



2026

# Formulary

## (List of Covered Drugs or “Drug List”)

Peak Advantage Summit (PPO)

Peak Advantage Vista (PPO)

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

26182, Version Number 9

This formulary was updated on 03/01/2026.

For more recent information or other  
questions, please contact Peak Health  
Insurance Customer Care at 1-855-847-1026  
(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](http://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 Drug List (formulary) for our plan which is current as of 03/01/2026. 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, 2026, 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](http://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’s formulary?”

**Changes that will not affect you if you are currently taking the drug.** Generally, if you are taking a drug on our 2026 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2026 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

The enclosed formulary is current as of 03/01/2026. 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 93. 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 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 our plan 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’s 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 Customer Care 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 Customer Care 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 our plan 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 our plan 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. The transition process is applicable to Part D drugs that are not on the formulary or Part D drugs that are on the formulary but require prior authorization (PA), exceed quality limits (QL), or require step therapy (ST) under our plan's utilization management rules. 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. If you have trouble finding your drug in the list, turn to the Index that begins on page 93.

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 costs 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 Customer Care. 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 2026:**

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

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

**b:** You won't pay more than \$35 for a one-month supply of each covered insulin product regardless of the cost-sharing tier. You won't pay more than \$105 for up to a 3-month supply of each covered insulin product regardless of the cost-sharing tier.

**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.

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS</b>		
<b>AMPHETAMINES</b>		
<i>amphetamine/dextroamphetamine 10mg er cap</i>	2	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>	2	QL=30 EA/30 Days
<i>amphetamine/dextroamphetamine 15mg tab</i>	1	QL=60 EA/30 Days
<i>amphetamine/dextroamphetamine 20mg er cap</i>	2	QL=30 EA/30 Days
<i>amphetamine/dextroamphetamine 20mg tab</i>	1	QL=90 EA/30 Days
<i>amphetamine/dextroamphetamine 25mg er cap</i>	2	QL=30 EA/30 Days
<i>amphetamine/dextroamphetamine 30mg er cap</i>	2	QL=30 EA/30 Days
<i>amphetamine/dextroamphetamine 30mg tab</i>	1	QL=60 EA/30 Days
<i>amphetamine/dextroamphetamine 5mg er cap</i>	2	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>	2	
<i>dextroamphetamine sulfate 5mg tab</i>	2	
<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	
<b>ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS</b>		
<i>atomoxetine 100mg cap</i>	2	QL=30 EA/30 Days
<i>atomoxetine 10mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 18mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 25mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 40mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 60mg cap</i>	2	QL=60 EA/30 Days
<i>atomoxetine 80mg cap</i>	2	QL=30 EA/30 Days
<i>clonidine 0.1mg er tab</i>	2	
<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	
<b>STIMULANTS - MISC.</b>		
<i>armodafinil 150mg tab</i>	2	PA QL=30 EA/30 Days
<i>armodafinil 200mg tab</i>	2	PA QL=30 EA/30 Days
<i>armodafinil 250mg tab</i>	2	PA QL=30 EA/30 Days
<i>armodafinil 50mg tab</i>	2	PA QL=30 EA/30 Days
<i>dexmethylphenidate 10mg tab</i>	1	QL=60 EA/30 Days
<i>dexmethylphenidate 2.5mg tab</i>	1	QL=60 EA/30 Days
<i>dexmethylphenidate 5mg tab</i>	1	QL=60 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>methylphenidate 10mg er tab</i>	2	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
<i>methylphenidate 1mg/ml oral soln</i>	2	QL=1800 ML/30 Days
<i>methylphenidate 20mg er tab</i>	2	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>	2	PA QL=60 EA/30 Days
<i>modafinil 200mg tab</i>	2	PA QL=60 EA/30 Days
<b>AMINOGLYCOSIDES</b>		
<b>AMINOGLYCOSIDES</b>		
<i>amikacin 250mg/ml inj</i>	2	
ARIKAYCE 590MG/8.4ML INH SUSP	5	NDS PA QL=235.20 ML/28 Days
GENTAMICIN 0.8MG/ML INJ	2	
GENTAMICIN 1.2MG/ML INJ	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>	2	PA QL=280 ML/28 Days
<i>tobramycin 80mg/2ml inj</i>	2	
<b>ANALGESICS - ANTI-INFLAMMATORY</b>		
<b>ANTIRHEUMATIC - ENZYME INHIBITORS</b>		
<i>leflunomide 10mg tab</i>	2	QL=30 EA/30 Days
<i>leflunomide 20mg tab</i>	2	QL=30 EA/30 Days
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
XELJANZ XR 11MG TAB	5	NDS PA QL=30 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
XELJANZ XR 22MG TAB	5	NDS PA QL=30 EA/30 Days
<b>ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES</b>		
CIMZIA 200MG INJ	5	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE	5	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE STARTER KIT (6)	5	NDS PA QL=3 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=3 EA/28 Days
<b>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)</b>		
<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>	2	QL=60 EA/30 Days
<i>diclofenac sodium 25mg dr tab</i>	1	QL=240 EA/30 Days
<i>diclofenac sodium 50mg dr tab</i>	1	QL=120 EA/30 Days
<i>diclofenac sodium 75mg dr tab</i>	1	QL=60 EA/30 Days
<i>diflunisal 500mg tab</i>	2	QL=90 EA/30 Days
<i>etodolac 200mg cap</i>	2	QL=150 EA/30 Days
<i>etodolac 300mg cap</i>	2	QL=90 EA/30 Days
<i>etodolac 400mg tab</i>	2	QL=60 EA/30 Days
<i>etodolac 500mg tab</i>	2	QL=60 EA/30 Days
FLURBIPROFEN 100MG TAB	2	QL=90 EA/30 Days
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>meloxicam 7.5mg tab</i>	1	
<i>nabumetone 500mg tab</i>	1	QL=120 EA/30 Days
<i>nabumetone 750mg tab</i>	1	QL=60 EA/30 Days
<i>naproxen 250mg tab</i>	1	
<i>naproxen 375mg dr tab</i>	2	QL=120 EA/30 Days
<i>naproxen 375mg tab</i>	1	
<i>naproxen 500mg tab</i>	1	
<i>piroxicam 10mg cap</i>	1	QL=60 EA/30 Days
<i>piroxicam 20mg cap</i>	1	QL=30 EA/30 Days
<i>sulindac 150mg tab</i>	1	QL=60 EA/30 Days
<i>sulindac 200mg tab</i>	1	QL=60 EA/30 Days
ANALGESICS - OPIOID		
OPIOID AGONISTS		
<i>fentanyl 100mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>fentanyl 12mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>fentanyl 25mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>fentanyl 50mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>fentanyl 75mcg/hr patch</i>	2	QL=10 EA/30 Days
<i>hydromorphone 2mg tab</i>	1	QL=450 EA/30 Days
<i>hydromorphone 4mg tab</i>	1	QL=240 EA/30 Days
<i>hydromorphone 8mg tab</i>	1	QL=120 EA/30 Days
<i>methadone 10mg tab</i>	1	QL=360 EA/30 Days
METHADONE 1MG/ML ORAL SOLN	1	QL=3600 ML/30 Days
METHADONE 2MG/ML ORAL SOLN	2	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>	2	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	2	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>hydrocodone bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>	2	QL=5400 ML/30 Days
<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/ibuprofen 7.5-200mg tab</i>	2	QL=480 EA/30 Days
<i>oxycodone/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 2.5-325mg tab</i>	2	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=120 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=120 EA/30 Days
<i>buprenorphine/naloxone 12-3mg sl film</i>	1	
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	1	QL=120 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	1	QL=120 EA/30 Days
<i>buprenorphine/naloxone 4-1mg sl film</i>	1	QL=120 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl film</i>	1	QL=120 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	1	QL=120 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>testosterone 1% (12.5mg/act) topical gel pump</i>	2	PA QL=300 GM/30 Days
<i>testosterone 1% (25mg) topical gel packet</i>	2	PA QL=300 GM/30 Days

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<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>testosterone 1% (50mg) topical gel packet</i>	2	PA QL=300 GM/30 Days
<i>testosterone 1.62% (20.25mg/act) topical 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>	2	
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	2	
<i>testosterone cypionate 200mg/ml inj</i>	2	
TESTOSTERONE ENANTHATE 200MG/ML INJ	2	QL=5 ML/28 Days
<b>ANORECTAL AND RELATED PRODUCTS</b>		
<b>RECTAL PRODUCTS - MISC.</b>		
<i>hydrocortisone 1.67mg/ml enema</i>	2	
<i>hydrocortisone 2.5% topical cream</i>	1	QL=60 GM/30 Days
<i>nitroglycerin 0.4% rectal ointment</i>	2	QL=30 GM/30 Days
<i>procto-med 2.5% topical cream</i>	1	QL=60 GM/30 Days
<i>proctosol 2.5% topical cream</i>	1	QL=60 GM/30 Days
<i>proctozone hc 2.5% topical cream</i>	1	QL=60 GM/30 Days
<b>ANTHELMINTICS</b>		
<b>ANTHELMINTICS</b>		
<i>albendazole 200mg tab</i>	2	QL=672 EA/365 Days
<i>ivermectin 3mg tab</i>	2	PA QL=30 EA/90 Days
<i>praziquantel 600mg tab</i>	2	
<b>ANTIANGINAL AGENTS</b>		
<b>NITRATES</b>		
<i>isosorbide dinitrate 10mg tab</i>	2	
<i>isosorbide dinitrate 20mg tab</i>	2	
<i>isosorbide dinitrate 30mg tab</i>	2	
<i>isosorbide dinitrate 5mg tab</i>	2	
ISOSORBIDE MONONITRATE 10MG TAB	2	
<i>isosorbide mononitrate 120mg er tab</i>	1	
ISOSORBIDE MONONITRATE 20MG TAB	2	
<i>isosorbide mononitrate 30mg er tab</i>	1	
<i>isosorbide mononitrate 60mg er tab</i>	1	
NITRO-BID 2% TOPICAL OINTMENT	2	
<i>nitroglycerin 0.1mg/hr patch</i>	2	
<i>nitroglycerin 0.2mg/hr patch</i>	2	
<i>nitroglycerin 0.3mg sl tab</i>	1	
<i>nitroglycerin 0.4mg sl tab</i>	1	
<i>nitroglycerin 0.4mg/hr patch</i>	2	
<i>nitroglycerin 0.6mg sl tab</i>	1	
<i>nitroglycerin 0.6mg/hr patch</i>	2	
<b>ANTIANSIETY AGENTS</b>		
<b>ANTIANSIETY AGENTS - MISC.</b>		
<i>bupirone 10mg tab</i>	1	
<i>bupirone 15mg tab</i>	1	
<i>bupirone 30mg tab</i>	1	
<i>bupirone 5mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	
<i>hydroxyzine 50mg tab</i>	1	
<i>hydroxyzine pamoate 25mg cap</i>	1	
<i>hydroxyzine pamoate 50mg cap</i>	1	
BENZODIAZEPINES		
<i>alprazolam 0.25mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 0.5mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 1mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 2mg tab</i>	1	QL=150 EA/30 Days
<i>chlordiazepoxide 10mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 25mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 5mg cap</i>	1	QL=120 EA/30 Days
<i>clorazepate dipotassium 15mg tab</i>	2	QL=180 EA/30 Days
<i>clorazepate dipotassium 3.75mg tab</i>	2	QL=90 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>	2	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>	2	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
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=8 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<b>ANTI-INFLAMMATORY AGENTS</b>		
<i>cromolyn sodium 10mg/ml inh soln</i>	2	PA_BvD
<b>BRONCHODILATORS - ANTICHOLINERGICS</b>		
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>	2	PA_BvD
SPIRIVA RESPIMAT 1.25MCG/ACT INHALER	3	QL=4 GM/30 Days
<b>LEUKOTRIENE MODULATORS</b>		
<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
<b>STEROID INHALANTS</b>		
ALVESCO 160MCG INHALER	3	QL=12.20 GM/30 Days
ALVESCO 80MCG INHALER	3	QL=12.20 GM/30 Days
ARNUITY 100MCG POWDER INHALER	3	QL=30 EA/30 Days
ARNUITY 200MCG POWDER INHALER	3	QL=30 EA/30 Days
ARNUITY 50MCG POWDER INHALER	3	QL=30 EA/30 Days
ASMANEX 100MCG HFA INHALER	3	QL=13 GM/30 Days
ASMANEX 110MCG (30ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 200MCG HFA INHALER	3	QL=13 GM/30 Days
ASMANEX 220MCG (120ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 220MCG (30ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 220MCG (60ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 50MCG HFA INHALER	3	QL=13 GM/30 Days
<i>budesonide 0.25mg/2ml inh susp</i>	2	PA_BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/2ml inh susp</i>	2	PA_BvD QL=120 ML/30 Days
<i>budesonide 1mg/2ml inh susp</i>	2	PA_BvD QL=120 ML/30 Days
QVAR 40MCG REDIHALER	3	QL=10.60 GM/30 Days
QVAR 80MCG REDIHALER	3	QL=21.20 GM/30 Days
<b>SYMPATHOMIMETICS</b>		
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 5mg/ml (0.5%) inh soln</i>	1	PA_BvD

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANORO ELLIPTA 62.5-25MCG POWDER INHALER	3	QL=60 EA/30 Days
<i>arformoterol tartrate 15mcg/2ml neb soln</i>	2	PA_BvD QL=120 ML/30 Days
BREO ELLIPTA 100-25MCG POWDER INHALER	3	QL=60 EA/30 Days
BREO ELLIPTA 200-25MCG POWDER INHALER	3	QL=60 EA/30 Days
BREO ELLIPTA 50-25MCG POWDER INHALER	3	QL=60 EA/30 Days
<i>breynga 160-4.5mcg/act inhaler</i>	3	QL=10.30 GM/30 Days
<i>breynga 80-4.5mcg/act inhaler</i>	3	QL=10.30 GM/30 Days
BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	3	QL=10.70 GM/30 Days
<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	2	QL=10.20 GM/30 Days
<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	2	QL=10.20 GM/30 Days
COMBIVENT 20-100MCG/ACT INHALER	3	QL=8 GM/30 Days
DULERA 100-5MCG INHALER	3	QL=13 GM/30 Days
DULERA 200-5MCG INHALER	3	QL=13 GM/30 Days
DULERA 50-5MCG INHALER	3	QL=13 GM/30 Days
<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	1	QL=2 EA/15 Days
<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	1	QL=2 EA/15 Days
<i>fluticasone propionate/salmeterol 100-50mcg/act powder inhaler</i>	2	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 250-50mcg/act powder inhaler</i>	2	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 500-50mcg/act powder inhaler</i>	2	QL=60 EA/30 Days
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	1	PA_BvD
STIOLTO 2.5-2.5MCG/ACT INHALER	3	QL=4 GM/30 Days
STRIVERDI 2.5MCG/ACT INHALER	3	QL=4 GM/30 Days
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>	2	QL=60 EA/30 Days
<i>wixela 250-50mcg powder inhaler</i>	2	QL=60 EA/30 Days
<i>wixela 500-50mcg powder inhaler</i>	2	QL=60 EA/30 Days
<b>ANTICOAGULANTS</b>		
<b>ANTICOAGULANTS - MISC.</b>		
<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>enoxaparin sodium 100mg/1ml syringe</i>	2	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	2	
<i>enoxaparin sodium 150mg/1ml syringe</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<i>jantoven 10mg tab</i>	1	
<i>jantoven 1mg tab</i>	1	
<i>jantoven 2.5mg tab</i>	1	
<i>jantoven 2mg tab</i>	1	
<i>jantoven 3mg tab</i>	1	
<i>jantoven 4mg tab</i>	1	
<i>jantoven 5mg tab</i>	1	
<i>jantoven 6mg tab</i>	1	
<i>jantoven 7.5mg tab</i>	1	
<i>rivaroxaban 1mg/ml oral susp</i>	2	QL=620 ML/30 Days
<i>rivaroxaban 2.5mg tab</i>	2	QL=60 EA/30 Days
<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	
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
<b>ANTICONVULSANTS</b>		
<b>ANTICONVULSANTS - BENZODIAZEPINES</b>		
<i>clobazam 10mg tab</i>	2	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml oral susp</i>	2	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	2	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
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
<b>ANTICONVULSANTS - MISC.</b>		
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>	2	
<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>	2	
<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
DILANTIN 30MG ER CAP	2	
EPIDIOLEX 100MG/ML ORAL SOLN	5	NDS PA_NSO QL=600 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<i>gabapentin 100mg cap</i>	1	QL=360 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=135 EA/30 Days
<i>lacosamide 100mg tab</i>	2	QL=60 EA/30 Days
<i>lacosamide 10mg/ml oral soln</i>	2	QL=1200 ML/30 Days
<i>lacosamide 150mg tab</i>	2	QL=60 EA/30 Days
<i>lacosamide 200mg tab</i>	2	QL=60 EA/30 Days
<i>lacosamide 50mg tab</i>	2	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>	2	
<i>lamotrigine 25mg tab</i>	1	
<i>lamotrigine 5mg chew tab</i>	2	
<i>levetiracetam 1000mg tab</i>	1	
<i>levetiracetam 100mg/ml oral soln</i>	2	
<i>levetiracetam 250mg tab</i>	1	
<i>levetiracetam 500mg er tab</i>	2	QL=180 EA/30 Days
<i>levetiracetam 500mg tab</i>	1	
<i>levetiracetam 750mg er tab</i>	2	QL=120 EA/30 Days
<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 0.5mg/ml oral susp</i>	4	PA_NSO QL=720 ML/30 Days
<i>perampanel 10mg tab</i>	2	PA_NSO QL=30 EA/30 Days
<i>perampanel 12mg tab</i>	2	PA_NSO QL=30 EA/30 Days
<i>perampanel 2mg tab</i>	2	PA_NSO QL=30 EA/30 Days
<i>perampanel 4mg tab</i>	2	PA_NSO QL=30 EA/30 Days
<i>perampanel 6mg tab</i>	2	PA_NSO QL=30 EA/30 Days
<i>perampanel 8mg tab</i>	2	PA_NSO QL=30 EA/30 Days
PHENOBARBITAL 100MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 15MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 16.2MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 30MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 32.4MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 4MG/ML ORAL SOLN	2	QL=1500 ML/30 Days
PHENOBARBITAL 60MG TAB	1	QL=120 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PHENOBARBITAL 64.8MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 97.2MG TAB	1	QL=120 EA/30 Days
<i>phenytek 200mg er cap</i>	2	
<i>phenytek 300mg er cap</i>	2	
<i>phenytoin 25mg/ml oral susp</i>	1	
<i>phenytoin 50mg chew tab</i>	2	
<i>phenytoin sodium 100mg er cap</i>	2	
<i>pregabalin 100mg cap</i>	1	QL=120 EA/30 Days
<i>pregabalin 150mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 200mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 20mg/ml oral soln</i>	2	QL=900 ML/30 Days
<i>pregabalin 225mg cap</i>	1	QL=60 EA/30 Days
<i>pregabalin 25mg cap</i>	1	QL=120 EA/30 Days
<i>pregabalin 300mg cap</i>	1	QL=60 EA/30 Days
<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
SUBVENITE 10MG/ML ORAL SUSP	4	PA_NSO QL=2160 ML/30 Days
<i>topiramate 100mg tab</i>	1	
<i>topiramate 15mg cap</i>	2	
<i>topiramate 200mg tab</i>	1	
<i>topiramate 25mg cap</i>	2	
<i>topiramate 25mg tab</i>	1	
<i>topiramate 25mg/ml oral soln</i>	2	PA_NSO QL=480 ML/30 Days
<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
<b>CARBAMATES</b>		
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<b>GABA MODULATORS</b>		
<i>tiagabine 12mg tab</i>	2	
<i>tiagabine 16mg tab</i>	2	
<i>tiagabine 2mg tab</i>	2	
<i>tiagabine 4mg tab</i>	2	
<i>vigabatrin 500mg powder for oral soln</i>	5	NDS PA_NSO QL=180 EA/30 Days
<i>vigabatrin 500mg tab</i>	5	NDS PA_NSO QL=180 EA/30 Days
VIGAFYDE 100MG/ML ORAL SOLN	5	NDS PA_NSO QL=720 ML/30 Days
<b>SUCCINIMIDES</b>		
<i>ethosuximide 250mg cap</i>	2	
<i>ethosuximide 50mg/ml oral soln</i>	2	
<i>methsuximide 300mg cap</i>	2	
<b>VALPROIC ACID</b>		
<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 500mg dr tab</i>	1	
<i>valproic acid 250mg cap</i>	1	
<i>valproic acid 50mg/ml oral soln</i>	1	
<b>ANTIDEPRESSANTS</b>		
<b>ANTIDEPRESSANTS - MISC.</b>		
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>	2	
<i>mirtazapine 15mg tab</i>	1	
<i>mirtazapine 30mg odt</i>	2	
<i>mirtazapine 30mg tab</i>	1	
<i>mirtazapine 45mg odt</i>	2	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<b>MONOAMINE OXIDASE INHIBITORS (MAOIS)</b>		
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	QL=180 EA/30 Days
PHENELZINE 15MG TAB	2	
<i>tranylcypromine 10mg tab</i>	2	
<b>SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)</b>		
<i>citalopram 10mg tab</i>	1	
<i>citalopram 20mg tab</i>	1	
<i>citalopram 2mg/ml oral soln</i>	2	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>	2	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/5ML ORAL SUSP	2	QL=900 ML/30 Days
<i>paroxetine 12.5mg er tab</i>	2	QL=30 EA/30 Days
<i>paroxetine 20mg tab</i>	1	
<i>paroxetine 25mg er tab</i>	2	QL=60 EA/30 Days
<i>paroxetine 30mg tab</i>	1	
<i>paroxetine 37.5mg er tab</i>	2	QL=60 EA/30 Days
<i>paroxetine 40mg tab</i>	1	
<i>sertraline 100mg tab</i>	1	
<i>sertraline 20mg/ml oral soln</i>	2	QL=300 ML/30 Days
<i>sertraline 25mg tab</i>	1	
<i>sertraline 50mg tab</i>	1	
<b>SEROTONIN MODULATORS</b>		
EXXUA 18.2MG ER TAB	4	PA_NSO QL=30 EA/30 Days
EXXUA 36.3MG ER TAB	4	PA_NSO QL=30 EA/30 Days
EXXUA 54.5MG ER TAB	4	PA_NSO QL=30 EA/30 Days
EXXUA 72.6MG ER TAB	4	PA_NSO QL=30 EA/30 Days
NEFAZODONE 100MG TAB	2	
NEFAZODONE 150MG TAB	2	
NEFAZODONE 200MG TAB	2	
NEFAZODONE 250MG TAB	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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
<b>SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)</b>		
<i>desvenlafaxine succinate 100mg er tab</i>	2	QL=30 EA/30 Days
<i>desvenlafaxine succinate 25mg er tab</i>	2	QL=30 EA/30 Days
<i>desvenlafaxine succinate 50mg er tab</i>	2	QL=30 EA/30 Days
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	QL=60 EA/30 Days
<i>duloxetine 30mg dr cap</i>	1	QL=60 EA/30 Days
<i>duloxetine 60mg dr cap</i>	1	QL=60 EA/30 Days
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	
<b>TRICYCLIC AGENTS</b>		
<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>	2	
<i>amoxapine 150mg tab</i>	2	
<i>amoxapine 25mg tab</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>amoxapine 50mg tab</i>	2	
<i>clomipramine 25mg cap</i>	2	
<i>clomipramine 50mg cap</i>	2	
<i>clomipramine 75mg cap</i>	2	
<i>desipramine 100mg tab</i>	2	
<i>desipramine 10mg tab</i>	2	
<i>desipramine 150mg tab</i>	2	
<i>desipramine 25mg tab</i>	2	
<i>desipramine 50mg tab</i>	2	
<i>desipramine 75mg tab</i>	2	
<i>doxepin 100mg cap</i>	2	
<i>doxepin 10mg cap</i>	2	
DOXEPIN 10MG/ML ORAL SOLN	2	
<i>doxepin 150mg cap</i>	2	
<i>doxepin 25mg cap</i>	2	
<i>doxepin 50mg cap</i>	2	
<i>doxepin 75mg cap</i>	2	
<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	QL=60 EA/30 Days
<i>trimipramine 25mg cap</i>	2	QL=120 EA/30 Days
<i>trimipramine 50mg cap</i>	2	QL=120 EA/30 Days
<b>ANTIDIABETICS</b>		
<b>ANTIDIABETIC COMBINATIONS</b>		
<i>glipizide/metformin 2.5-250mg tab</i>	2	QL=240 EA/30 Days
<i>glipizide/metformin 2.5-500mg tab</i>	2	QL=120 EA/30 Days
<i>glipizide/metformin 5-500mg tab</i>	2	QL=120 EA/30 Days
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<i>metformin/pioglitazone 150-15mg tab</i>	2	QL=90 EA/30 Days
<i>metformin/pioglitazone 850-15mg tab</i>	2	QL=90 EA/30 Days
SYNJARDY 12.5-1000MG TAB	3	QL=60 EA/30 Days
SYNJARDY 12.5-500MG TAB	3	QL=60 EA/30 Days
SYNJARDY 5-1000MG TAB	3	QL=60 EA/30 Days
SYNJARDY 5-500MG TAB	3	QL=60 EA/30 Days
SYNJARDY XR 10-1000MG TAB	3	QL=30 EA/30 Days
SYNJARDY XR 12.5-1000MG TAB	3	QL=60 EA/30 Days
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
<b>DIABETIC OTHER</b>		
<i>acarbose 100mg tab</i>	2	QL=90 EA/30 Days
<i>acarbose 25mg tab</i>	2	QL=90 EA/30 Days
<i>acarbose 50mg tab</i>	2	QL=90 EA/30 Days
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>	5	NDS PA QL=120 EA/30 Days
<i>nateglinide 120mg tab</i>	2	QL=90 EA/30 Days
<i>nateglinide 60mg tab</i>	2	QL=90 EA/30 Days
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<i>pioglitazone 45mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	2	QL=120 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>repaglinide 1mg tab</i>	2	QL=120 EA/30 Days
<i>repaglinide 2mg tab</i>	2	QL=240 EA/30 Days
<b>DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS</b>		
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
<b>INCRETIN MIMETIC AGENTS</b>		
<i>liraglutide 18mg/3ml pen inj</i>	2	PA QL=9 ML/30 Days
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
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 2MG/3ML PEN INJ	3	PA QL=3 ML/28 Days
OZEMPIC 4MG/3ML PEN INJ	3	PA QL=3 ML/28 Days
OZEMPIC 8MG/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
<b>INSULIN</b>		
FIASP 100UNIT/ML CARTRIDGE	3	INS
FIASP 100UNIT/ML INJ	3	INS PA_BvD
FIASP 100UNIT/ML PEN INJ (3ML)	3	INS
HUMALOG 100UNIT/ML CARTRIDGE	3	INS
HUMALOG 100UNIT/ML KWIKPEN (3ML)	3	INS
HUMALOG 200UNIT/ML KWIKPEN (3ML)	3	INS
HUMALOG JUNIOR 100UNIT/ML PEN INJ (3ML)	3	INS
HUMALOG MIX (50/50) 100UNIT/ML PEN INJ (3ML)	3	INS
HUMALOG MIX (75/25) 100UNIT/ML INJ	3	INS
HUMALOG MIX (75/25) 100UNIT/ML KWIKPEN (3ML)	3	INS
HUMULIN (70/30) 100UNIT/ML INJ	3	INS
HUMULIN (70/30) 100UNIT/ML PEN INJ (3ML)	3	INS
HUMULIN N 100UNIT/ML INJ	3	INS
HUMULIN N 100UNIT/ML PEN INJ (3ML)	3	INS
HUMULIN R 100UNIT/ML INJ	3	INS
HUMULIN R 500UNIT/ML INJ	3	INS PA_BvD
HUMULIN R 500UNIT/ML PEN INJ (3ML)	3	INS

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	3	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	3	INS
INSULIN GLARGINE-YFGN 100UNIT/ML INJ (BIOCON)	3	INS
INSULIN GLARGINE-YFGN 100UNIT/ML PEN INJ (3ML) (BIOCON)	3	INS
INSULIN LISPRO 100UNIT/ML INJ	3	INS PA_BvD
INSULIN LISPRO 100UNIT/ML PEN INJ (3ML)	3	INS
INSULIN LISPRO JUNIOR 100UNIT/ML PEN INJ (3ML)	3	INS
INSULIN LISPRO PROTAMINE HUMAN (75/25) 100UNIT/ML PEN INJ (3ML)	3	INS
LYUMJEV 100UNIT/ML INJ	3	INS PA_BvD
LYUMJEV 100UNIT/ML PEN INJ (3ML)	3	INS
LYUMJEV 200UNIT/ML PEN INJ (3ML)	3	INS
NOVOLIN MIX (70/30) 100UNIT/ML FLEXPEN (3ML)	3	INS
NOVOLIN MIX (70/30) 100UNIT/ML INJ	3	INS
NOVOLIN N 100UNIT/ML INJ	3	INS
NOVOLIN N 100UNIT/ML PEN INJ (3ML)	3	INS
NOVOLIN R 100UNIT/ML INJ	3	INS
NOVOLIN R 100UNIT/ML PEN INJ (3ML)	3	INS
NOVOLOG 100UNIT/ML CARTRIDGE	3	INS
NOVOLOG 100UNIT/ML INJ	3	INS PA_BvD
NOVOLOG 100UNIT/ML PEN INJ (3ML)	3	INS
NOVOLOG MIX (70/30) 100UNIT/ML FLEXPEN (3ML)	3	INS
NOVOLOG MIX (70/30) 100UNIT/ML 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 (3ML)	3	INS
TRESIBA 200UNIT/ML PEN INJ (3ML)	3	INS
<b>SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS</b>		
DAPAGLIFLOZIN 10MG TAB	3	QL=30 EA/30 Days
DAPAGLIFLOZIN 5MG TAB	3	QL=30 EA/30 Days
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
<b>SULFONYLUREAS</b>		
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<i>glyburide 2.5mg tab</i>	1	
<i>glyburide 5mg tab</i>	1	
<b>ANTIDIARRHEALS</b>		
<b>ANTIDIARRHEAL AGENTS - MISC.</b>		
<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
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
<b>OPIOID ANTAGONISTS</b>		
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 2mg/2ml syringe</i>	1	
<i>naltrexone 50mg tab</i>	2	
OPVEE 2.7MG/0.1ML NASAL SPRAY	3	
REXTOVY 4MG/0.25ML NASAL SPRAY	1	
VIVITROL 380MG INJ	5	NDS
ZURNAI 1.5MG/0.5ML AUTO-INJECTOR	3	
<b>ANTIEMETICS</b>		
<b>5-HT3 RECEPTOR ANTAGONISTS</b>		
<i>granisetron 1mg tab</i>	2	PA_BvD QL=60 EA/30 Days
<i>ondansetron 0.8mg/ml oral soln</i>	2	PA_BvD QL=900 ML/30 Days
<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
<b>ANTIEMETICS - ANTICHOLINERGIC</b>		
<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
<b>ANTIEMETICS - MISCELLANEOUS</b>		
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dronabinol 5mg cap</i>	2	PA QL=60 EA/30 Days
<b>ANTIFUNGALS</b>		
<b>ANTIFUNGALS</b>		
AMPHOTERICIN B 50MG INJ	2	PA_BvD
<i>amphotericin b liposomal 50mg inj</i>	2	PA_BvD
<i>casprofungin acetate 50mg inj</i>	2	
<i>casprofungin acetate 70mg inj</i>	2	
CRESEMBA 186MG CAP	5	NDS PA
CRESEMBA 74.5MG CAP	5	NDS PA
<i>fluconazole 100mg tab</i>	1	
<i>fluconazole 10mg/ml oral susp</i>	2	
<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>	2	
<i>fluconazole 50mg tab</i>	1	
<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>itraconazole 100mg cap</i>	2	QL=120 EA/30 Days
<i>ketoconazole 200mg tab</i>	2	
<i>micafungin sodium 100mg inj</i>	2	
<i>micafungin sodium 50mg inj</i>	2	
<i>nystatin 500000unit tab</i>	2	
<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>terbinafine 250mg tab</i>	1	QL=30 EA/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
<b>ANTIHYPERLIPIDEMICS</b>		
<b>ANTIHYPERLIPIDEMICS - MISC.</b>		
<i>ezetimibe 10mg tab</i>	1	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-10mg tab</i>	2	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-20mg tab</i>	2	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-40mg tab</i>	2	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-80mg tab</i>	2	QL=30 EA/30 Days
<i>icosapent ethyl 1000mg cap</i>	2	QL=120 EA/30 Days
<i>icosapent ethyl 500mg cap</i>	2	QL=120 EA/30 Days
NEXLETOL 180MG TAB	3	PA QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
NEXLIZET 180-10MG TAB	3	PA QL=30 EA/30 Days
<i>niacin 1000mg er tab</i>	2	QL=60 EA/30 Days
<i>niacin 500mg er tab</i>	2	QL=60 EA/30 Days
<i>niacin 750mg er tab</i>	2	QL=60 EA/30 Days
<i>omega-3 acid ethyl esters (usp) 1gm cap</i>	2	QL=120 EA/30 Days
REPATHA 140MG/ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
REPATHA 140MG/ML SYRINGE	3	PA QL=2 ML/28 Days
BILE ACID SEQUESTRANTS		
<i>cholestyramine resin (sugar-free) 4gm powder for oral susp</i>	2	
<i>cholestyramine resin 4gm powder for oral susp</i>	2	
<i>colesevelam 625mg tab</i>	2	
<i>colestipol 1gm tab</i>	2	
<i>colestipol 5000mg granules for oral susp</i>	2	
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 43mg cap</i>	1	
<i>fenofibrate 48mg tab</i>	1	
<i>fenofibrate 54mg tab</i>	1	
<i>fenofibrate 67mg cap</i>	1	
<i>fenofibric acid 135mg dr cap</i>	1	
<i>fenofibric acid 45mg dr cap</i>	1	
<i>gemfibrozil 600mg tab</i>	1	
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin 10mg tab</i>	1	
<i>atorvastatin 20mg tab</i>	1	
<i>atorvastatin 40mg tab</i>	1	
<i>atorvastatin 80mg tab</i>	1	
<i>lovastatin 10mg tab</i>	1	
<i>lovastatin 20mg tab</i>	1	
<i>lovastatin 40mg tab</i>	1	
<i>pravastatin sodium 10mg tab</i>	1	
<i>pravastatin sodium 20mg tab</i>	1	
<i>pravastatin sodium 40mg tab</i>	1	
<i>pravastatin sodium 80mg tab</i>	1	
<i>rosuvastatin calcium 10mg tab</i>	1	
<i>rosuvastatin calcium 20mg tab</i>	1	
<i>rosuvastatin calcium 40mg tab</i>	1	
<i>rosuvastatin calcium 5mg tab</i>	1	
<i>simvastatin 10mg tab</i>	1	
<i>simvastatin 20mg tab</i>	1	
<i>simvastatin 40mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	QL=120 EA/30 Days
<i>captopril 12.5mg tab</i>	2	QL=90 EA/30 Days
<i>captopril 25mg tab</i>	2	QL=90 EA/30 Days
<i>captopril 50mg tab</i>	2	QL=90 EA/30 Days
<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	2	
<i>perindopril erbumine 4mg tab</i>	2	
PERINDOPRIL ERBUMINE 8MG TAB	2	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<i>quinapril 40mg tab</i>	1	
<i>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	1	
<i>ramipril 10mg cap</i>	1	
<i>ramipril 2.5mg cap</i>	1	
<i>ramipril 5mg cap</i>	1	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil 16mg tab</i>	2	QL=60 EA/30 Days
<i>candesartan cilexetil 32mg tab</i>	2	QL=30 EA/30 Days
<i>candesartan cilexetil 4mg tab</i>	2	QL=60 EA/30 Days

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<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>candesartan cilexetil 8mg tab</i>	2	QL=60 EA/30 Days
<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	QL=30 EA/30 Days
<i>telmisartan 40mg tab</i>	1	QL=30 EA/30 Days
<i>telmisartan 80mg tab</i>	1	QL=30 EA/30 Days
<i>valsartan 160mg tab</i>	1	
<i>valsartan 320mg tab</i>	1	
<i>valsartan 40mg tab</i>	1	
<i>valsartan 80mg tab</i>	1	
<b>ANTIADRENERGIC ANTIHYPERTENSIVES</b>		
<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>	2	
<i>guanfacine 2mg tab</i>	2	
<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	
<b>ANTIHYPERTENSIVE COMBINATIONS</b>		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<i>amlodipine/benazepril 5-40mg cap</i>	1	

