



# **AVMED EMPLOYER PLANS**

## **5-TIER PRESCRIPTION DRUG**

### **FORMULARY**

**(Effective April – June 2024)**

**PLEASE READ: This document contains information  
about some of the drugs we cover in this plan.**

Members must use in-network pharmacies to fill their prescription drugs. Your benefits, drug list, pharmacy network, premium and/or copayments/coinsurance may sometimes change.

## **INTRODUCTION**

This formulary was developed to serve as a guide for prescribers, pharmacists, health care professionals and members in the selection of cost-effective medication therapy. AvMed recognizes that medication therapy is an integral part of effective health management. Due to the vast availability of medication options, a reasonable program for medication selection and use is warranted.

The drugs represented have been reviewed by a National Pharmacy and Therapeutics (P&T) Committee and are approved for inclusion. This formulary is reflective of current medical practice as of the date of review.

The information contained in this formulary and its appendices is provided solely for the convenience of medical providers. We do not warrant or assure the accuracy of such information nor is it intended to be comprehensive in nature. This formulary is not intended to be a substitute for the knowledge, expertise, skill, and judgment of the medical provider in his or her choice of prescription drugs. All the information in this formulary is provided as a reference for drug therapy selection. Specific drug selection for an individual patient rests solely with the prescriber. The document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands and mandatory generics whenever applicable.

We assume no responsibility for the actions or omissions of any medical provider based upon reliance, in whole or in part, on the information contained herein. The medical provider should consult the drug manufacturer's product literature or standard references for more detailed information.

National guidelines can be found on the National Guideline Clearinghouse site at [www.ahrq.gov/gam/index.html](http://www.ahrq.gov/gam/index.html) on the websites listed under each therapeutic class and on the sites listed in the WEBSITES section of this publication.

This formulary is a fluid document, which is continually reviewed and modified. This dynamic process does not allow this document to be completely accurate at all times. To accommodate regular changes, an updated electronic version of this formulary is available online at [www.avmed.org/prescriptions](http://www.avmed.org/prescriptions). AvMed welcomes your input and feedback on the information provided in this document.

## **PHARMACY AND THERAPEUTICS (P&T) COMMITTEE**

The services of an independent National Pharmacy and Therapeutics Committee ("P&T Committee") are utilized to approve safe and clinically effective drug therapies. The P&T Committee is an external advisory body of clinical professionals from across the United States. The P&T Committee's voting members include physicians, pharmacists, a pharmaco-economist and a medical ethicist, all of whom have a broad background of clinical and academic expertise regarding prescription drugs. Employees with significant clinical expertise are invited to meet with the P&T Committee, but no employee may vote on issues before the P&T Committee. Voting members of the P&T Committee must disclose any financial relationship or conflicts of interest with any pharmaceutical manufacturers.

### **DEFINITIONS**

**Brand Medication** - A prescription medication that is usually manufactured and sold under a name or trademark by a pharmaceutical manufacturer, or a medication that is identified as a Brand medication by AvMed's Pharmacy Benefits Manager (PBM).

**Brand Additional Charge** - The additional charge that must be paid if you or your prescriber choose a brand medication when a generic equivalent is available. The charge is the difference between the cost of the brand medication and the generic medication. This charge must be paid in addition to the applicable copayment.

**Cost-sharing Medications** - Medications, as designated by AvMed, designed to improve the quality of life by treating relatively minor, non-life-threatening conditions. Such medications are subject to coinsurance and coverage is limited

**Generic Medication** - A prescription medication that has the same active ingredient as a brand medication or is identified as a generic medication by AvMed's Pharmacy Benefits Manager. Generic products approved by the United States Food and Drug Administration (FDA) are just as effective and safe as the brand-name products. Generic medications contain identical active ingredients, have the same indication for use, meet the same manufacturing standards, and are identical in strength and dosage form as brand-name medications.

**Maintenance Medication** - A medication that has been approved by the FDA, for which the duration of therapy can reasonably be expected to exceed one year.

**Participating Pharmacy** - A pharmacy (retail, mail service, or specialty pharmacy) that has entered into an agreement with AvMed to provide prescription drugs to AvMed members and has been designated by AvMed as a participating pharmacy

**Preferred Medication List** - The listing of preferred medications based on clinical efficacy, relative safety, and cost in comparison to similar medications within a therapeutic class. This multi-tiered list establishes different levels of copay for medications within therapeutic classes. As new medications become available, they may be considered excluded until they have been reviewed by the P&T Committee.

**Prescription Medication** - A medication that has been approved by the FDA and that can only be dispensed pursuant to a prescription according to state and federal law.

**Prior Authorization** - The process of obtaining approval for certain prescription drugs (prior to dispensing) according to AvMed's guidelines. The ordering prescriber must obtain approval from AvMed. The list of prescription drugs requiring prior authorization is subject to periodic review and modification by AvMed. To initiate a prior authorization, please visit our website at <https://www.avmed.org/prescriptions/> to obtain a Pharmacy Drug Authorization Request form.

**Self-Administered Injectable Medication** - A medication that has been approved by the FDA for self-injection and is administered by subcutaneous injection. Prior authorization is required for most self-administered injectable medications, except insulin.

**Specialty Medication** - A self-injectable or high-cost oral medication approved by the FDA. These medications must be prescribed by a physician and dispensed by either a retail or participating specialty pharmacy, depending on the medication. The co-payment levels for Specialty Medications apply regardless of provider. This means that you may be responsible for the appropriate co-payment whether you receive your Specialty Medication from the pharmacy, at the physician's office or during home health visits. Specialty Medications are limited to a 30-day supply.

**Quantity Limit** - Medications included in this program allow a maximum quantity per prescription and/or time period for one copay or coinsurance. Quantity limits are developed based upon FDA approved medication labeling and nationally recognized therapeutic clinical guidelines. If your prescription exceeds the quantity limit, prior authorization will be required.

## BENEFIT COVERAGE AND LIMITATIONS

This medication formulary is for reference purposes only and does not guarantee nor define benefit coverage and limitations. Many members have specific benefits, which are not reflected in this formulary. You may contact AvMed's Member Engagement Department regarding any coverage questions by calling the number listed on the back of your card. Please note that the formulary process is dynamic and generally changes throughout the year. These changes typically occur due to, but not limited to, the following reasons: approval of new medications, availability of newly approved generics, changes in clinical data, and medication safety concerns. AvMed is not held responsible for payment if either a medication was omitted or included in error, or that a medication was placed at an incorrect tier on this formulary. The following topics may or may not be applicable to individual members depending on member-specific benefit parameters.

### Coverage

Your prescription medication coverage includes medications that require a prescription, are filled by a participating AvMed pharmacy, and are prescribed by your provider in accordance with AvMed's coverage criteria. AvMed reserves the right to make changes in coverage criteria for covered products and services. Coverage criteria are medical and pharmaceutical protocols used to determine payment of products and services and are based on independent clinical practice guidelines and standards of care established by government agencies and medical/pharmaceutical societies.

Your retail prescription medication coverage includes up to a 30-day supply of a

medication for the listed copay. In most cases, your prescription may be refilled after 75% of your previous fill has been used and is subject to a maximum of 13 refills per year. Many plans may provide the option to obtain a 90-day supply of a medication at a retail or mail pharmacy for a reduced amount. Please refer to your specific pharmacy benefits.

Your mail-service prescription medication coverage includes up to a 90-day supply of most medications for the listed copay per your prescription benefits. If the amount of medication is less than a 90-day supply, such as a 75-day supply, you will still be charged the listed mail-service copay per your prescription benefits.

Your specialty medication coverage extends to many self-injectable and high-cost oral medications approved by the FDA. These medications must be ordered by a prescriber and dispensed by a retail or specialty pharmacy, depending on the type of medication. The copayment levels for specialty medications apply regardless of provider. This means that you may be responsible for the appropriate copayment whether you receive your Specialty Medication from the pharmacy, at the physician's office or during home health visits. Specialty Medications are limited to a 30-day supply.

Quantity limits are set in accordance with FDA approved prescribing limitations, general practice guidelines supported by medical specialty organizations, and/or evidence-based, statistically valid, clinical studies. This means that a medication-specific quantity limit may apply for medications that have an increased potential for over-utilization or an increased potential for a member to experience an adverse event at higher doses.

### **Prior Authorization Process**

The prior authorization process requires the practitioner to provide information to support a requested exception request. These authorization requests must be submitted to AvMed by fax to 1-305-671-0200 using the Pharmacy Drug Authorization Request form. The Pharmacy Drug Authorization Request form is available at: <https://www.avmed.org/prescriptions/>.

Information needed to make coverage determinations of medications requiring prior authorization may include lab values, prescription history, a statement of medical necessity and any other pertinent information to satisfy the established coverage guideline for the requested medication. In most cases, coverage determinations will be made within 1-3 business days if authorization is deemed urgent and within 10-14 business days if identified as standard or routine.

### **Member Initiated Prior Authorization Process**

Members may request a prior authorization by directly contacting the AvMed Member Engagement Department at the number on their membership card. The member should have the prescriber information (phone number) and any pertinent information related to the request to provide to the Member Engagement Department. Members may also initiate the prior authorization process by logging into [www.avmed.org](http://www.avmed.org) and then clicking the link "Prescriptions".

### **Quantity Limit Exception**

Certain medications allow for a maximum quantity per prescription and/or time

period for one copay or coinsurance. Medications with applicable quantity limits are noted on the formulary. Quantity limits are developed based upon FDA-approved medication labeling and nationally recognized therapeutic clinical guidelines. If a prescription exceeds the quantity limit, the prescriber should provide a statement of medical necessity and request a prior authorization for the quantity limit exception as described above.

### **Step Therapy**

Medications that require a trial of one or more first and/or second-line medications for the requested medication to be covered under the pharmacy benefit. If for medical reasons, the member cannot use the first and/or second-line medication, the prescriber should request a prior authorization as described above.

### **Non-formulary Medication Requests**

A request for a non-formulary medication requires documentation from the member's medical records and/or prescription claims history verifying the following: statement of medical necessity; contraindications to ALL other formulary alternatives; or therapeutic failure of adequate trials of one to three months of each and ALL other formulary alternatives. Non-formulary requests may be requested by the prescriber through the prior authorization process as described above.

### **Clinically Equivalent Drugs (CED)**

Clinically Equivalent Drugs (CED) are medications that are clinically comparable to a medication that is already covered on the formulary. For this reason, coverage for a CED medication requires the prescriber to submit clinical documentation to establish medical necessity of the CED medication over comparable the formulary alternative(s). Medications labeled as CED on the formulary will also have a prior authorization requirement.

### **Tier Description**

Each copay tier is assigned an established co-payment, which is the amount you pay when you fill a prescription. Consult your benefit documents to determine your specific co-payments, coinsurance, and/or deductibles that are part of your plan. You and your doctor decide which medication is most appropriate for you.

Tier	Definition
<b>1</b>	<b>Preferred Generics</b> - These are preferred generic medications and are in the low range for out-of-pocket expense. You should always consider Tier 1 medications if you and your doctor decide they are appropriate to treat your condition.
<b>2</b>	<b>Non-Preferred Generics</b> - These are non-preferred generic medications or higher cost generic medications and are in the low to mid-range for out-of-pocket expense. Sometimes there are alternatives available in Tier 1 that may be appropriate to treat your condition. If you are currently taking a Tier 2 medication, ask your doctor whether there are lower copayment alternatives that may be right for your treatment.
<b>3</b>	<b>Preferred Brands</b> - These are preferred brand medications and are in the mid-to-higher range for out-of-pocket expense. Sometimes there are alternatives available in Tier 1 or Tier 2 that may be appropriate to treat your condition. If you are currently taking a Tier 3 medication, ask your doctor whether there are lower copayment alternatives that may be right for your treatment.
<b>4</b>	<b>Non-Preferred Brands</b> - These are non-preferred brand medications and are typically the higher range for out-of-pocket expense.
<b>5</b>	<b>Specialty Medications</b> - These are brand or generic-name specialty medications or high-cost medications and are typically the highest out-of-pocket expense. Distribution of specialty medications is limited to our specialty pharmacy.

\*Please note that **Brand** products are listed in CAPITALS and **Generic** products are listed in *lowercase italics*.

### **Mandated Generic Substitution**

AvMed advocates the use of cost-effective generic medications where FDA-labeled brand-equivalent medications are available. A generic medication is approved by the FDA once the manufacturer has proven that it has the same active ingredient(s) as the brand-name medication. Generally, generic medications cost less than brand-name medications. If a member or a prescriber requests a brand- name product in lieu of an approved generic, the member, based upon his/her coverage, will typically be required to pay the Non-Preferred Brand Copay plus the Brand Additional Charge.

### **Health Care Reform – Preventive Medications**

The Patient Protection and Affordable Care Act of 2010 allows members to receive some preventative, evidence-based items, and services at no cost to the member with certain stipulations. Examples of categories of medications that may be subject to limited, or \$0 cost share include aspirin, breast cancer preventative, fluoride supplements, folic acid supplements, iron supplements, tobacco cessation products, immunizations, bowel preparation for colonoscopy, and some contraceptive medications and devices.

Some of the limitations for receiving these medications at no cost to the member require that: (1) the medication is covered as part of the prescription benefits, (2) a prescription is required, and (3) this coverage will only apply in a retail pharmacy. As new guidance continues to be released for coverage of preventive medications, the list and/or restrictions will be updated accordingly.

### **Opioid Medication Management**

To combat the national opioid crisis, the Centers for Disease Control and Prevention's (CDC) Guideline for Prescribing Opioids for Chronic Pain updated how health care providers can better manage pain, including safer ways to use opioids. AvMed is taking action based on the CDC guideline to help prevent opioid abuse with our members' utmost safety in mind.

### **How we help members safely use opioid medication**

- Set a coverage limit for up to seven days if you are new to therapy
- Limit opioid medication amounts for new or ongoing therapy covered by your plan
- Ensuring the use of short-acting opioids before using long-acting ones

### **Balancing risks and benefits**

Prescription opioids can manage short-term pain like after a surgery or injury. But they may not work as well in the long-term to manage chronic pain. Plus, you're more likely to overdose or become addicted from using opioids for a long time. And overdose can cause serious health problems or even death. Other treatments like exercise or non-opioid pain relievers with less serious risks may be an option.

Members should work with their doctor to find the safest ways to best manage their condition.

## **HOW CAN I SAVE MONEY ON PRESCRIPTIONS?**

Always ask your doctor to consider choosing an appropriate medication from the formulary that is on the lower tier selections, such as Tier 1 or Tier 2. Medications within these tiers have the lowest out-of-pocket cost for you. If you are currently taking a Tier 3 or 4 medication, you should consult with your physician to see if there are other medication alternatives that are on a lower tier.

### **MAIL-SERVICE PRESCRIPTIONS**

Some members can order their prescriptions from a mail-service pharmacy. These members can receive up to a 90-day supply of certain medications through the mail for a specified co-payment as outlined in their group benefits plan. Receiving a 90-day supply of medication by mail may prove to be more economical for you. The convenience of mail service may also help you stay compliant with your medications. Simply ask your prescriber to write the prescription(s) for a 90-day supply and submit it with your mail-service request forms to the address listed on the form. Medications ordered and processed through mail service are typically mailed to the member via U.S. regular mail. You should allow up to 14 days for delivery from the time the mail service receives the request. (Note: Per federal and/or state law, some controlled substance medications are not available through mail service, except for some Schedule III, IV and V medications.) Prescriptions submitted to mail service for less than a 90-day supply may be returned to the member.

## **MEDICATIONS PRE-PACKAGED AS A 90-DAY SUPPLY**

Our pharmacy benefit covers some medications that are pre-packaged, dispensed and sold as a 90-day supply. Members who are prescribed these medications will be charged the applicable tier co-payment for a 90-day supply whether the prescription is filled at retail or through the mail-service option. Examples of medications packaged as 90-day supplies include: Estring, Femring, and Seasonique. Please consult our website for an up-to-date list of medications or call Member Engagement at the number on the back of your card for more information on coverage.

## **CONTACT INFORMATION**

This formulary is designed to assist prescribers, members, and other health care professionals in the selection of cost- effective medications. AvMed encourages your input and feedback on how we can assist in improving this document and the formulary management process. You may contact AvMed's Member Engagement Department by calling the number listed on the back of your card. For additional information, please visit our website at:

[www.avmed.org/prescriptions.](http://www.avmed.org/prescriptions)

## **NOTICE**

The information contained in this document is proprietary. The information may not be copied in whole or in part without written permission. ©2024. All rights reserved. This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers.

AvMed and Express Scripts do not operate the websites/organizations listed here, nor are they responsible for the availability or reliability of the websites' content. These listings do not imply or constitute an endorsement, sponsorship, or recommendation by AvMed or Express Script.

When viewing this formulary via the Internet, please be advised that this formulary is updated periodically, and changes may appear prior to their effective date to allow for client notification.

**This Guidebook includes information accurate at the time it was collected from Express Scripts' systems and may not reflect actual benefit setup details at later times.**

## **Table of Contents**

<b>ANTI - INFECTIVES .....</b>	12
<b>ANTINEOPLASTIC &amp; IMMUNOSUPPRESSANT DRUGS .....</b>	23
<b>AUTONOMIC &amp; CNS DRUGS, NEUROLOGY &amp; PSYCH.....</b>	32
<b>CARDIOVASCULAR, HYPERTENSION &amp; LIPIDS.....</b>	65
<b>DERMATOLOGICALS/TOPICAL THERAPY .....</b>	77
<b>DIAGNOSTICS &amp; MISCELLANEOUS AGENTS .....</b>	90
<b>EAR, NOSE &amp; THROAT MEDICATIONS.....</b>	93
<b>ENDOCRINE/DIABETES .....</b>	95
<b>GASTROENTEROLOGY .....</b>	105
<b>IMMUNOLOGY, VACCINES &amp; BIOTECHNOLOGY .....</b>	114
<b>IMMUNOLOGY .....</b>	120
<b>MUSCULOSKELETAL &amp; RHEUMATOLOGY.....</b>	121
<b>OBSTETRICS &amp; GYNECOLOGY.....</b>	125
<b>OPHTHALMOLOGY .....</b>	133
<b>RESPIRATORY, ALLERGY, COUGH &amp; COLD .....</b>	139
<b>UROLOGICALS.....</b>	146
<b>VITAMINS, HEMATINICS &amp; ELECTROLYTES .....</b>	147
<b>Index .....</b>	151

## List of Abbreviations

**1:** Preferred Generics

**2:** Non-Preferred Generics

**3:** Preferred Brands

**4:** Non-Preferred Brands

**5:** Specialty Medications

**9:** Affordable Care Act Drug (ACA) - \$0 copay

**CED:** 'Clinically Equivalent Drugs (CED) may not be covered under the Plan if you could use a clinically equivalent formulary drug. "Clinically Equivalent Drug" means a drug that for most individuals will give you similar results for a disease or condition. For more information please contact Member Services at the number listed on the back of your member ID card

**ACA:** Affordable Care Act (ACA) preventive prescription drugs and over the counter items identified as an A or B recommendation by the United States Preventive Services Task Force. Please use this link for a list of Covered preventive care services: [healthcare.gov/what-are-my-preventive-care-benefits](http://healthcare.gov/what-are-my-preventive-care-benefits).

**CGM:** Continuous Glucose Monitor

**LA:** Limited Availability. This prescription may be available only at certain pharmacies. For more information, please call Customer Service.

