

What is the Navitus MedicareRx Drug List?

A Drug List is a list of covered drugs selected by Navitus MedicareRx 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. Navitus MedicareRx will generally cover the drugs listed in our Drug List if the drug is medically necessary, the prescription is filled at a Navitus MedicareRx network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Secondary coverage may be provided by your supplemental (wrap) coverage for some Part B supplies, *after* Medicare Part B has paid as primary. However, these Part B supplies must be included on the Drug List.

For a complete listing of all prescription drugs covered by Navitus MedicareRx, please visit our website at <https://memberportal.navitus.com> or UChealthplans.com or call us. Our contact information, along with the date we last updated the drug list, appears on the front and back cover pages.

Can the Drug List change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes.

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

- **New generic drugs.** We may immediately remove a brand-name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand-name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand-name drug, we may not tell you in advance before we make that 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 the brand-name drug for you. The notice we provide you will also include information on how to request an exception, and you can find information in the section below titled “How do I request an exception to the Navitus MedicareRx Drug List?”
- **Drugs removed from the market.** If the Food and Drug Administration deems a drug on our Drug List to be unsafe or the drug’s manufacturer removes the drug from the market, we will immediately remove the drug from our Drug List and 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 add a generic drug that is not new to the market to replace a brand-name drug currently on the Drug List or add new restrictions to the brand-name drug or move it to a different cost-sharing tier or both. Or we may make changes based on new clinical guidelines. If we remove drugs from our Drug List, 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, or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug.

- If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand-name drug for you. 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 Navitus MedicareRx Drug List?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2024 Drug List that is covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2024 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 Drug List for the new benefit year for any changes to drugs.

The enclosed Drug List is current as of 10/01/2023. The Drug List is updated each month and is available on the website at <https://memberportal.navitus.com> or UHealthplans.com. We update our online Drug List on a regularly scheduled basis to include any changes that have occurred after the last update. When changes to the Drug List occur during the year, we post the Drug List on our Member Portal including those changes. In the event of CMS-approved non-maintenance changes to the Drug List throughout the plan year, Navitus MedicareRx will notify you. To get updated information about the drugs covered by Navitus MedicareRx please contact us. You can contact Navitus MedicareRx Customer Care at 1-833-837-4309 (for TTY/TDD users, please call 711), available 24 hours a day, 7 days a week (except on Thanksgiving and Christmas Day).

How do I use the Drug List?

There are two ways to find your drug within the Drug List:

Medical Condition

The Drug List begins on page 9. The drugs in this Drug List 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, “Cardiovascular Agents”. If you know what your drug is used for, look for the category name in the list that begins on page 9. 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 111. The Index provides an alphabetical list of all 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?

Navitus MedicareRx 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 cost less than brand-name drugs.

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:** Navitus MedicareRx requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from Navitus MedicareRx before you fill your prescriptions. If you do not get approval, Navitus MedicareRx may not cover the drug.
- **Quantity Limits:** For certain drugs, Navitus MedicareRx limits the amount of the drug that Navitus MedicareRx will cover. For example, Navitus MedicareRx provides 18 tablets per prescription for Imitrex. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, Navitus MedicareRx 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, Navitus MedicareRx may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Navitus MedicareRx may then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the Drug List that begins on page 9. You can also get more information about the restrictions applied to specific covered drugs by visiting the member portal. We have posted online documents that explain our prior authorization restriction and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the Drug List, appears on the front and back cover pages.

You can ask Navitus MedicareRx 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 Navitus MedicareRx Drug List?” for information about how to request an exception.

Cost Sharing – Brand vs. Generic Drugs

The Drug List indicates what you will pay for your drug. A generic drug is the same as a brand-name drug in dosage, safety, and strength. If you and/or your prescriber specifies that a brand name drug must be dispensed and there is a lower tier generic equivalent available on the drug list, you must pay the applicable brand copay plus the difference between the cost of the brand-name drug and the generic equivalent. With prior authorization, exceptions for medical necessity can be made and you will pay the Tier 3 (non-preferred) copay. This Dispense as Written (DAW) cost-sharing penalty will not exceed the cost of the medication.

What are Over the Counter (OTC) drugs?

OTC drugs are non-prescription drugs that are not normally covered by a Medicare Prescription Drug Plan. Navitus MedicareRx pays for certain OTC drugs. The covered OTC drugs are listed on your Drug List. Navitus MedicareRx will provide these OTC drugs at no cost to you. The cost to Navitus MedicareRx of these OTC drugs will not count toward your total Part D drug costs (that is, the cost of the OTC drugs does not help you qualify for catastrophic coverage).

Your plan also covers certain prescribed Cough and Cold, or Vitamin and Mineral medications. The Drug List indicates what tier applies to these drugs.

What if my drug is not on the Drug List?

If your drug is not included in this Drug List (list of covered drugs), you should first contact Customer Care and ask if your drug is covered.

If you learn that Navitus MedicareRx does not cover your drug, you have two options:

- You can ask Customer Care for a list of similar drugs that are covered by Navitus MedicareRx. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by Navitus MedicareRx.
- You can ask Navitus MedicareRx 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 Navitus MedicareRx Drug List?

You can ask Navitus MedicareRx 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 Drug List. 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 cover a Drug List drug at a lower cost-sharing level unless the drug is on a specialty tier. If approved, this would lower the amount you must pay for your drug.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, Navitus MedicareRx 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.

Generally, Navitus MedicareRx will only approve your request for an exception if the alternative drugs included on the plan's Drug List, the lower cost-sharing drug, or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a Drug List, tier, or utilization restriction exception. **When you request a Drug List, tier, or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

What do I do before I can talk to my doctor about changing my drugs or requesting an exception?

As a new or continuing member in our plan you may be taking drugs that are not on our Drug List. Or, you may be taking a drug that is on our Drug List but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a Drug List exception so that

we will cover the drug you take. While you talk to your doctor to 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 Drug List or if your ability to get your drugs is limited, 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. 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 Drug List 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 Drug List exception.

Level of Care Changes

Navitus MedicareRx'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 Drug List. 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 Drug List.
- 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 Navitus' 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.

Navitus MedicareRx 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.
- Navitus MedicareRx 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 Navitus MedicareRx Customer Care (phone numbers are on the back cover of this booklet). Navitus MedicareRx Customer Care can help the pharmacy process an override.

For more information

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

If you have questions about Navitus MedicareRx, please contact us. Our contact information, along with the date we last updated the Drug List, 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/TDD users should call 1-877-486-2048. Or visit <http://www.medicare.gov>.

Navitus MedicareRx Drug List

The Drug List below provides coverage information about the drugs covered by Navitus MedicareRx. If you have trouble finding your drug in the list, turn to the Index that begins on page <index page number>.

The first column of the chart lists the drug name.

- Brand name drugs are capitalized (e.g., LIPITOR)
- Generic drugs are listed in lower-case italics (e.g., *atorvastatin*).

The second column of the chart lists the Drug Tier. You can reference the Summary of Benefits booklet or Chapter 4 (Section 5.2) in the Evidence of Coverage booklet to learn what your copay or coinsurance will be.

- Tier 1: Preferred generics and certain lower cost brand products
- Tier 2: Preferred brand products and some higher cost non-preferred generics
- Tier 3: Non-preferred products (could include some higher cost non-preferred generics)
- Tier 4: Specialty products

And

- Tier \$0: Select Generics (not all dosages of these drugs are covered at the Select Generics cost share); certain over-the-counter drugs.

The third column of the chart lists information in the Requirements/Limits column tells you if Navitus MedicareRx has any special requirements for coverage of your drug.

- **Insulin (INS):** Insulin products on the drug list are available at a reduced copay.
- **Limited Distribution (LD):** This prescription may be available only at certain pharmacies. For more information consult your Pharmacy Directory or call Customer Care at 1-833-837-4309 (TTY/TDD users should call 711), 24 hours a day, 7 days a week (except on Thanksgiving and Christmas Day) or visit the website at <https://memberportal.navitus.com> or UHealthplans.com.
- **Non-extended Day Supply (NDS):** You may be able to receive greater than a 1-month supply of most of the drugs on your Drug List. Drugs noted with “NDS” are limited to a 1-month supply for Retail, Mail Order and Specialty.

- **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, Navitus MedicareRx 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 Navitus MedicareRx to determine that this drug is covered under Medicare Part D before you fill your prescription for this drug. Without prior approval, Navitus MedicareRx 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 Navitus MedicareRx before you fill your prescription for this drug. Without prior approval, Navitus MedicareRx may not cover this drug.
- **Step Therapy (ST):** In some cases, Navitus MedicareRx 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, Navitus MedicareRx may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Navitus MedicareRx 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, Navitus MedicareRx limits the amount of the drug that Navitus MedicareRx will cover. This could include a: per fill, daily, monthly, or yearly limitation.
- **Rx Cents (RXC):** This medication is offered at half the stated tier copay when your prescriber writes a prescription for half-tab daily. For example, if you take one 20mg tablet per day that is listed on the Drug List as a Tier 1 drug, the prescriber might write the prescription for half of a 40mg tab per day. Then you would pay \$2.50 per month instead of \$5 per month. For more information or to acquire a tablet splitter, contact Customer Care.
- **Vaccines for Part D (VAC)** Part D vaccines are covered at not cost to you.

The * symbol on the Drug List after the Tier, indicates this prescription drug is not normally covered in a Medicare Prescription Drug Plan, but is covered by your supplemental coverage. The amount you pay when you fill a prescription for this drug does not count towards your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage). In addition, if you are receiving extra help to pay for your prescriptions, you will not get any extra help to pay for this drug.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<i>amphetamine-dextroamphetamine 10mg ER cap</i>	1	
<i>amphetamine-dextroamphetamine 15mg ER cap</i>	1	
<i>amphetamine-dextroamphetamine 20mg ER cap</i>	1	
<i>amphetamine-dextroamphetamine 25mg ER cap</i>	1	
<i>amphetamine-dextroamphetamine 30mg ER cap</i>	1	
<i>amphetamine-dextroamphetamine 5mg ER cap</i>	1	
<i>amphetamine/dextroamphetamine 10mg tab</i>	1	
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	1	
<i>amphetamine/dextroamphetamine 15mg tab</i>	1	
<i>amphetamine/dextroamphetamine 20mg tab</i>	1	
<i>amphetamine/dextroamphetamine 30mg tab</i>	1	
<i>amphetamine/dextroamphetamine 5mg tab</i>	1	
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	1	
<i>dextroamphetamine sulfate 10mg er cap</i>	2	
<i>dextroamphetamine sulfate 10mg tab</i>	1	
<i>dextroamphetamine sulfate 15mg er cap</i>	2	
<i>dextroamphetamine sulfate 5mg er cap</i>	2	
<i>dextroamphetamine sulfate 5mg tab</i>	1	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine 100mg cap</i>	1	QL=60 Quantity/30 Days
<i>atomoxetine 10mg cap</i>	1	QL=60 Quantity/30 Days
<i>atomoxetine 18mg cap</i>	1	QL=60 Quantity/30 Days
<i>atomoxetine 25mg cap</i>	1	QL=60 Quantity/30 Days
<i>atomoxetine 40mg cap</i>	1	QL=60 Quantity/30 Days
<i>atomoxetine 60mg cap</i>	1	QL=60 Quantity/30 Days
<i>atomoxetine 80mg cap</i>	1	QL=60 Quantity/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	
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI 150MG TAB	2	PA QL=30 Quantity/30 Days
SUNOSI 75MG TAB	2	PA QL=30 Quantity/30 Days
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS		
WAKIX 17.8MG TAB	4	LD NDS PA QL=60 Quantity/30 Days
WAKIX 4.45MG TAB	4	LD NDS PA QL=60 Quantity/30 Days
STIMULANTS - MISC.		
<i>armodafinil 150mg tab</i>	1	PA QL=30 Quantity/30 Days
<i>armodafinil 200mg tab</i>	1	PA QL=30 Quantity/30 Days
<i>armodafinil 250mg tab</i>	1	PA QL=30 Quantity/30 Days
<i>armodafinil 50mg tab</i>	1	PA QL=30 Quantity/30 Days
<i>dexmethylphenidate 10mg er cap</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dexmethylphenidate 10mg tab</i>	1	
<i>dexmethylphenidate 15mg er cap</i>	2	
<i>dexmethylphenidate 2.5mg tab</i>	1	
<i>dexmethylphenidate 20mg er cap</i>	2	
<i>dexmethylphenidate 25mg er cap</i>	2	
<i>dexmethylphenidate 30mg er cap</i>	2	
<i>dexmethylphenidate 35mg er cap</i>	2	
<i>dexmethylphenidate 40mg er cap</i>	2	
<i>dexmethylphenidate 5mg er cap</i>	2	
<i>dexmethylphenidate 5mg tab</i>	1	
<i>methylphenidate 10mg chew tab</i>	2	
<i>methylphenidate 10mg cr cap</i>	2	
<i>methylphenidate 10mg er tab</i>	1	
<i>methylphenidate 10mg la cap</i>	2	
<i>methylphenidate 10mg tab</i>	1	
<i>methylphenidate 18mg er tab</i>	2	
METHYLPHENIDATE 18MG ER TAB	2	
<i>methylphenidate 1mg/ml oral soln</i>	2	
<i>methylphenidate 2.5mg chew tab</i>	2	
<i>methylphenidate 20mg cr cap</i>	2	
<i>methylphenidate 20mg er tab</i>	1	
<i>methylphenidate 20mg la cap</i>	2	
<i>methylphenidate 20mg tab</i>	1	
<i>methylphenidate 27mg sr tab</i>	2	
<i>methylphenidate 2mg/ml oral soln</i>	2	
<i>methylphenidate 30mg cr cap</i>	2	
<i>methylphenidate 30mg la cap</i>	2	
<i>methylphenidate 36mg sr tab</i>	2	
<i>methylphenidate 40mg cr cap</i>	2	
<i>methylphenidate 40mg la cap</i>	2	
<i>methylphenidate 50mg cr cap</i>	2	
<i>methylphenidate 54mg sr tab</i>	2	
<i>methylphenidate 5mg chew tab</i>	2	
<i>methylphenidate 5mg tab</i>	1	
<i>methylphenidate 60mg cr cap</i>	2	
<i>methylphenidate 60mg la cap</i>	2	
<i>methylphenidate ER osmotic 27mg tab</i>	2	
<i>methylphenidate ER osmotic 36mg tab</i>	2	
<i>methylphenidate ER osmotic 54mg tab</i>	2	
<i>modafinil 100mg tab</i>	1	PA QL=60 Quantity/30 Days
<i>modafinil 200mg tab</i>	1	PA QL=60 Quantity/30 Days
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
<i>amikacin 250mg/ml inj</i>	2	
<i>amikacin sulfate 1gm/4ml inj</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ARIKAYCE 590MG/8.4ML INH SUSP	4	LD NDS PA QL=252 Quantity/30 Days
GENTAMICIN 0.8MG/ML INJ	2	
<i>gentamicin 1.2mg/ml inj</i>	2	
GENTAMICIN 1.6MG/ML INJ	2	
GENTAMICIN 1MG/ML INJ	2	
<i>gentamicin 40mg/ml inj</i>	2	
<i>neomycin sulfate 500mg tab</i>	1	
<i>paromomycin 250mg cap</i>	2	
STREPTOMYCIN 1000MG INJ	3	
<i>tobramycin 1.2gm inj</i>	2	
<i>tobramycin 1.2gm/30ml inj</i>	2	
TOBRAMYCIN 10MG/ML INJ	2	
TOBRAMYCIN 2GM/50ML INJ	2	
<i>tobramycin 40mg/ml inj</i>	2	
<i>tobramycin 60mg/ml inh soln</i>	4	NDS PA QL=300 Quantity/30 Days
TOBRAMYCIN 60MG/ML INH SOLN	4	NDS PA QL=300 Quantity/30 Days
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
OLUMIANT 1MG TAB	4	NDS PA QL=30 Quantity/30 Days
OLUMIANT 2MG TAB	4	NDS PA QL=30 Quantity/30 Days
RINVOQ 15MG ER TAB	4	NDS PA QL=30 Quantity/30 Days
RINVOQ 30MG ER TAB	4	NDS PA QL=30 Quantity/30 Days
RINVOQ 45MG ER TAB	4	NDS PA QL=30 Quantity/30 Days
XELJANZ 10MG TAB	4	NDS PA QL=60 Quantity/30 Days
XELJANZ 1MG/ML ORAL SOLN	4	NDS PA QL=300 Quantity/30 Days
XELJANZ 5MG TAB	4	NDS PA QL=60 Quantity/30 Days
XELJANZ XR 11MG TAB	4	NDS PA QL=30 Quantity/30 Days
XELJANZ XR 22MG TAB	4	NDS PA QL=30 Quantity/30 Days
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
HUMIRA 10MG/0.1ML SYRINGE	4	NDS PA QL=2 Quantity/28 Days
HUMIRA 20MG/0.2ML SYRINGE	4	NDS PA QL=2 Quantity/28 Days
HUMIRA 40MG/0.4ML AUTO-INJECTOR	4	NDS PA QL=6 Quantity/28 Days
HUMIRA 40MG/0.4ML SYRINGE	4	NDS PA QL=6 Quantity/28 Days
HUMIRA 40MG/0.8ML AUTO-INJECTOR	4	NDS PA QL=6 Quantity/28 Days
HUMIRA 40MG/0.8ML SYRINGE	4	NDS PA QL=6 Quantity/28 Days
HUMIRA 80MG/0.8ML AUTO-INJECTOR	4	NDS PA QL=2 Quantity/28 Days
HUMIRA PEDIATRIC CROHN'S STARTER PACK (3) 80MG/0.8ML SYRINGE	4	NDS PA QL=3 Quantity/180 Days
HUMIRA PEDIATRIC CROHN'S STARTER PACK SYRINGE (2) 40MG/0.4ML, 80MG/0.8ML	4	NDS PA QL=2 Quantity/180 Days
HUMIRA PEN - CROHN'S STARTER PACK 40MG/0.8ML INJ	4	NDS PA QL=6 Quantity/180 Days
HUMIRA PEN - PEDIATRIC UC STARTER PACK 80MG/0.8ML INJ	4	NDS PA QL=4 Quantity/180 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HUMIRA PEN - PSORIASIS STARTER PACK 40MG/0.8ML	4	NDS PA QL=4 Quantity/180 Days
HUMIRA PEN - PSORIASIS STARTER PACK 80MG/0.8ML INJ	4	NDS PA QL=3 Quantity/180 Days
HUMIRA PEN 80MG/0.8ML - STARTER PACK FOR CROHN'S DISEASE ULCERATIVE COLITIS OR HIDRADENITIS SUPPURAT	4	NDS PA QL=3 Quantity/180 Days
SIMPONI 100MG/ML AUTO-INJECTOR	4	NDS PA QL=3 Quantity/28 Days
SIMPONI 100MG/ML SYRINGE	4	NDS PA QL=3 Quantity/28 Days
SIMPONI 50MG/0.5ML AUTO-INJECTOR	4	NDS PA QL=.50 Quantity/28 Days
SIMPONI 50MG/0.5ML SYRINGE	4	NDS PA QL=.50 Quantity/28 Days
GOLD COMPOUNDS		
RIDAURA 3MG CAP	2	
INTERLEUKIN-1 BLOCKERS		
ARCALYST 220MG INJ	4	NDS PA
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA 162MG/0.9ML AUTO-INJECTOR	4	NDS PA QL=3.60 Quantity/28 Days
ACTEMRA 162MG/0.9ML SYRINGE	4	NDS PA QL=3.60 Quantity/28 Days
KEVZARA 150MG/1.14ML AUTO-INJECTOR	4	NDS PA QL=2.28 Quantity/28 Days
KEVZARA 150MG/1.14ML SYRINGE	4	NDS PA QL=2.28 Quantity/28 Days
KEVZARA 200MG/1.14ML AUTO-INJECTOR	4	NDS PA QL=1 Quantity/28 Days
KEVZARA 200MG/1.14ML SYRINGE	4	NDS PA QL=2.28 Quantity/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 100mg er tab</i>	1	
<i>diclofenac sodium 25mg dr tab</i>	1	
<i>diclofenac sodium 50mg dr tab</i>	1	
<i>diclofenac sodium 75mg dr tab</i>	1	
<i>diclofenac/misoprostol 50-0.2mg dr tab</i>	2	
<i>diclofenac/misoprostol 75-0.2mg dr tab</i>	2	
<i>etodolac 200mg cap</i>	1	
<i>etodolac 300mg cap</i>	1	
<i>etodolac 400mg er tab</i>	2	
<i>etodolac 400mg tab</i>	1	
<i>etodolac 500mg er tab</i>	2	
<i>etodolac 500mg tab</i>	1	
<i>etodolac 600mg er tab</i>	2	
<i>flurbiprofen 100mg tab</i>	1	
<i>ibuprofen 20mg/ml susp</i>	1	
<i>ibuprofen 400mg tab</i>	1	
<i>ibuprofen 600mg 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.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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 Quantity/5 Days
<i>meloxicam 15mg tab</i>	1	
<i>meloxicam 7.5mg tab</i>	1	
MOTRIN SUSP	3*	
<i>nabumetone 500mg tab</i>	1	
<i>nabumetone 750mg tab</i>	1	
<i>naproxen 250mg tab</i>	1	
<i>naproxen 375mg dr tab</i>	2	
<i>naproxen 375mg tab</i>	1	
<i>naproxen 500mg tab</i>	1	
<i>naproxen sodium 275mg tab</i>	2	
<i>naproxen sodium 550mg tab</i>	2	
<i>oxaprozin 600mg tab</i>	2	
<i>piroxicam 10mg cap</i>	1	
<i>piroxicam 20mg cap</i>	1	
<i>sulindac 150mg tab</i>	1	
<i>sulindac 200mg tab</i>	1	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA 28-DAY STARTER PACK	4	NDS PA QL=55 Quantity/28 Days
OTEZLA 30MG TAB	4	NDS PA QL=60 Quantity/30 Days
PYRIMIDINE SYNTHESIS INHIBITORS		
<i>leflunomide 10mg tab</i>	1	
<i>leflunomide 20mg tab</i>	1	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA 125MG/ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
ORENCIA 125MG/ML SYRINGE	4	NDS PA QL=4 Quantity/28 Days
ORENCIA 50MG/0.4ML SYRINGE	4	NDS PA QL=1.60 Quantity/28 Days
ORENCIA 87.5MG/0.7ML SYRINGE	4	NDS PA QL=2.80 Quantity/28 Days
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL 25MG INJ	4	NDS PA QL=8 Quantity/28 Days
ENBREL 25MG/0.5ML INJ	4	NDS PA QL=8 Quantity/28 Days
ENBREL 25MG/0.5ML SYRINGE	4	NDS PA QL=16 Quantity/28 Days
ENBREL 50MG/ML AUTO-INJECTOR	4	NDS PA QL=8 Quantity/28 Days
ENBREL 50MG/ML CARTRIDGE	4	NDS PA QL=8 Quantity/28 Days
ENBREL 50MG/ML SYRINGE	4	NDS PA QL=8 Quantity/28 Days
ANALGESICS - NONNARCOTIC		
SALICYLATES		
<i>aspirin 81mg chew tab</i>	\$0*	
<i>aspirin 81mg EC tab</i>	\$0*	
<i>diflunisal 500mg tab</i>	1	
<i>salsalate 500mg tab</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>salsalate 750mg tab</i>	2	
ANALGESICS - OPIOID		
OPIOID AGONISTS		
CODEINE SULFATE 15MG TAB	2	QL=240 Quantity/30 Days
CODEINE SULFATE 30MG TAB	2	QL=240 Quantity/30 Days
<i>codeine sulfate 30mg tab</i>	2	QL=240 Quantity/30 Days
CODEINE SULFATE 60MG TAB	2	QL=180 Quantity/30 Days
<i>fentanyl 100mcg/hr patch</i>	2	QL=10 Quantity/30 Days
<i>fentanyl 1200mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
<i>fentanyl 12mcg/hr patch</i>	2	QL=10 Quantity/30 Days
<i>fentanyl 1600mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
<i>fentanyl 200mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
<i>fentanyl 25mcg/hr patch</i>	2	QL=10 Quantity/30 Days
<i>fentanyl 400mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
<i>fentanyl 50mcg/hr patch</i>	2	QL=10 Quantity/30 Days
<i>fentanyl 600mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
<i>fentanyl 75mcg/hr patch</i>	2	QL=10 Quantity/30 Days
<i>fentanyl 800mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
HYDROCODONE BITARTRATE 10MG ER CAP	2	QL=60 Quantity/30 Days
HYDROCODONE BITARTRATE 15MG ER CAP	2	QL=60 Quantity/30 Days
HYDROCODONE BITARTRATE 20MG ER CAP	2	QL=60 Quantity/30 Days
HYDROCODONE BITARTRATE 30MG ER CAP	2	QL=60 Quantity/30 Days
HYDROCODONE BITARTRATE 40MG ER CAP	2	QL=60 Quantity/30 Days
HYDROCODONE BITARTRATE 50MG ER CAP	2	QL=60 Quantity/30 Days
<i>hydromorphone 2mg tab</i>	1	QL=450 Quantity/30 Days
<i>hydromorphone 4mg tab</i>	1	QL=240 Quantity/30 Days
<i>hydromorphone 8mg tab</i>	1	QL=120 Quantity/30 Days
<i>methadone 10mg tab</i>	1	QL=360 Quantity/30 Days
<i>methadone 10mg/5ml oral soln</i>	1	QL=1800 Quantity/30 Days
METHADONE 1MG/ML ORAL SOLN	1	QL=3600 Quantity/30 Days
METHADONE 2MG/ML ORAL SOLN	1	QL=1800 Quantity/30 Days
<i>methadone 5mg tab</i>	1	QL=360 Quantity/30 Days
<i>methadone 5mg/5ml oral soln</i>	1	QL=3600 Quantity/30 Days
<i>morphine sulfate 100mg er tab</i>	1	QL=120 Quantity/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 Quantity/30 Days
MORPHINE SULFATE 15MG TAB	1	QL=180 Quantity/30 Days
<i>morphine sulfate 15mg tab</i>	1	QL=180 Quantity/30 Days
<i>morphine sulfate 200mg er tab</i>	1	QL=120 Quantity/30 Days
MORPHINE SULFATE 20MG/5ML ORAL SOLN	1	QL=900 Quantity/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 Quantity/30 Days
<i>morphine sulfate 2mg/ml oral soln</i>	1	QL=1800 Quantity/30 Days
<i>morphine sulfate 30mg er tab</i>	1	QL=120 Quantity/30 Days
MORPHINE SULFATE 30MG TAB	1	QL=180 Quantity/30 Days
<i>morphine sulfate 30mg tab</i>	1	QL=180 Quantity/30 Days
<i>morphine sulfate 60mg er tab</i>	1	QL=120 Quantity/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>oxycodone 10mg tab</i>	1	QL=180 Quantity/30 Days
<i>oxycodone 15mg tab</i>	1	QL=180 Quantity/30 Days
<i>oxycodone 1mg/ml oral soln</i>	2	QL=5400 Quantity/30 Days
<i>oxycodone 20mg tab</i>	1	QL=180 Quantity/30 Days
<i>oxycodone 20mg/ml oral soln</i>	2	QL=270 Quantity/30 Days
<i>oxycodone 30mg tab</i>	1	QL=180 Quantity/30 Days
<i>oxycodone 5mg tab</i>	1	QL=360 Quantity/30 Days
OXYCONTIN 10MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 15MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 20MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 30MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 40MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 60MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 80MG ER TAB	2	QL=60 Quantity/30 Days
<i>tramadol 100mg er tab</i>	2	QL=30 Quantity/30 Days
<i>tramadol 200mg er tab</i>	2	QL=30 Quantity/30 Days
<i>tramadol 300mg er tab</i>	2	QL=30 Quantity/30 Days
<i>tramadol 50mg tab</i>	1	QL=240 Quantity/30 Days
OPIOID COMBINATIONS		
<i>acetaminophen/codeine phosphate 120-12mg/5ml oral soln</i>	1	QL=4980 Quantity/30 Days
<i>codeine phosphate/acetaminophen 15-300mg tab</i>	1	QL=390 Quantity/30 Days
<i>codeine phosphate/acetaminophen 30-300mg tab</i>	1	QL=390 Quantity/30 Days
<i>codeine phosphate/acetaminophen 60-300mg tab</i>	1	QL=390 Quantity/30 Days
<i>hydrocodone/acetaminophen 10-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>hydrocodone/acetaminophen 5-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>hydrocodone/acetaminophen 7.5-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>hydrocodone/acetaminophen 7.5-325mg/5ml oral soln</i>	1	QL=5400 Quantity/30 Days
HYDROCODONE/IBUPROFEN 10-200MG TAB	2	QL=480 Quantity/30 Days
HYDROCODONE/IBUPROFEN 5-200MG TAB	2	QL=480 Quantity/30 Days
<i>hydrocodone/ibuprofen 7.5-200mg tab</i>	2	QL=480 Quantity/30 Days
<i>oxycodone/acetaminophen 10-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>oxycodone/acetaminophen 2.5-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>oxycodone/acetaminophen 5-325mg tab</i>	1	QL=360 Quantity/30 Days
OXYCODONE/ACETAMINOPHEN 5-325MG/5ML	2	QL=1800 Quantity/30 Days
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>tramadol/acetaminophen 37.5-325mg tab</i>	1	QL=360 Quantity/30 Days
OPIOID PARTIAL AGONISTS		
<i>buprenorphine 10mcg/hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>buprenorphine 15mcg/hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>buprenorphine 20mcg/hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>buprenorphine 2mg sl tab</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine 5mcg/hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>buprenorphine 7.5mcg/hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>buprenorphine 8mg sl tab</i>	1	QL=90 Quantity/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>buprenorphine/naloxone 12-3mg sublingual film</i>	1	QL=60 Quantity/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine/naloxone 2-0.5mg sublingual film</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine/naloxone 4-1mg sublingual film</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine/naloxone 8-2mg sublingual film</i>	1	QL=90 Quantity/30 Days
<i>butorphanol tartrate 1mg/act nasal inhaler</i>	2	QL=4 Quantity/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) gel pump bottle</i>	2	PA QL=4 Quantity/30 Days
TESTOSTERONE 1% (12.5MG/ACT) GEL PUMP	2	PA QL=4 Quantity/30 Days
<i>testosterone 1% (25mg) gel packet</i>	2	PA QL=120 Quantity/30 Days
TESTOSTERONE 1% (50MG) GEL PACKET	2	PA QL=60 Quantity/30 Days
<i>testosterone 1.62% (1.25gm) gel packet</i>	2	PA QL=60 Quantity/30 Days
<i>testosterone 1.62% (2.5gm) gel packet</i>	2	PA QL=60 Quantity/30 Days
<i>testosterone 20.25mg/act gel pump</i>	2	PA QL=2 Quantity/30 Days
<i>testosterone 30mg/act topical soln</i>	2	PA QL=2 Quantity/30 Days
<i>testosterone cypionate 100mg/ml inj</i>	1	
<i>testosterone cypionate 200mg/ml inj</i>	1	
TESTOSTERONE ENANTHATE 200MG/ML INJ	2	
<i>testosterone gel 1% (50mg) packet</i>	2	PA QL=60 Quantity/30 Days
ANORECTAL AGENTS		
INTRARECTAL STEROIDS		
<i>hydrocortisone 1.67mg/ml enema</i>	2	
RECTAL COMBINATIONS		
ANALPRAM-HC CREAM	3*	
<i>hydrocortisone/pramoxine 2.5-1% rectal cream</i>	1*	
<i>lidocaine/hydrocortisone cream</i>	2*	
RECTAL STEROIDS		
ANUSOL-HC SUPP	3*	
<i>hydrocortisone 1% cream (RX Only)</i>	1	QL=240 Quantity/30 Days
<i>hydrocortisone supp</i>	2*	
<i>procto-med 2.5% cream</i>	1	
VASODILATING AGENTS		
RECTIV 0.4% RECTAL OINTMENT	3	QL=30 Quantity/30 Days
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide 2mg/act rectal foam</i>	2	PA
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole 200mg tab</i>	2	
BENZNIDAZOLE 100MG TAB	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BENZNIDAZOLE 12.5MG TAB	2	
<i>ivermectin 3mg tab</i>	2	PA
<i>praziquantel 600mg tab</i>	2	
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
<i>ranolazine 1000mg er tab</i>	2	
<i>ranolazine 500mg er tab</i>	2	
NITRATES		
<i>isosorbide dinitrate 10mg tab</i>	1	
<i>isosorbide dinitrate 20mg tab</i>	1	
<i>isosorbide dinitrate 30mg tab</i>	1	
<i>isosorbide dinitrate 5mg tab</i>	1	
<i>isosorbide mononitrate 10mg tab</i>	1	
<i>isosorbide mononitrate 120mg er tab</i>	1	
<i>isosorbide mononitrate 20mg tab</i>	1	
<i>isosorbide mononitrate 30mg er tab</i>	1	
<i>isosorbide mononitrate 60mg er tab</i>	1	
ISOSORBIDE MONONITRATE TAB 10MG	1	
ISOSORBIDE MONONITRATE TAB 20MG	1	
NITRO-BID 2% OINTMENT	2	
<i>nitroglycerin 0.1mg/hr patch</i>	1	
<i>nitroglycerin 0.2mg/hr patch</i>	1	
<i>nitroglycerin 0.3mg sl tab</i>	1	
<i>nitroglycerin 0.4mg sl tab</i>	1	
<i>nitroglycerin 0.4mg/act spray</i>	2	
<i>nitroglycerin 0.4mg/hr patch</i>	1	
<i>nitroglycerin 0.6mg sl tab</i>	1	
<i>nitroglycerin 0.6mg/hr patch</i>	1	
NITROGLYCERIN CAP	1*	
ANTIANSXIETY AGENTS		
ANTIANSXIETY AGENTS - MISC.		
<i>bupirone 10mg tab</i>	1	
<i>bupirone 15mg tab</i>	1	
<i>bupirone 30mg tab</i>	1	
<i>bupirone 5mg tab</i>	1	
<i>bupirone 7.5mg tab</i>	1	
<i>hydroxyzine 10mg tab</i>	1	
<i>hydroxyzine 25mg tab</i>	1	
<i>hydroxyzine 2mg/ml oral soln</i>	1	
<i>hydroxyzine 50mg tab</i>	1	
HYDROXYZINE PAMOATE 100MG CAP	1	
<i>hydroxyzine pamoate 25mg cap</i>	1	
<i>hydroxyzine pamoate 50mg cap</i>	1	
BENZODIAZEPINES		
<i>alprazolam 0.25mg tab</i>	1	QL=120 Quantity/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>alprazolam 0.5mg tab</i>	1	QL=120 Quantity/30 Days
<i>alprazolam 1mg tab</i>	1	QL=120 Quantity/30 Days
<i>alprazolam 2mg tab</i>	1	QL=150 Quantity/30 Days
<i>chlordiazepoxide 10mg cap</i>	1	QL=120 Quantity/30 Days
<i>chlordiazepoxide 25mg cap</i>	1	QL=120 Quantity/30 Days
<i>chlordiazepoxide 5mg cap</i>	1	QL=120 Quantity/30 Days
<i>clorazepate dipotassium 15mg tab</i>	2	QL=180 Quantity/30 Days
<i>clorazepate dipotassium 3.75mg tab</i>	2	QL=180 Quantity/30 Days
<i>clorazepate dipotassium 7.5mg tab</i>	2	QL=180 Quantity/30 Days
<i>diazepam 10mg tab</i>	1	QL=120 Quantity/30 Days
<i>diazepam 1mg/ml oral soln</i>	1	QL=1200 Quantity/30 Days
<i>diazepam 2mg tab</i>	1	QL=120 Quantity/30 Days
<i>diazepam 5mg tab</i>	1	QL=120 Quantity/30 Days
<i>diazepam 5mg/ml oral soln</i>	1	QL=240 Quantity/30 Days
<i>lorazepam 0.5mg tab</i>	1	QL=150 Quantity/30 Days
<i>lorazepam 1mg tab</i>	1	QL=150 Quantity/30 Days
<i>lorazepam 2mg tab</i>	1	QL=150 Quantity/30 Days
<i>lorazepam 2mg/ml oral soln</i>	1	QL=150 Quantity/30 Days
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide 100mg cap</i>	1	
<i>disopyramide 150mg cap</i>	1	
<i>quinidine sulfate 200mg tab</i>	1	
QUINIDINE SULFATE 200MG TAB	1	
QUINIDINE SULFATE 300MG TAB	1	
<i>quinidine sulfate 300mg tab</i>	1	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine 150mg cap</i>	2	
<i>mexiletine 200mg cap</i>	2	
<i>mexiletine 250mg cap</i>	2	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate 100mg tab</i>	1	
<i>flecainide acetate 150mg tab</i>	1	
<i>flecainide acetate 50mg tab</i>	1	
<i>propafenone 150mg tab</i>	1	
<i>propafenone 225mg er cap</i>	2	
<i>propafenone 225mg tab</i>	1	
<i>propafenone 300mg tab</i>	1	
<i>propafenone 325mg er cap</i>	2	
<i>propafenone 425mg er cap</i>	2	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone 100mg tab</i>	1	
<i>amiodarone 200mg tab</i>	1	
<i>amiodarone 400mg tab</i>	1	
<i>dofetilide 125mcg cap</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dofetilide 250mcg cap</i>	2	
<i>dofetilide 500mcg cap</i>	2	
MULTAQ 400MG TAB	2	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA 30MG/ML AUTO-INJECTOR	4	LD PA
FASENRA 30MG/ML SYRINGE	4	PA
NUCALA 100MG INJ	4	NDS PA
NUCALA 100MG/ML AUTO-INJECTOR	4	NDS PA
NUCALA 100MG/ML SYRINGE	4	NDS PA
NUCALA 40MG/0.4ML SYRINGE	4	NDS PA
XOLAIR 150MG INJ	4	NDS PA
XOLAIR 150MG/ML SYRINGE	4	NDS PA
XOLAIR 75MG/0.5ML SYRINGE	4	NDS PA
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG INHALER	2	
INCRUSE 62.5MCG/INH INHALER	2	
<i>ipratropium bromide 0.2mg/ml inh soln</i>	1	PA_BvD
SPIRIVA 1.25MCG INHALER	2	ST QL=1 Quantity/30 Days
LEUKOTRIENE MODULATORS		
<i>montelukast 10mg tab</i>	1	
<i>montelukast 4mg chew tab</i>	1	
<i>montelukast 4mg granules</i>	2	
<i>montelukast 5mg chew tab</i>	1	
<i>zafirlukast 10mg tab</i>	2	
<i>zafirlukast 20mg tab</i>	2	
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
<i>roflumilast 250mcg tab</i>	1	
<i>roflumilast 500mcg tab</i>	1	
STEROID INHALANTS		
ARNUITY ELLIPTA 100MCG INHALER	2	QL=1 Quantity/30 Days
ARNUITY ELLIPTA 200MCG INHALER	2	QL=1 Quantity/30 Days
ARNUITY ELLIPTA 50MCG INHALER	2	QL=1 Quantity/30 Days
ASMANEX 100MCG HFA INHALER	2	QL=1 Quantity/30 Days
ASMANEX 110MCG (30ACT) INHALER	2	QL=1 Quantity/30 Days
ASMANEX 200MCG HFA INHALER	2	QL=1 Quantity/30 Days
ASMANEX 220MCG INHALER	2	QL=1 Quantity/30 Days
ASMANEX 50MCG HFA INHALER	2	QL=1 Quantity/30 Days
<i>budesonide 0.125mg/ml inh susp</i>	2	PA_BvD QL=120 Quantity/30 Days
<i>budesonide 0.25mg/ml inh susp</i>	2	PA_BvD QL=120 Quantity/30 Days
<i>budesonide 0.5mg/ml inh susp</i>	2	PA_BvD QL=120 Quantity/30 Days
FLUTICASONE PROPIONATE 110MCG INHALER	2	QL=2 Quantity/30 Days
FLUTICASONE PROPIONATE 220MCG INHALER	2	QL=2 Quantity/30 Days
FLUTICASONE PROPIONATE 44MCG INHALER	2	QL=2 Quantity/30 Days
SYMPATHOMIMETICS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADVAIR 115-21MCG/ACT HFA INHALER	2	QL=1 Quantity/30 Days
ADVAIR 230-21MCG/ACT HFA INHALER	2	QL=1 Quantity/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER	2	QL=1 Quantity/30 Days
<i>albuterol 0.21mg/ml inh soln</i>	1	PA_BvD
<i>albuterol 0.417mg/ml inh soln</i>	1	PA_BvD
<i>albuterol 0.4mg/ml oral soln</i>	1	
<i>albuterol 0.83mg/ml inh soln</i>	1	PA_BvD
<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	1	QL=2 Quantity/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	1	QL=2 Quantity/30 Days
<i>albuterol 2mg tab</i>	2	
<i>albuterol 4mg tab</i>	2	
ALBUTEROL 5MG/ML INH SOLN	1	PA_BvD
<i>albuterol 5mg/ml inh soln</i>	1	PA_BvD
ANORO ELLIPTA 62.5-25MCG INHALER	2	QL=1 Quantity/30 Days
<i>arformoterol tartrate 15mcg/2ml neb soln</i>	2	PA_BvD QL=120 Quantity/30 Days
BREO ELLIPTA 100-25MCG INHALER	2	QL=1 Quantity/30 Days
BREO ELLIPTA 200-25MCG INHALER	2	QL=1 Quantity/30 Days
BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	2	QL=1 Quantity/30 Days
<i>budesonide/formoterol fumarate 160-4.5mcg inhaler</i>	2	QL=1 Quantity/30 Days
<i>budesonide/formoterol fumarate 80-4.5mcg inhaler</i>	2	QL=1 Quantity/30 Days
COMBIVENT 20-100MCG/ACT INHALER	2	
DULERA 100-5MCG INHALER	2	QL=1 Quantity/30 Days
DULERA 200-5MCG INHALER	2	QL=1 Quantity/30 Days
DULERA 50-5MCG INHALER	2	QL=1 Quantity/30 Days
<i>fluticasone propionate/salmeterol 100-50mcg/act dry powder inhaler, wixela 100-50mcg inhaler</i>	1	QL=1 Quantity/30 Days
<i>fluticasone propionate/salmeterol 250-50mcg/act dry powder inhaler, wixela 250-50mcg inhaler</i>	1	QL=1 Quantity/30 Days
<i>fluticasone propionate/salmeterol 500-50mcg/act dry powder inhaler, wixela 500-50mcg inhaler</i>	1	QL=1 Quantity/30 Days
<i>formoterol fumarate 20mcg/2ml neb soln</i>	2	PA_BvD QL=120 Quantity/30 Days
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	1	PA_BvD
<i>levalbuterol 0.103mg/ml inh soln</i>	2	PA_BvD
<i>levalbuterol 0.21mg/ml inh soln</i>	2	PA_BvD
<i>levalbuterol 0.417mg/ml inh soln</i>	2	PA_BvD
<i>levalbuterol 2.5mg/ml inh soln</i>	2	PA_BvD
SEREVENT 50MCG/DOSE INHALER	2	
STIOLTO 2.5-2.5MCG/ACT INHALER	2	QL=1 Quantity/30 Days
<i>terbutaline sulfat 2.5mg tab</i>	2	
<i>terbutaline sulfat 5mg tab</i>	2	
TRELEGY ELLIPTA 100- 62.5-25MCG INHALER	2	QL=1 Quantity/30 Days
TRELEGY ELLIPTA 200-62.5-25MCG INHALER	2	QL=1 Quantity/30 Days
VENTOLIN 108MCG INHALER (18GM)	2	QL=2 Quantity/30 Days
VENTOLIN 108MCG INHALER (8GM)	2	QL=5 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XOPENEX 45MCG INHALER, LEVALBUTEROL 45MCG INHALER	3	ST QL=2 Quantity/30 Days
XANTHINES		
THEO-24 100MG ER CAP	3	
THEO-24 200MG ER CAP	3	
THEO-24 300MG ER CAP	3	
THEO-24 400MG ER CAP	3	
<i>theophylline 300mg SR tab</i>	2	
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450 er tab</i>	2	
<i>theophylline 600mg er tab</i>	1	
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
<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	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS 2.5MG TAB	2	
ELIQUIS 5MG TAB	2	
ELIQUIS 5MG TAB 30-DAY STARTER PACK	2	
XARELTO 10MG TAB	2	
XARELTO 15MG TAB	2	
XARELTO 1MG/ML SUSP	2	
XARELTO 2.5MG TAB	2	
XARELTO 20MG TAB	2	
XARELTO KIT PACK	2	
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>enoxaparin sodium 100mg/1ml syringe</i>	2	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	2	
<i>enoxaparin sodium 150mg/1ml syringe</i>	2	
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	2	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	2	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	2	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	2	
<i>fondaparinux sodium 12.5mg/ml (0.4ml) inj</i>	2	
<i>fondaparinux sodium 12.5mg/ml (0.6ml) inj</i>	2	
<i>fondaparinux sodium 12.5mg/ml (0.8ml) inj</i>	2	
<i>fondaparinux sodium 5mg/ml (0.5mg) inj</i>	2	
<i>heparin sodium 5000unit/0.5ml inj (PF)</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<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	
THROMBIN INHIBITORS		
<i>dabigatran etexilate mesylate 150mg cap</i>	2	
<i>dabigatran etexilate mesylate 75mg cap</i>	2	
PRADAXA 110MG CAP	3	
ANTICONVULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA 0.5MG/ML SUSP	3	PA_NSO
FYCOMPA 10MG TAB	3	PA_NSO
FYCOMPA 12MG TAB	3	PA_NSO
FYCOMPA 2MG TAB	3	PA_NSO
FYCOMPA 4MG TAB	3	PA_NSO
FYCOMPA 6MG TAB	3	PA_NSO
FYCOMPA 8MG TAB	3	PA_NSO
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	1	QL=60 Quantity/30 Days
<i>clobazam 2.5mg/ml susp</i>	2	QL=480 Quantity/30 Days
<i>clobazam 20mg tab</i>	1	QL=60 Quantity/30 Days
<i>clonazepam 0.125mg odt</i>	2	QL=90 Quantity/30 Days
<i>clonazepam 0.25mg odt</i>	2	QL=90 Quantity/30 Days
<i>clonazepam 0.5mg odt</i>	2	QL=90 Quantity/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 Quantity/30 Days
<i>clonazepam 1mg odt</i>	2	QL=90 Quantity/30 Days
<i>clonazepam 1mg tab</i>	1	QL=90 Quantity/30 Days
<i>clonazepam 2mg odt</i>	2	QL=300 Quantity/30 Days
<i>clonazepam 2mg tab</i>	1	QL=300 Quantity/30 Days
DIAZEPAM 10MG/2ML RECTAL GEL	2	QL=10 Quantity/30 Days
DIAZEPAM 2.5MG/0.5ML RECTAL GEL	2	QL=10 Quantity/30 Days
DIAZEPAM 20MG/4ML RECTAL GEL	2	QL=10 Quantity/30 Days
NAYZILAM 5MG/0.1ML NASAL SPRAY	3	QL=10 Quantity/30 Days
SYMPAZAN 10MG ORAL FILM	3	ST_NSO QL=60 Quantity/30 Days
SYMPAZAN 20MG ORAL FILM	3	ST_NSO QL=60 Quantity/30 Days
SYMPAZAN 5MG ORAL FILM	3	ST_NSO QL=60 Quantity/30 Days
VALTOCO 10MG DOSE KIT 10MG/0.1ML PACK	3	QL=10 Quantity/30 Days
VALTOCO 15MG DOSE KIT 7.5MG/0.1ML PACK	3	QL=10 Quantity/30 Days
VALTOCO 20MG DOSE KIT 10MG/0.1ML PACK	3	QL=10 Quantity/30 Days
VALTOCO 5MG DOSE KIT 5MG/0.1ML PACK	3	QL=10 Quantity/30 Days
ANTICONVULSANTS - MISC.		
APTIOM 200MG TAB	3	PA_NSO
APTIOM 400MG TAB	3	PA_NSO
APTIOM 600MG TAB	3	PA_NSO
APTIOM 800MG TAB	3	PA_NSO

