



**Senior Care (HMO I-SNP)
2026 Formulary
(List of Covered Drugs or “Drug List”)**

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

HPMS Approved Formulary File Submission ID 00026155

This formulary was updated on 04/01/2026. For more recent information or other questions, please contact Senior Care (HMO I-SNP) Member Services, at 1-844-788-8935 (TTY 711), or visit: alignseniorcare.com.

Hours of Operation: 8 a.m. to 8 p.m., seven days a week (except Thanksgiving and Christmas) from October 1 through March 31 and Monday to Friday (except holidays) from April 1 through September 30 or visit alignseniorcare.com.

Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to “we,” “us”, or “our,” it means Senior Care (HMO I-SNP) .

This document includes a complete Drug List (formulary) for our plan which is current as of 04/01/2026. For an updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (formulary), appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and /or copayments /coinsurance may change on January 1, 2026, and from time to time during the year.

What is the Senior Care (HMO I-SNP) Formulary ?

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by Senior Care (HMO I-SNP) 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. Senior Care (HMO I-SNP) will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a Senior Care (HMO I-SNP) network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the Formulary change ?

Most changes in drug coverage happen on January 1, but we Senior Care (HMO I-SNP) may add or remove drugs on the formulary during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here : alignseniorcare.com

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

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our formulary if we are replacing it with a certain new version of that drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our formulary, but immediately add new restrictions. We can make these immediate changes only if we are adding a new generic version of a brand name drug, or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription)

If you are currently taking the brand name drug or original biological product, we may not tell you in advance before we make an immediate change, but we will later provide you with information about the specific change(s) we have made. If we make such a change, you or your prescriber can ask us to make an exception and continue to cover for you the drug that is being changed. For more information, see the section below titled “How do I request an exception to the Senior Care (HMO I-SNP) Formulary?”.

Some of these drug types may be new to you. For more information, see the section below titled “What are original biological products and how are they related to biosimilars?”

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may remove a brand name drug from the formulary when adding a generic equivalent or remove an original biological product when adding a biosimilar. We may also apply new restrictions to the brand name drug or original biological product, or move it to a different cost-sharing tier, or both. We may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug, or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective. Alternatively, when a member requests a refill of the drug, they may receive a 30-day supply of the drug and notice of the change. If we make these other changes, you or your prescriber can ask us to make an exception for you and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the Senior Care (HMO I-SNP) ’s Formulary?”

Changes that will not affect you if you are currently taking the drug.

Generally, if you are taking a drug on our 2026 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2026 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the Drug List for the new benefit year for any changes to drugs. The enclosed formulary is current as of 04/01/2026. To get updated information about the drugs covered by Senior Care (HMO I-SNP) please contact us. Our contact information appears on the front and back cover pages. If non-maintenance changes are made to the formulary during the plan year, we will communicate these changes by mailing a Notice of Formulary Change and within the monthly explanation of benefits (EOB).

How do I use the Formulary ?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 8. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, Cardiovascular agents. If you know what your drug is used for, look for the category name in the list that begins on 8. 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 89. The Index provides an alphabetical list of all of the drugs included in this document. Both brand - name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs ?

Senior Care (HMO I-SNP) covers both brand - name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs work just as well as and usually cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

What are original biological products and how are they related to biosimilars?

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs. For discussion of drug types, please see the Evidence of Coverage, Chapter 5, Section 3.1, "The 'Drug List' tells which Part D drugs are covered."

Are there any restrictions on my coverage ?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Senior Care (HMO I-SNP) requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from Senior Care (HMO I-SNP) before you fill your prescriptions. If you don't get approval, Senior Care (HMO I-SNP) may not cover the drug.
- **Quantity Limits:** For certain drugs, Senior Care (HMO I-SNP) limits the amount of the drug that Senior Care (HMO I-SNP) will cover. For example, Senior Care (HMO I-SNP) provides 30 tablets per prescription for JANUVIA. This may be in addition to a standard one - month or three - month supply.
- **Step Therapy:** In some cases, Senior Care (HMO I-SNP) 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, Senior Care (HMO I-SNP) may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Senior Care (HMO I-SNP) will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 8. You can also get more information about

the restrictions applied to specific covered drugs by visiting our website. We have posted online documents that explain prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask Senior Care (HMO I-SNP) 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 Senior Care (HMO I-SNP) 's formulary?" on page 5 for information about how to request an exception.

What if my drug is not on the Formulary ?

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered. For more information, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you learn that Senior Care (HMO I-SNP) does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by Senior Care (HMO I-SNP). When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by Senior Care (HMO I-SNP).
- You can ask Senior Care (HMO I-SNP) 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 Senior Care (HMO I-SNP) 's Formulary?

You can ask Senior Care (HMO I-SNP) to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, Senior Care (HMO I-SNP) limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.
- You can ask us to cover a formulary drug at lower cost-sharing level unless the drug is on the specialty tier. If approved, this would lower the amount you must pay for your drug.

Generally, Senior Care (HMO I-SNP) will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us to ask for a formulary exception, including an exception to a coverage restriction. **When you request an exception, your prescriber will need to explain the medical reasons why you need the exception.** Generally, we must make our decision within 72 hours

of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

What can I do if my drug is not on the formulary or has a restriction?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover, or requesting a formulary exception so that we will cover the drug you take. While you and your doctor determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. If coverage is not approved, after your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

We will provide a one-time 30-day supply of medication in the retail setting and up to a 31-day supply of medication in the long-term care setting, which will cover a temporary supply if you have a change in your medications due to a level-of-care change. A level-of-care change may include: Entering or leaving an LTC facility, Discharged from a hospital or home, End a Medicare Part A skilled nursing facility stay, Give up Hospice status and revert back to standard Medicare benefits, End an LTC Facility stay and return to their home and Discharged from psychiatric hospital with drug regimen that is highly individualized

For more information

For more detailed information about your Senior Care (HMO I-SNP) prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about Senior Care (HMO I-SNP) , please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800- MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or, visit <http://www.medicare.gov>.

Senior Care (HMO I-SNP) Formulary

The formulary below provides coverage information about the drugs covered by Senior Care (HMO I-SNP) . If you have trouble finding your drug in the list, turn to the Index that begins on page 89.

The first column of the chart lists the drug name. Brand - name drugs are capitalized (e.g., TIVICAY) and generic drugs are listed in lower -case italics (e.g., *amlodipine*).

The information in the Requirements/Limits column tells you if Senior Care (HMO I-SNP) has any special requirements for coverage of your drug.

- Non-Extended Day Supply (NDS): You may be able to receive greater than a 1-month supply of most of the drugs on your Formulary via mail order at a reduced cost share. Drugs noted with “NDS” are limited to a 1-month supply for both Retail and Mail Order.
- Prior Authorization (PA): The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from The Plan before you fill your prescriptions. If you don’t get approval, The Plan may not cover the drug.
- Prior Authorization Restriction for Part B vs Part D Determination (PA_BvD): This drug may be eligible for payment under Medicare Part B or Part D. You (or your physician) are required to get prior authorization from The Plan to determine that this drug is covered under Medicare Part D before you fill your prescription for this drug. Without prior approval, The Plan may not cover this drug.
- Prior Authorization Restriction for New Starts Only (PA_NSO): If this drug is new to you, you (or your physician) are required to get prior authorization from The Plan before you fill your prescription for this drug. Without prior approval, The Plan may not cover this drug.
- Step Therapy (ST): In some cases, The Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, The Plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, The Plan will then cover Drug B.
- Step Therapy for New Starts Only (ST_NSO): If this drug is new to you, you are required to first try certain drugs to treat your medical condition before we will cover another drug for that condition.
- Quantity Limits (QL): For certain drugs, The Plan limits the amount of the drug that The Plan will cover. This could include a: per fill, daily, monthly, or yearly limitation.
- Insulins (INS): Insulin products at a maximum \$35 per month.
- Vaccine (VAC): Medicare Part D Vaccines covered at \$0.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<i>amphetamine/dextroamphetamine 10mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 10mg tab</i>	1	
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	1	
<i>amphetamine/dextroamphetamine 15mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 15mg tab</i>	1	
<i>amphetamine/dextroamphetamine 20mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 20mg tab</i>	1	
<i>amphetamine/dextroamphetamine 25mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 30mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 30mg tab</i>	1	
<i>amphetamine/dextroamphetamine 5mg er cap</i>	1	
<i>amphetamine/dextroamphetamine 5mg tab</i>	1	
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	1	
<i>dextroamphetamine sulfate 10mg tab</i>	1	
<i>dextroamphetamine sulfate 5mg tab</i>	1	
<i>lisdexamfetamine dimesylate 10mg cap</i>	1	
<i>lisdexamfetamine dimesylate 20mg cap</i>	1	
<i>lisdexamfetamine dimesylate 30mg cap</i>	1	
<i>lisdexamfetamine dimesylate 40mg cap</i>	1	
<i>lisdexamfetamine dimesylate 50mg cap</i>	1	
<i>lisdexamfetamine dimesylate 60mg cap</i>	1	
<i>lisdexamfetamine dimesylate 70mg cap</i>	1	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine 100mg cap</i>	1	QL=30 EA/30 Days
<i>atomoxetine 10mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 18mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 25mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 40mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 60mg cap</i>	1	QL=60 EA/30 Days
<i>atomoxetine 80mg cap</i>	1	QL=30 EA/30 Days
<i>clonidine 0.1mg er tab</i>	1	
<i>guanfacine 1mg er tab</i>	1	
<i>guanfacine 2mg er tab</i>	1	
<i>guanfacine 3mg er tab</i>	1	
<i>guanfacine 4mg er tab</i>	1	
STIMULANTS - MISC.		
<i>armodafinil 150mg tab</i>	1	PA QL=30 EA/30 Days
<i>armodafinil 200mg tab</i>	1	PA QL=30 EA/30 Days
<i>armodafinil 250mg tab</i>	1	PA QL=30 EA/30 Days
<i>armodafinil 50mg tab</i>	1	PA QL=30 EA/30 Days
<i>dexmethylphenidate 10mg tab</i>	1	
<i>dexmethylphenidate 2.5mg tab</i>	1	
<i>dexmethylphenidate 5mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>methylphenidate 10mg er tab</i>	1	
<i>methylphenidate 10mg tab</i>	1	
<i>methylphenidate 18mg er osmotic tab</i>	1	
<i>methylphenidate 1mg/ml oral soln</i>	1	QL=1800 ML/30 Days
<i>methylphenidate 20mg er tab</i>	1	
<i>methylphenidate 20mg tab</i>	1	
<i>methylphenidate 27mg er osmotic tab</i>	1	
<i>methylphenidate 27mg er tab</i>	1	
<i>methylphenidate 2mg/ml oral soln</i>	1	QL=900 ML/30 Days
<i>methylphenidate 36mg er osmotic tab</i>	1	
<i>methylphenidate 36mg er tab</i>	1	
<i>methylphenidate 54mg er osmotic tab</i>	1	
<i>methylphenidate 54mg er tab</i>	1	
<i>methylphenidate 5mg tab</i>	1	
<i>modafinil 100mg tab</i>	1	PA QL=60 EA/30 Days
<i>modafinil 200mg tab</i>	1	PA QL=60 EA/30 Days
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
<i>amikacin 250mg/ml inj</i>	1	
ARIKAYCE 590MG/8.4ML INH SUSP	1	NDS PA QL=235.20 ML/28 Days
GENTAMICIN 0.8MG/ML INJ	1	
GENTAMICIN 1.2MG/ML INJ	1	
GENTAMICIN 1.6MG/ML INJ	1	
GENTAMICIN 1MG/ML INJ	1	
<i>gentamicin 40mg/ml inj</i>	1	
<i>neomycin sulfate 500mg tab</i>	1	
STREPTOMYCIN 1GM INJ	1	
TOBRAMYCIN 10MG/ML INJ	1	
<i>tobramycin 300mg/5ml inh soln</i>	1	PA QL=280 ML/28 Days
<i>tobramycin 80mg/2ml inj</i>	1	
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
<i>leflunomide 10mg tab</i>	1	QL=30 EA/30 Days
<i>leflunomide 20mg tab</i>	1	QL=30 EA/30 Days
OLUMIANT 1MG TAB	1	NDS PA QL=30 EA/30 Days
OLUMIANT 2MG TAB	1	NDS PA QL=30 EA/30 Days
OLUMIANT 4MG TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 15MG ER TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 1MG/ML ORAL SOLN	1	NDS PA QL=360 ML/30 Days
RINVOQ 30MG ER TAB	1	NDS PA QL=30 EA/30 Days
RINVOQ 45MG ER TAB	1	NDS PA QL=30 EA/30 Days
XELJANZ 10MG TAB	1	NDS PA QL=60 EA/30 Days
XELJANZ 1MG/ML ORAL SOLN	1	NDS PA QL=300 ML/30 Days
XELJANZ 5MG TAB	1	NDS PA QL=60 EA/30 Days
XELJANZ XR 11MG TAB	1	NDS PA QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XELJANZ XR 22MG TAB	1	NDS PA QL=30 EA/30 Days
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
CIMZIA 200MG INJ	1	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE	1	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE STARTER KIT (6)	1	NDS PA QL=3 EA/28 Days
ENBREL 25MG/0.5ML INJ	1	NDS PA QL=8 ML/28 Days
ENBREL 25MG/0.5ML SYRINGE	1	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML CARTRIDGE	1	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML SYRINGE	1	NDS PA QL=8 ML/28 Days
HADLIMA 40MG/0.4ML AUTO-INJECTOR	1	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.4ML SYRINGE	1	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.8ML AUTO-INJECTOR	1	NDS PA QL=4.80 ML/28 Days
HADLIMA 40MG/0.8ML SYRINGE	1	NDS PA QL=4.80 ML/28 Days
SIMLANDI 20MG/0.2ML SYRINGE	1	NDS PA QL=2 EA/28 Days
SIMLANDI 40MG/0.4ML AUTO-INJECTOR	1	NDS PA QL=6 EA/28 Days
SIMLANDI 40MG/0.4ML SYRINGE	1	NDS PA QL=6 EA/28 Days
SIMLANDI 80MG/0.8ML AUTO-INJECTOR	1	NDS PA QL=3 EA/28 Days
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
<i>celecoxib 100mg cap</i>	1	
<i>celecoxib 200mg cap</i>	1	
<i>celecoxib 400mg cap</i>	1	
<i>celecoxib 50mg cap</i>	1	
<i>diclofenac potassium 50mg tab</i>	1	
<i>diclofenac sodium 1.5% topical soln</i>	1	QL=300 ML/30 Days
<i>diclofenac sodium 100mg er tab</i>	1	QL=60 EA/30 Days
<i>diclofenac sodium 25mg dr tab</i>	1	QL=240 EA/30 Days
<i>diclofenac sodium 50mg dr tab</i>	1	QL=120 EA/30 Days
<i>diclofenac sodium 75mg dr tab</i>	1	QL=60 EA/30 Days
<i>diflunisal 500mg tab</i>	1	QL=90 EA/30 Days
<i>etodolac 200mg cap</i>	1	QL=150 EA/30 Days
<i>etodolac 300mg cap</i>	1	QL=90 EA/30 Days
<i>etodolac 400mg tab</i>	1	QL=60 EA/30 Days
<i>etodolac 500mg tab</i>	1	QL=60 EA/30 Days
FLURBIPROFEN 100MG TAB	1	QL=90 EA/30 Days
<i>ibu 600mg tab</i>	1	
<i>ibu 800mg tab</i>	1	
<i>ibuprofen 400mg tab</i>	1	
<i>ibuprofen 600mg tab</i>	1	
<i>ibuprofen 800mg tab</i>	1	
<i>indomethacin 25mg cap</i>	1	
<i>indomethacin 50mg cap</i>	1	
<i>indomethacin 75mg er cap</i>	1	
<i>ketorolac tromethamine 10mg tab</i>	1	QL=20 EA/5 Days
<i>meloxicam 15mg tab</i>	1	

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>meloxicam 7.5mg tab</i>	1	
<i>nabumetone 500mg tab</i>	1	QL=120 EA/30 Days
<i>nabumetone 750mg tab</i>	1	QL=60 EA/30 Days
<i>naproxen 250mg tab</i>	1	
<i>naproxen 375mg dr tab</i>	1	QL=120 EA/30 Days
<i>naproxen 375mg tab</i>	1	
<i>naproxen 500mg tab</i>	1	
<i>piroxicam 10mg cap</i>	1	QL=60 EA/30 Days
<i>piroxicam 20mg cap</i>	1	QL=30 EA/30 Days
<i>sulindac 150mg tab</i>	1	QL=60 EA/30 Days
<i>sulindac 200mg tab</i>	1	QL=60 EA/30 Days
ANALGESICS - OPIOID		
OPIOID AGONISTS		
<i>fentanyl 100mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 12mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 25mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 50mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>fentanyl 75mcg/hr patch</i>	1	QL=10 EA/30 Days
<i>hydromorphone 2mg tab</i>	1	QL=450 EA/30 Days
<i>hydromorphone 4mg tab</i>	1	QL=240 EA/30 Days
<i>hydromorphone 8mg tab</i>	1	QL=120 EA/30 Days
<i>methadone 10mg tab</i>	1	QL=360 EA/30 Days
METHADONE 1MG/ML ORAL SOLN	1	QL=3600 ML/30 Days
METHADONE 2MG/ML ORAL SOLN	1	QL=1800 ML/30 Days
<i>methadone 5mg tab</i>	1	QL=360 EA/30 Days
<i>morphine sulfate 100mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 15mg tab</i>	1	QL=180 EA/30 Days
<i>morphine sulfate 200mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 ML/30 Days
MORPHINE SULFATE 2MG/ML ORAL SOLN	1	QL=1800 ML/30 Days
<i>morphine sulfate 30mg er tab</i>	1	QL=120 EA/30 Days
<i>morphine sulfate 30mg tab</i>	1	QL=180 EA/30 Days
MORPHINE SULFATE 4MG/ML ORAL SOLN	1	QL=900 ML/30 Days
<i>morphine sulfate 60mg er tab</i>	1	QL=120 EA/30 Days
<i>oxycodone 10mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 15mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 1mg/ml oral soln</i>	1	QL=5400 ML/30 Days
<i>oxycodone 20mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 30mg tab</i>	1	QL=180 EA/30 Days
<i>oxycodone 5mg tab</i>	1	QL=360 EA/30 Days
OXYCONTIN 10MG ER TAB	1	PA QL=60 EA/30 Days
OXYCONTIN 15MG ER TAB	1	PA QL=60 EA/30 Days
OXYCONTIN 20MG ER TAB	1	PA QL=60 EA/30 Days
OXYCONTIN 30MG ER TAB	1	PA QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
OXYCONTIN 40MG ER TAB	1	PA QL=60 EA/30 Days
OXYCONTIN 60MG ER TAB	1	PA QL=60 EA/30 Days
OXYCONTIN 80MG ER TAB	1	PA QL=60 EA/30 Days
<i>tramadol 100mg er tab</i>	1	QL=30 EA/30 Days
<i>tramadol 200mg er tab</i>	1	QL=30 EA/30 Days
<i>tramadol 300mg er tab</i>	1	QL=30 EA/30 Days
<i>tramadol 50mg tab</i>	1	QL=240 EA/30 Days
OPIOID COMBINATIONS		
<i>codeine phosphate/acetaminophen 15-300mg tab</i>	1	QL=390 EA/30 Days
CODEINE PHOSPHATE/ACETAMINOPHEN 2.4-24MG/ML ORAL SOLN	1	QL=4980 ML/30 Days
<i>codeine phosphate/acetaminophen 30-300mg tab</i>	1	QL=390 EA/30 Days
<i>codeine phosphate/acetaminophen 60-300mg tab</i>	1	QL=390 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>	1	QL=5400 ML/30 Days
<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>hydrocodone bitartrate/ibuprofen 7.5-200mg tab</i>	1	QL=480 EA/30 Days
<i>oxycodone/acetaminophen 10-325mg tab</i>	1	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 2.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 5-325mg tab</i>	1	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	1	QL=360 EA/30 Days
<i>tramadol/acetaminophen 37.5-325mg tab</i>	1	QL=360 EA/30 Days
OPIOID PARTIAL AGONISTS		
<i>buprenorphine 10mcg/hr weekly patch</i>	1	QL=4 EA/28 Days
<i>buprenorphine 15mcg/hr weekly patch</i>	1	QL=4 EA/28 Days
<i>buprenorphine 20mcg/hr weekly patch</i>	1	QL=4 EA/28 Days
<i>buprenorphine 2mg sl tab</i>	1	QL=120 EA/30 Days
<i>buprenorphine 5mcg/hr weekly patch</i>	1	QL=4 EA/28 Days
<i>buprenorphine 7.5mcg/hr weekly patch</i>	1	QL=4 EA/28 Days
<i>buprenorphine 8mg sl tab</i>	1	QL=120 EA/30 Days
<i>buprenorphine/naloxone 12-3mg sl film</i>	1	
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	1	QL=120 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	1	QL=120 EA/30 Days
<i>buprenorphine/naloxone 4-1mg sl film</i>	1	QL=120 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl film</i>	1	QL=120 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	1	QL=120 EA/30 Days
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol 100mg cap</i>	1	
<i>danazol 200mg cap</i>	1	
<i>danazol 50mg cap</i>	1	
<i>testosterone 1% (12.5mg/act) topical gel pump</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1% (25mg) topical gel packet</i>	1	PA QL=300 GM/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>testosterone 1% (50mg) topical gel packet</i>	1	PA QL=300 GM/30 Days
<i>testosterone 1.62% (20.25mg/act) topical gel pump</i>	1	PA QL=150 GM/30 Days
<i>testosterone 30mg/act topical soln</i>	1	PA QL=180 ML/30 Days
<i>testosterone cypionate 100mg/ml inj</i>	1	
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	1	
<i>testosterone cypionate 200mg/ml inj</i>	1	
TESTOSTERONE ENANTHATE 200MG/ML INJ	1	QL=5 ML/28 Days
ANORECTAL AND RELATED PRODUCTS		
RECTAL PRODUCTS - MISC.		
<i>hydrocortisone 1.67mg/ml enema</i>	1	
<i>hydrocortisone 2.5% topical cream</i>	1	QL=60 GM/30 Days
<i>nitroglycerin 0.4% rectal ointment</i>	1	QL=30 GM/30 Days
<i>procto-med 2.5% topical cream</i>	1	QL=60 GM/30 Days
<i>proctosol 2.5% topical cream</i>	1	QL=60 GM/30 Days
<i>proctozone hc 2.5% topical cream</i>	1	QL=60 GM/30 Days
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole 200mg tab</i>	1	QL=672 EA/365 Days
<i>ivermectin 3mg tab</i>	1	PA QL=30 EA/90 Days
<i>praziquantel 600mg tab</i>	1	
ANTIANGINAL AGENTS		
NITRATES		
<i>isosorbide dinitrate 10mg tab</i>	1	
<i>isosorbide dinitrate 20mg tab</i>	1	
<i>isosorbide dinitrate 30mg tab</i>	1	
<i>isosorbide dinitrate 5mg tab</i>	1	
ISOSORBIDE MONONITRATE 10MG TAB	1	
<i>isosorbide mononitrate 120mg er tab</i>	1	
ISOSORBIDE MONONITRATE 20MG TAB	1	
<i>isosorbide mononitrate 30mg er tab</i>	1	
<i>isosorbide mononitrate 60mg er tab</i>	1	
NITRO-BID 2% TOPICAL OINTMENT	1	
<i>nitroglycerin 0.1mg/hr patch</i>	1	
<i>nitroglycerin 0.2mg/hr patch</i>	1	
<i>nitroglycerin 0.3mg sl tab</i>	1	
<i>nitroglycerin 0.4mg sl tab</i>	1	
<i>nitroglycerin 0.4mg/hr patch</i>	1	
<i>nitroglycerin 0.6mg sl tab</i>	1	
<i>nitroglycerin 0.6mg/hr patch</i>	1	
ANTIANSXIETY AGENTS		
ANTIANSXIETY AGENTS - MISC.		
<i>buspirone 10mg tab</i>	1	
<i>buspirone 15mg tab</i>	1	
<i>buspirone 30mg tab</i>	1	
<i>buspirone 5mg tab</i>	1	

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>buspirone 7.5mg tab</i>	1	
<i>hydroxyzine 10mg tab</i>	1	
<i>hydroxyzine 25mg tab</i>	1	
<i>hydroxyzine 2mg/ml oral soln</i>	1	
<i>hydroxyzine 50mg tab</i>	1	
<i>hydroxyzine pamoate 25mg cap</i>	1	
<i>hydroxyzine pamoate 50mg cap</i>	1	
BENZODIAZEPINES		
<i>alprazolam 0.25mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 0.5mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 1mg tab</i>	1	QL=120 EA/30 Days
<i>alprazolam 2mg tab</i>	1	QL=150 EA/30 Days
<i>chlordiazepoxide 10mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 25mg cap</i>	1	QL=120 EA/30 Days
<i>chlordiazepoxide 5mg cap</i>	1	QL=120 EA/30 Days
<i>clorazepate dipotassium 15mg tab</i>	1	QL=180 EA/30 Days
<i>clorazepate dipotassium 3.75mg tab</i>	1	QL=90 EA/30 Days
<i>clorazepate dipotassium 7.5mg tab</i>	1	QL=180 EA/30 Days
<i>diazepam 10mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 1mg/ml oral soln</i>	1	QL=1200 ML/30 Days
<i>diazepam 2mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg tab</i>	1	QL=120 EA/30 Days
<i>diazepam 5mg/ml oral soln</i>	1	QL=240 ML/30 Days
<i>lorazepam 0.5mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 1mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg tab</i>	1	QL=150 EA/30 Days
<i>lorazepam 2mg/ml oral soln</i>	1	QL=150 ML/30 Days
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	1	NDS PA QL=4.56 ML/28 Days
DUPIXENT 200MG/1.14ML SYRINGE	1	NDS PA QL=4.56 ML/28 Days
DUPIXENT 300MG/2ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
DUPIXENT 300MG/2ML SYRINGE	1	NDS PA QL=8 ML/28 Days
FASENRA 10MG/0.5ML SYRINGE	1	PA QL=.50 ML/28 Days
FASENRA 30MG/ML AUTO-INJECTOR	1	PA QL=1 ML/28 Days
FASENRA 30MG/ML SYRINGE	1	PA QL=1 ML/28 Days
NUCALA 100MG INJ	1	NDS PA QL=3 EA/28 Days
NUCALA 100MG/ML AUTO-INJECTOR	1	NDS PA QL=3 ML/28 Days
NUCALA 100MG/ML SYRINGE	1	NDS PA QL=3 ML/28 Days
NUCALA 40MG/0.4ML SYRINGE	1	NDS PA QL=.40 ML/28 Days
XOLAIR 150MG INJ	1	NDS PA QL=8 EA/28 Days
XOLAIR 150MG/ML AUTO-INJECTOR	1	NDS PA QL=2 ML/28 Days
XOLAIR 150MG/ML SYRINGE	1	NDS PA QL=2 ML/28 Days
XOLAIR 300MG/2ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
XOLAIR 300MG/2ML SYRINGE	1	NDS PA QL=8 ML/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
XOLAIR 75MG/0.5ML AUTO-INJECTOR	1	NDS PA QL=1 ML/28 Days
XOLAIR 75MG/0.5ML SYRINGE	1	NDS PA QL=1 ML/28 Days
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium 10mg/ml inh soln</i>	1	PA_BvD
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG HFA INHALER	1	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH POWDER INHALER	1	QL=30 EA/30 Days
<i>ipratropium bromide 0.02% inh soln</i>	1	PA_BvD
SPIRIVA RESPIMAT 1.25MCG/ACT INHALER	1	QL=4 GM/30 Days
LEUKOTRIENE MODULATORS		
<i>montelukast 10mg tab</i>	1	
<i>montelukast 4mg chew tab</i>	1	
<i>montelukast 5mg chew tab</i>	1	
<i>zafirlukast 10mg tab</i>	1	QL=60 EA/30 Days
<i>zafirlukast 20mg tab</i>	1	QL=60 EA/30 Days
STEROID INHALANTS		
ALVESCO 160MCG INHALER	1	QL=12.20 GM/30 Days
ALVESCO 80MCG INHALER	1	QL=12.20 GM/30 Days
ARNUITY 100MCG POWDER INHALER	1	QL=30 EA/30 Days
ARNUITY 200MCG POWDER INHALER	1	QL=30 EA/30 Days
ARNUITY 50MCG POWDER INHALER	1	QL=30 EA/30 Days
ASMANEX 100MCG HFA INHALER	1	QL=13 GM/30 Days
ASMANEX 110MCG (30ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 200MCG HFA INHALER	1	QL=13 GM/30 Days
ASMANEX 220MCG (120ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 220MCG (30ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 220MCG (60ACT) TWISTHALER	1	QL=1 EA/30 Days
ASMANEX 50MCG HFA INHALER	1	QL=13 GM/30 Days
<i>budesonide 0.25mg/2ml inh susp</i>	1	PA_BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/2ml inh susp</i>	1	PA_BvD QL=120 ML/30 Days
<i>budesonide 1mg/2ml inh susp</i>	1	PA_BvD QL=120 ML/30 Days
QVAR 40MCG REDIHALER	1	QL=10.60 GM/30 Days
QVAR 80MCG REDIHALER	1	QL=21.20 GM/30 Days
SYMPATHOMIMETICS		
ADVAIR 115-21MCG HFA INHALER	1	QL=12 GM/30 Days
ADVAIR 230-21MCG HFA INHALER	1	QL=12 GM/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER	1	QL=12 GM/30 Days
<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	1	PA_BvD
<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	1	
<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	1	PA_BvD
<i>albuterol 1.25mg/3ml neb soln</i>	1	PA_BvD
<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i>	1	QL=13.40 GM/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	1	QL=17 GM/30 Days
<i>albuterol 5mg/ml (0.5%) inh soln</i>	1	PA_BvD

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
ANORO ELLIPTA 62.5-25MCG POWDER INHALER	1	QL=60 EA/30 Days
<i>arformoterol tartrate 15mcg/2ml neb soln</i>	1	PA_BvD QL=120 ML/30 Days
BREO ELLIPTA 100-25MCG POWDER INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 200-25MCG POWDER INHALER	1	QL=60 EA/30 Days
BREO ELLIPTA 50-25MCG POWDER INHALER	1	QL=60 EA/30 Days
<i>breynga 160-4.5mcg/act inhaler</i>	1	QL=10.30 GM/30 Days
<i>breynga 80-4.5mcg/act inhaler</i>	1	QL=10.30 GM/30 Days
BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	1	QL=10.70 GM/30 Days
<i>budesonide/formoterol fumarate 160-45mcg inhaler</i>	1	QL=10.20 GM/30 Days
<i>budesonide/formoterol fumarate 80-45mcg inhaler</i>	1	QL=10.20 GM/30 Days
COMBIVENT 20-100MCG/ACT INHALER	1	QL=8 GM/30 Days
DULERA 100-5MCG INHALER	1	QL=13 GM/30 Days
DULERA 200-5MCG INHALER	1	QL=13 GM/30 Days
DULERA 50-5MCG INHALER	1	QL=13 GM/30 Days
<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	1	QL=2 EA/15 Days
<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	1	QL=2 EA/15 Days
<i>fluticasone propionate/salmeterol 100-50mcg/act powder inhaler</i>	1	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 250-50mcg/act powder inhaler</i>	1	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 500-50mcg/act powder inhaler</i>	1	QL=60 EA/30 Days
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	1	PA_BvD
STIOLTO 2.5-2.5MCG/ACT INHALER	1	QL=4 GM/30 Days
STRIVERDI 2.5MCG/ACT INHALER	1	QL=4 GM/30 Days
TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER	1	QL=60 EA/30 Days
TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	1	QL=60 EA/30 Days
VENTOLIN 108MCG HFA INHALER	1	QL=36 GM/30 Days
<i>wixela 100-50mcg powder inhaler</i>	1	QL=60 EA/30 Days
<i>wixela 250-50mcg powder inhaler</i>	1	QL=60 EA/30 Days
<i>wixela 500-50mcg powder inhaler</i>	1	QL=60 EA/30 Days
ANTICOAGULANTS		
ANTICOAGULANTS - MISC.		
<i>dabigatran etexilate 110mg cap</i>	1	QL=60 EA/30 Days
<i>dabigatran etexilate 150mg cap</i>	1	QL=60 EA/30 Days
<i>dabigatran etexilate 75mg cap</i>	1	QL=60 EA/30 Days
ELIQUIS 2.5MG TAB	1	QL=60 EA/30 Days
ELIQUIS 5MG 30-DAY STARTER PACK (74)	1	QL=74 EA/30 Days
ELIQUIS 5MG TAB	1	QL=74 EA/30 Days
<i>enoxaparin sodium 100mg/1ml syringe</i>	1	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	1	
<i>enoxaparin sodium 150mg/1ml syringe</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>enoxaparin sodium 30mg/0.3ml syringe</i>	1	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	1	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	1	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	1	
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	1	
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	1	
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	1	
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	1	
<i>heparin sodium porcine 10000unit/ml inj</i>	1	
<i>heparin sodium porcine 1000unit/ml inj</i>	1	
<i>heparin sodium porcine 20000unit/ml inj</i>	1	
<i>heparin sodium porcine 5000unit/ml inj</i>	1	
<i>jantoven 10mg tab</i>	1	
<i>jantoven 1mg tab</i>	1	
<i>jantoven 2.5mg tab</i>	1	
<i>jantoven 2mg tab</i>	1	
<i>jantoven 3mg tab</i>	1	
<i>jantoven 4mg tab</i>	1	
<i>jantoven 5mg tab</i>	1	
<i>jantoven 6mg tab</i>	1	
<i>jantoven 7.5mg tab</i>	1	
<i>rivaroxaban 1mg/ml oral susp</i>	1	QL=620 ML/30 Days
<i>rivaroxaban 2.5mg tab</i>	1	QL=60 EA/30 Days
<i>warfarin sodium 10mg tab</i>	1	
<i>warfarin sodium 1mg tab</i>	1	
<i>warfarin sodium 2.5mg tab</i>	1	
<i>warfarin sodium 2mg tab</i>	1	
<i>warfarin sodium 3mg tab</i>	1	
<i>warfarin sodium 4mg tab</i>	1	
<i>warfarin sodium 5mg tab</i>	1	
<i>warfarin sodium 6mg tab</i>	1	
<i>warfarin sodium 7.5mg tab</i>	1	
XARELTO 10MG TAB	1	QL=30 EA/30 Days
XARELTO 15MG TAB	1	QL=60 EA/30 Days
XARELTO 1MG/ML ORAL SUSP	1	QL=620 ML/30 Days
XARELTO 2.5MG TAB	1	QL=60 EA/30 Days
XARELTO 20MG TAB	1	QL=30 EA/30 Days
XARELTO TAB STARTER PACK (51)	1	QL=51 EA/30 Days
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	1	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml oral susp</i>	1	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	1	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	1	QL=90 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>clonazepam 0.5mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	1	QL=90 EA/30 Days
<i>clonazepam 1mg tab</i>	1	QL=90 EA/30 Days
<i>clonazepam 2mg odt</i>	1	QL=300 EA/30 Days
<i>clonazepam 2mg tab</i>	1	QL=300 EA/30 Days
<i>diazepam 10mg/2ml rectal gel</i>	1	QL=10 EA/30 Days
<i>diazepam 2.5mg/0.5ml rectal gel</i>	1	QL=10 EA/30 Days
<i>diazepam 20mg/4ml rectal gel</i>	1	QL=10 EA/30 Days
NAYZILAM 5MG/0.1ML NASAL SPRAY	1	QL=10 EA/30 Days
SYMPAZAN 10MG ORAL FILM	1	PA_NSO QL=60 EA/30 Days
SYMPAZAN 20MG ORAL FILM	1	PA_NSO QL=60 EA/30 Days
SYMPAZAN 5MG ORAL FILM	1	PA_NSO QL=60 EA/30 Days
VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
VALTOCO 5MG (5MG/0.1ML) NASAL SPRAY DOSE PACK	1	QL=10 EA/30 Days
ANTICONVULSANTS - MISC.		
<i>brivaracetam 100mg tab</i>	1	PA_NSO QL=60 EA/30 Days
<i>brivaracetam 10mg tab</i>	1	PA_NSO QL=60 EA/30 Days
<i>brivaracetam 10mg/ml oral soln</i>	1	PA_NSO QL=600 ML/30 Days
<i>brivaracetam 25mg tab</i>	1	PA_NSO QL=60 EA/30 Days
<i>brivaracetam 50mg tab</i>	1	PA_NSO QL=60 EA/30 Days
<i>brivaracetam 75mg tab</i>	1	PA_NSO QL=60 EA/30 Days
<i>carbamazepine 100mg chew tab</i>	1	
<i>carbamazepine 100mg er cap</i>	1	
<i>carbamazepine 100mg er tab</i>	1	
<i>carbamazepine 200mg er cap</i>	1	
<i>carbamazepine 200mg er tab</i>	1	
<i>carbamazepine 200mg tab</i>	1	
<i>carbamazepine 20mg/ml oral susp</i>	1	
<i>carbamazepine 300mg er cap</i>	1	
<i>carbamazepine 400mg er tab</i>	1	
DIACOMIT 250MG CAP	1	NDS PA_NSO QL=360 EA/30 Days
DIACOMIT 250MG POWDER FOR ORAL SUSP	1	NDS PA_NSO QL=360 EA/30 Days
DIACOMIT 500MG CAP	1	NDS PA_NSO QL=180 EA/30 Days
DIACOMIT 500MG POWDER FOR ORAL SUSP	1	NDS PA_NSO QL=180 EA/30 Days
DILANTIN 30MG ER CAP	1	
EPIDIOLEX 100MG/ML ORAL SOLN	1	NDS PA_NSO QL=600 ML/30 Days
<i>eslicarbazepine acetate 200mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>eslicarbazepine acetate 400mg tab</i>	1	PA_NSO QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>eslicarbazepine acetate 600mg tab</i>	1	PA_NSO QL=60 EA/30 Days
<i>eslicarbazepine acetate 800mg tab</i>	1	PA_NSO QL=60 EA/30 Days
<i>FINTEPLA 2.2MG/ML ORAL SOLN</i>	1	NDS PA_NSO QL=360 ML/30 Days
<i>gabapentin 100mg cap</i>	1	QL=360 EA/30 Days
<i>gabapentin 300mg cap</i>	1	QL=360 EA/30 Days
<i>gabapentin 400mg cap</i>	1	QL=270 EA/30 Days
<i>gabapentin 50mg/ml oral soln</i>	1	QL=2160 ML/30 Days
<i>gabapentin 600mg tab (Neurontin equiv)</i>	1	QL=180 EA/30 Days
<i>gabapentin 800mg tab</i>	1	QL=135 EA/30 Days
<i>lacosamide 100mg tab</i>	1	QL=60 EA/30 Days
<i>lacosamide 10mg/ml oral soln</i>	1	QL=1200 ML/30 Days
<i>lacosamide 150mg tab</i>	1	QL=60 EA/30 Days
<i>lacosamide 200mg tab</i>	1	QL=60 EA/30 Days
<i>lacosamide 50mg tab</i>	1	QL=120 EA/30 Days
<i>lamotrigine 100mg er tab</i>	1	
<i>lamotrigine 100mg odt</i>	1	
<i>lamotrigine 100mg tab</i>	1	
<i>lamotrigine 150mg tab</i>	1	
<i>lamotrigine 200mg er tab</i>	1	
<i>lamotrigine 200mg odt</i>	1	
<i>lamotrigine 200mg tab</i>	1	
<i>lamotrigine 250mg er tab</i>	1	
<i>lamotrigine 25mg chew tab</i>	1	
<i>lamotrigine 25mg er tab</i>	1	
<i>lamotrigine 25mg odt</i>	1	
<i>lamotrigine 25mg tab</i>	1	
<i>lamotrigine 300mg er tab</i>	1	
<i>lamotrigine 50mg er tab</i>	1	
<i>lamotrigine 50mg odt</i>	1	
<i>lamotrigine 5mg chew tab</i>	1	
<i>levetiracetam 1000mg tab</i>	1	
<i>levetiracetam 100mg/ml oral soln</i>	1	
<i>levetiracetam 250mg tab</i>	1	
<i>levetiracetam 500mg er tab</i>	1	QL=180 EA/30 Days
<i>levetiracetam 500mg tab</i>	1	
<i>levetiracetam 750mg er tab</i>	1	QL=120 EA/30 Days
<i>levetiracetam 750mg tab</i>	1	
<i>oxcarbazepine 150mg tab</i>	1	
<i>oxcarbazepine 300mg tab</i>	1	
<i>oxcarbazepine 600mg tab</i>	1	
<i>oxcarbazepine 60mg/ml oral susp</i>	1	
<i>perampanel 0.5mg/ml oral susp</i>	1	PA_NSO QL=720 ML/30 Days
<i>perampanel 10mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>perampanel 12mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>perampanel 2mg tab</i>	1	PA_NSO QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>perampanel 4mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>perampanel 6mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>perampanel 8mg tab</i>	1	PA_NSO QL=30 EA/30 Days
PHENOBARBITAL 100MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 15MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 16.2MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 30MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 32.4MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 4MG/ML ORAL SOLN	1	QL=1500 ML/30 Days
PHENOBARBITAL 60MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 64.8MG TAB	1	QL=120 EA/30 Days
PHENOBARBITAL 97.2MG TAB	1	QL=120 EA/30 Days
<i>phenytek 200mg er cap</i>	1	
<i>phenytek 300mg er cap</i>	1	
<i>phenytoin 25mg/ml oral susp</i>	1	
<i>phenytoin 50mg chew tab</i>	1	
<i>phenytoin sodium 100mg er cap</i>	1	
<i>pregabalin 100mg cap</i>	1	QL=120 EA/30 Days
<i>pregabalin 150mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 200mg cap</i>	1	QL=90 EA/30 Days
<i>pregabalin 20mg/ml oral soln</i>	1	QL=900 ML/30 Days
<i>pregabalin 225mg cap</i>	1	QL=60 EA/30 Days
<i>pregabalin 25mg cap</i>	1	QL=120 EA/30 Days
<i>pregabalin 300mg cap</i>	1	QL=60 EA/30 Days
<i>pregabalin 50mg cap</i>	1	QL=120 EA/30 Days
<i>pregabalin 75mg cap</i>	1	QL=120 EA/30 Days
<i>primidone 250mg tab</i>	1	
<i>primidone 50mg tab</i>	1	
<i>roweepra 500mg tab</i>	1	
<i>rufinamide 200mg tab</i>	1	PA_NSO QL=480 EA/30 Days
<i>rufinamide 400mg tab</i>	1	PA_NSO QL=240 EA/30 Days
<i>rufinamide 40mg/ml oral susp</i>	1	PA_NSO QL=2760 ML/30 Days
SPRITAM 250MG TAB FOR ORAL SUSP	1	PA_NSO QL=360 EA/30 Days
SPRITAM 500MG TAB FOR ORAL SUSP	1	PA_NSO QL=180 EA/30 Days
SUBVENITE 10MG/ML ORAL SUSP	1	PA_NSO QL=2160 ML/30 Days
<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 25mg/ml oral soln</i>	1	PA_NSO QL=480 ML/30 Days
<i>topiramate 50mg tab</i>	1	
ZONISADE 100MG/5ML ORAL SUSP	1	PA_NSO QL=900 ML/30 Days
<i>zonisamide 100mg cap</i>	1	
<i>zonisamide 25mg 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>zonisamide 50mg cap</i>	1	
ZTALMY 50MG/ML ORAL SUSP	1	NDS PA_NSO QL=1100 ML/30 Days
CARBAMATES		
<i>felbamate 120mg/ml oral susp</i>	1	
<i>felbamate 400mg tab</i>	1	
<i>felbamate 600mg tab</i>	1	
XCOPRI 100MG TAB	1	PA_NSO QL=30 EA/30 Days
XCOPRI 150MG TAB	1	PA_NSO QL=60 EA/30 Days
XCOPRI 200MG TAB	1	PA_NSO QL=60 EA/30 Days
XCOPRI 25MG TAB	1	PA_NSO QL=30 EA/30 Days
XCOPRI 50MG TAB	1	PA_NSO QL=30 EA/30 Days
XCOPRI TAB 100/150MG MAINTENANCE PACK (56)	1	PA_NSO QL=56 EA/28 Days
XCOPRI TAB 12.5/25MG TITRATION PACK (28)	1	PA_NSO QL=28 EA/28 Days
XCOPRI TAB 150/200MG PACK (56)	1	PA_NSO QL=56 EA/28 Days
XCOPRI TAB 150/200MG TITRATION PACK (28)	1	PA_NSO QL=28 EA/28 Days
XCOPRI TAB 50/100MG TITRATION PACK (28)	1	PA_NSO QL=28 EA/28 Days
GABA MODULATORS		
<i>tiagabine 12mg tab</i>	1	
<i>tiagabine 16mg tab</i>	1	
<i>tiagabine 2mg tab</i>	1	
<i>tiagabine 4mg tab</i>	1	
<i>vigabatrin 500mg powder for oral soln</i>	1	NDS PA_NSO QL=180 EA/30 Days
<i>vigabatrin 500mg tab</i>	1	NDS PA_NSO QL=180 EA/30 Days
VIGAFYDE 100MG/ML ORAL SOLN	1	NDS PA_NSO QL=720 ML/30 Days
SUCCINIMIDES		
<i>ethosuximide 250mg cap</i>	1	
<i>ethosuximide 50mg/ml oral soln</i>	1	
<i>methsuximide 300mg cap</i>	1	
VALPROIC ACID		
<i>divalproex sodium 125mg dr cap</i>	1	
<i>divalproex sodium 125mg dr tab</i>	1	
<i>divalproex sodium 250mg dr tab</i>	1	
<i>divalproex sodium 500mg dr tab</i>	1	
<i>valproic acid 250mg cap</i>	1	
<i>valproic acid 50mg/ml oral soln</i>	1	
ANTIDEPRESSANTS		
ANTIDEPRESSANTS - MISC.		
AUVELITY 105-45MG ER TAB	1	PA_NSO QL=60 EA/30 Days
<i>bupropion 100mg sr (12hr) tab</i>	1	
<i>bupropion 100mg tab</i>	1	
<i>bupropion 150mg sr (12 hr) tab</i>	1	
<i>bupropion 200mg sr (12hr) tab</i>	1	
<i>bupropion 75mg tab</i>	1	
<i>bupropion xl 150mg (24 hr) tab</i>	1	
<i>bupropion xl 300mg (24hr) tab</i>	1	

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 15mg odt</i>	1	
<i>mirtazapine 15mg tab</i>	1	
<i>mirtazapine 30mg odt</i>	1	
<i>mirtazapine 30mg tab</i>	1	
<i>mirtazapine 45mg odt</i>	1	
<i>mirtazapine 45mg tab</i>	1	
<i>mirtazapine 7.5mg tab</i>	1	
ZURZUVAE 20MG CAP	1	NDS PA_NSO QL=28 EA/14 Days
ZURZUVAE 25MG CAP	1	NDS PA_NSO QL=28 EA/14 Days
ZURZUVAE 30MG CAP	1	NDS PA_NSO QL=14 EA/14 Days
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM 12MG/24HR PATCH	1	PA_NSO QL=30 EA/30 Days
EMSAM 6MG/24HR PATCH	1	PA_NSO QL=30 EA/30 Days
EMSAM 9MG/24HR PATCH	1	PA_NSO QL=30 EA/30 Days
MARPLAN 10MG TAB	1	QL=180 EA/30 Days
PHENELZINE 15MG TAB	1	
<i>tranylcypromine 10mg tab</i>	1	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram 10mg tab</i>	1	
<i>citalopram 20mg tab</i>	1	
<i>citalopram 2mg/ml oral soln</i>	1	QL=600 ML/30 Days
<i>citalopram 40mg tab</i>	1	
<i>escitalopram 10mg tab</i>	1	
<i>escitalopram 1mg/ml oral soln</i>	1	QL=600 ML/30 Days
<i>escitalopram 20mg tab</i>	1	
<i>escitalopram 5mg tab</i>	1	
<i>fluoxetine 10mg cap</i>	1	
<i>fluoxetine 20mg cap</i>	1	
<i>fluoxetine 40mg cap</i>	1	
<i>fluoxetine 4mg/ml oral soln</i>	1	QL=600 ML/30 Days
<i>fluoxetine 60mg tab</i>	1	
<i>fluvoxamine maleate 100mg tab</i>	1	
<i>fluvoxamine maleate 25mg tab</i>	1	
<i>fluvoxamine maleate 50mg tab</i>	1	
<i>paroxetine 10mg tab</i>	1	
PAROXETINE 10MG/5ML ORAL SUSP	1	QL=900 ML/30 Days
<i>paroxetine 12.5mg er tab</i>	1	QL=30 EA/30 Days
<i>paroxetine 20mg tab</i>	1	
<i>paroxetine 25mg er tab</i>	1	QL=60 EA/30 Days
<i>paroxetine 30mg tab</i>	1	
<i>paroxetine 37.5mg er tab</i>	1	QL=60 EA/30 Days
<i>paroxetine 40mg tab</i>	1	
<i>sertraline 100mg tab</i>	1	
<i>sertraline 20mg/ml oral soln</i>	1	QL=300 ML/30 Days
<i>sertraline 25mg tab</i>	1	

