



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 8

This formulary was updated on 02/01/2026.

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.

H8947.2026.04.0059_C

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 02/01/2026. 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.

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 02/01/2026. 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 92. 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 92.

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:

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<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	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<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	
STIMULANTS - MISC.		
<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: 02/01/2026

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
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
<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	
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
<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: 02/01/2026

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XELJANZ XR 22MG TAB	5	NDS PA QL=30 EA/30 Days
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
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
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
<i>celecoxib 100mg cap</i>	1	
<i>celecoxib 200mg cap</i>	1	
<i>celecoxib 400mg cap</i>	1	
<i>celecoxib 50mg cap</i>	1	
<i>diclofenac potassium 50mg tab</i>	1	
<i>diclofenac sodium 1.5% topical soln</i>	2	QL=300 ML/30 Days
<i>diclofenac sodium 100mg er tab</i>	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

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: 02/01/2026

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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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
ANORECTAL AND RELATED PRODUCTS		
RECTAL PRODUCTS - MISC.		
<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
ANTHELMINTICS		
ANTHELMINTICS		
<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	
ANTIANGINAL AGENTS		
NITRATES		
<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	
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
<i>buspirone 10mg tab</i>	1	
<i>buspirone 15mg tab</i>	1	
<i>buspirone 30mg tab</i>	1	
<i>buspirone 5mg tab</i>	1	

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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
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium 10mg/ml inh soln</i>	2	PA_BvD
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG HFA INHALER	3	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH POWDER INHALER	3	QL=30 EA/30 Days
<i>ipratropium bromide 0.02% inh soln</i>	2	PA_BvD
SPIRIVA RESPIMAT 1.25MCG/ACT INHALER	3	QL=4 GM/30 Days
LEUKOTRIENE MODULATORS		
<i>montelukast 10mg tab</i>	1	
<i>montelukast 4mg chew tab</i>	1	
<i>montelukast 5mg chew tab</i>	1	
<i>zafirlukast 10mg tab</i>	2	QL=60 EA/30 Days
<i>zafirlukast 20mg tab</i>	2	QL=60 EA/30 Days
STEROID INHALANTS		
ALVESCO 160MCG INHALER	3	QL=12.20 GM/30 Days
ALVESCO 80MCG INHALER	3	QL=12.20 GM/30 Days
ARNUITY 100MCG POWDER INHALER	3	QL=30 EA/30 Days
ARNUITY 200MCG POWDER INHALER	3	QL=30 EA/30 Days
ARNUITY 50MCG POWDER INHALER	3	QL=30 EA/30 Days
ASMANEX 100MCG HFA INHALER	3	QL=13 GM/30 Days
ASMANEX 110MCG (30ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 200MCG HFA INHALER	3	QL=13 GM/30 Days
ASMANEX 220MCG (120ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 220MCG (30ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 220MCG (60ACT) TWISTHALER	3	QL=1 EA/30 Days
ASMANEX 50MCG HFA INHALER	3	QL=13 GM/30 Days
<i>budesonide 0.25mg/2ml inh susp</i>	2	PA_BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/2ml inh susp</i>	2	PA_BvD QL=120 ML/30 Days
<i>budesonide 1mg/2ml inh susp</i>	2	PA_BvD QL=120 ML/30 Days
QVAR 40MCG REDIMALER	3	QL=10.60 GM/30 Days
QVAR 80MCG REDIMALER	3	QL=21.20 GM/30 Days
SYMPATHOMIMETICS		
ADVAIR 115-21MCG HFA INHALER	3	QL=12 GM/30 Days
ADVAIR 230-21MCG HFA INHALER	3	QL=12 GM/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER	3	QL=12 GM/30 Days
<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	1	PA_BvD
<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	1	
<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	1	PA_BvD
<i>albuterol 1.25mg/3ml neb soln</i>	1	PA_BvD
<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i>	1	QL=13.40 GM/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	1	QL=17 GM/30 Days
<i>albuterol 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
ANTICOAGULANTS		
ANTICOAGULANTS - MISC.		
<i>dabigatran etexilate 110mg cap</i>	2	QL=60 EA/30 Days
<i>dabigatran etexilate 150mg cap</i>	2	QL=60 EA/30 Days
<i>dabigatran etexilate 75mg cap</i>	2	QL=60 EA/30 Days
ELIQUIS 2.5MG TAB	3	QL=60 EA/30 Days
ELIQUIS 5MG 30-DAY STARTER PACK (74)	3	QL=74 EA/30 Days
ELIQUIS 5MG TAB	3	QL=74 EA/30 Days
<i>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
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
<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
ANTICONVULSANTS - MISC.		
BRIVIACT 100MG TAB	4	PA_NSO QL=60 EA/30 Days
BRIVIACT 10MG TAB	4	PA_NSO QL=60 EA/30 Days
BRIVIACT 10MG/ML ORAL SOLN	4	PA_NSO QL=600 ML/30 Days
BRIVIACT 25MG TAB	4	PA_NSO QL=60 EA/30 Days
BRIVIACT 50MG TAB	4	PA_NSO QL=60 EA/30 Days
BRIVIACT 75MG TAB	4	PA_NSO QL=60 EA/30 Days
<i>carbamazepine 100mg chew tab</i>	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
<i>phenobarbital 16.2mg tab</i>	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
<i>phenobarbital 97.2mg tab</i>	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
<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
CARBAMATES		
<i>felbamate 120mg/ml oral susp</i>	2	
<i>felbamate 400mg tab</i>	2	
<i>felbamate 600mg tab</i>	2	
XCOPRI 100MG TAB	4	PA_NSO QL=30 EA/30 Days
XCOPRI 150MG TAB	4	PA_NSO QL=60 EA/30 Days
XCOPRI 200MG TAB	4	PA_NSO QL=60 EA/30 Days
XCOPRI 25MG TAB	4	PA_NSO QL=30 EA/30 Days
XCOPRI 50MG TAB	4	PA_NSO QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XCOPRI TAB 100/150MG MAINTENANCE PACK (56)	4	PA_NSO QL=56 EA/28 Days
XCOPRI TAB 12.5/25MG TITRATION PACK (28)	4	PA_NSO QL=28 EA/28 Days
XCOPRI TAB 150/200MG PACK (56)	4	PA_NSO QL=56 EA/28 Days
XCOPRI TAB 150/200MG TITRATION PACK (28)	4	PA_NSO QL=28 EA/28 Days
XCOPRI TAB 50/100MG TITRATION PACK (28)	4	PA_NSO QL=28 EA/28 Days
GABA MODULATORS		
<i>tiagabine 12mg tab</i>	2	
<i>tiagabine 16mg tab</i>	2	
<i>tiagabine 2mg tab</i>	2	
<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
SUCCINIMIDES		
<i>ethosuximide 250mg cap</i>	2	
<i>ethosuximide 50mg/ml oral soln</i>	2	
<i>methsuximide 300mg cap</i>	2	
VALPROIC ACID		
<i>divalproex sodium 125mg dr cap</i>	1	
<i>divalproex sodium 125mg dr tab</i>	1	
<i>divalproex sodium 250mg dr tab</i>	1	
<i>divalproex sodium 500mg dr tab</i>	1	
<i>valproic acid 250mg cap</i>	1	
<i>valproic acid 50mg/ml oral soln</i>	1	
ANTIDEPRESSANTS		
ANTIDEPRESSANTS - MISC.		
AUVELITY 105-45MG ER TAB	4	PA_NSO QL=60 EA/30 Days
<i>bupropion 100mg sr (12hr) tab</i>	1	
<i>bupropion 100mg tab</i>	1	
<i>bupropion 150mg sr (12 hr) tab</i>	1	
<i>bupropion 200mg sr (12hr) tab</i>	1	
<i>bupropion 75mg tab</i>	1	
<i>bupropion xl 150mg (24 hr) tab</i>	1	
<i>bupropion xl 300mg (24hr) tab</i>	1	
<i>mirtazapine 15mg odt</i>	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
MONOAMINE OXIDASE INHIBITORS (MAOIS)		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<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	
SEROTONIN MODULATORS		
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	
NEFAZODONE 50MG TAB	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<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	
TRICYCLIC AGENTS		
<i>amitriptyline 100mg tab</i>	1	
<i>amitriptyline 10mg tab</i>	1	
<i>amitriptyline 150mg tab</i>	1	
<i>amitriptyline 25mg tab</i>	1	
<i>amitriptyline 50mg tab</i>	1	
<i>amitriptyline 75mg tab</i>	1	
<i>amoxapine 100mg tab</i>	2	
<i>amoxapine 150mg tab</i>	2	
<i>amoxapine 25mg tab</i>	2	
<i>amoxapine 50mg tab</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
ANTIDIABETICS		
ANTIDIABETIC COMBINATIONS		
<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
JENTADUETO 2.5-1000MG TAB	3	QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
DIABETIC OTHER		
<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
<i>repaglinide 1mg tab</i>	2	QL=120 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>repaglinide 2mg tab</i>	2	QL=240 EA/30 Days
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA 100MG TAB	3	QL=30 EA/30 Days
JANUVIA 25MG TAB	3	QL=30 EA/30 Days
JANUVIA 50MG TAB	3	QL=30 EA/30 Days
TRADJENTA 5MG TAB	3	QL=30 EA/30 Days
INCRETIN MIMETIC AGENTS		
<i>liraglutide 18mg/3ml pen inj</i>	2	PA QL=9 ML/30 Days
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	3	PA QL=2 ML/28 Days
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
INSULIN		
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
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	3	INS

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
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
SULFONYLUREAS		
<i>glimepiride 1mg tab</i>	1	
<i>glimepiride 2mg tab</i>	1	
<i>glimepiride 4mg tab</i>	1	
<i>glipizide 10mg er tab</i>	1	
<i>glipizide 10mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
ANTIDIARRHEALS		
ANTIDIARRHEAL AGENTS - MISC.		
<i>alosetron 0.5mg tab</i>	2	QL=60 EA/30 Days
<i>alosetron 1mg tab</i>	2	QL=60 EA/30 Days
<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	1	
<i>loperamide 2mg cap</i>	1	
XERMELO 250MG TAB	5	NDS PA QL=84 EA/28 Days
ANTIDOTES AND SPECIFIC ANTAGONISTS		
OPIOID ANTAGONISTS		
KLOXXADO 8MG/0.1ML NASAL SPRAY	3	
NALOXONE 0.4MG/ML CARTRIDGE	2	
<i>naloxone 0.4mg/ml inj</i>	1	
<i>naloxone 0.4mg/ml syringe</i>	1	
<i>naloxone 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	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
<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
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab</i>	1	
<i>meclizine 25mg tab</i>	1	
<i>scopolamine 1mg/72hr patch</i>	2	QL=10 EA/30 Days
ANTIEMETICS - MISCELLANEOUS		
<i>aprepitant 125mg cap</i>	2	PA_BvD QL=3 EA/2 Days
<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	2	PA_BvD QL=6 EA/4 Days
<i>aprepitant 40mg cap</i>	2	PA_BvD QL=3 EA/2 Days
<i>aprepitant 80mg cap</i>	2	PA_BvD QL=6 EA/4 Days
<i>dronabinol 10mg cap</i>	2	PA QL=60 EA/30 Days
<i>dronabinol 2.5mg cap</i>	2	PA QL=60 EA/30 Days
<i>dronabinol 5mg cap</i>	2	PA QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIFUNGALS		
ANTIFUNGALS		
AMPHOTERICIN B 50MG INJ	2	PA_BvD
<i>amphotericin b liposomal 50mg inj</i>	2	PA_BvD
<i>caspofungin acetate 50mg inj</i>	2	
<i>caspofungin 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>miconazole sodium 100mg inj</i>	2	
<i>miconazole 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
ANTIHYPERLIPIDEMICS		
ANTIHYPERLIPIDEMICS - MISC.		
<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
NEXLIZET 180-10MG TAB	3	PA QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<i>simvastatin 5mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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>	2	
<i>moexipril 7.5mg tab</i>	2	
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>	2	
<i>trandolapril 2mg tab</i>	2	
<i>trandolapril 4mg tab</i>	2	
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
<i>candesartan cilexetil 8mg tab</i>	2	QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
ANTIADRENERGIC ANTIHYPERTENSIVES		
<i>clonidine 0.1mg tab</i>	1	
<i>clonidine 0.1mg/24hr weekly patch</i>	2	QL=4 EA/28 Days
<i>clonidine 0.2mg tab</i>	1	
<i>clonidine 0.2mg/24hr weekly patch</i>	2	QL=4 EA/28 Days
<i>clonidine 0.3mg tab</i>	1	
<i>clonidine 0.3mg/24hr weekly patch</i>	2	QL=4 EA/28 Days
<i>doxazosin 1mg tab</i>	1	
<i>doxazosin 2mg tab</i>	1	
<i>doxazosin 4mg tab</i>	1	
<i>doxazosin 8mg tab</i>	1	
<i>guanfacine 1mg tab</i>	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	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<i>amlodipine/benazepril 5-40mg cap</i>	1	
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	2	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/valsartan 10-160mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/valsartan 10-320mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/valsartan 5-160mg tab</i>	2	QL=30 EA/30 Days
<i>amlodipine/valsartan 5-320mg tab</i>	2	QL=30 EA/30 Days
<i>atenolol/chlorthalidone 100-25mg tab</i>	2	
<i>atenolol/chlorthalidone 50-25mg tab</i>	2	
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	2	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	2	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	2	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	2	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>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	2	QL=60 EA/30 Days
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	2	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>	2	QL=60 EA/30 Days
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	2	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	
<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>	2	QL=30 EA/30 Days
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	2	QL=30 EA/30 Days
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	2	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	2	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	2	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	2	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	2	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	2	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIHYPERTENSIVES - MISC.		
<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>metirosine 250mg cap</i>	5	NDS PA
VASODILATORS		
<i>hydralazine 100mg tab</i>	1	
<i>hydralazine 10mg tab</i>	1	
<i>hydralazine 25mg tab</i>	1	
<i>hydralazine 50mg tab</i>	1	
<i>minoxidil 10mg tab</i>	1	
<i>minoxidil 2.5mg tab</i>	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
<i>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	
<i>azithromycin 600mg tab</i>	1	
<i>aztreonam 1gm inj</i>	2	
<i>aztreonam 2gm inj</i>	2	
<i>cefepime 1000mg inj</i>	2	
<i>cefepime 2000mg inj</i>	2	
CILASTATIN/IMIPENEM 250-250MG INJ	2	
<i>cilastatin/imipenem 500-500mg inj</i>	2	
<i>clarithromycin 250mg tab</i>	1	
CLARITHROMYCIN 25MG/ML ORAL SUSP	2	
<i>clarithromycin 500mg tab</i>	1	
CLARITHROMYCIN 50MG/ML ORAL SUSP	2	
<i>clindamycin 150mg cap</i>	1	
<i>clindamycin 300mg cap</i>	1	
<i>clindamycin 300mg/2ml inj</i>	2	
<i>clindamycin 300mg/50ml inj</i>	2	
<i>clindamycin 600mg/4ml inj</i>	2	
<i>clindamycin 600mg/50ml inj</i>	2	
<i>clindamycin 75mg cap</i>	1	
<i>clindamycin 75mg/5ml oral soln</i>	2	
<i>clindamycin 900mg/50ml inj</i>	2	
<i>clindamycin 900mg/6ml inj</i>	2	
<i>colistin 75mg/ml inj</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>daptomycin 500mg inj</i>	2	
DIFICID 200MG TAB	3	PA QL=20 EA/10 Days
DIFICID 40MG/ML ORAL SUSP	3	PA QL=136 ML/10 Days
<i>ertapenem 1gm inj</i>	2	
<i>erythromycin 250mg dr tab</i>	2	
<i>erythromycin 250mg tab</i>	2	
<i>erythromycin 333mg dr tab</i>	2	
<i>erythromycin 500mg dr tab</i>	2	
<i>erythromycin 500mg tab</i>	2	
<i>fidaxomicin 200mg tab</i>	2	PA QL=20 EA/10 Days
<i>fosfomycin 3gm powder for oral soln</i>	2	
IMPAVIDO 50MG CAP	5	NDS PA QL=84 EA/28 Days
<i>linezolid 100mg/5ml oral susp</i>	2	QL=1800 ML/30 Days
<i>linezolid 600mg tab</i>	2	QL=60 EA/30 Days
<i>linezolid 600mg/300ml inj</i>	2	
<i>meropenem 1gm inj</i>	2	
<i>meropenem 500mg inj</i>	2	
<i>methenamine hippurate 1gm tab</i>	2	
<i>metronidazole 250mg tab</i>	1	
<i>metronidazole 500mg tab</i>	1	
<i>metronidazole 5mg/ml inj</i>	2	
<i>nitazoxanide 500mg tab</i>	5	NDS PA QL=6 EA/3 Days
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	1	
<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
ANTIMALARIALS		
ANTIMALARIALS		
<i>atovaquone/proguanil 250-100mg tab</i>	2	
<i>atovaquone/proguanil 62.5-25mg tab</i>	2	
CHLOROQUINE PHOSPHATE 250MG TAB	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<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
SIRTURO 20MG TAB	5	NDS PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
<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	
ANTIMETABOLITES		
<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
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FRUZAQLA 1MG CAP	5	NDS PA_NSO QL=84 EA/28 Days
FRUZAQLA 5MG CAP	5	NDS PA_NSO QL=21 EA/28 Days
INLYTA 1MG TAB	5	NDS PA_NSO QL=180 EA/30 Days
INLYTA 5MG TAB	5	NDS PA_NSO QL=120 EA/30 Days
LENVIMA 10MG DAILY DOSE PACK (30)	5	NDS PA_NSO QL=30 EA/30 Days
LENVIMA 12MG DAILY DOSE PACK (90)	5	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 14MG DAILY DOSE PACK (60)	5	NDS PA_NSO QL=60 EA/30 Days
LENVIMA 18MG DAILY DOSE PACK (90)	5	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 20MG DAILY DOSE PACK (60)	5	NDS PA_NSO QL=60 EA/30 Days
LENVIMA 24MG DAILY DOSE PACK (90)	5	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 4MG DAILY DOSE PACK (30)	5	NDS PA_NSO QL=30 EA/30 Days
LENVIMA 8MG DAILY DOSE PACK (60)	5	NDS PA_NSO QL=60 EA/30 Days
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	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
TAGRISSE 80MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 15MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 30MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 45MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
DAURISMO 25MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
ERIVEDGE 150MG CAP	5	NDS PA_NSO QL=28 EA/28 Days
ODOMZO 200MG CAP	5	NDS PA_NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	1	QL=120 EA/30 Days
<i>abirtega 250mg tab</i>	1	QL=120 EA/30 Days
AKEEGA 500-100MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
AKEEGA 500-50MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
<i>anastrozole 1mg tab</i>	1	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
TRELSTAR 3.75MG INJ	4	QL=1 EA/28 Days
XTANDI 40MG CAP	5	NDS PA_NSO QL=120 EA/30 Days
XTANDI 40MG TAB	5	NDS PA_NSO QL=120 EA/30 Days
XTANDI 80MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
ANTINEOPLASTIC COMBINATIONS		
AVMAPKI/FAKZYNJA CO-PACK (66)	5	NDS PA_NSO QL=66 EA/28 Days
INQOVI 35-100MG TAB PACK (5)	5	NDS PA_NSO QL=5 EA/28 Days
KISQALI/FEMARA 400 CO-PACK (70)	5	NDS PA_NSO QL=70 EA/28 Days
KISQALI/FEMARA 600 CO-PACK (91)	5	NDS PA_NSO QL=91 EA/28 Days
LONSURF 6.14-15MG TAB	5	NDS PA_NSO QL=100 EA/28 Days
LONSURF 8.19-20MG TAB	5	NDS PA_NSO QL=80 EA/28 Days
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA 150MG CAP	5	NDS PA_NSO QL=240 EA/30 Days
ALUNBRIG 180MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
ALUNBRIG 30MG TAB	5	NDS PA_NSO QL=120 EA/30 Days
ALUNBRIG 90MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
ALUNBRIG TAB INITIATION PACK (30)	5	NDS PA_NSO QL=30 EA/30 Days
AUGTYRO 160MG CAP	5	NDS PA_NSO QL=60 EA/30 Days
AUGTYRO 40MG CAP	5	NDS PA_NSO QL=240 EA/30 Days
BALVERSA 3MG TAB	5	NDS PA_NSO QL=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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
<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
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
JAKAFI 25MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
JAKAFI 5MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
JAYPIRCA 100MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
JAYPIRCA 50MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
KISQALI TAB 200MG DAILY DOSE PACK (21)	5	NDS PA_NSO QL=21 EA/28 Days
KISQALI TAB 400MG DAILY DOSE PACK (42)	5	NDS PA_NSO QL=42 EA/28 Days
KISQALI TAB 600MG DAILY DOSE PACK (63)	5	NDS PA_NSO QL=63 EA/28 Days
KOSELUGO 10MG CAP	5	NDS PA_NSO QL=240 EA/30 Days
KOSELUGO 25MG CAP	5	NDS PA_NSO QL=120 EA/30 Days
KRAZATI 200MG TAB	5	NDS PA_NSO QL=180 EA/30 Days
<i>lapatinib 250mg tab</i>	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

