	INGREZZA 60MG CAP	87
		ibuprofen 800mg tab	14		

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: 09/01/2025

ALPHABETICAL LISTING OF DRUGS

INGREZZA 60MG SPRINKLE CAP	87	INVEGA SUSTENNA 78MG/0.5ML SYRINGE	50	<i>isosorbide dinitrate 20mg tab</i>	17
INGREZZA 80MG CAP	87	INVEGA TRINZA 273MG/0.875ML SYRINGE	50	<i>isosorbide dinitrate 30mg tab</i>	17
INGREZZA 80MG SPRINKLE CAP	87	INVEGA TRINZA 410MG/1.315ML	51	<i>isosorbide dinitrate 5mg tab</i>	17
INGREZZA CAP THERAPY PACK (28)	87	SYRINGE		ISOSORBIDE MONONITRATE 10MG TAB	17
INLYTA 1MG TAB	41	INVEGA TRINZA 546MG/1.75ML SYRINGE	51	<i>isosorbide mononitrate 120mg er tab</i>	17
INLYTA 5MG TAB	41	INVEGA TRINZA 819MG/2.625ML SYRINGE	51	ISOSORBIDE MONONITRATE 20MG TAB	17
INQOVI 35-100MG TAB PACK (5)	42	IPOL INJ	93	<i>isosorbide mononitrate 30mg er tab</i>	17
INREBIC 100MG CAP	44	<i>ipratropium bromide 0.02% inh soln</i>	19	<i>isosorbide mononitrate 60mg er tab</i>	17
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	31	<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	81	<i>isotretinoin 10mg cap</i>	62
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	31	<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	81	<i>isotretinoin 20mg cap</i>	62
INSULIN LISPRO 100UNIT/ML INJ	77	<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	21	<i>isotretinoin 30mg cap</i>	62
INSULIN PEN NEEDLE	77	<i>irbesartan 150mg tab</i>	36	<i>isotretinoin 40mg cap</i>	62
INSULIN SYRINGE	77	<i>irbesartan 300mg tab</i>	36	<i>isradipine 2.5mg cap</i>	59
INSULIN SYRINGE (DISP) U-100 0.3ML	77	<i>irbesartan 75mg tab</i>	36	<i>isradipine 5mg cap</i>	59
INSULIN SYRINGE (DISP) U-100 1/2ML	77	ISENTRESS 100MG CHEW TAB	55	ITOVEBI 3MG TAB	44
INSULIN SYRINGE (DISP) U-100 1ML	77	ISENTRESS 100MG GRANULES FOR ORAL SUSP	55	ITOVEBI 9MG TAB	44
INTELENCE 25MG TAB	55	ISENTRESS 25MG CHEW TAB	55	<i>itraconazole 100mg cap</i>	33
<i>introvale tab 91-day pack</i>	70	ISENTRESS 400MG TAB	55	<i>ivabradine 5mg tab</i>	60
INVEGA HAFYERA 1092MG/3.5ML SYRINGE	50	ISENTRESS 600MG TAB	55	<i>ivabradine 7.5mg tab</i>	60
INVEGA HAFYERA 1560MG/5ML SYRINGE	50	<i>isibloom tab 28-day pack</i>	70	<i>ivermectin 3mg tab</i>	17
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	50	<i>isoniazid 100mg tab</i>	40	IWILFIN 192MG TAB	48
INVEGA SUSTENNA 156MG/ML SYRINGE	50	<i>isoniazid 10mg/ml oral soln</i>	40	IXCHIQ INJ	93
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	50	<i>isoniazid 300mg tab</i>	40	IXIARO 0.012MG/ML SYRINGE	93
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	50	<i>isosorbide dinitrate 10mg tab</i>	17		

J

<i>jaimiess tab 91-day pack</i>	70
JAKAFI 10MG TAB	44
JAKAFI 15MG TAB	44
JAKAFI 20MG TAB	44
JAKAFI 25MG TAB	44
JAKAFI 5MG TAB	44
<i>jantoven 10mg tab</i>	21
<i>jantoven 1mg tab</i>	21
<i>jantoven 2.5mg tab</i>	21

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ALPHABETICAL LISTING OF DRUGS

<i>jantoven 2mg tab</i>	21	<i>junel 1/20 tab 21-day</i>	71	<i>ketorolac tromethamine</i>	83
<i>jantoven 3mg tab</i>	21	<i>pack</i>		<i>0.5% ophth soln</i>	
<i>jantoven 4mg tab</i>	21	<i>junel fe 24 1/20 28-day</i>	71	<i>ketorolac tromethamine</i>	14
<i>jantoven 5mg tab</i>	21	<i>pack</i>		<i>10mg tab</i>	
<i>jantoven 6mg tab</i>	22	<i>junel fe tab 1.5/30 28-day</i>	71	KEVZARA	13
<i>jantoven 7.5mg tab</i>	22	<i>pack</i>		150MG/1.14ML	
JANUMET 50-1000MG	29	<i>junel fe tab 1/20 28-day</i>	71	AUTO-INJECTOR	
TAB		<i>pack</i>		KEVZARA	13
JANUMET 50-500MG	29	JYLAMVO 2MG/ML	41	150MG/1.14ML	
TAB		ORAL SOLN		SYRINGE	
JANUMET XR	29	JYNNEOS 0.5ML INJ	93	KEVZARA	13
100-1000MG TAB				200MG/1.14ML	
JANUMET XR	29	K		AUTO-INJECTOR	
50-1000MG TAB		KALETRA 80-20MG/ML	55	KEVZARA	13
JANUMET XR 50-500MG	29	ORAL SOLN		200MG/1.14ML	
TAB		KALYDECO 13.4MG	88	SYRINGE	
JANUVIA 100MG TAB	30	ORAL GRANULES		KINRIX SYRINGE	91
JANUVIA 25MG TAB	30	KALYDECO 150MG TAB	88	<i>kionex 15gm/60ml susp</i>	80
JANUVIA 50MG TAB	30	KALYDECO 25MG ORAL	88	KISQALI TAB 200MG	44
JARDIANCE 10MG TAB	31	GRANULES		DAILY DOSE PACK (21)	
JARDIANCE 25MG TAB	31	KALYDECO 5.8MG	88	KISQALI TAB 400MG	44
<i>jasmiel tab 28-day pack</i>	70	ORAL GRANULES		DAILY DOSE PACK (42)	
<i>javygtor 100mg powder</i>	68	KALYDECO 50MG ORAL	88	KISQALI TAB 600MG	44
<i>for oral soln</i>		GRANULES		DAILY DOSE PACK (63)	
<i>javygtor 100mg tab</i>	68	KALYDECO 75MG ORAL	88	KISQALI/FEMARA 400	43
<i>javygtor 500mg powder</i>	68	GRANULES		CO-PACK (70)	
<i>for oral soln</i>		<i>kariva tab 28-day pack</i>	71	KISQALI/FEMARA 600	43
JAYPIRCA 100MG TAB	44	KCL/D5W/LR INJ 0.15%	78	CO-PACK (91)	
JAYPIRCA 50MG TAB	44	<i>kcl/nacl 20meq-0.45% inj</i>	78	<i>klor-con 10meq er tab</i>	78
JENTADUETO	29	<i>kcl/nacl 20meq-0.9% inj</i>	78	<i>klor-con 10meq micro er</i>	78
2.5-1000MG TAB		<i>kcl/nacl 40meq-9% inj</i>	78	<i>tab</i>	
JENTADUETO	29	<i>kelnor 1mg-35mcg tab</i>	71	<i>klor-con 15meq micro er</i>	78
2.5-500MG TAB		<i>28-day pack</i>		<i>tab</i>	
JENTADUETO XR	29	<i>kelnor tab 1/50 28-day</i>	71	<i>klor-con 20meq micro er</i>	78
2.5-1000MG TAB		<i>pack</i>		<i>tab</i>	
JENTADUETO XR	29	KERENDIA 10MG TAB	69	<i>klor-con 20meq powder</i>	78
5-1000MG TAB		KERENDIA 20MG TAB	69	<i>for oral soln</i>	
<i>jinteli 0.005-1mg tab</i>	70	KESIMPTA 20MG/0.4ML	87	<i>klor-con 8meq er tab</i>	78
JUBBONTI 60MG/ML	67	PEN INJ		KLOXXADO 8MG/0.1ML	32
SYRINGE		<i>ketoconazole 2% cream</i>	63	NASAL SPRAY	
<i>juleber tab 28-day pack</i>	70	<i>ketoconazole 2%</i>	63	KOSELUGO 10MG CAP	44
JULUCA 50-25MG TAB	55	<i>shampoo</i>		KOSELUGO 25MG CAP	44
<i>junel 1.5/30 tab 21-day</i>	71	<i>ketoconazole 200mg tab</i>	33	<i>kourzeq 0.1% oral paste</i>	62
<i>pack</i>		<i>ketorolac tromethamine</i>	83	KRAZATI 200MG TAB	44
		<i>0.4% ophth soln</i>			

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ALPHABETICAL LISTING OF DRUGS

<i>kurvelo tab 28-day pack</i>	71	LAZCLUZE 240MG TAB	41	<i>levetiracetam 250mg tab</i>	24
L		LAZCLUZE 80MG TAB	41	<i>levetiracetam 500mg er</i>	24
<i>labetalol 100mg tab</i>	57	<i>leflunomide 10mg tab</i>	12	<i>tab</i>	
<i>labetalol 200mg tab</i>	57	<i>leflunomide 20mg tab</i>	12	<i>levetiracetam 500mg tab</i>	24
<i>labetalol 300mg tab</i>	57	<i>lenalidomide 10mg cap</i>	79	<i>levetiracetam 750mg er</i>	24
<i>lacosamide 100mg tab</i>	24	<i>lenalidomide 15mg cap</i>	79	<i>tab</i>	
<i>lacosamide 10mg/ml oral</i>	24	<i>lenalidomide 2.5mg cap</i>	79	<i>levetiracetam 750mg tab</i>	24
<i>soln</i>		<i>lenalidomide 20mg cap</i>	79	LEVOBUNOLOL 0.5%	82
<i>lacosamide 150mg tab</i>	24	<i>lenalidomide 25mg cap</i>	79	OPHTH SOLN	
<i>lacosamide 200mg tab</i>	24	<i>lenalidomide 5mg cap</i>	79	<i>levocarnitine 100mg/ml</i>	68
<i>lacosamide 50mg tab</i>	24	LENVIMA 10MG DAILY	41	<i>oral soln</i>	
<i>lactulose 667mg/ml oral</i>	76	DOSE PACK (30)		<i>levocarnitine 330mg tab</i>	68
<i>soln</i>		LENVIMA 12MG DAILY	41	<i>levocetirizine 5mg tab</i>	88
<i>lamivudine 100mg tab</i>	56	DOSE PACK (90)		<i>levofloxacin 250mg tab</i>	73
<i>lamivudine 10mg/ml oral</i>	55	LENVIMA 14MG DAILY	41	<i>levofloxacin 25mg/ml</i>	73
<i>soln</i>		DOSE PACK (60)		<i>oral soln</i>	
<i>lamivudine 150mg tab</i>	55	LENVIMA 18MG DAILY	41	<i>levofloxacin 500mg tab</i>	73
<i>lamivudine 300mg tab</i>	55	DOSE PACK (90)		<i>levofloxacin</i>	73
<i>lamivudine/zidovudine</i>	55	LENVIMA 20MG DAILY	41	<i>500mg/100ml inj</i>	
<i>150-300mg tab</i>		DOSE PACK (60)		<i>levofloxacin 750mg tab</i>	73
<i>lamotrigine 100mg tab</i>	24	LENVIMA 24MG DAILY	41	<i>levofloxacin</i>	73
<i>lamotrigine 150mg tab</i>	24	DOSE PACK (90)		<i>750mg/150ml inj</i>	
<i>lamotrigine 200mg tab</i>	24	LENVIMA 4MG DAILY	41	<i>levonest tab 28-day pack</i>	71
<i>lamotrigine 25mg chew</i>	24	DOSE PACK (30)		<i>levonorgestrel/ethinyl</i>	71
<i>tab</i>		LENVIMA 8MG DAILY	41	<i>estradiol</i>	
<i>lamotrigine 25mg tab</i>	24	DOSE PACK (60)		<i>0.05-30/0.075-40/0.125-3</i>	
<i>lamotrigine 5mg chew tab</i>	24	<i>lessina tab 28-day pack</i>	71	<i>0mg-mcg tab 28-day pack</i>	
<i>lansoprazole 15mg dr cap</i>	92	<i>letrozole 2.5mg tab</i>	42	<i>levora 0.15/30 tab 28-day</i>	71
<i>lansoprazole 30mg dr cap</i>	92	<i>leucovorin 10mg tab</i>	48	<i>pack</i>	
LANTUS 100UNIT/ML	31	<i>leucovorin 15mg tab</i>	48	<i>levothyroxine sodium</i>	90
INJ		<i>leucovorin 25mg tab</i>	48	<i>100mcg tab</i>	
LANTUS 100UNIT/ML	31	<i>leucovorin 5mg tab</i>	48	<i>levothyroxine sodium</i>	90
PEN INJ		LEUKERAN 2MG TAB	41	<i>112mcg tab</i>	
<i>lapatinib 250mg tab</i>	44	<i>levalbuterol 0.31mg/3ml</i>	21	<i>levothyroxine sodium</i>	90
<i>larin 1.5/30 tab 21-day</i>	71	<i>neb soln</i>		<i>125mcg tab</i>	
<i>pack</i>		<i>levalbuterol 0.63mg/3ml</i>	21	<i>levothyroxine sodium</i>	90
<i>larin 1/20 tab 21-day</i>	71	<i>inh soln</i>		<i>137mcg tab</i>	
<i>pack</i>		<i>levalbuterol 1.25mg/3ml</i>	21	<i>levothyroxine sodium</i>	90
<i>larin fe tab 1.5/30 28-day</i>	71	<i>neb soln</i>		<i>150mcg tab</i>	
<i>pack</i>		LEVALBUTEROL	21	<i>levothyroxine sodium</i>	90
<i>larin fe tab 1/20 28-day</i>	71	45MCG/ACT INHALER		<i>175mcg tab</i>	
<i>pack</i>		<i>levetiracetam 1000mg tab</i>	24	<i>levothyroxine sodium</i>	90
<i>latanoprost 0.005% ophth</i>	83	<i>levetiracetam 100mg/ml</i>	24	<i>200mcg tab</i>	
<i>soln</i>		<i>oral soln</i>			