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>sertraline 50mg tab</i>	1	
SEROTONIN MODULATORS		
EXXUA 18.2MG ER TAB	1	PA_NSO QL=30 EA/30 Days
EXXUA 18.2MG TAB TITRATION PACK (32)	1	PA_NSO QL=32 EA/14 Days
EXXUA 36.3MG ER TAB	1	PA_NSO QL=30 EA/30 Days
EXXUA 54.5MG ER TAB	1	PA_NSO QL=30 EA/30 Days
EXXUA 72.6MG ER TAB	1	PA_NSO QL=30 EA/30 Days
NEFAZODONE 100MG TAB	1	
NEFAZODONE 150MG TAB	1	
NEFAZODONE 200MG TAB	1	
NEFAZODONE 250MG TAB	1	
NEFAZODONE 50MG TAB	1	
RALDESY 10MG/ML ORAL SOLN	1	PA_NSO QL=1200 ML/30 Days
<i>trazodone 100mg tab</i>	1	
<i>trazodone 150mg tab</i>	1	
<i>trazodone 50mg tab</i>	1	
TRINTELLIX 10MG TAB	1	ST_NSO QL=30 EA/30 Days
TRINTELLIX 20MG TAB	1	ST_NSO QL=30 EA/30 Days
TRINTELLIX 5MG TAB	1	ST_NSO QL=30 EA/30 Days
<i>vilazodone 10mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>vilazodone 20mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>vilazodone 40mg tab</i>	1	PA_NSO QL=30 EA/30 Days
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<i>desvenlafaxine succinate 100mg er tab</i>	1	QL=30 EA/30 Days
<i>desvenlafaxine succinate 25mg er tab</i>	1	QL=30 EA/30 Days
<i>desvenlafaxine succinate 50mg er tab</i>	1	QL=30 EA/30 Days
DRIZALMA 20MG DR SPRINKLE CAP	1	PA_NSO QL=60 EA/30 Days
DRIZALMA 30MG DR SPRINKLE CAP	1	PA_NSO QL=60 EA/30 Days
DRIZALMA 40MG DR SPRINKLE CAP	1	PA_NSO QL=60 EA/30 Days
DRIZALMA 60MG DR SPRINKLE CAP	1	PA_NSO QL=60 EA/30 Days
<i>duloxetine 20mg dr cap</i>	1	QL=60 EA/30 Days
<i>duloxetine 30mg dr cap</i>	1	QL=60 EA/30 Days
<i>duloxetine 60mg dr cap</i>	1	QL=60 EA/30 Days
FETZIMA 120MG ER CAP	1	PA_NSO QL=30 EA/30 Days
FETZIMA 20MG ER CAP	1	PA_NSO QL=30 EA/30 Days
FETZIMA 40MG ER CAP	1	PA_NSO QL=30 EA/30 Days
FETZIMA 80MG ER CAP	1	PA_NSO QL=30 EA/30 Days
FETZIMA ER CAP TITRATION PACK (28)	1	PA_NSO QL=30 EA/30 Days
<i>venlafaxine 100mg tab</i>	1	
<i>venlafaxine 150mg er cap</i>	1	
<i>venlafaxine 25mg tab</i>	1	
<i>venlafaxine 37.5mg er cap</i>	1	
<i>venlafaxine 37.5mg tab</i>	1	
<i>venlafaxine 50mg tab</i>	1	
<i>venlafaxine 75mg er cap</i>	1	

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 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>	1	
<i>clomipramine 50mg cap</i>	1	
<i>clomipramine 75mg cap</i>	1	
<i>desipramine 100mg tab</i>	1	
<i>desipramine 10mg tab</i>	1	
<i>desipramine 150mg tab</i>	1	
<i>desipramine 25mg tab</i>	1	
<i>desipramine 50mg tab</i>	1	
<i>desipramine 75mg tab</i>	1	
<i>doxepin 100mg cap</i>	1	
<i>doxepin 10mg cap</i>	1	
DOXEPIN 10MG/ML ORAL SOLN	1	
<i>doxepin 150mg cap</i>	1	
<i>doxepin 25mg cap</i>	1	
<i>doxepin 50mg cap</i>	1	
<i>doxepin 75mg cap</i>	1	
<i>imipramine 10mg tab</i>	1	
<i>imipramine 25mg tab</i>	1	
<i>imipramine 50mg tab</i>	1	
<i>nortriptyline 10mg cap</i>	1	
<i>nortriptyline 25mg cap</i>	1	
<i>nortriptyline 2mg/ml oral soln</i>	1	
<i>nortriptyline 50mg cap</i>	1	
<i>nortriptyline 75mg cap</i>	1	
<i>protriptyline 10mg tab</i>	1	
<i>protriptyline 5mg tab</i>	1	
<i>trimipramine 100mg cap</i>	1	QL=60 EA/30 Days
<i>trimipramine 25mg cap</i>	1	QL=120 EA/30 Days
<i>trimipramine 50mg cap</i>	1	QL=120 EA/30 Days
ANTIDIABETICS		
ANTIDIABETIC COMBINATIONS		
<i>glipizide/metformin 2.5-250mg tab</i>	1	QL=240 EA/30 Days
<i>glipizide/metformin 2.5-500mg tab</i>	1	QL=120 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>glipizide/metformin 5-500mg tab</i>	1	QL=120 EA/30 Days
<i>glyburide/metformin 1.25-250mg tab</i>	1	
<i>glyburide/metformin 2.5-500mg tab</i>	1	
<i>glyburide/metformin 5-500mg tab</i>	1	
GLYXAMBI 10-5MG TAB	1	QL=30 EA/30 Days
GLYXAMBI 25-5MG TAB	1	QL=30 EA/30 Days
JANUMET 50-1000MG TAB	1	QL=60 EA/30 Days
JANUMET 50-500MG TAB	1	QL=60 EA/30 Days
JANUMET XR 100-1000MG TAB	1	QL=30 EA/30 Days
JANUMET XR 50-1000MG TAB	1	QL=60 EA/30 Days
JANUMET XR 50-500MG TAB	1	QL=60 EA/30 Days
JENTADUETO 2.5-1000MG TAB	1	QL=60 EA/30 Days
JENTADUETO 2.5-500MG TAB	1	QL=60 EA/30 Days
JENTADUETO XR 2.5-1000MG TAB	1	QL=60 EA/30 Days
JENTADUETO XR 5-1000MG TAB	1	QL=30 EA/30 Days
<i>metformin/pioglitazone 150-15mg tab</i>	1	QL=90 EA/30 Days
<i>metformin/pioglitazone 850-15mg tab</i>	1	QL=90 EA/30 Days
SYNJARDY 12.5-1000MG TAB	1	QL=60 EA/30 Days
SYNJARDY 12.5-500MG TAB	1	QL=60 EA/30 Days
SYNJARDY 5-1000MG TAB	1	QL=60 EA/30 Days
SYNJARDY 5-500MG TAB	1	QL=60 EA/30 Days
SYNJARDY XR 10-1000MG TAB	1	QL=30 EA/30 Days
SYNJARDY XR 12.5-1000MG TAB	1	QL=60 EA/30 Days
SYNJARDY XR 25-1000MG TAB	1	QL=30 EA/30 Days
SYNJARDY XR 5-1000MG TAB	1	QL=60 EA/30 Days
TRIJARDY XR 10-5-1000MG TAB	1	QL=30 EA/30 Days
TRIJARDY XR 12.5-2.5-1000MG TAB	1	QL=60 EA/30 Days
TRIJARDY XR 25-5-1000MG TAB	1	QL=30 EA/30 Days
TRIJARDY XR 5-2.5-1000MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 10-1000MG TAB	1	QL=30 EA/30 Days
XIGDUO XR 10-500MG TAB	1	QL=30 EA/30 Days
XIGDUO XR 2.5-1000MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 5-1000MG TAB	1	QL=60 EA/30 Days
XIGDUO XR 5-500MG TAB	1	QL=30 EA/30 Days
DIABETIC OTHER		
<i>acarbose 100mg tab</i>	1	QL=90 EA/30 Days
<i>acarbose 25mg tab</i>	1	QL=90 EA/30 Days
<i>acarbose 50mg tab</i>	1	QL=90 EA/30 Days
BAQSIMI 3MG/DOSE NASAL POWDER	1	QL=2 EA/7 Days
<i>diazoxide 50mg/ml oral susp</i>	1	
GVOKE 0.5MG/0.1ML AUTO-INJECTOR	1	QL=.20 ML/7 Days
GVOKE 1MG/0.2ML AUTO-INJECTOR	1	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML INJ	1	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML SYRINGE	1	QL=.40 ML/7 Days
<i>metformin 1000mg 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>metformin 500mg er tab</i>	1	
<i>metformin 500mg tab</i>	1	
<i>metformin 750mg er tab</i>	1	
<i>metformin 850mg tab</i>	1	
<i>mifepristone 300mg tab</i>	1	NDS PA QL=120 EA/30 Days
<i>nateglinide 120mg tab</i>	1	QL=90 EA/30 Days
<i>nateglinide 60mg tab</i>	1	QL=90 EA/30 Days
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<i>pioglitazone 45mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	1	QL=120 EA/30 Days
<i>repaglinide 1mg tab</i>	1	QL=120 EA/30 Days
<i>repaglinide 2mg tab</i>	1	QL=240 EA/30 Days
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA 100MG TAB	1	QL=30 EA/30 Days
JANUVIA 25MG TAB	1	QL=30 EA/30 Days
JANUVIA 50MG TAB	1	QL=30 EA/30 Days
TRADJENTA 5MG TAB	1	QL=30 EA/30 Days
INCRETIN MIMETIC AGENTS		
<i>liraglutide 18mg/3ml pen inj</i>	1	PA QL=9 ML/30 Days
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
OZEMPIC 2MG/3ML PEN INJ	1	PA QL=3 ML/28 Days
OZEMPIC 4MG/3ML PEN INJ	1	PA QL=3 ML/28 Days
OZEMPIC 8MG/3ML PEN INJ	1	PA QL=3 ML/28 Days
RYBELSUS 14MG TAB	1	PA QL=30 EA/30 Days
RYBELSUS 3MG TAB	1	PA QL=30 EA/30 Days
RYBELSUS 7MG TAB	1	PA QL=30 EA/30 Days
TRULICITY 0.75MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 1.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 3MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TRULICITY 4.5MG/0.5ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
INSULIN		
FIASP 100UNIT/ML CARTRIDGE	1	INS
FIASP 100UNIT/ML INJ	1	INS PA_BvD
FIASP 100UNIT/ML PEN INJ (3ML)	1	INS
HUMALOG 100UNIT/ML CARTRIDGE	1	INS
HUMALOG 100UNIT/ML KWIKPEN (3ML)	1	INS
HUMALOG 200UNIT/ML KWIKPEN (3ML)	1	INS
HUMALOG JUNIOR 100UNIT/ML PEN INJ (3ML)	1	INS

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
HUMALOG MIX (50/50) 100UNIT/ML PEN INJ (3ML)	1	INS
HUMALOG MIX (75/25) 100UNIT/ML INJ	1	INS
HUMALOG MIX (75/25) 100UNIT/ML KWIKPEN (3ML)	1	INS
HUMULIN (70/30) 100UNIT/ML INJ	1	INS
HUMULIN (70/30) 100UNIT/ML PEN INJ (3ML)	1	INS
HUMULIN N 100UNIT/ML INJ	1	INS
HUMULIN N 100UNIT/ML PEN INJ (3ML)	1	INS
HUMULIN R 100UNIT/ML INJ	1	INS
HUMULIN R 500UNIT/ML INJ	1	INS PA_BvD
HUMULIN R 500UNIT/ML PEN INJ (3ML)	1	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML)	1	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML)	1	INS
INSULIN GLARGINE-YFGN 100UNIT/ML INJ (BIOCON)	1	INS
INSULIN GLARGINE-YFGN 100UNIT/ML PEN INJ (3ML) (BIOCON)	1	INS
INSULIN LISPRO 100UNIT/ML INJ	1	INS PA_BvD
INSULIN LISPRO 100UNIT/ML PEN INJ (3ML)	1	INS
INSULIN LISPRO JUNIOR 100UNIT/ML PEN INJ (3ML)	1	INS
INSULIN LISPRO PROTAMINE HUMAN (75/25) 100UNIT/ML PEN INJ (3ML)	1	INS
LYUMJEV 100UNIT/ML INJ	1	INS PA_BvD
LYUMJEV 100UNIT/ML PEN INJ (3ML)	1	INS
LYUMJEV 200UNIT/ML PEN INJ (3ML)	1	INS
NOVOLIN MIX (70/30) 100UNIT/ML FLEXPEN (3ML)	1	INS
NOVOLIN MIX (70/30) 100UNIT/ML INJ	1	INS
NOVOLIN N 100UNIT/ML INJ	1	INS
NOVOLIN N 100UNIT/ML PEN INJ (3ML)	1	INS
NOVOLIN R 100UNIT/ML INJ	1	INS
NOVOLIN R 100UNIT/ML PEN INJ (3ML)	1	INS
NOVOLOG 100UNIT/ML CARTRIDGE	1	INS
NOVOLOG 100UNIT/ML INJ	1	INS PA_BvD
NOVOLOG 100UNIT/ML PEN INJ (3ML)	1	INS
NOVOLOG MIX (70/30) 100UNIT/ML FLEXPEN (3ML)	1	INS
NOVOLOG MIX (70/30) 100UNIT/ML INJ	1	INS
TOUJEO 300UNIT/ML PEN INJ (1.5ML)	1	INS
TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	1	INS
TRESIBA 100UNIT/ML INJ	1	INS
TRESIBA 100UNIT/ML PEN INJ (3ML)	1	INS
TRESIBA 200UNIT/ML PEN INJ (3ML)	1	INS

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
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
DAPAGLIFLOZIN 10MG TAB	1	QL=30 EA/30 Days
DAPAGLIFLOZIN 5MG TAB	1	QL=30 EA/30 Days
FARXIGA 10MG TAB	1	QL=30 EA/30 Days
FARXIGA 5MG TAB	1	QL=30 EA/30 Days
JARDIANCE 10MG TAB	1	QL=30 EA/30 Days
JARDIANCE 25MG TAB	1	QL=30 EA/30 Days
SULFONYLUREAS		
<i>glimepiride 1mg tab</i>	1	
<i>glimepiride 2mg tab</i>	1	
<i>glimepiride 4mg tab</i>	1	
<i>glipizide 10mg er tab</i>	1	
<i>glipizide 10mg tab</i>	1	
<i>glipizide 2.5mg er tab</i>	1	
<i>glipizide 5mg er tab</i>	1	
<i>glipizide 5mg tab</i>	1	
<i>glyburide 1.25mg tab</i>	1	
<i>glyburide 2.5mg tab</i>	1	
<i>glyburide 5mg tab</i>	1	
ANTIDIARRHEALS		
ANTIDIARRHEAL AGENTS - MISC.		
<i>alosetron 0.5mg tab</i>	1	QL=60 EA/30 Days
<i>alosetron 1mg tab</i>	1	QL=60 EA/30 Days
<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	1	
<i>loperamide 2mg cap</i>	1	
XERMELO 250MG TAB	1	NDS PA QL=84 EA/28 Days
ANTIDOTES AND SPECIFIC ANTAGONISTS		
OPIOID ANTAGONISTS		
KLOXXADO 8MG/0.1ML NASAL SPRAY	1	
NALOXONE 0.4MG/ML CARTRIDGE	1	
<i>naloxone 0.4mg/ml inj</i>	1	
<i>naloxone 0.4mg/ml syringe</i>	1	
<i>naloxone 2mg/2ml syringe</i>	1	
<i>naltrexone 50mg tab</i>	1	
OPVEE 2.7MG/0.1ML NASAL SPRAY	1	
REXTOVY 4MG/0.25ML NASAL SPRAY	1	
VIVITROL 380MG INJ	1	NDS
ZURNAI 1.5MG/0.5ML AUTO-INJECTOR	1	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron 1mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>ondansetron 0.8mg/ml oral soln</i>	1	PA_BvD QL=900 ML/30 Days
<i>ondansetron 4mg odt</i>	1	PA_BvD
<i>ondansetron 4mg tab</i>	1	PA_BvD
<i>ondansetron 8mg odt</i>	1	PA_BvD

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>ondansetron 8mg tab</i>	1	PA_BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab</i>	1	
<i>meclizine 25mg tab</i>	1	
<i>scopolamine 1mg/72hr patch</i>	1	QL=10 EA/30 Days
ANTIEMETICS - MISCELLANEOUS		
<i>aprepitant 125mg cap</i>	1	PA_BvD QL=3 EA/2 Days
<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	1	PA_BvD QL=6 EA/4 Days
<i>aprepitant 40mg cap</i>	1	PA_BvD QL=3 EA/2 Days
<i>aprepitant 80mg cap</i>	1	PA_BvD QL=6 EA/4 Days
<i>dronabinol 10mg cap</i>	1	PA QL=60 EA/30 Days
<i>dronabinol 2.5mg cap</i>	1	PA QL=60 EA/30 Days
<i>dronabinol 5mg cap</i>	1	PA QL=60 EA/30 Days
ANTIFUNGALS		
ANTIFUNGALS		
AMPHOTERICIN B 50MG INJ	1	PA_BvD
<i>amphotericin b liposomal 50mg inj</i>	1	PA_BvD
<i>casprofungin acetate 50mg inj</i>	1	
<i>casprofungin acetate 70mg inj</i>	1	
CRESEMBA 186MG CAP	1	NDS PA
CRESEMBA 74.5MG CAP	1	NDS PA
<i>fluconazole 100mg tab</i>	1	
<i>fluconazole 10mg/ml oral susp</i>	1	
<i>fluconazole 150mg tab</i>	1	
<i>fluconazole 200mg tab</i>	1	
<i>fluconazole 200mg/100ml inj</i>	1	
<i>fluconazole 400mg/200ml inj</i>	1	
<i>fluconazole 40mg/ml oral susp</i>	1	
<i>fluconazole 50mg tab</i>	1	
<i>flucytosine 250mg cap</i>	1	
<i>flucytosine 500mg cap</i>	1	
<i>griseofulvin 125mg tab</i>	1	
<i>griseofulvin 250mg tab</i>	1	
<i>griseofulvin 25mg/ml oral susp</i>	1	
<i>griseofulvin 500mg tab</i>	1	
<i>itraconazole 100mg cap</i>	1	QL=120 EA/30 Days
<i>ketoconazole 200mg tab</i>	1	
<i>micafungin sodium 100mg inj</i>	1	
<i>micafungin sodium 50mg inj</i>	1	
<i>nystatin 500000unit tab</i>	1	
<i>posaconazole 100mg dr tab</i>	1	PA QL=96 EA/30 Days
<i>posaconazole 40mg/ml oral susp</i>	1	PA QL=630 ML/30 Days
<i>terbinafine 250mg tab</i>	1	QL=30 EA/30 Days
<i>voriconazole 200mg inj</i>	1	PA
<i>voriconazole 200mg tab</i>	1	PA QL=120 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>voriconazole 40mg/ml oral susp</i>	1	PA QL=400 ML/30 Days
<i>voriconazole 50mg tab</i>	1	PA QL=480 EA/30 Days
ANTIHYPERLIPIDEMICS		
ANTIHYPERLIPIDEMICS - MISC.		
<i>ezetimibe 10mg tab</i>	1	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-10mg tab</i>	1	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-20mg tab</i>	1	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-40mg tab</i>	1	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-80mg tab</i>	1	QL=30 EA/30 Days
<i>icosapent ethyl 1000mg cap</i>	1	QL=120 EA/30 Days
<i>icosapent ethyl 500mg cap</i>	1	QL=120 EA/30 Days
NEXLETOL 180MG TAB	1	PA QL=30 EA/30 Days
NEXLIZET 180-10MG TAB	1	PA QL=30 EA/30 Days
<i>niacin 1000mg er tab</i>	1	QL=60 EA/30 Days
<i>niacin 500mg er tab</i>	1	QL=60 EA/30 Days
<i>niacin 750mg er tab</i>	1	QL=60 EA/30 Days
<i>omega-3 acid ethyl esters (usp) 1gm cap</i>	1	QL=120 EA/30 Days
REPATHA 140MG/ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
REPATHA 140MG/ML SYRINGE	1	PA QL=2 ML/28 Days
BILE ACID SEQUESTRANTS		
<i>cholestyramine resin (sugar-free) 4gm powder for oral susp</i>	1	
<i>cholestyramine resin 4gm powder for oral susp</i>	1	
<i>colesevelam 625mg tab</i>	1	
<i>colestipol 1gm tab</i>	1	
<i>colestipol 5000mg granules 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 43mg cap</i>	1	
<i>fenofibrate 48mg tab</i>	1	
<i>fenofibrate 54mg tab</i>	1	
<i>fenofibrate 67mg cap</i>	1	
<i>fenofibric acid 135mg dr cap</i>	1	
<i>fenofibric acid 45mg dr cap</i>	1	
<i>gemfibrozil 600mg tab</i>	1	
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin 10mg tab</i>	1	
<i>atorvastatin 20mg tab</i>	1	
<i>atorvastatin 40mg tab</i>	1	
<i>atorvastatin 80mg tab</i>	1	
<i>lovastatin 10mg tab</i>	1	
<i>lovastatin 20mg tab</i>	1	

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>lovastatin 40mg tab</i>	1	
<i>pravastatin sodium 10mg tab</i>	1	
<i>pravastatin sodium 20mg tab</i>	1	
<i>pravastatin sodium 40mg tab</i>	1	
<i>pravastatin sodium 80mg tab</i>	1	
<i>rosuvastatin calcium 10mg tab</i>	1	
<i>rosuvastatin calcium 20mg tab</i>	1	
<i>rosuvastatin calcium 40mg tab</i>	1	
<i>rosuvastatin calcium 5mg tab</i>	1	
<i>simvastatin 10mg tab</i>	1	
<i>simvastatin 20mg tab</i>	1	
<i>simvastatin 40mg tab</i>	1	
<i>simvastatin 5mg tab</i>	1	
<i>simvastatin 80mg tab</i>	1	
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril 10mg tab</i>	1	
<i>benazepril 20mg tab</i>	1	
<i>benazepril 40mg tab</i>	1	
<i>benazepril 5mg tab</i>	1	
<i>captopril 100mg tab</i>	1	QL=120 EA/30 Days
<i>captopril 12.5mg tab</i>	1	QL=90 EA/30 Days
<i>captopril 25mg tab</i>	1	QL=90 EA/30 Days
<i>captopril 50mg tab</i>	1	QL=90 EA/30 Days
<i>enalapril maleate 10mg tab</i>	1	
<i>enalapril maleate 2.5mg tab</i>	1	
<i>enalapril maleate 20mg tab</i>	1	
<i>enalapril maleate 5mg tab</i>	1	
<i>fosinopril sodium 10mg tab</i>	1	
<i>fosinopril sodium 20mg tab</i>	1	
<i>fosinopril sodium 40mg tab</i>	1	
<i>lisinopril 10mg tab</i>	1	
<i>lisinopril 2.5mg tab</i>	1	
<i>lisinopril 20mg tab</i>	1	
<i>lisinopril 30mg tab</i>	1	
<i>lisinopril 40mg tab</i>	1	
<i>lisinopril 5mg tab</i>	1	
<i>moexipril 15mg tab</i>	1	
<i>moexipril 7.5mg tab</i>	1	
PERINDOPRIL ERBUMINE 2MG TAB	1	
<i>perindopril erbumine 4mg tab</i>	1	
PERINDOPRIL ERBUMINE 8MG TAB	1	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<i>quinapril 40mg tab</i>	1	

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>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	1	
<i>ramipril 10mg cap</i>	1	
<i>ramipril 2.5mg cap</i>	1	
<i>ramipril 5mg cap</i>	1	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil 16mg tab</i>	1	QL=60 EA/30 Days
<i>candesartan cilexetil 32mg tab</i>	1	QL=30 EA/30 Days
<i>candesartan cilexetil 4mg tab</i>	1	QL=60 EA/30 Days
<i>candesartan cilexetil 8mg tab</i>	1	QL=60 EA/30 Days
<i>irbesartan 150mg tab</i>	1	
<i>irbesartan 300mg tab</i>	1	
<i>irbesartan 75mg tab</i>	1	
<i>losartan potassium 100mg tab</i>	1	
<i>losartan potassium 25mg tab</i>	1	
<i>losartan potassium 50mg tab</i>	1	
<i>olmesartan medoxomil 20mg tab</i>	1	
<i>olmesartan medoxomil 40mg tab</i>	1	
<i>olmesartan medoxomil 5mg tab</i>	1	
<i>telmisartan 20mg tab</i>	1	QL=30 EA/30 Days
<i>telmisartan 40mg tab</i>	1	QL=30 EA/30 Days
<i>telmisartan 80mg tab</i>	1	QL=30 EA/30 Days
<i>valsartan 160mg tab</i>	1	
<i>valsartan 320mg tab</i>	1	
<i>valsartan 40mg tab</i>	1	
<i>valsartan 80mg tab</i>	1	
ANTIADRENERGIC ANTIHYPERTENSIVES		
<i>clonidine 0.1mg tab</i>	1	
<i>clonidine 0.1mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>clonidine 0.2mg tab</i>	1	
<i>clonidine 0.2mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>clonidine 0.3mg tab</i>	1	
<i>clonidine 0.3mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>doxazosin 1mg tab</i>	1	
<i>doxazosin 2mg tab</i>	1	
<i>doxazosin 4mg tab</i>	1	
<i>doxazosin 8mg tab</i>	1	
<i>guanfacine 1mg tab</i>	1	
<i>guanfacine 2mg tab</i>	1	
<i>prazosin 1mg cap</i>	1	
<i>prazosin 2mg cap</i>	1	
<i>prazosin 5mg cap</i>	1	

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>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/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/valsartan 10-160mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/valsartan 10-320mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/valsartan 5-160mg tab</i>	1	QL=30 EA/30 Days
<i>amlodipine/valsartan 5-320mg tab</i>	1	QL=30 EA/30 Days
<i>atenolol/chlorthalidone 100-25mg tab</i>	1	
<i>atenolol/chlorthalidone 50-25mg tab</i>	1	
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	1	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	1	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	1	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	1	QL=30 EA/30 Days
<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	1	
<i>candesartan cilexetil/hydrochlorothiazide 16-12.5mg tab</i>	1	QL=30 EA/30 Days
<i>candesartan cilexetil/hydrochlorothiazide 32-12.5mg tab</i>	1	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>candesartan cilexetil/hydrochlorothiazide 32-25mg tab</i>	1	QL=30 EA/30 Days
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	1	QL=60 EA/30 Days
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	1	QL=120 EA/30 Days
<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	1	QL=60 EA/30 Days
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	1	
<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	1	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/telmisartan 12.5-40mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/telmisartan 12.5-80mg tab</i>	1	QL=60 EA/30 Days
<i>hydrochlorothiazide/telmisartan 25-80mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	1	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	1	QL=30 EA/30 Days
ANTIHYPERTENSIVES - MISC.		
<i>aliskiren 150mg tab</i>	1	QL=30 EA/30 Days
<i>aliskiren 300mg tab</i>	1	QL=30 EA/30 Days
<i>eplerenone 25mg tab</i>	1	
<i>eplerenone 50mg tab</i>	1	
<i>metyrosine 250mg cap</i>	1	NDS PA
VASODILATORS		
<i>hydralazine 100mg tab</i>	1	
<i>hydralazine 10mg tab</i>	1	
<i>hydralazine 25mg tab</i>	1	
<i>hydralazine 50mg tab</i>	1	
<i>minoxidil 10mg tab</i>	1	

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>minoxidil 2.5mg tab</i>	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
<i>atovaquone 750mg/5ml oral susp</i>	1	QL=300 ML/30 Days
<i>azithromycin 20mg/ml oral susp</i>	1	
<i>azithromycin 250mg pack (6)</i>	1	
<i>azithromycin 250mg tab</i>	1	
<i>azithromycin 40mg/ml oral susp</i>	1	
<i>azithromycin 500mg inj</i>	1	
<i>azithromycin 500mg tab</i>	1	
<i>azithromycin 500mg tab pack (3)</i>	1	
<i>azithromycin 600mg tab</i>	1	
<i>aztreonam 1gm inj</i>	1	
<i>aztreonam 2gm inj</i>	1	
<i>cefepime 1000mg inj</i>	1	
<i>cefepime 2000mg inj</i>	1	
<i>ceftaroline fosamil 400mg inj</i>	1	NDS
<i>ceftaroline fosamil 600mg inj</i>	1	NDS
CILASTATIN/IMIPENEM 250-250MG INJ	1	
<i>cilastatin/imipenem 500-500mg inj</i>	1	
<i>clarithromycin 250mg tab</i>	1	
CLARITHROMYCIN 25MG/ML ORAL SUSP	1	
<i>clarithromycin 500mg tab</i>	1	
CLARITHROMYCIN 50MG/ML ORAL SUSP	1	
<i>clindamycin 150mg cap</i>	1	
<i>clindamycin 300mg cap</i>	1	
<i>clindamycin 300mg/2ml inj</i>	1	
<i>clindamycin 300mg/50ml inj</i>	1	
<i>clindamycin 600mg/4ml inj</i>	1	
<i>clindamycin 600mg/50ml inj</i>	1	
<i>clindamycin 75mg cap</i>	1	
<i>clindamycin 75mg/5ml oral soln</i>	1	
<i>clindamycin 900mg/50ml inj</i>	1	
<i>clindamycin 900mg/6ml inj</i>	1	
<i>colistin 75mg/ml inj</i>	1	
<i>daptomycin 500mg inj</i>	1	
DIFICID 200MG TAB	1	PA QL=20 EA/10 Days
DIFICID 40MG/ML ORAL SUSP	1	PA QL=136 ML/10 Days
<i>ertapenem 1gm inj</i>	1	
<i>erythromycin 250mg dr tab</i>	1	
<i>erythromycin 250mg tab</i>	1	
<i>erythromycin 333mg dr tab</i>	1	
<i>erythromycin 500mg dr tab</i>	1	
<i>erythromycin 500mg tab</i>	1	
<i>fidaxomicin 200mg tab</i>	1	PA QL=20 EA/10 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>fosfomycin 3gm powder for oral soln</i>	1	
IMPAVIDO 50MG CAP	1	NDS PA QL=84 EA/28 Days
<i>linezolid 100mg/5ml oral susp</i>	1	QL=1800 ML/30 Days
<i>linezolid 600mg tab</i>	1	QL=60 EA/30 Days
<i>linezolid 600mg/300ml inj</i>	1	
<i>meropenem 1gm inj</i>	1	
<i>meropenem 500mg inj</i>	1	
<i>methenamine hippurate 1gm tab</i>	1	
<i>metronidazole 250mg tab</i>	1	
<i>metronidazole 500mg tab</i>	1	
<i>metronidazole 5mg/ml inj</i>	1	
<i>nitazoxanide 500mg tab</i>	1	NDS PA QL=6 EA/3 Days
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	1	
<i>nitrofurantoin macrocrystals 100mg cap</i>	1	
<i>nitrofurantoin macrocrystals 50mg cap</i>	1	
<i>pentamidine isethionate 300mg inj</i>	1	
<i>pentamidine isethionate 300mg/6ml inh soln</i>	1	PA_BvD QL=1 EA/28 Days
<i>tigecycline 50mg inj</i>	1	
<i>tinidazole 250mg tab</i>	1	
<i>tinidazole 500mg tab</i>	1	
<i>trimethoprim 100mg tab</i>	1	
<i>vancomycin 100mg/ml inj</i>	1	
<i>vancomycin 125mg cap</i>	1	QL=120 EA/30 Days
<i>vancomycin 1gm inj</i>	1	
<i>vancomycin 250mg cap</i>	1	QL=120 EA/30 Days
<i>vancomycin 500mg inj</i>	1	
<i>vancomycin 750mg inj</i>	1	
XIFAXAN 550MG TAB	1	PA QL=60 EA/30 Days
ANTIMALARIALS		
ANTIMALARIALS		
<i>atovaquone/proguanil 250-100mg tab</i>	1	
<i>atovaquone/proguanil 62.5-25mg tab</i>	1	
CHLOROQUINE PHOSPHATE 250MG TAB	1	
<i>chloroquine phosphate 500mg tab</i>	1	
COARTEM 20-120MG TAB	1	QL=24 EA/3 Days
<i>hydroxychloroquine sulfate 200mg tab</i>	1	QL=90 EA/30 Days
<i>mefloquine 250mg tab</i>	1	
PRIMAQUINE PHOSPHATE 26.3MG TAB	1	
<i>pyrimethamine 25mg tab</i>	1	NDS PA QL=90 EA/30 Days
<i>quinine sulfate 324mg cap</i>	1	PA QL=42 EA/7 Days
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>dapsone 100mg tab</i>	1	
<i>dapsone 25mg tab</i>	1	
<i>ethambutol 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>ethambutol 400mg tab</i>	1	
<i>isoniazid 100mg tab</i>	1	
<i>isoniazid 10mg/ml oral soln</i>	1	
<i>isoniazid 300mg tab</i>	1	
PRIFTIN 150MG TAB	1	
<i>pyrazinamide 500mg tab</i>	1	
<i>rifabutin 150mg cap</i>	1	
<i>rifampin 150mg cap</i>	1	
<i>rifampin 300mg cap</i>	1	
<i>rifampin 600mg inj</i>	1	
SIRTURO 100MG TAB	1	NDS PA
SIRTURO 20MG TAB	1	NDS PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
<i>cyclophosphamide 25mg cap</i>	1	PA_BvD
CYCLOPHOSPHAMIDE 25MG TAB	1	PA_BvD
<i>cyclophosphamide 50mg cap</i>	1	PA_BvD
CYCLOPHOSPHAMIDE 50MG TAB	1	PA_BvD
LEUKERAN 2MG TAB	1	NDS
<i>lomustine 100mg cap</i>	1	
<i>lomustine 10mg cap</i>	1	
<i>lomustine 40mg cap</i>	1	
ANTIMETABOLITES		
<i>mercaptopurine 20mg/ml susp</i>	1	PA_NSO QL=300 ML/30 Days
<i>mercaptopurine 50mg tab</i>	1	
<i>methotrexate 2.5mg tab</i>	1	
METHOTREXATE 25MG/ML INJ	1	
<i>methotrexate 50mg/2ml inj</i>	1	
ONUREG 200MG TAB	1	NDS PA_NSO QL=14 EA/28 Days
ONUREG 300MG TAB	1	NDS PA_NSO QL=14 EA/28 Days
TABLOID 40MG TAB	1	NDS
XATMEP 2.5MG/ML ORAL SOLN	1	PA_BvD
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1MG CAP	1	NDS PA_NSO QL=84 EA/28 Days
FRUZAQLA 5MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
INLYTA 1MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
INLYTA 5MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
LENVIMA 10MG DAILY DOSE PACK (30)	1	NDS PA_NSO QL=30 EA/30 Days
LENVIMA 12MG DAILY DOSE PACK (90)	1	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 14MG DAILY DOSE PACK (60)	1	NDS PA_NSO QL=60 EA/30 Days
LENVIMA 18MG DAILY DOSE PACK (90)	1	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 20MG DAILY DOSE PACK (60)	1	NDS PA_NSO QL=60 EA/30 Days
LENVIMA 24MG DAILY DOSE PACK (90)	1	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 4MG DAILY DOSE PACK (30)	1	NDS PA_NSO QL=30 EA/30 Days
LENVIMA 8MG DAILY DOSE PACK (60)	1	NDS PA_NSO QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>erlotinib 150mg tab</i>	1	PA_NSO QL=30 EA/30 Days
<i>erlotinib 25mg tab</i>	1	PA_NSO QL=90 EA/30 Days
<i>gefitinib 250mg tab</i>	1	NDS PA_NSO QL=60 EA/30 Days
GILOTRIF 20MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
GILOTRIF 30MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
GILOTRIF 40MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
LAZCLUZE 240MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
LAZCLUZE 80MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
TAGRISSE 40MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
TAGRISSE 80MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 15MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 30MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
VIZIMPRO 45MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
DAURISMO 25MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ERIVEDGE 150MG CAP	1	NDS PA_NSO QL=28 EA/28 Days
ODOMZO 200MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	1	QL=120 EA/30 Days
<i>abirtega 250mg tab</i>	1	QL=120 EA/30 Days
AKEEGA 500-100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
AKEEGA 500-50MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
<i>anastrozole 1mg tab</i>	1	QL=30 EA/30 Days
<i>bicalutamide 50mg tab</i>	1	QL=30 EA/30 Days
ELIGARD 22.5MG SYRINGE	1	QL=1 EA/84 Days
ELIGARD 30MG SYRINGE	1	QL=1 EA/112 Days
ELIGARD 45MG SYRINGE	1	QL=1 EA/168 Days
ELIGARD 7.5MG SYRINGE	1	QL=1 EA/28 Days
ERLEADA 240MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ERLEADA 60MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
EULEXIN 125MG CAP	1	NDS QL=180 EA/30 Days
<i>exemestane 25mg tab</i>	1	QL=60 EA/30 Days
FIRMAGON 120MG INJ	1	PA_NSO QL=4 EA/365 Days
FIRMAGON 80MG INJ	1	PA_NSO QL=1 EA/28 Days
INLURIYO 200MG TAB	1	NDS PA_NSO QL=84 EA/28 Days
<i>letrozole 2.5mg tab</i>	1	QL=30 EA/30 Days
LUPRON 11.25MG SYRINGE (3 MONTH)	1	QL=1 EA/84 Days
LUPRON 3.75MG SYRINGE (1 MONTH)	1	NDS QL=1 EA/28 Days
LYSODREN 500MG TAB	1	NDS
<i>megestrol acetate 20mg tab</i>	1	PA_NSO
<i>megestrol acetate 40mg tab</i>	1	PA_NSO
<i>megestrol acetate 40mg/ml oral susp</i>	1	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
<i>nilutamide 150mg tab</i>	1	NDS QL=60 EA/30 Days
NUBEQA 300MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
ORGOVYX 120MG TAB	1	NDS PA_NSO QL=30 EA/28 Days
ORSERDU 345MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ORSERDU 86MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
SOLTAMOX 10MG/5ML ORAL SOLN	1	PA_NSO QL=600 ML/30 Days
<i>tamoxifen 10mg tab</i>	1	
<i>tamoxifen 20mg tab</i>	1	
<i>toremifene 60mg tab</i>	1	QL=30 EA/30 Days
TRELSTAR 11.25MG INJ	1	QL=1 EA/84 Days
TRELSTAR 22.5MG INJ	1	QL=1 EA/168 Days
TRELSTAR 3.75MG INJ	1	QL=1 EA/28 Days
XTANDI 40MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
XTANDI 40MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
XTANDI 80MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ANTINEOPLASTIC COMBINATIONS		
AVMAPKI/FAKZYNJA CO-PACK (66)	1	NDS PA_NSO QL=66 EA/28 Days
INQOVI 35-100MG TAB PACK (5)	1	NDS PA_NSO QL=5 EA/28 Days
KISQALI/FEMARA 400 CO-PACK (70)	1	NDS PA_NSO QL=70 EA/28 Days
KISQALI/FEMARA 600 CO-PACK (91)	1	NDS PA_NSO QL=91 EA/28 Days
LONSURF 6.14-15MG TAB	1	NDS PA_NSO QL=100 EA/28 Days
LONSURF 8.19-20MG TAB	1	NDS PA_NSO QL=80 EA/28 Days
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA 150MG CAP	1	NDS PA_NSO QL=240 EA/30 Days
ALUNBRIG 180MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ALUNBRIG 30MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
ALUNBRIG 90MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ALUNBRIG TAB INITIATION PACK (30)	1	NDS PA_NSO QL=30 EA/30 Days
AUGTYRO 160MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
AUGTYRO 40MG CAP	1	NDS PA_NSO QL=240 EA/30 Days
BALVERSA 3MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
BALVERSA 4MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
BALVERSA 5MG TAB	1	NDS PA_NSO QL=28 EA/28 Days
BOSULIF 100MG CAP	1	NDS PA_NSO QL=180 EA/30 Days
BOSULIF 100MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
BOSULIF 400MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
BOSULIF 500MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
BOSULIF 50MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
BRAFTOVI 75MG CAP	1	NDS PA_NSO QL=180 EA/30 Days
BRUKINSA 160MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
CABOMETYX 20MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
CABOMETYX 40MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
CABOMETYX 60MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
CALQUENCE 100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
CAPRELSA 100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CAPRELSA 300MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
COMETRIQ CAP 100MG DAILY DOSE PACK (56)	1	NDS PA_NSO QL=56 EA/28 Days
COMETRIQ CAP 140MG DAILY DOSE PACK (112)	1	NDS PA_NSO QL=112 EA/28 Days
COMETRIQ CAP 60MG DAILY DOSE PACK (84)	1	NDS PA_NSO QL=84 EA/28 Days
COPIKTRA 15MG CAP	1	NDS PA_NSO QL=56 EA/28 Days
COPIKTRA 25MG CAP	1	NDS PA_NSO QL=56 EA/28 Days
COTELLIC 20MG TAB	1	NDS PA_NSO QL=63 EA/28 Days
<i>dasatinib 100mg tab</i>	1	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 140mg tab</i>	1	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 20mg tab</i>	1	NDS PA_NSO QL=90 EA/30 Days
<i>dasatinib 50mg tab</i>	1	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 70mg tab</i>	1	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 80mg tab</i>	1	NDS PA_NSO QL=30 EA/30 Days
ENSACOVE 100MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
ENSACOVE 25MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
<i>everolimus 10mg tab</i>	1	NDS PA_NSO QL=30 EA/30 Days
<i>everolimus 2.5mg tab</i>	1	NDS PA_NSO QL=30 EA/30 Days
<i>everolimus 2mg tab for oral susp</i>	1	NDS PA_NSO QL=150 EA/30 Days
<i>everolimus 3mg tab for oral susp</i>	1	NDS PA_NSO QL=90 EA/30 Days
<i>everolimus 5mg tab</i>	1	NDS PA_NSO QL=30 EA/30 Days
<i>everolimus 5mg tab for oral susp</i>	1	NDS PA_NSO QL=60 EA/30 Days
<i>everolimus 7.5mg tab</i>	1	NDS PA_NSO QL=30 EA/30 Days
FOTIVDA 0.89MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
FOTIVDA 1.34MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
GAVRETO 100MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
GOMEKLI 1MG CAP	1	NDS PA_NSO QL=42 EA/28 Days
GOMEKLI 1MG TAB FOR ORAL SUSP	1	NDS PA_NSO QL=168 EA/28 Days
GOMEKLI 2MG CAP	1	NDS PA_NSO QL=84 EA/28 Days
HYRNUO 10MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
IBRANCE 100MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 100MG TAB	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 125MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 125MG TAB	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 75MG CAP	1	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 75MG TAB	1	NDS PA_NSO QL=21 EA/28 Days
IBTROZI 200MG CAP	1	NDS PA_NSO QL=90 EA/30 Days
ICLUSIG 10MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ICLUSIG 15MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ICLUSIG 30MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ICLUSIG 45MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
IDHIFA 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
IDHIFA 50MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
<i>imatinib 100mg tab</i>	1	QL=90 EA/30 Days
<i>imatinib 400mg tab</i>	1	QL=60 EA/30 Days
IMBRUVICA 140MG CAP	1	NDS PA_NSO QL=90 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
IMBRUVICA 140MG TAB	1	NDS PA_NSO QL=28 EA/28 Days
IMBRUVICA 280MG TAB	1	NDS PA_NSO QL=28 EA/28 Days
IMBRUVICA 420MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
IMBRUVICA 70MG CAP	1	NDS PA_NSO QL=28 EA/28 Days
IMBRUVICA 70MG/ML ORAL SUSP	1	NDS PA_NSO QL=216 ML/27 Days
IMKELDI 80MG/ML ORAL SOLN	1	NDS PA_NSO QL=280 ML/28 Days
INREBIC 100MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
ITOVEBI 3MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
ITOVEBI 9MG TAB	1	NDS PA_NSO QL=28 EA/28 Days
JAKAFI 10MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
JAKAFI 15MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
JAKAFI 20MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
JAKAFI 25MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
JAKAFI 5MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
JAYPIRCA 100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
JAYPIRCA 50MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
KISQALI TAB 200MG DAILY DOSE PACK (21)	1	NDS PA_NSO QL=21 EA/28 Days
KISQALI TAB 400MG DAILY DOSE PACK (42)	1	NDS PA_NSO QL=42 EA/28 Days
KISQALI TAB 600MG DAILY DOSE PACK (63)	1	NDS PA_NSO QL=63 EA/28 Days
KOSELUGO 10MG CAP	1	NDS PA_NSO QL=240 EA/30 Days
KOSELUGO 25MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
KOSELUGO 5MG SPRINKLE CAP	1	NDS PA_NSO QL=600 EA/30 Days
KOSELUGO 7.5MG SPRINKLE CAP	1	NDS PA_NSO QL=360 EA/30 Days
KRAZATI 200MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
<i>lapatinib 250mg tab</i>	1	NDS PA_NSO QL=180 EA/30 Days
LORBRENA 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
LORBRENA 25MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
LUMAKRAS 120MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
LUMAKRAS 240MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
LUMAKRAS 320MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
LYNPARZA 100MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
LYNPARZA 150MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
LYTGOBI TAB 12MG DAILEY DOSE PACK (21)	1	NDS PA_NSO QL=84 EA/28 Days
LYTGOBI TAB 16MG DAILEY DOSE PACK (28)	1	NDS PA_NSO QL=112 EA/28 Days
LYTGOBI TAB 20MG DAILEY DOSE PACK (35)	1	NDS PA_NSO QL=140 EA/28 Days
MEKINIST 0.05MG/ML ORAL SOLN	1	NDS PA_NSO QL=1260 ML/30 Days
MEKINIST 0.5MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
MEKINIST 2MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
MEKTOVI 15MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
NERLYNX 40MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
<i>nilotinib 150mg cap</i>	1	NDS PA_NSO QL=112 EA/28 Days
<i>nilotinib 200mg cap</i>	1	NDS PA_NSO QL=112 EA/28 Days
<i>nilotinib 50mg cap</i>	1	NDS PA_NSO QL=120 EA/30 Days
NINLARO 2.3MG CAP	1	NDS PA_NSO QL=3 EA/28 Days
NINLARO 3MG CAP	1	NDS PA_NSO QL=3 EA/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
NINLARO 4MG CAP	1	NDS PA_NSO QL=3 EA/28 Days
OGSIVEO 100MG TAB 7-DAY PACK (14)	1	NDS PA_NSO QL=56 EA/28 Days
OGSIVEO 150MG TAB 7-DAY PACK (14)	1	NDS PA_NSO QL=56 EA/28 Days
OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	1	NDS PA_NSO QL=16 EA/28 Days
OJEMDA 100MG TAB PACK (500MG ONCE WEEKLY) (20)	1	NDS PA_NSO QL=20 EA/28 Days
OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	1	NDS PA_NSO QL=24 EA/28 Days
OJEMDA 25MG/ML POWDER FOR ORAL SUSP	1	NDS PA_NSO QL=96 ML/28 Days
OJJAARA 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
OJJAARA 150MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
OJJAARA 200MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
<i>pazopanib 200mg tab</i>	1	NDS PA_NSO QL=120 EA/30 Days
PEMAZYRE 13.5MG TAB	1	NDS PA_NSO QL=28 EA/28 Days
PEMAZYRE 4.5MG TAB	1	NDS PA_NSO QL=28 EA/28 Days
PEMAZYRE 9MG TAB	1	NDS PA_NSO QL=28 EA/28 Days
PIQRAY TAB 200MG DAILY DOSE PACK (28)	1	NDS PA_NSO QL=28 EA/28 Days
PIQRAY TAB 250MG DAILY DOSE PACK (56)	1	NDS PA_NSO QL=56 EA/28 Days
PIQRAY TAB 300MG DAILY DOSE PACK (56)	1	NDS PA_NSO QL=56 EA/28 Days
QINLOCK 50MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
RETEVMO 120MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
RETEVMO 160MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
RETEVMO 40MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
RETEVMO 80MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
REZLIDHIA 150MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
ROMVIMZA 14MG CAP	1	NDS PA_NSO QL=8 EA/28 Days
ROMVIMZA 20MG CAP	1	NDS PA_NSO QL=8 EA/28 Days
ROMVIMZA 30MG CAP	1	NDS PA_NSO QL=8 EA/28 Days
ROZLYTREK 100MG CAP	1	NDS PA_NSO QL=150 EA/30 Days
ROZLYTREK 200MG CAP	1	NDS PA_NSO QL=90 EA/30 Days
ROZLYTREK 50MG ORAL PELLETT	1	NDS PA_NSO QL=336 EA/28 Days
RUBRACA 200MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
RUBRACA 250MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
RUBRACA 300MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
RYDAPT 25MG CAP	1	NDS PA_NSO QL=224 EA/28 Days
SCEMBLIX 100MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
SCEMBLIX 20MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
SCEMBLIX 40MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
<i>sorafenib 200mg tab</i>	1	NDS PA_NSO QL=120 EA/30 Days
STIVARGA 40MG TAB	1	NDS PA_NSO QL=84 EA/28 Days
<i>sunitinib 12.5mg cap</i>	1	NDS PA_NSO QL=28 EA/28 Days
<i>sunitinib 25mg cap</i>	1	NDS PA_NSO QL=28 EA/28 Days
<i>sunitinib 37.5mg cap</i>	1	NDS PA_NSO QL=28 EA/28 Days
<i>sunitinib 50mg cap</i>	1	NDS PA_NSO QL=28 EA/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
TABRECTA 150MG TAB	1	NDS PA_NSO QL=112 EA/28 Days
TABRECTA 200MG TAB	1	NDS PA_NSO QL=112 EA/28 Days
TAFINLAR 10MG TAB FOR ORAL SUSP	1	NDS PA_NSO QL=840 EA/28 Days
TAFINLAR 50MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
TAFINLAR 75MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
TALZENNA 0.1MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.25MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.35MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.5MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.75MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 1MG CAP	1	NDS PA_NSO QL=30 EA/30 Days
TAZVERIK 200MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
TEPMETKO 225MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
TIBSOVO 250MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
TRUQAP 160MG TAB	1	NDS PA_NSO QL=64 EA/28 Days
TRUQAP 200MG TAB	1	NDS PA_NSO QL=64 EA/28 Days
TURALIO 125MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
VANFLYTA 17.7MG TAB	1	NDS PA_NSO QL=28 EA/28 Days
VANFLYTA 26.5MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 100MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 150MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 200MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 50MG TAB	1	NDS PA_NSO QL=56 EA/28 Days
VITRAKVI 100MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
VITRAKVI 20MG/ML ORAL SOLN	1	NDS PA_NSO QL=300 ML/30 Days
VITRAKVI 25MG CAP	1	NDS PA_NSO QL=180 EA/30 Days
VONJO 100MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
VORANIGO 10MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
VORANIGO 40MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
XALKORI 150MG ORAL PELLETT	1	NDS PA_NSO QL=180 EA/30 Days
XALKORI 200MG CAP	1	NDS PA_NSO QL=60 EA/30 Days
XALKORI 20MG ORAL PELLETT	1	NDS PA_NSO QL=120 EA/30 Days
XALKORI 250MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
XALKORI 50MG ORAL PELLETT	1	NDS PA_NSO QL=120 EA/30 Days
XOSPATA 40MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
ZEJULA 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ZEJULA 200MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ZEJULA 300MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
ZELBORAF 240MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
ZOLINZA 100MG CAP	1	NDS PA_NSO QL=120 EA/30 Days
ZYDELIG 100MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ZYDELIG 150MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
ZYKADIA 150MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000UNIT/0.5ML INJ	1	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
AYVAKIT 100MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 200MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 25MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 300MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 50MG TAB	1	NDS PA_NSO QL=30 EA/30 Days
BESREMI 500MCG/ML SYRINGE	1	NDS PA_NSO QL=2 ML/28 Days
<i>bexarotene 75mg cap</i>	1	NDS PA_NSO QL=300 EA/30 Days
DROXIA 200MG CAP	1	
DROXIA 300MG CAP	1	
DROXIA 400MG CAP	1	
HERNEXEOS 60MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
<i>hydroxyurea 500mg cap</i>	1	
MATULANE 50MG CAP	1	NDS
MODEYSO 125MG CAP	1	NDS PA_NSO QL=20 EA/28 Days
<i>pomalidomide 1mg cap</i>	1	NDS PA_NSO QL=21 EA/28 Days
<i>pomalidomide 2mg cap</i>	1	NDS PA_NSO QL=21 EA/28 Days
<i>pomalidomide 3mg cap</i>	1	NDS PA_NSO QL=21 EA/28 Days
<i>pomalidomide 4mg cap</i>	1	NDS PA_NSO QL=21 EA/28 Days
REVUFORJ 110MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
REVUFORJ 160MG TAB	1	NDS PA_NSO QL=60 EA/30 Days
REVUFORJ 25MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
<i>tretinoin 10mg cap</i>	1	
TUKYSA 150MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
TUKYSA 50MG TAB	1	NDS PA_NSO QL=120 EA/30 Days
VENCLEXTA 100MG TAB	1	NDS PA_NSO QL=180 EA/30 Days
VENCLEXTA 10MG TAB	1	PA_NSO QL=60 EA/30 Days
VENCLEXTA 50MG TAB	1	PA_NSO QL=30 EA/30 Days
VENCLEXTA TAB STARTER PACK (42)	1	NDS PA_NSO QL=42 EA/28 Days
WELIREG 40MG TAB	1	NDS PA_NSO QL=90 EA/30 Days
XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	1	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 40MG ONCE WEEKLY CARTON (16)	1	NDS PA_NSO QL=16 EA/28 Days
XPOVIO TAB 40MG ONCE WEEKLY CARTON (4)	1	NDS PA_NSO QL=4 EA/28 Days
XPOVIO TAB 40MG TWICE WEEKLY CARTON (8)	1	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 60MG ONCE WEEKLY CARTON (4)	1	NDS PA_NSO QL=4 EA/28 Days
XPOVIO TAB 60MG TWICE WEEKLY CARTON (24)	1	NDS PA_NSO QL=24 EA/28 Days
XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	1	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	1	NDS PA_NSO QL=32 EA/28 Days
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
IWILFIN 192MG TAB	1	NDS PA_NSO QL=240 EA/30 Days
<i>leucovorin 10mg tab</i>	1	
<i>leucovorin 15mg tab</i>	1	
<i>leucovorin 25mg tab</i>	1	
<i>leucovorin 5mg tab</i>	1	
<i>mesna 400mg tab</i>	1	
ANTIPARKINSON AND RELATED THERAPY AGENTS		