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: 02/01/2026

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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ZELBORAF 240MG TAB	5	NDS PA_NSO QL=240 EA/30 Days
ZOLINZA 100MG CAP	5	NDS PA_NSO QL=120 EA/30 Days
ZYDELIG 100MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
ZYDELIG 150MG TAB	5	NDS PA_NSO QL=60 EA/30 Days
ZYKADIA 150MG TAB	5	NDS PA_NSO QL=90 EA/30 Days
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000UNIT/0.5ML INJ	5	NDS PA_NSO
AYVAKIT 100MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 200MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 25MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 300MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 50MG TAB	5	NDS PA_NSO QL=30 EA/30 Days
BESREMI 500MCG/ML SYRINGE	5	NDS PA_NSO QL=2 ML/28 Days
<i>bexarotene 75mg cap</i>	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	
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
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
IWILFIN 192MG TAB	5	NDS PA_NSO QL=240 EA/30 Days
<i>leucovorin 10mg tab</i>	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	
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa 25mg tab</i>	2	
<i>entacapone 200mg tab</i>	2	QL=300 EA/30 Days
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate 0.5mg tab</i>	1	
<i>benztropine mesylate 1mg tab</i>	1	
<i>benztropine mesylate 2mg tab</i>	1	
<i>trihexyphenidyl 2mg tab</i>	1	
<i>trihexyphenidyl 5mg tab</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine 100mg cap</i>	1	
<i>amantadine 10mg/ml oral soln</i>	2	
<i>bromocriptine 2.5mg tab</i>	2	
<i>bromocriptine 5mg cap</i>	2	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	2	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ropinirole 2mg tab</i>	1	
<i>ropinirole 3mg tab</i>	1	
<i>ropinirole 4mg tab</i>	1	
<i>ropinirole 5mg tab</i>	1	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline 0.5mg tab</i>	2	QL=30 EA/30 Days
<i>rasagiline 1mg tab</i>	2	QL=30 EA/30 Days
<i>selegiline 5mg cap</i>	2	
<i>selegiline 5mg tab</i>	2	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<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	
LITHIUM CARBONATE 600MG CAP	1	
<i>lithium citrate 60mg/ml oral soln</i>	2	
ANTIPSYCHOTICS - MISC.		
CAPLYTA 10.5MG CAP	4	PA_NSO QL=30 EA/30 Days
CAPLYTA 21MG CAP	4	PA_NSO QL=30 EA/30 Days
CAPLYTA 42MG CAP	4	PA_NSO QL=30 EA/30 Days
COBENFY 20-100MG CAP	4	PA_NSO QL=60 EA/30 Days
COBENFY 20-50MG CAP	4	PA_NSO QL=60 EA/30 Days
COBENFY 30-125MG CAP	4	PA_NSO QL=60 EA/30 Days
COBENFY CAP 28-DAY STARTER KIT PACK (56)	4	PA_NSO QL=56 EA/28 Days
<i>haloperidol 0.5mg tab</i>	1	
<i>haloperidol 10mg tab</i>	1	
<i>haloperidol 1mg tab</i>	1	
<i>haloperidol 20mg tab</i>	1	
<i>haloperidol 2mg tab</i>	1	
<i>haloperidol 2mg/ml oral soln</i>	1	
<i>haloperidol 5mg tab</i>	1	
<i>haloperidol 5mg/ml inj</i>	2	
<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	2	
<i>haloperidol decanoate 100mg/ml (5ml) inj</i>	2	
<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	2	
<i>haloperidol decanoate 50mg/ml (5ml) inj</i>	2	
<i>lurasidone 120mg tab</i>	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
BENZISOXAZOLES		
FANAPT 10MG TAB	4	PA_NSO QL=60 EA/30 Days
FANAPT 12MG TAB	4	PA_NSO QL=60 EA/30 Days
FANAPT 1MG TAB	4	PA_NSO QL=60 EA/30 Days
FANAPT 2MG TAB	4	PA_NSO QL=60 EA/30 Days
FANAPT 4MG TAB	4	PA_NSO QL=60 EA/30 Days
FANAPT 6MG TAB	4	PA_NSO QL=60 EA/30 Days
FANAPT 8MG TAB	4	PA_NSO QL=60 EA/30 Days
FANAPT TAB TITRATION PACK (8)	4	PA_NSO QL=60 EA/30 Days
INVEGA 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
DIBENZAPINES		
<i>asenapine 10mg sl tab</i>	2	QL=60 EA/30 Days
<i>asenapine 2.5mg sl tab</i>	2	QL=60 EA/30 Days
<i>asenapine 5mg sl tab</i>	2	QL=60 EA/30 Days
<i>clozapine 100mg odt</i>	2	QL=270 EA/30 Days
<i>clozapine 100mg tab</i>	2	
<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
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
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	
QUINOLINONE DERIVATIVES		
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
REXULTI 3MG TAB	4	PA_NSO QL=30 EA/30 Days
REXULTI 4MG TAB	4	PA_NSO QL=30 EA/30 Days
ANTISPASTICITY AGENTS		
ANTISPASTICITY AGENTS		
<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	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir 20mg/ml oral soln</i>	2	QL=960 ML/30 Days
<i>abacavir 300mg tab</i>	2	QL=60 EA/30 Days
<i>abacavir/lamivudine 600-300mg tab</i>	2	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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 150-800MG TAB	5	QL=30 EA/30 Days
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
HEPATITIS AGENTS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
HERPES AGENTS		
<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
<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
INFLUENZA AGENTS		
<i>oseltamivir 30mg cap</i>	1	QL=84 EA/180 Days
<i>oseltamivir 45mg cap</i>	1	QL=42 EA/180 Days
<i>oseltamivir 6mg/ml oral susp</i>	2	QL=540 ML/180 Days
<i>oseltamivir 75mg cap</i>	1	QL=42 EA/180 Days
RELENZA 5MG/BLISTER POWDER INHALER	3	QL=120 EA/365 Days
RIMANTADINE 100MG TAB	2	
XOFLUZA 40MG TAB	4	QL=2 EA/30 Days
XOFLUZA 80MG TAB	4	QL=1 EA/30 Days
MISC. ANTIVIRALS		
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 PELLET	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
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
BETA BLOCKERS CARDIO-SELECTIVE		
<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	
<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
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	2	
<i>nadolol 40mg tab</i>	2	
<i>nadolol 80mg tab</i>	2	
<i>pindolol 10mg tab</i>	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<i>timolol 5mg tab</i>	2	
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine 10mg tab</i>	1	
<i>amlodipine 2.5mg tab</i>	1	
<i>amlodipine 5mg tab</i>	1	
<i>cartia 120mg er (24hr) cap</i>	2	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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		
ALPHA-ADRENERGIC AGONISTS		
<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	
ANTIARRHYTHMICS		
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>propafenone 425mg er cap</i>	2	
QUINIDINE SULFATE 200MG TAB	2	
QUINIDINE SULFATE 300MG TAB	2	
CARDIOVASCULAR AGENTS, OTHER		
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
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
CENTRAL NERVOUS SYSTEM AGENTS		
CENTRAL NERVOUS SYSTEM, OTHER		
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
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
<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	
CEPHALOSPORINS - 2ND GENERATION		
CEFACLOR 250MG CAP	2	
CEFACLOR 500MG CAP	2	
<i>cefoxitin 1gm inj</i>	2	
<i>cefoxitin 200mg/ml inj</i>	2	
<i>cefoxitin 2gm inj</i>	2	
<i>cefprozil 250mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
CEPHALOSPORINS - 3RD GENERATION		
<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	
CEFTAZIDIME 200MG/ML INJ	2	
<i>ceftazidime 2gm inj</i>	2	
<i>ceftriaxone 10gm inj</i>	2	
<i>ceftriaxone 1gm inj</i>	2	
<i>ceftriaxone 250mg inj</i>	2	
<i>ceftriaxone 2gm inj</i>	2	
<i>ceftriaxone 500mg inj</i>	2	
<i>tazicef 1gm inj</i>	2	
<i>tazicef 2gm inj</i>	2	
TAZICEF 6GM INJ	2	
DENTAL AND ORAL AGENTS		
DENTAL AND ORAL AGENTS		
<i>cevimeline 30mg cap</i>	2	
<i>chlorhexidine gluconate 0.12% mouthwash</i>	1	
<i>clotrimazole 10mg lozenge</i>	1	
<i>kourzeq 0.1% oral paste</i>	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	
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>accutane 10mg cap</i>	2	
<i>accutane 20mg cap</i>	2	
<i>accutane 40mg cap</i>	2	
<i>amneesteem 10mg cap</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<i>ERY 2% PAD</i>	2	QL=60 EA/30 Days
<i>ERYTHROMYCIN 2% TOPICAL GEL</i>	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	
<i>isotretinoin 30mg cap</i>	2	
<i>isotretinoin 40mg cap</i>	2	
<i>sulfacetamide sodium 10% topical lotion</i>	2	QL=118 ML/30 Days
<i>tretinoin 0.01% topical gel</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.025% topical cream</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.025% topical gel</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.05% topical cream</i>	2	PA QL=45 GM/30 Days
<i>tretinoin 0.1% topical cream</i>	2	PA QL=45 GM/30 Days
<i>zenatane 10mg cap</i>	2	
<i>zenatane 20mg cap</i>	2	
<i>zenatane 30mg cap</i>	2	
<i>zenatane 40mg cap</i>	2	
ANTIBIOTICS - TOPICAL		
<i>gentamicin 0.1% topical cream</i>	2	QL=30 GM/30 Days
<i>gentamicin 0.1% topical ointment</i>	2	QL=30 GM/30 Days
<i>mupirocin 2% topical ointment</i>	1	QL=220 GM/30 Days
ANTIFUNGALS - TOPICAL		
<i>ciclopirox 0.77% topical cream</i>	1	QL=90 GM/30 Days
<i>ciclopirox 0.77% topical gel</i>	2	QL=100 GM/30 Days
<i>ciclopirox 0.77% topical lotion</i>	2	QL=60 ML/30 Days
<i>ciclopirox 1% shampoo</i>	2	QL=120 ML/30 Days
<i>ciclopirox 8% topical soln</i>	1	QL=13.20 ML/30 Days
<i>clotrimazole 1% topical cream</i>	1	QL=45 GM/30 Days
<i>clotrimazole/betamethasone 1-0.05% topical cream</i>	1	QL=90 GM/30 Days
<i>econazole nitrate 1% topical cream</i>	1	QL=85 GM/30 Days
<i>ketoconazole 2% shampoo</i>	1	QL=240 ML/30 Days
<i>ketoconazole 2% topical cream</i>	1	QL=120 GM/30 Days
<i>nyamyc 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>nystatin 100000 unit/gm topical ointment</i>	1	QL=30 GM/30 Days
<i>nystatin 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
<i>nystatin 100000unit/ml topical cream</i>	1	QL=30 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% topical ointment</i>	1	QL=60 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% topical cream</i>	1	QL=60 GM/30 Days
<i>nystop 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene 1% topical gel</i>	5	NDS PA_NSO QL=60 GM/30 Days
<i>diclofenac sodium 3% topical gel</i>	2	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	2	QL=10 ML/30 Days
<i>fluorouracil 5% topical cream</i>	2	QL=40 GM/30 Days
<i>fluorouracil 5% topical soln</i>	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
ANTIPSORIATICS		
<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
METHOXSALEN 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
CORTICOSTEROIDS - TOPICAL		
<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
<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
HYDROCORTISONE 2.5% TOPICAL LOTION	2	QL=118 ML/30 Days
<i>hydrocortisone 2.5% topical ointment</i>	1	QL=240 GM/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
TRIAMCINOLONE ACETONIDE 0.025% LOTION	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
LOCAL ANESTHETICS - TOPICAL		
<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
MISC. DERMATOLOGICAL PRODUCTS		
<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
ROSACEA AGENTS		
<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
WOUND CARE PRODUCTS		
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	
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide 125mg tab</i>	1	
<i>acetazolamide 250mg tab</i>	1	
<i>acetazolamide 500mg er cap</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>methazolamide 25mg tab</i>	2	
<i>methazolamide 50mg tab</i>	2	
DIURETIC COMBINATIONS		
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	
LOOP DIURETICS		
<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	
FUROSCIX 80MG/10ML CARTRIDGE	5	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	2	
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>torsemide 100mg tab</i>	1	
<i>torsemide 10mg tab</i>	1	
<i>torsemide 20mg tab</i>	1	
<i>torsemide 5mg tab</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone 25mg tab</i>	1	
<i>chlorthalidone 50mg tab</i>	1	
<i>hydrochlorothiazide 12.5mg cap</i>	1	
<i>hydrochlorothiazide 12.5mg tab</i>	1	
<i>hydrochlorothiazide 25mg tab</i>	1	
<i>hydrochlorothiazide 50mg tab</i>	1	
<i>indapamide 1.25mg tab</i>	1	
<i>indapamide 2.5mg tab</i>	1	
<i>metolazone 10mg tab</i>	1	
<i>metolazone 2.5mg tab</i>	1	
<i>metolazone 5mg tab</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
<i>alendronate sodium 10mg tab</i>	1	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
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	
REVCovi 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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
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 30MG/3ML PEN INJ	5	NDS PA
NORDITROPIN 5MG/1.5ML PEN INJ	5	NDS PA
OMNITROPE 10MG/1.5ML CARTRIDGE	5	NDS PA
OMNITROPE 5.8MG INJ	5	NDS PA
OMNITROPE 5MG/1.5ML CARTRIDGE	5	NDS PA
SOMAVERT 10MG INJ	5	NDS PA QL=60 EA/30 Days
SOMAVERT 15MG INJ	5	NDS PA QL=60 EA/30 Days
SOMAVERT 20MG INJ	5	NDS PA QL=60 EA/30 Days
SOMAVERT 25MG INJ	5	NDS PA QL=30 EA/30 Days
SOMAVERT 30MG INJ	5	NDS PA QL=30 EA/30 Days
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>abigale 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	
ESTROGENS		
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
<i>ciprofloxacin 250mg tab</i>	1	
CIPROFLOXACIN 2MG/ML INJ	2	
<i>ciprofloxacin 500mg tab</i>	1	
<i>ciprofloxacin 750mg tab</i>	1	
<i>levofloxacin 250mg tab</i>	1	
<i>levofloxacin 25mg/ml oral soln</i>	2	
<i>levofloxacin 500mg tab</i>	1	
<i>levofloxacin 500mg/100ml inj</i>	2	
<i>levofloxacin 750mg tab</i>	1	
<i>levofloxacin 750mg/150ml inj</i>	2	
MOXIFLOXACIN 1.6MG/ML INJ	2	
<i>moxifloxacin 400mg tab</i>	2	
GASTROINTESTINAL AGENTS		
GASTROINTESTINAL AGENTS, OTHER		
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ursodiol 500mg tab</i>	2	
VOWST 30000000UNIT CAP	5	PA QL=12 EA/90 Days
GASTROINTESTINAL AGENTS - MISC.		
INFLAMMATORY BOWEL AGENTS		
<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
<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>tropium 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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<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	
GOUT AGENTS		
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	1	
<i>allopurinol 300mg tab</i>	1	
<i>colchicine 0.6mg tab</i>	2	
<i>colchicine/probenecid 0.5-500mg tab</i>	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	
HEMATOLOGICAL AGENTS - MISC.		
PLATELET AGGREGATION INHIBITORS		
<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
HEMATOPOIETIC AGENTS		
HEMATOPOIETIC GROWTH FACTORS		
DOPTELET 20MG TAB	5	NDS PA QL=60 EA/30 Days
DOPTELET TAB 40MG DAILY DOSE PACK (10)	5	NDS PA QL=10 EA/5 Days
DOPTELET TAB 60MG DAILY DOSE PACK (15)	5	NDS PA QL=15 EA/5 Days
<i>eltrombopag 12.5mg powder for oral susp</i>	5	NDS PA QL=90 EA/30 Days
<i>eltrombopag 12.5mg tab</i>	5	NDS PA QL=30 EA/30 Days
<i>eltrombopag 25mg powder for oral susp</i>	5	NDS PA QL=180 EA/30 Days
<i>eltrombopag 25mg tab</i>	5	NDS PA QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
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
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>tranexamic acid 650mg tab</i>	2	QL=30 EA/5 Days
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)		
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)		
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>prednisone 1mg tab</i>	1	PA_BvD
PREDNISONE 1MG/ML ORAL SOLN	2	PA_BvD
<i>prednisone 2.5mg tab</i>	1	PA_BvD
<i>prednisone 20mg tab</i>	1	PA_BvD
<i>prednisone 50mg tab</i>	1	PA_BvD
<i>prednisone 5mg tab</i>	1	PA_BvD
<i>prednisone 5mg tab pack (21)</i>	2	
<i>prednisone 5mg tab pack (48)</i>	2	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
NON-BARBITURATE HYPNOTICS		
<i>eszopiclone 1mg tab</i>	1	QL=30 EA/30 Days
<i>eszopiclone 2mg tab</i>	1	QL=30 EA/30 Days
<i>eszopiclone 3mg tab</i>	1	QL=30 EA/30 Days
<i>ramelteon 8mg tab</i>	2	QL=30 EA/30 Days
<i>temazepam 15mg cap</i>	1	QL=30 EA/30 Days
<i>temazepam 30mg cap</i>	1	QL=30 EA/30 Days
<i>zaleplon 10mg cap</i>	1	QL=30 EA/30 Days
<i>zaleplon 5mg cap</i>	1	QL=30 EA/30 Days
<i>zolpidem tartrate 10mg tab</i>	1	QL=30 EA/30 Days
<i>zolpidem tartrate 12.5mg er tab</i>	2	QL=30 EA/30 Days
<i>zolpidem tartrate 5mg tab</i>	1	QL=60 EA/30 Days
<i>zolpidem tartrate 6.25mg er tab</i>	2	QL=30 EA/30 Days
IMMUNOLOGICAL AGENTS		
ANGIOEDEMA (HAE) AGENTS		
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
IMMUNIZING AGENTS, PASSIVE		
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
VACCINES		
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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
LAXATIVES		
LAXATIVE COMBINATIONS		
GAVILYTE-C POWDER FOR ORAL SOLN	1	
<i>gavilyte-g powder for oral soln</i>	1	
<i>gavilyte-n powder for oral soln</i>	1	
<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	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	
LAXATIVES - MISCELLANEOUS		
<i>constulose 10gm/15ml oral soln</i>	1	
<i>lactulose 667mg/ml oral soln</i>	1	
LINZESS 145MCG CAP	3	QL=30 EA/30 Days
LINZESS 290MCG CAP	3	QL=30 EA/30 Days
LINZESS 72MCG CAP	3	QL=30 EA/30 Days
<i>lubiprostone 24mcg cap</i>	2	QL=60 EA/30 Days
<i>lubiprostone 8mcg cap</i>	2	QL=60 EA/30 Days
MOVANTIK 12.5MG TAB	3	PA QL=30 EA/30 Days
MOVANTIK 25MG TAB	3	PA QL=30 EA/30 Days
TRULANCE 3MG TAB	3	QL=30 EA/30 Days
MEDICAL DEVICES AND SUPPLIES		
PARENTERAL THERAPY SUPPLIES		
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	
MIGRAINE PRODUCTS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MIGRAINE PRODUCTS		
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
UBRELVY 50MG TAB	3	PA QL=16 EA/30 Days
ZAVZPRET 10MG/ACT NASAL SPRAY	3	PA QL=6 EA/30 Days
SEROTONIN AGONISTS		
<i>naratriptan 1mg tab</i>	2	QL=18 EA/30 Days
<i>naratriptan 2.5mg tab</i>	2	QL=18 EA/30 Days
<i>rizatriptan 10mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 10mg tab</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg tab</i>	1	QL=36 EA/60 Days
<i>sumatriptan 100mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 20mg/act nasal spray</i>	2	QL=12 EA/30 Days
<i>sumatriptan 25mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 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
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
<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
IMMUNOMODULATORS		
<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
IMMUNOSUPPRESSIVE AGENTS		
ARCALYST 220MG INJ	5	NDS PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<i>cyclosporine modified 50mg cap</i>	2	PA_BvD
ENVARUS XR 0.75MG TAB	4	PA_BvD
ENVARUS XR 1MG TAB	4	PA_BvD
ENVARUS 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
POTASSIUM REMOVING AGENTS		
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	1	QL=60 ML/30 Days
<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	2	QL=50 ML/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	1	QL=32 GM/30 Days
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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	
<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
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPHTHALMIC		
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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LEVOBUNOLOL 0.5% OPHTH SOLN	1	
<i>timolol 0.25% ophth gel</i>	2	
<i>timolol 0.25% ophth soln</i>	1	
<i>timolol 0.5% ophth gel</i>	2	
<i>timolol 0.5% ophth soln</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
APRACLONIDINE 0.5% OPHTH SOLN	2	
<i>brimonidine tartrate 0.1% ophth soln</i>	2	
<i>brimonidine tartrate 0.15% ophth soln</i>	2	
<i>brimonidine tartrate 0.2% ophth soln</i>	1	
SIMBRINZA 0.2-1% OPHTH SUSP	3	QL=16 ML/30 Days
OPHTHALMIC ANTI-INFECTIVES		
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
<i>neo-polycin 5mg-400unit-10000unit ophth ointment</i>	2	QL=7 GM/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>polycin 0.5-10unit/mg ophth ointment</i>	1	QL=7 GM/7 Days
<i>polymyxin b/trimethoprim 10000 unit/ml-0.1% ophth soln</i>	1	QL=10 ML/7 Days
SULFACETAMIDE SODIUM 10% 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
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPHTH SOLN	3	QL=5 ML/30 Days
ROCKLATAN 0.02-0.005% OPHTH SOLN	3	QL=5 ML/30 Days
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	2	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>	1	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>loteprednol etabonate 0.5% ophth susp</i>	2	
<i>neo-polycin hc ophth ointment</i>	2	
NEOMYCIN/POLYMYXIN/BACITRACIN/HYDROCO TISONE 1% OPTH OINTMENT	2	
<i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>	1	
PREDNISOLONE 1% OPTH SOLN	2	
<i>prednisolone acetate 1% ophth susp</i>	2	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN	1	
OPHTHALMICS - MISC.		
<i>atropine sulfate 1% ophth soln</i>	2	
<i>azelastine 0.05% ophth soln</i>	1	
CROMOLYN SODIUM 4% OPTH SOLN	1	
<i>cyclosporine 0.05% ophth susp</i>	2	QL=60 EA/30 Days
CYSTADROPS 0.37% OPTH 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% OPTH 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 OPTH 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% OPTH SOLN	3	QL=60 EA/30 Days
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03% ophth soln</i>	2	QL=5 ML/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 ML/30 Days
LUMIGAN 0.01% OPTH SOLN	3	QL=5 ML/30 Days
<i>travoprost 0.004% ophth soln</i>	2	QL=5 ML/30 Days
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2% otic soln</i>	1	
<i>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</i> <i>3.5-10000unit-1% otic soln</i>	2	
<i>neomycin/polymyxin/hydrocortisone</i> <i>3.5-10000unit-1% otic susp</i>	2	
<i>ofloxacin 0.3% otic soln</i>	1	
PENICILLINS		
AMINOPENICILLINS		
AMOXICILLIN 125MG CHEW TAB	1	
<i>amoxicillin 250mg cap</i>	1	
AMOXICILLIN 250MG CHEW TAB	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
<i>ampicillin 500mg cap</i>	1	
NATURAL PENICILLINS		
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	
PENICILLIN COMBINATIONS		
<i>amoxicillin/clavulanate 250-125mg tab</i>	1	
<i>amoxicillin/clavulanate 500-125mg tab</i>	1	
<i>amoxicillin/clavulanate 875-125mg tab</i>	1	
<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	1	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	2	
<i>ampicillin/sulbactam 1000-500mg inj</i>	2	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	2	
<i>piperacillin/tazobactam 2000-250mg inj</i>	2	
<i>piperacillin/tazobactam 3000-375mg inj</i>	2	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	2	
<i>piperacillin/tazobactam 4000-500mg inj</i>	2	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PROGESTINS		
PROGESTINS		
<i>camila 0.35mg tab 28-day pack</i>	2	
<i>deblitane 0.35mg tab 28-day pack</i>	2	
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	3	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	
<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	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium 333mg dr tab</i>	2	
<i>disulfiram 250mg tab</i>	2	
ANTIDEMENTIA AGENTS		
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
<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
MOVEMENT DISORDER DRUG THERAPY		
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 TITRATION 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
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	5	NDS QL=1 EA/28 Days
AVONEX 30MCG/0.5ML SYRINGE	5	NDS QL=1 EA/28 Days
BETASERON 0.3MG INJ	5	NDS QL=14 EA/28 Days
<i>dalfampridine 10mg er tab</i>	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
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
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
NUEDEXTA 20-10MG CAP	3	PA QL=60 EA/30 Days
PIMOZIDE 1MG TAB	2	
PIMOZIDE 2MG TAB	2	
SMOKING DETERRENTS		
<i>bupropion 150mg sr (12hr) tab</i>	1	
NICOTROL 10MG/ML NASAL INHALER	3	
<i>varenicline 0.5mg tab</i>	2	QL=56 EA/28 Days
<i>varenicline 0.5mg/1mg first month pack (53)</i>	2	QL=53 EA/28 Days
<i>varenicline 1mg tab</i>	2	QL=56 EA/28 Days
<i>varenicline 1mg tab pack (56)</i>	2	QL=56 EA/28 Days
RESPIRATORY TRACT AGENTS		
ANTIHIISTAMINES		
<i>cyproheptadine 0.4mg/ml oral soln</i>	1	
<i>cyproheptadine 4mg tab</i>	1	
<i>desloratadine 5mg tab</i>	2	
<i>levocetirizine 5mg tab</i>	1	
<i>promethazine 1.25mg/ml oral soln</i>	1	
<i>promethazine 12.5mg tab</i>	1	
<i>promethazine 25mg tab</i>	1	
<i>promethazine 50mg tab</i>	1	
PULMONARY ANTIHYPERTENSIVES		
ADEMPAS 0.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	5	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	5	NDS PA QL=90 EA/30 Days
<i>alyq 20mg tab</i>	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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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
RESPIRATORY TRACT AGENTS, OTHER		
<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

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
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
SLEEP DISORDER AGENTS		
SLEEP DISORDERS, OTHER		
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
LUMRYZ GRANULES FOR ORAL SUSP 28-DAY STARTER PACK (28)	5	NDS PA QL=28 EA/28 Days
SODIUM OXYBATE 500MG/ML ORAL SOLN	5	NDS PA QL=540 ML/30 Days
SUNOSI 150MG TAB	3	PA QL=30 EA/30 Days
SUNOSI 75MG TAB	3	PA QL=30 EA/30 Days
SULFONAMIDES		
SULFONAMIDES		
<i>sulfadiazine 500mg tab</i>	2	
<i>sulfamethoxazole/trimethoprim 200-40mg/5ml oral susp</i>	2	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
TETRACYCLINES		
TETRACYCLINES		
<i>doxy 100mg inj</i>	2	
<i>doxycycline hyclate 100mg cap</i>	1	
<i>doxycycline hyclate 100mg 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	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole 10mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>methimazole 5mg tab</i>	1	
<i>propylthiouracil 50mg tab</i>	2	
THYROID HORMONES		
<i>levothyroxine sodium 100mcg tab</i>	1	
<i>levothyroxine sodium 112mcg tab</i>	1	
<i>levothyroxine sodium 125mcg tab</i>	1	
<i>levothyroxine sodium 137mcg tab</i>	1	
<i>levothyroxine sodium 150mcg tab</i>	1	
<i>levothyroxine sodium 175mcg tab</i>	1	
<i>levothyroxine sodium 200mcg tab</i>	1	
<i>levothyroxine sodium 25mcg tab</i>	1	
<i>levothyroxine sodium 300mcg tab</i>	1	
<i>levothyroxine sodium 50mcg tab</i>	1	
<i>levothyroxine sodium 75mcg tab</i>	1	
<i>levothyroxine sodium 88mcg tab</i>	1	
<i>levoxyl 100mcg tab</i>	1	
<i>levoxyl 112mcg tab</i>	1	
<i>levoxyl 125mcg tab</i>	1	
<i>levoxyl 137mcg tab</i>	1	
<i>levoxyl 150mcg tab</i>	1	
<i>levoxyl 175mcg tab</i>	1	
<i>levoxyl 200mcg tab</i>	1	
<i>levoxyl 25mcg tab</i>	1	
<i>levoxyl 50mcg tab</i>	1	
<i>levoxyl 75mcg tab</i>	1	
<i>levoxyl 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	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	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>dicyclomine 10mg cap</i>	1	
<i>dicyclomine 20mg tab</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 02/01/2026

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dicyclomine 2mg/ml oral soln</i>	2	
<i>glycopyrrolate 1mg tab</i>	2	
<i>glycopyrrolate 2mg tab</i>	2	
H-2 ANTAGONISTS		
<i>cimetidine 200mg tab</i>	2	
<i>cimetidine 300mg tab</i>	2	
<i>cimetidine 400mg tab</i>	2	
<i>cimetidine 800mg tab</i>	2	
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
MISC. ANTI-ULCER		
<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	
PROTON PUMP INHIBITORS		
<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	
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<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	
VAGINAL ESTROGENS		
<i>estradiol 0.01% vaginal cream</i>	1	
<i>estradiol 0.01mg vaginal insert</i>	2	
PREMARIN 0.625MG/GM VAGINAL CREAM	3	
<i>yuvafem 10mcg vaginal insert</i>	2	

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ALPHABETICAL LISTING OF DRUGS

A		<i>acitretin 17.5mg cap</i>	62	<i>albuterol 108mcg HFA</i>	18
<i>abacavir 20mg/ml oral soln</i>	52	<i>acitretin 25mg cap</i>	62	<i>inhaler (6.7gm, Proventil equiv)</i>	
<i>abacavir 300mg tab</i>	52	ACTHIB INJ	75	<i>albuterol 108mcg HFA</i>	18
<i>abacavir/lamivudine 600-300mg tab</i>	52	ACTIMMUNE	46	<i>inhaler (8.5gm, Proair equiv)</i>	
<i>abigale 1/0.5mg tab 28-day pack</i>	67	<i>acyclovir 200mg cap</i>	55	<i>albuterol 5mg/ml (0.5%) inh soln</i>	18
<i>abigale lo tab 0.5/0.1mg 28-day pack</i>	67	<i>acyclovir 400mg tab</i>	55		
ABILIFY MAINTENA 300MG INJ	51	<i>acyclovir 40mg/ml oral susp</i>	55	<i>alclometasone dipropionate 0.05% topical cream</i>	63
ABILIFY MAINTENA 300MG/1.5ML SYRINGE	51	<i>acyclovir 5% topical ointment</i>	64	ALCLOMETASONE	63
ABILIFY MAINTENA 400MG INJ	51	<i>acyclovir 50mg/ml inj</i>	55	DIPROPIONATE 0.05% TOPICAL OINTMENT	
ABILIFY MAINTENA 400MG/2ML SYRINGE	51	<i>acyclovir 800mg tab</i>	55	ALCOHOL SWAB 1X1 (DIABETIC)	77
<i>abiraterone acetate 250mg tab</i>	40	ADACEL INJ	75	ALECENSA 150MG CAP	41
<i>abirtega 250mg tab</i>	40	ADACEL SYRINGE	75	<i>alendronate sodium 10mg tab</i>	65
ABRYSVO 120MCG/0.5ML INJ	75	<i>adefovir dipivoxil 10mg tab</i>	55	<i>alendronate sodium 35mg tab</i>	66
<i>acamprosate calcium 333mg dr tab</i>	85	ADEMPAS 0.5MG TAB	87	<i>alendronate sodium 70mg tab</i>	66
<i>acarbose 100mg tab</i>	28	ADEMPAS 1.5MG TAB	87	<i>alfuzosin 10mg er tab</i>	72
<i>acarbose 25mg tab</i>	28	ADEMPAS 1MG TAB	87	<i>aliskiren 150mg tab</i>	37
<i>acarbose 50mg tab</i>	28	ADEMPAS 2.5MG TAB	87	<i>aliskiren 300mg tab</i>	37
<i>accutane 10mg cap</i>	60	ADEMPAS 2MG TAB	87	<i>allopurinol 100mg tab</i>	73
<i>accutane 20mg cap</i>	60	ADVAIR 115-21MCG HFA INHALER	18	<i>allopurinol 300mg tab</i>	73
<i>accutane 40mg cap</i>	60	ADVAIR 230-21MCG HFA INHALER	18	<i>alosetron 0.5mg tab</i>	31
<i>acebutolol 200mg cap</i>	56	ADVAIR 45-21MCG/ACT HFA INHALER	18	<i>alosetron 1mg tab</i>	31
<i>acebutolol 400mg cap</i>	56	AIMOVIG 140MG/ML	78	<i>alprazolam 0.25mg tab</i>	17
<i>acetazolamide 125mg tab</i>	64	AUTO-INJECTOR		<i>alprazolam 0.5mg tab</i>	17
<i>acetazolamide 250mg tab</i>	64	AIMOVIG 70MG/ML	78	<i>alprazolam 1mg tab</i>	17
<i>acetazolamide 500mg er cap</i>	64	AUTO-INJECTOR		<i>alprazolam 2mg tab</i>	17
<i>acetic acid 2% otic soln</i>	83	AKEEGA 500-100MG TAB	40	<i>altavera tab 28-day pack</i>	67
<i>acetylcysteine 100mg/ml inh soln</i>	88	AKEEGA 500-50MG TAB	40	ALUNBRIG 180MG TAB	41
<i>acetylcysteine 200mg/ml inh soln</i>	88	<i>albendazole 200mg tab</i>	16	ALUNBRIG 30MG TAB	41
<i>acitretin 10mg cap</i>	62	<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	18	ALUNBRIG 90MG TAB	41
		<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	18	ALUNBRIG TAB	41
		<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	18	INITIATION PACK (30)	
		<i>albuterol 1.25mg/3ml neb soln</i>	18	ALVESCO 160MCG INHALER	18
				ALVESCO 80MCG INHALER	18

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ALPHABETICAL LISTING OF DRUGS

<i>alyacen 1/35 tab 28-day pack</i>	67	<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	35	<i>amoxicillin/clavulanate 500-125mg tab</i>	84
ALYFTREK 10-50-125MG TAB	88	<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	36	<i>amoxicillin/clavulanate 875-125mg tab</i>	84
ALYFTREK 4-20-50MG TAB	88	<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	36	<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	84
<i>alyq 20mg tab</i>	87	<i>amlodipine/valsartan 10-160mg tab</i>	36	<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	84
<i>amantadine 100mg cap</i>	47	<i>amlodipine/valsartan 10-320mg tab</i>	36	<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	84
<i>amantadine 10mg/ml oral soln</i>	47	<i>amlodipine/valsartan 5-160mg tab</i>	36	<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	84
<i>ambrisentan 10mg tab</i>	87	<i>amlodipine/valsartan 5-320mg tab</i>	36	<i>amphetamine/dextroamph etamine 10mg er cap</i>	11
<i>ambrisentan 5mg tab</i>	87	<i>ammonium lactate 12% topical cream</i>	64	<i>amphetamine/dextroamph etamine 10mg tab</i>	11
<i>amikacin 250mg/ml inj</i>	12	<i>ammonium lactate 12% topical lotion</i>	64	<i>amphetamine/dextroamph etamine 12.5mg tab</i>	11
<i>amiloride 5mg tab</i>	65	<i>amnestem 10mg cap</i>	60	<i>amphetamine/dextroamph etamine 15mg er cap</i>	11
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	65	<i>amnestem 20mg cap</i>	61	<i>amphetamine/dextroamph etamine 15mg tab</i>	11
<i>amiodarone 100mg tab</i>	58	<i>amnestem 30mg cap</i>	61	<i>amphetamine/dextroamph etamine 20mg er cap</i>	11
<i>amiodarone 200mg tab</i>	58	<i>amnestem 40mg cap</i>	61	<i>amphetamine/dextroamph etamine 20mg tab</i>	11
<i>amiodarone 400mg tab</i>	58	<i>amoxapine 100mg tab</i>	26	<i>amphetamine/dextroamph etamine 25mg er cap</i>	11
<i>amitriptyline 100mg tab</i>	26	<i>amoxapine 150mg tab</i>	26	<i>amphetamine/dextroamph etamine 30mg er cap</i>	11
<i>amitriptyline 10mg tab</i>	26	<i>amoxapine 25mg tab</i>	26	<i>amphetamine/dextroamph etamine 30mg tab</i>	11
<i>amitriptyline 150mg tab</i>	26	<i>amoxapine 50mg tab</i>	26	<i>amphetamine/dextroamph etamine 5mg er cap</i>	11
<i>amitriptyline 25mg tab</i>	26	AMOXICILLIN 125MG CHEW TAB	83	<i>amphetamine/dextroamph etamine 5mg tab</i>	11
<i>amitriptyline 50mg tab</i>	26	<i>amoxicillin 250mg cap</i>	83	<i>amphetamine/dextroamph etamine 7.5mg tab</i>	11
<i>amitriptyline 75mg tab</i>	26	AMOXICILLIN 250MG CHEW TAB	83	AMPHOTERICIN B 50MG INJ	32
<i>amlodipine 10mg tab</i>	57	<i>amoxicillin 25mg/ml oral susp</i>	84		
<i>amlodipine 2.5mg tab</i>	57	<i>amoxicillin 40mg/ml oral susp</i>	84		
<i>amlodipine 5mg tab</i>	57	<i>amoxicillin 500mg cap</i>	84		
<i>amlodipine/benazepril 10-20mg cap</i>	35	<i>amoxicillin 500mg tab</i>	84		
<i>amlodipine/benazepril 10-40mg cap</i>	35	<i>amoxicillin 50mg/ml oral susp</i>	84		
<i>amlodipine/benazepril 2.5-10mg cap</i>	35	<i>amoxicillin 80mg/ml oral susp</i>	84		
<i>amlodipine/benazepril 5-10mg cap</i>	35	<i>amoxicillin 875mg tab</i>	84		
<i>amlodipine/benazepril 5-20mg cap</i>	35	<i>amoxicillin/clavulanate 250-125mg tab</i>	84		
<i>amlodipine/benazepril 5-40mg cap</i>	35				
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	35				

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ALPHABETICAL LISTING OF DRUGS