**OTC:** Over the Counter. An OTC drug is a non-prescription drug.

**PA:** Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

**QL:** Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

**SP:** Specialty Drug

**ST:** Step Therapy. 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, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

Drug Name	Drug Tier	Requirements / Limits
<b>ANTI - INFECTIVES</b>		
<b>ANTIFUNGAL AGENTS</b>		
ANCOBON	4	PA
BREXAFEMME	4	PA
<i>clotrimazole mucous membrane</i>	1	QL (5 per 1 day)
CRESEMBA ORAL CAPSULE 186 MG	4	PA; QL (2 per 1 day)
CRESEMBA ORAL CAPSULE 74.5 MG	4	PA; QL (5 per 1 day)
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION 10 MG/ML	4	QL (40 per 1 day)
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML	4	QL (10 per 1 day)
DIFLUCAN ORAL TABLET 100 MG, 200 MG	4	QL (4 per 1 day)
<i>fluconazole oral suspension for reconstitution 10 mg/ml</i>	1	QL (40 per 1 day)
<i>fluconazole oral suspension for reconstitution 40 mg/ml</i>	1	QL (20 per 1 day)
<i>fluconazole oral tablet 100 mg, 200 mg</i>	1	QL (4 per 1 day)
<i>fluconazole oral tablet 150 mg</i>	1	QL (20 per 30 days)
<i>fluconazole oral tablet 50 mg</i>	1	QL (8 per 1 day)
<i>flucytosine</i>	2	PA
<i>griseofulvin microsize oral suspension</i>	1	QL (40 per 1 day)
<i>griseofulvin microsize oral tablet</i>	1	QL (2 per 1 day)
<i>griseofulvin ultramicrosize</i>	1	QL (3 per 1 day)
<i>itraconazole oral capsule</i>	2	QL (4 per 1 day)
<i>itraconazole oral solution</i>	CED	PA; QL (40 per 1 day)
<i>ketoconazole oral</i>	1	QL (20 per 1 day)
NOXAFIL ORAL SUSP,DELAYED RELEASE FOR RECON	4	PA; QL (1 per 1 day)
NOXAFIL ORAL SUSPENSION	4	PA; QL (20 per 1 day)
NOXAFIL ORAL TABLET,DELAYED RELEASE (DR/EC)	4	PA; QL (8 per 1 day)
<i>nystatin oral suspension</i>	1	QL (24 per 1 day)
<i>nystatin oral tablet</i>	1	QL (6 per 1 day)
ORAVIG	CED	PA; 14 tablets per fill
<i>posaconazole oral suspension</i>	2	QL (20 per 1 day)
<i>posaconazole oral tablet,delayed release (dr/ec)</i>	2	PA; QL (8 per 1 day)

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
SPORANOX ORAL CAPSULE	4	QL (4 per 1 day)
SPORANOX ORAL SOLUTION	CED	PA; QL (40 per 1 day)
<i>terbinafine hcl oral</i>	1	QL (20 per 1 day)
TOLSURA	CED	PA; QL (4 per 1 day)
VFEND ORAL SUSPENSION FOR RECONSTITUTION	CED	PA; QL (10 per 1 day)
VFEND ORAL TABLET 200 MG	4	QL (2 per 1 day)
VFEND ORAL TABLET 50 MG	4	QL (4 per 1 day)
VIVJOA	4	PA; QL (10 per 84 days)
<i>voriconazole oral suspension for reconstitution</i>	CED	PA; QL (20 per 1 day)
<i>voriconazole oral tablet 200 mg</i>	2	QL (2 per 1 day)
<i>voriconazole oral tablet 50 mg</i>	2	QL (4 per 1 day)

## ANTIVIRALS

<i>abacavir</i>	1	SP
<i>abacavir-lamivudine</i>	2	SP
<i>acyclovir oral capsule</i>	1	
<i>acyclovir oral suspension 200 mg/5 ml</i>	1	
<i>acyclovir oral tablet</i>	1	
<i>adefovir</i>	5	PA; SP; QL (20 per 1 day)
<i>amantadine hcl</i>	1	
APRETUDE	5	ACA; QL (20 per 30 days)
APTIVUS	5	SP
<i>atazanavir</i>	2	SP
ATRIPLA	5	
BARACLUDÉ ORAL SOLUTION	5	SP; QL (20 per 1 day)
BARACLUDÉ ORAL TABLET	5	SP; QL (1 per 1 day)
BIKTARVY	5	SP
CABENUVA	5	PA; QL (20 per 28 days)
CIMDUO	5	SP
COMPLERA	5	SP
<i>darunavir</i>	2	SP
DELSTRIGO	5	SP
DESCOVY	5	SP; ACA
<i>didanosine oral capsule, delayed release(dr/ec) 250 mg, 400 mg</i>	2	SP

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
DOVATO	5	SP; QL (20 per 1 day)
EDURANT	5	SP
<i>efavirenz oral tablet</i>	2	SP
<i>efavirenz-emtricitabin-tenofovir</i>	5	SP
<i>efavirenz-lamivu-tenofovir disop</i>	1	SP
<i>emtricitabine</i>	2	SP
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	5	SP
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	5	SP; ACA
EMTRIVA	5	SP
<i>entecavir</i>	5	SP; QL (20 per 1 day)
EPCLUSA	5	PA; SP; QL (20 per 1 day)
EPIVIR	5	SP
<i>etravirine</i>	5	SP
EVOTAZ	5	SP
<i>famciclovir</i>	1	
FLUMADINE ORAL TABLET	4	
<i>fosamprenavir</i>	2	SP
FUZEON SUBCUTANEOUS RECON SOLN	5	SP
GENVOYA	5	SP
HARVONI	5	PA; SP
INTELENCE	5	SP
ISENTRESS	5	SP
ISENTRESS HD	5	SP
JULUCA	5	SP
KALETRA	5	SP
LAGEVRIO (EUA)	4	8 capsules per day ; 80 capsules in 365 days
<i>lamivudine oral solution</i>	1	SP
<i>lamivudine oral tablet 100 mg</i>	5	SP; QL (20 per 1 day)
<i>lamivudine oral tablet 150 mg, 300 mg</i>	1	SP
<i>lamivudine-zidovudine</i>	2	SP
LEDIPASVIR-SOFOSBUVIR	5	PA; SP
LIVTENCITY	5	PA; QL (4 per 1 day)

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 oral solution</i>	2	SP
<i>lopinavir-ritonavir oral tablet</i>	5	SP
<i>maraviroc</i>	5	SP
MAVYRET ORAL PELLETS IN PACKET	5	PA; QL (6 per 1 day)
MAVYRET ORAL TABLET	5	PA; QL (3 per 1 day)
<i>nevirapine</i>	2	SP
NORVIR ORAL POWDER IN PACKET	5	SP
NORVIR ORAL TABLET	5	SP
ODEFSEY	5	SP
<i>oseltamivir</i>	1	
PAXLOVID ORAL TABLETS,DOSE PACK 150-100 MG	3	QL (40 per 365 days)
PAXLOVID ORAL TABLETS,DOSE PACK 300 MG (150 MG X 2)-100 MG	3	QL (60 per 365 days)
PIFELTRO	5	SP
PREVYMIS ORAL	5	PA; SP; QL (1 per 1 day)
PREZCOBIX	5	SP
PREZISTA ORAL SUSPENSION	5	SP
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	5	SP
RELENZA DISKHALER	4	QL (20 per 180 days)
RETROVIR ORAL CAPSULE	5	SP
RETROVIR ORAL SYRUP	5	SP
REYATAZ ORAL CAPSULE 200 MG, 300 MG	5	SP
REYATAZ ORAL POWDER IN PACKET	5	SP
<i>ribavirin inhalation</i>	5	SP
<i>rimantadine</i>	1	
<i>ritonavir</i>	1	SP
RUKOBIA	5	PA; QL (20 per 1 day)
SELZENTRY ORAL SOLUTION	5	SP
SELZENTRY ORAL TABLET 150 MG, 300 MG	5	SP
SOFOSBUVIR-VELPATASVIR	5	PA; SP; QL (10 per 1 day)
SOVALDI	5	PA; SP
<i>stavudine oral capsule 40 mg</i>	2	SP
STRIBILD	5	SP

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
SUNLENCA ORAL	5	PA; QL (1 per 365 days)
SUNLENCA SUBCUTANEOUS	5	PA; QL (3 per 126 days)
SYMFI	5	SP
SYMFI LO	5	SP
SYMTUZA	5	SP
SYNAGIS	5	PA; LA; QL (20 per 28 days)
TAMIFLU	4	
TEMBEXA ORAL SUSPENSION	4	65 mL per fill
TEMBEXA ORAL TABLET	4	4 tabs per fill
<i>tenofovir disoproxil fumarate</i>	2	SP; QL (20 per 1 day)
TIVICAY ORAL TABLET 50 MG	5	SP
TIVICAY PD	5	SP; QL (6 per 1 day)
TRIUMEQ	5	SP
TRIUMEQ PD	5	SP
TRUVADA	5	SP
TYBOST	5	SP
<i>valacyclovir</i>	1	
VALCYTE ORAL RECON SOLN	5	PA for age 18 and older; SP
VALCYTE ORAL TABLET	5	SP
<i>valganciclovir oral recon soln</i>	5	PA for age 18 and older; SP
<i>valganciclovir oral tablet</i>	5	SP
VALTREX	4	
VEMLIDY	5	PA; SP; QL (20 per 1 day)
VIRACEPT ORAL TABLET	5	SP
VIRAZOLE	5	SP
VIREAD ORAL POWDER	5	SP; QL (8 per 1 day)
VIREAD ORAL TABLET	5	SP; QL (20 per 1 day)
VOSEVI	5	PA; SP
XOFLUZA ORAL TABLET 40 MG, 80 MG	4	QL (20 per 183 days)
ZEPATIER	5	PA
ZIAGEN ORAL SOLUTION	5	SP
<i>zidovudine</i>	1	SP
<b>CEPHALOSPORINS</b>		
<i>cefaclor oral capsule</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
cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml	1	
cefaclor oral tablet extended release 12 hr	2	
cefadroxil oral capsule	1	
cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml	1	
cefadroxil oral tablet	1	
cefdinir	1	
cefixime	2	
cefpodoxime	1	
cefprozil	1	
cefuroxime axetil oral tablet	1	
cephalexin oral capsule 250 mg, 500 mg	1	
cephalexin oral capsule 750 mg	2	
cephalexin oral suspension for reconstitution	1	
cephalexin oral tablet	CED	PA

#### ERYTHROMYCINS & OTHER MACROLIDES

azithromycin oral	1	
clarithromycin	1	
DIFICID ORAL SUSPENSION FOR RECONSTITUTION	4	PA; 100 ml per fill
DIFICID ORAL TABLET	4	PA; 20 tablets per fill
e.e.s. 400 oral tablet	1	
E.E.S. GRANULES	4	PA for age 18 and older
ERYPED 200	4	PA for age 18 and older
ERYPED 400	4	PA for age 18 and older
ery-tab oral tablet,delayed release (dr/ec) 250 mg, 333 mg	2	
ERY-TAB ORAL TABLET,DELAYED RELEASE (DR/EC) 500 MG	4	
erythrocin (as stearate) oral tablet 250 mg	2	
erythromycin ethylsuccinate oral suspension for reconstitution	2	PA for age 18 and older
erythromycin ethylsuccinate oral tablet	1	
erythromycin oral capsule,delayed release(dr/ec)	1	
erythromycin oral tablet	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin oral tablet, delayed release (dr/ec)</i>	2	
ZITHROMAX ORAL PACKET	4	
ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION	4	
ZITHROMAX ORAL TABLET 250 MG, 500 MG	4	
ZITHROMAX TRI-PAK	4	
ZITHROMAX Z-PAK	4	
<b>MISCELLANEOUS ANTIINFECTIVES</b>		
AEMCOLO	4	QL (20 per 30 days)
<i>albendazole</i>	2	4 tablets per fill
ALINIA ORAL SUSPENSION FOR RECONSTITUTION	4	PA; QL (20 per 1 day)
ALINIA ORAL TABLET	4	PA; QL (6 per 1 day)
<i>amikacin injection solution 1,000 mg/4 ml, 500 mg/2 ml</i>	1	
ARAKODA	4	
ARIKAYCE	5	PA; LA; QL (8.4 per 1 day)
<i>atovaquone</i>	2	
<i>atovaquone-proguanil</i>	2	
BENZNIDAZOLE	4	PA
BETHKIS	5	
BILTRICIDE	4	
CAYSTON	5	SP; LA
<i>chloroquine phosphate</i>	1	
CLEOCIN HCL	4	
CLEOCIN PEDIATRIC	4	
<i>clindamycin hcl</i>	1	
<i>clindamycin pediatric</i>	1	
COARTEM	4	
CYCLOSERINE	4	
<i>dapsone oral</i>	1	
DARAPRIM	5	PA; SP; QL (3 per 1 day)
EMVERM	4	PA; 2 tablets per fill
<i>ethambutol</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
FLAGYL ORAL CAPSULE	CED	PA
HUMATIN	4	
<i>hydroxychloroquine oral tablet 100 mg, 300 mg, 400 mg</i>	CED	PA
<i>hydroxychloroquine oral tablet 200 mg</i>	1	
IMPAVIDO	5	SP
<i>isoniazid oral</i>	1	
<i>ivermectin oral</i>	1	PA; QL (20 per 90 days)
KITABIS PAK	5	SP
KRINTAFEL	4	QL (2 per 365 days)
LAMPIT	4	PA
LIKMEZ	CED	PA
<i>linezolid</i>	1	
MALARONE	4	
MALARONE PEDIATRIC	4	
<i>mefloquine</i>	1	
MEPRON	4	
<i>metronidazole oral capsule</i>	CED	PA
<i>metronidazole oral tablet</i>	1	
MYAMBUTOL ORAL TABLET 400 MG	4	
MYCOBUTIN	4	
NEBUPENT	4	
<i>neomycin</i>	1	
<i>nitazoxanide</i>	2	PA; QL (6 per 1 day)
<i>paromomycin</i>	1	
PASER	4	
<i>pentamidine inhalation</i>	2	
PLAQUENIL	4	
<i>praziquantel</i>	2	
PRETOMANID	4	PA; QL (20 per 1 day)
PRIFTIN	4	
<i>primaquine</i>	1	
<i>pyrazinamide</i>	2	
<i>pyrimethamine</i>	5	PA; SP; QL (3 per 1 day)

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
QUALAQUIN	4	
<i>quinine sulfate</i>	2	
<i>rifabutin</i>	2	
<i>rifampin oral</i>	1	
SIRTURO	CED	PA; LA
SIVEXTRO ORAL	5	SP
SOLOSEC	CED	PA
STROMECTOL	4	PA; QL (20 per 90 days)
<i>tinidazole</i>	1	
TOBI	5	SP
TOBI PODHALER	5	ST; SP
<i>tobramycin in 0.225 % nacl</i>	5	SP
<i>tobramycin inhalation</i>	5	
TOBRAMYCIN WITH NEBULIZER	5	SP
TRECATOR	4	
XENLETA ORAL	4	PA; QL (10 per 30 days)
XIFAXAN ORAL TABLET 200 MG	4	PA; QL (20 per 365 days)
XIFAXAN ORAL TABLET 550 MG	4	PA; QL (20 per 120 days)
ZYVOX ORAL	4	
<b>PENICILLINS</b>		
<i>amoxicillin oral capsule</i>	1	
<i>amoxicillin oral suspension for reconstitution</i>	1	
<i>amoxicillin oral tablet</i>	1	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	1	
<i>amoxicillin-pot clavulanate</i>	1	
<i>ampicillin oral capsule 500 mg</i>	1	
AUGMENTIN ES-600	4	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	4	
AUGMENTIN XR	4	
<i>dicloxacillin</i>	1	
MOXATAG	4	
<i>penicillin v potassium</i>	1	
<b>QUINOLONES</b>		

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
BAXDELA ORAL	4	
CIPRO ORAL SUSPENSION,MICROCAPSULE RECON	4	
CIPRO ORAL TABLET 250 MG, 500 MG	4	
<i>ciprofloxacin</i>	2	
<i>ciprofloxacin hcl oral</i>	1	
FACTIVE	4	
<i>levofloxacin oral solution</i>	2	
<i>levofloxacin oral tablet</i>	1	
<i>moxifloxacin oral</i>	2	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	1	
<b>SULFA'S &amp; RELATED AGENTS</b>		
BACTRIM	4	
BACTRIM DS	4	
<i>sulfadiazine</i>	2	
<i>sulfamethoxazole-trimethoprim oral</i>	1	
<i>sulfatrim</i>	1	
<b>TETRACYCLINES</b>		
ACTICLATE	CED	PA
<i>avidoxy</i>	1	
AVIDOXY DK	CED	PA
<i>demeclocycline</i>	1	
DORYX MPC ORAL TABLET,DELAYED RELEASE (DR/EC) 60 MG	CED	PA
DORYX ORAL TABLET,DELAYED RELEASE (DR/EC) 200 MG, 80 MG	CED	PA
<i>doxycycline hyclate oral capsule</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	1	
<i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i>	CED	PA
<i>doxycycline hyclate oral tablet,delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 50 mg, 75 mg</i>	CED	PA
DOXYCYCLINE HYCLATE ORAL TABLET,DELAYED RELEASE (DR/EC) 80 MG	CED	PA
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</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>doxycycline monohydrate oral capsule 150 mg, 75 mg</i>	CED	PA
DOXYCYCLINE MONOHYDRATE ORAL CAPSULE,IR - DELAY REL,BIPHASE	CED	PA
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	
<i>doxycycline monohydrate oral tablet 100 mg, 50 mg</i>	1	
<i>doxycycline monohydrate oral tablet 150 mg, 75 mg</i>	CED	PA
LYMEPAK	4	
<i>minocycline oral capsule</i>	1	
MINOCYCLINE ORAL CAPSULE,EXTENDED RELEASE 24HR	CED	PA
<i>minocycline oral tablet</i>	CED	PA
<i>minocycline oral tablet extended release 24 hr</i>	CED	PA
<i>monodoxine nl oral capsule 100 mg</i>	1	
<i>monodoxine nl oral capsule 75 mg</i>	CED	PA
MONODOX ORAL CAPSULE 100 MG, 50 MG	CED	
MONODOX ORAL CAPSULE 75 MG	CED	PA
MORGIDOX 1X 50	CED	PA
MORGIDOX 1X100	CED	PA
<i>morgidox oral capsule 100 mg</i>	1	
NUZYRA ORAL	CED	PA
ORACEA	CED	PA
SEYSARA	4	ST
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	CED	PA
TARGADOX	CED	PA
<i>tetracycline oral capsule</i>	1	
VIBRAMYCIN ORAL CAPSULE 100 MG	4	
XIMINO	CED	PA
<b>URINARY TRACT AGENTS</b>		
<i>fosfomycin tromethamine</i>	2	
FURADANTIN	4	

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
HIPREX	4	
MACROBID	4	
MACRODANTIN	4	
<i>methenamine hippurate</i>	2	
<i>methenamine mandelate</i>	2	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>	1	
<i>nitrofurantoin macrocrystal oral capsule 25 mg</i>	2	
<i>nitrofurantoin monohyd/m-cryst</i>	1	
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	2	PA
NITROFURANTOIN ORAL SUSPENSION 50 MG/5 ML	CED	PA
PRIMSOL	4	
<i>trimethoprim</i>	1	
<b>VANCOMYCYIN</b>		
FIRVANQ	CED	PA
VANCOCIN	4	
<i>vancomycin oral capsule</i>	2	
<i>vancomycin oral recon soln</i>	CED	PA
<b>ANTINEOPLASTIC &amp; IMMUNOSUPPRESSANT DRUGS</b>		
<b>ADJUNCTIVE AGENTS</b>		
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg</i>	2	
<i>leucovorin calcium oral tablet 5 mg</i>	1	
MESNEX ORAL	5	SP
VISTOGARD	5	SP
<b>ANTINEOPLASTIC &amp; IMMUNOSUPPRESSANT DRUGS</b>		
<i>abiraterone oral tablet 250 mg</i>	5	PA; SP; QL (20 per 1 day)
<i>abiraterone oral tablet 500 mg</i>	CED	PA; SP
AFINITOR	5	PA; SP; QL (1 per 1 day)
AFINITOR DISPERZ	5	PA; SP
AKEEGA	5	PA; SP; QL (20 per 1 day)
ALECENSA	5	PA; SP; QL (20 per 1 day)
ALKERAN	5	PA; SP
ALUNBRIG ORAL TABLET	5	PA; QL (20 per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
ALUNBRIG ORAL TABLETS,DOSE PACK	5	PA; QL (30 per 365 days)
<i>anastrozole</i>	1	ACA
ARIMIDEX	4	
AROMASIN	4	
ASTAGRAF XL	CED	PA; SP
AUGTYRO	5	PA; SP; QL (8 per 1 day)
AYVAKIT	5	PA; LA; QL (10 per 1 day)
AZASAN	CED	PA
<i>azathioprine oral tablet 100 mg, 75 mg</i>	CED	PA
<i>azathioprine oral tablet 50 mg</i>	1	
BALVERSA	5	PA; SP; LA; QL (20 per 1 day)
<i>bexarotene</i>	5	PA; SP
<i>bicalutamide</i>	1	
BOSULIF ORAL CAPSULE 100 MG	5	PA; SP; QL (1 per 1 day)
BOSULIF ORAL CAPSULE 50 MG	5	PA; SP; QL (4 per 1 day)
BOSULIF ORAL TABLET 100 MG	5	PA; SP; QL (3 per 1 day)
BOSULIF ORAL TABLET 400 MG	5	PA; QL (1 per 1 day)
BOSULIF ORAL TABLET 500 MG	5	PA; SP; QL (1 per 1 day)
BRAFTOVI	5	PA; LA; QL (20 per 1 day)
BRUKINSA	5	PA; SP; LA; QL (10 per 1 day)
CABOMETYX	5	PA; SP; LA; QL (20 per 1 day)
CALQUENCE (ACALABRUTINIB MAL)	5	PA; SP; LA; QL (2 per 1 day)
<i>capecitabine oral tablet 150 mg</i>	5	PA; SP; QL (4 per 1 day)
<i>capecitabine oral tablet 500 mg</i>	5	PA; SP; QL (10 per 1 day)
CAPRELSA	5	PA; SP; LA; QL (20 per 1 day)
CASODEX	4	
CELLCEPT	5	SP
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1)	5	PA; SP; QL (56 per 28 days)
COMETRIQ ORAL CAPSULE 140 MG/DAY(80 MG X1-20 MG X3)	5	PA; SP; QL (112 per 28 days)
COMETRIQ ORAL CAPSULE 60 MG/DAY (20 MG X 3/DAY)	5	PA; SP; QL (84 per 28 days)
COPIKTRA	5	PA; LA; QL (10 per 1 day)
COTELLIC	5	PA; SP; LA; QL (20 per 1 day)

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
cyclophosphamide oral capsule	5	SP
CYCLOPHOSPHAMIDE ORAL TABLET	5	
cyclosporine modified	1	SP
cyclosporine oral capsule	1	SP
DAURISMO ORAL TABLET 100 MG	5	PA; QL (1 per 1 day)
DAURISMO ORAL TABLET 25 MG	5	PA; QL (2 per 1 day)
DROXIA	3	
ELIGARD	5	PA; QL (20 per 28 days)
ELIGARD (3 MONTH)	5	PA; QL (20 per 63 days)
ELIGARD (4 MONTH)	5	PA; QL (20 per 112 days)
ELIGARD (6 MONTH)	5	PA; QL (20 per 126 days)
EMCYT	5	PA; SP
ENSPRYNG	5	PA; QL (20 per 28 days)
ENVARSUS XR	CED	PA; SP
ERIVEDGE	5	PA; SP; QL (20 per 1 day)
ERLEADA	5	PA; SP; QL (20 per 1 day)
erlotinib oral tablet 100 mg, 150 mg	5	PA; SP; QL (1 per 1 day)
erlotinib oral tablet 25 mg	5	PA; SP; QL (3 per 1 day)
etoposide oral	5	PA; SP
EULEXIN	4	
everolimus (antineoplastic) oral tablet	5	PA; SP; QL (20 per 1 day)
everolimus (antineoplastic) oral tablet for suspension	5	PA; SP
everolimus (immunosuppressive) oral tablet 0.25 mg, 0.5 mg, 0.75 mg	5	SP
everolimus (immunosuppressive) oral tablet 1 mg	5	
exemestane	1	ACA
EXKIVITY	5	PA; QL (20 per 1 day)
FARESTON	4	QL (20 per 1 day)
FEMARA	4	
FENSOLVI	5	PA; QL (20 per 126 days)
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 120 MG	5	QL (2 per 365 days)
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 80 MG	5	QL (1 per 30 days)