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<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/valsartan 10-160mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/valsartan 10-320mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/valsartan 5-160mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/valsartan 5-320mg tab</i>	1	QL=30 EA/30 Days
<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	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	1	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	1	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	1	QL=30 EA/30 Days
<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	2	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	2	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	2	
<i>candesartan cilexetil/hydrochlorothiazide 16-12.5mg tab</i>	2	QL=30 EA/30 Days
<i>candesartan cilexetil/hydrochlorothiazide 32-12.5mg tab</i>	2	QL=30 EA/30 Days
<i>candesartan cilexetil/hydrochlorothiazide 32-25mg tab</i>	2	QL=30 EA/30 Days
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	1	QL=60 EA/30 Days
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	1	QL=120 EA/30 Days
<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	2	
<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	2	
<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	1	QL=60 EA/30 Days
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	1	QL=30 EA/30 Days
<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	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<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	QL=30 EA/30 Days
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/telmisartan 12.5-40mg tab</i>	2	QL=30 EA/30 Days
<i>hydrochlorothiazide/telmisartan 12.5-80mg tab</i>	2	QL=60 EA/30 Days
<i>hydrochlorothiazide/telmisartan 25-80mg tab</i>	2	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	1	QL=30 EA/30 Days
<b>ANTIHYPERTENSIVES - MISC.</b>		
<i>aliskiren 150mg tab</i>	2	QL=30 EA/30 Days
<i>aliskiren 300mg tab</i>	2	QL=30 EA/30 Days
<i>eplerenone 25mg tab</i>	2	
<i>eplerenone 50mg tab</i>	2	
<i>metyrosine 250mg cap</i>	5	NDS PA
<b>VASODILATORS</b>		
<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	
<b>ANTI-INFECTIVE AGENTS - MISC.</b>		
<b>ANTI-INFECTIVE AGENTS - MISC.</b>		
<i>atovaquone 750mg/5ml oral susp</i>	2	QL=300 ML/30 Days
<i>azithromycin 20mg/ml oral susp</i>	2	
<i>azithromycin 250mg pack (6)</i>	1	
<i>azithromycin 250mg tab</i>	1	
<i>azithromycin 40mg/ml oral susp</i>	2	
<i>azithromycin 500mg inj</i>	2	
<i>azithromycin 500mg tab</i>	1	
<i>azithromycin 500mg tab pack (3)</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
azithromycin 600mg tab	1	
aztreonam 1gm inj	2	
aztreonam 2gm inj	2	
cefepime 1000mg inj	2	
cefepime 2000mg inj	2	
CILASTATIN/IMIPENEM 250-250MG INJ	2	
cilastatin/imipenem 500-500mg inj	2	
clarithromycin 250mg tab	1	
CLARITHROMYCIN 25MG/ML ORAL SUSP	2	
clarithromycin 500mg tab	1	
CLARITHROMYCIN 50MG/ML ORAL SUSP	2	
clindamycin 150mg cap	1	
clindamycin 300mg cap	1	
clindamycin 300mg/2ml inj	2	
clindamycin 300mg/50ml inj	2	
clindamycin 600mg/4ml inj	2	
clindamycin 600mg/50ml inj	2	
clindamycin 75mg cap	1	
clindamycin 75mg/5ml oral soln	2	
clindamycin 900mg/50ml inj	2	
clindamycin 900mg/6ml inj	2	
colistin 75mg/ml inj	2	
daptomycin 500mg inj	2	
DIFICID 200MG TAB	3	PA QL=20 EA/10 Days
DIFICID 40MG/ML ORAL SUSP	3	PA QL=136 ML/10 Days
ertapenem 1gm inj	2	
erythromycin 250mg dr tab	2	
erythromycin 250mg tab	2	
erythromycin 333mg dr tab	2	
erythromycin 500mg dr tab	2	
erythromycin 500mg tab	2	
fidaxomicin 200mg tab	2	PA QL=20 EA/10 Days
fosfomycin 3gm powder for oral soln	2	
IMPAVIDO 50MG CAP	5	NDS PA QL=84 EA/28 Days
linezolid 100mg/5ml oral susp	2	QL=1800 ML/30 Days
linezolid 600mg tab	2	QL=60 EA/30 Days
linezolid 600mg/300ml inj	2	
meropenem 1gm inj	2	
meropenem 500mg inj	2	
methenamine hippurate 1gm tab	2	
metronidazole 250mg tab	1	
metronidazole 500mg tab	1	
metronidazole 5mg/ml inj	2	
nitazoxanide 500mg tab	5	NDS PA QL=6 EA/3 Days
nitrofurantoin macro/nitrofurantoin mono 100mg cap	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	
<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>	2	
<i>tinidazole 250mg tab</i>	2	
<i>tinidazole 500mg tab</i>	2	
<i>trimethoprim 100mg tab</i>	2	
<i>vancomycin 100mg/ml inj</i>	2	
<i>vancomycin 125mg cap</i>	2	QL=120 EA/30 Days
<i>vancomycin 1gm inj</i>	2	
<i>vancomycin 250mg cap</i>	2	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
<b>ANTIMALARIALS</b>		
<b>ANTIMALARIALS</b>		
<i>atovaquone/proguanil 250-100mg tab</i>	2	
<i>atovaquone/proguanil 62.5-25mg tab</i>	2	
CHLOROQUINE PHOSPHATE 250MG TAB	2	
<i>chloroquine phosphate 500mg tab</i>	2	
COARTEM 20-120MG TAB	3	QL=24 EA/3 Days
<i>hydroxychloroquine sulfate 200mg tab</i>	2	QL=90 EA/30 Days
<i>mefloquine 250mg tab</i>	2	
PRIMAQUINE PHOSPHATE 26.3MG TAB	2	
<i>pyrimethamine 25mg tab</i>	5	NDS PA QL=90 EA/30 Days
<i>quinine sulfate 324mg cap</i>	2	PA QL=42 EA/7 Days
<b>ANTIMYCOBACTERIAL AGENTS</b>		
<b>ANTIMYCOBACTERIAL AGENTS</b>		
<i>dapsone 100mg tab</i>	2	
<i>dapsone 25mg tab</i>	2	
<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>	2	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SIRTURO 20MG TAB	5	NDS PA
<b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES</b>		
<b>ALKYLATING AGENTS</b>		
<i>cyclophosphamide 25mg cap</i>	2	PA_BvD
CYCLOPHOSPHAMIDE 25MG TAB	3	PA_BvD
<i>cyclophosphamide 50mg cap</i>	2	PA_BvD
CYCLOPHOSPHAMIDE 50MG TAB	3	PA_BvD
LEUKERAN 2MG TAB	5	NDS
<i>lomustine 100mg cap</i>	2	
<i>lomustine 10mg cap</i>	2	
<i>lomustine 40mg cap</i>	2	
<b>ANTIMETABOLITES</b>		
<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
TABLOID 40MG TAB	5	NDS
XATMEP 2.5MG/ML ORAL SOLN	4	PA_BvD
<b>ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS</b>		
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
<b>ANTINEOPLASTIC - EGFR INHIBITORS</b>		
<i>erlotinib 100mg tab</i>	2	PA_NSO QL=30 EA/30 Days
<i>erlotinib 150mg tab</i>	2	PA_NSO QL=30 EA/30 Days
<i>erlotinib 25mg tab</i>	2	PA_NSO QL=90 EA/30 Days
<i>gefitinib 250mg tab</i>	5	NDS 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<b>ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS</b>		
DAURISMO 100MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
DAURISMO 25MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
ERIVEDGE 150MG CAP	5	NDS PA_NSO QL=28 EA/28 Days
ODOMZO 200MG CAP	5	NDS PA_NSO QL=30 EA/30 Days
<b>ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS</b>		
<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	QL=30 EA/30 Days
<i>bicalutamide 50mg tab</i>	2	QL=30 EA/30 Days
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
INLURIYO 200MG TAB	5	NDS PA_NSO QL=84 EA/28 Days
<i>letrozole 2.5mg tab</i>	2	QL=30 EA/30 Days
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	5	NDS
<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>	2	PA
<i>nilutamide 150mg tab</i>	5	NDS QL=60 EA/30 Days
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<b>ANTINEOPLASTIC COMBINATIONS</b>		
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
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
<b>ANTINEOPLASTIC ENZYME INHIBITORS</b>		
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=56 EA/28 Days
BALVERSA 4MG TAB	5	NDS PA_NSO QL=56 EA/28 Days
BALVERSA 5MG TAB	5	NDS PA_NSO QL=28 EA/28 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 160MG TAB	5	NDS PA_NSO QL=60 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 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=56 EA/28 Days
COPIKTRA 25MG CAP	5	NDS PA_NSO QL=56 EA/28 Days
COTELLIC 20MG TAB	5	NDS PA_NSO QL=63 EA/28 Days
<i>dasatinib 100mg tab</i>	5	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 140mg tab</i>	5	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 20mg tab</i>	5	NDS PA_NSO QL=90 EA/30 Days
<i>dasatinib 50mg tab</i>	5	NDS PA_NSO QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dasatinib 70mg tab</i>	5	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 80mg tab</i>	5	NDS PA_NSO QL=30 EA/30 Days
ENSACOVE 100MG CAP	5	NDS PA_NSO QL=60 EA/30 Days
ENSACOVE 25MG CAP	5	NDS PA_NSO QL=60 EA/30 Days
<i>everolimus 10mg tab</i>	5	NDS PA_NSO QL=30 EA/30 Days
<i>everolimus 2.5mg tab</i>	5	NDS PA_NSO QL=30 EA/30 Days
<i>everolimus 2mg tab for oral susp</i>	5	NDS PA_NSO QL=150 EA/30 Days
<i>everolimus 3mg tab for oral susp</i>	5	NDS PA_NSO QL=90 EA/30 Days
<i>everolimus 5mg tab</i>	5	NDS PA_NSO QL=30 EA/30 Days
<i>everolimus 5mg tab for oral susp</i>	5	NDS PA_NSO QL=60 EA/30 Days
<i>everolimus 7.5mg tab</i>	5	NDS 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=168 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
IBTROZI 200MG CAP	5	NDS PA_NSO QL=90 EA/30 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>	2	QL=90 EA/30 Days
<i>imatinib 400mg tab</i>	2	QL=60 EA/30 Days
IMBRUVICA 140MG CAP	5	NDS PA_NSO QL=90 EA/30 Days
IMBRUVICA 140MG TAB	5	NDS PA_NSO QL=28 EA/28 Days
IMBRUVICA 280MG TAB	5	NDS PA_NSO QL=28 EA/28 Days
IMBRUVICA 420MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
IMBRUVICA 70MG CAP	5	NDS PA_NSO QL=28 EA/28 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

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
KOSELUGO 5MG SPRINKLE CAP	5	NDS PA_NSO QL=600 EA/30 Days
KOSELUGO 7.5MG SPRINKLE CAP	5	NDS PA_NSO QL=360 EA/30 Days
KRAZATI 200MG TAB	5	NDS PA_NSO QL=180 EA/30 Days
<i>lapatinib 250mg tab</i>	5	NDS PA_NSO QL=180 EA/30 Days
LORBRENA 100MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
LORBRENA 25MG TAB	5	NDS PA_NSO QL=90 EA/30 Days
LUMAKRAS 120MG TAB	5	NDS PA_NSO QL=240 EA/30 Days
LUMAKRAS 240MG TAB	5	NDS PA_NSO QL=120 EA/30 Days
LUMAKRAS 320MG TAB	5	NDS PA_NSO QL=90 EA/30 Days
LYNPARZA 100MG TAB	5	NDS PA_NSO QL=120 EA/30 Days
LYNPARZA 150MG TAB	5	NDS PA_NSO QL=120 EA/30 Days
LYTGOBI TAB 12MG DAILEY DOSE PACK (21)	5	NDS PA_NSO QL=84 EA/28 Days
LYTGOBI TAB 16MG DAILEY DOSE PACK (28)	5	NDS PA_NSO QL=112 EA/28 Days
LYTGOBI TAB 20MG DAILEY DOSE PACK (35)	5	NDS PA_NSO QL=140 EA/28 Days
MEKINIST 0.05MG/ML ORAL SOLN	5	NDS PA_NSO QL=1260 ML/30 Days
MEKINIST 0.5MG TAB	5	NDS PA_NSO QL=90 EA/30 Days
MEKINIST 2MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
MEKTOVI 15MG TAB	5	NDS PA_NSO QL=180 EA/30 Days
NERLYNX 40MG TAB	5	NDS PA_NSO QL=180 EA/30 Days
<i>nilotinib 150mg cap</i>	5	NDS PA_NSO QL=112 EA/28 Days
<i>nilotinib 200mg cap</i>	5	NDS PA_NSO QL=112 EA/28 Days
<i>nilotinib 50mg cap</i>	5	NDS PA_NSO QL=120 EA/30 Days
NINLARO 2.3MG CAP	5	NDS PA_NSO QL=3 EA/28 Days
NINLARO 3MG CAP	5	NDS PA_NSO QL=3 EA/28 Days
NINLARO 4MG CAP	5	NDS PA_NSO QL=3 EA/28 Days
OGSIVEO 100MG TAB 7-DAY PACK (14)	5	NDS PA_NSO QL=56 EA/28 Days
OGSIVEO 150MG TAB 7-DAY PACK (14)	5	NDS PA_NSO QL=56 EA/28 Days
OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	5	NDS PA_NSO QL=16 EA/28 Days
OJEMDA 100MG TAB PACK (500MG ONCE WEEKLY) (20)	5	NDS PA_NSO QL=20 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

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
OJJAARA 200MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
<i>pazopanib 200mg tab</i>	5	NDS PA_NSO QL=120 EA/30 Days
PEMAZYRE 13.5MG TAB	5	NDS PA_NSO QL=28 EA/28 Days
PEMAZYRE 4.5MG TAB	5	NDS PA_NSO QL=28 EA/28 Days
PEMAZYRE 9MG TAB	5	NDS PA_NSO QL=28 EA/28 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
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=240 EA/30 Days
<i>sorafenib 200mg tab</i>	5	NDS 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>	5	NDS PA_NSO QL=28 EA/28 Days
<i>sunitinib 25mg cap</i>	5	NDS PA_NSO QL=28 EA/28 Days
<i>sunitinib 37.5mg cap</i>	5	NDS PA_NSO QL=28 EA/28 Days
<i>sunitinib 50mg cap</i>	5	NDS PA_NSO QL=28 EA/28 Days
TABRECTA 150MG TAB	5	NDS PA_NSO QL=112 EA/28 Days
TABRECTA 200MG TAB	5	NDS PA_NSO QL=112 EA/28 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TEPMETKO 225MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
TIBSOVO 250MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
TRUQAP 160MG TAB	5	NDS PA_NSO QL=64 EA/28 Days
TRUQAP 200MG TAB	5	NDS PA_NSO QL=64 EA/28 Days
TURALIO 125MG CAP	5	NDS PA_NSO QL=120 EA/30 Days
VANFLYTA 17.7MG TAB	5	NDS PA_NSO QL=28 EA/28 Days
VANFLYTA 26.5MG TAB	5	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 100MG TAB	5	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 150MG TAB	5	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 200MG TAB	5	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 50MG TAB	5	NDS PA_NSO QL=56 EA/28 Days
VITRAKVI 100MG CAP	5	NDS PA_NSO QL=60 EA/30 Days
VITRAKVI 20MG/ML ORAL SOLN	5	NDS PA_NSO QL=300 ML/30 Days
VITRAKVI 25MG CAP	5	NDS PA_NSO QL=180 EA/30 Days
VONJO 100MG CAP	5	NDS PA_NSO QL=120 EA/30 Days
VORANIGO 10MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
VORANIGO 40MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
XALKORI 150MG ORAL PELLETT	5	NDS PA_NSO QL=180 EA/30 Days
XALKORI 200MG CAP	5	NDS PA_NSO QL=60 EA/30 Days
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
<b>ANTINEOPLASTICS MISC.</b>		
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>	5	NDS PA_NSO QL=300 EA/30 Days
DROXIA 200MG CAP	3	
DROXIA 300MG CAP	3	
DROXIA 400MG CAP	3	
HERNEXEOS 60MG TAB	5	NDS PA_NSO QL=90 EA/30 Days
<i>hydroxyurea 500mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MATULANE 50MG CAP	5	NDS
MODEYSO 125MG CAP	5	NDS PA_NSO QL=20 EA/28 Days
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>	2	
TUKYSA 150MG TAB	5	NDS PA_NSO QL=120 EA/30 Days
TUKYSA 50MG TAB	5	NDS PA_NSO QL=120 EA/30 Days
VENCLEXTA 100MG TAB	5	NDS PA_NSO QL=180 EA/30 Days
VENCLEXTA 10MG TAB	3	PA_NSO QL=60 EA/30 Days
VENCLEXTA 50MG TAB	3	PA_NSO QL=30 EA/30 Days
VENCLEXTA TAB STARTER PACK (42)	5	NDS PA_NSO QL=42 EA/28 Days
WELIREG 40MG TAB	5	NDS PA_NSO QL=90 EA/30 Days
XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	5	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 40MG ONCE WEEKLY CARTON (16)	5	NDS PA_NSO QL=16 EA/28 Days
XPOVIO TAB 40MG ONCE WEEKLY CARTON (4)	5	NDS PA_NSO QL=4 EA/28 Days
XPOVIO TAB 40MG TWICE WEEKLY CARTON (8)	5	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 60MG ONCE WEEKLY CARTON (4)	5	NDS PA_NSO QL=4 EA/28 Days
XPOVIO TAB 60MG TWICE WEEKLY CARTON (24)	5	NDS PA_NSO QL=24 EA/28 Days
XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	5	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	5	NDS PA_NSO QL=32 EA/28 Days
<b>CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS</b>		
IWILFIN 192MG TAB	5	NDS PA_NSO QL=240 EA/30 Days
<i>leucovorin 10mg tab</i>	2	
<i>leucovorin 15mg tab</i>	2	
<i>leucovorin 25mg tab</i>	2	
<i>leucovorin 5mg tab</i>	2	
<i>mesna 400mg tab</i>	2	
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS</b>		
<b>ANTIPARKINSON ADJUNCTIVE THERAPY</b>		
<i>carbidopa 25mg tab</i>	2	
<i>entacapone 200mg tab</i>	2	QL=300 EA/30 Days
<b>ANTIPARKINSON ANTICHOLINERGICS</b>		
<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	
<b>ANTIPARKINSON DOPAMINERGICS</b>		
<i>amantadine 100mg cap</i>	1	
<i>amantadine 10mg/ml oral 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: 03/01/2026

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<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	
<i>carbidopa/levodopa 10-100mg odt</i>	2	
<i>carbidopa/levodopa 10-100mg tab</i>	1	
<i>carbidopa/levodopa 25-100mg er tab</i>	2	
<i>carbidopa/levodopa 25-100mg odt</i>	2	
<i>carbidopa/levodopa 25-100mg tab</i>	1	
<i>carbidopa/levodopa 25-250mg odt</i>	2	
<i>carbidopa/levodopa 25-250mg tab</i>	1	
<i>carbidopa/levodopa 50-200mg er tab</i>	2	
<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	
<b>ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS</b>		
<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>	2	
<i>selegiline 5mg tab</i>	2	
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS</b>		
<b>ANTIMANIC AGENTS</b>		
<i>divalproex sodium 250mg er tab</i>	1	
<i>divalproex sodium 500mg er tab</i>	1	
<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	
<b>LITHIUM CARBONATE 600MG CAP</b>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lithium citrate 60mg/ml oral soln</i>	2	
<b>ANTIPSYCHOTICS - MISC.</b>		
CAPLYTA 10.5MG CAP	4	PA_NSO QL=30 EA/30 Days
CAPLYTA 21MG CAP	4	PA_NSO QL=30 EA/30 Days
CAPLYTA 42MG CAP	4	PA_NSO QL=30 EA/30 Days
COBENFY 20-100MG CAP	4	PA_NSO QL=60 EA/30 Days
COBENFY 20-50MG CAP	4	PA_NSO QL=60 EA/30 Days
COBENFY 30-125MG CAP	4	PA_NSO QL=60 EA/30 Days
COBENFY CAP 28-DAY STARTER KIT PACK (56)	4	PA_NSO QL=56 EA/28 Days
<i>haloperidol 0.5mg tab</i>	1	
<i>haloperidol 10mg tab</i>	1	
<i>haloperidol 1mg tab</i>	1	
<i>haloperidol 20mg tab</i>	1	
<i>haloperidol 2mg tab</i>	1	
<i>haloperidol 2mg/ml oral soln</i>	1	
<i>haloperidol 5mg tab</i>	1	
<i>haloperidol 5mg/ml inj</i>	2	
<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	2	
<i>haloperidol decanoate 100mg/ml (5ml) inj</i>	2	
<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	2	
<i>haloperidol decanoate 50mg/ml (5ml) inj</i>	2	
<i>lurasidone 120mg tab</i>	2	QL=30 EA/30 Days
<i>lurasidone 20mg tab</i>	2	QL=30 EA/30 Days
<i>lurasidone 40mg tab</i>	2	QL=30 EA/30 Days
<i>lurasidone 60mg tab</i>	2	QL=30 EA/30 Days
<i>lurasidone 80mg tab</i>	2	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>	2	
<i>thiothixene 1mg cap</i>	2	
<i>thiothixene 2mg cap</i>	2	
<i>thiothixene 5mg cap</i>	2	
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>	2	
<i>ziprasidone 20mg inj</i>	2	QL=6 EA/3 Days
<i>ziprasidone 40mg cap</i>	2	
<i>ziprasidone 60mg cap</i>	2	
<i>ziprasidone 80mg cap</i>	2	
<b>BENZISOXAZOLES</b>		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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 SUSTENNA 117MG/0.75ML SYRINGE	5	NDS QL=.75 ML/28 Days
INVEGA SUSTENNA 156MG/ML SYRINGE	5	NDS QL=1 ML/28 Days
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	5	NDS QL=1.50 ML/28 Days
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	4	QL=.25 ML/28 Days
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	5	NDS QL=.50 ML/28 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
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>	2	QL=240 ML/30 Days
<i>risperidone 2mg odt</i>	2	QL=60 EA/30 Days
<i>risperidone 2mg tab</i>	1	
<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 microspheres 12.5mg inj</i>	2	QL=2 EA/28 Days
<i>risperidone microspheres 25mg inj</i>	2	QL=2 EA/28 Days
<i>risperidone microspheres 37.5mg inj</i>	2	QL=2 EA/28 Days
<i>risperidone microspheres 50mg inj</i>	2	QL=2 EA/28 Days
<b>DIBENZAPINES</b>		
<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	
<i>clozapine 12.5mg odt</i>	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>clozapine 25mg tab</i>	2	
<i>clozapine 50mg tab</i>	2	
<i>loxapine 10mg cap</i>	2	
<i>loxapine 25mg cap</i>	2	
<i>loxapine 50mg cap</i>	2	
<i>loxapine 5mg cap</i>	2	
<i>olanzapine 10mg inj</i>	2	QL=3 EA/1 Days
<i>olanzapine 10mg odt</i>	2	QL=60 EA/30 Days
<i>olanzapine 10mg tab</i>	2	
<i>olanzapine 15mg odt</i>	2	QL=30 EA/30 Days
<i>olanzapine 15mg tab</i>	2	
<i>olanzapine 2.5mg tab</i>	2	
<i>olanzapine 20mg odt</i>	2	QL=30 EA/30 Days
<i>olanzapine 20mg tab</i>	2	
<i>olanzapine 5mg odt</i>	2	QL=30 EA/30 Days
<i>olanzapine 5mg tab</i>	2	
<i>olanzapine 7.5mg tab</i>	2	
<i>quetiapine 100mg tab</i>	1	
<i>quetiapine 150mg er tab</i>	2	QL=30 EA/30 Days
<i>quetiapine 200mg er tab</i>	2	QL=30 EA/30 Days
<i>quetiapine 200mg tab</i>	1	
<i>quetiapine 25mg tab</i>	1	
<i>quetiapine 300mg er tab</i>	2	QL=60 EA/30 Days
<i>quetiapine 300mg tab</i>	1	
<i>quetiapine 400mg er tab</i>	2	QL=60 EA/30 Days
<i>quetiapine 400mg tab</i>	1	
<i>quetiapine 50mg er tab</i>	2	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>	2	
<i>chlorpromazine 100mg/ml oral soln</i>	2	
<i>chlorpromazine 10mg tab</i>	2	
<i>chlorpromazine 200mg tab</i>	2	
<i>chlorpromazine 25mg tab</i>	2	
<i>chlorpromazine 30mg/ml oral soln</i>	2	
<i>chlorpromazine 50mg tab</i>	2	
<i>compro 25mg rectal supp</i>	2	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	2	
<i>fluphenazine 10mg tab</i>	2	
<i>fluphenazine 1mg tab</i>	2	
<i>fluphenazine 2.5mg tab</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FLUPHENAZINE 2.5MG/ML INJ	2	
<i>fluphenazine 5mg tab</i>	2	
FLUPHENAZINE 5MG/ML ORAL SOLN	2	
<i>fluphenazine decanoate 25mg/ml inj</i>	2	
<i>perphenazine 16mg tab</i>	2	
<i>perphenazine 2mg tab</i>	2	
<i>perphenazine 4mg tab</i>	2	
<i>perphenazine 8mg tab</i>	2	
<i>prochlorperazine 10mg tab</i>	1	
<i>prochlorperazine 25mg rectal supp</i>	2	
<i>prochlorperazine 5mg tab</i>	1	
<i>thioridazine 100mg tab</i>	2	
<i>thioridazine 10mg tab</i>	2	
<i>thioridazine 25mg tab</i>	2	
<i>thioridazine 50mg tab</i>	2	
<i>trifluoperazine 10mg tab</i>	2	
<i>trifluoperazine 1mg tab</i>	2	
<i>trifluoperazine 2mg tab</i>	2	
<i>trifluoperazine 5mg tab</i>	2	
<b>QUINOLINONE DERIVATIVES</b>		
ABILIFY MAINTENA 300MG INJ	5	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 300MG/1.5ML SYRINGE	5	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 400MG INJ	5	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 400MG/2ML 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>	2	
<i>aripiprazole 15mg odt</i>	2	PA_ NSO QL=60 EA/30 Days
<i>aripiprazole 15mg tab</i>	2	
<i>aripiprazole 1mg/ml oral soln</i>	2	QL=900 ML/30 Days
<i>aripiprazole 20mg tab</i>	2	
<i>aripiprazole 2mg tab</i>	2	
<i>aripiprazole 30mg tab</i>	2	
<i>aripiprazole 5mg tab</i>	2	
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
REXULTI 2MG TAB	4	PA_ NSO QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
REXULTI 3MG TAB	4	PA_NSO QL=30 EA/30 Days
REXULTI 4MG TAB	4	PA_NSO QL=30 EA/30 Days
<b>ANTISPASTICITY AGENTS</b>		
<b>ANTISPASTICITY AGENTS</b>		
<i>baclofen 10mg tab</i>	1	
<i>baclofen 20mg tab</i>	1	
<i>baclofen 5mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	
<i>chlorzoxazone 500mg tab</i>	2	QL=180 EA/30 Days
<i>cyclobenzaprine 10mg tab</i>	1	
<i>cyclobenzaprine 5mg tab</i>	1	
<i>dantrolene sodium 100mg cap</i>	2	
<i>dantrolene sodium 25mg cap</i>	2	
<i>dantrolene sodium 50mg cap</i>	2	
<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>	2	
<i>pyridostigmine bromide 60mg tab</i>	2	
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg tab</i>	1	
<b>ANTIVIRALS</b>		
<b>ANTIRETROVIRALS</b>		
<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 2.5MG TAB FOR ORAL SUSP	5	QL=180 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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>	2	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
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	5	QL=180 EA/30 Days
ISENTRESS 100MG GRANULES FOR ORAL SUSP	5	QL=60 EA/30 Days
ISENTRESS 25MG CHEW TAB	3	QL=180 EA/30 Days
ISENTRESS 400MG TAB	5	QL=60 EA/30 Days
ISENTRESS 600MG TAB	5	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>	2	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 150-675MG TAB	5	QL=30 EA/30 Days
PREZCOBIX 150-800MG TAB	5	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PREZISTA 100MG/ML ORAL SUSP	5	QL=400 ML/30 Days
PREZISTA 150MG TAB	5	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
VIREAD 200MG TAB	5	QL=30 EA/30 Days
VIREAD 250MG TAB	5	QL=30 EA/30 Days
VIREAD 40MG/GM ORAL POWDER	5	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
<b>HEPATITIS AGENTS</b>		
<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=84 EA/28 Days
MAVYRET 50-20MG ORAL PELLET	5	NDS PA QL=140 EA/28 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	2	QL=210 EA/30 Days
RIBAVIRIN 200MG TAB	2	QL=210 EA/30 Days
SOFOSBUVIR/VELPATASVIR 400-100MG TAB	5	NDS PA QL=28 EA/28 Days
VOSEVI 400-100-100MG TAB	5	NDS PA QL=28 EA/28 Days
<b>HERPES AGENTS</b>		
<i>acyclovir 200mg cap</i>	1	
<i>acyclovir 400mg tab</i>	1	
<i>acyclovir 40mg/ml oral susp</i>	2	
<i>acyclovir 50mg/ml inj</i>	2	PA_BvD

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<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>acyclovir 800mg tab</i>	1	
<i>famciclovir 125mg tab</i>	2	QL=60 EA/30 Days
<i>famciclovir 250mg tab</i>	2	QL=60 EA/30 Days
<i>famciclovir 500mg tab</i>	2	QL=90 EA/30 Days
<i>valacyclovir 1000mg tab</i>	1	QL=120 EA/30 Days
<i>valacyclovir 500mg tab</i>	1	QL=60 EA/30 Days
<b>INFLUENZA AGENTS</b>		
<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/365 Days
RIMANTADINE 100MG TAB	2	
XOFLUZA 40MG TAB	4	QL=2 EA/30 Days
XOFLUZA 80MG TAB	4	QL=1 EA/30 Days
<b>MISC. ANTIVIRALS</b>		
LIVTENCITY 200MG TAB	5	NDS PA QL=120 EA/30 Days
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
PREVYMIS 120MG ORAL PELLETT	5	NDS PA QL=120 EA/30 Days
PREVYMIS 240MG TAB	5	NDS PA QL=28 EA/28 Days
PREVYMIS 480MG TAB	5	NDS PA QL=30 EA/30 Days
<i>valganciclovir 450mg tab</i>	2	QL=120 EA/30 Days
<i>valganciclovir 50mg/ml oral soln</i>	2	QL=1056 ML/30 Days
<b>BETA BLOCKERS</b>		
<b>ALPHA-BETA BLOCKERS</b>		
<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>	2	
<i>labetalol 200mg tab</i>	2	
<i>labetalol 300mg tab</i>	2	
<b>BETA BLOCKERS CARDIO-SELECTIVE</b>		
<i>acebutolol 200mg cap</i>	2	
<i>acebutolol 400mg cap</i>	2	
<i>atenolol 100mg tab</i>	1	
<i>atenolol 25mg tab</i>	1	
<i>atenolol 50mg tab</i>	1	
<i>betaxolol 10mg tab</i>	2	
<i>betaxolol 20mg tab</i>	2	
<i>bisoprolol fumarate 10mg tab</i>	2	
<i>bisoprolol fumarate 5mg tab</i>	2	

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<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<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	QL=60 EA/30 Days
<i>nebivolol 2.5mg tab</i>	2	QL=60 EA/30 Days
<i>nebivolol 20mg tab</i>	2	QL=60 EA/30 Days
<i>nebivolol 5mg tab</i>	2	QL=60 EA/30 Days
<b>BETA BLOCKERS NON-SELECTIVE</b>		
<i>nadolol 20mg tab</i>	2	
<i>nadolol 40mg tab</i>	2	
<i>nadolol 80mg tab</i>	2	
<i>pindolol 10mg tab</i>	2	
<i>pindolol 5mg tab</i>	2	
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	2	
<i>propranolol 160mg er cap</i>	2	
<i>propranolol 20mg tab</i>	1	
<i>propranolol 40mg tab</i>	1	
PROPRANOLOL 4MG/ML ORAL SOLN	2	
<i>propranolol 60mg er cap</i>	2	
<i>propranolol 60mg tab</i>	1	
<i>propranolol 80mg er cap</i>	2	
<i>propranolol 80mg tab</i>	1	
PROPRANOLOL 8MG/ML ORAL SOLN	2	
<i>sotalol 120mg tab</i>	2	
<i>sotalol 160mg tab</i>	2	
<i>sotalol 240mg tab</i>	2	
<i>sotalol 80mg tab</i>	2	
<i>sotalol af 120mg tab</i>	2	
<i>sotalol af 160mg tab</i>	2	
<i>sotalol af 80mg tab</i>	2	
<i>timolol 10mg tab</i>	2	
TIMOLOL 5MG TAB	2	
<b>CALCIUM CHANNEL BLOCKERS</b>		
<b>CALCIUM CHANNEL BLOCKERS</b>		
<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>	2	

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<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>cartia 180mg er (24hr) cap</i>	2	
<i>cartia 240mg er (24hr) cap</i>	2	
<i>cartia 300mg er (24hr) cap</i>	2	
<i>dilt 120mg er (24hr) cap</i>	2	
<i>dilt 180mg er (24hr) cap</i>	2	
<i>dilt 240mg er (24hr) cap</i>	2	
<i>diltiazem 120mg er (12hr) cap</i>	2	
<i>diltiazem 120mg er (24hr) cap</i>	2	
<i>diltiazem 120mg tab</i>	2	
<i>diltiazem 180mg er (24hr) cap</i>	2	
<i>diltiazem 240mg er (24hr) cap</i>	2	
<i>diltiazem 300mg er (24hr) cap</i>	2	
<i>diltiazem 30mg tab</i>	1	
<i>diltiazem 360mg er (24hr) cap</i>	2	
<i>diltiazem 420mg er (24hr) cap</i>	2	
<i>diltiazem 60mg er (12hr) cap</i>	2	
<i>diltiazem 60mg tab</i>	2	
<i>diltiazem 90mg er (12hr) cap</i>	2	
<i>diltiazem 90mg tab</i>	2	
<i>felodipine 10mg er tab</i>	2	
<i>felodipine 2.5mg er tab</i>	2	
<i>felodipine 5mg er tab</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>	2	
<i>tiadylt 180mg er (24hr) cap</i>	2	
<i>tiadylt 240mg er (24hr) cap</i>	2	
<i>tiadylt 300mg er (24hr) cap</i>	2	
<i>tiadylt 360mg er (24hr) cap</i>	2	
<i>tiadylt 420mg er (24hr) cap</i>	2	
<i>verapamil 120mg er cap</i>	2	
<i>verapamil 120mg er tab</i>	2	
<i>verapamil 120mg tab</i>	1	
<i>verapamil 180mg er cap</i>	2	
<i>verapamil 180mg er tab</i>	2	
<i>verapamil 240mg er cap</i>	2	
<i>verapamil 240mg er tab</i>	2	
<i>verapamil 40mg tab</i>	1	
<i>verapamil 80mg tab</i>	1	