<i>amphotericin b liposomal</i>	32	<i>aripiprazole 30mg tab</i>	52	<i>atazanavir 200mg cap</i>	53
<i>50mg inj</i>		<i>aripiprazole 5mg tab</i>	52	<i>atazanavir 300mg cap</i>	53
<i>ampicillin 1000mg inj</i>	84	ARISTADA	52	<i>atenolol 100mg tab</i>	56
<i>ampicillin 100mg/ml inj</i>	84	1064MG/3.9ML		<i>atenolol 25mg tab</i>	56
<i>ampicillin 2000mg inj</i>	84	SYRINGE		<i>atenolol 50mg tab</i>	56
<i>ampicillin 500mg cap</i>	84	ARISTADA	52	<i>atenolol/chlorthalidone</i>	36
<i>ampicillin/sulbactam</i>	84	441MG/1.6ML SYRINGE		<i>100-25mg tab</i>	
<i>1000-500mg inj</i>		ARISTADA	52	<i>atenolol/chlorthalidone</i>	36
<i>ampicillin/sulbactam</i>	84	662MG/2.4ML SYRINGE		<i>50-25mg tab</i>	
<i>100-50mg/ml inj</i>		ARISTADA	52	<i>atomoxetine 100mg cap</i>	11
<i>ampicillin/sulbactam</i>	84	675MG/2.4ML SYRINGE		<i>atomoxetine 10mg cap</i>	11
<i>2000-1000mg inj</i>		ARISTADA	52	<i>atomoxetine 18mg cap</i>	11
<i>anagrelide 0.5mg cap</i>	73	882MG/3.2ML SYRINGE		<i>atomoxetine 25mg cap</i>	11
<i>anagrelide 1mg cap</i>	73	<i>armodafinil 150mg tab</i>	11	<i>atomoxetine 40mg cap</i>	11
<i>anastrozole 1mg tab</i>	40	<i>armodafinil 200mg tab</i>	11	<i>atomoxetine 60mg cap</i>	11
ANORO ELLIPTA	19	<i>armodafinil 250mg tab</i>	11	<i>atomoxetine 80mg cap</i>	11
62.5-25MCG POWDER		<i>armodafinil 50mg tab</i>	11	<i>atorvastatin 10mg tab</i>	33
INHALER		ARNUITY 100MCG	18	<i>atorvastatin 20mg tab</i>	33
APRACLOPIDINE 0.5%	82	POWDER INHALER		<i>atorvastatin 40mg tab</i>	33
OPHTH SOLN		ARNUITY 200MCG	18	<i>atorvastatin 80mg tab</i>	33
<i>aprepitant 125mg cap</i>	31	POWDER INHALER		<i>atovaquone 750mg/5ml</i>	37
<i>aprepitant 125mg/80mg</i>	31	ARNUITY 50MCG	18	<i>oral susp</i>	
<i>cap therapy pack (3)</i>		POWDER INHALER		<i>atovaquone/proguanil</i>	38
<i>aprepitant 40mg cap</i>	31	<i>asenapine 10mg sl tab</i>	50	<i>250-100mg tab</i>	
<i>aprepitant 80mg cap</i>	31	<i>asenapine 2.5mg sl tab</i>	50	<i>atovaquone/proguanil</i>	38
<i>apri tab 28-day pack</i>	67	<i>asenapine 5mg sl tab</i>	50	<i>62.5-25mg tab</i>	
APTIVUS 250MG CAP	53	<i>ashlyna tab 91-day pack</i>	67	<i>atropine sulfate 1% ophth</i>	83
ARANELLE TAB 28-DAY	67	ASMANEX 100MCG HFA	18	<i>soln</i>	
PACK		INHALER		<i>atropine</i>	31
ARCALYST 220MG INJ	78	ASMANEX 110MCG	18	<i>sulfate/diphenoxylate</i>	
AREXVY 120MCG/0.5ML	75	(30ACT) TWISTHALER		<i>0.025-2.5mg tab</i>	
INJ		ASMANEX 200MCG HFA	18	ATROVENT 17MCG HFA	18
<i>arformoterol tartrate</i>	19	INHALER		INHALER	
<i>15mcg/2ml neb soln</i>		ASMANEX 220MCG	18	ATTRUBY 356MG TAB	59
ARIKAYCE	12	(120ACT) TWISTHALER		<i>aubra tab 28-day pack</i>	67
590MG/8.4ML INH SUSP		ASMANEX 220MCG	18	AUGTYRO 160MG CAP	41
<i>aripiprazole 10mg odt</i>	51	(30ACT) TWISTHALER		AUGTYRO 40MG CAP	41
<i>aripiprazole 10mg tab</i>	51	ASMANEX 220MCG	18	AUSTEDO 12MG TAB	86
<i>aripiprazole 15mg odt</i>	52	(60ACT) TWISTHALER		AUSTEDO 30MG ER TAB	86
<i>aripiprazole 15mg tab</i>	52	ASMANEX 50MCG HFA	18	AUSTEDO 36MG ER TAB	86
<i>aripiprazole 1mg/ml oral</i>	52	INHALER		AUSTEDO 42MG ER TAB	86
<i>soln</i>		<i>aspirin/dipyridamole</i>	73	AUSTEDO 48MG ER TAB	86
<i>aripiprazole 20mg tab</i>	52	<i>25-200mg er cap</i>		AUSTEDO 6MG TAB	86
<i>aripiprazole 2mg tab</i>	52	<i>atazanavir 150mg cap</i>	53	AUSTEDO 9MG TAB	86

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ALPHABETICAL LISTING OF DRUGS

AUSTEDO XR 12MG TAE	86	B		<i>betamethasone 0.05%</i>	63
AUSTEDO XR 18MG TAE	86	BACITRACIN	82	<i>aug topical cream</i>	
AUSTEDO XR 24MG TAE	86	500UNIT/GM OPHTH		<i>betamethasone 0.05%</i>	63
AUSTEDO XR 6MG TAB	86	OINTMENT		<i>aug topical lotion</i>	
AUSTEDO XR TAB ONCE	86	BACITRACIN/POLYMYX	82	<i>betamethasone 0.05%</i>	63
DAILY 4 WEEK		IN B 0.5-10UNIT/MG		<i>aug topical ointment</i>	
TITRATION PACK (28)		OPHTH OINTMENT		<i>betamethasone 0.05%</i>	63
AUVELITY 105-45MG ER	24	<i>baclofen 10mg tab</i>	52	<i>topical cream</i>	
TAB		<i>baclofen 20mg tab</i>	52	<i>betamethasone 0.05%</i>	63
<i>aviane tab 28-day pack</i>	67	<i>baclofen 5mg tab</i>	52	<i>topical lotion</i>	
AVMAPKI/FAKZYNJA	41	<i>balsalazide disodium</i>	72	<i>betamethasone 0.05%</i>	63
CO-PACK (66)		<i>750mg cap</i>		<i>topical ointment</i>	
AVONEX 30MCG/0.5ML	86	BALVERSA 3MG TAB	41	<i>betamethasone 0.1%</i>	63
AUTO-INJECTOR		BALVERSA 4MG TAB	41	<i>topical cream</i>	
AVONEX 30MCG/0.5ML	86	BALVERSA 5MG TAB	41	BETAMETHASONE 0.1%	63
SYRINGE		<i>balziva tab 28-day pack</i>	67	TOPICAL LOTION	
AYVAKIT 100MG TAB	46	BAQSIMI 3MG/DOSE	28	<i>betamethasone 0.1%</i>	63
AYVAKIT 200MG TAB	46	NASAL POWDER		<i>topical ointment</i>	
AYVAKIT 25MG TAB	46	BCG LIVE TICE STRAIN	75	BETASERON 0.3MG INJ	86
AYVAKIT 300MG TAB	46	50MG INJ		BETAXOLOL 0.5%	81
AYVAKIT 50MG TAB	46	<i>benazepril 10mg tab</i>	34	OPHTH SOLN	
<i>azathioprine 50mg tab</i>	79	<i>benazepril 20mg tab</i>	34	<i>betaxolol 10mg tab</i>	56
<i>azelaic acid 15% topical</i>	64	<i>benazepril 40mg tab</i>	34	<i>betaxolol 20mg tab</i>	56
<i>gel</i>		<i>benazepril 5mg tab</i>	34	<i>bethanechol chloride</i>	72
<i>azelastine 0.05% ophth</i>	83	<i>benazepril/hydrochloroth</i>	36	<i>10mg tab</i>	
<i>soln</i>		<i>iazide 10-12.5mg tab</i>		<i>bethanechol chloride</i>	72
<i>azelastine 0.1%</i>	80	<i>benazepril/hydrochloroth</i>	36	<i>25mg tab</i>	
<i>(137mcg/act) nasal</i>		<i>iazide 20-12.5mg tab</i>		<i>bethanechol chloride</i>	72
<i>inhaler</i>		<i>benazepril/hydrochloroth</i>	36	<i>50mg tab</i>	
<i>azithromycin 20mg/ml</i>	37	<i>iazide 20-25mg tab</i>		<i>bethanechol chloride 5mg</i>	72
<i>oral susp</i>		<i>benazepril/hydrochloroth</i>	36	<i>tab</i>	
<i>azithromycin 250mg pack</i>	37	<i>iazide 5-6.25mg tab</i>		<i>bexarotene 1% topical gel</i>	62
<i>(6)</i>		BENLYSTA 200MG/ML	79	<i>bexarotene 75mg cap</i>	46
<i>azithromycin 250mg tab</i>	37	AUTO-INJECTOR		BEXSERO SYRINGE	75
<i>azithromycin 40mg/ml</i>	37	BENLYSTA 200MG/ML	79	<i>bicalutamide 50mg tab</i>	40
<i>oral susp</i>		SYRINGE		BICILLIN L-A	84
<i>azithromycin 500mg inj</i>	37	<i>benztropine mesylate</i>	47	1200000UNIT/2ML	
<i>azithromycin 500mg tab</i>	37	<i>0.5mg tab</i>		SYRINGE	
<i>azithromycin 500mg tab</i>	37	<i>benztropine mesylate 1mg</i>	47	BICILLIN L-A	84
<i>pack (3)</i>		<i>tab</i>		2400000UNIT/4ML	
<i>azithromycin 600mg tab</i>	37	<i>benztropine mesylate 2mg</i>	47	SYRINGE	
<i>aztreonam 1gm inj</i>	37	<i>tab</i>		BICILLIN L-A	84
<i>aztreonam 2gm inj</i>	37	BESREMI 500MCG/ML	46	600000UNIT/ML	
<i>azurette 28-day pack</i>	67	SYRINGE		SYRINGE	

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ALPHABETICAL LISTING OF DRUGS

BIKTARVY 30-120-15MG TAB	53	<i>brey</i> na 160-4.5mcg/act inhaler	19	<i>bumetanide</i> 2mg tab	65
BIKTARVY 50-200-25MG TAB	53	<i>brey</i> na 80-4.5mcg/act inhaler	19	<i>buprenorphine</i> 10mcg/hr weekly patch	15
<i>bimatoprost</i> 0.03% ophth soln	83	BREZTRI AEROSPHERE 160-9-4.8MCG/ACT	19	<i>buprenorphine</i> 15mcg/hr weekly patch	15
<i>bisoprolol fumarate</i> 10mg tab	56	INHALER		<i>buprenorphine</i> 20mcg/hr weekly patch	15
<i>bisoprolol fumarate</i> 5mg tab	56	<i>briellyn</i> tab 28-day pack	68	<i>buprenorphine</i> 2mg sl tab	15
<i>bisoprolol</i> fumarate/hydrochlorothia zide 10-6.25mg tab	36	<i>brimonidine</i> tartrate 0.1% ophth soln	82	<i>buprenorphine</i> 5mcg/hr weekly patch	15
<i>bisoprolol</i> fumarate/hydrochlorothia zide 2.5-6.25mg tab	36	<i>brimonidine</i> tartrate 0.15% ophth soln	82	<i>buprenorphine</i> 7.5mcg/hr weekly patch	15
<i>bisoprolol</i> fumarate/hydrochlorothia zide 5-6.25mg tab	36	<i>brimonidine</i> tartrate 0.2% ophth soln	82	<i>buprenorphine</i> 8mg sl tab	15
<i>blisovi</i> 21 fe tab 1.5/30 28-day pack	68	<i>brimonidine</i> tartrate/timolol 0.2-0.5% ophth soln	81	<i>buprenorphine/naloxone</i> 12-3mg sl film	15
BOMYNTRA 120MG/1.7ML INJ	66	BRIVIACT 100MG TAB	21	<i>buprenorphine/naloxone</i> 2-0.5mg sl film	15
BOMYNTRA 120MG/1.7ML SYRINGE	66	BRIVIACT 10MG TAB	21	<i>buprenorphine/naloxone</i> 2-0.5mg sl tab	15
BOOSTRIX INJ	75	BRIVIACT 10MG/ML ORAL SOLN	21	<i>buprenorphine/naloxone</i> 4-1mg sl film	15
BOOSTRIX SYRINGE	75	BRIVIACT 25MG TAB	21	<i>buprenorphine/naloxone</i> 8-2mg sl film	15
<i>bosentan</i> 125mg tab	88	BRIVIACT 50MG TAB	21	<i>buprenorphine/naloxone</i> 8-2mg sl tab	24
<i>bosentan</i> 62.5mg tab	88	BRIVIACT 75MG TAB	21	<i>bupropion</i> 100mg sr (12hr) tab	24
BOSULIF 100MG CAP	42	<i>bromocriptine</i> 2.5mg tab	47	<i>bupropion</i> 100mg tab	24
BOSULIF 100MG TAB	42	<i>bromocriptine</i> 5mg cap	47	<i>bupropion</i> 150mg sr (12 hr) tab	24
BOSULIF 400MG TAB	42	BRUKINSA 160MG TAB	42	<i>bupropion</i> 150mg sr	87
BOSULIF 500MG TAB	42	<i>budesonide</i> 0.25mg/2ml inh susp	18	<i>bupropion</i> 150mg sr (12hr) tab	24
BOSULIF 50MG CAP	42	<i>budesonide</i> 0.5mg/2ml inh susp	18	<i>bupropion</i> 200mg sr (12hr) tab	24
BRAFTOVI 75MG CAP	42	<i>budesonide</i> 1mg/2ml inh susp	18	<i>bupropion</i> 75mg tab	24
BREO ELLIPTA 100-25MCG POWDER INHALER	19	<i>budesonide</i> 3mg dr cap	74	<i>bupropion</i> xl 150mg (24 hr) tab	24
BREO ELLIPTA 200-25MCG POWDER INHALER	19	<i>budesonide</i> 9mg er tab	74	<i>bupropion</i> xl 300mg (24hr) tab	24
BREO ELLIPTA 50-25MCG POWDER INHALER	19	<i>budesonide/formoterol</i> fumarate 160-45mcg inhaler	19	<i>buspirone</i> 10mg tab	16
		<i>budesonide/formoterol</i> fumarate 80-45mcg inhaler	19	<i>buspirone</i> 15mg tab	16
		<i>bumetanide</i> 0.25mg/ml inj	65	<i>buspirone</i> 30mg tab	16
		<i>bumetanide</i> 0.5mg tab	65	<i>buspirone</i> 5mg tab	16
		<i>bumetanide</i> 1mg tab	65	<i>buspirone</i> 7.5mg tab	17

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ALPHABETICAL LISTING OF DRUGS

C					
<i>cabergoline 0.5mg tab</i>	67	<i>carbamazepine 200mg er</i>	21	<i>carbidopa/levodopa</i>	47
CABOMETYX 20MG TAE	42	<i>cap</i>		<i>25-250mg tab</i>	
CABOMETYX 40MG TAE	42	<i>carbamazepine 200mg er</i>	21	<i>carbidopa/levodopa</i>	47
CABOMETYX 60MG TAE	42	<i>tab</i>		<i>50-200mg er tab</i>	
<i>calcipotriene 0.005%</i>	62	<i>carbamazepine 200mg</i>	21	<i>carglumic acid 200mg tab</i>	66
<i>topical cream</i>		<i>tab</i>		<i>for oral susp</i>	
<i>calcipotriene 0.005%</i>	62	<i>carbamazepine 20mg/ml</i>	21	<i>carisoprodol 350mg tab</i>	52
<i>topical ointment</i>		<i>oral susp</i>		CARTEOLOL 1% OPHTH	81
CALCIPOTRIENE 0.005% 62		<i>carbamazepine 300mg er</i>	21	SOLN	
TOPICAL SOLN		<i>cap</i>		<i>cartia 120mg er (24hr)</i>	57
<i>calcitriol 0.25mcg cap</i>	66	<i>carbamazepine 400mg er</i>	21	<i>cap</i>	
<i>calcitriol 0.5mcg cap</i>	66	<i>tab</i>		<i>cartia 180mg er (24hr)</i>	57
<i>calcitriol 1mcg/ml oral</i>	66	<i>carbidopa 25mg tab</i>	47	<i>cap</i>	
<i>soln</i>		<i>carbidopa/entacapone/le</i>	47	<i>cartia 240mg er (24hr)</i>	57
CALQUENCE 100MG	42	<i>vodopa 12.5-200-50mg</i>		<i>cap</i>	
TAB		<i>tab</i>		<i>cartia 300mg er (24hr)</i>	57
<i>camila 0.35mg tab 28-day</i>	85	<i>carbidopa/entacapone/le</i>	47	<i>cap</i>	
<i>pack</i>		<i>vodopa 18.75-200-75mg</i>		<i>carvedilol 12.5mg tab</i>	56
<i>camreselo tab 91-day</i>	68	<i>tab</i>		<i>carvedilol 25mg tab</i>	56
<i>pack</i>		<i>carbidopa/entacapone/le</i>	47	<i>carvedilol 3.125mg tab</i>	56
<i>candesartan cilexetil</i>	34	<i>vodopa 25-200-100mg</i>		<i>carvedilol 6.25mg tab</i>	56
<i>16mg tab</i>		<i>tab</i>		<i>casprofungin acetate 50mg</i>	32
<i>candesartan cilexetil</i>	34	<i>carbidopa/entacapone/le</i>	47	<i>inj</i>	
<i>32mg tab</i>		<i>vodopa 31.25-200-125mg</i>		<i>casprofungin acetate 70mg</i>	32
<i>candesartan cilexetil 4mg</i>	34	<i>tab</i>		<i>inj</i>	
<i>tab</i>		<i>carbidopa/entacapone/le</i>	47	CAYSTON 75MG/ML INH	88
<i>candesartan cilexetil 8mg</i>	34	<i>vodopa 37.5-200-150mg</i>		SOLN	
<i>tab</i>		<i>tab</i>		CEFACLOR 250MG CAP	59
CAPLYTA 10.5MG CAP	48	<i>carbidopa/entacapone/le</i>	47	CEFACLOR 500MG CAP	59
CAPLYTA 21MG CAP	48	<i>vodopa 50-200-200mg</i>		<i>cefadroxil 100mg/ml oral</i>	59
CAPLYTA 42MG CAP	48	<i>tab</i>		<i>susp</i>	
CAPRELSA 100MG TAB	42	<i>carbidopa/levodopa</i>	47	<i>cefadroxil 500mg cap</i>	59
CAPRELSA 300MG TAB	42	<i>10-100mg odt</i>		<i>cefadroxil 50mg/ml oral</i>	59
<i>captopril 100mg tab</i>	34	<i>carbidopa/levodopa</i>	47	<i>susp</i>	
<i>captopril 12.5mg tab</i>	34	<i>10-100mg tab</i>		<i>cefazolin 1000mg inj</i>	59
<i>captopril 25mg tab</i>	34	<i>carbidopa/levodopa</i>	47	<i>cefazolin 200mg/ml inj</i>	59
<i>captopril 50mg tab</i>	34	<i>25-100mg er tab</i>		<i>cefazolin 500mg inj</i>	59
<i>carbamazepine 100mg</i>	21	<i>carbidopa/levodopa</i>	47	<i>cefdinir 25mg/ml oral</i>	60
<i>chew tab</i>		<i>25-100mg odt</i>		<i>susp</i>	
<i>carbamazepine 100mg er</i>	21	<i>carbidopa/levodopa</i>	47	<i>cefdinir 300mg cap</i>	60
<i>cap</i>		<i>25-100mg tab</i>		<i>cefdinir 50mg/ml oral</i>	60
<i>carbamazepine 100mg er</i>	21	<i>carbidopa/levodopa</i>	47	<i>susp</i>	
<i>tab</i>		<i>25-250mg odt</i>		<i>cefepime 1000mg inj</i>	37
				<i>cefepime 2000mg inj</i>	37

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ALPHABETICAL LISTING OF DRUGS

<i>cefixime 400mg cap</i>	60	<i>chlordiazepoxide 5mg cap</i>	17	<i>cimetidine 400mg tab</i>	91
<i>cefoxitin 1gm inj</i>	59	<i>chlorhexidine gluconate</i>	60	<i>cimetidine 800mg tab</i>	91
<i>cefoxitin 200mg/ml inj</i>	59	<i>0.12% mouthwash</i>		CIMZIA 200MG INJ	13
<i>cefoxitin 2gm inj</i>	59	CHLOROQUINE	38	CIMZIA 200MG/ML	13
<i>cefpodoxime 100mg tab</i>	60	PHOSPHATE 250MG TAB		SYRINGE	
CEFPODOXIME	60	<i>chloroquine phosphate</i>	39	CIMZIA 200MG/ML	13
10MG/ML ORAL SUSP		<i>500mg tab</i>		SYRINGE STARTER KIT	
<i>cefpodoxime 200mg tab</i>	60	<i>chlorpromazine 100mg</i>	51	(6)	
CEFPODOXIME	60	<i>tab</i>		<i>cinacalcet 30mg tab</i>	66
20MG/ML ORAL SUSP		<i>chlorpromazine 100mg/ml</i>	51	<i>cinacalcet 60mg tab</i>	66
<i>cefprozil 250mg tab</i>	59	<i>oral soln</i>		<i>cinacalcet 90mg tab</i>	66
<i>cefprozil 25mg/ml oral</i>	60	<i>chlorpromazine 10mg tab</i>	51	<i>ciprofloxacin 0.3% ophth</i>	82
<i>susp</i>		<i>chlorpromazine 200mg</i>	51	<i>soln</i>	
<i>cefprozil 500mg tab</i>	60	<i>tab</i>		<i>ciprofloxacin 250mg tab</i>	71
<i>cefprozil 50mg/ml oral</i>	60	<i>chlorpromazine 25mg tab</i>	51	CIPROFLOXACIN	71
<i>susp</i>		<i>chlorpromazine 30mg/ml</i>	51	2MG/ML INJ	
<i>ceftazidime 1gm inj</i>	60	<i>oral soln</i>		<i>ciprofloxacin 500mg tab</i>	71
CEFTAZIDIME	60	<i>chlorpromazine 50mg tab</i>	51	<i>ciprofloxacin 750mg tab</i>	71
200MG/ML INJ		<i>chlorthalidone 25mg tab</i>	65	<i>ciprofloxacin/dexamethas</i>	83
<i>ceftazidime 2gm inj</i>	60	<i>chlorthalidone 50mg tab</i>	65	<i>one 0.3-0.1% otic susp</i>	
<i>ceftriaxone 10gm inj</i>	60	<i>chlorzoxazone 500mg tab</i>	52	<i>citalopram 10mg tab</i>	25
<i>ceftriaxone 1gm inj</i>	60	<i>cholestyramine resin</i>	33	<i>citalopram 20mg tab</i>	25
<i>ceftriaxone 250mg inj</i>	60	<i>(sugar-free) 4gm powder</i>		<i>citalopram 2mg/ml oral</i>	25
<i>ceftriaxone 2gm inj</i>	60	<i>for oral susp</i>		<i>soln</i>	
<i>ceftriaxone 500mg inj</i>	60	<i>cholestyramine resin 4gm</i>	33	<i>citalopram 40mg tab</i>	25
<i>cefuroxime 1500mg inj</i>	60	<i>powder for oral susp</i>		<i>claravis 10mg cap</i>	61
<i>cefuroxime 250mg tab</i>	60	<i>ciclopirox 0.77% topical</i>	61	<i>claravis 20mg cap</i>	61
<i>cefuroxime 500mg tab</i>	60	<i>cream</i>		<i>claravis 30mg cap</i>	61
<i>cefuroxime 750mg inj</i>	60	<i>ciclopirox 0.77% topical</i>	61	<i>claravis 40mg cap</i>	61
<i>celecoxib 100mg cap</i>	13	<i>gel</i>		<i>clarithromycin 250mg tab</i>	37
<i>celecoxib 200mg cap</i>	13	<i>ciclopirox 0.77% topical</i>	61	CLARITHROMYCIN	37
<i>celecoxib 400mg cap</i>	13	<i>lotion</i>		25MG/ML ORAL SUSP	
<i>celecoxib 50mg cap</i>	13	<i>ciclopirox 1% shampoo</i>	61	<i>clarithromycin 500mg tab</i>	37
<i>cephalexin 250mg cap</i>	59	<i>ciclopirox 8% topical soln</i>	61	CLARITHROMYCIN	37
<i>cephalexin 25mg/ml oral</i>	59	CILASTATIN/IMIPENEM	37	50MG/ML ORAL SUSP	
<i>susp</i>		250-250MG INJ		<i>clindamycin 1% pad</i>	61
<i>cephalexin 500mg cap</i>	59	<i>cilastatin/imipenem</i>	37	<i>clindamycin 1% topical</i>	61
<i>cephalexin 50mg/ml oral</i>	59	<i>500-500mg inj</i>		<i>gel (once-daily)</i>	
<i>susp</i>		<i>cilostazol 100mg tab</i>	73	<i>clindamycin 1% topical</i>	61
<i>cevimeline 30mg cap</i>	60	<i>cilostazol 50mg tab</i>	73	<i>gel (twice-daily)</i>	
<i>chlordiazepoxide 10mg</i>	17	CIMDUO 300-300MG	53	<i>clindamycin 1% topical</i>	61
<i>cap</i>		TAB		<i>lotion</i>	
<i>chlordiazepoxide 25mg</i>	17	<i>cimetidine 200mg tab</i>	91	<i>clindamycin 1% topical</i>	61
<i>cap</i>		<i>cimetidine 300mg tab</i>	91	<i>soln</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>clindamycin 150mg cap</i>	37	<i>clomipramine 25mg cap</i>	27	COARTEM 20-120MG	39
<i>clindamycin 2% vaginal cream</i>	91	<i>clomipramine 50mg cap</i>	27	TAB	
<i>clindamycin 300mg cap</i>	37	<i>clomipramine 75mg cap</i>	27	COBENFY 20-100MG	48
<i>clindamycin 300mg/2ml inj</i>	37	<i>clonazepam 0.125mg odt</i>	20	CAP	
<i>clindamycin 300mg/50ml inj</i>	37	<i>clonazepam 0.25mg odt</i>	20	COBENFY 20-50MG CAP	48
<i>clindamycin 600mg/4ml inj</i>	37	<i>clonazepam 0.5mg odt</i>	21	COBENFY 30-125MG	48
<i>clindamycin 600mg/50ml inj</i>	37	<i>clonazepam 0.5mg tab</i>	21	CAP	
<i>clindamycin 75mg cap</i>	37	<i>clonazepam 1mg odt</i>	21	COBENFY CAP 28-DAY	48
<i>clindamycin 75mg/5ml oral soln</i>	37	<i>clonazepam 1mg tab</i>	21	STARTER KIT PACK (56)	
<i>clindamycin 900mg/50ml inj</i>	37	<i>clonazepam 2mg odt</i>	21	<i>codeine</i>	15
<i>clindamycin 900mg/6ml inj</i>	37	<i>clonazepam 2mg tab</i>	21	<i>phosphate/acetaminophen 15-300mg tab</i>	
CLINIMIX 4.25/10 INJ	80	<i>clonidine 0.1mg er tab</i>	11	CODEINE	15
CLINIMIX 4.25/5 INJ	80	<i>clonidine 0.1mg tab</i>	35	PHOSPHATE/ACETAMINOPHEN 2.4-24MG/ML	
CLINIMIX 5/15 INJ	80	<i>clonidine 0.1mg/24hr weekly patch</i>	35	ORAL SOLN	
CLINIMIX 5/20 INJ	80	<i>clonidine 0.2mg tab</i>	35	<i>codeine</i>	15
<i>clinisol 15% inj</i>	80	<i>clonidine 0.2mg/24hr weekly patch</i>	35	<i>phosphate/acetaminophen 30-300mg tab</i>	
<i>clobazam 10mg tab</i>	20	<i>clonidine 0.3mg tab</i>	35	<i>codeine</i>	15
<i>clobazam 2.5mg/ml oral susp</i>	20	<i>clonidine 0.3mg/24hr weekly patch</i>	35	<i>phosphate/acetaminophen 60-300mg tab</i>	
<i>clobazam 20mg tab</i>	20	<i>clopidogrel 75mg tab</i>	73	<i>colchicine 0.6mg tab</i>	73
<i>clobetasol propionate 0.05% shampoo</i>	63	<i>clorazepate dipotassium 15mg tab</i>	17	<i>colchicine/probenecid 0.5-500mg tab</i>	73
<i>clobetasol propionate 0.05% topical cream</i>	63	<i>clorazepate dipotassium 3.75mg tab</i>	17	<i>colesevelam 625mg tab</i>	33
<i>clobetasol propionate 0.05% topical e cream</i>	63	<i>clorazepate dipotassium 7.5mg tab</i>	17	<i>colestipol 1gm tab</i>	33
<i>clobetasol propionate 0.05% topical foam</i>	63	<i>clotrimazole 1% topical cream</i>	61	<i>colestipol 5000mg granules for oral susp</i>	33
<i>clobetasol propionate 0.05% topical gel</i>	63	<i>clotrimazole 10mg lozenge</i>	60	<i>colistin 75mg/ml inj</i>	37
<i>clobetasol propionate 0.05% topical lotion</i>	63	<i>clotrimazole/betamethasone 1-0.05% topical cream</i>	61	COMBIVENT 20-100MCG/ACT	19
<i>clobetasol propionate 0.05% topical ointment</i>	63	<i>clozapine 100mg odt</i>	50	INHALER	
<i>clobetasol propionate 0.05% topical soln</i>	63	<i>clozapine 100mg tab</i>	50	COMETRIQ CAP 100MG	42
		<i>clozapine 12.5mg odt</i>	50	DAILY DOSE PACK (56)	
		<i>clozapine 150mg odt</i>	50	COMETRIQ CAP 140MG	42
		<i>clozapine 200mg odt</i>	50	DAILY DOSE PACK (112)	
		<i>clozapine 200mg tab</i>	50	COMETRIQ CAP 60MG	42
		<i>clozapine 25mg odt</i>	50	DAILY DOSE PACK (84)	
		<i>clozapine 25mg tab</i>	50	<i>compro 25mg rectal supp</i>	51
		<i>clozapine 50mg tab</i>	50	CONEXXENCE	66
				60MG/ML SYRINGE	
				<i>conjugated estrogens 0.3mg tab</i>	70

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ALPHABETICAL LISTING OF DRUGS