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ALPHABETICAL LISTING OF DRUGS

<i>levothyroxine sodium</i>	90	<i>liothyronine sodium</i>	91	<i>loestrin fe tab 1/20</i>	71
<i>25mcg tab</i>		<i>50mcg tab</i>		<i>28-day pack</i>	
<i>levothyroxine sodium</i>	90	<i>liothyronine sodium 5mcg</i>	91	LOKELMA 10GM	80
<i>300mcg tab</i>		<i>tab</i>		POWDER FOR ORAL	
<i>levothyroxine sodium</i>	90	<i>liraglutide 18mg/3ml pen</i>	30	SUSP	
<i>50mcg tab</i>		<i>inj</i>		LOKELMA 5GM	80
<i>levothyroxine sodium</i>	90	<i>lisdexamfetamine</i>	11	POWDER FOR ORAL	
<i>75mcg tab</i>		<i>dimesylate 10mg cap</i>		SUSP	
<i>levothyroxine sodium</i>	90	<i>lisdexamfetamine</i>	11	LONSURF 6.14-15MG	43
<i>88mcg tab</i>		<i>dimesylate 20mg cap</i>		TAB	
<i>levoxyl 100mcg tab</i>	90	<i>lisdexamfetamine</i>	11	LONSURF 8.19-20MG	43
<i>levoxyl 112mcg tab</i>	90	<i>dimesylate 30mg cap</i>		TAB	
<i>levoxyl 125mcg tab</i>	90	<i>lisdexamfetamine</i>	11	<i>loperamide 2mg cap</i>	32
<i>levoxyl 137mcg tab</i>	90	<i>dimesylate 40mg cap</i>		<i>lopinavir/ritonavir</i>	55
<i>levoxyl 150mcg tab</i>	90	<i>lisdexamfetamine</i>	11	<i>100-25mg tab</i>	
<i>levoxyl 175mcg tab</i>	90	<i>dimesylate 50mg cap</i>		<i>lopinavir/ritonavir</i>	55
<i>levoxyl 200mcg tab</i>	90	<i>lisdexamfetamine</i>	11	<i>200-50mg tab</i>	
<i>levoxyl 25mcg tab</i>	90	<i>dimesylate 60mg cap</i>		<i>lorazepam 0.5mg tab</i>	18
<i>levoxyl 50mcg tab</i>	90	<i>lisdexamfetamine</i>	11	<i>lorazepam 1mg tab</i>	18
<i>levoxyl 75mcg tab</i>	90	<i>dimesylate 70mg cap</i>		<i>lorazepam 2mg tab</i>	18
<i>levoxyl 88mcg tab</i>	90	<i>lisinopril 10mg tab</i>	35	<i>lorazepam 2mg/ml oral</i>	18
<i>lidocaine 4% mucous</i>	65	<i>lisinopril 2.5mg tab</i>	35	<i>soln</i>	
<i>membrane topical soln</i>		<i>lisinopril 20mg tab</i>	35	LORBRENA 100MG TAB	45
<i>lidocaine 5% ointment</i>	65	<i>lisinopril 30mg tab</i>	35	LORBRENA 25MG TAB	45
<i>lidocaine 5% patch</i>	65	<i>lisinopril 40mg tab</i>	35	<i>loryna tab 28-day pack</i>	71
<i>lidocaine viscous 2%</i>	62	<i>lisinopril 5mg tab</i>	35	<i>losartan potassium</i>	36
<i>mucous membrane topical</i>		LITFULO 50MG CAP	80	<i>100mg tab</i>	
<i>soln</i>		<i>lithium carbonate 150mg</i>	49	<i>losartan potassium 25mg</i>	36
<i>lidocaine/prilocaine</i>	65	<i>cap</i>		<i>tab</i>	
<i>2.5-2.5% cream</i>		<i>lithium carbonate 300mg</i>	49	<i>losartan potassium 50mg</i>	36
<i>lidocan 5% patch</i>	65	<i>cap</i>		<i>tab</i>	
LILETTA 20.1MCG/DAY	85	<i>lithium carbonate 300mg</i>	49	<i>loteprednol etabonate</i>	83
INTRAUTERINE SYSTEM		<i>er tab</i>		<i>0.5% ophth gel</i>	
<i>linezolid 100mg/5ml oral</i>	39	<i>lithium carbonate 300mg</i>	49	<i>loteprednol etabonate</i>	83
<i>susp</i>		<i>tab</i>		<i>0.5% ophth susp</i>	
<i>linezolid 600mg tab</i>	39	<i>lithium carbonate 450mg</i>	49	<i>lovastatin 10mg tab</i>	34
<i>linezolid 600mg/300ml</i>	39	<i>er tab</i>		<i>lovastatin 20mg tab</i>	34
<i>inj</i>		LITHIUM CARBONATE	49	<i>lovastatin 40mg tab</i>	34
LINZESS 145MCG CAP	76	600MG CAP		<i>low-ogestrel tab 28-day</i>	71
LINZESS 290MCG CAP	76	<i>lithium citrate 60mg/ml</i>	49	<i>pack</i>	
LINZESS 72MCG CAP	76	<i>oral soln</i>		<i>loxapine 10mg cap</i>	52
<i>liothyronine sodium</i>	90	LIVTENCITY 200MG TAE	56	<i>loxapine 25mg cap</i>	52
<i>25mcg tab</i>		<i>lo jaimiess tab 91-day</i>	71	<i>loxapine 50mg cap</i>	52
		<i>pack</i>		<i>loxapine 5mg cap</i>	52

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ALPHABETICAL LISTING OF DRUGS

<i>lubiprostone 24mcg cap</i>	76	LYNPARZA 100MG TAB	45	<i>medroxyprogesterone</i>	85
<i>lubiprostone 8mcg cap</i>	76	LYNPARZA 150MG TAB	45	<i>acetate 5mg tab</i>	
LUMAKRAS 120MG TAB	45	LYSODREN 500MG TAB	42	<i>mefloquine 250mg tab</i>	40
LUMAKRAS 240MG TAB	45	LYTGOBI TAB 12MG	45	MEGESTROL ACETATE	85
LUMAKRAS 320MG TAB	45	DAILEY DOSE PACK (21)		125MG/ML SUSP	
LUMIGAN 0.01% OPTH	83	LYTGOBI TAB 16MG	45	<i>megestrol acetate 20mg</i>	42
SOLN		DAILEY DOSE PACK (28)		<i>tab</i>	
LUMRYZ 28-DAY	89	LYTGOBI TAB 20MG	45	<i>megestrol acetate 40mg</i>	42
STARTER PACK (28)		DAILEY DOSE PACK (35)		<i>tab</i>	
LUMRYZ 4.5GM	89	<i>lyza 0.35mg tab 28-day</i>	85	<i>megestrol acetate</i>	42
GRANULES FOR ORAL		<i>pack</i>		<i>40mg/ml oral susp</i>	
SUSP		M		MEKINIST 0.05MG/ML	45
LUMRYZ 6GM	89	<i>magnesium sulfate</i>	78	ORAL SOLN	
GRANULES FOR ORAL		<i>500mg/ml inj</i>		MEKINIST 0.5MG TAB	45
SUSP		<i>magnesium sulfate</i>	78	MEKINIST 2MG TAB	45
LUMRYZ 7.5GM	89	<i>500mg/ml syringe</i>		MEKTOVI 15MG TAB	45
GRANULES FOR ORAL		<i>malathion 0.5% lotion</i>	66	<i>meleya 0.35mg tab</i>	85
SUSP		<i>maraviroc 150mg tab</i>	55	<i>28-day pack</i>	
LUMRYZ 9GM	89	<i>maraviroc 300mg tab</i>	55	<i>meloxicam 15mg tab</i>	14
GRANULES FOR ORAL		<i>marlissa tab 28-day pack</i>	71	<i>meloxicam 7.5mg tab</i>	14
SUSP		MARPLAN 10MG TAB	26	<i>memantine 10mg tab</i>	86
LUPKYNIS 7.9MG CAP	80	MATULANE 50MG CAP	47	<i>memantine 14mg er cap</i>	86
LUPRON 11.25MG	42	MAVYRET 100-40MG	56	<i>memantine 21mg er cap</i>	86
SYRINGE (3 MONTH)		TAB		<i>memantine 28mg er cap</i>	86
LUPRON 3.75MG	42	MAVYRET 50-20MG	56	<i>memantine 2mg/ml oral</i>	86
SYRINGE (1 MONTH)		ORAL PELLET		<i>soln</i>	
<i>lurasidone 120mg tab</i>	50	MAYZENT 0.25MG TAB	87	<i>memantine 5mg tab</i>	86
<i>lurasidone 20mg tab</i>	50	MAYZENT 1MG TAB	87	<i>memantine 7mg er cap</i>	86
<i>lurasidone 40mg tab</i>	50	MAYZENT 2MG TAB	87	MENQUADFI INJ	93
<i>lurasidone 60mg tab</i>	50	MAYZENT TAB STARTEI	87	MENVEO INJ	93
<i>lurasidone 80mg tab</i>	50	PACK (12)		<i>mercaptopurine 20mg/ml</i>	41
<i>luteru tab 28-day pack</i>	71	MAYZENT TAB STARTEI	87	<i>susp</i>	
<i>lyleq 0.35mg tab 28-day</i>	85	PACK (7)		<i>mercaptopurine 50mg tab</i>	41
<i>pack</i>		<i>meclizine 12.5mg tab</i>	32	<i>meropenem 1gm inj</i>	39
<i>lyllana 0.025mg/24hr</i>	73	<i>meclizine 25mg tab</i>	32	<i>meropenem 500mg inj</i>	39
<i>twice weekly patch</i>		<i>medroxyprogesterone</i>	85	<i>mesalamine 1200mg dr</i>	74
<i>lyllana 0.0375mg/24hr</i>	73	<i>acetate 10mg tab</i>		<i>tab</i>	
<i>twice weekly patch</i>		<i>medroxyprogesterone</i>	85	<i>mesalamine 1gm rectal</i>	74
<i>lyllana 0.05mg/24hr twice</i>	73	<i>acetate 150mg/ml inj</i>		<i>supp</i>	
<i>weekly patch</i>		<i>medroxyprogesterone</i>	85	<i>mesalamine 375mg er cap</i>	74
<i>lyllana 0.075mg/24hr</i>	73	<i>acetate 150mg/ml syringe</i>		<i>mesalamine 400mg dr cap</i>	74
<i>twice weekly patch</i>		<i>medroxyprogesterone</i>	85	<i>mesalamine 66.7mg/ml</i>	74
<i>lyllana 0.1mg/24hr twice</i>	73	<i>acetate 2.5mg tab</i>		<i>enema</i>	
<i>weekly patch</i>				<i>mesna 400mg tab</i>	48