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 ADJUNCTIVE THERAPY		
<i>carbidopa 25mg tab</i>	1	
<i>entacapone 200mg tab</i>	1	QL=300 EA/30 Days
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate 0.5mg tab</i>	1	
<i>benztropine mesylate 1mg tab</i>	1	
<i>benztropine mesylate 2mg tab</i>	1	
<i>trihexyphenidyl 2mg tab</i>	1	
<i>trihexyphenidyl 5mg tab</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine 100mg cap</i>	1	
<i>amantadine 10mg/ml oral soln</i>	1	
<i>bromocriptine 2.5mg tab</i>	1	
<i>bromocriptine 5mg cap</i>	1	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	1	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	1	
<i>carbidopa/levodopa 10-100mg odt</i>	1	
<i>carbidopa/levodopa 10-100mg tab</i>	1	
<i>carbidopa/levodopa 25-100mg er tab</i>	1	
<i>carbidopa/levodopa 25-100mg odt</i>	1	
<i>carbidopa/levodopa 25-100mg tab</i>	1	
<i>carbidopa/levodopa 25-250mg odt</i>	1	
<i>carbidopa/levodopa 25-250mg tab</i>	1	
<i>carbidopa/levodopa 50-200mg er tab</i>	1	
<i>pramipexole 0.125mg tab</i>	1	
<i>pramipexole 0.25mg tab</i>	1	
<i>pramipexole 0.5mg tab</i>	1	
<i>pramipexole 0.75mg tab</i>	1	
<i>pramipexole 1.5mg tab</i>	1	
<i>pramipexole 1mg tab</i>	1	
<i>ropinirole 0.25mg tab</i>	1	
<i>ropinirole 0.5mg tab</i>	1	
<i>ropinirole 1mg tab</i>	1	
<i>ropinirole 2mg tab</i>	1	
<i>ropinirole 3mg tab</i>	1	
<i>ropinirole 4mg tab</i>	1	
<i>ropinirole 5mg tab</i>	1	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>rasagiline 1mg tab</i>	1	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>selegiline 5mg cap</i>	1	
<i>selegiline 5mg tab</i>	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<i>divalproex sodium 250mg er tab</i>	1	
<i>divalproex sodium 500mg er tab</i>	1	
<i>lithium carbonate 150mg cap</i>	1	
<i>lithium carbonate 300mg cap</i>	1	
<i>lithium carbonate 300mg er tab</i>	1	
<i>lithium carbonate 300mg tab</i>	1	
<i>lithium carbonate 450mg er tab</i>	1	
LITHIUM CARBONATE 600MG CAP	1	
<i>lithium citrate 60mg/ml oral soln</i>	1	
ANTIPSYCHOTICS - MISC.		
CAPLYTA 10.5MG CAP	1	PA_NSO QL=30 EA/30 Days
CAPLYTA 21MG CAP	1	PA_NSO QL=30 EA/30 Days
CAPLYTA 42MG CAP	1	PA_NSO QL=30 EA/30 Days
COBENFY 20-100MG CAP	1	PA_NSO QL=60 EA/30 Days
COBENFY 20-50MG CAP	1	PA_NSO QL=60 EA/30 Days
COBENFY 30-125MG CAP	1	PA_NSO QL=60 EA/30 Days
COBENFY CAP 28-DAY STARTER KIT PACK (56)	1	PA_NSO QL=56 EA/28 Days
<i>haloperidol 0.5mg tab</i>	1	
<i>haloperidol 10mg tab</i>	1	
<i>haloperidol 1mg tab</i>	1	
<i>haloperidol 20mg tab</i>	1	
<i>haloperidol 2mg tab</i>	1	
<i>haloperidol 2mg/ml oral soln</i>	1	
<i>haloperidol 5mg tab</i>	1	
<i>haloperidol 5mg/ml inj</i>	1	
<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	1	
<i>haloperidol decanoate 100mg/ml (5ml) inj</i>	1	
<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	1	
<i>haloperidol decanoate 50mg/ml (5ml) inj</i>	1	
<i>lurasidone 120mg tab</i>	1	QL=30 EA/30 Days
<i>lurasidone 20mg tab</i>	1	QL=30 EA/30 Days
<i>lurasidone 40mg tab</i>	1	QL=30 EA/30 Days
<i>lurasidone 60mg tab</i>	1	QL=30 EA/30 Days
<i>lurasidone 80mg tab</i>	1	QL=60 EA/30 Days
MOLINDONE 10MG TAB	1	
MOLINDONE 25MG TAB	1	
MOLINDONE 5MG TAB	1	
NUPLAZID 10MG TAB	1	PA_NSO QL=30 EA/30 Days
NUPLAZID 34MG CAP	1	PA_NSO QL=30 EA/30 Days
<i>thiothixene 10mg cap</i>	1	
<i>thiothixene 1mg 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>thiothixene 2mg cap</i>	1	
<i>thiothixene 5mg cap</i>	1	
VRAYLAR 0.5MG CAP	1	PA_NSO QL=30 EA/30 Days
VRAYLAR 0.75MG CAP	1	PA_NSO QL=30 EA/30 Days
VRAYLAR 1.5MG CAP	1	PA_NSO QL=30 EA/30 Days
VRAYLAR 3MG CAP	1	PA_NSO QL=30 EA/30 Days
VRAYLAR 4.5MG CAP	1	PA_NSO QL=30 EA/30 Days
VRAYLAR 6MG CAP	1	PA_NSO QL=30 EA/30 Days
<i>ziprasidone 20mg cap</i>	1	
<i>ziprasidone 20mg inj</i>	1	QL=6 EA/3 Days
<i>ziprasidone 40mg cap</i>	1	
<i>ziprasidone 60mg cap</i>	1	
<i>ziprasidone 80mg cap</i>	1	
BENZISOXAZOLES		
FANAPT 10MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 12MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 1MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 2MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 4MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 6MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT 8MG TAB	1	PA_NSO QL=60 EA/30 Days
FANAPT TAB TITRATION PACK (8)	1	PA_NSO QL=60 EA/30 Days
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	1	NDS PA_NSO QL=.75 ML/28 Days
INVEGA SUSTENNA 156MG/ML SYRINGE	1	NDS PA_NSO QL=1 ML/28 Days
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	1	NDS PA_NSO QL=1.50 ML/28 Days
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	1	PA_NSO QL=.25 ML/28 Days
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	1	NDS PA_NSO QL=.50 ML/28 Days
<i>paliperidone 1.5mg er tab</i>	1	QL=30 EA/30 Days
<i>paliperidone 3mg er tab</i>	1	QL=30 EA/30 Days
<i>paliperidone 6mg er tab</i>	1	QL=60 EA/30 Days
<i>paliperidone 9mg er tab</i>	1	QL=30 EA/30 Days
RISPERIDONE 0.25MG ODT	1	QL=60 EA/30 Days
<i>risperidone 0.25mg tab</i>	1	
<i>risperidone 0.5mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 0.5mg tab</i>	1	
<i>risperidone 1mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 1mg tab</i>	1	
<i>risperidone 1mg/ml oral soln</i>	1	QL=240 ML/30 Days
<i>risperidone 2mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 2mg tab</i>	1	
<i>risperidone 3mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 3mg tab</i>	1	
<i>risperidone 4mg odt</i>	1	QL=60 EA/30 Days
<i>risperidone 4mg tab</i>	1	
<i>risperidone microspheres 12.5mg inj</i>	1	PA_NSO QL=2 EA/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
<i>risperidone microspheres 25mg inj</i>	1	PA_NSO QL=2 EA/28 Days
<i>risperidone microspheres 37.5mg inj</i>	1	PA_NSO QL=2 EA/28 Days
<i>risperidone microspheres 50mg inj</i>	1	PA_NSO QL=2 EA/28 Days
DIBENZAPINES		
<i>asenapine 10mg sl tab</i>	1	QL=60 EA/30 Days
<i>asenapine 2.5mg sl tab</i>	1	QL=60 EA/30 Days
<i>asenapine 5mg sl tab</i>	1	QL=60 EA/30 Days
<i>clozapine 100mg odt</i>	1	QL=270 EA/30 Days
<i>clozapine 100mg tab</i>	1	
<i>clozapine 12.5mg odt</i>	1	QL=90 EA/30 Days
<i>clozapine 150mg odt</i>	1	QL=180 EA/30 Days
<i>clozapine 200mg odt</i>	1	QL=120 EA/30 Days
<i>clozapine 200mg tab</i>	1	
<i>clozapine 25mg odt</i>	1	QL=270 EA/30 Days
<i>clozapine 25mg tab</i>	1	
<i>clozapine 50mg tab</i>	1	
<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>	1	QL=3 EA/1 Days
<i>olanzapine 10mg odt</i>	1	QL=60 EA/30 Days
<i>olanzapine 10mg tab</i>	1	
<i>olanzapine 15mg odt</i>	1	QL=30 EA/30 Days
<i>olanzapine 15mg tab</i>	1	
<i>olanzapine 2.5mg tab</i>	1	
<i>olanzapine 20mg odt</i>	1	QL=30 EA/30 Days
<i>olanzapine 20mg tab</i>	1	
<i>olanzapine 5mg odt</i>	1	QL=30 EA/30 Days
<i>olanzapine 5mg tab</i>	1	
<i>olanzapine 7.5mg tab</i>	1	
<i>quetiapine 100mg tab</i>	1	
<i>quetiapine 150mg er tab</i>	1	QL=30 EA/30 Days
<i>quetiapine 200mg er tab</i>	1	QL=30 EA/30 Days
<i>quetiapine 200mg tab</i>	1	
<i>quetiapine 25mg tab</i>	1	
<i>quetiapine 300mg er tab</i>	1	QL=60 EA/30 Days
<i>quetiapine 300mg tab</i>	1	
<i>quetiapine 400mg er tab</i>	1	QL=60 EA/30 Days
<i>quetiapine 400mg tab</i>	1	
<i>quetiapine 50mg er tab</i>	1	QL=60 EA/30 Days
<i>quetiapine 50mg tab</i>	1	
SECUADO 3.8MG/24HR PATCH	1	PA_NSO QL=30 EA/30 Days
SECUADO 5.7MG/24HR PATCH	1	PA_NSO QL=30 EA/30 Days
SECUADO 7.6MG/24HR PATCH	1	PA_NSO QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VERSACLOZ 50MG/ML ORAL SUSP	1	PA_NSO QL=600 ML/30 Days
PHENOTHIAZINES		
<i>chlorpromazine 100mg tab</i>	1	
<i>chlorpromazine 100mg/ml oral soln</i>	1	
<i>chlorpromazine 10mg tab</i>	1	
<i>chlorpromazine 200mg tab</i>	1	
<i>chlorpromazine 25mg tab</i>	1	
<i>chlorpromazine 30mg/ml oral soln</i>	1	
<i>chlorpromazine 50mg tab</i>	1	
<i>compro 25mg rectal supp</i>	1	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	1	
<i>fluphenazine 10mg tab</i>	1	
<i>fluphenazine 1mg tab</i>	1	
<i>fluphenazine 2.5mg tab</i>	1	
FLUPHENAZINE 2.5MG/ML INJ	1	
<i>fluphenazine 5mg tab</i>	1	
FLUPHENAZINE 5MG/ML ORAL SOLN	1	
<i>fluphenazine decanoate 25mg/ml inj</i>	1	
<i>perphenazine 16mg tab</i>	1	
<i>perphenazine 2mg tab</i>	1	
<i>perphenazine 4mg tab</i>	1	
<i>perphenazine 8mg tab</i>	1	
<i>prochlorperazine 10mg tab</i>	1	
<i>prochlorperazine 25mg rectal supp</i>	1	
<i>prochlorperazine 5mg tab</i>	1	
<i>thioridazine 100mg tab</i>	1	
<i>thioridazine 10mg tab</i>	1	
<i>thioridazine 25mg tab</i>	1	
<i>thioridazine 50mg tab</i>	1	
<i>trifluoperazine 10mg tab</i>	1	
<i>trifluoperazine 1mg tab</i>	1	
<i>trifluoperazine 2mg tab</i>	1	
<i>trifluoperazine 5mg tab</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY MAINTENA 300MG INJ	1	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 300MG/1.5ML SYRINGE	1	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 400MG INJ	1	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 400MG/2ML SYRINGE	1	NDS QL=1 EA/28 Days
<i>aripiprazole 10mg odt</i>	1	PA_NSO QL=60 EA/30 Days
<i>aripiprazole 10mg tab</i>	1	
<i>aripiprazole 15mg odt</i>	1	PA_NSO QL=60 EA/30 Days
<i>aripiprazole 15mg tab</i>	1	
<i>aripiprazole 1mg/ml oral soln</i>	1	QL=900 ML/30 Days
<i>aripiprazole 20mg tab</i>	1	
<i>aripiprazole 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>aripiprazole 30mg tab</i>	1	
<i>aripiprazole 5mg tab</i>	1	
ARISTADA 1064MG/3.9ML SYRINGE	1	PA_NSO QL=3.90 ML/56 Days
ARISTADA 441MG/1.6ML SYRINGE	1	NDS PA_NSO QL=1.60 ML/28 Days
ARISTADA 662MG/2.4ML SYRINGE	1	NDS PA_NSO QL=2.40 ML/28 Days
ARISTADA 675MG/2.4ML SYRINGE	1	PA_NSO QL=2.40 ML/42 Days
ARISTADA 882MG/3.2ML SYRINGE	1	PA_NSO QL=3.20 ML/28 Days
OPIPZA 10MG ORAL FILM	1	PA_NSO QL=90 EA/30 Days
OPIPZA 2MG ORAL FILM	1	PA_NSO QL=30 EA/30 Days
OPIPZA 5MG ORAL FILM	1	PA_NSO QL=30 EA/30 Days
REXULTI 0.25MG TAB	1	PA_NSO QL=30 EA/30 Days
REXULTI 0.5MG TAB	1	PA_NSO QL=30 EA/30 Days
REXULTI 1MG TAB	1	PA_NSO QL=30 EA/30 Days
REXULTI 2MG TAB	1	PA_NSO QL=30 EA/30 Days
REXULTI 3MG TAB	1	PA_NSO QL=30 EA/30 Days
REXULTI 4MG TAB	1	PA_NSO QL=30 EA/30 Days
ANTISPASTICITY AGENTS		
ANTISPASTICITY AGENTS		
<i>baclofen 10mg tab</i>	1	
<i>baclofen 20mg tab</i>	1	
<i>baclofen 5mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	PA
<i>chlorzoxazone 500mg tab</i>	1	PA QL=180 EA/30 Days
<i>cyclobenzaprine 10mg tab</i>	1	PA
<i>cyclobenzaprine 5mg tab</i>	1	PA
<i>dantrolene sodium 100mg cap</i>	1	
<i>dantrolene sodium 25mg cap</i>	1	
<i>dantrolene sodium 50mg cap</i>	1	
<i>metaxalone 800mg tab</i>	1	PA
<i>methocarbamol 500mg tab</i>	1	PA
<i>methocarbamol 750mg tab</i>	1	PA
<i>orphenadrine citrate 100mg er tab</i>	1	PA
<i>pyridostigmine bromide 60mg tab</i>	1	
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg tab</i>	1	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir 20mg/ml oral soln</i>	1	QL=960 ML/30 Days
<i>abacavir 300mg tab</i>	1	QL=60 EA/30 Days
<i>abacavir/lamivudine 600-300mg tab</i>	1	QL=30 EA/30 Days
APTIVUS 250MG CAP	1	QL=120 EA/30 Days
<i>atazanavir 150mg cap</i>	1	QL=30 EA/30 Days
<i>atazanavir 200mg cap</i>	1	QL=60 EA/30 Days
<i>atazanavir 300mg cap</i>	1	QL=30 EA/30 Days
BIKTARVY 30-120-15MG TAB	1	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BIKTARVY 50-200-25MG TAB	1	QL=30 EA/30 Days
CIMDUO 300-300MG TAB	1	QL=30 EA/30 Days
<i>darunavir 600mg tab</i>	1	QL=60 EA/30 Days
<i>darunavir 800mg tab</i>	1	QL=30 EA/30 Days
DELSTRIGO 100-300-300MG TAB	1	QL=30 EA/30 Days
DESCOVY 120-15MG TAB	1	QL=30 EA/30 Days
DESCOVY 200-25MG TAB	1	QL=30 EA/30 Days
DOVATO 50-300MG TAB	1	QL=30 EA/30 Days
EDURANT 2.5MG TAB FOR ORAL SUSP	1	QL=180 EA/30 Days
<i>efavirenz 600mg tab</i>	1	QL=30 EA/30 Days
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	1	QL=30 EA/30 Days
EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE 400-300-300MG TAB	1	QL=30 EA/30 Days
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine 200mg cap</i>	1	QL=30 EA/30 Days
<i>emtricitabine/rilpivirine/tenofovir disoproxil fumarate 200-25-300mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	1	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	1	QL=30 EA/30 Days
EMTRIVA 10MG/ML ORAL SOLN	1	QL=850 ML/30 Days
<i>etravirine 100mg tab</i>	1	QL=60 EA/30 Days
<i>etravirine 200mg tab</i>	1	QL=60 EA/30 Days
EVOTAZ 300-150MG TAB	1	QL=30 EA/30 Days
<i>fosamprenavir 700mg tab</i>	1	QL=120 EA/30 Days
GENVOYA 150-150-200-10MG TAB	1	QL=30 EA/30 Days
INTELENCE 25MG TAB	1	QL=120 EA/30 Days
ISENTRESS 100MG CHEW TAB	1	QL=180 EA/30 Days
ISENTRESS 100MG GRANULES FOR ORAL SUSP	1	QL=60 EA/30 Days
ISENTRESS 25MG CHEW TAB	1	QL=180 EA/30 Days
ISENTRESS 400MG TAB	1	QL=60 EA/30 Days
ISENTRESS 600MG TAB	1	QL=60 EA/30 Days
JULUCA 50-25MG TAB	1	QL=30 EA/30 Days
KALETRA 80-20MG/ML ORAL SOLN	1	QL=480 ML/30 Days
<i>lamivudine 10mg/ml oral soln</i>	1	QL=960 ML/30 Days
<i>lamivudine 150mg tab</i>	1	QL=60 EA/30 Days
<i>lamivudine 300mg tab</i>	1	QL=30 EA/30 Days
<i>lamivudine/zidovudine 150-300mg tab</i>	1	QL=60 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lopinavir/ritonavir 100-25mg tab</i>	1	QL=300 EA/30 Days
<i>lopinavir/ritonavir 200-50mg tab</i>	1	QL=120 EA/30 Days
<i>maraviroc 150mg tab</i>	1	QL=60 EA/30 Days
<i>maraviroc 300mg tab</i>	1	QL=120 EA/30 Days
NEVIRAPINE 10MG/ML ORAL SUSP	1	QL=1200 ML/30 Days
<i>nevirapine 200mg tab</i>	1	QL=60 EA/30 Days
<i>nevirapine 400mg er tab</i>	1	QL=30 EA/30 Days
NORVIR 100MG ORAL POWDER	1	QL=360 EA/30 Days
ODEFSEY 200-25-25MG TAB	1	QL=30 EA/30 Days
PIFELTRO 100MG TAB	1	QL=30 EA/30 Days
PREZCOBIX 150-675MG TAB	1	QL=30 EA/30 Days
PREZCOBIX 150-800MG TAB	1	QL=30 EA/30 Days
PREZISTA 100MG/ML ORAL SUSP	1	QL=400 ML/30 Days
PREZISTA 150MG TAB	1	QL=240 EA/30 Days
PREZISTA 75MG TAB	1	QL=480 EA/30 Days
REYATAZ 50MG ORAL POWDER	1	QL=240 EA/30 Days
<i>rilpivirine 25mg tab</i>	1	QL=30 EA/30 Days
<i>ritonavir 100mg tab</i>	1	QL=360 EA/30 Days
RUKOBIA 600MG ER TAB	1	QL=60 EA/30 Days
SELZENTRY 20MG/ML ORAL SOLN	1	QL=1840 ML/30 Days
STRIBILD 150-150-200-300MG TAB	1	QL=30 EA/30 Days
SUNLENCA 300MG TAB	1	QL=4 EA/28 Days
SUNLENCA 300MG TAB THERAPY PACK (4)	1	QL=4 EA/28 Days
SUNLENCA 300MG TAB THERAPY PACK (5)	1	QL=5 EA/28 Days
SYMTUZA 150-800-200-10MG TAB	1	QL=30 EA/30 Days
<i>tenofovir disoproxil fumarate 300mg tab</i>	1	QL=30 EA/30 Days
TIVICAY 50MG TAB	1	QL=60 EA/30 Days
TIVICAY 5MG TAB FOR ORAL SUSP	1	QL=180 EA/30 Days
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	1	QL=180 EA/30 Days
TRIUMEQ 600-50-300MG TAB	1	QL=30 EA/30 Days
TYBOST 150MG TAB	1	QL=30 EA/30 Days
VIRACEPT 250MG TAB	1	QL=300 EA/30 Days
VIRACEPT 625MG TAB	1	QL=120 EA/30 Days
VIREAD 150MG TAB	1	QL=30 EA/30 Days
VIREAD 200MG TAB	1	QL=30 EA/30 Days
VIREAD 250MG TAB	1	QL=30 EA/30 Days
VIREAD 40MG/GM ORAL POWDER	1	QL=240 GM/30 Days
<i>zidovudine 100mg cap</i>	1	QL=180 EA/30 Days
<i>zidovudine 10mg/ml oral soln</i>	1	QL=1920 ML/30 Days
<i>zidovudine 300mg tab</i>	1	QL=60 EA/30 Days
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	1	QL=30 EA/30 Days
<i>entecavir 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>entecavir 1mg tab</i>	1	QL=30 EA/30 Days
<i>lamivudine 100mg tab</i>	1	QL=90 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MAVYRET 100-40MG TAB	1	NDS PA QL=84 EA/28 Days
MAVYRET 50-20MG ORAL PELLETT	1	NDS PA QL=140 EA/28 Days
PEGASYS 180MCG/0.5ML SYRINGE	1	NDS QL=2 ML/28 Days
PEGASYS 180MCG/ML INJ	1	NDS QL=4 ML/28 Days
RIBAVIRIN 200MG CAP	1	QL=210 EA/30 Days
RIBAVIRIN 200MG TAB	1	QL=210 EA/30 Days
SOFOSBUVIR/VELPATASVIR 400-100MG TAB	1	NDS PA QL=28 EA/28 Days
VOSEVI 400-100-100MG TAB	1	NDS PA QL=28 EA/28 Days
HERPES AGENTS		
<i>acyclovir 200mg cap</i>	1	
<i>acyclovir 400mg tab</i>	1	
<i>acyclovir 40mg/ml oral susp</i>	1	
<i>acyclovir 50mg/ml inj</i>	1	PA_BvD
<i>acyclovir 800mg tab</i>	1	
<i>famciclovir 125mg tab</i>	1	QL=60 EA/30 Days
<i>famciclovir 250mg tab</i>	1	QL=60 EA/30 Days
<i>famciclovir 500mg tab</i>	1	QL=90 EA/30 Days
<i>valacyclovir 1000mg tab</i>	1	QL=120 EA/30 Days
<i>valacyclovir 500mg tab</i>	1	QL=60 EA/30 Days
INFLUENZA AGENTS		
<i>oseltamivir 30mg cap</i>	1	QL=84 EA/180 Days
<i>oseltamivir 45mg cap</i>	1	QL=42 EA/180 Days
<i>oseltamivir 6mg/ml oral susp</i>	1	QL=540 ML/180 Days
<i>oseltamivir 75mg cap</i>	1	QL=42 EA/180 Days
RELENZA 5MG/BLISTER POWDER INHALER	1	QL=120 EA/365 Days
RIMANTADINE 100MG TAB	1	
XOFLUZA 40MG TAB	1	QL=2 EA/30 Days
XOFLUZA 80MG TAB	1	QL=1 EA/30 Days
MISC. ANTIVIRALS		
LIVTENCITY 200MG TAB	1	NDS PA QL=120 EA/30 Days
PAXLOVID 150MG/100MG TAB PACK (20)	1	QL=20 EA/5 Days
PAXLOVID 150MG/100MG TAB PACK (30)	1	QL=30 EA/5 Days
PAXLOVID 300MG/100MG AND 150MG/100MG TAB DOSE PACK (11)	1	QL=11 EA/5 Days
PREVYMIS 120MG ORAL PELLETT	1	NDS PA QL=120 EA/30 Days
PREVYMIS 240MG TAB	1	NDS PA QL=28 EA/28 Days
PREVYMIS 480MG TAB	1	NDS PA QL=30 EA/30 Days
<i>valganciclovir 450mg tab</i>	1	QL=120 EA/30 Days
<i>valganciclovir 50mg/ml oral soln</i>	1	QL=1056 ML/30 Days
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol 12.5mg tab</i>	1	
<i>carvedilol 25mg tab</i>	1	
<i>carvedilol 3.125mg tab</i>	1	
<i>carvedilol 6.25mg tab</i>	1	

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>labetalol 100mg tab</i>	1	
<i>labetalol 200mg tab</i>	1	
<i>labetalol 300mg tab</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	1	
<i>acebutolol 400mg cap</i>	1	
<i>atenolol 100mg tab</i>	1	
<i>atenolol 25mg tab</i>	1	
<i>atenolol 50mg tab</i>	1	
<i>betaxolol 10mg tab</i>	1	
<i>betaxolol 20mg tab</i>	1	
<i>bisoprolol fumarate 10mg tab</i>	1	
<i>bisoprolol fumarate 5mg tab</i>	1	
<i>metoprolol succinate 100mg er tab</i>	1	
<i>metoprolol succinate 200mg er tab</i>	1	
<i>metoprolol succinate 25mg er tab</i>	1	
<i>metoprolol succinate 50mg er tab</i>	1	
<i>metoprolol tartrate 100mg tab</i>	1	
<i>metoprolol tartrate 25mg tab</i>	1	
<i>metoprolol tartrate 37.5mg tab</i>	1	
<i>metoprolol tartrate 50mg tab</i>	1	
<i>metoprolol tartrate 75mg tab</i>	1	
<i>nebivolol 10mg tab</i>	1	QL=60 EA/30 Days
<i>nebivolol 2.5mg tab</i>	1	QL=60 EA/30 Days
<i>nebivolol 20mg tab</i>	1	QL=60 EA/30 Days
<i>nebivolol 5mg tab</i>	1	QL=60 EA/30 Days
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	1	
<i>nadolol 40mg tab</i>	1	
<i>nadolol 80mg tab</i>	1	
<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	
<i>propranolol 40mg tab</i>	1	
PROPRANOLOL 4MG/ML ORAL SOLN	1	
<i>propranolol 60mg er cap</i>	1	
<i>propranolol 60mg tab</i>	1	
<i>propranolol 80mg er cap</i>	1	
<i>propranolol 80mg tab</i>	1	
PROPRANOLOL 8MG/ML ORAL SOLN	1	
<i>sotalol 120mg tab</i>	1	
<i>sotalol 160mg tab</i>	1	

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>sotalol 240mg tab</i>	1	
<i>sotalol 80mg tab</i>	1	
<i>sotalol af 120mg tab</i>	1	
<i>sotalol af 160mg tab</i>	1	
<i>sotalol af 80mg tab</i>	1	
<i>timolol 10mg tab</i>	1	
TIMOLOL 5MG TAB	1	
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine 10mg tab</i>	1	
<i>amlodipine 2.5mg tab</i>	1	
<i>amlodipine 5mg tab</i>	1	
<i>cartia 120mg er (24hr) cap</i>	1	
<i>cartia 180mg er (24hr) cap</i>	1	
<i>cartia 240mg er (24hr) cap</i>	1	
<i>cartia 300mg er (24hr) cap</i>	1	
<i>dilt 120mg er (24hr) cap</i>	1	
<i>dilt 180mg er (24hr) cap</i>	1	
<i>dilt 240mg er (24hr) cap</i>	1	
<i>diltiazem 120mg er (12hr) cap</i>	1	
<i>diltiazem 120mg er (24hr) cap</i>	1	
<i>diltiazem 120mg tab</i>	1	
<i>diltiazem 180mg er (24hr) cap</i>	1	
<i>diltiazem 240mg er (24hr) cap</i>	1	
<i>diltiazem 300mg er (24hr) cap</i>	1	
<i>diltiazem 30mg tab</i>	1	
<i>diltiazem 360mg er (24hr) cap</i>	1	
<i>diltiazem 420mg er (24hr) cap</i>	1	
<i>diltiazem 60mg er (12hr) cap</i>	1	
<i>diltiazem 60mg tab</i>	1	
<i>diltiazem 90mg er (12hr) 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	
<i>nifedipine 10mg cap</i>	1	
<i>nifedipine 20mg cap</i>	1	
<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>	1	
<i>tiadylt 120mg er (24hr) 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>tiadylt 180mg er (24hr) cap</i>	1	
<i>tiadylt 240mg er (24hr) cap</i>	1	
<i>tiadylt 300mg er (24hr) cap</i>	1	
<i>tiadylt 360mg er (24hr) cap</i>	1	
<i>tiadylt 420mg er (24hr) cap</i>	1	
<i>verapamil 120mg er cap</i>	1	
<i>verapamil 120mg er tab</i>	1	
<i>verapamil 120mg tab</i>	1	
<i>verapamil 180mg er cap</i>	1	
<i>verapamil 180mg er tab</i>	1	
<i>verapamil 240mg er cap</i>	1	
<i>verapamil 240mg er tab</i>	1	
<i>verapamil 40mg tab</i>	1	
<i>verapamil 80mg tab</i>	1	
CARDIOVASCULAR AGENTS		
ALPHA-ADRENERGIC AGONISTS		
<i>droxidopa 100mg cap</i>	1	PA QL=90 EA/30 Days
<i>droxidopa 200mg cap</i>	1	PA QL=180 EA/30 Days
<i>droxidopa 300mg cap</i>	1	PA QL=180 EA/30 Days
<i>midodrine 10mg tab</i>	1	
<i>midodrine 2.5mg tab</i>	1	
<i>midodrine 5mg tab</i>	1	
ANTIARRHYTHMICS		
<i>amiodarone 100mg tab</i>	1	
<i>amiodarone 200mg tab</i>	1	
<i>amiodarone 400mg tab</i>	1	
<i>disopyramide 100mg cap</i>	1	
<i>disopyramide 150mg cap</i>	1	
<i>dofetilide 0.125mg cap</i>	1	
<i>dofetilide 0.25mg cap</i>	1	
<i>dofetilide 0.5mg cap</i>	1	
<i>flecainide acetate 100mg tab</i>	1	
<i>flecainide acetate 150mg tab</i>	1	
<i>flecainide acetate 50mg tab</i>	1	
<i>mexiletine 150mg cap</i>	1	
<i>mexiletine 200mg cap</i>	1	
<i>mexiletine 250mg cap</i>	1	
MULTAQ 400MG TAB	1	QL=60 EA/30 Days
<i>propafenone 150mg tab</i>	1	
<i>propafenone 225mg er cap</i>	1	
<i>propafenone 225mg tab</i>	1	
<i>propafenone 300mg tab</i>	1	
<i>propafenone 325mg er cap</i>	1	
<i>propafenone 425mg er cap</i>	1	
QUINIDINE SULFATE 200MG TAB	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
QUINIDINE SULFATE 300MG TAB	1	
CARDIOVASCULAR AGENTS, OTHER		
ATTRUBY 356MG TAB	1	NDS PA QL=112 EA/28 Days
<i>digoxin 0.125mg tab</i>	1	
<i>digoxin 0.25mg tab</i>	1	
ENTRESTO 15-16MG ORAL PELLETT	1	QL=240 EA/30 Days
ENTRESTO 6-6MG ORAL PELLETT	1	QL=240 EA/30 Days
<i>ivabradine 5mg tab</i>	1	PA QL=60 EA/30 Days
<i>ivabradine 7.5mg tab</i>	1	PA QL=60 EA/30 Days
<i>pentoxifylline 400mg er tab</i>	1	
<i>ranolazine 1000mg er tab</i>	1	QL=60 EA/30 Days
<i>ranolazine 500mg er tab</i>	1	QL=60 EA/30 Days
<i>sacubitril/valsartan 24-26mg tab</i>	1	QL=60 EA/30 Days
<i>sacubitril/valsartan 49-51mg tab</i>	1	QL=60 EA/30 Days
<i>sacubitril/valsartan 97-103mg tab</i>	1	QL=60 EA/30 Days
VERQUVO 10MG TAB	1	PA QL=30 EA/30 Days
VERQUVO 2.5MG TAB	1	PA QL=30 EA/30 Days
VERQUVO 5MG TAB	1	PA QL=30 EA/30 Days
CENTRAL NERVOUS SYSTEM AGENTS		
CENTRAL NERVOUS SYSTEM, OTHER		
EVRYSDI 0.75MG/ML ORAL SOLN	1	NDS PA QL=240 ML/30 Days
EVRYSDI 5MG TAB	1	NDS PA QL=30 EA/30 Days
RADICAVA 105MG/5ML ORAL SUSP	1	NDS PA QL=70 ML/28 Days
<i>riluzole 50mg tab</i>	1	QL=60 EA/30 Days
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil 100mg/ml oral susp</i>	1	
<i>cefadroxil 500mg cap</i>	1	
<i>cefadroxil 50mg/ml oral susp</i>	1	
<i>cefazolin 1000mg inj</i>	1	
<i>cefazolin 200mg/ml inj</i>	1	
<i>cefazolin 500mg inj</i>	1	
<i>cephalexin 250mg cap</i>	1	
<i>cephalexin 25mg/ml oral susp</i>	1	
<i>cephalexin 500mg cap</i>	1	
<i>cephalexin 50mg/ml oral susp</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
CEFACTOR 250MG CAP	1	
CEFACTOR 500MG CAP	1	
<i>cefoxitin 1gm inj</i>	1	
<i>cefoxitin 200mg/ml inj</i>	1	
<i>cefoxitin 2gm inj</i>	1	
<i>cefprozil 250mg tab</i>	1	
<i>cefprozil 25mg/ml oral susp</i>	1	
<i>cefprozil 500mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cefprozil 50mg/ml oral susp</i>	1	
<i>cefuroxime 1500mg inj</i>	1	
<i>cefuroxime 250mg tab</i>	1	
<i>cefuroxime 500mg tab</i>	1	
<i>cefuroxime 750mg inj</i>	1	
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir 25mg/ml oral susp</i>	1	
<i>cefdinir 300mg cap</i>	1	
<i>cefdinir 50mg/ml oral susp</i>	1	
<i>cefixime 400mg cap</i>	1	
<i>cefpodoxime 100mg tab</i>	1	
CEFPODOXIME 10MG/ML ORAL SUSP	1	
<i>cefpodoxime 200mg tab</i>	1	
CEFPODOXIME 20MG/ML ORAL SUSP	1	
<i>ceftazidime 1gm inj</i>	1	
CEFTAZIDIME 200MG/ML INJ	1	
<i>ceftazidime 2gm inj</i>	1	
<i>ceftriaxone 10gm inj</i>	1	
<i>ceftriaxone 1gm inj</i>	1	
<i>ceftriaxone 250mg inj</i>	1	
<i>ceftriaxone 2gm inj</i>	1	
<i>ceftriaxone 500mg inj</i>	1	
<i>tazicef 1gm inj</i>	1	
<i>tazicef 2gm inj</i>	1	
TAZICEF 6GM INJ	1	
DENTAL AND ORAL AGENTS		
DENTAL AND ORAL AGENTS		
<i>cevimeline 30mg cap</i>	1	
<i>chlorhexidine gluconate 0.12% mouthwash</i>	1	
<i>clotrimazole 10mg lozenge</i>	1	
<i>kourzeq 0.1% oral paste</i>	1	
<i>lidocaine viscous 2% mucous membrane topical soln</i>	1	
<i>nystatin 100000unit/ml oral susp</i>	1	
<i>periogard 0.12% mouthwash</i>	1	
<i>pilocarpine 5mg tab</i>	1	
<i>pilocarpine 7.5mg tab</i>	1	
<i>triamcinolone acetonide 0.1% oral paste</i>	1	
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>accutane 10mg cap</i>	1	
<i>accutane 20mg cap</i>	1	
<i>accutane 40mg cap</i>	1	
<i>amnesteem 10mg cap</i>	1	
<i>amnesteem 20mg cap</i>	1	
<i>amnesteem 30mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>amnesteem 40mg cap</i>	1	
<i>claravis 10mg cap</i>	1	
<i>claravis 20mg cap</i>	1	
<i>claravis 30mg cap</i>	1	
<i>claravis 40mg cap</i>	1	
<i>clindamycin 1% pad</i>	1	QL=60 EA/30 Days
<i>clindamycin 1% topical gel (once-daily)</i>	1	QL=75 ML/30 Days
<i>clindamycin 1% topical gel (twice-daily)</i>	1	QL=75 GM/30 Days
<i>clindamycin 1% topical lotion</i>	1	QL=60 ML/30 Days
<i>clindamycin 1% topical soln</i>	1	QL=60 ML/30 Days
ERY 2% PAD	1	QL=60 EA/30 Days
ERYTHROMYCIN 2% TOPICAL GEL	1	QL=60 GM/30 Days
<i>erythromycin 2% topical soln</i>	1	QL=60 ML/30 Days
<i>isotretinoin 10mg cap</i>	1	
<i>isotretinoin 20mg cap</i>	1	
<i>isotretinoin 30mg cap</i>	1	
<i>isotretinoin 40mg cap</i>	1	
<i>sulfacetamide sodium 10% topical lotion</i>	1	QL=118 ML/30 Days
<i>tretinoin 0.01% topical gel</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.025% topical cream</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.025% topical gel</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.05% topical cream</i>	1	PA QL=45 GM/30 Days
<i>tretinoin 0.1% topical cream</i>	1	PA QL=45 GM/30 Days
<i>zenatane 10mg cap</i>	1	
<i>zenatane 20mg cap</i>	1	
<i>zenatane 30mg cap</i>	1	
<i>zenatane 40mg cap</i>	1	
ANTIBIOTICS - TOPICAL		
<i>gentamicin 0.1% topical cream</i>	1	QL=30 GM/30 Days
<i>gentamicin 0.1% topical ointment</i>	1	QL=30 GM/30 Days
<i>mupirocin 2% topical ointment</i>	1	QL=220 GM/30 Days
ANTIFUNGALS - TOPICAL		
<i>ciclopirox 0.77% topical cream</i>	1	QL=90 GM/30 Days
<i>ciclopirox 0.77% topical gel</i>	1	QL=100 GM/30 Days
<i>ciclopirox 0.77% topical lotion</i>	1	QL=60 ML/30 Days
<i>ciclopirox 1% shampoo</i>	1	QL=120 ML/30 Days
<i>ciclopirox 8% topical soln</i>	1	QL=13.20 ML/30 Days
<i>clotrimazole 1% topical cream</i>	1	QL=45 GM/30 Days
<i>clotrimazole/betamethasone 1-0.05% topical cream</i>	1	QL=90 GM/30 Days
<i>econazole nitrate 1% topical cream</i>	1	QL=85 GM/30 Days
<i>ketoconazole 2% shampoo</i>	1	QL=240 ML/30 Days
<i>ketoconazole 2% topical cream</i>	1	QL=120 GM/30 Days
<i>nyamyc 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
<i>nystatin 100000 unit/gm topical ointment</i>	1	QL=30 GM/30 Days
<i>nystatin 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>nystatin 100000unit/ml topical cream</i>	1	QL=30 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% topical ointment</i>	1	QL=60 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% topical cream</i>	1	QL=60 GM/30 Days
<i>nystop 100000unit/gm topical powder</i>	1	QL=60 GM/30 Days
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene 1% topical gel</i>	1	NDS PA_NSO QL=60 GM/30 Days
<i>diclofenac sodium 3% topical gel</i>	1	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	1	QL=10 ML/30 Days
<i>fluorouracil 5% topical cream</i>	1	QL=40 GM/30 Days
<i>fluorouracil 5% topical soln</i>	1	QL=10 ML/30 Days
PANRETIN 0.1% TOPICAL GEL	1	NDS PA_NSO QL=60 GM/30 Days
VALCHLOR 0.016% TOPICAL GEL	1	NDS PA_NSO QL=60 GM/30 Days
ANTIPSORIATICS		
<i>acitretin 10mg cap</i>	1	
<i>acitretin 17.5mg cap</i>	1	
<i>acitretin 25mg cap</i>	1	
<i>calcipotriene 0.005% topical cream</i>	1	PA QL=120 GM/30 Days
<i>calcipotriene 0.005% topical ointment</i>	1	PA QL=120 GM/30 Days
CALCIPOTRIENE 0.005% TOPICAL SOLN	1	PA QL=120 ML/30 Days
COSENTYX 150MG/ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
COSENTYX 150MG/ML SYRINGE	1	NDS PA QL=8 ML/28 Days
COSENTYX 75MG/0.5ML SYRINGE	1	NDS PA QL=2 ML/28 Days
COSENTYX UNOREADY 300MG/2ML AUTO-INJECTOR	1	NDS PA QL=8 ML/28 Days
METHOXSALEN 10MG CAP	1	
OTEZLA 10/20/30MG TAB 28-DAY STARTER PACK (55)	1	NDS PA QL=55 EA/28 Days
OTEZLA 10/20MG TAB 28-DAY STARTER PACK (55)	1	NDS PA QL=55 EA/28 Days
OTEZLA 20MG TAB	1	NDS PA QL=60 EA/30 Days
OTEZLA 30MG TAB	1	NDS PA QL=60 EA/30 Days
OTEZLA XR 75MG TAB	1	NDS PA QL=30 EA/30 Days
OTEZLA/OTEZLA XR 28-DAY 10/20/30/75MG STARTER PACK (41)	1	NDS PA QL=41 EA/28 Days
SKYRIZI 150MG/ML AUTO-INJECTOR	1	PA QL=7 ML/365 Days
SKYRIZI 150MG/ML SYRINGE	1	PA QL=7 ML/365 Days
STARJEMZA 45MG/0.5ML INJ	1	PA QL=.50 ML/28 Days
STARJEMZA 45MG/0.5ML SYRINGE	1	PA QL=.50 ML/28 Days
STARJEMZA 90MG/ML SYRINGE	1	PA QL=1 ML/28 Days
STEQEYMA 45MG/0.5ML SYRINGE	1	PA QL=.50 ML/28 Days
STEQEYMA 90MG/ML SYRINGE	1	PA QL=1 ML/28 Days
<i>tazarotene 0.1% topical cream</i>	1	PA QL=60 GM/30 Days
TREMFYA 100MG/ML AUTO-INJECTOR	1	PA QL=2 ML/28 Days
TREMFYA 100MG/ML SYRINGE	1	PA QL=2 ML/28 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
YESINTEK 90MG/ML SYRINGE	1	PA QL=1 ML/28 Days
CORTICOSTEROIDS - TOPICAL		
<i>alclometasone dipropionate 0.05% topical cream</i>	1	QL=120 GM/30 Days
ALCLOMETASONE DIPROPIONATE 0.05% TOPICAL OINTMENT	1	QL=120 GM/30 Days
<i>betamethasone 0.05% aug topical cream</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% aug topical lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% aug topical ointment</i>	1	QL=100 GM/30 Days
<i>betamethasone 0.05% topical cream</i>	1	QL=90 GM/30 Days
<i>betamethasone 0.05% topical lotion</i>	1	QL=120 ML/30 Days
<i>betamethasone 0.05% topical ointment</i>	1	QL=90 GM/30 Days
<i>betamethasone 0.1% topical cream</i>	1	QL=135 GM/30 Days
BETAMETHASONE 0.1% TOPICAL LOTION	1	QL=120 ML/30 Days
<i>betamethasone 0.1% topical ointment</i>	1	QL=135 GM/30 Days
<i>clobetasol propionate 0.05% shampoo</i>	1	QL=236 ML/30 Days
<i>clobetasol propionate 0.05% topical cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical e cream</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical foam</i>	1	QL=100 GM/30 Days
<i>clobetasol propionate 0.05% topical gel</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical lotion</i>	1	QL=118 ML/30 Days
<i>clobetasol propionate 0.05% topical ointment</i>	1	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical soln</i>	1	QL=100 ML/30 Days
<i>desonide 0.05% topical cream</i>	1	QL=60 GM/30 Days
<i>desonide 0.05% topical ointment</i>	1	QL=120 GM/30 Days
<i>desoximetasone 0.25% topical cream</i>	1	QL=100 GM/30 Days
<i>desoximetasone 0.25% topical ointment</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% topical cream</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% topical oil</i>	1	QL=120 ML/30 Days
<i>fluocinolone acetonide 0.01% topical soln</i>	1	QL=90 ML/30 Days
<i>fluocinolone acetonide 0.025% topical cream</i>	1	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.025% topical ointment</i>	1	QL=120 GM/30 Days
<i>fluocinonide 0.05% topical cream</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical e cream</i>	1	QL=120 GM/30 Days
<i>fluocinonide 0.05% topical ointment</i>	1	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical soln</i>	1	QL=60 ML/30 Days
<i>fluocinonide 0.1% topical cream</i>	1	QL=60 GM/30 Days
<i>fluticasone propionate 0.005% topical ointment</i>	1	QL=240 GM/30 Days
<i>fluticasone propionate 0.05% topical cream</i>	1	QL=240 GM/30 Days
<i>halobetasol propionate 0.05% topical cream</i>	1	QL=50 GM/30 Days
<i>halobetasol propionate 0.05% topical ointment</i>	1	QL=50 GM/30 Days
<i>hydrocortisone 1% topical cream</i>	1	QL=240 GM/30 Days
HYDROCORTISONE 2.5% TOPICAL LOTION	1	QL=118 ML/30 Days
<i>hydrocortisone 2.5% topical ointment</i>	1	QL=240 GM/30 Days
<i>mometasone furoate 0.1% topical cream</i>	1	QL=180 GM/30 Days
<i>mometasone furoate 0.1% topical lotion</i>	1	QL=180 ML/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>mometasone furoate 0.1% topical ointment</i>	1	QL=180 GM/30 Days
TRIAMCINOLONE ACETONIDE 0.025% LOTION	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.025% topical cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.025% topical ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% topical cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% topical lotion</i>	1	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.1% topical ointment</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% topical cream</i>	1	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% topical ointment</i>	1	QL=120 GM/30 Days
LOCAL ANESTHETICS - TOPICAL		
<i>lidocaine 4% mucous membrane topical soln</i>	1	QL=50 ML/30 Days
<i>lidocaine 5% patch</i>	1	PA QL=90 EA/30 Days
<i>lidocaine 5% topical ointment</i>	1	PA QL=107 GM/30 Days
<i>lidocaine/prilocaine 2.5-2.5% topical cream</i>	1	QL=30 GM/30 Days
MISC. DERMATOLOGICAL PRODUCTS		
<i>acyclovir 5% topical ointment</i>	1	QL=30 GM/30 Days
<i>ammonium lactate 12% topical cream</i>	1	
<i>ammonium lactate 12% topical lotion</i>	1	
EUCRISA 2% TOPICAL OINTMENT	1	PA QL=100 GM/30 Days
<i>imiquimod 5% topical cream</i>	1	QL=24 EA/30 Days
LITFULO 50MG CAP	1	NDS PA QL=28 EA/28 Days
<i>malathion 0.5% topical lotion</i>	1	QL=59 ML/30 Days
NEMLUVIO 30MG AUTO-INJECTOR	1	NDS PA QL=2 EA/28 Days
<i>permethrin 5% topical cream</i>	1	QL=60 GM/30 Days
<i>pimecrolimus 1% topical cream</i>	1	QL=100 GM/30 Days
PODOFILOX 0.5% TOPICAL SOLN	1	QL=7 ML/30 Days
SELENIUM SULFIDE 2.5% SHAMPOO	1	QL=120 ML/30 Days
<i>tacrolimus 0.03% topical ointment</i>	1	QL=100 GM/30 Days
<i>tacrolimus 0.1% topical ointment</i>	1	QL=100 GM/30 Days
ROSACEA AGENTS		
<i>azelaic acid 15% topical gel</i>	1	QL=50 GM/30 Days
<i>metronidazole 0.75% topical cream</i>	1	QL=45 GM/30 Days
<i>metronidazole 0.75% topical gel</i>	1	QL=45 GM/30 Days
<i>metronidazole 1% topical gel</i>	1	QL=60 GM/30 Days
WOUND CARE PRODUCTS		
SANTYL 250UNIT/GM TOPICAL OINTMENT	1	PA QL=90 GM/30 Days
<i>silver sulfadiazine 1% topical cream</i>	1	
<i>ssd 1% topical cream</i>	1	
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide 125mg tab</i>	1	
<i>acetazolamide 250mg tab</i>	1	
<i>acetazolamide 500mg er cap</i>	1	
<i>methazolamide 25mg tab</i>	1	
<i>methazolamide 50mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DIURETIC COMBINATIONS		
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	1	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	1	
LOOP DIURETICS		
<i>bumetanide 0.25mg/ml inj</i>	1	
<i>bumetanide 0.5mg tab</i>	1	
<i>bumetanide 1mg tab</i>	1	
<i>bumetanide 2mg tab</i>	1	
ENBUMYST 0.5MG/0.1ML NASAL SPRAY	1	NDS QL=12 EA/7 Days
FUROSCIX 80MG/10ML CARTRIDGE	1	NDS QL=8 EA/7 Days
<i>furosemide 10mg/ml inj</i>	1	
FUROSEMIDE 10MG/ML ORAL SOLN	1	
<i>furosemide 20mg tab</i>	1	
<i>furosemide 40mg tab</i>	1	
<i>furosemide 80mg tab</i>	1	
FUROSEMIDE 8MG/ML ORAL SOLN	1	
<i>toremide 100mg tab</i>	1	
<i>toremide 10mg tab</i>	1	
<i>toremide 20mg tab</i>	1	
<i>toremide 5mg tab</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone 25mg tab</i>	1	
<i>chlorthalidone 50mg tab</i>	1	
<i>hydrochlorothiazide 12.5mg cap</i>	1	
<i>hydrochlorothiazide 12.5mg tab</i>	1	
<i>hydrochlorothiazide 25mg tab</i>	1	
<i>hydrochlorothiazide 50mg tab</i>	1	
<i>indapamide 1.25mg tab</i>	1	
<i>indapamide 2.5mg tab</i>	1	
<i>metolazone 10mg tab</i>	1	
<i>metolazone 2.5mg tab</i>	1	
<i>metolazone 5mg tab</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
<i>alendronate sodium 10mg tab</i>	1	QL=30 EA/30 Days
<i>alendronate sodium 35mg tab</i>	1	QL=4 EA/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
<i>alendronate sodium 70mg tab</i>	1	QL=4 EA/28 Days
BOMYNTRA 120MG/1.7ML INJ	1	NDS PA QL=1.70 ML/28 Days
BOMYNTRA 120MG/1.7ML SYRINGE	1	NDS PA QL=1.70 ML/28 Days
CONEXXENCE 60MG/ML SYRINGE	1	ST QL=1 ML/168 Days
<i>ibandronate 150mg tab</i>	1	QL=1 EA/28 Days
JUBBONTI 60MG/ML SYRINGE	1	ST QL=1 ML/168 Days
<i>raloxifene 60mg tab</i>	1	
<i>risedronate sodium 150mg tab</i>	1	QL=1 EA/28 Days
<i>risedronate sodium 30mg tab</i>	1	QL=30 EA/30 Days
<i>risedronate sodium 35mg tab</i>	1	QL=4 EA/28 Days
<i>risedronate sodium 35mg tab pack (12)</i>	1	QL=4 EA/28 Days
<i>risedronate sodium 35mg tab pack (4)</i>	1	QL=4 EA/28 Days
<i>risedronate sodium 5mg tab</i>	1	QL=30 EA/30 Days
<i>salmon calcitonin 200unit/act nasal spray</i>	1	QL=3.70 ML/28 Days
TERIPARATIDE 620MCG/2.48ML PEN INJ	1	NDS QL=2.48 ML/28 Days
TYMLOS 3120MCG/1.56ML PEN INJ	1	NDS QL=1.56 ML/30 Days
WYOST 120MG/1.7ML INJ	1	NDS PA QL=1.70 ML/28 Days
METABOLIC MODIFIERS		
<i>calcitriol 0.25mcg cap</i>	1	
<i>calcitriol 0.5mcg cap</i>	1	
<i>calcitriol 1mcg/ml oral soln</i>	1	
<i>carglumic acid 200mg tab for oral susp</i>	1	NDS PA
<i>cinacalcet 30mg tab</i>	1	QL=60 EA/30 Days
<i>cinacalcet 60mg tab</i>	1	QL=60 EA/30 Days
<i>cinacalcet 90mg tab</i>	1	QL=120 EA/30 Days
CYSTADANE 1GM POWDER FOR ORAL SOLN	1	NDS
DOXERCALCIFEROL 0.5MCG CAP	1	
DOXERCALCIFEROL 1MCG CAP	1	
DOXERCALCIFEROL 2.5MCG CAP	1	
<i>glutamine 5000mg powder for oral soln</i>	1	NDS PA QL=180 EA/30 Days
<i>levocarnitine 100mg/ml oral soln</i>	1	
<i>levocarnitine 330mg tab</i>	1	
<i>paricalcitol 1mcg cap</i>	1	
<i>paricalcitol 2mcg cap</i>	1	
<i>paricalcitol 4mcg cap</i>	1	
REVCovi 2.4MG/1.5ML INJ	1	NDS PA
<i>sapropterin 100mg powder for oral soln</i>	1	NDS PA
<i>sapropterin 100mg tab</i>	1	NDS PA
<i>sapropterin 500mg powder for oral soln</i>	1	NDS PA
<i>sodium phenylbutyrate 3gm/tsp oral powder</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