<i>conjugated estrogens</i>	70	CROMOLYN SODIUM	83	<i>dalfampridine 10mg er</i>	86
<i>0.45mg tab</i>		4% OPTH SOLN		<i>tab</i>	
<i>conjugated estrogens</i>	70	<i>cryselle tab 28-day pack</i>	68	<i>danazol 100mg cap</i>	15
<i>0.625mg tab</i>		<i>cyclobenzaprine 10mg</i>	52	<i>danazol 200mg cap</i>	15
<i>conjugated estrogens</i>	70	<i>tab</i>		<i>danazol 50mg cap</i>	15
<i>0.9mg tab</i>		<i>cyclobenzaprine 5mg tab</i>	52	<i>dantrolene sodium 100mg</i>	52
<i>conjugated estrogens</i>	70	<i>cyclophosphamide 25mg</i>	39	<i>cap</i>	
<i>1.25mg tab</i>		<i>cap</i>		<i>dantrolene sodium 25mg</i>	52
<i>constulose 10gm/15ml</i>	77	CYCLOPHOSPHAMIDE	39	<i>cap</i>	
<i>oral soln</i>		25MG TAB		<i>dantrolene sodium 50mg</i>	52
COPIKTRA 15MG CAP	42	<i>cyclophosphamide 50mg</i>	39	<i>cap</i>	
COPIKTRA 25MG CAP	42	<i>cap</i>		DAPAGLIFLOZIN 10MG	30
COSENTYX 150MG/ML	62	CYCLOPHOSPHAMIDE	39	TAB	
AUTO-INJECTOR		50MG TAB		DAPAGLIFLOZIN 5MG	30
COSENTYX 150MG/ML	62	<i>cyclosporine 0.05% ophth</i>	83	TAB	
SYRINGE		<i>susp</i>		<i>dapsone 100mg tab</i>	39
COSENTYX	62	<i>cyclosporine 100mg cap</i>	79	<i>dapsone 25mg tab</i>	39
75MG/0.5ML SYRINGE		<i>cyclosporine 25mg cap</i>	79	DAPTACEL INJ	75
COSENTYX UNOREADY	62	<i>cyclosporine modified</i>	79	<i>daptomycin 500mg inj</i>	38
300MG/2ML		<i>100mg cap</i>		<i>darunavir 600mg tab</i>	53
AUTO-INJECTOR		<i>cyclosporine modified</i>	79	<i>darunavir 800mg tab</i>	53
COTELLIC 20MG TAB	42	<i>100mg/ml oral soln</i>		<i>dasatinib 100mg tab</i>	42
CREON	71	<i>cyclosporine modified</i>	79	<i>dasatinib 140mg tab</i>	42
120000-24000-76000UNI		<i>25mg cap</i>		<i>dasatinib 20mg tab</i>	42
T DR CAP		<i>cyclosporine modified</i>	79	<i>dasatinib 50mg tab</i>	42
CREON	71	<i>50mg cap</i>		<i>dasatinib 70mg tab</i>	42
15000-3000-9500UNIT		<i>cyproheptadine 0.4mg/ml</i>	87	<i>dasatinib 80mg tab</i>	42
DR CAP		<i>oral soln</i>		DAURISMO 100MG TAB	40
CREON	71	<i>cyproheptadine 4mg tab</i>	87	DAURISMO 25MG TAB	40
180000-36000-114000U		<i>cyred tab 28-day pack</i>	68	<i>deblitane 0.35mg tab</i>	85
NIT DR CAP		CYSTADANE 1GM	66	<i>28-day pack</i>	
CREON	71	POWDER FOR ORAL		<i>deferasirox 180mg tab</i>	78
30000-6000-19000UNIT		SOLN		<i>deferasirox 360mg tab</i>	78
DR CAP		CYSTADROPS 0.37%	83	<i>deferasirox 90mg tab</i>	78
CREON	71	OPHTH SOLN		DELSTRIGO	53
60000-12000-38000UNIT		CYSTAGON 150MG CAP	73	100-300-300MG TAB	
DR CAP		CYSTAGON 50MG CAP	73	DEPO-SUBQ PROVERA	85
CRESEMBA 186MG CAP	32	D		104MG/0.65ML	
CRESEMBA 74.5MG CAP	32	<i>dabigatran etexilate</i>	19	SYRINGE	
<i>cromolyn sodium 10mg/ml</i>	18	<i>110mg cap</i>		DESCOVY 120-15MG	53
<i>inh soln</i>		<i>dabigatran etexilate</i>	19	TAB	
<i>cromolyn sodium 20mg/ml</i>	71	<i>150mg cap</i>		DESCOVY 200-25MG	53
<i>oral soln</i>		<i>dabigatran etexilate</i>	19	TAB	
		<i>75mg cap</i>		<i>desipramine 100mg tab</i>	27

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: 02/01/2026

ALPHABETICAL LISTING OF DRUGS

<i>desipramine 10mg tab</i>	27	<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	82	<i>diclofenac sodium 0.1% ophth soln</i>	83
<i>desipramine 150mg tab</i>	27	<i>dexlansoprazole 30mg dr cap</i>	91	<i>diclofenac sodium 1.5% topical soln</i>	13
<i>desipramine 25mg tab</i>	27	<i>dexlansoprazole 60mg dr cap</i>	91	<i>diclofenac sodium 100mg er tab</i>	13
<i>desipramine 50mg tab</i>	27	<i>dexmethylphenidate 10mg tab</i>	11	<i>diclofenac sodium 25mg dr tab</i>	13
<i>desipramine 75mg tab</i>	27	<i>dexmethylphenidate 2.5mg tab</i>	11	<i>diclofenac sodium 3% topical gel</i>	62
<i>desloratadine 5mg tab</i>	87	<i>dexmethylphenidate 5mg tab</i>	11	<i>diclofenac sodium 50mg dr tab</i>	13
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	67	<i>dextroamphetamine sulfate 10mg tab</i>	11	<i>diclofenac sodium 75mg dr tab</i>	13
<i>desmopressin acetate 0.1mg tab</i>	67	<i>dextroamphetamine sulfate 5mg tab</i>	11	<i>dicloxacillin 250mg cap</i>	84
<i>desmopressin acetate 0.2mg tab</i>	67	<i>DEXTROSE 10% INJ</i>	80	<i>dicloxacillin 500mg cap</i>	84
<i>desonide 0.05% topical cream</i>	63	<i>DIACOMIT 250MG CAP</i>	21	<i>dicyclomine 10mg cap</i>	90
<i>desonide 0.05% topical ointment</i>	63	<i>DIACOMIT 250MG POWDER FOR ORAL SUSP</i>	21	<i>dicyclomine 20mg tab</i>	90
<i>desoximetasone 0.25% topical cream</i>	63	<i>DIACOMIT 500MG CAP</i>	21	<i>dicyclomine 2mg/ml oral soln</i>	91
<i>desoximetasone 0.25% topical ointment</i>	63	<i>DIACOMIT 500MG POWDER FOR ORAL SUSP</i>	21	<i>DIFICID 200MG TAB</i>	38
<i>desvenlafaxine succinate 100mg er tab</i>	26	<i>DIACOMIT 500MG POWDER FOR ORAL SUSP</i>	21	<i>DIFICID 40MG/ML ORAL SUSP</i>	38
<i>desvenlafaxine succinate 25mg er tab</i>	26	<i>diazepam 10mg tab</i>	17	<i>diflunisal 500mg tab</i>	13
<i>desvenlafaxine succinate 50mg er tab</i>	26	<i>diazepam 10mg/2ml rectal gel</i>	21	<i>difluprednate 0.05% ophth susp</i>	82
<i>DEXAMETHASONE 0.1MG/ML ORAL SOLN</i>	74	<i>diazepam 1mg/ml oral soln</i>	17	<i>digoxin 0.125mg tab</i>	59
<i>dexamethasone 0.5mg tab</i>	74	<i>DIAZEPAM 2.5MG/0.5ML RECTAL GEL</i>	21	<i>digoxin 0.25mg tab</i>	59
<i>dexamethasone 0.75mg tab</i>	74	<i>diazepam 20mg/4ml rectal gel</i>	21	<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	78
<i>dexamethasone 1.5mg tab</i>	74	<i>diazepam 2mg tab</i>	17	<i>DILANTIN 30MG ER CAP</i>	21
<i>dexamethasone 1mg tab</i>	74	<i>diazepam 5mg tab</i>	17	<i>dilt 120mg er (24hr) cap</i>	57
<i>dexamethasone 2mg tab</i>	74	<i>diazepam 5mg/ml oral soln</i>	17	<i>dilt 180mg er (24hr) cap</i>	57
<i>dexamethasone 4mg tab</i>	74	<i>diazoxide 50mg/ml oral susp</i>	28	<i>dilt 240mg er (24hr) cap</i>	57
<i>dexamethasone 6mg tab</i>	74	<i>diclofenac potassium 50mg tab</i>	13	<i>diltiazem 120mg er (12hr) cap</i>	57
<i>DEXAMETHASONE PHOSPHATE 0.1% OPTH SOLN</i>	82			<i>diltiazem 120mg er (24hr) cap</i>	57
<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	82			<i>diltiazem 120mg tab</i>	57
				<i>diltiazem 180mg er (24hr) cap</i>	57

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ALPHABETICAL LISTING OF DRUGS

<i>diltiazem 240mg er (24hr) cap</i>	57	<i>donepezil 10mg tab</i>	85	<i>doxycycline hyclate 20mg tab</i>	89
<i>diltiazem 300mg er (24hr) cap</i>	57	<i>donepezil 23mg tab</i>	85	<i>doxycycline hyclate 50mg cap</i>	89
<i>diltiazem 30mg tab</i>	57	<i>donepezil 5mg odt</i>	85	<i>doxycycline monohydrate 100mg cap</i>	89
<i>diltiazem 360mg er (24hr) cap</i>	57	<i>donepezil 5mg tab</i>	85	<i>doxycycline monohydrate 100mg tab</i>	89
<i>diltiazem 420mg er (24hr) cap</i>	57	DOPTELET 20MG TAB	73	<i>doxycycline monohydrate 50mg cap</i>	89
<i>diltiazem 60mg er (12hr) cap</i>	57	DOPTELET TAB 40MG DAILY DOSE PACK (10)	73	<i>doxycycline monohydrate 50mg tab</i>	89
<i>diltiazem 60mg tab</i>	57	DOPTELET TAB 60MG DAILY DOSE PACK (15)	73	<i>doxycycline monohydrate 5mg/ml oral susp</i>	89
<i>diltiazem 90mg er (12hr) cap</i>	57	<i>dorzolamide 2% ophth soln</i>	83	<i>doxycycline monohydrate 75mg tab</i>	89
<i>diltiazem 90mg tab</i>	57	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	81	DRIZALMA 20MG DR	26
<i>dimethyl fumarate 120mg dr cap</i>	86	<i>dotti 0.025mg/24hr twice weekly patch</i>	70	SPRINKLE CAP	
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	86	<i>dotti 0.0375mg/24hr twice weekly patch</i>	70	DRIZALMA 30MG DR	26
<i>dimethyl fumarate 240mg dr cap</i>	86	<i>dotti 0.05mg/24hr twice weekly patch</i>	70	SPRINKLE CAP	
<i>dipyridamole 25mg tab</i>	73	<i>dotti 0.075mg/24hr twice weekly patch</i>	70	DRIZALMA 40MG DR	26
<i>dipyridamole 50mg tab</i>	73	<i>dotti 0.1mg/24hr twice weekly patch</i>	70	SPRINKLE CAP	
<i>dipyridamole 75mg tab</i>	73	DOVATO 50-300MG TAB	53	DRIZALMA 60MG DR	26
<i>disopyramide 100mg cap</i>	58	<i>doxazosin 1mg tab</i>	35	SPRINKLE CAP	
<i>disopyramide 150mg cap</i>	58	<i>doxazosin 2mg tab</i>	35	<i>dronabinol 10mg cap</i>	31
<i>disulfiram 250mg tab</i>	85	<i>doxazosin 4mg tab</i>	35	<i>dronabinol 2.5mg cap</i>	31
<i>divalproex sodium 125mg dr cap</i>	24	<i>doxazosin 8mg tab</i>	35	<i>dronabinol 5mg cap</i>	31
<i>divalproex sodium 125mg dr tab</i>	24	<i>doxepin 100mg cap</i>	27	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	68
<i>divalproex sodium 250mg dr tab</i>	24	<i>doxepin 10mg cap</i>	27	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	68
<i>divalproex sodium 250mg er tab</i>	48	DOXEPIN 10MG/ML ORAL SOLN	27	DROXIA 200MG CAP	46
<i>divalproex sodium 500mg dr tab</i>	24	<i>doxepin 150mg cap</i>	27	DROXIA 300MG CAP	46
<i>divalproex sodium 500mg er tab</i>	48	<i>doxepin 25mg cap</i>	27	DROXIA 400MG CAP	46
<i>dofetilide 0.125mg cap</i>	58	<i>doxepin 50mg cap</i>	27	<i>droxidopa 100mg cap</i>	58
<i>dofetilide 0.25mg cap</i>	58	<i>doxepin 75mg cap</i>	27	<i>droxidopa 200mg cap</i>	58
<i>dofetilide 0.5mg cap</i>	58	<i>doxy 100mg inj</i>	89	<i>droxidopa 300mg cap</i>	58
<i>donepezil 10mg odt</i>	85	<i>doxycycline hyclate 100mg cap</i>	89	DULERA 100-5MCG INHALER	19
		<i>doxycycline hyclate 100mg inj</i>	89		
		<i>doxycycline hyclate 100mg tab</i>	89		

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ALPHABETICAL LISTING OF DRUGS

DULERA 200-5MCG INHALER	19	ELIGARD 7.5MG SYRINGE	40	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	53
DULERA 50-5MCG INHALER	19	ELIQUIS 2.5MG TAB	19	EMTRIVA 10MG/ML ORAL SOLN	53
<i>duloxetine 20mg dr cap</i>	26	ELIQUIS 5MG 30-DAY STARTER PACK (74)	19	<i>enalapril maleate 10mg tab</i>	34
<i>duloxetine 30mg dr cap</i>	26	ELIQUIS 5MG TAB	19	<i>enalapril maleate 2.5mg tab</i>	34
<i>duloxetine 60mg dr cap</i>	26	<i>eltrombopag 12.5mg powder for oral susp</i>	73	<i>enalapril maleate 20mg tab</i>	34
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	17	<i>eltrombopag 12.5mg tab</i>	73	<i>enalapril maleate 20mg tab</i>	34
DUPIXENT 200MG/1.14ML SYRINGE	17	<i>eltrombopag 25mg powder for oral susp</i>	73	<i>enalapril maleate 5mg tab</i>	34
DUPIXENT 300MG/2ML AUTO-INJECTOR	17	<i>eltrombopag 25mg tab</i>	73	<i>enalapril</i>	36
DUPIXENT 300MG/2ML SYRINGE	17	<i>eltrombopag 50mg tab</i>	74	<i>maleate/hydrochlorothiaz ide 10-25mg tab</i>	36
<i>dutasteride 0.5mg cap</i>	72	<i>eltrombopag 75mg tab</i>	74	<i>enalapril</i>	36
E		<i>eluryng</i>	68	<i>maleate/hydrochlorothiaz ide 5-12.5mg tab</i>	13
<i>econazole nitrate 1% topical cream</i>	61	EMGALITY 100MG/ML SYRINGE	78	ENBREL 25MG/0.5ML INJ	13
EDURANT 2.5MG TAB FOR ORAL SUSP	53	EMGALITY 120MG/ML AUTO-INJECTOR	78	ENBREL 25MG/0.5ML SYRINGE	13
EDURANT 25MG TAB	53	EMGALITY 120MG/ML SYRINGE	78	ENBREL 50MG/ML AUTO-INJECTOR	13
<i>efavirenz 600mg tab</i>	53	EMSAM 12MG/24HR PATCH	25	ENBREL 50MG/ML CARTRIDGE	13
<i>efavirenz/emtricitabine/te nofovir disoproxil fumarate 600-200-300mg tab</i>	53	EMSAM 6MG/24HR PATCH	25	ENBREL 50MG/ML SYRINGE	13
EFAVIRENZ/LAMIVUDIN E/TENOFOVIR DISOPROXIL FUMARATE	53	EMSAM 9MG/24HR PATCH	25	ENERGIX-B 10MCG/0.5ML SYRINGE	75
<i>efavirenz/lamivudine/teno fovir disoproxil fumarate 600-300-300mg tab</i>	53	<i>emtricitabine 200mg cap</i>	53	ENERGIX-B 20MCG/ML INJ	76
<i>electrolyte-148 inj</i>	80	<i>emtricitabine/rilpivirine/t enofovir disoproxil fumarate 200-25-300mg tab</i>	53	ENERGIX-B 20MCG/ML SYRINGE	76
ELIGARD 22.5MG SYRINGE	40	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	53	<i>enilloring</i>	68
ELIGARD 30MG SYRINGE	40	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	53	<i>0.120-0.015mg/24hr vaginal system</i>	19
ELIGARD 45MG SYRINGE	40	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	53	<i>enoxaparin sodium 100mg/1ml syringe</i>	19
				<i>enoxaparin sodium 120mg/0.8ml syringe</i>	19
				<i>enoxaparin sodium 150mg/1ml syringe</i>	19

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ALPHABETICAL LISTING OF DRUGS

<i>enoxaparin sodium</i>	20	ERYTHROMYCIN 2%	61	<i>estradiol 0.0375mg/24hr</i>	71
<i>30mg/0.3ml syringe</i>		TOPICAL GEL		<i>twice weekly patch</i>	
<i>enoxaparin sodium</i>	20	<i>erythromycin 2% topical</i>	61	<i>estradiol 0.0375mg/24hr</i>	71
<i>40mg/0.4ml syringe</i>		<i>soln</i>		<i>weekly patch</i>	
<i>enoxaparin sodium</i>	20	<i>erythromycin 250mg dr</i>	38	<i>estradiol 0.05mg/24hr</i>	71
<i>60mg/0.6ml syringe</i>		<i>tab</i>		<i>twice weekly patch</i>	
<i>enoxaparin sodium</i>	20	<i>erythromycin 250mg tab</i>	38	<i>estradiol 0.05mg/24hr</i>	71
<i>80mg/0.8ml syringe</i>		<i>erythromycin 333mg dr</i>	38	<i>weekly patch</i>	
<i>enskyce tab 28-day pack</i>	68	<i>tab</i>		<i>estradiol 0.075mg/24hr</i>	71
<i>entacapone 200mg tab</i>	47	<i>erythromycin 500mg dr</i>	38	<i>twice weekly patch</i>	
<i>entecavir 0.5mg tab</i>	55	<i>tab</i>		<i>estradiol 0.075mg/24hr</i>	71
<i>entecavir 1mg tab</i>	55	<i>erythromycin 500mg tab</i>	38	<i>weekly patch</i>	
ENTRESTO 15-16MG	59	<i>escitalopram 10mg tab</i>	25	<i>estradiol 0.5mg tab</i>	71
ORAL PELLET		<i>escitalopram 1mg/ml oral</i>	25	<i>estradiol 1mg tab</i>	71
ENTRESTO 6-6MG ORAL	59	<i>soln</i>		<i>estradiol 2mg tab</i>	71
PELLET		<i>escitalopram 20mg tab</i>	25	<i>estradiol valerate</i>	71
<i>enulose 10gm/15ml oral</i>	71	<i>escitalopram 5mg tab</i>	25	<i>10mg/ml inj</i>	
<i>soln</i>		<i>eslicarbazepine acetate</i>	21	<i>estradiol valerate</i>	71
ENVARUSUS XR 0.75MG	79	<i>200mg tab</i>		<i>20mg/ml inj</i>	
TAB		<i>eslicarbazepine acetate</i>	21	<i>estradiol valerate</i>	71
ENVARUSUS XR 1MG TAB	79	<i>400mg tab</i>		<i>40mg/ml inj</i>	
ENVARUSUS XR 4MG TAB	79	<i>eslicarbazepine acetate</i>	22	<i>estradiol/norethindrone</i>	68
EPIDIOLEX 100MG/ML	21	<i>600mg tab</i>		<i>acetate 0.5-0.1mg 28-day</i>	
ORAL SOLN		<i>eslicarbazepine acetate</i>	22	<i>pack</i>	
<i>epinephrine</i>	19	<i>800mg tab</i>		<i>estradiol/norethindrone</i>	68
<i>0.15mg/0.3ml</i>		<i>esomeprazole 20mg dr</i>	91	<i>acetate 1-0.5mg 28-day</i>	
<i>auto-injector (2pack)</i>		<i>cap</i>		<i>pack</i>	
<i>epinephrine 0.3mg/0.3ml</i>	19	<i>esomeprazole 40mg dr</i>	91	<i>eszopiclone 1mg tab</i>	75
<i>auto-injector (2pack)</i>		<i>cap</i>		<i>eszopiclone 2mg tab</i>	75
<i>eplerenone 25mg tab</i>	37	<i>estarylla tab 28-day pack</i>	68	<i>eszopiclone 3mg tab</i>	75
<i>eplerenone 50mg tab</i>	37	<i>estradiol 0.0025mg/hr</i>	70	<i>ethambutol 100mg tab</i>	39
ERIVEDGE 150MG CAP	40	<i>weekly patch</i>		<i>ethambutol 400mg tab</i>	39
ERLEADA 240MG TAB	40	<i>estradiol 0.01% vaginal</i>	91	<i>ethinyl estradiol/ethinyl</i>	68
ERLEADA 60MG TAB	40	<i>cream</i>		<i>estradiol/levonorgestrel</i>	
<i>erlotinib 100mg tab</i>	40	<i>estradiol 0.01mg vaginal</i>	91	<i>0.01-0.02-0.1mg tab</i>	
<i>erlotinib 150mg tab</i>	40	<i>insert</i>		<i>91-day pack</i>	
<i>erlotinib 25mg tab</i>	40	<i>estradiol 0.01mg/24hr</i>	70	<i>ethinyl</i>	68
<i>errin 0.35mg tab 28-day</i>	85	<i>twice weekly patch</i>		<i>estradiol/etonogestrel</i>	
<i>pack</i>		<i>estradiol 0.01mg/24hr</i>	70	<i>0.120-0.015 mg/24hr</i>	
<i>ertapenem 1gm inj</i>	38	<i>weekly patch</i>		<i>vaginal system</i>	
ERY 2% PAD	61	<i>estradiol 0.025mg/24hr</i>	70	<i>ethinyl estradiol/inert</i>	68
<i>erythromycin 0.5% ophth</i>	82	<i>twice weekly patch</i>		<i>ingredients/levonorgestre</i>	
<i>ointment</i>		<i>estradiol 0.025mg/24hr</i>	71	<i>l 0.02-1-0.1mg tab 28-day</i>	
		<i>weekly patch</i>		<i>pack</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 28-day pack</i>	68	<i>everolimus 0.25mg tab</i>	79	FANAPT 4MG TAB	49
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 91-day pack</i>	68	<i>everolimus 0.5mg tab</i>	79	FANAPT 6MG TAB	49
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack</i>	68	<i>everolimus 0.75mg tab</i>	79	FANAPT 8MG TAB	49
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	68	<i>everolimus 10mg tab</i>	42	FANAPT TAB TITRATION PACK (8)	49
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack</i>	68	<i>everolimus 1mg tab</i>	79	FARXIGA 10MG TAB	30
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack</i>	68	<i>everolimus 2.5mg tab</i>	42	FARXIGA 5MG TAB	30
<i>ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25 mg-mcg tab 28-day pack</i>	68	<i>everolimus 2mg tab for oral susp</i>	42	FASENRA 10MG/0.5ML SYRINGE	17
<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35 mg-mcg tab 28-day pack</i>	68	<i>everolimus 3mg tab for oral susp</i>	42	FASENRA 30MG/ML AUTO-INJECTOR	17
<i>ethosuximide 250mg cap</i>	24	<i>everolimus 5mg tab</i>	42	FASENRA 30MG/ML SYRINGE	17
<i>ethosuximide 50mg/ml oral soln</i>	24	<i>everolimus 5mg tab for oral susp</i>	42	<i>febuxostat 40mg tab</i>	73
<i>etodolac 200mg cap</i>	13	<i>everolimus 7.5mg tab</i>	42	<i>febuxostat 80mg tab</i>	73
<i>etodolac 300mg cap</i>	13	EVOTAZ 300-150MG TAB	53	<i>feirza 1.5/30 28-day pack</i>	68
<i>etodolac 400mg tab</i>	13	EVRYSDI 0.75MG/ML ORAL SOLN	59	<i>feirza 1/20 28-day pack</i>	68
<i>etodolac 500mg tab</i>	13	EVRYSDI 5MG TAB	59	<i>felbamate 120mg/ml oral susp</i>	23
<i>etravirine 100mg tab</i>	53	<i>exemestane 25mg tab</i>	41	<i>felbamate 400mg tab</i>	23
<i>etravirine 200mg tab</i>	53	EXXUA 18.2MG ER TAB	25	<i>felbamate 600mg tab</i>	23
EUCRISA 2% TOPICAL OINTMENT	64	EXXUA 36.3MG ER TAB	25	<i>felodipine 10mg er tab</i>	57
EULEXIN 125MG CAP	41	EXXUA 54.5MG ER TAB	25	<i>felodipine 2.5mg er tab</i>	57
		EXXUA 72.6MG ER TAB	25	<i>felodipine 5mg er tab</i>	57
		<i>ezetimibe 10mg tab</i>	32	<i>fenofibrate 134mg cap</i>	33
		<i>ezetimibe/simvastatin 10-10mg tab</i>	32	<i>fenofibrate 145mg tab</i>	33
		<i>ezetimibe/simvastatin 10-20mg tab</i>	32	<i>fenofibrate 160mg tab</i>	33
		<i>ezetimibe/simvastatin 10-40mg tab</i>	32	<i>fenofibrate 200mg cap</i>	33
		<i>ezetimibe/simvastatin 10-80mg tab</i>	32	<i>fenofibrate 43mg cap</i>	33
		F		<i>fenofibrate 48mg tab</i>	33
		<i>falmina tab 28-day pack</i>	68	<i>fenofibrate 54mg tab</i>	33
		<i>famciclovir 125mg tab</i>	55	<i>fenofibrate 67mg cap</i>	33
		<i>famciclovir 250mg tab</i>	55	<i>fenofibric acid 135mg dr cap</i>	33
		<i>famciclovir 500mg tab</i>	55	<i>fenofibric acid 45mg dr cap</i>	33
		<i>famotidine 20mg tab</i>	91	<i>fentanyl 100mcg/hr patch</i>	14
		<i>famotidine 40mg tab</i>	91	<i>fentanyl 12mcg/hr patch</i>	14
		FANAPT 10MG TAB	49	<i>fentanyl 25mcg/hr patch</i>	14
		FANAPT 12MG TAB	49	<i>fentanyl 50mcg/hr patch</i>	14
		FANAPT 1MG TAB	49	<i>fentanyl 75mcg/hr patch</i>	14
		FANAPT 2MG TAB	49	<i>fesoterodine fumarate 4mg er tab</i>	72

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Last Updated Date: 02/01/2026

ALPHABETICAL LISTING OF DRUGS

<i>fesoterodine fumarate</i>	72	<i>flunisolide 25%</i>	80	FLUPHENAZINE	51
<i>8mg er tab</i>		<i>(25mcg/act) nasal inhaler</i>		2.5MG/ML INJ	
FETZIMA 120MG ER	26	<i>fluocinolone acetonide</i>	83	<i>fluphenazine 5mg tab</i>	51
CAP		<i>0.01% otic soln</i>		FLUPHENAZINE	51
FETZIMA 20MG ER CAP	26	<i>fluocinolone acetonide</i>	63	5MG/ML ORAL SOLN	
FETZIMA 40MG ER CAP	26	<i>0.01% topical cream</i>		<i>fluphenazine decanoate</i>	51
FETZIMA 80MG ER CAP	26	<i>fluocinolone acetonide</i>	63	<i>25mg/ml inj</i>	
FETZIMA ER CAP	26	<i>0.01% topical oil</i>		FLURBIPROFEN 100MG	13
TITRATION PACK (28)		<i>fluocinolone acetonide</i>	63	TAB	
FIASP 100UNIT/ML	29	<i>0.01% topical soln</i>		FLURBIPROFEN	83
CARTRIDGE		<i>fluocinolone acetonide</i>	63	SODIUM 0.03% OPHTH	
FIASP 100UNIT/ML INJ	29	<i>0.025% topical cream</i>		SOLN	
FIASP 100UNIT/ML PEN	29	<i>fluocinolone acetonide</i>	63	<i>fluticasone propionate</i>	63
INJ (3ML)		<i>0.025% topical ointment</i>		<i>0.005% topical ointment</i>	
<i>fidaxomicin 200mg tab</i>	38	<i>fluocinonide 0.05%</i>	63	<i>fluticasone propionate</i>	63
<i>finasteride 5mg tab</i>	72	<i>topical cream</i>		<i>0.05% topical cream</i>	
<i>fingolimod 0.5mg cap</i>	87	<i>fluocinonide 0.05%</i>	63	<i>fluticasone propionate</i>	80
FINTEPLA 2.2MG/ML	22	<i>topical e cream</i>		<i>50mcg/act nasal inhaler</i>	
ORAL SOLN		<i>fluocinonide 0.05%</i>	63	<i>fluticasone</i>	19
FIRMAGON 120MG INJ	41	<i>topical ointment</i>		<i>propionate/salmeterol</i>	
FIRMAGON 80MG INJ	41	<i>fluocinonide 0.05%</i>	63	<i>100-50mcg/act powder</i>	
<i>flecainide acetate 100mg</i>	58	<i>topical soln</i>		<i>inhaler</i>	
<i>tab</i>		<i>fluocinonide 0.1% topical</i>	63	<i>fluticasone</i>	19
<i>flecainide acetate 150mg</i>	58	<i>cream</i>		<i>propionate/salmeterol</i>	
<i>tab</i>		<i>fluorometholone 0.1%</i>	82	<i>250-50mcg/act powder</i>	
<i>flecainide acetate 50mg</i>	58	<i>ophth susp</i>		<i>inhaler</i>	
<i>tab</i>		FLUOROURACIL 2%	62	<i>fluticasone</i>	19
<i>fluconazole 100mg tab</i>	32	TOPICAL SOLN		<i>propionate/salmeterol</i>	
<i>fluconazole 10mg/ml oral</i>	32	<i>fluorouracil 5% topical</i>	62	<i>500-50mcg/act powder</i>	
<i>susp</i>		<i>cream</i>		<i>inhaler</i>	
<i>fluconazole 150mg tab</i>	32	<i>fluorouracil 5% topical</i>	62	<i>fluvoxamine maleate</i>	25
<i>fluconazole 200mg tab</i>	32	<i>soln</i>		<i>100mg tab</i>	
<i>fluconazole 200mg/100ml</i>	32	<i>fluoxetine 10mg cap</i>	25	<i>fluvoxamine maleate</i>	25
<i>inj</i>		<i>fluoxetine 20mg cap</i>	25	<i>25mg tab</i>	
<i>fluconazole 400mg/200ml</i>	32	<i>fluoxetine 40mg cap</i>	25	<i>fluvoxamine maleate</i>	25
<i>inj</i>		<i>fluoxetine 4mg/ml oral</i>	25	<i>50mg tab</i>	
<i>fluconazole 40mg/ml oral</i>	32	<i>soln</i>		<i>fondaparinux sodium</i>	20
<i>susp</i>		<i>fluoxetine 60mg tab</i>	25	<i>10mg/0.8ml syringe</i>	
<i>fluconazole 50mg tab</i>	32	FLUPHENAZINE	51	<i>fondaparinux sodium</i>	20
<i>flucytosine 250mg cap</i>	32	0.5MG/ML ORAL SOLN		<i>2.5mg/0.5ml syringe</i>	
<i>flucytosine 500mg cap</i>	32	<i>fluphenazine 10mg tab</i>	51	<i>fondaparinux sodium</i>	20
<i>fludrocortisone acetate</i>	74	<i>fluphenazine 1mg tab</i>	51	<i>5mg/0.4ml syringe</i>	
<i>0.1mg tab</i>		<i>fluphenazine 2.5mg tab</i>	51	<i>fondaparinux sodium</i>	20
				<i>7.5mg/0.6ml syringe</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>fosamprenavir 700mg tab</i>	53	<i>galantamine 8mg tab</i>	85	GENTAMICIN 1.2MG/ML	12
<i>fosfomycin 3gm powder</i>	38	<i>galantamine</i>	85	INJ	
<i>for oral soln</i>		<i>hydrobromide 16mg er</i>		GENTAMICIN 1.6MG/ML	12
<i>fosinopril sodium 10mg</i>	34	<i>cap</i>		INJ	
<i>tab</i>		<i>galantamine</i>	85	GENTAMICIN 1MG/ML	12
<i>fosinopril sodium 20mg</i>	34	<i>hydrobromide 24mg er</i>		INJ	
<i>tab</i>		<i>cap</i>		<i>gentamicin 40mg/ml inj</i>	12
<i>fosinopril sodium 40mg</i>	34	GALANTAMINE	85	GENVOYA	53
<i>tab</i>		HYDROBROMIDE		150-150-200-10MG TAB	
<i>fosinopril</i>	36	4MG/ML ORAL SOLN		GILOTRIF 20MG TAB	40
<i>sodium/hydrochlorothiazide 10-12.5mg tab</i>		<i>galantamine</i>	85	GILOTRIF 30MG TAB	40
<i>fosinopril</i>	36	<i>hydrobromide 8mg er cap</i>		GILOTRIF 40MG TAB	40
<i>sodium/hydrochlorothiazide 20-12.5mg tab</i>		<i>gallifrey 5mg tab</i>	85	<i>glatiramer acetate</i>	87
FOTIVDA 0.89MG CAP	42	GAMMAGARD 10GM	75	<i>20mg/ml syringe</i>	
FOTIVDA 1.34MG CAP	42	INJ		<i>glatiramer acetate</i>	87
FRUZAQLA 1MG CAP	40	GAMMAGARD	75	<i>40mg/ml syringe</i>	
FRUZAQLA 5MG CAP	40	2.5GM/25ML INJ		<i>glatopa 20mg/ml syringe</i>	87
FULPHILA 6MG/0.6ML	74	GAMMAGARD 5GM INJ	75	<i>glatopa 40mg/ml syringe</i>	87
SYRINGE		GAMUNEX 1GM/10ML	75	<i>glimepiride 1mg tab</i>	30
FUROSCIX 80MG/10ML	65	INJ		<i>glimepiride 2mg tab</i>	30
CARTRIDGE		GARDASIL 9 INJ	76	<i>glimepiride 4mg tab</i>	30
<i>furosemide 10mg/ml inj</i>	65	GARDASIL 9 SYRINGE	76	<i>glipizide 10mg er tab</i>	30
FUROSEMIDE 10MG/ML	65	GAUZE PAD (2 X 2)	77	<i>glipizide 10mg tab</i>	30
ORAL SOLN		GAVILYTE-C POWDER	77	<i>glipizide 2.5mg er tab</i>	31
<i>furosemide 20mg tab</i>	65	FOR ORAL SOLN		<i>glipizide 5mg er tab</i>	31
<i>furosemide 40mg tab</i>	65	<i>gavilyte-g powder for</i>	77	<i>glipizide 5mg tab</i>	31
<i>furosemide 80mg tab</i>	65	<i>oral soln</i>		<i>glipizide/metformin</i>	27
FUROSEMIDE 8MG/ML	65	<i>gavilyte-n powder for</i>	77	<i>2.5-250mg tab</i>	
ORAL SOLN		<i>oral soln</i>		<i>glipizide/metformin</i>	27
<i>fyavolv 0.0025-0.5mg tab</i>	68	GAVRETO 100MG CAP	42	<i>2.5-500mg tab</i>	
<i>fyavolv 0.005-1mg tab</i>	68	<i>gefitinib 250mg tab</i>	40	<i>glipizide/metformin</i>	27
		<i>gemfibrozil 600mg tab</i>	33	<i>5-500mg tab</i>	
		GEMTESA 75MG TAB	72	GLUCOSE	80
		<i>generlac 10gm/15ml oral</i>	71	100MG/ML/SODIUM	
		<i>soln</i>		CHLORIDE 2MG/ML INJ	
		<i>gentamicin 0.1% topical</i>	61	GLUCOSE	80
		<i>cream</i>		100MG/ML/SODIUM	
		<i>gentamicin 0.1% topical</i>	61	CHLORIDE 4.5MG/ML	
		<i>ointment</i>		INJ	
		<i>gentamicin 0.3% ophth</i>	82	<i>glucose 50mg/ml inj</i>	80
		<i>soln</i>			
		GENTAMICIN 0.8MG/ML	12		
		INJ			