**CARDIOVASCULAR AGENTS**

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<b>ALPHA-ADRENERGIC AGONISTS</b>		
<i>droxidopa 100mg cap</i>	2	PA QL=90 EA/30 Days
<i>droxidopa 200mg cap</i>	2	PA QL=180 EA/30 Days
<i>droxidopa 300mg cap</i>	2	PA QL=180 EA/30 Days
<i>midodrine 10mg tab</i>	2	
<i>midodrine 2.5mg tab</i>	2	
<i>midodrine 5mg tab</i>	2	
<b>ANTIARRHYTHMICS</b>		
<i>amiodarone 100mg tab</i>	2	
<i>amiodarone 200mg tab</i>	1	
<i>amiodarone 400mg tab</i>	2	
<i>disopyramide 100mg cap</i>	2	
<i>disopyramide 150mg cap</i>	2	
<i>dofetilide 0.125mg cap</i>	2	
<i>dofetilide 0.25mg cap</i>	2	
<i>dofetilide 0.5mg cap</i>	2	
<i>flecainide acetate 100mg tab</i>	2	
<i>flecainide acetate 150mg tab</i>	2	
<i>flecainide acetate 50mg tab</i>	2	
<i>mexiletine 150mg cap</i>	2	
<i>mexiletine 200mg cap</i>	2	
<i>mexiletine 250mg cap</i>	2	
MULTAQ 400MG TAB	3	QL=60 EA/30 Days
<i>propafenone 150mg tab</i>	2	
<i>propafenone 225mg er cap</i>	2	
<i>propafenone 225mg tab</i>	2	
<i>propafenone 300mg tab</i>	2	
<i>propafenone 325mg er cap</i>	2	
<i>propafenone 425mg er cap</i>	2	
QUINIDINE SULFATE 200MG TAB	2	
QUINIDINE SULFATE 300MG TAB	2	
<b>CARDIOVASCULAR AGENTS, OTHER</b>		
ATTRUBY 356MG TAB	5	NDS PA QL=112 EA/28 Days
<i>digoxin 0.125mg tab</i>	1	
<i>digoxin 0.25mg tab</i>	1	
ENTRESTO 15-16MG ORAL PELLETT	3	QL=240 EA/30 Days
ENTRESTO 6-6MG ORAL PELLETT	3	QL=240 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>	2	
<i>ranolazine 1000mg er tab</i>	2	QL=60 EA/30 Days
<i>ranolazine 500mg er tab</i>	2	QL=60 EA/30 Days
<i>sacubitril/valsartan 24-26mg tab</i>	2	QL=60 EA/30 Days
<i>sacubitril/valsartan 49-51mg tab</i>	2	QL=60 EA/30 Days
<i>sacubitril/valsartan 97-103mg tab</i>	2	QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<b>CENTRAL NERVOUS SYSTEM AGENTS</b>		
<b>CENTRAL NERVOUS SYSTEM, OTHER</b>		
EVRYSDI 0.75MG/ML ORAL SOLN	5	NDS PA QL=240 ML/30 Days
EVRYSDI 5MG TAB	5	NDS PA QL=30 EA/30 Days
RADICAVA 105MG/5ML ORAL SUSP	5	NDS PA QL=70 ML/28 Days
<i>riluzole 50mg tab</i>	2	QL=60 EA/30 Days
<b>CEPHALOSPORINS</b>		
<b>CEPHALOSPORINS - 1ST GENERATION</b>		
<i>cefadroxil 100mg/ml oral susp</i>	2	
<i>cefadroxil 500mg cap</i>	1	
<i>cefadroxil 50mg/ml oral susp</i>	2	
<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	
<b>CEPHALOSPORINS - 2ND GENERATION</b>		
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>	2	
<i>cefprozil 500mg tab</i>	1	
<i>cefprozil 50mg/ml oral susp</i>	2	
<i>cefuroxime 1500mg inj</i>	2	
<i>cefuroxime 250mg tab</i>	1	
<i>cefuroxime 500mg tab</i>	1	
<i>cefuroxime 750mg inj</i>	2	
<b>CEPHALOSPORINS - 3RD GENERATION</b>		
<i>cefdinir 25mg/ml oral susp</i>	2	
<i>cefdinir 300mg cap</i>	1	
<i>cefdinir 50mg/ml oral susp</i>	2	
<i>cefixime 400mg cap</i>	2	
<i>cefpodoxime 100mg tab</i>	2	
CEFPODOXIME 10MG/ML ORAL SUSP	2	
<i>cefpodoxime 200mg tab</i>	2	
CEFPODOXIME 20MG/ML ORAL SUSP	2	
<i>ceftazidime 1gm inj</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CEFTAZIDIME 200MG/ML INJ	2	
<i>cefazidime 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	
<b>DENTAL AND ORAL AGENTS</b>		
<b>DENTAL AND ORAL AGENTS</b>		
<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>	2	
<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>	2	
<i>pilocarpine 7.5mg tab</i>	2	
<i>triamcinolone acetonide 0.1% oral paste</i>	2	
<b>DERMATOLOGICALS</b>		
<b>ACNE PRODUCTS</b>		
<i>acutane 10mg cap</i>	2	
<i>acutane 20mg cap</i>	2	
<i>acutane 40mg cap</i>	2	
<i>amnesteem 10mg cap</i>	2	
<i>amnesteem 20mg cap</i>	2	
<i>amnesteem 30mg cap</i>	2	
<i>amnesteem 40mg cap</i>	2	
<i>claravis 10mg cap</i>	2	
<i>claravis 20mg cap</i>	2	
<i>claravis 30mg cap</i>	2	
<i>claravis 40mg cap</i>	2	
<i>clindamycin 1% pad</i>	2	QL=60 EA/30 Days
<i>clindamycin 1% topical gel (once-daily)</i>	2	QL=75 ML/30 Days
<i>clindamycin 1% topical gel (twice-daily)</i>	2	QL=75 GM/30 Days
<i>clindamycin 1% topical lotion</i>	2	QL=60 ML/30 Days
<i>clindamycin 1% topical soln</i>	1	QL=60 ML/30 Days
ERY 2% PAD	2	QL=60 EA/30 Days
ERYTHROMYCIN 2% TOPICAL GEL	2	QL=60 GM/30 Days
<i>erythromycin 2% topical soln</i>	2	QL=60 ML/30 Days
<i>isotretinoin 10mg cap</i>	2	
<i>isotretinoin 20mg cap</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
isotretinoin 30mg cap	2	
isotretinoin 40mg cap	2	
sulfacetamide sodium 10% topical lotion	2	QL=118 ML/30 Days
tretinoin 0.01% topical gel	2	PA QL=45 GM/30 Days
tretinoin 0.025% topical cream	2	PA QL=45 GM/30 Days
tretinoin 0.025% topical gel	2	PA QL=45 GM/30 Days
tretinoin 0.05% topical cream	2	PA QL=45 GM/30 Days
tretinoin 0.1% topical cream	2	PA QL=45 GM/30 Days
zenatane 10mg cap	2	
zenatane 20mg cap	2	
zenatane 30mg cap	2	
zenatane 40mg cap	2	
<b>ANTIBIOTICS - TOPICAL</b>		
gentamicin 0.1% topical cream	2	QL=30 GM/30 Days
gentamicin 0.1% topical ointment	2	QL=30 GM/30 Days
mupirocin 2% topical ointment	1	QL=220 GM/30 Days
<b>ANTIFUNGALS - TOPICAL</b>		
ciclopirox 0.77% topical cream	1	QL=90 GM/30 Days
ciclopirox 0.77% topical gel	2	QL=100 GM/30 Days
ciclopirox 0.77% topical lotion	2	QL=60 ML/30 Days
ciclopirox 1% shampoo	2	QL=120 ML/30 Days
ciclopirox 8% topical soln	1	QL=13.20 ML/30 Days
clotrimazole 1% topical cream	1	QL=45 GM/30 Days
clotrimazole/betamethasone 1-0.05% topical cream	1	QL=90 GM/30 Days
econazole nitrate 1% topical cream	1	QL=85 GM/30 Days
ketoconazole 2% shampoo	1	QL=240 ML/30 Days
ketoconazole 2% topical cream	1	QL=120 GM/30 Days
nyamyc 100000unit/gm topical powder	1	QL=60 GM/30 Days
nystatin 100000 unit/gm topical ointment	1	QL=30 GM/30 Days
nystatin 100000unit/gm topical powder	1	QL=60 GM/30 Days
nystatin 100000unit/ml topical cream	1	QL=30 GM/30 Days
nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% topical ointment	1	QL=60 GM/30 Days
nystatin/triamcinolone acetonide 100000-0.1unit/gm-% topical cream	1	QL=60 GM/30 Days
nystop 100000unit/gm topical powder	1	QL=60 GM/30 Days
<b>ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL</b>		
bexarotene 1% topical gel	5	NDS PA_NSO QL=60 GM/30 Days
diclofenac sodium 3% topical gel	2	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	2	QL=10 ML/30 Days
fluorouracil 5% topical cream	2	QL=40 GM/30 Days
fluorouracil 5% topical soln	2	QL=10 ML/30 Days
PANRETIN 0.1% TOPICAL GEL	5	NDS PA_NSO QL=60 GM/30 Days
VALCHLOR 0.016% TOPICAL GEL	5	NDS PA_NSO QL=60 GM/30 Days
<b>ANTIPSORIATICS</b>		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>acitretin 10mg cap</i>	2	
<i>acitretin 17.5mg cap</i>	2	
<i>acitretin 25mg cap</i>	2	
<i>calcipotriene 0.005% topical cream</i>	2	PA QL=120 GM/30 Days
<i>calcipotriene 0.005% topical 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
METHOXSALLEN 10MG CAP	2	
OTEZLA 10/20/30MG TAB 28-DAY STARTER PACK (55)	5	NDS PA QL=55 EA/28 Days
OTEZLA 10/20MG TAB 28-DAY STARTER PACK (55)	5	NDS PA QL=55 EA/28 Days
OTEZLA 20MG TAB	5	NDS PA QL=60 EA/30 Days
OTEZLA 30MG TAB	5	NDS PA QL=60 EA/30 Days
OTEZLA XR 75MG TAB	5	NDS PA QL=30 EA/30 Days
OTEZLA/OTEZLA XR 28-DAY 10/20/30/75MG STARTER PACK (41)	5	NDS PA QL=41 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
STARJEMZA 45MG/0.5ML INJ	4	PA QL=.50 ML/28 Days
STARJEMZA 45MG/0.5ML SYRINGE	4	PA QL=.50 ML/28 Days
STARJEMZA 90MG/ML SYRINGE	4	PA QL=1 ML/28 Days
STEQEYMA 45MG/0.5ML SYRINGE	4	PA QL=.50 ML/28 Days
STEQEYMA 90MG/ML SYRINGE	5	PA QL=1 ML/28 Days
<i>tazarotene 0.1% topical 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
YESINTEK 90MG/ML SYRINGE	5	PA QL=1 ML/28 Days
<b>CORTICOSTEROIDS - TOPICAL</b>		
<i>alclometasone dipropionate 0.05% topical cream</i>	2	QL=120 GM/30 Days
ALCLOMETASONE DIPROPIONATE 0.05% TOPICAL OINTMENT	2	QL=120 GM/30 Days
<i>betamethasone 0.05% aug topical cream</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% aug topical lotion</i>	2	QL=120 ML/30 Days
<i>betamethasone 0.05% aug topical ointment</i>	2	QL=100 GM/30 Days
<i>betamethasone 0.05% topical cream</i>	2	QL=90 GM/30 Days
<i>betamethasone 0.05% topical lotion</i>	2	QL=120 ML/30 Days
<i>betamethasone 0.05% topical ointment</i>	2	QL=90 GM/30 Days
<i>betamethasone 0.1% topical cream</i>	1	QL=135 GM/30 Days
BETAMETHASONE 0.1% TOPICAL LOTION	2	QL=120 ML/30 Days
<i>betamethasone 0.1% topical ointment</i>	1	QL=135 GM/30 Days
<i>clobetasol propionate 0.05% shampoo</i>	2	QL=236 ML/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>clobetasol propionate 0.05% topical cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical e cream</i>	2	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical foam</i>	2	QL=100 GM/30 Days
<i>clobetasol propionate 0.05% topical gel</i>	2	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical lotion</i>	2	QL=118 ML/30 Days
<i>clobetasol propionate 0.05% topical ointment</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical soln</i>	1	QL=100 ML/30 Days
<i>desonide 0.05% topical cream</i>	2	QL=60 GM/30 Days
<i>desonide 0.05% topical ointment</i>	2	QL=120 GM/30 Days
<i>desoximetasone 0.25% topical cream</i>	2	QL=100 GM/30 Days
<i>desoximetasone 0.25% topical ointment</i>	2	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% topical cream</i>	2	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>	2	QL=90 ML/30 Days
<i>fluocinolone acetonide 0.025% topical cream</i>	2	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.025% topical ointment</i>	2	QL=120 GM/30 Days
<i>fluocinonide 0.05% topical cream</i>	2	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical e cream</i>	2	QL=120 GM/30 Days
<i>fluocinonide 0.05% topical 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% topical cream</i>	1	QL=60 GM/30 Days
<i>fluticasone propionate 0.005% topical ointment</i>	2	QL=240 GM/30 Days
<i>fluticasone propionate 0.05% topical cream</i>	1	QL=240 GM/30 Days
<i>halobetasol propionate 0.05% topical cream</i>	2	QL=50 GM/30 Days
<i>halobetasol propionate 0.05% topical ointment</i>	2	QL=50 GM/30 Days
<i>hydrocortisone 1% topical cream</i>	1	QL=240 GM/30 Days
<b>HYDROCORTISONE 2.5% TOPICAL LOTION</b>	2	QL=118 ML/30 Days
<i>hydrocortisone 2.5% topical ointment</i>	1	QL=240 GM/30 Days
<i>mometasone furoate 0.1% topical cream</i>	1	QL=180 GM/30 Days
<i>mometasone furoate 0.1% topical lotion</i>	2	QL=180 ML/30 Days
<i>mometasone furoate 0.1% topical ointment</i>	1	QL=180 GM/30 Days
<b>TRIAMCINOLONE ACETONIDE 0.025% LOTION</b>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.025% topical cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.025% topical ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% topical cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% topical lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.1% topical ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% topical cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% topical ointment</i>	1	QL=120 GM/30 Days
<b>LOCAL ANESTHETICS - TOPICAL</b>		
<i>lidocaine 4% mucous membrane topical soln</i>	2	QL=50 ML/30 Days
<i>lidocaine 5% patch</i>	2	PA QL=90 EA/30 Days
<i>lidocaine 5% topical ointment</i>	1	PA QL=107 GM/30 Days
<i>lidocaine/prilocaine 2.5-2.5% topical cream</i>	1	QL=30 GM/30 Days
<b>MISC. DERMATOLOGICAL PRODUCTS</b>		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>acyclovir 5% topical ointment</i>	1	QL=30 GM/30 Days
<i>ammonium lactate 12% topical cream</i>	1	
<i>ammonium lactate 12% topical lotion</i>	1	
EUCRISA 2% TOPICAL OINTMENT	3	PA QL=100 GM/30 Days
<i>imiquimod 5% topical cream</i>	1	QL=24 EA/30 Days
LITFULO 50MG CAP	5	NDS PA QL=28 EA/28 Days
<i>malathion 0.5% topical lotion</i>	2	QL=59 ML/30 Days
NEMLUVIO 30MG AUTO-INJECTOR	5	NDS PA QL=2 EA/28 Days
<i>permethrin 5% topical cream</i>	1	QL=60 GM/30 Days
<i>pimecrolimus 1% topical cream</i>	2	QL=100 GM/30 Days
PODOFILOX 0.5% TOPICAL SOLN	2	QL=7 ML/30 Days
SELENIUM SULFIDE 2.5% SHAMPOO	1	QL=120 ML/30 Days
<i>tacrolimus 0.03% topical ointment</i>	2	QL=100 GM/30 Days
<i>tacrolimus 0.1% topical ointment</i>	2	QL=100 GM/30 Days
<b>ROSACEA AGENTS</b>		
<i>azelaic acid 15% topical gel</i>	2	QL=50 GM/30 Days
<i>metronidazole 0.75% topical cream</i>	2	QL=45 GM/30 Days
<i>metronidazole 0.75% topical gel</i>	2	QL=45 GM/30 Days
<i>metronidazole 1% topical gel</i>	2	QL=60 GM/30 Days
<b>WOUND CARE PRODUCTS</b>		
SANTYL 250UNIT/GM TOPICAL OINTMENT	3	PA QL=90 GM/30 Days
<i>silver sulfadiazine 1% topical cream</i>	1	
<i>ssd 1% topical cream</i>	1	
<b>DIURETICS</b>		
<b>CARBONIC ANHYDRASE INHIBITORS</b>		
<i>acetazolamide 125mg tab</i>	1	
<i>acetazolamide 250mg tab</i>	1	
<i>acetazolamide 500mg er cap</i>	2	
<i>methazolamide 25mg tab</i>	2	
<i>methazolamide 50mg tab</i>	2	
<b>DIURETIC COMBINATIONS</b>		
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	2	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	2	
<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	
<b>LOOP DIURETICS</b>		
<i>bumetanide 0.25mg/ml inj</i>	2	
<i>bumetanide 0.5mg tab</i>	2	
<i>bumetanide 1mg tab</i>	2	
<i>bumetanide 2mg tab</i>	2	
ENBUMYST 0.5MG/0.1ML NASAL SPRAY	5	NDS QL=12 EA/7 Days
FUROSCIX 80MG/10ML CARTRIDGE	5	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FUROSEMIDE 10MG/ML ORAL SOLN	1	
<i>furosemide 20mg tab</i>	1	
<i>furosemide 40mg tab</i>	1	
<i>furosemide 80mg tab</i>	1	
FUROSEMIDE 8MG/ML ORAL SOLN	2	
<i>torseamide 100mg tab</i>	1	
<i>torseamide 10mg tab</i>	1	
<i>torseamide 20mg tab</i>	1	
<i>torseamide 5mg tab</i>	1	
<b>POTASSIUM SPARING DIURETICS</b>		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
<b>THIAZIDES AND THIAZIDE-LIKE DIURETICS</b>		
<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	
<b>ENDOCRINE AND METABOLIC AGENTS - MISC.</b>		
<b>BONE DENSITY REGULATORS</b>		
<i>alendronate sodium 10mg tab</i>	1	QL=30 EA/30 Days
<i>alendronate sodium 35mg tab</i>	1	QL=4 EA/28 Days
<i>alendronate sodium 70mg tab</i>	1	QL=4 EA/28 Days
BOMYNTRA 120MG/1.7ML INJ	5	NDS PA QL=1.70 ML/28 Days
BOMYNTRA 120MG/1.7ML SYRINGE	5	NDS PA QL=1.70 ML/28 Days
CONEXXENCE 60MG/ML SYRINGE	3	ST QL=1 ML/168 Days
<i>ibandronate 150mg tab</i>	1	QL=1 EA/28 Days
JUBBONTI 60MG/ML SYRINGE	3	ST QL=1 ML/168 Days
<i>raloxifene 60mg tab</i>	2	
<i>risedronate sodium 150mg tab</i>	2	QL=1 EA/28 Days
<i>risedronate sodium 30mg tab</i>	2	QL=30 EA/30 Days
<i>risedronate sodium 35mg tab</i>	2	QL=4 EA/28 Days
<i>risedronate sodium 35mg tab pack (12)</i>	2	QL=4 EA/28 Days
<i>risedronate sodium 35mg tab pack (4)</i>	2	QL=4 EA/28 Days
<i>risedronate sodium 5mg tab</i>	2	QL=30 EA/30 Days
<i>salmon calcitonin 200unit/act nasal spray</i>	2	QL=3.70 ML/28 Days
TERIPARATIDE 620MCG/2.48ML PEN INJ	5	NDS QL=2.48 ML/28 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
METABOLIC MODIFIERS		
<i>calcitriol 0.25mcg cap</i>	1	
<i>calcitriol 0.5mcg cap</i>	1	
<i>calcitriol 1mcg/ml oral soln</i>	2	
<i>carglumic acid 200mg tab for oral susp</i>	5	NDS 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>glutamine 5000mg powder for oral soln</i>	5	NDS PA QL=180 EA/30 Days
<i>levocarnitine 100mg/ml oral soln</i>	2	
<i>levocarnitine 330mg tab</i>	2	
<i>paricalcitol 1mcg cap</i>	2	
<i>paricalcitol 2mcg cap</i>	2	
<i>paricalcitol 4mcg cap</i>	2	
REVCOSI 2.4MG/1.5ML INJ	5	NDS PA
<i>sapropterin 100mg powder for oral soln</i>	5	NDS PA
<i>sapropterin 100mg tab</i>	5	NDS PA
<i>sapropterin 500mg powder for oral soln</i>	5	NDS PA
<i>sodium phenylbutyrate 3gm/tsp oral powder</i>	2	
SOMATOSTATIC AGENTS		
<i>octreotide 0.05mg/ml inj</i>	2	PA
<i>octreotide 0.1mg/ml inj</i>	2	PA
<i>octreotide 0.2mg/ml inj</i>	2	PA
<i>octreotide 0.5mg/ml inj</i>	2	PA
<i>octreotide 1mg/ml inj</i>	2	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
VASOPRESSIN RECEPTOR ANTAGONISTS		
<i>tolvaptan 15mg tab</i>	5	NDS PA QL=120 EA/30 Days
<i>tolvaptan 15mg tab therapy pack (56)</i>	5	NDS PA QL=56 EA/28 Days
<i>tolvaptan 15mg/30mg tab pack (56)</i>	5	NDS PA QL=56 EA/28 Days
<i>tolvaptan 15mg/45mg tab pack (56)</i>	5	NDS PA QL=56 EA/28 Days
<i>tolvaptan 30mg tab</i>	5	NDS PA QL=120 EA/30 Days
<i>tolvaptan 30mg/60mg tab pack (56)</i>	5	NDS PA QL=56 EA/28 Days
<i>tolvaptan 30mg/90mg tab pack (56)</i>	5	NDS PA QL=56 EA/28 Days
ENDOCRINE MEDICATIONS		
OTHER ENDOCRINE DRUGS		
<i>cabergoline 0.5mg tab</i>	2	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
KERENDIA 40MG TAB	3	PA QL=30 EA/30 Days
NORDITROPIN 10MG/1.5ML PEN INJ	5	NDS PA
NORDITROPIN 15MG/1.5ML 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
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
<b>ESTROGENS</b>		
<b>ESTROGEN COMBINATIONS</b>		
<i>abigale 1/0.5mg tab 28-day pack</i>	2	
<i>abigale lo tab 0.5/0.1mg 28-day pack</i>	2	
<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	
ARANELLE TAB 28-DAY PACK	2	
<i>ashlyna tab 91-day pack</i>	2	QL=91 EA/91 Days
<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>briellyn tab 28-day pack</i>	2	
<i>camreselo tab 91-day pack</i>	2	QL=91 EA/91 Days
<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	QL=1 EA/28 Days
<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	2	QL=1 EA/28 Days
<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>	2	
<i>estradiol/norethindrone acetate 1-0.5mg 28-day pack</i>	2	

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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	QL=91 EA/91 Days
<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	2	QL=1 EA/28 Days
<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	QL=91 EA/91 Days
<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>	2	
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack</i>	2	
<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>fyavolv 0.0025-0.5mg tab</i>	2	
<i>fyavolv 0.005-1mg tab</i>	2	
<i>iclevia tab 91-day pack</i>	2	QL=91 EA/91 Days
<i>introvale tab 91-day pack</i>	2	QL=91 EA/91 Days
<i>isibloom tab 28-day pack</i>	2	
<i>jaimiess tab 91-day pack</i>	2	QL=91 EA/91 Days
<i>jasmiel tab 28-day pack</i>	2	
<i>jinteli 0.005-1mg tab</i>	2	
<i>juleber tab 28-day pack</i>	2	
<i>junel 1.5/30 tab 21-day pack</i>	2	
<i>junel 1/20 tab 21-day pack</i>	2	
<i>junel fe 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>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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	QL=91 EA/91 Days
<i>loryna tab 28-day pack</i>	2	
<i>low-ogestrel tab 28-day pack</i>	2	
<i>luizza 1.5/30 tab 21-day pack</i>	2	
<i>luizza 1/20 tab 21-day pack</i>	2	
<i>lutra tab 28-day pack</i>	2	
<i>marlissa 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>	2	
<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	QL=3 EA/28 Days
<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>pimtrea tab 28-day pack</i>	2	
<i>portia tab 28-day pack</i>	2	
PREMPHASE 28-DAY PACK	3	
PREMPRO 0.3/1.5MG 28-DAY PACK	3	
PREMPRO 0.45/1.5MG 28-DAY PACK	3	
PREMPRO 0.625/2.5MG 28-DAY PACK	3	
PREMPRO 0.625/5MG 28-DAY PACK	3	
<i>reclipsen tab 28-day pack</i>	2	
<i>setlakin tab 91-day pack</i>	2	QL=91 EA/91 Days
<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 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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 1/35 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	QL=3 EA/28 Days
<i>zafemy 150-35mcg/24hr patch</i>	2	QL=3 EA/28 Days
<i>zovia 1mg-35mcg tab 28-day pack</i>	2	
<b>ESTROGENS</b>		
<i>conjugated estrogens 0.3mg tab</i>	2	
<i>conjugated estrogens 0.45mg tab</i>	2	
<i>conjugated estrogens 0.625mg tab</i>	2	
<i>conjugated estrogens 0.9mg tab</i>	2	
<i>conjugated estrogens 1.25mg tab</i>	2	
<i>dotti 0.025mg/24hr twice weekly patch</i>	2	QL=8 EA/28 Days
<i>dotti 0.0375mg/24hr twice weekly patch</i>	2	QL=8 EA/28 Days
<i>dotti 0.05mg/24hr twice weekly patch</i>	2	QL=8 EA/28 Days
<i>dotti 0.075mg/24hr twice weekly patch</i>	2	QL=8 EA/28 Days
<i>dotti 0.1mg/24hr twice weekly patch</i>	2	QL=8 EA/28 Days
<i>estradiol 0.0025mg/hr weekly patch</i>	2	QL=4 EA/28 Days
<i>estradiol 0.01mg/24hr twice weekly patch</i>	2	QL=8 EA/28 Days
<i>estradiol 0.01mg/24hr weekly patch</i>	2	QL=4 EA/28 Days
<i>estradiol 0.025mg/24hr twice weekly patch</i>	2	QL=8 EA/28 Days
<i>estradiol 0.025mg/24hr weekly patch</i>	2	QL=4 EA/28 Days
<i>estradiol 0.0375mg/24hr twice weekly patch</i>	2	QL=8 EA/28 Days
<i>estradiol 0.0375mg/24hr weekly patch</i>	2	QL=4 EA/28 Days
<i>estradiol 0.05mg/24hr twice weekly patch</i>	2	QL=8 EA/28 Days
<i>estradiol 0.05mg/24hr weekly patch</i>	2	QL=4 EA/28 Days
<i>estradiol 0.075mg/24hr twice weekly patch</i>	2	QL=8 EA/28 Days
<i>estradiol 0.075mg/24hr weekly patch</i>	2	QL=4 EA/28 Days
<i>estradiol 0.5mg tab</i>	1	
<i>estradiol 1mg tab</i>	1	
<i>estradiol 2mg tab</i>	1	
<i>estradiol valerate 10mg/ml inj</i>	2	
<i>estradiol valerate 20mg/ml inj</i>	2	
<i>estradiol valerate 40mg/ml inj</i>	2	
<b>FLUOROQUINOLONES</b>		
<b>FLUOROQUINOLONES</b>		
<i>ciprofloxacin 250mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<b>GASTROINTESTINAL AGENTS</b>		
<b>GASTROINTESTINAL AGENTS, OTHER</b>		
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	
<i>cromolyn sodium 20mg/ml oral soln</i>	2	
<i>enulose 10gm/15ml oral soln</i>	1	
<i>generlac 10gm/15ml oral soln</i>	1	
<i>metoclopramide 10mg tab</i>	1	
<i>metoclopramide 1mg/ml oral soln</i>	2	
<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>	2	
<i>ursodiol 300mg cap</i>	2	
<i>ursodiol 500mg tab</i>	2	
VOWST 30000000UNIT CAP	5	PA QL=12 EA/90 Days
ZENPEP 105000-25000-79000UNIT DR CAP	3	
ZENPEP 14000-3000-10000UNIT DR CAP	3	
ZENPEP 24000-5000-17000UNIT DR CAP	3	
ZENPEP 252600-60000-189600UNIT DR CAP	3	
ZENPEP 40000-126000-168000UNIT DR CAP	3	
ZENPEP 42000-10000-32000UNIT DR CAP	3	
ZENPEP 63000-15000-47000UNIT DR CAP	3	
ZENPEP 84000-20000-63000UNIT DR CAP	3	
<b>GASTROINTESTINAL AGENTS - MISC.</b>		
<b>INFLAMMATORY BOWEL AGENTS</b>		
<i>balsalazide disodium 750mg cap</i>	2	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	
<i>sulfasalazine 500mg tab</i>	2	
TREMFYA 200MG/2ML AUTO-INJECTOR	5	NDS PA QL=2 ML/28 Days
TREMFYA 200MG/2ML AUTO-INJECTOR INDUCTION PACK FOR CROHNS (2)	5	NDS PA QL=4 ML/28 Days
TREMFYA 200MG/2ML SYRINGE	5	NDS PA QL=2 ML/28 Days
GENITOURINARY AGENTS		
ANTISPASMODICS, URINARY		
<i>bethanechol chloride 10mg tab</i>	2	
<i>bethanechol chloride 25mg tab</i>	2	
<i>bethanechol chloride 50mg tab</i>	2	
<i>bethanechol chloride 5mg tab</i>	2	
<i>fesoterodine fumarate 4mg er tab</i>	2	QL=30 EA/30 Days
<i>fesoterodine fumarate 8mg er tab</i>	2	QL=30 EA/30 Days
GEMTESA 75MG TAB	3	QL=30 EA/30 Days
MYRBETRIQ 25MG ER TAB	3	QL=30 EA/30 Days
MYRBETRIQ 50MG ER TAB	3	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	QL=600 ML/30 Days
<i>oxybutynin chloride 5mg er tab</i>	1	
<i>oxybutynin chloride 5mg tab</i>	1	
<i>solifenacin succinate 10mg tab</i>	2	
<i>solifenacin succinate 5mg tab</i>	2	
<i>tolterodine tartrate 1mg tab</i>	2	QL=60 EA/30 Days
<i>tolterodine tartrate 2mg er cap</i>	2	QL=30 EA/30 Days
<i>tolterodine tartrate 2mg tab</i>	2	QL=60 EA/30 Days
<i>tolterodine tartrate 4mg er cap</i>	2	QL=30 EA/30 Days
<i>trospium chloride 20mg tab</i>	2	QL=60 EA/30 Days
BENIGN PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	
<i>dutasteride 0.5mg cap</i>	1	QL=30 EA/30 Days
<i>finasteride 5mg tab</i>	1	
<i>silodosin 4mg cap</i>	2	QL=30 EA/30 Days
<i>silodosin 8mg cap</i>	2	QL=30 EA/30 Days
<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	
GENITOURINARY AGENTS, OTHER		
CYSTAGON 150MG CAP	3	
CYSTAGON 50MG CAP	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<b>GOUT AGENTS</b>		
<b>GOUT AGENTS</b>		
<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>	2	
<i>febuxostat 40mg tab</i>	2	ST QL=30 EA/30 Days
<i>febuxostat 80mg tab</i>	2	ST QL=30 EA/30 Days
<i>probenecid 500mg tab</i>	2	
<b>HEMATOLOGICAL AGENTS - MISC.</b>		
<b>PLATELET AGGREGATION INHIBITORS</b>		
<i>anagrelide 0.5mg cap</i>	2	
<i>anagrelide 1mg cap</i>	2	
<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>	2	
<i>dipyridamole 50mg tab</i>	2	
<i>dipyridamole 75mg tab</i>	2	
<i>prasugrel 10mg tab</i>	2	QL=30 EA/30 Days
<i>prasugrel 5mg tab</i>	2	QL=30 EA/30 Days
<i>ticagrelor 60mg tab</i>	2	QL=60 EA/30 Days
<i>ticagrelor 90mg tab</i>	2	QL=60 EA/30 Days
<b>HEMATOPOIETIC AGENTS</b>		
<b>HEMATOPOIETIC GROWTH FACTORS</b>		
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
FULPHILA 6MG/0.6ML SYRINGE	5	NDS
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

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RETACRIT 10000UNIT/ML INJ	3	PA QL=12 ML/28 Days
RETACRIT 20000UNIT/2ML INJ	3	PA QL=12 ML/28 Days
RETACRIT 20000UNIT/ML INJ	3	PA QL=12 ML/28 Days
RETACRIT 2000UNIT/ML INJ	3	PA QL=12 ML/28 Days
RETACRIT 3000UNIT/ML INJ	3	PA QL=12 ML/28 Days
RETACRIT 40000UNIT/ML INJ	3	PA QL=4 ML/28 Days
RETACRIT 4000UNIT/ML INJ	3	PA QL=12 ML/28 Days
<b>HEMOSTATICS</b>		
<b>HEMOSTATICS - SYSTEMIC</b>		
<i>tranexamic acid 650mg tab</i>	2	QL=30 EA/5 Days
<b>HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)</b>		
<b>HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)</b>		
<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	2	
<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>fludrocortisone acetate 0.1mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	2	
<i>hydrocortisone 20mg tab</i>	2	
<i>hydrocortisone 5mg tab</i>	2	
<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>	2	PA_BvD
<i>prednisolone 3mg/ml oral soln</i>	2	PA_BvD
<i>prednisolone 5mg/ml oral soln</i>	2	PA_BvD
<i>prednisone 10mg tab</i>	1	PA_BvD
<i>prednisone 10mg tab (21)</i>	2	
<i>prednisone 10mg tab pack (48)</i>	2	
<i>prednisone 1mg tab</i>	1	PA_BvD
PREDNISONONE 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
<i>prednisone 5mg tab pack (21)</i>	2	
<i>prednisone 5mg tab pack (48)</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>		
<b>NON-BARBITURATE HYPNOTICS</b>		
<i>eszopiclone 1mg tab</i>	1	QL=30 EA/30 Days
<i>eszopiclone 2mg tab</i>	1	QL=30 EA/30 Days
<i>eszopiclone 3mg tab</i>	1	QL=30 EA/30 Days
<i>ramelteon 8mg tab</i>	2	QL=30 EA/30 Days
<i>temazepam 15mg cap</i>	1	QL=30 EA/30 Days
<i>temazepam 30mg cap</i>	1	QL=30 EA/30 Days
<i>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
<b>IMMUNOLOGICAL AGENTS</b>		
<b>ANGIOEDEMA (HAE) AGENTS</b>		
HAEGARDA 2000UNIT INJ	5	NDS PA QL=30 EA/30 Days
HAEGARDA 3000UNIT INJ	5	NDS PA QL=20 EA/30 Days
<i>icatibant 30mg/3ml syringe</i>	5	NDS PA QL=27 ML/30 Days
<b>IMMUNIZING AGENTS, PASSIVE</b>		
GAMMAGARD 10GM INJ	5	NDS PA
GAMMAGARD 2.5GM/25ML INJ	5	NDS PA
GAMMAGARD 5GM INJ	5	NDS PA
GAMUNEX 1GM/10ML INJ	5	NDS PA
PRIVIGEN 20GM/200ML INJ	5	NDS PA
<b>VACCINES</b>		
ABRYSVO 120MCG/0.5ML INJ	3	QL=1 EA/365 DaysVAC
ACTHIB INJ	3	
ADACEL INJ	3	VAC
ADACEL SYRINGE	3	VAC
AREXVY 120MCG/0.5ML INJ	3	QL=1 EA/999 DaysVAC
BCG LIVE TICE STRAIN 50MG INJ	3	VAC
BEXSERO SYRINGE	3	VAC
BOOSTRIX INJ	3	VAC
BOOSTRIX SYRINGE	3	VAC
DAPTACEL INJ	3	
ENGERIX-B 10MCG/0.5ML SYRINGE	3	PA_BvD VAC
ENGERIX-B 20MCG/ML INJ	3	PA_BvD VAC
ENGERIX-B 20MCG/ML SYRINGE	3	PA_BvD VAC
GARDASIL 9 INJ	3	VAC
GARDASIL 9 SYRINGE	3	VAC
HAVRIX 1440ELU/ML SYRINGE	3	VAC
HAVRIX 720ELU/0.5ML SYRINGE	3	
HEPLISAV-B 20MCG/0.5ML SYRINGE	3	PA_BvD VAC
HIBERIX 10MCG INJ	3	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
IMOVAX 2.5UNIT/ML INJ	3	PA_BvD VAC
INFANRIX SYRINGE	3	
IPOL INJ	3	VAC
IXIARO 0.006MG/0.5ML SYRINGE	3	VAC
JYNNEOS 0.5ML INJ	3	PA_BvD VAC
KINRIX SYRINGE	3	
M-M-R II INJ	3	VAC
MENQUADFI INJ	3	VAC
MENVEO INJ	3	VAC
MRESVIA 50MCG/0.5ML SYRINGE	3	QL=.50 ML/999 DaysVAC
PEDIARIX SYRINGE	3	
PEDVAXHIB 7.5MCG/0.5ML INJ	3	
PENBRAYA INJ	3	VAC
PENMENVY INJ	3	VAC
PENTACEL 96-30-68UNIT/ML INJ	3	
PRIORIX INJ	3	VAC
PROQUAD INJ	3	
QUADRACEL INJ	3	
QUADRACEL SYRINGE	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/999 DaysVAC
TENIVAC 4-10UNIT/ML INJ	3	PA_BvD VAC
TENIVAC 4-10UNIT/ML SYRINGE	3	PA_BvD VAC
TICOVAC 1.2MCG/0.25ML SYRINGE	3	
TICOVAC 2.4MCG/0.5ML SYRINGE	3	VAC
TRUMENBA SYRINGE	3	VAC
TWINRIX SYRINGE	3	VAC
TYPHIM VI 25MCG/0.5ML INJ	3	VAC
TYPHIM VI 25MCG/0.5ML 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
VAXCHORA ORAL SUSP	3	VAC
VIMKUNYA 40MCG/0.8ML SYRINGE	3	VAC
VIVOTIF DR CAP	3	VAC
YF-VAX INJ	3	VAC

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<b>LAXATIVES</b>		
<b>LAXATIVE COMBINATIONS</b>		
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>	2	
<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>	2	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	2	
SUFLAVE ORAL SOLN PACK	3	
SUTAB 225-188-1479MG TAB	3	
<b>LAXATIVES - MISCELLANEOUS</b>		
<i>constulose 10gm/15ml oral soln</i>	1	
<i>lactulose 667mg/ml oral soln</i>	1	
LINZESS 145MCG CAP	3	QL=30 EA/30 Days
LINZESS 290MCG CAP	3	QL=30 EA/30 Days
LINZESS 72MCG CAP	3	QL=30 EA/30 Days
<i>lubiprostone 24mcg cap</i>	2	QL=60 EA/30 Days
<i>lubiprostone 8mcg cap</i>	2	QL=60 EA/30 Days
MOVANTIK 12.5MG TAB	3	PA QL=30 EA/30 Days
MOVANTIK 25MG TAB	3	PA QL=30 EA/30 Days
TRULANCE 3MG TAB	3	QL=30 EA/30 Days
<b>MEDICAL DEVICES AND SUPPLIES</b>		
<b>PARENTERAL THERAPY SUPPLIES</b>		
ALCOHOL SWAB 1X1 (DIABETIC)	2	
GAUZE PAD (2 X 2)	2	
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	
<b>MIGRAINE PRODUCTS</b>		
<b>MIGRAINE PRODUCTS</b>		
AIMOVIG 140MG/ML AUTO-INJECTOR	3	PA QL=1 ML/30 Days
AIMOVIG 70MG/ML AUTO-INJECTOR	3	PA QL=1 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
UBRELVY 50MG TAB	3	PA QL=16 EA/30 Days
ZAVZPRET 10MG/ACT NASAL SPRAY	3	PA QL=6 EA/30 Days
<b>SEROTONIN AGONISTS</b>		
<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 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 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
<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>		
<b>CHELATING AGENTS</b>		
<i>deferasirox 180mg tab</i>	2	PA
<i>deferasirox 360mg tab</i>	2	PA
<i>deferasirox 90mg tab</i>	2	PA
<i>penicillamine 250mg tab</i>	5	NDS
<i>trientine 250mg cap</i>	1	PA QL=240 EA/30 Days
<b>IMMUNOMODULATORS</b>		
<i>lenalidomide 10mg cap</i>	5	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 15mg cap</i>	5	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 2.5mg cap</i>	5	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 20mg cap</i>	5	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 25mg cap</i>	5	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 5mg cap</i>	5	NDS PA_NSO QL=28 EA/28 Days
REZUROCK 200MG TAB	5	NDS PA QL=30 EA/30 Days
THALOMID 100MG CAP	5	NDS QL=120 EA/30 Days
THALOMID 50MG CAP	5	NDS QL=240 EA/30 Days
<b>IMMUNOSUPPRESSIVE AGENTS</b>		
ARCALYST 220MG INJ	5	NDS PA
<i>azathioprine 50mg tab</i>	2	PA_BvD
BENLYSTA 200MG/ML AUTO-INJECTOR	5	NDS PA QL=4 ML/28 Days
BENLYSTA 200MG/ML SYRINGE	5	NDS PA QL=4 ML/28 Days
<i>cyclosporine 100mg cap</i>	2	PA_BvD
<i>cyclosporine 25mg cap</i>	2	PA_BvD
<i>cyclosporine modified 100mg cap</i>	2	PA_BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	2	PA_BvD
<i>cyclosporine modified 25mg cap</i>	2	PA_BvD

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>mycophenolate mofetil 200mg/ml oral susp</i>	2	PA_BvD
<i>mycophenolate mofetil 250mg cap</i>	2	PA_BvD
<i>mycophenolate mofetil 500mg tab</i>	2	PA_BvD
<i>mycophenolic acid 180mg dr tab</i>	2	PA_BvD
<i>mycophenolic acid 360mg dr tab</i>	2	PA_BvD
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
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>	2	PA_BvD
<i>tacrolimus 1mg cap</i>	2	PA_BvD
<i>tacrolimus 5mg cap</i>	2	PA_BvD
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
<b>POTASSIUM REMOVING AGENTS</b>		
<i>kionex 15gm/60ml oral 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 oral 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
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL</b>		
<b>NASAL ANTIALLERGY</b>		
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	2	QL=30 ML/30 Days
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	2	QL=45 ML/30 Days
<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	2	QL=30.50 GM/30 Days
NUTRIENTS		
MISC. NUTRITIONAL SUBSTANCES		
CLINIMIX 4.25/10 INJ	3	PA_BvD
CLINIMIX 4.25/5 INJ	3	PA_BvD
CLINIMIX 5/15 INJ	3	PA_BvD
CLINIMIX 5/20 INJ	3	PA_BvD
<i>clinisol 15% inj</i>	2	PA_BvD
DEXTROSE 10% INJ	2	PA_BvD
<i>electrolyte-148 inj</i>	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 inj</i>	2	
<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	
GLUCOSE 50MG/ML/POTASSIUM CHLORIDE 0.02MEQ/ML/SODIUM CHLORIDE 2.25MG/ML INJ	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	
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	2	
GLUCOSE/SODIUM CHLORIDE 25MG/ML-4.5MG/ML INJ	2	
KCL/D5W/LR INJ 0.15%	3	
<i>kcl/nacl 20meq-0.45% inj</i>	2	
<i>kcl/nacl 20meq-0.9% inj</i>	2	
<i>kcl/nacl 40meq-9% inj</i>	2	
<i>klor-con 10meq er tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
KLOR-CON 8MEQ ER TAB	1	
<i>magnesium sulfate 500mg/ml inj</i>	2	
<i>magnesium sulfate 500mg/ml syringe</i>	2	
<i>plenamine 15% inj</i>	2	PA_BvD
<i>potassium chloride 1.33meq/ml oral soln</i>	2	
<i>potassium chloride 10meq er cap</i>	1	
<i>potassium chloride 10meq er tab</i>	1	
<i>potassium chloride 10meq micro er tab</i>	1	
POTASSIUM CHLORIDE 10MEQ/100ML INJ	2	
POTASSIUM CHLORIDE 15MEQ ER TAB	1	
<i>potassium chloride 15meq micro er tab</i>	1	
<i>potassium chloride 2.67meq/ml oral soln</i>	2	
<i>potassium chloride 20meq er tab</i>	1	
<i>potassium chloride 20meq micro er tab</i>	1	
<i>potassium chloride 20meq powder for oral soln</i>	2	
POTASSIUM CHLORIDE 20MEQ/100ML INJ	2	
<i>potassium chloride 2meq/ml (20ml) inj</i>	2	
<i>potassium chloride 2meq/ml inj</i>	2	
POTASSIUM CHLORIDE 40MEQ/100ML INJ	2	
<i>potassium chloride 8meq er cap</i>	1	
<i>potassium chloride 8meq er tab</i>	1	
PROSOL 20% INJ	4	PA_BvD
<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	
TPN ELECTROLYTES INJ	2	PA_BvD
TRAVASOL 10% INJ	3	PA_BvD
<b>OPHTHALMIC AGENTS</b>		
<b>BETA-BLOCKERS - OPHTHALMIC</b>		
BETAXOLOL 0.5% OPHTH SOLN	2	
<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	
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	
<b>OPHTHALMIC ADRENERGIC AGENTS</b>		
APRACLONIDINE 0.5% OPHTH SOLN	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	QL=16 ML/30 Days
<b>OPHTHALMIC ANTI-INFECTIVES</b>		
BACITRACIN 500UNIT/GM OPHTH OINTMENT	2	
BACITRACIN/POLYMYXIN B 0.5-10UNIT/MG OPHTH OINTMENT	1	QL=7 GM/7 Days
<i>ciprofloxacin 0.3% ophth soln</i>	1	QL=30 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
NEOMYCIN/BACITRACIN/POLYMYXIN 5MG-400UNIT-10000UNIT OPHTH OINTMENT	2	QL=7 GM/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	2	QL=10 ML/7 Days
<i>ofloxacin 0.3% ophth soln</i>	1	QL=60 ML/30 Days
<i>polymyxin b/trimethoprim 10000 unit/ml-0.1% ophth soln</i>	1	QL=10 ML/7 Days
SULFACETAMIDE SODIUM 10% OPHTH SOLN	1	QL=15 ML/7 Days
<i>tobramycin 0.3% ophth soln</i>	1	QL=30 ML/30 Days
TRIFLURIDINE 1% OPHTH SOLN	2	QL=15 ML/7 Days
XDEMVIY 0.25% OPHTH SOLN	5	PA QL=10 ML/42 Days
<b>OPHTHALMIC KINASE INHIBITORS</b>		
RHOPRESSA 0.02% OPHTH SOLN	3	QL=5 ML/30 Days
ROCKLATAN 0.02-0.005% OPHTH SOLN	3	QL=5 ML/30 Days
<b>OPHTHALMIC STEROIDS</b>		
DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	2	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>	1	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	2	
<i>difluprednate 0.05% ophth susp</i>	2	
<i>fluorometholone 0.1% ophth susp</i>	2	
<i>loteprednol etabonate 0.5% ophth gel</i>	2	
<i>loteprednol etabonate 0.5% ophth susp</i>	2	
NEOMYCIN/POLYMYXIN/BACITRACIN/HYDROCORTISONE 1% OPHTH OINTMENT	2	
<i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>	1	
PREDNISOLONE 1% OPHTH SOLN	2	
<i>prednisolone acetate 1% ophth susp</i>	2	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN	1	
<b>OPHTHALMICS - MISC.</b>		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>atropine sulfate 1% ophth soln</i>	2	
<i>azelastine 0.05% ophth soln</i>	1	
CROMOLYN SODIUM 4% OPHTH SOLN	1	
<i>cyclosporine 0.05% ophth susp</i>	2	QL=60 EA/30 Days
CYSTADROPS 0.37% OPHTH SOLN	5	NDS PA QL=20 ML/28 Days
<i>diclofenac sodium 0.1% ophth soln</i>	1	QL=20 ML/365 Days
<i>dorzolamide 2% ophth soln</i>	1	
FLURBIPROFEN SODIUM 0.03% OPHTH SOLN	2	
<i>ketorolac tromethamine 0.4% ophth soln</i>	2	QL=20 ML/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	1	
MIEBO 1.338GM/ML OPHTH SOLN	3	QL=3 ML/30 Days
<i>pilocarpine 1% ophth soln</i>	2	
<i>pilocarpine 2% ophth soln</i>	2	
<i>pilocarpine 4% ophth soln</i>	2	
XIIDRA 5% OPHTH SOLN	3	QL=60 EA/30 Days
<b>PROSTAGLANDINS - OPHTHALMIC</b>		
<i>bimatoprost 0.03% ophth soln</i>	2	QL=5 ML/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 ML/30 Days
LUMIGAN 0.01% OPHTH SOLN	3	QL=5 ML/30 Days
<i>travoprost 0.004% ophth soln</i>	2	QL=5 ML/30 Days
<b>OTIC AGENTS</b>		
<b>OTIC AGENTS - MISCELLANEOUS</b>		
<i>acetic acid 2% otic soln</i>	1	
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	2	QL=7.50 ML/7 Days
<i>fluocinolone acetonide 0.01% otic soln</i>	2	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	2	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	2	
<i>ofloxacin 0.3% otic soln</i>	1	
<b>PENICILLINS</b>		
<b>AMINOPENICILLINS</b>		
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 2000mg inj</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ampicillin 500mg cap</i>	1	
<b>NATURAL PENICILLINS</b>		
BICILLIN L-A 1200000UNIT/2ML SYRINGE	4	
BICILLIN L-A 2400000UNIT/4ML SYRINGE	4	
BICILLIN L-A 600000UNIT/ML SYRINGE	4	
<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	
<b>PENICILLIN COMBINATIONS</b>		
<i>amoxicillin/clavulanate 250-125mg tab</i>	1	
<i>amoxicillin/clavulanate 500-125mg tab</i>	1	
<i>amoxicillin/clavulanate 875-125mg tab</i>	1	
<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	1	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	2	
<i>ampicillin/sulbactam 1000-500mg inj</i>	2	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	2	
<i>piperacillin/tazobactam 2000-250mg inj</i>	2	
<i>piperacillin/tazobactam 3000-375mg inj</i>	2	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	2	
<i>piperacillin/tazobactam 4000-500mg inj</i>	2	
<b>PENICILLINASE-RESISTANT PENICILLINS</b>		
<i>dicloxacillin 250mg cap</i>	2	
<i>dicloxacillin 500mg cap</i>	2	
<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	
<b>PROGESTINS</b>		
<b>PROGESTINS</b>		
<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	QL=.65 ML/84 Days
<i>errin 0.35mg tab 28-day pack</i>	2	
<i>gallifrey 5mg tab</i>	2	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	QL=1 ML/90 Days
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	2	QL=1 ML/90 Days
<i>medroxyprogesterone acetate 2.5mg tab</i>	1	
<i>medroxyprogesterone acetate 5mg tab</i>	1	
MEGESTROL ACETATE 125MG/ML ORAL 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>	2	
<i>orquidea 0.35mg tab 28-day pack</i>	2	
<i>progesterone 100mg cap</i>	2	
<i>progesterone 200mg cap</i>	2	
<i>sharobel 0.35mg tab 28-day pack</i>	2	
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</b>		
<b>AGENTS FOR CHEMICAL DEPENDENCY</b>		
<i>acamprosate calcium 333mg dr tab</i>	2	
<i>disulfiram 250mg tab</i>	2	
<b>ANTIDEMENTIA AGENTS</b>		
<i>donepezil 10mg odt</i>	2	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>	2	QL=30 EA/30 Days
<i>donepezil 5mg tab</i>	1	
<i>galantamine 12mg tab</i>	2	QL=60 EA/30 Days
<i>galantamine 4mg tab</i>	2	QL=60 EA/30 Days
<i>galantamine 8mg tab</i>	2	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>	2	QL=60 EA/30 Days
<i>rivastigmine 13.3mg/24hr patch</i>	2	QL=30 EA/30 Days
<i>rivastigmine 3mg cap</i>	2	QL=60 EA/30 Days