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FOTIVDA	5	PA; QL (21 per 28 days)
FRUZAQLA ORAL CAPSULE 1 MG	5	PA; SP; QL (84 per 28 days)
FRUZAQLA ORAL CAPSULE 5 MG	5	PA; SP; QL (21 per 28 days)
GAVRETO	5	PA; LA; QL (20 per 1 day)
<i>gefitinib</i>	2	PA; QL (20 per 1 day)
<i>gengraf</i>	1	SP
GILOTRIF	5	PA; SP; QL (1 per 1 day)
GLEEVEC ORAL TABLET 100 MG	5	PA; SP; QL (3 per 1 day)
GLEEVEC ORAL TABLET 400 MG	5	PA; SP; QL (2 per 1 day)
GLEOSTINE	5	PA; SP
HYCAMTIN ORAL	5	PA
HYDREA	4	SP
<i>hydroxyurea</i>	1	
IBRANCE	5	PA; SP; QL (1 per 1 day)
ICLUSIG	5	PA; QL (20 per 1 day)
IDHIFA	5	PA; SP; LA; QL (20 per 1 day)
<i>imatinib</i>	5	PA; SP; QL (20 per 1 day)
IMBRUVICA ORAL CAPSULE	5	PA; SP; QL (20 per 1 day)
IMBRUVICA ORAL SUSPENSION	5	PA; SP; QL (20 per 1 day)
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG	5	PA; SP; QL (20 per 1 day)
IMURAN	4	
INLYTA ORAL TABLET 1 MG	5	PA; SP; QL (6 per 1 day)
INLYTA ORAL TABLET 5 MG	5	PA; SP; QL (4 per 1 day)
INQOVI	5	PA; SP; QL (5 per 28 days)
INREBIC	5	PA; LA; QL (20 per 1 day)
IRESSA	5	PA; QL (1 per 1 day)
IWILFIN	5	PA; SP; QL (8 per 1 day)
JAKAFI	5	PA; SP; QL (20 per 1 day)
JAYPIRCA ORAL TABLET 100 MG	5	PA; QL (2 per 1 day)
JAYPIRCA ORAL TABLET 50 MG	5	PA; QL (1 per 1 day)
JYLAMVO	CED	PA
KISQALI FEMARA CO-PACK ORAL TABLET 200 MG/DAY(200 MG X 1)-2.5 MG	5	PA; QL (49 per 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
KISQALI FEMARA CO-PACK ORAL TABLET 400 MG/DAY(200 MG X 2)-2.5 MG	5	PA; QL (70 per 30 days)
KISQALI FEMARA CO-PACK ORAL TABLET 600 MG/DAY(200 MG X 3)-2.5 MG	5	PA; QL (91 per 30 days)
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1)	5	PA; QL (21 per 30 days)
KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2)	5	PA; QL (42 per 30 days)
KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3)	5	PA; QL (63 per 30 days)
KLISYRI	4	PA; QL (20 per 365 days)
KOSELUGO ORAL CAPSULE 10 MG	5	PA; SP; QL (8 per 1 day)
KOSELUGO ORAL CAPSULE 25 MG	5	PA; SP; QL (4 per 1 day)
KRAZATI	5	PA; QL (10 per 1 day)
<i>lapatinib</i>	5	PA; SP; QL (20 per 1 day)
<i>lenalidomide oral capsule 10 mg, 15 mg, 25 mg, 5 mg</i>	5	PA; SP; QL (1 per 1 day)
<i>lenalidomide oral capsule 2.5 mg, 20 mg</i>	5	PA; SP; QL (20 per 1 day)
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1)	5	PA; SP; QL (30 per 30 days)
LENVIMA ORAL CAPSULE 12 MG/DAY (4 MG X 3)	5	PA; QL (90 per 30 days)
LENVIMA ORAL CAPSULE 14 MG/DAY(10 MG X 1-4 MG X 1), 20 MG/DAY (10 MG X 2), 8 MG/DAY (4 MG X 2)	5	PA; SP; QL (60 per 30 days)
LENVIMA ORAL CAPSULE 18 MG/DAY (10 MG X 1-4 MG X2), 24 MG/DAY(10 MG X 2-4 MG X 1)	5	PA; SP; QL (90 per 30 days)
LENVIMA ORAL CAPSULE 4 MG	5	PA; QL (4 per 30 days)
<i>letrozole</i>	1	
LEUKERAN	5	PA; SP
LEUPROLIDE (3 MONTH)	5	PA; QL (1 per 63 days)
<i>leuprolide subcutaneous kit</i>	5	PA; QL (20 per 28 days)
LONSURF	5	PA; SP; QL (20 per 1 day)
LORBRENA ORAL TABLET 100 MG	5	PA; QL (1 per 1 day)
LORBRENA ORAL TABLET 25 MG	5	PA; QL (3 per 1 day)
LUMAKRAS	5	PA; QL (20 per 1 day)
LUPKYNIS	5	PA; QL (6 per 1 day)

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
LUPRON DEPOT	5	PA; SP; QL (1 per 28 days)
LUPRON DEPOT (3 MONTH)	5	PA; SP; QL (1 per 63 days)
LUPRON DEPOT (4 MONTH)	5	PA; SP; QL (1 per 84 days)
LUPRON DEPOT (6 MONTH)	5	PA; QL (1 per 126 days)
LUPRON DEPOT-PED (3 MONTH)	5	PA; QL (1 per 63 days)
LUPRON DEPOT-PED INTRAMUSCULAR KIT	5	PA; QL (1 per 28 days)
LUPRON DEPOT-PED INTRAMUSCULAR SYRINGE KIT	5	PA; QL (1 per 126 days)
LYNPARZA	5	PA; SP; QL (4 per 1 day)
LYSODREN	5	PA; SP
LYTGOBI	5	PA; LA; QL (4 per 28 days)
MATULANE	5	PA; SP
<i>megestrol oral suspension 400 mg/10 ml (40 mg/ml)</i>	1	
<i>megestrol oral suspension 625 mg/5 ml (125 mg/ml)</i>	CED	PA
<i>megestrol oral tablet</i>	1	
MEKINIST ORAL RECON SOLN	5	PA; QL (23 per 1 day)
MEKINIST ORAL TABLET 0.5 MG	5	PA; SP; QL (3 per 1 day)
MEKINIST ORAL TABLET 2 MG	5	PA; SP; QL (1 per 1 day)
MEKTOVI	5	PA; SP; LA; QL (20 per 1 day)
<i>melphalan</i>	5	PA; SP
<i>mercaptopurine</i>	1	
<i>methotrexate sodium</i>	1	
<i>methotrexate sodium (pf) injection solution</i>	1	
MYCAPSSA	5	PA; LA; QL (4 per 1 day)
<i>mycophenolate mofetil oral capsule</i>	1	SP
<i>mycophenolate mofetil oral suspension for reconstitution</i>	2	SP
<i>mycophenolate mofetil oral tablet</i>	1	SP
<i>mycophenolate sodium</i>	1	SP
MYFORTIC	4	SP
MYLERAN	5	PA; SP
NEORAL	4	SP
NERLYNX	5	PA; LA; QL (20 per 1 day)

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
NEXAVAR	5	PA; SP; LA; QL (20 per 1 day)
NILANDRON	5	PA; SP; QL (20 per 1 day)
<i>nilutamide</i>	5	PA; SP; QL (20 per 1 day)
NINLARO	5	PA; SP; QL (3 per 30 days)
NUBEQA	5	PA; SP; LA; QL (20 per 1 day)
ODOMZO	5	PA; SP; LA; QL (1 per 1 day)
OGSIVEO	5	PA; SP; QL (6 per 1 day)
OJJAARA	5	PA; SP; QL (1 per 1 day)
ONUREG	5	PA; QL (14 per 28 days)
ORGOVYX	5	PA; LA; QL (10 per 1 day)
ORSERDU	5	PA; QL (10 per 1 day)
<i>pazopanib</i>	5	PA; SP; QL (4 per 1 day)
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG	5	PA; LA; QL (14 per 16 days)
PEMAZYRE ORAL TABLET 9 MG	5	PA; LA
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1)	5	PA; SP; QL (28 per 28 days)
PIQRAY ORAL TABLET 250 MG/DAY (200 MG X1-50 MG X1)	5	PA; SP; QL (56 per 30 days)
PIQRAY ORAL TABLET 300 MG/DAY (150 MG X 2)	5	PA; SP; QL (56 per 28 days)
POMALYST	5	PA; SP; LA; QL (20 per 1 day)
PROGRAF ORAL CAPSULE	5	SP
PROGRAF ORAL GRANULES IN PACKET	CED	PA
PURIXAN	CED	PA
QINLOCK	5	PA; LA; QL (10 per 1 day)
RAPAMUNE	4	SP
RETEVMO ORAL CAPSULE 40 MG	5	PA; LA; QL (6 per 1 day)
RETEVMO ORAL CAPSULE 80 MG	5	PA; LA; QL (4 per 1 day)
REVLIMID	5	PA; SP; LA; QL (20 per 1 day)
REZLIDHIA	5	PA; QL (10 per 1 day)
REZUROCK	5	PA; QL (10 per 1 day)
ROZLYTREK	5	PA; SP; LA; QL (20 per 1 day)
RUBRACA	5	PA; SP; LA; QL (20 per 1 day)
RYDAPT	5	PA; SP; QL (8 per 1 day)
SANDIMMUNE ORAL CAPSULE	4	SP

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
SANDIMMUNE ORAL SOLUTION	3	SP
SANDOSTATIN LAR DEPOT INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON	5	PA
SCEMBLIX ORAL TABLET 20 MG	5	PA; QL (2 per 1 day)
SCEMBLIX ORAL TABLET 40 MG	5	PA; QL (10 per 1 day)
SIGNIFOR	5	PA; SP
SIKLOS	CED	PA
<i>sirolimus</i>	2	SP
SOLTAMOX	4	
<i>sorafenib</i>	5	PA; SP; QL (4 per 1 day)
SPRYCEL ORAL TABLET 100 MG, 140 MG, 50 MG, 70 MG, 80 MG	5	PA; SP; QL (1 per 1 day)
SPRYCEL ORAL TABLET 20 MG	5	PA; SP; QL (3 per 1 day)
STIVARGA	5	PA; SP; QL (84 per 30 days)
<i>sunitinib malate oral capsule 12.5 mg, 25 mg, 50 mg</i>	5	PA; SP; QL (20 per 1 day)
<i>sunitinib malate oral capsule 37.5 mg</i>	5	PA; QL (20 per 1 day)
SUPPRELIN LA	5	SP; QL (20 per 365 days)
SUTENT	5	PA; SP; QL (1 per 1 day)
TABLOID	5	PA; SP
TABRECTA	5	PA; QL (4 per 1 day)
<i>tacrolimus oral</i>	1	SP
TAFINLAR ORAL CAPSULE	5	PA; SP; QL (4 per 1 day)
TAFINLAR ORAL TABLET FOR SUSPENSION	5	PA; QL (30 per 1 day)
TAGRISSO	5	PA; SP; LA; QL (1 per 1 day)
TALZENNA	5	PA; QL (1 per 1 day)
<i>tamoxifen</i>	1	ACA
TARCEVA	5	PA; SP; QL (20 per 1 day)
TARGETIN	5	PA; SP
TASIGNA ORAL CAPSULE 150 MG, 200 MG	5	PA; SP; QL (4 per 1 day)
TASIGNA ORAL CAPSULE 50 MG	5	PA; SP; QL (2 per 1 day)
TAZVERIK	5	PA; LA; QL (10 per 1 day)
<i>temozolomide</i>	5	PA; SP
TEPMETKO	5	PA; QL (20 per 1 day)

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
THALOMID	5	SP; QL (20 per 1 day)
TIBSOVO	5	PA; SP; QL (10 per 1 day)
<i>toremifene</i>	2	QL (20 per 1 day)
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 11.25 MG	5	PA; QL (10 per 63 days)
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 22.5 MG	5	PA; QL (10 per 126 days)
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 3.75 MG	5	PA; QL (10 per 28 days)
<i>tretinoin (antineoplastic)</i>	5	PA; SP
TREXALL	CED	PA
TRIPTODUR	5	PA; QL (20 per 126 days)
TRUQAP	5	PA; SP; QL (64 per 28 days)
TUKYSA	5	PA; SP; LA; QL (20 per 1 day)
TURALIO ORAL CAPSULE 125 MG	5	PA; LA; QL (20 per 1 day)
TYKERB	5	PA; SP; LA; QL (6 per 1 day)
VANFLYTA	5	PA; QL (20 per 1 day)
VENCLEXTA ORAL TABLET 10 MG	5	PA; SP; LA; QL (2 per 1 day)
VENCLEXTA ORAL TABLET 100 MG	5	PA; LA; QL (6 per 1 day)
VENCLEXTA ORAL TABLET 50 MG	5	PA; SP; LA; QL (1 per 1 day)
VENCLEXTA STARTING PACK	5	PA; SP; QL (42 per 365 days)
VERZENIO	5	PA; SP; LA; QL (2 per 1 day)
VIJOICE ORAL TABLET 125 MG, 50 MG	5	PA; QL (1 per 1 day)
VIJOICE ORAL TABLET 250 MG/DAY (200 MG X1-50 MG X1)	5	PA; QL (56 per 30 days)
VITRAKVI	5	PA; SP; LA; QL (20 per 1 day)
VIZIMPRO	5	PA; QL (1 per 1 day)
VONJO	5	PA; QL (10 per 1 day)
VOTRIENT	5	PA; SP; QL (4 per 1 day)
WELIREG	5	PA; LA; QL (3 per 1 day)
XALKORI ORAL CAPSULE	5	PA; SP; QL (4 per 1 day)
XALKORI ORAL PELLET 150 MG	5	PA; SP; QL (6 per 1 day)
XALKORI ORAL PELLET 20 MG, 50 MG	5	PA; SP; QL (4 per 1 day)
XATMEP	CED	PA
XELODA ORAL TABLET 150 MG	5	PA; SP; QL (4 per 1 day)

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
XELODA ORAL TABLET 500 MG	5	PA; SP; QL (10 per 1 day)
XERMELO	5	SP; LA
XOSPATA	5	PA; SP; LA; QL (3 per 1 day)
XPOVIO ORAL TABLET 100 MG/WEEK (50 MG X 2), 40 MG/WEEK (40 MG X 1), 40MG TWICE WEEK (40 MG X 2), 60 MG/WEEK (60 MG X 1), 80 MG/WEEK (40 MG X 2)	5	PA; SP; LA; QL (10 per 30 days)
XPOVIO ORAL TABLET 60MG TWICE WEEK (120 MG/WEEK), 80MG TWICE WEEK (160 MG/WEEK)	5	PA; SP; LA; QL (10 per 28 days)
XTANDI ORAL CAPSULE	5	PA; SP; QL (4 per 1 day)
XTANDI ORAL TABLET 40 MG	5	PA; SP; QL (4 per 1 day)
XTANDI ORAL TABLET 80 MG	5	PA; SP; QL (2 per 1 day)
YONSA	5	PA; QL (20 per 1 day)
ZEJULA ORAL TABLET	5	PA; LA; QL (1 per 1 day)
ZELBORAF	5	PA; SP; QL (20 per 1 day)
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG	5	PA; QL (20 per 63 days)
ZOLADEX SUBCUTANEOUS IMPLANT 3.6 MG	5	PA; QL (20 per 28 days)
ZOLINZA	5	PA; SP; QL (4 per 1 day)
ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG	5	SP
ZORTRESS ORAL TABLET 1 MG	5	
ZYDELIG	5	PA; QL (20 per 1 day)
ZYKADIA	5	PA; SP; QL (3 per 1 day)
ZYTIGA ORAL TABLET 250 MG	5	PA; QL (20 per 1 day)
ZYTIGA ORAL TABLET 500 MG	CED	PA

## AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

### ANTICONVULSANTS

ACTIVE-PAC	CED	PA
APTIOM	4	PA
BANZEL	4	PA
BRIVIACT ORAL	4	PA
<i>carbamazepine oral capsule, er multiphase 12 hr</i>	1	
<i>carbamazepine oral suspension 100 mg/5 ml</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>carbamazepine oral tablet</i>	1	
<i>carbamazepine oral tablet extended release 12 hr</i>	1	
<i>carbamazepine oral tablet, chewable</i>	1	
CARBATROL	4	PA
CELONTIN ORAL CAPSULE 300 MG	4	
<i>clobazam oral suspension</i>	2	PA
<i>clobazam oral tablet</i>	2	
<i>clonazepam oral tablet</i>	1	
<i>clonazepam oral tablet, disintegrating</i>	2	
DEPAKOTE	4	PA
DEPAKOTE ER	4	PA
DEPAKOTE SPRINKLES	4	PA
DIACOMIT ORAL CAPSULE 250 MG	5	PA; QL (20 per 1 day)
DIACOMIT ORAL CAPSULE 500 MG	5	PA; QL (6 per 1 day)
DIACOMIT ORAL POWDER IN PACKET 250 MG	5	PA; QL (20 per 1 day)
DIACOMIT ORAL POWDER IN PACKET 500 MG	5	PA; QL (6 per 1 day)
<i>diazepam rectal</i>	1	
DILANTIN	4	PA
DILANTIN EXTENDED	4	PA
DILANTIN INFATABS	4	PA
DILANTIN-125	4	PA
<i>divalproex</i>	1	
ELEPSIA XR	CED	PA
EPIDIOLEX	5	PA; LA
<i>epitol</i>	1	
EPRONTIA	CED	PA
EQUETRO	4	PA
<i>ethosuximide</i>	1	
<i>felbamate</i>	2	
FELBATOL ORAL TABLET	4	PA
FINTEPLA	5	PA; LA; QL (20 per 1 day)
FYCOMPA	4	PA
<i> gabapentin oral capsule</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>gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)</i>	1	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	1	
<i>gabapentin oral tablet extended release 24 hr</i>	CED	PA
<b>GRALISE ORAL TABLET EXTENDED RELEASE 24 HR</b>	CED	PA
<b>KEPPRA ORAL</b>	4	PA
<b>KEPPRA XR</b>	4	PA
<b>KLONOPIN</b>	4	
<i>lacosamide oral</i>	2	PA
<b>LAMICTAL ODT</b>	CED	PA
<b>LAMICTAL ODT STARTER (BLUE)</b>	CED	PA
<b>LAMICTAL ODT STARTER (GREEN)</b>	CED	PA
<b>LAMICTAL ODT STARTER (ORANGE)</b>	CED	PA
<b>LAMICTAL ORAL TABLET</b>	4	PA
<b>LAMICTAL ORAL TABLET, CHEWABLE DISPERSIBLE 25 MG, 5 MG</b>	4	PA
<b>LAMICTAL STARTER (BLUE) KIT</b>	CED	PA
<b>LAMICTAL STARTER (GREEN) KIT</b>	CED	PA
<b>LAMICTAL STARTER (ORANGE) KIT</b>	CED	PA
<b>LAMICTAL XR</b>	4	PA
<b>LAMICTAL XR STARTER (BLUE)</b>	CED	PA
<b>LAMICTAL XR STARTER (GREEN)</b>	CED	PA
<b>LAMICTAL XR STARTER (ORANGE)</b>	CED	PA
<i>lamotrigine oral tablet</i>	1	
<i>lamotrigine oral tablet disintegrating, dose pk</i>	CED	PA
<i>lamotrigine oral tablet extended release 24hr</i>	2	
<i>lamotrigine oral tablet, chewable dispersible</i>	1	
<i>lamotrigine oral tablet,disintegrating</i>	CED	PA
<i>lamotrigine oral tablets,dose pack</i>	CED	PA
<i>levetiracetam oral</i>	1	
<b>LYRICA</b>	4	
<b>LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HR 165 MG, 82.5 MG</b>	4	ST; QL (1 per 1 day)
<b>LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HR 330 MG</b>	4	ST; QL (2 per 1 day)