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ALPHABETICAL LISTING OF DRUGS

<i>glucose</i>	80	<i>glucose 50mg/ml/sodium</i>	80	H	
<i>50mg/ml/potassium</i>		<i>chloride 9mg/ml inj</i>		HADLIMA 40MG/0.4ML	13
<i>chloride</i>		GLUCOSE/SODIUM	81	AUTO-INJECTOR	
<i>0.01meq/ml/sodium</i>		CHLORIDE		HADLIMA 40MG/0.4ML	13
<i>chloride 4.5mg/ml inj</i>		25MG/ML-4.5MG/ML		SYRINGE	
<i>glucose</i>	80	INJ		HADLIMA 40MG/0.8ML	13
<i>50mg/ml/potassium</i>		<i>glutamine 5000mg</i>	66	AUTO-INJECTOR	
<i>chloride 0.02meq/ml inj</i>		<i>powder for oral soln</i>		HADLIMA 40MG/0.8ML	13
GLUCOSE	80	<i>glyburide 1.25mg tab</i>	31	SYRINGE	
50MG/ML/POTASSIUM		<i>glyburide 2.5mg tab</i>	31	HAEGARDA 2000UNIT	75
CHLORIDE		<i>glyburide 5mg tab</i>	31	INJ	
0.02MEQ/ML/SODIUM		<i>glyburide/metformin</i>	27	HAEGARDA 3000UNIT	75
CHLORIDE 2.25MG/ML		<i>1.25-250mg tab</i>		INJ	
INJ		<i>glyburide/metformin</i>	27	<i>halobetasol propionate</i>	63
<i>glucose</i>	80	<i>2.5-500mg tab</i>		<i>0.05% topical cream</i>	
<i>50mg/ml/potassium</i>		<i>glyburide/metformin</i>	27	<i>halobetasol propionate</i>	63
<i>chloride</i>		<i>5-500mg tab</i>		<i>0.05% topical ointment</i>	
<i>0.02meq/ml/sodium</i>		<i>glycopyrrolate 1mg tab</i>	91	<i>haloperidol 0.5mg tab</i>	48
<i>chloride 4.5mg/ml inj</i>		<i>glycopyrrolate 2mg tab</i>	91	<i>haloperidol 10mg tab</i>	48
<i>glucose</i>	80	GLYXAMBI 10-5MG TAB	27	<i>haloperidol 1mg tab</i>	48
<i>50mg/ml/potassium</i>		GLYXAMBI 25-5MG TAB	27	<i>haloperidol 20mg tab</i>	48
<i>chloride</i>		GOMEKLI 1MG CAP	42	<i>haloperidol 2mg tab</i>	48
<i>0.02meq/ml/sodium</i>		GOMEKLI 1MG TAB	42	<i>haloperidol 2mg/ml oral</i>	48
<i>chloride 9mg/ml inj</i>		FOR ORAL SUSP		<i>soln</i>	
<i>glucose</i>	80	GOMEKLI 2MG CAP	42	<i>haloperidol 5mg tab</i>	48
<i>50mg/ml/potassium</i>		<i>granisetron 1mg tab</i>	31	<i>haloperidol 5mg/ml inj</i>	48
<i>chloride</i>		<i>griseofulvin 125mg tab</i>	32	<i>haloperidol decanoate</i>	48
<i>0.03meq/ml/sodium</i>		<i>griseofulvin 250mg tab</i>	32	<i>100mg/ml (1ml) inj</i>	
<i>chloride 4.5mg/ml inj</i>		<i>griseofulvin 25mg/ml oral</i>	32	<i>haloperidol decanoate</i>	48
<i>glucose</i>	80	<i>susp</i>		<i>100mg/ml (5ml) inj</i>	
<i>50mg/ml/potassium</i>		<i>griseofulvin 500mg tab</i>	32	<i>haloperidol decanoate</i>	48
<i>chloride</i>		<i>guanfacine 1mg er tab</i>	11	<i>50mg/ml (1ml) inj</i>	
<i>0.04meq/ml/sodium</i>		<i>guanfacine 1mg tab</i>	35	<i>haloperidol decanoate</i>	48
<i>chloride 4.5mg/ml inj</i>		<i>guanfacine 2mg er tab</i>	11	<i>50mg/ml (5ml) inj</i>	
<i>glucose</i>	80	<i>guanfacine 2mg tab</i>	35	HAVRIX 1440ELU/ML	76
<i>50mg/ml/potassium</i>		<i>guanfacine 3mg er tab</i>	11	SYRINGE	
<i>chloride</i>		<i>guanfacine 4mg er tab</i>	11	HAVRIX 720ELU/0.5ML	76
<i>0.04meq/ml/sodium</i>		GVOKE 0.5MG/0.1ML	28	SYRINGE	
<i>chloride 9mg/ml inj</i>		AUTO-INJECTOR		<i>heather 0.35mg 28-day</i>	85
GLUCOSE	80	GVOKE 1MG/0.2ML	28	<i>pack</i>	
50MG/ML/SODIUM		AUTO-INJECTOR		<i>heparin sodium porcine</i>	20
CHLORIDE 2MG/ML INJ		GVOKE 1MG/0.2ML INJ	28	<i>10000unit/ml inj</i>	
<i>glucose 50mg/ml/sodium</i>	80	GVOKE 1MG/0.2ML	28	<i>heparin sodium porcine</i>	20
<i>chloride 4.5mg/ml inj</i>		SYRINGE		<i>1000unit/ml inj</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>heparin sodium porcine</i>	20	<i>hydralazine 25mg tab</i>	37	<i>hydrochlorothiazide/olme</i>	36
<i>20000unit/ml inj</i>		<i>hydralazine 50mg tab</i>	37	<i>sartan medoxomil</i>	
<i>heparin sodium porcine</i>	20	<i>hydrochlorothiazide</i>	65	<i>25-40mg tab</i>	
<i>5000unit/ml inj</i>		<i>12.5mg cap</i>		<i>hydrochlorothiazide/spiro</i>	65
HEPLISAV-B	76	<i>hydrochlorothiazide</i>	65	<i>nolactone 25-25mg tab</i>	
20MCG/0.5ML SYRINGE		<i>12.5mg tab</i>		<i>hydrochlorothiazide/tria</i>	65
HERNEXEOS 60MG TAB	46	<i>hydrochlorothiazide</i>	65	<i>nterene 25-37.5mg cap</i>	
HIBERIX 10MCG INJ	76	<i>25mg tab</i>		<i>hydrochlorothiazide/tria</i>	65
HUMALOG 100UNIT/ML	29	<i>hydrochlorothiazide</i>	65	<i>nterene 25-37.5mg tab</i>	
CARTRIDGE		<i>50mg tab</i>		<i>hydrochlorothiazide/tria</i>	65
HUMALOG 100UNIT/ML	29	<i>hydrochlorothiazide/irbes</i>	36	<i>nterene 50-75mg tab</i>	
KWIKPEN (3ML)		<i>artan 12.5-150mg tab</i>		<i>hydrochlorothiazide/vals</i>	36
HUMALOG 200UNIT/ML	29	<i>hydrochlorothiazide/irbes</i>	36	<i>artan 12.5-160mg tab</i>	
KWIKPEN (3ML)		<i>artan 12.5-300mg tab</i>		<i>hydrochlorothiazide/vals</i>	36
HUMALOG JUNIOR	29	<i>hydrochlorothiazide/lisin</i>	36	<i>artan 12.5-320mg tab</i>	
100UNIT/ML PEN INJ		<i>opril 12.5-10mg tab</i>		<i>hydrochlorothiazide/vals</i>	36
(3ML)		<i>hydrochlorothiazide/lisin</i>	36	<i>artan 12.5-80mg tab</i>	
HUMALOG MIX (50/50)	29	<i>opril 12.5-20mg tab</i>		<i>hydrochlorothiazide/vals</i>	36
100UNIT/ML PEN INJ		<i>hydrochlorothiazide/lisin</i>	36	<i>artan 25-160mg tab</i>	
(3ML)		<i>opril 25-20mg tab</i>		<i>hydrochlorothiazide/vals</i>	36
HUMALOG MIX (75/25)	29	<i>hydrochlorothiazide/losar</i>	36	<i>artan 25-320mg tab</i>	
100UNIT/ML INJ		<i>tan potassium</i>		<i>hydrocodone</i>	15
HUMALOG MIX (75/25)	29	<i>12.5-100mg tab</i>		<i>bitartrate/acetaminophen</i>	
100UNIT/ML KWIKPEN		<i>hydrochlorothiazide/losar</i>	36	<i>0.5-21.7mg/ml oral soln</i>	
(3ML)		<i>tan potassium 12.5-50mg</i>		<i>hydrocodone</i>	15
HUMULIN (70/30)	29	<i>tab</i>		<i>bitartrate/acetaminophen</i>	
100UNIT/ML INJ		<i>hydrochlorothiazide/losar</i>	36	<i>10-325mg tab</i>	
HUMULIN (70/30)	29	<i>tan potassium 25-100mg</i>		<i>hydrocodone</i>	15
100UNIT/ML PEN INJ		<i>tab</i>		<i>bitartrate/acetaminophen</i>	
(3ML)		<i>hydrochlorothiazide/meto</i>	36	<i>5-325mg tab</i>	
HUMULIN N	29	<i>prolol tartrate 25-100mg</i>		<i>hydrocodone</i>	15
100UNIT/ML INJ		<i>tab</i>		<i>bitartrate/acetaminophen</i>	
HUMULIN N	29	<i>hydrochlorothiazide/meto</i>	36	<i>7.5-325mg tab</i>	
100UNIT/ML PEN INJ		<i>prolol tartrate 25-50mg</i>		<i>hydrocodone</i>	15
(3ML)		<i>tab</i>		<i>bitartrate/ibuprofen</i>	
HUMULIN R	29	<i>hydrochlorothiazide/meto</i>	36	<i>7.5-200mg tab</i>	
100UNIT/ML INJ		<i>prolol tartrate 50-100mg</i>		<i>hydrocortisone 1%</i>	63
HUMULIN R	29	<i>tab</i>		<i>topical cream</i>	
500UNIT/ML INJ		<i>hydrochlorothiazide/olme</i>	36	<i>hydrocortisone 1.67mg/ml</i>	16
HUMULIN R	29	<i>sartan medoxomil</i>		<i>enema</i>	
500UNIT/ML PEN INJ		<i>12.5-20mg tab</i>		<i>hydrocortisone 10mg tab</i>	74
(3ML)		<i>hydrochlorothiazide/olme</i>	36	<i>hydrocortisone 2.5%</i>	16
<i>hydralazine 100mg tab</i>	37	<i>sartan medoxomil</i>		<i>topical cream</i>	
<i>hydralazine 10mg tab</i>	37	<i>12.5-40mg tab</i>			

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ALPHABETICAL LISTING OF DRUGS

HYDROCORTISONE	63	<i>icosapent ethyl 500mg</i>	32	INGREZZA 80MG	86
2.5% TOPICAL LOTION		<i>cap</i>		SPRINKLE CAP	
<i>hydrocortisone 2.5%</i>	63	IDHIFA 100MG TAB	43	INGREZZA CAP	86
<i>topical ointment</i>		IDHIFA 50MG TAB	43	THERAPY PACK (28)	
<i>hydrocortisone 20mg tab</i>	74	<i>imatinib 100mg tab</i>	43	INLURIYO 200MG TAB	41
<i>hydrocortisone 5mg tab</i>	74	<i>imatinib 400mg tab</i>	43	INLYTA 1MG TAB	40
<i>hydromorphone 2mg tab</i>	14	IMBRUVICA 140MG CAP	43	INLYTA 5MG TAB	40
<i>hydromorphone 4mg tab</i>	14	IMBRUVICA 140MG TAB	43	INQOVI 35-100MG TAB	41
<i>hydromorphone 8mg tab</i>	14	IMBRUVICA 280MG TAB	43	PACK (5)	
<i>hydroxychloroquine</i>	39	IMBRUVICA 420MG TAB	43	INREBIC 100MG CAP	43
<i>sulfate 200mg tab</i>		IMBRUVICA 70MG CAP	43	INSULIN GLARGINE	29
<i>hydroxyurea 500mg cap</i>	46	IMBRUVICA 70MG/ML	43	300UNIT/ML PEN INJ	
<i>hydroxyzine 10mg tab</i>	17	ORAL SUSP		(1.5ML)	
<i>hydroxyzine 25mg tab</i>	17	<i>imipramine 10mg tab</i>	27	INSULIN GLARGINE	30
<i>hydroxyzine 2mg/ml oral</i>	17	<i>imipramine 25mg tab</i>	27	300UNIT/ML PEN INJ	
<i>soln</i>		<i>imipramine 50mg tab</i>	27	(3ML)	
<i>hydroxyzine 50mg tab</i>	17	<i>imiquimod 5% topical</i>	64	INSULIN	30
<i>hydroxyzine pamoate</i>	17	<i>cream</i>		GLARGINE-YFGN	
<i>25mg cap</i>		IMKELDI 80MG/ML	43	100UNIT/ML INJ	
<i>hydroxyzine pamoate</i>	17	ORAL SOLN		(BIOCON)	
<i>50mg cap</i>		IMOVAX 2.5UNIT/ML INJ	76	INSULIN	30
I		IMPAVIDO 50MG CAP	38	GLARGINE-YFGN	
<i>ibandronate 150mg tab</i>	66	<i>incassia 0.35mg tab</i>	85	100UNIT/ML PEN INJ	
IBRANCE 100MG CAP	42	<i>28-day pack</i>		(3ML) (BIOCON)	
IBRANCE 100MG TAB	42	INCRELEX 40MG/4ML	67	INSULIN LISPRO	30
IBRANCE 125MG CAP	42	INJ		100UNIT/ML INJ	
IBRANCE 125MG TAB	42	INCRUSE ELLIPTA	18	INSULIN LISPRO	30
IBRANCE 75MG CAP	42	62.5MCG/INH POWDER		100UNIT/ML PEN INJ	
IBRANCE 75MG TAB	42	INHALER		(3ML)	
IBTROZI 200MG CAP	42	<i>indapamide 1.25mg tab</i>	65	INSULIN LISPRO	30
<i>ibu 600mg tab</i>	13	<i>indapamide 2.5mg tab</i>	65	JUNIOR 100UNIT/ML	
<i>ibu 800mg tab</i>	13	<i>indomethacin 25mg cap</i>	13	PEN INJ (3ML)	
<i>ibuprofen 400mg tab</i>	13	<i>indomethacin 50mg cap</i>	13	INSULIN LISPRO	30
<i>ibuprofen 600mg tab</i>	13	<i>indomethacin 75mg er</i>	13	PROTAMINE HUMAN	
<i>ibuprofen 800mg tab</i>	13	<i>cap</i>		(75/25) 100UNIT/ML	
<i>icatibant 30mg/3ml</i>	75	INFANRIX SYRINGE	76	PEN INJ (3ML)	
<i>syringe</i>		INGREZZA 40MG CAP	86	INSULIN PEN NEEDLE	77
<i>iclevia tab 91-day pack</i>	68	INGREZZA 40MG	86	INSULIN SYRINGE	77
ICLUSIG 10MG TAB	43	SPRINKLE CAP		INSULIN SYRINGE	77
ICLUSIG 15MG TAB	43	INGREZZA 60MG CAP	86	(DISP) U-100 0.3ML	
ICLUSIG 30MG TAB	43	INGREZZA 60MG	86	INSULIN SYRINGE	77
ICLUSIG 45MG TAB	43	SPRINKLE CAP		(DISP) U-100 1/2ML	
<i>icosapent ethyl 1000mg</i>	32	INGREZZA 80MG CAP	86	INSULIN SYRINGE	77
<i>cap</i>				(DISP) U-100 1ML	

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: 02/01/2026

ALPHABETICAL LISTING OF DRUGS

INTELENCE 25MG TAB	53	<i>isosorbide dinitrate 20mg</i>	16	<i>jantoven 5mg tab</i>	20
<i>introvale tab 91-day pack</i>	68	<i>tab</i>		<i>jantoven 6mg tab</i>	20
INVEGA SUSTENNA	49	<i>isosorbide dinitrate 30mg</i>	16	<i>jantoven 7.5mg tab</i>	20
117MG/0.75ML		<i>tab</i>		JANUMET 50-1000MG	27
SYRINGE		<i>isosorbide dinitrate 5mg</i>	16	TAB	
INVEGA SUSTENNA	49	<i>tab</i>		JANUMET 50-500MG	27
156MG/ML SYRINGE		ISOSORBIDE	16	TAB	
INVEGA SUSTENNA	49	MONONITRATE 10MG		JANUMET XR	27
234MG/1.5ML SYRINGE		TAB		100-1000MG TAB	
INVEGA SUSTENNA	49	<i>isosorbide mononitrate</i>	16	JANUMET XR	27
39MG/0.25ML SYRINGE		<i>120mg er tab</i>		50-1000MG TAB	
INVEGA SUSTENNA	49	ISOSORBIDE	16	JANUMET XR 50-500MG	27
78MG/0.5ML SYRINGE		MONONITRATE 20MG		TAB	
IPOL INJ	76	TAB		JANUVIA 100MG TAB	29
<i>ipratropium bromide</i>	18	<i>isosorbide mononitrate</i>	16	JANUVIA 25MG TAB	29
<i>0.02% inh soln</i>		<i>30mg er tab</i>		JANUVIA 50MG TAB	29
<i>ipratropium bromide</i>	80	<i>isosorbide mononitrate</i>	16	JARDIANCE 10MG TAB	30
<i>0.03% (0.021mg/act)</i>		<i>60mg er tab</i>		JARDIANCE 25MG TAB	30
<i>nasal inhaler</i>		<i>isotretinoin 10mg cap</i>	61	<i>jasmiel tab 28-day pack</i>	69
<i>ipratropium bromide</i>	80	<i>isotretinoin 20mg cap</i>	61	JAYPIRCA 100MG TAB	43
<i>0.06% (0.042mg/act)</i>		<i>isotretinoin 30mg cap</i>	61	JAYPIRCA 50MG TAB	43
<i>nasal inhaler</i>		<i>isotretinoin 40mg cap</i>	61	JENTADUETO	27
<i>ipratropium/albuterol</i>	19	ITOVEBI 3MG TAB	43	2.5-1000MG TAB	
<i>0.5-2.5mg/3ml inh soln</i>		ITOVEBI 9MG TAB	43	JENTADUETO	28
<i>irbesartan 150mg tab</i>	35	<i>itraconazole 100mg cap</i>	32	2.5-500MG TAB	
<i>irbesartan 300mg tab</i>	35	<i>ivabradine 5mg tab</i>	59	JENTADUETO XR	28
<i>irbesartan 75mg tab</i>	35	<i>ivabradine 7.5mg tab</i>	59	2.5-1000MG TAB	
ISENTRESS 100MG	53	<i>ivermectin 3mg tab</i>	16	JENTADUETO XR	28
CHEW TAB		IWILFIN 192MG TAB	47	5-1000MG TAB	
ISENTRESS 100MG	53	IXIARO 0.006MG/0.5ML	76	<i>jinteli 0.005-1mg tab</i>	69
GRANULES FOR ORAL		SYRINGE		JUBBONTI 60MG/ML	66
SUSP		J		SYRINGE	
ISENTRESS 25MG	53	<i>jaimiess tab 91-day pack</i>	69	<i>juleber tab 28-day pack</i>	69
CHEW TAB		JAKAFI 10MG TAB	43	JULUCA 50-25MG TAB	54
ISENTRESS 400MG TAB	53	JAKAFI 15MG TAB	43	<i>junel 1.5/30 tab 21-day</i>	69
ISENTRESS 600MG TAB	53	JAKAFI 20MG TAB	43	<i>pack</i>	
<i>isibloom tab 28-day pack</i>	69	JAKAFI 25MG TAB	43	<i>junel 1/20 tab 21-day</i>	69
<i>isoniazid 100mg tab</i>	39	JAKAFI 5MG TAB	43	<i>pack</i>	
<i>isoniazid 10mg/ml oral</i>	39	<i>jantoven 10mg tab</i>	20	<i>junel fe tab 1.5/30 28-day</i>	69
<i>soln</i>		<i>jantoven 1mg tab</i>	20	<i>pack</i>	
<i>isoniazid 300mg tab</i>	39	<i>jantoven 2.5mg tab</i>	20	<i>junel fe tab 1/20 28-day</i>	69
<i>isosorbide dinitrate 10mg</i>	16	<i>jantoven 2mg tab</i>	20	<i>pack</i>	
<i>tab</i>		<i>jantoven 3mg tab</i>	20	JYNNEOS 0.5ML INJ	76
		<i>jantoven 4mg tab</i>	20	K	

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ALPHABETICAL LISTING OF DRUGS

KALETRA 80-20MG/ML	54	KISQALI TAB 600MG	43	lamotrigine 150mg tab	22
ORAL SOLN		DAILY DOSE PACK (63)		lamotrigine 200mg tab	22
KALYDECO 13.4MG	88	KISQALI/FEMARA 400	41	lamotrigine 25mg chew	22
ORAL GRANULES		CO-PACK (70)		tab	
KALYDECO 150MG TAB	88	KISQALI/FEMARA 600	41	lamotrigine 25mg tab	22
KALYDECO 25MG ORAL	88	CO-PACK (91)		lamotrigine 5mg chew tab	22
GRANULES		klor-con 10meq er tab	81	lansoprazole 15mg dr cap	91
KALYDECO 5.8MG	88	klor-con 10meq micro er	81	lansoprazole 30mg dr cap	91
ORAL GRANULES		tab		lapatinib 250mg tab	43
KALYDECO 50MG ORAL	88	klor-con 15meq micro er	81	larin 1.5/30 tab 21-day	69
GRANULES		tab		pack	
KALYDECO 75MG ORAL	88	klor-con 20meq micro er	81	larin 1/20 tab 21-day	69
GRANULES		tab		pack	
kariva tab 28-day pack	69	klor-con 20meq powder	81	larin fe tab 1.5/30 28-day	69
KCL/D5W/LR INJ 0.15%	81	for oral soln		pack	
kcl/nacl 20meq-0.45% inj	81	KLOR-CON 8MEQ ER	81	larin fe tab 1/20 28-day	69
kcl/nacl 20meq-0.9% inj	81	TAB		pack	
kcl/nacl 40meq-9% inj	81	KLOXXADO 8MG/0.1ML	31	latanoprost 0.005% ophth	83
kelnor 1mg-35mcg tab	69	NASAL SPRAY		soln	
28-day pack		KOSELUGO 10MG CAP	43	LAZCLUZE 240MG TAB	40
KERENDIA 10MG TAB	67	KOSELUGO 25MG CAP	43	LAZCLUZE 80MG TAB	40
KERENDIA 20MG TAB	67	kourzeq 0.1% oral paste	60	leflunomide 10mg tab	12
KERENDIA 40MG TAB	67	KRAZATI 200MG TAB	43	leflunomide 20mg tab	12
KESIMPTA 20MG/0.4ML	87	kurvelo tab 28-day pack	69	lenalidomide 10mg cap	78
PEN INJ				lenalidomide 15mg cap	78
ketoconazole 2%	61	L		lenalidomide 2.5mg cap	78
shampoo		labetalol 100mg tab	56	lenalidomide 20mg cap	78
ketoconazole 2% topical	61	labetalol 200mg tab	56	lenalidomide 25mg cap	78
cream		labetalol 300mg tab	56	lenalidomide 5mg cap	78
ketoconazole 200mg tab	32	lacosamide 100mg tab	22	LENVIMA 10MG DAILY	40
ketorolac tromethamine	83	lacosamide 10mg/ml oral	22	DOSE PACK (30)	
0.4% ophth soln		soln		LENVIMA 12MG DAILY	40
ketorolac tromethamine	83	lacosamide 150mg tab	22	DOSE PACK (90)	
0.5% ophth soln		lacosamide 200mg tab	22	LENVIMA 14MG DAILY	40
ketorolac tromethamine	13	lacosamide 50mg tab	22	DOSE PACK (60)	
10mg tab		lactulose 667mg/ml oral	77	LENVIMA 18MG DAILY	40
KINRIX SYRINGE	76	soln		DOSE PACK (90)	
kionex 15gm/60ml oral	79	lamivudine 100mg tab	55	LENVIMA 20MG DAILY	40
susp		lamivudine 10mg/ml oral	54	DOSE PACK (60)	
KISQALI TAB 200MG	43	soln		LENVIMA 24MG DAILY	40
DAILY DOSE PACK (21)		lamivudine 150mg tab	54	DOSE PACK (90)	
KISQALI TAB 400MG	43	lamivudine 300mg tab	54	LENVIMA 4MG DAILY	40
DAILY DOSE PACK (42)		lamivudine/zidovudine	54	DOSE PACK (30)	
		150-300mg tab			
		lamotrigine 100mg tab	22		

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ALPHABETICAL LISTING OF DRUGS