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: 09/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>metaxalone 800mg tab</i>	81	<i>methylphenidate 27mg er</i>	12	<i>metoprolol tartrate</i>	57
<i>metformin 1000mg tab</i>	30	<i>osmotic tab</i>		<i>37.5mg tab</i>	
<i>metformin 500mg er tab</i>	30	<i>methylphenidate 27mg er</i>	12	<i>metoprolol tartrate 50mg</i>	57
<i>metformin 500mg tab</i>	30	<i>tab</i>		<i>tab</i>	
<i>metformin 750mg er tab</i>	30	<i>methylphenidate 2mg/ml</i>	12	<i>metoprolol tartrate 75mg</i>	57
<i>metformin 850mg tab</i>	30	<i>oral soln</i>		<i>tab</i>	
<i>methadone 10mg tab</i>	15	<i>methylphenidate 36mg er</i>	12	<i>metronidazole 0.75%</i>	66
METHADONE 1MG/ML	15	<i>osmotic tab</i>		<i>cream</i>	
ORAL SOLN		<i>methylphenidate 36mg er</i>	12	<i>metronidazole 0.75% gel</i>	66
METHADONE 2MG/ML	15	<i>tab</i>		<i>metronidazole 0.75%</i>	94
ORAL SOLN		<i>methylphenidate 54mg er</i>	12	<i>vaginal gel</i>	
<i>methadone 5mg tab</i>	15	<i>osmotic tab</i>		<i>metronidazole 1% gel</i>	66
<i>methazolamide 25mg tab</i>	66	<i>methylphenidate 54mg er</i>	12	<i>metronidazole 250mg tab</i>	39
<i>methazolamide 50mg tab</i>	66	<i>tab</i>		<i>metronidazole 500mg tab</i>	39
<i>methenamine hippurate</i>	39	<i>methylphenidate 5mg tab</i>	12	<i>metronidazole 5mg/ml inj</i>	39
<i>1gm tab</i>		<i>methylprednisolone 16mg</i>	61	<i>metyrosine 250mg cap</i>	38
<i>methimazole 10mg tab</i>	90	<i>tab</i>		<i>mexiletine 150mg cap</i>	18
<i>methimazole 5mg tab</i>	90	<i>methylprednisolone 32mg</i>	61	<i>mexiletine 200mg cap</i>	18
<i>methocarbamol 500mg</i>	81	<i>tab</i>		<i>mexiletine 250mg cap</i>	18
<i>tab</i>		<i>methylprednisolone 4mg</i>	61	<i>mibelas 24 fe chewable</i>	71
<i>methocarbamol 750mg</i>	81	<i>tab</i>		<i>tab 28-day pack</i>	
<i>tab</i>		<i>methylprednisolone 4mg</i>	61	<i>micafungin sodium</i>	33
<i>methotrexate 2.5mg tab</i>	41	<i>tab pack (21)</i>		<i>100mg inj</i>	
METHOTREXATE	41	<i>methylprednisolone 8mg</i>	61	<i>micafungin sodium 50mg</i>	33
25MG/ML INJ		<i>tab</i>		<i>inj</i>	
<i>methotrexate 50mg/2ml</i>	41	<i>metoclopramide 10mg tab</i>	73	<i>microgestin 1.5/30 tab</i>	71
<i>inj</i>		<i>metoclopramide 1mg/ml</i>	73	<i>21-day pack</i>	
METHOXSALLEN 10MG	64	<i>oral soln</i>		<i>microgestin 1/20 tab</i>	71
CAP		<i>metoclopramide 5mg tab</i>	73	<i>21-day pack</i>	
<i>methsuximide 300mg cap</i>	26	<i>metolazone 10mg tab</i>	67	<i>microgestin fe tab 1.5/30</i>	71
<i>methylphenidate 10mg er</i>	12	<i>metolazone 2.5mg tab</i>	67	<i>28-day pack</i>	
<i>tab</i>		<i>metolazone 5mg tab</i>	67	<i>microgestin fe tab 1/20</i>	71
<i>methylphenidate 10mg</i>	12	<i>metoprolol succinate</i>	57	<i>28-day pack</i>	
<i>tab</i>		<i>100mg er tab</i>		<i>midodrine 10mg tab</i>	59
<i>methylphenidate 18mg er</i>	12	<i>metoprolol succinate</i>	57	<i>midodrine 2.5mg tab</i>	59
<i>osmotic tab</i>		<i>200mg er tab</i>		<i>midodrine 5mg tab</i>	59
METHYLPHENIDATE	12	<i>metoprolol succinate</i>	57	<i>mifepristone 300mg tab</i>	30
18MG ER TAB		<i>25mg er tab</i>		<i>mili tab 28-day pack</i>	71
<i>methylphenidate 1mg/ml</i>	12	<i>metoprolol succinate</i>	57	<i>mimvey 28-day pack</i>	71
<i>oral soln</i>		<i>50mg er tab</i>		<i>minocycline 100mg cap</i>	90
<i>methylphenidate 20mg er</i>	12	<i>metoprolol tartrate</i>	57	<i>minocycline 50mg cap</i>	90
<i>tab</i>		<i>100mg tab</i>		<i>minocycline 75mg cap</i>	90
<i>methylphenidate 20mg</i>	12	<i>metoprolol tartrate 25mg</i>	57	<i>minoxidil 10mg tab</i>	38
<i>tab</i>		<i>tab</i>		<i>minoxidil 2.5mg tab</i>	38

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ALPHABETICAL LISTING OF DRUGS

<i>mirabegron 25mg er tab</i>	93	<i>morphine sulfate 30mg</i>	15	N	
<i>mirabegron 50mg er tab</i>	93	<i>tab</i>		<i>nabumetone 500mg tab</i>	14
<i>mirtazapine 15mg odt</i>	26	MORPHINE SULFATE	15	<i>nabumetone 750mg tab</i>	14
<i>mirtazapine 15mg tab</i>	26	4MG/ML ORAL SOLN		<i>nadolol 20mg tab</i>	57
<i>mirtazapine 30mg odt</i>	26	<i>morphine sulfate 60mg er</i>	15	<i>nadolol 40mg tab</i>	57
<i>mirtazapine 30mg tab</i>	26	<i>tab</i>		<i>nadolol 80mg tab</i>	57
<i>mirtazapine 45mg odt</i>	26	MOUNJARO	30	<i>nafacillin 100mg/ml inj</i>	85
<i>mirtazapine 45mg tab</i>	26	10MG/0.5ML		<i>nafacillin 1gm inj</i>	85
<i>mirtazapine 7.5mg tab</i>	26	AUTO-INJECTOR		<i>nafacillin 2gm inj</i>	85
<i>misoprostol 100mcg tab</i>	92	MOUNJARO	30	NALOXONE 0.4MG/ML	32
<i>misoprostol 200mcg tab</i>	92	12.5MG/0.5ML		CARTRIDGE	
M-M-R II INJ	93	AUTO-INJECTOR		<i>naloxone 0.4mg/ml inj</i>	32
<i>modafinil 100mg tab</i>	12	MOUNJARO	31	<i>naloxone 0.4mg/ml</i>	32
<i>modafinil 200mg tab</i>	12	15MG/0.5ML		<i>syringe</i>	
<i>moexipril 15mg tab</i>	35	AUTO-INJECTOR		<i>naloxone 1mg/ml syringe</i>	32
<i>moexipril 7.5mg tab</i>	35	MOUNJARO	31	<i>naltrexone 50mg tab</i>	32
MOLINDONE 10MG TAB	50	2.5MG/0.5ML		<i>naproxen 250mg tab</i>	14
MOLINDONE 25MG TAB	50	AUTO-INJECTOR		<i>naproxen 375mg dr tab</i>	14
MOLINDONE 5MG TAB	50	MOUNJARO 5MG/0.5ML	31	<i>naproxen 375mg tab</i>	14
<i>mometasone furoate 0.1%</i>	65	AUTO-INJECTOR		<i>naproxen 500mg tab</i>	14
<i>cream</i>		MOUNJARO	31	<i>naproxen sodium 275mg</i>	14
<i>mometasone furoate 0.1%</i>	65	7.5MG/0.5ML		<i>tab</i>	
<i>lotion</i>		AUTO-INJECTOR		<i>naproxen sodium 550mg</i>	14
<i>mometasone furoate 0.1%</i>	65	MOVANTIK 12.5MG TAB	77	<i>tab</i>	
<i>ointment</i>		MOVANTIK 25MG TAB	77	<i>naratriptan 1mg tab</i>	77
<i>montelukast 10mg tab</i>	19	<i>moxifloxacin 0.5% ophth</i>	82	<i>naratriptan 2.5mg tab</i>	77
<i>montelukast 4mg chew</i>	19	<i>soln</i>		NATACYN 5% OPTH	82
<i>tab</i>		MOXIFLOXACIN	73	SUSP	
<i>montelukast 5mg chew</i>	19	1.6MG/ML INJ		<i>nateglinide 120mg tab</i>	30
<i>tab</i>		<i>moxifloxacin 400mg tab</i>	73	<i>nateglinide 60mg tab</i>	30
<i>morphine sulfate 100mg</i>	15	MRESVIA 50MCG/0.5ML	93	NAYZILAM 5MG/0.1ML	22
<i>er tab</i>		SYRINGE		NASAL SPRAY	
<i>morphine sulfate 15mg er</i>	15	MULTAQ 400MG TAB	19	<i>nebivolol 10mg tab</i>	57
<i>tab</i>		<i>mupirocin 2% ointment</i>	63	<i>nebivolol 2.5mg tab</i>	57
<i>morphine sulfate 15mg</i>	15	<i>mycophenolate mofetil</i>	80	<i>nebivolol 20mg tab</i>	57
<i>tab</i>		<i>200mg/ml oral susp</i>		<i>nebivolol 5mg tab</i>	57
<i>morphine sulfate 200mg</i>	15	<i>mycophenolate mofetil</i>	80	<i>necon 0.5/35 tab 28-day</i>	71
<i>er tab</i>		<i>250mg cap</i>		<i>pack</i>	
<i>morphine sulfate 20mg/ml</i>	15	<i>mycophenolate mofetil</i>	80	NEFAZODONE 100MG	27
<i>oral soln</i>		<i>500mg tab</i>		TAB	
MORPHINE SULFATE	15	<i>mycophenolic acid 180mg</i>	80	NEFAZODONE 150MG	27
2MG/ML ORAL SOLN		<i>dr tab</i>		TAB	
<i>morphine sulfate 30mg er</i>	15	<i>mycophenolic acid 360mg</i>	80	NEFAZODONE 200MG	27
<i>tab</i>		<i>dr tab</i>		TAB	

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ALPHABETICAL LISTING OF DRUGS