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>octreotide 1mg/ml inj</i>	1	PA
SIGNIFOR 0.3MG/ML INJ	1	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.6MG/ML INJ	1	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.9MG/ML INJ	1	NDS PA QL=60 ML/30 Days
VASOPRESSIN RECEPTOR ANTAGONISTS		
<i>tolvaptan 15mg tab</i>	1	NDS PA QL=120 EA/30 Days
<i>tolvaptan 15mg tab therapy pack (56)</i>	1	NDS PA QL=56 EA/28 Days
<i>tolvaptan 15mg/30mg tab pack (56)</i>	1	NDS PA QL=56 EA/28 Days
<i>tolvaptan 15mg/45mg tab pack (56)</i>	1	NDS PA QL=56 EA/28 Days
<i>tolvaptan 30mg tab</i>	1	NDS PA QL=120 EA/30 Days
<i>tolvaptan 30mg/60mg tab pack (56)</i>	1	NDS PA QL=56 EA/28 Days
<i>tolvaptan 30mg/90mg tab pack (56)</i>	1	NDS PA QL=56 EA/28 Days
ENDOCRINE MEDICATIONS		
OTHER ENDOCRINE DRUGS		
<i>cabergoline 0.5mg tab</i>	1	
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	1	
<i>desmopressin acetate 0.1mg tab</i>	1	
<i>desmopressin acetate 0.2mg tab</i>	1	
INCRELEX 40MG/4ML INJ	1	NDS PA
KERENDIA 10MG TAB	1	PA QL=30 EA/30 Days
KERENDIA 20MG TAB	1	PA QL=30 EA/30 Days
KERENDIA 40MG TAB	1	PA QL=30 EA/30 Days
NORDITROPIN 10MG/1.5ML PEN INJ	1	NDS PA
NORDITROPIN 15MG/1.5ML PEN INJ	1	NDS PA
NORDITROPIN 5MG/1.5ML PEN INJ	1	NDS PA
OMNITROPE 10MG/1.5ML CARTRIDGE	1	NDS PA
OMNITROPE 5.8MG INJ	1	NDS PA
OMNITROPE 5MG/1.5ML CARTRIDGE	1	NDS PA
SOMAVERT 10MG INJ	1	NDS PA QL=60 EA/30 Days
SOMAVERT 15MG INJ	1	NDS PA QL=60 EA/30 Days
SOMAVERT 20MG INJ	1	NDS PA QL=60 EA/30 Days
SOMAVERT 25MG INJ	1	NDS PA QL=30 EA/30 Days
SOMAVERT 30MG INJ	1	NDS PA QL=30 EA/30 Days
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>abigale 1/0.5mg tab 28-day pack</i>	1	
<i>abigale lo tab 0.5/0.1mg 28-day pack</i>	1	
<i>altavera tab 28-day pack</i>	1	
<i>alyacen 1/35 tab 28-day pack</i>	1	
<i>apri tab 28-day pack</i>	1	
ARANELLE TAB 28-DAY PACK	1	
<i>ashlyna tab 91-day pack</i>	1	QL=91 EA/91 Days
<i>aubra tab 28-day pack</i>	1	
<i>aviane tab 28-day pack</i>	1	
<i>azurette 28-day pack</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>balziva tab 28-day pack</i>	1	
<i>blisovi 21 fe tab 1.5/30 28-day pack</i>	1	
<i>briellyn tab 28-day pack</i>	1	
<i>camreselo tab 91-day pack</i>	1	QL=91 EA/91 Days
<i>cryselle tab 28-day pack</i>	1	
<i>cyred tab 28-day pack</i>	1	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	1	
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	1	
<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	1	QL=1 EA/28 Days
<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	1	QL=1 EA/28 Days
<i>enskyce tab 28-day pack</i>	1	
<i>estarylla tab 28-day pack</i>	1	
<i>estradiol/norethindrone acetate 0.5-0.1mg 28-day pack</i>	1	
<i>estradiol/norethindrone acetate 1-0.5mg 28-day pack</i>	1	
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.02-0.1mg tab 91-day pack</i>	1	QL=91 EA/91 Days
<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>	1	QL=1 EA/28 Days
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg tab 28-day pack</i>	1	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 28-day pack</i>	1	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 91-day pack</i>	1	QL=91 EA/91 Days
<i>ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack</i>	1	
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack</i>	1	
<i>ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25mg-mcg tab 28-day pack</i>	1	
<i>ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35mg-mcg tab 28-day pack</i>	1	
<i>falmina tab 28-day pack</i>	1	
<i>feirza 1.5/30 28-day pack</i>	1	
<i>feirza 1/20 28-day pack</i>	1	
<i>fyavolv 0.0025-0.5mg tab</i>	1	
<i>fyavolv 0.005-1mg tab</i>	1	
<i>hailey fe 1/20 28-day pack</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>iclevia tab 91-day pack</i>	1	QL=91 EA/91 Days
<i>introvale tab 91-day pack</i>	1	QL=91 EA/91 Days
<i>isibloom tab 28-day pack</i>	1	
<i>jaimiess tab 91-day pack</i>	1	QL=91 EA/91 Days
<i>jasmiel tab 28-day pack</i>	1	
<i>jinteli 0.005-1mg tab</i>	1	
<i>juleber tab 28-day pack</i>	1	
<i>junel 1.5/30 tab 21-day pack</i>	1	
<i>junel 1/20 tab 21-day pack</i>	1	
<i>junel fe tab 1.5/30 28-day pack</i>	1	
<i>junel fe tab 1/20 28-day pack</i>	1	
<i>kariva tab 28-day pack</i>	1	
<i>kelnor 1mg-35mcg tab 28-day pack</i>	1	
<i>kurvelo tab 28-day pack</i>	1	
<i>larin 1.5/30 tab 21-day pack</i>	1	
<i>larin 1/20 tab 21-day pack</i>	1	
<i>larin fe tab 1.5/30 28-day pack</i>	1	
<i>larin fe tab 1/20 28-day pack</i>	1	
<i>lessina tab 28-day pack</i>	1	
<i>levonest tab 28-day pack</i>	1	
<i>levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack</i>	1	
<i>levora 0.15/30 tab 28-day pack</i>	1	
<i>lo jaimiess tab 91-day pack</i>	1	QL=91 EA/91 Days
<i>loryna tab 28-day pack</i>	1	
<i>low-ogestrel tab 28-day pack</i>	1	
<i>luizza 1.5/30 tab 21-day pack</i>	1	
<i>luizza 1/20 tab 21-day pack</i>	1	
<i>lutera tab 28-day pack</i>	1	
<i>marlissa tab 28-day pack</i>	1	
<i>microgestin 1.5/30 tab 21-day pack</i>	1	
<i>microgestin 1/20 tab 21-day pack</i>	1	
<i>microgestin fe tab 1.5/30 28-day pack</i>	1	
<i>microgestin fe tab 1/20 28-day pack</i>	1	
<i>mili tab 28-day pack</i>	1	
<i>mimvey 28-day pack</i>	1	
<i>necon 0.5/35 tab 28-day pack</i>	1	
<i>nikki tab 28-day pack</i>	1	
<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	1	QL=3 EA/28 Days
<i>nortrel 0.5/35 tab 28-day pack</i>	1	
<i>nortrel 1/35 tab 21-day pack</i>	1	
<i>nortrel 1/35 tab 28-day pack</i>	1	
<i>nortrel 7/7/7 tab 28-day pack</i>	1	
<i>nylia 1/35 tab 28-day pack</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>nylia 7/7/7 tab 28-day pack</i>	1	
<i>pimtrex tab 28-day pack</i>	1	
<i>portia tab 28-day pack</i>	1	
PREMPHASE 28-DAY PACK	1	
PREMPRO 0.3/1.5MG 28-DAY PACK	1	
PREMPRO 0.45/1.5MG 28-DAY PACK	1	
PREMPRO 0.625/2.5MG 28-DAY PACK	1	
PREMPRO 0.625/5MG 28-DAY PACK	1	
<i>reclipsen tab 28-day pack</i>	1	
<i>setlakin tab 91-day pack</i>	1	QL=91 EA/91 Days
<i>sprintec tab 28-day pack</i>	1	
<i>sronyx tab 28-day pack</i>	1	
<i>syeda tab 28-day pack</i>	1	
<i>tarina fe tab 1/20 28-day pack</i>	1	
<i>tri-estarylla tab 28-day pack</i>	1	
<i>tri-lo- estarylla tab 28-day pack</i>	1	
<i>tri-lo-sprintec tab 28-day pack</i>	1	
<i>tri-mili tab 28-day pack</i>	1	
<i>tri-sprintec tab 28-day pack</i>	1	
<i>tri-vylibra lo tab 28-day pack</i>	1	
<i>tri-vylibra tab 28-day pack</i>	1	
<i>turqoz tab 28-day pack</i>	1	
<i>valtya 1/35 tab 28-day pack</i>	1	
<i>valtya tab 1/50 28-day pack</i>	1	
VELIVET TAB 28-DAY PACK	1	
<i>vestura tab 3-0.02mg 28-day pack</i>	1	
<i>vienva tab 28-day pack</i>	1	
<i>viorele 28-day pack</i>	1	
<i>vyfemla tab 28-day pack</i>	1	
<i>vylibra tab 28-day pack</i>	1	
<i>xulane 150-35mcg/24hr patch</i>	1	QL=3 EA/28 Days
<i>zafemy 150-35mcg/24hr patch</i>	1	QL=3 EA/28 Days
<i>zovia 1mg-35mcg tab 28-day pack</i>	1	
ESTROGENS		
<i>conjugated estrogens 0.3mg tab</i>	1	
<i>conjugated estrogens 0.45mg tab</i>	1	
<i>conjugated estrogens 0.625mg tab</i>	1	
<i>conjugated estrogens 0.9mg tab</i>	1	
<i>conjugated estrogens 1.25mg tab</i>	1	
<i>dotti 0.025mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.0375mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.05mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.075mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>dotti 0.1mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.0025mg/hr weekly patch</i>	1	QL=4 EA/28 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>estradiol 0.01mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.01mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.025mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.025mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.0375mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.0375mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.05mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.05mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.075mg/24hr twice weekly patch</i>	1	QL=8 EA/28 Days
<i>estradiol 0.075mg/24hr weekly patch</i>	1	QL=4 EA/28 Days
<i>estradiol 0.5mg tab</i>	1	
<i>estradiol 1mg tab</i>	1	
<i>estradiol 2mg tab</i>	1	
<i>estradiol valerate 10mg/ml inj</i>	1	
<i>estradiol valerate 20mg/ml inj</i>	1	
<i>estradiol valerate 40mg/ml inj</i>	1	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
<i>ciprofloxacin 250mg tab</i>	1	
CIPROFLOXACIN 2MG/ML INJ	1	
<i>ciprofloxacin 500mg tab</i>	1	
<i>ciprofloxacin 750mg tab</i>	1	
<i>levofloxacin 250mg tab</i>	1	
<i>levofloxacin 25mg/ml oral soln</i>	1	
<i>levofloxacin 500mg tab</i>	1	
<i>levofloxacin 500mg/100ml inj</i>	1	
<i>levofloxacin 750mg tab</i>	1	
<i>levofloxacin 750mg/150ml inj</i>	1	
MOXIFLOXACIN 1.6MG/ML INJ	1	
<i>moxifloxacin 400mg tab</i>	1	
GASTROINTESTINAL AGENTS		
GASTROINTESTINAL AGENTS, OTHER		
CREON 120000-24000-76000UNIT DR CAP	1	
CREON 15000-3000-9500UNIT DR CAP	1	
CREON 180000-36000-114000UNIT DR CAP	1	
CREON 30000-6000-19000UNIT DR CAP	1	
CREON 60000-12000-38000UNIT DR CAP	1	
<i>cromolyn sodium 20mg/ml oral soln</i>	1	
<i>enulose 10gm/15ml oral soln</i>	1	
<i>generlac 10gm/15ml oral soln</i>	1	
<i>metoclopramide 10mg tab</i>	1	
<i>metoclopramide 1mg/ml oral soln</i>	1	
<i>metoclopramide 5mg tab</i>	1	
REZDIFFRA 100MG TAB	1	NDS PA QL=30 EA/30 Days
REZDIFFRA 60MG TAB	1	NDS PA QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
REZDIFFRA 80MG TAB	1	NDS PA QL=30 EA/30 Days
<i>ursodiol 250mg tab</i>	1	
<i>ursodiol 300mg cap</i>	1	
<i>ursodiol 500mg tab</i>	1	
VOWST 30000000UNIT CAP	1	PA QL=12 EA/90 Days
ZENPEP 105000-25000-79000UNIT DR CAP	1	
ZENPEP 14000-3000-10000UNIT DR CAP	1	
ZENPEP 24000-5000-17000UNIT DR CAP	1	
ZENPEP 252600-60000-189600UNIT DR CAP	1	
ZENPEP 40000-126000-168000UNIT DR CAP	1	
ZENPEP 42000-10000-32000UNIT DR CAP	1	
ZENPEP 63000-15000-47000UNIT DR CAP	1	
ZENPEP 84000-20000-63000UNIT DR CAP	1	
GASTROINTESTINAL AGENTS - MISC.		
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium 750mg cap</i>	1	
<i>mesalamine 1200mg dr tab</i>	1	QL=120 EA/30 Days
<i>mesalamine 1gm rectal supp</i>	1	QL=30 EA/30 Days
<i>mesalamine 375mg er cap</i>	1	QL=120 EA/30 Days
MESALAMINE 400MG DR CAP	1	QL=180 EA/30 Days
<i>mesalamine 66.7mg/ml enema</i>	1	QL=1800 ML/30 Days
SKYRIZI 180MG/1.2ML CARTRIDGE	1	PA QL=1.20 ML/56 Days
SKYRIZI 360MG/2.4ML CARTRIDGE	1	PA QL=2.40 ML/56 Days
<i>sulfasalazine 500mg dr tab</i>	1	
<i>sulfasalazine 500mg tab</i>	1	
TREMFYA 200MG/2ML AUTO-INJECTOR	1	NDS PA QL=2 ML/28 Days
TREMFYA 200MG/2ML AUTO-INJECTOR INDUCTION PACK FOR CROHNS (2)	1	NDS PA QL=4 ML/28 Days
TREMFYA 200MG/2ML SYRINGE	1	NDS PA QL=2 ML/28 Days
GENITOURINARY AGENTS		
ANTISPASMODICS, URINARY		
<i>bethanechol chloride 10mg tab</i>	1	
<i>bethanechol chloride 25mg tab</i>	1	
<i>bethanechol chloride 50mg tab</i>	1	
<i>bethanechol chloride 5mg tab</i>	1	
<i>fesoterodine fumarate 4mg er tab</i>	1	QL=30 EA/30 Days
<i>fesoterodine fumarate 8mg er tab</i>	1	QL=30 EA/30 Days
GEMTESA 75MG TAB	1	QL=30 EA/30 Days
MYRBETRIQ 25MG ER TAB	1	QL=30 EA/30 Days
MYRBETRIQ 50MG ER TAB	1	QL=30 EA/30 Days
<i>oxybutynin chloride 10mg er tab</i>	1	
<i>oxybutynin chloride 15mg er tab</i>	1	
<i>oxybutynin chloride 1mg/ml oral soln</i>	1	QL=600 ML/30 Days
<i>oxybutynin chloride 5mg er tab</i>	1	
<i>oxybutynin chloride 5mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>solifenacin succinate 10mg tab</i>	1	
<i>solifenacin succinate 5mg tab</i>	1	
<i>tolterodine tartrate 1mg tab</i>	1	QL=60 EA/30 Days
<i>tolterodine tartrate 2mg er cap</i>	1	QL=30 EA/30 Days
<i>tolterodine tartrate 2mg tab</i>	1	QL=60 EA/30 Days
<i>tolterodine tartrate 4mg er cap</i>	1	QL=30 EA/30 Days
<i>tropium chloride 20mg tab</i>	1	QL=60 EA/30 Days
BENIGN PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	
<i>dutasteride 0.5mg cap</i>	1	QL=30 EA/30 Days
<i>finasteride 5mg tab</i>	1	
<i>silodosin 4mg cap</i>	1	QL=30 EA/30 Days
<i>silodosin 8mg cap</i>	1	QL=30 EA/30 Days
<i>tadalafil 2.5mg tab</i>	1	PA QL=30 EA/30 Days
<i>tadalafil 5mg tab</i>	1	PA QL=30 EA/30 Days
<i>tamsulosin 0.4mg cap</i>	1	
GENITOURINARY AGENTS, OTHER		
CYSTAGON 150MG CAP	1	
CYSTAGON 50MG CAP	1	
<i>potassium citrate 10meq er tab</i>	1	
<i>potassium citrate 15meq er tab</i>	1	
<i>potassium citrate 5meq er tab</i>	1	
<i>sodium chloride 0.9% irrigation soln</i>	1	
GOUT AGENTS		
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	1	
<i>allopurinol 300mg tab</i>	1	
<i>colchicine 0.6mg tab</i>	1	
<i>colchicine/probenecid 0.5-500mg tab</i>	1	
<i>febuxostat 40mg tab</i>	1	ST QL=30 EA/30 Days
<i>febuxostat 80mg tab</i>	1	ST QL=30 EA/30 Days
<i>probenecid 500mg tab</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide 0.5mg cap</i>	1	
<i>anagrelide 1mg cap</i>	1	
<i>aspirin/dipyridamole 25-200mg er cap</i>	1	QL=60 EA/30 Days
<i>cilostazol 100mg tab</i>	1	
<i>cilostazol 50mg tab</i>	1	
<i>clopidogrel 75mg tab</i>	1	
<i>dipyridamole 25mg tab</i>	1	
<i>dipyridamole 50mg tab</i>	1	
<i>dipyridamole 75mg tab</i>	1	
<i>prasugrel 10mg tab</i>	1	QL=30 EA/30 Days
<i>prasugrel 5mg tab</i>	1	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ticagrelor 60mg tab</i>	1	QL=60 EA/30 Days
<i>ticagrelor 90mg tab</i>	1	QL=60 EA/30 Days
HEMATOPOIETIC AGENTS		
HEMATOPOIETIC GROWTH FACTORS		
DOPTELET 10MG SPRINKLE CAP	1	NDS PA QL=60 EA/30 Days
DOPTELET 20MG TAB	1	NDS PA QL=60 EA/30 Days
DOPTELET TAB 40MG DAILY DOSE PACK (10)	1	NDS PA QL=10 EA/5 Days
DOPTELET TAB 60MG DAILY DOSE PACK (15)	1	NDS PA QL=15 EA/5 Days
<i>eltrombopag 12.5mg powder for oral susp</i>	1	NDS PA QL=90 EA/30 Days
<i>eltrombopag 12.5mg tab</i>	1	NDS PA QL=30 EA/30 Days
<i>eltrombopag 25mg powder for oral susp</i>	1	NDS PA QL=180 EA/30 Days
<i>eltrombopag 25mg tab</i>	1	NDS PA QL=30 EA/30 Days
<i>eltrombopag 50mg tab</i>	1	NDS PA QL=60 EA/30 Days
<i>eltrombopag 75mg tab</i>	1	NDS PA QL=60 EA/30 Days
FULPHILA 6MG/0.6ML SYRINGE	1	NDS
NIVESTYM 300MCG/0.5ML SYRINGE	1	NDS
NIVESTYM 300MCG/ML INJ	1	NDS
NIVESTYM 480MCG/0.8ML SYRINGE	1	NDS
NIVESTYM 480MCG/1.6ML INJ	1	NDS
NYVEPRIA 6MG/0.6ML SYRINGE	1	NDS
RETACRIT 10000UNIT/ML INJ	1	PA QL=12 ML/28 Days
RETACRIT 20000UNIT/2ML INJ	1	PA QL=12 ML/28 Days
RETACRIT 20000UNIT/ML INJ	1	PA QL=12 ML/28 Days
RETACRIT 2000UNIT/ML INJ	1	PA QL=12 ML/28 Days
RETACRIT 3000UNIT/ML INJ	1	PA QL=12 ML/28 Days
RETACRIT 40000UNIT/ML INJ	1	PA QL=4 ML/28 Days
RETACRIT 4000UNIT/ML INJ	1	PA QL=12 ML/28 Days
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>tranexamic acid 650mg tab</i>	1	QL=30 EA/5 Days
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)		
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)		
<i>budesonide 3mg dr cap</i>	1	QL=90 EA/30 Days
<i>budesonide 9mg er tab</i>	1	PA QL=30 EA/30 Days
DEXAMETHASONE 0.1MG/ML ORAL SOLN	1	
<i>dexamethasone 0.5mg tab</i>	1	
<i>dexamethasone 0.75mg tab</i>	1	
<i>dexamethasone 1.5mg tab</i>	1	
<i>dexamethasone 1mg tab</i>	1	
<i>dexamethasone 2mg tab</i>	1	
<i>dexamethasone 4mg tab</i>	1	
<i>dexamethasone 6mg tab</i>	1	
<i>fludrocortisone acetate 0.1mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	1	
<i>hydrocortisone 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
hydrocortisone 5mg tab	1	
methylprednisolone 16mg tab	1	PA_BvD
methylprednisolone 32mg tab	1	PA_BvD
methylprednisolone 4mg tab	1	PA_BvD
methylprednisolone 4mg tab pack (21)	1	
methylprednisolone 8mg tab	1	PA_BvD
prednisolone 1mg/ml oral soln	1	PA_BvD
prednisolone 3mg/ml oral soln	1	PA_BvD
prednisolone 5mg/ml oral soln	1	PA_BvD
prednisone 10mg tab	1	PA_BvD
prednisone 10mg tab (21)	1	
prednisone 10mg tab pack (48)	1	
prednisone 1mg tab	1	PA_BvD
PREDNISON 1MG/ML ORAL SOLN	1	PA_BvD
prednisone 2.5mg tab	1	PA_BvD
prednisone 20mg tab	1	PA_BvD
prednisone 50mg tab	1	PA_BvD
prednisone 5mg tab	1	PA_BvD
prednisone 5mg tab pack (21)	1	
prednisone 5mg tab pack (48)	1	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
NON-BARBITURATE HYPNOTICS		
eszopiclone 1mg tab	1	QL=30 EA/30 Days
eszopiclone 2mg tab	1	QL=30 EA/30 Days
eszopiclone 3mg tab	1	QL=30 EA/30 Days
ramelteon 8mg tab	1	QL=30 EA/30 Days
temazepam 15mg cap	1	QL=30 EA/30 Days
temazepam 30mg cap	1	QL=30 EA/30 Days
zaleplon 10mg cap	1	QL=30 EA/30 Days
zaleplon 5mg cap	1	QL=30 EA/30 Days
zolpidem tartrate 10mg tab	1	PA QL=30 EA/30 Days
zolpidem tartrate 12.5mg er tab	1	PA QL=30 EA/30 Days
zolpidem tartrate 5mg tab	1	PA QL=60 EA/30 Days
zolpidem tartrate 6.25mg er tab	1	PA QL=30 EA/30 Days
IMMUNOLOGICAL AGENTS		
ANGIOEDEMA (HAE) AGENTS		
HAEGARDA 2000UNIT INJ	1	NDS PA QL=30 EA/30 Days
HAEGARDA 3000UNIT INJ	1	NDS PA QL=20 EA/30 Days
icatibant 30mg/3ml syringe	1	NDS PA QL=27 ML/30 Days
IMMUNIZING AGENTS, PASSIVE		
GAMMAGARD 10GM INJ	1	NDS PA
GAMMAGARD 10GM/100ML INJ	1	NDS PA
GAMMAGARD 2.5GM/25ML INJ	1	NDS PA
GAMMAGARD 5GM INJ	1	NDS PA
GAMMAGARD 5GM/50ML INJ	1	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
GAMUNEX 1GM/10ML INJ	1	NDS PA
PRIVIGEN 20GM/200ML INJ	1	NDS PA
VACCINES		
ABRYSVO 120MCG/0.5ML INJ	1	QL=1 EA/365 DaysVAC
ACTHIB INJ	1	
ADACEL INJ	1	VAC
ADACEL SYRINGE	1	VAC
AREXVY 120MCG/0.5ML INJ	1	QL=1 EA/999 DaysVAC
BCG LIVE TICE STRAIN 50MG INJ	1	VAC
BEXSERO SYRINGE	1	VAC
BOOSTRIX INJ	1	VAC
BOOSTRIX SYRINGE	1	VAC
DAPTACEL INJ	1	
ENGERIX-B 10MCG/0.5ML SYRINGE	1	PA_BvD VAC
ENGERIX-B 20MCG/ML INJ	1	PA_BvD VAC
ENGERIX-B 20MCG/ML SYRINGE	1	PA_BvD VAC
GARDASIL 9 INJ	1	VAC
GARDASIL 9 SYRINGE	1	VAC
HAVRIX 1440ELU/ML SYRINGE	1	VAC
HAVRIX 720ELU/0.5ML SYRINGE	1	
HEPLISAV-B 20MCG/0.5ML SYRINGE	1	PA_BvD VAC
HIBERIX 10MCG INJ	1	
IMOVAX 2.5UNIT/ML INJ	1	PA_BvD VAC
INFANRIX SYRINGE	1	
IPOL INJ	1	VAC
IXIARO 0.006MG/0.5ML SYRINGE	1	VAC
JYNNEOS 0.5ML INJ	1	PA_BvD VAC
KINRIX SYRINGE	1	
M-M-R II INJ	1	VAC
MENQUADFI INJ	1	VAC
MENVEO INJ	1	VAC
MRESVIA 50MCG/0.5ML SYRINGE	1	QL=.50 ML/999 DaysVAC
PEDIARIX SYRINGE	1	
PEDVAXHIB 7.5MCG/0.5ML INJ	1	
PENBRAYA INJ	1	VAC
PENMENVY INJ	1	VAC
PENTACEL 96-30-68UNIT/ML INJ	1	
PRIORIX INJ	1	VAC
PROQUAD INJ	1	
QUADRACEL INJ	1	
QUADRACEL SYRINGE	1	
RABAVERT 2.5UNIT/ML INJ	1	PA_BvD VAC
RECOMBIVAX 10MCG/ML INJ	1	PA_BvD VAC
RECOMBIVAX 10MCG/ML SYRINGE	1	PA_BvD VAC
RECOMBIVAX 40MCG/ML INJ	1	PA_BvD VAC

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RECOMBIVAX 5MCG/0.5ML INJ	1	PA_BvD VAC
RECOMBIVAX 5MCG/0.5ML SYRINGE	1	PA_BvD VAC
ROTARIX 667000UNIT/ML ORAL SUSP	1	
ROTATEQ ORAL SUSP	1	
SHINGRIX 50MCG/0.5ML INJ	1	QL=2 EA/999 DaysVAC
SHINGRIX 50MCG/0.5ML SYRINGE	1	QL=1 ML/999 DaysVAC
TENIVAC 4-10UNIT/ML INJ	1	PA_BvD VAC
TENIVAC 4-10UNIT/ML SYRINGE	1	PA_BvD VAC
TICOVAC 1.2MCG/0.25ML SYRINGE	1	
TICOVAC 2.4MCG/0.5ML SYRINGE	1	VAC
TRUMENBA SYRINGE	1	VAC
TWINRIX SYRINGE	1	VAC
TYPHIM VI 25MCG/0.5ML INJ	1	VAC
TYPHIM VI 25MCG/0.5ML SYRINGE	1	VAC
VAQTA 25UNIT/0.5ML INJ	1	
VAQTA 25UNIT/0.5ML SYRINGE	1	
VAQTA 50UNIT/ML INJ	1	VAC
VAQTA 50UNIT/ML SYRINGE	1	VAC
VARIVAX 1350PFU/0.5ML INJ	1	VAC
VAXCHORA ORAL SUSP	1	VAC
VIMKUNYA 40MCG/0.8ML SYRINGE	1	VAC
VIVOTIF DR CAP	1	VAC
YF-VAX INJ	1	VAC
LAXATIVES		
LAXATIVE COMBINATIONS		
GAVILYTE-C POWDER FOR ORAL SOLN	1	
<i>gavilyte-g powder for oral soln</i>	1	
<i>gavilyte-n powder for oral soln</i>	1	
<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	1	
<i>peg 3350/electrolyte powder for oral soln</i>	1	
<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	1	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	1	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	1	
SUFLAVE ORAL SOLN PACK	1	
SUTAB 225-188-1479MG TAB	1	
LAXATIVES - MISCELLANEOUS		
<i>constulose 10gm/15ml oral soln</i>	1	
<i>lactulose 667mg/ml oral soln</i>	1	
LINZESS 145MCG CAP	1	QL=30 EA/30 Days
LINZESS 290MCG CAP	1	QL=30 EA/30 Days
LINZESS 72MCG CAP	1	QL=30 EA/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lubiprostone 24mcg cap</i>	1	QL=60 EA/30 Days
<i>lubiprostone 8mcg cap</i>	1	QL=60 EA/30 Days
MOVANTIK 12.5MG TAB	1	PA QL=30 EA/30 Days
MOVANTIK 25MG TAB	1	PA QL=30 EA/30 Days
TRULANCE 3MG TAB	1	QL=30 EA/30 Days
MEDICAL DEVICES AND SUPPLIES		
PARENTERAL THERAPY SUPPLIES		
ALCOHOL SWAB 1X1 (DIABETIC)	1	
GAUZE PAD (2 X 2)	1	
INSULIN PEN NEEDLE	1	
INSULIN SYRINGE	1	
INSULIN SYRINGE (DISP) U-100 0.3ML	1	
INSULIN SYRINGE (DISP) U-100 1/2ML	1	
INSULIN SYRINGE (DISP) U-100 1ML	1	
MIGRAINE PRODUCTS		
MIGRAINE PRODUCTS		
AIMOVIG 140MG/ML AUTO-INJECTOR	1	PA QL=1 ML/30 Days
AIMOVIG 70MG/ML AUTO-INJECTOR	1	PA QL=1 ML/30 Days
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	1	PA QL=16 ML/30 Days
EMGALITY 100MG/ML SYRINGE	1	PA QL=3 ML/30 Days
EMGALITY 120MG/ML AUTO-INJECTOR	1	PA QL=2 ML/30 Days
EMGALITY 120MG/ML SYRINGE	1	PA QL=2 ML/30 Days
UBRELVY 100MG TAB	1	PA QL=16 EA/30 Days
UBRELVY 50MG TAB	1	PA QL=16 EA/30 Days
ZAVZPRET 10MG/ACT NASAL SPRAY	1	PA QL=6 EA/30 Days
SEROTONIN AGONISTS		
<i>naratriptan 1mg tab</i>	1	QL=18 EA/30 Days
<i>naratriptan 2.5mg tab</i>	1	QL=18 EA/30 Days
<i>rizatriptan 10mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 10mg tab</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg odt</i>	1	QL=36 EA/60 Days
<i>rizatriptan 5mg tab</i>	1	QL=36 EA/60 Days
<i>sumatriptan 100mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 20mg/act nasal spray</i>	1	QL=12 EA/30 Days
<i>sumatriptan 25mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 50mg tab</i>	1	QL=18 EA/30 Days
<i>sumatriptan 5mg/act nasal spray</i>	1	QL=12 EA/30 Days
<i>sumatriptan 6mg/0.5ml auto-injector</i>	1	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml inj</i>	1	QL=5 ML/30 Days
<i>zolmitriptan 2.5mg tab</i>	1	QL=18 EA/30 Days
<i>zolmitriptan 5mg tab</i>	1	QL=18 EA/30 Days
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
<i>deferasirox 180mg tab</i>	1	PA
<i>deferasirox 360mg tab</i>	1	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
<i>deferasirox 90mg tab</i>	1	PA
<i>penicillamine 250mg tab</i>	1	NDS
<i>trientine 250mg cap</i>	1	PA QL=240 EA/30 Days
IMMUNOMODULATORS		
<i>lenalidomide 10mg cap</i>	1	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 15mg cap</i>	1	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 2.5mg cap</i>	1	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 20mg cap</i>	1	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 25mg cap</i>	1	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 5mg cap</i>	1	NDS PA_NSO QL=28 EA/28 Days
REZUROCK 200MG TAB	1	NDS PA QL=30 EA/30 Days
THALOMID 100MG CAP	1	NDS QL=120 EA/30 Days
THALOMID 50MG CAP	1	NDS QL=240 EA/30 Days
IMMUNOSUPPRESSIVE AGENTS		
ARCALYST 220MG INJ	1	NDS PA
<i>azathioprine 50mg tab</i>	1	PA_BvD
BENLYSTA 200MG/ML AUTO-INJECTOR	1	NDS PA QL=4 ML/28 Days
BENLYSTA 200MG/ML SYRINGE	1	NDS PA QL=4 ML/28 Days
<i>cyclosporine 100mg cap</i>	1	PA_BvD
<i>cyclosporine 25mg cap</i>	1	PA_BvD
<i>cyclosporine modified 100mg cap</i>	1	PA_BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	1	PA_BvD
<i>cyclosporine modified 25mg cap</i>	1	PA_BvD
<i>cyclosporine modified 50mg cap</i>	1	PA_BvD
ENVARUSUS XR 0.75MG TAB	1	PA_BvD
ENVARUSUS XR 1MG TAB	1	PA_BvD
ENVARUSUS XR 4MG TAB	1	PA_BvD
<i>everolimus 0.25mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>everolimus 0.5mg tab</i>	1	PA_BvD QL=120 EA/30 Days
<i>everolimus 0.75mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>everolimus 1mg tab</i>	1	PA_BvD QL=60 EA/30 Days
<i>mycophenolate mofetil 200mg/ml oral susp</i>	1	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>	1	PA_BvD
<i>mycophenolic acid 360mg dr tab</i>	1	PA_BvD
ORENCIA 125MG/ML AUTO-INJECTOR	1	NDS PA QL=4 ML/28 Days
ORENCIA 125MG/ML SYRINGE	1	NDS PA QL=4 ML/28 Days
ORENCIA 50MG/0.4ML SYRINGE	1	NDS PA QL=1.60 ML/28 Days
ORENCIA 87.5MG/0.7ML SYRINGE	1	NDS PA QL=2.80 ML/28 Days
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	1	PA_BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	1	PA_BvD
<i>sirolimus 0.5mg tab</i>	1	PA_BvD
<i>sirolimus 1mg tab</i>	1	PA_BvD
<i>sirolimus 1mg/ml oral soln</i>	1	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
<i>sirolimus 2mg tab</i>	1	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
TYENNE 162MG/0.9ML AUTO-INJECTOR	1	NDS PA QL=3.60 ML/28 Days
TYENNE 162MG/0.9ML SYRINGE	1	NDS PA QL=3.60 ML/28 Days
POTASSIUM REMOVING AGENTS		
<i>kionex 15gm/60ml oral susp</i>	1	
LOKELMA 10GM POWDER FOR ORAL SUSP	1	PA QL=90 EA/30 Days
LOKELMA 5GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	1	
<i>sodium polystyrene sulfonate 250mg/ml oral susp</i>	1	
<i>sps 15gm/60ml oral susp</i>	1	
VELTASSA 16.8GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
VELTASSA 1GM POWDER FOR ORAL SUSP	1	PA QL=120 EA/30 Days
VELTASSA 25.2GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
VELTASSA 8.4GM POWDER FOR ORAL SUSP	1	PA QL=30 EA/30 Days
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	1	QL=60 ML/30 Days
<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	1	QL=50 ML/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	1	QL=32 GM/30 Days
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	1	QL=30 ML/30 Days
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	1	QL=45 ML/30 Days
<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	1	QL=30.50 GM/30 Days
NUTRIENTS		
MISC. NUTRITIONAL SUBSTANCES		
CLINIMIX 4.25/10 INJ	1	PA_BvD
CLINIMIX 4.25/5 INJ	1	PA_BvD
CLINIMIX 5/15 INJ	1	PA_BvD
CLINIMIX 5/20 INJ	1	PA_BvD
<i>clinisol 15% inj</i>	1	PA_BvD
DEXTROSE 10% INJ	1	PA_BvD
DOJOLVI 100% ORAL SOLN	1	NDS PA
<i>electrolyte-148 inj</i>	1	
GLUCOSE 100MG/ML/SODIUM CHLORIDE 2MG/ML INJ	1	PA_BvD
GLUCOSE 100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ	1	PA_BvD
<i>glucose 50mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.01meq/ml/sodium chloride 4.5mg/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
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml inj</i>	1	
GLUCOSE 50MG/ML/POTASSIUM CHLORIDE 0.02MEQ/ML/SODIUM CHLORIDE 2.25MG/ML INJ	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 9mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.03meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/potassium chloride 0.04meq/ml/sodium chloride 9mg/ml inj</i>	1	
GLUCOSE 50MG/ML/SODIUM CHLORIDE 2MG/ML INJ	1	
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	1	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	1	
GLUCOSE/SODIUM CHLORIDE 25MG/ML-4.5MG/ML INJ	1	
INTRALIPID 20GM/100ML INJ	1	PA_BvD
INTRALIPID 30GM/100ML INJ	1	PA_BvD
KCL/D5W/LR INJ 0.15%	1	
<i>kcl/nacl 20meq-0.45% inj</i>	1	
<i>kcl/nacl 20meq-0.9% inj</i>	1	
<i>kcl/nacl 40meq-9% inj</i>	1	
<i>klor-con 10meq er tab</i>	1	
<i>klor-con 10meq micro er tab</i>	1	
<i>klor-con 15meq micro er tab</i>	1	
<i>klor-con 20meq micro er tab</i>	1	
<i>klor-con 20meq powder for oral soln</i>	1	
KLOR-CON 8MEQ ER TAB	1	
<i>magnesium sulfat 500mg/ml inj</i>	1	
<i>magnesium sulfat 500mg/ml syringe</i>	1	
NUTRILIPID 20GM/100ML INJ	1	PA_BvD
<i>plenamine 15% inj</i>	1	PA_BvD
<i>potassium chloride 1.33meq/ml oral soln</i>	1	
<i>potassium chloride 10meq er cap</i>	1	
<i>potassium chloride 10meq er tab</i>	1	
<i>potassium chloride 10meq micro er tab</i>	1	
POTASSIUM CHLORIDE 10MEQ/100ML INJ	1	
POTASSIUM CHLORIDE 15MEQ ER TAB	1	
<i>potassium chloride 15meq micro er tab</i>	1	
<i>potassium chloride 2.67meq/ml oral soln</i>	1	
<i>potassium chloride 20meq er tab</i>	1	
<i>potassium chloride 20meq micro 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>potassium chloride 20meq powder for oral soln</i>	1	
POTASSIUM CHLORIDE 20MEQ/100ML INJ	1	
<i>potassium chloride 2meq/ml (20ml) inj</i>	1	
<i>potassium chloride 2meq/ml inj</i>	1	
POTASSIUM CHLORIDE 40MEQ/100ML INJ	1	
<i>potassium chloride 8meq er cap</i>	1	
<i>potassium chloride 8meq er tab</i>	1	
PROSOL 20% INJ	1	PA_BvD
<i>sodium chloride 0.45% inj</i>	1	
<i>sodium chloride 0.9% inj</i>	1	
<i>sodium chloride 3% inj</i>	1	
<i>sodium chloride 50mg/ml inj</i>	1	
TPN ELECTROLYTES INJ	1	PA_BvD
TRAVASOL 10% INJ	1	PA_BvD
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPTHALMIC		
BETAXOLOL 0.5% OPTH SOLN	1	
<i>brimonidine tartrate/timolol 0.2-0.5% opth soln</i>	1	
CARTEOLOL 1% OPTH SOLN	1	
<i>dorzolamide/timolol 22.3-6.8mg/ml opth soln</i>	1	
LEVOBUNOLOL 0.5% OPTH SOLN	1	
<i>timolol 0.25% opth gel</i>	1	
<i>timolol 0.25% opth soln</i>	1	
<i>timolol 0.5% opth gel</i>	1	
<i>timolol 0.5% opth soln</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
APRACLONIDINE 0.5% OPTH SOLN	1	
<i>brimonidine tartrate 0.1% opth soln</i>	1	
<i>brimonidine tartrate 0.15% opth soln</i>	1	
<i>brimonidine tartrate 0.2% opth soln</i>	1	
SIMBRINZA 0.2-1% OPTH SUSP	1	QL=16 ML/30 Days
OPHTHALMIC ANTI-INFECTIVES		
BACITRACIN 500UNIT/GM OPTH OINTMENT	1	
BACITRACIN/POLYMYXIN B 0.5-10UNIT/MG OPTH OINTMENT	1	QL=7 GM/7 Days
<i>ciprofloxacin 0.3% opth soln</i>	1	QL=30 ML/30 Days
<i>erythromycin 0.5% opth ointment</i>	1	QL=7 GM/7 Days
<i>gentamicin 0.3% opth soln</i>	1	QL=10 ML/7 Days
<i>moxifloxacin 0.5% opth soln</i>	1	QL=6 ML/7 Days
NATACYN 5% OPTH SUSP	1	QL=15 ML/7 Days
NEOMYCIN/BACITRACIN/POLYMYXIN 5MG-400UNIT-10000UNIT OPTH OINTMENT	1	QL=7 GM/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPTH SOLN	1	QL=10 ML/7 Days
<i>ofloxacin 0.3% opth soln</i>	1	QL=60 ML/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>polymyxin b/trimethoprim 10000 unit/ml-0.1% ophth soln</i>	1	QL=10 ML/7 Days
SULFACETAMIDE SODIUM 10% OPHTH SOLN	1	QL=15 ML/7 Days
<i>tobramycin 0.3% ophth soln</i>	1	QL=30 ML/30 Days
TRIFLURIDINE 1% OPHTH SOLN	1	QL=15 ML/7 Days
XDEMVY 0.25% OPHTH SOLN	1	PA QL=10 ML/42 Days
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPHTH SOLN	1	QL=5 ML/30 Days
ROCKLATAN 0.02-0.005% OPHTH SOLN	1	QL=5 ML/30 Days
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	1	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>	1	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	1	
<i>difluprednate 0.05% ophth susp</i>	1	
<i>fluorometholone 0.1% ophth susp</i>	1	
<i>loteprednol etabonate 0.5% ophth gel</i>	1	
<i>loteprednol etabonate 0.5% ophth susp</i>	1	
NEOMYCIN/POLYMYXIN/BACITRACIN/HYDROCORTISONE 1% OPHTH OINTMENT	1	
<i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>	1	
PREDNISOLONE 1% OPHTH SOLN	1	
<i>prednisolone acetate 1% ophth susp</i>	1	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN	1	
OPHTHALMICS - MISC.		
<i>atropine sulfate 1% ophth soln</i>	1	
<i>azelastine 0.05% ophth soln</i>	1	
CROMOLYN SODIUM 4% OPHTH SOLN	1	
<i>cyclosporine 0.05% ophth susp</i>	1	QL=60 EA/30 Days
CYSTADROPS 0.37% OPHTH SOLN	1	NDS PA QL=20 ML/28 Days
<i>diclofenac sodium 0.1% ophth soln</i>	1	QL=20 ML/365 Days
<i>dorzolamide 2% ophth soln</i>	1	
FLURBIPROFEN SODIUM 0.03% OPHTH SOLN	1	
<i>ketorolac tromethamine 0.4% ophth soln</i>	1	QL=20 ML/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	1	
MIEBO 1.338GM/ML OPHTH SOLN	1	QL=3 ML/30 Days
<i>pilocarpine 1% ophth soln</i>	1	
<i>pilocarpine 2% ophth soln</i>	1	
<i>pilocarpine 4% ophth soln</i>	1	
XIIDRA 5% OPHTH SOLN	1	QL=60 EA/30 Days
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03% ophth soln</i>	1	QL=5 ML/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 ML/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
LUMIGAN 0.01% OPHTH SOLN	1	QL=5 ML/30 Days
<i>travoprost 0.004% ophth soln</i>	1	QL=5 ML/30 Days
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2% otic soln</i>	1	
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	1	QL=7.50 ML/7 Days
<i>fluocinolone acetonide 0.01% otic soln</i>	1	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	1	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	1	
<i>ofloxacin 0.3% otic soln</i>	1	
PENICILLINS		
AMINOPENICILLINS		
AMOXICILLIN 125MG CHEW TAB	1	
<i>amoxicillin 250mg cap</i>	1	
AMOXICILLIN 250MG CHEW TAB	1	
<i>amoxicillin 25mg/ml oral susp</i>	1	
<i>amoxicillin 40mg/ml oral susp</i>	1	
<i>amoxicillin 500mg cap</i>	1	
<i>amoxicillin 500mg tab</i>	1	
<i>amoxicillin 50mg/ml oral susp</i>	1	
<i>amoxicillin 80mg/ml oral susp</i>	1	
<i>amoxicillin 875mg tab</i>	1	
<i>ampicillin 1000mg inj</i>	1	
<i>ampicillin 100mg/ml inj</i>	1	
<i>ampicillin 2000mg inj</i>	1	
<i>ampicillin 500mg cap</i>	1	
NATURAL PENICILLINS		
BICILLIN L-A 1200000UNIT/2ML SYRINGE	1	
BICILLIN L-A 2400000UNIT/4ML SYRINGE	1	
BICILLIN L-A 600000UNIT/ML SYRINGE	1	
<i>penicillin g potassium 1000000unit/ml inj</i>	1	
PENICILLIN G SODIUM 100000UNIT/ML INJ	1	
<i>penicillin v potassium 250mg tab</i>	1	
PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN	1	
<i>penicillin v potassium 500mg tab</i>	1	
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin/clavulanate 250-125mg tab</i>	1	
<i>amoxicillin/clavulanate 500-125mg tab</i>	1	
<i>amoxicillin/clavulanate 875-125mg tab</i>	1	
<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	1	
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	1	