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BRIVIACT 100MG TAB	3	PA_NSO QL=60 Quantity/30 Days
BRIVIACT 10MG TAB	3	PA_NSO QL=60 Quantity/30 Days
BRIVIACT 10MG/ML ORAL SOLN	3	PA_NSO
BRIVIACT 25MG TAB	3	PA_NSO QL=60 Quantity/30 Days
BRIVIACT 50MG TAB	3	PA_NSO QL=60 Quantity/30 Days
BRIVIACT 75MG TAB	3	PA_NSO QL=60 Quantity/30 Days
<i>carbamazepine 100mg chew tab</i>	1	
<i>carbamazepine 100mg er cap</i>	2	
<i>carbamazepine 100mg er tab</i>	2	
<i>carbamazepine 200mg er cap</i>	2	
<i>carbamazepine 200mg er tab</i>	2	
<i>carbamazepine 200mg tab</i>	1	
<i>carbamazepine 20mg/ml susp</i>	1	
<i>carbamazepine 300mg er cap</i>	2	
<i>carbamazepine 400mg er tab</i>	2	
DIACOMIT 250MG CAP	4	LD NDS PA_NSO
DIACOMIT 250MG POWDER FOR ORAL SUSP	4	LD NDS PA_NSO
DIACOMIT 500MG CAP	4	LD NDS PA_NSO
DIACOMIT 500MG POWDER FOR ORAL SUSP	4	LD NDS PA_NSO
EPIDIOLEX 100MG/ML ORAL SOLN	2	PA_NSO
EPRONTIA 25MG/ML ORAL SOLN	3	
FINTEPLA 2.2MG/ML ORAL SOLN	4	LD NDS PA_NSO QL=360 Quantity/30 Days
<i>gabapentin 100mg cap</i>	1	
<i>gabapentin 300mg cap</i>	1	
<i>gabapentin 400mg cap</i>	1	
<i>gabapentin 50mg/ml oral soln</i>	2	
<i>gabapentin 600mg tab</i>	1	
<i>gabapentin 800mg tab</i>	1	
<i>lacosamide 100mg tab</i>	1	
<i>lacosamide 10mg/ml oral solution</i>	1	
<i>lacosamide 150mg tab</i>	1	
<i>lacosamide 200mg tab</i>	1	
<i>lacosamide 50mg tab</i>	1	
<i>lamotrigine 100mg er tab</i>	2	
<i>lamotrigine 100mg odt</i>	2	
<i>lamotrigine 100mg tab</i>	1	
<i>lamotrigine 150mg tab</i>	1	
<i>lamotrigine 200mg er tab</i>	2	
<i>lamotrigine 200mg odt</i>	2	
<i>lamotrigine 200mg tab</i>	1	
<i>lamotrigine 250mg er tab</i>	2	
<i>lamotrigine 25mg chew tab</i>	1	
<i>lamotrigine 25mg er tab</i>	2	
<i>lamotrigine 25mg odt</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lamotrigine 25mg tab</i>	1	
<i>lamotrigine 300mg er tab</i>	2	
<i>lamotrigine 50mg er tab</i>	2	
<i>lamotrigine 50mg odt</i>	2	
<i>lamotrigine 5mg chew tab</i>	1	
<i>levetiracetam 1000mg tab</i>	1	
<i>levetiracetam 100mg/ml oral soln</i>	1	
<i>levetiracetam 250mg tab</i>	1	
<i>levetiracetam 500mg er tab</i>	1	
<i>levetiracetam 500mg tab</i>	1	
<i>levetiracetam 750mg er tab</i>	1	
<i>levetiracetam 750mg tab</i>	1	
<i>oxcarbazepine 150mg tab</i>	1	
<i>oxcarbazepine 300mg tab</i>	1	
<i>oxcarbazepine 600mg tab</i>	1	
<i>oxcarbazepine 60mg/ml susp</i>	2	
<i>pregabalin 100mg cap</i>	1	
<i>pregabalin 150mg cap</i>	1	
<i>pregabalin 200mg cap</i>	1	
<i>pregabalin 20mg/ml oral soln</i>	2	
<i>pregabalin 225mg cap</i>	1	
<i>pregabalin 25mg cap</i>	1	
<i>pregabalin 300mg cap</i>	1	
<i>pregabalin 50mg cap</i>	1	
<i>pregabalin 75mg cap</i>	1	
<i>primidone 250mg tab</i>	1	
<i>primidone 50mg tab</i>	1	
<i>rufinamide 200mg tab</i>	2	
<i>rufinamide 40mg/ml susp</i>	2	
SPRITAM 1000MG TAB FOR ORAL SUSP	3	PA_NSO
SPRITAM 250MG TAB FOR ORAL SUSP	3	PA_NSO
SPRITAM 500MG TAB FOR ORAL SUSP	3	PA_NSO
SPRITAM 750MG TAB FOR ORAL SUSP	3	PA_NSO
<i>topiramate 100mg tab</i>	1	
<i>topiramate 15mg cap</i>	1	
<i>topiramate 200mg tab</i>	1	
<i>topiramate 25mg cap</i>	1	
<i>topiramate 25mg tab</i>	1	
<i>topiramate 50mg tab</i>	1	
ZONISADE 100MG/5ML SUSP	3	PA_NSO
<i>zonisamide 100mg cap</i>	1	
<i>zonisamide 25mg cap</i>	1	
<i>zonisamide 50mg cap</i>	1	
ZTALMY 50MG/ML SUSP	4	LD NDS PA_NSO QL=1100 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CARBAMATES		
<i>felbamate 120mg/ml susp</i>	2	
<i>felbamate 400mg tab</i>	2	
<i>felbamate 600mg tab</i>	2	
XCOPRI (250 MG DAILY DOSE) TAB PACK	2	QL=56 Quantity/28 Days
XCOPRI 100MG TAB	2	QL=30 Quantity/30 Days
XCOPRI 12.5/25MG TITRATION PACK	2	QL=28 Quantity/28 Days
XCOPRI 150/200MG TITRATION PACK	2	QL=28 Quantity/28 Days
XCOPRI 150MG TAB	2	QL=60 Quantity/30 Days
XCOPRI 200MG TAB	2	QL=60 Quantity/30 Days
XCOPRI 50/100MG TITRATION PACK	2	QL=28 Quantity/28 Days
XCOPRI 50MG TAB	2	QL=30 Quantity/30 Days
XCOPRI TAB 150/200MG PACK	2	QL=56 Quantity/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>	4	LD NDS PA_NSO
<i>vigabatrin 500mg tab</i>	4	LD NDS PA_NSO
HYDANTOINS		
DILANTIN 100MG ER CAP	3	
DILANTIN 30MG ER CAP	2	
<i>phenytoin 25mg/ml susp</i>	1	
<i>phenytoin 50mg chew tab</i>	2	
<i>phenytoin sodium 100mg er cap</i>	1	
<i>phenytoin sodium 200mg er cap</i>	1	
<i>phenytoin sodium 300mg er cap</i>	1	
SUCCINIMIDES		
<i>ethosuximide 250mg cap</i>	2	
<i>ethosuximide 50mg/ml oral soln</i>	1	
<i>methsuximide 300mg cap</i>	2	
VALPROIC ACID		
<i>divalproex sodium 125mg dr cap</i>	1	
<i>divalproex sodium 125mg dr tab</i>	1	
<i>divalproex sodium 250mg dr tab</i>	1	
<i>divalproex sodium 250mg er tab</i>	1	
<i>divalproex sodium 500mg dr tab</i>	1	
<i>divalproex sodium 500mg er tab</i>	1	
<i>valproic acid 250mg cap</i>	1	
<i>valproic acid 50mg/ml oral soln</i>	1	
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine 15mg odt</i>	1	
<i>mirtazapine 15mg 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.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>mirtazapine 30mg odt</i>	1	
<i>mirtazapine 30mg tab</i>	1	
<i>mirtazapine 45mg odt</i>	1	
<i>mirtazapine 45mg tab</i>	1	
<i>mirtazapine 7.5mg tab</i>	1	
ANTIDEPRESSANT COMBINATIONS		
AUVELITY 105-45MG ER TAB	3	ST_NSO QL=60 Quantity/30 Days
ANTIDEPRESSANTS - MISC.		
<i>bupropion 100mg er tab</i>	1	
<i>bupropion 100mg tab</i>	1	
<i>bupropion 150mg sr (12 hr) tab</i>	1	
<i>bupropion 150mg xl (24 hr) tab</i>	1	
<i>bupropion 200mg er tab</i>	1	
<i>bupropion 300mg er tab</i>	1	
<i>bupropion 75mg tab</i>	1	
MODIFIED CYCLICS		
<i>trazodone 100mg tab</i>	1	
<i>trazodone 150mg tab</i>	1	
<i>trazodone 50mg tab</i>	1	
TRINTELLIX 10MG TAB	2	ST_NSO RXC QL=30 Quantity/30 Days
TRINTELLIX 20MG TAB	2	ST_NSO RXC QL=30 Quantity/30 Days
TRINTELLIX 5MG TAB	2	ST_NSO RXC QL=30 Quantity/30 Days
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM 12MG/24HR PATCH	3	ST_NSO QL=30 Quantity/30 Days
EMSAM 6MG/24HR PATCH	3	ST_NSO QL=30 Quantity/30 Days
EMSAM 9MG/24HR PATCH	3	ST_NSO QL=30 Quantity/30 Days
MARPLAN 10MG TAB	2	
<i>phenelzine 15mg tab</i>	1	
PHENELZINE 15MG TAB	1	
<i>tranylcypromine 10mg tab</i>	2	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram 10mg tab</i>	1	
<i>citalopram 20mg tab</i>	1	
<i>citalopram 2mg/ml oral soln</i>	1	
<i>citalopram 40mg tab</i>	1	
<i>escitalopram 10mg tab</i>	1	
<i>escitalopram 1mg/ml oral soln</i>	2	
<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	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fluoxetine 4mg/ml oral soln</i>	1	
<i>fluoxetine 60mg tab</i>	1	
<i>fluvoxamine maleate 100mg tab</i>	1	
<i>fluvoxamine maleate 25mg tab</i>	1	
<i>fluvoxamine maleate 50mg tab</i>	1	
<i>paroxetine 10mg tab</i>	1	
<i>paroxetine 10mg/ml susp</i>	2	
<i>paroxetine 12.5mg er tab</i>	2	
<i>paroxetine 20mg tab</i>	1	
<i>paroxetine 25mg er tab</i>	2	
<i>paroxetine 30mg tab</i>	1	
<i>paroxetine 37.5mg er tab</i>	2	
<i>paroxetine 40mg tab</i>	1	
<i>sertraline 100mg tab</i>	1	
<i>sertraline 20mg/ml oral soln</i>	1	
<i>sertraline 25mg tab</i>	1	
<i>sertraline 50mg tab</i>	1	
SEROTONIN MODULATORS		
NEFAZODONE 100MG TAB	2	
NEFAZODONE 150MG TAB	2	
NEFAZODONE 200MG TAB	2	
NEFAZODONE 250MG TAB	2	
NEFAZODONE 50MG TAB	2	
VIIBRYD 10/20MG STARTER PACK	3	ST_NSO QL=30 Quantity/30 Days
<i>vilazodone hcl 10mg tab</i>	2	ST_NSO QL=30 Quantity/30 Days
<i>vilazodone hcl 20mg tab</i>	2	ST_NSO QL=30 Quantity/30 Days
<i>vilazodone hcl 40mg tab</i>	2	ST_NSO QL=30 Quantity/30 Days
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<i>desvenlafaxine succinate 100mg er tab</i>	1	
<i>desvenlafaxine succinate 25mg er tab</i>	1	
<i>desvenlafaxine succinate 50mg er tab</i>	1	
<i>duloxetine 20mg dr cap</i>	1	
<i>duloxetine 30mg dr cap</i>	1	
<i>duloxetine 60mg dr cap</i>	1	
FETZIMA 120MG ER CAP	3	ST_NSO QL=30 Quantity/30 Days
FETZIMA 20MG ER CAP	3	ST_NSO QL=30 Quantity/30 Days
FETZIMA 40MG ER CAP	3	ST_NSO QL=30 Quantity/30 Days
FETZIMA 80MG ER CAP	3	ST_NSO QL=30 Quantity/30 Days
FETZIMA PACK	3	ST_NSO QL=30 Quantity/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	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>venlafaxine 75mg er cap</i>	1	
<i>venlafaxine 75mg tab</i>	1	
TRICYCLIC AGENTS		
<i>amitriptyline 100mg tab</i>	1	
<i>amitriptyline 10mg tab</i>	1	
<i>amitriptyline 150mg tab</i>	1	
<i>amitriptyline 25mg tab</i>	1	
<i>amitriptyline 50mg tab</i>	1	
<i>amitriptyline 75mg tab</i>	1	
<i>amoxapine 100mg tab</i>	1	
<i>amoxapine 150mg tab</i>	1	
<i>amoxapine 25mg tab</i>	1	
<i>amoxapine 50mg tab</i>	1	
<i>clomipramine 25mg cap</i>	2	
<i>clomipramine 50mg cap</i>	2	
<i>clomipramine 75mg cap</i>	2	
<i>desipramine 100mg tab</i>	2	
<i>desipramine 10mg tab</i>	2	
<i>desipramine 150mg tab</i>	2	
<i>desipramine 25mg tab</i>	2	
<i>desipramine 50mg tab</i>	2	
<i>desipramine 75mg tab</i>	2	
<i>doxepin 100mg cap</i>	1	
<i>doxepin 10mg cap</i>	1	
<i>doxepin 10mg/ml oral soln</i>	1	
<i>doxepin 150mg cap</i>	1	
<i>doxepin 25mg cap</i>	1	
<i>doxepin 50mg cap</i>	1	
<i>doxepin 75mg cap</i>	1	
<i>imipramine 10mg tab</i>	1	
<i>imipramine 25mg tab</i>	1	
<i>imipramine 50mg tab</i>	1	
<i>nortriptyline 10mg cap</i>	1	
<i>nortriptyline 25mg cap</i>	1	
NORTRIPTYLINE 2MG/ML ORAL SOLN	2	
<i>nortriptyline 50mg cap</i>	1	
<i>nortriptyline 75mg cap</i>	1	
<i>protriptyline 10mg tab</i>	2	
<i>protriptyline 5mg tab</i>	2	
<i>trimipramine 100mg cap</i>	2	
<i>trimipramine 25mg cap</i>	2	
<i>trimipramine 50mg cap</i>	2	
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose 100mg 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.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>acarbose 25mg tab</i>	1	
<i>acarbose 50mg tab</i>	1	
MIGLITOL 100MG TAB	2	
<i>miglitol 100mg tab</i>	2	
<i>miglitol 25mg tab</i>	2	
MIGLITOL 25MG TAB	2	
<i>miglitol 50mg tab</i>	2	
MIGLITOL 50MG TAB	2	
ANTIDIABETIC COMBINATIONS		
<i>glipizide/metformin 2.5-250mg tab</i>	\$0	
<i>glipizide/metformin 2.5-500mg tab</i>	\$0	
<i>glipizide/metformin 5-500mg tab</i>	\$0	
<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	2	QL=30 Quantity/30 Days
GLYXAMBI 25-5MG TAB	2	QL=30 Quantity/30 Days
JANUMET 1000-100MG ER TAB	2	QL=30 Quantity/30 Days
JANUMET 1000-50MG ER TAB	2	QL=60 Quantity/30 Days
JANUMET 1000-50MG TAB	2	QL=60 Quantity/30 Days
JANUMET 500-50MG ER TAB	2	QL=60 Quantity/30 Days
JANUMET 500-50MG TAB	2	QL=60 Quantity/30 Days
JENTADUETO 2.5-1000MG ER TAB	2	QL=30 Quantity/30 Days
JENTADUETO 2.5-1000MG TAB	2	QL=60 Quantity/30 Days
JENTADUETO 2.5-500MG TAB	2	QL=60 Quantity/30 Days
JENTADUETO 5-1000MG ER TAB	2	QL=30 Quantity/30 Days
SOLIQUA PEN INJ	2	INS QL=1 Quantity/25 Days
SYNJARDY 10-1000MG ER TAB	2	QL=30 Quantity/30 Days
SYNJARDY 12.5-1000MG ER TAB	2	QL=60 Quantity/30 Days
SYNJARDY 12.5-1000MG TAB	2	QL=60 Quantity/30 Days
SYNJARDY 12.5-500MG TAB	2	QL=60 Quantity/30 Days
SYNJARDY 25-1000MG ER TAB	2	QL=30 Quantity/30 Days
SYNJARDY 5-1000MG ER TAB	2	QL=60 Quantity/30 Days
SYNJARDY 5-1000MG TAB	2	QL=60 Quantity/30 Days
SYNJARDY 5-500MG TAB	2	QL=60 Quantity/30 Days
TRIJARDY 10-5-1000MG ER TAB	2	QL=30 Quantity/30 Days
TRIJARDY 12.5-2.5-1000MG ER TAB	2	QL=60 Quantity/30 Days
TRIJARDY 25-5-1000MG ER TAB	2	QL=30 Quantity/30 Days
TRIJARDY 5-2.5-1000MG ER TAB	2	QL=60 Quantity/30 Days
XIGDUO 10-1000MG ER TAB	2	QL=30 Quantity/30 Days
XIGDUO 10-500MG ER TAB	2	QL=30 Quantity/30 Days
XIGDUO 2.5-1000MG ER TAB	2	QL=60 Quantity/30 Days
XIGDUO 5-1000MG ER TAB	2	QL=60 Quantity/30 Days
XIGDUO 5-500MG ER TAB	2	QL=30 Quantity/30 Days
XULTOPHY 100UNIT-3.6MG/ML PEN INJ	2	INS QL=15 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BIGUANIDES		
<i>metformin 1000mg tab</i>	\$0	
<i>metformin 500mg er tab</i>	\$0	
<i>metformin 500mg tab</i>	\$0	
<i>metformin 750mg er tab</i>	\$0	
<i>metformin 850mg tab</i>	\$0	
DIABETIC OTHER		
BAQSIMI 3MG/DOSE NASAL POWDER	2	QL=2 Quantity/7 Days
<i>diazoxide 50mg/ml susp</i>	2	
GLUCAGEN 1MG INJ	2	QL=2 Quantity/7 Days
<i>glucagon (rdna) 1mg inj kit</i>	2	QL=2 Quantity/7 Days
GLUCAGON 1MG KIT	2	QL=2 Quantity/7 Days
GVOKE 0.5MG/0.1ML AUTO-INJECTOR	2	QL=2 Quantity/7 Days
GVOKE 0.5MG/0.1ML SYRINGE	2	QL=2 Quantity/7 Days
GVOKE 1MG/0.2ML AUTO-INJECTOR	2	QL=2 Quantity/7 Days
GVOKE 1MG/0.2ML INJ	2	QL=2 Quantity/7 Days
GVOKE 1MG/0.2ML SYRINGE	2	QL=2 Quantity/7 Days
KORLYM 300MG TAB	4	LD NDS PA QL=120 Quantity/30 Days
ZEGALOGUE 0.6MG/0.6ML AUTO-INJECTOR	2	QL=2 Quantity/7 Days
ZEGALOGUE 0.6MG/0.6ML SYRINGE	2	QL=2 Quantity/7 Days
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA 100MG TAB	2	RXC QL=30 Quantity/30 Days
JANUVIA 25MG TAB	2	RXC QL=30 Quantity/30 Days
JANUVIA 50MG TAB	2	RXC QL=30 Quantity/30 Days
TRADJENTA 5MG TAB	2	QL=30 Quantity/30 Days
INCRETIN MIMETIC AGENTS		
OZEMPIC 2MG/3ML PEN INJ	2	PA QL=1 Quantity/28 Days
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
BYDUREON 2MG/0.85ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
OZEMPIC 2.68MG/ML PEN INJ	2	PA QL=1 Quantity/28 Days
OZEMPIC 4MG/3ML PEN INJ	2	PA QL=1 Quantity/28 Days
RYBELSUS 14MG TAB	2	PA QL=30 Quantity/30 Days
RYBELSUS 3MG TAB	2	PA QL=30 Quantity/30 Days
RYBELSUS 7MG TAB	2	PA QL=30 Quantity/30 Days
TRULICITY 0.75MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
TRULICITY 1.5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
TRULICITY 3MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
TRULICITY 4.5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
VICTOZA 18MG/3ML PEN INJ	2	PA QL=9 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
INSULIN		
HUMALOG 100UNIT/ML CARTRIDGE	2	INS
HUMALOG 100UNIT/ML KWIKPEN	2	INS
HUMALOG 200UNIT/ML PEN INJ	2	INS
HUMALOG JUNIOR 100UNIT/ML PEN INJ	2	INS
HUMALOG MIX 25-75UNIT/ML INJ	2	INS
HUMALOG MIX 25-75UNIT/ML PEN INJ	2	INS
HUMALOG MIX 50-50UNIT/ML INJ	2	INS
HUMALOG MIX 50-50UNIT/ML PEN INJ	2	INS
HUMULIN 70-30UNIT/ML INJ	2	INS
HUMULIN 70-30UNIT/ML PEN INJ	2	INS
HUMULIN N 100UNIT/ML INJ	2	INS
HUMULIN N 100UNIT/ML PEN INJ	2	INS
HUMULIN R 100UNIT/ML INJ	2	INS
HUMULIN R 500UNIT/ML INJ	2	INS PA_BvD
HUMULIN R 500UNIT/ML PEN INJ	2	INS
INSULIN LISPRO 100UNIT/ML INJ	2	INS PA_BvD
LANTUS 100UNIT/ML INJ	2	INS
LANTUS SOLOSTAR 100UNIT/ML INJ	2	INS
LEVEMIR 100UNIT/ML INJ	2	INS
LEVEMIR 100UNIT/ML PEN INJ	2	INS
LYUMJEV 100UNIT/ML INJ	2	INS
LYUMJEV 100UNIT/ML PEN INJ	2	INS
LYUMJEV 200UNIT/ML PEN INJ	2	INS
TOUJEO 300UNIT/ML PEN INJ	2	INS
TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	2	INS
TRESIBA 100UNIT/ML INJ	2	INS
TRESIBA 100UNIT/ML PEN INJ	2	INS
TRESIBA 200UNIT/ML PEN INJ	2	INS
INSULIN SENSITIZING AGENTS		
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<i>pioglitazone 45mg tab</i>	1	
MEGLITINIDE ANALOGUES		
<i>nateglinide 120mg tab</i>	1	
<i>nateglinide 60mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	1	
<i>repaglinide 1mg tab</i>	1	
<i>repaglinide 2mg tab</i>	1	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA 10MG TAB	2	QL=30 Quantity/30 Days
FARXIGA 5MG TAB	2	QL=30 Quantity/30 Days
JARDIANCE 10MG TAB	2	QL=30 Quantity/30 Days
JARDIANCE 25MG TAB	2	QL=30 Quantity/30 Days
SULFONYLUREAS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>glimepiride 1mg tab</i>	\$0	
<i>glimepiride 2mg tab</i>	\$0	
<i>glimepiride 4mg tab</i>	\$0	
<i>glipizide 10mg er tab</i>	\$0	
<i>glipizide 10mg tab</i>	\$0	
<i>glipizide 2.5mg er tab</i>	\$0	
<i>glipizide 5mg er tab</i>	\$0	
<i>glipizide 5mg tab</i>	\$0	
<i>glyburide 1.25mg tab</i>	1	
<i>glyburide 1.5mg tab</i>	1	
<i>glyburide 2.5mg tab</i>	1	
<i>glyburide 3mg tab</i>	1	
<i>glyburide 5mg tab</i>	1	
<i>glyburide 6mg tab</i>	1	
ANTIDIARRHEALS		
ANTIPERISTALTIC AGENTS		
<i>atropine sulfate 0.025mg/diphenoxylate 2.5mg tab</i>	1	
<i>loperamide 2mg cap (RX Only)</i>	1	
ANTIDOTES		
ANTIDOTES - CHELATING AGENTS		
CHEMET 100MG CAP	2	
OPIOID ANTAGONISTS		
<i>naloxone 0.4mg/ml inj</i>	1	
VIVITROL 380MG INJ	4	NDS
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
<i>deferasirox 125mg tab for oral susp</i>	1	
<i>deferasirox 180mg granules</i>	1	
<i>deferasirox 180mg tab</i>	1	
<i>deferasirox 250mg tab for oral susp</i>	1	
<i>deferasirox 360mg granules</i>	1	
<i>deferasirox 360mg tab</i>	1	
<i>deferasirox 500mg tab for oral susp</i>	1	
<i>deferasirox 90mg granules</i>	1	
<i>deferasirox 90mg tab</i>	1	
<i>deferiprone 1000mg tab</i>	4	LD NDS PA
<i>deferiprone 500mg tab</i>	4	LD NDS PA
OPIOID ANTAGONISTS		
KLOXXADO 8MG/0.1ML NASAL SPRAY	2	
NALOXONE 0.4MG/ML CARTRIDGE	2	
<i>naloxone 1mg/ml syringe</i>	1	
<i>naloxone 4mg/0.1ml nasal spray</i>	1	
<i>naltrexone 50mg tab</i>	1	
ZIMHI 5MG/0.5ML SYRINGE	2	
ANTIEMETICS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron 1mg tab</i>	1	PA_BvD QL=60 Quantity/30 Days
<i>ondansetron 0.8mg/ml oral soln</i>	1	PA_BvD
<i>ondansetron 4mg odt</i>	1	PA_BvD
<i>ondansetron 4mg tab</i>	1	PA_BvD
<i>ondansetron 8mg odt</i>	1	PA_BvD
<i>ondansetron 8mg tab</i>	1	PA_BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab (RX Only)</i>	1	
<i>meclizine 25mg tab (RX Only)</i>	1	
<i>scopolamine 0.0139mg/hr patch</i>	2	
ANTIEMETICS - MISCELLANEOUS		
<i>doxylamine succinate/pyridoxine 10-10mg dr tab</i>	2	
<i>dronabinol 10mg cap</i>	2	PA QL=60 Quantity/30 Days
<i>dronabinol 2.5mg cap</i>	2	PA QL=60 Quantity/30 Days
<i>dronabinol 5mg cap</i>	2	PA QL=60 Quantity/30 Days
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
<i>aprepitant 125mg cap</i>	2	PA_BvD QL=3 Quantity/2 Days
<i>aprepitant 125mg/aprepitant 80mg pack</i>	2	PA_BvD QL=6 Quantity/4 Days
<i>aprepitant 40mg cap</i>	2	PA_BvD QL=3 Quantity/2 Days
<i>aprepitant 80mg cap</i>	2	PA_BvD QL=6 Quantity/4 Days
VARUBI 90MG TAB	3	PA_BvD QL=4 Quantity/28 Days
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
MICAFUNGIN SODIUM 100MG INJ	2	
MICAFUNGIN SODIUM 50MG INJ	2	
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (ECHINOCANDINS)		
CASPOFUNGIN ACETATE 50MG INJ	4	NDS
<i>casposfungin acetate 50mg inj</i>	4	NDS
CASPOFUNGIN ACETATE 70MG INJ	2	
<i>casposfungin acetate 70mg inj</i>	2	
<i>micafungin sodium 100mg inj</i>	2	
<i>micafungin sodium 50mg inj</i>	2	
ANTIFUNGALS		
ABELCET 5MG/ML INJ	3	PA_BvD
AMPHOTERICIN B 50MG INJ	3	PA_BvD
<i>flucytosine 250mg cap</i>	2	
<i>flucytosine 500mg cap</i>	2	
<i>griseofulvin 125mg tab</i>	2	
<i>griseofulvin 250mg tab</i>	2	
<i>griseofulvin 25mg/ml susp</i>	2	
<i>griseofulvin 500mg tab</i>	2	
<i>nystatin 500000unit tab</i>	1	
<i>terbinafine 250mg tab</i>	1	
IMIDAZOLE-RELATED ANTIFUNGALS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fluconazole 100mg tab</i>	1	
<i>fluconazole 10mg/ml susp</i>	1	
<i>fluconazole 150mg tab</i>	1	
<i>fluconazole 200mg tab</i>	1	
<i>fluconazole 2mg/ml (100ml) inj</i>	2	
<i>fluconazole 2mg/ml (200ml) inj</i>	2	
<i>fluconazole 40mg/ml susp</i>	1	
<i>fluconazole 50mg tab</i>	1	
<i>itraconazole 100mg cap</i>	2	
<i>ketoconazole 200mg tab</i>	1	
NOXAFIL 300MG POWDER FOR ORAL SUSP	3	PA
<i>posaconazole 100mg dr tab</i>	2	PA
<i>posaconazole 40mg/ml susp</i>	2	PA
<i>voriconazole 200mg inj</i>	2	PA
VORICONAZOLE 200MG INJ	2	PA
<i>voriconazole 200mg tab</i>	2	PA
<i>voriconazole 40mg/ml susp</i>	2	PA
<i>voriconazole 50mg tab</i>	2	PA
ANTI-HISTAMINES		
ANTI-HISTAMINES - NON-SEDATING		
<i>desloratadine 5mg tab</i>	2	
<i>levocetirizine 5mg tab</i>	1	
ANTI-HISTAMINES - PHENOTHIAZINES		
<i>promethazine 1.25mg/ml oral soln</i>	1	
<i>promethazine 12.5mg rectal supp</i>	2	
<i>promethazine 12.5mg tab</i>	1	
<i>promethazine 25mg tab</i>	1	
<i>promethazine 50mg tab</i>	1	
<i>promethegan 25mg rectal supp</i>	2	
ANTI-HISTAMINES - PIPERIDINES		
<i>cyproheptadine 0.4mg/ml oral soln</i>	1	
<i>cyproheptadine 4mg tab</i>	1	
ANTI-HYPERLIPIDEMICS		
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL 180MG TAB	2	PA QL=30 Quantity/30 Days
ANTI-HYPERLIPIDEMICS - COMBINATIONS		
<i>ezetimibe 10mg/simvastatin 10mg tab</i>	2	
<i>ezetimibe 10mg/simvastatin 20mg tab</i>	2	
<i>ezetimibe 10mg/simvastatin 40mg tab</i>	2	
<i>ezetimibe 10mg/simvastatin 80mg tab</i>	2	
NEXLIZET 180-10MG TAB	2	PA QL=30 Quantity/30 Days
ANTI-HYPERLIPIDEMICS - MISC.		
<i>icosapent ethyl 0.5gm cap</i>	1	QL=120 Quantity/30 Days
<i>icosapent ethyl 1gm cap</i>	1	QL=120 Quantity/30 Days
<i>omega-3 acid ethyl esters (usp) 1000mg cap</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VASCEPA 0.5GM CAP	2	QL=120 Quantity/30 Days
VASCEPA 1GM CAP	2	QL=120 Quantity/30 Days
BILE ACID SEQUESTRANTS		
<i>cholestyramine 4gm bulk powder</i>	1	
<i>cholestyramine resin 4gm sf powder for oral susp</i>	1	
<i>cholestyramine resin 4gm sf powder for oral susp (sugar free)</i>	1	
<i>colesevelam 3750mg powder for oral susp</i>	2	
<i>colesevelam 625mg tab</i>	2	
<i>colestipol 1000mg tab</i>	1	
<i>colestipol 5000mg granules for oral susp</i>	2	
<i>colestipol 5gm granule</i>	2	
<i>prevalite 4gm powder for oral susp</i>	1	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate 134mg cap</i>	1	
<i>fenofibrate 145mg tab</i>	1	
<i>fenofibrate 160mg tab</i>	1	
<i>fenofibrate 200mg cap</i>	1	
<i>fenofibrate 48mg tab</i>	1	
<i>fenofibrate 54mg tab</i>	1	
<i>fenofibrate 67mg cap</i>	1	
FENOFIBRATE MICRONIZED 90MG CAP	3	
<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>	\$0	
<i>atorvastatin 20mg tab</i>	\$0	
<i>atorvastatin 40mg tab</i>	\$0	
<i>atorvastatin 80mg tab</i>	\$0	
<i>fluvastatin 20mg cap</i>	2	
<i>fluvastatin 40mg cap</i>	2	
<i>fluvastatin 80mg er tab</i>	2	
LIVALO 1MG TAB	3	ST
LIVALO 2MG TAB	3	ST
LIVALO 4MG TAB	3	ST
<i>lovastatin 10mg tab</i>	\$0	
<i>lovastatin 20mg tab</i>	\$0	
<i>lovastatin 40mg tab</i>	\$0	
<i>pravastatin sodium 10mg tab</i>	\$0	
<i>pravastatin sodium 20mg tab</i>	\$0	
<i>pravastatin sodium 40mg tab</i>	\$0	
<i>pravastatin sodium 80mg tab</i>	\$0	
<i>rosuvastatin calcium 10mg tab</i>	\$0	
<i>rosuvastatin calcium 20mg tab</i>	\$0	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>rosuvastatin calcium 40mg tab</i>	\$0	
<i>rosuvastatin calcium 5mg tab</i>	\$0	
<i>simvastatin 10mg tab</i>	\$0	
<i>simvastatin 20mg tab</i>	\$0	
<i>simvastatin 40mg tab</i>	\$0	
<i>simvastatin 5mg tab</i>	\$0	
<i>simvastatin 80mg tab</i>	\$0	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe 10mg tab</i>	1	QL=30 Quantity/30 Days
NICOTINIC ACID DERIVATIVES		
<i>niacin 1000mg er tab</i>	1	
<i>niacin 500mg er tab</i>	1	
<i>niacin 750mg er tab</i>	1	
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
PRALUENT 150MG/ML AUTO-INJECTOR	3	PA QL=2 Quantity/28 Days
PRALUENT 75MG/ML AUTO-INJECTOR	3	PA QL=2 Quantity/28 Days
REPATHA 140MG/ML AUTO-INJECTOR	2	PA QL=2 Quantity/28 Days
REPATHA 140MG/ML SYRINGE	2	PA QL=2 Quantity/28 Days
REPATHA 420MG/3.5ML CARTRIDGE	2	PA QL=1 Quantity/28 Days
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril 10mg tab</i>	\$0	
<i>benazepril 20mg tab</i>	\$0	
<i>benazepril 40mg tab</i>	\$0	
<i>benazepril 5mg tab</i>	\$0	
<i>captopril 100mg tab</i>	2	
<i>captopril 12.5mg tab</i>	2	
<i>captopril 25mg tab</i>	2	
<i>captopril 50mg tab</i>	2	
<i>enalapril maleate 10mg tab</i>	\$0	
<i>enalapril maleate 2.5mg tab</i>	\$0	
<i>enalapril maleate 20mg tab</i>	\$0	
<i>enalapril maleate 5mg tab</i>	\$0	
<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>	\$0	
<i>lisinopril 2.5mg tab</i>	\$0	
<i>lisinopril 20mg tab</i>	\$0	
<i>lisinopril 30mg tab</i>	\$0	
<i>lisinopril 40mg tab</i>	\$0	
<i>lisinopril 5mg tab</i>	\$0	
<i>moexipril 15mg tab</i>	1	
<i>moexipril 7.5mg tab</i>	1	
<i>perindopril erbumine 2mg 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.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>perindopril erbumine 4mg tab</i>	1	
<i>perindopril erbumine 8mg tab</i>	1	
PERINDOPRIL ERBUMINE 8MG TAB	1	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<i>quinapril 40mg tab</i>	1	
<i>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	\$0	
<i>ramipril 10mg cap</i>	\$0	
<i>ramipril 2.5mg cap</i>	\$0	
<i>ramipril 5mg cap</i>	\$0	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
AGENTS FOR PHEOCHROMOCYTOMA		
<i>metyrosine 250mg cap</i>	4	NDS
<i>phenoxybenzamine 10mg cap</i>	2	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil 16mg tab</i>	1	
<i>candesartan cilexetil 32mg tab</i>	1	
<i>candesartan cilexetil 4mg tab</i>	1	
<i>candesartan cilexetil 8mg tab</i>	1	
<i>irbesartan 150mg tab</i>	\$0	
<i>irbesartan 300mg tab</i>	\$0	
<i>irbesartan 75mg tab</i>	\$0	
<i>losartan potassium 100mg tab</i>	\$0	
<i>losartan potassium 25mg tab</i>	\$0	
<i>losartan potassium 50mg tab</i>	\$0	
<i>olmesartan medoxomil 20mg tab</i>	1	
<i>olmesartan medoxomil 40mg tab</i>	1	
<i>olmesartan medoxomil 5mg tab</i>	1	
<i>telmisartan 20mg tab</i>	1	
<i>telmisartan 40mg tab</i>	1	
<i>telmisartan 80mg tab</i>	1	
<i>valsartan 160mg tab</i>	\$0	
<i>valsartan 320mg tab</i>	\$0	
<i>valsartan 40mg tab</i>	\$0	
<i>valsartan 80mg tab</i>	\$0	
ANTIADRENERGIC ANTIHYPERTENSIVES		
<i>clonidine 0.1mg tab</i>	1	
<i>clonidine 0.1mg/24hr weekly patch</i>	2	
<i>clonidine 0.2mg tab</i>	1	
<i>clonidine 0.2mg/24hr weekly patch</i>	2	
<i>clonidine 0.3mg tab</i>	1	
<i>clonidine 0.3mg/24hr weekly patch</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>doxazosin 1mg tab</i>	1	
<i>doxazosin 2mg tab</i>	1	
<i>doxazosin 4mg tab</i>	1	
<i>doxazosin 8mg tab</i>	1	
<i>guanfacine 1mg tab</i>	1	
<i>guanfacine 2mg tab</i>	1	
<i>prazosin 1mg cap</i>	1	
<i>prazosin 2mg cap</i>	1	
<i>prazosin 5mg cap</i>	1	
<i>terazosin 10mg cap</i>	1	
<i>terazosin 1mg cap</i>	1	
<i>terazosin 2mg cap</i>	1	
<i>terazosin 5mg cap</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<i>amlodipine/benazepril 5-40mg cap</i>	1	
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	2	
<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	2	
<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	2	
<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	2	
<i>amlodipine/valsartan 10-160mg tab</i>	2	
<i>amlodipine/valsartan 10-320mg tab</i>	2	
<i>amlodipine/valsartan 5-160mg tab</i>	2	
<i>amlodipine/valsartan 5-320mg tab</i>	2	
<i>atenolol/chlorthalidone 100-25mg tab</i>	\$0	
<i>atenolol/chlorthalidone 50-25mg tab</i>	\$0	
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	\$0	
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	\$0	
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	\$0	
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	\$0	
<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	\$0	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	\$0	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	\$0	
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	\$0	
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	\$0	
<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	\$0	
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	\$0	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	\$0	
<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	\$0	
<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	\$0	
<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	\$0	
<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	\$0	
<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	\$0	
<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	2	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	2	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	2	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	\$0	
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	\$0	
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	\$0	
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	\$0	
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	\$0	
DIRECT RENIN INHIBITORS		
<i>aliskiren 150mg tab</i>	2	
<i>aliskiren 300mg tab</i>	2	
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
<i>eplerenone 25mg tab</i>	1	
<i>eplerenone 50mg tab</i>	1	
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>metronidazole 250mg tab</i>	1	
<i>metronidazole 500mg tab</i>	1	
METRONIDAZOLE/NACL 0.74%-500MG/100ML INJ	2	
<i>metronidazole/nacl 0.74%-500mg/100ml inj</i>	2	
<i>pentamidine isethionate 300mg inj</i>	2	
<i>pentamidine isethionate 50mg/ml inh soln</i>	2	PA_BvD QL=1 Quantity/28 Days
<i>tinidazole 250mg tab</i>	2	
<i>tinidazole 500mg tab</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>trimethoprim 100mg tab</i>	1	
TRIMETHOPRIM 100MG TAB	1	
XIFAXAN 200MG TAB	3	QL=9 Quantity/3 Days
XIFAXAN 550MG TAB	3	PA QL=60 Quantity/30 Days
ANTI-INFECTIVE MISC. - COMBINATIONS		
<i>sulfamethoxazole/trimethoprim 40-8mg/ml susp</i>	1	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
ANTIPROTOZOAL AGENTS		
<i>atovaquone 150mg/ml susp</i>	2	
<i>nitazoxanide 500mg tab</i>	2	PA QL=6 Quantity/3 Days
CARBAPENEMS		
CILASTATIN/IMIPENEM 250-250MG INJ	2	
<i>cilastatin/imipenem 500-500mg inj</i>	2	
<i>ertapenem 1000mg inj</i>	2	
MEROPENEM 0.9%-1GM/50ML INJ	2	
<i>meropenem 1000mg inj</i>	2	
<i>meropenem 500mg inj</i>	2	
MEROPENEM 500MG/50ML INJ	2	
CYCLIC LIPOPEPTIDES		
<i>daptomycin 500mg inj</i>	4	NDS
DAPTOMYCIN 500MG INJ	4	NDS
GLYCOPEPTIDES		
DALVANCE 500MG INJ	4	NDS
<i>vancomycin 1.25gm iv soln</i>	2	
VANCOMYCIN 1.25GM IV SOLN	2	
<i>vancomycin 1000mg inj</i>	2	
VANCOMYCIN 100GM INJ	2	
<i>vancomycin 100mg/ml inj</i>	2	
<i>vancomycin 125mg cap</i>	1	QL=120 Quantity/30 Days
<i>vancomycin 250mg cap</i>	1	QL=120 Quantity/30 Days
<i>vancomycin 500mg inj</i>	2	
<i>vancomycin 5gm inj</i>	2	
<i>vancomycin 750mg inj</i>	2	
VANCOMYCIN 750MG INJ	2	
LEPROSTATICS		
<i>dapsone 100mg tab</i>	1	
<i>dapsone 25mg tab</i>	1	
LINCOSAMIDES		
<i>clindamycin 12mg/ml inj</i>	2	
<i>clindamycin 150mg cap</i>	1	
<i>clindamycin 150mg/ml (2ml) inj</i>	2	
<i>clindamycin 150mg/ml (4ml) inj</i>	2	
<i>clindamycin 150mg/ml (6ml) inj</i>	2	
<i>clindamycin 15mg/ml oral soln</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>clindamycin 18mg/ml inj</i>	2	
<i>clindamycin 300mg cap</i>	1	
<i>clindamycin 6mg/ml inj</i>	2	
<i>clindamycin 75mg cap</i>	1	
<i>clindamycin 9gm/60ml inj</i>	2	
CLINDAMYCIN/NACL 9%-300MG/50ML IV SOLN	2	
CLINDAMYCIN/NACL 9%-600MG/50ML IV SOLN	2	
CLINDAMYCIN/NACL 9%-900MG/50ML IV SOLN	2	
MONOBACTAMS		
<i>aztreonam 1000mg inj</i>	2	
<i>aztreonam 2000mg inj</i>	2	
CAYSTON 75MG INH SOLN	4	LD NDS PA QL=84 Quantity/28 Days
OXAZOLIDINONES		
<i>linezolid 20mg/ml susp</i>	2	
LINEZOLID 2MG/ML INJ	2	
<i>linezolid 2mg/ml inj</i>	2	
<i>linezolid 600mg tab</i>	2	
SIVEXTRO 200MG INJ	4	NDS PA QL=6 Quantity/6 Days
SIVEXTRO 200MG TAB	4	NDS PA QL=6 Quantity/6 Days
PLEUROMUTILINS		
XENLETA 600MG TAB	2	PA QL=14 Quantity/7 Days
POLYMYXINS		
<i>colistin 75mg/ml inj</i>	2	
<i>polymyxin b 250000unit/ml inj</i>	2	
URINARY ANTI-INFECTIVES		
<i>fosfomycin 3000mg powder for oral soln</i>	2	
<i>methenamine hippurate 1gm tab</i>	2	
<i>methenamine mandelate tab</i>	1*	
<i>nitrofurantoin 100mg cap</i>	1	
<i>nitrofurantoin 50mg macro cap</i>	1	
<i>nitrofurantoin macro 100mg cap</i>	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone/proguanil 250-100mg tab</i>	1	
<i>atovaquone/proguanil 62.5-25mg tab</i>	1	
COARTEM 20-120MG TAB	2	
ANTIMALARIALS		
<i>chloroquine 500mg tab</i>	2	
<i>chloroquine phosphate 250mg tab</i>	1	
<i>hydroxychloroquine sulfate 200mg tab</i>	1	
<i>hydroxychloroquine sulfate 300mg tab</i>	1	
<i>hydroxychloroquine sulfate 400mg tab</i>	1	
<i>hydroxychloroquine 100mg tab</i>	1	
<i>mefloquine hcl 250mg tab</i>	2	
PRIMAQUINE PHOSPHATE 26.3MG TAB	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>primaquine phosphate 26.3mg tab</i>	2	
<i>quinine sulfate 324mg cap</i>	2	PA
ANTIMYASTHENIC AGENTS		
ANTIMYASTHENIC AGENTS		
<i>pyridostigmine bromide 60mg tab</i>	1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE 10MG TAB	4	LD NDS PA
<i>pyridostigmine bromide 180mg er tab</i>	2	
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>ethambutol 100mg tab</i>	2	
<i>ethambutol 400mg tab</i>	2	
ISONIAZID 100MG TAB	1	
<i>isoniazid 10mg/ml oral soln</i>	2	
<i>isoniazid 300mg tab</i>	1	
PRIFTIN 150MG TAB	2	
<i>pyrazinamide 500mg tab</i>	1	
<i>rifabutin 150mg cap</i>	2	
<i>rifampin 150mg cap</i>	2	
<i>rifampin 300mg cap</i>	2	
<i>rifampin 600mg inj</i>	2	
SIRTURO 100MG TAB	4	NDS PA
SIRTURO 20MG TAB	4	NDS PA
TRECTOR 250MG TAB	3	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
ALKERAN TAB	\$0*	
CYCLOPHOSPHAMIDE 25MG TAB	2	PA_BvD
CYCLOPHOSPHAMIDE 50MG TAB	2	PA_BvD
GLEOSTINE 100MG CAP	2	
GLEOSTINE 10MG CAP	2	
GLEOSTINE 40MG CAP	2	
LEUKERAN 2MG TAB	2	
MELPHALAN TAB	\$0*	
MYLERAN TAB	\$0*	
<i>temozolomide cap</i>	\$0*	
ANTIMETABOLITES		
<i>capecitabine tab</i>	\$0*	
<i>mercaptopurine 50mg tab</i>	2	
<i>methotrexate 2.5mg tab</i>	1	
METHOTREXATE 250MG/10ML INJ	1	
<i>methotrexate 25mg/ml (2ml) inj</i>	1	
<i>methotrexate 25mg/ml inj</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ONUREG 200MG TAB	4	NDS PA_NSO QL=14 Quantity/28 Days
ONUREG 300MG TAB	4	NDS PA_NSO QL=14 Quantity/28 Days
PURIXAN 2000MG/100ML SUSP	3	
TABLOID 40MG TAB	2	
XATMEP 2.5MG/ML ORAL SOLN	3	PA
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
INLYTA 1MG TAB	4	NDS PA_NSO QL=180 Quantity/30 Days
INLYTA 5MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
LENVIMA CAP THERAPY PACK (10MG)	4	LD NDS PA_NSO QL=30 Quantity/30 Days
LENVIMA CAP THERAPY PACK (12MG)	4	LD NDS PA_NSO QL=90 Quantity/30 Days
LENVIMA CAP THERAPY PACK (14MG)	4	LD NDS PA_NSO QL=60 Quantity/30 Days
LENVIMA CAP THERAPY PACK (18MG)	4	LD NDS PA_NSO QL=90 Quantity/30 Days
LENVIMA CAP THERAPY PACK (20MG)	4	LD NDS PA_NSO QL=60 Quantity/30 Days
LENVIMA CAP THERAPY PACK (24MG)	4	LD NDS PA_NSO QL=90 Quantity/30 Days
LENVIMA CAP THERAPY PACK (4MG)	4	LD NDS PA_NSO QL=30 Quantity/30 Days
LENVIMA CAP THERAPY PACK (8MG)	4	LD NDS PA_NSO QL=60 Quantity/30 Days
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
TUKYSA 150MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
TUKYSA 50MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA 100MG TAB	4	LD NDS PA_NSO QL=180 Quantity/30 Days
VENCLEXTA 10MG TAB	2	PA_NSO QL=60 Quantity/30 Days
VENCLEXTA 50MG TAB	2	PA_NSO QL=30 Quantity/30 Days
VENCLEXTA STARTING PACK	4	LD NDS PA_NSO QL=42 Quantity/28 Days
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>erlotinib 150mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>erlotinib 25mg tab</i>	1	PA_NSO QL=90 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
EXKIVITY 40MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
<i>gefitinib 250mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
GILOTRIF 20MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
GILOTRIF 30MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
GILOTRIF 40MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
TAGRISSE 40MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
TAGRISSE 80MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
VIZIMPRO 15MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
VIZIMPRO 30MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
VIZIMPRO 45MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
DAURISMO 25MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
ERIVEDGE 150MG CAP	4	NDS PA_NSO
ODOMZO 200MG CAP	4	NDS PA_NSO
ANTINEOPLASTIC - HORMONAL AGENTS		
<i>anastrozole 1mg tab</i>	\$0	
<i>bicalutamide 50mg tab</i>	1	
ELIGARD 22.5MG INJ	3	QL=1 Quantity/84 Days
ELIGARD 30MG INJ	3	QL=1 Quantity/112 Days
ELIGARD 45MG INJ	3	QL=1 Quantity/168 Days
ELIGARD 7.5MG INJ	3	QL=1 Quantity/28 Days
EMCYT 140MG CAP	2	
<i>exemestane 25mg tab</i>	\$0	
<i>letrozole 2.5mg tab</i>	1	
<i>leuprolide acetate 5mg/ml inj</i>	2	
LUPRON 11.25MG INJ	4	QL=1 Quantity/84 Days
LUPRON 22.5MG INJ	4	QL=1 Quantity/84 Days
LUPRON 3.75MG INJ	4	NDS QL=1 Quantity/28 Days
LUPRON 30MG INJ	4	QL=1 Quantity/112 Days
LUPRON 45MG INJ	4	QL=1 Quantity/168 Days
LUPRON 7.5MG INJ	4	NDS QL=1 Quantity/28 Days
LYSODREN 500MG TAB	2	
<i>megestrol acetate 20mg tab</i>	1	PA_NSO

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>megestrol acetate 40mg tab</i>	1	PA_NSO
<i>megestrol acetate 40mg/ml susp</i>	1	PA
<i>tamoxifen 10mg tab</i>	\$0	
<i>tamoxifen 20mg tab</i>	\$0	
TRELSTAR 11.25MG INJ	3	QL=1 Quantity/84 Days
TRELSTAR 22.5MG INJ	3	QL=1 Quantity/168 Days
TRELSTAR 3.75MG INJ	3	QL=1 Quantity/28 Days
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	1	QL=120 Quantity/30 Days
ERLEADA 240MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
ERLEADA 60MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
FIRMAGON 120MG INJ	2	PA_NSO
FIRMAGON 80MG INJ	2	PA_NSO
LEUPROLIDE ACETATE 22.5MG INJ	4	QL=1 Quantity/84 Days
<i>nilutamide 150mg tab</i>	4	NDS
NUBEQA 300MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
ORGOVYX 120MG TAB	4	LD NDS PA_NSO QL=30 Quantity/28 Days
ORSERDU 345MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
ORSERDU 86MG TAB	4	NDS PA_NSO QL=90 Quantity/30 Days
SOLTAMOX 10MG/5ML ORAL SOLN	3	
<i>toremifene 60mg tab</i>	2	
XTANDI 40MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
XTANDI 40MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
XTANDI 80MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS		
WELIREG 40MG TAB	4	LD NDS PA_NSO QL=90 Quantity/30 Days
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST 1MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
POMALYST 2MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
POMALYST 3MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
POMALYST 4MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT 100MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
AYVAKIT 200MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
AYVAKIT 25MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
AYVAKIT 300MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
AYVAKIT 50MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO 100MG ONCE WEEKLY CARTON (8-PACK)	4	LD NDS PA_NSO QL=8 Quantity/28 Days
XPOVIO 40MG ONCE WEEKLY CARTON (4-PACK)	4	LD NDS PA_NSO QL=4 Quantity/28 Days
XPOVIO 40MG TWICE WEEKLY CARTON (8-PACK)	4	LD NDS PA_NSO QL=8 Quantity/28 Days
XPOVIO 60MG ONCE WEEKLY CARTON (4-PACK)	4	LD NDS PA_NSO QL=4 Quantity/28 Days
XPOVIO 60MG TWICE WEEKLY PACK	4	LD NDS PA_NSO QL=24 Quantity/28 Days
XPOVIO 80 MG TWICE WEEKLY	4	LD NDS PA_NSO QL=32 Quantity/28 Days
XPOVIO 80MG ONCE WEEKLY CARTON (8-PACK)	4	LD NDS PA_NSO QL=8 Quantity/28 Days
ANTINEOPLASTIC COMBINATIONS		
INQOVI 5 TABLET PACK	4	NDS PA_NSO QL=1 Quantity/28 Days
KISQALI FEMARA CO-PACK 200 PACK	4	NDS PA_NSO QL=49 Quantity/28 Days
KISQALI FEMARA CO-PACK 400 PACK	4	NDS PA_NSO QL=70 Quantity/28 Days
KISQALI FEMARA CO-PACK 600 PACK	4	NDS PA_NSO QL=91 Quantity/28 Days
LONSURF 6.14-15MG TAB	4	NDS PA_NSO
LONSURF 8.19-20MG TAB	4	NDS PA_NSO
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA 150MG CAP	4	NDS PA_NSO QL=240 Quantity/30 Days
ALUNBRIG 180MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ALUNBRIG 30MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
ALUNBRIG 90MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ALUNBRIG TAB STARTER PACK	4	NDS PA_NSO QL=30 Quantity/30 Days
BALVERSA 3MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
BALVERSA 4MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
BALVERSA 5MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
BOSULIF 100MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
BOSULIF 400MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
BOSULIF 500MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
BRAFTOVI 75MG CAP	4	LD NDS PA_NSO QL=180 Quantity/30 Days
BRUKINSA 80MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
CABOMETYX 20MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
CABOMETYX 40MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
CABOMETYX 60MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
CALQUENCE 100MG CAP	4	LD NDS PA_NSO QL=60 Quantity/30 Days
CALQUENCE 100MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
CAPRELSA 100MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
CAPRELSA 300MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
COMETRIQ CAP DOSE PACK (100MG)	4	LD NDS PA_NSO QL=56 Quantity/28 Days
COMETRIQ CAP DOSE PACK (140MG)	4	LD NDS PA_NSO QL=112 Quantity/28 Days
COMETRIQ CAP DOSE PACK (60MG)	4	LD NDS PA_NSO QL=84 Quantity/28 Days
COPIKTRA 15MG CAP	4	LD NDS PA_NSO QL=60 Quantity/30 Days
COPIKTRA 25MG CAP	4	LD NDS PA_NSO QL=60 Quantity/30 Days
COTELLIC 20MG TAB	4	NDS PA_NSO QL=63 Quantity/28 Days
<i>everolimus 10mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>everolimus 2.5mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>everolimus 2mg tab for oral susp</i>	1	PA_NSO QL=150 Quantity/30 Days
<i>everolimus 3mg tab for oral susp</i>	1	PA_NSO QL=90 Quantity/30 Days
<i>everolimus 5mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>everolimus 5mg tab for oral susp</i>	1	PA_NSO QL=60 Quantity/30 Days
<i>everolimus 7.5mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
FOTIVDA 0.89MG CAP	4	LD NDS PA_NSO QL=21 Quantity/28 Days
FOTIVDA 1.34MG CAP	4	LD NDS PA_NSO QL=21 Quantity/28 Days
GAVRETO 100MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
IBRANCE 100MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
IBRANCE 100MG TAB	4	NDS PA_NSO QL=21 Quantity/28 Days
IBRANCE 125MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
IBRANCE 125MG TAB	4	NDS PA_NSO QL=21 Quantity/28 Days
IBRANCE 75MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
IBRANCE 75MG TAB	4	NDS PA_NSO QL=21 Quantity/28 Days
ICLUSIG 10MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ICLUSIG 15MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ICLUSIG 30MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ICLUSIG 45MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
IDHIFA 100MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
IDHIFA 50MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
<i>imatinib 100mg tab</i>	1	QL=90 Quantity/30 Days
<i>imatinib 400mg tab</i>	1	QL=60 Quantity/30 Days
IMBRUVICA 140MG CAP	4	LD NDS PA_NSO QL=90 Quantity/30 Days
IMBRUVICA 420MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
IMBRUVICA 70MG CAP	4	LD NDS PA_NSO QL=30 Quantity/30 Days
IMBRUVICA 70MG/ML SUSP	4	LD NDS PA_NSO