NEFAZODONE 250MG TAB	27	NEXPLANON 68MG IMPLANT	85	<i>nitroglycerin 0.4mg/hr patch</i>	17
NEFAZODONE 50MG TAB	27	<i>niacin 1000mg er tab</i>	34	<i>nitroglycerin 0.6mg sl tab</i>	17
NEMLUVIO 30MG AUTO-INJECTOR	79	<i>niacin 500mg er tab</i>	34	<i>nitroglycerin 0.6mg/hr patch</i>	17
<i>neomycin sulfate 500mg tab</i>	12	NICOTROL 10MG/ML	87	NIVESTYM	75
<i>neomycin/bacitracin/poly myxin</i>	82	NASAL INHALER		300MCG/0.5ML	
<i>5mg-400unit-10000unit ophth ointment</i>		<i>nifedipine 30mg er tab</i>	59	SYRINGE	
NEOMYCIN/POLYMYXI	82	<i>nifedipine 30mg osmotic er tab</i>	59	NIVESTYM 300MCG/ML	75
N B/GRAMICIDIN		<i>nifedipine 60mg er tab</i>	59	INJ	
1.75-10000-0.025MG-UN		<i>nifedipine 60mg osmotic er tab</i>	59	NIVESTYM	75
T-MG/ML OPHTH SOLN		<i>nifedipine 90mg er tab</i>	59	480MCG/0.8ML	
<i>neomycin/polymyxin/bacit racin/hydrocortisone</i>	83	<i>nifedipine 90mg osmotic er tab</i>	59	SYRINGE	
<i>ophth 1% ointment</i>		<i>nikki tab 28-day pack</i>	71	NIVESTYM	75
<i>neomycin/polymyxin/dexa</i>	83	<i>nilotinib 150mg cap</i>	45	480MCG/1.6ML INJ	
<i>methasone 0.1% ophth susp</i>		<i>nilotinib 200mg cap</i>	45	<i>nora-be 0.35mg tab</i>	85
<i>neomycin/polymyxin/hydr</i>	84	<i>nilotinib 50mg cap</i>	45	28-day pack	
<i>ocortisone</i>		<i>nilutamide 150mg tab</i>	42	NORDITROPIN	68
<i>3.5-10000unit-1% otic soln</i>		<i>nimodipine 30mg cap</i>	59	10MG/1.5ML PEN INJ	
<i>neomycin/polymyxin/hydr</i>	84	NINLARO 2.3MG CAP	45	NORDITROPIN	68
<i>ocortisone</i>		NINLARO 3MG CAP	45	15MG/1.5ML PEN INJ	
<i>3.5-10000unit-1% otic susp</i>		NINLARO 4MG CAP	45	NORDITROPIN	68
<i>neo-polycin</i>	82	<i>nitazoxanide 500mg tab</i>	39	30MG/3ML PEN INJ	
<i>5mg-400unit-10000unit ophth ointment</i>		NITRO-BID 2%	17	NORDITROPIN	68
<i>neo-polycin hc ophth ointment</i>	83	OINTMENT		5MG/1.5ML PEN INJ	
NERLYNX 40MG TAB	45	<i>nitrofurantoin</i>	39	<i>norelgestromin/ethinyl estradiol 150-35</i>	71
NEVIRAPINE 10MG/ML	55	<i>macro/nitrofurantoin</i>		<i>mcg/24hr patch</i>	
ORAL SUSP		<i>mono 100mg cap</i>		<i>norethindrone 0.35mg</i>	85
<i>nevirapine 200mg tab</i>	55	<i>nitrofurantoin</i>	40	28-day pack	
<i>nevirapine 400mg er tab</i>	55	<i>macrocrystals 100mg cap</i>		<i>norethindrone acetate</i>	85
NEXLETOL 180MG TAB	34	<i>nitrofurantoin</i>	40	5mg tab	
NEXLIZET 180-10MG TAB	34	<i>nitrofurantoin</i>	40	<i>nortrel 0.5/35 tab 28-day pack</i>	71
		<i>nitroglycerin 0.1mg/hr patch</i>	17	<i>nortrel 1/35 tab 21-day pack</i>	71
		<i>nitroglycerin 0.2mg/hr patch</i>	17	<i>nortrel 1/35 tab 28-day pack</i>	71
		<i>nitroglycerin 0.3mg sl tab</i>	17	<i>nortrel 7/7/7 tab 28-day pack</i>	71
		<i>nitroglycerin 0.4% rectal ointment</i>	17	<i>nortriptyline 10mg cap</i>	29
		<i>nitroglycerin 0.4mg sl tab</i>	17	<i>nortriptyline 25mg cap</i>	29
				<i>nortriptyline 2mg/ml oral soln</i>	29

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ALPHABETICAL LISTING OF DRUGS

<i>nortriptyline 50mg cap</i>	29	OCTAGAM 1GM/20ML	84	<i>olanzapine 7.5mg tab</i>	52
<i>nortriptyline 75mg cap</i>	29	INJ		<i>olmesartan medoxomil</i>	36
NORVIR 100MG ORAL	55	OCTAGAM 2GM/20ML	84	<i>20mg tab</i>	
POWDER		INJ		<i>olmesartan medoxomil</i>	36
NUBEQA 300MG TAB	42	<i>octreotide 0.05mg/ml inj</i>	68	<i>40mg tab</i>	
NUCALA 100MG INJ	19	<i>octreotide 0.1mg/ml inj</i>	68	<i>olmesartan medoxomil</i>	36
NUCALA 100MG/ML	19	<i>octreotide 0.2mg/ml inj</i>	68	<i>5mg tab</i>	
AUTO-INJECTOR		<i>octreotide 0.5mg/ml inj</i>	68	<i>olopatadine 0.6%</i>	81
NUCALA 100MG/ML	19	<i>octreotide 1mg/ml inj</i>	68	<i>(0.665mg/act) nasal</i>	
SYRINGE		ODEFSEY 200-25-25MG	55	<i>inhaler</i>	
NUCALA 40MG/0.4ML	19	TAB		OLUMIANT 1MG TAB	12
SYRINGE		ODOMZO 200MG CAP	42	OLUMIANT 2MG TAB	12
NUEDEXTA 20-10MG	87	OFEV 100MG CAP	88	OLUMIANT 4MG TAB	12
CAP		OFEV 150MG CAP	88	<i>omega-3 acid ethyl esters</i>	34
NUPLAZID 10MG TAB	50	<i>ofloxacin 0.3% ophth soln</i>	82	<i>(usp) 1gm cap</i>	
NUPLAZID 34MG CAP	50	<i>ofloxacin 0.3% otic soln</i>	84	<i>omeprazole 10mg dr cap</i>	92
<i>nyamyc 100000unit/gm</i>	63	OGSIVEO 100MG TAB	45	<i>omeprazole 20mg dr cap</i>	92
<i>topical powder</i>		7-DAY PACK (14)		<i>omeprazole 40mg dr cap</i>	92
<i>nylia 1/35 tab 28-day</i>	71	OGSIVEO 150MG TAB	45	OMNITROPE	68
<i>pack</i>		7-DAY PACK (14)		10MG/1.5ML	
<i>nylia 7/7/7 tab 28-day</i>	71	OGSIVEO 50MG TAB	45	CARTRIDGE	
<i>pack</i>		OJEMDA 100MG TAB	45	OMNITROPE 5.8MG INJ	68
<i>nystatin 100000 unit/gm</i>	63	OJEMDA 100MG TAB	45	OMNITROPE	68
<i>ointment</i>		PACK (400MG ONCE		5MG/1.5ML CARTRIDGE	
<i>nystatin 100000unit/gm</i>	63	WEEKLY) (16)		<i>ondansetron 0.8mg/ml</i>	32
<i>topical powder</i>		OJEMDA 100MG TAB	45	<i>oral soln</i>	
<i>nystatin 100000unit/ml</i>	63	PACK (600MG ONCE		<i>ondansetron 4mg odt</i>	32
<i>cream</i>		WEEKLY) (24)		<i>ondansetron 4mg tab</i>	32
<i>nystatin 100000unit/ml</i>	62	OJEMDA 25MG/ML	45	<i>ondansetron 8mg odt</i>	32
<i>oral susp</i>		POWDER FOR ORAL		<i>ondansetron 8mg tab</i>	32
<i>nystatin 500000unit tab</i>	33	SUSP		ONUREG 200MG TAB	41
<i>nystatin/triamcinolone</i>	63	OJJAARA 100MG TAB	45	ONUREG 300MG TAB	41
<i>acetonide 100000-0.1</i>		OJJAARA 150MG TAB	45	OPIPZA 10MG ORAL	53
<i>unit/gm-% ointment</i>		OJJAARA 200MG TAB	45	FILM	
<i>nystatin/triamcinolone</i>	63	<i>olanzapine 10mg inj</i>	52	OPIPZA 2MG ORAL	53
<i>acetonide</i>		<i>olanzapine 10mg odt</i>	52	FILM	
<i>100000-0.1unit/gm-%</i>		<i>olanzapine 10mg tab</i>	52	OPIPZA 5MG ORAL	53
<i>cream</i>		<i>olanzapine 15mg odt</i>	52	FILM	
<i>nystop 100000unit/gm</i>	63	<i>olanzapine 15mg tab</i>	52	OPSUMIT 10MG TAB	89
<i>topical powder</i>		<i>olanzapine 2.5mg tab</i>	52	OPVEE 2.7MG/0.1ML	32
NYVEPRIA 6MG/0.6ML	75	<i>olanzapine 20mg odt</i>	52	NASAL SPRAY	
SYRINGE		<i>olanzapine 20mg tab</i>	52	ORENCIA 125MG/ML	14
O		<i>olanzapine 5mg odt</i>	52	AUTO-INJECTOR	
<i>ocella tab 28-day pack</i>	71	<i>olanzapine 5mg tab</i>	52		

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ALPHABETICAL LISTING OF DRUGS

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

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ALPHABETICAL LISTING OF DRUGS