LENVIMA 8MG DAILY DOSE PACK (60)	40	levothyroxine sodium 112mcg tab	90	LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	85
lessina tab 28-day pack	69	levothyroxine sodium 125mcg tab	90	linezolid 100mg/5ml oral susp	38
letrozole 2.5mg tab	41	levothyroxine sodium 137mcg tab	90	linezolid 600mg tab	38
leucovorin 10mg tab	47	levothyroxine sodium 150mcg tab	90	linezolid 600mg/300ml inj	38
leucovorin 15mg tab	47	levothyroxine sodium 175mcg tab	90	LINZESS 145MCG CAP	77
leucovorin 25mg tab	47	levothyroxine sodium 200mcg tab	90	LINZESS 290MCG CAP	77
leucovorin 5mg tab	47	levothyroxine sodium 25mcg tab	90	LINZESS 72MCG CAP	77
LEUKERAN 2MG TAB	39	levothyroxine sodium 300mcg tab	90	liothyronine sodium 25mcg tab	90
levetiracetam 1000mg tab	22	levothyroxine sodium 50mcg tab	90	liothyronine sodium 50mcg tab	90
levetiracetam 100mg/ml oral soln	22	levothyroxine sodium 75mcg tab	90	liothyronine sodium 5mcg tab	90
levetiracetam 250mg tab	22	levothyroxine sodium 88mcg tab	90	liraglutide 18mg/3ml pen inj	29
levetiracetam 500mg er tab	22	levoxyl 100mcg tab	90	lisdexamfetamine dimesylate 10mg cap	11
levetiracetam 500mg tab	22	levoxyl 112mcg tab	90	lisdexamfetamine dimesylate 20mg cap	11
levetiracetam 750mg er tab	22	levoxyl 125mcg tab	90	lisdexamfetamine dimesylate 30mg cap	11
levetiracetam 750mg tab	22	levoxyl 137mcg tab	90	lisdexamfetamine dimesylate 40mg cap	11
LEVOBUNOLOL 0.5% OPTH SOLN	82	levoxyl 150mcg tab	90	lisdexamfetamine dimesylate 50mg cap	11
levocarnitine 100mg/ml oral soln	66	levoxyl 175mcg tab	90	lisdexamfetamine dimesylate 60mg cap	11
levocarnitine 330mg tab	66	levoxyl 200mcg tab	90	lisdexamfetamine dimesylate 70mg cap	11
levocetirizine 5mg tab	87	levoxyl 25mcg tab	90	lisinopril 10mg tab	34
levofloxacin 250mg tab	71	levoxyl 50mcg tab	90	lisinopril 2.5mg tab	34
levofloxacin 25mg/ml oral soln	71	levoxyl 75mcg tab	90	lisinopril 20mg tab	34
levofloxacin 500mg tab	71	levoxyl 88mcg tab	90	lisinopril 30mg tab	34
levofloxacin 500mg/100ml inj	71	lidocaine 4% mucous membrane topical soln	64	lisinopril 40mg tab	34
levofloxacin 750mg tab	71	lidocaine 5% patch	64	lisinopril 5mg tab	34
levofloxacin 750mg/150ml inj	71	lidocaine 5% topical ointment	64	LITFULO 50MG CAP	64
levonest tab 28-day pack	69	lidocaine viscous 2% mucous membrane topical soln	60	lithium carbonate 150mg cap	48
levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack	69	lidocaine/prilocaine 2.5-2.5% topical cream	64	lithium carbonate 300mg cap	48
levorin 0.15/30 tab 28-day pack	69				
levothyroxine sodium 100mcg tab	90				

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ALPHABETICAL LISTING OF DRUGS

<i>lithium carbonate 300mg er tab</i>	48	<i>losartan potassium 50mg tab</i>	35	LUPRON 3.75MG SYRINGE (1 MONTH)	41
<i>lithium carbonate 300mg tab</i>	48	<i>loteprednol etabonate 0.5% ophth gel</i>	82	<i>lurasidone 120mg tab</i>	48
<i>lithium carbonate 450mg er tab</i>	48	<i>loteprednol etabonate 0.5% ophth susp</i>	83	<i>lurasidone 20mg tab</i>	48
LITHIUM CARBONATE 600MG CAP	48	<i>lovastatin 10mg tab</i>	33	<i>lurasidone 40mg tab</i>	48
<i>lithium citrate 60mg/ml oral soln</i>	48	<i>lovastatin 20mg tab</i>	33	<i>lurasidone 60mg tab</i>	48
LIVTENCITY 200MG TAE	55	<i>lovastatin 40mg tab</i>	33	<i>lurasidone 80mg tab</i>	48
<i>lo jaimiess tab 91-day pack</i>	69	<i>low-ogestrel tab 28-day pack</i>	69	<i>lutera tab 28-day pack</i>	69
LOKELMA 10GM	79	<i>loxapine 10mg cap</i>	50	<i>lyleq 0.35mg tab 28-day pack</i>	85
POWDER FOR ORAL SUSP		<i>loxapine 25mg cap</i>	50	LYNPARZA 100MG TAB	43
LOKELMA 5GM	79	<i>loxapine 50mg cap</i>	50	LYNPARZA 150MG TAB	43
POWDER FOR ORAL SUSP		<i>loxapine 5mg cap</i>	50	LYSODREN 500MG TAB	41
<i>lomustine 100mg cap</i>	39	<i>lubiprostone 24mcg cap</i>	77	LYTGOBI TAB 12MG	43
<i>lomustine 10mg cap</i>	39	<i>lubiprostone 8mcg cap</i>	77	DAILEY DOSE PACK (21)	
<i>lomustine 40mg cap</i>	39	<i>luizza 1.5/30 tab 21-day pack</i>	69	LYTGOBI TAB 16MG	43
LONSURF 6.14-15MG TAB	41	<i>luizza 1/20 tab 21-day pack</i>	69	DAILEY DOSE PACK (28)	
LONSURF 8.19-20MG TAB	41	LUMAKRAS 120MG TAB	43	LYTGOBI TAB 20MG	43
<i>loperamide 2mg cap</i>	31	LUMAKRAS 240MG TAB	43	DAILEY DOSE PACK (35)	
<i>lopinavir/ritonavir 100-25mg tab</i>	54	LUMAKRAS 320MG TAB	43	LYUMJEV 100UNIT/ML INJ	30
<i>lopinavir/ritonavir 200-50mg tab</i>	54	LUMIGAN 0.01% OPHTH SOLN	83	LYUMJEV 100UNIT/ML	30
<i>lorazepam 0.5mg tab</i>	17	LUMRYZ 4.5GM	89	PEN INJ (3ML)	
<i>lorazepam 1mg tab</i>	17	GRANULES FOR ORAL SUSP		LYUMJEV 200UNIT/ML	30
<i>lorazepam 2mg tab</i>	17	LUMRYZ 6GM	89	PEN INJ (3ML)	
<i>lorazepam 2mg/ml oral soln</i>	17	GRANULES FOR ORAL SUSP		<i>lyza 0.35mg tab 28-day pack</i>	85
LORBRENA 100MG TAB	43	LUMRYZ 7.5GM	89	M	
LORBRENA 25MG TAB	43	GRANULES FOR ORAL SUSP		<i>magnesium sulfate 500mg/ml inj</i>	81
<i>loryna tab 28-day pack</i>	69	LUMRYZ 9GM	89	<i>magnesium sulfate 500mg/ml syringe</i>	81
<i>losartan potassium 100mg tab</i>	35	GRANULES FOR ORAL SUSP		<i>malathion 0.5% topical lotion</i>	64
<i>losartan potassium 25mg tab</i>	35	LUMRYZ GRANULES FOR ORAL SUSP 28-DAY STARTER PACK (28)	89	<i>maraviroc 150mg tab</i>	54
		LUPRON 11.25MG SYRINGE (3 MONTH)	41	<i>maraviroc 300mg tab</i>	54
				<i>marlissa tab 28-day pack</i>	69
				MARPLAN 10MG TAB	25
				MATULANE 50MG CAP	46
				MAVYRET 100-40MG TAB	55
				MAVYRET 50-20MG ORAL PELLETT	55
				MAYZENT 0.25MG TAB	87

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ALPHABETICAL LISTING OF DRUGS

MAYZENT 1MG TAB	87	MENQUADFI INJ	76	METHOTREXATE	39
MAYZENT 2MG TAB	87	MENVEO INJ	76	25MG/ML INJ	
MAYZENT TAB STARTER	87	<i>mercaptopurine 20mg/ml</i>	39	<i>methotrexate 50mg/2ml</i>	39
PACK (12)		<i>susp</i>		<i>inj</i>	
MAYZENT TAB STARTER	87	<i>mercaptopurine 50mg tab</i>	39	METHOXSALLEN 10MG	62
PACK (7)		<i>meropenem 1gm inj</i>	38	CAP	
<i>meclizine 12.5mg tab</i>	31	<i>meropenem 500mg inj</i>	38	<i>methsuximide 300mg cap</i>	24
<i>meclizine 25mg tab</i>	31	<i>mesalamine 1200mg dr</i>	72	<i>methylphenidate 10mg er</i>	12
<i>medroxyprogesterone</i>	85	<i>tab</i>		<i>tab</i>	
<i>acetate 10mg tab</i>		<i>mesalamine 1gm rectal</i>	72	<i>methylphenidate 10mg</i>	12
<i>medroxyprogesterone</i>	85	<i>supp</i>		<i>tab</i>	
<i>acetate 150mg/ml inj</i>		<i>mesalamine 375mg er cap</i>	72	<i>methylphenidate 18mg er</i>	12
<i>medroxyprogesterone</i>	85	<i>mesalamine 400mg dr cap</i>	72	<i>osmotic tab</i>	
<i>acetate 150mg/ml syringe</i>		<i>mesalamine 66.7mg/ml</i>	72	<i>methylphenidate 1mg/ml</i>	12
<i>medroxyprogesterone</i>	85	<i>enema</i>		<i>oral soln</i>	
<i>acetate 2.5mg tab</i>		<i>mesna 400mg tab</i>	47	<i>methylphenidate 20mg er</i>	12
<i>medroxyprogesterone</i>	85	<i>metaxalone 800mg tab</i>	52	<i>tab</i>	
<i>acetate 5mg tab</i>		<i>metformin 1000mg tab</i>	28	<i>methylphenidate 20mg</i>	12
<i>mefloquine 250mg tab</i>	39	<i>metformin 500mg er tab</i>	28	<i>tab</i>	
MEGESTROL ACETATE	85	<i>metformin 500mg tab</i>	28	<i>methylphenidate 27mg er</i>	12
125MG/ML ORAL SUSP		<i>metformin 750mg er tab</i>	28	<i>osmotic tab</i>	
<i>megestrol acetate 20mg</i>	41	<i>metformin 850mg tab</i>	28	<i>methylphenidate 27mg er</i>	12
<i>tab</i>		<i>metformin/pioglitazone</i>	28	<i>tab</i>	
<i>megestrol acetate 40mg</i>	41	<i>150-15mg tab</i>		<i>methylphenidate 2mg/ml</i>	12
<i>tab</i>		<i>metformin/pioglitazone</i>	28	<i>oral soln</i>	
<i>megestrol acetate</i>	41	<i>850-15mg tab</i>		<i>methylphenidate 36mg er</i>	12
<i>40mg/ml oral susp</i>		<i>methadone 10mg tab</i>	14	<i>osmotic tab</i>	
MEKINIST 0.05MG/ML	43	METHADONE 1MG/ML	14	<i>methylphenidate 36mg er</i>	12
ORAL SOLN		ORAL SOLN		<i>tab</i>	
MEKINIST 0.5MG TAB	43	METHADONE 2MG/ML	14	<i>methylphenidate 54mg er</i>	12
MEKINIST 2MG TAB	43	ORAL SOLN		<i>osmotic tab</i>	
MEKTOVI 15MG TAB	44	<i>methadone 5mg tab</i>	14	<i>methylphenidate 54mg er</i>	12
<i>meleya 0.35mg tab</i>	85	<i>methazolamide 25mg tab</i>	65	<i>tab</i>	
<i>28-day pack</i>		<i>methazolamide 50mg tab</i>	65	<i>methylphenidate 5mg tab</i>	12
<i>meloxicam 15mg tab</i>	13	<i>methenamine hippurate</i>	38	<i>methylprednisolone 16mg</i>	74
<i>meloxicam 7.5mg tab</i>	14	<i>1gm tab</i>		<i>tab</i>	
<i>memantine 10mg tab</i>	86	<i>methimazole 10mg tab</i>	89	<i>methylprednisolone 32mg</i>	74
<i>memantine 14mg er cap</i>	86	<i>methimazole 5mg tab</i>	90	<i>tab</i>	
<i>memantine 21mg er cap</i>	86	<i>methocarbamol 500mg</i>	52	<i>methylprednisolone 4mg</i>	74
<i>memantine 28mg er cap</i>	86	<i>tab</i>		<i>tab</i>	
<i>memantine 2mg/ml oral</i>	86	<i>methocarbamol 750mg</i>	52	<i>methylprednisolone 4mg</i>	74
<i>soln</i>		<i>tab</i>		<i>tab pack (21)</i>	
<i>memantine 5mg tab</i>	86	<i>methotrexate 2.5mg tab</i>	39	<i>methylprednisolone 8mg</i>	74
<i>memantine 7mg er cap</i>	86			<i>tab</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>metoclopramide 10mg tab</i>	71	<i>microgestin 1.5/30 tab</i>	69	<i>mometasone furoate 0.1% topical ointment</i>	64
<i>metoclopramide 1mg/ml oral soln</i>	71	<i>21-day pack</i>		<i>montelukast 10mg tab</i>	18
<i>metoclopramide 5mg tab</i>	71	<i>microgestin 1/20 tab</i>	69	<i>montelukast 4mg chew tab</i>	18
<i>metolazone 10mg tab</i>	65	<i>21-day pack</i>		<i>montelukast 5mg chew tab</i>	18
<i>metolazone 2.5mg tab</i>	65	<i>microgestin fe tab 1.5/30</i>	69	<i>morphine sulfate 100mg er tab</i>	14
<i>metolazone 5mg tab</i>	65	<i>28-day pack</i>		<i>morphine sulfate 15mg er tab</i>	14
<i>metoprolol succinate 100mg er tab</i>	56	<i>microgestin fe tab 1/20</i>	69	<i>morphine sulfate 15mg tab</i>	14
<i>metoprolol succinate 200mg er tab</i>	56	<i>28-day pack</i>		<i>morphine sulfate 200mg er tab</i>	14
<i>metoprolol succinate 25mg er tab</i>	56	<i>midodrine 10mg tab</i>	58	<i>morphine sulfate 20mg/ml oral soln</i>	14
<i>metoprolol succinate 50mg er tab</i>	56	<i>midodrine 2.5mg tab</i>	58	<i>MORPHINE SULFATE 2MG/ML ORAL SOLN</i>	14
<i>metoprolol tartrate 100mg tab</i>	56	<i>midodrine 5mg tab</i>	58	<i>morphine sulfate 30mg er tab</i>	14
<i>metoprolol tartrate 25mg tab</i>	56	<i>MIEBO 1.338GM/ML OPTH SOLN</i>	83	<i>morphine sulfate 30mg tab</i>	14
<i>metoprolol tartrate 37.5mg tab</i>	56	<i>mifepristone 300mg tab</i>	28	<i>MORPHINE SULFATE 4MG/ML ORAL SOLN</i>	14
<i>metoprolol tartrate 50mg tab</i>	56	<i>mili tab 28-day pack</i>	69	<i>morphine sulfate 60mg er tab</i>	14
<i>metoprolol tartrate 75mg tab</i>	56	<i>mimvey 28-day pack</i>	69	<i>MOUNJARO 10MG/0.5ML AUTO-INJECTOR</i>	29
<i>metronidazole 0.75% topical cream</i>	64	<i>minocycline 100mg cap</i>	89	<i>MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR</i>	29
<i>metronidazole 0.75% topical gel</i>	64	<i>minocycline 50mg cap</i>	89	<i>MOUNJARO 15MG/0.5ML AUTO-INJECTOR</i>	29
<i>metronidazole 0.75% vaginal gel</i>	91	<i>minocycline 75mg cap</i>	89	<i>MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR</i>	29
<i>metronidazole 1% topical gel</i>	64	<i>minoxidil 10mg tab</i>	37	<i>MOUNJARO 5MG/0.5ML AUTO-INJECTOR</i>	29
<i>metronidazole 250mg tab</i>	38	<i>minoxidil 2.5mg tab</i>	37	<i>MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR</i>	29
<i>metronidazole 500mg tab</i>	38	<i>mirtazapine 15mg odt</i>	24		
<i>metronidazole 5mg/ml inj</i>	38	<i>mirtazapine 15mg tab</i>	24		
<i>metyrosine 250mg cap</i>	37	<i>mirtazapine 30mg odt</i>	24		
<i>mexiletine 150mg cap</i>	58	<i>mirtazapine 30mg tab</i>	24		
<i>mexiletine 200mg cap</i>	58	<i>mirtazapine 45mg odt</i>	24		
<i>mexiletine 250mg cap</i>	58	<i>mirtazapine 45mg tab</i>	24		
<i>micafungin sodium 100mg inj</i>	32	<i>mirtazapine 7.5mg tab</i>	24		
<i>micafungin sodium 50mg inj</i>	32	<i>misoprostol 100mcg tab</i>	91		
		<i>misoprostol 200mcg tab</i>	91		
		<i>M-M-R II INJ</i>	76		
		<i>modafinil 100mg tab</i>	12		
		<i>modafinil 200mg tab</i>	12		
		<i>MODEYSO 125MG CAP</i>	46		
		<i>moexipril 15mg tab</i>	34		
		<i>moexipril 7.5mg tab</i>	34		
		<i>MOLINDONE 10MG TAB</i>	49		
		<i>MOLINDONE 25MG TAB</i>	49		
		<i>MOLINDONE 5MG TAB</i>	49		
		<i>mometasone furoate 0.1% topical cream</i>	64		
		<i>mometasone furoate 0.1% topical lotion</i>	64		

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ALPHABETICAL LISTING OF DRUGS

MOVANTIK 12.5MG TAB	77	<i>naproxen 375mg dr tab</i>	14	<i>neomycin/polymyxin/dexa</i>	83
MOVANTIK 25MG TAB	77	<i>naproxen 375mg tab</i>	14	<i>methasone 0.1% ophth</i>	
<i>moxifloxacin 0.5% ophth</i>	82	<i>naproxen 500mg tab</i>	14	<i>susp</i>	
<i>soln</i>		<i>naratriptan 1mg tab</i>	78	<i>neomycin/polymyxin/hydr</i>	83
MOXIFLOXACIN	71	<i>naratriptan 2.5mg tab</i>	78	<i>ocortisone</i>	
1.6MG/ML INJ		NATACYN 5% OPTH	82	<i>3.5-10000unit-1% otic</i>	
<i>moxifloxacin 400mg tab</i>	71	SUSP		<i>soln</i>	
MRESVIA 50MCG/0.5ML	76	<i>nateglinide 120mg tab</i>	28	<i>neomycin/polymyxin/hydr</i>	83
SYRINGE		<i>nateglinide 60mg tab</i>	28	<i>ocortisone</i>	
MULTAQ 400MG TAB	58	NAYZILAM 5MG/0.1ML	21	<i>3.5-10000unit-1% otic</i>	
<i>mupirocin 2% topical</i>	61	NASAL SPRAY		<i>susp</i>	
<i>ointment</i>		<i>nebivolol 10mg tab</i>	56	<i>neo-polycin</i>	82
<i>mycophenolate mofetil</i>	79	<i>nebivolol 2.5mg tab</i>	56	<i>5mg-400unit-10000unit</i>	
<i>200mg/ml oral susp</i>		<i>nebivolol 20mg tab</i>	56	<i>ophth ointment</i>	
<i>mycophenolate mofetil</i>	79	<i>nebivolol 5mg tab</i>	56	<i>neo-polycin hc ophth</i>	83
<i>250mg cap</i>		<i>necon 0.5/35 tab 28-day</i>	69	<i>ointment</i>	
<i>mycophenolate mofetil</i>	79	<i>pack</i>		NERLYNX 40MG TAB	44
<i>500mg tab</i>		NEFAZODONE 100MG	25	NEVIRAPINE 10MG/ML	54
<i>mycophenolic acid 180mg</i>	79	TAB		ORAL SUSP	
<i>dr tab</i>		NEFAZODONE 150MG	25	<i>nevirapine 200mg tab</i>	54
<i>mycophenolic acid 360mg</i>	79	TAB		<i>nevirapine 400mg er tab</i>	54
<i>dr tab</i>		NEFAZODONE 200MG	25	NEXLETOL 180MG TAB	32
MYRBETRIQ 25MG ER	72	TAB		NEXLIZET 180-10MG	32
TAB		NEFAZODONE 250MG	25	TAB	
MYRBETRIQ 50MG ER	72	TAB		NEXPLANON 68MG	85
TAB		NEFAZODONE 50MG	25	IMPLANT	
N		TAB		<i>niacin 1000mg er tab</i>	33
<i>nabumetone 500mg tab</i>	14	NEMLUVIO 30MG	64	<i>niacin 500mg er tab</i>	33
<i>nabumetone 750mg tab</i>	14	AUTO-INJECTOR		<i>niacin 750mg er tab</i>	33
<i>nadolol 20mg tab</i>	56	<i>neomycin sulfate 500mg</i>	12	NICOTROL 10MG/ML	87
<i>nadolol 40mg tab</i>	56	<i>tab</i>		NASAL INHALER	
<i>nadolol 80mg tab</i>	56	NEOMYCIN/BACITRACI	82	<i>nifedipine 30mg er tab</i>	57
<i>nafcillin 100mg/ml inj</i>	84	N/POLYMYXIN		<i>nifedipine 30mg osmotic</i>	57
<i>nafcillin 1gm inj</i>	84	5MG-400UNIT-10000UN		<i>er tab</i>	
<i>nafcillin 2gm inj</i>	84	IT OPTH OINTMENT		<i>nifedipine 60mg er tab</i>	57
NALOXONE 0.4MG/ML	31	NEOMYCIN/POLYMYXI	82	<i>nifedipine 60mg osmotic</i>	57
CARTRIDGE		N B/GRAMICIDIN		<i>er tab</i>	
<i>naloxone 0.4mg/ml inj</i>	31	1.75-10000-0.025MG-UN		<i>nifedipine 90mg er tab</i>	57
<i>naloxone 0.4mg/ml</i>	31	T-MG/ML OPTH SOLN		<i>nifedipine 90mg osmotic</i>	57
<i>syringe</i>		NEOMYCIN/POLYMYXI	83	<i>er tab</i>	
<i>naloxone 2mg/2ml</i>	31	N/BACITRACIN/HYDRO		<i>nikki tab 28-day pack</i>	69
<i>syringe</i>		CORTISONE 1% OPTH		<i>nilotinib 150mg cap</i>	44
<i>naltrexone 50mg tab</i>	31	OINTMENT		<i>nilotinib 200mg cap</i>	44
<i>naproxen 250mg tab</i>	14			<i>nilotinib 50mg cap</i>	44

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ALPHABETICAL LISTING OF DRUGS

<i>nilutamide 150mg tab</i>	41	NORDITROPIN	67	NOVOLOG 100UNIT/ML	30
<i>nimodipine 30mg cap</i>	58	30MG/3ML PEN INJ		INJ	
NINLARO 2.3MG CAP	44	NORDITROPIN	67	NOVOLOG 100UNIT/ML	30
NINLARO 3MG CAP	44	5MG/1.5ML PEN INJ		PEN INJ (3ML)	
NINLARO 4MG CAP	44	<i>norelgestromin/ethinyl</i>	69	NOVOLOG MIX (70/30)	30
<i>nitazoxanide 500mg tab</i>	38	<i>estradiol 150-35</i>		100UNIT/ML FLEXPEN	
NITRO-BID 2% TOPICAL	16	<i>mcg/24hr patch</i>		(3ML)	
OINTMENT		<i>norethindrone 0.35mg</i>	85	NOVOLOG MIX (70/30)	30
<i>nitrofurantoin</i>	38	<i>28-day pack</i>		100UNIT/ML INJ	
<i>macro/nitrofurantoin</i>		<i>norethindrone acetate</i>	85	NUBEQA 300MG TAB	41
<i>mono 100mg cap</i>		<i>5mg tab</i>		NUCALA 100MG INJ	17
<i>nitrofurantoin</i>	38	<i>nortrel 0.5/35 tab 28-day</i>	69	NUCALA 100MG/ML	17
<i>macrocrystals 100mg cap</i>		<i>pack</i>		AUTO-INJECTOR	
<i>nitrofurantoin</i>	38	<i>nortrel 1/35 tab 21-day</i>	69	NUCALA 100MG/ML	17
<i>macrocrystals 50mg cap</i>		<i>pack</i>		SYRINGE	
<i>nitroglycerin 0.1mg/hr</i>	16	<i>nortrel 1/35 tab 28-day</i>	69	NUCALA 40MG/0.4ML	17
<i>patch</i>		<i>pack</i>		SYRINGE	
<i>nitroglycerin 0.2mg/hr</i>	16	<i>nortrel 7/7/7 tab 28-day</i>	69	NUEDEXTA 20-10MG	87
<i>patch</i>		<i>pack</i>		CAP	
<i>nitroglycerin 0.3mg sl tab</i>	16	<i>nortriptyline 10mg cap</i>	27	NUPLAZID 10MG TAB	49
<i>nitroglycerin 0.4% rectal</i>	16	<i>nortriptyline 25mg cap</i>	27	NUPLAZID 34MG CAP	49
<i>ointment</i>		<i>nortriptyline 2mg/ml oral</i>	27	<i>nyamyc 100000unit/gm</i>	61
<i>nitroglycerin 0.4mg sl tab</i>	16	<i>soln</i>		<i>topical powder</i>	
<i>nitroglycerin 0.4mg/hr</i>	16	<i>nortriptyline 50mg cap</i>	27	<i>nylia 1/35 tab 28-day</i>	69
<i>patch</i>		<i>nortriptyline 75mg cap</i>	27	<i>pack</i>	
<i>nitroglycerin 0.6mg sl tab</i>	16	NORVIR 100MG ORAL	54	<i>nylia 7/7/7 tab 28-day</i>	69
<i>nitroglycerin 0.6mg/hr</i>	16	POWDER		<i>pack</i>	
<i>patch</i>		NOVOLIN MIX (70/30)	30	<i>nystatin 100000 unit/gm</i>	62
NIVESTYM	74	100UNIT/ML FLEXPEN		<i>topical ointment</i>	
300MCG/0.5ML		(3ML)		<i>nystatin 100000unit/gm</i>	62
SYRINGE		NOVOLIN MIX (70/30)	30	<i>topical powder</i>	
NIVESTYM 300MCG/ML	74	100UNIT/ML INJ		<i>nystatin 100000unit/ml</i>	60
INJ		NOVOLIN N	30	<i>oral susp</i>	
NIVESTYM	74	100UNIT/ML INJ		<i>nystatin 100000unit/ml</i>	62
480MCG/0.8ML		NOVOLIN N	30	<i>topical cream</i>	
SYRINGE		100UNIT/ML PEN INJ		<i>nystatin 500000unit tab</i>	32
NIVESTYM	74	(3ML)		<i>nystatin/triamcinolone</i>	62
480MCG/1.6ML INJ		NOVOLIN R	30	<i>acetonide 100000-0.1</i>	
<i>nora-be 0.35mg tab</i>	85	100UNIT/ML INJ		<i>unit/gm-% topical</i>	
<i>28-day pack</i>		NOVOLIN R	30	<i>ointment</i>	
NORDITROPIN	67	100UNIT/ML PEN INJ		<i>nystatin/triamcinolone</i>	62
10MG/1.5ML PEN INJ		(3ML)		<i>acetonide</i>	
NORDITROPIN	67	NOVOLOG 100UNIT/ML	30	<i>100000-0.1unit/gm-%</i>	
15MG/1.5ML PEN INJ		CARTRIDGE		<i>topical cream</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>nystop 100000unit/gm</i>	62	<i>olanzapine 5mg odt</i>	50	ORENCIA 125MG/ML	79
<i>topical powder</i>		<i>olanzapine 5mg tab</i>	50	AUTO-INJECTOR	
NYVEPRIA 6MG/0.6ML	74	<i>olanzapine 7.5mg tab</i>	50	ORENCIA 125MG/ML	79
SYRINGE		<i>olmesartan medoxomil</i>	35	SYRINGE	
O		<i>20mg tab</i>		ORENCIA 50MG/0.4ML	79
<i>octreotide 0.05mg/ml inj</i>	66	<i>olmesartan medoxomil</i>	35	SYRINGE	
<i>octreotide 0.1mg/ml inj</i>	66	<i>40mg tab</i>		ORENCIA 87.5MG/0.7ML	79
<i>octreotide 0.2mg/ml inj</i>	66	<i>olmesartan medoxomil</i>	35	SYRINGE	
<i>octreotide 0.5mg/ml inj</i>	66	<i>5mg tab</i>		ORGOVYX 120MG TAB	41
<i>octreotide 1mg/ml inj</i>	66	<i>olopatadine 0.6%</i>	80	ORKAMBI 125-100MG	88
ODEFSEY 200-25-25MG	54	<i>(0.665mg/act) nasal</i>		ORAL GRANULES	
TAB		<i>inhaler</i>		ORKAMBI 125-100MG	88
ODOMZO 200MG CAP	40	OLUMIANT 1MG TAB	12	TAB	
OFEV 100MG CAP	88	OLUMIANT 2MG TAB	12	ORKAMBI 125-200MG	88
OFEV 150MG CAP	88	OLUMIANT 4MG TAB	12	TAB	
<i>ofloxacin 0.3% ophth soln</i>	82	<i>omega-3 acid ethyl esters</i>	33	ORKAMBI 188-150MG	88
<i>ofloxacin 0.3% otic soln</i>	83	<i>(usp) 1gm cap</i>		ORAL GRANULES	
OGSIVEO 100MG TAB	44	<i>omeprazole 10mg dr cap</i>	91	ORKAMBI 94-75MG	88
7-DAY PACK (14)		<i>omeprazole 20mg dr cap</i>	91	ORAL GRANULES	
OGSIVEO 150MG TAB	44	<i>omeprazole 40mg dr cap</i>	91	<i>orphenadrine citrate</i>	52
7-DAY PACK (14)		OMNITROPE	67	<i>100mg er tab</i>	
OJEMDA 100MG TAB	44	10MG/1.5ML		<i>orquidea 0.35mg tab</i>	85
PACK (400MG ONCE		CARTRIDGE		<i>28-day pack</i>	
WEEKLY) (16)		OMNITROPE 5.8MG INJ	67	ORSERDU 345MG TAB	41
OJEMDA 100MG TAB	44	OMNITROPE	67	ORSERDU 86MG TAB	41
PACK (500MG ONCE		5MG/1.5ML CARTRIDGE		<i>oseltamivir 30mg cap</i>	55
WEEKLY) (20)		<i>ondansetron 0.8mg/ml</i>	31	<i>oseltamivir 45mg cap</i>	55
OJEMDA 100MG TAB	44	<i>oral soln</i>		<i>oseltamivir 6mg/ml oral</i>	55
PACK (600MG ONCE		<i>ondansetron 4mg odt</i>	31	<i>susp</i>	
WEEKLY) (24)		<i>ondansetron 4mg tab</i>	31	<i>oseltamivir 75mg cap</i>	55
OJEMDA 25MG/ML	44	<i>ondansetron 8mg odt</i>	31	OTEZLA 10/20/30MG	62
POWDER FOR ORAL		<i>ondansetron 8mg tab</i>	31	TAB 28-DAY STARTER	
SUSP		ONUREG 200MG TAB	39	PACK (55)	
OJJAARA 100MG TAB	44	ONUREG 300MG TAB	39	OTEZLA 10/20MG TAB	62
OJJAARA 150MG TAB	44	OPIPZA 10MG ORAL	52	28-DAY STARTER PACK	
OJJAARA 200MG TAB	44	FILM		(55)	
<i>olanzapine 10mg inj</i>	50	OPIPZA 2MG ORAL	52	OTEZLA 20MG TAB	62
<i>olanzapine 10mg odt</i>	50	FILM		OTEZLA 30MG TAB	62
<i>olanzapine 10mg tab</i>	50	OPIPZA 5MG ORAL	52	OTEZLA XR 75MG TAB	62
<i>olanzapine 15mg odt</i>	50	FILM		OTEZLA/OTEZLA XR	62
<i>olanzapine 15mg tab</i>	50	OPSUMIT 10MG TAB	88	28-DAY 10/20/30/75MG	
<i>olanzapine 2.5mg tab</i>	50	OPVEE 2.7MG/0.1ML	31	STARTER PACK (41)	
<i>olanzapine 20mg odt</i>	50	NASAL SPRAY		<i>oxacillin 100mg/ml inj</i>	84
<i>olanzapine 20mg tab</i>	50			<i>oxacillin 1gm inj</i>	84