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
INREBIC 100MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
JAKAFI 10MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAKAFI 15MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAKAFI 20MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAKAFI 25MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAKAFI 5MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAYPIRCA 100MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAYPIRCA 50MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
KISQALI 200MG DAILY DOSE PACK	4	NDS PA_NSO QL=21 Quantity/28 Days
KISQALI 400MG DAILY DOSE PACK	4	NDS PA_NSO QL=42 Quantity/28 Days
KISQALI 600MG DAILY DOSE PACK	4	NDS PA_NSO QL=63 Quantity/28 Days
KOSELUGO 10MG CAP	4	LD NDS PA_NSO QL=240 Quantity/30 Days
KOSELUGO 25MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
KRAZATI 200MG TAB	4	LD NDS PA_NSO QL=180 Quantity/30 Days
<i>lapatinib ditosylate 250mg tab</i>	4	NDS PA_NSO
LORBRENA 100MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
LORBRENA 25MG TAB	4	NDS PA_NSO QL=90 Quantity/30 Days
LUMAKRAS 120MG TAB	4	LD NDS PA_NSO QL=240 Quantity/30 Days
LUMAKRAS 320MG TAB	4	LD NDS PA_NSO QL=90 Quantity/30 Days
LYNPARZA 100MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
LYNPARZA 150MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
LYTGOBI 12MG DAILY DOSE 4MG PACK	4	LD NDS PA_NSO QL=84 Quantity/28 Days
LYTGOBI 16MG DAILY DOSE 4MG PACK	4	LD NDS PA_NSO QL=112 Quantity/28 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LYTGOBI 20MG DAILY DOSE 4MG PACK	4	LD NDS PA_NSO QL=140 Quantity/28 Days
MEKINIST 0.05MG/ML ORAL SOLN	4	NDS PA_NSO
MEKINIST 0.5MG TAB	4	NDS PA_NSO QL=90 Quantity/30 Days
MEKINIST 2MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
MEKTOVI 15MG TAB	4	NDS PA_NSO QL=180 Quantity/30 Days
NERLYNX 40MG TAB	4	LD NDS PA_NSO QL=180 Quantity/30 Days
NINLARO 2.3MG CAP	4	LD NDS PA_NSO QL=3 Quantity/28 Days
NINLARO 3MG CAP	4	LD NDS PA_NSO QL=3 Quantity/28 Days
NINLARO 4MG CAP	4	LD NDS PA_NSO QL=3 Quantity/28 Days
PEMAZYRE 13.5MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
PEMAZYRE 4.5MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
PEMAZYRE 9MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
PIQRAY 200MG DAILY DOSE PACK	4	NDS PA_NSO QL=30 Quantity/30 Days
PIQRAY 250MG DAILY DOSE PACK	4	NDS PA_NSO QL=60 Quantity/30 Days
PIQRAY 300MG DAILY DOSE 150MG PACK	4	NDS PA_NSO QL=60 Quantity/30 Days
QINLOCK 50MG TAB	4	LD NDS PA_NSO QL=90 Quantity/30 Days
RETEVMO 40MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
RETEVMO 80MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
REZLIDHIA 150MG CAP	4	LD NDS PA_NSO QL=60 Quantity/30 Days
ROZLYTREK 100MG CAP	4	NDS PA_NSO QL=150 Quantity/30 Days
ROZLYTREK 200MG CAP	4	NDS PA_NSO QL=90 Quantity/30 Days
RUBRACA 200MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
RUBRACA 250MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RUBRACA 300MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
RYDAPT 25MG CAP	4	NDS PA_NSO QL=224 Quantity/28 Days
SCSEMBLIX 20MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
SCSEMBLIX 40MG TAB	4	NDS PA_NSO QL=300 Quantity/30 Days
<i>sorafenib 200mg tab</i>	1	PA_NSO QL=120 Quantity/30 Days
SPRYCEL 100MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
SPRYCEL 140MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
SPRYCEL 20MG TAB	4	NDS PA_NSO QL=90 Quantity/30 Days
SPRYCEL 50MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
SPRYCEL 70MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
SPRYCEL 80MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
STIVARGA 40MG TAB	4	NDS PA_NSO QL=84 Quantity/28 Days
<i>sunitinib malate 12.5mg cap</i>	1	PA_NSO
<i>sunitinib malate 25mg cap</i>	1	PA_NSO
<i>sunitinib malate 37.5mg cap</i>	1	PA_NSO
<i>sunitinib malate 50mg cap</i>	1	PA_NSO
TABRECTA 150MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
TABRECTA 200MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
TAFINLAR 10MG TAB FOR ORAL SUSP	4	NDS PA_NSO QL=840 Quantity/28 Days
TAFINLAR 50MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
TAFINLAR 75MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
TALZENNA 0.1MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
TALZENNA 0.25MG CAP	4	NDS PA_NSO QL=90 Quantity/30 Days
TALZENNA 0.35MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
TALZENNA 0.5MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TALZENNA 0.75MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
TALZENNA 1MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
TASIGNA 150MG CAP	4	NDS PA_NSO QL=112 Quantity/28 Days
TASIGNA 200MG CAP	4	NDS PA_NSO QL=112 Quantity/28 Days
TASIGNA 50MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
TAZVERIK 200MG TAB	4	LD NDS PA_NSO QL=240 Quantity/30 Days
TEPMETKO 225MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
TIBSOVO 250MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
TURALIO 125MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
VERZENIO 100MG TAB	4	NDS PA_NSO QL=56 Quantity/28 Days
VERZENIO 150MG TAB	4	NDS PA_NSO QL=56 Quantity/28 Days
VERZENIO 200MG TAB	4	NDS PA_NSO QL=56 Quantity/28 Days
VERZENIO 50MG TAB	4	NDS PA_NSO QL=56 Quantity/28 Days
VITRAKVI 100MG CAP	4	LD NDS PA_NSO QL=60 Quantity/30 Days
VITRAKVI 20MG/ML ORAL SOLN	4	LD NDS PA_NSO QL=300 Quantity/30 Days
VITRAKVI 25MG CAP	4	LD NDS PA_NSO QL=180 Quantity/30 Days
VONJO 100MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
VOTRIENT 200MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
XALKORI 200MG CAP	4	NDS PA_NSO QL=60 Quantity/30 Days
XALKORI 250MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
XOSPATA 40MG TAB	4	LD NDS PA_NSO QL=90 Quantity/30 Days
ZEJULA 100MG CAP	4	LD NDS PA_NSO QL=90 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ZEJULA 100MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ZEJULA 200MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ZEJULA 300MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ZELBORAF 240MG TAB	4	NDS PA_NSO QL=240 Quantity/30 Days
ZOLINZA 100MG CAP	4	NDS PA_NSO
ZYDELIG 100MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
ZYDELIG 150MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
ZYKADIA 150MG TAB	4	NDS PA_NSO QL=90 Quantity/30 Days
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000UNIT/0.5ML INJ	4	LD NDS PA_NSO
BESREMI 500MCG/ML SYRINGE	4	LD NDS PA_NSO QL=2 Quantity/28 Days
<i>bexarotene 75mg cap</i>	2	PA_NSO
<i>hydroxyurea 500mg cap</i>	1	
MATULANE 50MG CAP	4	NDS
SYNRIBO 3.5MG INJ	4	NDS PA_NSO
<i>tretinoin 10mg cap</i>	1	
CHEMOTHERAPY RESCUE/ANTIDOTE AGENTS		
<i>leucovorin 10mg tab</i>	1	
<i>leucovorin 15mg tab</i>	1	
<i>leucovorin 25mg tab</i>	1	
<i>leucovorin 5mg tab</i>	1	
MESNEX 400MG TAB	2	
MITOTIC INHIBITORS		
ETOPOSIDE CAP	\$0*	
TOPOISOMERASE I INHIBITORS		
HYCAMTIN CAP	\$0*	PA
ANTIPARKINSON AGENTS		
ANTIPARKINSON ADJUVANTS		
<i>carbidopa 25mg tab</i>	2	
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate 0.5mg tab</i>	1	
<i>benztropine mesylate 1mg tab</i>	1	
<i>benztropine mesylate 2mg tab</i>	1	
<i>trihexyphenidyl 2mg tab</i>	1	
<i>trihexyphenidyl 5mg tab</i>	1	
ANTIPARKINSON COMT INHIBITORS		
<i>entacapone 200mg tab</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine 100mg tab</i>	2	
<i>bromocriptine 2.5mg tab</i>	2	
<i>bromocriptine 5mg cap</i>	2	
<i>carbidopa/levodopa 10-100mg tab</i>	1	
<i>carbidopa/levodopa 25-100mg er tab</i>	1	
<i>carbidopa/levodopa 25-100mg tab</i>	1	
<i>carbidopa/levodopa 25-250mg tab</i>	1	
<i>carbidopa/levodopa 50-200mg er tab</i>	1	
NEUPRO 1MG/24HR PATCH	3	
NEUPRO 2MG/24HR PATCH	3	
NEUPRO 3MG/24HR PATCH	3	
NEUPRO 4MG/24HR PATCH	3	
NEUPRO 6MG/24HR PATCH	3	
NEUPRO 8MG/24HR PATCH	3	
<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 12mg er tab</i>	2	
<i>ropinirole 1mg tab</i>	1	
<i>ropinirole 2mg er tab</i>	2	
<i>ropinirole 2mg tab</i>	1	
<i>ropinirole 3mg tab</i>	1	
<i>ropinirole 4mg er tab</i>	2	
<i>ropinirole 4mg tab</i>	1	
<i>ropinirole 5mg tab</i>	1	
<i>ropinirole 6mg er tab</i>	2	
<i>ropinirole 8mg er tab</i>	2	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline 0.5mg tab</i>	2	RXC
<i>rasagiline 1mg tab</i>	2	RXC
<i>selegiline 5mg cap</i>	1	
<i>selegiline 5mg tab</i>	1	
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
NOURIANZ 20MG TAB	3	PA QL=30 Quantity/30 Days
NOURIANZ 40MG TAB	3	PA QL=30 Quantity/30 Days
ANTIPARKINSON COMT INHIBITORS		
<i>tolcapone 100mg tab</i>	2	
ANTIPARKINSON DOPAMINERGICS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>amantadine 100mg cap</i>	1	
<i>amantadine 10mg/ml oral soln</i>	2	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	2	
CARBIDOPA/LEVODOPA 10-100MG ODT	2	
CARBIDOPA/LEVODOPA 10-250MG ODT	2	
CARBIDOPA/LEVODOPA 25-100MG ODT	2	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
LITHIUM CARBONATE 150MG CAP	1	
<i>lithium carbonate 150mg cap</i>	1	
LITHIUM CARBONATE 300MG CAP	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	
<i>lithium carbonate 600mg cap</i>	1	
LITHIUM CARBONATE 600MG CAP	1	
ANTIPSYCHOTICS - MISC.		
CAPLYTA 10.5MG CAP	3	PA_NSO QL=30 Quantity/30 Days
CAPLYTA 21MG CAP	3	PA_NSO QL=30 Quantity/30 Days
CAPLYTA 42MG CAP	3	PA_NSO QL=30 Quantity/30 Days
<i>lurasidone hcl 120mg tab</i>	1	
<i>lurasidone hcl 20mg tab</i>	1	
<i>lurasidone hcl 40mg tab</i>	1	
<i>lurasidone hcl 60mg tab</i>	1	
<i>lurasidone hcl 80mg tab</i>	1	
NUPLAZID 10MG TAB	3	PA_NSO QL=30 Quantity/30 Days
NUPLAZID 34MG CAP	3	PA_NSO QL=30 Quantity/30 Days
VRAYLAR 1.5/3MG MIXED PACK	3	PA_NSO QL=30 Quantity/30 Days
VRAYLAR 1.5MG CAP	3	PA_NSO QL=30 Quantity/30 Days
VRAYLAR 3MG CAP	3	PA_NSO QL=30 Quantity/30 Days
VRAYLAR 4.5MG CAP	3	PA_NSO QL=30 Quantity/30 Days
VRAYLAR 6MG CAP	3	PA_NSO QL=30 Quantity/30 Days
<i>ziprasidone 20mg cap</i>	1	
<i>ziprasidone 20mg inj</i>	2	QL=60 Quantity/30 Days
<i>ziprasidone 40mg cap</i>	1	
<i>ziprasidone 60mg cap</i>	1	
<i>ziprasidone 80mg cap</i>	1	
BENZISOXAZOLES		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FANAPT 10MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 12MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 1MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 2MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 4MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 6MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 8MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT TITRATION PACK	3	PA_NSO QL=60 Quantity/30 Days
INVEGA 1092MG/3.5ML SYRINGE	3	QL=1 Quantity/180 Days
INVEGA 117MG/0.75ML INJ	3	QL=1 Quantity/28 Days
INVEGA 1560MG/5ML SYRINGE	3	QL=1 Quantity/180 Days
INVEGA 156MG/ML INJ	3	QL=1 Quantity/28 Days
INVEGA 234MG/1.5ML INJ	3	QL=1 Quantity/28 Days
INVEGA 273MG/0.875ML INJ	3	QL=1 Quantity/84 Days
INVEGA 39MG/0.25ML INJ	3	QL=1 Quantity/28 Days
INVEGA 410MG/1.315ML INJ	3	QL=1 Quantity/84 Days
INVEGA 546MG/1.75ML INJ	3	QL=1 Quantity/84 Days
INVEGA 78MG/0.5ML INJ	3	QL=1 Quantity/28 Days
INVEGA 819MG/2.625ML INJ	3	QL=1 Quantity/84 Days
<i>paliperidone 1.5mg er tab</i>	2	QL=30 Quantity/30 Days
<i>paliperidone 3mg er tab</i>	2	QL=30 Quantity/30 Days
<i>paliperidone 6mg er tab</i>	2	QL=60 Quantity/30 Days
<i>paliperidone 9mg er tab</i>	2	QL=30 Quantity/30 Days
PERSERIS 120MG INJ	4	NDS QL=1 Quantity/28 Days
PERSERIS 90MG INJ	4	NDS QL=1 Quantity/28 Days
RISPERDAL 12.5MG INJ	3	QL=2 Quantity/28 Days
RISPERDAL 25MG INJ	3	QL=2 Quantity/28 Days
RISPERDAL 37.5MG INJ	3	QL=2 Quantity/28 Days
RISPERDAL 50MG INJ	3	QL=2 Quantity/28 Days
RISPERIDONE 0.25MG ODT	2	
<i>risperidone 0.25mg tab</i>	1	
<i>risperidone 0.5mg odt</i>	2	
<i>risperidone 0.5mg tab</i>	1	
<i>risperidone 1mg odt</i>	2	
<i>risperidone 1mg tab</i>	1	
<i>risperidone 1mg/ml oral soln</i>	1	
<i>risperidone 2mg odt</i>	2	
<i>risperidone 2mg tab</i>	1	
<i>risperidone 3mg odt</i>	2	
<i>risperidone 3mg tab</i>	1	
<i>risperidone 4mg odt</i>	2	
<i>risperidone 4mg tab</i>	1	
UZEDY 100MG/0.28ML SYRINGE	4	QL=1 Quantity/30 Days
UZEDY 125MG/0.35ML SYRINGE	4	NDS QL=1 Quantity/30 Days
UZEDY 150MG/0.42ML SYRINGE	4	QL=1 Quantity/60 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
UZEDY 200MG/0.56ML SYRINGE	4	QL=1 Quantity/60 Days
UZEDY 250MG/0.7ML SYRINGE	4	QL=1 Quantity/60 Days
UZEDY 50MG/0.14ML SYRINGE	4	NDS QL=1 Quantity/30 Days
UZEDY 75MG/0.21ML SYRINGE	4	NDS QL=1 Quantity/30 Days
BUTYROPHENONES		
<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 inj</i>	2	
<i>haloperidol decanoate 50mg/ml inj</i>	2	
DIBENZAPINES		
<i>asenapine 10mg sl tab</i>	2	QL=60 Quantity/30 Days
<i>asenapine 2.5mg sl tab</i>	2	QL=60 Quantity/30 Days
<i>asenapine 5mg sl tab</i>	2	QL=60 Quantity/30 Days
<i>clozapine 100mg odt</i>	2	
<i>clozapine 100mg tab</i>	2	
CLOZAPINE 12.5MG ODT	2	
<i>clozapine 150mg odt</i>	3	
<i>clozapine 200mg odt</i>	3	
<i>clozapine 200mg tab</i>	2	
<i>clozapine 25mg odt</i>	2	
<i>clozapine 25mg tab</i>	2	
<i>clozapine 50mg tab</i>	2	
<i>loxapine 10mg cap</i>	1	
<i>loxapine 25mg cap</i>	1	
<i>loxapine 50mg cap</i>	1	
<i>loxapine 5mg cap</i>	1	
<i>olanzapine 10mg inj</i>	2	
<i>olanzapine 10mg odt</i>	2	
<i>olanzapine 10mg tab</i>	1	
<i>olanzapine 15mg odt</i>	2	
<i>olanzapine 15mg tab</i>	1	
<i>olanzapine 2.5mg tab</i>	1	
<i>olanzapine 20mg odt</i>	2	
<i>olanzapine 20mg tab</i>	1	
<i>olanzapine 5mg odt</i>	2	
<i>olanzapine 5mg tab</i>	1	
<i>olanzapine 7.5mg tab</i>	1	
<i>quetiapine 100mg tab</i>	1	
<i>quetiapine 150mg er tab</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>quetiapine 200mg er tab</i>	1	
<i>quetiapine 200mg tab</i>	1	
<i>quetiapine 25mg tab</i>	1	
<i>quetiapine 300mg er tab</i>	1	
<i>quetiapine 300mg tab</i>	1	
<i>quetiapine 400mg er tab</i>	1	
<i>quetiapine 400mg tab</i>	1	
<i>quetiapine 50mg er tab</i>	1	
<i>quetiapine 50mg tab</i>	1	
SECUADO 3.8MG/24HR PATCH	3	PA_NSO QL=30 Quantity/30 Days
SECUADO 5.7MG/24HR PATCH	3	PA_NSO QL=30 Quantity/30 Days
SECUADO 7.6MG/24HR PATCH	3	PA_NSO QL=30 Quantity/30 Days
VERSACLOZ 50MG/ML SUSP	3	
ZYPREXA RELPREVV 210MG INJ	3	QL=2 Quantity/28 Days
DIHYDROINDOLONES		
MOLINDONE 10MG TAB	3	
MOLINDONE 25MG TAB	3	
MOLINDONE 5MG TAB	3	
PHENOTHIAZINES		
<i>chlorpromazine 100mg tab</i>	1	
CHLORPROMAZINE 100MG/ML ORAL SOLN	3	
<i>chlorpromazine 10mg tab</i>	1	
<i>chlorpromazine 200mg tab</i>	1	
<i>chlorpromazine 25mg tab</i>	1	
CHLORPROMAZINE 30MG/ML ORAL SOLN	3	
<i>chlorpromazine 50mg tab</i>	1	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	2	
<i>fluphenazine 10mg tab</i>	1	
<i>fluphenazine 1mg tab</i>	1	
<i>fluphenazine 2.5mg tab</i>	1	
FLUPHENAZINE 2.5MG/ML INJ	2	
<i>fluphenazine 5mg tab</i>	1	
FLUPHENAZINE 5MG/ML ORAL SOLN	2	
<i>fluphenazine decanoate 25mg/ml inj</i>	2	
<i>perphenazine 16mg tab</i>	1	
<i>perphenazine 2mg tab</i>	1	
<i>perphenazine 4mg tab</i>	1	
<i>perphenazine 8mg tab</i>	1	
<i>prochlorperazine 10mg tab</i>	1	
<i>prochlorperazine 25mg rectal supp</i>	1	
<i>prochlorperazine 5mg tab</i>	1	
<i>thioridazine 100mg tab</i>	1	
<i>thioridazine 10mg tab</i>	1	
<i>thioridazine 25mg tab</i>	1	
<i>thioridazine 50mg 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.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>trifluoperazine 10mg tab</i>	1	
<i>trifluoperazine 1mg tab</i>	1	
<i>trifluoperazine 2mg tab</i>	1	
<i>trifluoperazine 5mg tab</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY 300MG INJ	4	NDS QL=1 Quantity/28 Days
ABILIFY 300MG SYRINGE	4	NDS QL=1 Quantity/28 Days
ABILIFY 400MG INJ	4	NDS QL=1 Quantity/28 Days
ABILIFY 400MG SYRINGE	4	NDS QL=1 Quantity/28 Days
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	4	QL=1 Quantity/56 Days
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	4	QL=1 Quantity/56 Days
<i>aripiprazole 10mg odt</i>	2	QL=60 Quantity/30 Days
<i>aripiprazole 10mg tab</i>	1	
<i>aripiprazole 15mg odt</i>	2	QL=60 Quantity/30 Days
<i>aripiprazole 15mg tab</i>	1	
<i>aripiprazole 1mg/ml oral soln</i>	2	
<i>aripiprazole 20mg tab</i>	1	
<i>aripiprazole 2mg tab</i>	1	
<i>aripiprazole 30mg tab</i>	1	
<i>aripiprazole 5mg tab</i>	1	
ARISTADA 1064MG/3.9ML INJ	4	QL=3.90 Quantity/56 Days
ARISTADA 441MG/1.6ML INJ	4	NDS QL=1.60 Quantity/28 Days
ARISTADA 662MG/2.4ML INJ	4	NDS QL=2.40 Quantity/28 Days
ARISTADA 675MG/2.4ML INJ	4	QL=2.40 Quantity/42 Days
ARISTADA 882MG/3.2ML INJ	4	QL=3.20 Quantity/28 Days
REXULTI 0.25MG TAB	3	PA_NSO QL=30 Quantity/30 Days
REXULTI 0.5MG TAB	3	PA_NSO QL=30 Quantity/30 Days
REXULTI 1MG TAB	3	PA_NSO QL=30 Quantity/30 Days
REXULTI 2MG TAB	3	PA_NSO QL=30 Quantity/30 Days
REXULTI 3MG TAB	3	PA_NSO QL=30 Quantity/30 Days
REXULTI 4MG TAB	3	PA_NSO QL=30 Quantity/30 Days
THIOXANTHENES		
<i>thiothixene 10mg cap</i>	1	
<i>thiothixene 1mg cap</i>	1	
<i>thiothixene 2mg cap</i>	1	
<i>thiothixene 5mg cap</i>	1	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir 20mg/ml oral soln</i>	2	
<i>abacavir 300mg tab</i>	2	
<i>abacavir/lamivudine 600-300mg tab</i>	2	
APTIVUS 250MG CAP	4	
<i>atazanavir 150mg cap</i>	2	
<i>atazanavir 200mg cap</i>	2	
<i>atazanavir 300mg cap</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BIKTARVY 30-120-15MG TAB	4	
BIKTARVY 50-200-25MG TAB	4	
CIMDUO 300-300MG TAB, TEMIXYS 300-300MG TAB	4	
COMPLERA 200-25-300MG TAB	4	
<i>darunavir 600mg tab</i>	2	
<i>darunavir 800mg tab</i>	2	
DELSTRIGO 100-300-300MG TAB	4	
DESCOVY 120-15MG TAB	\$0	QL=30 Quantity/30 Days
DESCOVY 200-25MG TAB	\$0	QL=30 Quantity/30 Days
DOVATO 50-300MG TAB	4	
EDURANT 25MG TAB	4	
EFAVIRENZ 200MG CAP	2	
EFAVIRENZ 50MG CAP	2	
<i>efavirenz 600mg tab</i>	2	
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	4	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	2	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	2	
<i>emtricitabine 200mg cap</i>	2	
<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	\$0	QL=30 Quantity/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	\$0	QL=30 Quantity/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	\$0	QL=30 Quantity/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	\$0	QL=30 Quantity/30 Days
EMTRIVA 10MG/ML ORAL SOLN	2	
<i>etravirine 100mg tab</i>	2	
<i>etravirine 200mg tab</i>	2	
EVOTAZ 300-150MG TAB	4	
<i>fosamprenavir 700mg tab</i>	4	
FUZEON 90MG INJ	4	
GENVOYA 150-150-200-10MG TAB	4	
INTELENCE 25MG TAB	2	
ISENTRESS 100MG CHEW TAB	2	
ISENTRESS 100MG GRANULES FOR ORAL SUSP	2	
ISENTRESS 25MG CHEW TAB	2	
ISENTRESS 400MG TAB	2	
ISENTRESS 600MG TAB	2	
JULUCA 50-25MG TAB	4	
<i>lamivudine 10mg/ml oral soln</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lamivudine 150mg tab</i>	2	
<i>lamivudine 300mg tab</i>	2	
<i>lamivudine/zidovudine 150-300mg tab</i>	2	
LEXIVA 50MG/ML SUSP	2	
<i>lopinavir/ritonavir 100-25mg tab</i>	2	
<i>lopinavir/ritonavir 200-50mg tab</i>	2	
<i>lopinavir/ritonavir 80-20mg/ml oral solution</i>	2	
<i>maraviroc 150 mg tab</i>	4	
<i>maraviroc 300 mg tab</i>	4	
NEVIRAPINE 100MG ER TAB	2	
NEVIRAPINE 10MG/ML SUSP	2	
<i>nevirapine 200mg tab</i>	1	
<i>nevirapine 400mg er tab</i>	2	
NORVIR 100MG ORAL POWDER	2	
ODEFSEY 200-25-25MG TAB	4	
PIFELTRO 100MG TAB	4	
PREZCOBIX 150-800MG TAB	4	
PREZISTA 100MG/ML SUSP	2	
PREZISTA 150MG TAB	2	
PREZISTA 75MG TAB	2	
REYATAZ 50MG ORAL POWDER	4	
<i>ritonavir 100mg tab</i>	2	
RUKOBIA 600MG ER TAB	4	
SELZENTRY 20MG/ML ORAL SOLN	4	
SELZENTRY 25MG TAB	2	
SELZENTRY 75MG TAB	4	
STRIBILD 150-150-200-300MG TAB	4	
SUNLENCA 300MG TAB 4-TABLET PACK	4	QL=4 Quantity/28 Days
SUNLENCA 300MG TAB 5-TABLET PACK	4	QL=5 Quantity/28 Days
SYMTUZA 800-150-200-10MG TAB	4	
<i>tenofovir disoproxil fumarate 300mg tab</i>	2	
TIVICAY 10MG TAB	2	
TIVICAY 25MG TAB	2	
TIVICAY 50MG TAB	4	
TIVICAY 5MG TAB FOR ORAL SUSP	2	
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	4	
TRIUMEQ 600-50-300MG TAB	4	
TRIZIVIR 300-150-300MG TAB	4	
TYBOST 150MG TAB	2	
VIRACEPT 250MG TAB	4	
VIRACEPT 625MG TAB	4	
VIREAD 150MG TAB	4	
VIREAD 200MG TAB	4	
VIREAD 250MG TAB	4	
VIREAD 40MG/GM ORAL POWDER	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>zidovudine 100mg cap</i>	2	
<i>zidovudine 10mg/ml oral soln</i>	2	
<i>zidovudine 300mg tab</i>	2	
ANTIVIRAL COMBINATIONS		
PAXLOVID PACK	\$0	QL=20 Quantity/ Per Dispensing
PAXLOVID TAB	\$0	QL=30 Quantity/ Per Dispensing
CMV AGENTS		
LIVTENCITY 200MG TAB	4	LD NDS PA QL=120 Quantity/30 Days
PREVYMIS 240MG TAB	4	NDS PA QL=30 Quantity/30 Days
PREVYMIS 480MG TAB	4	NDS PA QL=30 Quantity/30 Days
<i>valganciclovir 450mg tab</i>	2	
<i>valganciclovir 50mg/ml oral soln</i>	4	NDS
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	2	
<i>entecavir 0.5mg tab</i>	2	QL=30 Quantity/30 Days
<i>entecavir 1mg tab</i>	2	QL=30 Quantity/30 Days
<i>lamivudine 100mg tab</i>	2	
MAVYRET 100-40MG TAB	4	NDS PA QL=90 Quantity/30 Days
MAVYRET 50-20MG ORAL PELLETT	4	NDS PA QL=150 Quantity/30 Days
PEGASYS 180MCG/0.5ML SYRINGE	4	NDS
PEGASYS 180MCG/ML INJ	4	NDS
<i>ribavirin 200mg cap</i>	1	
RIBAVIRIN 200MG CAP	1	
RIBAVIRIN 200MG TAB	1	
SOFOSBUVIR/VELPATASVIR 400-100MG TAB	4	NDS PA QL=30 Quantity/30 Days
VEMLIDY 25MG TAB	4	NDS
VOSEVI 400-100-100MG TAB	4	NDS PA QL=30 Quantity/30 Days
HERPES AGENTS		
<i>acyclovir 200mg cap</i>	1	
<i>acyclovir 400mg tab</i>	1	
<i>acyclovir 40mg/ml susp</i>	1	
<i>acyclovir 50mg/ml inj</i>	2	PA_BvD
<i>acyclovir 800mg tab</i>	1	
<i>famciclovir 125mg tab</i>	2	
<i>famciclovir 250mg tab</i>	2	
<i>famciclovir 500mg tab</i>	2	
<i>valacyclovir 1000mg tab</i>	1	
<i>valacyclovir 500mg tab</i>	1	
INFLUENZA AGENTS		
<i>oseltamivir 30mg cap</i>	1	QL=84 Quantity/180 Days
<i>oseltamivir 45mg cap</i>	1	QL=42 Quantity/180 Days
<i>oseltamivir 6mg/ml susp</i>	2	QL=540 Quantity/180 Days
<i>oseltamivir 75mg cap</i>	1	QL=42 Quantity/180 Days
RELENZA 5MG/BLISTER INHALER	2	QL=120 Quantity/30 Days
RIMANTADINE 100MG TAB	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XOFLUZA 40MG THERAPY PACK	3	QL=2 Quantity/30 Days
XOFLUZA 80MG TAB	3	QL=1 Quantity/30 Days
MISC. ANTIVIRALS		
MOLNUPIRAVIR CAP	\$0	QL=40 Quantity/ Per Dispensing
ASSORTED CLASSES		
IMMUNOMODULATORS		
THALOMID 100MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
THALOMID 150MG CAP	4	NDS PA_NSO QL=60 Quantity/30 Days
THALOMID 200MG CAP	4	NDS PA_NSO QL=60 Quantity/30 Days
THALOMID 50MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
IMMUNOSUPPRESSIVE AGENTS		
<i>azathioprine 50mg tab</i>	1	PA_BvD
<i>cyclosporine 100mg cap</i>	2	PA_BvD
<i>cyclosporine 25mg cap</i>	2	PA_BvD
<i>cyclosporine modified 100mg cap</i>	2	PA_BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	2	PA_BvD
<i>cyclosporine modified 25mg cap</i>	2	PA_BvD
<i>cyclosporine modified 50mg cap</i>	2	PA_BvD
ENVARUSUS 0.75MG ER TAB	3	PA_BvD
ENVARUSUS 1MG ER TAB	3	PA_BvD
ENVARUSUS 4MG ER TAB	3	PA_BvD
<i>mycophenolate mofetil 200mg/ml susp</i>	2	PA_BvD
<i>mycophenolate mofetil 250mg cap</i>	1	PA_BvD
<i>mycophenolate mofetil 500mg tab</i>	1	PA_BvD
<i>mycophenolic acid 180mg dr tab</i>	2	PA_BvD
<i>mycophenolic acid 360mg dr tab</i>	2	PA_BvD
SANDIMMUNE 100MG/ML ORAL SOLN	3	PA_BvD
<i>sirolimus 0.5mg tab</i>	2	PA_BvD
<i>sirolimus 1mg tab</i>	2	PA_BvD
<i>sirolimus 2mg tab</i>	2	PA_BvD
<i>tacrolimus 0.5mg cap</i>	1	PA_BvD
<i>tacrolimus 1mg cap</i>	1	PA_BvD
<i>tacrolimus 5mg cap</i>	1	PA_BvD
POTASSIUM REMOVING RESINS		
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	2	
SPS 15GM/60ML SUSP	1	
VELTASSA 16.8GM POWDER FOR ORAL SUSP	2	PA
VELTASSA 25.2GM POWDER FOR ORAL SUSP	2	PA
VELTASSA 8.4GM POWDER FOR ORAL SUSP	2	PA
BETA BLOCKERS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ALPHA-BETA BLOCKERS		
<i>carvedilol 12.5mg tab</i>	\$0	
<i>carvedilol 25mg tab</i>	\$0	
<i>carvedilol 3.125mg tab</i>	\$0	
<i>carvedilol 6.25mg tab</i>	\$0	
<i>carvedilol phosphate ER 10mg cap</i>	\$0*	
<i>carvedilol phosphate ER 20mg cap</i>	\$0*	
<i>carvedilol phosphate ER 40mg cap</i>	\$0*	
<i>carvedilol phosphate ER 80mg cap</i>	\$0*	
<i>labetalol 100mg tab</i>	1	
<i>labetalol 200mg tab</i>	1	
<i>labetalol 300mg tab</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	1	
<i>acebutolol 400mg cap</i>	1	
<i>atenolol 100mg tab</i>	\$0	
<i>atenolol 25mg tab</i>	\$0	
<i>atenolol 50mg tab</i>	\$0	
<i>betaxolol 10mg tab</i>	1	
<i>betaxolol 20mg tab</i>	1	
<i>bisoprolol fumarate 10mg tab</i>	1	
<i>bisoprolol fumarate 5mg tab</i>	1	
<i>metoprolol succinate 100mg er tab</i>	1	
<i>metoprolol succinate 200mg er tab</i>	1	
<i>metoprolol succinate 25mg er tab</i>	1	
<i>metoprolol succinate 50mg er tab</i>	1	
<i>metoprolol tartrate 100mg tab</i>	\$0	
<i>metoprolol tartrate 25mg tab</i>	\$0	
<i>metoprolol tartrate 37.5mg tab</i>	1	
<i>metoprolol tartrate 50mg tab</i>	\$0	
<i>metoprolol tartrate 75mg tab</i>	1	
<i>nebivolol 10mg tab</i>	2	RXC
<i>nebivolol 2.5mg tab</i>	2	RXC
<i>nebivolol 20mg tab</i>	2	RXC
<i>nebivolol 5mg tab</i>	2	RXC
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	2	
<i>nadolol 40mg tab</i>	2	
<i>nadolol 80mg tab</i>	2	
<i>pindolol 10mg tab</i>	1	
<i>pindolol 5mg tab</i>	1	
<i>propranolol 10mg tab</i>	1	
<i>propranolol 120mg er cap</i>	1	
<i>propranolol 160mg ER cap</i>	1	
<i>propranolol 20mg tab</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>propranolol 20mg/5ml oral soln</i>	1	
<i>propranolol 40mg tab</i>	1	
<i>propranolol 60mg er cap</i>	1	
<i>propranolol 60mg tab</i>	1	
<i>propranolol 80mg er cap</i>	1	
<i>propranolol 80mg tab</i>	1	
PROPRANOLOL 8MG/ML ORAL SOLN	1	
<i>sorine 120mg tab</i>	1	
<i>sorine 160mg tab</i>	1	
<i>sorine 240mg tab</i>	1	
<i>sotalol 120mg tab</i>	1	
<i>sotalol 80mg tab</i>	1	
<i>sotalol AF 160mg tab</i>	1	
<i>sotalol AF 80mg tab</i>	1	
<i>timolol 10mg tab</i>	1	
<i>timolol 5mg tab</i>	1	
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine 10mg tab</i>	1	
<i>amlodipine 2.5mg tab</i>	1	
<i>amlodipine 5mg tab</i>	1	
<i>dilt 120mg er cap</i>	1	
<i>dilt 180mg er cap</i>	1	
<i>dilt 240mg er cap</i>	1	
<i>diltiazem 120mg er (12 hr) cap</i>	1	
<i>diltiazem 120mg er (24 hr) cap</i>	1	
<i>diltiazem 120mg er tab</i>	2	
<i>diltiazem 120mg tab</i>	1	
<i>diltiazem 180mg er (24hr) cap</i>	1	
<i>diltiazem 180mg er tab</i>	2	
<i>diltiazem 240mg er (24hr) cap</i>	1	
<i>diltiazem 300mg er (24hr) cap</i>	1	
<i>diltiazem 300mg er tab</i>	2	
<i>diltiazem 30mg tab</i>	1	
<i>diltiazem 360mg cd cap</i>	1	
<i>diltiazem 360mg er cap</i>	1	
<i>diltiazem 360mg er tab</i>	2	
<i>diltiazem 420mg er cap</i>	1	
<i>diltiazem 60mg er cap</i>	1	
<i>diltiazem 60mg tab</i>	1	
<i>diltiazem 90mg er cap</i>	1	
<i>diltiazem 90mg tab</i>	1	
<i>felodipine 10mg er tab</i>	1	
<i>felodipine 2.5mg er tab</i>	1	
<i>felodipine 5mg er tab</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>isradipine 2.5mg cap</i>	1	
<i>isradipine 5mg cap</i>	1	
<i>matzim 240mg er tab</i>	2	
<i>matzim 420mg er tab</i>	2	
<i>nicardipine 20mg cap</i>	2	
<i>nicardipine 30mg cap</i>	2	
<i>nifedipine 30mg er tab</i>	1	
<i>nifedipine 30mg osmotic er tab</i>	1	
<i>nifedipine 60mg er tab</i>	1	
<i>nifedipine 60mg osmotic er tab</i>	1	
<i>nifedipine 90mg er tab</i>	1	
<i>nifedipine 90mg osmotic er tab</i>	1	
<i>nimodipine 30mg cap</i>	2	
<i>taztia 120mg er cap</i>	1	
<i>taztia 180mg er cap</i>	1	
<i>taztia 240mg er cap</i>	1	
<i>taztia 300mg er cap</i>	1	
<i>verapamil 120mg er cap</i>	1	
<i>verapamil 120mg er tab</i>	1	
<i>verapamil 120mg tab</i>	1	
<i>verapamil 180mg er cap</i>	1	
<i>verapamil 180mg er tab</i>	1	
<i>verapamil 240mg er cap</i>	1	
<i>verapamil 240mg er tab</i>	1	
VERAPAMIL 360MG ER CAP	1	
<i>verapamil 40mg tab</i>	1	
<i>verapamil 80mg tab</i>	1	
CARDIOTONICS		
CARDIAC GLYCOSIDES		
<i>digox 125mcg tab</i>	1	
<i>digoxin 0.05mg/ml oral soln</i>	2	
DIGOXIN 0.05 MG/ML ORAL SOLN	2	
DIGOXIN 0.05MG/ML ORAL SOLN	2	
<i>digoxin 0.25mg tab</i>	1	
CARDIOVASCULAR AGENTS - MISC.		
CARDIAC MYOSIN INHIBITORS		
CAMZYOS 10MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
CAMZYOS 15MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
CAMZYOS 2.5MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
CAMZYOS 5MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
ENTRESTO 24-26MG TAB	2	QL=60 Quantity/30 Days
ENTRESTO 49-51MG TAB	2	QL=60 Quantity/30 Days
ENTRESTO 97-103MG TAB	2	QL=60 Quantity/30 Days
<i>hydralazine/isosorbide dinitrate 37.5-20mg tab</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
IMPOTENCE AGENTS		
CAVERJECT INJ	2*	QL=6 Quantity/30 Days
EDEX 10MCG INJ KIT	2*	QL=3 Quantity/30 Days
EDEX 10MCG INJ KIT	2*	QL=6 Quantity/30 Days
EDEX 20MCG INJ KIT	2*	QL=3 Quantity/30 Days
EDEX 20MCG INJ KIT	2*	QL=6 Quantity/30 Days
EDEX 40MCG INJ KIT	2*	QL=3 Quantity/30 Days
EDEX INJ	2*	QL=1 Quantity/30 Days
MUSE SUPP	2*	QL=6 Quantity/30 Days
<i>sildenafil tab</i>	1*	QL=6 Quantity/30 Days
STENDRA TAB	2*	QL=6 Quantity/30 Days
<i>tadalafil 10mg tab</i>	1*	QL=6 Quantity/30 Days
<i>tadalafil 2.5mg tab</i>	1*	QL=30 Quantity/30 Days
<i>tadalafil 5mg tab</i>	1*	QL=30 Quantity/30 Days
<i>tadalafil tab 20mg</i>	1*	QL=6 Quantity/30 Days
<i>vardenafil ODT</i>	2*	QL=6 Quantity/30 Days
<i>vardenafil tab</i>	2*	QL=6 Quantity/30 Days
PROSTAGLANDIN VASODILATORS		
ORENITRAM 0.125MG ER TAB	3	PA
ORENITRAM 0.25MG ER TAB	4	NDS PA
ORENITRAM 1MG ER TAB	4	NDS PA
ORENITRAM 2.5MG ER TAB	4	NDS PA
ORENITRAM 5MG ER TAB	4	NDS PA
ORENITRAM MONTH 1 TITRATION PACK	4	NDS PA
ORENITRAM MONTH 2 TITRATION PACK	4	NDS PA
ORENITRAM MONTH 3 TITRATION PACK	4	NDS PA
TYVASO 16-32-48MCG TITRATION PACK	4	LD NDS PA QL=252 Quantity/28 Days
TYVASO 16-32MCG TITRATION PACK	4	LD NDS PA QL=196 Quantity/28 Days
TYVASO 16MCG INH POWDER	4	LD NDS PA QL=112 Quantity/28 Days
TYVASO 32-48MCG MAINTENANCE PACK	4	LD NDS PA QL=224 Quantity/28 Days
TYVASO 32MCG INH POWDER	4	LD NDS PA QL=112 Quantity/28 Days
TYVASO 48MCG INH POWDER	4	LD NDS PA QL=112 Quantity/28 Days
TYVASO 64MCG INH POWDER	4	LD NDS PA QL=112 Quantity/28 Days
VENTAVIS 10MCG/ML INH SOLN	4	LD NDS PA QL=270 Quantity/30 Days
VENTAVIS 20MCG/ML INH SOLN	4	LD NDS PA QL=270 Quantity/30 Days
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<i>ambrisentan 10mg tab</i>	2	PA QL=30 Quantity/30 Days
<i>ambrisentan 5mg tab</i>	2	PA QL=30 Quantity/30 Days
<i>bosentan 125mg tab</i>	2	PA QL=60 Quantity/30 Days
<i>bosentan 62.5mg tab</i>	2	PA QL=60 Quantity/30 Days
OPSUMIT 10MG TAB	4	LD NDS PA QL=30 Quantity/30 Days
TRACLEER 32MG TAB FOR ORAL SUSP	4	LD NDS PA QL=120 Quantity/30 Days
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
<i>sildenafil 20mg tab</i>	1	PA
<i>tadalafil 20mg tab (PAH)</i>	1	PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		
ADEMPAS 0.5MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
ADEMPAS 1.5MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
ADEMPAS 1MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
ADEMPAS 2.5MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
ADEMPAS 2MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
SINUS NODE INHIBITORS		
CORLANOR 5MG TAB	3	PA
CORLANOR 5MG/5ML ORAL SOLN	3	PA
CORLANOR 7.5MG TAB	3	PA
TRANSTHYRETIN STABILIZERS		
VYNDAMAX 61MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
VYNDAQEL 20MG CAP	4	LD NDS PA QL=120 Quantity/30 Days
VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
VERQUVO 10MG TAB	2	PA QL=30 Quantity/30 Days
VERQUVO 2.5MG TAB	2	PA QL=30 Quantity/30 Days
VERQUVO 5MG TAB	2	PA QL=30 Quantity/30 Days
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil 100mg/ml susp</i>	1	
CEFADROXIL 1GM TAB	2	
<i>cefadroxil 500mg cap</i>	1	
<i>cefadroxil 50mg/ml susp</i>	1	
<i>cefazolin 1000mg inj</i>	2	
CEFAZOLIN 100GM INJ	2	
CEFAZOLIN 1GM INJ	2	
<i>cefazolin 200mg/ml inj</i>	2	
CEFAZOLIN 300GM INJ	2	
<i>cefazolin 500mg inj</i>	2	
CEFAZOLIN/DEXTROSE 1GM-4% IV SOLN	2	
CEFAZOLIN/DEXTROSE 1GM/50ML-4% IV SOLN	2	
<i>cephalexin 250mg cap</i>	1	
<i>cephalexin 25mg/ml susp</i>	1	
<i>cephalexin 500mg cap</i>	1	
<i>cephalexin 50mg/ml susp</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
CEFACLOR 250MG CAP	2	
CEFACLOR 500MG CAP	2	
<i>cefoxitin 1000mg inj</i>	2	
<i>cefoxitin 2000mg inj</i>	2	
<i>cefoxitin 200mg/ml inj</i>	2	
CEFOXITIN/DEXTROSE 1GM-4% INJ	2	
CEFOXITIN/DEXTROSE 2GM-2.2% INJ	2	
<i>cefprozil 250mg tab</i>	1	
<i>cefprozil 25mg/ml susp</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cefprozil 500mg tab</i>	1	
<i>cefprozil 50mg/ml susp</i>	1	
<i>cefuroxime 1500mg inj</i>	2	
<i>cefuroxime 250mg tab</i>	1	
<i>cefuroxime 500mg tab</i>	1	
<i>cefuroxime 750mg inj</i>	2	
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir 25mg/ml susp</i>	1	
<i>cefdinir 300mg cap</i>	1	
<i>cefdinir 50mg/ml susp</i>	1	
<i>cefixime 20mg/ml susp</i>	2	
<i>cefixime 400mg cap</i>	2	
<i>cefixime 40mg/ml susp</i>	2	
<i>cefpodoxime 100mg tab</i>	2	
<i>cefpodoxime 10mg/ml susp</i>	2	
<i>cefpodoxime 200mg tab</i>	2	
<i>cefpodoxime 20mg/ml susp</i>	2	
<i>ceftazidime 1000mg inj</i>	2	
<i>ceftazidime 200mg/ml inj</i>	2	
<i>ceftazidime 2gm inj</i>	2	
CEFTAZIDIME/D5W 1GM/50ML INJ	2	
CEFTAZIDIME/DEXTROSE 2GM/50ML-5% INJ	2	
<i>ceftriaxone 1000mg inj</i>	2	
<i>ceftriaxone 100mg/ml inj</i>	2	
<i>ceftriaxone 2000mg inj</i>	2	
<i>ceftriaxone 250mg inj</i>	2	
<i>ceftriaxone 500mg inj</i>	2	
CEFTRIAXONE SODIUM 100GM INJ	2	
<i>ceftriaxone sodium 1gm inj</i>	2	
<i>ceftriaxone sodium 2gm inj</i>	2	
CEFTRIAXONE/DEXTROSE 1GM-3.74% IV SOLN	2	
CEFTRIAXONE/DEXTROSE 20MG/ML INJ	2	
CEFTRIAXONE/DEXTROSE 2GM-2.22% IV SOLN	2	
CEFTRIAXONE/DEXTROSE 40MG/ML INJ	2	
TAZICEF 1GM INJ	2	
TAZICEF 6GM INJ	2	
CEPHALOSPORINS - 4TH GENERATION		
<i>cefepime 1000mg inj</i>	2	
CEFEPIME 1GM/50ML IV SOLN	2	
<i>cefepime 2000mg inj</i>	2	
CEFEPIME 2GM INJ	2	
CEFEPIME 2GM/100ML IV SOLN	2	
CEFEPIME/DEXTROSE 1GM/50ML-5% INJ	2	
CEFEPIME/DEXTROSE 2GM/50ML-5% INJ	2	
CEPHALOSPORINS - 5TH GENERATION		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TEFLARO 400MG INJ	4	NDS
TEFLARO 600MG INJ	4	NDS
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		
<i>altavera 28 day pack</i>	\$0	
<i>apri 28 day pack</i>	\$0	
<i>aranelle 28 pack</i>	\$0	
<i>ashlyna 91 day pack</i>	\$0	
<i>briellyn 28 day pack</i>	\$0	
<i>camreselo 91 day pack</i>	\$0	
<i>caziant 28 day pack</i>	\$0	
<i>cyclafem 7/7/7 28 day pack</i>	\$0	
<i>desogestrel/ethinyl estradiol pack</i>	\$0	
<i>dolishale 28 day pack</i>	\$0	
<i>drospirenone/ethinyl estradiol/levomefolate calcium 3-0.02-0.451mg pack</i>	\$0	
<i>estarylla 28 day pack</i>	\$0	
<i>ethinyl estradiol 0.02mg/inert ingredients 1mg/levonorgestrel 0.1mg pack</i>	\$0	
<i>ethinyl estradiol 0.035mg/ethynodiol 1mg 28 day pack</i>	\$0	
<i>ethinyl estradiol 0.035mg/inert/norgestimate 0.18mg/0.215mg/0.25mg pack</i>	\$0	
<i>ethinyl estradiol 0.03mg/inert ingredients 1mg/levonorgestrel 0.15mg pack</i>	\$0	
<i>ethinyl estradiol 0.05mg/ethynodiol 1mg/inert ingredients 1mg 28 day pack</i>	\$0	
<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg pack (24)</i>	\$0	
<i>ethinyl estradiol/levonorgestrel 91 day pack</i>	\$0	
<i>jasmiel 28 day pack</i>	\$0	
<i>junel fe 1.5/30 28 day pack</i>	\$0	
<i>larin 1.5/30 pack</i>	\$0	
<i>larin 1/20 pack</i>	\$0	
<i>layolis fe 28 pack</i>	\$0	
<i>low-ogestrel 28 day pack</i>	\$0	
<i>melodetta 24 fe chewable 28 day pack</i>	\$0	
<i>microgestin fe 1/20 28 day pack</i>	\$0	
<i>nortrel 0.5/35 28 day pack</i>	\$0	
<i>ocella 28 day pack</i>	\$0	
<i>pirmella 1/35 28 day pack</i>	\$0	
<i>tarina 24 fe 1/20 28 day pack</i>	\$0	
<i>tri-legest 28 day pack</i>	\$0	
<i>tri-lo-sprintec 28 day pack</i>	\$0	
<i>trivora 28 day pack</i>	\$0	
TYBLUME CHEW TAB 28 DAY PACK	\$0	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tydemy 28 day pack</i>	\$0	
VELIVET 28 DAY PAK	\$0	
<i>wymzya fe 28 day pack</i>	\$0	
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
<i>xulane 150-35mcg/24hr patch</i>	\$0	
COMBINATION CONTRACEPTIVES - VAGINAL		
ANNOVERA 0.15-0.013MG/24HR VAGINAL SYSTEM	\$0	QL=1 Quantity/365 Days
<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	\$0	
EMERGENCY CONTRACEPTIVES		
ELLA TAB	\$0*	
<i>levonorgestrel tab</i>	\$0*	
PLAN B TAB	\$0*	
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	\$0	
<i>medroxyprogesterone acetate 150mg/ml inj</i>	\$0	
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	\$0	
PROGESTIN CONTRACEPTIVES - ORAL		
<i>norethindrone 0.35mg pack</i>	\$0	
SLYND 4MG PACK	\$0	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>budesonide 3mg dr cap</i>	2	
<i>budesonide 9mg er tab</i>	2	PA QL=30 Quantity/30 Days
<i>dexamethasone 0.1mg/ml oral soln</i>	1	
DEXAMETHASONE 0.5MG TAB	1	
<i>dexamethasone 0.5mg tab</i>	1	
DEXAMETHASONE 0.5MG/5ML ORAL SOLN	1	
DEXAMETHASONE 0.75MG TAB	1	
<i>dexamethasone 1.5mg tab</i>	1	
DEXAMETHASONE 1MG TAB	1	
<i>dexamethasone 2mg tab</i>	1	
<i>dexamethasone 4mg tab</i>	1	
<i>dexamethasone 6mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	1	
<i>hydrocortisone 20mg tab</i>	1	
<i>hydrocortisone 5mg tab</i>	1	
<i>methylprednisolone 16mg tab</i>	1	PA_BvD
<i>methylprednisolone 32mg tab</i>	1	PA_BvD
<i>methylprednisolone 4mg pack</i>	1	
<i>methylprednisolone 4mg tab</i>	1	PA_BvD
<i>methylprednisolone 8mg tab</i>	1	PA_BvD
<i>prednisolone 1mg/ml oral soln</i>	1	PA_BvD
<i>prednisolone 3mg/ml oral soln</i>	1	PA_BvD
<i>prednisolone 4mg/ml oral soln</i>	1	PA_BvD
<i>prednisolone 5mg/ml oral soln</i>	3	PA_BvD