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<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>rivastigmine 4.5mg cap</i>	2	QL=60 EA/30 Days
<i>rivastigmine 4.6mg/24hr patch</i>	2	QL=30 EA/30 Days
<i>rivastigmine 6mg cap</i>	2	QL=60 EA/30 Days
<i>rivastigmine 9.5mg/24hr patch</i>	2	QL=30 EA/30 Days
<b>MOVEMENT DISORDER DRUG THERAPY</b>		
AUSTEDO 12MG TAB	5	NDS PA QL=120 EA/30 Days
AUSTEDO 30MG ER TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO 36MG ER TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO 42MG ER TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO 48MG ER TAB	5	NDS PA QL=30 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=30 EA/30 Days
AUSTEDO XR 18MG TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO XR 24MG TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO XR 6MG TAB	5	NDS PA QL=30 EA/30 Days
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATIO PACK (28)	5	NDS PA QL=28 EA/28 Days
INGREZZA 40MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 40MG SPRINKLE CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 60MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 60MG SPRINKLE CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 80MG CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA 80MG SPRINKLE CAP	5	NDS PA QL=30 EA/30 Days
INGREZZA CAP THERAPY PACK (28)	5	NDS PA QL=28 EA/28 Days
<i>tetrabenazine 12.5mg tab</i>	2	QL=90 EA/30 Days
<i>tetrabenazine 25mg tab</i>	2	QL=120 EA/30 Days
<b>MULTIPLE SCLEROSIS AGENTS</b>		
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>	2	QL=60 EA/30 Days
<i>dimethyl fumarate 120mg dr cap</i>	2	QL=14 EA/7 Days
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	2	QL=60 EA/180 Days
<i>dimethyl fumarate 240mg dr cap</i>	2	QL=60 EA/30 Days
<i>fingolimod 0.5mg cap</i>	2	QL=30 EA/30 Days
<i>glatiramer acetate 20mg/ml syringe</i>	2	QL=30 ML/30 Days
<i>glatiramer acetate 40mg/ml syringe</i>	2	QL=12 ML/28 Days
<i>glatopa 20mg/ml syringe</i>	2	QL=30 ML/30 Days
<i>glatopa 40mg/ml syringe</i>	2	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=112 EA/28 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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>	2	QL=30 EA/30 Days
<i>teriflunomide 7mg tab</i>	2	QL=30 EA/30 Days
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</b>		
NUEDEXTA 20-10MG CAP	3	PA QL=60 EA/30 Days
PIMOZIDE 1MG TAB	2	
PIMOZIDE 2MG TAB	2	
<b>SMOKING DETERRENENTS</b>		
<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
<b>RESPIRATORY TRACT AGENTS</b>		
<b>ANTI-HISTAMINES</b>		
<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	
<b>PULMONARY ANTIHYPERTENSIVES</b>		
ADEMPAS 0.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	5	NDS PA QL=90 EA/30 Days
<i>alyq 20mg tab</i>	2	PA QL=60 EA/30 Days
<i>ambrisentan 10mg tab</i>	5	NDS PA QL=30 EA/30 Days
<i>ambrisentan 5mg tab</i>	5	NDS PA QL=30 EA/30 Days
<i>bosentan 125mg tab</i>	5	NDS PA QL=60 EA/30 Days
<i>bosentan 62.5mg tab</i>	5	NDS PA QL=60 EA/30 Days
OPSUMIT 10MG TAB	5	NDS PA QL=30 EA/30 Days
<i>sildenafil 20mg tab</i>	2	PA QL=360 EA/30 Days
<i>tadalafil 20mg tab</i>	2	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
<b>RESPIRATORY TRACT AGENTS, OTHER</b>		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>acetylcysteine 100mg/ml inh soln</i>	2	PA_BvD
<i>acetylcysteine 200mg/ml inh soln</i>	2	PA_BvD
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	PA QL=84 ML/56 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=56 EA/28 Days
KALYDECO 5.8MG ORAL GRANULES	5	NDS PA QL=56 EA/28 Days
KALYDECO 50MG ORAL GRANULES	5	NDS PA QL=56 EA/28 Days
KALYDECO 75MG ORAL GRANULES	5	NDS PA QL=56 EA/28 Days
OFEV 100MG CAP	5	NDS PA QL=60 EA/30 Days
OFEV 150MG CAP	5	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG ORAL GRANULES	5	NDS PA QL=56 EA/28 Days
ORKAMBI 125-100MG TAB	5	NDS PA QL=112 EA/28 Days
ORKAMBI 125-200MG TAB	5	NDS PA QL=112 EA/28 Days
ORKAMBI 188-150MG ORAL GRANULES	5	NDS PA QL=56 EA/28 Days
ORKAMBI 94-75MG ORAL GRANULES	5	NDS PA QL=56 EA/28 Days
<i>pirfenidone 267mg cap</i>	2	PA QL=270 EA/30 Days
<i>pirfenidone 267mg tab</i>	2	PA QL=270 EA/30 Days
<i>pirfenidone 801mg tab</i>	2	PA QL=90 EA/30 Days
PROLASTIN 1000MG INJ	5	NDS PA
PULMOZYME 1MG/ML INH SOLN	5	NDS PA_BvD QL=150 ML/30 Days
<i>roflumilast 0.5mg tab</i>	2	QL=30 EA/30 Days
<i>roflumilast 250mcg tab</i>	2	QL=28 EA/365 Days
SYMDEKO TAB 4-WEEK PACK (56)	5	NDS PA QL=56 EA/28 Days
SYMDEKO TAB 50-75MG/75MG PACK (56)	5	NDS PA QL=56 EA/28 Days
THEOPHYLLINE 100MG ER TAB	2	
THEOPHYLLINE 200MG ER TAB	2	
<i>theophylline 300mg er tab</i>	2	
<i>theophylline 400mg er tab</i>	2	
<i>theophylline 450mg er tab</i>	2	
<i>theophylline 600mg er tab</i>	2	
TRIKAFTA 100-50-75MG/150MG TAB PACK (84)	5	NDS PA QL=84 EA/28 Days
TRIKAFTA 100-50-75MG/75MG ORAL 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 ORAL GRANULES PACK (56)	5	NDS PA QL=56 EA/28 Days
<b>SLEEP DISORDER AGENTS</b>		
<b>SLEEP DISORDERS, OTHER</b>		
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

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
LUMRYZ GRANULES FOR ORAL SUSP 28-DAY STARTER PACK (28)	5	NDS PA QL=28 EA/28 Days
<i>sodium oxybate 500mg/ml oral soln</i>	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
<b>SULFONAMIDES</b>		
<b>SULFONAMIDES</b>		
<i>sulfadiazine 500mg tab</i>	2	
<i>sulfamethoxazole/trimethoprim 200-40mg/5ml oral susp</i>	2	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
<b>TETRACYCLINES</b>		
<b>TETRACYCLINES</b>		
<i>doxy 100mg inj</i>	2	
<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>doxycycline monohydrate 75mg tab</i>	1	
<i>minocycline 100mg cap</i>	1	
<i>minocycline 50mg cap</i>	1	
<i>minocycline 75mg cap</i>	1	
<i>tetracycline 250mg cap</i>	2	
<i>tetracycline 500mg cap</i>	2	
<b>THYROID AGENTS</b>		
<b>ANTITHYROID AGENTS</b>		
<i>methimazole 10mg tab</i>	1	
<i>methimazole 5mg tab</i>	1	
<i>propylthiouracil 50mg tab</i>	2	
<b>THYROID HORMONES</b>		
<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	

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<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<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>liomny 25mcg tab</i>	2	
<i>liomny 50mcg tab</i>	2	
<i>liomny 5mcg tab</i>	2	
<i>liothyronine sodium 25mcg tab</i>	2	
<i>liothyronine sodium 50mcg tab</i>	2	
<i>liothyronine sodium 5mcg tab</i>	2	
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	
<b>ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS</b>		
<b>ANTISPASMODICS</b>		
<i>dicyclomine 10mg cap</i>	1	
<i>dicyclomine 20mg tab</i>	1	
<i>dicyclomine 2mg/ml oral soln</i>	2	
<i>glycopyrrolate 1mg tab</i>	2	
<i>glycopyrrolate 2mg tab</i>	2	
<b>H-2 ANTAGONISTS</b>		
<i>cimetidine 200mg tab</i>	2	
<i>cimetidine 300mg tab</i>	2	
<i>cimetidine 400mg tab</i>	2	
<i>cimetidine 800mg tab</i>	2	

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<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
<b>MISC. ANTI-ULCER</b>		
<i>misoprostol 100mcg tab</i>	2	
<i>misoprostol 200mcg tab</i>	2	
<i>sucralfate 1000mg tab</i>	1	
<i>sucralfate 100mg/ml oral susp</i>	2	
<b>PROTON PUMP INHIBITORS</b>		
<i>dexlansoprazole 30mg dr cap</i>	4	
<i>dexlansoprazole 60mg dr cap</i>	4	
<i>esomeprazole 20mg dr cap</i>	2	
<i>esomeprazole 40mg dr cap</i>	2	
<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>	2	
<b>VAGINAL AND RELATED PRODUCTS</b>		
<b>VAGINAL ANTI-INFECTIVES</b>		
<i>clindamycin 2% vaginal cream</i>	2	
<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>	2	
<b>VAGINAL ESTROGENS</b>		
<i>estradiol 0.01% vaginal cream</i>	1	
<i>estradiol 0.01mg vaginal insert</i>	2	
<b>PREMARIN 0.625MG/GM VAGINAL CREAM</b>	3	
<i>yuvafem 10mcg vaginal insert</i>	2	

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# ALPHABETICAL LISTING OF DRUGS

<b>A</b>					
<i>abacavir 20mg/ml oral soln</i>	53	<i>acitretin 17.5mg cap</i>	63	<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i>	18
<i>abacavir 300mg tab</i>	53	<i>acitretin 25mg cap</i>	63	<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	18
<i>abacavir/lamivudine 600-300mg tab</i>	53	ACTHIB INJ	76	<i>albuterol 5mg/ml (0.5%) inh soln</i>	18
<i>abigale 1/0.5mg tab 28-day pack</i>	68	ACTIMMUNE	46	<i>alclometasone dipropionate 0.05% topical cream</i>	63
<i>abigale lo tab 0.5/0.1mg 28-day pack</i>	68	2000000UNIT/0.5ML INJ		ALCLOMETASONE	63
ABILIFY MAINTENA 300MG INJ	52	<i>acyclovir 200mg cap</i>	55	DIPROPIONATE 0.05%	
ABILIFY MAINTENA 300MG/1.5ML SYRINGE	52	<i>acyclovir 400mg tab</i>	55	TOPICAL OINTMENT	
ABILIFY MAINTENA 400MG INJ	52	<i>acyclovir 40mg/ml oral susp</i>	55	ALCOHOL SWAB 1X1 (DIABETIC)	78
ABILIFY MAINTENA 400MG/2ML SYRINGE	52	<i>acyclovir 5% topical ointment</i>	65	ALECENSA 150MG CAP	42
<i>abiraterone acetate 250mg tab</i>	41	<i>acyclovir 50mg/ml inj</i>	55	<i>alendronate sodium 10mg tab</i>	66
<i>abirtega 250mg tab</i>	41	<i>acyclovir 800mg tab</i>	56	<i>alendronate sodium 35mg tab</i>	66
ABRYSSVO	76	ADACEL INJ	76	<i>alendronate sodium 70mg tab</i>	66
120MCG/0.5ML INJ		ADACEL SYRINGE	76	<i>alfuzosin 10mg er tab</i>	73
<i>acamprosate calcium 333mg dr tab</i>	86	<i>adefovir dipivoxil 10mg tab</i>	55	<i>aliskiren 150mg tab</i>	37
<i>acarbose 100mg tab</i>	28	ADEMPAS 0.5MG TAB	88	<i>aliskiren 300mg tab</i>	37
<i>acarbose 25mg tab</i>	28	ADEMPAS 1.5MG TAB	88	<i>allopurinol 100mg tab</i>	74
<i>acarbose 50mg tab</i>	28	ADEMPAS 1MG TAB	88	<i>allopurinol 300mg tab</i>	74
<i>accutane 10mg cap</i>	61	ADEMPAS 2.5MG TAB	88	<i>alosectron 0.5mg tab</i>	31
<i>accutane 20mg cap</i>	61	ADEMPAS 2MG TAB	88	<i>alosectron 1mg tab</i>	31
<i>accutane 40mg cap</i>	61	ADVAIR 115-21MCG HFA INHALER	18	<i>alprazolam 0.25mg tab</i>	17
<i>acebutolol 200mg cap</i>	56	ADVAIR 230-21MCG HFA INHALER	18	<i>alprazolam 0.5mg tab</i>	17
<i>acebutolol 400mg cap</i>	56	ADVAIR 45-21MCG/ACT HFA INHALER	18	<i>alprazolam 1mg tab</i>	17
<i>acetazolamide 125mg tab</i>	65	AIMOVIG 140MG/ML	78	<i>alprazolam 2mg tab</i>	17
<i>acetazolamide 250mg tab</i>	65	AUTO-INJECTOR		<i>altavera tab 28-day pack</i>	68
<i>acetazolamide 500mg er cap</i>	65	AIMOVIG 70MG/ML	78	ALUNBRIG 180MG TAB	42
<i>acetic acid 2% otic soln</i>	84	AUTO-INJECTOR		ALUNBRIG 30MG TAB	42
<i>acetylcysteine 100mg/ml inh soln</i>	89	AKEEGA 500-100MG TAB	41	ALUNBRIG 90MG TAB	42
<i>acetylcysteine 200mg/ml inh soln</i>	89	AKEEGA 500-50MG TAB	41	ALUNBRIG TAB	42
<i>acitretin 10mg cap</i>	63	<i>albendazole 200mg tab</i>	16	INITIATION PACK (30)	
		<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	18	ALVESCO 160MCG INHALER	18
		<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	18	ALVESCO 80MCG INHALER	18
		<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	18		
		<i>albuterol 1.25mg/3ml neb soln</i>	18		

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# ALPHABETICAL LISTING OF DRUGS

<i>alyacen 1/35 tab 28-day pack</i>	68	<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	36	<i>amoxapine 100mg tab</i>	26
ALYFTREK 10-50-125MG TAB	89	<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	36	<i>amoxapine 150mg tab</i>	26
ALYFTREK 4-20-50MG TAB	89	<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	36	<i>amoxapine 25mg tab</i>	26
<i>alyq 20mg tab</i>	88	<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	36	<i>amoxapine 50mg tab</i>	27
<i>amantadine 100mg cap</i>	47	<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	36	AMOXICILLIN 125MG CHEW TAB	84
<i>amantadine 10mg/ml oral soln</i>	47	<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	36	<i>amoxicillin 250mg cap</i>	84
<i>ambrisentan 10mg tab</i>	88	<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	36	AMOXICILLIN 250MG CHEW TAB	84
<i>ambrisentan 5mg tab</i>	88	<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	36	<i>amoxicillin 25mg/ml oral susp</i>	84
<i>amikacin 250mg/ml inj</i>	12	<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	36	<i>amoxicillin 40mg/ml oral susp</i>	84
<i>amiloride 5mg tab</i>	66	<i>amlodipine/valsartan 10-160mg tab</i>	36	<i>amoxicillin 500mg cap</i>	84
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	65	<i>amlodipine/valsartan 10-320mg tab</i>	36	<i>amoxicillin 500mg tab</i>	84
<i>amiodarone 100mg tab</i>	59	<i>amlodipine/valsartan 5-160mg tab</i>	36	<i>amoxicillin 50mg/ml oral susp</i>	84
<i>amiodarone 200mg tab</i>	59	<i>ammonium lactate 12% topical cream</i>	65	<i>amoxicillin 80mg/ml oral susp</i>	84
<i>amiodarone 400mg tab</i>	59	<i>ammonium lactate 12% topical lotion</i>	65	<i>amoxicillin 875mg tab</i>	84
<i>amitriptyline 100mg tab</i>	26	<i>amnestem 10mg cap</i>	61	<i>amoxicillin/clavulanate 250-125mg tab</i>	85
<i>amitriptyline 10mg tab</i>	26	<i>amnestem 20mg cap</i>	61	<i>amoxicillin/clavulanate 500-125mg tab</i>	85
<i>amitriptyline 150mg tab</i>	26	<i>amnestem 30mg cap</i>	61	<i>amoxicillin/clavulanate 875-125mg tab</i>	85
<i>amitriptyline 25mg tab</i>	26	<i>amnestem 40mg cap</i>	61	<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	85
<i>amitriptyline 50mg tab</i>	26			<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	85
<i>amitriptyline 75mg tab</i>	26			<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	85
<i>amlodipine 10mg tab</i>	57			<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	85
<i>amlodipine 2.5mg tab</i>	57			<i>amphetamine/dextroamph etamine 10mg er cap</i>	11
<i>amlodipine 5mg tab</i>	57			<i>amphetamine/dextroamph etamine 10mg tab</i>	11
<i>amlodipine/benazepril 10-20mg cap</i>	35			<i>amphetamine/dextroamph etamine 12.5mg tab</i>	11
<i>amlodipine/benazepril 10-40mg cap</i>	35				
<i>amlodipine/benazepril 2.5-10mg cap</i>	35				
<i>amlodipine/benazepril 5-10mg cap</i>	35				
<i>amlodipine/benazepril 5-20mg cap</i>	35				
<i>amlodipine/benazepril 5-40mg cap</i>	35				

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# ALPHABETICAL LISTING OF DRUGS

<i>amphetamine/dextroamph etamine 15mg er cap</i>	11	<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	31	ARNUITY 50MCG POWDER INHALER	18
<i>amphetamine/dextroamph etamine 15mg tab</i>	11	<i>aprepitant 40mg cap</i>	31	<i>asenapine 10mg sl tab</i>	50
<i>amphetamine/dextroamph etamine 20mg er cap</i>	11	<i>aprepitant 80mg cap</i>	31	<i>asenapine 2.5mg sl tab</i>	50
<i>amphetamine/dextroamph etamine 20mg tab</i>	11	<i>apri tab 28-day pack</i>	68	<i>asenapine 5mg sl tab</i>	50
<i>amphetamine/dextroamph etamine 25mg er cap</i>	11	APTIVUS 250MG CAP	53	<i>ashlyna tab 91-day pack</i>	68
<i>amphetamine/dextroamph etamine 30mg er cap</i>	11	ARANELLE TAB 28-DAY PACK	68	ASMANEX 100MCG HFA INHALER	18
<i>amphetamine/dextroamph etamine 30mg tab</i>	11	ARCALYST 220MG INJ	79	ASMANEX 110MCG (30ACT) TWISTHALER	18
<i>amphetamine/dextroamph etamine 5mg er cap</i>	11	AREXVY 120MCG/0.5ML INJ	76	ASMANEX 200MCG HFA INHALER	18
<i>amphetamine/dextroamph etamine 5mg tab</i>	11	<i>arformoterol tartrate 15mcg/2ml neb soln</i>	19	ASMANEX 220MCG (120ACT) TWISTHALER	18
<i>amphetamine/dextroamph etamine 7.5mg tab</i>	11	ARIKAYCE	12	ASMANEX 220MCG (30ACT) TWISTHALER	18
AMPHOTERICIN B 50MG INJ	32	590MG/8.4ML INH SUSP		ASMANEX 220MCG (60ACT) TWISTHALER	18
<i>amphotericin b liposomal 50mg inj</i>	32	<i>aripiprazole 10mg odt</i>	52	ASMANEX 220MCG (60ACT) TWISTHALER	18
<i>ampicillin 1000mg inj</i>	84	<i>aripiprazole 10mg tab</i>	52	ASMANEX 50MCG HFA INHALER	18
<i>ampicillin 100mg/ml inj</i>	84	<i>aripiprazole 15mg odt</i>	52	<i>aspirin/dipyridamole 25-200mg er cap</i>	74
<i>ampicillin 2000mg inj</i>	84	<i>aripiprazole 15mg tab</i>	52	<i>atazanavir 150mg cap</i>	53
<i>ampicillin 500mg cap</i>	85	<i>aripiprazole 1mg/ml oral soln</i>	52	<i>atazanavir 200mg cap</i>	53
<i>ampicillin/sulbactam 1000-500mg inj</i>	85	<i>aripiprazole 20mg tab</i>	52	<i>atazanavir 300mg cap</i>	53
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	85	<i>aripiprazole 2mg tab</i>	52	<i>atenolol 100mg tab</i>	56
<i>ampicillin/sulbactam 2000-1000mg inj</i>	85	<i>aripiprazole 30mg tab</i>	52	<i>atenolol 25mg tab</i>	56
<i>anagrelide 0.5mg cap</i>	74	<i>aripiprazole 5mg tab</i>	52	<i>atenolol 50mg tab</i>	56
<i>anagrelide 1mg cap</i>	74	ARISTADA	52	<i>atenolol/chlorthalidone 100-25mg tab</i>	36
<i>anastrozole 1mg tab</i>	41	1064MG/3.9ML SYRINGE		<i>atenolol/chlorthalidone 50-25mg tab</i>	36
ANORO ELLIPTA 62.5-25MCG POWDER INHALER	19	ARISTADA	52	<i>atomoxetine 100mg cap</i>	11
APRACLONIDINE 0.5% OPHTH SOLN	82	441MG/1.6ML SYRINGE		<i>atomoxetine 10mg cap</i>	11
<i>aprepitant 125mg cap</i>	31	ARISTADA	52	<i>atomoxetine 18mg cap</i>	11
		662MG/2.4ML SYRINGE		<i>atomoxetine 25mg cap</i>	11
		ARISTADA	52	<i>atomoxetine 40mg cap</i>	11
		675MG/2.4ML SYRINGE		<i>atomoxetine 60mg cap</i>	11
		ARISTADA	52	<i>atomoxetine 80mg cap</i>	11
		882MG/3.2ML SYRINGE		<i>atorvastatin 10mg tab</i>	33
		<i>armodafinil 150mg tab</i>	11	<i>atorvastatin 20mg tab</i>	33
		<i>armodafinil 200mg tab</i>	11	<i>atorvastatin 40mg tab</i>	33
		<i>armodafinil 250mg tab</i>	11	<i>atorvastatin 80mg tab</i>	33
		<i>armodafinil 50mg tab</i>	11		
		ARNUITY 100MCG POWDER INHALER	18		
		ARNUITY 200MCG POWDER INHALER	18		

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# ALPHABETICAL LISTING OF DRUGS

<i>atovaquone 750mg/5ml oral susp</i>	37	AYVAKIT 50MG TAB	46	<i>benazepril 10mg tab</i>	34	
<i>atovaquone/proguanil 250-100mg tab</i>	39	<i>azathioprine 50mg tab</i>	79	<i>benazepril 20mg tab</i>	34	
<i>atovaquone/proguanil 62.5-25mg tab</i>	39	<i>azelaic acid 15% topical gel</i>	65	<i>benazepril 40mg tab</i>	34	
<i>atropine sulfate 1% ophth soln</i>	84	<i>azelastine 0.05% ophth soln</i>	84	<i>benazepril 5mg tab</i>	34	
<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	31	<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	80	<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	36	
ATROVENT 17MCG HFA INHALER	18	<i>azithromycin 20mg/ml oral susp</i>	37	<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	36	
ATTRUBY 356MG TAB	59	<i>azithromycin 250mg pack (6)</i>	37	<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	36	
<i>aubra tab 28-day pack</i>	68	<i>azithromycin 250mg tab</i>	37	<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	36	
AUGTYRO 160MG CAP	42	<i>azithromycin 40mg/ml oral susp</i>	37	BENLYSTA 200MG/ML SYRINGE	79	
AUGTYRO 40MG CAP	42	<i>azithromycin 500mg inj</i>	37	<i>benztropine mesylate 0.5mg tab</i>	47	
AUSTEDO 12MG TAB	87	<i>azithromycin 500mg tab</i>	37	<i>benztropine mesylate 1mg tab</i>	47	
AUSTEDO 30MG ER TAB	87	<i>azithromycin 500mg tab pack (3)</i>	37	<i>benztropine mesylate 2mg tab</i>	47	
AUSTEDO 36MG ER TAB	87	<i>azithromycin 600mg tab</i>	38	BESREMI 500MCG/ML SYRINGE	46	
AUSTEDO 42MG ER TAB	87	<i>aztreonam 1gm inj</i>	38	<i>betamethasone 0.05% aug topical cream</i>	63	
AUSTEDO 48MG ER TAB	87	<i>aztreonam 2gm inj</i>	38	<i>betamethasone 0.05% aug topical lotion</i>	63	
AUSTEDO 6MG TAB	87	<i>azurette 28-day pack</i>	68	<i>betamethasone 0.05% aug topical ointment</i>	63	
AUSTEDO 9MG TAB	87	<hr/>			<i>betamethasone 0.05% topical cream</i>	63
AUSTEDO XR 12MG TAE	87	<b>B</b>		<i>betamethasone 0.05% topical lotion</i>	63	
AUSTEDO XR 18MG TAE	87	BACITRACIN 500UNIT/GM OPHTH OINTMENT	83	<i>betamethasone 0.05% topical ointment</i>	63	
AUSTEDO XR 24MG TAE	87	BACITRACIN/POLYMYXIN B 0.5-10UNIT/MG OPHTH OINTMENT	83	<i>betamethasone 0.1% topical cream</i>	63	
AUSTEDO XR 6MG TAB	87	<i>baclofen 10mg tab</i>	53	<i>betamethasone 0.1% topical lotion</i>	63	
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATION PACK (28)	87	<i>baclofen 20mg tab</i>	53	<i>betamethasone 0.05% topical ointment</i>	63	
AUVELITY 105-45MG ER TAB	24	<i>baclofen 5mg tab</i>	53	<i>betamethasone 0.1% topical cream</i>	63	
<i>aviane tab 28-day pack</i>	68	<i>balsalazide disodium 750mg cap</i>	72	BETAMETHASONE 0.1% TOPICAL LOTION	63	
AVMAPKI/FAKZYNJA CO-PACK (66)	42	BALVERSA 3MG TAB	42	<i>betamethasone 0.1% topical ointment</i>	63	
AVONEX 30MCG/0.5ML AUTO-INJECTOR	87	BALVERSA 4MG TAB	42	BETASERON 0.3MG INJ	87	
AVONEX 30MCG/0.5ML SYRINGE	87	BALVERSA 5MG TAB	42			
AYVAKIT 100MG TAB	46	<i>balziva tab 28-day pack</i>	68			
AYVAKIT 200MG TAB	46	BAQSIMI 3MG/DOSE NASAL POWDER	28			
AYVAKIT 25MG TAB	46	BCG LIVE TICE STRAIN 50MG INJ	76			
AYVAKIT 300MG TAB	46					

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

BETAXOLOL 0.5% OPHTH SOLN	82	<i>blisovi 21 fe tab 1.5/30</i> 28-day pack	68	BRIVIACT 10MG/ML ORAL SOLN	21
<i>betaxolol 10mg tab</i>	56	BOMYNTRA	66	BRIVIACT 25MG TAB	21
<i>betaxolol 20mg tab</i>	56	120MG/1.7ML INJ		BRIVIACT 50MG TAB	21
<i>bethanechol chloride</i> 10mg tab	73	BOMYNTRA	66	BRIVIACT 75MG TAB	21
<i>bethanechol chloride</i> 25mg tab	73	120MG/1.7ML SYRINGE		<i>bromocriptine 2.5mg tab</i>	48
<i>bethanechol chloride</i> 50mg tab	73	BOOSTRIX INJ	76	<i>bromocriptine 5mg cap</i>	48
<i>bethanechol chloride 5mg</i> tab	73	BOOSTRIX SYRINGE	76	BRUKINSA 160MG TAB	42
<i>bexarotene 1% topical gel</i>	62	<i>bosentan 125mg tab</i>	88	<i>budesonide 0.25mg/2ml</i> inh susp	18
<i>bexarotene 75mg cap</i>	46	<i>bosentan 62.5mg tab</i>	88	<i>budesonide 0.5mg/2ml</i> inh susp	18
BEXSERO SYRINGE	76	BOSULIF 100MG CAP	42	<i>budesonide 1mg/2ml inh</i> susp	18
<i>bicalutamide 50mg tab</i>	41	BOSULIF 100MG TAB	42	<i>budesonide 3mg dr cap</i>	75
BICILLIN L-A 1200000UNIT/2ML SYRINGE	85	BOSULIF 400MG TAB	42	<i>budesonide 9mg er tab</i>	75
BICILLIN L-A 2400000UNIT/4ML SYRINGE	85	BOSULIF 500MG TAB	42	<i>budesonide/formoterol</i> <i>fumarate 160-45mcg</i> inhaler	19
BICILLIN L-A 600000UNIT/ML SYRINGE	85	BOSULIF 50MG CAP	42	<i>budesonide/formoterol</i> <i>fumarate 80-45mcg</i> inhaler	19
BIKTARVY 30-120-15MG TAB	53	BRAFTOVI 75MG CAP	42	<i>bumetanide 0.25mg/ml inj</i>	65
BIKTARVY 50-200-25MG TAB	53	BREO ELLIPTA 100-25MCG POWDER INHALER	19	<i>bumetanide 0.5mg tab</i>	65
<i>bimatoprost 0.03% ophth</i> <i>soln</i>	84	BREO ELLIPTA 200-25MCG POWDER INHALER	19	<i>bumetanide 1mg tab</i>	65
<i>bisoprolol fumarate 10mg</i> tab	56	BREO ELLIPTA 50-25MCG POWDER INHALER	19	<i>bumetanide 2mg tab</i>	65
<i>bisoprolol fumarate 5mg</i> tab	56	<i>breynga 160-4.5mcg/act</i> inhaler	19	<i>buprenorphine 10mcg/hr</i> weekly patch	15
<i>bisoprolol fumarate/hydrochlorothia</i> <i>zide 10-6.25mg tab</i>	36	<i>breynga 80-4.5mcg/act</i> inhaler	19	<i>buprenorphine 15mcg/hr</i> weekly patch	15
<i>bisoprolol fumarate/hydrochlorothia</i> <i>zide 2.5-6.25mg tab</i>	36	BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	19	<i>buprenorphine 20mcg/hr</i> weekly patch	15
<i>bisoprolol fumarate/hydrochlorothia</i> <i>zide 5-6.25mg tab</i>	36	<i>briellyn tab 28-day pack</i>	68	<i>buprenorphine 2mg sl tab</i>	15
		<i>brimonidine tartrate</i> 0.1% ophth soln	83	<i>buprenorphine 5mcg/hr</i> weekly patch	15
		<i>brimonidine tartrate</i> 0.15% ophth soln	83	<i>buprenorphine 7.5mcg/hr</i> weekly patch	15
		<i>brimonidine tartrate</i> 0.2% ophth soln	83	<i>buprenorphine 8mg sl tab</i>	15
		<i>brimonidine tartrate/timolol 0.2-0.5%</i> ophth soln	82	<i>buprenorphine/naloxone</i> 12-3mg sl film	15
		BRIVIACT 100MG TAB	21	<i>buprenorphine/naloxone</i> 2-0.5mg sl film	15
		BRIVIACT 10MG TAB	21	<i>buprenorphine/naloxone</i> 2-0.5mg sl tab	15

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# ALPHABETICAL LISTING OF DRUGS

<i>buprenorphine/naloxone</i>	15	<i>camreselo tab 91-day</i>	68	<i>carbamazepine 400mg er</i>	21
<i>4-1mg sl film</i>		<i>pack</i>		<i>tab</i>	
<i>buprenorphine/naloxone</i>	15	<i>candesartan cilexetil</i>	34	<i>carbidopa 25mg tab</i>	47
<i>8-2mg sl film</i>		<i>16mg tab</i>		<i>carbidopa/entacapone/le</i>	48
<i>buprenorphine/naloxone</i>	15	<i>candesartan cilexetil</i>	34	<i>vodopa 12.5-200-50mg</i>	
<i>8-2mg sl tab</i>		<i>32mg tab</i>		<i>tab</i>	
<i>bupropion 100mg sr</i>	24	<i>candesartan cilexetil 4mg</i>	34	<i>carbidopa/entacapone/le</i>	48
<i>(12hr) tab</i>		<i>tab</i>		<i>vodopa 18.75-200-75mg</i>	
<i>bupropion 100mg tab</i>	24	<i>candesartan cilexetil 8mg</i>	35	<i>tab</i>	
<i>bupropion 150mg sr (12</i>	24	<i>tab</i>		<i>carbidopa/entacapone/le</i>	48
<i>hr) tab</i>		<i>candesartan</i>	36	<i>vodopa 25-200-100mg</i>	
<i>bupropion 150mg sr</i>	88	<i>cilexetil/hydrochlorothiaz</i>		<i>tab</i>	
<i>(12hr) tab</i>		<i>ide 16-12.5mg tab</i>		<i>carbidopa/entacapone/le</i>	48
<i>bupropion 200mg sr</i>	24	<i>candesartan</i>	36	<i>vodopa 31.25-200-125mg</i>	
<i>(12hr) tab</i>		<i>cilexetil/hydrochlorothiaz</i>		<i>tab</i>	
<i>bupropion 75mg tab</i>	24	<i>ide 32-12.5mg tab</i>		<i>carbidopa/entacapone/le</i>	48
<i>bupropion xl 150mg (24</i>	24	<i>candesartan</i>	36	<i>vodopa 37.5-200-150mg</i>	
<i>hr) tab</i>		<i>cilexetil/hydrochlorothiaz</i>		<i>tab</i>	
<i>bupropion xl 300mg</i>	24	<i>ide 32-25mg tab</i>		<i>carbidopa/entacapone/le</i>	48
<i>(24hr) tab</i>		CAPLYTA 10.5MG CAP	49	<i>vodopa 50-200-200mg</i>	
<i>bupirone 10mg tab</i>	16	CAPLYTA 21MG CAP	49	<i>tab</i>	
<i>bupirone 15mg tab</i>	16	CAPLYTA 42MG CAP	49	<i>carbidopa/levodopa</i>	48
<i>bupirone 30mg tab</i>	16	CAPRELSA 100MG TAB	42	<i>10-100mg odt</i>	
<i>bupirone 5mg tab</i>	16	CAPRELSA 300MG TAB	42	<i>carbidopa/levodopa</i>	48
<i>bupirone 7.5mg tab</i>	17	<i>captopril 100mg tab</i>	34	<i>10-100mg tab</i>	
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<b>C</b>		<i>captopril 12.5mg tab</i>	34	<i>carbidopa/levodopa</i>	48
<i>cabergoline 0.5mg tab</i>	67	<i>captopril 25mg tab</i>	34	<i>25-100mg er tab</i>	
CABOMETYX 20MG TAE	42	<i>captopril 50mg tab</i>	34	<i>carbidopa/levodopa</i>	48
CABOMETYX 40MG TAE	42	<i>carbamazepine 100mg</i>	21	<i>25-100mg odt</i>	
CABOMETYX 60MG TAE	42	<i>chew tab</i>		<i>carbidopa/levodopa</i>	48
<i>calcipotriene 0.005%</i>	63	<i>carbamazepine 100mg er</i>	21	<i>25-100mg tab</i>	
<i>topical cream</i>		<i>cap</i>		<i>carbidopa/levodopa</i>	48
<i>calcipotriene 0.005%</i>	63	<i>carbamazepine 100mg er</i>	21	<i>25-250mg odt</i>	
<i>topical ointment</i>		<i>tab</i>		<i>carbidopa/levodopa</i>	48
CALCIPOTRIENE 0.005%	63	<i>carbamazepine 200mg er</i>	21	<i>25-250mg tab</i>	
TOPICAL SOLN		<i>cap</i>		<i>carbidopa/levodopa</i>	48
<i>calcitriol 0.25mcg cap</i>	67	<i>carbamazepine 200mg er</i>	21	<i>50-200mg er tab</i>	
<i>calcitriol 0.5mcg cap</i>	67	<i>tab</i>		<i>carglumic acid 200mg tab</i>	67
<i>calcitriol 1mcg/ml oral</i>	67	<i>carbamazepine 200mg</i>	21	<i>for oral susp</i>	
<i>soln</i>		<i>tab</i>		<i>carisoprodol 350mg tab</i>	53
CALQUENCE 100MG	42	<i>carbamazepine 20mg/ml</i>	21	CARTEOLOL 1% OPHTH	82
TAB		<i>oral susp</i>		SOLN	
<i>camila 0.35mg tab 28-day</i>	85	<i>carbamazepine 300mg er</i>	21	<i>cartia 120mg er (24hr)</i>	57
<i>pack</i>		<i>cap</i>		<i>cap</i>	