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>	82
<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
PERINDOPRIL	35	PIMOZIDE 2MG TAB	87	POMALYST 4MG CAP	47
ERBUMINE 2MG TAB		<i>pimtrea tab 28-day pack</i>	71	<i>portia tab 28-day pack</i>	71
<i>perindopril erbumine</i>	35	<i>pindolol 10mg tab</i>	57	<i>posaconazole 100mg dr</i>	33
<i>4mg tab</i>		<i>pindolol 5mg tab</i>	57	<i>tab</i>	
PERINDOPRIL	35	<i>pioglitazone 15mg tab</i>	30	<i>posaconazole 40mg/ml</i>	33
ERBUMINE 8MG TAB		<i>pioglitazone 30mg tab</i>	30	<i>oral susp</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>potassium chloride</i>	78	<i>pramipexole 0.75mg tab</i>	49	<i>pregabalin 75mg cap</i>	25
<i>1.33meq/ml oral soln</i>		<i>pramipexole 1.5mg tab</i>	49	PREMARIN 0.3MG TAB	73
<i>potassium chloride</i>	78	<i>pramipexole 1mg tab</i>	49	PREMARIN 0.45MG TAB	73
<i>10meq er cap</i>		<i>prasugrel 10mg tab</i>	75	PREMARIN 0.625MG	73
<i>potassium chloride</i>	79	<i>prasugrel 5mg tab</i>	75	TAB	
<i>10meq er tab</i>		<i>pravastatin sodium 10mg</i>	34	PREMARIN	94
<i>potassium chloride</i>	79	<i>tab</i>		0.625MG/GM VAGINAL	
<i>10meq micro er tab</i>		<i>pravastatin sodium 20mg</i>	34	CREAM	
POTASSIUM CHLORIDE	79	<i>tab</i>		PREMARIN 0.9MG TAB	73
10MEQ/100ML INJ		<i>pravastatin sodium 40mg</i>	34	PREMARIN 1.25MG TAB	73
POTASSIUM CHLORIDE	79	<i>tab</i>		PREMPHASE 28-DAY	71
15MEQ ER TAB		<i>pravastatin sodium 80mg</i>	34	PACK	
<i>potassium chloride</i>	79	<i>tab</i>		PREMPRO 0.3/1.5MG	72
<i>15meq micro er tab</i>		<i>praziquantel 600mg tab</i>	17	28-DAY PACK	
<i>potassium chloride</i>	79	<i>prazosin 1mg cap</i>	36	PREMPRO 0.45/1.5MG	72
<i>2.67meq/ml oral soln</i>		<i>prazosin 2mg cap</i>	36	28-DAY PACK	
<i>potassium chloride</i>	79	<i>prazosin 5mg cap</i>	36	PREMPRO 0.625/2.5MG	72
<i>20meq er tab</i>		PREDNISOLONE 1%	83	28-DAY PACK	
<i>potassium chloride</i>	79	OPHTH SOLN		PREMPRO 0.625/5MG	72
<i>20meq micro er tab</i>		<i>prednisolone 1mg/ml oral</i>	61	28-DAY PACK	
<i>potassium chloride</i>	79	<i>soln</i>		<i>prevalite 4gm powder for</i>	34
<i>20meq powder for oral</i>		<i>prednisolone 3mg/ml oral</i>	61	<i>oral susp</i>	
<i>soln</i>		<i>prednisolone 5mg/ml oral</i>	61	PREVYMIS 120MG	56
POTASSIUM CHLORIDE	79	<i>soln</i>		ORAL PELLET	
20MEQ/100ML INJ		<i>prednisolone acetate 1%</i>	83	PREVYMIS 240MG TAB	56
<i>potassium chloride</i>	79	<i>ophth susp</i>		PREVYMIS 480MG TAB	56
<i>2meq/ml (20ml) inj</i>		<i>prednisone 10mg tab</i>	61	PREZCOBIX 150-800MG	55
<i>potassium chloride</i>	79	<i>prednisone 1mg tab</i>	61	TAB	
<i>2meq/ml inj</i>		PREDNISONE 1MG/ML	61	PREZISTA 100MG/ML	55
POTASSIUM CHLORIDE	79	ORAL SOLN		ORAL SUSP	
40MEQ/100ML INJ		<i>prednisone 2.5mg tab</i>	61	PREZISTA 150MG TAB	55
<i>potassium chloride 8meq</i>	79	<i>prednisone 20mg tab</i>	61	PREZISTA 75MG TAB	55
<i>er cap</i>		<i>prednisone 50mg tab</i>	61	PRIFTIN 150MG TAB	40
<i>potassium chloride 8meq</i>	79	<i>prednisone 5mg tab</i>	61	PRIMAQUINE	40
<i>er tab</i>		<i>pregabalin 100mg cap</i>	24	PHOSPHATE 26.3MG	
<i>potassium citrate 10meq</i>	74	<i>pregabalin 150mg cap</i>	24	TAB	
<i>er tab</i>		<i>pregabalin 200mg cap</i>	24	<i>primidone 250mg tab</i>	25
<i>potassium citrate 15meq</i>	74	<i>pregabalin 20mg/ml oral</i>	24	<i>primidone 50mg tab</i>	25
<i>er tab</i>		<i>soln</i>		PRIORIX INJ	93
<i>potassium citrate 5meq er</i>	74	<i>pregabalin 225mg cap</i>	24	PRIVIGEN 20GM/200ML	84
<i>tab</i>		<i>pregabalin 25mg cap</i>	25	INJ	
<i>pramipexole 0.125mg tab</i>	49	<i>pregabalin 300mg cap</i>	25	<i>probenecid 500mg tab</i>	74
<i>pramipexole 0.25mg tab</i>	49	<i>pregabalin 50mg cap</i>	25	<i>prochlorperazine 10mg</i>	53
<i>pramipexole 0.5mg tab</i>	49			<i>tab</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>prochlorperazine 25mg rectal supp</i>	53	<i>propylthiouracil 50mg tab</i>	90	R	
<i>prochlorperazine 5mg tab</i>	53	PROQUAD INJ	94	RABAVERT 2.5UNIT/ML INJ	94
<i>procto-med 2.5% cream</i>	17	PROSOL 20% INJ	82	<i>rabeprazole sodium 20mg dr tab</i>	92
<i>proctosol 2.5% cream</i>	17	<i>protriptyline 10mg tab</i>	29	RADICAVA 105MG/5ML ORAL SUSP	81
<i>proctozone hc 2.5% cream</i>	17	<i>protriptyline 5mg tab</i>	29	RALDESY 10MG/ML ORAL SOLN	27
<i>progesterone 100mg cap</i>	85	PULMOZYME 1MG/ML	88	<i>raloxifene 60mg tab</i>	67
<i>progesterone 200mg cap</i>	85	INH SOLN		<i>ramelteon 8mg tab</i>	76
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	80	PURIXAN 2000MG/100ML ORAL SUSP	41	<i>ramipril 1.25mg cap</i>	35
PROGRAF 1MG GRANULES FOR ORAL SUSP	80	<i>pyrazinamide 500mg tab</i>	40	<i>ramipril 10mg cap</i>	35
PROLASTIN 1000MG INJ	88	<i>pyridostigmine bromide 60mg tab</i>	40	<i>ramipril 2.5mg cap</i>	35
<i>promethazine 1.25mg/ml oral soln</i>	88	<i>pyrimethamine 25mg tab</i>	40	<i>ramipril 5mg cap</i>	35
<i>promethazine 12.5mg tab</i>	88	Q		<i>ranolazine 1000mg er tab</i>	60
<i>promethazine 25mg tab</i>	88	QINLOCK 50MG TAB	45	<i>ranolazine 500mg er tab</i>	60
<i>promethazine 50mg tab</i>	88	QUADRACEL INJ	91	<i>rasagiline 0.5mg tab</i>	49
<i>propafenone 150mg tab</i>	18	QUADRACEL SYRINGE	91	<i>rasagiline 1mg tab</i>	49
<i>propafenone 225mg er cap</i>	18	<i>quetiapine 100mg tab</i>	52	<i>reclipsen tab 28-day pack</i>	72
<i>propafenone 225mg tab</i>	18	<i>quetiapine 150mg er tab</i>	52	RECOMBIVAX 10MCG/ML INJ	94
<i>propafenone 300mg tab</i>	18	<i>quetiapine 200mg er tab</i>	52	RECOMBIVAX 10MCG/ML SYRINGE	94
<i>propafenone 325mg er cap</i>	18	<i>quetiapine 200mg tab</i>	52	RECOMBIVAX 40MCG/ML INJ	94
<i>propafenone 425mg er cap</i>	18	<i>quetiapine 25mg tab</i>	52	RECOMBIVAX 5MCG/0.5ML INJ	94
<i>propranolol 10mg tab</i>	58	<i>quetiapine 300mg er tab</i>	52	RECOMBIVAX 5MCG/0.5ML SYRINGE	94
<i>propranolol 120mg er cap</i>	58	<i>quetiapine 300mg tab</i>	52	REGRANEX 0.01% GEL	66
<i>propranolol 160mg er cap</i>	58	<i>quetiapine 400mg er tab</i>	52	RELENZA 5MG/BLISTER POWDER INHALER	56
<i>propranolol 20mg tab</i>	58	<i>quetiapine 400mg tab</i>	52	<i>repaglinide 0.5mg tab</i>	30
<i>propranolol 40mg tab</i>	58	<i>quetiapine 50mg er tab</i>	52	<i>repaglinide 1mg tab</i>	30
PROPRANOLOL 4MG/ML ORAL SOLN	58	<i>quetiapine 50mg tab</i>	52	<i>repaglinide 2mg tab</i>	30
<i>propranolol 60mg er cap</i>	58	<i>quinapril 10mg tab</i>	35	REPATHA 140MG/ML AUTO-INJECTOR	34
<i>propranolol 60mg tab</i>	58	<i>quinapril 20mg tab</i>	35	REPATHA 140MG/ML SYRINGE	34
<i>propranolol 80mg er cap</i>	58	<i>quinapril 40mg tab</i>	35	REPATHA 420MG/3.5ML CARTRIDGE	34
<i>propranolol 80mg tab</i>	58	<i>quinapril 5mg tab</i>	35	RETACRIT 10000UNIT/ML INJ	75
PROPRANOLOL 8MG/ML ORAL SOLN	58	QUINIDINE SULFATE 200MG TAB	18		
		QUINIDINE SULFATE 300MG TAB	18		
		<i>quinine sulfat 324mg cap</i>	40		
		QVAR 40MCG REDIHALER	20		
		QVAR 80MCG REDIHALER	20		

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ALPHABETICAL LISTING OF DRUGS

RETACRIT	75	RINVOQ 1MG/ML ORAL	12	<i>rivastigmine 4.6mg/24hr</i>	86
20000UNIT/2ML INJ		SOLN		<i>patch</i>	
RETACRIT	75	RINVOQ 30MG ER TAB	12	<i>rivastigmine 6mg cap</i>	86
20000UNIT/ML INJ		RINVOQ 45MG ER TAB	12	<i>rivastigmine 9.5mg/24hr</i>	86
RETACRIT 2000UNIT/ML	75	<i>risedronate sodium</i>	67	<i>patch</i>	
INJ		<i>150mg tab</i>		<i>rizatriptan 10mg odt</i>	77
RETACRIT 3000UNIT/ML	75	<i>risedronate sodium 30mg</i>	67	<i>rizatriptan 10mg tab</i>	77
INJ		<i>tab</i>		<i>rizatriptan 5mg odt</i>	77
RETACRIT	75	<i>risedronate sodium 35mg</i>	67	<i>rizatriptan 5mg tab</i>	77
40000UNIT/ML INJ		<i>tab</i>		ROCKLATAN	83
RETACRIT 4000UNIT/ML	75	<i>risedronate sodium 35mg</i>	67	0.02-0.005% OPTH	
INJ		<i>tab pack (12)</i>		SOLN	
RETEVMO 120MG TAB	45	<i>risedronate sodium 35mg</i>	67	<i>roflumilast 0.5mg tab</i>	89
RETEVMO 160MG TAB	45	<i>tab pack (4)</i>		<i>roflumilast 250mcg tab</i>	89
RETEVMO 40MG TAB	45	<i>risedronate sodium 5mg</i>	67	ROMVIMZA 14MG CAP	46
RETEVMO 80MG TAB	45	<i>tab</i>		ROMVIMZA 20MG CAP	46
REVUFORJ 110MG TAB	47	RISPERIDONE 0.25MG	51	ROMVIMZA 30MG CAP	46
REVUFORJ 160MG TAB	47	ODT		<i>ropinirole 0.25mg tab</i>	49
REVUFORJ 25MG TAB	47	<i>risperidone 0.25mg tab</i>	51	<i>ropinirole 0.5mg tab</i>	49
REXULTI 0.25MG TAB	53	<i>risperidone 0.5mg odt</i>	51	<i>ropinirole 1mg tab</i>	49
REXULTI 0.5MG TAB	53	<i>risperidone 0.5mg tab</i>	51	<i>ropinirole 2mg tab</i>	49
REXULTI 1MG TAB	53	<i>risperidone 1mg odt</i>	51	<i>ropinirole 3mg tab</i>	49
REXULTI 2MG TAB	54	<i>risperidone 1mg tab</i>	51	<i>ropinirole 4mg tab</i>	49
REXULTI 3MG TAB	54	<i>risperidone 1mg/ml oral</i>	51	<i>ropinirole 5mg tab</i>	49
REXULTI 4MG TAB	54	<i>soln</i>		<i>rosuvastatin calcium</i>	34
REYATAZ 50MG ORAL	55	<i>risperidone 2mg odt</i>	51	<i>10mg tab</i>	
POWDER		<i>risperidone 2mg tab</i>	51	<i>rosuvastatin calcium</i>	34
REZDIFFRA 100MG TAB	73	<i>risperidone 37.5mg inj</i>	51	<i>20mg 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>40mg tab</i>	
REZLIDHIA 150MG CAP	46	<i>risperidone 4mg odt</i>	51	<i>rosuvastatin calcium 5mg</i>	34
REZUROCK 200MG TAB	79	<i>risperidone 4mg tab</i>	51	<i>tab</i>	
RHOPRESSA 0.02%	82	<i>risperidone 50mg inj</i>	51	ROTARIX	94
OPHTH SOLN		<i>risperidone microspheres</i>	51	667000UNIT/ML ORAL	
RIBAVIRIN 200MG CAP	56	<i>12.5mg inj</i>		SUSP	
RIBAVIRIN 200MG TAB	56	<i>risperidone microspheres</i>	51	ROTATEQ ORAL SUSP	94
<i>rifabutin 150mg cap</i>	40	<i>25mg inj</i>		<i>roweepra 500mg tab</i>	25
<i>rifampin 150mg cap</i>	40	<i>ritonavir 100mg tab</i>	55	ROZLYTREK 100MG	46
<i>rifampin 300mg cap</i>	40	<i>rivaroxaban 2.5mg tab</i>	21	CAP	
<i>rifampin 600mg inj</i>	40	<i>rivastigmine 1.5mg cap</i>	86	ROZLYTREK 200MG	46
<i>riluzole 50mg tab</i>	81	<i>rivastigmine 13.3mg/24hr</i>	86	CAP	
RIMANTADINE 100MG	56	<i>patch</i>		ROZLYTREK 50MG	46
TAB		<i>rivastigmine 3mg cap</i>	86	ORAL PELLET	
RINVOQ 15MG ER TAB	12	<i>rivastigmine 4.5mg cap</i>	86	RUBRACA 200MG TAB	46

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ALPHABETICAL LISTING OF DRUGS