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PREDNISOLONE 5MG/ML ORAL SOLN	3	PA_BvD
<i>prednisolone sodium phosphate 15mg/5ml oral soln</i>	1	PA_BvD
<i>prednisone 10mg tab</i>	1	PA_BvD
<i>prednisone 1mg tab</i>	1	PA_BvD
PREDNISONE 1MG/ML ORAL SOLN	2	PA_BvD
<i>prednisone 2.5mg tab</i>	1	PA_BvD
<i>prednisone 20mg tab</i>	1	PA_BvD
<i>prednisone 50mg tab</i>	1	PA_BvD
<i>prednisone 5mg tab</i>	1	PA_BvD
MINERALOCORTICOIDS		
<i>fludrocortisone 0.1mg tab</i>	1	
COUGH/COLD/ALLERGY		
ANTITUSSIVES		
<i>benzonatate 100mg cap, 200mg cap</i>	1*	
HYCODAN SYRUP	3*	
<i>hydrocodone/homatropine syrup</i>	1*	
<i>tussigon tab</i>	1*	
COUGH/COLD/ALLERGY COMBINATIONS		
<i>guaifenesin/codeine syrup</i>	1*	QL=240 Quantity/ Per Dispensing
GUAIFENESIN/CODEINE SYRUP	1*	QL=240 Quantity/ Per Dispensing
<i>hydrocodone/chlorpheniramine susp</i>	3*	QL=120 Quantity/ Per Dispensing
<i>promethazine DM syrup</i>	1*	
<i>promethazine VC w/codeine syrup</i>	1*	
PROMETHAZINE VC W/CODEINE SYRUP	1*	
<i>promethazine/codeine syrup</i>	1*	
TUSNEL C SYRUP	3*	
MISC. RESPIRATORY INHALANTS		
HYPER SAL NEB SOLN	\$0*	
NEBUSAL NEB SOLN	\$0*	
<i>sodium chloride neb soln</i>	\$0*	
MUCOLYTICS		
<i>acetylcysteine 100mg/ml inh soln</i>	1	PA_BvD
<i>acetylcysteine 200mg/ml inh soln</i>	1	PA_BvD
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>adapalene 0.1% cream</i>	2	PA QL=45 Quantity/30 Days
<i>adapalene 0.3% gel</i>	2	PA QL=45 Quantity/30 Days
<i>adapalene gel</i>	2*	PA
<i>adapalene/benzoyl peroxide 0.1-2.5% gel</i>	2	PA QL=45 Quantity/30 Days
<i>clindamycin 1% gel</i>	1	QL=75 Quantity/30 Days
<i>clindamycin 1% lotion</i>	1	QL=60 Quantity/30 Days
<i>clindamycin 1% pad</i>	1	QL=120 Quantity/30 Days
<i>clindamycin 1% topical soln</i>	1	QL=60 Quantity/30 Days
<i>clindamycin phosphate/benzoyl peroxide 1.2-5% topical gel</i>	2	QL=90 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>clindamycin/benzoyl peroxide 1-5% gel</i>	2	QL=100 Quantity/30 Days
<i>clindamycin/benzoyl peroxide 1.2-2.5% gel</i>	2	QL=100 Quantity/30 Days
ERY 2% PAD	2	QL=60 Quantity/30 Days
<i>erythromycin 2% gel</i>	1	QL=60 Quantity/30 Days
<i>erythromycin 2% topical soln</i>	1	QL=60 Quantity/30 Days
<i>erythromycin/benzoyl peroxide 5-3% gel</i>	2	QL=46.60 Quantity/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>sodium sulfacetamide/sulfur 10-5% cleanser</i>	2*	
<i>sodium sulfacetamide/sulfur 9-4.5% cleanser</i>	2*	
<i>sulfacetamide sodium 10% lotion</i>	2	QL=118 Quantity/30 Days
<i>sulfacetamide sodium/sulfur 10-5% cream</i>	2*	
<i>sulfacetamide sodium/sulfur emulsion</i>	2*	
<i>sulfacleanse susp</i>	2*	
SUMADAN 9-4.5% WASH	3*	
<i>tretinoin 0.01% gel</i>	2	PA QL=45 Quantity/30 Days
<i>tretinoin 0.025% cream</i>	2	PA QL=45 Quantity/30 Days
<i>tretinoin 0.025% gel</i>	2	PA QL=45 Quantity/30 Days
<i>tretinoin 0.05% cream</i>	2	PA QL=45 Quantity/30 Days
<i>tretinoin 0.1% cream</i>	2	PA QL=45 Quantity/30 Days
ANTIBIOTICS - TOPICAL		
<i>gentamicin 0.1% cream</i>	1	QL=30 Quantity/30 Days
<i>gentamicin 0.1% ointment</i>	1	QL=120 Quantity/30 Days
<i>mupirocin 2% ointment</i>	1	QL=220 Quantity/30 Days
ANTIFUNGALS - TOPICAL		
<i>betamethasone/clotrimazole 1-0.05% cream</i>	1	QL=90 Quantity/30 Days
<i>betamethasone/clotrimazole 1-0.05% lotion</i>	2	QL=60 Quantity/30 Days
<i>ciclopirox 0.77% cream</i>	1	QL=90 Quantity/30 Days
<i>ciclopirox 0.77% gel</i>	1	QL=100 Quantity/30 Days
<i>ciclopirox 0.77% lotion</i>	1	QL=60 Quantity/30 Days
<i>ciclopirox 1% shampoo</i>	2	QL=120 Quantity/30 Days
<i>ciclopirox 8% topical soln</i>	1	QL=13.20 Quantity/30 Days
<i>econazole nitrate 1% cream</i>	1	QL=85 Quantity/30 Days
<i>iodoquinol/hydrocortisone cream</i>	3*	
<i>ketoconazole 2% cream</i>	1	QL=120 Quantity/30 Days
<i>ketoconazole 2% shampoo</i>	1	QL=240 Quantity/30 Days
<i>nystatin 100000unit/ml cream</i>	1	QL=30 Quantity/30 Days
<i>nystatin 10000unit/gm ointment</i>	1	QL=30 Quantity/30 Days
<i>nystatin 100unit/mg topical powder</i>	1	QL=60 Quantity/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	1	QL=60 Quantity/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	1	QL=60 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTI-INFLAMMATORY AGENTS - TOPICAL		
<i>diclofenac sodium 1% gel</i>	1	QL=10 Quantity/30 Days
<i>diclofenac sodium 1.5% topical soln</i>	2	QL=300 Quantity/30 Days
FLECTOR 1.3% PATCH, DICLOFENAC 1.3% PATCH	3	PA QL=60 Quantity/30 Days
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene 1% gel</i>	1	PA_NSO QL=60 Quantity/30 Days
<i>diclofenac sodium 3% gel</i>	2	PA QL=1 Quantity/30 Days
FLUOROURACIL 2% TOPICAL SOLN	2	QL=10 Quantity/30 Days
<i>fluorouracil 5% cream</i>	1	QL=1 Quantity/30 Days
FLUOROURACIL 5% TOPICAL SOLN	2	QL=10 Quantity/30 Days
PANRETIN 0.1% GEL	4	NDS PA_NSO
VALCHLOR 0.016% GEL	4	LD NDS PA_NSO QL=240 Quantity/30 Days
ANTIPSORIATICS		
<i>acitretin 10mg cap</i>	2	
<i>acitretin 17.5mg cap</i>	2	
<i>acitretin 25mg cap</i>	2	
<i>calcipotriene 0.005% cream</i>	2	PA QL=120 Quantity/30 Days
<i>calcipotriene 0.005% ointment</i>	2	PA QL=120 Quantity/30 Days
<i>calcipotriene 0.005% topical soln</i>	2	PA QL=120 Quantity/30 Days
METHOXSALEN 10MG CAP	2	
SKYRIZI 150MG/ML AUTO-INJECTOR	4	PA QL=7 Quantity/365 Days
SKYRIZI 150MG/ML SYRINGE	4	PA QL=7 Quantity/365 Days
STELARA 45MG/0.5ML INJ	4	PA QL=.50 Quantity/28 Days
STELARA 45MG/0.5ML SYRINGE	4	PA QL=.50 Quantity/28 Days
STELARA 90MG/ML SYRINGE	4	PA QL=1 Quantity/28 Days
TALTZ 80MG/ML AUTO-INJECTOR	4	NDS PA QL=3 Quantity/28 Days
TALTZ 80MG/ML SYRINGE	4	NDS PA QL=3 Quantity/28 Days
<i>tazarotene 0.1% cream</i>	2	PA QL=60 Quantity/30 Days
TAZORAC 0.05% CREAM	3	PA QL=60 Quantity/30 Days
TREMFYA 100MG/ML AUTO-INJECTOR	4	NDS PA QL=2 Quantity/28 Days
TREMFYA 100MG/ML SYRINGE	4	NDS PA QL=2 Quantity/28 Days
ZORYVE 0.3% CREAM	2	PA QL=60 Quantity/30 Days
ANTISEBORRHEIC PRODUCTS		
OVACE CREAM	3*	
OVACE WASH	3*	
<i>selenium sulfide 2.25% shampoo</i>	2*	
<i>selenium sulfide 2.5% shampoo</i>	1	
<i>sulfacetamide sodium wash</i>	2*	
ANTIVIRALS - TOPICAL		
<i>acyclovir 5% ointment</i>	1	QL=30 Quantity/30 Days
<i>penciclovir 1% cream</i>	2	QL=5 Quantity/7 Days
BURN PRODUCTS		
<i>silver sulfadiazine 1% cream</i>	1	
SULFAMYLON 85MG/GM CREAM	2	QL=453.60 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CORTICOSTEROIDS - TOPICAL		
<i>ala-cort 2.5% cream</i>	1	QL=454 Quantity/30 Days
<i>alclometasone dipropionate 0.05% cream</i>	2	QL=120 Quantity/30 Days
<i>alclometasone dipropionate 0.05% ointment</i>	2	QL=120 Quantity/30 Days
<i>betamethasone 0.05% aug cream</i>	1	QL=100 Quantity/30 Days
<i>betamethasone 0.05% aug lotion</i>	2	QL=120 Quantity/30 Days
<i>betamethasone 0.05% aug ointment</i>	1	QL=100 Quantity/30 Days
<i>betamethasone 0.05% cream</i>	1	QL=90 Quantity/30 Days
BETAMETHASONE 0.05% GEL	2	QL=100 Quantity/30 Days
<i>betamethasone 0.05% lotion</i>	1	QL=120 Quantity/30 Days
<i>betamethasone 0.05% ointment</i>	2	QL=90 Quantity/30 Days
<i>betamethasone 0.1% cream</i>	1	QL=180 Quantity/30 Days
<i>betamethasone 0.1% lotion</i>	1	QL=120 Quantity/30 Days
<i>betamethasone 0.1% ointment</i>	1	QL=180 Quantity/30 Days
<i>clobetasol propionate 0.05% cream</i>	1	QL=120 Quantity/30 Days
<i>clobetasol propionate 0.05% e cream</i>	2	QL=120 Quantity/30 Days
<i>clobetasol propionate 0.05% foam</i>	2	QL=100 Quantity/30 Days
<i>clobetasol propionate 0.05% gel</i>	2	QL=120 Quantity/30 Days
<i>clobetasol propionate 0.05% lotion</i>	2	QL=118 Quantity/30 Days
<i>clobetasol propionate 0.05% ointment</i>	1	QL=120 Quantity/30 Days
<i>clobetasol propionate 0.05% shampoo</i>	2	QL=2 Quantity/30 Days
<i>clobetasol propionate 0.05% spray</i>	2	QL=125 Quantity/30 Days
<i>clobetasol propionate 0.05% topical soln</i>	1	QL=100 Quantity/30 Days
<i>desonide 0.05% ointment</i>	2	QL=120 Quantity/30 Days
<i>desoximetasone 0.25% cream</i>	2	QL=120 Quantity/30 Days
<i>desoximetasone 0.25% ointment</i>	2	QL=120 Quantity/30 Days
<i>fluocinolone acetonide 0.01% body oil</i>	2	QL=120 Quantity/30 Days
<i>fluocinolone acetonide 0.01% cream</i>	1	QL=120 Quantity/30 Days
<i>fluocinolone acetonide 0.01% topical soln</i>	1	QL=90 Quantity/30 Days
<i>fluocinolone acetonide 0.025% cream</i>	1	QL=120 Quantity/30 Days
<i>fluocinolone acetonide 0.025% ointment</i>	1	QL=120 Quantity/30 Days
<i>fluocinolone acetonide 0.1mg/ml oil</i>	2	QL=120 Quantity/30 Days
<i>fluocinonide 0.05% cream</i>	1	QL=60 Quantity/30 Days
<i>fluocinonide 0.05% e cream</i>	1	QL=120 Quantity/30 Days
<i>fluocinonide 0.05% gel</i>	1	QL=60 Quantity/30 Days
<i>fluocinonide 0.05% ointment</i>	1	QL=60 Quantity/30 Days
<i>fluocinonide 0.05% topical soln</i>	1	QL=60 Quantity/30 Days
<i>fluocinonide 0.1% cream</i>	1	QL=60 Quantity/30 Days
<i>fluticasone propionate 0.005% ointment</i>	1	QL=240 Quantity/30 Days
<i>fluticasone propionate 0.05% cream</i>	1	QL=240 Quantity/30 Days
<i>halobetasol propionate 0.05% cream</i>	2	QL=50 Quantity/30 Days
<i>halobetasol propionate 0.05% ointment</i>	2	QL=50 Quantity/30 Days
<i>hydrocortisone 1% cream (RX Only)</i>	1	QL=240 Quantity/30 Days
<i>hydrocortisone 2.5% cream</i>	1	
<i>hydrocortisone 2.5% lotion</i>	1	QL=118 Quantity/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydrocortisone 2.5% ointment</i>	1	QL=240 Quantity/30 Days
<i>mometasone furoate 0.1% cream</i>	1	QL=180 Quantity/30 Days
<i>mometasone furoate 0.1% lotion</i>	1	QL=180 Quantity/30 Days
<i>mometasone furoate 0.1% ointment</i>	1	QL=180 Quantity/30 Days
NUCORT LOTION	3*	
<i>triamcinolone acetonide 0.025% cream</i>	1	QL=454 Quantity/30 Days
<i>triamcinolone acetonide 0.025% lotion</i>	1	QL=120 Quantity/30 Days
<i>triamcinolone acetonide 0.025% ointment</i>	1	QL=454 Quantity/30 Days
<i>triamcinolone acetonide 0.1% cream</i>	1	QL=454 Quantity/30 Days
<i>triamcinolone acetonide 0.1% lotion</i>	1	QL=120 Quantity/30 Days
<i>triamcinolone acetonide 0.1% ointment</i>	1	QL=454 Quantity/30 Days
<i>triamcinolone acetonide 0.5% cream</i>	1	QL=454 Quantity/30 Days
<i>triamcinolone acetonide 0.5% ointment</i>	1	QL=120 Quantity/30 Days
ECZEMA AGENTS		
ADBRY 150MG/ML SYRINGE	4	NDS PA QL=6 Quantity/28 Days
CIBINQO 100MG TAB	4	NDS PA QL=30 Quantity/30 Days
CIBINQO 200MG TAB	4	NDS PA QL=30 Quantity/30 Days
CIBINQO 50MG TAB	4	NDS PA QL=30 Quantity/30 Days
DUPIXENT 100MG/0.67ML SYRINGE	4	NDS PA QL=2 Quantity/28 Days
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
DUPIXENT 200MG/1.14ML SYRINGE	4	NDS PA QL=4 Quantity/28 Days
DUPIXENT 300MG/2ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
DUPIXENT 300MG/2ML SYRINGE	4	NDS PA QL=4 Quantity/28 Days
EMOLLIENTS		
<i>ammonium lactate 12% cream</i>	1	
<i>ammonium lactate 12% lotion</i>	1	
ENZYMES - TOPICAL		
SANTYL 250UNIT/GM OINTMENT	2	QL=1 Quantity/30 Days
IMMUNOMODULATING AGENTS - TOPICAL		
<i>imiquimod 5% cream</i>	1	QL=24 Quantity/30 Days
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus 1% cream</i>	2	QL=100 Quantity/30 Days
<i>tacrolimus 0.03% ointment</i>	1	QL=100 Quantity/30 Days
<i>tacrolimus 0.1% ointment</i>	1	QL=100 Quantity/30 Days
KERATOLYTIC/ANTIMITOTIC AGENTS		
PODOCON SOLN	2*	
PODOFILOX 0.5% TOPICAL SOLN	2	QL=7 Quantity/30 Days
<i>podofilox 0.5% topical soln</i>	2	QL=7 Quantity/30 Days
SALEX SHAMPOO	3*	
<i>salicylic acid shampoo</i>	2*	
LOCAL ANESTHETICS - TOPICAL		
<i>lidocaine 3% cream (rx only)</i>	1*	
<i>lidocaine 4% topical soln</i>	1	QL=50 Quantity/30 Days
<i>lidocaine 5% ointment</i>	1	PA QL=107 Quantity/30 Days
<i>lidocaine 5% patch</i>	2	PA QL=90 Quantity/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	1	QL=30 Quantity/30 Days
MISC. TOPICAL		
<i>alcohol swab 1"x1" (diabetic)</i>	\$0	
DRYSOL SOLN	1*	
ROSACEA AGENTS		
<i>azelaic acid 15% gel</i>	2	QL=50 Quantity/30 Days
FINACEA 15% FOAM	2	QL=50 Quantity/30 Days
<i>metronidazole 0.75% cream</i>	1	QL=45 Quantity/30 Days
<i>metronidazole 0.75% gel</i>	1	QL=45 Quantity/30 Days
<i>metronidazole 0.75% lotion</i>	2	QL=59 Quantity/30 Days
<i>metronidazole 1% gel</i>	2	QL=60 Quantity/30 Days
SCABICIDES & PEDICULICIDES		
<i>malathion 0.5% lotion</i>	2	
<i>permethrin 5% cream</i>	1	
WOUND CARE PRODUCTS		
REGRANEX 0.01% GEL	2	PA QL=2 Quantity/15 Days
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC TESTS		
ACCU-CHEK AVIVA PLUS TEST STRIP	\$0*	
ACCU-CHEK GUIDE TEST STRIP	\$0*	
ACCU-CHEK SMARTVIEW TEST STRIP	\$0*	
ACCU-CHEK TEST STRIP	\$0*	
CLINISTIX	1*	
KETO-DIASTIX	1*	
KETOSTIX	1*	
ONETOUCH TEST STRIP	\$0*	
ONETOUCH ULTRA	\$0*	
ONETOUCH VERIO TEST STRIP	\$0*	
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON 120000-76000-24000UNIT DR CAP	2	
CREON 15000-9500-3000UNIT DR CAP	2	
CREON 30000-19000-6000UNIT DR CAP	2	
CREON 36000-114000-180000UNIT DR CAP	2	
CREON 60000-38000-12000UNIT DR CAP	2	
SUCRAID 8500UNIT/ML ORAL SOLN	4	NDS PA
ZENPEP 105000-79000-25000UNIT DR CAP	3	ST
ZENPEP 14000-10000-3000UNIT DR CAP	3	ST
ZENPEP 24000-17000-5000UNIT DR CAP	3	ST
ZENPEP 40000-126000-168000UNIT DR CAP	3	ST
ZENPEP 42000-32000-10000UNIT DR CAP	3	ST
ZENPEP 63000-47000-15000UNIT DR CAP	3	ST
ZENPEP 84000-63000-20000UNIT DR CAP	3	ST
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>acetazolamide 125mg tab</i>	1	
<i>acetazolamide 250mg tab</i>	1	
<i>acetazolamide 500mg er cap</i>	2	
<i>methazolamide 25mg tab</i>	2	
<i>methazolamide 50mg tab</i>	2	
DIURETIC COMBINATIONS		
AMILORIDE 5MG/HYDROCHLOROTHIAZIDE 50MG TAB	1	
<i>amiloride 5mg/hydrochlorothiazide 50mg tab</i>	1	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	1	
LOOP DIURETICS		
<i>bumetanide 0.25mg/ml inj</i>	2	
<i>bumetanide 0.5mg tab</i>	1	
<i>bumetanide 1mg tab</i>	1	
<i>bumetanide 2mg tab</i>	1	
FUROSCIX 80MG/10ML CARTRIDGE	4	LD NDS QL=8 Quantity/7 Days
<i>furosemide 10mg/ml inj</i>	2	
<i>furosemide 10mg/ml oral soln</i>	1	
<i>furosemide 20mg tab</i>	\$0	
<i>furosemide 40mg tab</i>	\$0	
<i>furosemide 80mg tab</i>	\$0	
FUROSEMIDE 8MG/ML ORAL SOLN	1	
<i>torseamide 100mg tab</i>	1	
<i>torseamide 10mg tab</i>	1	
<i>torseamide 20mg tab</i>	1	
<i>torseamide 5mg tab</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone 25mg tab</i>	\$0	
<i>chlorthalidone 50mg tab</i>	\$0	
<i>hydrochlorothiazide 12.5mg cap</i>	\$0	
<i>hydrochlorothiazide 12.5mg tab</i>	\$0	
<i>hydrochlorothiazide 25mg tab</i>	\$0	
<i>hydrochlorothiazide 50mg tab</i>	\$0	
<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	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>metolazone 5mg tab</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
ADRENAL STEROID INHIBITORS		
ISTURISA 10MG TAB	4	LD NDS PA QL=180 Quantity/30 Days
ISTURISA 1MG TAB	4	LD NDS PA QL=240 Quantity/30 Days
ISTURISA 5MG TAB	4	LD NDS PA QL=60 Quantity/30 Days
RECORLEV 150MG TAB	4	NDS PA QL=240 Quantity/30 Days
BONE DENSITY REGULATORS		
<i>alendronate 10mg tab</i>	\$0	
<i>alendronate 35mg tab</i>	\$0	
<i>alendronate 70mg tab</i>	\$0	
<i>alendronate 70mg/75ml oral soln</i>	2	
<i>ibandronate 150mg tab</i>	1	QL=1 Quantity/30 Days
NATPARA 100MCG CARTRIDGE	4	LD NDS PA
NATPARA 25MCG CARTRIDGE	4	LD NDS PA
NATPARA 50MCG CARTRIDGE	4	LD NDS PA
NATPARA 75MCG CARTRIDGE	4	LD NDS PA
PROLIA 60MG/ML SYRINGE	3	ST QL=1 Quantity/168 Days
<i>risedronate sodium 150mg tab</i>	2	
<i>risedronate sodium 30mg tab</i>	2	
<i>risedronate sodium 35mg tab</i>	2	
<i>risedronate sodium 5mg tab</i>	2	
<i>salmon calcitonin 200unit/act nasal spray</i>	2	
TERIPARATIDE 0.02MG/ACT PEN INJ	4	NDS QL=1 Quantity/28 Days
TYMLOS 3120MCG/1.56ML PEN INJ	4	NDS QL=1.56 Quantity/30 Days
XGEVA 120MG/1.7ML INJ	4	NDS PA QL=1 Quantity/28 Days
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT 10MG INJ	4	LD NDS PA
SOMAVERT 15MG INJ	4	LD NDS PA
SOMAVERT 20MG INJ	4	LD NDS PA
SOMAVERT 25MG INJ	4	LD NDS PA
SOMAVERT 30MG INJ	4	LD NDS PA
GROWTH HORMONES		
NORDITROPIN 10MG/1.5ML PEN INJ	4	NDS PA
NORDITROPIN 15MG/1.5ML PEN INJ	4	NDS PA
NORDITROPIN 30MG/3ML PEN INJ	4	NDS PA
NORDITROPIN 5MG/1.5ML PEN INJ	4	NDS PA
OMNITROPE 10MG/1.5ML CARTRIDGE	4	NDS PA
OMNITROPE 5.8MG INJ	4	NDS PA
OMNITROPE 5MG/1.5ML CARTRIDGE	4	NDS PA
SKYTROFA 11MG CARTRIDGE	4	NDS PA
SKYTROFA 13.3MG CARTRIDGE	4	NDS PA
SKYTROFA 3.6MG CARTRIDGE	4	NDS PA
SKYTROFA 3MG CARTRIDGE	4	NDS PA
SKYTROFA 4.3MG CARTRIDGE	4	NDS PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SKYTROFA 5.2MG CARTRIDGE	4	NDS PA
SKYTROFA 6.3MG CARTRIDGE	4	NDS PA
SKYTROFA 7.6MG CARTRIDGE	4	NDS PA
SKYTROFA 9.1MG CARTRIDGE	4	NDS PA
HORMONE RECEPTOR MODULATORS		
OSPHENA 60MG TAB	3	PA
<i>raloxifene 60mg tab</i>	\$0	
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX 40MG/4ML INJ	4	LD NDS PA
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
SYNAREL 2MG/ML NASAL INHALER	4	NDS PA
METABOLIC MODIFIERS		
<i>betaine 1000mg powder for oral soln</i>	4	LD NDS
<i>calcitriol 0.25mcg cap</i>	1	
<i>calcitriol 0.5mcg cap</i>	1	
<i>calcitriol 1mcg/ml oral soln</i>	1	
<i>carglumic acid 200mg tab</i>	1	PA
<i>cinacalcet 30mg tab</i>	2	
<i>cinacalcet 60mg tab</i>	2	
<i>cinacalcet 90mg tab</i>	2	
GALAFOLD 28 DAY WALLET 123MG PACK	4	LD NDS PA QL=15 Quantity/30 Days
<i>levocarnitine 100mg/ml oral soln</i>	1	
<i>levocarnitine 330mg tab</i>	1	
<i>nitisinone 10mg cap</i>	4	NDS PA
<i>nitisinone 20mg cap</i>	4	NDS PA
<i>nitisinone 2mg cap</i>	4	NDS PA
<i>nitisinone 5mg cap</i>	4	NDS PA
ORFADIN 4MG/ML SUSP	4	NDS PA
PALYNZIQ 10MG/0.5ML SYRINGE	4	LD NDS PA
PALYNZIQ 2.5MG/0.5ML SYRINGE	4	LD NDS PA
PALYNZIQ 20MG/ML SYRINGE	4	LD NDS PA
<i>paricalcitol 1mcg cap</i>	2	
<i>paricalcitol 2mcg cap</i>	2	
<i>paricalcitol 4mcg cap</i>	2	
PHEBURANE 483MG/GM ORAL PELLETT	4	LD NDS
<i>sapropterin 100mg powder for oral soln</i>	1	PA
<i>sapropterin 500mg powder for oral soln</i>	1	PA
<i>sapropterin dihydrochloride 100mg tab</i>	1	PA
<i>sodium phenylbutyrate 0.94mg/mg oral powder</i>	2	
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA 10MG TAB	3	PA QL=30 Quantity/30 Days
KERENDIA 20MG TAB	3	PA QL=30 Quantity/30 Days
POSTERIOR PITUITARY HORMONES		
<i>desmopressin 0.01% nasal spray</i>	2	
<i>desmopressin acetate 0.01mg/act nasal spray</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>desmopressin acetate 0.1mg tab</i>	2	
<i>desmopressin acetate 0.2mg tab</i>	2	
PROLACTIN INHIBITORS		
<i>cabergoline 0.5mg tab</i>	1	
SOMATOSTATIC AGENTS		
<i>octreotide 0.05mg/ml inj</i>	1	PA
<i>octreotide 0.1mg/ml inj</i>	1	PA
<i>octreotide 0.2mg/ml inj</i>	1	PA
<i>octreotide 0.5mg/ml inj</i>	1	PA
<i>octreotide 1mg/ml inj</i>	1	PA
SIGNIFOR 0.3MG/ML INJ	4	LD NDS PA QL=60 Quantity/30 Days
SIGNIFOR 0.6MG/ML INJ	4	LD NDS PA QL=60 Quantity/30 Days
SIGNIFOR 0.9MG/ML INJ	4	LD NDS PA QL=60 Quantity/30 Days
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>amabelz 0.5/0.1mg 28 day pack</i>	1	
<i>amabelz 1/0.5mg 28 day pack</i>	1	
<i>esterified estrogens/methyltestosterone tab</i>	1*	
<i>fyavolv 0.0025-0.5mg tab</i>	1	
<i>fyavolv 0.005-1mg tab</i>	1	
PREMPHASE 28 DAY PACK	2	
PREMPRO 0.3/1.5MG 28 DAY PACK	2	
PREMPRO 0.45/1.5 28 DAY PACK	2	
PREMPRO 0.625/2.5MG 28 DAY PACK	2	
PREMPRO 0.625/5MG 28 DAY PACK	2	
ESTROGENS		
<i>estradiol 0.025mg/24hr twice weekly patch</i>	1	
<i>estradiol 0.025mg/24hr weekly patch</i>	1	
<i>estradiol 0.0375mg/24hr twice weekly patch</i>	1	
<i>estradiol 0.0375mg/24hr weekly patch</i>	1	
<i>estradiol 0.05mg/24hr twice weekly patch</i>	1	
<i>estradiol 0.05mg/24hr weekly patch</i>	1	
<i>estradiol 0.06mg/24hr weekly patch</i>	1	
<i>estradiol 0.075mg/24hr twice weekly patch</i>	1	
<i>estradiol 0.075mg/24hr weekly patch</i>	1	
<i>estradiol 0.1mg/24hr twice weekly patch</i>	1	
<i>estradiol 0.1mg/24hr weekly patch</i>	1	
<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	
MENEST 0.3MG TAB	3	
MENEST 0.625MG TAB	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MENEST 1.25MG TAB	3	
MENEST 2.5MG TAB	3	
PREMARIN 0.3MG TAB	2	
PREMARIN 0.45MG TAB	2	
PREMARIN 0.625MG TAB	2	
PREMARIN 0.9MG TAB	2	
PREMARIN 1.25MG TAB	2	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
BAXDELA 450MG TAB	2	PA QL=60 Quantity/30 Days
<i>ciprofloxacin 250mg tab</i>	1	
<i>ciprofloxacin 2mg/ml inj</i>	2	
<i>ciprofloxacin 500mg tab</i>	1	
<i>ciprofloxacin 750mg tab</i>	1	
<i>ciprofloxacin/d5w 400mg/200ml inj</i>	2	
<i>levofloxacin 250mg tab</i>	1	
LEVOFLOXACIN 25MG/ML ORAL SOLN	2	
<i>levofloxacin 25mg/ml oral soln</i>	2	
<i>levofloxacin 500mg tab</i>	1	
<i>levofloxacin 5mg/ml (100ml) inj</i>	2	
<i>levofloxacin 5mg/ml (150ml) inj</i>	2	
<i>levofloxacin 750mg tab</i>	1	
<i>levofloxacin/D5W 250mg/50ml inj</i>	2	
MOXIFLOXACIN 1.6MG/ML INJ	2	
<i>moxifloxacin 400mg tab</i>	2	
MOXIFLOXACIN 400MG/250ML IV SOLN	2	
<i>ofloxacin 400mg tab</i>	2	
GASTROINTESTINAL AGENTS - MISC.		
5-HT4 RECEPTOR AGONISTS		
MOTEGRITY 1MG TAB	3	PA
MOTEGRITY 2MG TAB	3	PA
AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)		
TRULANCE 3MG TAB	2	
FARNESOID X RECEPTOR (FXR) AGONISTS		
OCALIVA 10MG TAB	4	LD NDS PA QL=30 Quantity/30 Days
OCALIVA 5MG TAB	4	LD NDS PA QL=30 Quantity/30 Days
GALLSTONE SOLUBILIZING AGENTS		
RELTONE 200MG CAP	3	PA
RELTONE 400MG CAP	3	PA
<i>ursodiol 250mg tab</i>	1	
<i>ursodiol 300mg cap</i>	1	
<i>ursodiol 500mg tab</i>	1	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium 20mg/ml oral soln</i>	2	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lubiprostone 24mcg cap</i>	2	QL=60 Quantity/30 Days
<i>lubiprostone 8mcg cap</i>	2	QL=60 Quantity/30 Days
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide 10mg tab</i>	1	
<i>metoclopramide 1mg/ml oral soln</i>	1	
<i>metoclopramide 5mg tab</i>	1	
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium 750mg cap</i>	1	
CIMZIA 200MG INJ	4	NDS PA QL=2 Quantity/28 Days
CIMZIA 200MG/ML INJ	4	NDS PA QL=2 Quantity/28 Days
CIMZIA 200MG/ML INJ STARTER KIT	4	NDS PA QL=2 Quantity/28 Days
<i>mesalamine 1000mg rectal supp</i>	2	
<i>mesalamine 1200mg dr tab</i>	2	
<i>mesalamine 375mg er cap</i>	2	
<i>mesalamine 400mg dr cap</i>	2	
<i>mesalamine 66.7mg/ml enema</i>	2	
<i>mesalamine 800mg dr tab</i>	2	
MESALAMINE 800MG DR TAB	2	
SKYRIZI 180MG/1.2ML CARTRIDGE	4	PA QL=1 Quantity/56 Days
SKYRIZI 360MG/2.4ML CARTRIDGE	4	PA QL=1 Quantity/56 Days
<i>sulfasalazine 500mg dr tab</i>	1	
<i>sulfasalazine 500mg tab</i>	1	
INTESTINAL ACIDIFIERS		
<i>enulose 10gm/15ml oral soln</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>alosetron 0.5mg tab</i>	2	
<i>alosetron 1mg tab</i>	2	
LINZESS 145MCG CAP	3	PA QL=30 Quantity/30 Days
LINZESS 290MCG CAP	3	PA QL=30 Quantity/30 Days
LINZESS 72MCG CAP	3	PA QL=30 Quantity/30 Days
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK 12.5MG TAB	2	PA
MOVANTIK 25MG TAB	2	PA
RELISTOR 12MG/0.6ML INJ	3	PA
RELISTOR 8MG/0.4ML INJ	3	PA
SYMPROIC 0.2MG TAB	2	PA
PHOSPHATE BINDER AGENTS		
AURYXIA 210MG TAB	3	PA
<i>calcium acetate 667mg cap</i>	1	
<i>calcium acetate 667mg tab</i>	1	
FOSRENOL 1000MG ORAL POWDER	2	
FOSRENOL 750MG ORAL POWDER	2	
<i>lanthanum carbonate 1000mg chew tab</i>	2	
<i>lanthanum carbonate 500mg chew tab</i>	2	
<i>lanthanum carbonate 750mg chew tab</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>sevelamer carbonate 2400mg powder for oral susp</i>	2	
<i>sevelamer carbonate 800mg powder for oral susp</i>	2	
<i>sevelamer carbonate 800mg tab</i>	2	
VELPHORO 500MG CHEW TAB	3	
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX 5MG INJ	4	NDS PA
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO 250MG TAB	4	LD NDS PA QL=84 Quantity/28 Days
GENITOURINARY AGENTS - MISCELLANEOUS		
ALKALINIZERS		
CYTRA K CRYSTALS	1*	
CYTRA-3 SYRUP	1*	
ORACIT SOLN	1*	
<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>potassium citrate/citric acid soln</i>	1*	
<i>sodium citrate/citric acid soln</i>	1*	
<i>tricitrates soln</i>	1*	
CYSTINOSIS AGENTS		
CYSTAGON 150MG CAP	2	
CYSTAGON 50MG CAP	2	
GENITOURINARY IRRIGANTS		
<i>sodium chloride 0.154meq/ml soln</i>	2	
IGA NEPHROPATHY (IGAN) AGENTS		
FILSPARI 200MG TAB	4	LD NDS PA QL=30 Quantity/30 Days
FILSPARI 400MG TAB	4	LD NDS PA QL=30 Quantity/30 Days
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON 100MG CAP	2	
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	
<i>dutasteride 0.5mg cap</i>	1	
<i>finasteride 5mg tab</i>	1	
<i>silodosin 4mg cap</i>	1	
<i>silodosin 8mg cap</i>	1	
<i>tamsulosin 0.4mg cap</i>	1	
URINARY ANALGESICS		
<i>phenazopyridine 100mg tab</i>	1	
<i>phenazopyridine 200mg tab</i>	1	
URINARY STONE AGENTS		
LITHOSTAT 250MG TAB	3	
<i>tiopronin 100mg tab</i>	1	
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine/probenecid 0.5-500mg 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.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	1	
<i>allopurinol 300mg tab</i>	1	
<i>colchicine 0.6mg tab</i>	2	
<i>febuxostat 40mg tab</i>	2	ST RXC
<i>febuxostat 80mg tab</i>	2	ST RXC
URICOSURICS		
<i>probenecid 500mg tab</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
BRADYKININ B2 RECEPTOR ANTAGONISTS		
<i>icatibant 10mg/ml inj</i>	1	PA
COMPLEMENT INHIBITORS		
BERINERT 500UNIT INJ	4	LD NDS PA
CINRYZE 500UNIT INJ	4	LD NDS PA
HAEGARDA 2000UNIT INJ	4	LD NDS PA
HAEGARDA 3000UNIT INJ	4	LD NDS PA
RUCONEST 2100UNIT INJ	4	LD NDS PA
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline 400mg er tab</i>	1	
PLASMA KALLIKREIN INHIBITORS		
ORLADEYO 110MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
ORLADEYO 150MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
TAKHZYRO 300MG/2ML INJ	4	LD NDS PA QL=2 Quantity/28 Days
TAKHZYRO 300MG/2ML SYRINGE	4	LD NDS PA QL=2 Quantity/28 Days
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide 0.5mg cap</i>	1	
<i>anagrelide 1mg cap</i>	1	
<i>aspirin 25mg/dipyridamole 200mg er cap</i>	2	
BRILINTA 60MG TAB	2	
BRILINTA 90MG TAB	2	
CABLIVI 11MG INJ	4	LD NDS PA QL=30 Quantity/30 Days
<i>cilostazol 100mg tab</i>	1	
<i>cilostazol 50mg tab</i>	1	
<i>clopidogrel 75mg tab</i>	1	
<i>dipyridamole 25mg tab</i>	1	
<i>dipyridamole 50mg tab</i>	1	
<i>dipyridamole 75mg tab</i>	1	
<i>prasugrel 10mg tab</i>	1	
<i>prasugrel 5mg tab</i>	1	
PYRUVATE KINASE ACTIVATORS		
PYRUKYND 20MG TAB (4-WEEK PACK)	4	LD NDS PA QL=56 Quantity/28 Days
PYRUKYND 20MG/50MG TAB TAPER PACK	4	LD NDS PA QL=14 Quantity/14 Days
PYRUKYND 50MG TAB (4-WEEK PACK)	4	LD NDS PA QL=56 Quantity/28 Days
PYRUKYND 5MG TAB (4-WEEK PACK)	4	LD NDS PA QL=56 Quantity/28 Days
PYRUKYND 5MG TAB TAPER PACK	4	LD NDS PA QL=7 Quantity/7 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PYRUKYND 5MG/20MG TAB TAPER PACK	4	LD NDS PA QL=14 Quantity/14 Days
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA 84MG CAP	4	NDS PA QL=60 Quantity/30 Days
<i>miglustat 100mg cap</i>	4	LD NDS PA
AGENTS FOR SICKLE CELL ANEMIA		
DROXIA 200MG CAP	2	
DROXIA 300MG CAP	2	
DROXIA 400MG CAP	2	
ENDARI 5GM POWDER FOR ORAL SOLN	4	NDS PA QL=180 Quantity/30 Days
AGENTS FOR SICKLE CELL DISEASE		
OXBRYTA 300MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
OXBRYTA 300MG TAB FOR ORAL SUSP	4	LD NDS PA QL=150 Quantity/30 Days
OXBRYTA 500MG TAB	4	LD NDS PA QL=150 Quantity/30 Days
COBALAMINS		
<i>cyanocobalamin inj</i>	1*	
NASCOBAL NASAL SPRAY	3*	
FOLIC ACID/FOLATES		
<i>folic acid tab 1mg</i>	1*	
<i>folic acid tab 400mcg</i>	\$0*	
<i>folic acid tab 800mcg</i>	\$0*	
HEMATOPOIETIC GROWTH FACTORS		
DOPTELET 20MG TAB	4	LD NDS PA QL=60 Quantity/30 Days
DOPTELET TAB 40MG DAILY DOSE PACK	4	LD NDS PA QL=1 Quantity/5 Days
DOPTELET TAB 60MG DAILY DOSE PACK	4	LD NDS PA QL=1 Quantity/5 Days
NIVESTYM 300MCG/0.5ML SYRINGE	4	NDS
NIVESTYM 300MCG/ML INJ	4	NDS
NIVESTYM 480MCG/0.8ML SYRINGE	4	NDS
NIVESTYM 480MCG/1.6ML INJ	4	NDS
NYVEPRIA 6MG/0.6ML SYRINGE	4	NDS
PROMACTA 12.5MG POWDER FOR ORAL SUSP	4	NDS PA
PROMACTA 12.5MG TAB	4	NDS PA QL=30 Quantity/30 Days
PROMACTA 25MG POWDER FOR ORAL SUSP	4	NDS PA
PROMACTA 25MG TAB	4	NDS PA QL=30 Quantity/30 Days
PROMACTA 50MG TAB	4	NDS PA QL=60 Quantity/30 Days
PROMACTA 75MG TAB	4	NDS PA QL=60 Quantity/30 Days
RETACRIT 20000UNIT/2ML INJ	2	PA
RETACRIT 20000UNIT/ML INJ	2	PA
RETACRIT 2000UNIT/ML INJ	2	PA
RETACRIT 3000UNIT/ML INJ	2	PA
RETACRIT 4000UNIT/ML INJ	2	PA
RETACRIT 4000UNIT/ML INJ	2	PA
ZARXIO 300MCG/0.5ML SYRINGE	4	NDS
ZARXIO 480MCG/0.8ML SYRINGE	4	NDS
ZIEXTENZO 6MG/0.6ML SYRINGE	4	NDS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HEMATOPOIETIC MIXTURES		
<i>ferrex forte cap</i>	1*	
<i>folbee tab</i>	1*	
IRON POLYSACCH/THREONIC ACID/B12/FA CAP	1*	
IRON/VITAMIN C/VITAMIN B12/FOLIC ACID TAB	3*	
MULTIGEN FOLIC TAB	1*	
MULTIGEN PLUS TAB	1*	
MULTIGEN TAB	1*	
<i>tricon cap</i>	1*	
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>tranexamic acid 650mg tab</i>	2	
HYPNOTICS		
BARBITURATE HYPNOTICS		
<i>phenobarbital 4mg/ml oral soln</i>	1	
NON-BARBITURATE HYPNOTICS		
<i>eszopiclone 1mg tab</i>	1	QL=30 Quantity/30 Days
<i>eszopiclone 2mg tab</i>	1	QL=30 Quantity/30 Days
<i>eszopiclone 3mg tab</i>	1	QL=30 Quantity/30 Days
<i>temazepam 15mg cap</i>	1	QL=30 Quantity/30 Days
<i>temazepam 30mg cap</i>	1	QL=30 Quantity/30 Days
<i>zaleplon 10mg cap</i>	1	QL=30 Quantity/30 Days
<i>zaleplon 5mg cap</i>	1	QL=30 Quantity/30 Days
<i>zolpidem tartrate 10mg tab</i>	1	QL=30 Quantity/30 Days
<i>zolpidem tartrate 5mg tab</i>	1	QL=60 Quantity/30 Days
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
<i>phenobarbital 100mg tab</i>	1	
<i>phenobarbital 15mg tab</i>	1	
<i>phenobarbital 16.2mg tab</i>	1	
<i>phenobarbital 30mg tab</i>	1	
<i>phenobarbital 32.4mg tab</i>	1	
<i>phenobarbital 60mg tab</i>	1	
<i>phenobarbital 64.8mg tab</i>	1	
<i>phenobarbital 97.2mg tab</i>	1	
NON-BARBITURATE HYPNOTICS		
<i>triazolam 0.125mg tab</i>	1	QL=30 Quantity/30 Days
<i>triazolam 0.25mg tab</i>	1	QL=60 Quantity/30 Days
<i>zolpidem tartrate 12.5mg er tab</i>	2	QL=30 Quantity/30 Days
<i>zolpidem tartrate 6.25mg er tab</i>	2	QL=30 Quantity/30 Days
OREXIN RECEPTOR ANTAGONISTS		
DAYVIGO 10MG TAB	3	PA QL=30 Quantity/30 Days
DAYVIGO 5MG TAB	3	PA QL=30 Quantity/30 Days
QUVIVIQ 25MG TAB	3	PA QL=30 Quantity/30 Days
QUVIVIQ 50MG TAB	3	PA QL=30 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SELECTIVE MELATONIN RECEPTOR AGONISTS		
<i>ramelteon 8mg tab</i>	2	QL=30 Quantity/30 Days
<i>tasimelteon 20mg cap</i>	4	NDS PA QL=30 Quantity/30 Days
LAXATIVES		
LAXATIVE COMBINATIONS		
GAVILYTE-C ORAL SOLN	\$0	
<i>gavilyte-g powder for oral soln</i>	\$0	
<i>gavilyte-n powder for oral soln</i>	\$0	
<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	\$0	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml prep kit</i>	\$0	
LAXATIVES - MISCELLANEOUS		
<i>constulose 10gm/15ml oral soln</i>	1	
MACROLIDES		
AZITHROMYCIN		
<i>azithromycin 20mg/ml susp</i>	1	
<i>azithromycin 250mg pack</i>	1	
<i>azithromycin 40mg/ml susp</i>	1	
<i>azithromycin 500mg inj</i>	2	
<i>azithromycin 500mg tab</i>	1	
<i>azithromycin 600mg tab</i>	1	
CLARITHROMYCIN		
<i>clarithromycin 250mg tab</i>	1	
CLARITHROMYCIN 25MG/ML SUSP	2	
<i>clarithromycin 500mg er tab</i>	2	
<i>clarithromycin 500mg tab</i>	1	
CLARITHROMYCIN 50MG/ML SUSP	2	
ERYTHROMYCINS		
<i>ery-tab 250mg dr tab</i>	2	
ERYTHROMYCIN 250MG DR CAP	2	
<i>erythromycin 250mg dr cap</i>	2	
<i>erythromycin 250mg tab</i>	2	
<i>erythromycin 333mg dr tab</i>	2	
<i>erythromycin 500mg dr tab</i>	2	
<i>erythromycin 500mg tab</i>	2	
<i>erythromycin ethylsuccinate 40mg/ml susp</i>	2	
<i>erythromycin ethylsuccinate 80mg/ml susp</i>	2	
FIDAXOMICIN		
DIFICID 200MG TAB	2	PA QL=20 Quantity/10 Days
DIFICID 40MG/ML SUSP	2	PA QL=136 Quantity/10 Days
MEDICAL DEVICES		
BANDAGES-DRESSINGS-TAPE		
GAUZE PADS DRESSINGS - PADS 2 X 2	2	
CONTRACEPTIVES		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CERVICAL CAP	\$0*	
DIAPHRAGM	\$0*	
FEMALE CONDOMS	\$0*	QL=12 Quantity/ Per Dispensing
DIABETIC SUPPLIES		
CALIBRATION LIQUID	\$0*	
LANCET DEVICE	\$0*	
LANCET KIT	\$0*	
LANCETS	\$0*	
MISC. DEVICES		
ALCOHOL SWAB 1"x1" (DIABETIC)	\$0	
RESPIRATORY THERAPY SUPPLIES		
PEAK FLOW METER	1*	
MEDICAL DEVICES AND SUPPLIES		
CONTRACEPTIVES		
MALE CONDOMS	\$0*	QL=12 Quantity/ Per Dispensing
DIABETIC SUPPLIES		
ACCU-CHEK AVIVA PLUS METER	\$0*	
ACCU-CHEK GUIDE CARE METER	\$0*	
ACCU-CHEK GUIDE ME KIT	\$0*	
DEXCOM G6 RECEIVER	\$0*	
DEXCOM G6 SENSOR	\$0*	
DEXCOM G6 TRANSMITTER	\$0*	
DEXCOM G7 RECEIVER	\$0*	
DEXCOM G7 SENSOR	\$0*	
FREESTYLE LIBRE 2 RECEIVER	\$0*	
FREESTYLE LIBRE 2 SENSOR	\$0*	
FREESTYLE LIBRE RECEIVER	\$0*	
FREESTYLE LIBRE SENSOR (14-DAY)	\$0*	
ONETOUCH METER	\$0*	
ONETOUCH VERIO FLEX METER	\$0*	
ONETOUCH VERIO REFLECT METER	\$0*	
PARENTERAL THERAPY SUPPLIES		
INSULIN SYRINGE	2	
INSULIN SYRINGE U-500	2	
LANCETS	\$0*	
PEN NEEDLE	2	
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG		
EMGALITY 120MG/ML AUTO-INJECTOR	2	PA QL=2 Quantity/30 Days
EMGALITY 120MG/ML INJ	2	PA QL=2 Quantity/30 Days
MIGRAINE PRODUCTS		
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	2	PA QL=16 Quantity/30 Days
MIGRAINE PRODUCTS - MONOCLONAL ANTIBODIES		
AIMOVIG 140MG/ML AUTO-INJECTOR	2	PA QL=1 Quantity/30 Days
AIMOVIG 70MG/ML AUTO-INJECTOR	2	PA QL=1 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
EMGALITY 100MG/ML INJ	2	PA QL=3 Quantity/30 Days
UBRELVY 100MG TAB	2	PA QL=16 Quantity/30 Days
UBRELVY 50MG TAB	2	PA QL=16 Quantity/30 Days
SEROTONIN AGONISTS		
<i>eletriptan 20mg tab</i>	2	QL=18 Quantity/30 Days
<i>eletriptan 40mg tab</i>	2	QL=18 Quantity/30 Days
<i>naratriptan 1mg tab</i>	2	QL=18 Quantity/30 Days
<i>naratriptan 2.5mg tab</i>	2	QL=18 Quantity/30 Days
REYVOW 100MG TAB	2	PA QL=8 Quantity/30 Days
REYVOW 50MG TAB	2	PA QL=8 Quantity/30 Days
<i>rizatriptan 10mg odt</i>	1	QL=36 Quantity/60 Days
<i>rizatriptan 10mg tab</i>	1	QL=36 Quantity/60 Days
<i>rizatriptan 5mg odt</i>	1	QL=36 Quantity/60 Days
<i>rizatriptan 5mg tab</i>	1	QL=36 Quantity/60 Days
<i>sumatriptan 100mg tab</i>	1	QL=18 Quantity/30 Days
<i>sumatriptan 12mg/ml auto-injector</i>	2	QL=10 Quantity/30 Days
<i>sumatriptan 12mg/ml inj</i>	2	QL=10 Quantity/30 Days
<i>sumatriptan 20mg/act nasal spray</i>	2	QL=12 Quantity/30 Days
<i>sumatriptan 25mg tab</i>	1	QL=18 Quantity/30 Days
<i>sumatriptan 50mg tab</i>	1	QL=18 Quantity/30 Days
<i>sumatriptan 5mg/act nasal spray</i>	2	QL=12 Quantity/30 Days
SUMATRIPTAN 6MG/0.5ML REFILL INJ	2	QL=10 Quantity/30 Days
<i>sumatriptan 8mg/ml cartridge</i>	2	QL=10 Quantity/30 Days
SUMATRIPTAN INJ 4MG/0.5ML REFILL INJ	2	QL=10 Quantity/30 Days
<i>zolmitriptan 2.5mg odt</i>	2	QL=18 Quantity/30 Days
<i>zolmitriptan 2.5mg tab</i>	2	QL=18 Quantity/30 Days
<i>zolmitriptan 5mg nasal spray</i>	2	QL=12 Quantity/30 Days
<i>zolmitriptan 5mg odt</i>	2	QL=18 Quantity/30 Days
<i>zolmitriptan 5mg tab</i>	2	QL=18 Quantity/30 Days
MINERALS & ELECTROLYTES		
ELECTROLYTE MIXTURES		
<i>d2.5w/nacl 0.45% inj</i>	2	
<i>d5w/nacl 5%-0.33% inj</i>	2	
D5W/NACL 5%-0.33% INJ	2	
DEXTROSE 10% W/ SODIUM CHLORIDE 0.2%	2	PA_BvD
DEXTROSE 10% W/ SODIUM CHLORIDE 0.45%	2	PA_BvD
DEXTROSE/SODIUM CHLORIDE 5-0.225% INJ	2	
<i>dextrose/sodium chloride 5%-0.225% inj</i>	2	
<i>electrolyte-148 solution</i>	2	
<i>electrolyte-a solution</i>	2	
GLUCOSE 25MG/ML/SODIUM CHLORIDE 0.0769 MEQ/ML INJ	2	
<i>glucose 50 mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>glucose 50mg/ml/potassium chloride 0.01 meq/ml/sodium chloride 0.0769 meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02 meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02 meq/ml/sodium chloride 0.0342 meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02 meq/ml/sodium chloride 0.154 meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02 meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.03 meq/ml/sodium chloride 0.0769 meq/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 0.0342 meq/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	2	
KCL 40 MEQ/L (0.3%) IN DEXTROSE 5% NACL 0.9% INJ	2	
<i>kcl 40 meq/l (0.3%) in dextrose 5% nacl 0.9% inj</i>	2	
KCL/D5W/LR 0.15% INJ	2	
KCL/D5W/NACL 20MEQ/5%/0.225% INJ	2	
<i>kcl/d5w/nacl 20meq/5%/0.225% inj</i>	2	
KCL/NACL 20MEQ-0.45% INJ	2	
<i>kcl/nacl 40meq/0.9% inj</i>	2	
KCL/NACL INJ 0.02 MEQ/ML/SODIUM CHLORIDE 0.154 MEQ/ML INJ	2	
KCL/NACL INJ 40 MEQ/0.9% INJ	2	
PLASMA-LYTE 148 INJ	2	
PLASMALYTE A INJ	2	
<i>potassium chloride 0.02 meq/ml/sodium chloride 0.0769 meq/ml inj</i>	2	
<i>potassium chloride 0.02 meq/ml/sodium chloride 0.154 meq/ml inj</i>	2	
TPN ELECTROLYTES INJ	2	PA_BvD
FLUORIDE		
NAFRINSE DROPS	\$0*	
<i>sodium fluoride chew tab</i>	\$0*	
<i>sodium fluoride soln</i>	\$0*	
SODIUM FLUORIDE TAB	\$0*	
MAGNESIUM		
<i>magnesium sulfate 500mg/ml inj</i>	2	
PHOSPHATE		
K-PHOS 500MG TAB	2	
K-PHOS NEUTRAL TAB	3*	
<i>phospha 250 neutral tab</i>	1*	
<i>potassium phosphate monobasic 500mg tab</i>	2	
POTASSIUM		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>klor-con 10meq er tab</i>	1	
<i>klor-con 10meq micro er tab</i>	1	
<i>klor-con 20meq powder for oral soln</i>	2	
<i>klor-con 8meq er tab</i>	1	
<i>potassium bicarbonate 25meq effer tab</i>	1	
<i>potassium chloride 1.33meq/ml oral soln</i>	2	
<i>potassium chloride 10meq ER cap</i>	1	
POTASSIUM CHLORIDE 10MEQ INJ	2	
<i>potassium chloride 10meq inj</i>	2	
<i>potassium chloride 10meq/50ml inj</i>	2	
POTASSIUM CHLORIDE 10MEQ/50ML INJ	2	
<i>potassium chloride 15meq micro 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 inj</i>	2	
<i>potassium chloride 20meq micro er tab</i>	1	
POTASSIUM CHLORIDE 20MEQ/100ML INJ	2	
<i>potassium chloride 20meq/100ml inj</i>	2	
<i>potassium chloride 2meq/ml (20ml) inj</i>	2	
<i>potassium chloride 40meq inj</i>	2	
POTASSIUM CHLORIDE 40MEQ INJ	2	
<i>potassium chloride 8meq er cap</i>	1	
POTASSIUM CHLORIDE 8MEQ ER TAB	1	
SODIUM		
<i>sodium chloride 2.5meq/ml inj</i>	2	
<i>sodium chloride 23.4% inj</i>	2	
<i>sodium chloride 30mg/ml inj</i>	2	
<i>sodium chloride 4.5mg/ml inj</i>	2	
<i>sodium chloride 50mg/ml inj</i>	2	
SODIUM CHLORIDE 9MG/ML INJ	2	
<i>sodium chloride 9mg/ml inj</i>	2	
ZINC		
GALZIN CAP	2*	
<i>zinc sulfate cap</i>	1*	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
<i>penicillamine 250mg tab</i>	2	
<i>trientine 250mg cap</i>	2	PA
IMMUNOMODULATORS		
<i>lenalidomide 10mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>lenalidomide 15mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>lenalidomide 2.5mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>lenalidomide 20mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>lenalidomide 25mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>lenalidomide 5mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
REVLIMID 10MG CAP	4	LD NDS PA_NSO QL=30 Quantity/30 Days
REVLIMID 15MG CAP	4	LD NDS PA_NSO QL=30 Quantity/30 Days
REVLIMID 2.5MG CAP	4	LD NDS PA_NSO QL=30 Quantity/30 Days
REVLIMID 20MG CAP	4	LD NDS PA_NSO QL=30 Quantity/30 Days
REVLIMID 25MG CAP	4	LD NDS PA_NSO QL=30 Quantity/30 Days
REVLIMID 5MG CAP	4	LD NDS PA_NSO QL=30 Quantity/30 Days
REZUROCK 200MG TAB	4	LD NDS PA QL=30 Quantity/30 Days
IMMUNOSUPPRESSIVE AGENTS		
ENSPRYNG 120MG/ML SYRINGE	4	NDS PA QL=2 Quantity/28 Days
<i>everolimus 0.25mg tab</i>	2	PA_BvD
<i>everolimus 0.5mg tab</i>	2	PA_BvD
<i>everolimus 0.75mg tab</i>	2	PA_BvD
<i>everolimus 1mg tab</i>	2	PA_BvD
LUPKYNIS 7.9MG CAP	4	LD NDS PA QL=180 Quantity/30 Days
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	3	PA_BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	3	PA_BvD
<i>sirolimus 1mg/ml oral soln</i>	2	PA_BvD
POTASSIUM REMOVING AGENTS		
LOKELMA 10GM POWDER FOR ORAL SUSP	2	PA
LOKELMA 5GM POWDER FOR ORAL SUSP	2	PA
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA 200MG/ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
BENLYSTA 200MG/ML SYRINGE	4	NDS PA QL=4 Quantity/28 Days
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
FIRST MOUTHWASH BLM SUSP	3*	
<i>lidocaine 2% topical soln</i>	1	
LIDOCAINE 4% ORAL SOLN	1	QL=50 Quantity/30 Days
ANTI-INFECTIVES - THROAT		
<i>clotrimazole 10mg lozenge</i>	1	
<i>nystatin 100000unit/ml susp</i>	1	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate 0.12% mouthwash</i>	1	
DENTAL PRODUCTS		
PREVIDENT 5000 BOOSTER PASTE	2*	
PREVIDENT 5000 DRY MOUTH GEL	2*	
PREVIDENT 5000 PASTE	1*	
PREVIDENT 5000 PASTE	2*	
PREVIDENT 5000 PLUS CREAM	\$0*	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PREVIDENT RINSE	2*	
<i>sodium fluoride cream</i>	\$0*	
<i>sodium fluoride gel</i>	1*	
<i>sodium fluoride paste</i>	1*	
<i>sodium fluoride rinse</i>	1*	
<i>sodium fluoride/potassium nitrate paste</i>	1*	
STEROIDS - MOUTH/THROAT		
<i>triamcinolone acetonide 0.1% oral paste</i>	1	
THROAT PRODUCTS - MISC.		
<i>cevimeline 30mg cap</i>	2	
<i>pilocarpine 5mg tab</i>	1	
<i>pilocarpine 7.5mg tab</i>	1	
MULTIVITAMINS		
B-COMPLEX W/ FOLIC ACID		
DIALYVITE TAB	1*	
<i>dialyvite tab</i>	1*	
DIALYVITE/ZINC TAB	1*	
FOLBEE PLUS CZ TAB	1*	
<i>renaphro cap</i>	1*	
MULTIPLE VITAMINS W/ MINERALS		
<i>multivitamin/minerals tab</i>	1*	
V-C FORTE CAP	3*	
<i>v-c forte cap</i>	3*	
PED MULTI VITAMINS W/FL & FE		
ESCAVITE CHEW TAB	3*	
<i>pediatric multiple vitamins/fluoride/iron soln</i>	1*	
PED MV W/ FLUORIDE		
FLORIVA PLUS DROPS	2*	
MULTI-VITAMIN/FLOURIDE 0.25MG CHEW TAB	1*	
MULTI-VITAMIN/FLOURIDE 0.5MG CHEW TAB	1*	
MULTI-VITAMIN/FLOURIDE 1MG CHEW TAB	1*	
<i>pediatric multiple vitamins/fluoride soln</i>	1*	
QUFLORA PEDIATRIC CHEW TAB	3*	
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen 10mg tab</i>	1	
<i>baclofen 20mg tab</i>	1	
<i>baclofen 5mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	
<i>chlorzoxazone 500mg tab</i>	2	
<i>cyclobenzaprine 10mg tab</i>	1	
<i>cyclobenzaprine 5mg tab</i>	1	
<i>metaxalone 800mg tab</i>	2	
<i>methocarbamol 500mg tab</i>	1	
<i>methocarbamol 750mg tab</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>orphenadrine citrate 100mg er tab</i>	1	
<i>tizanidine 2mg cap</i>	2	
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg cap</i>	2	
<i>tizanidine 4mg tab</i>	1	
<i>tizanidine 6mg cap</i>	2	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium 100mg cap</i>	2	
<i>dantrolene sodium 25mg cap</i>	2	
<i>dantrolene sodium 50mg cap</i>	2	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.137mg/act nasal inhaler</i>	1	
<i>olopatadine 0.665mg/act nasal inhaler</i>	2	
NASAL ANTICHOLINERGICS		
<i>ipratropium 0.03% nasal spray</i>	1	
<i>ipratropium 0.06% nasal spray</i>	1	
NASAL STEROIDS		
<i>flunisolide 25mcg/act nasal inhaler</i>	2	QL=2 Quantity/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	1	QL=2 Quantity/30 Days
NEUROMUSCULAR AGENTS		
ALS AGENTS		
<i>RADICAVA 105MG/5ML SUSP</i>	4	LD NDS PA QL=70 Quantity/28 Days
<i>RELYVRIO 3-1GM POWDER PACK</i>	4	LD NDS PA QL=56 Quantity/28 Days
<i>riluzole 50mg tab</i>	2	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
<i>EVRYSDI 0.75MG/ML ORAL SOLN</i>	4	LD NDS PA QL=200 Quantity/30 Days
NUTRIENTS		
CARBOHYDRATES		
<i>glucose 100mg/ml inj</i>	2	PA_BvD
<i>glucose 50mg/ml inj</i>	2	
LIPIDS		
<i>DOJOLVI 100% ORAL SOLN</i>	4	LD NDS PA
<i>INTRALIPID 20GM/100ML INJ</i>	2	PA_BvD
<i>INTRALIPID 30GM/100ML INJ</i>	3	PA_BvD
<i>NUTRILIPID 20GM/100ML INJ</i>	2	PA_BvD
PROTEINS		
<i>AMINOSYN-PF 7% INJ</i>	3	PA_BvD
<i>CLINIMIX 4.25/10 INJ</i>	2	PA_BvD
<i>CLINIMIX 4.25/5 INJ</i>	2	PA_BvD
<i>CLINIMIX 5/15 INJ</i>	2	PA_BvD
<i>CLINIMIX 5/20 INJ</i>	2	PA_BvD
<i>CLINIMIX E 2.75/5 INJ</i>	2	PA_BvD
<i>CLINIMIX E 4.25/10 INJ</i>	2	PA_BvD
<i>CLINIMIX E 4.25/5 INJ</i>	2	PA_BvD