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>methsuximide</i>	2	
MOTPOLY XR	CED	PA
MYSOLINE	4	PA
NAYZILAM	4	PA; QL (20 per 30 days)
NEURONTIN	4	PA
ONFI	3	PA
<i>oxcarbazepine</i>	1	
OXTELLAR XR	4	PA
<i>phenobarbital</i>	1	
PHENYTEK	4	PA
<i>phenytoin oral suspension 125 mg/5 ml</i>	1	
<i>phenytoin oral tablet, chewable</i>	1	
<i>phenytoin sodium extended</i>	1	
<i>pregabalin oral capsule</i>	1	
<i>pregabalin oral solution</i>	2	
<i>pregabalin oral tablet extended release 24 hr 165 mg, 82.5 mg</i>	2	ST; QL (10 per 1 day)
<i>pregabalin oral tablet extended release 24 hr 330 mg</i>	2	ST; QL (2 per 1 day)
PRIMIDONE ORAL TABLET 125 MG	CED	PA
<i>primidone oral tablet 250 mg, 50 mg</i>	1	
QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR 100 MG, 25 MG, 50 MG	CED	PA; QL (1 per 1 day)
QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR 150 MG, 200 MG	CED	PA; QL (2 per 1 day)
<i>roweepra oral tablet 500 mg</i>	1	
<i>rufinamide</i>	2	PA
SABRIL	5	PA; SP; LA
SPRITAM	CED	PA
<i>subvenite</i>	1	
<i>subvenite starter (blue) kit</i>	CED	PA
<i>subvenite starter (green) kit</i>	CED	PA
<i>subvenite starter (orange) kit</i>	CED	PA
SYMPAZAN	CED	PA
TEGRETOL ORAL SUSPENSION	4	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
TEGRETOL ORAL TABLET	4	PA
TEGRETOL XR	4	PA
<i>tiagabine</i>	2	
TOPAMAX	4	PA
<i>topiramate oral capsule, sprinkle</i>	1	
<i>topiramate oral capsule, extended release 24hr</i>	CED	PA; QL (20 per 1 day)
<i>topiramate oral capsule, sprinkle, er 24hr 100 mg, 25 mg, 50 mg</i>	CED	PA; QL (1 per 1 day)
<i>topiramate oral capsule, sprinkle, er 24hr 150 mg, 200 mg</i>	CED	PA; QL (2 per 1 day)
<i>topiramate oral tablet</i>	1	
TRILEPTAL	4	PA
TROKENDI XR	CED	PA; QL (20 per 1 day)
<i>valproic acid</i>	1	
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 500 mg/10 ml (10 ml)</i>	1	
VALTOCO	4	PA; QL (10 per 30 days)
<i>vigabatrin</i>	5	PA; SP; LA
<i>vigadrone oral powder in packet</i>	5	PA; SP
<i>vigadrone oral tablet</i>	2	PA
<i>vigpoder</i>	5	PA; SP
VIMPAT ORAL SOLUTION	4	PA
VIMPAT ORAL TABLET	4	PA
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	4	PA; QL (2 per 1 day)
XCOPRI ORAL TABLET 100 MG, 150 MG, 50 MG	4	PA; QL (10 per 1 day)
XCOPRI ORAL TABLET 200 MG	4	PA; QL (2 per 1 day)
XCOPRI TITRATION PACK	4	PA; 1 tab per day; 28 tabs in 365 days
ZARONTIN	4	PA
ZONEGRAN ORAL CAPSULE 100 MG, 25 MG	4	PA
ZONISADE	CED	PA
<i>zonisamide</i>	1	
ZTALMY	4	PA; LA; QL (10 per 30 days)
<b>ANTIPARKINSONISM AGENTS</b>		

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
APOKYN	5	PA; SP; LA; QL (3 per 1 day)
<i>apomorphine</i>	5	PA; SP; QL (3 per 1 day)
AZILECT	4	
<i>benztropine oral</i>	1	
<i>bromocriptine</i>	1	
<i>carbidopa</i>	2	
<i>carbidopa-levodopa</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
DHIVY	CED	PA; QL (8 per 1 day)
DUOPA	5	
<i>entacapone</i>	1	
GOCOVRI	CED	PA
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; SP; QL (20 per 1 day)
LODOSYN	4	
MIRAPEX ER	CED	PA
NEUPRO	4	ST
NOURIANZ	4	PA; LA; QL (20 per 1 day)
ONGENTYS	4	PA; QL (20 per 1 day)
OSMOLEX ER ORAL TABLET, IR - ER, BIPHASIC 24HR 129 MG, 193 MG	CED	PA
PARLODEL	4	
<i>pramipexole oral tablet</i>	1	
<i>pramipexole oral tablet extended release 24 hr</i>	CED	PA
<i>rasagiline</i>	2	
<i>ropinirole oral tablet</i>	1	
<i>ropinirole oral tablet extended release 24 hr</i>	2	
RYTARY	CED	PA
<i>selegiline hcl</i>	1	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	4	
TASMAR ORAL TABLET 100 MG	4	PA; QL (6 per 1 day)
<i>tolcapone</i>	2	PA; QL (6 per 1 day)
<i>trihexyphenidyl</i>	1	
XADAGO	4	ST

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
ZELAPAR	CED	PA
<b>MIGRAINE &amp; CLUSTER HEADACHE THERAPY</b>		
AIMOVIG AUTOINJECTOR	3	PA; QL (20 per 30 days)
AJOVY AUTOINJECTOR	4	PA; QL (20 per 30 days)
AJOVY SYRINGE	4	PA; QL (20 per 30 days)
<i>almotriptan malate</i>	2	QL (12 per 30 days)
<i>dihydroergotamine injection</i>	2	PA; QL (8 per 30 days)
<i>dihydroergotamine nasal</i>	2	PA; QL (20 per 28 days)
<i>eletriptan oral tablet 20 mg</i>	2	12 TABS IN 30 DAYS OR 36 TABS IN 68 DAYS;
<i>eletriptan oral tablet 40 mg</i>	2	QL (20 per 30 days)
ELYXYB	CED	PA; QL (20 per 1 day)
EMGALITY PEN	3	PA; QL (1 per 30 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML	3	PA; QL (1 per 30 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 300 MG/3 ML (100 MG/ML X 3)	3	PA; QL (3 per 30 days)
ERGOMAR	4	QL (20 per 28 days)
<i>ergotamine-caffeine</i>	2	
FROVA	4	QL (20 per 30 days)
<i>frovatriptan</i>	2	QL (1 per 30 days)
IMITREX ORAL TABLET 100 MG	4	QL (9 per 30 days)
IMITREX ORAL TABLET 25 MG, 50 MG	4	QL (18 per 30 days)
IMITREX STATDOSE PEN	4	QL (6 per 30 days)
IMITREX STATDOSE REFILL	4	QL (6 per 30 days)
MAXALT ORAL TABLET 10 MG	4	QL (10 per 30 days)
MAXALT-MLT ORAL TABLET,DISINTEGRATING 10 MG	4	QL (10 per 30 days)
<i>migergot</i>	CED	PA
MIGRANAL	4	PA; QL (8 per 28 days)
<i>naratriptan</i>	1	QL (9 per 30 days)
NURTEC ODT	3	PA; QL (10 per 30 days)
ONZETRA XSAIL	CED	PA
QULIPTA	3	PA; QL (1 per 1 day)
RELPAX	4	QL (12 per 30 days)

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
REYVOW	4	PA; QL (4 per 30 days)
<i>rizatriptan oral tablet</i>	1	QL (12 per 30 days)
<i>rizatriptan oral tablet,disintegrating</i>	1	QL (20 per 30 days)
<i>sumatriptan nasal spray,non-aerosol 20 mg/actuation</i>	1	QL (6 per 30 days)
<i>sumatriptan nasal spray,non-aerosol 5 mg/actuation</i>	1	QL (12 per 30 days)
<i>sumatriptan succinate oral tablet 100 mg</i>	1	QL (9 per 30 days)
<i>sumatriptan succinate oral tablet 25 mg, 50 mg</i>	1	QL (18 per 30 days)
<i>sumatriptan succinate subcutaneous cartridge</i>	1	QL (20 per 30 days)
<i>sumatriptan succinate subcutaneous pen injector 4 mg/0.5 ml</i>	1	QL (6 per 30 days)
<i>sumatriptan succinate subcutaneous pen injector 6 mg/0.5 ml</i>	1	QL (20 per 30 days)
<i>sumatriptan succinate subcutaneous solution</i>	1	QL (6 per 30 days)
<i>sumatriptan-naproxen</i>	CED	PA
TOSYMRA	CED	PA
TREXIMET	CED	PA
TRUDHESA	CED	PA; QL (10 per 30 days)
UBRELVY	4	PA; QL (10 per 30 days)
ZAVZPRET	5	PA; QL (1 per 30 days)
ZEMBRACE SYMTOUCH	CED	PA
<i>zolmitriptan nasal spray,non-aerosol 5 mg</i>	2	ST; QL (20 per 30 days)
<i>zolmitriptan oral tablet</i>	1	QL (10 per 30 days)
<i>zolmitriptan oral tablet,disintegrating</i>	CED	PA; QL (20 per 30 days)
ZOMIG NASAL	4	ST; QL (20 per 30 days)
ZOMIG ORAL	4	QL (20 per 30 days)

#### **MISCELLANEOUS NEUROLOGICAL THERAPY**

ADLARITY	CED	PA
AMPYRA	5	SP; LA; QL (20 per 1 day)
ARICEPT	4	
AUSTEDO	5	PA; SP; LA
AUSTEDO XR	5	PA; SP
AUSTEDO XR TITRATION KT(WK1-4)	5	PA; QL (42 per 365 days)
<i>dalfampridine</i>	5	SP; QL (20 per 1 day)

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
DAYBUE	5	PA; QL (20 per 1 day)
dichlorphenamide	5	PA; QL (4 per 1 day)
donepezil oral tablet 10 mg, 5 mg	1	
donepezil oral tablet 23 mg	2	
donepezil oral tablet,disintegrating	1	
EVRYSDI	5	PA; SP; LA; QL (6.7 per 1 day)
EXELON PATCH	4	
FIRDAPSE	5	PA; SP; LA; QL (8 per 1 day)
galantamine oral capsule,ext rel. pellets 24 hr	2	
galantamine oral solution	CED	PA
galantamine oral tablet	2	
HORIZANT	CED	PA
INGREZZA	5	PA; LA; QL (20 per 1 day)
INGREZZA INITIATION PACK	5	PA; QL (20 per 365 days)
KEVEYIS	5	PA; QL (4 per 1 day)
memantine oral capsule,sprinkle,er 24hr	2	
memantine oral solution	CED	PA
memantine oral tablet	1	
MEMANTINE ORAL TABLETS,DOSE PACK	1	
NAMENDA TITRATION PAK	4	
NAMENDA XR	4	
NAMZARIC	CED	PA
NUEDEXTA	5	PA; SP; QL (20 per 1 day)
NULIBRY	5	PA
RADICAVA ORS STARTER KIT SUSP	5	PA; SP
RELYVRIOS	5	PA; QL (2 per 1 day)
rivastigmine	1	
rivastigmine tartrate	1	
SKYCLARYS	5	PA; LA; QL (3 per 1 day)
tetrabenazine oral tablet 12.5 mg	5	PA; SP; QL (8 per 1 day)
tetrabenazine oral tablet 25 mg	5	PA; SP; QL (4 per 1 day)
XENAZINE ORAL TABLET 12.5 MG	5	PA; SP; LA; QL (8 per 1 day)
XENAZINE ORAL TABLET 25 MG	5	PA; SP; LA; QL (4 per 1 day)
ZEPOSIA	5	PA; SP; QL (20 per 1 day)

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
ZEPOSIA STARTER KIT (28-DAY)	5	PA; SP; QL (28 per 365 days)
ZEPOSIA STARTER PACK (7-DAY)	5	PA; SP; QL (20 per 365 days)
<b>MUSCLE RELAXANTS &amp; ANTISPASMODIC THERAPY</b>		
AMRIX	CED	PA
BACLOFEN ORAL SOLUTION	CED	PA
<i>baclofen oral suspension</i>	CED	PA; QL (20 per 1 day)
<i>baclofen oral tablet</i>	1	
<i>carisoprodol oral tablet 250 mg</i>	CED	PA
<i>carisoprodol oral tablet 350 mg</i>	1	QL (4 per 1 day)
<i>carisoprodol-aspirin</i>	1	
<i>carisoprodol-aspirin-codeine</i>	1	PA
<i>chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg</i>	CED	PA
<i>chlorzoxazone oral tablet 500 mg</i>	1	
<i>cyclobenzaprine oral capsule, extended release 24hr</i>	CED	PA
<i>cyclobenzaprine oral tablet</i>	1	
DANTRIUM ORAL CAPSULE 25 MG	4	
<i>dantrolene oral</i>	1	
FEXMID	4	
FLEQSVUVY	CED	PA; QL (20 per 1 day)
LORZONE	CED	PA
LYVISPAH	CED	PA
<i>meprobamate</i>	1	
MESTINON ORAL	4	
MESTINON TIMESPAN	4	
<i>metaxalone oral tablet 400 mg</i>	CED	PA
<i>metaxalone oral tablet 800 mg</i>	2	
METHOCARBAMOL ORAL TABLET 1,000 MG	CED	PA
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	1	
NORGESIC	CED	PA
NORGESIC FORTE	CED	PA
<i>orphenadrine citrate oral</i>	1	
<i>orphenadrine-asa-caffeine oral tablet 25-385-30 mg</i>	CED	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>orphenadrine-asa-caffeine oral tablet 50-770-60 mg</i>	2	PA
<i>orphengesic forte</i>	CED	PA
OZOBAX	CED	PA
OZOBAX DS	CED	PA
<i>pyridostigmine bromide oral syrup</i>	1	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	1	
<i>pyridostigmine bromide oral tablet 60 mg</i>	1	
<i>pyridostigmine bromide oral tablet extended release</i>	1	
SOMA ORAL TABLET 250 MG	CED	PA
SOMA ORAL TABLET 350 MG	4	QL (4 per 1 day)
<i>tizanidine oral capsule</i>	2	
<i>tizanidine oral tablet</i>	1	
<i>vanadom</i>	1	QL (4 per 1 day)
ZANAFLEX	4	

### NARCOTIC ANALGESICS

<i>acetaminophen-caff-dihydrocod</i>	CED	PA; QL (20 per 1 day)
<i>acetaminophen-codeine oral solution 120-12 mg/5 ml</i>	1	PA; QL (20 per 1 day)
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg</i>	1	PA; QL (12 per 1 day)
<i>acetaminophen-codeine oral tablet 300-60 mg</i>	1	PA; QL (6 per 1 day)
<i>ascomp with codeine</i>	1	PA; QL (20 per 1 day)
BELBUCA	4	PA; QL (20 per 1 day)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 128 MG/0.36 ML	5	PA; QL (0.36 per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 16 MG/0.32 ML	5	PA; QL (1.28 per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 24 MG/0.48 ML	5	PA; QL (1.92 per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 32 MG/0.64 ML	5	PA; QL (2.56 per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 64 MG/0.18 ML	5	PA; QL (0.18 per 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
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 8 MG/0.16 ML	5	PA; QL (0.64 per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 96 MG/0.27 ML	5	PA; QL (0.27 per 28 days)
BUPAP	CED	PA
<i>buprenorphine</i>	2	PA; QL (20 per 28 days)
<i>buprenorphine hcl sublingual tablet 2 mg</i>	1	QL (12 per 1 day)
<i>buprenorphine hcl sublingual tablet 8 mg</i>	1	QL (3 per 1 day)
<i>butalbital compound w/codeine</i>	1	PA; QL (6 per 1 day)
<i>butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg</i>	CED	PA; QL (1 per 1 day)
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	1	PA; QL (1 per 1 day)
<i>butalbital-acetaminophen oral capsule</i>	CED	PA
<i>butalbital-acetaminophen oral tablet 50-300 mg</i>	CED	PA
<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	1	QL (6 per 1 day)
<i>butalbital-acetaminophen-caff oral capsule</i>	CED	PA; QL (6 per 1 day)
<i>butalbital-acetaminophen-caff oral tablet</i>	1	QL (6 per 1 day)
<i>butalbital-aspirin-caffeine</i>	1	
BUTRANS	4	PA; QL (20 per 28 days)
<i>codeine sulfate oral tablet 15 mg</i>	1	PA; QL (24 per 1 day)
<i>codeine sulfate oral tablet 30 mg</i>	1	PA; QL (12 per 1 day)
<i>codeine sulfate oral tablet 60 mg</i>	1	PA; QL (6 per 1 day)
<i>codeine-butalbital-asa-caff</i>	1	PA; QL (20 per 1 day)
DILAUDID	4	PA; QL (20 per 1 day)
<i>endocet</i>	1	PA; QL (20 per 1 day)
ESGIC ORAL CAPSULE	CED	PA; QL (6 per 1 day)
ESGIC ORAL TABLET	4	QL (6 per 1 day)
<i>fentanyl citrate buccal lozenge on a handle</i>	1	PA; QL (4 per 1 day)
FENTANYL CITRATE BUCCAL TABLET, EFFERVESCENT 100 MCG	4	PA; QL (20 per 1 day)
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>	1	PA; QL (10 per 30 days)
<i>fentanyl transdermal patch 72 hour 37.5 mcg/hour, 62.5 mcg/hour, 87.5 mcg/hour</i>	CED	PA; QL (10 per 30 days)
FENTORA	4	PA; QL (20 per 1 day)

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
FIORICET	CED	PA; QL (6 per 1 day)
FIORICET WITH CODEINE	CED	PA; QL (20 per 1 day)
hydrocodone bitartrate	2	PA; QL (20 per 1 day)
hydrocodone-acetaminophen oral solution 10-325 mg/15 ml(15 ml)	2	PA
hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml	1	PA; QL (180 per 1 day)
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	1	PA; QL (10 per 1 day)
hydrocodone-acetaminophen oral tablet 10-325 mg,	1	PA; QL (9 per 1 day)
hydrocodone-acetaminophen oral tablet 5-325 mg, 7.5-325 mg	1	PA; QL (12 per 1 day)
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg	2	PA; QL (20 per 1 day)
hydrocodone-ibuprofen oral tablet 7.5-200 mg	1	PA; QL (20 per 1 day)
hydromorphone oral liquid	1	PA; QL (22 per 1 day)
hydromorphone oral tablet 2 mg	1	PA; QL (11 per 1 day)
hydromorphone oral tablet 4 mg	1	PA; QL (5 per 1 day)
hydromorphone oral tablet 8 mg	1	PA; QL (2 per 1 day)
hydromorphone oral tablet extended release 24 hr	2	PA; QL (20 per 1 day)
hydromorphone rectal	1	PA; QL (1 per 1 day)
HYSINGLA ER	4	PA; QL (20 per 1 day)
levorphanol tartrate	CED	PA; QL (4 per 1 day)
meperidine oral solution	1	PA; QL (90 per 1 day)
meperidine oral tablet 50 mg	1	PA; QL (20 per 1 day)
methadone oral concentrate	1	PA; QL (3 per 1 day)
methadone oral solution 10 mg/5 ml	1	PA; QL (15 per 1 day)
methadone oral solution 5 mg/5 ml	1	PA; QL (30 per 1 day)
methadone oral tablet 10 mg	1	PA; QL (3 per 1 day)
methadone oral tablet 5 mg	1	PA; QL (6 per 1 day)
methadose oral concentrate	1	PA; QL (3 per 1 day)
morphine concentrate oral solution	1	PA; QL (4 per 1 day)
morphine oral capsule, er multiphase 24 hr	CED	PA; QL (1 per 1 day)
morphine oral capsule, extend.release pellets 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg	CED	PA; QL (1 per 1 day)

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
morphine oral solution 10 mg/5 ml	1	PA; QL (45 per 1 day)
morphine oral solution 20 mg/5 ml (4 mg/ml)	1	PA; QL (22 per 1 day)
morphine oral tablet 15 mg	1	PA; QL (6 per 1 day)
morphine oral tablet 30 mg	1	PA; QL (3 per 1 day)
morphine oral tablet extended release	1	PA; QL (20 per 1 day)
morphine rectal	2	PA; QL (1 per 1 day)
MS CONTIN	4	PA; QL (20 per 1 day)
NALOCET	CED	PA
oxycodone oral capsule	1	PA; QL (12 per 1 day)
oxycodone oral concentrate	1	PA; QL (10 per 1 day)
oxycodone oral solution	1	PA; QL (60 per 1 day)
oxycodone oral tablet 10 mg, 20 mg	1	PA; QL (20 per 1 day)
oxycodone oral tablet 15 mg	1	PA; QL (4 per 1 day)
oxycodone oral tablet 30 mg	1	PA; QL (2 per 1 day)
oxycodone oral tablet 5 mg	1	PA; QL (12 per 1 day)
OXYCODONE ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 10 MG, 20 MG, 40 MG, 80 MG	CED	PA; QL (20 per 1 day)
oxycodone-acetaminophen oral solution 10-300 mg/5 ml	CED	PA
oxycodone-acetaminophen oral solution 5-325 mg/5 ml	2	PA
oxycodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	CED	PA; QL (10 per 1 day)
oxycodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	PA; QL (10 per 1 day)
oxycodone-acetaminophen oral tablet 2.5-300 mg	CED	PA
oxycodone-acetaminophen oral tablet 2.5-325 mg	1	PA; QL (20 per 1 day)
OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR	3	PA; QL (20 per 1 day)
oxymorphone oral tablet 10 mg	1	PA; QL (3 per 1 day)
oxymorphone oral tablet 5 mg	1	PA; QL (6 per 1 day)
oxymorphone oral tablet extended release 12 hr	2	PA; QL (20 per 1 day)
PERCOCET	4	PA; QL (20 per 1 day)
PRIMLEV	CED	PA; QL (20 per 1 day)
PROLATE ORAL SOLUTION	CED	PA

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>prolate oral tablet</i>	CED	PA; QL (10 per 1 day)
ROXICODONE ORAL TABLET 15 MG, 30 MG	4	PA; QL (20 per 1 day)
ROXYBOND ORAL TABLET, ORAL ONLY 15 MG, 30 MG	CED	PA
ROXYBOND ORAL TABLET, ORAL ONLY 5 MG	CED	PA; QL (10 per 1 day)
SEGLENTIS	CED	PA
SUBLOCADE	5	PA; QL (20 per 28 days)
<i>tencon</i>	1	QL (6 per 1 day)
TREZIX	CED	PA; QL (20 per 1 day)
XTAMPZA ER	4	PA; QL (20 per 1 day)
<b>NON-NARCOTIC ANALGESICS</b>		
<i>adult aspirin regimen</i>	1	ACA; OTC
ANAPROX DS	4	
ARTHROTEC 50	4	PA; QL (4 per 1 day)
ARTHROTEC 75	4	PA; QL (4 per 1 day)
<i>aspirin childrens</i>	1	ACA; OTC
<i>aspirin oral tablet, chewable</i>	1	ACA; OTC
<i>aspirin oral tablet, delayed release (dr/ec) 81 mg</i>	1	ACA; OTC
<i>bayer low dose aspirin</i>	1	ACA; OTC
<i>buprenorphine-naloxone sublingual film 12-3 mg, 2-0.5 mg</i>	2	QL (20 per 1 day)
<i>buprenorphine-naloxone sublingual film 4-1 mg</i>	2	QL (6 per 1 day)
<i>buprenorphine-naloxone sublingual film 8-2 mg</i>	2	QL (3 per 1 day)
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg</i>	1	QL (12 per 1 day)
<i>buprenorphine-naloxone sublingual tablet 8-2 mg</i>	1	QL (3 per 1 day)
<i>butorphanol nasal</i>	1	PA; QL (5 per 30 days)
CAMBIA	CED	PA; QL (20 per 30 days)
CAPSFENAC PAK	CED	PA
CAPSINAC	CED	PA
CELEBREX ORAL CAPSULE 100 MG, 200 MG, 50 MG	4	QL (2 per 1 day)
CELEBREX ORAL CAPSULE 400 MG	4	QL (1 per 1 day)
<i>celecoxib oral capsule 100 mg, 200 mg, 50 mg</i>	1	QL (2 per 1 day)
<i>celecoxib oral capsule 400 mg</i>	1	QL (1 per 1 day)