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>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	1	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	1	
<i>ampicillin/sulbactam 1000-500mg inj</i>	1	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	1	
<i>piperacillin/tazobactam 2000-250mg inj</i>	1	
<i>piperacillin/tazobactam 3000-375mg inj</i>	1	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	1	
<i>piperacillin/tazobactam 4000-500mg inj</i>	1	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	
<i>nafcillin 100mg/ml inj</i>	1	
<i>nafcillin 1gm inj</i>	1	
<i>nafcillin 2gm inj</i>	1	
<i>oxacillin 100mg/ml inj</i>	1	
<i>oxacillin 1gm inj</i>	1	
<i>oxacillin 2gm inj</i>	1	
PROGESTINS		
PROGESTINS		
<i>camila 0.35mg tab 28-day pack</i>	1	
<i>deblitane 0.35mg tab 28-day pack</i>	1	
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	1	QL=.65 ML/84 Days
<i>errin 0.35mg tab 28-day pack</i>	1	
<i>gallifrey 5mg tab</i>	1	
<i>heather 0.35mg 28-day pack</i>	1	
<i>incassia 0.35mg tab 28-day pack</i>	1	
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	1	
<i>lyleq 0.35mg tab 28-day pack</i>	1	
<i>lyza 0.35mg tab 28-day pack</i>	1	
<i>medroxyprogesterone acetate 10mg tab</i>	1	
<i>medroxyprogesterone acetate 150mg/ml inj</i>	1	QL=1 ML/90 Days
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	1	QL=1 ML/90 Days
<i>medroxyprogesterone acetate 2.5mg tab</i>	1	
<i>medroxyprogesterone acetate 5mg tab</i>	1	
MEGESTROL ACETATE 125MG/ML ORAL SUSP	1	PA
<i>meleya 0.35mg tab 28-day pack</i>	1	
NEXPLANON 68MG IMPLANT	1	
<i>nora-be 0.35mg tab 28-day pack</i>	1	
<i>norethindrone 0.35mg 28-day pack</i>	1	
<i>norethindrone acetate 5mg tab</i>	1	
<i>orquidea 0.35mg tab 28-day pack</i>	1	
<i>progesterone 100mg cap</i>	1	
<i>progesterone 200mg cap</i>	1	
<i>sharobel 0.35mg tab 28-day pack</i>	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium 333mg dr tab</i>	1	
<i>disulfiram 250mg tab</i>	1	
ANTIDEMENTIA AGENTS		
<i>donepezil 10mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 10mg tab</i>	1	
<i>donepezil 23mg tab</i>	1	QL=30 EA/30 Days
<i>donepezil 5mg odt</i>	1	QL=30 EA/30 Days
<i>donepezil 5mg tab</i>	1	
<i>galantamine 12mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine 4mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine 8mg tab</i>	1	QL=60 EA/30 Days
<i>galantamine hydrobromide 16mg er cap</i>	1	QL=30 EA/30 Days
<i>galantamine hydrobromide 24mg er cap</i>	1	QL=30 EA/30 Days
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	1	QL=200 ML/30 Days
<i>galantamine hydrobromide 8mg er cap</i>	1	QL=30 EA/30 Days
<i>memantine 10mg tab</i>	1	
<i>memantine 14mg er cap</i>	1	QL=30 EA/30 Days
<i>memantine 21mg er cap</i>	1	QL=30 EA/30 Days
<i>memantine 28mg er cap</i>	1	QL=30 EA/30 Days
<i>memantine 2mg/ml oral soln</i>	1	QL=300 ML/30 Days
<i>memantine 5mg tab</i>	1	
<i>memantine 7mg er cap</i>	1	QL=30 EA/30 Days
<i>rivastigmine 1.5mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 13.3mg/24hr patch</i>	1	QL=30 EA/30 Days
<i>rivastigmine 3mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 4.5mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 4.6mg/24hr patch</i>	1	QL=30 EA/30 Days
<i>rivastigmine 6mg cap</i>	1	QL=60 EA/30 Days
<i>rivastigmine 9.5mg/24hr patch</i>	1	QL=30 EA/30 Days
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 30MG ER TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO 36MG ER TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO 42MG ER TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO 48MG ER TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO 6MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO 9MG TAB	1	NDS PA QL=120 EA/30 Days
AUSTEDO XR 12MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 18MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 24MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR 6MG TAB	1	NDS PA QL=30 EA/30 Days
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATIO PACK (28)	1	NDS PA QL=28 EA/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
INGREZZA 40MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 40MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 60MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 60MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 80MG CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA 80MG SPRINKLE CAP	1	NDS PA QL=30 EA/30 Days
INGREZZA CAP THERAPY PACK (28)	1	NDS PA QL=28 EA/28 Days
<i>tetrabenazine 12.5mg tab</i>	1	QL=90 EA/30 Days
<i>tetrabenazine 25mg tab</i>	1	QL=120 EA/30 Days
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	1	NDS QL=1 EA/28 Days
AVONEX 30MCG/0.5ML SYRINGE	1	NDS QL=1 EA/28 Days
BETASERON 0.3MG INJ	1	NDS QL=14 EA/28 Days
<i>dalfampridine 10mg er tab</i>	1	QL=60 EA/30 Days
<i>dimethyl fumarate 120mg dr cap</i>	1	QL=14 EA/7 Days
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	1	QL=60 EA/180 Days
<i>dimethyl fumarate 240mg dr cap</i>	1	QL=60 EA/30 Days
<i>fingolimod 0.5mg cap</i>	1	QL=30 EA/30 Days
<i>glatiramer acetate 20mg/ml syringe</i>	1	QL=30 ML/30 Days
<i>glatiramer acetate 40mg/ml syringe</i>	1	QL=12 ML/28 Days
<i>glatopa 20mg/ml syringe</i>	1	QL=30 ML/30 Days
<i>glatopa 40mg/ml syringe</i>	1	QL=12 ML/28 Days
KESIMPTA 20MG/0.4ML PEN INJ	1	NDS QL=1.20 ML/28 Days
MAYZENT 0.25MG TAB	1	NDS QL=112 EA/28 Days
MAYZENT 1MG TAB	1	NDS QL=30 EA/30 Days
MAYZENT 2MG TAB	1	NDS QL=30 EA/30 Days
MAYZENT TAB STARTER PACK (12)	1	NDS QL=12 EA/28 Days
MAYZENT TAB STARTER PACK (7)	1	QL=7 EA/28 Days
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	1	NDS QL=1 ML/28 Days
PLEGRIDY 125MCG/0.5ML SYRINGE	1	NDS QL=1 ML/28 Days
<i>teriflunomide 14mg tab</i>	1	QL=30 EA/30 Days
<i>teriflunomide 7mg tab</i>	1	QL=30 EA/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
NUEDEXTA 20-10MG CAP	1	PA QL=60 EA/30 Days
PIMOZIDE 1MG TAB	1	
PIMOZIDE 2MG TAB	1	
SMOKING DETERRENENTS		
<i>bupropion 150mg sr (12hr) tab</i>	1	
NICOTROL 10MG/ML NASAL INHALER	1	
<i>varenicline 0.5mg tab</i>	1	QL=56 EA/28 Days
<i>varenicline 0.5mg/1mg first month pack (53)</i>	1	QL=53 EA/28 Days
<i>varenicline 1mg tab</i>	1	QL=56 EA/28 Days
<i>varenicline 1mg tab pack (56)</i>	1	QL=56 EA/28 Days
RESPIRATORY TRACT AGENTS		
ANTI-HISTAMINES		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cyproheptadine 0.4mg/ml oral soln</i>	1	
<i>cyproheptadine 4mg tab</i>	1	
<i>desloratadine 5mg tab</i>	1	
<i>levocetirizine 5mg tab</i>	1	
<i>promethazine 1.25mg/ml oral soln</i>	1	
<i>promethazine 12.5mg tab</i>	1	
<i>promethazine 25mg tab</i>	1	
<i>promethazine 50mg tab</i>	1	
PULMONARY ANTIHYPERTENSIVES		
ADEMPAS 0.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	1	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	1	NDS PA QL=90 EA/30 Days
<i>alyq 20mg tab</i>	1	PA QL=60 EA/30 Days
<i>ambrisentan 10mg tab</i>	1	NDS PA QL=30 EA/30 Days
<i>ambrisentan 5mg tab</i>	1	NDS PA QL=30 EA/30 Days
<i>bosentan 125mg tab</i>	1	NDS PA QL=60 EA/30 Days
<i>bosentan 62.5mg tab</i>	1	NDS PA QL=60 EA/30 Days
OPSUMIT 10MG TAB	1	NDS PA QL=30 EA/30 Days
<i>sildenafil 20mg tab</i>	1	PA QL=360 EA/30 Days
<i>tadalafil 20mg tab</i>	1	PA QL=60 EA/30 Days
WINREVAIR 45MG INJ	1	NDS PA QL=1 EA/21 Days
WINREVAIR 45MG INJ (2 VIAL PACK)	1	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ	1	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ (2 VIAL PACK)	1	NDS PA QL=1 EA/21 Days
RESPIRATORY TRACT AGENTS, OTHER		
<i>acetylcysteine 100mg/ml inh soln</i>	1	PA_BvD
<i>acetylcysteine 200mg/ml inh soln</i>	1	PA_BvD
ALYFTREK 10-50-125MG TAB	1	NDS PA QL=56 EA/28 Days
ALYFTREK 4-20-50MG TAB	1	NDS PA QL=84 EA/28 Days
BRINSUPRI 10MG TAB	1	NDS PA QL=30 EA/30 Days
BRINSUPRI 25MG TAB	1	NDS PA QL=30 EA/30 Days
CAYSTON 75MG/ML INH SOLN	1	PA QL=84 ML/56 Days
KALYDECO 13.4MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
KALYDECO 150MG TAB	1	NDS PA QL=60 EA/30 Days
KALYDECO 25MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
KALYDECO 5.8MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
KALYDECO 50MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
KALYDECO 75MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
OFEV 100MG CAP	1	NDS PA QL=60 EA/30 Days
OFEV 150MG CAP	1	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
ORKAMBI 125-100MG TAB	1	NDS PA QL=112 EA/28 Days
ORKAMBI 125-200MG TAB	1	NDS PA QL=112 EA/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
ORKAMBI 188-150MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
ORKAMBI 94-75MG ORAL GRANULES	1	NDS PA QL=56 EA/28 Days
<i>pirfenidone 267mg cap</i>	1	PA QL=270 EA/30 Days
<i>pirfenidone 267mg tab</i>	1	PA QL=270 EA/30 Days
<i>pirfenidone 801mg tab</i>	1	PA QL=90 EA/30 Days
PROLASTIN 1000MG INJ	1	NDS PA
PULMOZYME 1MG/ML INH SOLN	1	NDS PA BvD QL=150 ML/30 Days
<i>roflumilast 0.5mg tab</i>	1	QL=30 EA/30 Days
<i>roflumilast 250mcg tab</i>	1	QL=28 EA/365 Days
SYMDEKO TAB 4-WEEK PACK (56)	1	NDS PA QL=56 EA/28 Days
SYMDEKO TAB 50-75MG/75MG PACK (56)	1	NDS PA QL=56 EA/28 Days
THEOPHYLLINE 100MG ER TAB	1	
THEOPHYLLINE 200MG ER TAB	1	
<i>theophylline 300mg er tab</i>	1	
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450mg er tab</i>	1	
<i>theophylline 600mg er tab</i>	1	
TRIKAFTA 100-50-75MG/150MG TAB PACK (84)	1	NDS PA QL=84 EA/28 Days
TRIKAFTA 100-50-75MG/75MG ORAL GRANULES PACK (56)	1	NDS PA QL=56 EA/28 Days
TRIKAFTA 50-37.5-25MG/75MG TAB PACK (84)	1	NDS PA QL=84 EA/28 Days
TRIKAFTA 80-40-60MG/59.5MG ORAL GRANULES PACK (56)	1	NDS PA QL=56 EA/28 Days
SLEEP DISORDER AGENTS		
SLEEP DISORDERS, OTHER		
LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
LUMRYZ 6GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
LUMRYZ 9GM GRANULES FOR ORAL SUSP	1	NDS PA QL=30 EA/30 Days
LUMRYZ GRANULES FOR ORAL SUSP 28-DAY STARTER PACK (28)	1	NDS PA QL=28 EA/28 Days
<i>sodium oxybate 500mg/ml oral soln</i>	1	NDS PA QL=540 ML/30 Days
SUNOSI 150MG TAB	1	PA QL=30 EA/30 Days
SUNOSI 75MG TAB	1	PA QL=30 EA/30 Days
SULFONAMIDES		
SULFONAMIDES		
<i>sulfadiazine 500mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 200-40mg/5ml oral susp</i>	1	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
TETRACYCLINES		
TETRACYCLINES		
<i>doxy 100mg inj</i>	1	
<i>doxycycline hyclate 100mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>doxycycline hyclate 100mg inj</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 cap</i>	1	
<i>doxycycline monohydrate 100mg tab</i>	1	
<i>doxycycline monohydrate 50mg cap</i>	1	
<i>doxycycline monohydrate 50mg tab</i>	1	
<i>doxycycline monohydrate 5mg/ml oral susp</i>	1	
<i>doxycycline monohydrate 75mg tab</i>	1	
<i>minocycline 100mg cap</i>	1	
<i>minocycline 50mg cap</i>	1	
<i>minocycline 75mg cap</i>	1	
<i>tetracycline 250mg cap</i>	1	
<i>tetracycline 500mg cap</i>	1	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole 10mg tab</i>	1	
<i>methimazole 5mg tab</i>	1	
<i>propylthiouracil 50mg tab</i>	1	
THYROID HORMONES		
<i>levothyroxine sodium 100mcg tab</i>	1	
<i>levothyroxine sodium 112mcg tab</i>	1	
<i>levothyroxine sodium 125mcg tab</i>	1	
<i>levothyroxine sodium 137mcg tab</i>	1	
<i>levothyroxine sodium 150mcg tab</i>	1	
<i>levothyroxine sodium 175mcg tab</i>	1	
<i>levothyroxine sodium 200mcg tab</i>	1	
<i>levothyroxine sodium 25mcg tab</i>	1	
<i>levothyroxine sodium 300mcg tab</i>	1	
<i>levothyroxine sodium 50mcg tab</i>	1	
<i>levothyroxine sodium 75mcg tab</i>	1	
<i>levothyroxine sodium 88mcg tab</i>	1	
<i>levoxyl 100mcg tab</i>	1	
<i>levoxyl 112mcg tab</i>	1	
<i>levoxyl 125mcg tab</i>	1	
<i>levoxyl 137mcg tab</i>	1	
<i>levoxyl 150mcg tab</i>	1	
<i>levoxyl 175mcg tab</i>	1	
<i>levoxyl 200mcg tab</i>	1	
<i>levoxyl 25mcg tab</i>	1	
<i>levoxyl 50mcg tab</i>	1	
<i>levoxyl 75mcg tab</i>	1	
<i>levoxyl 88mcg tab</i>	1	
<i>liomny 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>liomny 50mcg tab</i>	1	
<i>liomny 5mcg 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	1	
SYNTHROID 112MCG TAB	1	
SYNTHROID 125MCG TAB	1	
SYNTHROID 137MCG TAB	1	
SYNTHROID 150MCG TAB	1	
SYNTHROID 175MCG TAB	1	
SYNTHROID 200MCG TAB	1	
SYNTHROID 25MCG TAB	1	
SYNTHROID 300MCG TAB	1	
SYNTHROID 50MCG TAB	1	
SYNTHROID 75MCG TAB	1	
SYNTHROID 88MCG TAB	1	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>dicyclomine 10mg cap</i>	1	
<i>dicyclomine 20mg tab</i>	1	
<i>dicyclomine 2mg/ml oral soln</i>	1	
<i>glycopyrrolate 1mg tab</i>	1	
<i>glycopyrrolate 2mg tab</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine 200mg tab</i>	1	
<i>cimetidine 300mg tab</i>	1	
<i>cimetidine 400mg tab</i>	1	
<i>cimetidine 800mg tab</i>	1	
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
MISC. ANTI-ULCER		
<i>misoprostol 100mcg tab</i>	1	
<i>misoprostol 200mcg tab</i>	1	
<i>sucralfate 1000mg tab</i>	1	
<i>sucralfate 100mg/ml oral susp</i>	1	
PROTON PUMP INHIBITORS		
<i>esomeprazole 10mg granules for oral susp</i>	1	QL=30 EA/30 Days
<i>esomeprazole 20mg dr cap</i>	1	
<i>esomeprazole 20mg granules for oral susp</i>	1	QL=30 EA/30 Days
<i>esomeprazole 40mg dr cap</i>	1	
<i>esomeprazole 40mg granules for oral susp</i>	1	QL=60 EA/30 Days
<i>lansoprazole 15mg dr cap</i>	1	
<i>lansoprazole 30mg dr cap</i>	1	
<i>omeprazole 10mg dr 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>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	
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<i>clindamycin 2% vaginal cream</i>	1	
<i>metronidazole 0.75% vaginal gel</i>	1	
<i>terconazole 0.4% vaginal cream</i>	1	
<i>terconazole 0.8% vaginal cream</i>	1	
<i>terconazole 80mg vaginal insert</i>	1	
VAGINAL ESTROGENS		
<i>estradiol 0.01% vaginal cream</i>	1	
<i>estradiol 0.01mg vaginal insert</i>	1	
PREMARIN 0.625MG/GM VAGINAL CREAM	1	
<i>yuvafem 10mcg vaginal insert</i>	1	

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>	50	<i>acitretin 17.5mg cap</i>	60	<i>albuterol 108mcg HFA inhaler (6.7gm, Proventil equiv)</i>	15
<i>abacavir 300mg tab</i>	50	<i>acitretin 25mg cap</i>	60	<i>albuterol 108mcg HFA inhaler (8.5gm, Proair equiv)</i>	15
<i>abacavir/lamivudine 600-300mg tab</i>	50	ACTHIB INJ	74	<i>albuterol 5mg/ml (0.5%) inh soln</i>	15
<i>abigale 1/0.5mg tab 28-day pack</i>	65	ACTIMMUNE	43	<i>alclometasone dipropionate 0.05% topical cream</i>	61
<i>abigale lo tab 0.5/0.1mg 28-day pack</i>	65	2000000UNIT/0.5ML INJ		ALCLOMETASONE	61
ABILIFY MAINTENA 300MG INJ	49	<i>acyclovir 200mg cap</i>	53	DIPROPIONATE 0.05% TOPICAL OINTMENT	
ABILIFY MAINTENA 300MG/1.5ML SYRINGE	49	<i>acyclovir 400mg tab</i>	53	ALCOHOL SWAB 1X1 (DIABETIC)	76
ABILIFY MAINTENA 400MG INJ	49	<i>acyclovir 40mg/ml oral susp</i>	53	ALECENSA 150MG CAP	39
ABILIFY MAINTENA 400MG/2ML SYRINGE	49	<i>acyclovir 5% topical ointment</i>	62	<i>alendronate sodium 10mg tab</i>	63
<i>abiraterone acetate 250mg tab</i>	38	<i>acyclovir 50mg/ml inj</i>	53	<i>alendronate sodium 35mg tab</i>	63
<i>abirtega 250mg tab</i>	38	<i>acyclovir 800mg tab</i>	53	<i>alendronate sodium 70mg tab</i>	64
ABRYSVO 120MCG/0.5ML INJ	74	ADACEL INJ	74	<i>alfuzosin 10mg er tab</i>	71
<i>acamprosate calcium 333mg dr tab</i>	84	ADACEL SYRINGE	74	<i>aliskiren 150mg tab</i>	34
<i>acarbose 100mg tab</i>	25	<i>adefovir dipivoxil 10mg tab</i>	52	<i>aliskiren 300mg tab</i>	34
<i>acarbose 25mg tab</i>	25	ADEMPAS 0.5MG TAB	86	<i>allopurinol 100mg tab</i>	71
<i>acarbose 50mg tab</i>	25	ADEMPAS 1.5MG TAB	86	<i>allopurinol 300mg tab</i>	71
<i>accutane 10mg cap</i>	58	ADEMPAS 1MG TAB	86	<i>alosectron 0.5mg tab</i>	28
<i>accutane 20mg cap</i>	58	ADEMPAS 2.5MG TAB	86	<i>alosectron 1mg tab</i>	28
<i>accutane 40mg cap</i>	58	ADEMPAS 2MG TAB	86	<i>alprazolam 0.25mg tab</i>	14
<i>acebutolol 200mg cap</i>	54	ADVAIR 115-21MCG HFA INHALER	15	<i>alprazolam 0.5mg tab</i>	14
<i>acebutolol 400mg cap</i>	54	ADVAIR 230-21MCG HFA INHALER	15	<i>alprazolam 1mg tab</i>	14
<i>acetazolamide 125mg tab</i>	62	ADVAIR 45-21MCG/ACT HFA INHALER	15	<i>alprazolam 2mg tab</i>	14
<i>acetazolamide 250mg tab</i>	62	AIMOVIG 140MG/ML	76	<i>altavera tab 28-day pack</i>	65
<i>acetazolamide 500mg er cap</i>	62	AUTO-INJECTOR		ALUNBRIG 180MG TAB	39
<i>acetic acid 2% otic soln</i>	82	AIMOVIG 70MG/ML	76	ALUNBRIG 30MG TAB	39
<i>acetylcysteine 100mg/ml inh soln</i>	86	AUTO-INJECTOR		ALUNBRIG 90MG TAB	39
<i>acetylcysteine 200mg/ml inh soln</i>	86	AKEEGA 500-100MG TAB	38	ALUNBRIG TAB	39
<i>acitretin 10mg cap</i>	60	AKEEGA 500-50MG TAB	38	INITIATION PACK (30)	
		<i>albendazole 200mg tab</i>	13	ALVESCO 160MCG INHALER	15
		<i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>	15	ALVESCO 80MCG INHALER	15
		<i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>	15		
		<i>albuterol 0.83mg/ml (0.083%) inh soln</i>	15		
		<i>albuterol 1.25mg/3ml neb soln</i>	15		

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>alyacen 1/35 tab 28-day pack</i>	65	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	33	<i>amoxapine 100mg tab</i>	24
ALYFTREK 10-50-125MG TAB	86	<i>medoxomil 10-12.5-40mg tab</i>		<i>amoxapine 150mg tab</i>	24
ALYFTREK 4-20-50MG TAB	86	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	33	<i>amoxapine 25mg tab</i>	24
<i>alyq 20mg tab</i>	86	<i>medoxomil 10-25-40mg tab</i>		<i>amoxapine 50mg tab</i>	24
<i>amantadine 100mg cap</i>	45	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	33	AMOXICILLIN 125MG CHEW TAB	82
<i>amantadine 10mg/ml oral soln</i>	45	<i>medoxomil 5-12.5-20mg tab</i>		<i>amoxicillin 250mg cap</i>	82
<i>ambrisentan 10mg tab</i>	86	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	33	AMOXICILLIN 250MG CHEW TAB	82
<i>ambrisentan 5mg tab</i>	86	<i>medoxomil 5-12.5-40mg tab</i>		<i>amoxicillin 25mg/ml oral susp</i>	82
<i>amikacin 250mg/ml inj</i>	9	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	33	<i>amoxicillin 40mg/ml oral susp</i>	82
<i>amiloride 5mg tab</i>	63	<i>medoxomil 5-12.5-40mg tab</i>		<i>amoxicillin 500mg cap</i>	82
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	63	<i>amlodipine/hydrochlorothiazide/olmesartan</i>	33	<i>amoxicillin 500mg tab</i>	82
<i>amiodarone 100mg tab</i>	56	<i>medoxomil 5-25-40mg tab</i>		<i>amoxicillin 50mg/ml oral susp</i>	82
<i>amiodarone 200mg tab</i>	56	<i>amlodipine/olmesartan</i>	33	<i>amoxicillin 80mg/ml oral susp</i>	82
<i>amiodarone 400mg tab</i>	56	<i>medoxomil 10-20mg tab</i>		<i>amoxicillin 875mg tab</i>	82
<i>amitriptyline 100mg tab</i>	24	<i>amlodipine/olmesartan</i>	33	<i>amoxicillin/clavulanate 250-125mg tab</i>	82
<i>amitriptyline 10mg tab</i>	24	<i>medoxomil 10-40mg tab</i>		<i>amoxicillin/clavulanate 500-125mg tab</i>	82
<i>amitriptyline 150mg tab</i>	24	<i>amlodipine/olmesartan</i>	33	<i>amoxicillin/clavulanate 875-125mg tab</i>	82
<i>amitriptyline 25mg tab</i>	24	<i>medoxomil 5-20mg tab</i>		<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	82
<i>amitriptyline 50mg tab</i>	24	<i>amlodipine/olmesartan</i>	33	<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	82
<i>amitriptyline 75mg tab</i>	24	<i>medoxomil 5-40mg tab</i>		<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	83
<i>amlodipine 10mg tab</i>	55	<i>amlodipine/valsartan 10-160mg tab</i>	33	<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	83
<i>amlodipine 2.5mg tab</i>	55	<i>amlodipine/valsartan 10-320mg tab</i>	33	<i>amphetamines/dextroamphetamine 10mg er cap</i>	8
<i>amlodipine 5mg tab</i>	55	<i>amlodipine/valsartan 5-160mg tab</i>	33	<i>amphetamines/dextroamphetamine 10mg tab</i>	8
<i>amlodipine/benazepril 10-20mg cap</i>	33	<i>amlodipine/valsartan 5-320mg tab</i>	33	<i>amphetamines/dextroamphetamine 12.5mg tab</i>	8
<i>amlodipine/benazepril 10-40mg cap</i>	33	<i>ammonium lactate 12% topical cream</i>	62		
<i>amlodipine/benazepril 2.5-10mg cap</i>	33	<i>ammonium lactate 12% topical lotion</i>	62		
<i>amlodipine/benazepril 5-10mg cap</i>	33	<i>amnestem 10mg cap</i>	58		
<i>amlodipine/benazepril 5-20mg cap</i>	33	<i>amnestem 20mg cap</i>	58		
<i>amlodipine/benazepril 5-40mg cap</i>	33	<i>amnestem 30mg cap</i>	58		
		<i>amnestem 40mg cap</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

<i>amphetamine/dextroamphetamine 15mg er cap</i>	8	<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	29	ARNUITY 50MCG POWDER INHALER	15
<i>amphetamine/dextroamphetamine 15mg tab</i>	8	<i>aprepitant 40mg cap</i>	29	<i>asenapine 10mg sl tab</i>	48
<i>amphetamine/dextroamphetamine 20mg er cap</i>	8	<i>aprepitant 80mg cap</i>	29	<i>asenapine 2.5mg sl tab</i>	48
<i>amphetamine/dextroamphetamine 20mg tab</i>	8	<i>apri tab 28-day pack</i>	65	<i>asenapine 5mg sl tab</i>	48
<i>amphetamine/dextroamphetamine 25mg er cap</i>	8	APTIVUS 250MG CAP	50	<i>ashlyna tab 91-day pack</i>	65
<i>amphetamine/dextroamphetamine 30mg er cap</i>	8	ARANELLE TAB 28-DAY PACK	65	ASMANEX 100MCG HFA INHALER	15
<i>amphetamine/dextroamphetamine 30mg tab</i>	8	ARCALYST 220MG INJ	77	ASMANEX 110MCG (30ACT) TWISTHALER	15
<i>amphetamine/dextroamphetamine 5mg er cap</i>	8	AREXVY 120MCG/0.5ML INJ	74	ASMANEX 200MCG HFA INHALER	15
<i>amphetamine/dextroamphetamine 5mg tab</i>	8	<i>arformoterol tartrate 15mcg/2ml neb soln</i>	16	ASMANEX 220MCG (120ACT) TWISTHALER	15
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	8	ARIKAYCE	9	ASMANEX 220MCG (30ACT) TWISTHALER	15
AMPHOTERICIN B 50MG INJ	29	590MG/8.4ML INH SUSP		ASMANEX 220MCG (60ACT) TWISTHALER	15
<i>amphotericin b liposomal 50mg inj</i>	29	<i>aripiprazole 10mg odt</i>	49	ASMANEX 220MCG (60ACT) TWISTHALER	15
<i>ampicillin 1000mg inj</i>	82	<i>aripiprazole 10mg tab</i>	49	ASMANEX 50MCG HFA INHALER	15
<i>ampicillin 100mg/ml inj</i>	82	<i>aripiprazole 15mg odt</i>	49	<i>aspirin/dipyridamole 25-200mg er cap</i>	71
<i>ampicillin 2000mg inj</i>	82	<i>aripiprazole 15mg tab</i>	49	<i>atazanavir 150mg cap</i>	50
<i>ampicillin 500mg cap</i>	82	<i>aripiprazole 1mg/ml oral soln</i>	49	<i>atazanavir 200mg cap</i>	50
<i>ampicillin/sulbactam 1000-500mg inj</i>	83	<i>aripiprazole 20mg tab</i>	49	<i>atazanavir 300mg cap</i>	50
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	83	<i>aripiprazole 2mg tab</i>	49	<i>atenolol 100mg tab</i>	54
<i>ampicillin/sulbactam 2000-1000mg inj</i>	83	<i>aripiprazole 30mg tab</i>	50	<i>atenolol 25mg tab</i>	54
<i>anagrelide 0.5mg cap</i>	71	<i>aripiprazole 5mg tab</i>	50	<i>atenolol 50mg tab</i>	54
<i>anagrelide 1mg cap</i>	71	ARISTADA	50	<i>atenolol/chlorthalidone 100-25mg tab</i>	33
<i>anastrozole 1mg tab</i>	38	1064MG/3.9ML SYRINGE		<i>atenolol/chlorthalidone 50-25mg tab</i>	33
ANORO ELLIPTA 62.5-25MCG POWDER INHALER	16	SYRINGE		<i>atomoxetine 100mg cap</i>	8
<i>aprepitant 125mg cap</i>	29	ARISTADA	50	<i>atomoxetine 10mg cap</i>	8
		441MG/1.6ML SYRINGE		<i>atomoxetine 18mg cap</i>	8
		ARISTADA	50	<i>atomoxetine 25mg cap</i>	8
		662MG/2.4ML SYRINGE		<i>atomoxetine 40mg cap</i>	8
		ARISTADA	50	<i>atomoxetine 60mg cap</i>	8
		675MG/2.4ML SYRINGE		<i>atomoxetine 80mg cap</i>	8
		ARISTADA	50	<i>atorvastatin 10mg tab</i>	30
		882MG/3.2ML SYRINGE		<i>atorvastatin 20mg tab</i>	30
		<i>armodafinil 150mg tab</i>	8	<i>atorvastatin 40mg tab</i>	30
		<i>armodafinil 200mg tab</i>	8	<i>atorvastatin 80mg tab</i>	30
		<i>armodafinil 250mg tab</i>	8		
		<i>armodafinil 50mg tab</i>	8		
		ARNUITY 100MCG POWDER INHALER	15		
		ARNUITY 200MCG POWDER INHALER	15		

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>atovaquone 750mg/5ml oral susp</i>	35	AYVAKIT 50MG TAB	44	<i>benazepril 10mg tab</i>	31
<i>atovaquone/proguanil 250-100mg tab</i>	36	<i>azathioprine 50mg tab</i>	77	<i>benazepril 20mg tab</i>	31
<i>atovaquone/proguanil 62.5-25mg tab</i>	36	<i>azelaic acid 15% topical gel</i>	62	<i>benazepril 40mg tab</i>	31
<i>atropine sulfate 1% ophth soln</i>	81	<i>azelastine 0.05% ophth soln</i>	81	<i>benazepril 5mg tab</i>	31
<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	28	<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	78	<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	33
ATROVENT 17MCG HFA INHALER	15	<i>azithromycin 20mg/ml oral susp</i>	35	<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	33
ATTRUBY 356MG TAB	57	<i>azithromycin 250mg pack (6)</i>	35	<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	33
<i>aubra tab 28-day pack</i>	65	<i>azithromycin 250mg tab</i>	35	<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	33
AUGTYRO 160MG CAP	39	<i>azithromycin 40mg/ml oral susp</i>	35	BENLYSTA 200MG/ML	77
AUGTYRO 40MG CAP	39	<i>azithromycin 500mg inj</i>	35	AUTO-INJECTOR	77
AUSTEDO 12MG TAB	84	<i>azithromycin 500mg tab</i>	35	BENLYSTA 200MG/ML SYRINGE	77
AUSTEDO 30MG ER TAB	84	<i>azithromycin 500mg tab pack (3)</i>	35	<i>benztropine mesylate 0.5mg tab</i>	45
AUSTEDO 36MG ER TAB	84	<i>azithromycin 600mg tab</i>	35	<i>benztropine mesylate 1mg tab</i>	45
AUSTEDO 42MG ER TAB	84	<i>aztreonam 1gm inj</i>	35	<i>benztropine mesylate 2mg tab</i>	45
AUSTEDO 48MG ER TAB	84	<i>aztreonam 2gm inj</i>	35	BESREMI 500MCG/ML SYRINGE	44
AUSTEDO 6MG TAB	84	<i>azurette 28-day pack</i>	65	<i>betamethasone 0.05% aug topical cream</i>	61
AUSTEDO 9MG TAB	84	B		<i>betamethasone 0.05% aug topical lotion</i>	61
AUSTEDO XR 12MG TAE	84	BACITRACIN	80	<i>betamethasone 0.05% aug topical ointment</i>	61
AUSTEDO XR 18MG TAE	84	500UNIT/GM OPHTH OINTMENT		<i>betamethasone 0.05% topical cream</i>	61
AUSTEDO XR 24MG TAE	84	BACITRACIN/POLYMYXIN B 0.5-10UNIT/MG OPHTH OINTMENT	80	<i>betamethasone 0.05% topical lotion</i>	61
AUSTEDO XR 6MG TAB	84	<i>baclofen 10mg tab</i>	50	<i>betamethasone 0.05% topical ointment</i>	61
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATION PACK (28)	84	<i>baclofen 20mg tab</i>	50	<i>betamethasone 0.1% topical cream</i>	61
AUVELITY 105-45MG ER TAB	21	<i>baclofen 5mg tab</i>	50	BETAMETHASONE 0.1% TOPICAL LOTION	61
<i>aviane tab 28-day pack</i>	65	<i>balsalazide disodium 750mg cap</i>	70	<i>betamethasone 0.1% topical ointment</i>	61
AVMAPKI/FAKZYNJA CO-PACK (66)	39	BALVERSA 3MG TAB	39	BETASERON 0.3MG INJ	85
AVONEX 30MCG/0.5ML	85	BALVERSA 4MG TAB	39		
AUTO-INJECTOR		BALVERSA 5MG TAB	39		
AVONEX 30MCG/0.5ML SYRINGE	85	<i>balziva tab 28-day pack</i>	66		
AYVAKIT 100MG TAB	44	BAQSIMI 3MG/DOSE	25		
AYVAKIT 200MG TAB	44	NASAL POWDER			
AYVAKIT 25MG TAB	44	BCG LIVE TICE STRAIN 50MG INJ	74		
AYVAKIT 300MG TAB	44				

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

BETAXOLOL 0.5% OPHTH SOLN	80	<i>blisovi 21 fe tab 1.5/30</i>	66	<i>brivaracetam 100mg tab</i>	18
<i>betaxolol 10mg tab</i>	54	28-day pack		<i>brivaracetam 10mg tab</i>	18
<i>betaxolol 20mg tab</i>	54	BOMYNTRA	64	<i>brivaracetam 10mg/ml</i>	18
<i>bethanechol chloride</i>	70	120MG/1.7ML INJ		oral soln	
10mg tab		BOMYNTRA	64	<i>brivaracetam 25mg tab</i>	18
<i>bethanechol chloride</i>	70	120MG/1.7ML SYRINGE		<i>brivaracetam 50mg tab</i>	18
25mg tab		BOOSTRIX INJ	74	<i>brivaracetam 75mg tab</i>	18
<i>bethanechol chloride</i>	70	BOOSTRIX SYRINGE	74	<i>bromocriptine 2.5mg tab</i>	45
50mg tab		<i>bosentan 125mg tab</i>	86	<i>bromocriptine 5mg cap</i>	45
<i>bethanechol chloride 5mg</i>	70	<i>bosentan 62.5mg tab</i>	86	BRUKINSA 160MG TAB	39
tab		BOSULIF 100MG CAP	39	<i>budesonide 0.25mg/2ml</i>	15
<i>bexarotene 1% topical gel</i>	60	BOSULIF 100MG TAB	39	inh susp	
<i>bexarotene 75mg cap</i>	44	BOSULIF 400MG TAB	39	<i>budesonide 0.5mg/2ml</i>	15
BEXSERO SYRINGE	74	BOSULIF 500MG TAB	39	inh susp	
<i>bicalutamide 50mg tab</i>	38	BOSULIF 50MG CAP	39	<i>budesonide 1mg/2ml inh</i>	15
BICILLIN L-A	82	BRAFTOVI 75MG CAP	39	susp	
1200000UNIT/2ML		BREO ELLIPTA	16	<i>budesonide 3mg dr cap</i>	72
SYRINGE		100-25MCG POWDER		<i>budesonide 9mg er tab</i>	72
BICILLIN L-A	82	INHALER		<i>budesonide/formoterol</i>	16
2400000UNIT/4ML		BREO ELLIPTA	16	<i>fumarate 160-45mcg</i>	
SYRINGE		200-25MCG POWDER		inhaler	
BICILLIN L-A	82	INHALER		<i>budesonide/formoterol</i>	16
600000UNIT/ML		BREO ELLIPTA	16	<i>fumarate 80-45mcg</i>	
SYRINGE		50-25MCG POWDER		inhaler	
BIKTARVY 30-120-15MG	50	INHALER		<i>bumetanide 0.25mg/ml inj</i>	63
TAB		<i>breyzna 160-4.5mcg/act</i>	16	<i>bumetanide 0.5mg tab</i>	63
BIKTARVY 50-200-25MG	51	inhaler		<i>bumetanide 1mg tab</i>	63
TAB		<i>breyzna 80-4.5mcg/act</i>	16	<i>bumetanide 2mg tab</i>	63
<i>bimatoprost 0.03% ophth</i>	81	inhaler		<i>buprenorphine 10mcg/hr</i>	12
soln		BREZTRI AEROSPHERE	16	weekly patch	
<i>bisoprolol fumarate 10mg</i>	54	160-9-4.8MCG/ACT		<i>buprenorphine 15mcg/hr</i>	12
tab		INHALER		weekly patch	
<i>bisoprolol fumarate 5mg</i>	54	<i>briellyn tab 28-day pack</i>	66	<i>buprenorphine 20mcg/hr</i>	12
tab		<i>brimonidine tartrate</i>	80	weekly patch	
<i>bisoprolol</i>	33	0.1% ophth soln		<i>buprenorphine 2mg sl tab</i>	12
<i>fumarate/hydrochlorothia</i>		<i>brimonidine tartrate</i>	80	<i>buprenorphine 5mcg/hr</i>	12
<i>zide 10-6.25mg tab</i>		0.15% ophth soln		weekly patch	
<i>bisoprolol</i>	33	<i>brimonidine tartrate</i>	80	<i>buprenorphine 7.5mcg/hr</i>	12
<i>fumarate/hydrochlorothia</i>		0.2% ophth soln		weekly patch	
<i>zide 2.5-6.25mg tab</i>		<i>brimonidine</i>	80	<i>buprenorphine 8mg sl tab</i>	12
<i>bisoprolol</i>	33	<i>tartrate/timolol 0.2-0.5%</i>		<i>buprenorphine/naloxone</i>	12
<i>fumarate/hydrochlorothia</i>		ophth soln		12-3mg sl film	
<i>zide 5-6.25mg tab</i>		BRINSUPRI 10MG TAB	86	<i>buprenorphine/naloxone</i>	12
		BRINSUPRI 25MG TAB	86	2-0.5mg sl film	

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>buprenorphine/naloxone</i>	12	<i>camila 0.35mg tab 28-day</i>	83	<i>carbamazepine 300mg er</i>	18
<i>2-0.5mg sl tab</i>		<i>pack</i>		<i>cap</i>	
<i>buprenorphine/naloxone</i>	12	<i>camreselo tab 91-day</i>	66	<i>carbamazepine 400mg er</i>	18
<i>4-1mg sl film</i>		<i>pack</i>		<i>tab</i>	
<i>buprenorphine/naloxone</i>	12	<i>candesartan cilexetil</i>	32	<i>carbidopa 25mg tab</i>	45
<i>8-2mg sl film</i>		<i>16mg tab</i>		<i>carbidopa/entacapone/le</i>	45
<i>buprenorphine/naloxone</i>	12	<i>candesartan cilexetil</i>	32	<i>vodopa 12.5-200-50mg</i>	
<i>8-2mg sl tab</i>		<i>32mg tab</i>		<i>tab</i>	
<i>bupropion 100mg sr</i>	21	<i>candesartan cilexetil 4mg</i>	32	<i>carbidopa/entacapone/le</i>	45
<i>(12hr) tab</i>		<i>tab</i>		<i>vodopa 18.75-200-75mg</i>	
<i>bupropion 100mg tab</i>	21	<i>candesartan cilexetil 8mg</i>	32	<i>tab</i>	
<i>bupropion 150mg sr (12</i>	21	<i>tab</i>		<i>carbidopa/entacapone/le</i>	45
<i>hr) tab</i>		<i>candesartan</i>	33	<i>vodopa 25-200-100mg</i>	
<i>bupropion 150mg sr</i>	85	<i>cilexetil/hydrochlorothiaz</i>		<i>tab</i>	
<i>(12hr) tab</i>		<i>ide 16-12.5mg tab</i>		<i>carbidopa/entacapone/le</i>	45
<i>bupropion 200mg sr</i>	21	<i>candesartan</i>	33	<i>vodopa 31.25-200-125mg</i>	
<i>(12hr) tab</i>		<i>cilexetil/hydrochlorothiaz</i>		<i>tab</i>	
<i>bupropion 75mg tab</i>	21	<i>ide 32-12.5mg tab</i>		<i>carbidopa/entacapone/le</i>	45
<i>bupropion xl 150mg (24</i>	21	<i>candesartan</i>	34	<i>vodopa 37.5-200-150mg</i>	
<i>hr) tab</i>		<i>cilexetil/hydrochlorothiaz</i>		<i>tab</i>	
<i>bupropion xl 300mg</i>	21	<i>ide 32-25mg tab</i>		<i>carbidopa/entacapone/le</i>	45
<i>(24hr) tab</i>		<i>CAPLYTA 10.5MG CAP</i>	46	<i>vodopa 50-200-200mg</i>	
<i>bupirone 10mg tab</i>	13	<i>CAPLYTA 21MG CAP</i>	46	<i>tab</i>	
<i>bupirone 15mg tab</i>	13	<i>CAPLYTA 42MG CAP</i>	46	<i>carbidopa/levodopa</i>	45
<i>bupirone 30mg tab</i>	13	<i>CAPRELSA 100MG TAB</i>	39	<i>10-100mg odt</i>	
<i>bupirone 5mg tab</i>	13	<i>CAPRELSA 300MG TAB</i>	40	<i>carbidopa/levodopa</i>	45
<i>bupirone 7.5mg tab</i>	14	<i>captopril 100mg tab</i>	31	<i>10-100mg tab</i>	
<hr/>					
C		<i>captopril 12.5mg tab</i>	31	<i>carbidopa/levodopa</i>	45
<i>cabergoline 0.5mg tab</i>	65	<i>captopril 25mg tab</i>	31	<i>25-100mg er tab</i>	
<i>CABOMETYX 20MG TAE</i>	39	<i>captopril 50mg tab</i>	31	<i>carbidopa/levodopa</i>	45
<i>CABOMETYX 40MG TAE</i>	39	<i>carbamazepine 100mg</i>	18	<i>25-100mg odt</i>	
<i>CABOMETYX 60MG TAE</i>	39	<i>chew tab</i>		<i>carbidopa/levodopa</i>	45
<i>calcipotriene 0.005%</i>	60	<i>carbamazepine 100mg er</i>	18	<i>25-100mg tab</i>	
<i>topical cream</i>		<i>cap</i>		<i>carbidopa/levodopa</i>	45
<i>calcipotriene 0.005%</i>	60	<i>carbamazepine 100mg er</i>	18	<i>25-250mg odt</i>	
<i>topical ointment</i>		<i>tab</i>		<i>carbidopa/levodopa</i>	45
<i>CALCIPOTRIENE 0.005%</i>	60	<i>carbamazepine 200mg er</i>	18	<i>25-250mg tab</i>	
<i>TOPICAL SOLN</i>		<i>cap</i>		<i>carbidopa/levodopa</i>	45
<i>calcitriol 0.25mcg cap</i>	64	<i>carbamazepine 200mg er</i>	18	<i>50-200mg er tab</i>	
<i>calcitriol 0.5mcg cap</i>	64	<i>tab</i>		<i>carglumic acid 200mg tab</i>	64
<i>calcitriol 1mcg/ml oral</i>	64	<i>carbamazepine 200mg</i>	18	<i>for oral susp</i>	
<i>soln</i>		<i>tab</i>		<i>carisoprodol 350mg tab</i>	50
<i>CALQUENCE 100MG</i>	39	<i>carbamazepine 20mg/ml</i>	18	<i>CARTEOLOL 1% OPHTH</i>	80
<i>TAB</i>		<i>oral susp</i>		<i>SOLN</i>	

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

ALPHABETICAL LISTING OF DRUGS

<i>cartia 120mg er (24hr) cap</i>	55	CEFPODOXIME 20MG/ML ORAL SUSP	58	CHLOROQUINE PHOSPHATE 250MG TAB	36
<i>cartia 180mg er (24hr) cap</i>	55	<i>cefprozil 250mg tab</i>	57	<i>chloroquine phosphate 500mg tab</i>	36
<i>cartia 240mg er (24hr) cap</i>	55	<i>cefprozil 25mg/ml oral susp</i>	57	<i>chlorpromazine 100mg tab</i>	49
<i>cartia 300mg er (24hr) cap</i>	55	<i>cefprozil 500mg tab</i>	57	<i>chlorpromazine 100mg/ml oral soln</i>	49
<i>carvedilol 12.5mg tab</i>	53	<i>cefprozil 50mg/ml oral susp</i>	58	<i>chlorpromazine 10mg tab</i>	49
<i>carvedilol 25mg tab</i>	53	<i>ceftaroline fosamil 400mg inj</i>	35	<i>chlorpromazine 200mg tab</i>	49
<i>carvedilol 3.125mg tab</i>	53	<i>ceftaroline fosamil 600mg inj</i>	35	<i>chlorpromazine 25mg tab</i>	49
<i>carvedilol 6.25mg tab</i>	53	<i>ceftazidime 1gm inj</i>	58	<i>chlorpromazine 30mg/ml oral soln</i>	49
<i>casprofungin acetate 50mg inj</i>	29	CEFTAZIDIME 200MG/ML INJ	58	<i>chlorpromazine 50mg tab</i>	49
<i>casprofungin acetate 70mg inj</i>	29	<i>ceftazidime 2gm inj</i>	58	<i>chlorthalidone 25mg tab</i>	63
CAYSTON 75MG/ML INH SOLN	86	<i>ceftazidime 10gm inj</i>	58	<i>chlorthalidone 50mg tab</i>	63
CEFACTOR 250MG CAP	57	<i>ceftriaxone 1gm inj</i>	58	<i>chlorzoxazone 500mg tab</i>	50
CEFACTOR 500MG CAP	57	<i>ceftriaxone 250mg inj</i>	58	<i>cholestyramine resin (sugar-free) 4gm powder for oral susp</i>	30
<i>cefadroxil 100mg/ml oral susp</i>	57	<i>ceftriaxone 2gm inj</i>	58	<i>cholestyramine resin 4gm powder for oral susp</i>	30
<i>cefadroxil 500mg cap</i>	57	<i>ceftriaxone 500mg inj</i>	58	<i>ciclopirox 0.77% topical cream</i>	59
<i>cefadroxil 50mg/ml oral susp</i>	57	<i>cefuroxime 1500mg inj</i>	58	<i>ciclopirox 0.77% topical gel</i>	59
<i>cefazolin 1000mg inj</i>	57	<i>cefuroxime 250mg tab</i>	58	<i>ciclopirox 0.77% topical lotion</i>	59
<i>cefazolin 200mg/ml inj</i>	57	<i>cefuroxime 500mg tab</i>	58	<i>ciclopirox 1% shampoo</i>	59
<i>cefazolin 500mg inj</i>	57	<i>cefuroxime 750mg inj</i>	58	<i>ciclopirox 8% topical soln</i>	59
<i>cefdinir 25mg/ml oral susp</i>	58	<i>celecoxib 100mg cap</i>	10	CILASTATIN/IMIPENEM 250-250MG INJ	35
<i>cefdinir 300mg cap</i>	58	<i>celecoxib 200mg cap</i>	10	<i>cilastatin/imipenem 500-500mg inj</i>	35
<i>cefdinir 50mg/ml oral susp</i>	58	<i>celecoxib 400mg cap</i>	10	<i>cilostazol 100mg tab</i>	71
<i>cefepime 1000mg inj</i>	35	<i>celecoxib 50mg cap</i>	10	<i>cilostazol 50mg tab</i>	71
<i>cefepime 2000mg inj</i>	35	<i>cephalexin 250mg cap</i>	57	CIMDUO 300-300MG TAB	51
<i>cefixime 400mg cap</i>	58	<i>cephalexin 25mg/ml oral susp</i>	57	<i>cimetidine 200mg tab</i>	89
<i>cefoxitin 1gm inj</i>	57	<i>cephalexin 500mg cap</i>	57	<i>cimetidine 300mg tab</i>	89
<i>cefoxitin 200mg/ml inj</i>	57	<i>cephalexin 50mg/ml oral susp</i>	57	<i>cimetidine 400mg tab</i>	89
<i>cefoxitin 2gm inj</i>	57	<i>cevimeline 30mg cap</i>	58	<i>cimetidine 800mg tab</i>	89
<i>cefpodoxime 100mg tab</i>	58	<i>chlordiazepoxide 10mg cap</i>	14	CIMZIA 200MG INJ	10
CEFPODOXIME 10MG/ML ORAL SUSP	58	<i>chlordiazepoxide 25mg cap</i>	14		
<i>cefpodoxime 200mg tab</i>	58	<i>chlordiazepoxide 5mg cap</i>	14		
		<i>chlorhexidine gluconate 0.12% mouthwash</i>	58		