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 susp</i>	25	SHINGRIX	94	<i>sodium chloride 0.9% inj</i>	79
RUKOBIA 600MG ER TAB	55	50MCG/0.5ML INJ		<i>sodium chloride 0.9%</i>	74
RYBELSUS 14MG TAB	31	SIGNIFOR 0.3MG/ML INJ	68	<i>irrigation soln</i>	
RYBELSUS 3MG TAB	31	SIGNIFOR 0.6MG/ML INJ	68	<i>sodium chloride 3% inj</i>	79
RYBELSUS 7MG TAB	31	SIGNIFOR 0.9MG/ML INJ	68	<i>sodium chloride 50mg/ml inj</i>	79
RYDAPT 25MG CAP	46	<i>sildenafil 20mg tab</i>	89	SODIUM OXYBATE	89
S		<i>silodosin 4mg cap</i>	74	500MG/ML ORAL SOLN	
<i>sajazir 30mg/3ml syringe</i>	76	<i>silodosin 8mg cap</i>	74	<i>sodium phenylbutyrate 3gm/tsp oral powder</i>	68
<i>salmon calcitonin 200unit/act nasal spray</i>	67	<i>silver sulfadiazine 1% cream</i>	66	<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	
SANTYL 250UNIT/GM OINTMENT	66	SIMBRINZA 0.2-1% OPTH SUSP	82	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	76
<i>sapropterin 100mg powder for oral soln</i>	68	SIMLANDI 20MG/0.2ML SYRINGE	13	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	76
<i>sapropterin 100mg tab</i>	68	SIMLANDI 40MG/0.4ML AUTO-INJECTOR	13	SOFOBUBVIR/VELPATAS	56
<i>sapropterin 500mg powder for oral soln</i>	68	SIMLANDI 40MG/0.4ML SYRINGE	13	VIR 400-100MG TAB	
SCSEMBLIX 100MG TAB	46	SIMLANDI 80MG/0.8ML AUTO-INJECTOR	13	SOGROYA 10MG/1.5ML	68
SCSEMBLIX 20MG TAB	46	SIMLANDI 80MG/0.8ML SYRINGE	13	PEN INJ	
SCSEMBLIX 40MG TAB	46	<i>simvastatin 10mg tab</i>	35	SOGROYA 15MG/1.5ML	68
<i>scopolamine 1mg/72hr patch</i>	32	<i>simvastatin 20mg tab</i>	35	PEN INJ	
SECUADO 3.8MG/24HR PATCH	52	<i>simvastatin 40mg tab</i>	35	SOGROYA 5MG/1.5ML	68
SECUADO 5.7MG/24HR PATCH	52	<i>simvastatin 5mg tab</i>	35	PEN INJ	
SECUADO 7.6MG/24HR PATCH	52	<i>simvastatin 80mg tab</i>	35	<i>solifenacin succinate 10mg tab</i>	92
<i>selegiline 5mg cap</i>	49	<i>sirolimus 0.5mg tab</i>	80	<i>solifenacin succinate 5mg tab</i>	92
<i>selegiline 5mg tab</i>	49	<i>sirolimus 1mg tab</i>	80	SOLTAMOX 10MG/5ML	42
<i>selenium sulfide 2.5% shampoo</i>	66	<i>sirolimus 1mg/ml oral soln</i>	80	ORAL SOLN	
SELZENTRY 20MG/ML ORAL SOLN	55	<i>sirolimus 2mg tab</i>	80	SOMAVERT 10MG INJ	69
<i>sertraline 100mg tab</i>	27	SIRTURO 100MG TAB	40	SOMAVERT 15MG INJ	69
<i>sertraline 20mg/ml oral soln</i>	27	SIRTURO 20MG TAB	40	SOMAVERT 20MG INJ	69
<i>sertraline 25mg tab</i>	27	SKYRIZI 150MG/ML AUTO-INJECTOR	64	SOMAVERT 25MG INJ	69
		SKYRIZI 150MG/ML SYRINGE	64	SOMAVERT 30MG INJ	69
		SKYRIZI 180MG/1.2ML CARTRIDGE	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: 09/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>sorafenib 200mg tab</i>	46	SUCRAID 8500UNIT/ML	66	<i>sunitinib 50mg cap</i>	46
<i>sotalol 120mg tab</i>	58	ORAL SOLN		SUNLENCA 300MG TAB	55
<i>sotalol 160mg tab</i>	58	<i>sucralfate 1000mg tab</i>	92	SUNLENCA 300MG TAB	55
<i>sotalol 240mg tab</i>	58	<i>sucralfate 100mg/ml oral</i>	92	THERAPY PACK (4)	
<i>sotalol 80mg tab</i>	58	<i>susp</i>		SUNLENCA 300MG TAB	55
<i>sotalol af 120mg tab</i>	58	SUFLAVE SOLN PACK	76	THERAPY PACK (5)	
<i>sotalol af 160mg tab</i>	58	<i>sulfacetamide sodium</i>	62	SUNOSI 150MG TAB	89
<i>sotalol af 80mg tab</i>	58	<i>10% lotion</i>		SUNOSI 75MG TAB	89
<i>spironolactone 100mg tab</i>	67	<i>sulfacetamide sodium</i>	82	<i>syeda tab 28-day pack</i>	72
<i>spironolactone 25mg tab</i>	67	<i>10% ophth soln</i>		SYMDEKO TAB 4-WEEK	88
<i>spironolactone 50mg tab</i>	67	SULFACETAMIDE/PRED	83	PACK (56)	
<i>sprintec tab 28-day pack</i>	72	NISOLONE 10-0.25%		SYMDEKO TAB	88
SPRITAM 250MG TAB	25	OPHTH SOLN		50-75MG/75MG PACK	
FOR ORAL SUSP		<i>sulfadiazine 500mg tab</i>	89	(56)	
SPRITAM 500MG TAB	25	<i>sulfamethoxazole/trimeth</i>	89	SYMPAZAN 10MG ORAL	22
FOR ORAL SUSP		<i>oprim 200-40mg/5ml oral</i>		FILM	
<i>sps 15gm/60ml susp</i>	80	<i>susp</i>		SYMPAZAN 20MG ORAL	23
<i>sronyx tab 28-day pack</i>	72	<i>sulfamethoxazole/trimeth</i>	89	FILM	
<i>ssd 1% cream</i>	66	<i>oprim 400-80mg tab</i>		SYMPAZAN 5MG ORAL	23
STELARA 45MG/0.5ML	64	<i>sulfamethoxazole/trimeth</i>	89	FILM	
INJ		<i>oprim 800-160mg tab</i>		SYMTUZA	55
STELARA 45MG/0.5ML	64	<i>sulfasalazine 500mg dr</i>	74	150-800-200-10MG TAB	
SYRINGE		<i>tab</i>		SYNJARDY	29
STELARA 90MG/ML	64	<i>sulfasalazine 500mg tab</i>	74	12.5-1000MG TAB	
SYRINGE		<i>sulindac 150mg tab</i>	14	SYNJARDY 12.5-500MG	29
STEQEYMA 90MG/ML	64	<i>sulindac 200mg tab</i>	14	TAB	
SYRINGE		<i>sumatriptan 100mg tab</i>	77	SYNJARDY 5-1000MG	29
STIMUFEND 6MG/0.6ML	75	<i>sumatriptan 20mg/act</i>	77	TAB	
SYRINGE		<i>nasal spray</i>		SYNJARDY 5-500MG	29
STIOLTO	21	<i>sumatriptan 25mg tab</i>	77	TAB	
2.5-2.5MCG/ACT		<i>sumatriptan 4mg/0.5ml</i>	77	SYNJARDY XR	29
INHALER		<i>cartridge</i>		10-1000MG TAB	
STIVARGA 40MG TAB	46	<i>sumatriptan 50mg tab</i>	77	SYNJARDY XR	30
STREPTOMYCIN 1GM	12	<i>sumatriptan 5mg/act</i>	77	12.5-1000MG TAB	
INJ		<i>nasal spray</i>		SYNJARDY XR	30
STRIBILD	55	<i>sumatriptan 6mg/0.5ml</i>	77	25-1000MG TAB	
150-150-200-300MG		<i>auto-injector</i>		SYNJARDY XR	30
TAB		<i>sumatriptan 6mg/0.5ml</i>	77	5-1000MG TAB	
STRIVERDI 2.5MCG/ACT	21	<i>cartridge</i>		SYNTHROID 100MCG	91
INHALER		<i>sumatriptan 6mg/0.5ml</i>	77	TAB	
<i>subvenite 100mg tab</i>	25	<i>inj</i>		SYNTHROID 112MCG	91
<i>subvenite 150mg tab</i>	25	<i>sunitinib 12.5mg cap</i>	46	TAB	
<i>subvenite 200mg tab</i>	25	<i>sunitinib 25mg cap</i>	46	SYNTHROID 125MCG	91
<i>subvenite 25mg tab</i>	25	<i>sunitinib 37.5mg cap</i>	46	TAB	

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ALPHABETICAL LISTING OF DRUGS

SYNTHROID 137MCG TAB	91	TALZENNA 0.5MG CAP	46	<i>teriflunomide 14mg tab</i>	87
SYNTHROID 150MCG TAB	91	TALZENNA 0.75MG CAP	46	<i>teriflunomide 7mg tab</i>	87
SYNTHROID 175MCG TAB	91	TALZENNA 1MG CAP	46	TERIPARATIDE	68
SYNTHROID 200MCG TAB	91	<i>tamoxifen 10mg tab</i>	42	0.02MG/ACT PEN INJ	
SYNTHROID 25MCG TAB	91	<i>tamoxifen 20mg tab</i>	42	<i>testosterone 1%</i>	16
SYNTHROID 300MCG TAB	91	<i>tamsulosin 0.4mg cap</i>	74	<i>(12.5mg/act) gel pump</i>	
SYNTHROID 50MCG TAB	91	<i>tarina 24 fe tab 1/20</i>	72	<i>testosterone 1% (25mg)</i>	16
SYNTHROID 75MCG TAB	91	<i>28-day pack</i>		<i>gel packet</i>	
SYNTHROID 88MCG TAB	91	<i>tarina fe tab 1/20 28-day</i>	72	<i>testosterone 1% (50mg)</i>	16
		<i>pack</i>		<i>gel packet</i>	
		<i>tazarotene 0.1% cream</i>	64	TESTOSTERONE 1.62%	16
		<i>tazicef 1gm inj</i>	61	(1.25GM) GEL PACKET	
		<i>tazicef 2gm inj</i>	61	<i>testosterone 1.62%</i>	16
		TAZICEF 6GM INJ	61	<i>(2.5gm) gel packet</i>	
		TAZVERIK 200MG TAB	46	<i>testosterone 1.62%</i>	16
		TEFLARO 400MG INJ	39	<i>(20.25mg/act) gel pump</i>	
		TEFLARO 600MG INJ	39	<i>testosterone 30mg/act</i>	16
		<i>telmisartan 20mg tab</i>	36	<i>topical soln</i>	
		<i>telmisartan 40mg tab</i>	36	<i>testosterone cypionate</i>	16
		<i>telmisartan 80mg tab</i>	36	<i>100mg/ml inj</i>	
		<i>temazepam 15mg cap</i>	76	<i>testosterone cypionate</i>	16
		<i>temazepam 30mg cap</i>	76	<i>200mg/ml (1ml) inj</i>	
		TENIVAC 4-10UNIT/ML INJ	91	<i>testosterone cypionate</i>	16
		TENIVAC 4-10UNIT/ML SYRINGE	91	<i>200mg/ml inj</i>	
		<i>tenofovir disoproxil</i>	55	TESTOSTERONE	16
		<i>fumarate 300mg tab</i>		ENANTHATE 200MG/ML INJ	
		TEPMETKO 225MG TAB	46	<i>tetrabenazine 12.5mg tab</i>	87
		<i>terazosin 10mg cap</i>	36	<i>tetrabenazine 25mg tab</i>	87
		<i>terazosin 1mg cap</i>	36	<i>tetracycline 250mg cap</i>	90
		<i>terazosin 2mg cap</i>	36	<i>tetracycline 500mg cap</i>	90
		<i>terazosin 5mg cap</i>	36	THALOMID 100MG CAP	79
		<i>terbinafine 250mg tab</i>	33	THALOMID 50MG CAP	79
		<i>terbutaline sulfate 2.5mg</i>	21	THEOPHYLLINE 100MG	89
		<i>tab</i>		ER TAB	
		<i>terbutaline sulfate 5mg</i>	21	THEOPHYLLINE 200MG	89
		<i>tab</i>		ER TAB	
		<i>terconazole 0.4% vaginal</i>	94	<i>theophylline 300mg er</i>	89
		<i>cream</i>		<i>tab</i>	
		<i>terconazole 0.8% vaginal</i>	94	<i>theophylline 400mg er</i>	89
		<i>cream</i>		<i>tab</i>	
		<i>terconazole 80mg vaginal</i>	94	<i>theophylline 450mg er</i>	89
		<i>insert</i>		<i>tab</i>	
T					
TABLOID 40MG TAB	41				
TABRECTA 150MG TAB	46				
TABRECTA 200MG TAB	46				
<i>tacrolimus 0.03%</i>	65				
<i>ointment</i>					
<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				
<i>tadalafil 5mg tab</i>	74				
TAFINLAR 10MG TAB	46				
FOR ORAL SUSP					
TAFINLAR 50MG CAP	46				
TAFINLAR 75MG CAP	46				
TAGRISSO 40MG TAB	41				
TAGRISSO 80MG TAB	41				
TAKHZYRO 300MG/2ML INJ	76				
TAKHZYRO 300MG/2ML SYRINGE	76				
TALZENNA 0.1MG CAP	46				
TALZENNA 0.25MG CAP	46				
TALZENNA 0.35MG CAP	46				