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
CONZIP	CED	PA; QL (20 per 1 day)
COXANTO	CED	PA
DAYPRO	4	QL (2 per 1 day)
DICLOFENAC EPOLAMINE	4	PA; QL (20 per 1 day)
<i>diclofenac potassium oral capsule</i>	CED	PA; QL (4 per 1 day)
<i>diclofenac potassium oral powder in packet</i>	CED	PA; QL (20 per 30 days)
<i>diclofenac potassium oral tablet 25 mg</i>	CED	PA
<i>diclofenac potassium oral tablet 50 mg</i>	2	QL (4 per 1 day)
<i>diclofenac sodium oral tablet extended release 24 hr</i>	2	QL (20 per 1 day)
<i>diclofenac sodium oral tablet,delayed release (dr/ec) 25 mg</i>	2	QL (4 per 1 day)
<i>diclofenac sodium oral tablet,delayed release (dr/ec) 50 mg</i>	1	QL (4 per 1 day)
<i>diclofenac sodium oral tablet,delayed release (dr/ec) 75 mg</i>	1	QL (2 per 1 day)
<i>diclofenac sodium topical drops</i>	1	QL (20 per 30 days)
<i>diclofenac sodium topical solution in metered-dose pump</i>	CED	PA; QL (20 per 30 days)
DICLOFENAC SUBMICRONIZED	CED	PA; QL (3 per 1 day)
<i>diclofenac-misoprostol</i>	2	PA; QL (4 per 1 day)
DICLOFEX DC	CED	PA
DICLOHEAL-60	CED	PA
DICLOPR	CED	PA
DICLOSAICIN	CED	PA
DICLOTRAL	CED	PA
<i>diflunisal</i>	2	QL (3 per 1 day)
DIMENTHO	CED	PA
DISALCID	4	
DITHOL	CED	PA
DUEXIS	CED	PA; QL (3 per 1 day)
EC-NAPROSYN ORAL TABLET,DELAYED RELEASE (DR/EC) 375 MG	4	QL (4 per 1 day)
EC-NAPROSYN ORAL TABLET,DELAYED RELEASE (DR/EC) 500 MG	4	QL (20 per 1 day)
<i>ecotrin low strength</i>	1	ACA; OTC

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>etodolac oral capsule 200 mg</i>	2	QL (4 per 1 day)
<i>etodolac oral capsule 300 mg</i>	2	QL (3 per 1 day)
<i>etodolac oral tablet</i>	1	QL (20 per 1 day)
<i>etodolac oral tablet extended release 24 hr 400 mg, 500 mg</i>	2	QL (2 per 1 day)
<i>etodolac oral tablet extended release 24 hr 600 mg</i>	2	QL (1 per 1 day)
FELDENE	4	QL (1 per 1 day)
FENOPROFEN ORAL CAPSULE 200 MG	CED	PA; QL (6 per 1 day)
<i>fenoprofen oral capsule 400 mg</i>	CED	PA; QL (4 per 1 day)
<i>fenoprofen oral tablet</i>	CED	PA; QL (4 per 1 day)
FLECTOR	4	PA; QL (2 per 1 day)
<i>flurbiprofen oral tablet 100 mg</i>	1	QL (3 per 1 day)
<i>ibu</i>	1	
<i>ibuprofen oral suspension</i>	1	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	1	
<i>ibuprofen-famotidine</i>	CED	PA; QL (3 per 1 day)
ICLOFENAC CP	CED	PA
INDOCIN ORAL	4	PA; QL (40 per 1 day)
INDOCIN RECTAL	4	PA; QL (4 per 1 day)
<i>indomethacin oral capsule 25 mg</i>	1	QL (3 per 1 day)
<i>indomethacin oral capsule 50 mg</i>	1	QL (4 per 1 day)
<i>indomethacin oral capsule, extended release</i>	1	QL (20 per 1 day)
<i>indomethacin oral suspension</i>	2	PA; QL (40 per 1 day)
INDOMETHACIN RECTAL SUPPOSITORY 100 MG	CED	PA
<i>indomethacin rectal suppository 50 mg</i>	2	PA; QL (4 per 1 day)
<i>ketoprofen oral capsule 25 mg, 75 mg</i>	CED	PA; QL (4 per 1 day)
<i>ketoprofen oral capsule 50 mg</i>	CED	PA
<i>ketoprofen oral capsule,ext rel. pellets 24 hr 200 mg</i>	CED	PA; QL (1 per 1 day)
KETOROLAC NASAL	CED	PA; QL (20 per 30 days)
<i>ketorolac oral</i>	1	QL (20 per 30 days)
KLOXXADO	3	2 sprays per fill
LICART	CED	PA; QL (10 per 1 day)
LIFEMS NALOXONE	4	

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
LODINE ORAL TABLET	4	QL (20 per 1 day)
<i>lofena</i>	CED	PA
LUCEMYRA	CED	PA
<i>meclofenamate</i>	CED	PA; QL (4 per 1 day)
<i>mefenamic acid</i>	2	29 capsules per fill
MELOXICAM ORAL SUSPENSION	4	
<i>meloxicam oral tablet</i>	1	
<i>meloxicam submicronized</i>	CED	PA; QL (20 per 1 day)
<i>nabumetone oral tablet 500 mg</i>	1	QL (4 per 1 day)
<i>nabumetone oral tablet 750 mg</i>	1	QL (2 per 1 day)
NALFON ORAL CAPSULE 400 MG	CED	PA; QL (4 per 1 day)
NALFON ORAL TABLET	CED	PA; QL (4 per 1 day)
<i>naloxone injection solution</i>	1	
<i>naloxone injection syringe</i>	1	
<i>naloxone nasal</i>	2	2 sprays per fill
<i>naltrexone</i>	1	
NAPRELAN CR	CED	PA; QL (20 per 1 day)
NAPROSYN ORAL SUSPENSION	CED	PA; QL (40 per 1 day)
NAPROSYN ORAL TABLET 500 MG	4	QL (3 per 1 day)
<i>naproxen oral suspension</i>	CED	PA; QL (40 per 1 day)
<i>naproxen oral tablet 250 mg</i>	1	QL (6 per 1 day)
<i>naproxen oral tablet 375 mg</i>	1	QL (4 per 1 day)
<i>naproxen oral tablet 500 mg</i>	1	QL (3 per 1 day)
<i>naproxen oral tablet, delayed release (dr/ec) 375 mg</i>	1	QL (4 per 1 day)
<i>naproxen oral tablet, delayed release (dr/ec) 500 mg</i>	2	QL (2 per 1 day)
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	2	
<i>naproxen sodium oral tablet, er multiphase 24 hr</i>	CED	PA; QL (20 per 1 day)
<i>naproxen-esomeprazole oral tablet, ir, delayed rel, biphasic 375-20 mg</i>	CED	PA; QL (20 per 1 day)
<i>naproxen-esomeprazole oral tablet, ir, delayed rel, biphasic 500-20 mg</i>	CED	PA; QL (2 per 1 day)
NARCAN	4	2 sprays per fill
NUCYNTA	4	PA; QL (20 per 1 day)

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
NUCYNTA ER	4	PA; QL (20 per 1 day)
NUDICLO SOLUPAK	CED	PA
OPVEE	4	2 sprays per fill
OXaprozin Oral Capsule	CED	PA
<i>oxaprozin oral tablet</i>	1	QL (2 per 1 day)
PENNSAID TOPICAL SOLUTION IN METERED-DOSE PUMP	CED	PA; QL (10 per 30 days)
<i>pentazocine-naloxone</i>	2	PA; QL (1 per 1 day)
<i>piroxicam</i>	1	QL (1 per 1 day)
PROFINAC	CED	PA
QDOLO	CED	PA
RELAFEN DS	CED	PA; QL (20 per 1 day)
<i>salsalate</i>	1	
SPRIX	CED	PA; QL (20 per 30 days)
<i>st joseph aspirin</i>	1	ACA; OTC
<i>st. joseph aspirin</i>	1	ACA; OTC
SUBOXONE SUBLINGUAL FILM 12-3 MG, 2-0.5 MG	4	QL (20 per 1 day)
SUBOXONE SUBLINGUAL FILM 4-1 MG	4	QL (6 per 1 day)
SUBOXONE SUBLINGUAL FILM 8-2 MG	4	QL (3 per 1 day)
<i>sulindac</i>	1	QL (2 per 1 day)
TIVORBEX	CED	PA; QL (3 per 1 day)
TRAMADOL ORAL CAPSULE,ER BIPHASE 24 HR 17-83	CED	PA; QL (20 per 1 day)
TRAMADOL ORAL CAPSULE,ER BIPHASE 24 HR 25-75 100 MG, 200 MG	CED	PA; QL (20 per 1 day)
TRAMADOL ORAL SOLUTION	CED	PA
TRAMADOL ORAL TABLET 100 MG	CED	PA; QL (20 per 1 day)
TRAMADOL ORAL TABLET 25 MG	CED	PA
<i>tramadol oral tablet 50 mg</i>	1	PA; QL (8 per 1 day)
<i>tramadol oral tablet extended release 24 hr</i>	2	PA; QL (20 per 1 day)
<i>tramadol oral tablet, er multiphase 24 hr</i>	2	PA; QL (20 per 1 day)
<i>tramadol-acetaminophen</i>	1	PA; QL (8 per 1 day)
VAROPHEN (DICLOFENAC)	CED	PA
VIMOVO	CED	PA; QL (2 per 1 day)

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
VIVITROL	5	SP
VIVLODEX	CED	PA; QL (20 per 1 day)
ZICLOPRO	CED	PA
ZIMHI	4	1 ml per fill
ZIPSOR	CED	PA; QL (4 per 1 day)
ZORVOLEX	4	PA; QL (3 per 1 day)
ZUBSOLV	4	

### PSYCHOTHERAPEUTIC DRUGS

ABILITY ASIMTUFII INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 720 MG/2.4 ML	CED	PA for Age less than or equal to 17 year(s); QL (2.4 per 28 days)
ABILITY ASIMTUFII INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 960 MG/3.2 ML	CED	PA for Age less than or equal to 17 year(s); QL (3.2 per 28 days)
ABILITY MAINTENA	3	PA for age 17 and younger; QL (1 per 28 days)
ABILITY MYCITE MAINTENANCE KIT	CED	PA
ABILITY MYCITE STARTER KIT	CED	PA
ABILITY ORAL TABLET	4	PA for age 17 and younger; QL (20 per 1 day)
ADASUVE	CED	PA
ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 5 MG, 7.5 MG	3	PA for age 19 and older; QL (3 per 1 day)
ADDERALL ORAL TABLET 30 MG	3	PA for age 19 and older; QL (20 per 1 day)
ADDERALL XR	3	PA for age 19 and older; QL (20 per 1 day)
ADDYI	4	PA; QL (20 per 1 day)
ADZENYS XR-ODT	4	PA; QL (20 per 1 day)
<i>alprazolam</i>	1	
<i>alprazolam intensol</i>	2	
AMBIEN	4	QL (1 per 1 day)
AMBIEN CR	4	QL (1 per 1 day)
<i>amitriptyline</i>	1	
<i>amitriptyline-chlordiazepoxide</i>	2	
<i>amoxapine</i>	1	
<i>amphetamine sulfate oral tablet 10 mg</i>	2	PA; QL (6 per 1 day)

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>amphetamine sulfate oral tablet 5 mg</i>	2	PA; QL (3 per 1 day)
ANAFRANIL	4	
APLENZIN	CED	PA
APTENSIO XR	4	PA; QL (20 per 1 day)
<i>aripiprazole oral solution</i>	CED	PA for Age less than or equal to 17 year(s);; QL (30 per 1 day)
<i>aripiprazole oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	1	PA for age 17 and younger; QL (1 per 1 day)
<i>aripiprazole oral tablet 2 mg</i>	1	PA for age 17 and younger; QL (20 per 1 day)
<i>aripiprazole oral tablet,disintegrating</i>	CED	PA for Age less than or equal to 17 year(s);; QL (20 per 1 day)
ARISTADA INITIO	3	PA for age 17 and younger; QL (2.4 per 365 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 1,064 MG/3.9 ML	3	PA for age 17 and younger; QL (3.9 per 42 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 441 MG/1.6 ML	3	PA for age 17 and younger; QL (1.6 per 28 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 662 MG/2.4 ML	3	PA for age 17 and younger; QL (2.4 per 28 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 882 MG/3.2 ML	3	PA for age 17 and younger; QL (3.2 per 28 days)
<i>armodafinil oral tablet 150 mg, 250 mg</i>	2	QL (1 per 1 day)
<i>armodafinil oral tablet 200 mg</i>	2	QL (20 per 1 day)
<i>armodafinil oral tablet 50 mg</i>	2	QL (2 per 1 day)
<i>asenapine maleate</i>	2	PA; QL (20 per 1 day)
ATIVAN ORAL	4	
<i>atomoxetine</i>	1	QL (20 per 1 day)
AUVELITY	4	PA; QL (2 per 1 day)
AZSTARYS	4	PA; QL (20 per 1 day)
BELSOMRA	4	ST; QL (1 per 1 day)
<i>bupropion hcl oral tablet 100 mg</i>	1	QL (4.5 per 1 day)
<i>bupropion hcl oral tablet 75 mg</i>	1	QL (6 per 1 day)

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
bupropion hcl oral tablet extended release 24 hr 150 mg	1	QL (3 per 1 day)
bupropion hcl oral tablet extended release 24 hr 300 mg	1	QL (10 per 1 day)
BUPROPION HCL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	4	
bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg	1	QL (2 per 1 day)
bupropion hcl oral tablet sustained-release 12 hr 200 mg	1	QL (20 per 1 day)
buspirone	1	
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG	4	PA for age 18 and older
CAPLYTA ORAL CAPSULE 42 MG	4	PA for age 18 and older; QL (10 per 1 day)
CELEXA ORAL TABLET 10 MG, 20 MG	4	QL (1.5 per 1 day)
CELEXA ORAL TABLET 40 MG	4	QL (1 per 1 day)
chlordiazepoxide hcl	1	
chlorpromazine oral concentrate 100 mg/ml	CED	PA for age 17 and younger; QL (8 per 1 day)
chlorpromazine oral concentrate 30 mg/ml	CED	PA for age 17 and younger; QL (27 per 1 day)
chlorpromazine oral tablet	2	PA for age 17 and younger; QL (4 per 1 day)
CITALOPRAM ORAL CAPSULE	CED	PA; QL (20 per 1 day)
citalopram oral solution	2	QL (20 per 1 day)
citalopram oral tablet	1	QL (10 per 1 day)
clomipramine	2	
clonidine hcl oral tablet extended release 12 hr	1	
clorazepate dipotassium	1	
clozapine oral tablet 100 mg	1	PA for age 17 and younger; QL (9 per 1 day)
clozapine oral tablet 200 mg	1	PA for age 17 and younger; QL (4.5 per 1 day)
clozapine oral tablet 25 mg, 50 mg	1	PA for age 17 and younger; QL (3 per 1 day)
clozapine oral tablet,disintegrating 100 mg	CED	PA; QL (9 per 1 day)
clozapine oral tablet,disintegrating 12.5 mg, 25 mg	CED	PA; QL (3 per 1 day)

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>clozapine oral tablet,disintegrating 150 mg</i>	CED	PA; QL (6 per 1 day)
<i>clozapine oral tablet,disintegrating 200 mg</i>	CED	PA; QL (4.5 per 1 day)
CLOZARIL ORAL TABLET 100 MG	4	PA for age 17 and younger; QL (9 per 1 day)
CLOZARIL ORAL TABLET 25 MG	4	PA for age 17 and younger; QL (3 per 1 day)
CONCERTA	4	PA for age 19 and older; QL (20 per 1 day)
COTEMPLA XR-ODT	4	PA; QL (20 per 1 day)
CYMBALTA	4	QL (2 per 1 day)
DAYTRANA	4	PA; QL (20 per 1 day)
DAYVIGO	4	ST; QL (20 per 1 day)
<i>desipramine</i>	2	
DESOXYN	4	PA for age 19 and older; QL (5 per 1 day)
DESVENLAFAKINE	CED	PA; QL (20 per 1 day)
<i>desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 50 mg</i>	2	QL (1 per 1 day)
<i>desvenlafaxine succinate oral tablet extended release 24 hr 25 mg</i>	2	QL (20 per 1 day)
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 10 MG	4	PA for age 19 and older; QL (4 per 1 day)
<i>dexmethylphenidate oral capsule,er biphasic 50-50 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	2	PA for age 19 and older; QL (1 per 1 day)
<i>dexmethylphenidate oral capsule,er biphasic 50-50 25 mg, 35 mg</i>	2	PA for age 19 and older; QL (20 per 1 day)
<i>dexmethylphenidate oral tablet</i>	1	PA for age 19 and older; QL (20 per 1 day)
<i>dextroamphetamine sulfate oral capsule, extended release 10 mg, 15 mg</i>	2	PA for age 19 and older; QL (4 per 1 day)
<i>dextroamphetamine sulfate oral capsule, extended release 5 mg</i>	2	PA for age 19 and older; QL (3 per 1 day)
<i>dextroamphetamine sulfate oral solution</i>	2	PA for age 19 and older; QL (60 per 1 day)
<i>dextroamphetamine sulfate oral tablet 10 mg, 15 mg, 20 mg, 5 mg</i>	1	PA for age 19 and older; QL (3 per 1 day)
<i>dextroamphetamine sulfate oral tablet 2.5 mg, 7.5 mg</i>	2	PA for age 19 and older; QL (3 per 1 day)

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>dextroamphetamine sulfate oral tablet 30 mg</i>	1	PA for age 19 and older; QL (20 per 1 day)
<i>dextroamphetamine-amphetamine oral capsule, er triphasic 24 hr</i>	2	PA; QL (1 per 1 day)
<i>dextroamphetamine-amphetamine oral capsule, extended release 24hr</i>	1	PA for age 19 and older; QL (20 per 1 day)
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg</i>	1	PA for age 19 and older; QL (3 per 1 day)
<i>dextroamphetamine-amphetamine oral tablet 30 mg</i>	1	PA for age 19 and older; QL (2 per 1 day)
<i>diazepam intensol</i>	2	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	1	
<i>diazepam oral tablet</i>	1	
DORAL	CED	PA
<i>doxepin oral capsule</i>	1	
<i>doxepin oral concentrate</i>	1	
<i>doxepin oral tablet</i>	CED	PA
DRIZALMA SPRINKLE	CED	PA
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg</i>	1	QL (2 per 1 day)
<i>duloxetine oral capsule, delayed release(dr/ec) 30 mg, 60 mg</i>	1	QL (20 per 1 day)
<i>duloxetine oral capsule, delayed release(dr/ec) 40 mg</i>	CED	PA; QL (3 per 1 day)
DYANAVEL XR ORAL SUSPEN, IR - ER, BIPHASIC 24HR	4	PA; QL (8 per 1 day)
DYANAVEL XR ORAL TABLET, IR - ER, BIPHASIC 24HR	4	PA; QL (20 per 1 day)
EDLUAR	CED	PA
EFFEXOR XR ORAL CAPSULE,EXTENDED RELEASE 24HR 150 MG, 37.5 MG	4	QL (1 per 1 day)
EFFEXOR XR ORAL CAPSULE,EXTENDED RELEASE 24HR 75 MG	4	QL (3 per 1 day)
EMSAM	4	PA; QL (20 per 1 day)
<i>ergoloid</i>	2	
<i>escitalopram oxalate oral solution</i>	2	QL (20 per 1 day)
<i>escitalopram oxalate oral tablet</i>	1	QL (10 per 1 day)
<i>estazolam</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>eszopiclone</i>	1	QL (20 per 1 day)
EVEKEO ODT	4	PA; QL (20 per 1 day)
EVEKEO ORAL TABLET 10 MG	4	PA; QL (6 per 1 day)
EVEKEO ORAL TABLET 5 MG	4	PA; QL (3 per 1 day)
FANAPT ORAL TABLET	4	PA for age 18 and older; QL (20 per 1 day)
FANAPT ORAL TABLETS,DOSE PACK	4	PA for age 18 and older; QL (20 per 365 days)
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK	4	ST; QL (28 per 365 days)
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR	4	ST; QL (1 per 1 day)
<i>fluoxetine oral capsule</i>	1	QL (20 per 1 day)
<i>fluoxetine oral capsule,delayed release(dr/ec)</i>	CED	PA; QL (20 per 28 days)
<i>fluoxetine oral solution</i>	2	QL (20 per 1 day)
<i>fluoxetine oral tablet 10 mg</i>	2	QL (1 per 1 day)
<i>fluoxetine oral tablet 20 mg</i>	2	QL (20 per 1 day)
<i>fluoxetine oral tablet 60 mg</i>	2	PA; QL (20 per 1 day)
<i>fluphenazine decanoate</i>	2	PA for age 17 and younger; QL (5 per 30 days)
<i>fluphenazine hcl injection</i>	2	PA for age 17 and younger; QL (20 per 30 days)
<i>fluphenazine hcl oral concentrate</i>	2	PA for age 17 and younger; QL (8 per 1 day)
<i>fluphenazine hcl oral elixir</i>	2	PA for age 17 and younger; QL (80 per 1 day)
<i>fluphenazine hcl oral tablet</i>	2	PA for age 17 and younger; QL (4 per 1 day)
<i>flurazepam</i>	1	QL (20 per 1 day)
<i>fluvoxamine oral capsule,extended release 24hr</i>	CED	PA; QL (2 per 1 day)
<i>fluvoxamine oral tablet 100 mg</i>	1	QL (3 per 1 day)
<i>fluvoxamine oral tablet 25 mg, 50 mg</i>	1	QL (1.5 per 1 day)
FOCALIN	4	PA for age 19 and older; QL (2 per 1 day)
FOCALIN XR	4	PA for age 19 and older; QL (1 per 1 day)
FORFIVO XL	4	