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# ALPHABETICAL LISTING OF DRUGS

<i>cartia 180mg er (24hr) cap</i>	58	<i>cefprozil 25mg/ml oral susp</i>	60	<i>chlorpromazine 10mg tab</i>	51
<i>cartia 240mg er (24hr) cap</i>	58	<i>cefprozil 500mg tab</i>	60	<i>chlorpromazine 200mg tab</i>	51
<i>cartia 300mg er (24hr) cap</i>	58	<i>cefprozil 50mg/ml oral susp</i>	60	<i>chlorpromazine 25mg tab</i>	51
<i>carvedilol 12.5mg tab</i>	56	<i>ceftazidime 1gm inj</i>	60	<i>chlorpromazine 30mg/ml oral soln</i>	51
<i>carvedilol 25mg tab</i>	56	CEFTAZIDIME	61	<i>chlorpromazine 50mg tab</i>	51
<i>carvedilol 3.125mg tab</i>	56	200MG/ML INJ		<i>chlorthalidone 25mg tab</i>	66
<i>carvedilol 6.25mg tab</i>	56	<i>ceftazidime 2gm inj</i>	61	<i>chlorthalidone 50mg tab</i>	66
<i>caspofungin acetate 50mg inj</i>	32	<i>ceftriaxone 10gm inj</i>	61	<i>chlorthalidone 50mg tab</i>	66
<i>caspofungin acetate 70mg inj</i>	32	<i>ceftriaxone 1gm inj</i>	61	<i>chlorzoxazone 500mg tab</i>	53
CAYSTON 75MG/ML INH SOLN	89	<i>ceftriaxone 250mg inj</i>	61	<i>cholestyramine resin (sugar-free) 4gm powder for oral susp</i>	33
CEFACLOR 250MG CAP	60	<i>ceftriaxone 2gm inj</i>	61	<i>cholestyramine resin 4gm powder for oral susp</i>	33
CEFACLOR 500MG CAP	60	<i>ceftriaxone 500mg inj</i>	61	<i>ciclopirox 0.77% topical cream</i>	62
<i>cefadroxil 100mg/ml oral susp</i>	60	<i>cefuroxime 1500mg inj</i>	60	<i>ciclopirox 0.77% topical gel</i>	62
<i>cefadroxil 500mg cap</i>	60	<i>cefuroxime 250mg tab</i>	60	<i>ciclopirox 0.77% topical lotion</i>	62
<i>cefadroxil 50mg/ml oral susp</i>	60	<i>cefuroxime 500mg tab</i>	60	<i>ciclopirox 0.77% topical lotion</i>	62
<i>cefazolin 1000mg inj</i>	60	<i>cefuroxime 750mg inj</i>	60	<i>ciclopirox 1% shampoo</i>	62
<i>cefazolin 200mg/ml inj</i>	60	<i>celecoxib 100mg cap</i>	13	<i>ciclopirox 8% topical soln</i>	62
<i>cefazolin 500mg inj</i>	60	<i>celecoxib 200mg cap</i>	13	CILASTATIN/IMIPENEM 250-250MG INJ	38
<i>cefdinir 25mg/ml oral susp</i>	60	<i>celecoxib 400mg cap</i>	13	<i>cilastatin/imipenem 500-500mg inj</i>	38
<i>cefdinir 300mg cap</i>	60	<i>celecoxib 50mg cap</i>	13	<i>cilostazol 100mg tab</i>	74
<i>cefdinir 50mg/ml oral susp</i>	60	<i>cephalexin 250mg cap</i>	60	<i>cilostazol 50mg tab</i>	74
<i>cefepime 1000mg inj</i>	38	<i>cephalexin 25mg/ml oral susp</i>	60	CIMDUO 300-300MG TAB	53
<i>cefepime 2000mg inj</i>	38	<i>cephalexin 500mg cap</i>	60	<i>cimetidine 200mg tab</i>	91
<i>cefixime 400mg cap</i>	60	<i>cephalexin 50mg/ml oral susp</i>	60	<i>cimetidine 300mg tab</i>	91
<i>cefoxitin 1gm inj</i>	60	<i>cevimeline 30mg cap</i>	61	<i>cimetidine 400mg tab</i>	91
<i>cefoxitin 200mg/ml inj</i>	60	<i>chlordiazepoxide 10mg cap</i>	17	<i>cimetidine 800mg tab</i>	91
<i>cefoxitin 2gm inj</i>	60	<i>chlordiazepoxide 25mg cap</i>	17	CIMZIA 200MG INJ	13
<i>cefpodoxime 100mg tab</i>	60	<i>chlordiazepoxide 5mg cap</i>	17	CIMZIA 200MG/ML SYRINGE	13
CEFPODOXIME 10MG/ML ORAL SUSP	60	<i>chlorhexidine gluconate 0.12% mouthwash</i>	61	CIMZIA 200MG/ML SYRINGE STARTER KIT (6)	13
<i>cefpodoxime 200mg tab</i>	60	CHLOROQUINE PHOSPHATE 250MG TAB	39	<i>cinacalcet 30mg tab</i>	67
CEFPODOXIME 20MG/ML ORAL SUSP	60	<i>chloroquine phosphate 500mg tab</i>	39	<i>cinacalcet 60mg tab</i>	67
<i>cefprozil 250mg tab</i>	60	<i>chlorpromazine 100mg tab</i>	51	<i>cinacalcet 90mg tab</i>	67
		<i>chlorpromazine 100mg/ml oral soln</i>	51		

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# ALPHABETICAL LISTING OF DRUGS

<i>ciprofloxacin 0.3% ophthalmic soln</i>	83	<i>clindamycin 600mg/50ml inj</i>	38	<i>clonazepam 2mg tab</i>	21
<i>ciprofloxacin 250mg tab</i>	71	<i>clindamycin 75mg cap</i>	38	<i>clonidine 0.1mg er tab</i>	11
<b>CIPROFLOXACIN</b>	72	<i>clindamycin 75mg/5ml oral soln</i>	38	<i>clonidine 0.1mg tab</i>	35
<b>2MG/ML INJ</b>		<i>clindamycin 900mg/50ml inj</i>	38	<i>clonidine 0.1mg/24hr weekly patch</i>	35
<i>ciprofloxacin 500mg tab</i>	72	<i>clindamycin 900mg/6ml inj</i>	38	<i>clonidine 0.2mg tab</i>	35
<i>ciprofloxacin 750mg tab</i>	72	<b>CLINIMIX 4.25/10 INJ</b>	81	<i>clonidine 0.2mg/24hr weekly patch</i>	35
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic suspension</i>	84	<b>CLINIMIX 4.25/5 INJ</b>	81	<i>clonidine 0.3mg tab</i>	35
<i>citalopram 10mg tab</i>	25	<b>CLINIMIX 5/15 INJ</b>	81	<i>clonidine 0.3mg/24hr weekly patch</i>	35
<i>citalopram 20mg tab</i>	25	<b>CLINIMIX 5/20 INJ</b>	81	<i>clopidogrel 75mg tab</i>	74
<i>citalopram 2mg/ml oral soln</i>	25	<i>clinisol 15% inj</i>	81	<i>clorazepate dipotassium 15mg tab</i>	17
<i>citalopram 40mg tab</i>	25	<i>clobazam 10mg tab</i>	20	<i>clorazepate dipotassium 3.75mg tab</i>	17
<i>claravis 10mg cap</i>	61	<i>clobazam 2.5mg/ml oral suspension</i>	20	<i>clorazepate dipotassium 7.5mg tab</i>	17
<i>claravis 20mg cap</i>	61	<i>clobazam 20mg tab</i>	20	<i>clotrimazole 1% topical cream</i>	62
<i>claravis 30mg cap</i>	61	<i>clobetasol propionate 0.05% shampoo</i>	63	<i>clotrimazole 10mg lozenge</i>	61
<i>claravis 40mg cap</i>	61	<i>clobetasol propionate 0.05% topical cream</i>	64	<i>clotrimazole/betamethasone 1-0.05% topical cream</i>	62
<i>clarithromycin 250mg tab</i>	38	<i>clobetasol propionate 0.05% topical e cream</i>	64	<i>clozapine 100mg odt</i>	50
<b>CLARITHROMYCIN</b>	38	<i>clobetasol propionate 0.05% topical foam</i>	64	<i>clozapine 100mg tab</i>	50
<b>25MG/ML ORAL SUSP</b>		<i>clobetasol propionate 0.05% topical gel</i>	64	<i>clozapine 12.5mg odt</i>	50
<i>clarithromycin 500mg tab</i>	38	<i>clobetasol propionate 0.05% topical lotion</i>	64	<i>clozapine 150mg odt</i>	50
<b>CLARITHROMYCIN</b>	38	<i>clobetasol propionate 0.05% topical ointment</i>	64	<i>clozapine 200mg odt</i>	50
<b>50MG/ML ORAL SUSP</b>		<i>clobetasol propionate 0.05% topical soln</i>	64	<i>clozapine 200mg tab</i>	50
<i>clindamycin 1% pad</i>	61	<i>clomipramine 25mg cap</i>	27	<i>clozapine 25mg odt</i>	50
<i>clindamycin 1% topical gel (once-daily)</i>	61	<i>clomipramine 50mg cap</i>	27	<i>clozapine 25mg tab</i>	51
<i>clindamycin 1% topical gel (twice-daily)</i>	61	<i>clomipramine 75mg cap</i>	27	<i>clozapine 50mg tab</i>	51
<i>clindamycin 1% topical lotion</i>	61	<i>clonazepam 0.125mg odt</i>	20	<b>COARTEM 20-120MG TAB</b>	39
<i>clindamycin 1% topical soln</i>	61	<i>clonazepam 0.25mg odt</i>	20	<b>COBENFY 20-100MG CAP</b>	49
<i>clindamycin 150mg cap</i>	38	<i>clonazepam 0.5mg odt</i>	21	<b>CAP</b>	
<i>clindamycin 2% vaginal cream</i>	92	<i>clonazepam 0.5mg tab</i>	21	<b>COBENFY 20-50MG CAP</b>	49
<i>clindamycin 300mg cap</i>	38	<i>clonazepam 1mg odt</i>	21	<b>COBENFY 30-125MG CAP</b>	49
<i>clindamycin 300mg/2ml inj</i>	38	<i>clonazepam 1mg tab</i>	21	<b>COBENFY CAP 28-DAY STARTER KIT PACK (56)</b>	49
<i>clindamycin 300mg/50ml inj</i>	38	<i>clonazepam 2mg odt</i>	21		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

<i>codeine</i>	15	<i>constulose 10gm/15ml</i>	78	CYCLOPHOSPHAMIDE	40
<i>phosphate/acetaminophe</i>		<i>oral soln</i>		25MG TAB	
<i>n 15-300mg tab</i>		COPIKTRA 15MG CAP	42	<i>cyclophosphamide 50mg</i>	40
CODEINE	15	COPIKTRA 25MG CAP	42	<i>cap</i>	
PHOSPHATE/ACETAMIN		COSENTYX 150MG/ML	63	CYCLOPHOSPHAMIDE	40
OPHEN 2.4-24MG/ML		AUTO-INJECTOR		50MG TAB	
ORAL SOLN		COSENTYX 150MG/ML	63	<i>cyclosporine 0.05% ophth</i>	84
<i>codeine</i>	15	SYRINGE		<i>susp</i>	
<i>phosphate/acetaminophe</i>		COSENTYX	63	<i>cyclosporine 100mg cap</i>	79
<i>n 30-300mg tab</i>		75MG/0.5ML SYRINGE		<i>cyclosporine 25mg cap</i>	79
<i>codeine</i>	15	COSENTYX UNOREADY	63	<i>cyclosporine modified</i>	79
<i>phosphate/acetaminophe</i>		300MG/2ML		<i>100mg cap</i>	
<i>n 60-300mg tab</i>		AUTO-INJECTOR		<i>cyclosporine modified</i>	79
<i>colchicine 0.6mg tab</i>	74	COTELLIC 20MG TAB	42	<i>100mg/ml oral soln</i>	
<i>colchicine/probenecid</i>	74	CREON	72	<i>cyclosporine modified</i>	79
<i>0.5-500mg tab</i>		120000-24000-76000UNI		<i>25mg cap</i>	
<i>colesevelam 625mg tab</i>	33	T DR CAP		<i>cyclosporine modified</i>	80
<i>colestipol 1gm tab</i>	33	CREON	72	<i>50mg cap</i>	
<i>colestipol 5000mg</i>	33	15000-3000-9500UNIT		<i>cyproheptadine 0.4mg/ml</i>	88
<i>granules for oral susp</i>		DR CAP		<i>oral soln</i>	
<i>colistin 75mg/ml inj</i>	38	CREON	72	<i>cyproheptadine 4mg tab</i>	88
COMBIVENT	19	180000-36000-114000U		<i>cyred tab 28-day pack</i>	68
20-100MCG/ACT		NIT DR CAP		CYSTADANE 1GM	67
INHALER		CREON	72	POWDER FOR ORAL	
COMETRIQ CAP 100MG	42	30000-6000-19000UNIT		SOLN	
DAILY DOSE PACK (56)		DR CAP		CYSTADROPS 0.37%	84
COMETRIQ CAP 140MG	42	CREON	72	OPHTH SOLN	
DAILY DOSE PACK (112)		60000-12000-38000UNIT		CYSTAGON 150MG CAP	73
COMETRIQ CAP 60MG	42	DR CAP		CYSTAGON 50MG CAP	73
DAILY DOSE PACK (84)		CRESEMBA 186MG CAP	32	<hr/>	
<i>compro 25mg rectal supp</i>	51	CRESEMBA 74.5MG CAP	32	<b>D</b>	
CONEXXENCE	66	<i>cromolyn sodium 10mg/ml</i>	18	<i>dabigatran etexilate</i>	19
60MG/ML SYRINGE		<i>inh soln</i>		<i>110mg cap</i>	
<i>conjugated estrogens</i>	71	<i>cromolyn sodium 20mg/ml</i>	72	<i>dabigatran etexilate</i>	19
<i>0.3mg tab</i>		<i>oral soln</i>		<i>150mg cap</i>	
<i>conjugated estrogens</i>	71	CROMOLYN SODIUM	84	<i>dabigatran etexilate</i>	19
<i>0.45mg tab</i>		4% OPTH SOLN		<i>75mg cap</i>	
<i>conjugated estrogens</i>	71	<i>cryselle tab 28-day pack</i>	68	<i>dalfampridine 10mg er</i>	87
<i>0.625mg tab</i>		<i>cyclobenzaprine 10mg</i>	53	<i>tab</i>	
<i>conjugated estrogens</i>	71	<i>tab</i>		<i>danazol 100mg cap</i>	15
<i>0.9mg tab</i>		<i>cyclobenzaprine 5mg tab</i>	53	<i>danazol 200mg cap</i>	15
<i>conjugated estrogens</i>	71	<i>cyclophosphamide 25mg</i>	40	<i>danazol 50mg cap</i>	15
<i>1.25mg tab</i>		<i>cap</i>		<i>dantrolene sodium 100mg</i>	53
				<i>cap</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

<i>dantrolene sodium 25mg cap</i>	53	<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	67	<i>dexmethylphenidate 10mg tab</i>	11
<i>dantrolene sodium 50mg cap</i>	53	<i>desmopressin acetate 0.1mg tab</i>	67	<i>dexmethylphenidate 2.5mg tab</i>	11
DAPAGLIFLOZIN 10MG TAB	30	<i>desmopressin acetate 0.2mg tab</i>	67	<i>dexmethylphenidate 5mg tab</i>	11
DAPAGLIFLOZIN 5MG TAB	30	<i>desonide 0.05% topical cream</i>	64	<i>dextroamphetamine sulfate 10mg tab</i>	11
<i>dapsone 100mg tab</i>	39	<i>desonide 0.05% topical ointment</i>	64	<i>dextroamphetamine sulfate 5mg tab</i>	11
<i>dapsone 25mg tab</i>	39	<i>desoximetasone 0.25% topical cream</i>	64	DEXTROSE 10% INJ	81
DAPTACEL INJ	76	<i>desoximetasone 0.25% topical ointment</i>	64	DIACOMIT 250MG CAP	21
<i>daptomycin 500mg inj</i>	38	<i>desvenlafaxine succinate 100mg er tab</i>	26	DIACOMIT 250MG POWDER FOR ORAL SUSP	21
<i>darunavir 600mg tab</i>	53	<i>desvenlafaxine succinate 25mg er tab</i>	26	DIACOMIT 500MG CAP	21
<i>darunavir 800mg tab</i>	53	<i>desvenlafaxine succinate 50mg er tab</i>	26	DIACOMIT 500MG POWDER FOR ORAL SUSP	21
<i>dasatinib 100mg tab</i>	42	DEXAMETHASONE 0.1MG/ML ORAL SOLN	75	<i>diazepam 10mg tab</i>	17
<i>dasatinib 140mg tab</i>	42	<i>dexamethasone 0.5mg tab</i>	75	<i>diazepam 10mg/2ml rectal gel</i>	21
<i>dasatinib 20mg tab</i>	42	<i>dexamethasone 0.75mg tab</i>	75	<i>diazepam 1mg/ml oral soln</i>	17
<i>dasatinib 50mg tab</i>	42	<i>dexamethasone 1.5mg tab</i>	75	DIAZEPAM 2.5MG/0.5ML RECTAL GEL	21
<i>dasatinib 70mg tab</i>	43	<i>dexamethasone 1mg tab</i>	75	<i>diazepam 20mg/4ml rectal gel</i>	21
<i>dasatinib 80mg tab</i>	43	<i>dexamethasone 2mg tab</i>	75	<i>diazepam 2mg tab</i>	17
DAURISMO 100MG TAB	41	<i>dexamethasone 4mg tab</i>	75	<i>diazepam 5mg tab</i>	17
DAURISMO 25MG TAB	41	<i>dexamethasone 6mg tab</i>	75	<i>diazepam 5mg/ml oral soln</i>	17
<i>deblitane 0.35mg tab 28-day pack</i>	85	DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	83	<i>diazoxide 50mg/ml oral susp</i>	28
<i>deferasirox 180mg tab</i>	79	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	83	<i>diclofenac potassium 50mg tab</i>	13
<i>deferasirox 360mg tab</i>	79	<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	83	<i>diclofenac sodium 0.1% ophth soln</i>	84
<i>deferasirox 90mg tab</i>	79	<i>dexlansoprazole 30mg dr cap</i>	92	<i>diclofenac sodium 1.5% topical soln</i>	13
DELSTRIGO 100-300-300MG TAB	53	<i>dexlansoprazole 60mg dr cap</i>	92	<i>diclofenac sodium 100mg er tab</i>	13
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	85				
DESCOVY 120-15MG TAB	53				
DESCOVY 200-25MG TAB	53				
<i>desipramine 100mg tab</i>	27				
<i>desipramine 10mg tab</i>	27				
<i>desipramine 150mg tab</i>	27				
<i>desipramine 25mg tab</i>	27				
<i>desipramine 50mg tab</i>	27				
<i>desipramine 75mg tab</i>	27				
<i>desloratadine 5mg tab</i>	88				

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# ALPHABETICAL LISTING OF DRUGS

<i>diclofenac sodium 25mg dr tab</i>	13	<i>diltiazem 420mg er (24hr) cap</i>	58	DOPTELET TAB 60MG DAILY DOSE PACK (15)	74
<i>diclofenac sodium 3% topical gel</i>	62	<i>diltiazem 60mg er (12hr) cap</i>	58	<i>dorzolamide 2% ophth soln</i>	84
<i>diclofenac sodium 50mg dr tab</i>	13	<i>diltiazem 60mg tab</i>	58	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	82
<i>diclofenac sodium 75mg dr tab</i>	13	<i>diltiazem 90mg er (12hr) cap</i>	58	<i>dotti 0.025mg/24hr twice weekly patch</i>	71
<i>dicloxacillin 250mg cap</i>	85	<i>diltiazem 90mg tab</i>	58	<i>dotti 0.0375mg/24hr twice weekly patch</i>	71
<i>dicloxacillin 500mg cap</i>	85	<i>dimethyl fumarate 120mg dr cap</i>	87	<i>dotti 0.05mg/24hr twice weekly patch</i>	71
<i>dicyclomine 10mg cap</i>	91	<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	87	<i>dotti 0.075mg/24hr twice weekly patch</i>	71
<i>dicyclomine 20mg tab</i>	91	<i>dimethyl fumarate 240mg dr cap</i>	87	<i>dotti 0.1mg/24hr twice weekly patch</i>	71
<i>dicyclomine 2mg/ml oral soln</i>	91	<i>dipyridamole 25mg tab</i>	74	DOVATO 50-300MG TAB	53
DIFICID 200MG TAB	38	<i>dipyridamole 50mg tab</i>	74	<i>doxazosin 1mg tab</i>	35
DIFICID 40MG/ML ORAL SUSP	38	<i>dipyridamole 75mg tab</i>	74	<i>doxazosin 2mg tab</i>	35
<i>diflunisal 500mg tab</i>	13	<i>disopyramide 100mg cap</i>	59	<i>doxazosin 4mg tab</i>	35
<i>difluprednate 0.05% ophth susp</i>	83	<i>disopyramide 150mg cap</i>	59	<i>doxazosin 8mg tab</i>	35
<i>digoxin 0.125mg tab</i>	59	<i>disulfiram 250mg tab</i>	86	<i>doxepin 100mg cap</i>	27
<i>digoxin 0.25mg tab</i>	59	<i>divalproex sodium 125mg dr cap</i>	24	<i>doxepin 10mg cap</i>	27
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	78	<i>divalproex sodium 125mg dr tab</i>	24	DOXEPIN 10MG/ML ORAL SOLN	27
DILANTIN 30MG ER CAP	21	<i>divalproex sodium 250mg dr tab</i>	24	<i>doxepin 150mg cap</i>	27
<i>dilt 120mg er (24hr) cap</i>	58	<i>divalproex sodium 250mg er tab</i>	48	<i>doxepin 25mg cap</i>	27
<i>dilt 180mg er (24hr) cap</i>	58	<i>divalproex sodium 500mg dr tab</i>	24	<i>doxepin 50mg cap</i>	27
<i>dilt 240mg er (24hr) cap</i>	58	<i>divalproex sodium 500mg er tab</i>	48	<i>doxepin 75mg cap</i>	27
<i>diltiazem 120mg er (12hr) cap</i>	58	<i>dofetilide 0.125mg cap</i>	59	<i>doxy 100mg inj</i>	90
<i>diltiazem 120mg er (24hr) cap</i>	58	<i>dofetilide 0.25mg cap</i>	59	<i>doxycycline hyclate 100mg cap</i>	90
<i>diltiazem 120mg tab</i>	58	<i>dofetilide 0.5mg cap</i>	59	<i>doxycycline hyclate 100mg inj</i>	90
<i>diltiazem 180mg er (24hr) cap</i>	58	<i>donepezil 10mg odt</i>	86	<i>doxycycline hyclate 100mg tab</i>	90
<i>diltiazem 240mg er (24hr) cap</i>	58	<i>donepezil 10mg tab</i>	86	<i>doxycycline hyclate 20mg tab</i>	90
<i>diltiazem 300mg er (24hr) cap</i>	58	<i>donepezil 23mg tab</i>	86	<i>doxycycline hyclate 50mg cap</i>	90
<i>diltiazem 30mg tab</i>	58	<i>donepezil 5mg odt</i>	86	<i>doxycycline monohydrate 100mg cap</i>	90
<i>diltiazem 360mg er (24hr) cap</i>	58	<i>donepezil 5mg tab</i>	86	<i>doxycycline monohydrate 100mg tab</i>	90
		DOPTELET 20MG TAB	74		
		DOPTELET TAB 40MG DAILY DOSE PACK (10)	74		

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# ALPHABETICAL LISTING OF DRUGS

<i>doxycycline monohydrate</i>	90	DUPIXENT	17	<i>eltrombopag 12.5mg</i>	74
<i>50mg cap</i>		200MG/1.14ML		<i>powder for oral susp</i>	
<i>doxycycline monohydrate</i>	90	AUTO-INJECTOR		<i>eltrombopag 12.5mg tab</i>	74
<i>50mg tab</i>		DUPIXENT	17	<i>eltrombopag 25mg</i>	74
<i>doxycycline monohydrate</i>	90	200MG/1.14ML		<i>powder for oral susp</i>	
<i>5mg/ml oral susp</i>		SYRINGE		<i>eltrombopag 25mg tab</i>	74
<i>doxycycline monohydrate</i>	90	DUPIXENT 300MG/2ML	17	<i>eltrombopag 50mg tab</i>	74
<i>75mg tab</i>		AUTO-INJECTOR		<i>eltrombopag 75mg tab</i>	74
DRIZALMA 20MG DR	26	DUPIXENT 300MG/2ML	17	<i>eluryng</i>	68
SPRINKLE CAP		SYRINGE		<i>0.120-0.015mg/24hr</i>	
DRIZALMA 30MG DR	26	<i>dutasteride 0.5mg cap</i>	73	<i>vaginal system</i>	
SPRINKLE CAP		<b>E</b>		EMGALITY 100MG/ML	78
DRIZALMA 40MG DR	26	<i>econazole nitrate 1%</i>	62	SYRINGE	
SPRINKLE CAP		<i>topical cream</i>		EMGALITY 120MG/ML	78
DRIZALMA 60MG DR	26	EDURANT 2.5MG TAB	53	AUTO-INJECTOR	
SPRINKLE CAP		FOR ORAL SUSP		EMGALITY 120MG/ML	78
<i>dronabinol 10mg cap</i>	31	EDURANT 25MG TAB	53	SYRINGE	
<i>dronabinol 2.5mg cap</i>	31	<i>efavirenz 600mg tab</i>	53	EMSAM 12MG/24HR	25
<i>dronabinol 5mg cap</i>	32	<i>efavirenz/emtricitabine/te</i>	53	PATCH	
<i>drospirenone/ethinyl</i>	68	<i>nofovir disoproxil</i>		EMSAM 6MG/24HR	25
<i>estradiol/inert</i>		<i>fumarate 600-200-300mg</i>		PATCH	
<i>ingredients 3-0.02-1mg</i>		<i>tab</i>		EMSAM 9MG/24HR	25
<i>tab 28-day pack</i>		EFAVIRENZ/LAMIVUDIN	54	PATCH	
<i>drospirenone/ethinyl</i>	68	E/TENOFOVIR		<i>emtricitabine 200mg cap</i>	54
<i>estradiol/inert</i>		DISOPROXIL		<i>emtricitabine/rilpivirine/t</i>	54
<i>ingredients 3-0.03-1mg</i>		FUMARATE		<i>enofovir disoproxil</i>	
<i>tab 28-day pack</i>		400-300-300MG TAB		<i>fumarate 200-25-300mg</i>	
DROXIA 200MG CAP	46	<i>efavirenz/lamivudine/teno</i>	54	<i>tab</i>	
DROXIA 300MG CAP	46	<i>fovir disoproxil fumarate</i>		<i>emtricitabine/tenofovir</i>	54
DROXIA 400MG CAP	46	<i>600-300-300mg tab</i>		<i>disoproxil fumarate</i>	
<i>droxidopa 100mg cap</i>	59	<i>electrolyte-148 inj</i>	81	<i>100-150mg tab</i>	
<i>droxidopa 200mg cap</i>	59	ELIGARD 22.5MG	41	<i>emtricitabine/tenofovir</i>	54
<i>droxidopa 300mg cap</i>	59	SYRINGE		<i>disoproxil fumarate</i>	
DULERA 100-5MCG	19	ELIGARD 30MG	41	<i>133-200mg tab</i>	
INHALER		SYRINGE		<i>emtricitabine/tenofovir</i>	54
DULERA 200-5MCG	19	ELIGARD 45MG	41	<i>disoproxil fumarate</i>	
INHALER		SYRINGE		<i>167-250mg tab</i>	
DULERA 50-5MCG	19	ELIGARD 7.5MG	41	<i>emtricitabine/tenofovir</i>	54
INHALER		SYRINGE		<i>disoproxil fumarate</i>	
<i>duloxetine 20mg dr cap</i>	26	ELIQUIS 2.5MG TAB	19	<i>200-300mg tab</i>	
<i>duloxetine 30mg dr cap</i>	26	ELIQUIS 5MG 30-DAY	19	EMTRIVA 10MG/ML	54
<i>duloxetine 60mg dr cap</i>	26	STARTER PACK (74)		ORAL SOLN	
		ELIQUIS 5MG TAB	19	<i>enalapril maleate 10mg</i>	34
				<i>tab</i>	

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# ALPHABETICAL LISTING OF DRUGS

<i>enalapril maleate 2.5mg tab</i>	34	<i>enoxaparin sodium 60mg/0.6ml syringe</i>	20	<i>erythromycin 2% topical soln</i>	61
<i>enalapril maleate 20mg tab</i>	34	<i>enoxaparin sodium 80mg/0.8ml syringe</i>	20	<i>erythromycin 250mg dr tab</i>	38
<i>enalapril maleate 5mg tab</i>	34	ENSACOVE 100MG CAP	43	<i>erythromycin 250mg tab</i>	38
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	36	ENSACOVE 25MG CAP	43	<i>erythromycin 333mg dr tab</i>	38
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	36	<i>enskyce tab 28-day pack</i>	68	<i>erythromycin 500mg dr tab</i>	38
ENBREL 25MG/0.5ML INJ	13	<i>entacapone 200mg tab</i>	47	<i>erythromycin 500mg tab</i>	38
ENBREL 25MG/0.5ML SYRINGE	13	<i>entecavir 0.5mg tab</i>	55	<i>escitalopram 10mg tab</i>	25
ENBREL 50MG/ML AUTO-INJECTOR	13	<i>entecavir 1mg tab</i>	55	<i>escitalopram 1mg/ml oral soln</i>	25
ENBREL 50MG/ML CARTRIDGE	13	ENTRESTO 15-16MG ORAL PELLETT	59	<i>escitalopram 20mg tab</i>	25
ENBREL 50MG/ML SYRINGE	13	ENTRESTO 6-6MG ORAL PELLETT	59	<i>escitalopram 5mg tab</i>	25
ENBUMYST 0.5MG/0.1ML NASAL SPRAY	65	<i>enulose 10gm/15ml oral soln</i>	72	<i>eslicarbazepine acetate 200mg tab</i>	21
ENGERIX-B 10MCG/0.5ML SYRINGE	76	ENVARUSUS XR 0.75MG TAB	80	<i>eslicarbazepine acetate 400mg tab</i>	21
ENGERIX-B 20MCG/ML INJ	76	ENVARUSUS XR 1MG TAE	80	<i>eslicarbazepine acetate 600mg tab</i>	22
ENGERIX-B 20MCG/ML SYRINGE	76	ENVARUSUS XR 4MG TAE	80	<i>eslicarbazepine acetate 800mg tab</i>	22
<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	68	EPIDIOLEX 100MG/ML ORAL SOLN	21	<i>esomeprazole 20mg dr cap</i>	92
<i>enoxaparin sodium 100mg/1ml syringe</i>	19	<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	19	<i>esomeprazole 40mg dr cap</i>	92
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	19	<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	19	<i>estarylla tab 28-day pack</i>	68
<i>enoxaparin sodium 150mg/1ml syringe</i>	19	<i>eplerenone 25mg tab</i>	37	<i>estradiol 0.0025mg/hr weekly patch</i>	71
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	20	<i>eplerenone 50mg tab</i>	37	<i>estradiol 0.01% vaginal cream</i>	92
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	20	ERIVEDGE 150MG CAP	41	<i>estradiol 0.01mg vaginal insert</i>	92
		ERLEADA 240MG TAB	41	<i>estradiol 0.01mg/24hr twice weekly patch</i>	71
		ERLEADA 60MG TAB	41	<i>estradiol 0.01mg/24hr weekly patch</i>	71
		<i>erlotinib 100mg tab</i>	40	<i>estradiol 0.025mg/24hr twice weekly patch</i>	71
		<i>erlotinib 150mg tab</i>	40	<i>estradiol 0.025mg/24hr weekly patch</i>	71
		<i>erlotinib 25mg tab</i>	40	<i>estradiol 0.0375mg/24hr twice weekly patch</i>	71
		<i>errin 0.35mg tab 28-day pack</i>	85		
		<i>ertapenem 1gm inj</i>	38		
		ERY 2% PAD	61		
		<i>erythromycin 0.5% ophthalm ointment</i>	83		
		ERYTHROMYCIN 2% TOPICAL GEL	61		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

<i>estradiol 0.0375mg/24hr weekly patch</i>	71	<i>ethinyl estradiol/inert ingredients/levonorgestre l 0.03-1-0.15mg tab 28-day pack</i>	69	<i>everolimus 0.25mg tab</i>	80
<i>estradiol 0.05mg/24hr twice weekly patch</i>	71	<i>ethinyl estradiol/inert ingredients/levonorgestre l 0.03-1-0.15mg tab 91-day pack</i>	69	<i>everolimus 0.5mg tab</i>	80
<i>estradiol 0.05mg/24hr weekly patch</i>	71	<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack</i>	69	<i>everolimus 0.75mg tab</i>	80
<i>estradiol 0.075mg/24hr twice weekly patch</i>	71	<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	69	<i>everolimus 10mg tab</i>	43
<i>estradiol 0.075mg/24hr weekly patch</i>	71	<i>ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack</i>	69	<i>everolimus 1mg tab</i>	80
<i>estradiol 0.5mg tab</i>	71	<i>ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack</i>	69	<i>everolimus 2.5mg tab</i>	43
<i>estradiol 1mg tab</i>	71	<i>ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25 mg-mcg tab 28-day pack</i>	69	<i>everolimus 2mg tab for oral susp</i>	43
<i>estradiol 2mg tab</i>	71	<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35 mg-mcg tab 28-day pack</i>	69	<i>everolimus 3mg tab for oral susp</i>	43
<i>estradiol valerate 10mg/ml inj</i>	71	<i>ethosuximide 250mg cap</i>	24	<i>everolimus 5mg tab</i>	43
<i>estradiol valerate 20mg/ml inj</i>	71	<i>ethosuximide 50mg/ml oral soln</i>	24	<i>everolimus 5mg tab for oral susp</i>	43
<i>estradiol valerate 40mg/ml inj</i>	71	<i>etodolac 200mg cap</i>	13	<i>everolimus 7.5mg tab</i>	43
<i>estradiol/norethindrone acetate 0.5-0.1mg 28-day pack</i>	68	<i>etodolac 300mg cap</i>	13	<i>EVOTAZ 300-150MG TAB</i>	54
<i>estradiol/norethindrone acetate 1-0.5mg 28-day pack</i>	68	<i>etodolac 400mg tab</i>	13	<i>EVRYSDI 0.75MG/ML ORAL SOLN</i>	60
<i>eszopiclone 1mg tab</i>	76	<i>etodolac 500mg tab</i>	13	<i>EVRYSDI 5MG TAB</i>	60
<i>eszopiclone 2mg tab</i>	76	<i>etravirine 100mg tab</i>	54	<i>exemestane 25mg tab</i>	41
<i>eszopiclone 3mg tab</i>	76	<i>etravirine 200mg tab</i>	54	<i>EXXUA 18.2MG ER TAB</i>	25
<i>ethambutol 100mg tab</i>	39	<i>EUCRISA 2% TOPICAL OINTMENT</i>	65	<i>EXXUA 36.3MG ER TAB</i>	25
<i>ethambutol 400mg tab</i>	39	<i>EULEXIN 125MG CAP</i>	41	<i>EXXUA 54.5MG ER TAB</i>	25
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.02-0.1mg tab 91-day pack</i>	69			<i>EXXUA 72.6MG ER TAB</i>	25
<i>ethinyl estradiol/inert ingredients/levonorgestre l 0.02-1-0.1mg tab 28-day pack</i>	69			<i>ezetimibe 10mg tab</i>	32
				<i>ezetimibe/simvastatin 10-10mg tab</i>	32
				<i>ezetimibe/simvastatin 10-20mg tab</i>	32
				<i>ezetimibe/simvastatin 10-40mg tab</i>	32
				<i>ezetimibe/simvastatin 10-80mg tab</i>	32
				<b>F</b>	
				<i>falmina tab 28-day pack</i>	69
				<i>famciclovir 125mg tab</i>	56
				<i>famciclovir 250mg tab</i>	56
				<i>famciclovir 500mg tab</i>	56
				<i>famotidine 20mg tab</i>	92
				<i>famotidine 40mg tab</i>	92
				<i>FANAPT 10MG TAB</i>	50
				<i>FANAPT 12MG TAB</i>	50
				<i>FANAPT 1MG TAB</i>	50
				<i>FANAPT 2MG TAB</i>	50

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# ALPHABETICAL LISTING OF DRUGS