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ALPHABETICAL LISTING OF DRUGS

<i>theophylline 600mg er tab</i>	89	TIVICAY 5MG TAB FOR ORAL SUSP	55	<i>tramadol 100mg er tab</i>	15
<i>thioridazine 100mg tab</i>	53	<i>tizanidine 2mg cap</i>	81	<i>tramadol 200mg er tab</i>	15
<i>thioridazine 10mg tab</i>	53	<i>tizanidine 2mg tab</i>	81	<i>tramadol 300mg er tab</i>	15
<i>thioridazine 25mg tab</i>	53	<i>tizanidine 4mg cap</i>	81	<i>tramadol 50mg tab</i>	15
<i>thioridazine 50mg tab</i>	53	<i>tizanidine 4mg tab</i>	81	<i>tramadol/acetaminophen 37.5-325mg tab</i>	16
<i>thiothixene 10mg cap</i>	50	<i>tizanidine 6mg cap</i>	81	<i>trandolapril 1mg tab</i>	35
<i>thiothixene 1mg cap</i>	50	<i>tobramycin 0.3% ophth soln</i>	82	<i>trandolapril 2mg tab</i>	35
<i>thiothixene 2mg cap</i>	50	TOBRAMYCIN 10MG/ML INJ	12	<i>trandolapril 4mg tab</i>	35
<i>thiothixene 5mg cap</i>	50	<i>tobramycin 300mg/5ml inh soln</i>	12	<i>tranexamic acid 650mg tab</i>	75
<i>tiadylt 120mg er (24hr) cap</i>	59	<i>tobramycin 80mg/2ml inj</i>	12	<i>tranylcypromine 10mg tab</i>	27
<i>tiadylt 180mg er (24hr) cap</i>	59	<i>tolterodine tartrate 1mg tab</i>	92	TRAVASOL 10% INJ	82
<i>tiadylt 240mg er (24hr) cap</i>	59	<i>tolterodine tartrate 2mg er cap</i>	92	<i>travoprost 0.004% ophth soln</i>	83
<i>tiadylt 300mg er (24hr) cap</i>	59	<i>tolterodine tartrate 2mg tab</i>	92	<i>trazodone 100mg tab</i>	27
<i>tiadylt 360mg er (24hr) cap</i>	59	<i>tolterodine tartrate 4mg er cap</i>	92	<i>trazodone 150mg tab</i>	27
<i>tiadylt 420mg er (24hr) cap</i>	59	<i>topiramate 100mg tab</i>	25	<i>trazodone 50mg tab</i>	27
<i>tiagabine 12mg tab</i>	25	<i>topiramate 15mg cap</i>	25	TRECTOR 250MG TAB	40
<i>tiagabine 16mg tab</i>	25	<i>topiramate 200mg tab</i>	25	TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER	21
<i>tiagabine 2mg tab</i>	25	<i>topiramate 25mg cap</i>	25	TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	
<i>tiagabine 4mg tab</i>	26	<i>topiramate 25mg tab</i>	25	TRELSTAR 11.25MG INJ	42
TIBSOVO 250MG TAB	46	<i>topiramate 50mg tab</i>	25	TRELSTAR 22.5MG INJ	42
<i>ticagrelor 60mg tab</i>	75	<i>toremifene 60mg tab</i>	42	TRELSTAR 3.75MG INJ	42
<i>ticagrelor 90mg tab</i>	75	<i>torpenz 10mg tab</i>	46	TREMFYA 100MG/ML AUTO-INJECTOR	64
TICOVAC 1.2MCG/0.25ML SYRINGE	94	<i>torpenz 2.5mg tab</i>	46	TREMFYA 100MG/ML SYRINGE	64
TICOVAC 2.4MCG/0.5ML SYRINGE	94	<i>torpenz 5mg tab</i>	46	TREMFYA 200MG/2ML AUTO-INJECTOR	64
<i>tigecycline 50mg inj</i>	39	<i>torpenz 7.5mg tab</i>	46	TREMFYA 200MG/2ML AUTO-INJECTOR	74
<i>timolol 0.25% ophth gel</i>	82	<i>torseamide 100mg tab</i>	67	INDUCTION PACK FOR CROHNS (2)	
<i>timolol 0.25% ophth soln</i>	82	<i>torseamide 10mg tab</i>	67	TREMFYA 200MG/2ML SYRINGE	64
<i>timolol 0.5% ophth gel</i>	82	<i>torseamide 20mg tab</i>	67	TRESIBA 100UNIT/ML INJ	31
<i>timolol 0.5% ophth soln</i>	82	<i>torseamide 5mg tab</i>	67		
<i>timolol 10mg tab</i>	58	TOUJEO 300UNIT/ML PEN INJ (1.5ML)	31		
<i>timolol 5mg tab</i>	58	TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	31		
<i>tinidazole 250mg tab</i>	39	TPN ELECTROLYTES INJ	78		
<i>tinidazole 500mg tab</i>	39	TRADJENTA 5MG TAB	30		
TIVICAY 50MG TAB	55				

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ALPHABETICAL LISTING OF DRUGS

TRESIBA 100UNIT/ML PEN INJ	31	TRIJARDY XR 10-5-1000MG TAB	30	<i>trosipium chloride 60mg er cap</i>	93
TRESIBA 200UNIT/ML PEN INJ	31	TRIJARDY XR 12.5-2.5-1000MG TAB	30	TRULANCE 3MG TAB	77
<i>tretinoin 0.01% gel</i>	62	TRIJARDY XR	30	TRULICITY	31
<i>tretinoin 0.025% cream</i>	63	25-5-1000MG TAB		0.75MG/0.5ML	
<i>tretinoin 0.025% gel</i>	63	TRIJARDY XR	30	AUTO-INJECTOR	
<i>tretinoin 0.05% cream</i>	63	5-2.5-1000MG TAB		TRULICITY	31
<i>tretinoin 0.1% cream</i>	63	TRIKAFTA	88	1.5MG/0.5ML	
<i>tretinoin 10mg cap</i>	47	100-50-75MG/150MG TAB PACK (84)		AUTO-INJECTOR	
<i>triamcinolone acetonide 0.025% cream</i>	65	TRIKAFTA	88	TRULICITY 3MG/0.5ML	31
<i>triamcinolone acetonide 0.025% lotion</i>	65	100-50-75MG/75MG GRANULES PACK (56)		AUTO-INJECTOR	
<i>triamcinolone acetonide 0.025% ointment</i>	65	TRIKAFTA	88	TRULICITY	31
<i>triamcinolone acetonide 0.1% cream</i>	65	50-37.5-25MG/75MG TAB PACK (84)		4.5MG/0.5ML	
<i>triamcinolone acetonide 0.1% lotion</i>	65	TRIKAFTA	88	AUTO-INJECTOR	
<i>triamcinolone acetonide 0.1% ointment</i>	65	80-40-60MG/59.5MG GRANULES PACK (56)		TRUMENBA SYRINGE	93
<i>triamcinolone acetonide 0.1% oral paste</i>	62	<i>tri-lo- estarylla tab 28-day pack</i>	72	TRUQAP 160MG TAB	46
<i>triamcinolone acetonide 0.5% cream</i>	65	<i>tri-lo-sprintec tab 28-day pack</i>	72	TRUQAP 200MG TAB	46
<i>triamcinolone acetonide 0.5% ointment</i>	65	<i>trimethoprim 100mg tab</i>	39	TUKYSA 150MG TAB	47
<i>triazolam 0.125mg tab</i>	76	<i>tri-mili tab 28-day pack</i>	72	TUKYSA 50MG TAB	47
<i>triazolam 0.25mg tab</i>	76	<i>trimipramine 100mg cap</i>	29	TURALIO 125MG CAP	46
<i>tridacaine 5% patch</i>	66	<i>trimipramine 25mg cap</i>	29	<i>turqoz tab 28-day pack</i>	72
<i>triderm 0.5% cream</i>	65	<i>trimipramine 50mg cap</i>	29	TWINRIX SYRINGE	94
<i>trientine 250mg cap</i>	79	TRINTELLIX 10MG TAB	27	TYBOST 150MG TAB	55
<i>tri-estarylla tab 28-day pack</i>	72	TRINTELLIX 20MG TAB	27	TYENNE 162MG/0.9ML	13
<i>trifluoperazine 10mg tab</i>	53	TRINTELLIX 5MG TAB	27	AUTO-INJECTOR	
<i>trifluoperazine 1mg tab</i>	53	<i>tri-sprintec tab 28-day pack</i>	72	TYENNE 162MG/0.9ML	13
<i>trifluoperazine 2mg tab</i>	53	TRIUMEQ	55	SYRINGE	
<i>trifluoperazine 5mg tab</i>	53	600-50-300MG TAB		TYMLOS	68
TRIFLURIDINE 1%	82	TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	55	3120MCG/1.56ML PEN	
OPHTH SOLN		<i>tri-vylibra lo tab 28-day pack</i>	72	INJ	
<i>trihexyphenidyl 2mg tab</i>	48	<i>tri-vylibra tab 28-day pack</i>	72	TYPHIM VI	93
<i>trihexyphenidyl 5mg tab</i>	48	<i>trosipium chloride 20mg tab</i>	93	25MCG/0.5ML INJ	
				TYPHIM VI	93
				25MCG/0.5ML SYRINGE	
				U	
				UBRELVY 100MG TAB	77
				UBRELVY 50MG TAB	77
				<i>unithroid 100mcg tab</i>	91
				<i>unithroid 112mcg tab</i>	91
				<i>unithroid 125mcg tab</i>	91
				<i>unithroid 137mcg tab</i>	91
				<i>unithroid 150mcg tab</i>	91
				<i>unithroid 175mcg tab</i>	91
				<i>unithroid 200mcg tab</i>	91

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ALPHABETICAL LISTING OF DRUGS