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
GEODON ORAL	4	PA for age 17 and younger; QL (2 per 1 day)
<i>guanfacine oral tablet extended release 24 hr</i>	1	
HALCION ORAL TABLET 0.25 MG	4	QL (1 per 1 day)
HALDOL DECANOATE	4	PA for age 17 and younger
<i>haloperidol decanoate</i>	2	PA for age 17 and younger
<i>haloperidol lactate injection</i>	1	PA for age 17 and younger
<i>haloperidol lactate intramuscular</i>	1	PA for age 17 and younger
<i>haloperidol lactate oral</i>	1	PA for age 17 and younger; QL (20 per 1 day)
<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 5 mg</i>	1	PA for age 17 and younger; QL (3 per 1 day)
<i>haloperidol oral tablet 20 mg</i>	1	PA for age 17 and younger; QL (1.5 per 1 day)
HETLIOZ	5	PA; QL (20 per 1 day)
HETLIOZ LQ	5	PA
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	CED	PA
INTUNIV ER	4	
INVEGA HAFYERA	3	PA for age 17 and younger; QL (20 per 135 days)
INVEGA ORAL TABLET EXTENDED RELEASE 24HR 3 MG, 6 MG, 9 MG	4	PA; QL (20 per 1 day)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML	3	PA for age 17 and younger; QL (0.75 per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 156 MG/ML	3	PA for age 17 and younger; QL (1 per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 234 MG/1.5 ML	3	PA for age 17 and younger; QL (1.5 per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 39 MG/0.25 ML	3	PA for age 17 and younger; QL (0.25 per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 78 MG/0.5 ML	3	PA for age 17 and younger; QL (0.5 per 28 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.88 ML	3	PA for age 17 and younger; QL (0.88 per 63 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 410 MG/1.32 ML	3	PA for age 17 and younger; QL (1.32 per 63 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
INVEGA TRINZA INTRAMUSCULAR SYRINGE 546 MG/1.75 ML	3	PA for age 17 and younger; QL (1.75 per 63 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 819 MG/2.63 ML	3	PA for age 17 and younger; QL (2.63 per 63 days)
JORNAY PM	4	PA; QL (10 per 1 day)
LATUDA	3	PA; QL (20 per 1 day)
LEXAPRO ORAL TABLET 10 MG, 5 MG	4	QL (1.5 per 1 day)
LEXAPRO ORAL TABLET 20 MG	4	QL (1 per 1 day)
<i>lisdexamfetamine oral capsule</i>	1	PA for age 19 and older; QL (1 per 1 day)
<i>lisdexamfetamine oral tablet, chewable</i>	1	PA for age 19 and older; QL (20 per 1 day)
<i>lithium carbonate</i>	1	
<i>lithium citrate</i>	2	
LITHOBID	4	
<i>lorazepam intensol</i>	2	
<i>lorazepam oral concentrate</i>	2	
<i>lorazepam oral tablet</i>	1	
LOREEV XR ORAL CAPSULE, EXTENDED RELEASE 24HR 1 MG, 2 MG, 3 MG	CED	PA; QL (20 per 1 day)
LOREEV XR ORAL CAPSULE, EXTENDED RELEASE 24HR 1.5 MG	CED	PA
<i>loxapine succinate oral capsule 10 mg</i>	1	PA for age 17 and younger; QL (84 per 1 day)
<i>loxapine succinate oral capsule 25 mg, 5 mg</i>	1	PA for age 17 and younger; QL (4 per 1 day)
<i>loxapine succinate oral capsule 50 mg</i>	1	PA for age 17 and younger; QL (5 per 1 day)
LUMRYZ	5	PA; QL (20 per 1 day)
LUNESTA	4	QL (10 per 1 day)
<i>lurasidone</i>	2	PA; QL (20 per 1 day)
LYBALVI	CED	PA; QL (20 per 1 day)
MARPLAN	4	
<i>methamphetamine</i>	2	PA for age 19 and older; QL (5 per 1 day)
METHYLIN ORAL SOLUTION 10 MG/5 ML	4	PA for age 19 and older; QL (30 per 1 day)

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
METHYLIN ORAL SOLUTION 5 MG/5 ML	4	PA for age 19 and older; QL (60 per 1 day)
<i>methylphenidate</i>	2	PA; QL (1 per 1 day)
<i>methylphenidate hcl oral cap,er sprinkle,biphasic 40-60</i>	2	PA; QL (20 per 1 day)
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	2	PA for age 19 and older; QL (1 per 1 day)
<i>methylphenidate hcl oral capsule,er biphasic 50-50 10 mg, 20 mg, 30 mg, 40 mg</i>	2	PA for age 19 and older; QL (1 per 1 day)
<i>methylphenidate hcl oral capsule,er biphasic 50-50 60 mg</i>	CED	PA for age 19 and older; QL (20 per 1 day)
<i>methylphenidate hcl oral solution 10 mg/5 ml</i>	2	PA for age 19 and older; QL (30 per 1 day)
<i>methylphenidate hcl oral solution 5 mg/5 ml</i>	2	PA for age 19 and older; QL (60 per 1 day)
<i>methylphenidate hcl oral tablet</i>	1	PA for age 19 and older; QL (3 per 1 day)
<i>methylphenidate hcl oral tablet extended release</i>	1	PA for age 19 and older; QL (3 per 1 day)
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i>	2	PA for age 19 and older; QL (20 per 1 day)
METHYLPHENIDATE HCL ORAL TABLET EXTENDED RELEASE 24HR 45 MG, 72 MG	CED	PA for age 19 and older; QL (20 per 1 day)
METHYLPHENIDATE HCL ORAL TABLET EXTENDED RELEASE 24HR 63 MG	CED	PA for age 19 and older
<i>methylphenidate hcl oral tablet,chewable</i>	2	PA for age 19 and older; QL (3 per 1 day)
MIDAZOLAM ORAL SYRUP 10 MG/5 ML (2 MG/ML)	4	
<i>midazolam oral syrup 2 mg/ml</i>	1	
<i>mirtazapine</i>	1	QL (20 per 1 day)
<i>modafinil</i>	2	QL (1 per 1 day)
<i>molindone</i>	2	
MYDAYIS	4	PA; QL (20 per 1 day)
NARDIL	4	
<i>nefazodone oral tablet 100 mg, 150 mg, 250 mg, 50 mg</i>	2	QL (2 per 1 day)
<i>nefazodone oral tablet 200 mg</i>	2	QL (3 per 1 day)
NORPRAMIN ORAL TABLET 10 MG, 25 MG	4	

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>nortriptyline oral capsule</i>	1	
<i>nortriptyline oral solution</i>	2	
NUPLAZID	5	PA; QL (20 per 1 day)
NUVIGIL	4	QL (20 per 1 day)
<i>olanzapine oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	1	PA for Age less than or equal to 17 year(s); QL (20 per 1 day)
<i>olanzapine oral tablet 15 mg</i>	1	PA for Age less than or equal to 17 year(s); QL (1 per 1 day)
<i>olanzapine oral tablet,disintegrating</i>	CED	PA for Age less than or equal to 17 year(s); QL (1 per 1 day)
<i>olanzapine-fluoxetine</i>	CED	PA for Age less than or equal to 17 year(s)
<i>oxazepam</i>	1	
<i>paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 9 mg</i>	2	PA; QL (1 per 1 day)
<i>paliperidone oral tablet extended release 24hr 6 mg</i>	2	PA; QL (2 per 1 day)
PAMELOR	4	
PARNATE	4	QL (6 per 1 day)
<i>paroxetine hcl oral suspension</i>	CED	PA; QL (30 per 1 day)
<i>paroxetine hcl oral tablet</i>	1	QL (20 per 1 day)
<i>paroxetine hcl oral tablet extended release 24 hr</i>	CED	PA; QL (20 per 1 day)
<i>paroxetine mesylate(menop.sym)</i>	CED	PA
PAXIL CR	CED	PA; QL (20 per 1 day)
PAXIL ORAL SUSPENSION	CED	PA; QL (30 per 1 day)
PAXIL ORAL TABLET	4	QL (20 per 1 day)
<i>perphenazine oral tablet 16 mg</i>	1	PA for age 17 and younger; QL (2 per 1 day)
<i>perphenazine oral tablet 2 mg, 4 mg, 8 mg</i>	1	PA for age 17 and younger; QL (4 per 1 day)
<i>perphenazine-amitriptyline</i>	2	PA for age 17 and younger
PERSERIS	3	PA for age 17 and younger; QL (1 per 28 days)
<i>phenelzine</i>	1	
<i>pimozide oral tablet 1 mg</i>	1	QL (20 per 1 day)
<i>pimozide oral tablet 2 mg</i>	1	QL (5 per 1 day)
PRISTIQ	4	QL (1 per 1 day)

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>procenutra</i>	2	PA for age 19 and older; QL (60 per 1 day)
<i>protriptyline</i>	2	
PROVIGIL	4	QL (20 per 1 day)
PROZAC ORAL CAPSULE	4	QL (2 per 1 day)
QELBREE	4	PA; QL (20 per 1 day)
QUAZEPAM	CED	PA
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	1	PA for age 17 and younger; QL (3 per 1 day)
QUETIAPINE ORAL TABLET 150 MG	CED	PA for age 17 and younger; QL (5 per 1 day)
<i>quetiapine oral tablet 300 mg, 400 mg</i>	1	PA for age 17 and younger; QL (20 per 1 day)
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg</i>	2	PA for age 17 and younger; QL (10 per 1 day)
<i>quetiapine oral tablet extended release 24 hr 300 mg</i>	2	PA for age 17 and younger; QL (2 per 1 day)
<i>quetiapine oral tablet extended release 24 hr 400 mg, 50 mg</i>	2	PA for age 17 and younger; QL (20 per 1 day)
QUILLICHEW ER	4	PA; QL (20 per 1 day)
QUILLIVANT XR	4	PA; QL (20 per 1 day)
QUVIVIQ	4	ST
<i>ramelteon</i>	2	ST; QL (20 per 1 day)
RELEXXII ORAL TABLET EXTENDED RELEASE 24HR 18 MG, 27 MG, 36 MG, 54 MG	4	PA for Age greater than or equal to 19 year(s); QL (1 per 1 day)
RELEXXII ORAL TABLET EXTENDED RELEASE 24HR 45 MG, 72 MG	CED	PA for age 19 and older; QL (1 per 1 day)
RELEXXII ORAL TABLET EXTENDED RELEASE 24HR 63 MG	CED	PA for age 19 and older; QL (20 per 1 day)
REMERON ORAL TABLET 15 MG	4	QL (10 per 1 day)
REMERON ORAL TABLET 30 MG	4	QL (1 per 1 day)
REMERON SOLTAB	4	QL (10 per 1 day)
RESTORIL ORAL CAPSULE 15 MG, 30 MG	4	QL (1 per 1 day)
RESTORIL ORAL CAPSULE 22.5 MG, 7.5 MG	CED	PA; QL (1 per 1 day)
REXULTI ORAL TABLET	4	PA; QL (20 per 1 day)
RISPERDAL CONSTA	3	PA for age 17 and younger; QL (2 per 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
RISPERDAL ORAL SOLUTION	4	PA for age 17 and younger; QL (8 per 1 day)
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	4	PA for age 17 and younger; QL (20 per 1 day)
<i>risperidone microspheres</i>	2	PA for age 17 and younger; QL (2 per 28 days)
<i>risperidone oral solution</i>	1	PA for age 17 and younger; QL (8 per 1 day)
<i>risperidone oral tablet</i>	1	PA for age 17 and younger; QL (20 per 1 day)
<i>risperidone oral tablet,disintegrating</i>	CED	PA; QL (20 per 1 day)
RITALIN	4	PA for age 19 and older; QL (3 per 1 day)
RITALIN LA	4	PA for age 19 and older; QL (1 per 1 day)
ROZEREM	4	QL (20 per 1 day)
RYKINDO	3	PA for age 17 and younger; QL (2 per 28 days)
SAPHRIS	4	PA; QL (2 per 1 day)
SECUADO	CED	PA
SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 50 MG	4	PA for age 17 and younger; QL (3 per 1 day)
SEROQUEL ORAL TABLET 300 MG, 400 MG	4	PA for age 17 and younger; QL (2 per 1 day)
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HR 150 MG, 200 MG	4	PA for age 17 and younger; QL (1 per 1 day)
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HR 300 MG, 400 MG, 50 MG	4	PA for age 17 and younger; QL (2 per 1 day)
SERTRALINE ORAL CAPSULE	CED	PA; QL (20 per 1 day)
<i>sertraline oral concentrate</i>	1	QL (20 per 1 day)
<i>sertraline oral tablet 100 mg</i>	1	QL (2 per 1 day)
<i>sertraline oral tablet 25 mg, 50 mg</i>	1	QL (10 per 1 day)
SILENOR	CED	PA
SODIUM OXYBATE	5	PA; SP; LA; QL (18 per 1 day)
SPRAVATO NASAL SPRAY, NON-AEROSOL 56 MG (28 MG X 2), 84 MG (28 MG X 3)	5	PA; QL (20 per 28 days)
STRATTERA ORAL CAPSULE 10 MG, 18 MG, 25 MG, 40 MG	4	QL (2 per 1 day)

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
STRATTERA ORAL CAPSULE 100 MG, 60 MG, 80 MG	4	QL (1 per 1 day)
SUNOSI	4	PA; QL (1 per 1 day)
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	CED	PA for Age less than or equal to 17 year(s)
<i>tasimelteon</i>	5	PA; QL (1 per 1 day)
<i>temazepam oral capsule 15 mg, 30 mg</i>	1	QL (1 per 1 day)
<i>temazepam oral capsule 22.5 mg, 7.5 mg</i>	CED	PA; QL (1 per 1 day)
<i>thioridazine oral tablet 10 mg, 25 mg, 50 mg</i>	1	PA for age 17 and younger; QL (4 per 1 day)
<i>thioridazine oral tablet 100 mg</i>	1	PA for age 17 and younger; QL (8 per 1 day)
<i>thiothixene oral capsule 1 mg</i>	2	PA for Age less than or equal to 17 year(s); QL (3 per 1 day)
<i>thiothixene oral capsule 10 mg</i>	2	PA for age 17 and younger; QL (6 per 1 day)
<i>thiothixene oral capsule 2 mg, 5 mg</i>	2	PA for age 17 and younger; QL (3 per 1 day)
<i>tranylcypromine</i>	2	QL (6 per 1 day)
<i>trazodone oral tablet 100 mg, 150 mg, 50 mg</i>	1	QL (3 per 1 day)
<i>trazodone oral tablet 300 mg</i>	2	QL (20 per 1 day)
<i>triazolam</i>	1	QL (1 per 1 day)
<i>trifluoperazine</i>	1	PA for age 17 and younger; QL (4 per 1 day)
<i>trimipramine</i>	2	
TRINTELLIX	4	ST; QL (20 per 1 day)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 100 MG/0.28 ML	CED	PA for Age less than or equal to 17 year(s); QL (0.28 per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 125 MG/0.35 ML	CED	PA for Age less than or equal to 17 year(s); QL (0.35 per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 150 MG/0.42 ML	CED	PA for Age less than or equal to 17 year(s); QL (0.4 per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 200 MG/0.56 ML	CED	PA for Age less than or equal to 17 year(s); QL (0.56 per 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
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 250 MG/0.7 ML	CED	PA for Age less than or equal to 17 year(s); QL (0.64 per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 50 MG/0.14 ML	CED	PA for Age less than or equal to 17 year(s); QL (0.14 per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 75 MG/0.21 ML	CED	PA for Age less than or equal to 17 year(s); QL (0.21 per 28 days)
VALIUM	4	
VENLAFAXINE BESYLATE	CED	PA; QL (20 per 1 day)
<i>venlafaxine oral capsule,extended release 24hr 150 mg, 37.5 mg</i>	1	QL (1 per 1 day)
<i>venlafaxine oral capsule,extended release 24hr 75 mg</i>	1	QL (3 per 1 day)
<i>venlafaxine oral tablet</i>	1	QL (3 per 1 day)
<i>venlafaxine oral tablet extended release 24hr</i>	CED	PA; QL (20 per 1 day)
VERSACLOZ	CED	PA; QL (20 per 1 day)
VIBRYD ORAL TABLET	4	ST; QL (1 per 1 day)
vilazodone	2	ST; QL (1 per 1 day)
VRAYLAR ORAL CAPSULE	4	PA for age 18 and older; QL (20 per 1 day)
VRAYLAR ORAL CAPSULE,DOSE PACK	4	PA for age 18 and older; QL (20 per 365 days)
VYLEESI	4	PA; QL (10 per 30 days)
VYVANSE	3	PA for age 19 and older; QL (20 per 1 day)
WAKIX	5	PA; LA; QL (2 per 1 day)
WELLBUTRIN SR	4	QL (2 per 1 day)
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HR 150 MG	4	QL (3 per 1 day)
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HR 300 MG	4	QL (1 per 1 day)
XANAX	4	
XANAX XR	4	
XELSTRYM	4	PA for age 19 and older; QL (20 per 1 day)
XYREM	5	PA; SP; LA; QL (20 per 1 day)

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
XYWAV	5	PA; LA; QL (20 per 1 day)
zaleplon	1	QL (1 per 1 day)
zenzedi oral tablet 10 mg, 5 mg	1	PA for age 19 and older; QL (3 per 1 day)
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 7.5 MG	4	PA for age 19 and older; QL (3 per 1 day)
ZENZEDI ORAL TABLET 30 MG	4	PA for age 19 and older; QL (20 per 1 day)
ziprasidone hcl	1	PA for age 17 and younger; QL (20 per 1 day)
ZOLOFT ORAL CONCENTRATE	4	QL (10 per 1 day)
ZOLOFT ORAL TABLET 100 MG	4	QL (2 per 1 day)
ZOLOFT ORAL TABLET 25 MG, 50 MG	4	QL (1.5 per 1 day)
ZOLPIDEM ORAL CAPSULE	CED	PA; QL (20 per 1 day)
zolpidem oral tablet 10 mg	1	QL (10 per 1 day)
zolpidem oral tablet 5 mg	1	QL (20 per 1 day)
zolpidem oral tablet,ext release multiphase	2	QL (20 per 1 day)
zolpidem sublingual	CED	PA
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG	5	PA; SP; QL (28 per 14 days)
ZURZUVAE ORAL CAPSULE 30 MG	5	PA; SP; QL (14 per 14 days)
ZYPREXA ORAL	4	PA for age 17 and younger; QL (1 per 1 day)
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 210 MG, 300 MG	3	PA for age 17 and younger; QL (2 per 28 days)
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 405 MG	3	PA for age 17 and younger; QL (1 per 28 days)
ZYPREXA ZYDIS	CED	PA for Age less than or equal to 17 year(s); QL (1 per 1 day)

## CARDIOVASCULAR, HYPERTENSION & LIPIDS

### ANTIARRHYTHMIC AGENTS

amiodarone oral tablet 100 mg	2	
amiodarone oral tablet 200 mg, 400 mg	1	
BETAPACE	4	
BETAPACE AF	4	
disopyramide phosphate oral capsule	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>dofetilide</i>	2	
<i>flecainide</i>	1	
<i>mexiletine</i>	1	
MULTAQ	3	
NORPACE	4	
NORPACE CR	4	
<i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i>	2	
<i>propafenone oral capsule, extended release 12 hr</i>	2	
<i>propafenone oral tablet</i>	1	
<i>quinidin gluconate oral</i>	1	
<i>quinidin sulfate oral tablet</i>	1	
<i>sotalol af</i>	1	
<i>sotalol oral</i>	1	
SOTYLIZE	CED	PA
TIKOSYN	4	
<b>ANTIHYPERTENSIVE THERAPY</b>		
ACCUPRIL	4	
ACCURETIC	4	
<i>acebutolol</i>	1	
ALDACTONE	4	
<i>aliskiren</i>	2	ST
ALTACE	4	
<i>amiloride</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	
<i>amlodipine</i>	1	
<i>amlodipine-benazepril</i>	1	
<i>amlodipine-olmesartan</i>	2	
<i>amlodipine-valsartan</i>	2	
<i>amlodipine-valsartan-hcthiazid</i>	CED	PA
ATACAND	4	ST
ATACAND HCT	4	ST
<i>atenolol</i>	1	
<i>atenolol-chlorthalidone</i>	1	
AVALIDE	4	