FANAPT 4MG TAB	50	<i>fesoterodine fumarate</i>	73	<i>flunisolide 25%</i>	80
FANAPT 6MG TAB	50	<i>8mg er tab</i>		<i>(25mcg/act) nasal inhaler</i>	
FANAPT 8MG TAB	50	FETZIMA 120MG ER	26	<i>fluocinolone acetone</i>	84
FANAPT TAB TITRATION	50	CAP		<i>0.01% otic soln</i>	
PACK (8)		FETZIMA 20MG ER CAP	26	<i>fluocinolone acetone</i>	64
FARXIGA 10MG TAB	30	FETZIMA 40MG ER CAP	26	<i>0.01% topical cream</i>	
FARXIGA 5MG TAB	30	FETZIMA 80MG ER CAP	26	<i>fluocinolone acetone</i>	64
FASENRA 10MG/0.5ML	17	FETZIMA ER CAP	26	<i>0.01% topical oil</i>	
SYRINGE		TITRATION PACK (28)		<i>fluocinolone acetone</i>	64
FASENRA 30MG/ML	17	FIASP 100UNIT/ML	29	<i>0.01% topical soln</i>	
AUTO-INJECTOR		CARTRIDGE		<i>fluocinolone acetone</i>	64
FASENRA 30MG/ML	17	FIASP 100UNIT/ML INJ	29	<i>0.025% topical cream</i>	
SYRINGE		FIASP 100UNIT/ML PEN	29	<i>fluocinolone acetone</i>	64
<i>febuxostat 40mg tab</i>	74	INJ (3ML)		<i>0.025% topical ointment</i>	
<i>febuxostat 80mg tab</i>	74	<i>fidaxomicin 200mg tab</i>	38	<i>fluocinonide 0.05%</i>	64
<i>feirza 1.5/30 28-day pack</i>	69	<i>finasteride 5mg tab</i>	73	<i>topical cream</i>	
<i>feirza 1/20 28-day pack</i>	69	<i>fingolimod 0.5mg cap</i>	87	<i>fluocinonide 0.05%</i>	64
<i>felbamate 120mg/ml oral</i>	23	FINTEPLA 2.2MG/ML	22	<i>topical e cream</i>	
<i>susp</i>		ORAL SOLN		<i>fluocinonide 0.05%</i>	64
<i>felbamate 400mg tab</i>	23	FIRMAGON 120MG INJ	41	<i>topical ointment</i>	
<i>felbamate 600mg tab</i>	23	FIRMAGON 80MG INJ	41	<i>fluocinonide 0.05%</i>	64
<i>felodipine 10mg er tab</i>	58	<i>flecainide acetate 100mg</i>	59	<i>topical soln</i>	
<i>felodipine 2.5mg er tab</i>	58	<i>tab</i>		<i>fluocinonide 0.1% topical</i>	64
<i>felodipine 5mg er tab</i>	58	<i>flecainide acetate 150mg</i>	59	<i>cream</i>	
<i>fenofibrate 134mg cap</i>	33	<i>tab</i>		<i>fluorometholone 0.1%</i>	83
<i>fenofibrate 145mg tab</i>	33	<i>flecainide acetate 50mg</i>	59	<i>ophth susp</i>	
<i>fenofibrate 160mg tab</i>	33	<i>tab</i>		FLUOROURACIL 2%	62
<i>fenofibrate 200mg cap</i>	33	<i>fluconazole 100mg tab</i>	32	TOPICAL SOLN	
<i>fenofibrate 43mg cap</i>	33	<i>fluconazole 10mg/ml oral</i>	32	<i>fluorouracil 5% topical</i>	62
<i>fenofibrate 48mg tab</i>	33	<i>susp</i>		<i>cream</i>	
<i>fenofibrate 54mg tab</i>	33	<i>fluconazole 150mg tab</i>	32	<i>fluorouracil 5% topical</i>	62
<i>fenofibrate 67mg cap</i>	33	<i>fluconazole 200mg tab</i>	32	<i>soln</i>	
<i>fenofibric acid 135mg dr</i>	33	<i>fluconazole 200mg/100ml</i>	32	<i>fluoxetine 10mg cap</i>	25
<i>cap</i>		<i>inj</i>		<i>fluoxetine 20mg cap</i>	25
<i>fenofibric acid 45mg dr</i>	33	<i>fluconazole 400mg/200ml</i>	32	<i>fluoxetine 40mg cap</i>	25
<i>cap</i>		<i>inj</i>		<i>fluoxetine 4mg/ml oral</i>	25
<i>fentanyl 100mcg/hr patch</i>	14	<i>fluconazole 40mg/ml oral</i>	32	<i>soln</i>	
<i>fentanyl 12mcg/hr patch</i>	14	<i>susp</i>		<i>fluoxetine 60mg tab</i>	25
<i>fentanyl 25mcg/hr patch</i>	14	<i>fluconazole 50mg tab</i>	32	FLUPHENAZINE	51
<i>fentanyl 50mcg/hr patch</i>	14	<i>flucytosine 250mg cap</i>	32	0.5MG/ML ORAL SOLN	
<i>fentanyl 75mcg/hr patch</i>	14	<i>flucytosine 500mg cap</i>	32	<i>fluphenazine 10mg tab</i>	51
<i>fesoterodine fumarate</i>	73	<i>fludrocortisone acetate</i>	75	<i>fluphenazine 1mg tab</i>	51
<i>4mg er tab</i>		<i>0.1mg tab</i>		<i>fluphenazine 2.5mg tab</i>	51

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# ALPHABETICAL LISTING OF DRUGS

FLUPHENAZINE	52	<i>fosamprenavir 700mg tab</i>	54	<i>galantamine 8mg tab</i>	86
2.5MG/ML INJ		<i>fosfomycin 3gm powder</i>	38	<i>galantamine</i>	86
<i>fluphenazine 5mg tab</i>	52	<i>for oral soln</i>		<i>hydrobromide 16mg er cap</i>	
FLUPHENAZINE	52	<i>fosinopril sodium 10mg tab</i>	34	<i>galantamine</i>	86
5MG/ML ORAL SOLN		<i>fosinopril sodium 20mg tab</i>	34	<i>hydrobromide 24mg er cap</i>	
<i>fluphenazine decanoate 25mg/ml inj</i>	52	<i>fosinopril sodium 40mg tab</i>	34	GALANTAMINE	86
FLURBIPROFEN 100MG TAB	13	<i>fosinopril</i>	36	HYDROBROMIDE	
FLURBIPROFEN	84	<i>sodium/hydrochlorothiazide 10-12.5mg tab</i>		4MG/ML ORAL SOLN	
SODIUM 0.03% OPHTH SOLN		<i>fosinopril</i>	36	<i>galantamine</i>	86
<i>fluticasone propionate 0.005% topical ointment</i>	64	<i>sodium/hydrochlorothiazide 20-12.5mg tab</i>		<i>hydrobromide 8mg er cap</i>	
<i>fluticasone propionate 0.05% topical cream</i>	64	FOTIVDA 0.89MG CAP	43	<i>gallifrey 5mg tab</i>	85
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	80	FOTIVDA 1.34MG CAP	43	GAMMAGARD 10GM INJ	76
<i>fluticasone propionate/salmeterol 100-50mcg/act powder inhaler</i>	19	FRUZAQLA 1MG CAP	40	GAMMAGARD	76
<i>fluticasone propionate/salmeterol 250-50mcg/act powder inhaler</i>	19	FRUZAQLA 5MG CAP	40	2.5GM/25ML INJ	
<i>fluticasone propionate/salmeterol 500-50mcg/act powder inhaler</i>	19	FULPHILA 6MG/0.6ML SYRINGE	74	GAMMAGARD 5GM INJ	76
<i>fluvoxamine maleate 100mg tab</i>	25	FUROSCIX 80MG/10ML CARTRIDGE	65	GAMUNEX 1GM/10ML INJ	76
<i>fluvoxamine maleate 25mg tab</i>	25	<i>furosemide 10mg/ml inj</i>	65	GARDASIL 9 INJ	76
<i>fluvoxamine maleate 50mg tab</i>	25	FUROSEMIDE 10MG/ML ORAL SOLN	66	GARDASIL 9 SYRINGE	76
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	20	<i>furosemide 20mg tab</i>	66	GAUZE PAD (2 X 2)	78
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	20	<i>furosemide 40mg tab</i>	66	GAVILYTE-C POWDER	78
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	20	<i>furosemide 80mg tab</i>	66	FOR ORAL SOLN	
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	20	FUROSEMIDE 8MG/ML ORAL SOLN	66	<i>gavilyte-g powder for oral soln</i>	78
		<i>fyavolv 0.0025-0.5mg tab</i>	69	<i>gavilyte-n powder for oral soln</i>	78
		<i>fyavolv 0.005-1mg tab</i>	69	GAVRETO 100MG CAP	43
		<b>G</b>		<i>gefitinib 250mg tab</i>	40
		<i>gabapentin 100mg cap</i>	22	<i>gemfibrozil 600mg tab</i>	33
		<i>gabapentin 300mg cap</i>	22	GEMTESA 75MG TAB	73
		<i>gabapentin 400mg cap</i>	22	<i>generlac 10gm/15ml oral soln</i>	72
		<i>gabapentin 50mg/ml oral soln</i>	22	<i>gentamicin 0.1% topical cream</i>	62
		<i>gabapentin 600mg tab (Neurontin equiv)</i>	22	<i>gentamicin 0.1% topical ointment</i>	62
		<i>gabapentin 800mg tab</i>	22	<i>gentamicin 0.3% ophth soln</i>	83
		<i>galantamine 12mg tab</i>	86	GENTAMICIN 0.8MG/ML INJ	12
		<i>galantamine 4mg tab</i>	86		

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# ALPHABETICAL LISTING OF DRUGS

GENTAMICIN 1.2MG/ML INJ	12	<i>glucose 50mg/ml/potassium chloride</i>	81	<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	81
GENTAMICIN 1.6MG/ML INJ	12	<i>chloride 0.01meq/ml/sodium chloride 4.5mg/ml inj</i>		GLUCOSE/SODIUM CHLORIDE	81
GENTAMICIN 1MG/ML INJ	12	<i>glucose 50mg/ml/potassium chloride 0.02meq/ml inj</i>	81	25MG/ML-4.5MG/ML INJ	
<i>gentamicin 40mg/ml inj</i>	12	GLUCOSE	81	<i>glutamine 5000mg powder for oral soln</i>	67
GENVOYA	54	50MG/ML/POTASSIUM CHLORIDE		<i>glyburide 1.25mg tab</i>	31
150-150-200-10MG TAB		0.02MEQ/ML/SODIUM CHLORIDE 2.25MG/ML INJ		<i>glyburide 2.5mg tab</i>	31
GILOTRIF 20MG TAB	40	<i>glucose 50mg/ml/potassium chloride</i>	81	<i>glyburide 5mg tab</i>	31
GILOTRIF 30MG TAB	40	<i>0.02meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>glyburide/metformin 1.25-250mg tab</i>	27
GILOTRIF 40MG TAB	40	<i>glucose 50mg/ml/potassium chloride</i>	81	<i>glyburide/metformin 2.5-500mg tab</i>	27
<i>glatiramer acetate 20mg/ml syringe</i>	87	<i>0.02meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>glyburide/metformin 5-500mg tab</i>	27
<i>glatiramer acetate 40mg/ml syringe</i>	87	<i>glucose 50mg/ml/potassium chloride</i>	81	<i>glycopyrrolate 1mg tab</i>	91
<i>glatopa 20mg/ml syringe</i>	87	<i>0.02meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>glycopyrrolate 2mg tab</i>	91
<i>glatopa 40mg/ml syringe</i>	87	<i>glucose 50mg/ml/potassium chloride</i>	81	GLYXAMBI 10-5MG TAB	27
<i>glimepiride 1mg tab</i>	30	<i>0.02meq/ml/sodium chloride 9mg/ml inj</i>		GLYXAMBI 25-5MG TAB	27
<i>glimepiride 2mg tab</i>	30	<i>glucose 50mg/ml/potassium chloride</i>	81	GOMEKLI 1MG CAP	43
<i>glimepiride 4mg tab</i>	30	<i>0.02meq/ml/sodium chloride 9mg/ml inj</i>		GOMEKLI 1MG TAB	43
<i>glipizide 10mg er tab</i>	30	<i>glucose 50mg/ml/potassium chloride</i>	81	FOR ORAL SUSP	
<i>glipizide 10mg tab</i>	31	<i>0.03meq/ml/sodium chloride 4.5mg/ml inj</i>		GOMEKLI 2MG CAP	43
<i>glipizide 2.5mg er tab</i>	31	<i>glucose 50mg/ml/potassium chloride</i>	81	<i>granisetron 1mg tab</i>	31
<i>glipizide 5mg er tab</i>	31	<i>0.04meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>griseofulvin 125mg tab</i>	32
<i>glipizide 5mg tab</i>	31	<i>glucose 50mg/ml/potassium chloride</i>	81	<i>griseofulvin 250mg tab</i>	32
<i>glipizide/metformin 2.5-250mg tab</i>	27	<i>0.04meq/ml/sodium chloride 9mg/ml inj</i>		<i>griseofulvin 25mg/ml oral susp</i>	32
<i>glipizide/metformin 2.5-500mg tab</i>	27	<i>glucose 50mg/ml/potassium chloride</i>	81	<i>griseofulvin 500mg tab</i>	32
<i>glipizide/metformin 5-500mg tab</i>	27	<i>0.04meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>guanfacine 1mg er tab</i>	11
GLUCOSE	81	<i>glucose 50mg/ml/potassium chloride</i>	81	<i>guanfacine 1mg tab</i>	35
100MG/ML/SODIUM CHLORIDE 2MG/ML INJ		<i>0.04meq/ml/sodium chloride 9mg/ml inj</i>		<i>guanfacine 2mg er tab</i>	11
GLUCOSE	81	GLUCOSE	81	<i>guanfacine 2mg tab</i>	35
100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ		50MG/ML/SODIUM CHLORIDE 2MG/ML INJ		<i>guanfacine 3mg er tab</i>	11
<i>glucose 50mg/ml inj</i>	81	<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	81	<i>guanfacine 4mg er tab</i>	11
				GVOKE 0.5MG/0.1ML AUTO-INJECTOR	28
				GVOKE 1MG/0.2ML AUTO-INJECTOR	28
				GVOKE 1MG/0.2ML INJ	28
				GVOKE 1MG/0.2ML SYRINGE	28

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# ALPHABETICAL LISTING OF DRUGS

<b>H</b>					
HADLIMA 40MG/0.4ML	13	<i>heparin sodium porcine</i>	20	<i>hydralazine 25mg tab</i>	37
AUTO-INJECTOR		<i>20000unit/ml inj</i>		<i>hydralazine 50mg tab</i>	37
HADLIMA 40MG/0.4ML	13	<i>heparin sodium porcine</i>	20	<i>hydrochlorothiazide</i>	66
SYRINGE		<i>5000unit/ml inj</i>		<i>12.5mg cap</i>	
HADLIMA 40MG/0.8ML	13	HEPLISAV-B	76	<i>hydrochlorothiazide</i>	66
AUTO-INJECTOR		20MCG/0.5ML SYRINGE		<i>12.5mg tab</i>	
HADLIMA 40MG/0.8ML	13	HERNEXEOS 60MG TAB	46	<i>hydrochlorothiazide</i>	66
SYRINGE		HIBERIX 10MCG INJ	76	<i>25mg tab</i>	
HAEGARDA 2000UNIT	76	HUMALOG 100UNIT/ML	29	<i>hydrochlorothiazide</i>	66
INJ		CARTRIDGE		<i>50mg tab</i>	
HAEGARDA 3000UNIT	76	HUMALOG 100UNIT/ML	29	<i>hydrochlorothiazide/irbes</i>	36
INJ		KWIKPEN (3ML)		<i>artan 12.5-150mg tab</i>	
<i>halobetasol propionate</i>	64	HUMALOG 200UNIT/ML	29	<i>hydrochlorothiazide/irbes</i>	36
<i>0.05% topical cream</i>		KWIKPEN (3ML)		<i>artan 12.5-300mg tab</i>	
<i>halobetasol propionate</i>	64	HUMALOG JUNIOR	29	<i>hydrochlorothiazide/lisin</i>	36
<i>0.05% topical ointment</i>		100UNIT/ML PEN INJ		<i>opril 12.5-10mg tab</i>	
<i>haloperidol 0.5mg tab</i>	49	(3ML)		<i>hydrochlorothiazide/lisin</i>	36
<i>haloperidol 10mg tab</i>	49	HUMALOG MIX (50/50)	29	<i>opril 12.5-20mg tab</i>	
<i>haloperidol 1mg tab</i>	49	100UNIT/ML PEN INJ		<i>hydrochlorothiazide/lisin</i>	36
<i>haloperidol 20mg tab</i>	49	(3ML)		<i>opril 25-20mg tab</i>	
<i>haloperidol 2mg tab</i>	49	HUMALOG MIX (75/25)	29	<i>hydrochlorothiazide/losar</i>	37
<i>haloperidol 2mg/ml oral</i>	49	100UNIT/ML INJ		<i>tan potassium</i>	
<i>soln</i>		HUMALOG MIX (75/25)	29	<i>12.5-100mg tab</i>	
<i>haloperidol 5mg tab</i>	49	100UNIT/ML KWIKPEN		<i>hydrochlorothiazide/losar</i>	37
<i>haloperidol 5mg/ml inj</i>	49	(3ML)		<i>tan potassium 12.5-50mg</i>	
<i>haloperidol decanoate</i>	49	HUMULIN (70/30)	29	<i>tab</i>	
<i>100mg/ml (1ml) inj</i>		100UNIT/ML INJ		<i>hydrochlorothiazide/losar</i>	37
<i>haloperidol decanoate</i>	49	HUMULIN (70/30)	29	<i>tan potassium 25-100mg</i>	
<i>100mg/ml (5ml) inj</i>		100UNIT/ML PEN INJ		<i>tab</i>	
<i>haloperidol decanoate</i>	49	(3ML)		<i>hydrochlorothiazide/meto</i>	37
<i>50mg/ml (1ml) inj</i>		HUMULIN N	29	<i>prolol tartrate 25-100mg</i>	
<i>haloperidol decanoate</i>	49	100UNIT/ML INJ		<i>tab</i>	
<i>50mg/ml (5ml) inj</i>		HUMULIN N	29	<i>hydrochlorothiazide/meto</i>	37
HAVRIX 1440ELU/ML	76	100UNIT/ML PEN INJ		<i>prolol tartrate 25-50mg</i>	
SYRINGE		(3ML)		<i>tab</i>	
HAVRIX 720ELU/0.5ML	76	HUMULIN R	29	<i>hydrochlorothiazide/meto</i>	37
SYRINGE		100UNIT/ML INJ		<i>prolol tartrate 50-100mg</i>	
<i>heather 0.35mg 28-day</i>	85	HUMULIN R	29	<i>tab</i>	
<i>pack</i>		500UNIT/ML INJ		<i>hydrochlorothiazide/olme</i>	37
<i>heparin sodium porcine</i>	20	HUMULIN R	29	<i>sartan medoxomil</i>	
<i>10000unit/ml inj</i>		500UNIT/ML PEN INJ		<i>12.5-20mg tab</i>	
<i>heparin sodium porcine</i>	20	(3ML)		<i>hydrochlorothiazide/olme</i>	37
<i>1000unit/ml inj</i>		<i>hydralazine 100mg tab</i>	37	<i>sartan medoxomil</i>	
		<i>hydralazine 10mg tab</i>	37	<i>12.5-40mg tab</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

<i>hydrochlorothiazide/olmesartan medoxomil</i>	37	<i>hydrocortisone 1.67mg/ml enema</i>	16	ICLUSIG 15MG TAB	43	
<i>25-40mg tab</i>		<i>hydrocortisone 10mg tab</i>	75	ICLUSIG 30MG TAB	43	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	65	<i>hydrocortisone 2.5% topical cream</i>	16	ICLUSIG 45MG TAB	43	
<i>hydrochlorothiazide/telmisartan 12.5-40mg tab</i>	37	HYDROCORTISONE 2.5% TOPICAL LOTION	64	<i>icosapent ethyl 1000mg cap</i>	32	
<i>hydrochlorothiazide/telmisartan 12.5-80mg tab</i>	37	<i>hydrocortisone 2.5% topical ointment</i>	64	<i>icosapent ethyl 500mg cap</i>	32	
<i>hydrochlorothiazide/telmisartan 25-80mg tab</i>	37	<i>hydrocortisone 20mg tab</i>	75	IDHIFA 100MG TAB	43	
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	65	<i>hydrocortisone 5mg tab</i>	75	IDHIFA 50MG TAB	43	
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	65	<i>hydromorphone 2mg tab</i>	14	<i>imatinib 100mg tab</i>	43	
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	65	<i>hydromorphone 4mg tab</i>	14	<i>imatinib 400mg tab</i>	43	
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	37	<i>hydromorphone 8mg tab</i>	14	IMBRUVICA 140MG CAP	43	
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	37	<i>hydroxychloroquine sulfate 200mg tab</i>	39	IMBRUVICA 140MG TAB	43	
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	37	<i>hydroxyurea 500mg cap</i>	46	IMBRUVICA 280MG TAB	43	
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	37	<i>hydroxyzine 10mg tab</i>	17	IMBRUVICA 420MG TAB	43	
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	37	<i>hydroxyzine 25mg tab</i>	17	IMBRUVICA 70MG CAP	43	
<i>hydrocodone</i>	15	<i>hydroxyzine 2mg/ml oral soln</i>	17	IMBRUVICA 70MG/ML	43	
<i>bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>		<i>hydroxyzine 50mg tab</i>	17	ORAL SUSP		
<i>hydrocodone</i>	15	<i>hydroxyzine pamoate 25mg cap</i>	17	<i>imipramine 10mg tab</i>	27	
<i>bitartrate/acetaminophen 10-325mg tab</i>		<i>hydroxyzine pamoate 50mg cap</i>	17	<i>imipramine 25mg tab</i>	27	
<i>hydrocodone</i>	15	<b>I</b>			<i>imipramine 50mg tab</i>	27
<i>bitartrate/acetaminophen 5-325mg tab</i>		<i>ibandronate 150mg tab</i>	66	<i>imiquimod 5% topical cream</i>	65	
<i>hydrocodone</i>	15	IBRANCE 100MG CAP	43	IMKELDI 80MG/ML	43	
<i>bitartrate/acetaminophen 7.5-325mg tab</i>		IBRANCE 100MG TAB	43	ORAL SOLN		
<i>hydrocodone</i>	15	IBRANCE 125MG CAP	43	IMOVAX 2.5UNIT/ML INJ	77	
<i>bitartrate/acetaminophen 7.5-325mg tab</i>		IBRANCE 125MG TAB	43	IMPAVIDO 50MG CAP	38	
<i>hydrocodone</i>	15	IBRANCE 75MG CAP	43	<i>incassia 0.35mg tab</i>	85	
<i>bitartrate/acetaminophen 7.5-200mg tab</i>		IBRANCE 75MG TAB	43	<i>28-day pack</i>		
<i>hydrocortisone 1% topical cream</i>	64	IBTROZI 200MG CAP	43	INCRELEX 40MG/4ML	68	
		<i>ibu 600mg tab</i>	13	INJ		
		<i>ibu 800mg tab</i>	13	INCRUSE ELLIPTA	18	
		<i>ibuprofen 400mg tab</i>	13	62.5MCG/INH POWDER		
		<i>ibuprofen 600mg tab</i>	13	INHALER		
		<i>ibuprofen 800mg tab</i>	13	<i>indapamide 1.25mg tab</i>	66	
		<i>icatibant 30mg/3ml syringe</i>	76	<i>indapamide 2.5mg tab</i>	66	
		<i>iclevia tab 91-day pack</i>	69	<i>indomethacin 25mg cap</i>	13	
		ICLUSIG 10MG TAB	43	<i>indomethacin 50mg cap</i>	13	
				<i>indomethacin 75mg er cap</i>	13	
				INFANRIX SYRINGE	77	
				INGREZZA 40MG CAP	87	
				INGREZZA 40MG	87	
				SPRINKLE CAP		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

INGREZZA 60MG CAP	87	INSULIN SYRINGE	78	<i>isoniazid 300mg tab</i>	39
INGREZZA 60MG	87	(DISP) U-100 1/2ML		<i>isosorbide dinitrate 10mg</i>	16
SPRINKLE CAP		INSULIN SYRINGE	78	<i>tab</i>	
INGREZZA 80MG CAP	87	(DISP) U-100 1ML		<i>isosorbide dinitrate 20mg</i>	16
INGREZZA 80MG	87	INTELENCE 25MG TAB	54	<i>tab</i>	
SPRINKLE CAP		<i>introvale tab 91-day pack</i>	69	<i>isosorbide dinitrate 30mg</i>	16
INGREZZA CAP	87	INVEGA SUSTENNA	50	<i>tab</i>	
THERAPY PACK (28)		117MG/0.75ML		<i>isosorbide dinitrate 5mg</i>	16
INLURIYO 200MG TAB	41	SYRINGE		<i>tab</i>	
INLYTA 1MG TAB	40	INVEGA SUSTENNA	50	ISOSORBIDE	16
INLYTA 5MG TAB	40	156MG/ML SYRINGE		MONONITRATE 10MG	
INQOVI 35-100MG TAB	42	INVEGA SUSTENNA	50	TAB	
PACK (5)		234MG/1.5ML SYRINGE		<i>isosorbide mononitrate</i>	16
INREBIC 100MG CAP	43	INVEGA SUSTENNA	50	<i>120mg er tab</i>	
INSULIN GLARGINE	30	39MG/0.25ML SYRINGE		ISOSORBIDE	16
300UNIT/ML PEN INJ		INVEGA SUSTENNA	50	MONONITRATE 20MG	
(1.5ML)		78MG/0.5ML SYRINGE		TAB	
INSULIN GLARGINE	30	IPOL INJ	77	<i>isosorbide mononitrate</i>	16
300UNIT/ML PEN INJ		<i>ipratropium bromide</i>	18	<i>30mg er tab</i>	
(3ML)		<i>0.02% inh soln</i>		<i>isosorbide mononitrate</i>	16
INSULIN	30	<i>ipratropium bromide</i>	81	<i>60mg er tab</i>	
GLARGINE-YFGN		<i>0.03% (0.021mg/act)</i>		<i>isotretinoin 10mg cap</i>	61
100UNIT/ML INJ		<i>nasal inhaler</i>		<i>isotretinoin 20mg cap</i>	61
(BIOCON)		<i>ipratropium bromide</i>	81	<i>isotretinoin 30mg cap</i>	62
INSULIN	30	<i>0.06% (0.042mg/act)</i>		<i>isotretinoin 40mg cap</i>	62
GLARGINE-YFGN		<i>nasal inhaler</i>		ITOVEBI 3MG TAB	43
100UNIT/ML PEN INJ		<i>ipratropium/albuterol</i>	19	ITOVEBI 9MG TAB	43
(3ML) (BIOCON)		<i>0.5-2.5mg/3ml inh soln</i>		<i>itraconazole 100mg cap</i>	32
INSULIN LISPRO	30	<i>irbesartan 150mg tab</i>	35	<i>ivabradine 5mg tab</i>	59
100UNIT/ML INJ		<i>irbesartan 300mg tab</i>	35	<i>ivabradine 7.5mg tab</i>	59
INSULIN LISPRO	30	<i>irbesartan 75mg tab</i>	35	<i>ivermectin 3mg tab</i>	16
100UNIT/ML PEN INJ		ISENTRESS 100MG	54	IWILFIN 192MG TAB	47
(3ML)		CHEW TAB		IXIARO 0.006MG/0.5ML	77
INSULIN LISPRO	30	ISENTRESS 100MG	54	SYRINGE	
JUNIOR 100UNIT/ML		GRANULES FOR ORAL			
PEN INJ (3ML)		SUSP		<b>J</b>	
INSULIN LISPRO	30	ISENTRESS 25MG	54	<i>jaimiess tab 91-day pack</i>	69
PROTAMINE HUMAN		CHEW TAB		JAKAFI 10MG TAB	43
(75/25) 100UNIT/ML		ISENTRESS 400MG TAB	54	JAKAFI 15MG TAB	43
PEN INJ (3ML)		ISENTRESS 600MG TAB	54	JAKAFI 20MG TAB	43
INSULIN PEN NEEDLE	78	<i>isibloom tab 28-day pack</i>	69	JAKAFI 25MG TAB	44
INSULIN SYRINGE	78	<i>isoniazid 100mg tab</i>	39	JAKAFI 5MG TAB	44
INSULIN SYRINGE	78	<i>isoniazid 10mg/ml oral</i>	39	<i>jantoven 10mg tab</i>	20
(DISP) U-100 0.3ML		<i>soln</i>		<i>jantoven 1mg tab</i>	20
				<i>jantoven 2.5mg tab</i>	20

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

<i>jantoven 2mg tab</i>	20	<i>junel fe tab 1/20 28-day pack</i>	69	KISQALI TAB 200MG DAILY DOSE PACK (21)	44
<i>jantoven 3mg tab</i>	20	JYNNEOS 0.5ML INJ	77	KISQALI TAB 400MG DAILY DOSE PACK (42)	44
<i>jantoven 4mg tab</i>	20	<b>K</b>		KISQALI TAB 600MG DAILY DOSE PACK (63)	44
<i>jantoven 5mg tab</i>	20	KALETRA 80-20MG/ML ORAL SOLN	54	KISQALI/FEMARA 400 CO-PACK (70)	42
<i>jantoven 6mg tab</i>	20	KALYDECO 13.4MG ORAL GRANULES	89	KISQALI/FEMARA 600 CO-PACK (91)	42
<i>jantoven 7.5mg tab</i>	20	KALYDECO 150MG TAB	89	<i>klor-con 10meq er tab</i>	81
JANUMET 50-1000MG TAB	27	KALYDECO 25MG ORAL GRANULES	89	<i>klor-con 10meq micro er tab</i>	82
JANUMET 50-500MG TAB	27	KALYDECO 5.8MG ORAL GRANULES	89	<i>klor-con 15meq micro er tab</i>	82
JANUMET XR 100-1000MG TAB	27	KALYDECO 50MG ORAL GRANULES	89	<i>klor-con 20meq micro er tab</i>	82
JANUMET XR 50-1000MG TAB	27	KALYDECO 75MG ORAL GRANULES	89	<i>klor-con 20meq powder for oral soln</i>	82
JANUVIA 100MG TAB	29	<i>kariva tab 28-day pack</i>	69	KLOR-CON 8MEQ ER TAB	82
JANUVIA 25MG TAB	29	KCL/D5W/LR INJ 0.15%	81	KLOXXADO 8MG/0.1ML NASAL SPRAY	31
JANUVIA 50MG TAB	29	<i>kcl/nacl 20meq-0.45% inj</i>	81	KOSELUGO 10MG CAP	44
JARDIANCE 10MG TAB	30	<i>kcl/nacl 20meq-0.9% inj</i>	81	KOSELUGO 25MG CAP	44
JARDIANCE 25MG TAB	30	<i>kcl/nacl 40meq-9% inj</i>	81	KOSELUGO 5MG SPRINKLE CAP	44
<i>jasmiel tab 28-day pack</i>	69	<i>kelnor 1mg-35mcg tab 28-day pack</i>	69	KOSELUGO 7.5MG SPRINKLE CAP	44
JAYPIRCA 100MG TAB	44	KERENDIA 10MG TAB	68	<i>kourzeq 0.1% oral paste</i>	61
JAYPIRCA 50MG TAB	44	KERENDIA 20MG TAB	68	KRAZATI 200MG TAB	44
JENTADUETO 2.5-1000MG TAB	28	KERENDIA 40MG TAB	68	<i>kurvelo tab 28-day pack</i>	69
JENTADUETO 2.5-500MG TAB	28	KESIMPTA 20MG/0.4ML PEN INJ	87	<b>L</b>	
JENTADUETO XR 2.5-1000MG TAB	28	<i>ketoconazole 2% shampoo</i>	62	<i>labetalol 100mg tab</i>	56
JENTADUETO XR 5-1000MG TAB	28	<i>ketoconazole 2% topical cream</i>	62	<i>labetalol 200mg tab</i>	56
<i>jinteli 0.005-1mg tab</i>	69	<i>ketoconazole 200mg tab</i>	32	<i>labetalol 300mg tab</i>	56
JUBBONTI 60MG/ML SYRINGE	66	<i>ketorolac tromethamine 0.4% ophth soln</i>	84	<i>lacosamide 100mg tab</i>	22
<i>juleber tab 28-day pack</i>	69	<i>ketorolac tromethamine 0.5% ophth soln</i>	84	<i>lacosamide 10mg/ml oral soln</i>	22
JULUCA 50-25MG TAB	54	<i>ketorolac tromethamine 10mg tab</i>	13	<i>lacosamide 150mg tab</i>	22
<i>junel 1.5/30 tab 21-day pack</i>	69	KINRIX SYRINGE	77	<i>lacosamide 200mg tab</i>	22
<i>junel 1/20 tab 21-day pack</i>	69	<i>kionex 15gm/60ml oral susp</i>	80	<i>lacosamide 50mg tab</i>	22
<i>junel fe tab 1.5/30 28-day pack</i>	69			<i>lactulose 667mg/ml oral soln</i>	78

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## ALPHABETICAL LISTING OF DRUGS

<i>lamivudine 100mg tab</i>	55	LENVIMA 18MG DAILY	40	<i>levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack</i>	70
<i>lamivudine 10mg/ml oral soln</i>	54	DOSE PACK (90)		<i>levora 0.15/30 tab 28-day pack</i>	70
<i>lamivudine 150mg tab</i>	54	LENVIMA 20MG DAILY	40	<i>levothyroxine sodium 100mcg tab</i>	90
<i>lamivudine 300mg tab</i>	54	DOSE PACK (60)		<i>levothyroxine sodium 112mcg tab</i>	90
<i>lamivudine/zidovudine 150-300mg tab</i>	54	LENVIMA 24MG DAILY	40	<i>levothyroxine sodium 125mcg tab</i>	90
<i>lamotrigine 100mg tab</i>	22	DOSE PACK (90)		<i>levothyroxine sodium 137mcg tab</i>	90
<i>lamotrigine 150mg tab</i>	22	LENVIMA 4MG DAILY	40	<i>levothyroxine sodium 150mcg tab</i>	90
<i>lamotrigine 200mg tab</i>	22	DOSE PACK (30)		<i>levothyroxine sodium 175mcg tab</i>	90
<i>lamotrigine 25mg chew tab</i>	22	LENVIMA 8MG DAILY	40	<i>levothyroxine sodium 200mcg tab</i>	90
<i>lamotrigine 25mg tab</i>	22	DOSE PACK (60)		<i>levothyroxine sodium 25mcg tab</i>	90
<i>lamotrigine 5mg chew tab</i>	22	<i>lessina tab 28-day pack</i>	70	<i>levothyroxine sodium 300mcg tab</i>	91
<i>lansoprazole 15mg dr cap</i>	92	<i>letrozole 2.5mg tab</i>	41	<i>levothyroxine sodium 50mcg tab</i>	91
<i>lansoprazole 30mg dr cap</i>	92	<i>leucovorin 10mg tab</i>	47	<i>levothyroxine sodium 75mcg tab</i>	91
<i>lapatinib 250mg tab</i>	44	<i>leucovorin 15mg tab</i>	47	<i>levoxyxl 100mcg tab</i>	91
<i>larin 1.5/30 tab 21-day pack</i>	69	<i>leucovorin 25mg tab</i>	47	<i>levoxyxl 112mcg tab</i>	91
<i>larin 1/20 tab 21-day pack</i>	69	<i>leucovorin 5mg tab</i>	47	<i>levoxyxl 125mcg tab</i>	91
<i>larin fe tab 1.5/30 28-day pack</i>	69	LEUKERAN 2MG TAB	40	<i>levoxyxl 137mcg tab</i>	91
<i>larin fe tab 1/20 28-day pack</i>	69	<i>levetiracetam 1000mg tab</i>	22	<i>levoxyxl 150mcg tab</i>	91
<i>latanoprost 0.005% ophth soln</i>	84	<i>levetiracetam 100mg/ml oral soln</i>	22	<i>levoxyxl 175mcg tab</i>	91
LAZCLUZE 240MG TAB	40	<i>levetiracetam 250mg tab</i>	22	<i>levoxyxl 200mcg tab</i>	91
LAZCLUZE 80MG TAB	40	<i>levetiracetam 500mg er tab</i>	22	<i>levoxyxl 25mcg tab</i>	91
<i>leflunomide 10mg tab</i>	12	<i>levetiracetam 500mg tab</i>	22	<i>levoxyxl 50mcg tab</i>	91
<i>leflunomide 20mg tab</i>	12	<i>levetiracetam 750mg er tab</i>	22	<i>levoxyxl 75mcg tab</i>	91
<i>lenalidomide 10mg cap</i>	79	<i>levetiracetam 750mg tab</i>	22	<i>levoxyxl 88mcg tab</i>	91
<i>lenalidomide 15mg cap</i>	79	LEVOBUNOLOL 0.5% OPTH SOLN	82	<i>levoxyxl 100mcg tab</i>	91
<i>lenalidomide 2.5mg cap</i>	79	<i>levocarnitine 100mg/ml oral soln</i>	67	<i>levoxyxl 112mcg tab</i>	91
<i>lenalidomide 20mg cap</i>	79	<i>levocarnitine 330mg tab</i>	67	<i>levoxyxl 125mcg tab</i>	91
<i>lenalidomide 25mg cap</i>	79	<i>levocetirizine 5mg tab</i>	88	<i>levoxyxl 137mcg tab</i>	91
<i>lenalidomide 5mg cap</i>	79	<i>levofloxacin 250mg tab</i>	72	<i>levoxyxl 150mcg tab</i>	91
LENVIMA 10MG DAILY	40	<i>levofloxacin 25mg/ml oral soln</i>	72	<i>levoxyxl 175mcg tab</i>	91
DOSE PACK (30)		<i>levofloxacin 500mg tab</i>	72	<i>levoxyxl 200mcg tab</i>	91
LENVIMA 12MG DAILY	40	<i>levofloxacin</i>	72	<i>levoxyxl 25mcg tab</i>	91
DOSE PACK (90)		<i>500mg/100ml inj</i>		<i>levoxyxl 50mcg tab</i>	91
LENVIMA 14MG DAILY	40	<i>levofloxacin 750mg tab</i>	72	<i>levoxyxl 75mcg tab</i>	91
DOSE PACK (60)		<i>levofloxacin</i>	72	<i>levoxyxl 88mcg tab</i>	91
		<i>750mg/150ml inj</i>		<i>lidocaine 4% mucous membrane topical soln</i>	64
		<i>levonest tab 28-day pack</i>	70	<i>lidocaine 5% patch</i>	64

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# ALPHABETICAL LISTING OF DRUGS

<i>lidocaine 5% topical ointment</i>	64	<i>lisinopril 20mg tab</i>	34	<i>lorazepam 2mg/ml oral soln</i>	17
<i>lidocaine viscous 2% mucous membrane topical soln</i>	61	<i>lisinopril 30mg tab</i>	34	LORBRENA 100MG TAB	44
<i>lidocaine/prilocaine 2.5-2.5% topical cream</i>	64	<i>lisinopril 40mg tab</i>	34	LORBRENA 25MG TAB	44
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	85	<i>lisinopril 5mg tab</i>	34	<i>loryna tab 28-day pack</i>	70
<i>linezolid 100mg/5ml oral susp</i>	38	LITFULO 50MG CAP	65	<i>losartan potassium 100mg tab</i>	35
<i>linezolid 600mg tab</i>	38	<i>lithium carbonate 150mg cap</i>	48	<i>losartan potassium 25mg tab</i>	35
<i>linezolid 600mg/300ml inj</i>	38	<i>lithium carbonate 300mg cap</i>	48	<i>losartan potassium 50mg tab</i>	35
LINZESS 145MCG CAP	78	<i>lithium carbonate 300mg er tab</i>	48	<i>loteprednol etabonate 0.5% ophth gel</i>	83
LINZESS 290MCG CAP	78	<i>lithium carbonate 300mg tab</i>	48	<i>loteprednol etabonate 0.5% ophth susp</i>	83
LINZESS 72MCG CAP	78	<i>lithium carbonate 450mg er tab</i>	48	<i>lovastatin 10mg tab</i>	33
<i>liomny 25mcg tab</i>	91	LITHIUM CARBONATE 600MG CAP	48	<i>lovastatin 20mg tab</i>	33
<i>liomny 50mcg tab</i>	91	<i>lithium citrate 60mg/ml oral soln</i>	49	<i>lovastatin 40mg tab</i>	33
<i>liomny 5mcg tab</i>	91	LIVTENCITY 200MG TAE	56	<i>low-ogestrel tab 28-day pack</i>	70
<i>liothyronine sodium 25mcg tab</i>	91	<i>lo jaimiess tab 91-day pack</i>	70	<i>loxapine 10mg cap</i>	51
<i>liothyronine sodium 50mcg tab</i>	91	LOKELMA 10GM POWDER FOR ORAL SUSP	80	<i>loxapine 25mg cap</i>	51
<i>liothyronine sodium 5mcg tab</i>	91	LOKELMA 5GM POWDER FOR ORAL SUSP	80	<i>loxapine 50mg cap</i>	51
<i>liraglutide 18mg/3ml pen inj</i>	29	<i>lomustine 100mg cap</i>	40	<i>loxapine 5mg cap</i>	51
<i>lisdexamfetamine dimesylate 10mg cap</i>	11	<i>lomustine 10mg cap</i>	40	<i>lubiprostone 24mcg cap</i>	78
<i>lisdexamfetamine dimesylate 20mg cap</i>	11	<i>lomustine 40mg cap</i>	40	<i>lubiprostone 8mcg cap</i>	78
<i>lisdexamfetamine dimesylate 30mg cap</i>	11	LONSURF 6.14-15MG TAB	42	<i>luizza 1.5/30 tab 21-day pack</i>	70
<i>lisdexamfetamine dimesylate 40mg cap</i>	11	LONSURF 8.19-20MG TAB	42	<i>luizza 1/20 tab 21-day pack</i>	70
<i>lisdexamfetamine dimesylate 50mg cap</i>	11	<i>loperamide 2mg cap</i>	31	LUMAKRAS 120MG TAB	44
<i>lisdexamfetamine dimesylate 60mg cap</i>	11	<i>lopinavir/ritonavir 100-25mg tab</i>	54	LUMAKRAS 240MG TAB	44
<i>lisdexamfetamine dimesylate 70mg cap</i>	11	<i>lopinavir/ritonavir 200-50mg tab</i>	54	LUMAKRAS 320MG TAB	44
<i>lisinopril 10mg tab</i>	34	<i>lorazepam 0.5mg tab</i>	17	LUMIGAN 0.01% OPHTH SOLN	84
<i>lisinopril 2.5mg tab</i>	34	<i>lorazepam 1mg tab</i>	17	LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	89
		<i>lorazepam 2mg tab</i>	17	LUMRYZ 6GM GRANULES FOR ORAL SUSP	89
				LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	89