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CLINIMIX E 5/15 INJ	2	PA_BvD
CLINIMIX E 5/20 INJ	2	PA_BvD
<i>clinisol 15% inj</i>	2	PA_BvD
PROSOL 20% INJ	3	PA_BvD
TRAVASOL 10% INJ	3	PA_BvD
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPTHALMIC		
BETAXOLOL 0.5% OPTH SOLN	1	
<i>betaxolol 0.5% opth soln</i>	1	
<i>brimonidine tartrate/timolol maleate 0.2-0.5% opth soln</i>	2	
CARTEOLOL 1% OPTH SOLN	1	
<i>dorzolamide/timolol 22.3-6.8mg/ml opth soln</i>	1	
<i>dorzolamide/timolol 22.3-6.8mg/ml opth soln (preservative-free)</i>	1	
LEVOBUNOLOL 0.5% OPTH SOLN	1	
<i>timolol 0.25% opth gel</i>	2	
<i>timolol 0.25% opth soln</i>	1	
<i>timolol 0.5% (pf) opth soln</i>	2	
<i>timolol 0.5% opth gel</i>	2	
<i>timolol 0.5% opth soln</i>	1	
<i>timolol maleate 0.25% preservative free opth soln</i>	2	
CYCLOPLEGIC MYDRIATICS		
ATROPINE SULFATE 1% OPTH SOLN	2	
<i>atropine sulfate 1% opth soln</i>	2	
HOMATROPINE OPTH SOLN	2*	
MIOTICS		
PHOSPHOLINE IODIDE 0.125% OPTH SOLN	3	
<i>pilocarpine 1% opth soln</i>	1	
<i>pilocarpine 2% opth soln</i>	1	
<i>pilocarpine 4% opth soln</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
APRACLONIDINE 0.5% OPTH SOLN	2	
<i>apraclonidine 0.5% opth soln</i>	2	
<i>brimonidine 0.1% opth soln</i>	2	
<i>brimonidine tartrate 0.15% opth soln</i>	2	
<i>brimonidine tartrate 0.2% opth soln</i>	1	
SIMBRINZA 0.2-1% OPTH SUSP	2	
OPHTHALMIC ANTI-INFECTIVES		
BACITRACIN 0.5UNIT/MG OPTH OINTMENT	2	
<i>bacitracin/polymyxin B 3.5gm opth ointment</i>	1	QL=7 Quantity/7 Days
<i>ciprofloxacin 0.3% opth soln</i>	1	QL=60 Quantity/30 Days
<i>erythromycin 0.5% opth ointment</i>	1	QL=7 Quantity/7 Days
<i>gentamicin 0.3% opth soln</i>	1	QL=10 Quantity/7 Days
<i>moxifloxacin 0.5% opth soln</i>	1	QL=2 Quantity/7 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MOXIFLOXACIN 0.5% OPHTH SOLN	1	QL=6 Quantity/7 Days
NATACYN 5% OPHTH SUSP	2	QL=1 Quantity/7 Days
<i>neomycin/bacitracin/polymyxin ophthalm ointment 5(3.5)mg-400unit-10000unit</i>	1	QL=7 Quantity/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	1	QL=1 Quantity/7 Days
<i>ofloxacin 0.3% ophthalm soln</i>	1	QL=60 Quantity/30 Days
<i>polymyxin B/trimethoprim 10000unit/ml-0.1% ophthalm soln</i>	1	QL=1 Quantity/7 Days
<i>sulfacetamide sodium 10% ophthalm soln</i>	1	QL=15 Quantity/7 Days
<i>tobramycin 0.3% ophthalm soln</i>	1	QL=12 Quantity/30 Days
TRIFLURIDINE 1% OPHTH SOLN	2	QL=2 Quantity/7 Days
OPHTHALMIC IMMUNOMODULATORS		
<i>cyclosporine 0.05% ophthalm emulsion</i>	2	QL=60 Quantity/30 Days
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPHTH SOLN	2	QL=2 Quantity/30 Days
ROCKLATAN 0.05-0.2MG/ML OPHTH SOLN	2	QL=2 Quantity/30 Days
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE 0.002% OPHTH SOLN	4	LD NDS PA QL=112 Quantity/365 Days
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	2	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophthalm ointment</i>	1	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophthalm susp</i>	1	
<i>dexamethasone/tobramycin 0.3-0.1% ophthalm susp</i>	1	
<i>difluprednate 0.05% ophthalm emulsion</i>	2	
<i>fluorometholone 0.1% ophthalm susp</i>	1	
LOTEPREDNOL ETABONATE 0.5% OPHTH GEL	2	
<i>loteprednol etabonate 0.5% ophthalm gel</i>	2	
<i>loteprednol etabonate 0.5% ophthalm susp</i>	2	
<i>neomycin/polymyxin/bacitracin/hydrocortisone 1% ophthalm ointment</i>	1	
PREDNISOLONE 1% OPHTH SOLN	1	
PREDNISOLONE ACETATE 1% OPHTH SUSP	1	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN	1	
TOBRADEX 0.1-0.3% OPHTH OINTMENT	2	
OPHTHALMICS - MISC.		
<i>azelastine 0.05% ophthalm soln</i>	1	
<i>brinzolamide 1% ophthalm susp</i>	2	
<i>bromfenac 0.09% ophthalm soln</i>	2	QL=6.80 Quantity/365 Days
<i>cromolyn sodium 4% ophthalm soln</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CROMOLYN SODIUM 4% OPHTH SOLN	1	
CYSTADROPS 0.37% OPHTH SOLN	4	LD NDS PA QL=4 Quantity/28 Days
CYSTARAN 0.44% OPHTH SOLN	4	LD NDS PA QL=60 Quantity/28 Days
<i>diclofenac sodium 0.1% ophth soln</i>	1	QL=20 Quantity/365 Days
<i>dorzolamide 2% ophth soln</i>	1	
<i>epinastine 0.05% ophth soln</i>	2	
FLURBIPROFEN SODIUM 0.03% OPHTH SOLN	2	
ILEVRO 0.3% OPHTH SUSP	2	QL=12 Quantity/365 Days
<i>ketorolac tromethamine 0.4% ophth soln</i>	1	QL=20 Quantity/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	1	
<i>olopatadine 0.1% ophth soln</i>	1	
PROLENSA 0.07% OPHTH SOLN	2	QL=12 Quantity/365 Days
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03% ophth soln</i>	2	QL=5 Quantity/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 Quantity/30 Days
LUMIGAN 0.01% OPHTH SOLN	2	QL=5 Quantity/30 Days
<i>tafluprost 0.0015% preservative free (pf) ophth soln</i>	2	ST QL=30 Quantity/30 Days
<i>travoprost 0.004% ophth soln</i>	2	QL=5 Quantity/30 Days
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2% otic soln</i>	1	
OTIC ANTI-INFECTIVES		
CIPROFLOXACIN 0.2% OTIC SOLN	2	
<i>ofloxacin 0.3% otic soln</i>	1	
OTIC COMBINATIONS		
CIPRO HC 0.2-1% OTIC SUSP	3	
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	2	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	1	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	1	
OTIC STEROIDS		
ACETASOL HC 1-2% OTIC SOLN	1	
<i>acetic acid/hydrocortisone 1-2% otic soln</i>	1	
<i>fluocinolone acetonide 0.01% otic soln</i>	2	
PASSIVE IMMUNIZING AGENTS		
IMMUNE SERUMS		
BIVIGAM 5GM/50ML INJ	4	NDS PA
FLEBOGAMMA 0.5GM/10ML INJ	4	NDS PA
GAMMAGARD 10GM INJ	4	NDS PA
GAMMAGARD 10GM/100ML INJ	4	NDS PA
GAMMAGARD 2.5GM/25ML INJ	4	NDS PA
GAMMAGARD 20GM/200ML INJ	4	NDS PA
GAMMAGARD 30GM/300ML INJ	4	NDS PA
GAMMAGARD 5GM INJ	4	NDS PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GAMMAGARD 5GM/50ML INJ	4	NDS PA
GAMMAKED 1GM/10ML INJ	4	NDS PA
GAMMAPLEX 10GM/100ML INJ	4	NDS PA
GAMMAPLEX 10GM/200ML INJ	4	NDS PA
GAMMAPLEX 20GM/400ML INJ	4	NDS PA
GAMUNEX-C 40GM/400ML INJ	4	NDS PA
OCTAGAM 1GM/20ML INJ	4	NDS PA
OCTAGAM 2.5GM/50ML INJ	4	NDS PA
OCTAGAM 25GM/500ML INJ	4	NDS PA
OCTAGAM 2GM/20ML INJ	4	NDS PA
OCTAGAM 30GM/300ML INJ	4	NDS PA
OCTAGAM 5GM/100ML INJ	4	NDS PA
PRIVIGEN 20GM/200ML INJ	4	NDS PA
PRIVIGEN 40GM/400ML INJ	4	NDS PA
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
PANZYGA 10GM/100ML INJ	4	NDS PA
PANZYGA 1GM/10ML INJ	4	NDS PA
PANZYGA 2.5GM/25ML INJ	4	NDS PA
PANZYGA 20GM/200ML INJ	4	NDS PA
PANZYGA 30GM/300ML INJ	4	NDS PA
PANZYGA 5GM/50ML INJ	4	NDS PA
PENICILLINS		
AMINOPENICILLINS		
AMOXICILLIN 125MG CHEW TAB	1	
<i>amoxicillin 250mg cap</i>	1	
AMOXICILLIN 250MG CHEW TAB	1	
<i>amoxicillin 25mg/ml susp</i>	1	
<i>amoxicillin 40mg/ml susp</i>	1	
<i>amoxicillin 500mg cap</i>	1	
<i>amoxicillin 500mg tab</i>	1	
<i>amoxicillin 50mg/ml susp</i>	1	
<i>amoxicillin 80mg/ml susp</i>	1	
<i>amoxicillin 875mg tab</i>	1	
<i>ampicillin 1000mg inj</i>	2	
<i>ampicillin 100mg/ml inj</i>	2	
AMPICILLIN 125MG INJ	2	
<i>ampicillin 250mg inj</i>	2	
<i>ampicillin 2gm inj</i>	2	
AMPICILLIN 2GM INJ	2	
AMPICILLIN 500MG CAP	1	
<i>ampicillin 500mg inj</i>	2	
AMPICILLIN SODIUM 1GM INJ	2	
NATURAL PENICILLINS		
BICILLIN L-A 1200000UNIT/2ML INJ	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BICILLIN L-A 2400000UNIT/4ML INJ	2	
BICILLIN L-A 600000UNIT/ML INJ	2	
<i>penicillin g potassium 1000000unit/ml inj</i>	2	
PENICILLIN G POTASSIUM 40000UNIT/ML INJ	2	
PENICILLIN G POTASSIUM 60000UNIT/ML INJ	2	
PENICILLIN G SODIUM 100000UNIT/ML INJ	2	
<i>penicillin gk 5000000unit inj</i>	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 120-8.58mg/ml susp</i>	1	
AMOXICILLIN/CLAVULANATE 200-28.5MG CHEW TAB	1	
<i>amoxicillin/clavulanate 250-125mg tab</i>	1	
<i>amoxicillin/clavulanate 40-5.7mg/ml susp</i>	1	
AMOXICILLIN/CLAVULANATE 400-57MG CHEW TAB	1	
<i>amoxicillin/clavulanate 50-12.5mg/ml susp</i>	1	
<i>amoxicillin/clavulanate 500-125mg tab</i>	1	
<i>amoxicillin/clavulanate 80-11.4mg/ml susp</i>	1	
<i>amoxicillin/clavulanate 875-125mg tab</i>	1	
AMOXICILLIN/K CLAVULANATE 1000-62.5MG ER TAB	3	
AMPICILLIN/SULBACTAM 1.5GM INJ	2	
<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	
AMPICILLIN/SULBACTAM 3GM INJ	2	
<i>piperacillin/tazobactam 12-1.5gm inj</i>	2	
<i>piperacillin/tazobactam 200-25mg/ml inj</i>	2	
<i>piperacillin/tazobactam 2000-250mg inj</i>	2	
<i>piperacillin/tazobactam 3000-375mg inj</i>	2	
<i>piperacillin/tazobactam 4000-500mg inj</i>	2	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	
NAFCILLIN 1000MG INJ	2	
<i>nafcillin 1000mg inj</i>	2	
<i>nafcillin 100mg/ml inj</i>	2	
NAFCILLIN 1GM INJ	2	
NAFCILLIN 2000MG INJ	2	
<i>nafcillin 2000mg inj</i>	2	
NAFCILLIN 2GM INJ	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>oxacillin 1000mg inj</i>	2	
<i>oxacillin 100mg/ml inj</i>	2	
<i>oxacillin 2000mg inj</i>	2	
OXACILLIN 20MG/ML INJ	2	
OXACILLIN 40MG/ML INJ	2	
PHARMACEUTICAL ADJUVANTS		
SEMI SOLID VEHICLES		
POLYETHYLENE GLYCOL 8000 GRANULES	2*	
PROGESTINS		
PROGESTINS		
<i>medroxyprogesterone acetate 10mg tab</i>	1	
<i>medroxyprogesterone acetate 2.5mg tab</i>	1	
<i>medroxyprogesterone acetate 5mg tab</i>	1	
<i>megestrol acetate 125mg/ml susp</i>	2	PA
<i>norethindrone acetate 5mg tab</i>	1	
<i>progesterone 100mg cap</i>	1	
<i>progesterone 200mg cap</i>	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium 333mg dr tab</i>	2	
<i>disulfiram 250mg tab</i>	1	
<i>disulfiram 500mg tab</i>	1	
LUCEMYRA 0.18MG TAB	3	PA QL=192 Quantity/14 Days
ANTI-CATAPLECTIC AGENTS		
LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	4	LD NDS PA QL=30 Quantity/30 Days
LUMRYZ 6GM GRANULES FOR ORAL SUSP	4	LD NDS PA QL=30 Quantity/30 Days
LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	4	LD NDS PA QL=30 Quantity/30 Days
LUMRYZ 9GM GRANULES FOR ORAL SUSP	4	LD NDS PA QL=30 Quantity/30 Days
SODIUM OXYBATE 500MG/ML ORAL SOLN, XYREM 500MG/ML ORAL SOLN	4	LD NDS PA QL=540 Quantity/30 Days
XYWAV 0.5GM/ML ORAL SOLN	4	LD NDS PA QL=540 Quantity/30 Days
ANTIDEMENTIA AGENTS		
<i>donepezil 10mg odt</i>	1	QL=30 Quantity/30 Days
<i>donepezil 10mg tab</i>	1	
<i>donepezil 23mg tab</i>	2	QL=30 Quantity/30 Days
<i>donepezil 5mg odt</i>	1	QL=30 Quantity/30 Days
<i>donepezil 5mg tab</i>	1	
<i>galantamine 12mg tab</i>	1	
<i>galantamine 4mg tab</i>	1	
<i>galantamine 8mg tab</i>	1	
<i>galantamine hydrobromide 16mg er cap</i>	2	
<i>galantamine hydrobromide 24mg er cap</i>	2	
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	2	
<i>galantamine hydrobromide 8mg er cap</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>memantine 10mg tab</i>	1	
<i>memantine 10mg/5mg pack</i>	1	
<i>memantine 14mg er cap</i>	2	
<i>memantine 21mg er cap</i>	2	
<i>memantine 28mg er cap</i>	2	
<i>memantine 2mg/ml oral soln</i>	2	
<i>memantine 5mg tab</i>	1	
<i>memantine 7mg er cap</i>	2	
<i>rivastigmine 1.5mg cap</i>	1	
<i>rivastigmine 13.3mg/24hr patch</i>	2	
<i>rivastigmine 3mg cap</i>	1	
<i>rivastigmine 4.5mg cap</i>	1	
<i>rivastigmine 4.6mg/24hr patch</i>	2	
<i>rivastigmine 6mg cap</i>	1	
<i>rivastigmine 9.5mg/24hr patch</i>	2	
FIBROMYALGIA AGENTS		
SAVELLA 100MG TAB	2	QL=60 Quantity/30 Days
SAVELLA 12.5MG TAB	2	QL=60 Quantity/30 Days
SAVELLA 25MG TAB	2	QL=60 Quantity/30 Days
SAVELLA 4-WEEK TITRATION PACK	2	
SAVELLA 50MG TAB	2	QL=60 Quantity/30 Days
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12MG ER TAB	4	NDS PA QL=60 Quantity/30 Days
AUSTEDO 12MG TAB	4	NDS PA QL=120 Quantity/30 Days
AUSTEDO 24MG ER TAB	4	NDS PA QL=60 Quantity/30 Days
AUSTEDO 6-12-24MG XR TAB TITRATION PACK	4	NDS PA QL=42 Quantity/28 Days
AUSTEDO 6MG ER TAB	4	NDS PA QL=90 Quantity/30 Days
AUSTEDO 6MG TAB	4	NDS PA QL=120 Quantity/30 Days
AUSTEDO 9MG TAB	4	NDS PA QL=120 Quantity/30 Days
INGREZZA 40MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
INGREZZA 60MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
INGREZZA 80MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
INGREZZA CAP PACK	4	LD NDS PA QL=28 Quantity/28 Days
<i>tetrabenazine 12.5mg tab</i>	1	PA
<i>tetrabenazine 25mg tab</i>	1	PA
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	4	NDS
AVONEX 30MCG/0.5ML SYRINGE	4	NDS
<i>dalfampridine 10mg er tab</i>	1	QL=60 Quantity/30 Days
<i>dimethyl fumarate 120mg dr cap</i>	1	
<i>dimethyl fumarate 120mg/dimethyl fumarate 240mg pack</i>	1	
<i>dimethyl fumarate 240mg dr cap</i>	1	
EXTAVIA 0.3MG INJ	4	NDS
<i>fingolimod 0.5mg cap</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>glatiramer acetate 20mg/ml syringe</i>	1	
<i>glatiramer acetate 40mg/ml syringe</i>	1	
KESIMPTA 20MG/0.4ML PEN INJ	4	NDS
MAVENCLAD 10 TABLET PACK 10MG	4	LD NDS
MAVENCLAD 4 TABLET PACK 10MG	4	LD NDS
MAVENCLAD 5 TABLET PACK 10MG	4	LD NDS
MAVENCLAD 6 TABLET PACK 10MG	4	LD NDS
MAVENCLAD 7 TABLET PACK 10MG	4	LD NDS
MAVENCLAD 8 TABLET PACK 10MG	4	LD NDS
MAVENCLAD 9 TABLET PACK 10MG	4	LD NDS
MAYZENT 0.25MG STARTER PACK	4	NDS
MAYZENT 0.25MG TAB	4	NDS
MAYZENT 1MG TAB	4	NDS
MAYZENT 2MG TAB	4	NDS
MAYZENT STARTER PACK (7)	2	
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	4	NDS
PLEGRIDY 125MCG/0.5ML SYRINGE	4	NDS
PLEGRIDY IM 125MCG/0.5ML INJ	4	NDS
PLEGRIDY INJ STARTER PACK	4	NDS
PLEGRIDY PEN STARTER PACK	4	NDS
REBIF 22MCG/0.5ML AUTO-INJECTOR	4	NDS
REBIF 22MCG/0.5ML INJ	4	NDS
REBIF 44MCG/0.5ML AUTO-INJECTOR	4	NDS
REBIF 44MCG/0.5ML INJ	4	NDS
REBIF REBIDOSE PACK	4	NDS
REBIF TITRATION PACK	4	NDS
<i>teriflunomide 14mg tab</i>	1	
<i>teriflunomide 7mg tab</i>	1	
ZEPOSIA 0.92MG CAP	4	NDS PA
ZEPOSIA 28-DAY STARTER KIT	4	NDS PA
ZEPOSIA 7-DAY STARTER PACK	4	NDS PA
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUEDEXTA 20-10MG CAP	2	PA QL=60 Quantity/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
ERGOLOID MESYLATES USP 1MG TAB	3	
PIMOZIDE 1MG TAB	2	
PIMOZIDE 2MG TAB	2	
SMOKING DETERRENENTS		
<i>bupropion 150mg sr tab</i>	\$0	
COMMIT LOZENGE	\$0*	
NICORETTE CQ PATCH	\$0*	
NICORETTE GUM	\$0*	
<i>nicotine gum</i>	\$0*	
<i>nicotine lozenge</i>	\$0*	
<i>nicotine patch</i>	\$0*	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
NICOTINE PATCH KIT	\$0*	
NICOTROL 10MG INH SOLN	\$0	
NICOTROL 10MG/ML NASAL INHALER	\$0	
VARENICLINE 0.5MG TAB	\$0	
<i>varenicline 0.5mg/1mg first month pack</i>	\$0	
VARENICLINE 1MG TAB	\$0	
<i>varenicline tartrate 0.5mg tab</i>	\$0	
<i>varenicline tartrate 1mg tab</i>	\$0	
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
ARALAST NP 500MG INJ	4	NDS PA
GLASSIA 1000MG/50ML INJ	4	NDS PA
PROLASTIN-C 1000MG INJ	4	NDS PA
ZEMAIRA 1000MG INJ	4	NDS PA
CYSTIC FIBROSIS AGENTS		
BRONCHITOL 40MG INH POWDER	4	NDS PA QL=560 Quantity/28 Days
KALYDECO 13.4MG GRANULES	4	LD NDS PA QL=56 Quantity/28 Days
KALYDECO 150MG TAB	4	LD NDS PA QL=60 Quantity/30 Days
KALYDECO 25MG GRANULES	4	LD NDS PA QL=60 Quantity/30 Days
KALYDECO 50MG GRANULES	4	LD NDS PA QL=60 Quantity/30 Days
KALYDECO 75MG GRANULES	4	LD NDS PA QL=60 Quantity/30 Days
ORKAMBI 125-100MG GRANULES	4	LD NDS PA QL=60 Quantity/30 Days
ORKAMBI 125-100MG TAB	4	LD NDS PA QL=120 Quantity/30 Days
ORKAMBI 125-200MG TAB	4	LD NDS PA QL=120 Quantity/30 Days
ORKAMBI 188-150MG GRANULES	4	LD NDS PA QL=60 Quantity/30 Days
ORKAMBI 94-75MG GRANULES	4	LD NDS PA QL=56 Quantity/28 Days
PULMOZYME 1MG/ML INH SOLN	4	NDS PA_BvD QL=150 Quantity/30 Days
SYMDEKO 50-75MG/75MG PACK	4	LD NDS PA QL=60 Quantity/30 Days
SYMDEKO TAB 4-WEEK PACK	4	LD NDS PA QL=60 Quantity/30 Days
TRIKAFTA 100-50-75MG/150MG PACK	4	LD NDS PA QL=90 Quantity/30 Days
TRIKAFTA 100-50-75MG/75MG GRANULES PACK	4	LD NDS PA QL=56 Quantity/28 Days
TRIKAFTA 50-37.5-25MG/75MG TAB PACK	4	LD NDS PA QL=84 Quantity/28 Days
TRIKAFTA 80-40-60MG/59.5MG GRANULES PACK	4	LD NDS PA QL=56 Quantity/28 Days
PULMONARY FIBROSIS AGENTS		
OFEV 100MG CAP	4	LD NDS PA QL=60 Quantity/30 Days
OFEV 150MG CAP	4	LD NDS PA QL=60 Quantity/30 Days
<i>pirfenidone 267mg cap</i>	1	PA QL=270 Quantity/30 Days
<i>pirfenidone 267mg tab</i>	1	PA QL=270 Quantity/30 Days
<i>pirfenidone 801mg tab</i>	1	PA QL=90 Quantity/30 Days
SULFONAMIDES		
SULFONAMIDES		
<i>sulfadiazine 500mg tab</i>	2	
SULFADIAZINE 500MG TAB	2	
TETRACYCLINES		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
AMINOMETHYLCYCLINES		
NUZYRA 150MG TAB	4	LD NDS PA QL=30 Quantity/14 Days
GLYCYLCYCLINES		
TIGECYCLINE 50MG INJ	4	NDS
<i>tigecycline 50mg inj</i>	4	NDS
TETRACYCLINES		
<i>demeclocycline 150mg tab</i>	2	
<i>demeclocycline 300mg tab</i>	2	
<i>doxy 100mg inj</i>	2	
<i>doxycycline hyclate 100mg cap</i>	1	
<i>doxycycline hyclate 100mg tab</i>	1	
<i>doxycycline hyclate 20mg tab</i>	1	
<i>doxycycline hyclate 50mg cap</i>	1	
<i>doxycycline monohydrate 100mg tab</i>	1	
<i>doxycycline monohydrate 50mg cap</i>	1	
<i>doxycycline monohydrate 50mg tab</i>	1	
<i>doxycycline monohydrate 5mg/ml susp</i>	2	
<i>minocycline 100mg cap</i>	1	
<i>minocycline 100mg tab</i>	2	
<i>minocycline 50mg cap</i>	1	
<i>minocycline 50mg tab</i>	2	
<i>minocycline 75mg cap</i>	1	
<i>minocycline 75mg tab</i>	2	
<i>mondoxyne 100mg cap</i>	1	
<i>tetracycline 250mg cap</i>	2	
<i>tetracycline 500mg cap</i>	2	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole 10mg tab</i>	1	
<i>methimazole 5mg tab</i>	1	
<i>propylthiouracil 50mg tab</i>	1	
THYROID HORMONES		
ARMOUR THYROID 120MG TAB	1	
ARMOUR THYROID 15MG TAB	1	
ARMOUR THYROID 30MG TAB	1	
ARMOUR THYROID 60MG TAB	1	
ARMOUR THYROID 90MG TAB	1	
<i>levothyroxine 100mcg tab</i>	1	
<i>levothyroxine 112mcg tab</i>	1	
<i>levothyroxine 125mcg tab</i>	1	
<i>levothyroxine 137mcg tab</i>	1	
<i>levothyroxine 150mcg tab</i>	1	
<i>levothyroxine 175mcg tab</i>	1	
<i>levothyroxine 200mcg tab</i>	1	
<i>levothyroxine 25mcg 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.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>levothyroxine 300mcg tab</i>	1	
<i>levothyroxine 50mcg tab</i>	1	
<i>levothyroxine 75mcg tab</i>	1	
<i>levothyroxine 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	1	
<i>liothyronine sodium 50mcg tab</i>	1	
<i>liothyronine sodium 5mcg tab</i>	1	
SYNTHROID 100MCG TAB	3	
SYNTHROID 112MCG TAB	3	
SYNTHROID 125MCG TAB	3	
SYNTHROID 137MCG TAB	3	
SYNTHROID 150MCG TAB	3	
SYNTHROID 175MCG TAB	3	
SYNTHROID 200MCG TAB	3	
SYNTHROID 25MCG TAB	3	
SYNTHROID 300MCG TAB	3	
SYNTHROID 50MCG TAB	3	
SYNTHROID 75MCG TAB	3	
SYNTHROID 88MCG TAB	3	
<i>thyroid 120mg tab</i>	1	
<i>thyroid 15mg tab</i>	1	
THYROID 180MG TAB	1	
THYROID 240MG TAB	1	
THYROID 300MG TAB	1	
<i>thyroid 30mg tab</i>	1	
<i>thyroid 60mg tab</i>	1	
THYROID 65MG TAB	1	
<i>thyroid 90mg tab</i>	1	
TOXOIDS		
TOXOID COMBINATIONS		
ADACEL INJ	\$0	VAC
BOOSTRIX INJ	\$0	VAC
DAPTACEL INJ	\$0	
DIPHtheria/TETANUS TOXOID INJ	\$0	PA_BvD
INFANRIX INJ	\$0	
KINRIX INJ	\$0	
KINRIX PF INJ	\$0	
PEDIARIX INJ	\$0	
PENTACEL INJ	\$0	
TDVAX 4-4UNIT/ML INJ	\$0	PA_BvD VAC
TENIVAC 4-10UNIT/ML INJ	\$0	PA_BvD VAC
VAXELIS INJ	\$0*	VAC
ULCER DRUGS		
ANTISPASMODICS		
ANASPAZ TAB	3*	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BELLADONNA ALKALOID/OPIUM SUPP	2*	
<i>dicyclomine 10mg cap</i>	1	
<i>dicyclomine 20mg tab</i>	1	
<i>dicyclomine 2mg/ml oral soln</i>	2	
<i>glycopyrrolate 1mg tab</i>	2	
<i>glycopyrrolate 2mg tab</i>	2	
<i>hyoscyamine sulfate CR tab</i>	1*	
<i>hyoscyamine sulfate elixir</i>	1*	
<i>hyoscyamine sulfate ODT</i>	1*	
<i>hyoscyamine sulfate SL tab</i>	1*	
<i>hyoscyamine sulfate tab</i>	1*	
LEVBIID TAB	3*	
LEVSIN SL TAB	3*	
LEVSIN TAB	3*	
<i>methscopolamine bromide 2.5mg tab</i>	2	
<i>methscopolamine bromide 5mg tab</i>	2	
H-2 ANTAGONISTS		
<i>cimetidine 200mg tab</i>	1	
<i>cimetidine 300mg tab</i>	1	
<i>cimetidine 400mg tab</i>	1	
<i>cimetidine 800mg tab</i>	1	
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
<i>famotidine 8mg/ml susp</i>	2	
MISC. ANTI-ULCER		
<i>sucralfate 1000mg tab</i>	1	
PROTON PUMP INHIBITORS		
<i>esomeprazole 20mg dr cap (rx only)</i>	1	
<i>esomeprazole 40mg dr cap</i>	1	
FIRST OMEPRAZOLE SUSP	3*	
<i>lansoprazole 15mg dr cap</i>	1	
<i>lansoprazole 30mg dr cap</i>	1	
LANSOPRAZOLE SUSP	3*	
<i>omeprazole 10mg dr cap</i>	1	
<i>omeprazole 20mg dr cap</i>	1	
<i>omeprazole 40mg dr cap</i>	1	
<i>pantoprazole 20mg dr tab</i>	1	
<i>pantoprazole 40mg dr tab</i>	1	
<i>rabeprazole sodium 20mg dr tab</i>	1	
ULCER DRUGS - PROSTAGLANDINS		
<i>misoprostol 100mcg tab</i>	1	
<i>misoprostol 200mcg tab</i>	1	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>hyoscyamine sulfate soln</i>	1*	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
H-2 ANTAGONISTS		
NIZATIDINE 150MG CAP	1	
NIZATIDINE 300MG CAP	1	
MISC. ANTI-ULCER		
<i>sucralfate 100mg/ml susp</i>	2	
URINARY ANTISPASMODICS		
BETA-3 ADRENERGIC AGONISTS		
MYRBETRIQ 25MG ER TAB	2	
MYRBETRIQ 50MG ER TAB	2	
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLIN) (NEW)		
<i>oxybutynin chloride 10mg er tab</i>	1	
<i>oxybutynin chloride 15mg er tab</i>	1	
<i>oxybutynin chloride 1mg/ml oral soln</i>	1	
<i>oxybutynin chloride 5mg er tab</i>	1	
<i>oxybutynin chloride 5mg tab</i>	1	
<i>tolterodine tartrate 1mg tab</i>	1	
<i>tolterodine tartrate 2mg tab</i>	1	
<i>tropium chloride 20mg tab</i>	1	
<i>tropium chloride 60mg er cap</i>	2	
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>darifenacin 15mg er tab</i>	2	
<i>darifenacin 7.5mg er tab</i>	2	
<i>fesoterodine fumarate 4mg er tab</i>	2	
<i>fesoterodine fumarate 8mg er tab</i>	2	
OXYBUTYNYN CHLORIDE 1MG/ML ORAL SOLN	1	
<i>solifenacin succinate 10mg tab</i>	1	
<i>solifenacin succinate 5mg tab</i>	1	
<i>tolterodine tartrate 2mg er cap</i>	2	
<i>tolterodine tartrate 4mg er cap</i>	2	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
GEMTESA 75MG TAB	3	PA
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS (NEW)		
<i>bethanechol chloride 10mg tab</i>	1	
<i>bethanechol chloride 25mg tab</i>	1	
<i>bethanechol chloride 50mg tab</i>	1	
<i>bethanechol chloride 5mg tab</i>	1	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate 100mg tab</i>	2	
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ	\$0	
BCG LIVE TICE STRAIN 50MG INJ	\$0	VAC
BEXSERO SYRINGE	\$0	VAC
HIBERIX 10MCG INJ	\$0	
MENACTRA INJ	\$0	VAC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MENQUADFI INJ	\$0	VAC
MENVEO INJ	\$0	VAC
PEDVAXHIB 7.5MCG/0.5ML INJ	\$0	
TRUMENBA INJ	\$0	VAC
TYPHIM VI 25MCG/0.5ML INJ	\$0	VAC
TYPHIM VI 25MCG/0.5ML SYRINGE	\$0	VAC
VAXCHORA SUSP	\$0*	VAC
VIVOTIF BERNA CAP	\$0*	QL=4 Quantity/ Per DispensingVAC
VIRAL VACCINES		
ABRYSVO 120MCG/0.5ML INJ	\$0	VAC
AREXVY 120MCG/0.5ML INJ	\$0	VAC
DENG VAXIA SUSP	\$0	
ENGERIX-B 10MCG/0.5ML INJ	\$0	PA_BvD VAC
ENGERIX-B 20MCG/ML INJ	\$0	PA_BvD VAC
GARDASIL 9 INJ	\$0	VAC
GARDASIL 9 SYRINGE	\$0	VAC
HAVRIX 1440ELU/ML INJ	\$0	VAC
HAVRIX 720ELU/0.5ML INJ	\$0	
HEPLISAV-B 20MCG/0.5ML SYRINGE	\$0	PA_BvD VAC
IMOVAX 2.5UNIT/ML INJ	\$0	PA_BvD VAC
IPOLE INJ	\$0	VAC
IXIARO 0.012MG/ML INJ	\$0	VAC
JYNNEOS 0.5ML INJ	\$0	VAC
M-M-R II INJ	\$0	VAC
PREHEVBRIO 10MCG/ML INJ	\$0	PA_BvD VAC
PRIORIX INJ	\$0	VAC
PROQUAD INJ	\$0	
RABAVERT 2.5UNIT/ML INJ	\$0	PA_BvD VAC
RECOMBIVAX 10MCG/ML INJ	\$0	PA_BvD VAC
RECOMBIVAX 40MCG/ML INJ	\$0	PA_BvD VAC
RECOMBIVAX 5MCG/0.5ML INJ	\$0	PA_BvD VAC
ROTARIX SUSP	\$0	
ROTATEQ SUSP	\$0	
SHINGRIX 50MCG/0.5ML INJ	\$0	QL=2 Quantity/365 DaysVAC
TICOVAC 1.2MCG/0.25ML SYRINGE	\$0	
TICOVAC 2.4MCG/0.5ML SYRINGE	\$0	VAC
TWINRIX 720UNIT INJ	\$0	VAC
VAQTA 25UNIT/0.5ML INJ	\$0	
VAQTA 50UNIT/ML INJ	\$0	VAC
VARIVAX 1350PFU/0.5ML INJ	\$0	VAC
YF-VAX 4000UNIT/ML INJ	\$0	VAC
VAGINAL PRODUCTS		
MISCELLANEOUS VAGINAL PRODUCTS		
FEM PH GEL	3*	
SPERMICIDES		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CONTRACEPTIVE FILM	\$0*	
CONTRACEPTIVE FOAM	\$0*	
CONTRACEPTIVE GEL	\$0*	
CONTRACEPTIVE SPONGE	\$0*	
CONTRACEPTIVE SUPP	\$0*	
VAGINAL ANTI-INFECTIVES		
<i>clindamycin 2% vaginal cream</i>	1	
<i>metronidazole 0.75% vaginal gel</i>	1	
<i>terconazole 0.4% vaginal cream</i>	1	
<i>terconazole 0.8% vaginal cream</i>	1	
<i>terconazole 80mg vaginal insert</i>	1	
VAGINAL ESTROGENS		
<i>estradiol 0.01% vaginal cream</i>	1	
<i>estradiol 0.01mg vaginal insert</i>	2	
ESTRING 2MG VAGINAL SYSTEM	3	ST
FEMRING 0.05MG/24HR VAGINAL SYSTEM	3	ST
FEMRING 0.1MG/24HR VAGINAL SYSTEM	3	ST
PREMARIN 0.625MG/GM VAGINAL CREAM	2	
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
<i>epinephrine 0.15mg/0.3ml auto-injector (2 pack)</i>	1	QL=2 Quantity/15 Days
<i>epinephrine 0.3mg/0.3ml auto-injector (2 pack)</i>	1	QL=2 Quantity/15 Days
SYMJEPI 0.15MG/0.3ML SYRINGE	1	QL=2 Quantity/15 Days
SYMJEPI 0.3MG/0.3ML SYRINGE	1	QL=2 Quantity/15 Days
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
<i>droxidopa 100mg cap</i>	2	PA
<i>droxidopa 200mg cap</i>	2	PA
<i>droxidopa 300mg cap</i>	2	PA
VASOPRESSORS		
<i>midodrine 10mg tab</i>	1	
<i>midodrine 2.5mg tab</i>	1	
<i>midodrine 5mg tab</i>	1	
VITAMINS		
OIL SOLUBLE VITAMINS		
DRISDOL CAP	3*	
<i>vitamin D 50000unit cap</i>	1*	
WATER SOLUBLE VITAMINS		
POTABA CAP	3*	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

A					
<i>abacavir 20mg/ml oral soln</i>	59	<i>acetaminophen/codeine phosphate 120-12mg/5ml oral soln</i>	15	ADEMPAS 0.5MG TAB 68	
<i>abacavir 300mg tab</i>	59	ACETASOL HC 1-2% OTIC SOLN	98	ADEMPAS 1.5MG TAB 68	
<i>abacavir/lamivudine 600-300mg tab</i>	59	<i>acetazolamide 125mg tab</i>	78	ADEMPAS 1MG TAB 68	
ABELCET 5MG/ML INJ	33	<i>acetazolamide 250mg tab</i>	78	ADEMPAS 2.5MG TAB 68	
ABILIFY 300MG INJ	59	<i>acetazolamide 500mg er cap</i>	78	ADEMPAS 2MG TAB 68	
ABILIFY 300MG SYRINGE	59	<i>acetic acid 2% otic soln</i>	98	ADVAIR 20	
ABILIFY 400MG INJ	59	<i>acetic acid/hydrocortisone 1-2% otic soln</i>	98	ADVAIR 115-21MCG/ACT HFA INHALER	
ABILIFY 400MG SYRINGE	59	<i>acetylcysteine 100mg/ml inh soln</i>	72	ADVAIR 230-21MCG/ACT HFA INHALER	
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	59	<i>acetylcysteine 200mg/ml inh soln</i>	72	ADVAIR 45-21MCG/ACT HFA INHALER 20	
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	59	<i>acitretin 10mg cap</i>	74	AIMOVIG 140MG/ML AUTO-INJECTOR 89	
<i>abiraterone acetate 250mg tab</i>	45	<i>acitretin 17.5mg cap</i>	74	AIMOVIG 70MG/ML AUTO-INJECTOR 89	
ABRYSVO 120MCG/0.5ML INJ	109	<i>acitretin 25mg cap</i>	74	<i>ala-cort 2.5% cream</i>	75
<i>acamprosate calcium 333mg dr tab</i>	101	ACTEMRA 162MG/0.9ML AUTO-INJECTOR	12	<i>albendazole 200mg tab</i>	16
<i>acarbose 100mg tab</i>	28	ACTEMRA 162MG/0.9ML SYRINGE	12	<i>albuterol 0.21mg/ml inh soln</i>	20
<i>acarbose 25mg tab</i>	29	ACTHIB INJ	108	<i>albuterol 0.417mg/ml inh soln</i>	20
<i>acarbose 50mg tab</i>	29	ACTIMMUNE 2000000UNIT/0.5ML INJ	53	<i>albuterol 0.4mg/ml oral soln</i>	20
ACCU-CHEK AVIVA PLUS METER	89	<i>acyclovir 200mg cap</i>	62	<i>albuterol 0.83mg/ml inh soln</i>	20
ACCU-CHEK AVIVA PLUS TEST STRIP	77	<i>acyclovir 400mg tab</i>	62	<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	20
ACCU-CHEK GUIDE CARE METER	89	<i>acyclovir 40mg/ml susp</i>	62	<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	20
ACCU-CHEK GUIDE ME KIT	89	<i>acyclovir 5% ointment</i>	74	<i>albuterol 2mg tab</i>	20
ACCU-CHEK GUIDE TEST STRIP	77	<i>acyclovir 50mg/ml inj</i>	62	<i>albuterol 4mg tab</i>	20
ACCU-CHEK SMARTVIEW TEST STRIP	77	<i>acyclovir 800mg tab</i>	62	ALBUTEROL 5MG/ML INH SOLN	20
<i>acebutolol 200mg cap</i>	64	ADACEL INJ	106	<i>albuterol 5mg/ml inh soln</i>	20
<i>acebutolol 400mg cap</i>	64	<i>adapalene 0.1% cream</i>	72	<i>alclometasone dipropionate 0.05% cream</i>	75
		<i>adapalene 0.3% gel</i>	72	<i>alclometasone dipropionate 0.05% ointment</i>	75
		<i>adapalene gel</i>	72	<i>alcohol swab 1"x1" (diabetic)</i>	77
		<i>adapalene/benzoyl peroxide 0.1-2.5% gel</i>	72		
		ADBRY 150MG/ML SYRINGE	76		
		<i>adefovir dipivoxil 10mg tab</i>	62		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

ALCOHOL SWAB 1"x1" (DIABETIC)	77	<i>amiloride</i>	78	<i>ammonium lactate 12% cream</i>	76
ALECENSA 150MG CAP	46	<i>5mg/hydrochlorothiazide 50mg tab</i>		<i>ammonium lactate 12% lotion</i>	76
<i>alendronate 10mg tab</i>	79	AMINOSYN-PF 7% INJ	95	<i>amoxapine 100mg tab</i>	28
<i>alendronate 35mg tab</i>	79	<i>amiodarone 100mg tab</i>	18	<i>amoxapine 150mg tab</i>	28
<i>alendronate 70mg tab</i>	79	<i>amiodarone 200mg tab</i>	18	<i>amoxapine 25mg tab</i>	28
<i>alendronate 70mg/75ml oral soln</i>	79	<i>amiodarone 400mg tab</i>	18	<i>amoxapine 50mg tab</i>	28
<i>alfuzosin 10mg er tab</i>	84	<i>amitriptyline 100mg tab</i>	28	AMOXICILLIN 125MG	99
<i>aliskiren 150mg tab</i>	39	<i>amitriptyline 10mg tab</i>	28	CHEW TAB	
<i>aliskiren 300mg tab</i>	39	<i>amitriptyline 150mg tab</i>	28	<i>amoxicillin 250mg cap</i>	99
ALKERAN TAB	42	<i>amitriptyline 25mg tab</i>	28	AMOXICILLIN 250MG	99
<i>allopurinol 100mg tab</i>	85	<i>amitriptyline 50mg tab</i>	28	CHEW TAB	
<i>allopurinol 300mg tab</i>	85	<i>amitriptyline 75mg tab</i>	28	<i>amoxicillin 25mg/ml susp</i>	99
<i>alosectron 0.5mg tab</i>	83	<i>amlodipine 10mg tab</i>	65	<i>amoxicillin 40mg/ml susp</i>	99
<i>alosectron 1mg tab</i>	83	<i>amlodipine 2.5mg tab</i>	65	<i>amoxicillin 500mg cap</i>	99
<i>alprazolam 0.25mg tab</i>	17	<i>amlodipine 5mg tab</i>	65	<i>amoxicillin 500mg tab</i>	99
<i>alprazolam 0.5mg tab</i>	18	<i>amlodipine/benazepril 10-20mg cap</i>	38	<i>amoxicillin 50mg/ml susp</i>	99
<i>alprazolam 1mg tab</i>	18	<i>amlodipine/benazepril 10-40mg cap</i>	38	<i>amoxicillin 80mg/ml susp</i>	99
<i>alprazolam 2mg tab</i>	18	<i>amlodipine/benazepril 10-40mg cap</i>	38	<i>amoxicillin 875mg tab</i>	99
<i>altavera 28 day pack</i>	70	<i>amlodipine/benazepril 2.5-10mg cap</i>	38	<i>amoxicillin/clavulanate 120-8.58mg/ml susp</i>	100
ALUNBRIG 180MG TAB	46	<i>amlodipine/benazepril 5-10mg cap</i>	38	AMOXICILLIN/CLAVUL	100
ALUNBRIG 30MG TAB	46	<i>amlodipine/benazepril 5-20mg cap</i>	38	ANATE 200-28.5MG	
ALUNBRIG 90MG TAB	46	<i>amlodipine/benazepril 5-20mg cap</i>	38	CHEW TAB	
ALUNBRIG TAB	47	<i>amlodipine/benazepril 5-40mg cap</i>	38	<i>amoxicillin/clavulanate 250-125mg tab</i>	100
STARTER PACK		<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	38	AMOXICILLIN/CLAVUL	100
<i>amabelz 0.5/0.1mg 28 day pack</i>	81	<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	38	ANATE 400-57MG	
<i>amabelz 1/0.5mg 28 day pack</i>	81	<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	38	CHEW TAB	
<i>amantadine 100mg cap</i>	55	<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	38	<i>amoxicillin/clavulanate 40-5.7mg/ml susp</i>	100
<i>amantadine 100mg tab</i>	54	<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	38	<i>amoxicillin/clavulanate 500-125mg tab</i>	100
<i>amantadine 10mg/ml oral soln</i>	55	<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	38	<i>amoxicillin/clavulanate 50-12.5mg/ml susp</i>	100
<i>ambrisentan 10mg tab</i>	67	<i>amlodipine/valsartan 10-160mg tab</i>	38	<i>amoxicillin/clavulanate 80-11.4mg/ml susp</i>	100
<i>ambrisentan 5mg tab</i>	67	<i>amlodipine/valsartan 10-320mg tab</i>	38	<i>amoxicillin/clavulanate 875-125mg tab</i>	100
<i>amikacin 250mg/ml inj</i>	10	<i>amlodipine/valsartan 5-160mg tab</i>	38	AMOXICILLIN/K	100
<i>amikacin sulfate 1gm/4ml inj</i>	10	<i>amlodipine/valsartan 5-320mg tab</i>	38	CLAVULANATE	
<i>amiloride 5mg tab</i>	78			1000-62.5MG ER TAB	
AMILORIDE	78				
5MG/HYDROCHLOROT HIAZIDE 50MG TAB					