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	
AVAPRO	4		
AZOR	4		
<i>benazepril</i>	1		
<i>benazepril-hydrochlorothiazide</i>	1		
BENICAR	4		
BENICAR HCT	4		
<i>betaxolol oral</i>	1		
BIDIL	4		
<i>bisoprolol fumarate</i>	1		
<i>bisoprolol-hydrochlorothiazide</i>	1		
<i>bumetanide oral</i>	1		
BYSTOLIC	4		
<i>candesartan</i>	2	ST	
<i>candesartan-hydrochlorothiazid</i>	2	ST	
<i>captopril</i>	1		
<i>captopril-hydrochlorothiazide</i>	1		
CARDIZEM CD	4		
CARDIZEM LA	4		
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	4		
CARDURA	4		
CARDURA XL	CED	PA	
CAROSPIR	CED	PA	
<i>cartia xt</i>	1		
<i>carvedilol</i>	1		
<i>carvedilol phosphate oral capsule, er multiphase 24 hr 10 mg, 40 mg</i>	CED	PA; QL (20 per 1 day)	
<i>carvedilol phosphate oral capsule, er multiphase 24 hr 20 mg, 80 mg</i>	CED	PA; QL (1 per 1 day)	
CATAPRES-TTS-1	4		
CATAPRES-TTS-2	4		
CATAPRES-TTS-3	4		
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1		
<i>clonidine</i>	2		
<i>clonidine hcl oral tablet</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
CLONIDINE HCL ORAL TABLET EXTENDED RELEASE 24 HR	CED	PA
CONJUPRI	CED	PA
CONSENSI	CED	PA
COREG	4	
COREG CR	CED	PA; QL (10 per 1 day)
CORGARD ORAL TABLET 20 MG, 40 MG	4	
COZAAR	4	
DEMSER	4	PA
DIBENZYLINE	4	PA
<i>diltiazem hcl oral capsule,ext.rel 24h degradable</i>	1	
<i>diltiazem hcl oral capsule,extended release 12 hr</i>	1	
<i>diltiazem hcl oral capsule,extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	
<i>diltiazem hcl oral capsule,extended release 24hr</i>	1	
<i>diltiazem hcl oral tablet</i>	1	
<i>diltiazem hcl oral tablet extended release 24 hr</i>	2	
<i>dilt-xr</i>	1	
DIOVAN	4	
DIOVAN HCT	4	
DIURIL	4	
<i>doxazosin</i>	1	
DYRENIUM	4	
EDARBI	4	ST
EDARBYCLOR	4	ST
EDECIN	4	PA
<i>enalapril maleate oral solution</i>	CED	PA
<i>enalapril maleate oral tablet</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	
EPANED	CED	PA
<i>eplerenone</i>	1	
<i>eprosartan</i>	2	
<i>ethacrynic acid</i>	2	PA
EXFORGE	4	
EXFORGE HCT	CED	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>felodipine</i>	1	
<i>fosinopril</i>	1	
<i>fosinopril-hydrochlorothiazide</i>	1	
FUROSCIX	4	PA; 2 kits per fill
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	1	
<i>furosemide oral tablet</i>	1	
<i>guanfacine oral tablet</i>	1	
HEMANGEOL	4	PA
<i>hydralazine oral</i>	1	
<i>hydrochlorothiazide</i>	1	
HYZAAR	4	
<i>indapamide</i>	1	
INDERAL LA	4	
INDERAL XL	CED	PA
INNOPRAN XL	CED	PA
INSPRA	4	
<i>irbesartan</i>	1	
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>isosorbide-hydralazine</i>	2	
<i>isradipine</i>	1	
KAPSPARGO SPRINKLE	CED	PA
KATERZIA	CED	PA
KERENDIA	4	PA; QL (20 per 1 day)
<i>labetalol oral</i>	1	
LASIX	4	
LEVAMLODIPINE	CED	PA
<i>lisinopril</i>	1	
<i>lisinopril-hydrochlorothiazide</i>	1	
LOPRESSOR ORAL	4	
<i>losartan</i>	1	
<i>losartan-hydrochlorothiazide</i>	1	
LOTENSIN HCT	4	
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	4	

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
LOTREL	4	
<i>matzim la</i>	2	
MAXZIDE	4	
MAXZIDE-25MG	4	
<i>methyldopa</i>	1	
<i>methyldopa-hydrochlorothiazide</i>	1	
<i>metolazone</i>	1	
<i>metoprolol succinate</i>	1	
<i>metoprolol ta-hydrochlorothiaz</i>	2	
<i>metoprolol tartrate oral</i>	1	
<i>metyrosine</i>	2	PA
MICARDIS	4	
MICARDIS HCT	CED	PA
MINIPRESS	4	
<i>minoxidil oral</i>	1	
<i>moexipril</i>	1	
<i>nadolol</i>	1	
<i>nebivolol</i>	2	
NEXICLON XR	CED	PA
<i>nicardipine oral</i>	2	
<i>nifedipine</i>	1	
<i>nimodipine</i>	1	
<i>nisoldipine</i>	2	
NORLIQVA	CED	PA
NORVASC	4	
NYMALIZE	CED	PA
<i>olmesartan</i>	1	
<i>olmesartanamlodipin-hcthiazid</i>	CED	PA
<i>olmesartan-hydrochlorothiazide</i>	1	
ORENITRAM	5	PA; SP; QL (3 per 1 day)
ORENITRAM MONTH 1 TITRATION KT	5	PA; SP; QL (168 per 365 days)
ORENITRAM MONTH 2 TITRATION KT	5	PA; SP; QL (336 per 365 days)
ORENITRAM MONTH 3 TITRATION KT	5	PA; SP; QL (252 per 365 days)
<i>perindopril erbumine</i>	1	

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>phenoxybenzamine</i>	2	PA
<i>pindolol</i>	2	
<i>prazosin</i>	1	
PRESTALIA	CED	PA
PROCARDIA XL	4	
<i>propranolol oral</i>	1	
<i>propranolol-hydrochlorothiazid</i>	1	
QBRELIS	CED	PA
<i>quinapril</i>	1	
<i>quinapril-hydrochlorothiazide</i>	1	
<i>ramipril</i>	1	
SOAANZ	CED	PA
<i>spironolactone oral suspension</i>	CED	PA
<i>spironolactone oral tablet</i>	1	
<i>spironolacton-hydrochlorothiaz</i>	1	
SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG	4	
<i>taztia xt</i>	1	
TEKTURNA	4	ST
<i>telmisartan</i>	1	
<i>telmisartan-amlodipine</i>	CED	PA
<i>telmisartan-hydrochlorothiazid</i>	CED	PA
TENORETIC 100	4	
TENORETIC 50	4	
TENORMIN	4	
<i>terazosin</i>	1	
THALITONE	CED	PA
<i>tiadylt er</i>	1	
TIAZAC	4	
<i>timolol maleate oral</i>	2	
TOPROL XL	4	
<i>torsemide oral</i>	1	
<i>trandolapril</i>	1	
<i>trandolapril-verapamil</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
triamterene	1	
triamterene-hydrochlorothiazid	1	
TRIBENZOR	CED	PA
UPTRAVI ORAL TABLET	5	PA; SP; LA; QL (20 per 1 day)
UPTRAVI ORAL TABLETS,DOSE PACK	5	PA; SP; LA; QL (20 per 365 days)
VALSARTAN ORAL SOLUTION	CED	PA
<i>valsartan oral tablet 160 mg, 80 mg</i>	1	
<i>valsartan oral tablet 320 mg, 40 mg</i>	2	
<i>valsartan-hydrochlorothiazide</i>	1	
VASERETIC	4	
VASOTEC	4	
<i>verapamil oral capsule, 24 hr er pellet ct</i>	2	
<i>verapamil oral capsule,ext rel. pellets 24 hr</i>	2	
<i>verapamil oral tablet</i>	1	
<i>verapamil oral tablet extended release</i>	1	
VERELAN PM	4	
ZESTORETIC	4	
ZESTRIL	4	
<b>CARDIAC GLYCOSIDES</b>		
<i>digox</i>	1	
<i>digoxin oral solution</i>	1	
<i>digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	1	
<i>digoxin oral tablet 62.5 mcg (0.0625 mg)</i>	CED	PA
LANOXIN ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG)	4	
LANOXIN ORAL TABLET 62.5 MCG (0.0625 MG)	CED	PA
<b>COAGULATION THERAPY</b>		
AMICAR	4	
<i>aminocaproic acid oral solution</i>	2	
<i>aminocaproic acid oral tablet</i>	1	
ARIIXTRA	5	SP
<i>aspirin-dipyridamole</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
ASPIRIN-OMEPRAZOLE ORAL TABLET,IR,DELAYED REL,BIPHASIC 81-40 MG	CED	PA
BRILINTA	3	
CABLIVI INJECTION KIT	5	PA; LA; QL (20 per 365 days)
<i>cilostazol</i>	1	
<i>clopidogrel</i>	1	
<i>dabigatran etexilate</i>	2	
<i>dipyridamole oral</i>	1	
DOPTELET (15 TAB PACK)	5	PA; LA; QL (2 per 1 day)
EFFIENT	4	
ELIQUIS	3	
ELIQUIS DVT-PE TREAT 30D START	3	
<i>enoxaparin</i>	5	SP
<i>fondaparinux</i>	5	SP
FRAGMIN SUBCUTANEOUS SOLUTION 2,500 ANTI-XA UNIT/ML	5	
FRAGMIN SUBCUTANEOUS SOLUTION 25,000 ANTI-XA UNIT/ML	5	SP
FRAGMIN SUBCUTANEOUS SYRINGE	5	SP
<i>heparin (porcine) injection cartridge</i>	1	
<i>heparin (porcine) injection solution</i>	1	
<i>heparin (porcine) injection syringe 5,000 unit/ml</i>	1	
<i>heparin, porcine (pf) injection solution</i>	1	
<i>heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml</i>	1	
HEPARIN, PORCINE (PF) INJECTION SYRINGE 5,000 UNIT/ML	4	
HEPARIN, PORCINE (PF) SUBCUTANEOUS	4	
<i>jantoven</i>	1	
LOVENOX	5	SP
MULPLETA	5	PA; SP; QL (20 per 365 days)
<i>pentoxifylline</i>	1	
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	1	
PLAVIX ORAL TABLET 75 MG	4	
PRADAXA ORAL CAPSULE	4	

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
PRADAXA ORAL PELLETS IN PACKET 110 MG, 30 MG, 40 MG, 50 MG	4	PA; QL (4 per 1 day)
PRADAXA ORAL PELLETS IN PACKET 150 MG	4	PA; QL (2 per 1 day)
PRADAXA ORAL PELLETS IN PACKET 20 MG	4	PA; QL (1 per 1 day)
<i>prasugrel</i>	1	
PROMACTA ORAL POWDER IN PACKET 12.5 MG	5	PA; LA; QL (1 per 1 day)
PROMACTA ORAL POWDER IN PACKET 25 MG	5	PA; SP; LA; QL (3 per 1 day)
PROMACTA ORAL TABLET 12.5 MG, 25 MG	5	PA; SP; LA; QL (1 per 1 day)
PROMACTA ORAL TABLET 50 MG	5	PA; SP; LA; QL (3 per 1 day)
PROMACTA ORAL TABLET 75 MG	5	PA; SP; LA; QL (2 per 1 day)
SAVAYSA	4	PA
TAVALISSE	5	PA; LA; QL (2 per 1 day)
<i>warfarin</i>	1	
XARELTO DVT-PE TREAT 30D START	3	
XARELTO ORAL SUSPENSION FOR RECONSTITUTION	3	QL (20 per 1 day)
XARELTO ORAL TABLET	3	
YOSPRALA	4	PA
ZONTIVITY	4	PA
<b>LIPID/CHOLESTEROL LOWERING AGENTS</b>		
ALTOPREV	CED	PA
<i>amlodipine-atorvastatin</i>	2	
ATORVALIQ	CED	PA
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	1	ACA
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	
CADUET	4	
<i>cholestyramine (with sugar)</i>	1	
<i>cholestyramine light</i>	1	
<i>colesevelam</i>	2	
COLESTID	4	
COLESTID FLAVORED ORAL PACKET	4	
<i>colestipol</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
CRESTOR	4	
EZALLOR SPRINKLE	CED	PA
<i>ezetimibe</i>	1	
EZETIMIBE-ROSVASTATIN	CED	PA
<i>ezetimibe-simvastatin</i>	2	PA
<i>fenofibrate micronized oral capsule 130 mg, 43 mg</i>	CED	PA
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>	1	
FENOFIBRATE MICRONIZED ORAL CAPSULE 90 MG	CED	PA
<i>fenofibrate nanocrystallized</i>	1	
FENOFIBRATE ORAL CAPSULE	CED	PA
<i>fenofibrate oral tablet 120 mg, 40 mg</i>	CED	PA
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	1	
<i>fenofibric acid</i>	CED	PA
<i>fenofibric acid (choline)</i>	1	
FENOGLIDE	CED	PA
FIBRICOR	CED	PA
FLOLIPID	4	
<i>fluvastatin oral capsule</i>	2	ACA
<i>fluvastatin oral tablet extended release 24 hr</i>	CED	PA; ACA
<i>gemfibrozil</i>	1	
<i>icosapent ethyl</i>	2	PA; QL (4 per 1 day)
JUXTAPID	5	PA; LA
LESCOL XL	CED	PA
LIPITOR	4	
LIPOFEN	CED	PA
LIVALO	4	ST
LOPID	4	
<i>lovastatin</i>	1	ACA
LOVAZA	4	QL (4 per 1 day)
NEXLETOL	4	PA; QL (10 per 1 day)
NEXLIZET	4	PA; QL (10 per 1 day)
<i>niacin oral tablet 500 mg</i>	2	
<i>niacin oral tablet extended release 24 hr</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
NIACOR	3	
<i>omega-3 acid ethyl esters</i>	2	QL (4 per 1 day)
<i>pitavastatin calcium</i>	2	ST; ACA
PRALUENT PEN	4	PA; QL (20 per 28 days)
<i>pravastatin</i>	1	ACA
<i>prevalite</i>	1	
QUESTRAN	4	
QUESTRAN LIGHT	4	
REPATHA PUSHTRONEX	3	PA; QL (10 per 28 days)
REPATHA SURECLICK	3	PA; QL (10 per 28 days)
REPATHA SYRINGE	3	PA; QL (10 per 28 days)
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	1	ACA
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	
ROSZET	CED	PA
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	ACA
<i>simvastatin oral tablet 80 mg</i>	1	
TRICOR	4	
TRILIPIX	4	
VASCEPA	4	PA; QL (4 per 1 day)
VYTORIN 10-10	4	PA
VYTORIN 10-20	4	PA
VYTORIN 10-40	4	PA
VYTORIN 10-80	4	PA
WELCHOL	4	
ZETIA	4	
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG	4	
ZYPITAMAG	4	PA
<b>MISCELLANEOUS CARDIOVASCULAR AGENTS</b>		
ASPRUZY SPRINKLE	CED	PA
CAMZYOS	5	PA; SP; QL (10 per 1 day)
CORLANOR	4	QL (20 per 1 day)
ENTRESTO	3	
FILSPARI	5	PA; QL (20 per 1 day)
LODOCQ	4	PA; QL (1 per 1 day)

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>ranolazine</i>	2	
VERQUVO	4	PA; QL (1 per 1 day)
VYNDAMAX	5	PA; SP; QL (1 per 1 day)
VYNDAQEL	5	PA; SP; QL (4 per 1 day)
<b>NITRATES</b>		
GONITRO	CED	PA
ISORDIL	CED	PA
ISORDIL TITRADOSE ORAL TABLET 5 MG	4	
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	1	
<i>isosorbide dinitrate oral tablet 40 mg</i>	CED	PA
<i>isosorbide mononitrate</i>	1	
<i>nitro-bid</i>	2	
NITRO-DUR	4	
<i>nitroglycerin sublingual</i>	1	
<i>nitroglycerin transdermal patch 24 hour</i>	1	
<i>nitroglycerin translingual</i>	2	
NITROLINGUAL	4	
NITROMIST	CED	PA
NITROSTAT	4	
<b>DERMATOLOGICALS/TOPICAL THERAPY</b>		
<b>ANTIPSORIATIC / ANTISEBORRHEIC</b>		
<i>acitretin</i>	2	
ANALPRAM-HC TOPICAL	4	
BIMZELX	5	PA; SP; QL (2 per 42 days)
<i>calcipotriene scalp</i>	1	
<i>calcipotriene topical cream</i>	1	
CALCIPOTRIENE TOPICAL FOAM	CED	PA
<i>calcipotriene topical ointment</i>	2	
<i>calcipotriene-betamethasone</i>	2	ST
<i>calcitriol topical</i>	2	
<i>calsodore</i>	CED	PA
CALSODORE KIT	CED	PA
COSENTYX (2 SYRINGES)	5	PA; SP; QL (2 per 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
COSENTYX PEN	5	PA; SP; QL (1 per 28 days)
COSENTYX PEN (2 PENS)	5	PA; SP; QL (2 per 28 days)
COSENTYX SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; SP; QL (1 per 28 days)
COSENTYX SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	5	PA; SP; QL (0.5 per 28 days)
COSENTYX UNOREADY PEN	5	PA; QL (2 per 28 days)
ENSTILAR	CED	PA
EPIFOAM	CED	PA
ILUMYA	5	PA; QL (20 per 63 days)
PRAMOSONE TOPICAL CREAM 1-1 %	CED	PA
PRAMOSONE TOPICAL LOTION	4	
<i>selenium sulfide topical lotion</i>	1	
<i>selenium sulfide topical shampoo 2.25 %</i>	1	
SILIQ	5	PA; QL (3 per 28 days)
SKYRIZI SUBCUTANEOUS PEN INJECTOR	5	PA; SP; QL (1 per 63 days)
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; SP; QL (1 per 63 days)
SORILUX	CED	PA
SOTYKTU	5	PA; SP; QL (1 per 1 day)
STELARA INTRAVENOUS	5	PA; QL (52 per 365 days)
STELARA SUBCUTANEOUS SOLUTION	5	PA; SP; QL (20 per 63 days)
STELARA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	5	PA; SP; QL (20 per 63 days)
STELARA SUBCUTANEOUS SYRINGE 90 MG/ML	5	PA; SP; QL (20 per 42 days)
TACLONEX TOPICAL SUSPENSION	4	ST
TALTZ AUTOINJECTOR	5	PA; QL (1 per 28 days)
TALTZ AUTOINJECTOR (2 PACK)	5	PA; QL (1 per 28 days)
TALTZ AUTOINJECTOR (3 PACK)	5	PA; QL (1 per 28 days)
TALTZ SYRINGE	5	PA; QL (1 per 28 days)
TREMFYA	5	PA; SP; QL (20 per 42 days)
VECTICAL	4	
VTAMA	4	PA; QL (10 per 30 days)
WYNZORA	CED	PA
ZORYVE TOPICAL CREAM	4	PA; QL (10 per 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
<b>BURN THERAPY</b>		
SILVADENE	4	
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
<b>KERATOLYTICS</b>		
KERALYT RX	CED	PA
KERALYT SCALP	CED	PA
<i>keralyt topical shampoo 6 %</i>	CED	PA
<b>MISCELLANEOUS DERMATOLOGICALS</b>		
ADBRY	5	PA; SP; QL (20 per 28 days)
<i>ammonium lactate</i>	1	
CARAC	CED	PA; QL (30 per 365 days)
CIBINQO	5	PA; QL (1 per 1 day)
CONDYLOX TOPICAL GEL	4	
CORTANE-B	CED	PA
<i>diclofenac sodium topical gel 3 %</i>	1	QL (100 per 365 days)
<i>doxepin topical</i>	CED	PA
DRYSOL DAB-O-MATIC	3	
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML	5	PA; SP; QL (2.28 per 28 days)
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	5	PA; SP; QL (4 per 28 days)
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML	5	PA; SP; QL (2.28 per 28 days)
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 300 MG/2 ML	5	PA; SP; QL (4 per 28 days)
EFUDEX TOPICAL CREAM	4	QL (40 per 365 days)
ELIDEL	4	ST
EUCRISA	4	ST; QL (20 per 30 days)
FLUOROPLEX	CED	PA; QL (20 per 365 days)
FLUOROURACIL TOPICAL CREAM 0.5 %	CED	PA; QL (30 per 365 days)
<i>fluorouracil topical cream 5 %</i>	1	QL (40 per 365 days)
<i>fluorouracil topical solution</i>	1	QL (20 per 365 days)
HYFTOR	5	PA; QL (10 per 30 days)
<i>methoxsalen</i>	5	SP

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
OPZELURA	5	PA; QL (20 per 30 days)
PANRETIN	5	PA; SP
<i>pimecrolimus</i>	2	ST
<i>podofilox topical gel</i>	2	
<i>podofilox topical solution</i>	1	
<i>prodoxin</i>	CED	PA
QBREXZA	CED	PA
QUTENZA	CED	PA
REGRANEX	4	QL (20 per 720 days)
<i>tacrolimus topical</i>	1	
TOLAK	4	
<i>urea topical cream 40 %</i>	1	
VALCHLOR	5	PA; SP; QL (60 per 30 days)
VEREGEN	CED	PA
ZONALON	CED	PA
<b>THERAPY FOR ACNE</b>		
ABSORICA LD	CED	PA
ABSORICA ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	4	
ABSORICA ORAL CAPSULE 25 MG, 35 MG	CED	PA
ACANYA TOPICAL GEL WITH PUMP	4	ST
<i>accutane</i>	1	
ACZONE TOPICAL GEL	4	ST
ACZONE TOPICAL GEL WITH PUMP	CED	PA
<i>adapalene topical cream</i>	1	PA for age 29 and older
<i>adapalene topical gel 0.3 %</i>	1	PA for age 29 and older
<i>adapalene topical gel with pump</i>	1	PA for Age greater than or equal to 29 year(s)
ADAPALENE TOPICAL LOTION	CED	PA for age 29 and older; QL (20 per 30 days)
<i>adapalene topical solution</i>	2	
<i>adapalene topical swab</i>	CED	PA
<i>adapalene-benzoyl peroxide topical gel with pump 0.1-2.5 %</i>	1	
<i>adapalene-benzoyl peroxide topical gel with pump 0.3-2.5 %</i>	2	ST