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

LUMRYZ 9GM	89	<i>marlissa tab 28-day pack</i>	70	<i>memantine 10mg tab</i>	86
GRANULES FOR ORAL SUSP		MARPLAN 10MG TAB	25	<i>memantine 14mg er cap</i>	86
LUMRYZ GRANULES FOR ORAL SUSP 28-DAY STARTER PACK (28)	90	MATULANE 50MG CAP	47	<i>memantine 21mg er cap</i>	86
LUPRON 11.25MG SYRINGE (3 MONTH)	41	MAVYRET 100-40MG TAB	55	<i>memantine 28mg er cap</i>	86
LUPRON 3.75MG SYRINGE (1 MONTH)	41	MAVYRET 50-20MG ORAL PELLET	55	<i>memantine 2mg/ml oral soln</i>	86
<i>lurasidone 120mg tab</i>	49	MAYZENT 0.25MG TAB	87	<i>memantine 5mg tab</i>	86
<i>lurasidone 20mg tab</i>	49	MAYZENT 1MG TAB	87	<i>memantine 7mg er cap</i>	86
<i>lurasidone 40mg tab</i>	49	MAYZENT 2MG TAB	87	MENQUADFI INJ	77
<i>lurasidone 60mg tab</i>	49	MAYZENT TAB STARTEI	87	MENVEO INJ	77
<i>lurasidone 80mg tab</i>	49	PACK (12)	87	<i>mercaptopurine 20mg/ml susp</i>	40
<i>lutera tab 28-day pack</i>	70	MAYZENT TAB STARTEI	88	<i>mercaptopurine 50mg tab</i>	40
<i>lyleq 0.35mg tab 28-day pack</i>	86	PACK (7)		<i>meropenem 1gm inj</i>	38
LYNPARZA 100MG TAB	44	<i>meclizine 12.5mg tab</i>	31	<i>meropenem 500mg inj</i>	38
LYNPARZA 150MG TAB	44	<i>meclizine 25mg tab</i>	31	<i>mesalamine 1200mg dr tab</i>	72
LYSODREN 500MG TAB	41	<i>medroxyprogesterone acetate 10mg tab</i>	86	<i>mesalamine 1gm rectal supp</i>	72
LYTGOBI TAB 12MG	44	<i>medroxyprogesterone acetate 150mg/ml inj</i>	86	<i>mesalamine 375mg er cap</i>	72
DAILEY DOSE PACK (21)		<i>medroxyprogesterone acetate 150mg/ml syringe</i>	86	<i>mesalamine 400mg dr cap</i>	73
LYTGOBI TAB 16MG	44	<i>medroxyprogesterone acetate 150mg/ml syringe</i>	86	<i>mesalamine 66.7mg/ml enema</i>	73
DAILEY DOSE PACK (28)		<i>medroxyprogesterone acetate 2.5mg tab</i>	86	<i>mesna 400mg tab</i>	47
LYTGOBI TAB 20MG	44	<i>medroxyprogesterone acetate 5mg tab</i>	86	<i>metaxalone 800mg tab</i>	53
DAILEY DOSE PACK (35)		<i>mefloquine 250mg tab</i>	39	<i>metformin 1000mg tab</i>	28
LYUMJEV 100UNIT/ML INJ	30	MEGESTROL ACETATE 125MG/ML ORAL SUSP	86	<i>metformin 500mg er tab</i>	28
LYUMJEV 100UNIT/ML PEN INJ (3ML)	30	<i>megestrol acetate 20mg tab</i>	41	<i>metformin 500mg tab</i>	28
LYUMJEV 200UNIT/ML PEN INJ (3ML)	30	<i>megestrol acetate 40mg tab</i>	41	<i>metformin 750mg er tab</i>	28
<i>lyza 0.35mg tab 28-day pack</i>	86	<i>megestrol acetate 40mg/ml oral susp</i>	41	<i>metformin 850mg tab</i>	28
<b>M</b>		MEKINIST 0.05MG/ML ORAL SOLN	44	<i>metformin/pioglitazone 150-15mg tab</i>	28
<i>magnesium sulfate 500mg/ml inj</i>	82	MEKINIST 0.5MG TAB	44	<i>metformin/pioglitazone 850-15mg tab</i>	28
<i>magnesium sulfate 500mg/ml syringe</i>	82	MEKINIST 2MG TAB	44	<i>methadone 10mg tab</i>	14
<i>malathion 0.5% topical lotion</i>	65	MEKTOVI 15MG TAB	44	METHADONE 1MG/ML ORAL SOLN	14
<i>maraviroc 150mg tab</i>	54	<i>meleya 0.35mg tab 28-day pack</i>	86	METHADONE 2MG/ML ORAL SOLN	14
<i>maraviroc 300mg tab</i>	54	<i>meloxicam 15mg tab</i>	13	<i>methadone 5mg tab</i>	14
		<i>meloxicam 7.5mg tab</i>	14	<i>methazolamide 25mg tab</i>	65
				<i>methazolamide 50mg tab</i>	65
				<i>methenamine hippurate 1gm tab</i>	38

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

<i>methimazole 10mg tab</i>	90	<i>methylprednisolone 32mg tab</i>	75	<i>metirosine 250mg cap</i>	37
<i>methimazole 5mg tab</i>	90	<i>methylprednisolone 4mg tab</i>	75	<i>mexiletine 150mg cap</i>	59
<i>methocarbamol 500mg tab</i>	53	<i>methylprednisolone 4mg tab pack (21)</i>	75	<i>mexiletine 200mg cap</i>	59
<i>methocarbamol 750mg tab</i>	53	<i>methylprednisolone 8mg tab</i>	75	<i>mexiletine 250mg cap</i>	59
<i>methotrexate 2.5mg tab</i>	40	<i>metoclopramide 10mg tab</i>	72	<i>micafungin sodium 100mg inj</i>	32
METHOTREXATE	40	<i>metoclopramide 1mg/ml oral soln</i>	72	<i>micafungin sodium 50mg inj</i>	32
25MG/ML INJ		<i>metoclopramide 5mg tab</i>	72	<i>microgestin 1.5/30 tab 21-day pack</i>	70
<i>methotrexate 50mg/2ml inj</i>	40	<i>metolazone 10mg tab</i>	66	<i>microgestin 1/20 tab 21-day pack</i>	70
METHOXSALEN 10MG CAP	63	<i>metolazone 2.5mg tab</i>	66	<i>microgestin fe tab 1.5/30 28-day pack</i>	70
<i>methsuximide 300mg cap</i>	24	<i>metolazone 5mg tab</i>	66	<i>microgestin fe tab 1/20 28-day pack</i>	70
<i>methylphenidate 10mg er tab</i>	12	<i>metoprolol succinate 100mg er tab</i>	57	<i>midodrine 10mg tab</i>	59
<i>methylphenidate 10mg tab</i>	12	<i>metoprolol succinate 200mg er tab</i>	57	<i>midodrine 2.5mg tab</i>	59
<i>methylphenidate 18mg er osmotic tab</i>	12	<i>metoprolol succinate 25mg er tab</i>	57	<i>midodrine 5mg tab</i>	59
<i>methylphenidate 1mg/ml oral soln</i>	12	<i>metoprolol succinate 50mg er tab</i>	57	MIEBO 1.338GM/ML OPTH SOLN	84
<i>methylphenidate 20mg er tab</i>	12	<i>metoprolol tartrate 100mg tab</i>	57	<i>mifepristone 300mg tab</i>	28
<i>methylphenidate 20mg tab</i>	12	<i>metoprolol tartrate 25mg tab</i>	57	<i>mili tab 28-day pack</i>	70
<i>methylphenidate 27mg er osmotic tab</i>	12	<i>metoprolol tartrate 37.5mg tab</i>	57	<i>mimvey 28-day pack</i>	70
<i>methylphenidate 27mg er tab</i>	12	<i>metoprolol tartrate 50mg tab</i>	57	<i>minocycline 100mg cap</i>	90
<i>methylphenidate 2mg/ml oral soln</i>	12	<i>metoprolol tartrate 75mg tab</i>	57	<i>minocycline 50mg cap</i>	90
<i>methylphenidate 36mg er osmotic tab</i>	12	<i>metronidazole 0.75% topical cream</i>	65	<i>minocycline 75mg cap</i>	90
<i>methylphenidate 36mg er tab</i>	12	<i>metronidazole 0.75% topical gel</i>	65	<i>minoxidil 10mg tab</i>	37
<i>methylphenidate 54mg er osmotic tab</i>	12	<i>metronidazole 0.75% vaginal gel</i>	92	<i>minoxidil 2.5mg tab</i>	37
<i>methylphenidate 54mg er tab</i>	12	<i>metronidazole 1% topical gel</i>	65	<i>mirtazapine 15mg odt</i>	24
<i>methylphenidate 5mg tab</i>	12	<i>metronidazole 250mg tab</i>	38	<i>mirtazapine 15mg tab</i>	24
<i>methylprednisolone 16mg tab</i>	75	<i>metronidazole 500mg tab</i>	38	<i>mirtazapine 30mg odt</i>	24
		<i>metronidazole 5mg/ml inj</i>	38	<i>mirtazapine 30mg tab</i>	24
				<i>mirtazapine 45mg odt</i>	24
				<i>mirtazapine 45mg tab</i>	24
				<i>mirtazapine 7.5mg tab</i>	24
				<i>misoprostol 100mcg tab</i>	92
				<i>misoprostol 200mcg tab</i>	92
				M-M-R II INJ	77
				<i>modafinil 100mg tab</i>	12
				<i>modafinil 200mg tab</i>	12
				MODEYSO 125MG CAP	47
				<i>moexipril 15mg tab</i>	34
				<i>moexipril 7.5mg tab</i>	34

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

MOLINDONE 10MG TAB	49	MOUNJARO	29	NALOXONE 0.4MG/ML	31
MOLINDONE 25MG TAB	49	2.5MG/0.5ML		CARTRIDGE	
MOLINDONE 5MG TAB	49	AUTO-INJECTOR		<i>naloxone 0.4mg/ml inj</i>	31
<i>mometasone furoate 0.1%</i>	64	MOUNJARO 5MG/0.5ML	29	<i>naloxone 0.4mg/ml</i>	31
<i>topical cream</i>		AUTO-INJECTOR		<i>syringe</i>	
<i>mometasone furoate 0.1%</i>	64	MOUNJARO	29	<i>naloxone 2mg/2ml</i>	31
<i>topical lotion</i>		7.5MG/0.5ML		<i>syringe</i>	
<i>mometasone furoate 0.1%</i>	64	AUTO-INJECTOR		<i>naltrexone 50mg tab</i>	31
<i>topical ointment</i>		MOVANTIK 12.5MG TAB	78	<i>naproxen 250mg tab</i>	14
<i>montelukast 10mg tab</i>	18	MOVANTIK 25MG TAB	78	<i>naproxen 375mg dr tab</i>	14
<i>montelukast 4mg chew</i>	18	<i>moxifloxacin 0.5% ophth</i>	83	<i>naproxen 375mg tab</i>	14
<i>tab</i>		<i>soln</i>		<i>naproxen 500mg tab</i>	14
<i>montelukast 5mg chew</i>	18	MOXIFLOXACIN	72	<i>naratriptan 1mg tab</i>	79
<i>tab</i>		1.6MG/ML INJ		<i>naratriptan 2.5mg tab</i>	79
<i>morphine sulfate 100mg</i>	14	<i>moxifloxacin 400mg tab</i>	72	NATACYN 5% OPHTH	83
<i>er tab</i>		MRESVIA 50MCG/0.5ML	77	SUSP	
<i>morphine sulfate 15mg er</i>	14	SYRINGE		<i>nateglinide 120mg tab</i>	28
<i>tab</i>		MULTAQ 400MG TAB	59	<i>nateglinide 60mg tab</i>	28
<i>morphine sulfate 15mg</i>	14	<i>mupirocin 2% topical</i>	62	NAYZILAM 5MG/0.1ML	21
<i>tab</i>		<i>ointment</i>		NASAL SPRAY	
<i>morphine sulfate 200mg</i>	14	<i>mycophenolate mofetil</i>	80	<i>nebivolol 10mg tab</i>	57
<i>er tab</i>		<i>200mg/ml oral susp</i>		<i>nebivolol 2.5mg tab</i>	57
<i>morphine sulfate 20mg/ml</i>	14	<i>mycophenolate mofetil</i>	80	<i>nebivolol 20mg tab</i>	57
<i>oral soln</i>		<i>250mg cap</i>		<i>nebivolol 5mg tab</i>	57
MORPHINE SULFATE	14	<i>mycophenolate mofetil</i>	80	<i>necon 0.5/35 tab 28-day</i>	70
2MG/ML ORAL SOLN		<i>500mg tab</i>		<i>pack</i>	
<i>morphine sulfate 30mg er</i>	14	<i>mycophenolic acid 180mg</i>	80	NEFAZODONE 100MG	25
<i>tab</i>		<i>dr tab</i>		TAB	
<i>morphine sulfate 30mg</i>	14	<i>mycophenolic acid 360mg</i>	80	NEFAZODONE 150MG	25
<i>tab</i>		<i>dr tab</i>		TAB	
MORPHINE SULFATE	14	MYRBETRIQ 25MG ER	73	NEFAZODONE 200MG	25
4MG/ML ORAL SOLN		TAB		TAB	
<i>morphine sulfate 60mg er</i>	14	MYRBETRIQ 50MG ER	73	NEFAZODONE 250MG	25
<i>tab</i>		TAB		TAB	
MOUNJARO	29	<hr/>		NEFAZODONE 50MG	26
10MG/0.5ML		N		TAB	
AUTO-INJECTOR		<i>nabumetone 500mg tab</i>	14	NEMLUVIO 30MG	65
MOUNJARO	29	<i>nabumetone 750mg tab</i>	14	AUTO-INJECTOR	
12.5MG/0.5ML		<i>nadolol 20mg tab</i>	57	<i>neomycin sulfate 500mg</i>	12
AUTO-INJECTOR		<i>nadolol 40mg tab</i>	57	<i>tab</i>	
MOUNJARO	29	<i>nadolol 80mg tab</i>	57	NEOMYCIN/BACITRACI	83
15MG/0.5ML		<i>nafacillin 100mg/ml inj</i>	85	N/POLYMYXIN	
AUTO-INJECTOR		<i>nafacillin 1gm inj</i>	85	5MG-400UNIT-10000UN	
		<i>nafacillin 2gm inj</i>	85	IT OPHTH OINTMENT	

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# ALPHABETICAL LISTING OF DRUGS

NEOMYCIN/POLYMYXI N B/GRAMICIDIN 1.75-10000-0.025MG-UN T-MG/ML OPHTH SOLN	83	<i>nilotinib 150mg cap</i>	44	NORDITROPIN 10MG/1.5ML PEN INJ	68
NEOMYCIN/POLYMYXI N/BACITRACIN/HYDRO CORTISONE 1% OPHTH OINTMENT	83	<i>nilotinib 200mg cap</i>	44	NORDITROPIN 15MG/1.5ML PEN INJ	68
<i>neomycin/polymyxin/dexa methasone 0.1% ophth susp</i>	83	<i>nilotinib 50mg cap</i>	44	NORDITROPIN 5MG/1.5ML PEN INJ	68
<i>neomycin/polymyxin/hydr ocortisone 3.5-10000unit-1% otic soln</i>	84	<i>nilutamide 150mg tab</i>	41	<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	70
<i>neomycin/polymyxin/hydr ocortisone 3.5-10000unit-1% otic susp</i>	84	NINLARO 2.3MG CAP	44	<i>norethindrone 0.35mg 28-day pack</i>	86
NERLYNX 40MG TAB	44	NINLARO 3MG CAP	44	<i>norethindrone acetate 5mg tab</i>	86
NEVIRAPINE 10MG/ML ORAL SUSP	54	NINLARO 4MG CAP	44	<i>nortrel 0.5/35 tab 28-day pack</i>	70
<i>nevirapine 200mg tab</i>	54	<i>nitazoxanide 500mg tab</i>	38	<i>nortrel 1/35 tab 21-day pack</i>	70
<i>nevirapine 400mg er tab</i>	54	NITRO-BID 2% TOPICAL OINTMENT	16	<i>nortrel 1/35 tab 28-day pack</i>	70
NEXLETOL 180MG TAB	32	<i>nitrofurantoin</i>	38	<i>nortrel 7/7/7 tab 28-day pack</i>	70
NEXLIZET 180-10MG TAB	33	<i>macro/nitrofurantoin mono 100mg cap</i>		<i>nortriptyline 10mg cap</i>	27
NEXPLANON 68MG IMPLANT	86	<i>nitrofurantoin</i>	39	<i>nortriptyline 25mg cap</i>	27
<i>niacin 1000mg er tab</i>	33	<i>macrocrystals 100mg cap</i>		<i>nortriptyline 2mg/ml oral soln</i>	27
<i>niacin 500mg er tab</i>	33	<i>nitrofurantoin</i>	39	<i>nortriptyline 50mg cap</i>	27
<i>niacin 750mg er tab</i>	33	<i>nitrofurantoin</i>	39	<i>nortriptyline 75mg cap</i>	27
NICOTROL 10MG/ML NASAL INHALER	88	<i>nitroglycerin 0.1mg/hr patch</i>	16	NORVIR 100MG ORAL POWDER	54
<i>nifedipine 30mg er tab</i>	58	<i>nitroglycerin 0.2mg/hr patch</i>	16	NOVOLIN MIX (70/30) 100UNIT/ML FLEXPEN (3ML)	30
<i>nifedipine 30mg osmotic er tab</i>	58	<i>nitroglycerin 0.3mg sl tab</i>	16	NOVOLIN MIX (70/30) 100UNIT/ML INJ	30
<i>nifedipine 60mg er tab</i>	58	<i>nitroglycerin 0.4% rectal ointment</i>	16	NOVOLIN N 100UNIT/ML INJ	30
<i>nifedipine 60mg osmotic er tab</i>	58	<i>nitroglycerin 0.4mg sl tab</i>	16	NOVOLIN N 100UNIT/ML PEN INJ (3ML)	30
<i>nifedipine 90mg er tab</i>	58	<i>nitroglycerin 0.4mg/hr patch</i>	16	NOVOLIN R 100UNIT/ML INJ	30
<i>nifedipine 90mg osmotic er tab</i>	58	<i>nitroglycerin 0.6mg sl tab</i>	16	NOVOLIN R 100UNIT/ML PEN INJ (3ML)	30
<i>nikki tab 28-day pack</i>	70	<i>nitroglycerin 0.6mg/hr patch</i>	16		
		NIVESTYM 300MCG/0.5ML SYRINGE	74		
		NIVESTYM 300MCG/ML INJ	74		
		NIVESTYM 480MCG/0.8ML SYRINGE	74		
		NIVESTYM 480MCG/1.6ML INJ	74		
		<i>nora-be 0.35mg tab 28-day pack</i>	86		

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# ALPHABETICAL LISTING OF DRUGS

NOVOLOG 100UNIT/ML CARTRIDGE	30	<i>nystatin/triamcinolone acetonide</i>	62	<i>olanzapine 15mg tab</i>	51	
NOVOLOG 100UNIT/ML INJ	30	<i>100000-0.1unit/gm-% topical cream</i>		<i>olanzapine 2.5mg tab</i>	51	
NOVOLOG 100UNIT/ML PEN INJ (3ML)	30	<i>nystop 100000unit/gm topical powder</i>	62	<i>olanzapine 20mg odt</i>	51	
NOVOLOG MIX (70/30) 100UNIT/ML FLEXPEN (3ML)	30	NYVEPRIA 6MG/0.6ML SYRINGE	74	<i>olanzapine 20mg tab</i>	51	
NOVOLOG MIX (70/30) 100UNIT/ML INJ	30	<hr/>			<i>olanzapine 5mg odt</i>	51
NUBEQA 300MG TAB	41	<b>O</b>			<i>olanzapine 5mg tab</i>	51
NUCALA 100MG INJ	17	<i>octreotide 0.05mg/ml inj</i>	67	<i>olanzapine 7.5mg tab</i>	51	
NUCALA 100MG/ML AUTO-INJECTOR	17	<i>octreotide 0.1mg/ml inj</i>	67	<i>olmesartan medoxomil 20mg tab</i>	35	
NUCALA 100MG/ML SYRINGE	17	<i>octreotide 0.2mg/ml inj</i>	67	<i>olmesartan medoxomil 40mg tab</i>	35	
NUCALA 40MG/0.4ML SYRINGE	17	<i>octreotide 0.5mg/ml inj</i>	67	<i>olmesartan medoxomil 5mg tab</i>	35	
NUEDEXTA 20-10MG CAP	88	<i>octreotide 1mg/ml inj</i>	67	<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	81	
NUPLAZID 10MG TAB	49	ODEFSEY 200-25-25MG TAB	54	OLUMIANT 1MG TAB	12	
NUPLAZID 34MG CAP	49	ODOMZO 200MG CAP	41	OLUMIANT 2MG TAB	12	
<i>nyamyc 100000unit/gm topical powder</i>	62	OFEV 100MG CAP	89	OLUMIANT 4MG TAB	12	
<i>nylia 1/35 tab 28-day pack</i>	70	OFEV 150MG CAP	89	<i>omega-3 acid ethyl esters (usp) 1gm cap</i>	33	
<i>nylia 7/7/7 tab 28-day pack</i>	70	<i>ofloxacin 0.3% ophth soln</i>	83	<i>omeprazole 10mg dr cap</i>	92	
<i>nystatin 100000 unit/gm topical ointment</i>	62	<i>ofloxacin 0.3% otic soln</i>	84	<i>omeprazole 20mg dr cap</i>	92	
<i>nystatin 100000unit/gm topical powder</i>	62	OGSIVEO 100MG TAB 7-DAY PACK (14)	44	<i>omeprazole 40mg dr cap</i>	92	
<i>nystatin 100000unit/ml oral susp</i>	61	OGSIVEO 150MG TAB 7-DAY PACK (14)	44	OMNITROPE 10MG/1.5ML CARTRIDGE	68	
<i>nystatin 100000unit/ml topical cream</i>	62	OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	44	OMNITROPE 5.8MG INJ	68	
<i>nystatin 500000unit tab</i>	32	OJEMDA 100MG TAB PACK (500MG ONCE WEEKLY) (20)	44	OMNITROPE 5MG/1.5ML CARTRIDGE	68	
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% topical ointment</i>	62	OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	44	<i>ondansetron 0.8mg/ml oral soln</i>	31	
		OJEMDA 25MG/ML POWDER FOR ORAL SUSP	44	<i>ondansetron 4mg odt</i>	31	
		OJJAARA 100MG TAB	44	<i>ondansetron 4mg tab</i>	31	
		OJJAARA 150MG TAB	44	<i>ondansetron 8mg odt</i>	31	
		OJJAARA 200MG TAB	45	<i>ondansetron 8mg tab</i>	31	
		<i>olanzapine 10mg inj</i>	51	ONUREG 200MG TAB	40	
		<i>olanzapine 10mg odt</i>	51	ONUREG 300MG TAB	40	
		<i>olanzapine 10mg tab</i>	51	OPIPZA 10MG ORAL FILM	52	
		<i>olanzapine 15mg odt</i>	51	OPIPZA 2MG ORAL FILM	52	
				OPIPZA 5MG ORAL FILM	52	

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# ALPHABETICAL LISTING OF DRUGS

PEDIARIX SYRINGE	77	<i>pentoxifylline 400mg er</i>	59	<i>phenytek 300mg er cap</i>	23
PEDVAXHIB	77	<i>tab</i>		<i>phenytoin 25mg/ml oral</i>	23
7.5MCG/0.5ML INJ		<i>perampanel 0.5mg/ml</i>	22	<i>susp</i>	
<i>peg 3350 powder for oral</i>	78	<i>oral susp</i>		<i>phenytoin 50mg chew tab</i>	23
<i>soln (100gm Moviprep</i>		<i>perampanel 10mg tab</i>	22	<i>phenytoin sodium 100mg</i>	23
<i>equiv)</i>		<i>perampanel 12mg tab</i>	22	<i>er cap</i>	
<i>peg 3350/electrolyte</i>	78	<i>perampanel 2mg tab</i>	22	PIFELTRO 100MG TAB	54
<i>powder for oral soln</i>		<i>perampanel 4mg tab</i>	22	<i>pilocarpine 1% ophth</i>	84
<i>peg 3350/kcl/sodium</i>	78	<i>perampanel 6mg tab</i>	22	<i>soln</i>	
<i>bicarbonate/sodium</i>		<i>perampanel 8mg tab</i>	22	<i>pilocarpine 2% ophth</i>	84
<i>chloride powder for oral</i>		PERINDOPRIL	34	<i>soln</i>	
<i>soln</i>		ERBUMINE 2MG TAB		<i>pilocarpine 4% ophth</i>	84
PEGASYS	55	<i>perindopril erbumine</i>	34	<i>soln</i>	
180MCG/0.5ML		<i>4mg tab</i>		<i>pilocarpine 5mg tab</i>	61
SYRINGE		PERINDOPRIL	34	<i>pilocarpine 7.5mg tab</i>	61
PEGASYS 180MCG/ML	55	ERBUMINE 8MG TAB		<i>pimecrolimus 1% topical</i>	65
INJ		<i>periogard 0.12%</i>	61	<i>cream</i>	
PEMAZYRE 13.5MG TAB	45	<i>mouthwash</i>		PIMOZIDE 1MG TAB	88
PEMAZYRE 4.5MG TAB	45	<i>permethrin 5% topical</i>	65	PIMOZIDE 2MG TAB	88
PEMAZYRE 9MG TAB	45	<i>cream</i>		<i>pimtrex tab 28-day pack</i>	70
PENBRAYA INJ	77	<i>perphenazine 16mg tab</i>	52	<i>pindolol 10mg tab</i>	57
<i>penicillamine 250mg tab</i>	79	<i>perphenazine 2mg tab</i>	52	<i>pindolol 5mg tab</i>	57
<i>penicillin g potassium</i>	85	<i>perphenazine 4mg tab</i>	52	<i>pioglitazone 15mg tab</i>	28
<i>1000000unit/ml inj</i>		<i>perphenazine 8mg tab</i>	52	<i>pioglitazone 30mg tab</i>	28
PENICILLIN G SODIUM	85	PHENELZINE 15MG TAB	25	<i>pioglitazone 45mg tab</i>	28
100000UNIT/ML INJ		PHENOBARBITAL	22	<i>piperacillin/tazobactam</i>	85
<i>penicillin v potassium</i>	85	100MG TAB		<i>2000-250mg inj</i>	
<i>250mg tab</i>		PHENOBARBITAL 15MG	22	<i>piperacillin/tazobactam</i>	85
PENICILLIN V	85	TAB		<i>3000-375mg inj</i>	
POTASSIUM 25MG/ML		PHENOBARBITAL	22	<i>piperacillin/tazobactam</i>	85
ORAL SOLN		16.2MG TAB		<i>36-4.5gm inj</i>	
<i>penicillin v potassium</i>	85	PHENOBARBITAL 30MG	22	<i>piperacillin/tazobactam</i>	85
<i>500mg tab</i>		TAB		<i>4000-500mg inj</i>	
PENICILLIN V	85	PHENOBARBITAL	22	PIQRAY TAB 200MG	45
POTASSIUM 50MG/ML		32.4MG TAB		DAILY DOSE PACK (28)	
ORAL SOLN		PHENOBARBITAL	22	PIQRAY TAB 250MG	45
PENMENVY INJ	77	4MG/ML ORAL SOLN		DAILY DOSE PACK (56)	
PENTACEL	77	PHENOBARBITAL 60MG	22	PIQRAY TAB 300MG	45
96-30-68UNIT/ML INJ		TAB		DAILY DOSE PACK (56)	
<i>pentamidine isethionate</i>	39	PHENOBARBITAL	23	<i>pirfenidone 267mg cap</i>	89
<i>300mg inj</i>		64.8MG TAB		<i>pirfenidone 267mg tab</i>	89
<i>pentamidine isethionate</i>	39	PHENOBARBITAL	23	<i>pirfenidone 801mg tab</i>	89
<i>300mg/6ml inh soln</i>		97.2MG TAB		<i>piroxicam 10mg cap</i>	14
		<i>phenytek 200mg er cap</i>	23	<i>piroxicam 20mg cap</i>	14

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

PLEGRIDY	88	POTASSIUM CHLORIDE	82	<i>prednisolone 5mg/ml oral soln</i>	75
125MCG/0.5ML		20MEQ/100ML INJ		<i>prednisolone acetate 1% ophth susp</i>	83
AUTO-INJECTOR		<i>potassium chloride</i>	82	<i>prednisone 10mg tab</i>	75
PLEGRIDY	88	<i>2meq/ml (20ml) inj</i>		<i>prednisone 10mg tab (21) pack (48)</i>	75
125MCG/0.5ML		<i>potassium chloride</i>	82	<i>prednisone 1mg tab</i>	75
SYRINGE		<i>2meq/ml inj</i>		PREDNISONE 1MG/ML	75
<i>plenamine 15% inj</i>	82	POTASSIUM CHLORIDE	82	ORAL SOLN	
PODOFILOX 0.5%	65	40MEQ/100ML INJ		<i>prednisone 2.5mg tab</i>	75
TOPICAL SOLN		<i>potassium chloride 8meq er cap</i>	82	<i>prednisone 20mg tab</i>	75
<i>polymyxin b/trimethoprim</i>	83	<i>potassium chloride 8meq er tab</i>	82	<i>prednisone 50mg tab</i>	75
<i>10000 unit/ml-0.1% ophth soln</i>		<i>potassium citrate 10meq er tab</i>	74	<i>prednisone 5mg tab</i>	75
POMALYST 1MG CAP	47	<i>potassium citrate 15meq er tab</i>	74	<i>prednisone 5mg tab pack (21)</i>	75
POMALYST 2MG CAP	47	<i>potassium citrate 5meq er tab</i>	74	<i>prednisone 5mg tab pack (48)</i>	75
POMALYST 3MG CAP	47	<i>pramipexole 0.125mg tab</i>	48	<i>pregabalin 100mg cap</i>	23
POMALYST 4MG CAP	47	<i>pramipexole 0.25mg tab</i>	48	<i>pregabalin 150mg cap</i>	23
<i>portia tab 28-day pack</i>	70	<i>pramipexole 0.5mg tab</i>	48	<i>pregabalin 200mg cap</i>	23
<i>posaconazole 100mg dr tab</i>	32	<i>pramipexole 0.75mg tab</i>	48	<i>pregabalin 20mg/ml oral soln</i>	23
<i>posaconazole 40mg/ml oral susp</i>	32	<i>pramipexole 1.5mg tab</i>	48	<i>pregabalin 225mg cap</i>	23
<i>potassium chloride 1.33meq/ml oral soln</i>	82	<i>pramipexole 1mg tab</i>	48	<i>pregabalin 25mg cap</i>	23
<i>potassium chloride 10meq er cap</i>	82	<i>prasugrel 10mg tab</i>	74	<i>pregabalin 300mg cap</i>	23
<i>potassium chloride 10meq er tab</i>	82	<i>prasugrel 5mg tab</i>	74	<i>pregabalin 50mg cap</i>	23
<i>potassium chloride 10meq micro er tab</i>	82	<i>pravastatin sodium 10mg tab</i>	33	<i>pregabalin 75mg cap</i>	23
POTASSIUM CHLORIDE	82	<i>pravastatin sodium 20mg tab</i>	33	PREMARIN	92
10MEQ/100ML INJ		<i>pravastatin sodium 40mg tab</i>	33	0.625MG/GM VAGINAL CREAM	
POTASSIUM CHLORIDE	82	<i>pravastatin sodium 80mg tab</i>	33	PREMPHASE 28-DAY PACK	70
15MEQ ER TAB		<i>praziquantel 600mg tab</i>	16	PREMPRO 0.3/1.5MG 28-DAY PACK	70
<i>potassium chloride 15meq micro er tab</i>	82	<i>prazosin 1mg cap</i>	35	PREMPRO 0.45/1.5MG 28-DAY PACK	70
<i>potassium chloride 2.67meq/ml oral soln</i>	82	<i>prazosin 2mg cap</i>	35	PREMPRO 0.625/2.5MG 28-DAY PACK	70
<i>potassium chloride 20meq er tab</i>	82	<i>prazosin 5mg cap</i>	35	PREMPRO 0.625/5MG 28-DAY PACK	70
<i>potassium chloride 20meq micro er tab</i>	82	PREDNISOLONE 1%	83	PREVMIS 120MG ORAL PELLETT	56
<i>potassium chloride 20meq powder for oral soln</i>	82	OPHTH SOLN			
		<i>prednisolone 1mg/ml oral soln</i>	75		
		<i>prednisolone 3mg/ml oral soln</i>	75		

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# ALPHABETICAL LISTING OF DRUGS

PREVYMIS 240MG TAB	56	<i>promethazine 50mg tab</i>	88	<i>quetiapine 200mg tab</i>	51
PREVYMIS 480MG TAB	56	<i>propafenone 150mg tab</i>	59	<i>quetiapine 25mg tab</i>	51
PREZCOBIX 150-675MG TAB	54	<i>propafenone 225mg er cap</i>	59	<i>quetiapine 300mg er tab</i>	51
PREZCOBIX 150-800MG TAB	54	<i>propafenone 225mg tab</i>	59	<i>quetiapine 300mg tab</i>	51
PREZISTA 100MG/ML ORAL SUSP	55	<i>propafenone 300mg tab</i>	59	<i>quetiapine 400mg er tab</i>	51
PREZISTA 150MG TAB	55	<i>propafenone 325mg er cap</i>	59	<i>quetiapine 400mg tab</i>	51
PREZISTA 75MG TAB	55	<i>propafenone 425mg er cap</i>	59	<i>quetiapine 50mg er tab</i>	51
PRIFTIN 150MG TAB	39	<i>propranolol 10mg tab</i>	57	<i>quetiapine 50mg tab</i>	51
PRIMAQUINE	39	<i>propranolol 120mg er cap</i>	57	<i>quinapril 10mg tab</i>	34
PHOSPHATE 26.3MG TAB		<i>propranolol 160mg er cap</i>	57	<i>quinapril 20mg tab</i>	34
<i>primidone 250mg tab</i>	23	<i>propranolol 20mg tab</i>	57	<i>quinapril 40mg tab</i>	34
<i>primidone 50mg tab</i>	23	<i>propranolol 40mg tab</i>	57	<i>quinapril 5mg tab</i>	34
PRIORIX INJ	77	PROPRANOLOL	57	QUINIDINE SULFATE	59
PRIVIGEN 20GM/200ML INJ	76	4MG/ML ORAL SOLN		200MG TAB	
<i>probenecid 500mg tab</i>	74	<i>propranolol 60mg er cap</i>	57	QUINIDINE SULFATE	59
<i>prochlorperazine 10mg tab</i>	52	<i>propranolol 60mg tab</i>	57	300MG TAB	
<i>prochlorperazine 25mg rectal supp</i>	52	<i>propranolol 80mg er cap</i>	57	<i>quinine sulfate 324mg cap</i>	39
<i>prochlorperazine 5mg tab</i>	52	<i>propranolol 80mg tab</i>	57	QVAR 40MCG	18
<i>procto-med 2.5% topical cream</i>	16	PROPRANOLOL	57	REDIHALER	
<i>proctosol 2.5% topical cream</i>	16	8MG/ML ORAL SOLN		QVAR 80MCG	18
<i>proctozone hc 2.5% topical cream</i>	16	<i>propylthiouracil 50mg tab</i>	90	REDIHALER	
<i>progesterone 100mg cap</i>	86	PROQUAD INJ	77	<b>R</b>	
<i>progesterone 200mg cap</i>	86	PROSOL 20% INJ	82	RABAVERT 2.5UNIT/ML INJ	77
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	80	<i>protriptyline 10mg tab</i>	27	<i>rabeprazole sodium 20mg dr tab</i>	92
PROGRAF 1MG GRANULES FOR ORAL SUSP	80	<i>protriptyline 5mg tab</i>	27	RADICAVA 105MG/5ML ORAL SUSP	60
PROLASTIN 1000MG INJ	89	PULMOZYME 1MG/ML INH SOLN	89	RALDESY 10MG/ML ORAL SOLN	26
<i>promethazine 1.25mg/ml oral soln</i>	88	<i>pyrazinamide 500mg tab</i>	39	<i>raloxifene 60mg tab</i>	66
<i>promethazine 12.5mg tab</i>	88	<i>pyridostigmine bromide 60mg tab</i>	53	<i>ramelteon 8mg tab</i>	76
<i>promethazine 25mg tab</i>	88	<i>pyrimethamine 25mg tab</i>	39	<i>ramipril 1.25mg cap</i>	34
		<b>Q</b>		<i>ramipril 10mg cap</i>	34
		QINLOCK 50MG TAB	45	<i>ramipril 2.5mg cap</i>	34
		QUADRACEL INJ	77	<i>ramipril 5mg cap</i>	34
		QUADRACEL SYRINGE	77	<i>ranolazine 1000mg er tab</i>	59
		<i>quetiapine 100mg tab</i>	51	<i>ranolazine 500mg er tab</i>	59
		<i>quetiapine 150mg er tab</i>	51	<i>rasagiline 0.5mg tab</i>	48
		<i>quetiapine 200mg er tab</i>	51	<i>rasagiline 1mg tab</i>	48
				<i>reclipsen tab 28-day pack</i>	70
				RECOMBIVAX	77
				10MCG/ML INJ	

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# ALPHABETICAL LISTING OF DRUGS