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ALPHABETICAL LISTING OF DRUGS

<i>oxacillin 2gm inj</i>	84	OXYCONTIN 80MG ER	15	<i>peg 3350 powder for oral</i>	77
<i>oxcarbazepine 150mg tab</i>	22	TAB		<i>soln (100gm Moviprep</i>	
<i>oxcarbazepine 300mg tab</i>	22	OZEMPIC 2MG/3ML	29	<i>equiv)</i>	
<i>oxcarbazepine 600mg tab</i>	22	PEN INJ		<i>peg 3350/electrolyte</i>	77
<i>oxcarbazepine 60mg/ml</i>	22	OZEMPIC 4MG/3ML	29	<i>powder for oral soln</i>	
<i>oral susp</i>		PEN INJ		<i>peg 3350/kcl/sodium</i>	77
<i>oxybutynin chloride 10mg</i>	72	OZEMPIC 8MG/3ML	29	<i>bicarbonate/sodium</i>	
<i>er tab</i>		PEN INJ		<i>chloride powder for oral</i>	
<i>oxybutynin chloride 15mg</i>	72	P		<i>soln</i>	
<i>er tab</i>		<i>paliperidone 1.5mg er tab</i>	49	PEGASYS	55
<i>oxybutynin chloride</i>	72	<i>paliperidone 3mg er tab</i>	49	180MCG/0.5ML	
<i>1mg/ml oral soln</i>		<i>paliperidone 6mg er tab</i>	49	SYRINGE	
<i>oxybutynin chloride 5mg</i>	72	<i>paliperidone 9mg er tab</i>	49	PEGASYS 180MCG/ML	55
<i>er tab</i>		PANRETIN 0.1%	62	INJ	
<i>oxybutynin chloride 5mg</i>	72	TOPICAL GEL		PEMAZYRE 13.5MG TAB	44
<i>tab</i>		<i>pantoprazole 20mg dr tab</i>	91	PEMAZYRE 4.5MG TAB	44
<i>oxycodone 10mg tab</i>	14	<i>pantoprazole 40mg dr tab</i>	91	PEMAZYRE 9MG TAB	44
<i>oxycodone 15mg tab</i>	14	<i>paricalcitol 1mcg cap</i>	66	PENBRAYA INJ	76
<i>oxycodone 1mg/ml oral</i>	14	<i>paricalcitol 2mcg cap</i>	66	<i>penicillamine 250mg tab</i>	78
<i>soln</i>		<i>paricalcitol 4mcg cap</i>	66	<i>penicillin g potassium</i>	84
<i>oxycodone 20mg tab</i>	14	<i>paroxetine 10mg tab</i>	25	<i>1000000unit/ml inj</i>	
<i>oxycodone 30mg tab</i>	14	PAROXETINE	25	PENICILLIN G SODIUM	84
<i>oxycodone 5mg tab</i>	14	10MG/5ML ORAL SUSP		100000UNIT/ML INJ	
<i>oxycodone/acetaminophe</i>	15	<i>paroxetine 12.5mg er tab</i>	25	<i>penicillin v potassium</i>	84
<i>n 10-325mg tab</i>		<i>paroxetine 20mg tab</i>	25	<i>250mg tab</i>	
<i>oxycodone/acetaminophe</i>	15	<i>paroxetine 25mg er tab</i>	25	PENICILLIN V	84
<i>n 2.5-325mg tab</i>		<i>paroxetine 30mg tab</i>	25	POTASSIUM 25MG/ML	
<i>oxycodone/acetaminophe</i>	15	<i>paroxetine 37.5mg er tab</i>	25	ORAL SOLN	
<i>n 5-325mg tab</i>		<i>paroxetine 40mg tab</i>	25	<i>penicillin v potassium</i>	84
<i>oxycodone/acetaminophe</i>	15	PAXLOVID	55	<i>500mg tab</i>	
<i>n 7.5-325mg tab</i>		150MG/100MG TAB		PENICILLIN V	84
OXYCONTIN 10MG ER	14	PACK (20)		POTASSIUM 50MG/ML	
TAB		PAXLOVID	55	ORAL SOLN	
OXYCONTIN 15MG ER	14	150MG/100MG TAB		PENMENYV INJ	76
TAB		PACK (30)		PENTACEL	76
OXYCONTIN 20MG ER	14	PAXLOVID	55	96-30-68UNIT/ML INJ	
TAB		300MG/100MG AND		<i>pentamidine isethionate</i>	38
OXYCONTIN 30MG ER	14	150MG/100MG TAB		<i>300mg inj</i>	
TAB		DOSE PACK (11)		<i>pentamidine isethionate</i>	38
OXYCONTIN 40MG ER	15	<i>pazopanib 200mg tab</i>	44	<i>300mg/6ml inh soln</i>	
TAB		PEDIARIX SYRINGE	76	<i>pentoxifylline 400mg er</i>	59
OXYCONTIN 60MG ER	15	PEDVAXHIB	76	<i>tab</i>	
TAB		7.5MCG/0.5ML INJ		<i>perampanel 0.5mg/ml</i>	22
				<i>oral susp</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: 02/01/2026

ALPHABETICAL LISTING OF DRUGS

<i>perampanel 10mg tab</i>	22	PIFELTRO 100MG TAB	54	<i>plenamine 15% inj</i>	81
<i>perampanel 12mg tab</i>	22	<i>pilocarpine 1% ophth</i>	83	PODOFILOX 0.5%	64
<i>perampanel 2mg tab</i>	22	<i>soln</i>		TOPICAL SOLN	
<i>perampanel 4mg tab</i>	22	<i>pilocarpine 2% ophth</i>	83	<i>polycin 0.5-10unit/mg</i>	82
<i>perampanel 6mg tab</i>	22	<i>soln</i>		<i>ophth ointment</i>	
<i>perampanel 8mg tab</i>	22	<i>pilocarpine 4% ophth</i>	83	<i>polymyxin b/trimethoprim</i>	82
PERINDOPRIL	34	<i>soln</i>		<i>10000 unit/ml-0.1%</i>	
ERBUMINE 2MG TAB		<i>pilocarpine 5mg tab</i>	60	<i>ophth soln</i>	
<i>perindopril erbumine</i>	34	<i>pilocarpine 7.5mg tab</i>	60	POMALYST 1MG CAP	46
<i>4mg tab</i>		<i>pimecrolimus 1% topical</i>	64	POMALYST 2MG CAP	46
PERINDOPRIL	34	<i>cream</i>		POMALYST 3MG CAP	46
ERBUMINE 8MG TAB		PIMOZIDE 1MG TAB	87	POMALYST 4MG CAP	46
<i>periogard 0.12%</i>	60	PIMOZIDE 2MG TAB	87	<i>portia tab 28-day pack</i>	70
<i>mouthwash</i>		<i>pimtrea tab 28-day pack</i>	69	<i>posaconazole 100mg dr</i>	32
<i>permethrin 5% topical</i>	64	<i>pindolol 10mg tab</i>	56	<i>tab</i>	
<i>cream</i>		<i>pindolol 5mg tab</i>	56	<i>posaconazole 40mg/ml</i>	32
<i>perphenazine 16mg tab</i>	51	<i>pioglitazone 15mg tab</i>	28	<i>oral susp</i>	
<i>perphenazine 2mg tab</i>	51	<i>pioglitazone 30mg tab</i>	28	<i>potassium chloride</i>	81
<i>perphenazine 4mg tab</i>	51	<i>pioglitazone 45mg tab</i>	28	<i>1.33meq/ml oral soln</i>	
<i>perphenazine 8mg tab</i>	51	<i>piperacillin/tazobactam</i>	84	<i>potassium chloride</i>	81
PHENELZINE 15MG TAB	25	<i>2000-250mg inj</i>		<i>10meq er cap</i>	
PHENOBARBITAL	22	<i>piperacillin/tazobactam</i>	84	<i>potassium chloride</i>	81
100MG TAB		<i>3000-375mg inj</i>		<i>10meq er tab</i>	
PHENOBARBITAL 15MG	22	<i>piperacillin/tazobactam</i>	84	<i>potassium chloride</i>	81
TAB		<i>36-4.5gm inj</i>		<i>10meq micro er tab</i>	
<i>phenobarbital 16.2mg tab</i>	22	<i>piperacillin/tazobactam</i>	84	POTASSIUM CHLORIDE	81
PHENOBARBITAL 30MG	22	<i>4000-500mg inj</i>		10MEQ/100ML INJ	
TAB		PIQRAY TAB 200MG	44	POTASSIUM CHLORIDE	81
PHENOBARBITAL	22	DAILY DOSE PACK (28)		15MEQ ER TAB	
32.4MG TAB		PIQRAY TAB 250MG	44	<i>potassium chloride</i>	81
PHENOBARBITAL	22	DAILY DOSE PACK (56)		<i>15meq micro er tab</i>	
4MG/ML ORAL SOLN		PIQRAY TAB 300MG	44	<i>potassium chloride</i>	81
PHENOBARBITAL 60MG	22	DAILY DOSE PACK (56)		<i>2.67meq/ml oral soln</i>	
TAB		<i>pirfenidone 267mg cap</i>	88	<i>potassium chloride</i>	81
PHENOBARBITAL	23	<i>pirfenidone 267mg tab</i>	88	<i>20meq er tab</i>	
64.8MG TAB		<i>pirfenidone 801mg tab</i>	88	<i>potassium chloride</i>	81
<i>phenobarbital 97.2mg tab</i>	23	<i>piroxicam 10mg cap</i>	14	<i>20meq micro er tab</i>	
<i>phenytek 200mg er cap</i>	23	<i>piroxicam 20mg cap</i>	14	<i>potassium chloride</i>	81
<i>phenytek 300mg er cap</i>	23	PLEGRIDY	87	<i>20meq powder for oral</i>	
<i>phenytoin 25mg/ml oral</i>	23	125MCG/0.5ML		<i>soln</i>	
<i>susp</i>		AUTO-INJECTOR		POTASSIUM CHLORIDE	81
<i>phenytoin 50mg chew tab</i>	23	PLEGRIDY	87	20MEQ/100ML INJ	
<i>phenytoin sodium 100mg</i>	23	125MCG/0.5ML		<i>potassium chloride</i>	81
<i>er cap</i>		SYRINGE		<i>2meq/ml (20ml) inj</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>potassium chloride</i>	81	<i>prednisone 10mg tab</i>	74	PREZISTA 100MG/ML	54
<i>2meq/ml inj</i>		<i>prednisone 10mg tab (21)</i>	74	ORAL SUSP	
POTASSIUM CHLORIDE	81	<i>prednisone 10mg tab</i>	74	PREZISTA 150MG TAB	54
40MEQ/100ML INJ		<i>pack (48)</i>		PREZISTA 75MG TAB	54
<i>potassium chloride 8meq</i>	81	<i>prednisone 1mg tab</i>	75	PRIFTIN 150MG TAB	39
<i>er cap</i>		PREDNISONE 1MG/ML	75	PRIMAQUINE	39
<i>potassium chloride 8meq</i>	81	ORAL SOLN		PHOSPHATE 26.3MG	
<i>er tab</i>		<i>prednisone 2.5mg tab</i>	75	TAB	
<i>potassium citrate 10meq</i>	73	<i>prednisone 20mg tab</i>	75	<i>primidone 250mg tab</i>	23
<i>er tab</i>		<i>prednisone 50mg tab</i>	75	<i>primidone 50mg tab</i>	23
<i>potassium citrate 15meq</i>	73	<i>prednisone 5mg tab</i>	75	PRIORIX INJ	76
<i>er tab</i>		<i>prednisone 5mg tab pack</i>	75	PRIVIGEN 20GM/200ML	75
<i>potassium citrate 5meq er</i>	73	<i>(21)</i>		INJ	
<i>tab</i>		<i>prednisone 5mg tab pack</i>	75	<i>probenecid 500mg tab</i>	73
<i>pramipexole 0.125mg tab</i>	47	<i>(48)</i>		<i>prochlorperazine 10mg</i>	51
<i>pramipexole 0.25mg tab</i>	47	<i>pregabalin 100mg cap</i>	23	<i>tab</i>	
<i>pramipexole 0.5mg tab</i>	47	<i>pregabalin 150mg cap</i>	23	<i>prochlorperazine 25mg</i>	51
<i>pramipexole 0.75mg tab</i>	47	<i>pregabalin 200mg cap</i>	23	<i>rectal supp</i>	
<i>pramipexole 1.5mg tab</i>	47	<i>pregabalin 20mg/ml oral</i>	23	<i>prochlorperazine 5mg tab</i>	51
<i>pramipexole 1mg tab</i>	47	<i>soln</i>		<i>procto-med 2.5% topical</i>	16
<i>prasugrel 10mg tab</i>	73	<i>pregabalin 225mg cap</i>	23	<i>cream</i>	
<i>prasugrel 5mg tab</i>	73	<i>pregabalin 25mg cap</i>	23	<i>proctosol 2.5% topical</i>	16
<i>pravastatin sodium 10mg</i>	33	<i>pregabalin 300mg cap</i>	23	<i>cream</i>	
<i>tab</i>		<i>pregabalin 50mg cap</i>	23	<i>proctozone hc 2.5%</i>	16
<i>pravastatin sodium 20mg</i>	33	<i>pregabalin 75mg cap</i>	23	<i>topical cream</i>	
<i>tab</i>		PREMARIN	91	<i>progesterone 100mg cap</i>	85
<i>pravastatin sodium 40mg</i>	33	0.625MG/GM VAGINAL		<i>progesterone 200mg cap</i>	85
<i>tab</i>		CREAM		PROGRAF 0.2MG	79
<i>pravastatin sodium 80mg</i>	33	PREMPHASE 28-DAY	70	GRANULES FOR ORAL	
<i>tab</i>		PACK		SUSP	
<i>praziquantel 600mg tab</i>	16	PREMPRO 0.3/1.5MG	70	PROGRAF 1MG	79
<i>prazosin 1mg cap</i>	35	28-DAY PACK		GRANULES FOR ORAL	
<i>prazosin 2mg cap</i>	35	PREMPRO 0.45/1.5MG	70	SUSP	
<i>prazosin 5mg cap</i>	35	28-DAY PACK		PROLASTIN 1000MG INJ	88
PREDNISOLONE 1%	83	PREMPRO 0.625/2.5MG	70	<i>promethazine 1.25mg/ml</i>	87
OPHTH SOLN		28-DAY PACK		<i>oral soln</i>	
<i>prednisolone 1mg/ml oral</i>	74	PREMPRO 0.625/5MG	70	<i>promethazine 12.5mg tab</i>	87
<i>soln</i>		28-DAY PACK		<i>promethazine 25mg tab</i>	87
<i>prednisolone 3mg/ml oral</i>	74	PREVYMIS 120MG	55	<i>promethazine 50mg tab</i>	87
<i>soln</i>		ORAL PELLET		<i>propafenone 150mg tab</i>	58
<i>prednisolone 5mg/ml oral</i>	74	PREVYMIS 240MG TAB	55	<i>propafenone 225mg er</i>	58
<i>soln</i>		PREVYMIS 480MG TAB	55	<i>cap</i>	
<i>prednisolone acetate 1%</i>	83	PREZCOBIX 150-800MG	54	<i>propafenone 225mg tab</i>	58
<i>ophth susp</i>		TAB		<i>propafenone 300mg tab</i>	58

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ALPHABETICAL LISTING OF DRUGS

<i>propafenone 325mg er cap</i>	58	<i>quetiapine 50mg er tab</i>	51	RECOMBIVAX	76
<i>propafenone 425mg er cap</i>	59	<i>quetiapine 50mg tab</i>	51	5MCG/0.5ML SYRINGE	
<i>propranolol 10mg tab</i>	56	<i>quinapril 10mg tab</i>	34	RELENZA 5MG/BLISTER	55
<i>propranolol 120mg er cap</i>	56	<i>quinapril 20mg tab</i>	34	POWDER INHALER	
<i>propranolol 160mg er cap</i>	56	<i>quinapril 40mg tab</i>	34	<i>repaglinide 0.5mg tab</i>	28
<i>propranolol 20mg tab</i>	56	<i>quinapril 5mg tab</i>	34	<i>repaglinide 1mg tab</i>	28
<i>propranolol 40mg tab</i>	56	QUINIDINE SULFATE	59	<i>repaglinide 2mg tab</i>	29
PROPRANOLOL	56	200MG TAB		REPATHA 140MG/ML	33
4MG/ML ORAL SOLN		QUINIDINE SULFATE	59	AUTO-INJECTOR	
<i>propranolol 60mg er cap</i>	56	300MG TAB		REPATHA 140MG/ML	33
<i>propranolol 60mg tab</i>	56	<i>quinine sulfate 324mg cap</i>	39	SYRINGE	
<i>propranolol 80mg er cap</i>	56	QVAR 40MCG	18	RETACRIT	74
<i>propranolol 80mg tab</i>	57	REDIHALER		10000UNIT/ML INJ	
PROPRANOLOL	57	QVAR 80MCG	18	RETACRIT	74
8MG/ML ORAL SOLN		REDIHALER		20000UNIT/2ML INJ	
<i>propylthiouracil 50mg tab</i>	90	R		RETACRIT	74
PROQUAD INJ	76	RABAVERT 2.5UNIT/ML INJ	76	20000UNIT/ML INJ	
PROSOL 20% INJ	81	<i>rabeprazole sodium 20mg dr tab</i>	91	RETACRIT 2000UNIT/ML INJ	74
<i>protriptyline 10mg tab</i>	27	RADICAVA 105MG/5ML ORAL SUSP	59	RETACRIT 3000UNIT/ML INJ	74
<i>protriptyline 5mg tab</i>	27	RALDESY 10MG/ML ORAL SOLN	26	RETACRIT	74
PULMOZYME 1MG/ML INH SOLN	88	<i>raloxifene 60mg tab</i>	66	40000UNIT/ML INJ	
<i>pyrazinamide 500mg tab</i>	39	<i>ramelteon 8mg tab</i>	75	RETACRIT 4000UNIT/ML INJ	74
<i>pyridostigmine bromide 60mg tab</i>	52	<i>ramipril 1.25mg cap</i>	34	RETEVMO 120MG TAB	44
<i>pyrimethamine 25mg tab</i>	39	<i>ramipril 10mg cap</i>	34	RETEVMO 160MG TAB	44
Q		<i>ramipril 2.5mg cap</i>	34	RETEVMO 40MG TAB	44
QINLOCK 50MG TAB	44	<i>ramipril 5mg cap</i>	34	RETEVMO 80MG TAB	44
QUADRACEL INJ	76	<i>ranolazine 1000mg er tab</i>	59	REVCovi 2.4MG/1.5ML INJ	66
QUADRACEL SYRINGE	76	<i>ranolazine 500mg er tab</i>	59	REVUFORJ 110MG TAB	46
<i>quetiapine 100mg tab</i>	50	<i>rasagiline 0.5mg tab</i>	48	REVUFORJ 160MG TAB	46
<i>quetiapine 150mg er tab</i>	50	<i>rasagiline 1mg tab</i>	48	REVUFORJ 25MG TAB	46
<i>quetiapine 200mg er tab</i>	50	<i>reclipsen tab 28-day pack</i>	70	REXTOVY 4MG/0.25ML NASAL SPRAY	31
<i>quetiapine 200mg tab</i>	50	RECOMBIVAX	76	REXULTI 0.25MG TAB	52
<i>quetiapine 25mg tab</i>	50	10MCG/ML INJ		REXULTI 0.5MG TAB	52
<i>quetiapine 300mg er tab</i>	50	RECOMBIVAX	76	REXULTI 1MG TAB	52
<i>quetiapine 300mg tab</i>	50	10MCG/ML SYRINGE		REXULTI 2MG TAB	52
<i>quetiapine 400mg er tab</i>	50	RECOMBIVAX	76	REXULTI 3MG TAB	52
<i>quetiapine 400mg tab</i>	50	40MCG/ML INJ		REXULTI 4MG TAB	52
		RECOMBIVAX	76	REYATAZ 50MG ORAL POWDER	54
		5MCG/0.5ML INJ			

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ALPHABETICAL LISTING OF DRUGS

REZDIFFRA 100MG TAB	71	<i>risperidone 3mg odt</i>	50	<i>ropinirole 5mg tab</i>	48
REZDIFFRA 60MG TAB	71	<i>risperidone 3mg tab</i>	50	<i>rosuvastatin calcium</i>	33
REZDIFFRA 80MG TAB	71	<i>risperidone 4mg odt</i>	50	<i>10mg tab</i>	
REZLIDHIA 150MG CAP	44	<i>risperidone 4mg tab</i>	50	<i>rosuvastatin calcium</i>	33
REZUROCK 200MG TAB	78	<i>risperidone microspheres</i>	50	<i>20mg tab</i>	
RHOPRESSA 0.02%	82	<i>12.5mg inj</i>		<i>rosuvastatin calcium</i>	33
OPHTH SOLN		<i>risperidone microspheres</i>	50	<i>40mg tab</i>	
RIBAVIRIN 200MG CAP	55	<i>25mg inj</i>		<i>rosuvastatin calcium 5mg</i>	33
RIBAVIRIN 200MG TAB	55	<i>risperidone microspheres</i>	50	<i>tab</i>	
<i>rifabutin 150mg cap</i>	39	<i>37.5mg inj</i>		ROTARIX	76
<i>rifampin 150mg cap</i>	39	<i>risperidone microspheres</i>	50	667000UNIT/ML ORAL	
<i>rifampin 300mg cap</i>	39	<i>50mg inj</i>		SUSP	
<i>rifampin 600mg inj</i>	39	<i>ritonavir 100mg tab</i>	54	ROTATEQ ORAL SUSP	76
<i>riluzole 50mg tab</i>	59	<i>rivaroxaban 1mg/ml oral</i>	20	<i>roweepra 500mg tab</i>	23
RIMANTADINE 100MG	55	<i>susp</i>		ROZLYTREK 100MG	44
TAB		<i>rivaroxaban 2.5mg tab</i>	20	CAP	
RINVOQ 15MG ER TAB	12	<i>rivastigmine 1.5mg cap</i>	86	ROZLYTREK 200MG	44
RINVOQ 1MG/ML ORAL	12	<i>rivastigmine 13.3mg/24hr</i>	86	CAP	
SOLN		<i>patch</i>		ROZLYTREK 50MG	44
RINVOQ 30MG ER TAB	12	<i>rivastigmine 3mg cap</i>	86	ORAL PELLET	
RINVOQ 45MG ER TAB	12	<i>rivastigmine 4.5mg cap</i>	86	RUBRACA 200MG TAB	44
<i>risedronate sodium</i>	66	<i>rivastigmine 4.6mg/24hr</i>	86	RUBRACA 250MG TAB	44
<i>150mg tab</i>		<i>patch</i>		RUBRACA 300MG TAB	44
<i>risedronate sodium 30mg</i>	66	<i>rivastigmine 6mg cap</i>	86	<i>rufinamide 200mg tab</i>	23
<i>tab</i>		<i>rivastigmine 9.5mg/24hr</i>	86	<i>rufinamide 400mg tab</i>	23
<i>risedronate sodium 35mg</i>	66	<i>patch</i>		<i>rufinamide 40mg/ml oral</i>	23
<i>tab</i>		<i>rizatriptan 10mg odt</i>	78	<i>susp</i>	
<i>risedronate sodium 35mg</i>	66	<i>rizatriptan 10mg tab</i>	78	RUKOBIA 600MG ER	54
<i>tab pack (12)</i>		<i>rizatriptan 5mg odt</i>	78	TAB	
<i>risedronate sodium 35mg</i>	66	<i>rizatriptan 5mg tab</i>	78	RYBELSUS 14MG TAB	29
<i>tab pack (4)</i>		ROCKLATAN	82	RYBELSUS 3MG TAB	29
<i>risedronate sodium 5mg</i>	66	0.02-0.005% OPTH		RYBELSUS 7MG TAB	29
<i>tab</i>		SOLN		RYDAPT 25MG CAP	44
RISPERIDONE 0.25MG	49	<i>roflumilast 0.5mg tab</i>	88		
ODT		<i>roflumilast 250mcg tab</i>	88	S	
<i>risperidone 0.25mg tab</i>	49	ROMVIMZA 14MG CAP	44	<i>sacubitril/valsartan</i>	59
<i>risperidone 0.5mg odt</i>	49	ROMVIMZA 20MG CAP	44	<i>24-26mg tab</i>	
<i>risperidone 0.5mg tab</i>	49	ROMVIMZA 30MG CAP	44	<i>sacubitril/valsartan</i>	59
<i>risperidone 1mg odt</i>	49	<i>ropinirole 0.25mg tab</i>	47	<i>49-51mg tab</i>	
<i>risperidone 1mg tab</i>	49	<i>ropinirole 0.5mg tab</i>	47	<i>sacubitril/valsartan</i>	59
<i>risperidone 1mg/ml oral</i>	49	<i>ropinirole 1mg tab</i>	47	<i>97-103mg tab</i>	
<i>soln</i>		<i>ropinirole 2mg tab</i>	48	<i>salmon calcitonin</i>	66
<i>risperidone 2mg odt</i>	49	<i>ropinirole 3mg tab</i>	48	<i>200unit/act nasal spray</i>	
<i>risperidone 2mg tab</i>	49	<i>ropinirole 4mg tab</i>	48	SANTYL 250UNIT/GM	64
				TOPICAL OINTMENT	

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ALPHABETICAL LISTING OF DRUGS

<i>sapropterin 100mg powder for oral soln</i>	66	SIMLANDI 40MG/0.4ML AUTO-INJECTOR	13	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	77
<i>sapropterin 100mg tab</i>	66	SIMLANDI 40MG/0.4ML SYRINGE	13	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	77
<i>sapropterin 500mg powder for oral soln</i>	66	SIMLANDI 80MG/0.8ML AUTO-INJECTOR	13	<i>SOFOSBUVIR/VELPATAS VIR 400-100MG TAB</i>	55
SCSEMBLIX 100MG TAB	44	<i>simvastatin 10mg tab</i>	33	<i>solifenacin succinate 10mg tab</i>	72
SCSEMBLIX 20MG TAB	44	<i>simvastatin 20mg tab</i>	33	<i>solifenacin succinate 5mg tab</i>	72
SCSEMBLIX 40MG TAB	45	<i>simvastatin 40mg tab</i>	33	SOLTAMOX 10MG/5ML ORAL SOLN	41
<i>scopolamine 1mg/72hr patch</i>	31	<i>simvastatin 5mg tab</i>	33	SOMAVERT 10MG INJ	67
SECUADO 3.8MG/24HR PATCH	51	<i>simvastatin 80mg tab</i>	34	SOMAVERT 15MG INJ	67
SECUADO 5.7MG/24HR PATCH	51	<i>sirolimus 0.5mg tab</i>	79	SOMAVERT 20MG INJ	67
SECUADO 7.6MG/24HR PATCH	51	<i>sirolimus 1mg tab</i>	79	SOMAVERT 25MG INJ	67
<i>selegiline 5mg cap</i>	48	<i>sirolimus 1mg/ml oral soln</i>	79	SOMAVERT 30MG INJ	67
<i>selegiline 5mg tab</i>	48	<i>sirolimus 2mg tab</i>	79	<i>sorafenib 200mg tab</i>	45
SELENIUM SULFIDE 2.5% SHAMPOO	64	SIRTURO 100MG TAB	39	<i>sotalol 120mg tab</i>	57
SELZENTRY 20MG/ML ORAL SOLN	54	SIRTURO 20MG TAB	39	<i>sotalol 160mg tab</i>	57
<i>sertraline 100mg tab</i>	25	SKYRIZI 150MG/ML AUTO-INJECTOR	62	<i>sotalol 240mg tab</i>	57
<i>sertraline 20mg/ml oral soln</i>	25	SKYRIZI 150MG/ML SYRINGE	62	<i>sotalol 80mg tab</i>	57
<i>sertraline 25mg tab</i>	25	SKYRIZI 180MG/1.2ML CARTRIDGE	72	<i>sotalol af 120mg tab</i>	57
<i>sertraline 50mg tab</i>	25	SKYRIZI 360MG/2.4ML CARTRIDGE	72	<i>sotalol af 160mg tab</i>	57
<i>setlakin tab 91-day pack</i>	70	<i>sodium chloride 0.45% inj</i>	81	<i>sotalol af 80mg tab</i>	57
<i>sharobel 0.35mg tab 28-day pack</i>	85	<i>sodium chloride 0.9% inj</i>	81	SPIRIVA RESPIMAT 1.25MCG/ACT INHALER	18
SHINGRIX 50MCG/0.5ML INJ	76	<i>sodium chloride 0.9%</i>	73	<i>spironolactone 100mg tab</i>	65
SIGNIFOR 0.3MG/ML INJ	66	<i>irrigation soln</i>		<i>spironolactone 25mg tab</i>	65
SIGNIFOR 0.6MG/ML INJ	67	<i>sodium chloride 3% inj</i>	81	<i>spironolactone 50mg tab</i>	65
SIGNIFOR 0.9MG/ML INJ	67	<i>sodium chloride 50mg/ml inj</i>	81	<i>sprintec tab 28-day pack</i>	70
<i>sildenafil 20mg tab</i>	88	SODIUM OXYBATE 500MG/ML ORAL SOLN	89	SPRITAM 250MG TAB FOR ORAL SUSP	23
<i>silodosin 4mg cap</i>	73	<i>sodium phenylbutyrate 3gm/tsp oral powder</i>	66	SPRITAM 500MG TAB FOR ORAL SUSP	23
<i>silodosin 8mg cap</i>	73	<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	79	<i>sps 15gm/60ml oral susp</i>	79
<i>silver sulfadiazine 1% topical cream</i>	64			<i>sronyx tab 28-day pack</i>	70
SIMBRINZA 0.2-1% OPTH SUSP	82			<i>ssd 1% topical cream</i>	64
SIMLANDI 20MG/0.2ML SYRINGE	13			STARJEMZA 45MG/0.5ML INJ	62