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>amphetamine/dextroamphetamine 10mg tab</i>	9	<i>ampicillin/sulbactam 100-50mg/ml inj</i>	100	<i>aripiprazole 15mg odt</i>	59
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	9	<i>ampicillin/sulbactam 2000-1000mg inj</i>	100	<i>aripiprazole 15mg tab</i>	59
<i>amphetamine/dextroamphetamine 15mg tab</i>	9	AMPICILLIN/SULBACTAM 3GM INJ	100	<i>aripiprazole 1mg/ml oral soln</i>	59
<i>amphetamine/dextroamphetamine 20mg tab</i>	9	<i>anagrelide 0.5mg cap</i>	85	<i>aripiprazole 20mg tab</i>	59
<i>amphetamine/dextroamphetamine 30mg tab</i>	9	<i>anagrelide 1mg cap</i>	85	<i>aripiprazole 2mg tab</i>	59
<i>amphetamine/dextroamphetamine 5mg tab</i>	9	ANALPRAM-HC CREAM	16	<i>aripiprazole 30mg tab</i>	59
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	9	ANASPAZ TAB	106	<i>aripiprazole 5mg tab</i>	59
<i>amphetamine-dextroamphetamine 10mg ER cap</i>	9	<i>anastrozole 1mg tab</i>	44	ARISTADA 1064MG/3.9ML INJ	59
<i>amphetamine-dextroamphetamine 15mg ER cap</i>	9	ANNOVERA	71	ARISTADA 441MG/1.6ML INJ	59
<i>amphetamine-dextroamphetamine 20mg ER cap</i>	9	0.15-0.013MG/24HR VAGINAL SYSTEM		ARISTADA 662MG/2.4ML INJ	59
<i>amphetamine-dextroamphetamine 25mg ER cap</i>	9	ANORO ELLIPTA 62.5-25MCG INHALER	20	ARISTADA 675MG/2.4ML INJ	59
<i>amphetamine-dextroamphetamine 30mg ER cap</i>	9	ANUSOL-HC SUPP	16	ARISTADA 882MG/3.2ML INJ	59
<i>amphetamine-dextroamphetamine 5mg ER cap</i>	9	APRACLONIDINE 0.5% OPHTH SOLN	96	<i>armodafinil 150mg tab</i>	9
AMPHOTERICIN B 50MG INJ	33	<i>apraclonidine 0.5% ophthalmic soln</i>	96	<i>armodafinil 200mg tab</i>	9
<i>ampicillin 1000mg inj</i>	99	<i>aprepitant 125mg cap</i>	33	<i>armodafinil 250mg tab</i>	9
<i>ampicillin 100mg/ml inj</i>	99	<i>aprepitant 125mg/aprepitant 80mg pack</i>	33	<i>armodafinil 50mg tab</i>	9
AMPICILLIN 125MG INJ	99	<i>aprepitant 40mg cap</i>	33	ARMOUR THYROID 120MG TAB	105
<i>ampicillin 250mg inj</i>	99	<i>aprepitant 80mg cap</i>	33	ARMOUR THYROID 15MG TAB	105
<i>ampicillin 2gm inj</i>	99	<i>apri 28 day pack</i>	70	ARMOUR THYROID 30MG TAB	105
AMPICILLIN 2GM INJ	99	APTIOM 200MG TAB	22	ARMOUR THYROID 60MG TAB	105
AMPICILLIN 500MG CAP	99	APTIOM 400MG TAB	22	ARMOUR THYROID 90MG TAB	105
<i>ampicillin 500mg inj</i>	99	APTIOM 600MG TAB	22	ARNUITY ELLIPTA 100MCG INHALER	19
AMPICILLIN SODIUM 1GM INJ	99	APTIOM 800MG TAB	22	ARNUITY ELLIPTA 200MCG INHALER	19
AMPICILLIN/SULBACTAM 1.5GM INJ	100	APTIVUS 250MG CAP	59	ARNUITY ELLIPTA 50MCG INHALER	19
<i>ampicillin/sulbactam 1000-500mg inj</i>	100	ARALAST NP 500MG INJ	104	<i>asenapine 10mg sl tab</i>	57
		<i>aranelle 28 pack</i>	70	<i>asenapine 2.5mg sl tab</i>	57
		ARCALYST 220MG INJ	12	<i>asenapine 5mg sl tab</i>	57
		AREXVY 120MCG/0.5ML INJ	109	<i>ashlyna 91 day pack</i>	70
		<i>arformoterol tartrate 15mcg/2ml neb soln</i>	20	ASMANEX 100MCG HFA INHALER	19
		ARIKAYCE	11		
		590MG/8.4ML INH SUSP			
		<i>aripiprazole 10mg odt</i>	59		
		<i>aripiprazole 10mg tab</i>	59		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

ASMANEX 110MCG (30ACT) INHALER	19	ATROPINE SULFATE 1% OPHTH SOLN	96	BACITRACIN 0.5UNIT/MG OPHTH OINTMENT	96
ASMANEX 200MCG HFA INHALER	19	<i>atropine sulfate 1% ophth soln</i>	96	<i>bacitracin/polymyxin B 3.5gm ophth ointment</i>	96
ASMANEX 220MCG INHALER	19	ATROVENT 17MCG INHALER	19	<i>baclofen 10mg tab</i>	94
ASMANEX 50MCG HFA INHALER	19	AURYXIA 210MG TAB	83	<i>baclofen 20mg tab</i>	94
<i>aspirin</i>	85	AUSTEDO 12MG ER TAB	102	<i>baclofen 5mg tab</i>	94
<i>25mg/dipyridamole</i>		AUSTEDO 12MG TAB	102	<i>balsalazide disodium 750mg cap</i>	83
<i>200mg er cap</i>		AUSTEDO 24MG ER TAB	102	BALVERSA 3MG TAB	47
<i>aspirin 81mg chew tab</i>	13	AUSTEDO 6-12-24MG XR TAB TITRATION PACK	102	BALVERSA 4MG TAB	47
<i>aspirin 81mg EC tab</i>	13	AUSTEDO 6MG ER TAB	102	BALVERSA 5MG TAB	47
<i>atazanavir 150mg cap</i>	59	AUSTEDO 6MG TAB	102	BAQSIMI 3MG/DOSE NASAL POWDER	30
<i>atazanavir 200mg cap</i>	59	AUSTEDO 9MG TAB	102	BAXDELA 450MG TAB	82
<i>atazanavir 300mg cap</i>	59	AUVELITY 105-45MG ER TAB	26	BCG LIVE TICE STRAIN 50MG INJ	108
<i>atenolol 100mg tab</i>	64	AVONEX 30MCG/0.5ML AUTO-INJECTOR	102	BELLADONNA ALKALOID/OPIUM SUPP	107
<i>atenolol 25mg tab</i>	64	AVONEX 30MCG/0.5ML SYRINGE	102	<i>benazepril 10mg tab</i>	36
<i>atenolol 50mg tab</i>	64	AYVAKIT 100MG TAB	46	<i>benazepril 20mg tab</i>	36
<i>atenolol/chlorthalidone 100-25mg tab</i>	38	AYVAKIT 200MG TAB	46	<i>benazepril 40mg tab</i>	36
<i>atenolol/chlorthalidone 50-25mg tab</i>	38	AYVAKIT 25MG TAB	46	<i>benazepril 5mg tab</i>	36
<i>atomoxetine 100mg cap</i>	9	AYVAKIT 300MG TAB	46	<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	38
<i>atomoxetine 10mg cap</i>	9	AYVAKIT 50MG TAB	46	<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	38
<i>atomoxetine 18mg cap</i>	9	<i>azathioprine 50mg tab</i>	63	<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	38
<i>atomoxetine 25mg cap</i>	9	<i>azelaic acid 15% gel</i>	77	<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	38
<i>atomoxetine 40mg cap</i>	9	<i>azelastine 0.05% ophth soln</i>	97	BENLYSTA 200MG/ML AUTO-INJECTOR	93
<i>atomoxetine 60mg cap</i>	9	<i>azelastine 0.137mg/act nasal inhaler</i>	95	BENLYSTA 200MG/ML SYRINGE	93
<i>atomoxetine 80mg cap</i>	9	<i>azithromycin 20mg/ml susp</i>	88	BENZNIDAZOLE 100MG TAB	16
<i>atorvastatin 10mg tab</i>	35	<i>azithromycin 250mg pack</i>	88	BENZNIDAZOLE 12.5MG TAB	17
<i>atorvastatin 20mg tab</i>	35	<i>azithromycin 40mg/ml susp</i>	88	<i>benzonatate 100mg cap, 200mg cap</i>	72
<i>atorvastatin 40mg tab</i>	35	<i>azithromycin 500mg inj</i>	88		
<i>atorvastatin 80mg tab</i>	35	<i>azithromycin 500mg tab</i>	88		
<i>atovaquone 150mg/ml susp</i>	40	<i>azithromycin 600mg tab</i>	88		
<i>atovaquone/proguanil 250-100mg tab</i>	41	<i>aztreonam 1000mg inj</i>	41		
<i>atovaquone/proguanil 62.5-25mg tab</i>	41	<i>aztreonam 2000mg inj</i>	41		
<i>atropine sulfate 0.025mg/diphenoxylate 2.5mg tab</i>	32				

B

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>benztropine mesylate</i>	53	<i>bethanechol chloride</i>	108	BREO ELLIPTA	20
<i>0.5mg tab</i>		<i>25mg tab</i>		100-25MCG INHALER	
<i>benztropine mesylate 1mg</i>	53	<i>bethanechol chloride</i>	108	BREO ELLIPTA	20
<i>tab</i>		<i>50mg tab</i>		200-25MCG INHALER	
<i>benztropine mesylate 2mg</i>	53	<i>bethanechol chloride 5mg</i>	108	BREZTRI AEROSPHERE	20
<i>tab</i>		<i>tab</i>		160-9-4.8MCG/ACT	
BERINERT 500UNIT INJ	85	<i>bexarotene 1% gel</i>	74	INHALER	
BESREMI 500MCG/ML	53	<i>bexarotene 75mg cap</i>	53	<i>briellyn 28 day pack</i>	70
SYRINGE		BEXSERO SYRINGE	108	BRILINTA 60MG TAB	85
<i>betaine 1000mg powder</i>	80	<i>bicalutamide 50mg tab</i>	44	BRILINTA 90MG TAB	85
<i>for oral soln</i>		BICILLIN L-A	99	<i>brimonidine 0.1% ophth</i>	96
<i>betamethasone 0.05%</i>	75	1200000UNIT/2ML INJ		<i>soln</i>	
<i>aug cream</i>		BICILLIN L-A	100	<i>brimonidine tartrate</i>	96
<i>betamethasone 0.05%</i>	75	2400000UNIT/4ML INJ		<i>0.15% ophth soln</i>	
<i>aug lotion</i>		BICILLIN L-A	100	<i>brimonidine tartrate</i>	96
<i>betamethasone 0.05%</i>	75	600000UNIT/ML INJ		<i>0.2% ophth soln</i>	
<i>aug ointment</i>		BIKTARVY 30-120-15MG	60	<i>brimonidine</i>	96
<i>betamethasone 0.05%</i>	75	TAB		<i>tartrate/timolol maleate</i>	
<i>cream</i>		BIKTARVY 50-200-25MG	60	<i>0.2-0.5% ophth soln</i>	
BETAMETHASONE	75	TAB		<i>brinzolamide 1% ophth</i>	97
0.05% GEL		<i>bimatoprost 0.03% ophth</i>	98	<i>susp</i>	
<i>betamethasone 0.05%</i>	75	<i>soln</i>		BRIVIACT 100MG TAB	23
<i>lotion</i>		<i>bisoprolol fumarate 10mg</i>	64	BRIVIACT 10MG TAB	23
<i>betamethasone 0.05%</i>	75	<i>tab</i>		BRIVIACT 10MG/ML	23
<i>ointment</i>		<i>bisoprolol fumarate 5mg</i>	64	ORAL SOLN	
<i>betamethasone 0.1%</i>	75	<i>tab</i>		BRIVIACT 25MG TAB	23
<i>cream</i>		<i>bisoprolol</i>	38	BRIVIACT 50MG TAB	23
<i>betamethasone 0.1%</i>	75	<i>fumarate/hydrochlorothia</i>		BRIVIACT 75MG TAB	23
<i>lotion</i>		<i>zide 10-6.25mg tab</i>		<i>bromfenac 0.09% ophth</i>	97
<i>betamethasone 0.1%</i>	75	<i>bisoprolol</i>	38	<i>soln</i>	
<i>ointment</i>		<i>fumarate/hydrochlorothia</i>		<i>bromocriptine 2.5mg tab</i>	54
<i>betamethasone/clotrimaz</i>	73	<i>zide 2.5-6.25mg tab</i>		<i>bromocriptine 5mg cap</i>	54
<i>ole 1-0.05% cream</i>		<i>bisoprolol</i>	38	BRONCHITOL 40MG	104
<i>betamethasone/clotrimaz</i>	73	<i>fumarate/hydrochlorothia</i>		INH POWDER	
<i>ole 1-0.05% lotion</i>		<i>zide 5-6.25mg tab</i>		BRUKINSA 80MG CAP	47
BETAXOLOL 0.5%	96	BIVIGAM 5GM/50ML INJ	98	<i>budesonide 0.125mg/ml</i>	19
OPHTH SOLN		BOOSTRIX INJ	106	<i>inh susp</i>	
<i>betaxolol 0.5% ophth</i>	96	<i>bosentan 125mg tab</i>	67	<i>budesonide 0.25mg/ml</i>	19
<i>soln</i>		<i>bosentan 62.5mg tab</i>	67	<i>inh susp</i>	
<i>betaxolol 10mg tab</i>	64	BOSULIF 100MG TAB	47	<i>budesonide 0.5mg/ml inh</i>	19
<i>betaxolol 20mg tab</i>	64	BOSULIF 400MG TAB	47	<i>susp</i>	
<i>bethanechol chloride</i>	108	BOSULIF 500MG TAB	47	<i>budesonide 2mg/act</i>	16
<i>10mg tab</i>		BRAFTOVI 75MG CAP	47	<i>rectal foam</i>	
				<i>budesonide 3mg dr cap</i>	71

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>budesonide 9mg er tab</i>	71	<i>bupropion 75mg tab</i>	26	<i>candesartan cilexetil</i>	37
<i>budesonide/formoterol fumarate 160-4.5mcg inhaler</i>	20	<i>bupropion 10mg tab</i>	17	<i>32mg tab</i>	
<i>budesonide/formoterol fumarate 80-4.5mcg inhaler</i>	20	<i>bupropion 15mg tab</i>	17	<i>candesartan cilexetil 4mg tab</i>	37
<i>bumetanide 0.25mg/ml inj</i>	78	<i>bupropion 30mg tab</i>	17	<i>candesartan cilexetil 8mg tab</i>	37
<i>bumetanide 0.5mg tab</i>	78	<i>bupropion 5mg tab</i>	17	<i>capecitabine tab</i>	42
<i>bumetanide 1mg tab</i>	78	<i>bupropion 7.5mg tab</i>	17	CAPLYTA 10.5MG CAP	55
<i>bumetanide 2mg tab</i>	78	<i>butorphanol tartrate 1mg/act nasal inhaler</i>		CAPLYTA 21MG CAP	55
<i>buprenorphine 10mcg/hr weekly patch</i>	15	BYDUREON	30	CAPLYTA 42MG CAP	55
<i>buprenorphine 15mcg/hr weekly patch</i>	15	2MG/0.85ML		CAPRELSA 100MG TAB	47
<i>buprenorphine 20mcg/hr weekly patch</i>	15	AUTO-INJECTOR		CAPRELSA 300MG TAB	47
<i>buprenorphine 2mg sl tab</i>	15	C		<i>captopril 100mg tab</i>	36
<i>buprenorphine 5mcg/hr weekly patch</i>	15	<i>cabergoline 0.5mg tab</i>	81	<i>captopril 12.5mg tab</i>	36
<i>buprenorphine 7.5mcg/hr weekly patch</i>	15	CABLIVI 11MG INJ	85	<i>captopril 25mg tab</i>	36
<i>buprenorphine 8mg sl tab</i>	15	CABOMETYX 20MG TAE	47	<i>captopril 50mg tab</i>	36
<i>buprenorphine/naloxone 12-3mg sublingual film</i>	16	CABOMETYX 40MG TAE	47	<i>carbamazepine 100mg chew tab</i>	23
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	16	CABOMETYX 60MG TAE	47	<i>carbamazepine 100mg er cap</i>	23
<i>buprenorphine/naloxone 2-0.5mg sublingual film</i>	16	<i>calcipotriene 0.005% cream</i>	74	<i>carbamazepine 100mg er tab</i>	23
<i>buprenorphine/naloxone 4-1mg sublingual film</i>	16	<i>calcipotriene 0.005% ointment</i>	74	<i>carbamazepine 200mg er cap</i>	23
<i>buprenorphine/naloxone 8-2mg sl tab</i>	16	<i>calcipotriene 0.005% topical soln</i>	74	<i>carbamazepine 200mg er tab</i>	23
<i>bupropion 100mg er tab</i>	26	<i>calcitriol 0.25mcg cap</i>	80	<i>carbamazepine 200mg er cap</i>	23
<i>bupropion 100mg tab</i>	26	<i>calcitriol 0.5mcg cap</i>	80	<i>carbamazepine 200mg er tab</i>	23
<i>bupropion 150mg sr (12 hr) tab</i>	26	<i>calcitriol 1mcg/ml oral soln</i>	80	<i>carbamazepine 200mg tab</i>	23
<i>bupropion 150mg sr tab</i>	103	<i>calcium acetate 667mg cap</i>	83	<i>carbamazepine 20mg/ml susp</i>	23
<i>bupropion 150mg xl (24 hr) tab</i>	26	<i>calcium acetate 667mg tab</i>	83	<i>carbamazepine 300mg er cap</i>	23
<i>bupropion 200mg er tab</i>	26	CALIBRATION LIQUID	89	<i>carbamazepine 400mg er tab</i>	23
<i>bupropion 300mg er tab</i>	26	CALQUENCE 100MG CAP	47	<i>carbidopa 25mg tab</i>	53
		CALQUENCE 100MG TAB	47	<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	55
		<i>camreselo 91 day pack</i>	70	<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	55
		CAMZYOS 10MG CAP	66	<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	55
		CAMZYOS 15MG CAP	66		
		CAMZYOS 2.5MG CAP	66		
		CAMZYOS 5MG CAP	66		
		<i>candesartan cilexetil 16mg tab</i>	37		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	55	<i>casprofungin acetate 50mg inj</i>	33	<i>cefoxitin 2000mg inj</i>	68
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	55	CASPOFUNGIN	33	<i>cefoxitin 200mg/ml inj</i>	68
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	55	ACETATE 70MG INJ		CEFOXITIN/DEXTROSE	68
CARBIDOPA/LEVODOPA 10-100MG ODT	55	<i>casprofungin acetate 70mg inj</i>	33	1GM-4% INJ	
<i>carbidopa/levodopa 10-100mg tab</i>	54	CAVERJECT INJ	67	CEFOXITIN/DEXTROSE	68
CARBIDOPA/LEVODOPA 10-250MG ODT	55	CAYSTON 75MG INH SOLN	41	2GM-2.2% INJ	
<i>carbidopa/levodopa 25-100mg er tab</i>	54	<i>caziant 28 day pack</i>	70	<i>cefpodoxime 100mg tab</i>	69
CARBIDOPA/LEVODOPA 25-100MG ODT	55	CEFACLOR 250MG CAP	68	<i>cefpodoxime 10mg/ml susp</i>	69
<i>carbidopa/levodopa 25-100mg tab</i>	54	CEFACLOR 500MG CAP	68	<i>cefpodoxime 200mg tab</i>	69
<i>carbidopa/levodopa 25-250mg tab</i>	54	<i>cefadroxil 100mg/ml susp</i>	68	<i>cefpodoxime 20mg/ml susp</i>	69
<i>carbidopa/levodopa 50-200mg er tab</i>	54	CEFADROXIL 1GM TAB	68	<i>cefprozil 250mg tab</i>	68
<i>carglumic acid 200mg tab</i>	80	<i>cefadroxil 500mg cap</i>	68	<i>cefprozil 25mg/ml susp</i>	68
<i>carisoprodol 350mg tab</i>	94	<i>cefadroxil 50mg/ml susp</i>	68	<i>cefprozil 500mg tab</i>	69
CARTEOLOL 1% OPHTH SOLN	96	<i>cefazolin 1000mg inj</i>	68	<i>cefprozil 50mg/ml susp</i>	69
<i>carvedilol 12.5mg tab</i>	64	CEFAZOLIN 100GM INJ	68	<i>ceftazidime 1000mg inj</i>	69
<i>carvedilol 25mg tab</i>	64	CEFAZOLIN 1GM INJ	68	<i>ceftazidime 200mg/ml inj</i>	69
<i>carvedilol 3.125mg tab</i>	64	<i>cefazolin 200mg/ml inj</i>	68	<i>ceftazidime 2gm inj</i>	69
<i>carvedilol 6.25mg tab</i>	64	CEFAZOLIN 300GM INJ	68	CEFTAZIDIME/D5W	69
<i>carvedilol phosphate ER 10mg cap</i>	64	<i>cefazolin 500mg inj</i>	68	1GM/50ML INJ	
<i>carvedilol phosphate ER 20mg cap</i>	64	CEFAZOLIN/DEXTROSE	68	CEFTAZIDIME/DEXTROSE	68
<i>carvedilol phosphate ER 40mg cap</i>	64	1GM/50ML-4% IV SOLN		SE 2GM/50ML-5% INJ	
<i>carvedilol phosphate ER 80mg cap</i>	64	CEFAZOLIN/DEXTROSE	68	<i>ceftriaxone 1000mg inj</i>	69
CASPOFUNGIN	33	1GM-4% IV SOLN		<i>ceftriaxone 100mg/ml inj</i>	69
ACETATE 50MG INJ		<i>cefazolin 500mg inj</i>	68	<i>ceftriaxone 2000mg inj</i>	69
		CEFAZOLIN/DEXTROSE	68	<i>ceftriaxone 250mg inj</i>	69
		1GM-4% IV SOLN		<i>ceftriaxone 500mg inj</i>	69
		<i>cefdinir 25mg/ml susp</i>	69	CEFTRIAXONE SODIUM	69
		<i>cefdinir 300mg cap</i>	69	100GM INJ	
		<i>cefdinir 50mg/ml susp</i>	69	<i>ceftriaxone sodium 1gm inj</i>	69
		<i>cefepime 1000mg inj</i>	69	<i>ceftriaxone sodium 2gm inj</i>	69
		CEFEPIME 1GM/50ML IV SOLN	69	CEFTRIAXONE/DEXTROSE	69
		<i>cefepime 2000mg inj</i>	69	SE 1GM-3.74% IV SOLN	
		CEFEPIME 2GM INJ	69	CEFTRIAXONE/DEXTROSE	69
		CEFEPIME 2GM/100ML IV SOLN	69	SE 20MG/ML INJ	
		CEFEPIME/DEXTROSE	69	CEFTRIAXONE/DEXTROSE	69
		1GM/50ML-5% INJ		SE 2GM-2.22% IV SOLN	
		CEFEPIME/DEXTROSE	69	CEFTRIAXONE/DEXTROSE	69
		2GM/50ML-5% INJ		SE 40MG/ML INJ	
		<i>cefixime 20mg/ml susp</i>	69	<i>cefuroxime 1500mg inj</i>	69
		<i>cefixime 400mg cap</i>	69	<i>cefuroxime 250mg tab</i>	69
		<i>cefixime 40mg/ml susp</i>	69		
		<i>cefoxitin 1000mg inj</i>	68		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>cefuroxime 500mg tab</i>	69	<i>cholestyramine resin 4gm</i>	35	<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	98
<i>cefuroxime 750mg inj</i>	69	<i>sf powder for oral susp (sugar free)</i>		<i>citalopram 10mg tab</i>	26
<i>celecoxib 100mg cap</i>	12	CIBINQO 100MG TAB	76	<i>citalopram 20mg tab</i>	26
<i>celecoxib 200mg cap</i>	12	CIBINQO 200MG TAB	76	<i>citalopram 2mg/ml oral soln</i>	26
<i>celecoxib 400mg cap</i>	12	CIBINQO 50MG TAB	76	<i>citalopram 40mg tab</i>	26
<i>celecoxib 50mg cap</i>	12	<i>ciclopirox 0.77% cream</i>	73	<i>clarithromycin 250mg tab</i>	88
<i>cephalexin 250mg cap</i>	68	<i>ciclopirox 0.77% gel</i>	73	CLARITHROMYCIN	88
<i>cephalexin 25mg/ml susp</i>	68	<i>ciclopirox 0.77% lotion</i>	73	25MG/ML SUSP	
<i>cephalexin 500mg cap</i>	68	<i>ciclopirox 1% shampoo</i>	73	<i>clarithromycin 500mg er tab</i>	88
<i>cephalexin 50mg/ml susp</i>	68	<i>ciclopirox 8% topical soln</i>	73	<i>clarithromycin 500mg tab</i>	88
CERDELGA 84MG CAP	86	CILASTATIN/IMIPENEM	40	CLARITHROMYCIN	88
CERVICAL CAP	89	250-250MG INJ		50MG/ML SUSP	
<i>cevimeline 30mg cap</i>	94	<i>cilastatin/imipenem 500-500mg inj</i>	40	<i>clindamycin 1% gel</i>	72
CHEMET 100MG CAP	32	<i>cilostazol 100mg tab</i>	85	<i>clindamycin 1% lotion</i>	72
<i>chlordiazepoxide 10mg cap</i>	18	<i>cilostazol 50mg tab</i>	85	<i>clindamycin 1% pad</i>	72
<i>chlordiazepoxide 25mg cap</i>	18	CIMDUO 300-300MG TAB, TEMIXYS	60	<i>clindamycin 1% topical soln</i>	72
<i>chlordiazepoxide 5mg cap</i>	18	300-300MG TAB		<i>clindamycin 12mg/ml inj</i>	40
<i>chlorhexidine gluconate 0.12% mouthwash</i>	93	<i>cimetidine 200mg tab</i>	107	<i>clindamycin 150mg cap</i>	40
<i>chloroquine 500mg tab</i>	41	<i>cimetidine 300mg tab</i>	107	<i>clindamycin 150mg/ml (2ml) inj</i>	40
<i>chloroquine phosphate 250mg tab</i>	41	<i>cimetidine 400mg tab</i>	107	<i>clindamycin 150mg/ml (4ml) inj</i>	40
<i>chlorpromazine 100mg tab</i>	58	<i>cimetidine 800mg tab</i>	107	<i>clindamycin 150mg/ml (6ml) inj</i>	40
CHLORPROMAZINE	58	CIMZIA 200MG INJ	83	<i>clindamycin 15mg/ml oral soln</i>	40
100MG/ML ORAL SOLN		CIMZIA 200MG/ML INJ	83	<i>clindamycin 18mg/ml inj</i>	41
<i>chlorpromazine 10mg tab</i>	58	CIMZIA 200MG/ML INJ	83	<i>clindamycin 2% vaginal cream</i>	110
<i>chlorpromazine 200mg tab</i>	58	STARTER KIT		<i>clindamycin 300mg cap</i>	41
<i>chlorpromazine 25mg tab</i>	58	<i>cinacalcet 30mg tab</i>	80	<i>clindamycin 6mg/ml inj</i>	41
CHLORPROMAZINE	58	<i>cinacalcet 60mg tab</i>	80	<i>clindamycin 75mg cap</i>	41
30MG/ML ORAL SOLN		<i>cinacalcet 90mg tab</i>	80	<i>clindamycin 9gm/60ml inj</i>	41
<i>chlorpromazine 50mg tab</i>	58	CINRYZE 500UNIT INJ	85	<i>clindamycin phosphate/benzoyl peroxide 1.2-5% topical gel</i>	
<i>chlorthalidone 25mg tab</i>	78	CIPRO HC 0.2-1% OTIC	98	<i>clindamycin/benzoyl peroxide 1.2-2.5% gel</i>	73
<i>chlorthalidone 50mg tab</i>	78	SUSP			
<i>chlorzoxazone 500mg tab</i>	94	CIPROFLOXACIN 0.2% OTIC SOLN	98		
<i>cholestyramine 4gm bulk powder</i>	35	<i>ciprofloxacin 0.3% ophth soln</i>	96		
<i>cholestyramine resin 4gm sf powder for oral susp</i>	35	<i>ciprofloxacin 250mg tab</i>	82		
		<i>ciprofloxacin 2mg/ml inj</i>	82		
		<i>ciprofloxacin 500mg tab</i>	82		
		<i>ciprofloxacin 750mg tab</i>	82		
		<i>ciprofloxacin/d5w 400mg/200ml inj</i>	82		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>clindamycin/benzoyl peroxide 1-5% gel</i>	73	<i>clomipramine 50mg cap</i>	28	<i>codeine</i>	15
CLINDAMYCIN/NAACL 9%-300MG/50ML IV SOLN	41	<i>clomipramine 75mg cap</i>	28	<i>phosphate/acetaminophen 30-300mg tab</i>	
CLINDAMYCIN/NAACL 9%-600MG/50ML IV SOLN	41	<i>clonazepam 0.125mg odt</i>	22	<i>codeine</i>	15
CLINDAMYCIN/NAACL 9%-900MG/50ML IV SOLN	41	<i>clonazepam 0.25mg odt</i>	22	<i>phosphate/acetaminophen 60-300mg tab</i>	
CLINIMIX 4.25/10 INJ	95	<i>clonazepam 0.5mg odt</i>	22	CODEINE SULFATE 15MG TAB	14
CLINIMIX 4.25/5 INJ	95	<i>clonazepam 0.5mg tab</i>	22	CODEINE SULFATE 30MG TAB	14
CLINIMIX 5/15 INJ	95	<i>clonazepam 1mg odt</i>	22	<i>codeine sulfate 30mg tab</i>	14
CLINIMIX 5/20 INJ	95	<i>clonazepam 1mg tab</i>	22	CODEINE SULFATE 60MG TAB	14
CLINIMIX E 2.75/5 INJ	95	<i>clonazepam 2mg odt</i>	22	<i>colchicine 0.6mg tab</i>	85
CLINIMIX E 4.25/10 INJ	95	<i>clonazepam 2mg tab</i>	22	<i>colchicine/probenecid 0.5-500mg tab</i>	84
CLINIMIX E 4.25/5 INJ	95	<i>clonidine 0.1mg er tab</i>	9	<i>colesevelam 3750mg powder for oral susp</i>	35
CLINIMIX E 5/15 INJ	96	<i>clonidine 0.1mg tab</i>	37	<i>colesevelam 625mg tab</i>	35
CLINIMIX E 5/20 INJ	96	<i>clonidine 0.1mg/24hr weekly patch</i>	37	<i>colestipol 1000mg tab</i>	35
<i>clinisol 15% inj</i>	96	<i>clonidine 0.2mg tab</i>	37	<i>colestipol 5000mg granules for oral susp</i>	35
CLINISTIX	77	<i>clonidine 0.2mg/24hr weekly patch</i>	37	<i>colestipol 5gm granule</i>	35
<i>clobazam 10mg tab</i>	22	<i>clonidine 0.3mg tab</i>	37	<i>colistin 75mg/ml inj</i>	41
<i>clobazam 2.5mg/ml susp</i>	22	<i>clonidine 0.3mg/24hr weekly patch</i>	37	COMBIVENT 20-100MCG/ACT INHALER	20
<i>clobazam 20mg tab</i>	22	<i>clopidogrel 75mg tab</i>	85	COMETRIQ CAP DOSE PACK (100MG)	47
<i>clobetasol propionate 0.05% cream</i>	75	<i>clorazepate dipotassium 15mg tab</i>	18	COMETRIQ CAP DOSE PACK (140MG)	47
<i>clobetasol propionate 0.05% e cream</i>	75	<i>clorazepate dipotassium 3.75mg tab</i>	18	COMETRIQ CAP DOSE PACK (60MG)	47
<i>clobetasol propionate 0.05% foam</i>	75	<i>clorazepate dipotassium 7.5mg tab</i>	18	COMMIT LOZENGE	103
<i>clobetasol propionate 0.05% gel</i>	75	<i>clotrimazole 10mg lozenge</i>	93	COMPLERA 200-25-300MG TAB	60
<i>clobetasol propionate 0.05% lotion</i>	75	<i>clozapine 100mg odt</i>	57	<i>constulose 10gm/15ml oral soln</i>	88
<i>clobetasol propionate 0.05% ointment</i>	75	<i>clozapine 100mg tab</i>	57	CONTRACEPTIVE FILM	110
<i>clobetasol propionate 0.05% shampoo</i>	75	CLOZAPINE 12.5MG ODT	57	CONTRACEPTIVE FOAM	110
<i>clobetasol propionate 0.05% spray</i>	75	<i>clozapine 150mg odt</i>	57	CONTRACEPTIVE GEL	110
<i>clobetasol propionate 0.05% topical soln</i>	75	<i>clozapine 200mg odt</i>	57	CONTRACEPTIVE SPONGE	110
<i>clomipramine 25mg cap</i>	28	<i>clozapine 200mg tab</i>	57	CONTRACEPTIVE SUPP	110
		<i>clozapine 25mg odt</i>	57		
		<i>clozapine 25mg tab</i>	57		
		<i>clozapine 50mg tab</i>	57		
		COARTEM 20-120MG TAB	41		
		<i>codeine</i>	15		
		<i>phosphate/acetaminophen 15-300mg tab</i>			

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ALPHABETICAL LISTING OF DRUGS

COPIKTRA 15MG CAP	47	<i>cyclosporine modified</i>	63	<i>darifenacin 15mg er tab</i>	108
COPIKTRA 25MG CAP	47	<i>100mg/ml oral soln</i>		<i>darifenacin 7.5mg er tab</i>	108
CORLANOR 5MG TAB	68	<i>cyclosporine modified</i>	63	<i>darunavir 600mg tab</i>	60
CORLANOR 5MG/5ML	68	<i>25mg cap</i>		<i>darunavir 800mg tab</i>	60
ORAL SOLN		<i>cyclosporine modified</i>	63	DAURISMO 100MG TAB	44
CORLANOR 7.5MG TAB	68	<i>50mg cap</i>		DAURISMO 25MG TAB	44
COTELLIC 20MG TAB	47	<i>cyproheptadine 0.4mg/ml</i>	34	DAYVIGO 10MG TAB	87
CREON	77	<i>oral soln</i>		DAYVIGO 5MG TAB	87
120000-76000-24000UNI		<i>cyproheptadine 4mg tab</i>	34	<i>deferasirox 125mg tab for</i>	32
T DR CAP		CYSTADROPS 0.37%	98	<i>oral susp</i>	
CREON	77	OPHTH SOLN		<i>deferasirox 180mg</i>	32
15000-9500-3000UNIT		CYSTAGON 150MG CAP	84	<i>granules</i>	
DR CAP		CYSTAGON 50MG CAP	84	<i>deferasirox 180mg tab</i>	32
CREON	77	CYSTARAN 0.44%	98	<i>deferasirox 250mg tab for</i>	32
30000-19000-6000UNIT		OPHTH SOLN		<i>oral susp</i>	
DR CAP		CYTRA K CRYSTALS	84	<i>deferasirox 360mg</i>	32
CREON	77	CYTRA-3 SYRUP	84	<i>granules</i>	
36000-114000-180000U		D		<i>deferasirox 360mg tab</i>	32
NIT DR CAP		<i>d2.5w/nacl 0.45% inj</i>	90	<i>deferasirox 500mg tab for</i>	32
CREON	77	<i>d5w/nacl 5%-0.33% inj</i>	90	<i>oral susp</i>	
60000-38000-12000UNIT		D5W/NACL 5%-0.33%	90	<i>deferasirox 90mg</i>	32
DR CAP		INJ		<i>granules</i>	
<i>cromolyn sodium 20mg/ml</i>	82	<i>dabigatran etexilate</i>	22	<i>deferasirox 90mg tab</i>	32
<i>oral soln</i>		<i>mesylate 150mg cap</i>		<i>deferiprone 1000mg tab</i>	32
<i>cromolyn sodium 4%</i>	97	<i>dabigatran etexilate</i>	22	<i>deferiprone 500mg tab</i>	32
<i>ophth soln</i>		<i>mesylate 75mg cap</i>		DELSTRIGO	60
CROMOLYN SODIUM	97	<i>dalfampridine 10mg er</i>	102	100-300-300MG TAB	
4% OPHTH SOLN		<i>tab</i>		<i>demeclocycline 150mg</i>	105
<i>cyanocobalamin inj</i>	86	DALVANCE 500MG INJ	40	<i>tab</i>	
<i>cyclafem 7/7/7 28 day</i>	70	<i>danazol 100mg cap</i>	16	<i>demeclocycline 300mg</i>	105
<i>pack</i>		<i>danazol 200mg cap</i>	16	<i>tab</i>	
<i>cyclobenzaprine 10mg</i>	94	<i>danazol 50mg cap</i>	16	DENGVAXIA SUSP	109
<i>tab</i>		<i>dantrolene sodium 100mg</i>	95	DEPO-SUBQ PROVERA	71
<i>cyclobenzaprine 5mg tab</i>	94	<i>cap</i>		104MG/0.65ML	
CYCLOPHOSPHAMIDE	42	<i>dantrolene sodium 25mg</i>	95	SYRINGE	
25MG TAB		<i>cap</i>		DESCOVY 120-15MG	60
CYCLOPHOSPHAMIDE	42	<i>dantrolene sodium 50mg</i>	95	TAB	
50MG TAB		<i>cap</i>		DESCOVY 200-25MG	60
<i>cyclosporine 0.05% ophth</i>	97	<i>dapsone 100mg tab</i>	40	TAB	
<i>emulsion</i>		<i>dapsone 25mg tab</i>	40	<i>desipramine 100mg tab</i>	28
<i>cyclosporine 100mg cap</i>	63	DAPTACEL INJ	106	<i>desipramine 10mg tab</i>	28
<i>cyclosporine 25mg cap</i>	63	<i>daptomycin 500mg inj</i>	40	<i>desipramine 150mg tab</i>	28
<i>cyclosporine modified</i>	63	DAPTOMYCIN 500MG	40	<i>desipramine 25mg tab</i>	28
<i>100mg cap</i>		INJ		<i>desipramine 50mg tab</i>	28

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>desipramine 75mg tab</i>	28	<i>dexamethasone/neomycin</i>	97	DEXTROSE 10% W/	90
<i>desloratadine 5mg tab</i>	34	<i>/polymyxin b 0.1% ophth</i>		SODIUM CHLORIDE	
<i>desmopressin 0.01%</i>	80	<i>susp</i>		0.2%	
<i>nasal spray</i>		<i>dexamethasone/tobramyc</i>	97	DEXTROSE 10% W/	90
<i>desmopressin acetate</i>	80	<i>in 0.3-0.1% ophth susp</i>		SODIUM CHLORIDE	
<i>0.01mg/act nasal spray</i>		DEXCOM G6 RECEIVER	89	0.45%	
<i>desmopressin acetate</i>	81	DEXCOM G6 SENSOR	89	DEXTROSE/SODIUM	90
<i>0.1mg tab</i>		DEXCOM G6	89	CHLORIDE 5-0.225%	
<i>desmopressin acetate</i>	81	TRANSMITTER		INJ	
<i>0.2mg tab</i>		DEXCOM G7 RECEIVER	89	<i>dextrose/sodium chloride</i>	90
<i>desogestrel/ethinyl</i>	70	DEXCOM G7 SENSOR	89	<i>5%-0.225% inj</i>	
<i>estradiol pack</i>		<i>dexmethylphenidate</i>	9	DIACOMIT 250MG CAP	23
<i>desonide 0.05% ointment</i>	75	<i>10mg er cap</i>		DIACOMIT 250MG	23
<i>desoximetasone 0.25%</i>	75	<i>dexmethylphenidate</i>	10	POWDER FOR ORAL	
<i>cream</i>		<i>10mg tab</i>		SUSP	
<i>desoximetasone 0.25%</i>	75	<i>dexmethylphenidate</i>	10	DIACOMIT 500MG CAP	23
<i>ointment</i>		<i>15mg er cap</i>		DIACOMIT 500MG	23
<i>desvenlafaxine succinate</i>	27	<i>dexmethylphenidate</i>	10	POWDER FOR ORAL	
<i>100mg er tab</i>		<i>2.5mg tab</i>		SUSP	
<i>desvenlafaxine succinate</i>	27	<i>dexmethylphenidate</i>	10	DIALYVITE TAB	94
<i>25mg er tab</i>		<i>20mg er cap</i>		<i>dialyvite tab</i>	94
<i>desvenlafaxine succinate</i>	27	<i>dexmethylphenidate</i>	10	DIALYVITE/ZINC TAB	94
<i>50mg er tab</i>		<i>25mg er cap</i>		DIAPHRAGM	89
<i>dexamethasone 0.1mg/ml</i>	71	<i>dexmethylphenidate</i>	10	<i>diazepam 10mg tab</i>	18
<i>oral soln</i>		<i>30mg er cap</i>		DIAZEPAM 10MG/2ML	22
DEXAMETHASONE	71	<i>dexmethylphenidate</i>	10	RECTAL GEL	
0.5MG TAB		<i>35mg er cap</i>		<i>diazepam 1mg/ml oral</i>	18
<i>dexamethasone 0.5mg tab</i>	71	<i>dexmethylphenidate</i>	10	<i>soln</i>	
DEXAMETHASONE	71	<i>40mg er cap</i>		DIAZEPAM	22
0.5MG/5ML ORAL SOLN		<i>dexmethylphenidate 5mg</i>	10	2.5MG/0.5ML RECTAL	
DEXAMETHASONE	71	<i>er cap</i>		GEL	
0.75MG TAB		<i>dexmethylphenidate 5mg</i>	10	DIAZEPAM 20MG/4ML	22
<i>dexamethasone 1.5mg tab</i>	71	<i>tab</i>		RECTAL GEL	
DEXAMETHASONE 1MG	71	<i>dextroamphetamine</i>	9	<i>diazepam 2mg tab</i>	18
TAB		<i>sulfate 10mg er cap</i>		<i>diazepam 5mg tab</i>	18
<i>dexamethasone 2mg tab</i>	71	<i>dextroamphetamine</i>	9	<i>diazepam 5mg/ml oral</i>	18
<i>dexamethasone 4mg tab</i>	71	<i>sulfate 10mg tab</i>		<i>soln</i>	
<i>dexamethasone 6mg tab</i>	71	<i>dextroamphetamine</i>	9	<i>diazoxide 50mg/ml susp</i>	30
DEXAMETHASONE	97	<i>sulfate 15mg er cap</i>		<i>diclofenac potassium</i>	12
PHOSPHATE 0.1%		<i>dextroamphetamine</i>	9	<i>50mg tab</i>	
OPHTH SOLN		<i>sulfate 5mg er cap</i>		<i>diclofenac sodium 0.1%</i>	98
<i>dexamethasone/neomycin</i>	97	<i>dextroamphetamine</i>	9	<i>ophth soln</i>	
<i>/polymyxin b 0.1% ophth</i>		<i>sulfate 5mg tab</i>		<i>diclofenac sodium 1% gel</i>	74
<i>ointment</i>					

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>diclofenac sodium 1.5% topical soln</i>	74	<i>diltiazem 120mg er (12 hr) cap</i>	65	<i>divalproex sodium 250mg dr tab</i>	25
<i>diclofenac sodium 100mg er tab</i>	12	<i>diltiazem 120mg er (24 hr) cap</i>	65	<i>divalproex sodium 250mg er tab</i>	25
<i>diclofenac sodium 25mg dr tab</i>	12	<i>diltiazem 120mg er tab</i>	65	<i>divalproex sodium 500mg dr tab</i>	25
<i>diclofenac sodium 3% gel</i>	74	<i>diltiazem 120mg tab</i>	65	<i>divalproex sodium 500mg er tab</i>	25
<i>diclofenac sodium 50mg dr tab</i>	12	<i>diltiazem 180mg er (24hr) cap</i>	65	<i>dofetilide 125mcg cap</i>	18
<i>diclofenac sodium 75mg dr tab</i>	12	<i>diltiazem 180mg er tab</i>	65	<i>dofetilide 250mcg cap</i>	19
<i>diclofenac/misoprostol 50-0.2mg dr tab</i>	12	<i>diltiazem 240mg er (24hr) cap</i>	65	<i>dofetilide 500mcg cap</i>	19
<i>diclofenac/misoprostol 75-0.2mg dr tab</i>	12	<i>diltiazem 300mg er (24hr) cap</i>	65	DOJOLVI 100% ORAL SOLN	95
<i>dicloxacillin 250mg cap</i>	100	<i>diltiazem 300mg er tab</i>	65	<i>dolishale 28 day pack</i>	70
<i>dicloxacillin 500mg cap</i>	100	<i>diltiazem 30mg tab</i>	65	<i>donepezil 10mg odt</i>	101
<i>dicyclomine 10mg cap</i>	107	<i>diltiazem 360mg cd cap</i>	65	<i>donepezil 10mg tab</i>	101
<i>dicyclomine 20mg tab</i>	107	<i>diltiazem 360mg er cap</i>	65	<i>donepezil 23mg tab</i>	101
<i>dicyclomine 2mg/ml oral soln</i>	107	<i>diltiazem 360mg er tab</i>	65	<i>donepezil 5mg odt</i>	101
DIFICID 200MG TAB	88	<i>diltiazem 420mg er cap</i>	65	<i>donepezil 5mg tab</i>	101
DIFICID 40MG/ML SUSP	88	<i>diltiazem 60mg er cap</i>	65	DOPTELET 20MG TAB	86
<i>diflunisal 500mg tab</i>	13	<i>diltiazem 60mg tab</i>	65	DOPTELET TAB 40MG	86
<i>difluprednate 0.05% ophth emulsion</i>	97	<i>diltiazem 90mg er cap</i>	65	DAILY DOSE PACK	
<i>digox 125mcg tab</i>	66	<i>diltiazem 90mg tab</i>	65	DOPTELET TAB 60MG	86
<i>digoxin 0.05mg/ml oral soln</i>	66	<i>dimethyl fumarate 120mg dr cap</i>	102	DAILY DOSE PACK	
DIGOXIN 0.05 MG/ML ORAL SOLN	66	<i>dimethyl fumarate 120mg/dimethyl fumarate 240mg pack</i>	102	<i>dorzolamide 2% ophth soln</i>	98
DIGOXIN 0.05MG/ML ORAL SOLN	66	<i>dimethyl fumarate 240mg dr cap</i>	102	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	96
<i>digoxin 0.25mg tab</i>	66	DIPHThERIA/TETANUS TOXOID INJ	106	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln (preservative-free)</i>	96
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	89	<i>dipyridamole 25mg tab</i>	85	DOVATO 50-300MG TAB	60
DILANTIN 100MG ER CAP	25	<i>dipyridamole 50mg tab</i>	85	<i>doxazosin 1mg tab</i>	38
DILANTIN 30MG ER CAP	25	<i>dipyridamole 75mg tab</i>	85	<i>doxazosin 2mg tab</i>	38
<i>dilt 120mg er cap</i>	65	<i>disopyramide 100mg cap</i>	18	<i>doxazosin 4mg tab</i>	38
<i>dilt 180mg er cap</i>	65	<i>disopyramide 150mg cap</i>	18	<i>doxazosin 8mg tab</i>	38
<i>dilt 240mg er cap</i>	65	<i>disulfiram 250mg tab</i>	101	<i>doxepin 100mg cap</i>	28
		<i>disulfiram 500mg tab</i>	101	<i>doxepin 10mg cap</i>	28
		<i>divalproex sodium 125mg dr cap</i>	25	<i>doxepin 10mg/ml oral soln</i>	28
		<i>divalproex sodium 125mg dr tab</i>	25	<i>doxepin 150mg cap</i>	28
				<i>doxepin 25mg cap</i>	28
				<i>doxepin 50mg cap</i>	28
				<i>doxepin 75mg cap</i>	28

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>doxy 100mg inj</i>	105	DUPIXENT	76	ELIGARD 7.5MG INJ	44
<i>doxycycline hyclate 100mg cap</i>	105	100MG/0.67ML SYRINGE		ELIQUIS 2.5MG TAB	21
<i>doxycycline hyclate 100mg tab</i>	105	DUPIXENT	76	ELIQUIS 5MG TAB	21
<i>doxycycline hyclate 20mg tab</i>	105	200MG/1.14ML AUTO-INJECTOR		ELIQUIS 5MG TAB	21
<i>doxycycline hyclate 50mg cap</i>	105	DUPIXENT	76	30-DAY STARTER PACK	
<i>doxycycline monohydrate 100mg tab</i>	105	200MG/1.14ML SYRINGE		ELLA TAB	71
<i>doxycycline monohydrate 50mg cap</i>	105	DUPIXENT 300MG/2ML AUTO-INJECTOR	76	ELMIRON 100MG CAP	84
<i>doxycycline monohydrate 50mg tab</i>	105	DUPIXENT 300MG/2ML SYRINGE	76	<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	71
<i>doxycycline monohydrate 5mg/ml susp</i>	105	<i>dutasteride 0.5mg cap</i>	84	EMCYT 140MG CAP	44
<i>doxylamine succinate/pyridoxine 10-10mg dr tab</i>	33	E		EMGALITY 100MG/ML INJ	90
DRISDOL CAP	110	<i>econazole nitrate 1% cream</i>	73	EMGALITY 120MG/ML AUTO-INJECTOR	89
<i>dronabinol 10mg cap</i>	33	EDEX 10MCG INJ KIT	67	EMGALITY 120MG/ML INJ	89
<i>dronabinol 2.5mg cap</i>	33	EDEX 10MCG INJ KIT	67	EMSAM 12MG/24HR PATCH	26
<i>dronabinol 5mg cap</i>	33	EDEX 20MCG INJ KIT	67	EMSAM 6MG/24HR PATCH	26
<i>drospirenone/ethinyl estradiol/levomefolate calcium 3-0.02-0.451mg pack</i>	70	EDEX 20MCG INJ KIT	67	EMSAM 9MG/24HR PATCH	26
DROXIA 200MG CAP	86	EDEX 40MCG INJ KIT	67	<i>emtricitabine 200mg cap</i>	60
DROXIA 300MG CAP	86	EDEX INJ	67	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	
DROXIA 400MG CAP	86	EDURANT 25MG TAB	60	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	
<i>droxidopa 100mg cap</i>	110	EFAVIRENZ 200MG CAP	60	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	
<i>droxidopa 200mg cap</i>	110	EFAVIRENZ 50MG CAP	60	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	60
<i>droxidopa 300mg cap</i>	110	<i>efavirenz 600mg tab</i>	60	EMTRIVA 10MG/ML ORAL SOLN	60
DRYSOL SOLN	77	<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	60	<i>enalapril maleate 10mg tab</i>	36
DULERA 100-5MCG INHALER	20	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	60	<i>enalapril maleate 2.5mg tab</i>	36
DULERA 200-5MCG INHALER	20	<i>electrolyte-148 solution</i>	90	<i>enalapril maleate 20mg tab</i>	36
DULERA 50-5MCG INHALER	20	<i>electrolyte-a solution</i>	90		
<i>duloxetine 20mg dr cap</i>	27	<i>eletriptan 20mg tab</i>	90		
<i>duloxetine 30mg dr cap</i>	27	<i>eletriptan 40mg tab</i>	90		
<i>duloxetine 60mg dr cap</i>	27	ELIGARD 22.5MG INJ	44		
		ELIGARD 30MG INJ	44		
		ELIGARD 45MG INJ	44		

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ALPHABETICAL LISTING OF DRUGS