RECOMBIVAX	77	REXULTI 1MG TAB	52	<i>risperidone 1mg odt</i>	50
10MCG/ML SYRINGE		REXULTI 2MG TAB	52	<i>risperidone 1mg tab</i>	50
RECOMBIVAX	77	REXULTI 3MG TAB	53	<i>risperidone 1mg/ml oral</i>	50
40MCG/ML INJ		REXULTI 4MG TAB	53	<i>soln</i>	
RECOMBIVAX	77	REYATAZ 50MG ORAL	55	<i>risperidone 2mg odt</i>	50
5MCG/0.5ML INJ		POWDER		<i>risperidone 2mg tab</i>	50
RECOMBIVAX	77	REZDIFFRA 100MG TAB	72	<i>risperidone 3mg odt</i>	50
5MCG/0.5ML SYRINGE		REZDIFFRA 60MG TAB	72	<i>risperidone 3mg tab</i>	50
RELENZA 5MG/BLISTER	56	REZDIFFRA 80MG TAB	72	<i>risperidone 4mg odt</i>	50
POWDER INHALER		REZLIDHIA 150MG CAP	45	<i>risperidone 4mg tab</i>	50
<i>repaglinide 0.5mg tab</i>	28	REZUROCK 200MG TAB	79	<i>risperidone microspheres</i>	50
<i>repaglinide 1mg tab</i>	29	RHOPRESSA 0.02%	83	<i>12.5mg inj</i>	
<i>repaglinide 2mg tab</i>	29	OPHTH SOLN		<i>risperidone microspheres</i>	50
REPATHA 140MG/ML	33	RIBAVIRIN 200MG CAP	55	<i>25mg inj</i>	
AUTO-INJECTOR		RIBAVIRIN 200MG TAB	55	<i>risperidone microspheres</i>	50
REPATHA 140MG/ML	33	<i>rifabutin 150mg cap</i>	39	<i>37.5mg inj</i>	
SYRINGE		<i>rifampin 150mg cap</i>	39	<i>risperidone microspheres</i>	50
RETACRIT	75	<i>rifampin 300mg cap</i>	39	<i>50mg inj</i>	
10000UNIT/ML INJ		<i>rifampin 600mg inj</i>	39	<i>ritonavir 100mg tab</i>	55
RETACRIT	75	<i>riluzole 50mg tab</i>	60	<i>rivaroxaban 1mg/ml oral</i>	20
20000UNIT/2ML INJ		RIMANTADINE 100MG	56	<i>susp</i>	
RETACRIT	75	TAB		<i>rivaroxaban 2.5mg tab</i>	20
20000UNIT/ML INJ		RINVOQ 15MG ER TAB	12	<i>rivastigmine 1.5mg cap</i>	86
RETACRIT 2000UNIT/ML	75	RINVOQ 1MG/ML ORAL	12	<i>rivastigmine 13.3mg/24hr</i>	86
INJ		SOLN		<i>patch</i>	
RETACRIT 3000UNIT/ML	75	RINVOQ 30MG ER TAB	12	<i>rivastigmine 3mg cap</i>	86
INJ		RINVOQ 45MG ER TAB	12	<i>rivastigmine 4.5mg cap</i>	87
RETACRIT	75	<i>risedronate sodium</i>	66	<i>rivastigmine 4.6mg/24hr</i>	87
40000UNIT/ML INJ		<i>150mg tab</i>		<i>patch</i>	
RETACRIT 4000UNIT/ML	75	<i>risedronate sodium 30mg</i>	66	<i>rivastigmine 6mg cap</i>	87
INJ		<i>tab</i>		<i>rivastigmine 9.5mg/24hr</i>	87
RETEVMO 120MG TAB	45	<i>risedronate sodium 35mg</i>	66	<i>patch</i>	
RETEVMO 160MG TAB	45	<i>tab</i>		<i>rizatriptan 10mg odt</i>	79
RETEVMO 40MG TAB	45	<i>risedronate sodium 35mg</i>	66	<i>rizatriptan 10mg tab</i>	79
RETEVMO 80MG TAB	45	<i>tab pack (12)</i>		<i>rizatriptan 5mg odt</i>	79
REVCIVI 2.4MG/1.5ML	67	<i>risedronate sodium 35mg</i>	66	<i>rizatriptan 5mg tab</i>	79
INJ		<i>tab pack (4)</i>		ROCKLATAN	83
REVUFORJ 110MG TAB	47	<i>risedronate sodium 5mg</i>	66	0.02-0.005% OPTH	
REVUFORJ 160MG TAB	47	<i>tab</i>		SOLN	
REVUFORJ 25MG TAB	47	RISPERIDONE 0.25MG	50	<i>roflumilast 0.5mg tab</i>	89
REXTOVY 4MG/0.25ML	31	ODT		<i>roflumilast 250mcg tab</i>	89
NASAL SPRAY		<i>risperidone 0.25mg tab</i>	50	ROMVIMZA 14MG CAP	45
REXULTI 0.25MG TAB	52	<i>risperidone 0.5mg odt</i>	50	ROMVIMZA 20MG CAP	45
REXULTI 0.5MG TAB	52	<i>risperidone 0.5mg tab</i>	50	ROMVIMZA 30MG CAP	45

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# ALPHABETICAL LISTING OF DRUGS

<i>ropinirole 0.25mg tab</i>	48	<i>sacubitril/valsartan</i>	59	<i>silver sulfadiazine 1% topical cream</i>	65
<i>ropinirole 0.5mg tab</i>	48	<i>97-103mg tab</i>		SIMBRINZA 0.2-1%	83
<i>ropinirole 1mg tab</i>	48	<i>salmon calcitonin</i>	66	OPHTH SUSP	
<i>ropinirole 2mg tab</i>	48	<i>200unit/act nasal spray</i>		SIMLANDI 20MG/0.2ML	13
<i>ropinirole 3mg tab</i>	48	SANTYL 250UNIT/GM	65	SYRINGE	
<i>ropinirole 4mg tab</i>	48	TOPICAL OINTMENT		SIMLANDI 40MG/0.4ML	13
<i>ropinirole 5mg tab</i>	48	<i>sapropterin 100mg powder for oral soln</i>	67	AUTO-INJECTOR	
<i>rosuvastatin calcium 10mg tab</i>	33	<i>sapropterin 100mg tab</i>	67	SIMLANDI 40MG/0.4ML	13
<i>rosuvastatin calcium 20mg tab</i>	33	<i>sapropterin 500mg powder for oral soln</i>	67	SYRINGE	
<i>rosuvastatin calcium 40mg tab</i>	33	SCEMBLIX 100MG TAB	45	SIMLANDI 80MG/0.8ML	13
<i>rosuvastatin calcium 5mg tab</i>	33	SCEMBLIX 20MG TAB	45	AUTO-INJECTOR	
ROTARIX	77	SCEMBLIX 40MG TAB	45	<i>simvastatin 10mg tab</i>	33
667000UNIT/ML ORAL SUSP		<i>scopolamine 1mg/72hr patch</i>	31	<i>simvastatin 20mg tab</i>	33
ROTATEQ ORAL SUSP	77	SECUADO 3.8MG/24HR PATCH	51	<i>simvastatin 40mg tab</i>	33
<i>roweepra 500mg tab</i>	23	SECUADO 5.7MG/24HR PATCH	51	<i>simvastatin 5mg tab</i>	34
ROZLYTREK 100MG CAP	45	SECUADO 7.6MG/24HR PATCH	51	<i>simvastatin 80mg tab</i>	34
ROZLYTREK 200MG CAP	45	<i>selegiline 5mg cap</i>	48	<i>sirolimus 0.5mg tab</i>	80
ROZLYTREK 50MG ORAL PELLETT	45	<i>selegiline 5mg tab</i>	48	<i>sirolimus 1mg tab</i>	80
RUBRACA 200MG TAB	45	SELENIUM SULFIDE 2.5% SHAMPOO	65	<i>sirolimus 1mg/ml oral soln</i>	80
RUBRACA 250MG TAB	45	SELZENTRY 20MG/ML ORAL SOLN	55	<i>sirolimus 2mg tab</i>	80
RUBRACA 300MG TAB	45	<i>sertraline 100mg tab</i>	25	SIRTURO 100MG TAB	39
<i>rufinamide 200mg tab</i>	23	<i>sertraline 20mg/ml oral soln</i>	25	SIRTURO 20MG TAB	40
<i>rufinamide 400mg tab</i>	23	<i>sertraline 25mg tab</i>	25	SKYRIZI 150MG/ML AUTO-INJECTOR	63
<i>rufinamide 40mg/ml oral susp</i>	23	<i>sertraline 50mg tab</i>	25	SKYRIZI 150MG/ML SYRINGE	63
RUKOBIA 600MG ER TAB	55	<i>setlakin tab 91-day pack</i>	70	SKYRIZI 180MG/1.2ML CARTRIDGE	73
RYBELSUS 14MG TAB	29	<i>sharobel 0.35mg tab 28-day pack</i>	86	SKYRIZI 360MG/2.4ML CARTRIDGE	73
RYBELSUS 3MG TAB	29	SHINGRIX	77	<i>sodium chloride 0.45% inj</i>	82
RYBELSUS 7MG TAB	29	50MCG/0.5ML INJ		<i>sodium chloride 0.9% inj</i>	82
RYDAPT 25MG CAP	45	SIGNIFOR 0.3MG/ML INJ	67	<i>sodium chloride 0.9% irrigation soln</i>	74
<b>S</b>		SIGNIFOR 0.6MG/ML INJ	67	<i>sodium chloride 3% inj</i>	82
<i>sacubitril/valsartan 24-26mg tab</i>	59	SIGNIFOR 0.9MG/ML INJ	67	<i>sodium chloride 50mg/ml inj</i>	82
<i>sacubitril/valsartan 49-51mg tab</i>	59	<i>sildenafil 20mg tab</i>	88	<i>sodium oxybate 500mg/ml oral soln</i>	90
		<i>silodosin 4mg cap</i>	73	<i>sodium phenylbutyrate 3gm/tsp oral powder</i>	67
		<i>silodosin 8mg cap</i>	73		

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# ALPHABETICAL LISTING OF DRUGS

<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	80	<i>ssd 1% topical cream</i>	65	<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	90
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	78	STARJEMZA 45MG/0.5ML INJ	63	<i>sulfasalazine 500mg dr tab</i>	73
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	78	STARJEMZA 45MG/0.5ML SYRINGE	63	<i>sulfasalazine 500mg tab</i>	73
SOFOSBUVIR/VELPATASVIR 400-100MG TAB	55	STARJEMZA 90MG/ML SYRINGE	63	<i>sulindac 150mg tab</i>	14
<i>solifenacin succinate 10mg tab</i>	73	STEQEYMA 45MG/0.5ML SYRINGE	63	<i>sulindac 200mg tab</i>	14
<i>solifenacin succinate 5mg tab</i>	73	STEQEYMA 90MG/ML SYRINGE	63	<i>sumatriptan 100mg tab</i>	79
SOLTAMOX 10MG/5ML ORAL SOLN	41	STIOLTO 2.5-2.5MCG/ACT INHALER	19	<i>sumatriptan 20mg/act nasal spray</i>	79
SOMAVERT 10MG INJ	68	STIVARGA 40MG TAB	45	<i>sumatriptan 25mg tab</i>	79
SOMAVERT 15MG INJ	68	STREPTOMYCIN 1GM INJ	12	<i>sumatriptan 50mg tab</i>	79
SOMAVERT 20MG INJ	68	STRIBILD 150-150-200-300MG TAB	55	<i>sumatriptan 5mg/act nasal spray</i>	79
SOMAVERT 25MG INJ	68	STRIVERDI 2.5MCG/ACT INHALER	19	<i>sumatriptan 6mg/0.5ml auto-injector</i>	79
SOMAVERT 30MG INJ	68	SUBVENITE 10MG/ML ORAL SUSP	23	<i>sumatriptan 6mg/0.5ml inj</i>	79
<i>sorafenib 200mg tab</i>	45	<i>sucralfate 1000mg tab</i>	92	<i>sunitinib 12.5mg cap</i>	45
<i>sotalol 120mg tab</i>	57	<i>sucralfate 100mg/ml oral susp</i>	92	<i>sunitinib 25mg cap</i>	45
<i>sotalol 160mg tab</i>	57	SUFLAVE ORAL SOLN PACK	78	<i>sunitinib 37.5mg cap</i>	45
<i>sotalol 240mg tab</i>	57	SULFACETAMIDE	83	<i>sunitinib 50mg cap</i>	45
<i>sotalol 80mg tab</i>	57	SODIUM 10% OPHTH SOLN	62	SUNLENCA 300MG TAB	55
<i>sotalol af 120mg tab</i>	57	<i>sulfacetamide sodium 10% topical lotion</i>	62	SUNLENCA 300MG TAB THERAPY PACK (4)	55
<i>sotalol af 160mg tab</i>	57	SULFACETAMIDE/PRED	83	SUNLENCA 300MG TAB THERAPY PACK (5)	55
<i>sotalol af 80mg tab</i>	57	NISOLONE 10-0.25% OPHTH SOLN	83	SUNOSI 150MG TAB	90
SPIRIVA RESPIMAT 1.25MCG/ACT INHALER	18	<i>sulfadiazine 500mg tab</i>	90	SUNOSI 75MG TAB	90
<i>spironolactone 100mg tab</i>	66	<i>sulfamethoxazole/trimethoprim 200-40mg/5ml oral susp</i>	90	SUTAB 225-188-1479MG TAB	78
<i>spironolactone 25mg tab</i>	66	<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	90	<i>syeda tab 28-day pack</i>	70
<i>spironolactone 50mg tab</i>	66			SYMDEKO TAB 4-WEEK PACK (56)	89
<i>sprintec tab 28-day pack</i>	70			SYMDEKO TAB 50-75MG/75MG PACK (56)	89
SPRITAM 250MG TAB FOR ORAL SUSP	23			SYMPAZAN 10MG ORAL FILM	21
SPRITAM 500MG TAB FOR ORAL SUSP	23			SYMPAZAN 20MG ORAL FILM	21
<i>sps 15gm/60ml oral susp</i>	80			SYMPAZAN 5MG ORAL FILM	21
<i>sronyx tab 28-day pack</i>	70				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

SYMTUZA	55	TABRECTA 150MG TAB	45	TENIVAC 4-10UNIT/ML	77
150-800-200-10MG TAB		TABRECTA 200MG TAB	45	SYRINGE	
SYNJARDY	28	<i>tacrolimus 0.03% topical ointment</i>	65	<i>tenofovir disoproxil fumarate 300mg tab</i>	55
12.5-1000MG TAB		<i>tacrolimus 0.1% topical ointment</i>	65	TEPMETKO 225MG TAB	46
SYNJARDY 12.5-500MG TAB	28	<i>tacrolimus 0.5mg cap</i>	80	<i>terazosin 10mg cap</i>	35
SYNJARDY 5-1000MG TAB	28	<i>tacrolimus 1mg cap</i>	80	<i>terazosin 1mg cap</i>	35
SYNJARDY 5-500MG TAB	28	<i>tacrolimus 5mg cap</i>	80	<i>terazosin 2mg cap</i>	35
SYNJARDY XR	28	<i>tadalafil 2.5mg tab</i>	73	<i>terazosin 5mg cap</i>	35
10-1000MG TAB		<i>tadalafil 20mg tab</i>	88	<i>terbinafine 250mg tab</i>	32
SYNJARDY XR	28	<i>tadalafil 5mg tab</i>	73	<i>terconazole 0.4% vaginal cream</i>	92
12.5-1000MG TAB		TAFINLAR 10MG TAB	45	<i>terconazole 0.8% vaginal cream</i>	92
SYNJARDY XR	28	FOR ORAL SUSP		<i>terconazole 80mg vaginal insert</i>	92
25-1000MG TAB		TAFINLAR 50MG CAP	45	<i>teriflunomide 14mg tab</i>	88
SYNJARDY XR	28	TAFINLAR 75MG CAP	45	<i>teriflunomide 7mg tab</i>	88
5-1000MG TAB		TAGRISSE 40MG TAB	40	TERIPARATIDE	66
SYNTHROID 100MCG TAB	91	TAGRISSE 80MG TAB	41	620MCG/2.48ML PEN	
SYNTHROID 112MCG TAB	91	TALZENNA 0.1MG CAP	45	INJ	
SYNTHROID 125MCG TAB	91	TALZENNA 0.25MG CAP	45	<i>testosterone 1% (12.5mg/act) topical gel pump</i>	15
SYNTHROID 137MCG TAB	91	TALZENNA 0.35MG CAP	45	<i>testosterone 1% (25mg) topical gel packet</i>	15
SYNTHROID 150MCG TAB	91	TALZENNA 0.5MG CAP	45	<i>testosterone 1% (50mg) topical gel packet</i>	16
SYNTHROID 175MCG TAB	91	TALZENNA 0.75MG CAP	45	<i>testosterone 1.62% (20.25mg/act) topical gel pump</i>	16
SYNTHROID 200MCG TAB	91	TALZENNA 1MG CAP	45	<i>testosterone 30mg/act topical soln</i>	16
SYNTHROID 25MCG TAB	91	<i>tamoxifen 10mg tab</i>	41	<i>testosterone cypionate 100mg/ml inj</i>	16
SYNTHROID 300MCG TAB	91	<i>tamoxifen 20mg tab</i>	41	<i>testosterone cypionate 200mg/ml (1ml) inj</i>	16
SYNTHROID 50MCG TAB	91	<i>tamsulosin 0.4mg cap</i>	73	<i>testosterone cypionate 200mg/ml inj</i>	16
SYNTHROID 75MCG TAB	91	<i>tarina fe tab 1/20 28-day pack</i>	70	TESTOSTERONE	16
SYNTHROID 88MCG TAB	91	<i>tazarotene 0.1% topical cream</i>	63	ENANTHATE 200MG/ML	
		<i>tazicef 1gm inj</i>	61	INJ	
		<i>tazicef 2gm inj</i>	61	<i>tetrabenazine 12.5mg tab</i>	87
		TAZICEF 6GM INJ	61	<i>tetrabenazine 25mg tab</i>	87
		TAZVERIK 200MG TAB	45		
		TEFLARO 400MG INJ	39		
		TEFLARO 600MG INJ	39		
		<i>telmisartan 20mg tab</i>	35		
		<i>telmisartan 40mg tab</i>	35		
		<i>telmisartan 80mg tab</i>	35		
		<i>temazepam 15mg cap</i>	76		
		<i>temazepam 30mg cap</i>	76		
		TENIVAC 4-10UNIT/ML	77		
		INJ			
<b>T</b>					
TABLOID 40MG TAB	40				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

<i>tetracycline 250mg cap</i>	90	TICOVAC	77	<i>tolvaptan 30mg/90mg tab pack (56)</i>	67
<i>tetracycline 500mg cap</i>	90	1.2MCG/0.25ML		<i>topiramate 100mg tab</i>	23
THALOMID 100MG CAP	79	SYRINGE		<i>topiramate 15mg cap</i>	23
THALOMID 50MG CAP	79	TICOVAC 2.4MCG/0.5ML	77	<i>topiramate 200mg tab</i>	23
THEOPHYLLINE 100MG ER TAB	89	SYRINGE		<i>topiramate 25mg cap</i>	23
THEOPHYLLINE 200MG ER TAB	89	<i>tigecycline 50mg inj</i>	39	<i>topiramate 25mg tab</i>	23
<i>theophylline 300mg er tab</i>	89	<i>timolol 0.25% ophth gel</i>	82	<i>topiramate 25mg/ml oral soln</i>	23
<i>theophylline 400mg er tab</i>	89	<i>timolol 0.25% ophth soln</i>	82	<i>topiramate 50mg tab</i>	23
<i>theophylline 450mg er tab</i>	89	<i>timolol 0.5% ophth gel</i>	82	<i>toremifene 60mg tab</i>	41
<i>theophylline 600mg er tab</i>	89	<i>timolol 0.5% ophth soln</i>	82	<i>torseamide 100mg tab</i>	66
<i>thioridazine 100mg tab</i>	52	<i>timolol 10mg tab</i>	57	<i>torseamide 10mg tab</i>	66
<i>thioridazine 10mg tab</i>	52	TIMOLOL 5MG TAB	57	<i>torseamide 20mg tab</i>	66
<i>thioridazine 25mg tab</i>	52	<i>tinidazole 250mg tab</i>	39	<i>torseamide 5mg tab</i>	66
<i>thioridazine 50mg tab</i>	52	<i>tinidazole 500mg tab</i>	39	TOUJEO 300UNIT/ML PEN INJ (1.5ML)	30
<i>thiothixene 10mg cap</i>	49	TIVICAY 50MG TAB	55	TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	30
<i>thiothixene 1mg cap</i>	49	TIVICAY 5MG TAB FOR ORAL SUSP	55	TPN ELECTROLYTES INJ	82
<i>thiothixene 2mg cap</i>	49	<i>tizanidine 2mg tab</i>	53	TRADJENTA 5MG TAB	29
<i>thiothixene 5mg cap</i>	49	<i>tizanidine 4mg tab</i>	53	<i>tramadol 100mg er tab</i>	15
<i>tiadylt 120mg er (24hr) cap</i>	58	<i>tobramycin 0.3% ophth soln</i>	83	<i>tramadol 200mg er tab</i>	15
<i>tiadylt 180mg er (24hr) cap</i>	58	TOBRAMYCIN 10MG/ML INJ	12	<i>tramadol 300mg er tab</i>	15
<i>tiadylt 240mg er (24hr) cap</i>	58	<i>tobramycin 300mg/5ml inh soln</i>	12	<i>tramadol 50mg tab</i>	15
<i>tiadylt 300mg er (24hr) cap</i>	58	<i>tobramycin 80mg/2ml inj</i>	12	<i>tramadol/acetaminophen 37.5-325mg tab</i>	15
<i>tiadylt 360mg er (24hr) cap</i>	58	<i>tolterodine tartrate 1mg tab</i>	73	<i>trandolapril 1mg tab</i>	34
<i>tiadylt 420mg er (24hr) cap</i>	58	<i>tolterodine tartrate 2mg er cap</i>	73	<i>trandolapril 2mg tab</i>	34
<i>tiagabine 12mg tab</i>	24	<i>tolterodine tartrate 2mg tab</i>	73	<i>trandolapril 4mg tab</i>	34
<i>tiagabine 16mg tab</i>	24	<i>tolterodine tartrate 4mg er cap</i>	73	<i>tranexamic acid 650mg tab</i>	75
<i>tiagabine 2mg tab</i>	24	<i>tolvaptan 15mg tab</i>	67	<i>tranylcypromine 10mg tab</i>	25
<i>tiagabine 4mg tab</i>	24	<i>tolvaptan 15mg tab therapy pack (56)</i>	67	TRAVASOL 10% INJ	82
TIBSOVO 250MG TAB	46	<i>tolvaptan 15mg/30mg tab pack (56)</i>	67	<i>travoprost 0.004% ophth soln</i>	84
<i>ticagrelor 60mg tab</i>	74	<i>tolvaptan 15mg/45mg tab pack (56)</i>	67	<i>trazodone 100mg tab</i>	26
<i>ticagrelor 90mg tab</i>	74	<i>tolvaptan 30mg tab</i>	67	<i>trazodone 150mg tab</i>	26
		<i>tolvaptan 30mg/60mg tab pack (56)</i>	67	<i>trazodone 50mg tab</i>	26
				TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER	19

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	19	<i>triamcinolone acetonide</i> 0.1% topical cream	64	<i>tri-lo- estarylla tab</i> 28-day pack	70
TRELSTAR 11.25MG INJ	41	<i>triamcinolone acetonide</i> 0.1% topical lotion	64	<i>tri-lo-sprintec tab 28-day</i> pack	70
TRELSTAR 22.5MG INJ	41	<i>triamcinolone acetonide</i> 0.1% topical ointment	64	<i>trimethoprim 100mg tab</i>	39
TRELSTAR 3.75MG INJ	42	<i>triamcinolone acetonide</i> 0.5% topical cream	64	<i>tri-mili tab 28-day pack</i>	70
TREMFYA 100MG/ML AUTO-INJECTOR	63	<i>triamcinolone acetonide</i> 0.5% topical ointment	64	<i>trimipramine 100mg cap</i>	27
TREMFYA 100MG/ML SYRINGE	63	<i>trientine 250mg cap</i>	79	<i>trimipramine 25mg cap</i>	27
TREMFYA 200MG/2ML AUTO-INJECTOR	73	<i>tri-estarylla tab 28-day</i> pack	70	<i>trimipramine 50mg cap</i>	27
TREMFYA 200MG/2ML AUTO-INJECTOR	73	<i>trifluoperazine 10mg tab</i>	52	TRINTELLIX 10MG TAB	26
INDUCTION PACK FOR CROHNS (2)		<i>trifluoperazine 1mg tab</i>	52	TRINTELLIX 20MG TAB	26
TREMFYA 200MG/2ML SYRINGE	73	<i>trifluoperazine 2mg tab</i>	52	TRINTELLIX 5MG TAB	26
TRESIBA 100UNIT/ML INJ	30	<i>trifluoperazine 5mg tab</i>	52	<i>tri-sprintec tab 28-day</i> pack	71
TRESIBA 100UNIT/ML PEN INJ (3ML)	30	TRIFLURIDINE 1%	83	TRIUMEQ	55
TRESIBA 200UNIT/ML PEN INJ (3ML)	30	OPHTH SOLN		600-50-300MG TAB	
<i>tretinoin 0.01% topical</i> <i>gel</i>	62	<i>trihexyphenidyl 2mg tab</i>	47	TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	55
<i>tretinoin 0.025% topical</i> <i>cream</i>	62	<i>trihexyphenidyl 5mg tab</i>	47	<i>tri-vylibra lo tab 28-day</i> pack	71
<i>tretinoin 0.025% topical</i> <i>gel</i>	62	TRIJARDY XR	28	<i>tri-vylibra tab 28-day</i> pack	71
<i>tretinoin 0.05% topical</i> <i>cream</i>	62	10-5-1000MG TAB		<i>tropium chloride 20mg</i> tab	73
<i>tretinoin 0.1% topical</i> <i>cream</i>	62	TRIJARDY XR	28	TRULANCE 3MG TAB	78
<i>tretinoin 10mg cap</i>	47	12.5-2.5-1000MG TAB		TRULICITY	29
TRIAMCINOLONE ACETONIDE 0.025% LOTION	64	TRIJARDY XR	28	0.75MG/0.5ML AUTO-INJECTOR	
<i>triamcinolone acetonide</i> 0.025% topical cream	64	5-2.5-1000MG TAB		TRULICITY	29
<i>triamcinolone acetonide</i> 0.025% topical ointment	64	TRIKAFTA	89	1.5MG/0.5ML AUTO-INJECTOR	
<i>triamcinolone acetonide</i> 0.1% oral paste	61	100-50-75MG/150MG TAB PACK (84)		TRULICITY 3MG/0.5ML AUTO-INJECTOR	29
		TRIKAFTA	89	TRULICITY	29
		100-50-75MG/75MG ORAL GRANULES PACK (56)		4.5MG/0.5ML AUTO-INJECTOR	
		TRIKAFTA	89	TRUMENBA SYRINGE	77
		50-37.5-25MG/75MG TAB PACK (84)		TRUQAP 160MG TAB	46
		TRIKAFTA	89	TRUQAP 200MG TAB	46
		80-40-60MG/59.5MG ORAL GRANULES PACK (56)		TUKYSA 150MG TAB	47
				TUKYSA 50MG TAB	47
				TURALIO 125MG CAP	46
				<i>turqoz tab 28-day pack</i>	71
				TWINRIX SYRINGE	77

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# ALPHABETICAL LISTING OF DRUGS

TYBOST 150MG TAB	55	VALTOCO 5MG	21	VELTASSA 8.4GM	80
TYENNE 162MG/0.9ML	80	(5MG/0.1ML) NASAL		POWDER FOR ORAL	
AUTO-INJECTOR		SPRAY DOSE PACK		SUSP	
TYENNE 162MG/0.9ML	80	<i>valtya 1/35 tab 28-day</i>	71	VENCLEXTA 100MG	47
SYRINGE		<i>pack</i>		TAB	
TYMLOS	67	<i>valtya tab 1/50 28-day</i>	71	VENCLEXTA 10MG TAB	47
3120MCG/1.56ML PEN		<i>pack</i>		VENCLEXTA 50MG TAB	47
INJ		<i>vancomycin 100mg/ml inj</i>	39	VENCLEXTA TAB	47
TYPHIM VI	77	<i>vancomycin 125mg cap</i>	39	STARTER PACK (42)	
25MCG/0.5ML INJ		<i>vancomycin 1gm inj</i>	39	<i>venlafaxine 100mg tab</i>	26
TYPHIM VI	77	<i>vancomycin 250mg cap</i>	39	<i>venlafaxine 150mg er cap</i>	26
25MCG/0.5ML SYRINGE		<i>vancomycin 500mg inj</i>	39	<i>venlafaxine 25mg tab</i>	26
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<b>U</b>		<i>vancomycin 750mg inj</i>	39	<i>venlafaxine 37.5mg er</i>	26
UBRELVY 100MG TAB	78	VANFLYTA 17.7MG TAB	46	<i>cap</i>	
UBRELVY 50MG TAB	79	VANFLYTA 26.5MG TAB	46	<i>venlafaxine 37.5mg tab</i>	26
<i>ursodiol 250mg tab</i>	72	VAQTA 25UNIT/0.5ML	77	<i>venlafaxine 50mg tab</i>	26
<i>ursodiol 300mg cap</i>	72	INJ		<i>venlafaxine 75mg er cap</i>	26
<i>ursodiol 500mg tab</i>	72	VAQTA 25UNIT/0.5ML	77	<i>venlafaxine 75mg tab</i>	26
<hr/>					
<b>V</b>		SYRINGE		VENTOLIN 108MCG HFA	19
<i>valacyclovir 1000mg tab</i>	56	VAQTA 50UNIT/ML INJ	77	INHALER	
<i>valacyclovir 500mg tab</i>	56	VAQTA 50UNIT/ML	77	<i>verapamil 120mg er cap</i>	58
VALCHLOR 0.016%	62	SYRINGE		<i>verapamil 120mg er tab</i>	58
TOPICAL GEL		<i>varenicline 0.5mg tab</i>	88	<i>verapamil 120mg tab</i>	58
<i>valganciclovir 450mg tab</i>	56	<i>varenicline 0.5mg/1mg</i>	88	<i>verapamil 180mg er cap</i>	58
<i>valganciclovir 50mg/ml</i>	56	<i>first month pack (53)</i>		<i>verapamil 180mg er tab</i>	58
<i>oral soln</i>		<i>varenicline 1mg tab</i>	88	<i>verapamil 240mg er cap</i>	58
<i>valproic acid 250mg cap</i>	24	<i>varenicline 1mg tab pack</i>	88	<i>verapamil 240mg er tab</i>	58
<i>valproic acid 50mg/ml</i>	24	(56)		<i>verapamil 40mg tab</i>	58
<i>oral soln</i>		VARIVAX	77	<i>verapamil 80mg tab</i>	58
<i>valsartan 160mg tab</i>	35	1350PFU/0.5ML INJ		VERQUVO 10MG TAB	60
<i>valsartan 320mg tab</i>	35	VAXCHORA ORAL SUSP	77	VERQUVO 2.5MG TAB	60
<i>valsartan 40mg tab</i>	35	VELIVET TAB 28-DAY	71	VERQUVO 5MG TAB	60
<i>valsartan 80mg tab</i>	35	PACK		VERSACLOZ 50MG/ML	51
VALTOCO 10MG	21	VELTASSA 16.8GM	80	ORAL SUSP	
(10MG/0.1ML) NASAL		POWDER FOR ORAL		VERZENIO 100MG TAB	46
SPRAY DOSE PACK		SUSP		VERZENIO 150MG TAB	46
VALTOCO 15MG	21	VELTASSA 1GM	80	VERZENIO 200MG TAB	46
(7.5MG/0.1ML) NASAL		POWDER FOR ORAL		VERZENIO 50MG TAB	46
SPRAY DOSE PACK		SUSP		<i>vestura tab 3-0.02mg</i>	71
VALTOCO 20MG	21	VELTASSA 25.2GM	80	<i>28-day pack</i>	
(10MG/0.1ML) NASAL		POWDER FOR ORAL		<i>vienna tab 28-day pack</i>	71
SPRAY DOSE PACK		SUSP		<i>vigabatrin 500mg powder</i>	24
				<i>for oral soln</i>	
				<i>vigabatrin 500mg tab</i>	24

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

VIGAFYDE 100MG/ML	24	<i>warfarin sodium 1mg tab</i>	20	XCOPRI 100MG TAB	23
ORAL SOLN		<i>warfarin sodium 2.5mg tab</i>	20	XCOPRI 150MG TAB	23
<i>vilazodone 10mg tab</i>	26	<i>tab</i>		XCOPRI 200MG TAB	23
<i>vilazodone 20mg tab</i>	26	<i>warfarin sodium 2mg tab</i>	20	XCOPRI 25MG TAB	23
<i>vilazodone 40mg tab</i>	26	<i>warfarin sodium 3mg tab</i>	20	XCOPRI 50MG TAB	24
VIMKUNYA	77	<i>warfarin sodium 4mg tab</i>	20	XCOPRI TAB 100/150MG	24
40MCG/0.8ML SYRINGE		<i>warfarin sodium 5mg tab</i>	20	MAINTENANCE PACK	
VIRACEPT 250MG TAB	55	<i>warfarin sodium 6mg tab</i>	20	(56)	
VIRACEPT 625MG TAB	55	<i>warfarin sodium 7.5mg tab</i>	20	XCOPRI TAB 12.5/25MG	24
VIREAD 150MG TAB	55			TITRATION PACK (28)	
VIREAD 200MG TAB	55	WELIREG 40MG TAB	47	XCOPRI TAB 150/200MG	24
VIREAD 250MG TAB	55	WINREVAIR 45MG INJ	88	PACK (56)	
VIREAD 40MG/GM	55	WINREVAIR 45MG INJ	88	XCOPRI TAB 150/200MG	24
ORAL POWDER		(2 VIAL PACK)		TITRATION PACK (28)	
VITRAKVI 100MG CAP	46	WINREVAIR 60MG INJ	88	XCOPRI TAB 50/100MG	24
VITRAKVI 20MG/ML	46	WINREVAIR 60MG INJ	88	TITRATION PACK (28)	
ORAL SOLN		(2 VIAL PACK)		XDEMVY 0.25% OPHTH	83
VITRAKVI 25MG CAP	46	<i>wixela 100-50mcg powder inhaler</i>	19	SOLN	
VIVITROL 380MG INJ	31	<i>wixela 250-50mcg powder inhaler</i>	19	XELJANZ 10MG TAB	12
VIVOTIF DR CAP	77	<i>wixela 500-50mcg powder inhaler</i>	19	XELJANZ 1MG/ML	12
VIZIMPRO 15MG TAB	41			ORAL SOLN	
VIZIMPRO 30MG TAB	41	WYOST 120MG/1.7ML	67	XELJANZ 5MG TAB	12
VIZIMPRO 45MG TAB	41	INJ		XELJANZ XR 11MG TAB	12
VONJO 100MG CAP	46			XELJANZ XR 22MG TAB	13
VORANIGO 10MG TAB	46			XERMELO 250MG TAB	31
VORANIGO 40MG TAB	46			XIFAXAN 550MG TAB	39
<i>voriconazole 200mg inj</i>	32			XIGDUO XR 10-1000MG	28
<i>voriconazole 200mg tab</i>	32			TAB	
<i>voriconazole 40mg/ml oral susp</i>	32			XIGDUO XR 10-500MG	28
<i>voriconazole 50mg tab</i>	32			TAB	
VOSEVI 400-100-100MG	55			XIGDUO XR	28
TAB				2.5-1000MG TAB	
VOWST 30000000UNIT	72			XIGDUO XR 5-1000MG	28
CAP				TAB	
VRAYLAR 1.5MG CAP	49	XARELTO 10MG TAB	20	XIGDUO XR 5-500MG	28
VRAYLAR 3MG CAP	49	XARELTO 15MG TAB	20	TAB	
VRAYLAR 4.5MG CAP	49	XARELTO 1MG/ML	20	XIIDRA 5% OPHTH	84
VRAYLAR 6MG CAP	49	ORAL SUSP		SOLN	
<i>vyfemla tab 28-day pack</i>	71	XARELTO 2.5MG TAB	20	XOFLUZA 40MG TAB	56
<i>vylibra tab 28-day pack</i>	71	XARELTO 20MG TAB	20	XOFLUZA 80MG TAB	56
		XARELTO TAB STARTER	20	XOLAIR 150MG INJ	17
		PACK (51)		XOLAIR 150MG/ML	17
<b>W</b>		XATMEP 2.5MG/ML	40	AUTO-INJECTOR	
<i>warfarin sodium 10mg tab</i>	20	ORAL SOLN			

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 03/01/2026

# ALPHABETICAL LISTING OF DRUGS

XOLAIR 150MG/ML SYRINGE	17	<i>yuvafem 10mcg vaginal insert</i>	92	<i>zidovudine 10mg/ml oral soln</i>	55
XOLAIR 300MG/2ML AUTO-INJECTOR	17	<b>Z</b>		<i>zidovudine 300mg tab</i>	55
XOLAIR 300MG/2ML SYRINGE	17	<i>zafemy 150-35mcg/24hr patch</i>	71	<i>ziprasidone 20mg cap</i>	49
XOLAIR 75MG/0.5ML AUTO-INJECTOR	18	<i>zafirlukast 10mg tab</i>	18	<i>ziprasidone 20mg inj</i>	49
XOLAIR 75MG/0.5ML SYRINGE	18	<i>zafirlukast 20mg tab</i>	18	<i>ziprasidone 40mg cap</i>	49
XOSPATA 40MG TAB	46	<i>zaleplon 10mg cap</i>	76	<i>ziprasidone 60mg cap</i>	49
XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	47	<i>zaleplon 5mg cap</i>	76	ZOLINZA 100MG CAP	46
XPOVIO TAB 40MG ONCE WEEKLY CARTON (16)	47	ZAVZPRET 10MG/ACT NASAL SPRAY	79	<i>zolmitriptan 2.5mg tab</i>	79
XPOVIO TAB 40MG ONCE WEEKLY CARTON (4)	47	ZEJULA 100MG TAB	46	<i>zolmitriptan 5mg tab</i>	79
XPOVIO TAB 40MG TWICE WEEKLY CARTON (8)	47	ZEJULA 200MG TAB	46	<i>zolpidem tartrate 10mg tab</i>	76
XPOVIO TAB 60MG ONCE WEEKLY CARTON (4)	47	ZEJULA 300MG TAB	46	<i>zolpidem tartrate 12.5mg er tab</i>	76
XPOVIO TAB 60MG TWICE WEEKLY CARTON (24)	47	ZELBORAF 240MG TAB	46	<i>zolpidem tartrate 5mg tab</i>	76
XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	47	<i>zenatane 10mg cap</i>	62	<i>zolpidem tartrate 6.25mg er tab</i>	76
XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	47	<i>zenatane 20mg cap</i>	62	ZONISADE 100MG/5ML ORAL SUSP	23
XTANDI 40MG CAP	42	<i>zenatane 30mg cap</i>	62	<i>zonisamide 100mg cap</i>	23
XTANDI 40MG TAB	42	<i>zenatane 40mg cap</i>	62	<i>zonisamide 25mg cap</i>	23
<i>xulane 150-35mcg/24hr patch</i>	71	ZENPEP	72	<i>zonisamide 50mg cap</i>	23
<b>Y</b>		105000-25000-79000UNI T DR CAP		<i>zovia 1mg-35mcg tab 28-day pack</i>	71
YESINTEK 90MG/ML SYRINGE	63	ZENPEP	72	ZTALMY 50MG/ML ORAL SUSP	23
YF-VAX INJ	77	14000-3000-10000UNIT DR CAP		ZURNAI 1.5MG/0.5ML AUTO-INJECTOR	31
		ZENPEP	72	ZURZUVAE 20MG CAP	24
		24000-5000-17000UNIT DR CAP		ZURZUVAE 25MG CAP	24
		ZENPEP	72	ZURZUVAE 30MG CAP	24
		252600-60000-189600U NIT DR CAP		ZYDELIG 100MG TAB	46
		ZENPEP	72	ZYDELIG 150MG TAB	46
		40000-126000-168000U NIT DR CAP		ZYKADIA 150MG TAB	46
		ZENPEP	72		
		42000-10000-32000UNIT DR CAP			
		ZENPEP	72		
		63000-15000-47000UNIT DR CAP			
		ZENPEP	72		
		84000-20000-63000UNIT DR CAP			
		<i>zidovudine 100mg cap</i>	55		

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This formulary was updated on 03/01/2026. For more recent information or other questions, please contact Peak Health Insurance Customer Care at 1-855-847-1026 (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](http://www.medicare.peakhealth.org).

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