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: 02/01/2026

ALPHABETICAL LISTING OF DRUGS

STARJEMZA	62	<i>sulindac 200mg tab</i>	14	SYNJARDY 5-1000MG	28
45MG/0.5ML SYRINGE		<i>sumatriptan 100mg tab</i>	78	TAB	
STARJEMZA 90MG/ML	62	<i>sumatriptan 20mg/act</i>	78	SYNJARDY 5-500MG	28
SYRINGE		<i>nasal spray</i>		TAB	
STEQEYMA	62	<i>sumatriptan 25mg tab</i>	78	SYNJARDY XR	28
45MG/0.5ML SYRINGE		<i>sumatriptan 50mg tab</i>	78	10-1000MG TAB	
STEQEYMA 90MG/ML	62	<i>sumatriptan 5mg/act</i>	78	SYNJARDY XR	28
SYRINGE		<i>nasal spray</i>		12.5-1000MG TAB	
STIOLTO	19	<i>sumatriptan 6mg/0.5ml</i>	78	SYNJARDY XR	28
2.5-2.5MCG/ACT		<i>auto-injector</i>		25-1000MG TAB	
INHALER		<i>sumatriptan 6mg/0.5ml</i>	78	SYNJARDY XR	28
STIVARGA 40MG TAB	45	<i>inj</i>		5-1000MG TAB	
STREPTOMYCIN 1GM	12	<i>sunitinib 12.5mg cap</i>	45	SYNTHROID 100MCG	90
INJ		<i>sunitinib 25mg cap</i>	45	TAB	
STRIBILD	54	<i>sunitinib 37.5mg cap</i>	45	SYNTHROID 112MCG	90
150-150-200-300MG		<i>sunitinib 50mg cap</i>	45	TAB	
TAB		SUNLENCA 300MG TAB	54	SYNTHROID 125MCG	90
STRIVERDI 2.5MCG/ACT	19	SUNLENCA 300MG TAB	54	TAB	
INHALER		THERAPY PACK (4)		SYNTHROID 137MCG	90
<i>sucralfate 1000mg tab</i>	91	SUNLENCA 300MG TAB	54	TAB	
<i>sucralfate 100mg/ml oral</i>	91	THERAPY PACK (5)		SYNTHROID 150MCG	90
<i>susp</i>		SUNOSI 150MG TAB	89	TAB	
SUFLAVE ORAL SOLN	77	SUNOSI 75MG TAB	89	SYNTHROID 175MCG	90
PACK		SUTAB 225-188-1479MG	77	TAB	
SULFACETAMIDE	82	TAB		SYNTHROID 200MCG	90
SODIUM 10% OPHTH		<i>syeda tab 28-day pack</i>	70	TAB	
SOLN		SYMDEKO TAB 4-WEEK	88	SYNTHROID 25MCG	90
<i>sulfacetamide sodium</i>	61	PACK (56)		TAB	
<i>10% topical lotion</i>		SYMDEKO TAB	88	SYNTHROID 300MCG	90
SULFACETAMIDE/PRED	83	50-75MG/75MG PACK		TAB	
NISOLONE 10-0.25%		(56)		SYNTHROID 50MCG	90
OPHTH SOLN		SYMPAZAN 10MG ORAL	21	TAB	
<i>sulfadiazine 500mg tab</i>	89	FILM		SYNTHROID 75MCG	90
<i>sulfamethoxazole/trimeth</i>	89	SYMPAZAN 20MG ORAL	21	TAB	
<i>oprim 200-40mg/5ml oral</i>		FILM		SYNTHROID 88MCG	90
<i>susp</i>		SYMPAZAN 5MG ORAL	21	TAB	
<i>sulfamethoxazole/trimeth</i>	89	FILM			
<i>oprim 400-80mg tab</i>		SYMTUZA	54	T	
<i>sulfamethoxazole/trimeth</i>	89	150-800-200-10MG TAB		TABLOID 40MG TAB	39
<i>oprim 800-160mg tab</i>		SYNJARDY	28	TABRECTA 150MG TAB	45
<i>sulfasalazine 500mg dr</i>	72	12.5-1000MG TAB		TABRECTA 200MG TAB	45
<i>tab</i>		SYNJARDY 12.5-500MG	28	<i>tacrolimus 0.03% topical</i>	64
<i>sulfasalazine 500mg tab</i>	72	TAB		<i>ointment</i>	
<i>sulindac 150mg tab</i>	14			<i>tacrolimus 0.1% topical</i>	64
				<i>ointment</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>tacrolimus 0.5mg cap</i>	79	<i>terazosin 1mg cap</i>	35	THEOPHYLLINE 200MG	88
<i>tacrolimus 1mg cap</i>	79	<i>terazosin 2mg cap</i>	35	ER TAB	
<i>tacrolimus 5mg cap</i>	79	<i>terazosin 5mg cap</i>	35	<i>theophylline 300mg er</i>	88
<i>tadalafil 2.5mg tab</i>	73	<i>terbinafine 250mg tab</i>	32	<i>tab</i>	
<i>tadalafil 20mg tab</i>	88	<i>terconazole 0.4% vaginal</i>	91	<i>theophylline 400mg er</i>	88
<i>tadalafil 5mg tab</i>	73	<i>cream</i>		<i>tab</i>	
TAFINLAR 10MG TAB	45	<i>terconazole 0.8% vaginal</i>	91	<i>theophylline 450mg er</i>	88
FOR ORAL SUSP		<i>cream</i>		<i>tab</i>	
TAFINLAR 50MG CAP	45	<i>terconazole 80mg vaginal</i>	91	<i>theophylline 600mg er</i>	88
TAFINLAR 75MG CAP	45	<i>insert</i>		<i>tab</i>	
TAGRISSO 40MG TAB	40	<i>teriflunomide 14mg tab</i>	87	<i>thioridazine 100mg tab</i>	51
TAGRISSO 80MG TAB	40	<i>teriflunomide 7mg tab</i>	87	<i>thioridazine 10mg tab</i>	51
TALZENNA 0.1MG CAP	45	TERIPARATIDE	66	<i>thioridazine 25mg tab</i>	51
TALZENNA 0.25MG CAP	45	620MCG/2.48ML PEN		<i>thioridazine 50mg tab</i>	51
TALZENNA 0.35MG CAP	45	INJ		<i>thiothixene 10mg cap</i>	49
TALZENNA 0.5MG CAP	45	<i>testosterone 1%</i>	15	<i>thiothixene 1mg cap</i>	49
TALZENNA 0.75MG CAP	45	<i>(12.5mg/act) topical gel</i>		<i>thiothixene 2mg cap</i>	49
TALZENNA 1MG CAP	45	<i>pump</i>		<i>thiothixene 5mg cap</i>	49
<i>tamoxifen 10mg tab</i>	41	<i>testosterone 1% (25mg)</i>	15	<i>tiadylt 120mg er (24hr)</i>	58
<i>tamoxifen 20mg tab</i>	41	<i>topical gel packet</i>		<i>cap</i>	
<i>tamsulosin 0.4mg cap</i>	73	<i>testosterone 1% (50mg)</i>	16	<i>tiadylt 180mg er (24hr)</i>	58
<i>tarina fe tab 1/20 28-day</i>	70	<i>topical gel packet</i>		<i>cap</i>	
<i>pack</i>		<i>testosterone 1.62%</i>	16	<i>tiadylt 240mg er (24hr)</i>	58
<i>tazarotene 0.1% topical</i>	62	<i>(20.25mg/act) topical gel</i>		<i>cap</i>	
<i>cream</i>		<i>pump</i>		<i>tiadylt 300mg er (24hr)</i>	58
<i>tazicef 1gm inj</i>	60	<i>testosterone 30mg/act</i>	16	<i>cap</i>	
<i>tazicef 2gm inj</i>	60	<i>topical soln</i>		<i>tiadylt 360mg er (24hr)</i>	58
TAZICEF 6GM INJ	60	<i>testosterone cypionate</i>	16	<i>cap</i>	
TAZVERIK 200MG TAB	45	<i>100mg/ml inj</i>		<i>tiadylt 420mg er (24hr)</i>	58
TEFLARO 400MG INJ	38	<i>testosterone cypionate</i>	16	<i>cap</i>	
TEFLARO 600MG INJ	38	<i>200mg/ml (1ml) inj</i>		<i>tiagabine 12mg tab</i>	24
<i>telmisartan 20mg tab</i>	35	<i>testosterone cypionate</i>	16	<i>tiagabine 16mg tab</i>	24
<i>telmisartan 40mg tab</i>	35	<i>200mg/ml inj</i>		<i>tiagabine 2mg tab</i>	24
<i>telmisartan 80mg tab</i>	35	TESTOSTERONE	16	<i>tiagabine 4mg tab</i>	24
<i>temazepam 15mg cap</i>	75	ENANTHATE 200MG/ML		TIBSOVO 250MG TAB	45
<i>temazepam 30mg cap</i>	75	INJ		<i>ticagrelor 60mg tab</i>	73
TENIVAC 4-10UNIT/ML	76	<i>tetrabenazine 12.5mg tab</i>	86	<i>ticagrelor 90mg tab</i>	73
INJ		<i>tetrabenazine 25mg tab</i>	86	TICOVAC	76
TENIVAC 4-10UNIT/ML	76	<i>tetracycline 250mg cap</i>	89	1.2MCG/0.25ML	
SYRINGE		<i>tetracycline 500mg cap</i>	89	SYRINGE	
<i>tenofovir disoproxil</i>	54	THALOMID 100MG CAP	78	TICOVAC 2.4MCG/0.5ML	76
<i>fumarate 300mg tab</i>		THALOMID 50MG CAP	78	SYRINGE	
TEPMETKO 225MG TAB	45	THEOPHYLLINE 100MG	88	<i>tigecycline 50mg inj</i>	38
<i>terazosin 10mg cap</i>	35	ER TAB		<i>timolol 0.25% ophth gel</i>	82

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ALPHABETICAL LISTING OF DRUGS

<i>timolol 0.25% ophth soln</i>	82	<i>topiramate 25mg/ml oral soln</i>	23	TREMFYA 100MG/ML AUTO-INJECTOR	63
<i>timolol 0.5% ophth gel</i>	82	<i>topiramate 50mg tab</i>	23	TREMFYA 100MG/ML SYRINGE	63
<i>timolol 0.5% ophth soln</i>	82	<i>toremifene 60mg tab</i>	41	TREMFYA 200MG/2ML AUTO-INJECTOR	72
<i>timolol 10mg tab</i>	57	<i>torsemide 100mg tab</i>	65	TREMFYA 200MG/2ML AUTO-INJECTOR	72
<i>timolol 5mg tab</i>	57	<i>torsemide 10mg tab</i>	65	INDUCTION PACK FOR CROHNS (2)	
<i>tinidazole 250mg tab</i>	38	<i>torsemide 20mg tab</i>	65	TREMFYA 200MG/2ML SYRINGE	72
<i>tinidazole 500mg tab</i>	38	<i>torsemide 5mg tab</i>	65	TRESIBA 100UNIT/ML INJ	30
TIVICAY 50MG TAB	54	TOUJEO 300UNIT/ML PEN INJ (1.5ML)	30	TRESIBA 100UNIT/ML PEN INJ (3ML)	30
TIVICAY 5MG TAB FOR ORAL SUSP	54	TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	30	TRESIBA 200UNIT/ML PEN INJ (3ML)	30
<i>tizanidine 2mg tab</i>	52	TPN ELECTROLYTES INJ	81	<i>tretinoin 0.01% topical gel</i>	61
<i>tizanidine 4mg tab</i>	52	TRADJENTA 5MG TAB	29	<i>tretinoin 0.025% topical cream</i>	61
<i>tobramycin 0.3% ophth soln</i>	82	<i>tramadol 100mg er tab</i>	15	<i>tretinoin 0.025% topical gel</i>	61
TOBRAMYCIN 10MG/ML INJ	12	<i>tramadol 200mg er tab</i>	15	<i>tretinoin 0.05% topical cream</i>	61
<i>tobramycin 300mg/5ml inh soln</i>	12	<i>tramadol 300mg er tab</i>	15	<i>tretinoin 0.1% topical cream</i>	61
<i>tobramycin 80mg/2ml inj</i>	12	<i>tramadol 50mg tab</i>	15	<i>tretinoin 10mg cap</i>	46
<i>tolterodine tartrate 1mg tab</i>	72	<i>tramadol/acetaminophen 37.5-325mg tab</i>	15	TRIAMCINOLONE ACETONIDE 0.025% LOTION	64
<i>tolterodine tartrate 2mg er cap</i>	72	<i>trandolapril 1mg tab</i>	34	<i>triamcinolone acetanide 0.025% topical cream</i>	64
<i>tolterodine tartrate 2mg tab</i>	72	<i>trandolapril 2mg tab</i>	34	<i>triamcinolone acetanide 0.025% topical ointment</i>	60
<i>tolterodine tartrate 4mg er cap</i>	72	<i>trandolapril 4mg tab</i>	34	<i>triamcinolone acetanide 0.1% oral paste</i>	64
<i>tolvaptan 15mg tab</i>	67	<i>tranexamic acid 650mg tab</i>	74	<i>triamcinolone acetanide 0.1% topical cream</i>	64
<i>tolvaptan 15mg tab therapy pack (56)</i>	67	<i>tranylcypromine 10mg tab</i>	25	<i>triamcinolone acetanide 0.1% topical lotion</i>	64
<i>tolvaptan 15mg/30mg tab pack (56)</i>	67	TRAVASOL 10% INJ	81	<i>triamcinolone acetanide 0.1% topical ointment</i>	64
<i>tolvaptan 15mg/45mg tab pack (56)</i>	67	<i>travoprost 0.004% ophth soln</i>	83		
<i>tolvaptan 30mg tab</i>	67	<i>trazodone 100mg tab</i>	26		
<i>tolvaptan 30mg/60mg tab pack (56)</i>	67	<i>trazodone 150mg tab</i>	26		
<i>tolvaptan 30mg/90mg tab pack (56)</i>	67	<i>trazodone 50mg tab</i>	26		
<i>topiramate 100mg tab</i>	23	TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER	19		
<i>topiramate 15mg cap</i>	23	TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	19		
<i>topiramate 200mg tab</i>	23	TRELSTAR 11.25MG INJ	41		
<i>topiramate 25mg cap</i>	23	TRELSTAR 22.5MG INJ	41		
<i>topiramate 25mg tab</i>	23	TRELSTAR 3.75MG INJ	41		

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ALPHABETICAL LISTING OF DRUGS

<i>triamcinolone acetonide</i>	64	<i>trimipramine 25mg cap</i>	27	TYMLOS	66
<i>0.5% topical cream</i>		<i>trimipramine 50mg cap</i>	27	3120MCG/1.56ML PEN	
<i>triamcinolone acetonide</i>	64	TRINTELLIX 10MG TAB	26	INJ	
<i>0.5% topical ointment</i>		TRINTELLIX 20MG TAB	26	TYPHIM VI	76
<i>trientine 250mg cap</i>	78	TRINTELLIX 5MG TAB	26	25MCG/0.5ML INJ	
<i>tri-estarylla tab 28-day</i>	70	<i>tri-sprintec tab 28-day</i>	70	TYPHIM VI	76
<i>pack</i>		<i>pack</i>		25MCG/0.5ML SYRINGE	
<i>trifluoperazine 10mg tab</i>	51	TRIUMEQ	54		
<i>trifluoperazine 1mg tab</i>	51	600-50-300MG TAB		U	
<i>trifluoperazine 2mg tab</i>	51	TRIUMEQ 60-5-30MG	54	UBRELVY 100MG TAB	78
<i>trifluoperazine 5mg tab</i>	51	TAB FOR ORAL SUSP		UBRELVY 50MG TAB	78
TRIFLURIDINE 1%	82	<i>tri-vylibra lo tab 28-day</i>	70	<i>ursodiol 250mg tab</i>	71
OPHTH SOLN		<i>pack</i>		<i>ursodiol 300mg cap</i>	71
<i>trihexyphenidyl 2mg tab</i>	47	<i>tri-vylibra tab 28-day</i>	70	<i>ursodiol 500mg tab</i>	72
<i>trihexyphenidyl 5mg tab</i>	47	<i>pack</i>			
TRIJARDY XR	28	<i>tropium chloride 20mg</i>	72	V	
10-5-1000MG TAB		<i>tab</i>		<i>valacyclovir 1000mg tab</i>	55
TRIJARDY XR	28	TRULANCE 3MG TAB	77	<i>valacyclovir 500mg tab</i>	55
12.5-2.5-1000MG TAB		TRULICITY	29	VALCHLOR 0.016%	62
TRIJARDY XR	28	0.75MG/0.5ML		TOPICAL GEL	
25-5-1000MG TAB		AUTO-INJECTOR		<i>valganciclovir 450mg tab</i>	55
TRIJARDY XR	28	TRULICITY	29	<i>valganciclovir 50mg/ml</i>	55
5-2.5-1000MG TAB		1.5MG/0.5ML		<i>oral soln</i>	
TRIKAFTA	88	AUTO-INJECTOR		<i>valproic acid 250mg cap</i>	24
100-50-75MG/150MG		TRULICITY 3MG/0.5ML	29	<i>valproic acid 50mg/ml</i>	24
TAB PACK (84)		AUTO-INJECTOR		<i>oral soln</i>	
TRIKAFTA	89	TRULICITY	29	<i>valsartan 160mg tab</i>	35
100-50-75MG/75MG		4.5MG/0.5ML		<i>valsartan 320mg tab</i>	35
ORAL GRANULES PACK		AUTO-INJECTOR		<i>valsartan 40mg tab</i>	35
(56)		TRUMENBA SYRINGE	76	<i>valsartan 80mg tab</i>	35
TRIKAFTA	89	TRUQAP 160MG TAB	45	VALTOCO 10MG	21
50-37.5-25MG/75MG		TRUQAP 200MG TAB	45	(10MG/0.1ML) NASAL	
TAB PACK (84)		TUKYSA 150MG TAB	46	SPRAY DOSE PACK	
TRIKAFTA	89	TUKYSA 50MG TAB	46	VALTOCO 15MG	21
80-40-60MG/59.5MG		TURALIO 125MG CAP	45	(7.5MG/0.1ML) NASAL	
ORAL GRANULES PACK		<i>turqoz tab 28-day pack</i>	70	SPRAY DOSE PACK	
(56)		TWINRIX SYRINGE	76	VALTOCO 20MG	21
<i>tri-lo- estarylla tab</i>	70	TYBOST 150MG TAB	54	(10MG/0.1ML) NASAL	
<i>28-day pack</i>		TYENNE 162MG/0.9ML	79	SPRAY DOSE PACK	
<i>tri-lo-sprintec tab 28-day</i>	70	AUTO-INJECTOR		VALTOCO 5MG	21
<i>pack</i>		TYENNE 162MG/0.9ML	79	(5MG/0.1ML) NASAL	
<i>trimethoprim 100mg tab</i>	38	SYRINGE		SPRAY DOSE PACK	
<i>tri-mili tab 28-day pack</i>	70			<i>valtya 1/35 tab 28-day</i>	70
<i>trimipramine 100mg cap</i>	27			<i>pack</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>valtya tab 1/50 28-day pack</i>	70	VENCLEXTA TAB	46	VIRACEPT 250MG TAB	54
<i>vancomycin 100mg/ml inj</i>	38	STARTER PACK (42)		VIRACEPT 625MG TAB	54
<i>vancomycin 125mg cap</i>	38	<i>venlafaxine 100mg tab</i>	26	VIREAD 150MG TAB	54
<i>vancomycin 1gm inj</i>	38	<i>venlafaxine 150mg er cap</i>	26	VIREAD 200MG TAB	54
<i>vancomycin 250mg cap</i>	38	<i>venlafaxine 25mg tab</i>	26	VIREAD 250MG TAB	54
<i>vancomycin 500mg inj</i>	38	<i>venlafaxine 37.5mg er cap</i>	26	VIREAD 40MG/GM	54
<i>vancomycin 750mg inj</i>	38	<i>venlafaxine 37.5mg tab</i>	26	ORAL POWDER	
VANFLYTA 17.7MG TAB	45	<i>venlafaxine 50mg tab</i>	26	VITRAKVI 100MG CAP	45
VANFLYTA 26.5MG TAB	45	<i>venlafaxine 75mg er cap</i>	26	VITRAKVI 20MG/ML	45
VAQTA 25UNIT/0.5ML	76	<i>venlafaxine 75mg tab</i>	26	ORAL SOLN	
INJ		VENTOLIN 108MCG HFA	19	VITRAKVI 25MG CAP	45
VAQTA 25UNIT/0.5ML	77	INHALER		VIVITROL 380MG INJ	31
SYRINGE		<i>verapamil 120mg er cap</i>	58	VIVOTIF DR CAP	77
VAQTA 50UNIT/ML INJ	77	<i>verapamil 120mg er tab</i>	58	VIZIMPRO 15MG TAB	40
VAQTA 50UNIT/ML	77	<i>verapamil 120mg tab</i>	58	VIZIMPRO 30MG TAB	40
SYRINGE		<i>verapamil 180mg er cap</i>	58	VIZIMPRO 45MG TAB	40
<i>varenicline 0.5mg tab</i>	87	<i>verapamil 180mg er tab</i>	58	VONJO 100MG CAP	45
<i>varenicline 0.5mg/1mg first month pack (53)</i>	87	<i>verapamil 240mg er cap</i>	58	VORANIGO 10MG TAB	45
<i>varenicline 1mg tab</i>	87	<i>verapamil 240mg er tab</i>	58	VORANIGO 40MG TAB	45
<i>varenicline 1mg tab pack (56)</i>	87	<i>verapamil 40mg tab</i>	58	<i>voriconazole 200mg inj</i>	32
VARIVAX	77	<i>verapamil 80mg tab</i>	58	<i>voriconazole 200mg tab</i>	32
1350PFU/0.5ML INJ		VERQUVO 10MG TAB	59	<i>voriconazole 40mg/ml oral susp</i>	32
VAXCHORA ORAL SUSP	77	VERQUVO 2.5MG TAB	59	<i>voriconazole 50mg tab</i>	32
VELIVET TAB 28-DAY	70	VERQUVO 5MG TAB	59	VOSEVI 400-100-100MG	55
PACK		VERSACLOZ 50MG/ML	51	TAB	
VELTASSA 16.8GM	79	ORAL SUSP		VOWST 30000000UNIT	72
POWDER FOR ORAL		VERZENIO 100MG TAB	45	CAP	
SUSP		VERZENIO 150MG TAB	45	VRAYLAR 1.5MG CAP	49
VELTASSA 1GM	79	VERZENIO 200MG TAB	45	VRAYLAR 3MG CAP	49
POWDER FOR ORAL		VERZENIO 50MG TAB	45	VRAYLAR 4.5MG CAP	49
SUSP		<i>vestura tab 3-0.02mg 28-day pack</i>	70	VRAYLAR 6MG CAP	49
VELTASSA 25.2GM	80	<i>vienva tab 28-day pack</i>	70	<i>vyfemla tab 28-day pack</i>	70
POWDER FOR ORAL		<i>vigabatrin 500mg powder for oral soln</i>	24	<i>vylibra tab 28-day pack</i>	70
SUSP		<i>vigabatrin 500mg tab</i>	24		
VELTASSA 8.4GM	80	VIGAFYDE 100MG/ML	24	W	
POWDER FOR ORAL		ORAL SOLN		<i>warfarin sodium 10mg tab</i>	20
SUSP		<i>vilazodone 10mg tab</i>	26	<i>warfarin sodium 1mg tab</i>	20
VENCLEXTA 100MG	46	<i>vilazodone 20mg tab</i>	26	<i>warfarin sodium 2.5mg tab</i>	20
TAB		<i>vilazodone 40mg tab</i>	26	<i>warfarin sodium 2mg tab</i>	20
VENCLEXTA 10MG TAB	46	VIMKUNYA	77	<i>warfarin sodium 3mg tab</i>	20
VENCLEXTA 50MG TAB	46	40MCG/0.8ML SYRINGE		<i>warfarin sodium 4mg tab</i>	20
				<i>warfarin sodium 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: 02/01/2026

ALPHABETICAL LISTING OF DRUGS

<i>warfarin sodium 6mg tab</i>	20	XCOPRI TAB 100/150MG	24	XOLAIR 75MG/0.5ML	18
<i>warfarin sodium 7.5mg tab</i>	20	MAINTENANCE PACK (56)		AUTO-INJECTOR	
WELIREG 40MG TAB	46	XCOPRI TAB 12.5/25MG	24	XOLAIR 75MG/0.5ML	18
WINREVAIR 45MG INJ	88	TITRATION PACK (28)		SYRINGE	
WINREVAIR 45MG INJ (2 VIAL PACK)	88	XCOPRI TAB 150/200MG	24	XOSPATA 40MG TAB	45
WINREVAIR 60MG INJ	88	PACK (56)		XPOVIO TAB 100MG	46
WINREVAIR 60MG INJ (2 VIAL PACK)	88	XCOPRI TAB 150/200MG	24	ONCE WEEKLY CARTON (8)	
<i>wixela 100-50mcg powder inhaler</i>	19	TITRATION PACK (28)		XPOVIO TAB 40MG	46
<i>wixela 250-50mcg powder inhaler</i>	19	XDEMVIY 0.25% OPTH SOLN	82	ONCE WEEKLY CARTON (16)	
<i>wixela 500-50mcg powder inhaler</i>	19	XELJANZ 10MG TAB	12	XPOVIO TAB 40MG	46
WYOST 120MG/1.7ML INJ	66	XELJANZ 1MG/ML ORAL SOLN	12	ONCE WEEKLY CARTON (4)	
X		XELJANZ 5MG TAB	12	XPOVIO TAB 40MG	46
XALKORI 150MG ORAL PELLET	45	XELJANZ XR 11MG TAB	12	TWICE WEEKLY CARTON (8)	
XALKORI 200MG CAP	45	XELJANZ XR 22MG TAB	13	XPOVIO TAB 60MG	46
XALKORI 20MG ORAL PELLET	45	XERMELO 250MG TAB	31	ONCE WEEKLY CARTON (4)	
XALKORI 250MG CAP	45	XIFAXAN 550MG TAB	38	XPOVIO TAB 60MG	46
XALKORI 50MG ORAL PELLET	45	XIGDUO XR 10-1000MG TAB	28	TWICE WEEKLY CARTON (24)	
XARELTO 10MG TAB	20	XIGDUO XR 10-500MG TAB	28	XPOVIO TAB 80MG	46
XARELTO 15MG TAB	20	XIGDUO XR	28	ONCE WEEKLY CARTON (8)	
XARELTO 1MG/ML ORAL SUSP	20	2.5-1000MG TAB		XPOVIO TAB 80MG	46
XARELTO 2.5MG TAB	20	XIGDUO XR 5-1000MG TAB	28	TWICE WEEKLY CARTON (32)	
XARELTO 20MG TAB	20	XIGDUO XR 5-500MG TAB	28	XTANDI 40MG CAP	41
XARELTO TAB STARTER PACK (51)	20	XIIDRA 5% OPTH SOLN	83	XTANDI 40MG TAB	41
XATMEP 2.5MG/ML ORAL SOLN	39	XOFLUZA 40MG TAB	55	XTANDI 80MG TAB	41
XCOPRI 100MG TAB	23	XOFLUZA 80MG TAB	55	<i>xulane 150-35mcg/24hr patch</i>	70
XCOPRI 150MG TAB	23	XOLAIR 150MG INJ	17	Y	
XCOPRI 200MG TAB	23	XOLAIR 150MG/ML	17	YESINTEK 90MG/ML	63
XCOPRI 25MG TAB	23	AUTO-INJECTOR		SYRINGE	
XCOPRI 50MG TAB	23	XOLAIR 150MG/ML	17	YF-VAX INJ	77
		SYRINGE		<i>yuvafem 10mcg vaginal insert</i>	91
		XOLAIR 300MG/2ML	17	Z	
		AUTO-INJECTOR		<i>zafemy 150-35mcg/24hr patch</i>	70
		XOLAIR 300MG/2ML	17		
		SYRINGE			

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ALPHABETICAL LISTING OF DRUGS

<i>zafirlukast 10mg tab</i>	18	ZURZUVAE 20MG CAP	24
<i>zafirlukast 20mg tab</i>	18	ZURZUVAE 25MG CAP	24
<i>zaleplon 10mg cap</i>	75	ZURZUVAE 30MG CAP	24
<i>zaleplon 5mg cap</i>	75	ZYDELIG 100MG TAB	46
ZAVZPRET 10MG/ACT	78	ZYDELIG 150MG TAB	46
NASAL SPRAY		ZYKADIA 150MG TAB	46
ZEJULA 100MG TAB	45		
ZEJULA 200MG TAB	45		
ZEJULA 300MG TAB	45		
ZELBORAF 240MG TAB	46		
<i>zenatane 10mg cap</i>	61		
<i>zenatane 20mg cap</i>	61		
<i>zenatane 30mg cap</i>	61		
<i>zenatane 40mg cap</i>	61		
<i>zidovudine 100mg cap</i>	54		
<i>zidovudine 10mg/ml oral soln</i>	54		
<i>zidovudine 300mg tab</i>	54		
<i>ziprasidone 20mg cap</i>	49		
<i>ziprasidone 20mg inj</i>	49		
<i>ziprasidone 40mg cap</i>	49		
<i>ziprasidone 60mg cap</i>	49		
<i>ziprasidone 80mg cap</i>	49		
ZOLINZA 100MG CAP	46		
<i>zolmitriptan 2.5mg tab</i>	78		
<i>zolmitriptan 5mg tab</i>	78		
<i>zolpidem tartrate 10mg tab</i>	75		
<i>zolpidem tartrate 12.5mg er tab</i>	75		
<i>zolpidem tartrate 5mg tab</i>	75		
<i>zolpidem tartrate 6.25mg er tab</i>	75		
ZONISADE 100MG/5ML ORAL SUSP	23		
<i>zonisamide 100mg cap</i>	23		
<i>zonisamide 25mg cap</i>	23		
<i>zonisamide 50mg cap</i>	23		
<i>zovia 1mg-35mcg tab</i>	70		
<i>28-day pack</i>			
ZTALMY 50MG/ML ORAL SUSP	23		
ZURNAI 1.5MG/0.5ML AUTO-INJECTOR	31		

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This formulary was updated on 02/01/2026. 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.

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