<i>enalapril maleate 5mg tab</i>	36	ENTRESTO 24-26MG TAB	66	<i>erythromycin 250mg dr cap</i>	88
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	38	ENTRESTO 49-51MG TAB	66	<i>erythromycin 250mg tab</i>	88
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	38	ENTRESTO 97-103MG TAB	66	<i>erythromycin 333mg dr tab</i>	88
ENBREL 25MG INJ	13	<i>enulose 10gm/15ml oral soln</i>	83	<i>erythromycin 500mg dr tab</i>	88
ENBREL 25MG/0.5ML INJ	13	ENVARUSUS 0.75MG ER TAB	63	<i>erythromycin 500mg tab</i>	88
ENBREL 25MG/0.5ML SYRINGE	13	ENVARUSUS 1MG ER TAB	63	<i>erythromycin</i>	88
ENBREL 50MG/ML AUTO-INJECTOR	13	ENVARUSUS 4MG ER TAB	63	<i>ethylsuccinate 40mg/ml susp</i>	
ENBREL 50MG/ML CARTRIDGE	13	EPIDIOLEX 100MG/ML ORAL SOLN	23	<i>erythromycin</i>	88
ENBREL 50MG/ML SYRINGE	13	<i>epinastine 0.05% ophth soln</i>	98	<i>ethylsuccinate 80mg/ml susp</i>	
ENDARI 5GM POWDER FOR ORAL SOLN	86	<i>epinephrine 0.15mg/0.3ml auto-injector (2 pack)</i>	110	<i>erythromycin/benzoyl peroxide 5-3% gel</i>	73
ENGERIX-B 10MCG/0.5ML INJ	109	<i>epinephrine 0.3mg/0.3ml auto-injector (2 pack)</i>	110	ESCAVITE CHEW TAB	94
ENGERIX-B 20MCG/ML INJ	109	<i>epplerenone 25mg tab</i>	39	<i>escitalopram 10mg tab</i>	26
<i>enoxaparin sodium 100mg/1ml syringe</i>	21	<i>epplerenone 50mg tab</i>	39	<i>escitalopram 1mg/ml oral soln</i>	26
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	21	EPRONTIA 25MG/ML ORAL SOLN	23	<i>escitalopram 20mg tab</i>	26
<i>enoxaparin sodium 150mg/1ml syringe</i>	21	ERGOLOID MESYLATES USP 1MG TAB	103	<i>escitalopram 5mg tab</i>	26
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	21	ERIVEDGE 150MG CAP	44	<i>esomeprazole 20mg dr cap (rx only)</i>	107
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	21	ERLEADA 240MG TAB	45	<i>esomeprazole 40mg dr cap</i>	107
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	21	ERLEADA 60MG TAB	45	<i>estarylla 28 day pack esterified</i>	70
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	21	<i>erlotinib 100mg tab</i>	43	<i>estrogens/methyltestosterone tab</i>	81
ENSPRYNG 120MG/ML SYRINGE	93	<i>erlotinib 150mg tab</i>	43	<i>estradiol 0.01% vaginal cream</i>	110
<i>entacapone 200mg tab</i>	53	<i>erlotinib 25mg tab</i>	43	<i>estradiol 0.01mg vaginal insert</i>	110
<i>entecavir 0.5mg tab</i>	62	<i>ertapenem 1000mg inj</i>	40	<i>estradiol 0.025mg/24hr twice weekly patch</i>	81
<i>entecavir 1mg tab</i>	62	ERY 2% PAD	73	<i>estradiol 0.025mg/24hr weekly patch</i>	81
		<i>ery-tab 250mg dr tab</i>	88	<i>estradiol 0.0375mg/24hr twice weekly patch</i>	81
		<i>erythromycin 0.5% ophth ointment</i>	96	<i>estradiol 0.0375mg/24hr weekly patch</i>	81
		<i>erythromycin 2% gel</i>	73	<i>estradiol 0.05mg/24hr twice weekly patch</i>	81
		<i>erythromycin 2% topical soln</i>	73		
		ERYTHROMYCIN 250MG DR CAP	88		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>estradiol 0.05mg/24hr weekly patch</i>	81	<i>ethinyl estradiol 0.05mg/ethynodiol 1mg/inert ingredients 1mg 28 day pack</i>	70	EXTAVIA 0.3MG INJ	102
<i>estradiol 0.06mg/24hr weekly patch</i>	81	<i>ethinyl estradiol/ferrous fumarate/norethindrone acetate 0.02-75-1mg pack (24)</i>	70	<i>ezetimibe 10mg tab</i>	36
<i>estradiol 0.075mg/24hr twice weekly patch</i>	81	<i>ethinyl estradiol/levonorgestrel 91 day pack</i>	70	<i>ezetimibe 10mg/simvastatin 10mg tab</i>	34
<i>estradiol 0.075mg/24hr weekly patch</i>	81	<i>ethosuximide 250mg cap</i>	25	<i>ezetimibe 10mg/simvastatin 20mg tab</i>	34
<i>estradiol 0.1mg/24hr twice weekly patch</i>	81	<i>ethosuximide 50mg/ml oral soln</i>	25	<i>ezetimibe 10mg/simvastatin 40mg tab</i>	34
<i>estradiol 0.1mg/24hr weekly patch</i>	81	<i>etodolac 200mg cap</i>	12	<i>ezetimibe 10mg/simvastatin 80mg tab</i>	34
<i>estradiol 0.5mg tab</i>	81	<i>etodolac 300mg cap</i>	12	<hr/>	
<i>estradiol 1mg tab</i>	81	<i>etodolac 400mg er tab</i>	12	F	
<i>estradiol 2mg tab</i>	81	<i>etodolac 400mg tab</i>	12	<i>famciclovir 125mg tab</i>	62
<i>estradiol valerate 10mg/ml inj</i>	81	<i>etodolac 500mg er tab</i>	12	<i>famciclovir 250mg tab</i>	62
<i>estradiol valerate 20mg/ml inj</i>	81	<i>etodolac 500mg tab</i>	12	<i>famciclovir 500mg tab</i>	62
<i>estradiol valerate 40mg/ml inj</i>	81	<i>etodolac 600mg er tab</i>	12	<i>famotidine 20mg tab</i>	107
ESTRING 2MG VAGINAL SYSTEM	110	ETOPOSIDE CAP	53	<i>famotidine 40mg tab</i>	107
<i>eszopiclone 1mg tab</i>	87	<i>etravirine 100mg tab</i>	60	<i>famotidine 8mg/ml susp</i>	107
<i>eszopiclone 2mg tab</i>	87	<i>etravirine 200mg tab</i>	60	FANAPT 10MG TAB	56
<i>eszopiclone 3mg tab</i>	87	<i>everolimus 0.25mg tab</i>	93	FANAPT 12MG TAB	56
<i>ethambutol 100mg tab</i>	42	<i>everolimus 0.5mg tab</i>	93	FANAPT 1MG TAB	56
<i>ethambutol 400mg tab</i>	42	<i>everolimus 0.75mg tab</i>	93	FANAPT 2MG TAB	56
<i>ethinyl estradiol 0.02mg/inert ingredients 1mg/levonorgestrel 0.1mg pack</i>	70	<i>everolimus 10mg tab</i>	47	FANAPT 4MG TAB	56
<i>ethinyl estradiol 0.035mg/ethynodiol 1mg 28 day pack</i>	70	<i>everolimus 1mg tab</i>	93	FANAPT 6MG TAB	56
<i>ethinyl estradiol 0.035mg/inert/norgestimate 0.18mg/0.215mg/0.25mg pack</i>	70	<i>everolimus 2.5mg tab</i>	48	FANAPT 8MG TAB	56
<i>ethinyl estradiol 0.03mg/inert ingredients 1mg/levonorgestrel 0.15mg pack</i>	70	<i>everolimus 2mg tab for oral susp</i>	48	FANAPT TITRATION PACK	56
		<i>everolimus 3mg tab for oral susp</i>	48	FARXIGA 10MG TAB	31
		<i>everolimus 5mg tab</i>	48	FARXIGA 5MG TAB	31
		<i>everolimus 5mg tab for oral susp</i>	48	FASENRA 30MG/ML AUTO-INJECTOR	19
		<i>everolimus 7.5mg tab</i>	48	FASENRA 30MG/ML SYRINGE	19
		EVOTAZ 300-150MG TAB	60	<i>febuxostat 40mg tab</i>	85
		EVRYSDI 0.75MG/ML ORAL SOLN	95	<i>febuxostat 80mg tab</i>	85
		<i>exemestane 25mg tab</i>	44	<i>felbamate 120mg/ml susp</i>	25
		EXKIVITY 40MG CAP	44	<i>felbamate 400mg tab</i>	25
				<i>felbamate 600mg tab</i>	25
				<i>felodipine 10mg er tab</i>	65
				<i>felodipine 2.5mg er tab</i>	65
				<i>felodipine 5mg er tab</i>	65

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

FEM PH GEL	109	FINACEA 15% FOAM	77	<i>fluocinolone acetonide</i>	98
FEMALE CONDOMS	89	<i>finasteride 5mg tab</i>	84	<i>0.01% otic soln</i>	
FEMRING 0.05MG/24HR	110	<i>fungolimod 0.5mg cap</i>	102	<i>fluocinolone acetonide</i>	75
VAGINAL SYSTEM		FINTEPLA 2.2MG/ML	23	<i>0.01% topical soln</i>	
FEMRING 0.1MG/24HR	110	ORAL SOLN		<i>fluocinolone acetonide</i>	75
VAGINAL SYSTEM		FIRDAPSE 10MG TAB	42	<i>0.025% cream</i>	
<i>fenofibrate 134mg cap</i>	35	FIRMAGON 120MG INJ	45	<i>fluocinolone acetonide</i>	75
<i>fenofibrate 145mg tab</i>	35	FIRMAGON 80MG INJ	45	<i>0.025% ointment</i>	
<i>fenofibrate 160mg tab</i>	35	FIRST MOUTHWASH	93	<i>fluocinolone acetonide</i>	75
<i>fenofibrate 200mg cap</i>	35	BLM SUSP		<i>0.1mg/ml oil</i>	
<i>fenofibrate 48mg tab</i>	35	FIRST OMEPRAZOLE	107	<i>fluocinonide 0.05% cream</i>	75
<i>fenofibrate 54mg tab</i>	35	SUSP		<i>fluocinonide 0.05% e</i>	75
<i>fenofibrate 67mg cap</i>	35	<i>flavoxate 100mg tab</i>	108	<i>cream</i>	
FENOFIBRATE	35	FLEBOGAMMA	98	<i>fluocinonide 0.05% gel</i>	75
MICRONIZED 90MG		0.5GM/10ML INJ		<i>fluocinonide 0.05%</i>	75
CAP		<i>flecainide acetate 100mg</i>	18	<i>ointment</i>	
<i>fenofibric acid 135mg dr</i>	35	<i>tab</i>		<i>fluocinonide 0.05%</i>	75
<i>cap</i>		<i>flecainide acetate 150mg</i>	18	<i>topical soln</i>	
<i>fenofibric acid 45mg dr</i>	35	<i>tab</i>		<i>fluocinonide 0.1% cream</i>	75
<i>cap</i>		<i>flecainide acetate 50mg</i>	18	<i>fluorometholone 0.1%</i>	97
<i>fentanyl 100mcg/hr patch</i>	14	<i>tab</i>		<i>ophth susp</i>	
<i>fentanyl 1200mcg lozenge</i>	14	FLECTOR 1.3% PATCH,	74	FLUOROURACIL 2%	74
<i>fentanyl 12mcg/hr patch</i>	14	DICLOFENAC 1.3%		TOPICAL SOLN	
<i>fentanyl 1600mcg lozenge</i>	14	PATCH		<i>fluorouracil 5% cream</i>	74
<i>fentanyl 200mcg lozenge</i>	14	FLORIVA PLUS DROPS	94	FLUOROURACIL 5%	74
<i>fentanyl 25mcg/hr patch</i>	14	<i>fluconazole 100mg tab</i>	34	TOPICAL SOLN	
<i>fentanyl 400mcg lozenge</i>	14	<i>fluconazole 10mg/ml susp</i>	34	<i>fluoxetine 10mg cap</i>	26
<i>fentanyl 50mcg/hr patch</i>	14	<i>fluconazole 150mg tab</i>	34	<i>fluoxetine 20mg cap</i>	26
<i>fentanyl 600mcg lozenge</i>	14	<i>fluconazole 200mg tab</i>	34	<i>fluoxetine 40mg cap</i>	26
<i>fentanyl 75mcg/hr patch</i>	14	<i>fluconazole 2mg/ml</i>	34	<i>fluoxetine 4mg/ml oral</i>	27
<i>fentanyl 800mcg lozenge</i>	14	<i>(100ml) inj</i>		<i>soln</i>	
<i>ferrex forte cap</i>	87	<i>fluconazole 2mg/ml</i>	34	<i>fluoxetine 60mg tab</i>	27
<i>fesoterodine fumarate</i>	108	<i>(200ml) inj</i>		FLUPHENAZINE	58
<i>4mg er tab</i>		<i>fluconazole 40mg/ml susp</i>	34	0.5MG/ML ORAL SOLN	
<i>fesoterodine fumarate</i>	108	<i>fluconazole 50mg tab</i>	34	<i>fluphenazine 10mg tab</i>	58
<i>8mg er tab</i>		<i>flucytosine 250mg cap</i>	33	<i>fluphenazine 1mg tab</i>	58
FETZIMA 120MG ER	27	<i>flucytosine 500mg cap</i>	33	<i>fluphenazine 2.5mg tab</i>	58
CAP		<i>fludrocortisone 0.1mg tab</i>	72	FLUPHENAZINE	58
FETZIMA 20MG ER CAP	27	<i>flunisolide 25mcg/act</i>	95	2.5MG/ML INJ	
FETZIMA 40MG ER CAP	27	<i>nasal inhaler</i>		<i>fluphenazine 5mg tab</i>	58
FETZIMA 80MG ER CAP	27	<i>fluocinolone acetonide</i>	75	FLUPHENAZINE	58
FETZIMA PACK	27	<i>0.01% body oil</i>		5MG/ML ORAL SOLN	
FILSPARI 200MG TAB	84	<i>fluocinolone acetonide</i>	75	<i>fluphenazine decanoate</i>	58
FILSPARI 400MG TAB	84	<i>0.01% cream</i>		<i>25mg/ml inj</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>flurbiprofen 100mg tab</i>	12	<i>folbee tab</i>	87	FUROSCIX 80MG/10ML	78
FLURBIPROFEN	98	<i>folic acid tab 1mg</i>	86	CARTRIDGE	
SODIUM 0.03% OPHTH SOLN		<i>folic acid tab 400mcg</i>	86	<i>furosemide 10mg/ml inj</i>	78
<i>fluticasone propionate 0.005% ointment</i>	75	<i>folic acid tab 800mcg</i>	86	<i>furosemide 10mg/ml oral soln</i>	78
<i>fluticasone propionate 0.05% cream</i>	75	<i>fondaparinux sodium 12.5mg/ml (0.4ml) inj</i>	21	<i>furosemide 20mg tab</i>	78
FLUTICASONE PROPIONATE 110MCG INHALER	19	<i>fondaparinux sodium 12.5mg/ml (0.6ml) inj</i>	21	<i>furosemide 40mg tab</i>	78
FLUTICASONE PROPIONATE 220MCG INHALER	19	<i>fondaparinux sodium 12.5mg/ml (0.8ml) inj</i>	21	<i>furosemide 80mg tab</i>	78
FLUTICASONE PROPIONATE 44MCG INHALER	19	<i>fondaparinux sodium 5mg/ml (0.5mg) inj</i>	21	FUROSEMIDE 8MG/ML ORAL SOLN	78
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	95	<i>formoterol fumarate 20mcg/2ml neb soln</i>	20	FUZEON 90MG INJ	60
<i>fluticasone propionate/salmeterol 100-50mcg/act dry powder inhaler, wixela 100-50mcg inhaler</i>	20	<i>fosamprenavir 700mg tab</i>	60	<i>fyavolv 0.0025-0.5mg tab</i>	81
<i>fluticasone propionate/salmeterol 250-50mcg/act dry powder inhaler, wixela 250-50mcg inhaler</i>	20	<i>fosfomycin 3000mg powder for oral soln</i>	41	<i>fyavolv 0.005-1mg tab</i>	81
<i>fluticasone propionate/salmeterol 500-50mcg/act dry powder inhaler, wixela 500-50mcg inhaler</i>	20	<i>fosinopril sodium 10mg tab</i>	36	FYCOMPA 0.5MG/ML SUSP	22
<i>fluvastatin 20mg cap</i>	35	<i>fosinopril sodium 20mg tab</i>	36	FYCOMPA 10MG TAB	22
<i>fluvastatin 40mg cap</i>	35	<i>fosinopril sodium 40mg tab</i>	36	FYCOMPA 12MG TAB	22
<i>fluvastatin 80mg er tab</i>	35	<i>fosinopril</i>	38	FYCOMPA 2MG TAB	22
<i>fluvoxamine maleate 100mg tab</i>	27	<i>sodium/hydrochlorothiazide 10-12.5mg tab</i>	38	FYCOMPA 4MG TAB	22
<i>fluvoxamine maleate 25mg tab</i>	27	<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	38	FYCOMPA 6MG TAB	22
<i>fluvoxamine maleate 50mg tab</i>	27	FOSRENOL 1000MG ORAL POWDER	83	FYCOMPA 8MG TAB	22
FOLBEE PLUS CZ TAB	94	FOSRENOL 750MG ORAL POWDER	83	<hr/>	
		FOTIVDA 0.89MG CAP	48	G	
		FOTIVDA 1.34MG CAP	48	<i>gabapentin 100mg cap</i>	23
		FREESTYLE LIBRE 2 RECEIVER	89	<i>gabapentin 300mg cap</i>	23
		FREESTYLE LIBRE 2 SENSOR	89	<i>gabapentin 400mg cap</i>	23
		FREESTYLE LIBRE 2 RECEIVER	89	<i>gabapentin 50mg/ml oral soln</i>	23
		FREESTYLE LIBRE 2 SENSOR (14-DAY)	89	<i>gabapentin 600mg tab</i>	23
				<i>gabapentin 800mg tab</i>	23
				GALAFOLD 28 DAY WALLET 123MG PACK	80
				<i>galantamine 12mg tab</i>	101
				<i>galantamine 4mg tab</i>	101
				<i>galantamine 8mg tab</i>	101
				<i>galantamine hydrobromide 16mg er cap</i>	101
				<i>galantamine hydrobromide 24mg er cap</i>	101
				GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	101

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>galantamine</i>	101	<i>gentamicin 0.3% ophth soln</i>	96	GLUCOSE	90
<i>hydrobromide 8mg er cap</i>				25MG/ML/SODIUM	
GALZIN CAP	92	GENTAMICIN 0.8MG/ML	11	CHLORIDE 0.0769	
GAMMAGARD 10GM	98	INJ		MEQ/ML INJ	
INJ		<i>gentamicin 1.2mg/ml inj</i>	11	<i>glucose 50</i>	90
GAMMAGARD	98	GENTAMICIN 1.6MG/ML	11	<i>mg/ml/potassium chloride</i>	
10GM/100ML INJ		INJ		<i>0.04meq/ml/sodium</i>	
GAMMAGARD	98	GENTAMICIN 1MG/ML	11	<i>chloride 4.5mg/ml inj</i>	
2.5GM/25ML INJ		INJ		<i>glucose 50mg/ml inj</i>	95
GAMMAGARD	98	<i>gentamicin 40mg/ml inj</i>	11	<i>glucose</i>	91
20GM/200ML INJ		GENVOYA	60	<i>50mg/ml/potassium</i>	
GAMMAGARD	98	150-150-200-10MG TAB		<i>chloride 0.01</i>	
30GM/300ML INJ		GILOTRIF 20MG TAB	44	<i>meq/ml/sodium chloride</i>	
GAMMAGARD 5GM INJ	98	GILOTRIF 30MG TAB	44	<i>0.0769 meq/ml inj</i>	
GAMMAGARD	99	GILOTRIF 40MG TAB	44	<i>glucose</i>	91
5GM/50ML INJ		GLASSIA 1000MG/50ML	104	<i>50mg/ml/potassium</i>	
GAMMAKED 1GM/10ML	99	INJ		<i>chloride 0.02 meq/ml inj</i>	
INJ		<i>glatiramer acetate</i>	103	<i>glucose</i>	91
GAMMAPLEX	99	<i>20mg/ml syringe</i>		<i>50mg/ml/potassium</i>	
10GM/100ML INJ		<i>glatiramer acetate</i>	103	<i>chloride 0.02</i>	
GAMMAPLEX	99	<i>40mg/ml syringe</i>		<i>meq/ml/sodium chloride</i>	
10GM/200ML INJ		GLEOSTINE 100MG CAP	42	<i>0.0342 meq/ml inj</i>	
GAMMAPLEX	99	GLEOSTINE 10MG CAP	42	<i>glucose</i>	91
20GM/400ML INJ		GLEOSTINE 40MG CAP	42	<i>50mg/ml/potassium</i>	
GAMUNEX-C	99	<i>glimepiride 1mg tab</i>	32	<i>chloride 0.02</i>	
40GM/400ML INJ		<i>glimepiride 2mg tab</i>	32	<i>meq/ml/sodium chloride</i>	
GARDASIL 9 INJ	109	<i>glimepiride 4mg tab</i>	32	<i>0.154 meq/ml inj</i>	
GARDASIL 9 SYRINGE	109	<i>glipizide 10mg er tab</i>	32	<i>glucose</i>	91
GATTEX 5MG INJ	84	<i>glipizide 10mg tab</i>	32	<i>50mg/ml/potassium</i>	
GAUZE PADS	88	<i>glipizide 2.5mg er tab</i>	32	<i>chloride</i>	
DRESSINGS - PADS 2 X 2		<i>glipizide 5mg er tab</i>	32	<i>0.02meq/ml/sodium</i>	
GAVILYTE-C ORAL	88	<i>glipizide 5mg tab</i>	32	<i>chloride 4.5mg/ml inj</i>	
SOLN		<i>glipizide/metformin</i>	29	<i>glucose</i>	91
<i>gavilyte-g powder for</i>	88	<i>2.5-250mg tab</i>		<i>50mg/ml/potassium</i>	
<i>oral soln</i>		<i>glipizide/metformin</i>	29	<i>chloride 0.03</i>	
<i>gavilyte-n powder for</i>	88	<i>2.5-500mg tab</i>		<i>meq/ml/sodium chloride</i>	
<i>oral soln</i>		<i>glipizide/metformin</i>	29	<i>0.0769 meq/ml inj</i>	
GAVRETO 100MG CAP	48	<i>5-500mg tab</i>		<i>glucose 50mg/ml/sodium</i>	91
<i>gefitinib 250mg tab</i>	44	GLUCAGEN 1MG INJ	30	<i>chloride 0.0342 meq/ml</i>	
<i>gemfibrozil 600mg tab</i>	35	<i>glucagon (rdna) 1mg inj</i>	30	<i>inj</i>	
GEMTESA 75MG TAB	108	<i>kit</i>		<i>glucose 50mg/ml/sodium</i>	91
<i>gentamicin 0.1% cream</i>	73	GLUCAGON 1MG KIT	30	<i>chloride 4.5mg/ml inj</i>	
<i>gentamicin 0.1% ointment</i>	73	<i>glucose 100mg/ml inj</i>	95	<i>glucose 50mg/ml/sodium</i>	91
				<i>chloride 9mg/ml inj</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>glyburide 1.25mg tab</i>	32	HAEGARDA 3000UNIT	85	HUMALOG JUNIOR	31
<i>glyburide 1.5mg tab</i>	32	INJ		100UNIT/ML PEN INJ	
<i>glyburide 2.5mg tab</i>	32	<i>halobetasol propionate</i>	75	HUMALOG MIX	31
<i>glyburide 3mg tab</i>	32	<i>0.05% cream</i>		25-75UNIT/ML INJ	
<i>glyburide 5mg tab</i>	32	<i>halobetasol propionate</i>	75	HUMALOG MIX	31
<i>glyburide 6mg tab</i>	32	<i>0.05% ointment</i>		25-75UNIT/ML PEN INJ	
<i>glyburide/metformin</i>	29	<i>haloperidol 0.5mg tab</i>	57	HUMALOG MIX	31
<i>1.25-250mg tab</i>		<i>haloperidol 10mg tab</i>	57	50-50UNIT/ML INJ	
<i>glyburide/metformin</i>	29	<i>haloperidol 1mg tab</i>	57	HUMALOG MIX	31
<i>2.5-500mg tab</i>		<i>haloperidol 20mg tab</i>	57	50-50UNIT/ML PEN INJ	
<i>glyburide/metformin</i>	29	<i>haloperidol 2mg tab</i>	57	HUMIRA 10MG/0.1ML	11
<i>5-500mg tab</i>		<i>haloperidol 2mg/ml oral</i>	57	SYRINGE	
<i>glycopyrrolate 1mg tab</i>	107	<i>soln</i>		HUMIRA 20MG/0.2ML	11
<i>glycopyrrolate 2mg tab</i>	107	<i>haloperidol 5mg tab</i>	57	SYRINGE	
GLYXAMBI 10-5MG TAB	29	<i>haloperidol 5mg/ml inj</i>	57	HUMIRA 40MG/0.4ML	11
GLYXAMBI 25-5MG TAB	29	<i>haloperidol decanoate</i>	57	AUTO-INJECTOR	
<i>granisetron 1mg tab</i>	33	<i>100mg/ml inj</i>		HUMIRA 40MG/0.4ML	11
<i>griseofulvin 125mg tab</i>	33	<i>haloperidol decanoate</i>	57	SYRINGE	
<i>griseofulvin 250mg tab</i>	33	<i>50mg/ml inj</i>		HUMIRA 40MG/0.8ML	11
<i>griseofulvin 25mg/ml</i>	33	HAVRIX 1440ELU/ML	109	AUTO-INJECTOR	
<i>susp</i>		INJ		HUMIRA 40MG/0.8ML	11
<i>griseofulvin 500mg tab</i>	33	HAVRIX 720ELU/0.5ML	109	SYRINGE	
<i>guaifenesin/codeine</i>	72	INJ		HUMIRA 80MG/0.8ML	11
<i>syrup</i>		<i>heparin sodium</i>	21	AUTO-INJECTOR	
GUAIFENESIN/CODEINE	72	<i>5000unit/0.5ml inj (PF)</i>		HUMIRA PEDIATRIC	11
SYRUP		<i>heparin sodium porcine</i>	22	CROHN'S STARTER	
<i>guanfacine 1mg er tab</i>	9	<i>10000unit/ml inj</i>		PACK (3) 80MG/0.8ML	
<i>guanfacine 1mg tab</i>	38	<i>heparin sodium porcine</i>	22	SYRINGE	
<i>guanfacine 2mg er tab</i>	9	<i>1000unit/ml inj</i>		HUMIRA PEDIATRIC	11
<i>guanfacine 2mg tab</i>	38	<i>heparin sodium porcine</i>	22	CROHN'S STARTER	
<i>guanfacine 3mg er tab</i>	9	<i>20000unit/ml inj</i>		PACK SYRINGE (2)	
<i>guanfacine 4mg er tab</i>	9	<i>heparin sodium porcine</i>	22	40MG/0.4ML,	
GVOKE 0.5MG/0.1ML	30	<i>5000unit/ml inj</i>		80MG/0.8ML	
AUTO-INJECTOR		HEPLISAV-B	109	HUMIRA PEN - CROHN'S	11
GVOKE 0.5MG/0.1ML	30	20MCG/0.5ML SYRINGE		STARTER PACK	
SYRINGE		HIBERIX 10MCG INJ	108	40MG/0.8ML INJ	
GVOKE 1MG/0.2ML	30	HOMATROPINE OPHTH	96	HUMIRA PEN -	11
AUTO-INJECTOR		SOLN		PEDIATRIC UC STARTER	
GVOKE 1MG/0.2ML INJ	30	HUMALOG 100UNIT/ML	31	PACK 80MG/0.8ML INJ	
GVOKE 1MG/0.2ML	30	CARTRIDGE		HUMIRA PEN -	12
SYRINGE		HUMALOG 100UNIT/ML	31	PSORIASIS STARTER	
		KWIKPEN		PACK 40MG/0.8ML	
H		HUMALOG 200UNIT/ML	31		
HAEGARDA 2000UNIT	85	PEN INJ			
INJ					

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

HUMIRA PEN - PSORIASIS STARTER PACK 80MG/0.8ML INJ	12	<i>hydrochlorothiazide/lisin opril 12.5-10mg tab</i>	39	<i>hydrochlorothiazide/vals artan 12.5-320mg tab</i>	39
HUMIRA PEN 80MG/0.8ML - STARTER PACK FOR CROHN'S DISEASE ULCERATIVE COLITIS OR HIDRADENITIS SUPPURAT	12	<i>hydrochlorothiazide/lisin opril 12.5-20mg tab</i>	39	<i>hydrochlorothiazide/vals artan 12.5-80mg tab</i>	39
HUMULIN 70-30UNIT/ML INJ	31	<i>hydrochlorothiazide/lisin opril 25-20mg tab</i>	39	<i>hydrochlorothiazide/vals artan 25-160mg tab</i>	39
HUMULIN 70-30UNIT/ML PEN INJ	31	<i>hydrochlorothiazide/losar tan potassium 12.5-100mg tab</i>	39	<i>hydrochlorothiazide/vals artan 25-320mg tab</i>	39
HUMULIN N 100UNIT/ML INJ	31	<i>hydrochlorothiazide/losar tan potassium 12.5-50mg tab</i>	39	HYDROCODONE BITARTRATE 10MG ER CAP	14
HUMULIN N 100UNIT/ML PEN INJ	31	<i>hydrochlorothiazide/losar tan potassium 25-100mg tab</i>	39	HYDROCODONE BITARTRATE 15MG ER CAP	14
HUMULIN R 100UNIT/ML INJ	31	<i>hydrochlorothiazide/meto prolol tartrate 25-100mg tab</i>	39	HYDROCODONE BITARTRATE 20MG ER CAP	14
HUMULIN R 100UNIT/ML INJ	31	<i>hydrochlorothiazide/meto prolol tartrate 25-50mg tab</i>	39	HYDROCODONE BITARTRATE 30MG ER CAP	14
HUMULIN R 500UNIT/ML INJ	31	<i>hydrochlorothiazide/meto prolol tartrate 50-100mg tab</i>	39	HYDROCODONE BITARTRATE 40MG ER CAP	14
HUMULIN R 500UNIT/ML PEN INJ	31	<i>hydrochlorothiazide/olme sartan medoxomil 12.5-20mg tab</i>	39	HYDROCODONE BITARTRATE 50MG ER CAP	14
HYCAMTIN CAP	53	<i>hydrochlorothiazide/olme sartan medoxomil 12.5-20mg tab</i>	39	<i>hydrocodone/acetaminop hen 10-325mg tab</i>	15
HYCODAN SYRUP	72	<i>hydrochlorothiazide/olme sartan medoxomil 12.5-40mg tab</i>	39	<i>hydrocodone/acetaminop hen 5-325mg tab</i>	15
<i>hydralazine 100mg tab</i>	39	<i>hydrochlorothiazide/olme sartan medoxomil 25-40mg tab</i>	39	<i>hydrocodone/acetaminop hen 7.5-325mg tab</i>	15
<i>hydralazine 10mg tab</i>	39	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	78	<i>hydrocodone/acetaminop hen 7.5-325mg/5ml oral soln</i>	15
<i>hydralazine 25mg tab</i>	39	<i>hydrochlorothiazide/tria mterene 25-37.5mg cap</i>	78	<i>hydrocodone/chlorphenir amine susp</i>	72
<i>hydralazine 50mg tab</i>	39	<i>hydrochlorothiazide/tria mterene 25-37.5mg tab</i>	78	<i>hydrocodone/homatropin e syrup</i>	72
<i>hydralazine/isosorbide dinitrate 37.5-20mg tab</i>	66	<i>hydrochlorothiazide/tria mterene 50-75mg tab</i>	78	HYDROCODONE/IBUPR OFEN 10-200MG TAB	15
<i>hydrochlorothiazide 12.5mg cap</i>	78	<i>hydrochlorothiazide/vals artan 12.5-160mg tab</i>	39	HYDROCODONE/IBUPR OFEN 5-200MG TAB	15
<i>hydrochlorothiazide 12.5mg tab</i>	78				
<i>hydrochlorothiazide 25mg tab</i>	78				
<i>hydrochlorothiazide 50mg tab</i>	78				
<i>hydrochlorothiazide/irbes artan 12.5-150mg tab</i>	38				
<i>hydrochlorothiazide/irbes artan 12.5-300mg tab</i>	38				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>hydrocodone/ibuprofen</i>	15	<i>hyoscyamine sulfate CR</i>	107	INCRELEX 40MG/4ML	80
<i>7.5-200mg tab</i>		<i>tab</i>		INJ	
<i>hydrocortisone 1% cream</i>	16	<i>hyoscyamine sulfate elixir</i>	107	INCRUSE 62.5MCG/INH	19
<i>(RX Only)</i>		<i>hyoscyamine sulfate ODT</i>	107	INHALER	
<i>hydrocortisone 1% cream</i>	16	<i>hyoscyamine sulfate SL</i>	107	<i>indapamide 1.25mg tab</i>	78
<i>(RX Only)</i>		<i>tab</i>		<i>indapamide 2.5mg tab</i>	78
<i>hydrocortisone 1.67mg/ml</i>	16	<i>hyoscyamine sulfate soln</i>	107	<i>indomethacin 25mg cap</i>	13
<i>enema</i>		<i>hyoscyamine sulfate tab</i>	107	<i>indomethacin 50mg cap</i>	13
<i>hydrocortisone 10mg tab</i>	71	HYPER SAL NEB SOLN	72	<i>indomethacin 75mg er</i>	13
<i>hydrocortisone 2.5%</i>	75			<i>cap</i>	
<i>cream</i>		I		INFANRIX INJ	106
<i>hydrocortisone 2.5%</i>	75	<i>ibandronate 150mg tab</i>	79	INGREZZA 40MG CAP	102
<i>lotion</i>		IBRANCE 100MG CAP	48	INGREZZA 60MG CAP	102
<i>hydrocortisone 2.5%</i>	76	IBRANCE 100MG TAB	48	INGREZZA 80MG CAP	102
<i>ointment</i>		IBRANCE 125MG CAP	48	INGREZZA CAP PACK	102
<i>hydrocortisone 20mg tab</i>	71	IBRANCE 125MG TAB	48	INLYTA 1MG TAB	43
<i>hydrocortisone 5mg tab</i>	71	IBRANCE 75MG CAP	48	INLYTA 5MG TAB	43
<i>hydrocortisone supp</i>	16	IBRANCE 75MG TAB	48	INQOVI 5 TABLET PACK	46
<i>hydrocortisone/pramoxin</i>	16	<i>ibuprofen 20mg/ml susp</i>	12	INREBIC 100MG CAP	49
<i>e 2.5-1% rectal cream</i>		<i>ibuprofen 400mg tab</i>	12	INSULIN LISPRO	31
<i>hydromorphone 2mg tab</i>	14	<i>ibuprofen 600mg tab</i>	12	100UNIT/ML INJ	
<i>hydromorphone 4mg tab</i>	14	<i>ibuprofen 800mg tab</i>	13	INSULIN SYRINGE	89
<i>hydromorphone 8mg tab</i>	14	<i>icatibant 10mg/ml inj</i>	85	INSULIN SYRINGE	89
<i>hydroxychloroquine</i>	41	ICLUSIG 10MG TAB	48	U-500	
<i>sulfate 200mg tab</i>		ICLUSIG 15MG TAB	48	INTELENCE 25MG TAB	60
<i>hydroxychloroquine</i>	41	ICLUSIG 30MG TAB	48	INTRALIPID	95
<i>sulfate 300mg tab</i>		ICLUSIG 45MG TAB	48	20GM/100ML INJ	
<i>hydroxychloroquine</i>	41	<i>icosapent ethyl 0.5gm cap</i>	34	INTRALIPID	95
<i>sulfate 400mg tab</i>		<i>icosapent ethyl 1gm cap</i>	34	30GM/100ML INJ	
<i>hydroxychloroquine100m</i>	41	IDHIFA 100MG TAB	48	INVEGA 1092MG/3.5ML	56
<i>g tab</i>		IDHIFA 50MG TAB	48	SYRINGE	
<i>hydroxyurea 500mg cap</i>	53	ILEVRO 0.3% OPHTH	98	INVEGA 117MG/0.75ML	56
<i>hydroxyzine 10mg tab</i>	17	SUSP		INJ	
<i>hydroxyzine 25mg tab</i>	17	<i>imatinib 100mg tab</i>	48	INVEGA 1560MG/5ML	56
<i>hydroxyzine 2mg/ml oral</i>	17	<i>imatinib 400mg tab</i>	48	SYRINGE	
<i>soln</i>		IMBRUVICA 140MG CAP	48	INVEGA 156MG/ML INJ	56
<i>hydroxyzine 50mg tab</i>	17	IMBRUVICA 420MG TAB	48	INVEGA 234MG/1.5ML	56
HYDROXYZINE	17	IMBRUVICA 70MG CAP	48	INJ	
PAMOATE 100MG CAP		IMBRUVICA 70MG/ML	48	INVEGA	56
<i>hydroxyzine pamoate</i>	17	SUSP		273MG/0.875ML INJ	
<i>25mg cap</i>		<i>imipramine 10mg tab</i>	28	INVEGA 39MG/0.25ML	56
<i>hydroxyzine pamoate</i>	17	<i>imipramine 25mg tab</i>	28	INJ	
<i>50mg cap</i>		<i>imipramine 50mg tab</i>	28	INVEGA	56
		<i>imiquimod 5% cream</i>	76	410MG/1.315ML INJ	
		IMOVAX 2.5UNIT/ML INJ	109		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

INVEGA 546MG/1.75ML INJ	56	<i>isosorbide dinitrate 30mg tab</i>	17	JANUMET 500-50MG ER TAB	29
INVEGA 78MG/0.5ML INJ	56	<i>isosorbide dinitrate 5mg tab</i>	17	JANUMET 500-50MG TAB	29
INVEGA 819MG/2.625ML INJ	56	<i>isosorbide mononitrate 10mg tab</i>	17	JANUVIA 100MG TAB	30
<i>iodoquinol/hydrocortison e cream</i>	73	<i>isosorbide mononitrate 120mg er tab</i>	17	JANUVIA 25MG TAB	30
IPOL INJ	109	<i>isosorbide mononitrate 20mg tab</i>	17	JANUVIA 50MG TAB	30
<i>ipratropium 0.03% nasal spray</i>	95	<i>isosorbide mononitrate 30mg er tab</i>	17	JARDIANCE 10MG TAB	31
<i>ipratropium 0.06% nasal spray</i>	95	<i>isosorbide mononitrate 60mg er tab</i>	17	JARDIANCE 25MG TAB	31
<i>ipratropium bromide 0.2mg/ml inh soln</i>	19	ISOSORBIDE	17	<i>jasmiel 28 day pack</i>	70
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	20	MONONITRATE TAB	17	JAYPIRCA 100MG TAB	49
<i>irbesartan 150mg tab</i>	37	10MG	17	JAYPIRCA 50MG TAB	49
<i>irbesartan 300mg tab</i>	37	ISOSORBIDE	17	JENTADUETO	29
<i>irbesartan 75mg tab</i>	37	MONONITRATE TAB	17	2.5-1000MG ER TAB	29
IRON	87	20MG	17	JENTADUETO	29
POLYSACCH/THREONIC ACID/B12/FA CAP		<i>isotretinoin 10mg cap</i>	73	2.5-1000MG TAB	29
IRON/VITAMIN C/VITAMIN B12/FOLIC ACID TAB	87	<i>isotretinoin 20mg cap</i>	73	2.5-500MG TAB	29
ISENTRESS 100MG CHEW TAB	60	<i>isotretinoin 30mg cap</i>	73	JENTADUETO 5-1000MG ER TAB	29
ISENTRESS 100MG GRANULES FOR ORAL SUSP	60	<i>isotretinoin 40mg cap</i>	73	JULUCA 50-25MG TAB	60
ISENTRESS 25MG CHEW TAB	60	<i>isradipine 2.5mg cap</i>	66	<i>junel fe 1.5/30 28 day pack</i>	70
ISENTRESS 400MG TAB	60	<i>isradipine 5mg cap</i>	66	JYNNEOS 0.5ML INJ	109
ISENTRESS 600MG TAB	60	ISTURISA 10MG TAB	79	K	
ISONIAZID 100MG TAB	42	ISTURISA 1MG TAB	79	KALYDECO 13.4MG GRANULES	104
<i>isoniazid 10mg/ml oral soln</i>	42	ISTURISA 5MG TAB	79	KALYDECO 150MG TAB	104
<i>isoniazid 300mg tab</i>	42	<i>itraconazole 100mg cap</i>	34	KALYDECO 25MG GRANULES	104
<i>isosorbide dinitrate 10mg tab</i>	17	<i>ivermectin 3mg tab</i>	17	KALYDECO 50MG GRANULES	104
<i>isosorbide dinitrate 20mg tab</i>	17	IXIARO 0.012MG/ML INJ	109	KALYDECO 75MG GRANULES	104
		J		KCL 40 MEQ/L (0.3%) IN	91
		JAKAFI 10MG TAB	49	DEXTROSE 5% NACL 0.9% INJ	
		JAKAFI 15MG TAB	49	<i>kcl 40 meq/l (0.3%) in dextrose 5% nacl 0.9% inj</i>	91
		JAKAFI 20MG TAB	49	KCL/D5W/LR 0.15% INJ	91
		JAKAFI 25MG TAB	49	KCL/D5W/NACL 20MEQ/5%/0.225% INJ	91
		JAKAFI 5MG TAB	49	<i>kcl/d5w/nacl 20meq/5%/0.225% inj</i>	91
		JANUMET 1000-100MG ER TAB	29		
		JANUMET 1000-50MG ER TAB	29		
		JANUMET 1000-50MG TAB	29		

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ALPHABETICAL LISTING OF DRUGS

KCL/NACL	91	KISQALI 600MG DAILY	49	<i>lamotrigine 200mg odt</i>	23
20MEQ-0.45% INJ		DOSE PACK		<i>lamotrigine 200mg tab</i>	23
<i>kcl/nacl 40meq/0.9% inj</i>	91	KISQALI FEMARA	46	<i>lamotrigine 250mg er tab</i>	23
KCL/NACL INJ 0.02	91	CO-PACK 200 PACK		<i>lamotrigine 25mg chew</i>	23
MEQ/ML/SODIUM		KISQALI FEMARA	46	<i>tab</i>	
CHLORIDE 0.154		CO-PACK 400 PACK		<i>lamotrigine 25mg er tab</i>	23
MEQ/ML INJ		KISQALI FEMARA	46	<i>lamotrigine 25mg odt</i>	23
KCL/NACL INJ 40	91	CO-PACK 600 PACK		<i>lamotrigine 25mg tab</i>	24
MEQ/0.9% INJ		<i>klor-con 10meq er tab</i>	92	<i>lamotrigine 300mg er tab</i>	24
KERENDIA 10MG TAB	80	<i>klor-con 10meq micro er</i>	92	<i>lamotrigine 50mg er tab</i>	24
KERENDIA 20MG TAB	80	<i>tab</i>		<i>lamotrigine 50mg odt</i>	24
KESIMPTA 20MG/0.4ML	103	<i>klor-con 20meq powder</i>	92	<i>lamotrigine 5mg chew tab</i>	24
PEN INJ		<i>for oral soln</i>		LANCET DEVICE	89
<i>ketoconazole 2% cream</i>	73	<i>klor-con 8meq er tab</i>	92	LANCET KIT	89
<i>ketoconazole 2%</i>	73	KLOXXADO 8MG/0.1ML	32	LANCETS	89
<i>shampoo</i>		NASAL SPRAY		LANCETS	89
<i>ketoconazole 200mg tab</i>	34	KORLYM 300MG TAB	30	<i>lansoprazole 15mg dr cap</i>	107
KETO-DIASTIX	77	KOSELUGO 10MG CAP	49	<i>lansoprazole 30mg dr cap</i>	107
<i>ketorolac tromethamine</i>	98	KOSELUGO 25MG CAP	49	LANSOPRAZOLE SUSP	107
<i>0.4% ophth soln</i>		K-PHOS 500MG TAB	91	<i>lanthanum carbonate</i>	83
<i>ketorolac tromethamine</i>	98	K-PHOS NEUTRAL TAB	91	<i>1000mg chew tab</i>	
<i>0.5% ophth soln</i>		KRAZATI 200MG TAB	49	<i>lanthanum carbonate</i>	83
<i>ketorolac tromethamine</i>	13			<i>500mg chew tab</i>	
<i>10mg tab</i>		L		<i>lanthanum carbonate</i>	83
KETOSTIX	77	<i>labetalol 100mg tab</i>	64	<i>750mg chew tab</i>	
KEVZARA	12	<i>labetalol 200mg tab</i>	64	LANTUS 100UNIT/ML	31
150MG/1.14ML		<i>labetalol 300mg tab</i>	64	INJ	
AUTO-INJECTOR		<i>lacosamide 100mg tab</i>	23	LANTUS SOLOSTAR	31
KEVZARA	12	<i>lacosamide 10mg/ml oral</i>	23	100UNIT/ML INJ	
150MG/1.14ML		<i>solution</i>		<i>lapatinib ditosylate</i>	49
SYRINGE		<i>lacosamide 150mg tab</i>	23	<i>250mg tab</i>	
KEVZARA	12	<i>lacosamide 200mg tab</i>	23	<i>larin 1.5/30 pack</i>	70
200MG/1.14ML		<i>lacosamide 50mg tab</i>	23	<i>larin 1/20 pack</i>	70
AUTO-INJECTOR		<i>lamivudine 100mg tab</i>	62	<i>latanoprost 0.005% ophth</i>	98
KEVZARA	12	<i>lamivudine 10mg/ml oral</i>	60	<i>soln</i>	
200MG/1.14ML		<i>soln</i>		<i>layolis fe 28 pack</i>	70
SYRINGE		<i>lamivudine 150mg tab</i>	61	<i>leflunomide 10mg tab</i>	13
KINRIX INJ	106	<i>lamivudine 300mg tab</i>	61	<i>leflunomide 20mg tab</i>	13
KINRIX PF INJ	106	<i>lamivudine/zidovudine</i>	61	<i>lenalidomide 10mg cap</i>	92
KISQALI 200MG DAILY	49	<i>150-300mg tab</i>		<i>lenalidomide 15mg cap</i>	92
DOSE PACK		<i>lamotrigine 100mg er tab</i>	23	<i>lenalidomide 2.5mg cap</i>	92
KISQALI 400MG DAILY	49	<i>lamotrigine 100mg odt</i>	23	<i>lenalidomide 20mg cap</i>	92
DOSE PACK		<i>lamotrigine 100mg tab</i>	23	<i>lenalidomide 25mg cap</i>	92
		<i>lamotrigine 150mg tab</i>	23	<i>lenalidomide 5mg cap</i>	92
		<i>lamotrigine 200mg er tab</i>	23		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

LENVIMA CAP THERAPY PACK (10MG)	43	<i>levetiracetam 500mg er tab</i>	24	LIDOCAINE 4% ORAL SOLN	93
LENVIMA CAP THERAPY PACK (12MG)	43	<i>levetiracetam 500mg tab</i>	24	<i>lidocaine 4% topical soln</i>	76
LENVIMA CAP THERAPY PACK (14MG)	43	<i>levetiracetam 750mg er tab</i>	24	<i>lidocaine 5% ointment</i>	76
LENVIMA CAP THERAPY PACK (18MG)	43	<i>levetiracetam 750mg tab</i>	24	<i>lidocaine 5% patch</i>	76
LENVIMA CAP THERAPY PACK (20MG)	43	LEVOBUNOLOL 0.5% OPHTH SOLN	96	<i>lidocaine/hydrocortisone cream</i>	16
LENVIMA CAP THERAPY PACK (24MG)	43	<i>levocarnitine 100mg/ml oral soln</i>	80	<i>lidocaine/prilocaine 2.5-2.5% cream</i>	77
LENVIMA CAP THERAPY PACK (4MG)	43	<i>levocarnitine 330mg tab</i>	80	<i>linezolid 20mg/ml susp</i>	41
LENVIMA CAP THERAPY PACK (8MG)	43	<i>levocetirizine 5mg tab</i>	34	LINEZOLID 2MG/ML INJ	41
<i>letrozole 2.5mg tab</i>	44	<i>levofloxacin 250mg tab</i>	82	<i>linezolid 2mg/ml inj</i>	41
<i>leucovorin 10mg tab</i>	53	LEVOFLOXACIN 25MG/ML ORAL SOLN	82	<i>linezolid 600mg tab</i>	41
<i>leucovorin 15mg tab</i>	53	<i>levofloxacin 25mg/ml oral soln</i>	82	LINZESS 145MCG CAP	83
<i>leucovorin 25mg tab</i>	53	<i>levofloxacin 500mg tab</i>	82	LINZESS 290MCG CAP	83
<i>leucovorin 5mg tab</i>	53	<i>levofloxacin 5mg/ml (100ml) inj</i>	82	LINZESS 72MCG CAP	83
LEUKERAN 2MG TAB	42	<i>levofloxacin 5mg/ml (150ml) inj</i>	82	<i>liothyronine sodium 25mcg tab</i>	106
LEUPROLIDE ACETATE 22.5MG INJ	45	<i>levofloxacin 750mg tab</i>	82	<i>liothyronine sodium 50mcg tab</i>	106
<i>leuprolide acetate 5mg/ml inj</i>	44	<i>levofloxacin/D5W 250mg/50ml inj</i>	82	<i>liothyronine sodium 5mcg tab</i>	106
<i>levabuterol 0.103mg/ml inh soln</i>	20	<i>levonorgestrel tab</i>	71	<i>lisinopril 10mg tab</i>	36
<i>levabuterol 0.21mg/ml inh soln</i>	20	<i>levothyroxine 100mcg tab</i>	105	<i>lisinopril 2.5mg tab</i>	36
<i>levabuterol 0.417mg/ml inh soln</i>	20	<i>levothyroxine 112mcg tab</i>	105	<i>lisinopril 20mg tab</i>	36
<i>levabuterol 2.5mg/ml inh soln</i>	20	<i>levothyroxine 125mcg tab</i>	105	<i>lisinopril 30mg tab</i>	36
LEVBID TAB	107	<i>levothyroxine 137mcg tab</i>	105	<i>lisinopril 40mg tab</i>	36
LEVEMIR 100UNIT/ML INJ	31	<i>levothyroxine 150mcg tab</i>	105	<i>lisinopril 5mg tab</i>	36
LEVEMIR 100UNIT/ML PEN INJ	31	<i>levothyroxine 175mcg tab</i>	105	LITHIUM CARBONATE 150MG CAP	55
<i>levetiracetam 1000mg tab</i>	24	<i>levothyroxine 200mcg tab</i>	105	<i>lithium carbonate 150mg cap</i>	55
<i>levetiracetam 100mg/ml oral soln</i>	24	<i>levothyroxine 25mcg tab</i>	105	LITHIUM CARBONATE 300MG CAP	55
<i>levetiracetam 250mg tab</i>	24	<i>levothyroxine 300mcg tab</i>	106	<i>lithium carbonate 300mg cap</i>	55
		<i>levothyroxine 50mcg tab</i>	106	<i>lithium carbonate 300mg er tab</i>	55
		<i>levothyroxine 75mcg tab</i>	106	<i>lithium carbonate 300mg tab</i>	55
		<i>levothyroxine 88mcg tab</i>	106	<i>lithium carbonate 450mg er tab</i>	55
		LEVSIN SL TAB	107	<i>lithium carbonate 600mg cap</i>	55
		LEVSIN TAB	107		
		LEXIVA 50MG/ML SUSP	61		
		<i>lidocaine 2% topical soln</i>	93		
		<i>lidocaine 3% cream (rx only)</i>	76		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

LITHIUM CARBONATE 600MG CAP	55	<i>loteprednol etabonate 0.5% ophth susp</i>	97	LYSODREN 500MG TAB	44
LITHOSTAT 250MG TAB	84	<i>lovastatin 10mg tab</i>	35	LYTGOBI 12MG DAILY DOSE 4MG PACK	49
LIVALO 1MG TAB	35	<i>lovastatin 20mg tab</i>	35	LYTGOBI 16MG DAILY DOSE 4MG PACK	49
LIVALO 2MG TAB	35	<i>lovastatin 40mg tab</i>	35	LYTGOBI 20MG DAILY DOSE 4MG PACK	50
LIVALO 4MG TAB	35	<i>low-ogestrel 28 day pack</i>	70	LYUMJEV 100UNIT/ML INJ	31
LIVTENCITY 200MG TAE	62	<i>loxapine 10mg cap</i>	57	LYUMJEV 100UNIT/ML PEN INJ	31
LOKELMA 10GM POWDER FOR ORAL SUSP	93	<i>loxapine 25mg cap</i>	57	LYUMJEV 200UNIT/ML PEN INJ	31
LOKELMA 5GM POWDER FOR ORAL SUSP	93	<i>loxapine 50mg cap</i>	57		
LONSURF 6.14-15MG TAB	46	<i>loxapine 5mg cap</i>	57		
LONSURF 8.19-20MG TAB	46	<i>lubiprostone 24mcg cap</i>	83	M	
<i>loperamide 2mg cap (RX Only)</i>	32	<i>lubiprostone 8mcg cap</i>	83	<i>magnesium sulfate 500mg/ml inj</i>	91
<i>lopinavir/ritonavir 100-25mg tab</i>	61	LUCEMYRA 0.18MG TAB	101	<i>malathion 0.5% lotion</i>	77
<i>lopinavir/ritonavir 200-50mg tab</i>	61	LUMAKRAS 120MG TAB	49	MALE CONDOMS	89
<i>lopinavir/ritonavir 80-20mg/ml oral solution</i>	61	LUMAKRAS 320MG TAB	49	<i>maraviroc 150 mg tab</i>	61
<i>lorazepam 0.5mg tab</i>	18	LUMIGAN 0.01% OPHTH SOLN	98	<i>maraviroc 300 mg tab</i>	61
<i>lorazepam 1mg tab</i>	18	LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	101	MARPLAN 10MG TAB	26
<i>lorazepam 2mg tab</i>	18	LUMRYZ 6GM GRANULES FOR ORAL SUSP	101	MATULANE 50MG CAP	53
<i>lorazepam 2mg/ml oral soln</i>	18	LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	101	<i>matzim 240mg er tab</i>	66
LORBRENA 100MG TAB	49	LUMRYZ 9GM GRANULES FOR ORAL SUSP	101	<i>matzim 420mg er tab</i>	66
LORBRENA 25MG TAB	49	LUPKYNIS 7.9MG CAP	93	MAVENCLAD 10 TABLET PACK 10MG	103
<i>losartan potassium 100mg tab</i>	37	LUPRON 11.25MG INJ	44	MAVENCLAD 4 TABLET PACK 10MG	103
<i>losartan potassium 25mg tab</i>	37	LUPRON 22.5MG INJ	44	MAVENCLAD 5 TABLET PACK 10MG	103
<i>losartan potassium 50mg tab</i>	37	LUPRON 3.75MG INJ	44	MAVENCLAD 6 TABLET PACK 10MG	103
LOTEPREDNOL ETABONATE 0.5% OPHTH GEL	97	LUPRON 30MG INJ	44	MAVENCLAD 7 TABLET PACK 10MG	103
<i>loteprednol etabonate 0.5% ophth gel</i>	97	LUPRON 45MG INJ	44	MAVENCLAD 8 TABLET PACK 10MG	103
		LUPRON 7.5MG INJ	44	MAVENCLAD 9 TABLET PACK 10MG	103
		<i>lurasidone hcl 120mg tab</i>	55	MAVYRET 100-40MG TAB	62
		<i>lurasidone hcl 20mg tab</i>	55	MAVYRET 50-20MG ORAL PELLETT	62
		<i>lurasidone hcl 40mg tab</i>	55	MAYZENT 0.25MG STARTER PACK	103
		<i>lurasidone hcl 60mg tab</i>	55		
		<i>lurasidone hcl 80mg tab</i>	55		
		LYNPARZA 100MG TAB	49		
		LYNPARZA 150MG TAB	49		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