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

CIMZIA 200MG/ML SYRINGE	10	<i>clindamycin 300mg cap</i>	35	<i>clonazepam 0.125mg odt</i>	17
CIMZIA 200MG/ML SYRINGE STARTER KIT (6)	10	<i>clindamycin 300mg/2ml inj</i>	35	<i>clonazepam 0.25mg odt</i>	17
<i>cinacalcet 30mg tab</i>	64	<i>clindamycin 300mg/50ml inj</i>	35	<i>clonazepam 0.5mg odt</i>	18
<i>cinacalcet 60mg tab</i>	64	<i>clindamycin 600mg/4ml inj</i>	35	<i>clonazepam 0.5mg tab</i>	18
<i>cinacalcet 90mg tab</i>	64	<i>clindamycin 600mg/50ml inj</i>	35	<i>clonazepam 1mg odt</i>	18
<i>ciprofloxacin 0.3% ophthalmic soln</i>	80	<i>clindamycin 75mg cap</i>	35	<i>clonazepam 1mg tab</i>	18
<i>ciprofloxacin 250mg tab</i>	69	<i>clindamycin 75mg/5ml oral soln</i>	35	<i>clonazepam 2mg odt</i>	18
CIPROFLOXACIN 2MG/ML INJ	69	<i>clindamycin 900mg/50ml inj</i>	35	<i>clonazepam 2mg tab</i>	18
<i>ciprofloxacin 500mg tab</i>	69	CLINIMIX 4.25/10 INJ	78	<i>clonidine 0.1mg er tab</i>	8
<i>ciprofloxacin 750mg tab</i>	69	CLINIMIX 4.25/5 INJ	78	<i>clonidine 0.1mg tab</i>	32
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic suspension</i>	82	CLINIMIX 5/15 INJ	78	<i>clonidine 0.1mg/24hr weekly patch</i>	32
<i>cialopram 10mg tab</i>	22	CLINIMIX 5/20 INJ	78	<i>clonidine 0.2mg tab</i>	32
<i>cialopram 20mg tab</i>	22	<i>clinisol 15% inj</i>	78	<i>clonidine 0.2mg/24hr weekly patch</i>	32
<i>cialopram 2mg/ml oral soln</i>	22	<i>clobazam 10mg tab</i>	17	<i>clonidine 0.3mg tab</i>	32
<i>cialopram 40mg tab</i>	22	<i>clobazam 2.5mg/ml oral susp</i>	17	<i>clonidine 0.3mg/24hr weekly patch</i>	32
<i>claravis 10mg cap</i>	59	<i>clobetasol propionate 0.05% shampoo</i>	61	<i>clopidogrel 75mg tab</i>	71
<i>claravis 20mg cap</i>	59	<i>clobetasol propionate 0.05% topical cream</i>	61	<i>clorazepate dipotassium 15mg tab</i>	14
<i>claravis 30mg cap</i>	59	<i>clobetasol propionate 0.05% topical cream</i>	61	<i>clorazepate dipotassium 3.75mg tab</i>	14
<i>claravis 40mg cap</i>	59	<i>clobetasol propionate 0.05% topical e cream</i>	61	<i>clorazepate dipotassium 7.5mg tab</i>	14
<i>clarithromycin 250mg tab</i>	35	<i>clobetasol propionate 0.05% topical foam</i>	61	<i>clotrimazole 1% topical cream</i>	59
CLARITHROMYCIN 25MG/ML ORAL SUSP	35	<i>clobetasol propionate 0.05% topical gel</i>	61	<i>clotrimazole 10mg lozenge</i>	58
<i>clarithromycin 500mg tab</i>	35	<i>clobetasol propionate 0.05% topical lotion</i>	61	<i>clotrimazole/betamethasone 1-0.05% topical cream</i>	59
CLARITHROMYCIN 50MG/ML ORAL SUSP	35	<i>clobetasol propionate 0.05% topical ointment</i>	61	<i>clozapine 100mg odt</i>	48
<i>clindamycin 1% pad</i>	59	<i>clobetasol propionate 0.05% topical soln</i>	61	<i>clozapine 100mg tab</i>	48
<i>clindamycin 1% topical gel (once-daily)</i>	59	<i>clomipramine 25mg cap</i>	24	<i>clozapine 12.5mg odt</i>	48
<i>clindamycin 1% topical gel (twice-daily)</i>	59	<i>clomipramine 50mg cap</i>	24	<i>clozapine 150mg odt</i>	48
<i>clindamycin 1% topical lotion</i>	59	<i>clomipramine 75mg cap</i>	24	<i>clozapine 200mg odt</i>	48
<i>clindamycin 1% topical soln</i>	59			<i>clozapine 200mg tab</i>	48
<i>clindamycin 150mg cap</i>	35			<i>clozapine 25mg odt</i>	48
<i>clindamycin 2% vaginal cream</i>	90			<i>clozapine 25mg tab</i>	48
				<i>clozapine 50mg tab</i>	48
				COARTEM 20-120MG TAB	36
				COBENFY 20-100MG CAP	46

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

COBENFY 20-50MG CAP	46	<i>conjugated estrogens</i>	68	<i>cyclobenzaprine 5mg tab</i>	50
COBENFY 30-125MG CAP	46	<i>0.9mg tab</i>		<i>cyclophosphamide 25mg</i>	37
		<i>conjugated estrogens</i>	68	<i>cap</i>	
COBENFY CAP 28-DAY STARTER KIT PACK (56)	46	<i>1.25mg tab</i>		CYCLOPHOSPHAMIDE 25MG TAB	37
<i>codeine</i>	12	<i>constulose 10gm/15ml oral soln</i>	75	<i>cyclophosphamide 50mg</i>	37
<i>phosphate/acetaminophen 15-300mg tab</i>		COPIKTRA 15MG CAP	40	<i>cap</i>	
CODEINE	12	COPIKTRA 25MG CAP	40	CYCLOPHOSPHAMIDE 50MG TAB	37
PHOSPHATE/ACETAMINOPHEN 2.4-24MG/ML ORAL SOLN		COSENTYX 150MG/ML AUTO-INJECTOR	60	<i>cyclosporine 0.05% ophthalmic susp</i>	81
<i>codeine</i>	12	COSENTYX 150MG/ML SYRINGE	60	<i>cyclosporine 100mg cap</i>	77
<i>phosphate/acetaminophen 30-300mg tab</i>		COSENTYX 75MG/0.5ML SYRINGE	60	<i>cyclosporine 25mg cap</i>	77
<i>codeine</i>	12	COSENTYX UNOREADY 300MG/2ML AUTO-INJECTOR	60	<i>cyclosporine modified 100mg cap</i>	77
<i>phosphate/acetaminophen 60-300mg tab</i>		COTELLIC 20MG TAB	40	<i>cyclosporine modified 100mg/ml oral soln</i>	77
<i>colchicine 0.6mg tab</i>	71	CREON	69	<i>cyclosporine modified 25mg cap</i>	77
<i>colchicine/probenecid 0.5-500mg tab</i>	71	120000-24000-76000UNIT DR CAP		<i>cyclosporine modified 50mg cap</i>	77
<i>colesevelam 625mg tab</i>	30	CREON	69	<i>cyproheptadine 0.4mg/ml oral soln</i>	86
<i>colestipol 1gm tab</i>	30	15000-3000-9500UNIT DR CAP		<i>cyproheptadine 4mg tab</i>	86
<i>colestipol 5000mg granules for oral susp</i>	30	CREON	69	<i>cyred tab 28-day pack</i>	66
<i>colistin 75mg/ml inj</i>	35	180000-36000-114000UNIT DR CAP		CYSTADANE 1GM POWDER FOR ORAL SOLN	64
COMBIVENT 20-100MCG/ACT INHALER	16	CREON	69	CYSTADROPS 0.37% OPTH SOLN	81
COMETRIQ CAP 100MG DAILY DOSE PACK (56)	40	30000-6000-19000UNIT DR CAP		CYSTAGON 150MG CAP	71
COMETRIQ CAP 140MG DAILY DOSE PACK (112)	40	CREON	69	CYSTAGON 50MG CAP	71
COMETRIQ CAP 60MG DAILY DOSE PACK (84)	40	60000-12000-38000UNIT DR CAP			
<i>compro 25mg rectal supp</i>	49	CRESEMBA 186MG CAP	29	D	
CONEXXENCE 60MG/ML SYRINGE	64	CRESEMBA 74.5MG CAP	29	<i>dabigatran etexilate 110mg cap</i>	16
<i>conjugated estrogens 0.3mg tab</i>	68	<i>cromolyn sodium 10mg/ml inh soln</i>	15	<i>dabigatran etexilate 150mg cap</i>	16
<i>conjugated estrogens 0.45mg tab</i>	68	<i>cromolyn sodium 20mg/ml oral soln</i>	69	<i>dabigatran etexilate 75mg cap</i>	16
<i>conjugated estrogens 0.625mg tab</i>	68	CROMOLYN SODIUM 4% OPTH SOLN	81	<i>dalfampridine 10mg er tab</i>	85
		<i>cryselle tab 28-day pack</i>	66	<i>danazol 100mg cap</i>	12
		<i>cyclobenzaprine 10mg tab</i>	50	<i>danazol 200mg cap</i>	12
				<i>danazol 50mg cap</i>	12

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>dantrolene sodium 100mg cap</i>	50	<i>desloratadine 5mg tab</i>	86	<i>dexmethylphenidate 5mg tab</i>	8
<i>dantrolene sodium 25mg cap</i>	50	<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	65	<i>dextroamphetamine sulfate 10mg tab</i>	8
<i>dantrolene sodium 50mg cap</i>	50	<i>desmopressin acetate 0.1mg tab</i>	65	<i>dextroamphetamine sulfate 5mg tab</i>	8
DAPAGLIFLOZIN 10MG TAB	28	<i>desmopressin acetate 0.2mg tab</i>	65	DEXTROSE 10% INJ	78
DAPAGLIFLOZIN 5MG TAB	28	<i>desonide 0.05% topical cream</i>	61	DIACOMIT 250MG CAP	18
<i>dapsone 100mg tab</i>	36	<i>desonide 0.05% topical ointment</i>	61	DIACOMIT 250MG POWDER FOR ORAL SUSP	18
<i>dapsone 25mg tab</i>	36	<i>desoximetasone 0.25% topical cream</i>	61	DIACOMIT 500MG CAP	18
DAPTACEL INJ	74	<i>desoximetasone 0.25% topical ointment</i>	61	DIACOMIT 500MG POWDER FOR ORAL SUSP	18
<i>daptomycin 500mg inj</i>	35	<i>desvenlafaxine succinate 100mg er tab</i>	23	<i>diazepam 10mg tab</i>	14
<i>darunavir 600mg tab</i>	51	<i>desvenlafaxine succinate 25mg er tab</i>	23	<i>diazepam 10mg/2ml rectal gel</i>	18
<i>darunavir 800mg tab</i>	51	<i>desvenlafaxine succinate 50mg er tab</i>	23	<i>diazepam 1mg/ml oral soln</i>	14
<i>dasatinib 100mg tab</i>	40	DEXAMETHASONE 0.1MG/ML ORAL SOLN	72	<i>diazepam 2.5mg/0.5ml rectal gel</i>	18
<i>dasatinib 140mg tab</i>	40	<i>dexamethasone 0.5mg tab</i>	72	<i>diazepam 20mg/4ml rectal gel</i>	18
<i>dasatinib 20mg tab</i>	40	<i>dexamethasone 0.75mg tab</i>	72	<i>diazepam 2mg tab</i>	14
<i>dasatinib 50mg tab</i>	40	<i>dexamethasone 1.5mg tab</i>	72	<i>diazepam 5mg tab</i>	14
<i>dasatinib 70mg tab</i>	40	<i>dexamethasone 1mg tab</i>	72	<i>diazepam 5mg/ml oral soln</i>	14
<i>dasatinib 80mg tab</i>	40	<i>dexamethasone 2mg tab</i>	72	<i>diazoxide 50mg/ml oral susp</i>	25
DAURISMO 100MG TAB	38	<i>dexamethasone 4mg tab</i>	72	<i>diclofenac potassium 50mg tab</i>	10
DAURISMO 25MG TAB	38	<i>dexamethasone 6mg tab</i>	72	<i>diclofenac sodium 0.1% ophth soln</i>	81
<i>deblitane 0.35mg tab 28-day pack</i>	83	DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	81	<i>diclofenac sodium 1.5% topical soln</i>	10
<i>deferasirox 180mg tab</i>	76	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	81	<i>diclofenac sodium 100mg er tab</i>	10
<i>deferasirox 360mg tab</i>	76	<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	81	<i>diclofenac sodium 25mg dr tab</i>	10
<i>deferasirox 90mg tab</i>	77	<i>dexmethylphenidate 10mg tab</i>	8	<i>diclofenac sodium 3% topical gel</i>	60
DELSTRIGO 100-300-300MG TAB	51	<i>dexmethylphenidate 2.5mg tab</i>	8	<i>diclofenac sodium 50mg dr tab</i>	10
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	83				
DESCOVY 120-15MG TAB	51				
DESCOVY 200-25MG TAB	51				
<i>desipramine 100mg tab</i>	24				
<i>desipramine 10mg tab</i>	24				
<i>desipramine 150mg tab</i>	24				
<i>desipramine 25mg tab</i>	24				
<i>desipramine 50mg tab</i>	24				
<i>desipramine 75mg tab</i>	24				

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

ALPHABETICAL LISTING OF DRUGS

<i>diclofenac sodium 75mg dr tab</i>	10	<i>diltiazem 90mg er (12hr) cap</i>	55	DOPTELET TAB 60MG DAILY DOSE PACK (15)	72
<i>dicloxacillin 250mg cap</i>	83	<i>diltiazem 90mg tab</i>	55	<i>dorzolamide 2% ophth soln</i>	81
<i>dicloxacillin 500mg cap</i>	83	<i>dimethyl fumarate 120mg dr cap</i>	85	<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	80
<i>dicyclomine 10mg cap</i>	89	<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	85	<i>dotti 0.025mg/24hr twice weekly patch</i>	68
<i>dicyclomine 20mg tab</i>	89	<i>dimethyl fumarate 240mg dr cap</i>	85	<i>dotti 0.0375mg/24hr twice weekly patch</i>	68
<i>dicyclomine 2mg/ml oral soln</i>	89	<i>dipyridamole 25mg tab</i>	71	<i>dotti 0.05mg/24hr twice weekly patch</i>	68
DIFICID 200MG TAB	35	<i>dipyridamole 50mg tab</i>	71	<i>dotti 0.075mg/24hr twice weekly patch</i>	68
DIFICID 40MG/ML ORAL SUSP	35	<i>dipyridamole 75mg tab</i>	71	<i>dotti 0.1mg/24hr twice weekly patch</i>	68
<i>diflunisal 500mg tab</i>	10	<i>disopyramide 100mg cap</i>	56	DOVATO 50-300MG TAB	51
<i>difluprednate 0.05% ophth susp</i>	81	<i>disopyramide 150mg cap</i>	56	<i>doxazosin 1mg tab</i>	32
<i>digoxin 0.125mg tab</i>	57	<i>disulfiram 250mg tab</i>	84	<i>doxazosin 2mg tab</i>	32
<i>digoxin 0.25mg tab</i>	57	<i>divalproex sodium 125mg dr cap</i>	21	<i>doxazosin 4mg tab</i>	32
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	76	<i>divalproex sodium 125mg dr tab</i>	21	<i>doxazosin 8mg tab</i>	32
DILANTIN 30MG ER CAP	18	<i>divalproex sodium 250mg dr tab</i>	21	<i>doxepin 100mg cap</i>	24
<i>dilt 120mg er (24hr) cap</i>	55	<i>divalproex sodium 250mg er tab</i>	46	<i>doxepin 10mg cap</i>	24
<i>dilt 180mg er (24hr) cap</i>	55	<i>divalproex sodium 500mg dr tab</i>	21	DOXEPIN 10MG/ML ORAL SOLN	
<i>dilt 240mg er (24hr) cap</i>	55	<i>divalproex sodium 500mg er tab</i>	46	<i>doxepin 150mg cap</i>	24
<i>diltiazem 120mg er (12hr) cap</i>	55	<i>dofetilide 0.125mg cap</i>	56	<i>doxepin 25mg cap</i>	24
<i>diltiazem 120mg er (24hr) cap</i>	55	<i>dofetilide 0.25mg cap</i>	56	<i>doxepin 50mg cap</i>	24
<i>diltiazem 120mg tab</i>	55	<i>dofetilide 0.5mg cap</i>	56	<i>doxepin 75mg cap</i>	24
<i>diltiazem 180mg er (24hr) cap</i>	55	DOJOLVI 100% ORAL SOLN	78	DOXERCALCIFEROL 0.5MCG CAP	64
<i>diltiazem 240mg er (24hr) cap</i>	55	<i>donepezil 10mg odt</i>	84	DOXERCALCIFEROL 1MCG CAP	64
<i>diltiazem 300mg er (24hr) cap</i>	55	<i>donepezil 10mg tab</i>	84	DOXERCALCIFEROL 2.5MCG CAP	64
<i>diltiazem 30mg tab</i>	55	<i>donepezil 23mg tab</i>	84	<i>doxy 100mg inj</i>	87
<i>diltiazem 360mg er (24hr) cap</i>	55	<i>donepezil 5mg odt</i>	84	<i>doxycycline hyclate 100mg cap</i>	87
<i>diltiazem 420mg er (24hr) cap</i>	55	<i>donepezil 5mg tab</i>	84	<i>doxycycline hyclate 100mg inj</i>	88
<i>diltiazem 60mg er (12hr) cap</i>	55	DOPTELET 10MG SPRINKLE CAP	72	<i>doxycycline hyclate 100mg tab</i>	88
<i>diltiazem 60mg tab</i>	55	DOPTELET 20MG TAB	72	<i>doxycycline hyclate 20mg tab</i>	88
		DOPTELET TAB 40MG	72		
		DAILY DOSE PACK (10)			

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>doxycycline hyclate 50mg cap</i>	88	DULERA 50-5MCG INHALER	16	ELIQUIS 5MG 30-DAY STARTER PACK (74)	16
<i>doxycycline monohydrate 100mg cap</i>	88	<i>duloxetine 20mg dr cap</i>	23	ELIQUIS 5MG TAB	16
<i>doxycycline monohydrate 100mg tab</i>	88	<i>duloxetine 30mg dr cap</i>	23	<i>eltrombopag 12.5mg powder for oral susp</i>	72
<i>doxycycline monohydrate 50mg cap</i>	88	DUPIXENT 200MG/1.14ML AUTO-INJECTOR	14	<i>eltrombopag 12.5mg tab</i>	72
<i>doxycycline monohydrate 50mg tab</i>	88	DUPIXENT 200MG/1.14ML SYRINGE	14	<i>eltrombopag 25mg powder for oral susp</i>	72
<i>doxycycline monohydrate 5mg/ml oral susp</i>	88	DUPIXENT 300MG/2ML SYRINGE	14	<i>eltrombopag 25mg tab</i>	72
<i>doxycycline monohydrate 75mg tab</i>	88	AUTO-INJECTOR DUPIXENT 300MG/2ML SYRINGE	14	<i>eltrombopag 50mg tab</i>	72
DRIZALMA 20MG DR SPRINKLE CAP	23	<i>dutasteride 0.5mg cap</i>	71	<i>eltrombopag 75mg tab</i>	72
DRIZALMA 30MG DR SPRINKLE CAP	23	E		<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	66
DRIZALMA 40MG DR SPRINKLE CAP	23	<i>econazole nitrate 1% topical cream</i>	59	EMGALITY 100MG/ML SYRINGE	76
DRIZALMA 60MG DR SPRINKLE CAP	23	EDURANT 2.5MG TAB FOR ORAL SUSP	51	EMGALITY 120MG/ML AUTO-INJECTOR	76
<i>dronabinol 10mg cap</i>	29	<i>efavirenz 600mg tab</i>	51	EMGALITY 120MG/ML SYRINGE	76
<i>dronabinol 2.5mg cap</i>	29	<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	51	EMSAM 12MG/24HR PATCH	22
<i>dronabinol 5mg cap</i>	29	EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE	51	EMSAM 6MG/24HR PATCH	22
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	66	400-300-300MG TAB		EMSAM 9MG/24HR PATCH	22
<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	66	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	51	<i>emtricitabine 200mg cap</i>	51
DROXIA 200MG CAP	44	<i>electrolyte-148 inj</i>	78	<i>emtricitabine/rilpivirine/tenofovir disoproxil fumarate 200-25-300mg tab</i>	51
DROXIA 300MG CAP	44	ELIGARD 22.5MG SYRINGE	38	<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	51
DROXIA 400MG CAP	44	ELIGARD 30MG SYRINGE	38	<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	51
<i>droxidopa 100mg cap</i>	56	ELIGARD 45MG SYRINGE	38	<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	51
<i>droxidopa 200mg cap</i>	56	ELIGARD 7.5MG SYRINGE	38	<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	51
<i>droxidopa 300mg cap</i>	56	ELIQUIS 2.5MG TAB	16		
DULERA 100-5MCG INHALER	16				
DULERA 200-5MCG INHALER	16				

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

EMTRIVA 10MG/ML ORAL SOLN	51	<i>enoxaparin sodium</i> 30mg/0.3ml syringe	17	<i>erythromycin 0.5% ophth</i> <i>ointment</i>	80
<i>enalapril maleate 10mg</i> <i>tab</i>	31	<i>enoxaparin sodium</i> 40mg/0.4ml syringe	17	ERYTHROMYCIN 2% TOPICAL GEL	59
<i>enalapril maleate 2.5mg</i> <i>tab</i>	31	<i>enoxaparin sodium</i> 60mg/0.6ml syringe	17	<i>erythromycin 2% topical</i> <i>soln</i>	59
<i>enalapril maleate 20mg</i> <i>tab</i>	31	<i>enoxaparin sodium</i> 80mg/0.8ml syringe	17	<i>erythromycin 250mg dr</i> <i>tab</i>	35
<i>enalapril maleate 5mg</i> <i>tab</i>	31	ENSACOVE 100MG CAP	40	<i>erythromycin 250mg tab</i>	35
<i>enalapril</i>	34	ENSACOVE 25MG CAP	40	<i>erythromycin 333mg dr</i> <i>tab</i>	35
<i>maleate/hydrochlorothiaz</i> <i>ide 10-25mg tab</i>	34	<i>enskyce tab 28-day pack</i>	66	<i>erythromycin 500mg dr</i> <i>tab</i>	35
<i>enalapril</i>	34	<i>entacapone 200mg tab</i>	45	<i>erythromycin 500mg tab</i>	35
<i>maleate/hydrochlorothiaz</i> <i>ide 5-12.5mg tab</i>	34	<i>entecavir 0.5mg tab</i>	52	<i>escitalopram 10mg tab</i>	22
ENBREL 25MG/0.5ML INJ	10	<i>entecavir 1mg tab</i>	52	<i>escitalopram 1mg/ml oral</i> <i>soln</i>	22
ENBREL 25MG/0.5ML SYRINGE	10	ENTRESTO 15-16MG ORAL PELLETT	57	<i>escitalopram 20mg tab</i>	22
ENBREL 50MG/ML AUTO-INJECTOR	10	ENTRESTO 6-6MG ORAL PELLET	57	<i>escitalopram 5mg tab</i>	22
ENBREL 50MG/ML CARTRIDGE	10	<i>enulose 10gm/15ml oral</i> <i>soln</i>	69	<i>eslicarbazepine acetate</i> <i>200mg tab</i>	18
ENBREL 50MG/ML SYRINGE	10	ENVARUSUS XR 0.75MG TAB	77	<i>eslicarbazepine acetate</i> <i>400mg tab</i>	18
ENBUMYST 0.5MG/0.1ML NASAL SPRAY	63	ENVARUSUS XR 1MG TAE	77	<i>eslicarbazepine acetate</i> <i>600mg tab</i>	19
ENGERIX-B 10MCG/0.5ML SYRINGE	74	ENVARUSUS XR 4MG TAE	77	<i>eslicarbazepine acetate</i> <i>800mg tab</i>	19
ENGERIX-B 20MCG/ML INJ	74	EPIDIOLEX 100MG/ML ORAL SOLN	18	<i>esomeprazole 10mg</i> <i>granules for oral susp</i>	89
ENGERIX-B 20MCG/ML SYRINGE	74	<i>epinephrine</i> 0.15mg/0.3ml <i>auto-injector (2pack)</i>	16	<i>esomeprazole 20mg dr</i> <i>cap</i>	89
<i>enilloring</i> 0.120-0.015mg/24hr <i>vaginal system</i>	66	<i>epinephrine 0.3mg/0.3ml</i> <i>auto-injector (2pack)</i>	16	<i>esomeprazole 20mg</i> <i>granules for oral susp</i>	89
<i>enoxaparin sodium</i> 100mg/1ml syringe	16	<i>eplerenone 25mg tab</i>	34	<i>esomeprazole 40mg dr</i> <i>cap</i>	89
<i>enoxaparin sodium</i> 120mg/0.8ml syringe	16	<i>eplerenone 50mg tab</i>	34	<i>esomeprazole 40mg</i> <i>granules for oral susp</i>	89
<i>enoxaparin sodium</i> 150mg/1ml syringe	16	ERIVEDGE 150MG CAP	38	<i>estarylla tab 28-day pack</i>	66
		ERLEADA 240MG TAB	38	<i>estradiol 0.0025mg/hr</i> <i>weekly patch</i>	68
		ERLEADA 60MG TAB	38	<i>estradiol 0.01% vaginal</i> <i>cream</i>	90
		<i>erlotinib 100mg tab</i>	38	<i>estradiol 0.01mg vaginal</i> <i>insert</i>	90
		<i>erlotinib 150mg tab</i>	38		
		<i>erlotinib 25mg tab</i>	38		
		<i>errin 0.35mg tab 28-day</i> <i>pack</i>	83		
		<i>ertapenem 1gm inj</i>	35		
		ERY 2% PAD	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

<i>falmina tab 28-day pack</i>	66	<i>fenofibric acid 45mg dr cap</i>	30	<i>fluconazole 400mg/200ml inj</i>	29
<i>famciclovir 125mg tab</i>	53	<i>fentanyl 100mcg/hr patch</i>	11	<i>fluconazole 40mg/ml oral susp</i>	29
<i>famciclovir 250mg tab</i>	53	<i>fentanyl 12mcg/hr patch</i>	11	<i>fluconazole 50mg tab</i>	29
<i>famciclovir 500mg tab</i>	53	<i>fentanyl 25mcg/hr patch</i>	11	<i>flucytosine 250mg cap</i>	29
<i>famotidine 20mg tab</i>	89	<i>fentanyl 50mcg/hr patch</i>	11	<i>flucytosine 500mg cap</i>	29
<i>famotidine 40mg tab</i>	89	<i>fentanyl 75mcg/hr patch</i>	11	<i>fludrocortisone acetate 0.1mg tab</i>	72
FANAPT 10MG TAB	47	<i>fesoterodine fumarate 4mg er tab</i>	70	<i>flunisolide 25% (25mcg/act) nasal inhaler</i>	78
FANAPT 12MG TAB	47	<i>fesoterodine fumarate 8mg er tab</i>	70	<i>fluocinolone acetamide 0.01% otic soln</i>	82
FANAPT 1MG TAB	47	FETZIMA 120MG ER CAP	23	<i>fluocinolone acetamide 0.01% topical cream</i>	61
FANAPT 2MG TAB	47	FETZIMA 20MG ER CAP	23	<i>fluocinolone acetamide 0.01% topical cream</i>	61
FANAPT 4MG TAB	47	FETZIMA 40MG ER CAP	23	<i>fluocinolone acetamide 0.01% topical oil</i>	61
FANAPT 6MG TAB	47	FETZIMA 80MG ER CAP	23	<i>fluocinolone acetamide 0.01% topical soln</i>	61
FANAPT 8MG TAB	47	FETZIMA ER CAP	23	<i>fluocinolone acetamide 0.025% topical cream</i>	61
FANAPT TAB TITRATION PACK (8)	47	TITRATION PACK (28)	26	<i>fluocinolone acetamide 0.025% topical ointment</i>	61
FARXIGA 10MG TAB	28	FIASP 100UNIT/ML CARTRIDGE	26	<i>fluocinonide 0.05% topical cream</i>	61
FARXIGA 5MG TAB	28	FIASP 100UNIT/ML INJ	26	<i>fluocinonide 0.05% topical cream</i>	61
FASENRA 10MG/0.5ML SYRINGE	14	FIASP 100UNIT/ML PEN INJ (3ML)	26	<i>fluocinonide 0.05% topical cream</i>	61
FASENRA 30MG/ML AUTO-INJECTOR	14	<i>fidaxomicin 200mg tab</i>	35	<i>fluocinonide 0.05% topical e cream</i>	61
FASENRA 30MG/ML SYRINGE	14	<i>finasteride 5mg tab</i>	71	<i>fluocinonide 0.05% topical ointment</i>	61
<i>febuxostat 40mg tab</i>	71	<i> fingolimod 0.5mg cap</i>	85	<i>fluocinonide 0.05% topical soln</i>	61
<i>febuxostat 80mg tab</i>	71	FINTEPLA 2.2MG/ML ORAL SOLN	19	<i>fluocinonide 0.1% topical cream</i>	61
<i>feirza 1.5/30 28-day pack</i>	66	FIRMAGON 120MG INJ	38	<i>fluorometholone 0.1% ophth susp</i>	81
<i>feirza 1/20 28-day pack</i>	66	FIRMAGON 80MG INJ	38	FLUOROURACIL 2% TOPICAL SOLN	60
<i>felbamate 120mg/ml oral susp</i>	21	<i>flecainide acetate 100mg tab</i>	56	<i>fluorouracil 5% topical cream</i>	60
<i>felbamate 400mg tab</i>	21	<i>flecainide acetate 150mg tab</i>	56	<i>fluorouracil 5% topical soln</i>	60
<i>felbamate 600mg tab</i>	21	<i>fluconazole 100mg tab</i>	29	<i>fluoxetine 10mg cap</i>	22
<i>felodipine 10mg er tab</i>	55	<i>fluconazole 10mg/ml oral susp</i>	29	<i>fluoxetine 20mg cap</i>	22
<i>felodipine 2.5mg er tab</i>	55	<i>fluconazole 150mg tab</i>	29	<i>fluoxetine 40mg cap</i>	22
<i>felodipine 5mg er tab</i>	55	<i>fluconazole 200mg tab</i>	29		
<i>fenofibrate 134mg cap</i>	30	<i>fluconazole 200mg/100ml inj</i>	29		
<i>fenofibrate 145mg tab</i>	30				
<i>fenofibrate 160mg tab</i>	30				
<i>fenofibrate 200mg cap</i>	30				
<i>fenofibrate 43mg cap</i>	30				
<i>fenofibrate 48mg tab</i>	30				
<i>fenofibrate 54mg tab</i>	30				
<i>fenofibrate 67mg cap</i>	30				
<i>fenofibric acid 135mg dr cap</i>	30				

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>fluoxetine 4mg/ml oral soln</i>	22	<i>fondaparinux sodium 10mg/0.8ml syringe</i>	17	<i>gabapentin 400mg cap</i>	19
<i>fluoxetine 60mg tab</i>	22	<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	17	<i>gabapentin 50mg/ml oral soln</i>	19
FLUPHENAZINE	49	<i>fondaparinux sodium 5mg/0.4ml syringe</i>	17	<i>gabapentin 600mg tab (Neurontin equiv)</i>	19
0.5MG/ML ORAL SOLN		<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	17	<i>gabapentin 800mg tab</i>	19
<i>fluphenazine 10mg tab</i>	49	<i>fosamprenavir 700mg tab</i>	51	<i>galantamine 12mg tab</i>	84
<i>fluphenazine 1mg tab</i>	49	<i>fosfomycin 3gm powder for oral soln</i>	36	<i>galantamine 4mg tab</i>	84
<i>fluphenazine 2.5mg tab</i>	49	<i>fosinopril sodium 10mg tab</i>	31	<i>galantamine 8mg tab</i>	84
FLUPHENAZINE	49	<i>fosinopril sodium 20mg tab</i>	31	<i>galantamine hydrobromide 16mg er cap</i>	84
2.5MG/ML INJ		<i>fosinopril sodium 40mg tab</i>	31	<i>galantamine hydrobromide 24mg er cap</i>	84
<i>fluphenazine 5mg tab</i>	49	<i>fosinopril sodium 40mg tab</i>	31	GALANTAMINE	84
FLUPHENAZINE	49	<i>fosinopril sodium 40mg tab</i>	31	HYDROBROMIDE	
5MG/ML ORAL SOLN		<i>fosinopril sodium 40mg tab</i>	31	4MG/ML ORAL SOLN	
<i>fluphenazine decanoate 25mg/ml inj</i>	49	<i>fosinopril sodium 40mg tab</i>	31	<i>galantamine hydrobromide 8mg er cap</i>	84
FLURBIPROFEN 100MG TAB	10	<i>fosinopril sodium 40mg tab</i>	31	<i>gallifrey 5mg tab</i>	83
FLURBIPROFEN	81	<i>fosinopril sodium 40mg tab</i>	31	GAMMAGARD 10GM INJ	73
SODIUM 0.03% OPHTH SOLN		<i>fosinopril sodium 40mg tab</i>	31	GAMMAGARD 10GM/100ML INJ	73
<i>fluticasone propionate 0.005% topical ointment</i>	61	<i>fosinopril sodium 40mg tab</i>	31	GAMMAGARD 2.5GM/25ML INJ	73
<i>fluticasone propionate 0.05% topical cream</i>	61	<i>fosinopril sodium 40mg tab</i>	31	GAMMAGARD 5GM INJ	73
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	78	<i>fosinopril sodium 40mg tab</i>	31	GAMMAGARD 5GM/50ML INJ	73
<i>fluticasone propionate/salmeterol 100-50mcg/act powder inhaler</i>	16	<i>fosinopril sodium 40mg tab</i>	31	GAMMAGARD 5GM/50ML INJ	73
<i>fluticasone propionate/salmeterol 250-50mcg/act powder inhaler</i>	16	<i>fosinopril sodium 40mg tab</i>	31	GAMUNEX 1GM/10ML INJ	74
<i>fluticasone propionate/salmeterol 500-50mcg/act powder inhaler</i>	16	<i>fosinopril sodium 40mg tab</i>	31	GARDASIL 9 INJ	74
<i>fluvoxamine maleate 100mg tab</i>	22	<i>fosinopril sodium 40mg tab</i>	31	GARDASIL 9 SYRINGE	74
<i>fluvoxamine maleate 25mg tab</i>	22	<i>fosinopril sodium 40mg tab</i>	31	GAUZE PAD (2 X 2)	76
<i>fluvoxamine maleate 50mg tab</i>	22	<i>fosinopril sodium 40mg tab</i>	31	GAVILYTE-C POWDER FOR ORAL SOLN	75
		<i>fyavolv 0.0025-0.5mg tab</i>	66	<i>gavilyte-g powder for oral soln</i>	75
		<i>fyavolv 0.005-1mg tab</i>	66	<i>gavilyte-n powder for oral soln</i>	75
		G		GAVRETO 100MG CAP	40
		<i>gabapentin 100mg cap</i>	19	<i>gefitinib 250mg tab</i>	38
		<i>gabapentin 300mg cap</i>	19	<i>gemfibrozil 600mg tab</i>	30

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

GEMTESA 75MG TAB	70	GLUCOSE	78	<i>glucose</i>	79
<i>generlac 10gm/15ml oral soln</i>	69	100MG/ML/SODIUM CHLORIDE 2MG/ML INJ		<i>50mg/ml/potassium chloride</i>	
<i>gentamicin 0.1% topical cream</i>	59	GLUCOSE	78	<i>0.04meq/ml/sodium chloride 9mg/ml inj</i>	
<i>gentamicin 0.1% topical ointment</i>	59	100MG/ML/SODIUM CHLORIDE 4.5MG/ML INJ		GLUCOSE	79
<i>gentamicin 0.3% ophth soln</i>	80	<i>glucose 50mg/ml inj</i>	78	50MG/ML/SODIUM CHLORIDE 2MG/ML INJ	
GENTAMICIN 0.8MG/ML INJ	9	<i>glucose</i>	78	<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	79
GENTAMICIN 1.2MG/ML INJ	9	<i>50mg/ml/potassium chloride</i>		<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	79
GENTAMICIN 1.6MG/ML INJ	9	<i>0.01meq/ml/sodium chloride 4.5mg/ml inj</i>		GLUCOSE/SODIUM CHLORIDE	79
GENTAMICIN 1MG/ML INJ	9	<i>glucose</i>	79	25MG/ML-4.5MG/ML INJ	
<i>gentamicin 40mg/ml inj</i>	9	<i>50mg/ml/potassium chloride 0.02meq/ml inj</i>		<i>glutamine 5000mg powder for oral soln</i>	64
GENVOYA	51	GLUCOSE	79	<i>glyburide 1.25mg tab</i>	28
150-150-200-10MG TAB		50MG/ML/POTASSIUM CHLORIDE		<i>glyburide 2.5mg tab</i>	28
GILOTRIF 20MG TAB	38	0.02MEQ/ML/SODIUM CHLORIDE 2.25MG/ML INJ		<i>glyburide 5mg tab</i>	28
GILOTRIF 30MG TAB	38	<i>glucose</i>	79	<i>glyburide/metformin 1.25-250mg tab</i>	25
GILOTRIF 40MG TAB	38	<i>50mg/ml/potassium chloride</i>		<i>glyburide/metformin 2.5-500mg tab</i>	25
<i>glatiramer acetate 20mg/ml syringe</i>	85	<i>0.02meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>glycopyrrolate 1mg tab</i>	89
<i>glatiramer acetate 40mg/ml syringe</i>	85	<i>glucose</i>	79	<i>glycopyrrolate 2mg tab</i>	89
<i>glatopa 20mg/ml syringe</i>	85	<i>50mg/ml/potassium chloride</i>		GLYXAMBI 10-5MG TAB	25
<i>glatopa 40mg/ml syringe</i>	85	<i>0.02meq/ml/sodium chloride 9mg/ml inj</i>		GLYXAMBI 25-5MG TAB	25
<i>glimepiride 1mg tab</i>	28	<i>glucose</i>	79	GOMEKLI 1MG CAP	40
<i>glimepiride 2mg tab</i>	28	<i>50mg/ml/potassium chloride</i>		GOMEKLI 1MG TAB	40
<i>glimepiride 4mg tab</i>	28	<i>0.03meq/ml/sodium chloride 4.5mg/ml inj</i>		FOR ORAL SUSP	
<i>glipizide 10mg er tab</i>	28	<i>glucose</i>	79	GOMEKLI 2MG CAP	40
<i>glipizide 10mg tab</i>	28	<i>50mg/ml/potassium chloride</i>		<i>granisetron 1mg tab</i>	28
<i>glipizide 2.5mg er tab</i>	28	<i>0.03meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>griseofulvin 125mg tab</i>	29
<i>glipizide 5mg er tab</i>	28	<i>glucose</i>	79	<i>griseofulvin 250mg tab</i>	29
<i>glipizide 5mg tab</i>	28	<i>50mg/ml/potassium chloride</i>		<i>griseofulvin 25mg/ml oral susp</i>	29
<i>glipizide/metformin 2.5-250mg tab</i>	24	<i>0.04meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>griseofulvin 500mg tab</i>	29
<i>glipizide/metformin 2.5-500mg tab</i>	24			<i>guanfacine 1mg er tab</i>	8
<i>glipizide/metformin 5-500mg tab</i>	25			<i>guanfacine 1mg tab</i>	32
				<i>guanfacine 2mg er tab</i>	8

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>guanfacine 2mg tab</i>	32	<i>haloperidol decanoate</i>	46	HUMULIN N	27
<i>guanfacine 3mg er tab</i>	8	<i>50mg/ml (5ml) inj</i>		100UNIT/ML PEN INJ	
<i>guanfacine 4mg er tab</i>	8	HAVRIX 1440ELU/ML	74	(3ML)	
GVOKE 0.5MG/0.1ML	25	SYRINGE		HUMULIN R	27
AUTO-INJECTOR		HAVRIX 720ELU/0.5ML	74	100UNIT/ML INJ	
GVOKE 1MG/0.2ML	25	SYRINGE		HUMULIN R	27
AUTO-INJECTOR		<i>heather 0.35mg 28-day</i>	83	500UNIT/ML INJ	
GVOKE 1MG/0.2ML INJ	25	<i>pack</i>		HUMULIN R	27
GVOKE 1MG/0.2ML	25	<i>heparin sodium porcine</i>	17	500UNIT/ML PEN INJ	
SYRINGE		<i>10000unit/ml inj</i>		(3ML)	
H		<i>heparin sodium porcine</i>	17	<i>hydralazine 100mg tab</i>	34
HADLIMA 40MG/0.4ML	10	<i>1000unit/ml inj</i>		<i>hydralazine 10mg tab</i>	34
AUTO-INJECTOR		<i>heparin sodium porcine</i>	17	<i>hydralazine 25mg tab</i>	34
HADLIMA 40MG/0.4ML	10	<i>20000unit/ml inj</i>		<i>hydralazine 50mg tab</i>	34
SYRINGE		<i>heparin sodium porcine</i>	17	<i>hydrochlorothiazide</i>	63
HADLIMA 40MG/0.8ML	10	<i>5000unit/ml inj</i>		<i>12.5mg cap</i>	
AUTO-INJECTOR		HEPLISAV-B	74	<i>hydrochlorothiazide</i>	63
HADLIMA 40MG/0.8ML	10	20MCG/0.5ML SYRINGE		<i>12.5mg tab</i>	
SYRINGE		HERNEXEOS 60MG TAB	44	<i>hydrochlorothiazide</i>	63
HAEGARDA 2000UNIT	73	HIBERIX 10MCG INJ	74	<i>25mg tab</i>	
INJ		HUMALOG 100UNIT/ML	26	<i>hydrochlorothiazide</i>	63
HAEGARDA 3000UNIT	73	CARTRIDGE		<i>50mg tab</i>	
INJ		HUMALOG 100UNIT/ML	26	<i>hydrochlorothiazide/irbes</i>	34
<i>hailey fe 1/20 28-day</i>	66	KWIKPEN (3ML)		<i>artan 12.5-150mg tab</i>	
<i>pack</i>		HUMALOG 200UNIT/ML	26	<i>hydrochlorothiazide/irbes</i>	34
<i>halobetasol propionate</i>	61	KWIKPEN (3ML)		<i>artan 12.5-300mg tab</i>	
<i>0.05% topical cream</i>		HUMALOG JUNIOR	26	<i>hydrochlorothiazide/lisin</i>	34
<i>halobetasol propionate</i>	61	100UNIT/ML PEN INJ		<i>opril 12.5-10mg tab</i>	
<i>0.05% topical ointment</i>		(3ML)		<i>hydrochlorothiazide/lisin</i>	34
<i>haloperidol 0.5mg tab</i>	46	HUMALOG MIX (50/50)	27	<i>opril 12.5-20mg tab</i>	
<i>haloperidol 10mg tab</i>	46	100UNIT/ML PEN INJ		<i>hydrochlorothiazide/lisin</i>	34
<i>haloperidol 1mg tab</i>	46	(3ML)		<i>opril 25-20mg tab</i>	
<i>haloperidol 20mg tab</i>	46	HUMALOG MIX (75/25)	27	<i>hydrochlorothiazide/losar</i>	34
<i>haloperidol 2mg tab</i>	46	100UNIT/ML INJ		<i>tan potassium</i>	
<i>haloperidol 2mg/ml oral</i>	46	HUMALOG MIX (75/25)	27	<i>12.5-100mg tab</i>	
<i>soln</i>		100UNIT/ML KWIKPEN		<i>hydrochlorothiazide/losar</i>	34
<i>haloperidol 5mg tab</i>	46	(3ML)		<i>tan potassium 12.5-50mg</i>	
<i>haloperidol 5mg/ml inj</i>	46	HUMULIN (70/30)	27	<i>tab</i>	
<i>haloperidol decanoate</i>	46	100UNIT/ML INJ		<i>hydrochlorothiazide/losar</i>	34
<i>100mg/ml (1ml) inj</i>		HUMULIN (70/30)	27	<i>tan potassium 25-100mg</i>	
<i>haloperidol decanoate</i>	46	100UNIT/ML PEN INJ		<i>tab</i>	
<i>100mg/ml (5ml) inj</i>		(3ML)		<i>hydrochlorothiazide/meto</i>	34
<i>haloperidol decanoate</i>	46	HUMULIN N	27	<i>prolol tartrate 25-100mg</i>	
<i>50mg/ml (1ml) inj</i>		100UNIT/ML INJ		<i>tab</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>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	34	<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	12	IBRANCE 100MG TAB	40
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	34	<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	12	IBRANCE 125MG CAP	40
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	34	<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	12	IBRANCE 125MG TAB	40
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	34	<i>hydrocodone bitartrate/ibuprofen 7.5-200mg tab</i>	12	IBRANCE 75MG CAP	40
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	34	<i>hydrocortisone 1% topical cream</i>	61	IBRANCE 75MG TAB	40
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	63	<i>hydrocortisone 1.67mg/ml enema</i>	13	IBTROZI 200MG CAP	40
<i>hydrochlorothiazide/telmisartan 12.5-40mg tab</i>	34	<i>hydrocortisone 10mg tab</i>	72	<i>ibu 600mg tab</i>	10
<i>hydrochlorothiazide/telmisartan 12.5-80mg tab</i>	34	<i>hydrocortisone 2.5% topical cream</i>	13	<i>ibu 800mg tab</i>	10
<i>hydrochlorothiazide/telmisartan 25-80mg tab</i>	34	HYDROCORTISONE 2.5% TOPICAL LOTION	61	<i>ibuprofen 400mg tab</i>	10
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	63	<i>hydrocortisone 2.5% topical ointment</i>	61	<i>ibuprofen 600mg tab</i>	10
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	63	<i>hydrocortisone 20mg tab</i>	72	<i>ibuprofen 800mg tab</i>	10
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	63	<i>hydrocortisone 5mg tab</i>	73	<i>icatibant 30mg/3ml syringe</i>	73
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	34	<i>hydromorphone 2mg tab</i>	11	<i>iclevia tab 91-day pack</i>	67
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	34	<i>hydromorphone 4mg tab</i>	11	ICLUSIG 10MG TAB	40
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	34	<i>hydromorphone 8mg tab</i>	11	ICLUSIG 15MG TAB	40
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	34	<i>hydroxychloroquine sulfate 200mg tab</i>	36	ICLUSIG 30MG TAB	40
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	34	<i>hydroxyurea 500mg cap</i>	44	ICLUSIG 45MG TAB	40
<i>hydrocodone bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>	12	<i>hydroxyzine 10mg tab</i>	14	<i>icosapent ethyl 1000mg cap</i>	30
		<i>hydroxyzine 25mg tab</i>	14	<i>icosapent ethyl 500mg cap</i>	30
		<i>hydroxyzine 2mg/ml oral soln</i>	14	IDHIFA 100MG TAB	40
		<i>hydroxyzine 50mg tab</i>	14	IDHIFA 50MG TAB	40
		<i>hydroxyzine pamoate 25mg cap</i>	14	<i>imatinib 100mg tab</i>	40
		<i>hydroxyzine pamoate 50mg cap</i>	14	<i>imatinib 400mg tab</i>	40
		HYRNUO 10MG TAB	40	IMBRUVICA 140MG CAP	40
		I		IMBRUVICA 140MG TAB	41
		<i>ibandronate 150mg tab</i>	64	IMBRUVICA 280MG TAB	41
		IBRANCE 100MG CAP	40	IMBRUVICA 420MG TAB	41
				IMBRUVICA 70MG CAP	41
				IMBRUVICA 70MG/ML	41
				ORAL SUSP	
				<i>imipramine 10mg tab</i>	24
				<i>imipramine 25mg tab</i>	24
				<i>imipramine 50mg tab</i>	24
				<i>imiquimod 5% topical cream</i>	62
				IMKELDI 80MG/ML	41
				ORAL SOLN	
				IMOVAX 2.5UNIT/ML INJ	74
				IMPAVIDO 50MG CAP	36
				<i>incassia 0.35mg tab 28-day pack</i>	83