<i>unithroid 25mcg tab</i>	91	VALTOCO 20MG	23	VELTASSA 8.4GM	80
<i>unithroid 300mcg tab</i>	91	(10MG/0.1ML) NASAL		POWDER FOR ORAL	
<i>unithroid 50mcg tab</i>	91	SPRAY DOSE PACK		SUSP	
<i>unithroid 75mcg tab</i>	91	VALTOCO 5MG	23	VEMLIDY 25MG TAB	56
<i>unithroid 88mcg tab</i>	91	(5MG/0.1ML) NASAL		VENCLEXTA 100MG	47
<i>ursodiol 250mg tab</i>	73	SPRAY DOSE PACK		TAB	
<i>ursodiol 300mg cap</i>	73	<i>valtya tab 1/50 28-day</i>	72	VENCLEXTA 10MG TAB	47
<i>ursodiol 500mg tab</i>	73	<i>pack</i>		VENCLEXTA 50MG TAB	48
UZEDY 100MG/0.28ML	51	<i>vancomycin 100mg/ml inj</i>	39	VENCLEXTA TAB	48
SYRINGE		<i>vancomycin 125mg cap</i>	39	STARTER PACK (42)	
UZEDY 125MG/0.35ML	51	<i>vancomycin 1gm inj</i>	39	<i>venlafaxine 100mg tab</i>	28
SYRINGE		<i>vancomycin 250mg cap</i>	39	<i>venlafaxine 150mg er cap</i>	28
UZEDY 150MG/0.42ML	51	<i>vancomycin 500mg inj</i>	39	<i>venlafaxine 25mg tab</i>	28
SYRINGE		<i>vancomycin 750mg inj</i>	39	<i>venlafaxine 37.5mg er</i>	28
UZEDY 200MG/0.56ML	51	VANFLYTA 17.7MG TAB	46	<i>cap</i>	
SYRINGE		VANFLYTA 26.5MG TAB	46	<i>venlafaxine 37.5mg tab</i>	28
UZEDY 250MG/0.7ML	51	VAQTA 25UNIT/0.5ML	94	<i>venlafaxine 50mg tab</i>	28
SYRINGE		INJ		<i>venlafaxine 75mg er cap</i>	28
UZEDY 50MG/0.14ML	51	VAQTA 25UNIT/0.5ML	94	<i>venlafaxine 75mg tab</i>	28
SYRINGE		SYRINGE		VENTOLIN 108MCG HFA	21
UZEDY 75MG/0.21ML	51	VAQTA 50UNIT/ML INJ	94	INHALER	
SYRINGE		VAQTA 50UNIT/ML	94	<i>verapamil 120mg er cap</i>	59
		SYRINGE		<i>verapamil 120mg er tab</i>	59
V		<i>varenicline 0.5mg tab</i>	87	<i>verapamil 120mg tab</i>	59
<i>valacyclovir 1000mg tab</i>	56	<i>varenicline 0.5mg/1mg</i>	87	<i>verapamil 180mg er cap</i>	59
<i>valacyclovir 500mg tab</i>	56	<i>first month pack (53)</i>		<i>verapamil 180mg er tab</i>	59
VALCHLOR 0.016% GEL	63	<i>varenicline 1mg tab</i>	87	<i>verapamil 240mg er cap</i>	59
<i>valganciclovir 450mg tab</i>	56	<i>varenicline 1mg tab pack</i>	87	<i>verapamil 240mg er tab</i>	59
<i>valganciclovir 50mg/ml</i>	56	<i>(56)</i>		VERAPAMIL 360MG ER	59
<i>oral soln</i>		VARIVAX	94	CAP	
<i>valproic acid 250mg cap</i>	26	1350PFU/0.5ML INJ		<i>verapamil 40mg tab</i>	59
<i>valproic acid 50mg/ml</i>	26	VAXCHORA SUSP	93	<i>verapamil 80mg tab</i>	59
<i>oral soln</i>		VELIVET TAB 28-DAY	72	VERQUVO 10MG TAB	60
<i>valsartan 160mg tab</i>	36	PACK		VERQUVO 2.5MG TAB	60
<i>valsartan 320mg tab</i>	36	VELTASSA 16.8GM	80	VERQUVO 5MG TAB	60
<i>valsartan 40mg tab</i>	36	POWDER FOR ORAL		VERSACLOZ 50MG/ML	52
<i>valsartan 80mg tab</i>	36	SUSP		ORAL SUSP	
VALTOCO 10MG	23	VELTASSA 1GM	80	VERZENIO 100MG TAB	46
(10MG/0.1ML) NASAL		POWDER FOR ORAL		VERZENIO 150MG TAB	46
SPRAY DOSE PACK		SUSP		VERZENIO 200MG TAB	47
VALTOCO 15MG	23	VELTASSA 25.2GM	80	VERZENIO 50MG TAB	47
(7.5MG/0.1ML) NASAL		POWDER FOR ORAL		<i>vestura tab 3-0.02mg</i>	72
SPRAY DOSE PACK		SUSP		<i>28-day pack</i>	
				<i>vienna tab 28-day pack</i>	72

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: 09/01/2025

ALPHABETICAL LISTING OF DRUGS

<i>vigabatrin 500mg powder for oral soln</i>	26	VRAYLAR 3MG CAP	50	XALKORI 50MG ORAL PELLET	47
<i>vigabatrin 500mg tab</i>	26	VRAYLAR 4.5MG CAP	50	XARELTO 10MG TAB	21
<i>vigadrone 500mg powder for oral soln</i>	26	VRAYLAR 6MG CAP	50	XARELTO 15MG TAB	21
<i>vigadrone 500mg tab</i>	26	<i>vyfemla tab 28-day pack</i>	72	XARELTO 1MG/ML	21
VIGAFYDE 100MG/ML ORAL SOLN	26	<i>vylibra tab 28-day pack</i>	72	ORAL SUSP	
<i>vigpoder 500mg powder for oral soln</i>	26	VYNDAMAX 61MG CAP	60	XARELTO 2.5MG TAB	21
<i>vilazodone 10mg tab</i>	27	VYNDAQEL 20MG CAP	60	XARELTO 20MG TAB	21
<i>vilazodone 20mg tab</i>	28	W		XARELTO TAB STARTER PACK (51)	21
<i>vilazodone 40mg tab</i>	28	<i>warfarin sodium 10mg tab</i>	22	XATMEP 2.5MG/ML ORAL SOLN	41
VIMKUNYA 40MCG/0.8ML SYRINGE	94	<i>warfarin sodium 1mg tab</i>	22	XCOPRI 100MG TAB	25
VIRACEPT 250MG TAB	55	<i>warfarin sodium 2.5mg tab</i>	22	XCOPRI 150MG TAB	25
VIRACEPT 625MG TAB	55	<i>warfarin sodium 2mg tab</i>	22	XCOPRI 200MG TAB	25
VIREAD 150MG TAB	55	<i>warfarin sodium 3mg tab</i>	22	XCOPRI 25MG TAB	25
VIREAD 200MG TAB	56	<i>warfarin sodium 4mg tab</i>	22	XCOPRI 50MG TAB	25
VIREAD 250MG TAB	56	<i>warfarin sodium 5mg tab</i>	22	XCOPRI TAB 100/150MG MAINTENANCE PACK (56)	25
VIREAD 40MG/GM ORAL POWDER	56	<i>warfarin sodium 6mg tab</i>	22	XCOPRI TAB 12.5/25MG TITRATION PACK (28)	25
VITRAKVI 100MG CAP	47	<i>warfarin sodium 7.5mg tab</i>	22	XCOPRI TAB 150/200MG PACK (56)	25
VITRAKVI 20MG/ML ORAL SOLN	47	WELIREG 40MG TAB	48	XCOPRI TAB 150/200MG TITRATION PACK (28)	25
VITRAKVI 25MG CAP	47	WINREVAIR 45MG INJ	89	XCOPRI TAB 50/100MG TITRATION PACK (28)	25
VIVITROL 380MG INJ	32	WINREVAIR 45MG INJ (2 VIAL PACK)	89	XDEMVY 0.25% OPHTH SOLN	82
VIVOTIF DR CAP	93	WINREVAIR 60MG INJ	89	XELJANZ 10MG TAB	12
VIZIMPRO 15MG TAB	41	WINREVAIR 60MG INJ (2 VIAL PACK)	89	XELJANZ 1MG/ML ORAL SOLN	12
VIZIMPRO 30MG TAB	41	<i>wixela 100-50mcg powder inhaler</i>	21	XELJANZ 5MG TAB	12
VIZIMPRO 45MG TAB	41	<i>wixela 250-50mcg powder inhaler</i>	21	XELJANZ XR 11MG TAB	13
VONJO 100MG CAP	47	<i>wixela 500-50mcg powder inhaler</i>	21	XELJANZ XR 22MG TAB	13
VORANIGO 10MG TAB	47	WYOST 120MG/1.7ML INJ	68	XERMELO 250MG TAB	32
VORANIGO 40MG TAB	47	X		XIFAXAN 550MG TAB	39
<i>voriconazole 200mg inj</i>	33	XALKORI 150MG ORAL PELLET	47	XIGDUO XR 10-1000MG TAB	30
<i>voriconazole 200mg tab</i>	33	XALKORI 200MG CAP	47	XIGDUO XR 10-500MG TAB	30
<i>voriconazole 40mg/ml oral susp</i>	33	XALKORI 20MG ORAL PELLET	47	XIGDUO XR 2.5-1000MG TAB	30
<i>voriconazole 50mg tab</i>	33	XALKORI 250MG CAP	47		
VOSEVI 400-100-100MG TAB	56				
VOWST 30000000UNIT CAP	74				
VRAYLAR 1.5MG CAP	50				

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ALPHABETICAL LISTING OF DRUGS

XIGDUO XR 5-1000MG TAB	30	XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	48	<i>ziprasidone 40mg cap</i>	50
XIGDUO XR 5-500MG TAB	30	XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	48	<i>ziprasidone 60mg cap</i>	50
XIIDRA 5% OPHTH SOLN	83	XTANDI 40MG CAP	42	<i>ziprasidone 80mg cap</i>	50
XOFLUZA 40MG TAB	57	XTANDI 40MG TAB	42	ZOLINZA 100MG CAP	47
XOFLUZA 80MG TAB	57	XTANDI 80MG TAB	42	<i>zolmitriptan 2.5mg tab</i>	77
XOLAIR 150MG INJ	19	<i>xulane 150-35mcg/24hr patch</i>	72	<i>zolmitriptan 5mg tab</i>	77
XOLAIR 150MG/ML AUTO-INJECTOR	19	Y		<i>zolidem tartrate 10mg tab</i>	76
XOLAIR 150MG/ML SYRINGE	19	YESINTEK 90MG/ML SYRINGE	64	<i>zolidem tartrate 12.5mg er tab</i>	76
XOLAIR 300MG/2ML AUTO-INJECTOR	19	YF-VAX INJ	94	<i>zolidem tartrate 5mg tab</i>	76
XOLAIR 300MG/2ML SYRINGE	19	<i>yuvafem 10mcg vaginal insert</i>	94	<i>zolidem tartrate 6.25mg er tab</i>	76
XOLAIR 75MG/0.5ML AUTO-INJECTOR	19	Z		ZONISADE 100MG/5ML ORAL SUSP	25
XOLAIR 75MG/0.5ML SYRINGE	19	<i>zafemy 150-35mcg/24hr patch</i>	72	<i>zonisamide 100mg cap</i>	25
XOPENEX 45MCG INHALER	21	<i>zafirlukast 10mg tab</i>	19	<i>zonisamide 25mg cap</i>	25
XOSPATA 40MG TAB	47	<i>zafirlukast 20mg tab</i>	19	<i>zonisamide 50mg cap</i>	25
XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	48	<i>zaleplon 10mg cap</i>	76	<i>zovia 1mg-35mcg tab 28-day pack</i>	72
XPOVIO TAB 40MG ONCE WEEKLY CARTON (16)	48	<i>zaleplon 5mg cap</i>	76	ZTALMY 50MG/ML ORAL SUSP	25
XPOVIO TAB 40MG ONCE WEEKLY CARTON (4)	48	ZAVZPRET 10MG/ACT NASAL SPRAY	77	ZURZUVAE 20MG CAP	26
XPOVIO TAB 40MG TWICE WEEKLY CARTON (8)	48	ZEJULA 100MG TAB	47	ZURZUVAE 25MG CAP	26
XPOVIO TAB 60MG ONCE WEEKLY CARTON (4)	48	ZEJULA 200MG TAB	47	ZURZUVAE 30MG CAP	26
XPOVIO TAB 60MG TWICE WEEKLY CARTON (24)	48	ZEJULA 300MG TAB	47	ZYDELIG 100MG TAB	47
		ZELBORAF 240MG TAB	47	ZYDELIG 150MG TAB	47
		ZEMAIRA 1000MG INJ	88	ZYKADIA 150MG TAB	47
		<i>zenatane 10mg cap</i>	63		
		<i>zenatane 20mg cap</i>	63		
		<i>zenatane 30mg cap</i>	63		
		<i>zenatane 40mg cap</i>	63		
		<i>zidovudine 100mg cap</i>	56		
		<i>zidovudine 10mg/ml oral soln</i>	56		
		<i>zidovudine 300mg tab</i>	56		
		ZIMHI 5MG/0.5ML SYRINGE	32		
		<i>ziprasidone 20mg cap</i>	50		
		<i>ziprasidone 20mg inj</i>	50		

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This formulary was updated on 09/01/2025. 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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