MAYZENT 0.25MG TAB	103	<i>memantine 2mg/ml oral soln</i>	102	<i>methadone 5mg/5ml oral soln</i>	14
MAYZENT 1MG TAB	103	<i>memantine 5mg tab</i>	102	<i>methazolamide 25mg tab</i>	78
MAYZENT 2MG TAB	103	<i>memantine 7mg er cap</i>	102	<i>methazolamide 50mg tab</i>	78
MAYZENT STARTER PACK (7)	103	MENACTRA INJ	108	<i>methenamine hippurate 1gm tab</i>	41
<i>meclizine 12.5mg tab (RX Only)</i>	33	MENEST 0.3MG TAB	81	<i>methenamine mandelate tab</i>	41
<i>meclizine 25mg tab (RX Only)</i>	33	MENEST 0.625MG TAB	81	<i>methimazole 10mg tab</i>	105
<i>medroxyprogesterone acetate 10mg tab</i>	101	MENEST 1.25MG TAB	82	<i>methimazole 5mg tab</i>	105
<i>medroxyprogesterone acetate 150mg/ml inj</i>	71	MENEST 2.5MG TAB	82	<i>methocarbamol 500mg tab</i>	94
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	71	MENQUADFI INJ	109	<i>methocarbamol 750mg tab</i>	94
<i>medroxyprogesterone acetate 2.5mg tab</i>	101	MENVEO INJ	109	<i>methotrexate 2.5mg tab</i>	42
<i>medroxyprogesterone acetate 5mg tab</i>	101	<i>mercaptapurine 50mg tab</i>	42	METHOTREXATE 250MG/10ML INJ	42
<i>mefloquine hcl 250mg tab</i>	41	MEROPENEM	40	<i>methotrexate 25mg/ml (2ml) inj</i>	42
<i>megestrol acetate 125mg/ml susp</i>	101	<i>meropenem 1000mg inj</i>	40	<i>methotrexate 25mg/ml inj</i>	42
<i>megestrol acetate 20mg tab</i>	44	<i>meropenem 500mg inj</i>	40	METHOXSALLEN 10MG CAP	74
<i>megestrol acetate 40mg tab</i>	45	MEROPENEM 500MG/50ML INJ	40	<i>methscopolamine bromide 2.5mg tab</i>	107
<i>megestrol acetate 40mg/ml susp</i>	45	<i>mesalamine 1000mg rectal supp</i>	83	<i>methscopolamine bromide 5mg tab</i>	107
MEKINIST 0.05MG/ML ORAL SOLN	50	<i>mesalamine 1200mg dr tab</i>	83	<i>methsuximide 300mg cap</i>	25
MEKINIST 0.5MG TAB	50	<i>mesalamine 375mg er cap</i>	83	<i>methylphenidate 10mg chew tab</i>	10
MEKINIST 2MG TAB	50	<i>mesalamine 400mg dr cap</i>	83	<i>methylphenidate 10mg cr cap</i>	10
MEKTOVI 15MG TAB	50	<i>mesalamine 66.7mg/ml enema</i>	83	<i>methylphenidate 10mg er tab</i>	10
<i>melodetta 24 fe chewable 28 day pack</i>	70	<i>mesalamine 800mg dr tab</i>	83	<i>methylphenidate 10mg la cap</i>	10
<i>meloxicam 15mg tab</i>	13	MESALAMINE 800MG DR TAB	83	<i>methylphenidate 10mg tab</i>	10
<i>meloxicam 7.5mg tab</i>	13	MESNEX 400MG TAB	53	<i>methylphenidate 18mg er tab</i>	10
MELPHALAN TAB	42	<i>metaxalone 800mg tab</i>	94	METHYLPHENIDATE 18MG ER TAB	10
<i>memantine 10mg tab</i>	102	<i>metformin 1000mg tab</i>	30	<i>methylphenidate 1mg/ml oral soln</i>	10
<i>memantine 10mg/5mg pack</i>	102	<i>metformin 500mg er tab</i>	30		
<i>memantine 14mg er cap</i>	102	<i>metformin 500mg tab</i>	30		
<i>memantine 21mg er cap</i>	102	<i>metformin 750mg er tab</i>	30		
<i>memantine 28mg er cap</i>	102	<i>metformin 850mg tab</i>	30		
		<i>methadone 10mg tab</i>	14		
		<i>methadone 10mg/5ml oral soln</i>	14		
		METHADONE 1MG/ML ORAL SOLN	14		
		METHADONE 2MG/ML ORAL SOLN	14		
		<i>methadone 5mg tab</i>	14		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>methylphenidate 2.5mg chew tab</i>	10	<i>methylprednisolone 32mg tab</i>	71	METRONIDAZOLE/NAC L 0.74%-500MG/100ML INJ	39
<i>methylphenidate 20mg cr cap</i>	10	<i>methylprednisolone 4mg pack</i>	71	<i>metronidazole/nacl</i>	39
<i>methylphenidate 20mg er tab</i>	10	<i>methylprednisolone 4mg tab</i>	71	<i>0.74%-500mg/100ml inj</i>	
<i>methylphenidate 20mg la cap</i>	10	<i>methylprednisolone 8mg tab</i>	71	<i>metyrosine 250mg cap</i>	37
<i>methylphenidate 20mg tab</i>	10	<i>metoclopramide 10mg tab</i>	83	<i>mexiletine 150mg cap</i>	18
<i>methylphenidate 27mg sr tab</i>	10	<i>metoclopramide 1mg/ml oral soln</i>	83	<i>mexiletine 200mg cap</i>	18
<i>methylphenidate 2mg/ml oral soln</i>	10	<i>metoclopramide 5mg tab</i>	83	<i>mexiletine 250mg cap</i>	18
<i>methylphenidate 30mg cr cap</i>	10	<i>metolazone 10mg tab</i>	78	MICAFUNGIN SODIUM 100MG INJ	33
<i>methylphenidate 30mg la cap</i>	10	<i>metolazone 2.5mg tab</i>	78	<i>micafungin sodium</i>	33
<i>methylphenidate 36mg sr tab</i>	10	<i>metolazone 5mg tab</i>	79	<i>100mg inj</i>	33
<i>methylphenidate 40mg cr cap</i>	10	<i>metoprolol succinate</i>	64	MICAFUNGIN SODIUM 50MG INJ	33
<i>methylphenidate 40mg la cap</i>	10	<i>100mg er tab</i>	64	<i>micafungin sodium 50mg inj</i>	33
<i>methylphenidate 50mg cr cap</i>	10	<i>metoprolol succinate</i>	64	<i>microgestin fe 1/20 28 day pack</i>	70
<i>methylphenidate 54mg sr tab</i>	10	<i>200mg er tab</i>	64	<i>midodrine 10mg tab</i>	110
<i>methylphenidate 5mg chew tab</i>	10	<i>metoprolol succinate</i>	64	<i>midodrine 2.5mg tab</i>	110
<i>methylphenidate 5mg tab</i>	10	<i>25mg er tab</i>	64	<i>midodrine 5mg tab</i>	110
<i>methylphenidate 60mg cr cap</i>	10	<i>metoprolol succinate</i>	64	MIGLITOL 100MG TAB	29
<i>methylphenidate 60mg la cap</i>	10	<i>50mg er tab</i>	64	<i>miglitol 100mg tab</i>	29
<i>methylphenidate ER osmotic 27mg tab</i>	10	<i>metoprolol tartrate</i>	64	<i>miglitol 25mg tab</i>	29
<i>methylphenidate ER osmotic 36mg tab</i>	10	<i>100mg tab</i>	64	MIGLITOL 25MG TAB	29
<i>methylphenidate ER osmotic 54mg tab</i>	10	<i>metoprolol tartrate 25mg tab</i>	64	<i>miglitol 50mg tab</i>	29
<i>methylprednisolone 16mg tab</i>	71	<i>metoprolol tartrate</i>	64	MIGLITOL 50MG TAB	29
		<i>37.5mg tab</i>	64	<i>miglustat 100mg cap</i>	86
		<i>metoprolol tartrate 50mg tab</i>	64	<i>minocycline 100mg cap</i>	105
		<i>metoprolol tartrate 75mg tab</i>	64	<i>minocycline 100mg tab</i>	105
		<i>metronidazole 0.75% cream</i>	77	<i>minocycline 50mg cap</i>	105
		<i>metronidazole 0.75% gel</i>	77	<i>minocycline 50mg tab</i>	105
		<i>metronidazole 0.75% lotion</i>	77	<i>minocycline 75mg cap</i>	105
		<i>metronidazole 0.75% vaginal gel</i>	110	<i>minocycline 75mg tab</i>	105
		<i>metronidazole 1% gel</i>	77	<i>minoxidil 10mg tab</i>	39
		<i>metronidazole 250mg tab</i>	39	<i>minoxidil 2.5mg tab</i>	39
		<i>metronidazole 500mg tab</i>	39	<i>mirtazapine 15mg odt</i>	25
				<i>mirtazapine 15mg tab</i>	25
				<i>mirtazapine 30mg odt</i>	26
				<i>mirtazapine 30mg tab</i>	26
				<i>mirtazapine 45mg odt</i>	26
				<i>mirtazapine 45mg tab</i>	26
				<i>mirtazapine 7.5mg tab</i>	26

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>naproxen 375mg dr tab</i>	13	<i>neomycin/bacitracin/poly</i>	97	<i>nicardipine 20mg cap</i>	66
<i>naproxen 375mg tab</i>	13	<i>myxin ophth ointment</i>		<i>nicardipine 30mg cap</i>	66
<i>naproxen 500mg tab</i>	13	<i>5(3.5)mg-400unit-10000u</i>		NICORETTE CQ PATCH	103
<i>naproxen sodium 275mg</i>	13	<i>nit</i>		NICORETTE GUM	103
<i>tab</i>		NEOMYCIN/POLYMYXI	97	<i>nicotine gum</i>	103
<i>naproxen sodium 550mg</i>	13	N B/GRAMICIDIN		<i>nicotine lozenge</i>	103
<i>tab</i>		1.75-10000-0.025MG-UN		<i>nicotine patch</i>	103
<i>naratriptan 1mg tab</i>	90	T-MG/ML OPHTH SOLN		NICOTINE PATCH KIT	104
<i>naratriptan 2.5mg tab</i>	90	<i>neomycin/polymyxin/bacit</i>	97	NICOTROL 10MG INH	104
NASCOBAL NASAL	86	<i>racin/hydrocortisone 1%</i>		SOLN	
SPRAY		<i>ophth ointment</i>		NICOTROL 10MG/ML	104
NATACYN 5% OPHTH	97	<i>neomycin/polymyxin/hydr</i>	98	NASAL INHALER	
SUSP		<i>ocortisone</i>		<i>nifedipine 30mg er tab</i>	66
<i>nateglinide 120mg tab</i>	31	<i>3.5-10000unit-1% otic</i>		<i>nifedipine 30mg osmotic</i>	66
<i>nateglinide 60mg tab</i>	31	<i>soln</i>		<i>er tab</i>	
NATPARA 100MCG	79	<i>neomycin/polymyxin/hydr</i>	98	<i>nifedipine 60mg er tab</i>	66
CARTRIDGE		<i>ocortisone</i>		<i>nifedipine 60mg osmotic</i>	66
NATPARA 25MCG	79	<i>3.5-10000unit-1% otic</i>		<i>er tab</i>	
CARTRIDGE		<i>susp</i>		<i>nifedipine 90mg er tab</i>	66
NATPARA 50MCG	79	NERLYNX 40MG TAB	50	<i>nifedipine 90mg osmotic</i>	66
CARTRIDGE		NEUPRO 1MG/24HR	54	<i>er tab</i>	
NATPARA 75MCG	79	PATCH		<i>nilutamide 150mg tab</i>	45
CARTRIDGE		NEUPRO 2MG/24HR	54	<i>nimodipine 30mg cap</i>	66
NAYZILAM 5MG/0.1ML	22	PATCH		NINLARO 2.3MG CAP	50
NASAL SPRAY		NEUPRO 3MG/24HR	54	NINLARO 3MG CAP	50
<i>nebivolol 10mg tab</i>	64	PATCH		NINLARO 4MG CAP	50
<i>nebivolol 2.5mg tab</i>	64	NEUPRO 4MG/24HR	54	<i>nitazoxanide 500mg tab</i>	40
<i>nebivolol 20mg tab</i>	64	PATCH		<i>nitisinone 10mg cap</i>	80
<i>nebivolol 5mg tab</i>	64	NEUPRO 6MG/24HR	54	<i>nitisinone 20mg cap</i>	80
NEBUSAL NEB SOLN	72	PATCH		<i>nitisinone 2mg cap</i>	80
NEFAZODONE 100MG	27	NEUPRO 8MG/24HR	54	<i>nitisinone 5mg cap</i>	80
TAB		PATCH		NITRO-BID 2%	17
NEFAZODONE 150MG	27	NEVIRAPINE 100MG ER	61	OINTMENT	
TAB		TAB		<i>nitrofurantoin 100mg cap</i>	41
NEFAZODONE 200MG	27	NEVIRAPINE 10MG/ML	61	<i>nitrofurantoin 50mg</i>	41
TAB		SUSP		<i>macro cap</i>	
NEFAZODONE 250MG	27	<i>nevirapine 200mg tab</i>	61	<i>nitrofurantoin macro</i>	41
TAB		<i>nevirapine 400mg er tab</i>	61	<i>100mg cap</i>	
NEFAZODONE 50MG	27	NEXLETOL 180MG TAB	34	<i>nitroglycerin 0.1mg/hr</i>	17
TAB		NEXLIZET 180-10MG	34	<i>patch</i>	
<i>neomycin sulfate 500mg</i>	11	TAB		<i>nitroglycerin 0.2mg/hr</i>	17
<i>tab</i>		<i>niacin 1000mg er tab</i>	36	<i>patch</i>	
		<i>niacin 500mg er tab</i>	36	<i>nitroglycerin 0.3mg sl tab</i>	17
		<i>niacin 750mg er tab</i>	36	<i>nitroglycerin 0.4mg sl tab</i>	17

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>nitroglycerin 0.4mg/act spray</i>	17	NOXAFIL 300MG POWDER FOR ORAL SUSP	34	OCTAGAM 2.5GM/50ML INJ	99
<i>nitroglycerin 0.4mg/hr patch</i>	17	NUBEQA 300MG TAB	45	OCTAGAM 25GM/500ML INJ	99
<i>nitroglycerin 0.6mg sl tab</i>	17	NUCALA 100MG INJ	19	OCTAGAM 2GM/20ML INJ	99
<i>nitroglycerin 0.6mg/hr patch</i>	17	NUCALA 100MG/ML AUTO-INJECTOR	19	OCTAGAM 30GM/300ML INJ	99
NITROGLYCERIN CAP	17	NUCALA 100MG/ML SYRINGE	19	OCTAGAM 5GM/100ML INJ	99
NIVESTYM 300MCG/0.5ML SYRINGE	86	NUCALA 40MG/0.4ML SYRINGE	19	<i>octreotide 0.05mg/ml inj</i>	81
NIVESTYM 300MCG/ML INJ	86	NUCORT LOTION	76	<i>octreotide 0.1mg/ml inj</i>	81
NIVESTYM 480MCG/0.8ML SYRINGE	86	NUDEXTA 20-10MG CAP	103	<i>octreotide 0.2mg/ml inj</i>	81
NIVESTYM 480MCG/1.6ML INJ	86	NUPLAZID 10MG TAB	55	<i>octreotide 0.5mg/ml inj</i>	81
NIZATIDINE 150MG CAP	108	NUPLAZID 34MG CAP	55	<i>octreotide 1mg/ml inj</i>	81
NIZATIDINE 300MG CAP	108	NUTRILIPID 20GM/100ML INJ	95	ODEFSEY 200-25-25MG TAB	61
NORDITROPIN 10MG/1.5ML PEN INJ	79	NUZYRA 150MG TAB	105	ODOMZO 200MG CAP	44
NORDITROPIN 15MG/1.5ML PEN INJ	79	<i>nystatin 100000unit/ml cream</i>	73	OFEV 100MG CAP	104
NORDITROPIN 30MG/3ML PEN INJ	79	<i>nystatin 100000unit/ml susp</i>	93	OFEV 150MG CAP	104
NORDITROPIN 5MG/1.5ML PEN INJ	79	<i>nystatin 10000unit/gm ointment</i>	73	<i>ofloxacin 0.3% ophth soln</i>	97
<i>norethindrone 0.35mg pack</i>	71	<i>nystatin 100unit/mg topical powder</i>	73	<i>ofloxacin 0.3% otic soln</i>	98
<i>norethindrone acetate 5mg tab</i>	101	<i>nystatin 500000unit tab</i>	33	<i>ofloxacin 400mg tab</i>	82
<i>nortrel 0.5/35 28 day pack</i>	70	<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	73	<i>olanzapine 10mg inj</i>	57
<i>nortriptyline 10mg cap</i>	28	<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% cream</i>	73	<i>olanzapine 10mg odt</i>	57
<i>nortriptyline 25mg cap</i>	28	NYVEPRIA 6MG/0.6ML SYRINGE	86	<i>olanzapine 10mg tab</i>	57
NORTRIPTYLINE 2MG/ML ORAL SOLN	28			<i>olanzapine 15mg odt</i>	57
<i>nortriptyline 50mg cap</i>	28	O		<i>olanzapine 15mg tab</i>	57
<i>nortriptyline 75mg cap</i>	28	OCALIVA 10MG TAB	82	<i>olanzapine 2.5mg tab</i>	57
NORVIR 100MG ORAL POWDER	61	OCALIVA 5MG TAB	82	<i>olanzapine 20mg odt</i>	57
NOURIANZ 20MG TAB	54	<i>ocella 28 day pack</i>	70	<i>olanzapine 20mg tab</i>	57
NOURIANZ 40MG TAB	54	OCTAGAM 1GM/20ML INJ	99	<i>olanzapine 5mg odt</i>	57
				<i>olanzapine 5mg tab</i>	57
				<i>olanzapine 7.5mg tab</i>	57
				<i>olmesartan medoxomil 20mg tab</i>	37
				<i>olmesartan medoxomil 40mg tab</i>	37
				<i>olmesartan medoxomil 5mg tab</i>	37
				<i>olopatadine 0.1% ophth soln</i>	98
				<i>olopatadine 0.665mg/act nasal inhaler</i>	95

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

OLUMIANT 1MG TAB	11	ORENITRAM 1MG ER	67	OXACILLIN 20MG/ML	101
OLUMIANT 2MG TAB	11	TAB		INJ	
<i>omega-3 acid ethyl esters (usp) 1000mg cap</i>	34	ORENITRAM 2.5MG ER	67	OXACILLIN 40MG/ML	101
<i>omeprazole 10mg dr cap</i>	107	TAB		INJ	
<i>omeprazole 20mg dr cap</i>	107	ORENITRAM 5MG ER	67	<i>oxaprozin 600mg tab</i>	13
<i>omeprazole 40mg dr cap</i>	107	TAB		OXBRYTA 300MG TAB	86
OMNITROPE	79	ORENITRAM MONTH 1	67	OXBRYTA 300MG TAB	86
10MG/1.5ML		TITRATION PACK		FOR ORAL SUSP	
CARTRIDGE		ORENITRAM MONTH 2	67	OXBRYTA 500MG TAB	86
OMNITROPE 5.8MG INJ	79	TITRATION PACK		<i>oxcarbazepine 150mg tab</i>	24
OMNITROPE	79	ORENITRAM MONTH 3	67	<i>oxcarbazepine 300mg tab</i>	24
5MG/1.5ML CARTRIDGE		TITRATION PACK		<i>oxcarbazepine 600mg tab</i>	24
<i>ondansetron 0.8mg/ml oral soln</i>	33	ORFADIN 4MG/ML SUSP	80	<i>oxcarbazepine 60mg/ml susp</i>	24
<i>ondansetron 4mg odt</i>	33	ORGOVYX 120MG TAB	45	OXERVATE 0.002%	97
<i>ondansetron 4mg tab</i>	33	ORKAMBI 125-100MG	104	OPHTH SOLN	
<i>ondansetron 8mg odt</i>	33	GRANULES		<i>oxybutynin chloride 10mg er tab</i>	108
<i>ondansetron 8mg tab</i>	33	ORKAMBI 125-100MG	104	<i>oxybutynin chloride 15mg er tab</i>	108
ONETOUCH METER	89	TAB		<i>oxybutynin chloride 1mg/ml oral soln</i>	108
ONETOUCH TEST STRIP	77	ORKAMBI 125-200MG	104	OXYBUTYNIN	108
ONETOUCH ULTRA	77	TAB		CHLORIDE 1MG/ML	
ONETOUCH VERIO	89	ORKAMBI 188-150MG	104	ORAL SOLN	
FLEX METER		GRANULES		<i>oxybutynin chloride 5mg er tab</i>	108
ONETOUCH VERIO	89	ORKAMBI 94-75MG	104	<i>oxybutynin chloride 5mg tab</i>	108
REFLECT METER		GRANULES		<i>oxycodone 10mg tab</i>	15
ONETOUCH VERIO TEST STRIP	77	ORLADEYO 110MG CAP	85	<i>oxycodone 15mg tab</i>	15
ONUREG 200MG TAB	43	ORLADEYO 150MG CAP	85	<i>oxycodone 1mg/ml oral soln</i>	15
ONUREG 300MG TAB	43	<i>orphenadrine citrate 100mg er tab</i>	95	<i>oxycodone 20mg tab</i>	15
OPSUMIT 10MG TAB	67	ORSERDU 345MG TAB	45	<i>oxycodone 20mg/ml oral soln</i>	15
ORACIT SOLN	84	ORSERDU 86MG TAB	45	<i>oxycodone 30mg tab</i>	15
ORENCIA 125MG/ML	13	<i>oseltamivir 30mg cap</i>	62	<i>oxycodone 5mg tab</i>	15
AUTO-INJECTOR		<i>oseltamivir 45mg cap</i>	62	<i>oxycodone/acetaminophen 10-325mg tab</i>	15
ORENCIA 125MG/ML	13	<i>oseltamivir 6mg/ml susp</i>	62	<i>oxycodone/acetaminophen 2.5-325mg tab</i>	15
SYRINGE		<i>oseltamivir 75mg cap</i>	62	<i>oxycodone/acetaminophen 5-325mg tab</i>	15
ORENCIA 50MG/0.4ML	13	OSPHENA 60MG TAB	80		
SYRINGE		OTEZLA 28-DAY	13		
ORENCIA 87.5MG/0.7ML	13	STARTER PACK			
SYRINGE		OTEZLA 30MG TAB	13		
ORENITRAM 0.125MG ER TAB	67	OVACE CREAM	74		
ORENITRAM 0.25MG ER TAB	67	OVACE WASH	74		
		<i>oxacillin 1000mg inj</i>	101		
		<i>oxacillin 100mg/ml inj</i>	101		
		<i>oxacillin 2000mg inj</i>	101		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

OXYCODONE/ACETAMINOPHEN 5-325MG/5ML	15	PANZYGA 20GM/200ML INJ	99	<i>penicillin g potassium 1000000unit/ml inj</i>	100
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	15	PANZYGA 30GM/300ML INJ	99	PENICILLIN G POTASSIUM 40000UNIT/ML INJ	100
OXYCONTIN 10MG ER TAB	15	PANZYGA 5GM/50ML INJ	99	PENICILLIN G POTASSIUM 60000UNIT/ML INJ	100
OXYCONTIN 15MG ER TAB	15	<i>paricalcitol 1mcg cap</i>	80	PENICILLIN G SODIUM 100000UNIT/ML INJ	100
OXYCONTIN 20MG ER TAB	15	<i>paricalcitol 2mcg cap</i>	80	<i>penicillin gk 5000000unit inj</i>	100
OXYCONTIN 30MG ER TAB	15	<i>paricalcitol 4mcg cap</i>	80	<i>penicillin v potassium 250mg tab</i>	100
OXYCONTIN 40MG ER TAB	15	<i>paromomycin 250mg cap</i>	11	PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN	100
OXYCONTIN 60MG ER TAB	15	<i>paroxetine 10mg tab</i>	27	<i>penicillin v potassium 500mg tab</i>	100
OXYCONTIN 80MG ER TAB	15	<i>paroxetine 10mg/ml susp</i>	27	PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	100
OZEMPIC 2.68MG/ML PEN INJ	30	<i>paroxetine 12.5mg er tab</i>	27	PENTACEL INJ	106
OZEMPIC 2MG/3ML PEN INJ	30	<i>paroxetine 20mg tab</i>	27	<i>pentamidine isethionate 300mg inj</i>	39
OZEMPIC 4MG/3ML PEN INJ	30	<i>paroxetine 25mg er tab</i>	27	<i>pentamidine isethionate 50mg/ml inh soln</i>	39
P		<i>paroxetine 30mg tab</i>	27	<i>pentoxifylline 400mg er tab</i>	85
<i>paliperidone 1.5mg er tab</i>	56	<i>paroxetine 37.5mg er tab</i>	27	<i>perindopril erbumine 2mg tab</i>	36
<i>paliperidone 3mg er tab</i>	56	<i>paroxetine 40mg tab</i>	27	<i>perindopril erbumine 4mg tab</i>	37
<i>paliperidone 6mg er tab</i>	56	PAXLOVID PACK	62	<i>perindopril erbumine 8mg tab</i>	37
<i>paliperidone 9mg er tab</i>	56	PAXLOVID TAB	62	PERINDOPRIL ERBUMINE 8MG TAB	37
PALYNZIQ 10MG/0.5ML SYRINGE	80	PEAK FLOW METER	89	<i>permethrin 5% cream</i>	77
PALYNZIQ 2.5MG/0.5ML SYRINGE	80	PEDIARIX INJ	106	<i>perphenazine 16mg tab</i>	58
PALYNZIQ 20MG/ML SYRINGE	80	<i>pediatric multiple vitamins/fluoride soln</i>	94	<i>perphenazine 2mg tab</i>	58
PANRETIN 0.1% GEL	74	<i>pediatric multiple vitamins/fluoride/iron soln</i>	94	<i>perphenazine 4mg tab</i>	58
<i>pantoprazole 20mg dr tab</i>	107	PEDVAXHIB 7.5MCG/0.5ML INJ	109	<i>perphenazine 8mg tab</i>	58
<i>pantoprazole 40mg dr tab</i>	107	<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	88	PERSERIS 120MG INJ	56
PANZYGA 10GM/100ML INJ	99	PEGASYS 180MCG/0.5ML SYRINGE	62	PERSERIS 90MG INJ	56
PANZYGA 1GM/10ML INJ	99	PEGASYS 180MCG/ML INJ	62		
PANZYGA 2.5GM/25ML INJ	99	PEMAZYRE 13.5MG TAB	50		
		PEMAZYRE 4.5MG TAB	50		
		PEMAZYRE 9MG TAB	50		
		PEN NEEDLE	89		
		<i>penciclovir 1% cream</i>	74		
		<i>penicillamine 250mg tab</i>	92		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>potassium chloride</i>	92	<i>prasugrel 5mg tab</i>	85	<i>pregabalin 225mg cap</i>	24
<i>2.67meq/ml oral soln</i>		<i>pravastatin sodium 10mg</i>	35	<i>pregabalin 25mg cap</i>	24
<i>potassium chloride</i>	92	<i>tab</i>		<i>pregabalin 300mg cap</i>	24
<i>20meq er tab</i>		<i>pravastatin sodium 20mg</i>	35	<i>pregabalin 50mg cap</i>	24
<i>potassium chloride</i>	92	<i>tab</i>		<i>pregabalin 75mg cap</i>	24
<i>20meq inj</i>		<i>pravastatin sodium 40mg</i>	35	PREHEVBRIO	109
<i>potassium chloride</i>	92	<i>tab</i>		10MCG/ML INJ	
<i>20meq micro er tab</i>		<i>pravastatin sodium 80mg</i>	35	PREMARIN 0.3MG TAB	82
POTASSIUM CHLORIDE	92	<i>tab</i>		PREMARIN 0.45MG TAB	82
20MEQ/100ML INJ		<i>praziquantel 600mg tab</i>	17	PREMARIN 0.625MG	82
<i>potassium chloride</i>	92	<i>prazosin 1mg cap</i>	38	TAB	
<i>20meq/100ml inj</i>		<i>prazosin 2mg cap</i>	38	PREMARIN	110
<i>potassium chloride</i>	92	<i>prazosin 5mg cap</i>	38	0.625MG/GM VAGINAL	
<i>2meq/ml (20ml) inj</i>		PREDNISOLONE 1%	97	CREAM	
<i>potassium chloride</i>	92	OPHTH SOLN		PREMARIN 0.9MG TAB	82
<i>40meq inj</i>		<i>prednisolone 1mg/ml oral</i>	71	PREMARIN 1.25MG TAB	82
POTASSIUM CHLORIDE	92	<i>soln</i>		PREMPHASE 28 DAY	81
40MEQ INJ		<i>prednisolone 3mg/ml oral</i>	71	PACK	
<i>potassium chloride 8meq</i>	92	<i>soln</i>		PREMPRO 0.3/1.5MG 28	81
<i>er cap</i>		<i>prednisolone 4mg/ml oral</i>	71	DAY PACK	
POTASSIUM CHLORIDE	92	<i>soln</i>		PREMPRO 0.45/1.5 28	81
8MEQ ER TAB		<i>prednisolone 5mg/ml oral</i>	71	DAY PACK	
<i>potassium citrate 10meq</i>	84	<i>soln</i>		PREMPRO 0.625/2.5MG	81
<i>er tab</i>		PREDNISOLONE	71	28 DAY PACK	
<i>potassium citrate 15meq</i>	84	5MG/ML ORAL SOLN		PREMPRO 0.625/5MG	81
<i>er tab</i>		PREDNISOLONE	97	28 DAY PACK	
<i>potassium citrate 5meq er</i>	84	ACETATE 1% OPTH		<i>prevalite 4gm powder for</i>	35
<i>tab</i>		SUSP		<i>oral susp</i>	
<i>potassium citrate/citric</i>	84	<i>prednisolone sodium</i>	72	PREVIDENT 5000	93
<i>acid soln</i>		<i>phosphate 15mg/5ml oral</i>		BOOSTER PASTE	
<i>potassium phosphate</i>	91	<i>soln</i>		PREVIDENT 5000 DRY	93
<i>monobasic 500mg tab</i>		<i>prednisone 10mg tab</i>	72	MOUTH GEL	
PRADAXA 110MG CAP	22	<i>prednisone 1mg tab</i>	72	PREVIDENT 5000 PASTE	93
PRALUENT 150MG/ML	36	PREDNISONE 1MG/ML	72	PREVIDENT 5000 PASTE	93
AUTO-INJECTOR		ORAL SOLN		PREVIDENT 5000 PLUS	93
PRALUENT 75MG/ML	36	<i>prednisone 2.5mg tab</i>	72	CREAM	
AUTO-INJECTOR		<i>prednisone 20mg tab</i>	72	PREVIDENT RINSE	94
<i>pramipexole 0.125mg tab</i>	54	<i>prednisone 50mg tab</i>	72	PREVYMIS 240MG TAB	62
<i>pramipexole 0.25mg tab</i>	54	<i>prednisone 5mg tab</i>	72	PREVYMIS 480MG TAB	62
<i>pramipexole 0.5mg tab</i>	54	<i>pregabalin 100mg cap</i>	24	PREZCOBIX 150-800MG	61
<i>pramipexole 0.75mg tab</i>	54	<i>pregabalin 150mg cap</i>	24	TAB	
<i>pramipexole 1.5mg tab</i>	54	<i>pregabalin 200mg cap</i>	24	PREZISTA 100MG/ML	61
<i>pramipexole 1mg tab</i>	54	<i>pregabalin 20mg/ml oral</i>	24	SUSP	
<i>prasugrel 10mg tab</i>	85	<i>soln</i>		PREZISTA 150MG TAB	61

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

PREZISTA 75MG TAB	61	PROMACTA 75MG TAB	86	PROSOL 20% INJ	96
PRIFTIN 150MG TAB	42	<i>promethazine 1.25mg/ml</i>	34	<i>protriptyline 10mg tab</i>	28
PRIMAQUINE	41	<i>oral soln</i>		<i>protriptyline 5mg tab</i>	28
PHOSPHATE 26.3MG TAB		<i>promethazine 12.5mg</i>	34	PULMOZYME 1MG/ML	104
<i>primaquine phosphate</i>	41	<i>rectal supp</i>		INH SOLN	
<i>26.3mg tab</i>		<i>promethazine 12.5mg tab</i>	34	PURIXAN	43
<i>primidone 250mg tab</i>	24	<i>promethazine 25mg tab</i>	34	2000MG/100ML SUSP	
<i>primidone 50mg tab</i>	24	<i>promethazine 50mg tab</i>	34	<i>pyrazinamide 500mg tab</i>	42
PRIORIX INJ	109	<i>promethazine DM syrup</i>	72	<i>pyridostigmine bromide</i>	42
PRIVIGEN 20GM/200ML	99	<i>promethazine VC</i>	72	<i>180mg er tab</i>	
INJ		<i>w/codeine syrup</i>		<i>pyridostigmine bromide</i>	42
PRIVIGEN 40GM/400ML	99	PROMETHAZINE VC	72	<i>60mg tab</i>	
INJ		W/CODEINE SYRUP		PYRUKYND 20MG TAB	85
<i>probenecid 500mg tab</i>	85	<i>promethazine/codeine</i>	72	(4-WEEK PACK)	
<i>prochlorperazine 10mg</i>	58	<i>syrup</i>		PYRUKYND	85
<i>tab</i>		<i>promethegan 25mg rectal</i>	34	20MG/50MG TAB TAPER	
<i>prochlorperazine 25mg</i>	58	<i>supp</i>		PACK	
<i>rectal supp</i>		<i>propafenone 150mg tab</i>	18	PYRUKYND 50MG TAB	85
<i>prochlorperazine 5mg tab</i>	58	<i>propafenone 225mg er</i>	18	(4-WEEK PACK)	
<i>procto-med 2.5% cream</i>	16	<i>cap</i>		PYRUKYND 5MG TAB	85
<i>progesterone 100mg cap</i>	101	<i>propafenone 225mg tab</i>	18	(4-WEEK PACK)	
<i>progesterone 200mg cap</i>	101	<i>propafenone 300mg tab</i>	18	PYRUKYND 5MG TAB	85
PROGRAF 0.2MG	93	<i>propafenone 325mg er</i>	18	TAPER PACK	
GRANULES FOR ORAL		<i>cap</i>		PYRUKYND 5MG/20MG	86
SUSP		<i>propafenone 425mg er</i>	18	TAB TAPER PACK	
PROGRAF 1MG	93	<i>cap</i>			
GRANULES FOR ORAL		<i>propranolol 10mg tab</i>	64	Q	
SUSP		<i>propranolol 120mg er</i>	64	QINLOCK 50MG TAB	50
PROLASTIN-C 1000MG	104	<i>cap</i>		<i>quetiapine 100mg tab</i>	57
INJ		<i>propranolol 160mg ER</i>	64	<i>quetiapine 150mg er tab</i>	57
PROLENSA 0.07%	98	<i>cap</i>		<i>quetiapine 200mg er tab</i>	58
OPHTH SOLN		<i>propranolol 20mg tab</i>	64	<i>quetiapine 200mg tab</i>	58
PROLIA 60MG/ML	79	<i>propranolol 20mg/5ml</i>	65	<i>quetiapine 25mg tab</i>	58
SYRINGE		<i>oral soln</i>		<i>quetiapine 300mg er tab</i>	58
PROMACTA 12.5MG	86	<i>propranolol 40mg tab</i>	65	<i>quetiapine 300mg tab</i>	58
POWDER FOR ORAL		<i>propranolol 60mg er cap</i>	65	<i>quetiapine 400mg er tab</i>	58
SUSP		<i>propranolol 60mg tab</i>	65	<i>quetiapine 400mg tab</i>	58
PROMACTA 12.5MG TAB	86	<i>propranolol 80mg er cap</i>	65	<i>quetiapine 50mg er tab</i>	58
PROMACTA 25MG	86	<i>propranolol 80mg tab</i>	65	<i>quetiapine 50mg tab</i>	58
POWDER FOR ORAL		PROPRANOLOL	65	QUFLORA PEDIATRIC	94
SUSP		8MG/ML ORAL SOLN		CHEW TAB	
PROMACTA 25MG TAB	86	<i>propylthiouracil 50mg</i>	105	<i>quinapril 10mg tab</i>	37
PROMACTA 50MG TAB	86	<i>tab</i>		<i>quinapril 20mg tab</i>	37
		PROQUAD INJ	109	<i>quinapril 40mg tab</i>	37
				<i>quinapril 5mg tab</i>	37

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>quinidine sulfate 200mg tab</i>	18	RECTIV 0.4% RECTAL OINTMENT	16	REXULTI 0.5MG TAB	59
QUINIDINE SULFATE 200MG TAB	18	REGRANEX 0.01% GEL	77	REXULTI 1MG TAB	59
QUINIDINE SULFATE 300MG TAB	18	RELENZA 5MG/BLISTER	62	REXULTI 2MG TAB	59
<i>quinidine sulfate 300mg tab</i>	18	INHALER		REXULTI 3MG TAB	59
<i>quinine sulfate 324mg cap</i>	42	RELISTOR 12MG/0.6ML INJ	83	REXULTI 4MG TAB	59
QUVIVIQ 25MG TAB	87	RELISTOR 8MG/0.4ML INJ	83	REYATAZ 50MG ORAL POWDER	61
QUVIVIQ 50MG TAB	87	RELSTONE 200MG CAP	82	REYVOW 100MG TAB	90
R		RELSTONE 400MG CAP	82	REYVOW 50MG TAB	90
RABAVERT 2.5UNIT/ML INJ	109	RELYVRIO 3-1GM POWDER PACK	95	REZLIDHIA 150MG CAP	50
<i>rabeprazole sodium 20mg dr tab</i>	107	<i>renaphro cap</i>	94	REZUROCK 200MG TAB	93
RADICAVA 105MG/5ML SUSP	95	<i>repaglinide 0.5mg tab</i>	31	RHOPRESSA 0.02% OPHTH SOLN	97
<i>raloxifene 60mg tab</i>	80	<i>repaglinide 1mg tab</i>	31	<i>ribavirin 200mg cap</i>	62
<i>ramelteon 8mg tab</i>	88	<i>repaglinide 2mg tab</i>	31	RIBAVIRIN 200MG CAP	62
<i>ramipril 1.25mg cap</i>	37	REPATHA 140MG/ML AUTO-INJECTOR	36	RIBAVIRIN 200MG TAB	62
<i>ramipril 10mg cap</i>	37	REPATHA 140MG/ML SYRINGE	36	RIDAURA 3MG CAP	12
<i>ramipril 2.5mg cap</i>	37	REPATHA 420MG/3.5ML CARTRIDGE	36	<i>rifabutin 150mg cap</i>	42
<i>ramipril 5mg cap</i>	37	RETACRIT 20000UNIT/2ML INJ	86	<i>rifampin 150mg cap</i>	42
<i>ranolazine 1000mg er tab</i>	17	RETACRIT 20000UNIT/ML INJ	86	<i>rifampin 300mg cap</i>	42
<i>ranolazine 500mg er tab</i>	17	RETACRIT 2000UNIT/ML INJ	86	<i>rifampin 600mg inj</i>	42
<i>rasagiline 0.5mg tab</i>	54	RETACRIT 3000UNIT/ML INJ	86	<i>riluzole 50mg tab</i>	95
<i>rasagiline 1mg tab</i>	54	RETACRIT 4000UNIT/ML INJ	86	RIMANTADINE 100MG TAB	62
REBIF 22MCG/0.5ML AUTO-INJECTOR	103	RETEVMO 40MG CAP	50	RINVOQ 15MG ER TAB	11
REBIF 22MCG/0.5ML INJ	103	RETEVMO 80MG CAP	50	RINVOQ 30MG ER TAB	11
REBIF 44MCG/0.5ML AUTO-INJECTOR	103	REVLIMID 10MG CAP	93	RINVOQ 45MG ER TAB	11
REBIF 44MCG/0.5ML INJ	103	REVLIMID 15MG CAP	93	<i>risedronate sodium 150mg tab</i>	79
REBIF REBIDOSE PACK	103	REVLIMID 2.5MG CAP	93	<i>risedronate sodium 30mg tab</i>	79
REBIF TITRATION PACK	103	REVLIMID 20MG CAP	93	<i>risedronate sodium 35mg tab</i>	79
RECOMBIVAX 10MCG/ML INJ	109	REVLIMID 25MG CAP	93	<i>risedronate sodium 5mg tab</i>	79
RECOMBIVAX 40MCG/ML INJ	109	REVLIMID 5MG CAP	93	RISPERDAL 12.5MG INJ	56
RECOMBIVAX 5MCG/0.5ML INJ	109	REXULTI 0.25MG TAB	59	RISPERDAL 25MG INJ	56
RECORLEV 150MG TAB	79			RISPERDAL 37.5MG INJ	56
				RISPERDAL 50MG INJ	56
				RISPERIDONE 0.25MG ODT	56
				<i>risperidone 0.25mg tab</i>	56
				<i>risperidone 0.5mg odt</i>	56
				<i>risperidone 0.5mg tab</i>	56

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>risperidone 1mg odt</i>	56	<i>rosuvastatin calcium</i>	35	SAVELLA 12.5MG TAB	102	
<i>risperidone 1mg tab</i>	56	<i>20mg tab</i>		SAVELLA 25MG TAB	102	
<i>risperidone 1mg/ml oral soln</i>	56	<i>rosuvastatin calcium</i>	36	SAVELLA 4-WEEK TITRATION PACK	102	
<i>risperidone 2mg odt</i>	56	<i>40mg tab</i>		SAVELLA 50MG TAB	102	
<i>risperidone 2mg tab</i>	56	<i>rosuvastatin calcium 5mg tab</i>	36	SCSEMBLIX 20MG TAB	51	
<i>risperidone 3mg odt</i>	56	ROTARIX SUSP	109	SCSEMBLIX 40MG TAB	51	
<i>risperidone 3mg tab</i>	56	ROTATEQ SUSP	109	<i>scopolamine 0.0139mg/hr patch</i>	33	
<i>risperidone 4mg odt</i>	56	ROZLYTREK 100MG CAP	50	SECUADO 3.8MG/24HR PATCH	58	
<i>risperidone 4mg tab</i>	56	ROZLYTREK 200MG CAP	50	SECUADO 5.7MG/24HR PATCH	58	
<i>ritonavir 100mg tab</i>	61	RUBRACA 200MG TAB	50	SECUADO 7.6MG/24HR PATCH	58	
<i>rivastigmine 1.5mg cap</i>	102	RUBRACA 250MG TAB	50	<i>selegiline 5mg cap</i>	54	
<i>rivastigmine 13.3mg/24hr patch</i>	102	RUBRACA 300MG TAB	51	<i>selegiline 5mg tab</i>	54	
<i>rivastigmine 3mg cap</i>	102	RUCONEST 2100UNIT INJ	85	<i>selenium sulfide 2.25% shampoo</i>	74	
<i>rivastigmine 4.5mg cap</i>	102	<i>rufinamide 200mg tab</i>	24	<i>selenium sulfide 2.5% shampoo</i>	74	
<i>rivastigmine 4.6mg/24hr patch</i>	102	<i>rufinamide 40mg/ml susp</i>	24	SELZENTRY 20MG/ML ORAL SOLN	61	
<i>rivastigmine 6mg cap</i>	102	RUKOBIA 600MG ER TAB	61	SELZENTRY 25MG TAB	61	
<i>rivastigmine 9.5mg/24hr patch</i>	102	RYBELSUS 14MG TAB	30	SELZENTRY 75MG TAB	61	
<i>rizatriptan 10mg odt</i>	90	RYBELSUS 3MG TAB	30	SEREVENT 20MG/ML ORAL SOLN	20	
<i>rizatriptan 10mg tab</i>	90	RYBELSUS 7MG TAB	30	50MCG/DOSE INHALER		
<i>rizatriptan 5mg odt</i>	90	RYDAPT 25MG CAP	51	<i>sertraline 100mg tab</i>	27	
<i>rizatriptan 5mg tab</i>	90	<hr/>			<i>sertraline 20mg/ml oral soln</i>	27
ROCKLATAN	97	S			<i>sertraline 25mg tab</i>	27
0.05-0.2MG/ML OPHTH SOLN		SALEX SHAMPOO	76	<i>sertraline 50mg tab</i>	27	
<i>roflumilast 250mcg tab</i>	19	<i>salicylic acid shampoo</i>	76	<i>sevelamer carbonate 2400mg powder for oral susp</i>	84	
<i>roflumilast 500mcg tab</i>	19	<i>salmon calcitonin 200unit/act nasal spray</i>	79	<i>sevelamer carbonate 800mg powder for oral susp</i>	84	
<i>ropinirole 0.25mg tab</i>	54	<i>salsalate 500mg tab</i>	13	<i>sevelamer carbonate 800mg tab</i>	84	
<i>ropinirole 0.5mg tab</i>	54	<i>salsalate 750mg tab</i>	14	SHINGRIX	109	
<i>ropinirole 12mg er tab</i>	54	SANDIMMUNE 100MG/ML ORAL SOLN	63	50MCG/0.5ML INJ		
<i>ropinirole 1mg tab</i>	54	SANTYL 250UNIT/GM OINTMENT	76	SIGNIFOR 0.3MG/ML INJ	81	
<i>ropinirole 2mg er tab</i>	54	<i>sapropterin 100mg powder for oral soln</i>	80	SIGNIFOR 0.6MG/ML INJ	81	
<i>ropinirole 2mg tab</i>	54	<i>sapropterin 500mg powder for oral soln</i>	80			
<i>ropinirole 3mg tab</i>	54	<i>sapropterin</i>	80			
<i>ropinirole 4mg er tab</i>	54	<i>dihydrochloride 100mg tab</i>				
<i>ropinirole 4mg tab</i>	54	SAVELLA 100MG TAB	102			
<i>ropinirole 5mg tab</i>	54					
<i>ropinirole 6mg er tab</i>	54					
<i>ropinirole 8mg er tab</i>	54					
<i>rosuvastatin calcium 10mg tab</i>	35					

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

SIGNIFOR 0.9MG/ML INJ	81	SKYTROFA 3.6MG	79	SODIUM OXYBATE	101
<i>sildenafil 20mg tab</i>	67	CARTRIDGE		500MG/ML ORAL SOLN,	
<i>sildenafil tab</i>	67	SKYTROFA 3MG	79	XYREM 500MG/ML	
<i>silodosin 4mg cap</i>	84	CARTRIDGE		ORAL SOLN	
<i>silodosin 8mg cap</i>	84	SKYTROFA 4.3MG	79	<i>sodium phenylbutyrate</i>	80
<i>silver sulfadiazine 1% cream</i>	74	CARTRIDGE		<i>0.94mg/mg oral powder</i>	
SIMBRINZA 0.2-1%	96	SKYTROFA 5.2MG	80	<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	63
OPHTH SUSP		CARTRIDGE		<i>sodium</i>	73
SIMPONI 100MG/ML	12	SKYTROFA 6.3MG	80	<i>sulfacetamide/sulfur 10-5% cleanser</i>	
AUTO-INJECTOR		CARTRIDGE		<i>sodium</i>	73
SIMPONI 100MG/ML	12	SKYTROFA 7.6MG	80	<i>sulfacetamide/sulfur 9-4.5% cleanser</i>	
SYRINGE		CARTRIDGE		<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml prep kit</i>	88
SIMPONI 50MG/0.5ML	12	SKYTROFA 9.1MG	80	SOFOSBUVIR/VELPATAS VIR 400-100MG TAB	62
AUTO-INJECTOR		SLYND 4MG PACK	71	<i>solifenacin succinate</i>	108
SIMPONI 50MG/0.5ML	12	<i>sodium chloride</i>	84	<i>10mg tab</i>	
SYRINGE		<i>0.154meq/ml soln</i>		<i>solifenacin succinate 5mg tab</i>	108
<i>simvastatin 10mg tab</i>	36	<i>sodium chloride</i>	92	SOLQUA PEN INJ	29
<i>simvastatin 20mg tab</i>	36	<i>2.5meq/ml inj</i>		SOLTAMOX 10MG/5ML	45
<i>simvastatin 40mg tab</i>	36	<i>sodium chloride 23.4% inj</i>	92	ORAL SOLN	
<i>simvastatin 5mg tab</i>	36	<i>sodium chloride 30mg/ml inj</i>	92	SOMAVERT 10MG INJ	79
<i>simvastatin 80mg tab</i>	36	<i>sodium chloride 4.5mg/ml inj</i>	92	SOMAVERT 15MG INJ	79
<i>sirolimus 0.5mg tab</i>	63	<i>sodium chloride 50mg/ml inj</i>	92	SOMAVERT 20MG INJ	79
<i>sirolimus 1mg tab</i>	63	SODIUM CHLORIDE	92	SOMAVERT 25MG INJ	79
<i>sirolimus 1mg/ml oral soln</i>	93	9MG/ML INJ		SOMAVERT 30MG INJ	79
<i>sirolimus 2mg tab</i>	63	<i>sodium chloride 9mg/ml inj</i>	92	<i>sorafenib 200mg tab</i>	51
SIRTURO 100MG TAB	42	<i>sodium chloride neb soln</i>	72	<i>sorine 120mg tab</i>	65
SIRTURO 20MG TAB	42	<i>sodium citrate/citric acid soln</i>	84	<i>sorine 160mg tab</i>	65
SIVEXTRO 200MG INJ	41	<i>sodium fluoride chew tab</i>	91	<i>sorine 240mg tab</i>	65
SIVEXTRO 200MG TAB	41	<i>sodium fluoride cream</i>	94	<i>sotalol 120mg tab</i>	65
SKYRIZI 150MG/ML	74	<i>sodium fluoride gel</i>	94	<i>sotalol 80mg tab</i>	65
AUTO-INJECTOR		<i>sodium fluoride paste</i>	94	<i>sotalol AF 160mg tab</i>	65
SKYRIZI 150MG/ML	74	<i>sodium fluoride rinse</i>	94	<i>sotalol AF 80mg tab</i>	65
SYRINGE		<i>sodium fluoride soln</i>	91	SPIRIVA 1.25MCG	19
SKYRIZI 180MG/1.2ML	83	SODIUM FLUORIDE TAE	91	INHALER	
CARTRIDGE		<i>sodium</i>	94	<i>spironolactone 100mg tab</i>	78
SKYRIZI 360MG/2.4ML	83	<i>fluoride/potassium nitrate paste</i>			
CARTRIDGE					
SKYTROFA 11MG	79				
CARTRIDGE					
SKYTROFA 13.3MG	79				
CARTRIDGE					

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>spironolactone 25mg tab</i>	78	<i>sulfacetamide</i>	73	<i>sunitinib malate 12.5mg cap</i>	51
<i>spironolactone 50mg tab</i>	78	<i>sodium/sulfur 10-5% cream</i>		<i>sunitinib malate 25mg cap</i>	51
SPRITAM 1000MG TAB	24	<i>sulfacetamide</i>	73	<i>sunitinib malate 37.5mg cap</i>	51
FOR ORAL SUSP		<i>sodium/sulfur emulsion</i>		<i>sunitinib malate 50mg cap</i>	51
SPRITAM 250MG TAB	24	SULFACETAMIDE/PRED	97	SUNLENCA 300MG TAB	61
FOR ORAL SUSP		NISOLONE 10-0.25% OPTH SOLN		4-TABLET PACK	
SPRITAM 500MG TAB	24	<i>sulfacleanse susp</i>	73	SUNLENCA 300MG TAB	61
FOR ORAL SUSP		<i>sulfadiazine 500mg tab</i>	104	5-TABLET PACK	
SPRITAM 750MG TAB	24	SULFADIAZINE 500MG TAB	104	SUNOSI 150MG TAB	9
FOR ORAL SUSP		<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	40	SUNOSI 75MG TAB	9
SPRYCEL 100MG TAB	51	<i>sulfamethoxazole/trimethoprim 40-8mg/ml susp</i>	40	SYMDEKO	104
SPRYCEL 140MG TAB	51	<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	40	50-75MG/75MG PACK	
SPRYCEL 20MG TAB	51	SULFAMYLON	74	SYMDEKO TAB 4-WEEK PACK	104
SPRYCEL 50MG TAB	51	85MG/GM CREAM		SYMJEPI 0.15MG/0.3ML SYRINGE	110
SPRYCEL 70MG TAB	51	<i>sulfasalazine 500mg dr tab</i>	83	SYMJEPI 0.3MG/0.3ML SYRINGE	110
SPRYCEL 80MG TAB	51	<i>sulfasalazine 500mg tab</i>	83	SYMPAZAN 10MG ORAL FILM	22
SPS 15GM/60ML SUSP	63	<i>sulindac 150mg tab</i>	13	SYMPAZAN 20MG ORAL FILM	22
STELARA 45MG/0.5ML INJ	74	<i>sulindac 200mg tab</i>	13	SYMPAZAN 5MG ORAL FILM	22
STELARA 45MG/0.5ML SYRINGE	74	SUMADAN 9-4.5% WASH	73	SYMPROIC 0.2MG TAB	83
STELARA 90MG/ML SYRINGE	74	<i>sumatriptan 100mg tab</i>	90	SYMTUZA	61
STENDRA TAB	67	<i>sumatriptan 12mg/ml auto-injector</i>	90	800-150-200-10MG TAB	
STIOLTO	20	<i>sumatriptan 12mg/ml inj</i>	90	SYNAREL 2MG/ML NASAL INHALER	80
2.5-2.5MCG/ACT INHALER		<i>sumatriptan 20mg/act nasal spray</i>	90	SYNJARDY 10-1000MG ER TAB	29
STIVARGA 40MG TAB	51	<i>sumatriptan 25mg tab</i>	90	SYNJARDY	29
STREPTOMYCIN 1000MG INJ	11	<i>sumatriptan 50mg tab</i>	90	12.5-1000MG ER TAB	
STRIBILD	61	<i>sumatriptan 5mg/act nasal spray</i>	90	SYNJARDY	29
150-150-200-300MG TAB		SUMATRIPTAN	90	12.5-1000MG TAB	
SUCRAID 8500UNIT/ML ORAL SOLN	77	6MG/0.5ML REFILL INJ		SYNJARDY 12.5-500MG TAB	29
<i>sucralfate 1000mg tab</i>	107	<i>sumatriptan 8mg/ml cartridge</i>	90	SYNJARDY 25-1000MG ER TAB	29
<i>sucralfate 100mg/ml susp</i>	108	SUMATRIPTAN INJ	90		
<i>sulfacetamide sodium 10% lotion</i>	73	4MG/0.5ML REFILL INJ			
<i>sulfacetamide sodium 10% ophth soln</i>	97				
<i>sulfacetamide sodium wash</i>	74				

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This Drug List was updated on 10/01/2023.

For more recent information or other questions, please contact Navitus MedicareRx Prescription Drug Plan Customer Care at 1-833-837-4309 (for TTY/TDD users, please call 711), available 24 hours a day, 7 days a week (except on Thanksgiving and Christmas Day) or visit our website at <https://memberportal.navitus.com> or UHealthplans.com.

Pharmacies can reach Navitus Customer Care 24 hours a day, 7 days a week.