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>isotretinoin 30mg cap</i>	59	JAYPIRCA 50MG TAB	41	KERENDIA 10MG TAB	65
<i>isotretinoin 40mg cap</i>	59	JENTADUETO	25	KERENDIA 20MG TAB	65
ITOVEBI 3MG TAB	41	2.5-1000MG TAB		KERENDIA 40MG TAB	65
ITOVEBI 9MG TAB	41	JENTADUETO	25	KESIMPTA 20MG/0.4ML	85
<i>itraconazole 100mg cap</i>	29	2.5-500MG TAB		PEN INJ	
<i>ivabradine 5mg tab</i>	57	JENTADUETO XR	25	<i>ketoconazole 2%</i>	59
<i>ivabradine 7.5mg tab</i>	57	2.5-1000MG TAB		<i>shampoo</i>	
<i>ivermectin 3mg tab</i>	13	JENTADUETO XR	25	<i>ketoconazole 2% topical</i>	59
IWILFIN 192MG TAB	44	5-1000MG TAB		<i>cream</i>	
IXIARO 0.006MG/0.5ML	74	<i>jinteli 0.005-1mg tab</i>	67	<i>ketoconazole 200mg tab</i>	29
SYRINGE		JUBBONTI 60MG/ML	64	<i>ketorolac tromethamine</i>	81
<hr/>					
J		SYRINGE		<i>0.4% ophth soln</i>	
<i>jaimiess tab 91-day pack</i>	67	<i>juleber tab 28-day pack</i>	67	<i>ketorolac tromethamine</i>	81
JAKAFI 10MG TAB	41	JULUCA 50-25MG TAB	51	<i>0.5% ophth soln</i>	
JAKAFI 15MG TAB	41	<i>junel 1.5/30 tab 21-day</i>	67	<i>ketorolac tromethamine</i>	10
JAKAFI 20MG TAB	41	<i>pack</i>		<i>10mg tab</i>	
JAKAFI 25MG TAB	41	<i>junel 1/20 tab 21-day</i>	67	KINRIX SYRINGE	74
JAKAFI 5MG TAB	41	<i>pack</i>		<i>kionex 15gm/60ml oral</i>	78
<i>jantoven 10mg tab</i>	17	<i>junel fe tab 1.5/30 28-day</i>	67	<i>susp</i>	
<i>jantoven 1mg tab</i>	17	<i>pack</i>		KISQALI TAB 200MG	41
<i>jantoven 2.5mg tab</i>	17	<i>junel fe tab 1/20 28-day</i>	67	DAILY DOSE PACK (21)	
<i>jantoven 2mg tab</i>	17	<i>pack</i>		KISQALI TAB 400MG	41
<i>jantoven 3mg tab</i>	17	JYNNEOS 0.5ML INJ	74	DAILY DOSE PACK (42)	
<i>jantoven 4mg tab</i>	17	<hr/>			
<i>jantoven 5mg tab</i>	17	K		KISQALI TAB 600MG	41
<i>jantoven 6mg tab</i>	17	KALETRA 80-20MG/ML	51	DAILY DOSE PACK (63)	
<i>jantoven 7.5mg tab</i>	17	ORAL SOLN		KISQALI/FEMARA 400	39
JANUMET 50-1000MG	25	KALYDECO 13.4MG	86	CO-PACK (70)	
TAB		ORAL GRANULES		KISQALI/FEMARA 600	39
JANUMET 50-500MG	25	KALYDECO 150MG TAB	86	CO-PACK (91)	
TAB		KALYDECO 25MG ORAL	86	<i>klor-con 10meq er tab</i>	79
JANUMET XR	25	GRANULES		<i>klor-con 10meq micro er</i>	79
100-1000MG TAB		KALYDECO 5.8MG	86	<i>tab</i>	
JANUMET XR	25	ORAL GRANULES		<i>klor-con 15meq micro er</i>	79
50-1000MG TAB		KALYDECO 50MG ORAL	86	<i>tab</i>	
JANUMET XR 50-500MG	25	GRANULES		<i>klor-con 20meq micro er</i>	79
TAB		KALYDECO 75MG ORAL	86	<i>tab</i>	
JANUVIA 100MG TAB	26	GRANULES		<i>klor-con 20meq powder</i>	79
JANUVIA 25MG TAB	26	<i>kariva tab 28-day pack</i>	67	<i>for oral soln</i>	
JANUVIA 50MG TAB	26	KCL/D5W/LR INJ 0.15%	79	KLOR-CON 8MEQ ER	79
JARDIANCE 10MG TAB	28	<i>kcl/nacl 20meq-0.45% inj</i>	79	TAB	
JARDIANCE 25MG TAB	28	<i>kcl/nacl 20meq-0.9% inj</i>	79	KLOXXADO 8MG/0.1ML	28
<i>jasmiel tab 28-day pack</i>	67	<i>kcl/nacl 40meq-9% inj</i>	79	NASAL SPRAY	
JAYPIRCA 100MG TAB	41	<i>kelnor 1mg-35mcg tab</i>	67	KOSELUGO 10MG CAP	41
		<i>28-day pack</i>		KOSELUGO 25MG CAP	41

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

KOSELUGO 5MG SPRINKLE CAP	41	<i>lansoprazole 30mg dr cap</i>	89	LEUKERAN 2MG TAB	37
KOSELUGO 7.5MG SPRINKLE CAP	41	<i>lapatinib 250mg tab</i>	41	<i>levetiracetam 1000mg tab</i>	19
<i>kourzeq 0.1% oral paste</i>	58	<i>larin 1.5/30 tab 21-day pack</i>	67	<i>levetiracetam 100mg/ml oral soln</i>	19
KRAZATI 200MG TAB	41	<i>larin 1/20 tab 21-day pack</i>	67	<i>levetiracetam 250mg tab</i>	19
<i>kurvelo tab 28-day pack</i>	67	<i>larin fe tab 1.5/30 28-day pack</i>	67	<i>levetiracetam 500mg er tab</i>	19
L		<i>larin fe tab 1/20 28-day pack</i>	67	<i>levetiracetam 500mg tab</i>	19
<i>labetalol 100mg tab</i>	54	<i>latanoprost 0.005% ophth soln</i>	81	<i>levetiracetam 750mg er tab</i>	19
<i>labetalol 200mg tab</i>	54	LAZCLUZE 240MG TAB	38	<i>levetiracetam 750mg tab</i>	19
<i>labetalol 300mg tab</i>	54	LAZCLUZE 80MG TAB	38	LEVOBUNOLOL 0.5%	80
<i>lacosamide 100mg tab</i>	19	<i>leflunomide 10mg tab</i>	9	OPHTH SOLN	
<i>lacosamide 10mg/ml oral soln</i>	19	<i>leflunomide 20mg tab</i>	9	<i>levocarnitine 100mg/ml oral soln</i>	64
<i>lacosamide 150mg tab</i>	19	<i>lenalidomide 10mg cap</i>	77	<i>levocarnitine 330mg tab</i>	64
<i>lacosamide 200mg tab</i>	19	<i>lenalidomide 15mg cap</i>	77	<i>levocetirizine 5mg tab</i>	86
<i>lacosamide 50mg tab</i>	19	<i>lenalidomide 2.5mg cap</i>	77	<i>levofloxacin 250mg tab</i>	69
<i>lactulose 667mg/ml oral soln</i>	75	<i>lenalidomide 20mg cap</i>	77	<i>levofloxacin 25mg/ml oral soln</i>	69
<i>lamivudine 100mg tab</i>	52	<i>lenalidomide 25mg cap</i>	77	<i>levofloxacin 500mg tab</i>	69
<i>lamivudine 10mg/ml oral soln</i>	51	<i>lenalidomide 5mg cap</i>	77	<i>levofloxacin</i>	69
<i>lamivudine 150mg tab</i>	51	LENVIMA 10MG DAILY	37	<i>500mg/100ml inj</i>	
<i>lamivudine 300mg tab</i>	51	DOSE PACK (30)		<i>levofloxacin 750mg tab</i>	69
<i>lamivudine/zidovudine 150-300mg tab</i>	51	LENVIMA 12MG DAILY	37	<i>levofloxacin</i>	69
<i>lamotrigine 100mg er tab</i>	19	DOSE PACK (90)		<i>750mg/150ml inj</i>	
<i>lamotrigine 100mg odt</i>	19	LENVIMA 14MG DAILY	37	<i>levonest tab 28-day pack</i>	67
<i>lamotrigine 100mg tab</i>	19	DOSE PACK (60)		<i>levonorgestrel/ethinyl estradiol</i>	67
<i>lamotrigine 150mg tab</i>	19	LENVIMA 18MG DAILY	37	<i>0.05-30/0.075-40/0.125-3 0mg-mcg tab 28-day pack</i>	
<i>lamotrigine 200mg er tab</i>	19	DOSE PACK (90)		<i>levora 0.15/30 tab 28-day pack</i>	67
<i>lamotrigine 200mg odt</i>	19	LENVIMA 20MG DAILY	37	<i>levothyroxine sodium</i>	88
<i>lamotrigine 200mg tab</i>	19	DOSE PACK (60)		<i>100mcg tab</i>	
<i>lamotrigine 250mg er tab</i>	19	LENVIMA 24MG DAILY	37	<i>levothyroxine sodium</i>	88
<i>lamotrigine 25mg chew tab</i>	19	DOSE PACK (90)		<i>112mcg tab</i>	
<i>lamotrigine 25mg er tab</i>	19	LENVIMA 4MG DAILY	37	<i>levothyroxine sodium</i>	88
<i>lamotrigine 25mg odt</i>	19	DOSE PACK (30)		<i>125mcg tab</i>	
<i>lamotrigine 25mg tab</i>	19	LENVIMA 8MG DAILY	37	<i>levothyroxine sodium</i>	88
<i>lamotrigine 300mg er tab</i>	19	DOSE PACK (60)		<i>137mcg tab</i>	
<i>lamotrigine 50mg er tab</i>	19	<i>lessina tab 28-day pack</i>	67	<i>levothyroxine sodium</i>	88
<i>lamotrigine 50mg odt</i>	19	<i>letrozole 2.5mg tab</i>	38	<i>150mcg tab</i>	
<i>lamotrigine 5mg chew tab</i>	19	<i>leucovorin 10mg tab</i>	44		
<i>lansoprazole 15mg dr cap</i>	89	<i>leucovorin 15mg tab</i>	44		
		<i>leucovorin 25mg tab</i>	44		
		<i>leucovorin 5mg tab</i>	44		

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>levothyroxine sodium</i>	88	LINZESS 72MCG CAP	75	LITHIUM CARBONATE	46
<i>175mcg tab</i>		<i>liomny 25mcg tab</i>	88	600MG CAP	
<i>levothyroxine sodium</i>	88	<i>liomny 50mcg tab</i>	89	<i>lithium citrate 60mg/ml</i>	46
<i>200mcg tab</i>		<i>liomny 5mcg tab</i>	89	<i>oral soln</i>	
<i>levothyroxine sodium</i>	88	<i>liothyronine sodium</i>	89	LIVTENCITY 200MG TAE	53
<i>25mcg tab</i>		<i>25mcg tab</i>		<i>lo jaimiess tab 91-day</i>	67
<i>levothyroxine sodium</i>	88	<i>liothyronine sodium</i>	89	<i>pack</i>	
<i>300mcg tab</i>		<i>50mcg tab</i>		LOKELMA 10GM	78
<i>levothyroxine sodium</i>	88	<i>liothyronine sodium 5mcg</i>	89	POWDER FOR ORAL	
<i>50mcg tab</i>		<i>tab</i>		SUSP	
<i>levothyroxine sodium</i>	88	<i>liraglutide 18mg/3ml pen</i>	26	LOKELMA 5GM	78
<i>75mcg tab</i>		<i>inj</i>		POWDER FOR ORAL	
<i>levothyroxine sodium</i>	88	<i>lisdexamfetamine</i>	8	SUSP	
<i>88mcg tab</i>		<i>dimesylate 10mg cap</i>		<i>lomustine 100mg cap</i>	37
<i>levoxyl 100mcg tab</i>	88	<i>lisdexamfetamine</i>	8	<i>lomustine 10mg cap</i>	37
<i>levoxyl 112mcg tab</i>	88	<i>dimesylate 20mg cap</i>		<i>lomustine 40mg cap</i>	37
<i>levoxyl 125mcg tab</i>	88	<i>lisdexamfetamine</i>	8	LONSURF 6.14-15MG	39
<i>levoxyl 137mcg tab</i>	88	<i>dimesylate 30mg cap</i>		TAB	
<i>levoxyl 150mcg tab</i>	88	<i>lisdexamfetamine</i>	8	LONSURF 8.19-20MG	39
<i>levoxyl 175mcg tab</i>	88	<i>dimesylate 40mg cap</i>		TAB	
<i>levoxyl 200mcg tab</i>	88	<i>lisdexamfetamine</i>	8	<i>loperamide 2mg cap</i>	28
<i>levoxyl 25mcg tab</i>	88	<i>dimesylate 50mg cap</i>		<i>lopinavir/ritonavir</i>	52
<i>levoxyl 50mcg tab</i>	88	<i>lisdexamfetamine</i>	8	<i>100-25mg tab</i>	
<i>levoxyl 75mcg tab</i>	88	<i>dimesylate 60mg cap</i>		<i>lopinavir/ritonavir</i>	52
<i>levoxyl 88mcg tab</i>	88	<i>lisdexamfetamine</i>	8	<i>200-50mg tab</i>	
<i>lidocaine 4% mucous</i>	62	<i>dimesylate 70mg cap</i>		<i>lorazepam 0.5mg tab</i>	14
<i>membrane topical soln</i>		<i>lisinopril 10mg tab</i>	31	<i>lorazepam 1mg tab</i>	14
<i>lidocaine 5% patch</i>	62	<i>lisinopril 2.5mg tab</i>	31	<i>lorazepam 2mg tab</i>	14
<i>lidocaine 5% topical</i>	62	<i>lisinopril 20mg tab</i>	31	<i>lorazepam 2mg/ml oral</i>	14
<i>ointment</i>		<i>lisinopril 30mg tab</i>	31	<i>soln</i>	
<i>lidocaine viscous 2%</i>	58	<i>lisinopril 40mg tab</i>	31	LORBRENA 100MG TAB	41
<i>mucous membrane topical</i>		<i>lisinopril 5mg tab</i>	31	LORBRENA 25MG TAB	41
<i>soln</i>		LITFULO 50MG CAP	62	<i>loryna tab 28-day pack</i>	67
<i>lidocaine/prilocaine</i>	62	<i>lithium carbonate 150mg</i>	46	<i>losartan potassium</i>	32
<i>2.5-2.5% topical cream</i>		<i>cap</i>		<i>100mg tab</i>	
LILETTA 20.1MCG/DAY	83	<i>lithium carbonate 300mg</i>	46	<i>losartan potassium 25mg</i>	32
INTRAUTERINE SYSTEM		<i>cap</i>		<i>tab</i>	
<i>linezolid 100mg/5ml oral</i>	36	<i>lithium carbonate 300mg</i>	46	<i>losartan potassium 50mg</i>	32
<i>susp</i>		<i>er tab</i>		<i>tab</i>	
<i>linezolid 600mg tab</i>	36	<i>lithium carbonate 300mg</i>	46	<i>loteprednol etabonate</i>	81
<i>linezolid 600mg/300ml</i>	36	<i>tab</i>		<i>0.5% ophth gel</i>	
<i>inj</i>		<i>lithium carbonate 450mg</i>	46	<i>loteprednol etabonate</i>	81
LINZESS 145MCG CAP	75	<i>er tab</i>		<i>0.5% ophth susp</i>	
LINZESS 290MCG CAP	75			<i>lovastatin 10mg tab</i>	30

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>lovastatin 20mg tab</i>	30	<i>lyleq 0.35mg tab 28-day</i>	83	<i>medroxyprogesterone acetate 10mg tab</i>	83	
<i>lovastatin 40mg tab</i>	31	<i>pack</i>		<i>medroxyprogesterone acetate 150mg/ml inj</i>	83	
<i>low-ogestrel tab 28-day pack</i>	67	LYNPARZA 100MG TAB	41	<i>medroxyprogesterone acetate 150mg/ml syringe</i>	83	
<i>loxapine 10mg cap</i>	48	LYNPARZA 150MG TAB	41	<i>medroxyprogesterone acetate 2.5mg tab</i>	83	
<i>loxapine 25mg cap</i>	48	LYSODREN 500MG TAB	38	<i>medroxyprogesterone acetate 5mg tab</i>	83	
<i>loxapine 50mg cap</i>	48	LYTGOBI TAB 12MG	41	<i>mefloquine 250mg tab</i>	36	
<i>loxapine 5mg cap</i>	48	DAILEY DOSE PACK (21)		MEGESTROL ACETATE 125MG/ML ORAL SUSP	83	
<i>lubiprostone 24mcg cap</i>	76	LYTGOBI TAB 16MG	41	<i>megestrol acetate 20mg tab</i>	38	
<i>lubiprostone 8mcg cap</i>	76	DAILEY DOSE PACK (28)		<i>megestrol acetate 40mg tab</i>	38	
<i>luizza 1.5/30 tab 21-day pack</i>	67	LYTGOBI TAB 20MG	41	<i>megestrol acetate 40mg/ml oral susp</i>	38	
<i>luizza 1/20 tab 21-day pack</i>	67	DAILEY DOSE PACK (35)		MEKINIST 0.05MG/ML ORAL SOLN	41	
LUMAKRAS 120MG TAB	41	LYUMJEV 100UNIT/ML INJ	27	MEKINIST 0.5MG TAB	41	
LUMAKRAS 240MG TAB	41	LYUMJEV 100UNIT/ML PEN INJ (3ML)	27	MEKINIST 2MG TAB	41	
LUMAKRAS 320MG TAB	41	LYUMJEV 200UNIT/ML PEN INJ (3ML)	27	MEKTOVI 15MG TAB	41	
LUMIGAN 0.01% OPHTH SOLN	82	<i>lyza 0.35mg tab 28-day pack</i>	83	<i>meleya 0.35mg tab 28-day pack</i>	83	
LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	87	<hr/>			<i>meloxicam 15mg tab</i>	10
LUMRYZ 6GM GRANULES FOR ORAL SUSP	87	M		<i>meloxicam 7.5mg tab</i>	11	
LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	87	<i>magnesium sulfate 500mg/ml inj</i>	79	<i>memantine 10mg tab</i>	84	
LUMRYZ 9GM GRANULES FOR ORAL SUSP	87	<i>magnesium sulfate 500mg/ml syringe</i>	79	<i>memantine 14mg er cap</i>	84	
LUPRON 11.25MG SYRINGE (3 MONTH)	38	<i>malathion 0.5% topical lotion</i>	62	<i>memantine 21mg er cap</i>	84	
LUPRON 3.75MG SYRINGE (1 MONTH)	38	<i>maraviroc 150mg tab</i>	52	<i>memantine 28mg er cap</i>	84	
<i>lurasidone 120mg tab</i>	46	<i>maraviroc 300mg tab</i>	52	<i>memantine 2mg/ml oral soln</i>	84	
<i>lurasidone 20mg tab</i>	46	<i>marlissa tab 28-day pack</i>	67	<i>memantine 5mg tab</i>	84	
<i>lurasidone 40mg tab</i>	46	MARPLAN 10MG TAB	22	<i>memantine 7mg er cap</i>	84	
<i>lurasidone 60mg tab</i>	46	MATULANE 50MG CAP	44	MENQUADFI INJ	74	
<i>lurasidone 80mg tab</i>	46	MAVYRET 100-40MG TAB	53	MENVEO INJ	74	
<i>lutera tab 28-day pack</i>	67	MAVYRET 50-20MG ORAL PELLETT	53	<i>mercaptapurine 20mg/ml susp</i>	37	
		MAYZENT 0.25MG TAB	85	<i>mercaptapurine 50mg tab</i>	37	
		MAYZENT 1MG TAB	85	<i>meropenem 1gm inj</i>	36	
		MAYZENT 2MG TAB	85	<i>meropenem 500mg inj</i>	36	
		MAYZENT TAB STARTER PACK (12)	85			
		MAYZENT TAB STARTER PACK (7)	85			
		<i>meclizine 12.5mg tab</i>	29			
		<i>meclizine 25mg tab</i>	29			

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>mesalamine 1200mg dr tab</i>	70	<i>methylphenidate 10mg er tab</i>	9	<i>metoprolol succinate 100mg er tab</i>	54
<i>mesalamine 1gm rectal supp</i>	70	<i>methylphenidate 10mg tab</i>	9	<i>metoprolol succinate 200mg er tab</i>	54
<i>mesalamine 375mg er cap</i>	70	<i>methylphenidate 18mg er osmotic tab</i>	9	<i>metoprolol succinate 25mg er tab</i>	54
MESALAMINE 400MG DR CAP	70	<i>methylphenidate 1mg/ml oral soln</i>	9	<i>metoprolol succinate 50mg er tab</i>	54
<i>mesalamine 66.7mg/ml enema</i>	70	<i>methylphenidate 20mg er tab</i>	9	<i>metoprolol tartrate 100mg tab</i>	54
<i>mesna 400mg tab</i>	44	<i>methylphenidate 20mg tab</i>	9	<i>metoprolol tartrate 25mg tab</i>	54
<i>metaxalone 800mg tab</i>	50	<i>methylphenidate 27mg er osmotic tab</i>	9	<i>metoprolol tartrate 37.5mg tab</i>	54
<i>metformin 1000mg tab</i>	25	<i>methylphenidate 27mg er tab</i>	9	<i>metoprolol tartrate 50mg tab</i>	54
<i>metformin 500mg er tab</i>	26	<i>methylphenidate 2mg/ml oral soln</i>	9	<i>metoprolol tartrate 75mg tab</i>	54
<i>metformin 500mg tab</i>	26	<i>methylphenidate 36mg er osmotic tab</i>	9	<i>metronidazole 0.75% topical cream</i>	62
<i>metformin 750mg er tab</i>	26	<i>methylphenidate 36mg er tab</i>	9	<i>metronidazole 0.75% topical gel</i>	62
<i>metformin 850mg tab</i>	26	<i>methylphenidate 54mg er osmotic tab</i>	9	<i>metronidazole 0.75% vaginal gel</i>	90
<i>metformin/pioglitazone 150-15mg tab</i>	25	<i>methylphenidate 54mg er tab</i>	9	<i>metronidazole 1% topical gel</i>	62
<i>metformin/pioglitazone 850-15mg tab</i>	25	<i>methylphenidate 5mg tab</i>	9	<i>metronidazole 250mg tab</i>	36
<i>methadone 10mg tab</i>	11	<i>methylprednisolone 16mg tab</i>	73	<i>metronidazole 500mg tab</i>	36
METHADONE 1MG/ML ORAL SOLN	11	<i>methylprednisolone 32mg tab</i>	73	<i>metronidazole 5mg/ml inj</i>	36
METHADONE 2MG/ML ORAL SOLN	11	<i>methylprednisolone 4mg tab</i>	73	<i>metyrosine 250mg cap</i>	34
<i>methadone 5mg tab</i>	11	<i>methylprednisolone 4mg tab pack (21)</i>	73	<i>mexiletine 150mg cap</i>	56
<i>methazolamide 25mg tab</i>	62	<i>methylprednisolone 8mg tab</i>	73	<i>mexiletine 200mg cap</i>	56
<i>methazolamide 50mg tab</i>	62	<i>metoclopramide 10mg tab</i>	69	<i>mexiletine 250mg cap</i>	56
<i>methenamine hippurate 1gm tab</i>	36	<i>metoclopramide 1mg/ml oral soln</i>	69	<i>micafungin sodium 100mg inj</i>	29
<i>methimazole 10mg tab</i>	88	<i>metoclopramide 5mg tab</i>	69	<i>micafungin sodium 50mg inj</i>	29
<i>methimazole 5mg tab</i>	88	<i>metolazone 10mg tab</i>	63	<i>microgestin 1.5/30 tab 21-day pack</i>	67
<i>methocarbamol 500mg tab</i>	50	<i>metolazone 2.5mg tab</i>	63	<i>microgestin 1/20 tab 21-day pack</i>	67
<i>methocarbamol 750mg tab</i>	50	<i>metolazone 5mg tab</i>	63	<i>microgestin fe tab 1.5/30 28-day pack</i>	67
<i>methotrexate 2.5mg tab</i>	37				
METHOTREXATE 25MG/ML INJ	37				
<i>methotrexate 50mg/2ml inj</i>	37				
METHOXSALLEN 10MG CAP	60				
<i>methsuximide 300mg cap</i>	21				

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>microgestin fe tab 1/20 28-day pack</i>	67	<i>morphine sulfate 100mg er tab</i>	11	MRESVIA 50MCG/0.5ML SYRINGE	74
<i>midodrine 10mg tab</i>	56	<i>morphine sulfate 15mg er tab</i>	11	MULTAQ 400MG TAB	56
<i>midodrine 2.5mg tab</i>	56	<i>morphine sulfate 15mg tab</i>	11	<i>mupirocin 2% topical ointment</i>	59
<i>midodrine 5mg tab</i>	56	<i>morphine sulfate 200mg er tab</i>	11	<i>mycophenolate mofetil 200mg/ml oral susp</i>	77
MIEBO 1.338GM/ML OPTH SOLN	81	<i>morphine sulfate 20mg/ml oral soln</i>	11	<i>mycophenolate mofetil 250mg cap</i>	77
<i>mifepristone 300mg tab</i>	26	MORPHINE SULFATE 2MG/ML ORAL SOLN	11	<i>mycophenolate mofetil 500mg tab</i>	77
<i>mili tab 28-day pack</i>	67	<i>morphine sulfate 30mg er tab</i>	11	<i>mycophenolic acid 180mg dr tab</i>	77
<i>mimvey 28-day pack</i>	67	<i>morphine sulfate 30mg tab</i>	11	<i>mycophenolic acid 360mg dr tab</i>	77
<i>minocycline 100mg cap</i>	88	MORPHINE SULFATE 4MG/ML ORAL SOLN	11	MYRBETRIQ 25MG ER TAB	70
<i>minocycline 50mg cap</i>	88	<i>morphine sulfate 60mg er tab</i>	11	MYRBETRIQ 50MG ER TAB	70
<i>minocycline 75mg cap</i>	88	MOUNJARO 10MG/0.5ML AUTO-INJECTOR	26	<hr/>	
<i>minoxidil 10mg tab</i>	34	MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	26	N	
<i>minoxidil 2.5mg tab</i>	35	MOUNJARO 15MG/0.5ML AUTO-INJECTOR	26	<i>nabumetone 500mg tab</i>	11
<i>mirtazapine 15mg odt</i>	22	MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	26	<i>nabumetone 750mg tab</i>	11
<i>mirtazapine 15mg tab</i>	22	MOUNJARO 5MG/0.5ML AUTO-INJECTOR	26	<i>nadolol 20mg tab</i>	54
<i>mirtazapine 30mg odt</i>	22	MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	26	<i>nadolol 40mg tab</i>	54
<i>mirtazapine 30mg tab</i>	22	MOVANTIK 12.5MG TAB	76	<i>nadolol 80mg tab</i>	54
<i>mirtazapine 45mg odt</i>	22	MOVANTIK 25MG TAB	76	<i>nafacillin 100mg/ml inj</i>	83
<i>mirtazapine 45mg tab</i>	22	<i>moxifloxacin 0.5% ophth soln</i>	80	<i>nafacillin 1gm inj</i>	83
<i>mirtazapine 7.5mg tab</i>	22	MOXIFLOXACIN 1.6MG/ML INJ	69	<i>nafacillin 2gm inj</i>	83
<i>misoprostol 100mcg tab</i>	89	<i>moxifloxacin 400mg tab</i>	69	NALOXONE 0.4MG/ML CARTRIDGE	28
<i>misoprostol 200mcg tab</i>	89			<i>naloxone 0.4mg/ml inj</i>	28
M-M-R II INJ	74			<i>naloxone 0.4mg/ml syringe</i>	28
<i>modafinil 100mg tab</i>	9			<i>naloxone 2mg/2ml syringe</i>	28
<i>modafinil 200mg tab</i>	9			<i>naltrexone 50mg tab</i>	28
MODEYSO 125MG CAP	44			<i>naproxen 250mg tab</i>	11
<i>moexipril 15mg tab</i>	31			<i>naproxen 375mg dr tab</i>	11
<i>moexipril 7.5mg tab</i>	31			<i>naproxen 375mg tab</i>	11
MOLINDONE 10MG TAB	46			<i>naproxen 500mg tab</i>	11
MOLINDONE 25MG TAB	46			<i>naratriptan 1mg tab</i>	76
MOLINDONE 5MG TAB	46			<i>naratriptan 2.5mg tab</i>	76
<i>mometasone furoate 0.1% topical cream</i>	61			NATACYN 5% OPTH SUSP	80
<i>mometasone furoate 0.1% topical lotion</i>	61				
<i>mometasone furoate 0.1% topical ointment</i>	62				
<i>montelukast 10mg tab</i>	15				
<i>montelukast 4mg chew tab</i>	15				
<i>montelukast 5mg chew tab</i>	15				

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>nateglinide 120mg tab</i>	26	<i>neomycin/polymyxin/hydr</i>	82	<i>nitrofurantoin</i>	36
<i>nateglinide 60mg tab</i>	26	<i>ocortisone</i>		<i>macro/nitrofurantoin</i>	
NAYZILAM 5MG/0.1ML	18	<i>3.5-10000unit-1% otic</i>		<i>mono 100mg cap</i>	
NASAL SPRAY		<i>susp</i>		<i>nitrofurantoin</i>	36
<i>nebivolol 10mg tab</i>	54	NERLYNX 40MG TAB	41	<i>macrocrystals 100mg cap</i>	
<i>nebivolol 2.5mg tab</i>	54	NEVIRAPINE 10MG/ML	52	<i>nitrofurantoin</i>	36
<i>nebivolol 20mg tab</i>	54	ORAL SUSP		<i>macrocrystals 50mg cap</i>	
<i>nebivolol 5mg tab</i>	54	<i>nevirapine 200mg tab</i>	52	<i>nitroglycerin 0.1mg/hr</i>	13
<i>necon 0.5/35 tab 28-day</i>	67	<i>nevirapine 400mg er tab</i>	52	<i>patch</i>	
<i>pack</i>		NEXLETOL 180MG TAB	30	<i>nitroglycerin 0.2mg/hr</i>	13
NEFAZODONE 100MG	23	NEXLIZET 180-10MG	30	<i>patch</i>	
TAB		TAB		<i>nitroglycerin 0.3mg sl tab</i>	13
NEFAZODONE 150MG	23	NEXPLANON 68MG	83	<i>nitroglycerin 0.4% rectal</i>	13
TAB		IMPLANT		<i>ointment</i>	
NEFAZODONE 200MG	23	<i>niacin 1000mg er tab</i>	30	<i>nitroglycerin 0.4mg sl tab</i>	13
TAB		<i>niacin 500mg er tab</i>	30	<i>nitroglycerin 0.4mg/hr</i>	13
NEFAZODONE 250MG	23	<i>niacin 750mg er tab</i>	30	<i>patch</i>	
TAB		NICOTROL 10MG/ML	85	<i>nitroglycerin 0.6mg sl tab</i>	13
NEFAZODONE 50MG	23	NASAL INHALER		<i>nitroglycerin 0.6mg/hr</i>	13
TAB		<i>nifedipine 10mg cap</i>	55	<i>patch</i>	
NEMLUVIO 30MG	62	<i>nifedipine 20mg cap</i>	55	NIVESTYM	72
AUTO-INJECTOR		<i>nifedipine 30mg er tab</i>	55	300MCG/0.5ML	
<i>neomycin sulfate 500mg</i>	9	<i>nifedipine 30mg osmotic</i>	55	SYRINGE	
<i>tab</i>		<i>er tab</i>		NIVESTYM 300MCG/ML	72
NEOMYCIN/BACITRACI	80	<i>nifedipine 60mg er tab</i>	55	INJ	
N/POLYMYXIN		<i>nifedipine 60mg osmotic</i>	55	NIVESTYM	72
5MG-400UNIT-10000UN		<i>er tab</i>		480MCG/0.8ML	
IT OPHTH OINTMENT		<i>nifedipine 90mg er tab</i>	55	SYRINGE	
NEOMYCIN/POLYMYXI	80	<i>nifedipine 90mg osmotic</i>	55	NIVESTYM	72
N B/GRAMICIDIN		<i>er tab</i>		480MCG/1.6ML INJ	
1.75-10000-0.025MG-UN		<i>nikki tab 28-day pack</i>	67	<i>nora-be 0.35mg tab</i>	83
T-MG/ML OPHTH SOLN		<i>nilotinib 150mg cap</i>	41	<i>28-day pack</i>	
NEOMYCIN/POLYMYXI	81	<i>nilotinib 200mg cap</i>	41	NORDITROPIN	65
N/BACITRACIN/HYDRO		<i>nilotinib 50mg cap</i>	41	10MG/1.5ML PEN INJ	
CORTISONE 1% OPHTH		<i>nilutamide 150mg tab</i>	39	NORDITROPIN	65
OINTMENT		<i>nimodipine 30mg cap</i>	55	15MG/1.5ML PEN INJ	
<i>neomycin/polymyxin/dexa</i>	81	NINLARO 2.3MG CAP	41	NORDITROPIN	65
<i>methasone 0.1% ophth</i>		NINLARO 3MG CAP	41	5MG/1.5ML PEN INJ	
<i>susp</i>		NINLARO 4MG CAP	42	<i>norelgestromin/ethinyl</i>	67
<i>neomycin/polymyxin/hydr</i>	82	<i>nitazoxanide 500mg tab</i>	36	<i>estradiol 150-35</i>	
<i>ocortisone</i>		NITRO-BID 2% TOPICAL	13	<i>mcg/24hr patch</i>	
<i>3.5-10000unit-1% otic</i>		OINTMENT		<i>norethindrone 0.35mg</i>	83
<i>soln</i>				<i>28-day pack</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>norethindrone acetate</i>	83	NUBEQA 300MG TAB	39	<i>octreotide 0.2mg/ml inj</i>	64
<i>5mg tab</i>		NUCALA 100MG INJ	14	<i>octreotide 0.5mg/ml inj</i>	64
<i>nortrel 0.5/35 tab 28-day</i>	67	NUCALA 100MG/ML	14	<i>octreotide 1mg/ml inj</i>	65
<i>pack</i>		AUTO-INJECTOR		ODEFSEY 200-25-25MG	52
<i>nortrel 1/35 tab 21-day</i>	67	NUCALA 100MG/ML	14	TAB	
<i>pack</i>		SYRINGE		ODOMZO 200MG CAP	38
<i>nortrel 1/35 tab 28-day</i>	67	NUCALA 40MG/0.4ML	14	OFEV 100MG CAP	86
<i>pack</i>		SYRINGE		OFEV 150MG CAP	86
<i>nortrel 7/7/7 tab 28-day</i>	67	NUEDEXTA 20-10MG	85	<i>ofloxacin 0.3% ophth soln</i>	80
<i>pack</i>		CAP		<i>ofloxacin 0.3% otic soln</i>	82
<i>nortriptyline 10mg cap</i>	24	NUPLAZID 10MG TAB	46	OGSIVEO 100MG TAB	42
<i>nortriptyline 25mg cap</i>	24	NUPLAZID 34MG CAP	46	7-DAY PACK (14)	
<i>nortriptyline 2mg/ml oral</i>	24	NUTRILIPID	79	OGSIVEO 150MG TAB	42
<i>soln</i>		20GM/100ML INJ		7-DAY PACK (14)	
<i>nortriptyline 50mg cap</i>	24	<i>nyamyc 100000unit/gm</i>	59	OJEMDA 100MG TAB	42
<i>nortriptyline 75mg cap</i>	24	<i>topical powder</i>		PACK (400MG ONCE	
NORVIR 100MG ORAL	52	<i>nylia 1/35 tab 28-day</i>	67	WEEKLY) (16)	
POWDER		<i>pack</i>		OJEMDA 100MG TAB	42
NOVOLIN MIX (70/30)	27	<i>nylia 7/7/7 tab 28-day</i>	68	PACK (500MG ONCE	
100UNIT/ML FLEXPEN		<i>pack</i>		WEEKLY) (20)	
(3ML)		<i>nystatin 100000 unit/gm</i>	59	OJEMDA 100MG TAB	42
NOVOLIN MIX (70/30)	27	<i>topical ointment</i>		PACK (600MG ONCE	
100UNIT/ML INJ		<i>nystatin 100000unit/gm</i>	59	WEEKLY) (24)	
NOVOLIN N	27	<i>topical powder</i>		OJEMDA 25MG/ML	42
100UNIT/ML INJ		<i>nystatin 100000unit/ml</i>	58	POWDER FOR ORAL	
NOVOLIN N	27	<i>oral susp</i>		SUSP	
100UNIT/ML PEN INJ		<i>nystatin 100000unit/ml</i>	60	OJJAARA 100MG TAB	42
(3ML)		<i>topical cream</i>		OJJAARA 150MG TAB	42
NOVOLIN R	27	<i>nystatin 500000unit tab</i>	29	OJJAARA 200MG TAB	42
100UNIT/ML INJ		<i>nystatin/triamcinolone</i>	60	<i>olanzapine 10mg inj</i>	48
NOVOLIN R	27	<i>acetonide 100000-0.1</i>		<i>olanzapine 10mg odt</i>	48
100UNIT/ML PEN INJ		<i>unit/gm-% topical</i>		<i>olanzapine 10mg tab</i>	48
(3ML)		<i>ointment</i>		<i>olanzapine 15mg odt</i>	48
NOVOLOG 100UNIT/ML	27	<i>nystatin/triamcinolone</i>	60	<i>olanzapine 15mg tab</i>	48
CARTRIDGE		<i>acetonide</i>		<i>olanzapine 2.5mg tab</i>	48
NOVOLOG 100UNIT/ML	27	<i>100000-0.1unit/gm-%</i>		<i>olanzapine 20mg odt</i>	48
INJ		<i>topical cream</i>		<i>olanzapine 20mg tab</i>	48
NOVOLOG 100UNIT/ML	27	<i>nystop 100000unit/gm</i>	60	<i>olanzapine 5mg odt</i>	48
PEN INJ (3ML)		<i>topical powder</i>		<i>olanzapine 5mg tab</i>	48
NOVOLOG MIX (70/30)	27	NYVEPRIA 6MG/0.6ML	72	<i>olanzapine 7.5mg tab</i>	48
100UNIT/ML FLEXPEN		SYRINGE		<i>olmesartan medoxomil</i>	32
(3ML)		<hr/>		<i>20mg tab</i>	
NOVOLOG MIX (70/30)	27	O		<i>olmesartan medoxomil</i>	32
100UNIT/ML INJ		<i>octreotide 0.05mg/ml inj</i>	64	<i>40mg tab</i>	
		<i>octreotide 0.1mg/ml inj</i>	64		

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>olmesartan medoxomil</i>	32	ORGOVYX 120MG TAB	39	<i>oxybutynin chloride 15mg</i>	70
<i>5mg tab</i>		ORKAMBI 125-100MG	86	<i>er tab</i>	
<i>olopatadine 0.6%</i>	78	ORAL GRANULES		<i>oxybutynin chloride</i>	70
<i>(0.665mg/act) nasal</i>		ORKAMBI 125-100MG	86	<i>1mg/ml oral soln</i>	
<i>inhaler</i>		TAB		<i>oxybutynin chloride 5mg</i>	70
OLUMIANT 1MG TAB	9	ORKAMBI 125-200MG	86	<i>er tab</i>	
OLUMIANT 2MG TAB	9	TAB		<i>oxybutynin chloride 5mg</i>	70
OLUMIANT 4MG TAB	9	ORKAMBI 188-150MG	87	<i>tab</i>	
<i>omega-3 acid ethyl esters</i>	30	ORAL GRANULES		<i>oxycodone 10mg tab</i>	11
<i>(usp) 1gm cap</i>		ORKAMBI 94-75MG	87	<i>oxycodone 15mg tab</i>	11
<i>omeprazole 10mg dr cap</i>	89	ORAL GRANULES		<i>oxycodone 1mg/ml oral</i>	11
<i>omeprazole 20mg dr cap</i>	90	<i>orphenadrine citrate</i>	50	<i>soln</i>	
<i>omeprazole 40mg dr cap</i>	90	<i>100mg er tab</i>		<i>oxycodone 20mg tab</i>	11
OMNITROPE	65	<i>orquidea 0.35mg tab</i>	83	<i>oxycodone 30mg tab</i>	11
10MG/1.5ML		<i>28-day pack</i>		<i>oxycodone 5mg tab</i>	11
CARTRIDGE		ORSERDU 345MG TAB	39	<i>oxycodone/acetaminophe</i>	12
OMNITROPE 5.8MG INJ	65	ORSERDU 86MG TAB	39	<i>n 10-325mg tab</i>	
OMNITROPE	65	<i>oseltamivir 30mg cap</i>	53	<i>oxycodone/acetaminophe</i>	12
5MG/1.5ML CARTRIDGE		<i>oseltamivir 45mg cap</i>	53	<i>n 2.5-325mg tab</i>	
<i>ondansetron 0.8mg/ml</i>	28	<i>oseltamivir 6mg/ml oral</i>	53	<i>oxycodone/acetaminophe</i>	12
<i>oral soln</i>		<i>susp</i>		<i>n 5-325mg tab</i>	
<i>ondansetron 4mg odt</i>	28	<i>oseltamivir 75mg cap</i>	53	<i>oxycodone/acetaminophe</i>	12
<i>ondansetron 4mg tab</i>	28	OTEZLA 10/20/30MG	60	<i>n 7.5-325mg tab</i>	
<i>ondansetron 8mg odt</i>	28	TAB 28-DAY STARTER		OXYCONTIN 10MG ER	11
<i>ondansetron 8mg tab</i>	29	PACK (55)		TAB	
ONUREG 200MG TAB	37	OTEZLA 10/20MG TAB	60	OXYCONTIN 15MG ER	11
ONUREG 300MG TAB	37	28-DAY STARTER PACK		TAB	
OPIPZA 10MG ORAL	50	(55)		OXYCONTIN 20MG ER	11
FILM		OTEZLA 20MG TAB	60	TAB	
OPIPZA 2MG ORAL	50	OTEZLA 30MG TAB	60	OXYCONTIN 30MG ER	11
FILM		OTEZLA XR 75MG TAB	60	TAB	
OPIPZA 5MG ORAL	50	OTEZLA/OTEZLA XR	60	OXYCONTIN 40MG ER	12
FILM		28-DAY 10/20/30/75MG		TAB	
OPSUMIT 10MG TAB	86	STARTER PACK (41)		OXYCONTIN 60MG ER	12
OPVEE 2.7MG/0.1ML	28	<i>oxacillin 100mg/ml inj</i>	83	TAB	
NASAL SPRAY		<i>oxacillin 1gm inj</i>	83	OXYCONTIN 80MG ER	12
ORENCIA 125MG/ML	77	<i>oxacillin 2gm inj</i>	83	TAB	
AUTO-INJECTOR		<i>oxcarbazepine 150mg tab</i>	19	OZEMPIC 2MG/3ML	26
ORENCIA 125MG/ML	77	<i>oxcarbazepine 300mg tab</i>	19	PEN INJ	
SYRINGE		<i>oxcarbazepine 600mg tab</i>	19	OZEMPIC 4MG/3ML	26
ORENCIA 50MG/0.4ML	77	<i>oxcarbazepine 60mg/ml</i>	19	PEN INJ	
SYRINGE		<i>oral susp</i>		OZEMPIC 8MG/3ML	26
ORENCIA 87.5MG/0.7ML	77	<i>oxybutynin chloride 10mg</i>	70	PEN INJ	
SYRINGE		<i>er tab</i>			

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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>paliperidone 1.5mg er tab</i>	47	PEGASYS	53	<i>perindopril erbumine 4mg tab</i>	31
<i>paliperidone 3mg er tab</i>	47	180MCG/0.5ML		PERINDOPRIL	31
<i>paliperidone 6mg er tab</i>	47	SYRINGE		ERBUMINE 8MG TAB	
<i>paliperidone 9mg er tab</i>	47	PEGASYS 180MCG/ML	53	<i>perio gard 0.12% mouthwash</i>	58
PANRETIN 0.1% TOPICAL GEL	60	INJ		<i>permethrin 5% topical cream</i>	62
<i>pantoprazole 20mg dr tab</i>	90	PEMAZYRE 13.5MG TAB	42	<i>perphenazine 16mg tab</i>	49
<i>pantoprazole 40mg dr tab</i>	90	PEMAZYRE 4.5MG TAB	42	<i>perphenazine 2mg tab</i>	49
<i>paricalcitol 1mcg cap</i>	64	PEMAZYRE 9MG TAB	42	<i>perphenazine 4mg tab</i>	49
<i>paricalcitol 2mcg cap</i>	64	PENBRAYA INJ	74	<i>perphenazine 8mg tab</i>	49
<i>paricalcitol 4mcg cap</i>	64	<i>penicillamine 250mg tab</i>	77	PHENELZINE 15MG TAB	22
<i>paroxetine 10mg tab</i>	22	<i>penicillin g potassium 1000000unit/ml inj</i>	82	PHENOBARBITAL	20
PAROXETINE	22	PENICILLIN G SODIUM	82	100MG TAB	
10MG/5ML ORAL SUSP		100000UNIT/ML INJ		PHENOBARBITAL 15MG	20
<i>paroxetine 12.5mg er tab</i>	22	<i>penicillin v potassium 250mg tab</i>	82	TAB	
<i>paroxetine 20mg tab</i>	22	PENICILLIN V	82	PHENOBARBITAL	20
<i>paroxetine 25mg er tab</i>	22	POTASSIUM 25MG/ML		16.2MG TAB	
<i>paroxetine 30mg tab</i>	22	ORAL SOLN		PHENOBARBITAL 30MG	20
<i>paroxetine 37.5mg er tab</i>	22	<i>penicillin v potassium 500mg tab</i>	82	TAB	
<i>paroxetine 40mg tab</i>	22	PENICILLIN V	82	PHENOBARBITAL	20
PAXLOVID	53	POTASSIUM 50MG/ML		32.4MG TAB	
150MG/100MG TAB		ORAL SOLN		PHENOBARBITAL	20
PACK (20)		PENMENVY INJ	74	4MG/ML ORAL SOLN	
PAXLOVID	53	PENTACEL	74	PHENOBARBITAL 60MG	20
150MG/100MG TAB		96-30-68UNIT/ML INJ		TAB	
PACK (30)		<i>pentamidine isethionate 300mg inj</i>	36	PHENOBARBITAL	20
PAXLOVID	53	<i>pentamidine isethionate 300mg/6ml inh soln</i>	36	64.8MG TAB	
300MG/100MG AND 150MG/100MG TAB		<i>pentoxifylline 400mg er tab</i>	57	PHENOBARBITAL	20
DOSE PACK (11)		<i>perampanel 0.5mg/ml oral susp</i>	19	97.2MG TAB	
<i>pazopanib 200mg tab</i>	42	<i>perampanel 10mg tab</i>	19	<i>phenytek 200mg er cap</i>	20
PEDIARIX SYRINGE	74	<i>perampanel 12mg tab</i>	19	<i>phenytek 300mg er cap</i>	20
PEDVAXHIB	74	<i>perampanel 2mg tab</i>	19	<i>phenytoin 25mg/ml oral susp</i>	20
7.5MCG/0.5ML INJ		<i>perampanel 4mg tab</i>	20	<i>phenytoin 50mg chew tab</i>	20
<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	75	<i>perampanel 6mg tab</i>	20	<i>phenytoin sodium 100mg er cap</i>	20
<i>peg 3350/electrolyte powder for oral soln</i>	75	<i>perampanel 8mg tab</i>	20	PIFELTRO 100MG TAB	52
<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	75	PERINDOPRIL	31	<i>pilocarpine 1% ophth soln</i>	81
		ERBUMINE 2MG TAB		<i>pilocarpine 2% ophth soln</i>	81

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>pilocarpine 4% ophth soln</i>	81	<i>polymyxin b/trimethoprim 10000 unit/ml-0.1% ophth soln</i>	81	<i>potassium chloride 8meq er cap</i>	80
<i>pilocarpine 5mg tab</i>	58	<i>pomalidomide 1mg cap</i>	44	<i>potassium chloride 8meq er tab</i>	80
<i>pilocarpine 7.5mg tab</i>	58	<i>pomalidomide 2mg cap</i>	44	<i>potassium citrate 10meq er tab</i>	71
<i>pimecrolimus 1% topical cream</i>	62	<i>pomalidomide 3mg cap</i>	44	<i>potassium citrate 15meq er tab</i>	71
PIMOZIDE 1MG TAB	85	<i>pomalidomide 4mg cap</i>	44	<i>potassium citrate 5meq er tab</i>	71
PIMOZIDE 2MG TAB	85	<i>portia tab 28-day pack</i>	68	<i>potassium citrate 5meq er tab</i>	71
<i>pimtrea tab 28-day pack</i>	68	<i>posaconazole 100mg dr tab</i>	29	<i>pramipexole 0.125mg tab</i>	45
<i>pindolol 10mg tab</i>	54	<i>posaconazole 40mg/ml oral susp</i>	29	<i>pramipexole 0.25mg tab</i>	45
<i>pindolol 5mg tab</i>	54	<i>potassium chloride 1.33meq/ml oral soln</i>	79	<i>pramipexole 0.5mg tab</i>	45
<i>pioglitazone 15mg tab</i>	26	<i>potassium chloride 10meq er cap</i>	79	<i>pramipexole 0.75mg tab</i>	45
<i>pioglitazone 30mg tab</i>	26	<i>potassium chloride 10meq er tab</i>	79	<i>pramipexole 1.5mg tab</i>	45
<i>pioglitazone 45mg tab</i>	26	<i>potassium chloride 10meq micro er tab</i>	79	<i>pramipexole 1mg tab</i>	45
<i>piperacillin/tazobactam 2000-250mg inj</i>	83	POTASSIUM CHLORIDE 10MEQ/100ML INJ	79	<i>prasugrel 10mg tab</i>	71
<i>piperacillin/tazobactam 3000-375mg inj</i>	83	POTASSIUM CHLORIDE 15MEQ ER TAB	79	<i>prasugrel 5mg tab</i>	71
<i>piperacillin/tazobactam 36-4.5gm inj</i>	83	<i>potassium chloride 15meq micro er tab</i>	79	<i>pravastatin sodium 10mg tab</i>	31
<i>piperacillin/tazobactam 4000-500mg inj</i>	83	<i>potassium chloride 2.67meq/ml oral soln</i>	79	<i>pravastatin sodium 20mg tab</i>	31
PIQRAY TAB 200MG DAILY DOSE PACK (28)	42	<i>potassium chloride 20meq er tab</i>	79	<i>pravastatin sodium 40mg tab</i>	31
PIQRAY TAB 250MG DAILY DOSE PACK (56)	42	<i>potassium chloride 20meq micro er tab</i>	79	<i>pravastatin sodium 80mg tab</i>	31
PIQRAY TAB 300MG DAILY DOSE PACK (56)	42	<i>potassium chloride 20meq powder for oral soln</i>	80	<i>praziquantel 600mg tab</i>	13
<i>pirfenidone 267mg cap</i>	87	POTASSIUM CHLORIDE 20MEQ/100ML INJ	80	<i>prazosin 1mg cap</i>	32
<i>pirfenidone 267mg tab</i>	87	<i>potassium chloride 2meq/ml (20ml) inj</i>	80	<i>prazosin 2mg cap</i>	32
<i>pirfenidone 801mg tab</i>	87	<i>potassium chloride 2meq/ml inj</i>	80	<i>prazosin 5mg cap</i>	32
<i>piroxicam 10mg cap</i>	11	POTASSIUM CHLORIDE 40MEQ/100ML INJ	80	PREDNISOLONE 1% OPTH SOLN	81
<i>piroxicam 20mg cap</i>	11			<i>prednisolone 1mg/ml oral soln</i>	73
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	85			<i>prednisolone 3mg/ml oral soln</i>	73
PLEGRIDY 125MCG/0.5ML SYRINGE	85			<i>prednisolone 5mg/ml oral soln</i>	73
<i>plenamine 15% inj</i>	79			<i>prednisolone acetate 1% ophth susp</i>	81
PODOFILOX 0.5% TOPICAL SOLN	62			<i>prednisone 10mg tab</i>	73
				<i>prednisone 10mg tab (21) pack (48)</i>	73

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>prednisone 1mg tab</i>	73	PREZISTA 150MG TAB	52	<i>propafenone 425mg er cap</i>	56
PREDNISONE 1MG/ML ORAL SOLN	73	PREZISTA 75MG TAB	52	<i>propranolol 10mg tab</i>	54
<i>prednisone 2.5mg tab</i>	73	PRIFTIN 150MG TAB	37	<i>propranolol 120mg er cap</i>	54
<i>prednisone 20mg tab</i>	73	PRIMAQUINE	36	<i>propranolol 160mg er cap</i>	54
<i>prednisone 50mg tab</i>	73	PHOSPHATE 26.3MG TAB		<i>propranolol 20mg tab</i>	54
<i>prednisone 5mg tab</i>	73	<i>primidone 250mg tab</i>	20	<i>propranolol 40mg tab</i>	54
<i>prednisone 5mg tab pack (21)</i>	73	<i>primidone 50mg tab</i>	20	PROPRANOLOL 4MG/ML ORAL SOLN	54
<i>prednisone 5mg tab pack (48)</i>	73	PRIORIX INJ	74	<i>propranolol 60mg er cap</i>	54
<i>pregabalin 100mg cap</i>	20	PRIVIGEN 20GM/200ML INJ	74	<i>propranolol 60mg tab</i>	54
<i>pregabalin 150mg cap</i>	20	<i>probenecid 500mg tab</i>	71	<i>propranolol 80mg er cap</i>	54
<i>pregabalin 200mg cap</i>	20	<i>prochlorperazine 10mg tab</i>	49	<i>propranolol 80mg tab</i>	54
<i>pregabalin 20mg/ml oral soln</i>	20	<i>prochlorperazine 25mg rectal supp</i>	49	PROPRANOLOL 8MG/ML ORAL SOLN	54
<i>pregabalin 225mg cap</i>	20	<i>prochlorperazine 5mg tab</i>	49	<i>propylthiouracil 50mg tab</i>	88
<i>pregabalin 25mg cap</i>	20	<i>procto-med 2.5% topical cream</i>	13	PROQUAD INJ	74
<i>pregabalin 300mg cap</i>	20	<i>proctosol 2.5% topical cream</i>	13	PROSOL 20% INJ	80
<i>pregabalin 50mg cap</i>	20	<i>proctozone hc 2.5% topical cream</i>	13	<i>protriptyline 10mg tab</i>	24
<i>pregabalin 75mg cap</i>	20	<i>progesterone 100mg cap</i>	83	<i>protriptyline 5mg tab</i>	24
PREMARIN	90	<i>progesterone 200mg cap</i>	83	PULMOZYME 1MG/ML INH SOLN	87
0.625MG/GM VAGINAL CREAM		PROGRAF 0.2MG GRANULES FOR ORAL SUSP	77	<i>pyrazinamide 500mg tab</i>	37
PREMPHASE 28-DAY PACK	68	PROGRAF 1MG GRANULES FOR ORAL SUSP	77	<i>pyridostigmine bromide 60mg tab</i>	50
PREMPRO 0.3/1.5MG 28-DAY PACK	68	PROLASTIN 1000MG INJ	87	<i>pyrimethamine 25mg tab</i>	36
PREMPRO 0.45/1.5MG 28-DAY PACK	68	<i>promethazine 1.25mg/ml oral soln</i>	86	Q	
PREMPRO 0.625/2.5MG 28-DAY PACK	68	<i>promethazine 12.5mg tab</i>	86	QINLOCK 50MG TAB	42
PREMPRO 0.625/5MG 28-DAY PACK	68	<i>promethazine 25mg tab</i>	86	QUADRACEL INJ	74
PREVYMIS 120MG ORAL PELLET	53	<i>promethazine 50mg tab</i>	86	QUADRACEL SYRINGE	74
PREVYMIS 240MG TAB	53	<i>propafenone 150mg tab</i>	56	<i>quetiapine 100mg tab</i>	48
PREVYMIS 480MG TAB	53	<i>propafenone 225mg er cap</i>	56	<i>quetiapine 150mg er tab</i>	48
PREZCOBIX 150-675MG TAB	52	<i>propafenone 225mg tab</i>	56	<i>quetiapine 200mg er tab</i>	48
PREZCOBIX 150-800MG TAB	52	<i>propafenone 300mg tab</i>	56	<i>quetiapine 200mg tab</i>	48
PREZISTA 100MG/ML ORAL SUSP	52	<i>propafenone 325mg er cap</i>	56	<i>quetiapine 25mg tab</i>	48
				<i>quetiapine 300mg er tab</i>	48
				<i>quetiapine 300mg tab</i>	48
				<i>quetiapine 400mg er tab</i>	48
				<i>quetiapine 400mg tab</i>	48
				<i>quetiapine 50mg er tab</i>	48
				<i>quetiapine 50mg tab</i>	48

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

ALPHABETICAL LISTING OF DRUGS

<i>quinapril 10mg tab</i>	31	RELENZA 5MG/BLISTER	53	REZDIFFRA 80MG TAB	70
<i>quinapril 20mg tab</i>	31	POWDER INHALER		REZLIDHIA 150MG CAP	42
<i>quinapril 40mg tab</i>	31	<i>repaglinide 0.5mg tab</i>	26	REZUROCK 200MG TAB	77
<i>quinapril 5mg tab</i>	32	<i>repaglinide 1mg tab</i>	26	RHOPRESSA 0.02%	81
QUINIDINE SULFATE	56	<i>repaglinide 2mg tab</i>	26	OPHTH SOLN	
200MG TAB		REPATHA 140MG/ML	30	RIBAVIRIN 200MG CAP	53
QUINIDINE SULFATE	57	AUTO-INJECTOR		RIBAVIRIN 200MG TAB	53
300MG TAB		REPATHA 140MG/ML	30	<i>rifabutin 150mg cap</i>	37
<i>quinine sulfate 324mg cap</i>	36	SYRINGE		<i>rifampin 150mg cap</i>	37
QVAR 40MCG	15	RETACRIT	72	<i>rifampin 300mg cap</i>	37
REDIHALER		10000UNIT/ML INJ		<i>rifampin 600mg inj</i>	37
QVAR 80MCG	15	RETACRIT	72	<i>rilpivirine 25mg tab</i>	52
REDIHALER		20000UNIT/2ML INJ		<i>riluzole 50mg tab</i>	57
		RETACRIT	72	RIMANTADINE 100MG	53
R		20000UNIT/ML INJ		TAB	
RABAVERT 2.5UNIT/ML	74	RETACRIT 2000UNIT/ML	72	RINVOQ 15MG ER TAB	9
INJ		INJ		RINVOQ 1MG/ML ORAL	9
<i>rabeprazole sodium 20mg dr tab</i>	90	RETACRIT 3000UNIT/ML	72	SOLN	
RADICAVA 105MG/5ML	57	INJ		RINVOQ 30MG ER TAB	9
ORAL SUSP		RETACRIT	72	RINVOQ 45MG ER TAB	9
RALDESY 10MG/ML	23	40000UNIT/ML INJ		<i>risedronate sodium</i>	64
ORAL SOLN		RETACRIT 4000UNIT/ML	72	<i>150mg tab</i>	
<i>raloxifene 60mg tab</i>	64	INJ		<i>risedronate sodium 30mg tab</i>	64
<i>ramelteon 8mg tab</i>	73	RETEVMO 120MG TAB	42	<i>risedronate sodium 35mg tab</i>	64
<i>ramipril 1.25mg cap</i>	32	RETEVMO 160MG TAB	42	<i>risedronate sodium 35mg tab pack (12)</i>	64
<i>ramipril 10mg cap</i>	32	RETEVMO 40MG TAB	42	<i>risedronate sodium 35mg tab pack (4)</i>	64
<i>ramipril 2.5mg cap</i>	32	RETEVMO 80MG TAB	42	<i>risedronate sodium 5mg tab</i>	64
<i>ramipril 5mg cap</i>	32	REVCОВI 2.4MG/1.5ML	64	RISPERIDONE 0.25MG	47
<i>ranolazine 1000mg er tab</i>	57	INJ		ODT	
<i>ranolazine 500mg er tab</i>	57	REVUFORJ 110MG TAB	44	<i>risperidone 0.25mg tab</i>	47
<i>rasagiline 0.5mg tab</i>	45	REVUFORJ 160MG TAB	44	<i>risperidone 0.5mg odt</i>	47
<i>rasagiline 1mg tab</i>	45	REVUFORJ 25MG TAB	44	<i>risperidone 0.5mg tab</i>	47
<i>reclipsen tab 28-day pack</i>	68	REXTOVY 4MG/0.25ML	28	<i>risperidone 1mg odt</i>	47
RECOMBIVAX	74	NASAL SPRAY		<i>risperidone 1mg tab</i>	47
10MCG/ML INJ		REXULTI 0.25MG TAB	50	<i>risperidone 1mg/ml oral soln</i>	47
RECOMBIVAX	74	REXULTI 0.5MG TAB	50	<i>risperidone 2mg odt</i>	47
10MCG/ML SYRINGE		REXULTI 1MG TAB	50	<i>risperidone 2mg tab</i>	47
RECOMBIVAX	74	REXULTI 2MG TAB	50	<i>risperidone 3mg odt</i>	47
40MCG/ML INJ		REXULTI 3MG TAB	50		
RECOMBIVAX	75	REXULTI 4MG TAB	50		
5MCG/0.5ML INJ		REYATAZ 50MG ORAL	52		
RECOMBIVAX	75	POWDER			
5MCG/0.5ML SYRINGE		REZDIFFRA 100MG TAB	69		
		REZDIFFRA 60MG TAB	69		

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 3mg tab</i>	47	<i>rosuvastatin calcium</i>	31	<i>sapropterin 100mg</i>	64
<i>risperidone 4mg odt</i>	47	<i>10mg tab</i>		<i>powder for oral soln</i>	
<i>risperidone 4mg tab</i>	47	<i>rosuvastatin calcium</i>	31	<i>sapropterin 100mg tab</i>	64
<i>risperidone microspheres</i>	47	<i>20mg tab</i>		<i>sapropterin 500mg</i>	64
<i>12.5mg inj</i>		<i>rosuvastatin calcium</i>	31	<i>powder for oral soln</i>	
<i>risperidone microspheres</i>	48	<i>40mg tab</i>		SCSEMBLIX 100MG TAB	42
<i>25mg inj</i>		<i>rosuvastatin calcium 5mg</i>	31	SCSEMBLIX 20MG TAB	42
<i>risperidone microspheres</i>	48	<i>tab</i>		SCSEMBLIX 40MG TAB	42
<i>37.5mg inj</i>		ROTARIX	75	<i>scopolamine 1mg/72hr</i>	29
<i>risperidone microspheres</i>	48	667000UNIT/ML ORAL		<i>patch</i>	
<i>50mg inj</i>		SUSP		SECUADO 3.8MG/24HR	48
<i>ritonavir 100mg tab</i>	52	ROTATEQ ORAL SUSP	75	PATCH	
<i>rivaroxaban 1mg/ml oral</i>	17	<i>roweepra 500mg tab</i>	20	SECUADO 5.7MG/24HR	48
<i>susp</i>		ROZLYTREK 100MG	42	PATCH	
<i>rivaroxaban 2.5mg tab</i>	17	CAP		SECUADO 7.6MG/24HR	48
<i>rivastigmine 1.5mg cap</i>	84	ROZLYTREK 200MG	42	PATCH	
<i>rivastigmine 13.3mg/24hr</i>	84	CAP		<i>selegiline 5mg cap</i>	46
<i>patch</i>		ROZLYTREK 50MG	42	<i>selegiline 5mg tab</i>	46
<i>rivastigmine 3mg cap</i>	84	ORAL PELLETT		SELENIUM SULFIDE	62
<i>rivastigmine 4.5mg cap</i>	84	RUBRACA 200MG TAB	42	2.5% SHAMPOO	
<i>rivastigmine 4.6mg/24hr</i>	84	RUBRACA 250MG TAB	42	SELZENTRY 20MG/ML	52
<i>patch</i>		RUBRACA 300MG TAB	42	ORAL SOLN	
<i>rivastigmine 6mg cap</i>	84	<i>rufinamide 200mg tab</i>	20	<i>sertraline 100mg tab</i>	22
<i>rivastigmine 9.5mg/24hr</i>	84	<i>rufinamide 400mg tab</i>	20	<i>sertraline 20mg/ml oral</i>	22
<i>patch</i>		<i>rufinamide 40mg/ml oral</i>	20	<i>soln</i>	
<i>rizatriptan 10mg odt</i>	76	<i>susp</i>		<i>sertraline 25mg tab</i>	22
<i>rizatriptan 10mg tab</i>	76	RUKOBIA 600MG ER	52	<i>sertraline 50mg tab</i>	23
<i>rizatriptan 5mg odt</i>	76	TAB		<i>setlakin tab 91-day pack</i>	68
<i>rizatriptan 5mg tab</i>	76	RYBELSUS 14MG TAB	26	<i>sharobel 0.35mg tab</i>	83
ROCKLATAN	81	RYBELSUS 3MG TAB	26	<i>28-day pack</i>	
0.02-0.005% OPHTH		RYBELSUS 7MG TAB	26	SHINGRIX	75
SOLN		RYDAPT 25MG CAP	42	50MCG/0.5ML INJ	
<i>roflumilast 0.5mg tab</i>	87			SHINGRIX	75
<i>roflumilast 250mcg tab</i>	87	S		50MCG/0.5ML SYRINGE	
ROMVIMZA 14MG CAP	42	<i>sacubitril/valsartan</i>	57	SIGNIFOR 0.3MG/ML INJ	65
ROMVIMZA 20MG CAP	42	<i>24-26mg tab</i>		SIGNIFOR 0.6MG/ML INJ	65
ROMVIMZA 30MG CAP	42	<i>sacubitril/valsartan</i>	57	SIGNIFOR 0.9MG/ML INJ	65
<i>ropinirole 0.25mg tab</i>	45	<i>49-51mg tab</i>		<i>sildenafil 20mg tab</i>	86
<i>ropinirole 0.5mg tab</i>	45	<i>sacubitril/valsartan</i>	57	<i>silodosin 4mg cap</i>	71
<i>ropinirole 1mg tab</i>	45	<i>97-103mg tab</i>		<i>silodosin 8mg cap</i>	71
<i>ropinirole 2mg tab</i>	45	<i>salmon calcitonin</i>	64	<i>silver sulfadiazine 1%</i>	62
<i>ropinirole 3mg tab</i>	45	<i>200unit/act nasal spray</i>		<i>topical cream</i>	
<i>ropinirole 4mg tab</i>	45	SANTYL 250UNIT/GM	62	SIMBRINZA 0.2-1%	80
<i>ropinirole 5mg tab</i>	45	TOPICAL OINTMENT		OPHTH SUSP	

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

SIMLANDI 20MG/0.2ML SYRINGE	10	<i>sodium polystyrene sulfonate 250mg/ml oral susp</i>	78	<i>ssd 1% topical cream</i>	62
SIMLANDI 40MG/0.4ML AUTO-INJECTOR	10	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	75	STARJEMZA 45MG/0.5ML INJ	60
SIMLANDI 40MG/0.4ML SYRINGE	10	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	75	STARJEMZA 45MG/0.5ML SYRINGE	60
SIMLANDI 80MG/0.8ML AUTO-INJECTOR	10	SOFOSBUVIR/VELPATAS VIR 400-100MG TAB	53	STARJEMZA 90MG/ML SYRINGE	60
<i>simvastatin 10mg tab</i>	31	<i>solifenacin succinate 10mg tab</i>	71	STEQEYMA 45MG/0.5ML SYRINGE	60
<i>simvastatin 20mg tab</i>	31	<i>solifenacin succinate 5mg tab</i>	71	STEQEYMA 90MG/ML SYRINGE	60
<i>simvastatin 40mg tab</i>	31	SOLTAMOX 10MG/5ML ORAL SOLN	39	STIOLTO 2.5-2.5MCG/ACT	16
<i>simvastatin 5mg tab</i>	31	SOMAVERT 10MG INJ	65	INHALER	
<i>simvastatin 80mg tab</i>	31	SOMAVERT 15MG INJ	65	STIVARGA 40MG TAB	42
<i>sirolimus 0.5mg tab</i>	77	SOMAVERT 20MG INJ	65	STREPTOMYCIN 1GM INJ	9
<i>sirolimus 1mg tab</i>	77	SOMAVERT 25MG INJ	65	STRIBILD 150-150-200-300MG TAB	52
<i>sirolimus 1mg/ml oral soln</i>	77	SOMAVERT 30MG INJ	65	STRIVERDI 2.5MCG/ACT INHALER	16
<i>sirolimus 2mg tab</i>	78	<i>sorafenib 200mg tab</i>	42	SUBVENITE 10MG/ML ORAL SUSP	20
SIRTURO 100MG TAB	37	<i>sotalol 120mg tab</i>	54	<i>sucralfate 1000mg tab</i>	89
SIRTURO 20MG TAB	37	<i>sotalol 160mg tab</i>	54	<i>sucralfate 100mg/ml oral susp</i>	89
SKYRIZI 150MG/ML AUTO-INJECTOR	60	<i>sotalol 240mg tab</i>	55	SUFLAVE ORAL SOLN PACK	75
SKYRIZI 150MG/ML SYRINGE	60	<i>sotalol 80mg tab</i>	55	SULFACETAMIDE	81
SKYRIZI 180MG/1.2ML CARTRIDGE	70	<i>sotalol af 120mg tab</i>	55	SODIUM 10% OPPTH SOLN	
SKYRIZI 360MG/2.4ML CARTRIDGE	70	<i>sotalol af 160mg tab</i>	55	<i>sulfacetamide sodium 10% topical lotion</i>	59
<i>sodium chloride 0.45% inj</i>	80	<i>sotalol af 80mg tab</i>	55	SULFACETAMIDE/PRED	81
<i>sodium chloride 0.9% inj</i>	80	SPIRIVA RESPIMAT 1.25MCG/ACT INHALER	15	NISOLONE 10-0.25% OPPTH SOLN	
<i>sodium chloride 0.9% irrigation soln</i>	71	<i>spironolactone 100mg tab</i>	63	<i>sulfadiazine 500mg tab</i>	87
<i>sodium chloride 3% inj</i>	80	<i>spironolactone 25mg tab</i>	63	<i>sulfamethoxazole/trimeth oprim 200-40mg/5ml oral susp</i>	87
<i>sodium chloride 50mg/ml inj</i>	80	<i>spironolactone 50mg tab</i>	63	<i>sulfamethoxazole/trimeth oprim 400-80mg tab</i>	87
<i>sodium oxybate 500mg/ml oral soln</i>	87	<i>sprintec tab 28-day pack</i>	68		
<i>sodium phenylbutyrate 3gm/tsp oral powder</i>	64	SPRITAM 250MG TAB FOR ORAL SUSP	20		
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	78	SPRITAM 500MG TAB FOR ORAL SUSP	20		
		<i>sps 15gm/60ml oral susp</i>	78		
		<i>sronyx tab 28-day pack</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>sulfamethoxazole/trimethoprim 800-160mg tab</i>	87	SYMTUZA	52	TABRECTA 150MG TAB	43
<i>sulfasalazine 500mg dr tab</i>	70	150-800-200-10MG TAB		TABRECTA 200MG TAB	43
<i>sulfasalazine 500mg tab</i>	70	SYNJARDY	25	<i>tacrolimus 0.03% topical ointment</i>	62
<i>sulindac 150mg tab</i>	11	12.5-1000MG TAB		<i>tacrolimus 0.1% topical ointment</i>	62
<i>sulindac 200mg tab</i>	11	SYNJARDY 12.5-500MG	25	<i>tacrolimus 0.5mg cap</i>	78
<i>sumatriptan 100mg tab</i>	76	TAB		<i>tacrolimus 1mg cap</i>	78
<i>sumatriptan 20mg/act nasal spray</i>	76	SYNJARDY 5-1000MG	25	<i>tacrolimus 5mg cap</i>	78
<i>sumatriptan 25mg tab</i>	76	TAB		<i>tadalafil 2.5mg tab</i>	71
<i>sumatriptan 50mg tab</i>	76	SYNJARDY 5-500MG	25	<i>tadalafil 20mg tab</i>	86
<i>sumatriptan 5mg/act nasal spray</i>	76	TAB		<i>tadalafil 5mg tab</i>	71
<i>sumatriptan 6mg/0.5ml auto-injector</i>	76	SYNJARDY XR	25	TAFINLAR 10MG TAB	43
<i>sumatriptan 6mg/0.5ml inj</i>	76	10-1000MG TAB		FOR ORAL SUSP	
<i>sunitinib 12.5mg cap</i>	42	SYNJARDY XR	25	TAFINLAR 50MG CAP	43
<i>sunitinib 25mg cap</i>	42	25-1000MG TAB		TAFINLAR 75MG CAP	43
<i>sunitinib 37.5mg cap</i>	42	SYNJARDY XR	25	TAGRISSE 40MG TAB	38
<i>sunitinib 50mg cap</i>	42	5-1000MG TAB		TAGRISSE 80MG TAB	38
SUNLENCA 300MG TAB	52	SYNTHROID 100MCG	89	TALZENNA 0.1MG CAP	43
SUNLENCA 300MG TAB	52	TAB		TALZENNA 0.25MG CAP	43
THERAPY PACK (4)		SYNTHROID 112MCG	89	TALZENNA 0.35MG CAP	43
SUNLENCA 300MG TAB	52	TAB		TALZENNA 0.5MG CAP	43
THERAPY PACK (5)		SYNTHROID 125MCG	89	TALZENNA 0.75MG CAP	43
SUNOSI 150MG TAB	87	TAB		TALZENNA 1MG CAP	43
SUNOSI 75MG TAB	87	SYNTHROID 137MCG	89	<i>tamoxifen 10mg tab</i>	39
SUTAB 225-188-1479MG TAB	75	TAB		<i>tamoxifen 20mg tab</i>	39
<i>syeda tab 28-day pack</i>	68	SYNTHROID 150MCG	89	<i>tamsulosin 0.4mg cap</i>	71
SYMDEKO TAB 4-WEEK PACK (56)	87	TAB		<i>tarina fe tab 1/20 28-day pack</i>	68
SYMDEKO TAB	87	SYNTHROID 175MCG	89	<i>tazarotene 0.1% topical cream</i>	60
50-75MG/75MG PACK (56)		TAB		<i>tazicef 1gm inj</i>	58
SYMPAZAN 10MG ORAL FILM	18	SYNTHROID 200MCG	89	<i>tazicef 2gm inj</i>	58
SYMPAZAN 20MG ORAL FILM	18	TAB		TAZICEF 6GM INJ	58
SYMPAZAN 5MG ORAL FILM	18	SYNTHROID 25MCG	89	TAZVERIK 200MG TAB	43
		TAB		<i>telmisartan 20mg tab</i>	32
		SYNTHROID 300MCG	89	<i>telmisartan 40mg tab</i>	32
		TAB		<i>telmisartan 80mg tab</i>	32
		SYNTHROID 50MCG	89	<i>temazepam 15mg cap</i>	73
		TAB		<i>temazepam 30mg cap</i>	73
		SYNTHROID 75MCG	89	TENIVAC 4-10UNIT/ML INJ	75
		TAB		TENIVAC 4-10UNIT/ML SYRINGE	75
		SYNTHROID 88MCG	89		
		TAB			
		T			
		TABLOID 40MG TAB	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>tenofovir disoproxil fumarate 300mg tab</i>	52	THALOMID 100MG CAP	77	TICOVAC 2.4MCG/0.5ML SYRINGE	75
TEPMETKO 225MG TAB	43	THALOMID 50MG CAP	77	<i>tigecycline 50mg inj</i>	36
<i>terazosin 10mg cap</i>	33	THEOPHYLLINE 100MG ER TAB	87	<i>timolol 0.25% ophth gel</i>	80
<i>terazosin 1mg cap</i>	33	THEOPHYLLINE 200MG ER TAB	87	<i>timolol 0.25% ophth soln</i>	80
<i>terazosin 2mg cap</i>	33	<i>theophylline 300mg er tab</i>	87	<i>timolol 0.5% ophth gel</i>	80
<i>terazosin 5mg cap</i>	33	<i>theophylline 400mg er tab</i>	87	<i>timolol 0.5% ophth soln</i>	80
<i>terbinafine 250mg tab</i>	29	<i>theophylline 450mg er tab</i>	87	<i>timolol 10mg tab</i>	55
<i>terconazole 0.4% vaginal cream</i>	90	<i>theophylline 600mg er tab</i>	87	TIMOLOL 5MG TAB	55
<i>terconazole 0.8% vaginal cream</i>	90	<i>thioridazine 100mg tab</i>	49	<i>tinidazole 250mg tab</i>	36
<i>terconazole 80mg vaginal insert</i>	90	<i>thioridazine 10mg tab</i>	49	<i>tinidazole 500mg tab</i>	36
<i>teriflunomide 14mg tab</i>	85	<i>thioridazine 25mg tab</i>	49	TIVICAY 50MG TAB	52
<i>teriflunomide 7mg tab</i>	85	<i>thioridazine 50mg tab</i>	49	TIVICAY 5MG TAB FOR ORAL SUSP	52
TERIPARATIDE 620MCG/2.48ML PEN INJ	64	<i>thiothixene 10mg cap</i>	46	<i>tizanidine 2mg tab</i>	50
<i>testosterone 1% (12.5mg/act) topical gel pump</i>	12	<i>thiothixene 1mg cap</i>	46	<i>tizanidine 4mg tab</i>	50
<i>testosterone 1% (25mg) topical gel packet</i>	12	<i>thiothixene 2mg cap</i>	47	<i>tobramycin 0.3% ophth soln</i>	81
<i>testosterone 1% (50mg) topical gel packet</i>	13	<i>thiothixene 5mg cap</i>	47	TOBRAMYCIN 10MG/ML INJ	9
<i>testosterone 1.62% (20.25mg/act) topical gel pump</i>	13	<i>tiadylt 120mg er (24hr) cap</i>	55	<i>tobramycin 300mg/5ml inh soln</i>	9
<i>testosterone 30mg/act topical soln</i>	13	<i>tiadylt 180mg er (24hr) cap</i>	56	<i>tobramycin 80mg/2ml inj</i>	9
<i>testosterone cypionate 100mg/ml inj</i>	13	<i>tiadylt 240mg er (24hr) cap</i>	56	<i>tolterodine tartrate 1mg tab</i>	71
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	13	<i>tiadylt 300mg er (24hr) cap</i>	56	<i>tolterodine tartrate 2mg er cap</i>	71
<i>testosterone cypionate 200mg/ml inj</i>	13	<i>tiadylt 360mg er (24hr) cap</i>	56	<i>tolterodine tartrate 2mg tab</i>	71
TESTOSTERONE ENANTHATE 200MG/ML INJ	13	<i>tiadylt 420mg er (24hr) cap</i>	56	<i>tolterodine tartrate 4mg er cap</i>	71
<i>tetrabenazine 12.5mg tab</i>	85	<i>tiagabine 12mg tab</i>	21	<i>tolvaptan 15mg tab</i>	65
<i>tetrabenazine 25mg tab</i>	85	<i>tiagabine 16mg tab</i>	21	<i>tolvaptan 15mg tab therapy pack (56)</i>	65
<i>tetracycline 250mg cap</i>	88	<i>tiagabine 2mg tab</i>	21	<i>tolvaptan 15mg/30mg tab pack (56)</i>	65
<i>tetracycline 500mg cap</i>	88	<i>tiagabine 4mg tab</i>	21	<i>tolvaptan 15mg/45mg tab pack (56)</i>	65
		TIBSOVO 250MG TAB	43	<i>tolvaptan 30mg tab</i>	65
		<i>ticagrelor 60mg tab</i>	72	<i>tolvaptan 30mg/60mg tab pack (56)</i>	65
		<i>ticagrelor 90mg tab</i>	72	<i>tolvaptan 30mg/90mg tab pack (56)</i>	65
		TICOVAC 1.2MCG/0.25ML SYRINGE	75	<i>topiramate 100mg tab</i>	20

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

ALPHABETICAL LISTING OF DRUGS

<i>topiramate 15mg cap</i>	20	TRELSTAR 11.25MG INJ	39	<i>triamcinolone acetonide</i>	62
<i>topiramate 200mg tab</i>	20	TRELSTAR 22.5MG INJ	39	<i>0.1% topical lotion</i>	
<i>topiramate 25mg cap</i>	20	TRELSTAR 3.75MG INJ	39	<i>triamcinolone acetonide</i>	62
<i>topiramate 25mg tab</i>	20	TREMFYA 100MG/ML	60	<i>0.1% topical ointment</i>	
<i>topiramate 25mg/ml oral soln</i>	20	AUTO-INJECTOR		<i>triamcinolone acetonide</i>	62
<i>topiramate 50mg tab</i>	20	TREMFYA 100MG/ML	60	<i>0.5% topical cream</i>	
<i>toremifene 60mg tab</i>	39	SYRINGE		<i>triamcinolone acetonide</i>	62
<i>torseamide 100mg tab</i>	63	TREMFYA 200MG/2ML	70	<i>0.5% topical ointment</i>	
<i>torseamide 10mg tab</i>	63	AUTO-INJECTOR		<i>trientine 250mg cap</i>	77
<i>torseamide 20mg tab</i>	63	TREMFYA 200MG/2ML	70	<i>tri-estarylla tab 28-day pack</i>	68
<i>torseamide 5mg tab</i>	63	AUTO-INJECTOR		<i>trifluoperazine 10mg tab</i>	49
TOUJEO 300UNIT/ML	27	INDUCTION PACK FOR		<i>trifluoperazine 1mg tab</i>	49
PEN INJ (1.5ML)		CROHNS (2)		<i>trifluoperazine 2mg tab</i>	49
TOUJEO MAX	27	TREMFYA 200MG/2ML	70	<i>trifluoperazine 5mg tab</i>	49
300UNIT/ML PEN INJ (3ML)		SYRINGE		TRIFLURIDINE 1%	81
TPN ELECTROLYTES INJ	80	TRESIBA 100UNIT/ML	27	OPHTH SOLN	
TRADJENTA 5MG TAB	26	TRESIBA 100UNIT/ML	27	<i>trihexyphenidyl 2mg tab</i>	45
<i>tramadol 100mg er tab</i>	12	PEN INJ (3ML)		<i>trihexyphenidyl 5mg tab</i>	45
<i>tramadol 200mg er tab</i>	12	TRESIBA 200UNIT/ML	27	TRIJARDY XR	25
<i>tramadol 300mg er tab</i>	12	PEN INJ (3ML)		10-5-1000MG TAB	
<i>tramadol 50mg tab</i>	12	<i>tretinoin 0.01% topical gel</i>	59	TRIJARDY XR	25
<i>tramadol/acetaminophen 37.5-325mg tab</i>	12	<i>tretinoin 0.025% topical cream</i>	59	12.5-2.5-1000MG TAB	
<i>trandolapril 1mg tab</i>	32	<i>tretinoin 0.025% topical gel</i>	59	TRIJARDY XR	25
<i>trandolapril 2mg tab</i>	32	<i>tretinoin 0.05% topical cream</i>	59	25-5-1000MG TAB	
<i>trandolapril 4mg tab</i>	32	<i>tretinoin 0.1% topical cream</i>	59	TRIJARDY XR	25
<i>tranexamic acid 650mg tab</i>	72	<i>tretinoin 10mg cap</i>	44	5-2.5-1000MG TAB	
<i>tranylcypromine 10mg tab</i>	22	TRIAMCINOLONE	62	TRIKAFTA	87
TRAVASOL 10% INJ	80	ACETONIDE 0.025% LOTION		100-50-75MG/150MG TAB PACK (84)	
<i>travoprost 0.004% ophth soln</i>	82	<i>triamcinolone acetonide 0.025% topical cream</i>	62	TRIKAFTA	87
<i>trazodone 100mg tab</i>	23	<i>triamcinolone acetonide 0.025% topical ointment</i>	62	50-37.5-25MG/75MG TAB PACK (84)	
<i>trazodone 150mg tab</i>	23	<i>triamcinolone acetonide 0.025% topical ointment</i>	62	TRIKAFTA	87
<i>trazodone 50mg tab</i>	23	<i>triamcinolone acetonide 0.1% oral paste</i>	58	80-40-60MG/59.5MG ORAL GRANULES PACK (56)	
TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER	16	<i>triamcinolone acetonide 0.1% topical cream</i>	62	<i>tri-lo- estarylla tab 28-day pack</i>	68
TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	16				

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>tri-lo-sprintec tab 28-day pack</i>	68	TYENNE 162MG/0.9ML AUTO-INJECTOR	78	VALTOCO 5MG (5MG/0.1ML) NASAL SPRAY DOSE PACK	18
<i>trimethoprim 100mg tab</i>	36	TYENNE 162MG/0.9ML SYRINGE	78	<i>valtya 1/35 tab 28-day pack</i>	68
<i>tri-mili tab 28-day pack</i>	68	TYMLOS	64	<i>valtya tab 1/50 28-day pack</i>	68
<i>trimipramine 100mg cap</i>	24	3120MCG/1.56ML PEN INJ		<i>vancomycin 100mg/ml inj</i>	36
<i>trimipramine 25mg cap</i>	24	TYPHIM VI	75	<i>vancomycin 125mg cap</i>	36
<i>trimipramine 50mg cap</i>	24	25MCG/0.5ML INJ		<i>vancomycin 1gm inj</i>	36
TRINTELLIX 10MG TAB	23	TYPHIM VI	75	<i>vancomycin 250mg cap</i>	36
TRINTELLIX 20MG TAB	23	25MCG/0.5ML SYRINGE		<i>vancomycin 500mg inj</i>	36
TRINTELLIX 5MG TAB	23			<i>vancomycin 750mg inj</i>	36
<i>tri-sprintec tab 28-day pack</i>	68			VANFLYTA 17.7MG TAB	43
TRIUMEQ	52	U		VANFLYTA 26.5MG TAB	43
600-50-300MG TAB		UBRELVY 100MG TAB	76	VAQTA 25UNIT/0.5ML INJ	75
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	52	UBRELVY 50MG TAB	76	VAQTA 25UNIT/0.5ML SYRINGE	75
<i>tri-vylibra lo tab 28-day pack</i>	68	<i>ursodiol 250mg tab</i>	70	VAQTA 50UNIT/ML INJ	75
<i>tri-vylibra tab 28-day pack</i>	68	<i>ursodiol 300mg cap</i>	70	VAQTA 50UNIT/ML SYRINGE	75
<i>trosipium chloride 20mg tab</i>	71	<i>ursodiol 500mg tab</i>	70	<i>varenciline 0.5mg tab</i>	85
TRULANCE 3MG TAB	76	V		<i>varenciline 0.5mg/1mg first month pack (53)</i>	85
TRULICITY	26	<i>valacyclovir 1000mg tab</i>	53	<i>varenciline 1mg tab</i>	85
0.75MG/0.5ML AUTO-INJECTOR		<i>valacyclovir 500mg tab</i>	53	<i>varenciline 1mg tab pack (56)</i>	85
TRULICITY	26	VALCHLOR 0.016% TOPICAL GEL	60	VARIVAX	75
1.5MG/0.5ML AUTO-INJECTOR		<i>valganciclovir 450mg tab</i>	53	1350PFU/0.5ML INJ	
TRULICITY 3MG/0.5ML AUTO-INJECTOR	26	<i>valganciclovir 50mg/ml oral soln</i>	53	VAXCHORA ORAL SUSP	75
TRULICITY	26	<i>valproic acid 250mg cap</i>	21	VELIVET TAB 28-DAY PACK	68
4.5MG/0.5ML AUTO-INJECTOR		<i>valproic acid 50mg/ml oral soln</i>	21	VELTASSA 16.8GM POWDER FOR ORAL SUSP	78
TRUMENBA SYRINGE	75	<i>valsartan 160mg tab</i>	32	VELTASSA 1GM POWDER FOR ORAL SUSP	78
TRUQAP 160MG TAB	43	<i>valsartan 320mg tab</i>	32	VELTASSA 25.2GM POWDER FOR ORAL SUSP	78
TRUQAP 200MG TAB	43	<i>valsartan 40mg tab</i>	32		
TUKYSA 150MG TAB	44	<i>valsartan 80mg tab</i>	32		
TUKYSA 50MG TAB	44	VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	18		
TURALIO 125MG CAP	43	VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK	18		
<i>turqoz tab 28-day pack</i>	68	VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	18		
TWINRIX SYRINGE	75				
TYBOST 150MG TAB	52				

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

VELTASSA 8.4GM POWDER FOR ORAL SUSP	78	VIGAFYDE 100MG/ML ORAL SOLN	21	W	
VENCLEXTA 100MG TAB	44	<i>vilazodone 10mg tab</i>	23	<i>warfarin sodium 10mg tab</i>	17
VENCLEXTA 10MG TAB	44	<i>vilazodone 20mg tab</i>	23	<i>warfarin sodium 1mg tab</i>	17
VENCLEXTA 50MG TAB	44	<i>vilazodone 40mg tab</i>	23	<i>warfarin sodium 2.5mg tab</i>	17
VENCLEXTA TAB STARTER PACK (42)	44	VIMKUNYA 40MCG/0.8ML SYRINGE	75	<i>warfarin sodium 2mg tab</i>	17
<i>venlafaxine 100mg tab</i>	23	<i>viorele 28-day pack</i>	68	<i>warfarin sodium 3mg tab</i>	17
<i>venlafaxine 150mg er cap</i>	23	VIRACEPT 250MG TAB	52	<i>warfarin sodium 4mg tab</i>	17
<i>venlafaxine 25mg tab</i>	23	VIRACEPT 625MG TAB	52	<i>warfarin sodium 5mg tab</i>	17
<i>venlafaxine 37.5mg er cap</i>	23	VIREAD 150MG TAB	52	<i>warfarin sodium 6mg tab</i>	17
<i>venlafaxine 37.5mg tab</i>	23	VIREAD 200MG TAB	52	<i>warfarin sodium 7.5mg tab</i>	17
<i>venlafaxine 50mg tab</i>	23	VIREAD 250MG TAB	52	WELIREG 40MG TAB	44
<i>venlafaxine 75mg er cap</i>	23	VIREAD 40MG/GM	52	WINREVAIR 45MG INJ	86
<i>venlafaxine 75mg tab</i>	24	ORAL POWDER		WINREVAIR 45MG INJ (2 VIAL PACK)	86
VENTOLIN 108MCG HFA INHALER	16	VITRAKVI 100MG CAP	43	WINREVAIR 60MG INJ	86
<i>verapamil 120mg er cap</i>	56	VITRAKVI 20MG/ML ORAL SOLN	43	WINREVAIR 60MG INJ (2 VIAL PACK)	86
<i>verapamil 120mg er tab</i>	56	VITRAKVI 25MG CAP	43	<i>wixela 100-50mcg powder inhaler</i>	16
<i>verapamil 120mg tab</i>	56	VIVITROL 380MG INJ	28	<i>wixela 250-50mcg powder inhaler</i>	16
<i>verapamil 180mg er cap</i>	56	VIVOTIF DR CAP	75	<i>wixela 500-50mcg powder inhaler</i>	16
<i>verapamil 180mg er tab</i>	56	VIZIMPRO 15MG TAB	38	WYOST 120MG/1.7ML INJ	64
<i>verapamil 240mg er cap</i>	56	VIZIMPRO 30MG TAB	38		
<i>verapamil 240mg er tab</i>	56	VIZIMPRO 45MG TAB	38	X	
<i>verapamil 40mg tab</i>	56	VONJO 100MG CAP	43	XALKORI 150MG ORAL PELLET	43
<i>verapamil 80mg tab</i>	56	VORANIGO 10MG TAB	43	XALKORI 200MG CAP	43
VERQUVO 10MG TAB	57	VORANIGO 40MG TAB	43	XALKORI 20MG ORAL PELLET	43
VERQUVO 2.5MG TAB	57	<i>voriconazole 200mg inj</i>	29	XALKORI 250MG CAP	43
VERQUVO 5MG TAB	57	<i>voriconazole 200mg tab</i>	29	XALKORI 50MG ORAL PELLET	43
VERSACLOZ 50MG/ML ORAL SUSP	49	<i>voriconazole 40mg/ml oral susp</i>	30	XARELTO 10MG TAB	17
VERZENIO 100MG TAB	43	<i>voriconazole 50mg tab</i>	30	XARELTO 15MG TAB	17
VERZENIO 150MG TAB	43	VOSEVI 400-100-100MG TAB	53	XARELTO 1MG/ML	17
VERZENIO 200MG TAB	43	VOWST 30000000UNIT CAP	70	ORAL SUSP	
VERZENIO 50MG TAB	43	VRAYLAR 0.5MG CAP	47	XARELTO 2.5MG TAB	17
<i>vestura tab 3-0.02mg 28-day pack</i>	68	VRAYLAR 0.75MG CAP	47	XARELTO 20MG TAB	17
<i>vienva tab 28-day pack</i>	68	VRAYLAR 1.5MG CAP	47		
<i>vigabatrin 500mg powder for oral soln</i>	21	VRAYLAR 3MG CAP	47		
<i>vigabatrin 500mg tab</i>	21	VRAYLAR 4.5MG CAP	47		
		VRAYLAR 6MG CAP	47		
		<i>vyfemla tab 28-day pack</i>	68		
		<i>vylibra tab 28-day pack</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

XARELTO TAB STARTER PACK (51)	17	XOLAIR 150MG INJ	14	YESINTEK 90MG/ML	61
XATMEP 2.5MG/ML ORAL SOLN	37	XOLAIR 150MG/ML AUTO-INJECTOR	14	SYRINGE	
XCOPRI 100MG TAB	21	XOLAIR 150MG/ML SYRINGE	14	YF-VAX INJ	75
XCOPRI 150MG TAB	21	XOLAIR 300MG/2ML AUTO-INJECTOR	14	<i>yuvafem 10mcg vaginal insert</i>	90
XCOPRI 200MG TAB	21	XOLAIR 300MG/2ML SYRINGE	14	<hr/>	
XCOPRI 25MG TAB	21	XOLAIR 75MG/0.5ML AUTO-INJECTOR	15	Z	
XCOPRI 50MG TAB	21	XOLAIR 75MG/0.5ML SYRINGE	15	<i>zafemy 150-35mcg/24hr patch</i>	68
XCOPRI TAB 100/150MG MAINTENANCE PACK (56)	21	XOSPATA 40MG TAB	43	<i>zafirlukast 10mg tab</i>	15
XCOPRI TAB 12.5/25MG TITRATION PACK (28)	21	XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	44	<i>zafirlukast 20mg tab</i>	15
XCOPRI TAB 150/200MG TITRATION PACK (28)	21	XPOVIO TAB 40MG ONCE WEEKLY CARTON (16)	44	<i>zaleplon 10mg cap</i>	73
XCOPRI TAB 50/100MG TITRATION PACK (28)	21	XPOVIO TAB 40MG ONCE WEEKLY CARTON (4)	44	<i>zaleplon 5mg cap</i>	73
XDEMVIY 0.25% OPHTH SOLN	81	XPOVIO TAB 60MG ONCE WEEKLY CARTON (4)	44	ZAVZPRET 10MG/ACT NASAL SPRAY	76
XELJANZ 10MG TAB	9	XPOVIO TAB 60MG TWICE WEEKLY CARTON (8)	44	ZEJULA 100MG TAB	43
XELJANZ 1MG/ML ORAL SOLN	9	XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	44	ZEJULA 200MG TAB	43
XELJANZ 5MG TAB	9	XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	44	ZEJULA 300MG TAB	43
XELJANZ XR 11MG TAB	9	XTANDI 40MG CAP	39	ZELBORAF 240MG TAB	43
XELJANZ XR 22MG TAB	10	XTANDI 40MG TAB	39	<i>zenatane 10mg cap</i>	59
XERMELO 250MG TAB	28	XTANDI 80MG TAB	39	<i>zenatane 20mg cap</i>	59
XIFAXAN 550MG TAB	36	<i>xulane 150-35mcg/24hr patch</i>	68	<i>zenatane 30mg cap</i>	59
XIGDUO XR 10-1000MG TAB	25	<hr/>		<i>zenatane 40mg cap</i>	59
XIGDUO XR 10-500MG TAB	25	Y		ZENPEP	70
XIGDUO XR 2.5-1000MG TAB	25			105000-25000-79000UNIT T DR CAP	
XIGDUO XR 5-1000MG TAB	25			ZENPEP	70
XIGDUO XR 5-500MG TAB	25			14000-3000-10000UNIT DR CAP	
XIIDRA 5% OPHTH SOLN	81			ZENPEP	70
XOFLUZA 40MG TAB	53			24000-5000-17000UNIT DR CAP	
XOFLUZA 80MG TAB	53			ZENPEP	70
				252600-60000-189600U NIT DR CAP	
				ZENPEP	70
				40000-126000-168000U NIT DR CAP	
				ZENPEP	70
				42000-10000-32000UNIT DR CAP	
				ZENPEP	70
				63000-15000-47000UNIT DR CAP	

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

ZENPEP	70
84000-20000-63000UNIT DR CAP	
<i>zidovudine 100mg cap</i>	52
<i>zidovudine 10mg/ml oral soln</i>	52
<i>zidovudine 300mg tab</i>	52
<i>ziprasidone 20mg cap</i>	47
<i>ziprasidone 20mg inj</i>	47
<i>ziprasidone 40mg cap</i>	47
<i>ziprasidone 60mg cap</i>	47
<i>ziprasidone 80mg cap</i>	47
ZOLINZA 100MG CAP	43
<i>zolmitriptan 2.5mg tab</i>	76
<i>zolmitriptan 5mg tab</i>	76
<i>zolpidem tartrate 10mg tab</i>	73
<i>zolpidem tartrate 12.5mg er tab</i>	73
<i>zolpidem tartrate 5mg tab</i>	73
<i>zolpidem tartrate 6.25mg er tab</i>	73
ZONISADE 100MG/5ML ORAL SUSP	20
<i>zonisamide 100mg cap</i>	20
<i>zonisamide 25mg cap</i>	20
<i>zonisamide 50mg cap</i>	21
<i>zovia 1mg-35mcg tab 28-day pack</i>	68
ZTALMY 50MG/ML ORAL SUSP	21
ZURNAI 1.5MG/0.5ML AUTO-INJECTOR	28
ZURZUVAE 20MG CAP	22
ZURZUVAE 25MG CAP	22
ZURZUVAE 30MG CAP	22
ZYDELIG 100MG TAB	43
ZYDELIG 150MG TAB	43
ZYKADIA 150MG TAB	43

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

Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. To get an interpreter, just call us at 1-844-788-8935 (TTY 711). Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. *También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles.* Para hablar con un intérprete, por favor llame al 1-844-788-8935 (TTY 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。我们还免费提供适当的辅助工具和服务，以可访问的格式提供信息。如果您需要此翻译服务，请致电 1-844-788-8935 (TTY 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。我們還免費提供適當的輔助工具和服務，以無障礙格式提供資訊。如需翻譯服務，請致電 1-844-788-8935 (TTY 711)。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggagamot. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-844-788-8935 (TTY 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance médicaments. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-844-788-8935 (TTY 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Các dịch vụ và hỗ trợ bổ sung phù hợp nhằm cung cấp thông tin ở định dạng dễ tiếp cận đều có sẵn miễn phí. Nếu quý vị cần thông dịch viên xin gọi 1-844-788-8935 (TTY 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Unsere Dolmetscher erreichen Sie unter 1-

844-788-8935 (TTY 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 통역 서비스를 이용하려면 전화 1-844-788-8935 (TTY 711) 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-844-788-8935 (TTY 711). Вам окажет помощь сотрудник, который говорит порусски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. كما تتاح الوسائل والخدمات المساعدة اللازمة لتوفير المعلومات بصيغ ميسرة بدون أي تكلفة. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على 1-844-788-8935 (TTY 711) سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. ज़रूरी टूल्स और सेवाएं भी बिल्कुल मुफ्त में उपलब्ध कराए जाते हैं, ताकि जानकारी आप तक आसानी से पहुँच पाए। एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-844-788-8935 (TTY 711) पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Sono inoltre disponibili gratuitamente ausili e servizi ausiliari utili a fornire informazioni in formati accessibili. Per un interprete, contattare il numero 1-844-788-8935 (TTY 711). Un nostro incaricato che parla italiano vi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Também estão disponíveis gratuitamente recursos e serviços auxiliares adequados para fornecer informações em formatos acessíveis. Para obter um intérprete, contacte-nos através do número 1-844-788-8935 (TTY 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Èd oksilyè ak sèvis apwopriye pou bay enfòmasyon nan fòm aksesib disponib tou gratis. Pou jwenn yon entèprèt, jis rele nou nan 1-844-788-8935 (TTY 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania

leków. Odpowiednie pomoce i usługi pomocnicze zapewniające dostęp do informacji w formatach dostępnych dla osób z niepełnosprawnością są również dostępne bezpłatnie. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-844-788-8935 (TTY 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。アクセシブル（誰もが利用できるよう配慮された）な形式で情報を提供するための適切な補助支援やサービスも無料でご利用いただけます。通訳をご用命になるには、1-844-788-8935 (TTY 711) にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。

This formulary was updated on 04/01/2026. For more recent information or other questions, please contact Senior Care (HMO I-SNP) Member Service at 1-844-788-8935 (TTY 711), or visit: alignseniorcare.com.

Hours of Operation: 8 a.m. to 8 p.m., seven days a week (except Thanksgiving and Christmas) from October 1 through March 31 and Monday to Friday (except holidays) from April 1 through September 30, or visit alignseniorcare.com.