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
AKLIEF	4	ST; QL (45 per 30 days)
ALTRENO	4	PA
<i>amnesteem</i>	1	
AMZEEQ	4	PA; QL (10 per 30 days)
ARAZLO	CED	PA
ATRALIN	4	PA for age 29 and older
<i>avar</i>	1	
<i>azelaic acid</i>	2	
AZELEX	4	ST
BENZAMYCIN	4	
BENZEPRO (MICROSPHERES)	4	
<i>benzepro topical towelette</i>	CED	PA
<i>brimonidine topical</i>	2	PA; QL (20 per 30 days)
CABTREO	CED	PA
<i>claravis</i>	1	
CLEOCIN T TOPICAL LOTION	4	
<i>clindacin</i>	CED	PA
CLINDACIN ETZ TOPICAL KIT	CED	PA
<i>clindacin etz topical swab</i>	1	
<i>clindacin p</i>	1	
CLINDACIN PAC	CED	PA
CLINDAGEL	4	
<i>clindamycin phosphate topical foam</i>	CED	PA
<i>clindamycin phosphate topical gel</i>	2	
<i>clindamycin phosphate topical gel, once daily</i>	2	
<i>clindamycin phosphate topical lotion</i>	1	
<i>clindamycin phosphate topical solution</i>	1	
<i>clindamycin phosphate topical swab</i>	1	
<i>clindamycin-benzoyl peroxide topical gel</i>	2	
<i>clindamycin-benzoyl peroxide topical gel with pump 1.2 %(1 % base) -3.75 %</i>	CED	PA
<i>clindamycin-benzoyl peroxide topical gel with pump 1.2-2.5 %</i>	2	ST
<i>clindamycin-benzoyl peroxide topical gel with pump 1-5 %</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin-tretinoin</i>	CED	PA
<i>dapsone topical gel</i>	2	ST
<i>dapsone topical gel with pump</i>	CED	PA
DIFFERIN TOPICAL CREAM	4	PA for age 29 and older
DIFFERIN TOPICAL GEL WITH PUMP	4	PA for age 29 and older
DIFFERIN TOPICAL LOTION	CED	PA for age 29 and older; QL (1 per 30 days)
EPIDUO FORTE	4	ST
EPSOLAY	CED	PA
<i>ery pads</i>	2	
<i>erygel</i>	2	
<i>erythromycin with ethanol topical gel</i>	1	
<i>erythromycin with ethanol topical solution</i>	1	
<i>erythromycin-benzoyl peroxide</i>	2	
EVOCLIN	CED	PA
FABIOR	4	ST
FINACEA TOPICAL FOAM	CED	PA
<i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
<i>isotretinoin oral capsule 25 mg, 35 mg</i>	CED	PA
<i>ivermectin topical cream</i>	2	PA
METROCREAM	4	
METROGEL TOPICAL GEL 1 %	4	QL (60 per 30 days)
<i>metronidazole topical cream</i>	1	
<i>metronidazole topical gel</i>	2	QL (1 per 30 days)
<i>metronidazole topical gel with pump</i>	2	QL (1 per 30 days)
<i>metronidazole topical lotion</i>	CED	PA
MIRVASO	4	PA; QL (30 per 30 days)
<i>neuac</i>	2	
NEUAC KIT	CED	PA
NORITATE	CED	PA
NUCARACLINPAK	CED	PA
ONEXTON TOPICAL GEL WITH PUMP	CED	PA
RETIN-A	4	PA for age 29 and older
RETIN-A MICRO	4	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
RETIN-A MICRO PUMP TOPICAL GEL WITH PUMP 0.04 %, 0.08 %, 0.1 %	4	PA for age 29 and older
RETIN-A MICRO PUMP TOPICAL GEL WITH PUMP 0.06 %	4	ST
RHOFADE	4	PA; QL (10 per 30 days)
<i>rosadan topical cream</i>	1	
<i>rosadan topical gel</i>	2	QL (20 per 30 days)
ROSADAN TOPICAL KIT, CLEANSER AND GEL	CED	PA
ROSADAN TOPICAL KIT,CLEANSER AND CREAM	4	PA
ROSULA	4	
SOOLANTRA	4	PA
<i>sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w)</i>	1	
<i>sulfacetamide sodium-sulfur topical suspension 8-4 %</i>	1	
<i>sulfacleanse 8-4</i>	1	
<i>tazarotene topical cream</i>	2	ST
TAZAROTENE TOPICAL FOAM	4	ST
<i>tazarotene topical gel</i>	CED	PA
TAZORAC TOPICAL CREAM 0.05 %	CED	PA
TAZORAC TOPICAL CREAM 0.1 %	4	ST
TAZORAC TOPICAL GEL	CED	PA
<i>tretinoi microspheres topical gel</i>	2	PA
<i>tretinoi microspheres topical gel with pump 0.04 %, 0.1 %</i>	2	PA for age 29 and older
<i>tretinoi microspheres topical gel with pump 0.08 %</i>	2	PA for Age greater than or equal to 29 year(s)
<i>tretinoi topical cream</i>	1	PA for age 29 and older
<i>tretinoi topical gel 0.01 %, 0.025 %</i>	1	PA for age 29 and older
<i>tretinoi topical gel 0.05 %</i>	2	PA for Age greater than or equal to 29 year(s);
TWYNEO	CED	PA
VELTIN	CED	PA
WINLEVI	4	ST; QL (20 per 30 days)
<i>zenatane</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
ZIANA	CED	PA
ZILXI	4	PA; QL (10 per 30 days)
<b>TOPICAL ANESTHETICS</b>		
ANODYNE LPT	CED	PA
DOLOTRANZ	CED	PA
<i>emreal</i>	CED	PA
<i>lidocaine hcl laryngotracheal</i>	CED	PA
<i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i>	2	
<i>lidocaine hcl topical cream 3 %</i>	1	
<i>lidocaine hcl-hydrocortison ac topical</i>	1	
<i>lidocaine topical adhesive patch,medicated 5 %</i>	2	QL (3 per 1 day)
<i>lidocaine topical ointment</i>	1	
<i>lidocaine viscous</i>	1	
<i>lidocaine-prilocaine topical cream</i>	1	
<i>lidocaine-prilocaine topical kit</i>	CED	PA
LIDOCAINE-TETRACAIN	4	PA
<i>lidocan iii</i>	CED	PA; QL (3 per 1 day)
<i>lidocort</i>	1	
LIDODERM	4	QL (3 per 1 day)
LIDOLITE	CED	PA
<i>lidopin topical cream 3 %</i>	1	
LIDO-PRILO CAINE PACK	CED	PA
LIDOSOL	CED	PA
PLIAGLIS	CED	PA
ZTLIDO	CED	PA
<b>TOPICAL ANTIBACTERIALS</b>		
ALTABAX	4	PA; 30 grams per fill
CENTANY	4	
CENTANY AT	CED	PA
<i>gentamicin topical</i>	1	
KLARON	4	
<i>mafenide acetate</i>	CED	PA
<i>mupirocin</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>mupirocin calcium</i>	CED	PA
NEO-SYNALAR	CED	PA
NEO-SYNALAR KIT	CED	PA
<i>sulfacetamide sodium (acne)</i>	1	
SULFAMYLYON TOPICAL CREAM	CED	PA
XEPI	4	PA; 30 grams per fill
<b>TOPICAL ANTIFUNGALS</b>		
<i>ciclodan</i>	1	
CICLODAN KIT TOPICAL COMBO PACK	4	
CICLODAN KIT TOPICAL SOLUTION	CED	PA
<i>ciclopirox</i>	1	
<i>ciclopirox-ure-camph-menth-euc</i>	CED	PA
<i>clotrimazole-betamethasone topical cream</i>	1	
<i>clotrimazole-betamethasone topical lotion</i>	2	
<i>econazole</i>	1	
ECOZA	CED	PA
ERTACZO	CED	PA
EXELDERM	CED	PA
EXODERM	4	
EXTINA	CED	PA
JUBLIA	CED	PA
<i>ketoconazole topical cream</i>	1	
<i>ketoconazole topical foam</i>	CED	PA
<i>ketoconazole topical shampoo</i>	1	
<i>ketodan</i>	CED	PA
<i>ketodan kit</i>	CED	PA
<i>klayesta</i>	1	
LOPROX (AS OLAMINE)	4	
LOPROX KIT	CED	PA
LULICONAZOLE	CED	PA
LUZU	CED	PA
MICONAZOLE NITRATE-ZINC OX-PET	CED	PA
<i>naftifine topical cream</i>	2	PA
<i>naftifine topical gel 2 %</i>	CED	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
NAFTIN TOPICAL GEL	CED	PA
<i>nyamyc</i>	1	
<i>nystatin topical</i>	1	
<i>nystatin-triamcinolone</i>	1	
<i>nystop</i>	1	
<i>oxiconazole</i>	CED	PA
OXISTAT TOPICAL LOTION	CED	PA
SULCONAZOLE	CED	PA
<i>tavaborole</i>	CED	PA
VUSION	4	PA
XOLEGEL	CED	PA
<b>TOPICAL ANTIVIRALS</b>		
<i>acyclovir topical cream</i>	CED	PA
<i>acyclovir topical ointment</i>	1	
DENAVIR	4	PA; 5 grams per fill
<i>penciclovir</i>	2	PA; 5 grams per fill
XERESE	CED	PA
ZOVIRAX TOPICAL CREAM	4	PA
ZOVIRAX TOPICAL OINTMENT	4	
<b>TOPICAL CORTICOSTEROIDS</b>		
ALA-SCALP	CED	PA
<i>alclometasone</i>	1	
<i>amcinonide topical ointment</i>	2	ST
<i>apexicon e</i>	CED	PA
<i>beser</i>	2	ST
BESER KIT	CED	PA
<i>betamethasone dipropionate topical cream</i>	1	
<i>betamethasone dipropionate topical lotion</i>	1	
<i>betamethasone dipropionate topical ointment</i>	2	
<i>betamethasone valerate topical cream</i>	1	
<i>betamethasone valerate topical foam</i>	2	ST
<i>betamethasone valerate topical lotion</i>	1	
<i>betamethasone valerate topical ointment</i>	1	
<i>betamethasone, augmented topical cream</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>betamethasone, augmented topical gel</i>	1	
<i>betamethasone, augmented topical lotion</i>	1	
<i>betamethasone, augmented topical ointment</i>	2	
BRYHALI	CED	PA
CAPEX	4	ST
<i>clobetasol scalp</i>	1	
<i>clobetasol topical cream</i>	1	
<i>clobetasol topical foam</i>	2	
<i>clobetasol topical gel</i>	1	
<i>clobetasol topical lotion</i>	2	
<i>clobetasol topical ointment</i>	1	
<i>clobetasol topical shampoo</i>	2	
<i>clobetasol topical spray,non-aerosol</i>	2	ST
<i>clobetasol-emollient</i>	2	ST
CLOBEX TOPICAL SHAMPOO	4	
CLOBEX TOPICAL SPRAY,NON-AEROSOL	4	ST
<i>clocortolone pivalate</i>	CED	PA
<i>clodan</i>	2	
CLODAN KIT	CED	PA
CORDRAN TAPE LARGE ROLL	4	ST
CORDRAN TOPICAL CREAM 0.025 %	CED	PA
CORDRAN TOPICAL CREAM 0.05 %	4	ST
CORDRAN TOPICAL LOTION	4	ST
CORDRAN TOPICAL OINTMENT	4	ST
DERMA-SMOOTH/FS BODY OIL	4	
DERMA-SMOOTH/FS SCALP OIL	4	
DERMAWERX SDS	CED	PA
<i>desonide topical cream</i>	1	
<i>desonide topical gel</i>	CED	PA
<i>desonide topical lotion</i>	1	
<i>desonide topical ointment</i>	1	
<i>desoximetasone topical cream 0.05 %</i>	2	ST
<i>desoximetasone topical cream 0.25 %</i>	1	
<i>desoximetasone topical gel</i>	2	ST

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>desoximetasone topical ointment 0.05 %</i>	2	ST
<i>desoximetasone topical ointment 0.25 %</i>	1	
<i>desoximetasone topical spray,non-aerosol</i>	2	
<i>diflorasone</i>	2	ST
DIPROLENE (AUGMENTED) TOPICAL OINTMENT	4	
DUOBRII	CED	PA
<i>fluocinolone and shower cap</i>	2	
<i>fluocinolone topical cream</i>	1	
<i>fluocinolone topical oil</i>	2	
<i>fluocinolone topical ointment</i>	1	
<i>fluocinolone topical solution</i>	2	
<i>fluocinonide topical cream 0.05 %</i>	1	
<i>fluocinonide topical cream 0.1 %</i>	2	ST
<i>fluocinonide topical gel</i>	1	
<i>fluocinonide topical ointment</i>	1	
<i>fluocinonide topical solution</i>	1	
<i>fluocinonide-e</i>	1	
FLUOVIX	CED	PA
FLUOVIX PLUS	CED	PA
<i>flurandrenolide</i>	2	ST
<i>fluticasone propionate topical cream</i>	1	
<i>fluticasone propionate topical lotion</i>	2	ST
<i>fluticasone propionate topical ointment</i>	1	
<i>halcinonide</i>	CED	PA
<i>halobetasol propionate topical cream</i>	1	
<i>halobetasol propionate topical foam</i>	CED	PA
<i>halobetasol propionate topical ointment</i>	1	
HALOG	CED	PA
<i>hydrocortisone butyrate topical cream</i>	2	
<i>hydrocortisone butyrate topical lotion</i>	CED	PA
<i>hydrocortisone butyrate topical ointment</i>	2	
<i>hydrocortisone butyrate topical solution</i>	2	
<i>hydrocortisone topical cream 2.5 %</i>	1	

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
hydrocortisone topical lotion 2.5 %	1	
hydrocortisone topical ointment 2.5 %	1	
hydrocortisone valerate topical cream	1	
hydrocortisone valerate topical ointment	2	
IMPOYZ	4	ST
KENALOG TOPICAL	4	ST
LOCOID LIPOCREAM	4	
LOCOID TOPICAL LOTION	CED	PA
mometasone topical	1	
NOXIPAK	CED	PA
NUCORT	CED	PA
OLUX	4	
OLUX-E	4	ST
PANDEL	CED	PA
prednicarbate topical cream	1	
prednicarbate topical ointment	2	
QUINIXIL	CED	PA
scalacort	2	PA
SCALACORT DK	CED	PA
SERNIVO	CED	PA
SURE RESULT TAC PAK	CED	PA
SYNALAR	4	
SYNALAR CREAM KIT	CED	PA
SYNALAR OINTMENT KIT	CED	PA
SYNALAR TS	CED	PA
TEMOVATE TOPICAL OINTMENT	4	
TEXACORT	4	ST
TOPICORT TOPICAL CREAM	4	
TOPICORT TOPICAL GEL	4	ST
TOPICORT TOPICAL OINTMENT 0.05 %	4	ST
TOPICORT TOPICAL OINTMENT 0.25 %	4	
TOPICORT TOPICAL SPRAY, NON-AEROSOL	4	
tovet emollient	2	
TOVET KIT	CED	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>triamcinolone acetonide topical aerosol</i>	2	ST
<i>triamcinolone acetonide topical cream</i>	1	
<i>triamcinolone acetonide topical lotion</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	CED	PA
<i>triderm topical cream</i>	1	
ULTRAVATE TOPICAL LOTION	CED	PA
VANOS	4	ST
VERDESO	CED	PA
WHYTEDERM TDPAK	CED	PA
WHYTEDERM TRILASIL PAK	CED	PA
XILAPAK	CED	PA
<b>TOPICAL ENZYMES</b>		
SANTYL	4	QL (20 per 720 days)
<b>TOPICAL SCABICIDES / PEDICULICIDES</b>		
<i>crotan</i>	2	QL (1 per 30 days)
ELIMITE	4	QL (20 per 30 days)
EURAX TOPICAL CREAM	4	
EURAX TOPICAL LOTION	4	QL (20 per 30 days)
<i>malathion</i>	1	QL (20 per 30 days)
NATROBA	4	QL (20 per 30 days)
OVIDE	4	QL (20 per 30 days)
<i>permethrin</i>	1	QL (120 per 30 days)
<i>spinosad</i>	2	QL (20 per 30 days)
ULESFIA	4	
<b>DIAGNOSTICS &amp; MISCELLANEOUS AGENTS</b>		
<b>ANOREXIANTS</b>		
IMCIVREE	5	PA; QL (10 per 30 days)
<b>MISCELLANEOUS AGENTS</b>		
<i>acamprosate</i>	2	
AGRYLIN	4	
<i>anagrelide</i>	1	
BUPHENYL ORAL POWDER	5	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
BUPHENYL ORAL TABLET	5	PA; SP
<i>caffeine citrate oral</i>	1	
CARBAGLU	5	PA; SP; LA
<i>carglumic acid</i>	5	PA; SP
CARNITOR (SUGAR-FREE)	4	
CARNITOR ORAL	4	
<i>cevimeline</i>	2	
CHEMET	4	PA for age 18 and older
CUVRIOR	5	PA; QL (10 per 1 day)
<i>deferasirox oral granules in packet</i>	5	PA
<i>deferasirox oral tablet</i>	5	PA; SP
<i>deferasirox oral tablet, dispersible</i>	5	PA; SP
<i>deferiprone</i>	5	PA; SP
<i>disulfiram</i>	2	
<i>droxidopa</i>	5	PA
ENDARI	5	PA; QL (20 per 1 day)
EVOXAC	4	
EXJADE	5	PA; SP; LA
EXSERVAN	CED	PA; QL (20 per 1 day)
FERRIPROX	5	PA; SP
FERRIPROX (2 TIMES A DAY)	CED	PA
INCRELEX	5	PA; SP; LA
JADENU	5	PA; SP
JADENU SPRINKLE	5	PA
JOENJA	5	PA; QL (2 per 1 day)
<i>levocarnitine (with sugar)</i>	2	
<i>levocarnitine oral solution 100 mg/ml</i>	2	
<i>levocarnitine oral tablet</i>	2	
LITFULO	5	PA; QL (1 per 1 day)
LITHOSTAT	4	
<i>midodrine</i>	1	
<i>nitisinone oral capsule 10 mg, 2 mg, 5 mg</i>	5	PA; SP; LA
<i>nitisinone oral capsule 20 mg</i>	5	PA; LA
NITYR	5	PA; SP; LA

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
NORTHERA	5	PA
OLPRUVA	5	PA
ORFADIN	5	PA; SP; LA
OXBRYTA	5	PA; LA; QL (3 per 1 day)
PHEBURANE	5	PA
<i>pilocarpine hcl oral tablet 5 mg</i>	1	
PYRUKYND ORAL TABLET 20 MG, 50 MG	5	PA; LA; QL (2 per 1 day)
PYRUKYND ORAL TABLET 5 MG	5	PA; 2 tablets per day; 7 tablets in 365 days; LA
PYRUKYND ORAL TABLETS,DOSE PACK	5	PA; LA; QL (10 per 365 days)
RAVICTI	5	PA; SP; QL (17.5 per 1 day)
REVCOWI	5	PA; LA
RILUTEK	4	
<i>riluzole</i>	2	
<i>risedronate oral tablet 30 mg</i>	2	
SALAGEN (PILOCARPINE) ORAL TABLET 5 MG	4	
<i>sodium chloride irrigation</i>	1	
<i>sodium phenylbutyrate oral powder</i>	5	PA
<i>sodium phenylbutyrate oral tablet</i>	5	PA; SP
SOHONOS	5	PA; SP; QL (20 per 1 day)
SYPRINE	5	PA; QL (8 per 1 day)
TAVNEOS	5	PA; QL (6 per 1 day)
THIOLA	5	PA; SP
THIOLA EC	5	PA; SP
TIGLUTIK	CED	PA; QL (20 per 1 day)
<i>tiopronin oral tablet</i>	5	PA; SP
<i>trientine oral capsule 250 mg</i>	5	PA; SP; QL (8 per 1 day)
TRIENTINE ORAL CAPSULE 500 MG	5	PA; QL (4 per 1 day)
XURIDEN	5	
ZOKINVY	5	PA
<b>SMOKING DETERRENTS</b>		
<i>bupropion hcl (smoking deter)</i>	1	ACA; QL (2 per 1 day)
CHANTIX CONTINUING MONTH BOX	4	183 DAY SUPPLY IN A ROLLING 365 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
CHANTIX ORAL TABLET 1 MG	4	183 DAY SUPPLY IN A ROLLING 365 DAYS
CHANTIX STARTING MONTH BOX	4	183 DAY SUPPLY IN A ROLLING 365 DAYS
NICODERM CQ	CED	PA; 183 DAY SUPPLY IN A ROLLING 365 DAYS; OTC
NICORETTE Buccal GUM 2 MG	CED	PA; 183 DAY SUPPLY IN A ROLLING 365 DAYS; OTC
<i>nicorette buccal gum 4 mg</i>	9	183 DAY SUPPLY IN A ROLLING 365 DAYS; ACA; OTC
NICORETTE Buccal LOZENGE	CED	PA; 183 DAY SUPPLY IN A ROLLING 365 DAYS; OTC
NICORETTE Buccal MINI LOZENGE	CED	PA; 183 DAY SUPPLY IN A ROLLING 365 DAYS; OTC
<i>nicotine</i>	9	183 DAY SUPPLY IN A ROLLING 365 DAYS; ACA; OTC
<i>nicotine (polacrilex)</i>	9	183 DAY SUPPLY IN A ROLLING 365 DAYS; ACA; OTC
NICOTROL	4	183 DAY SUPPLY IN A ROLLING 365 DAYS; ACA
NICOTROL NS	4	183 DAY SUPPLY IN A ROLLING 365 DAYS; ACA
<i>quit 2</i>	9	183 DAY SUPPLY IN A ROLLING 365 DAYS; ACA; OTC
<i>quit 4</i>	9	183 DAY SUPPLY IN A ROLLING 365 DAYS; ACA; OTC
<i>stop smoking aid</i>	9	183 DAY SUPPLY IN A ROLLING 365 DAYS; ACA; OTC
<i>varenicline</i>	2	183 DAY SUPPLY IN A ROLLING 365 DAYS; ACA

## EAR, NOSE & THROAT MEDICATIONS

### MISCELLANEOUS AGENTS

<i>azelastine nasal</i>	1	
<i>chlorhexidine gluconate mucous membrane</i>	1	
<i>denta 5000 plus</i>	1	
<i>dentagel</i>	1	
<i>fluoride (sodium) dental cream</i>	1	
<i>fluoride (sodium) dental gel</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>fluoride (sodium) dental paste</i>	1	
GELCLAIR	4	15 units per fill
<i>ipratropium bromide nasal</i>	1	
<i>olopatadine nasal</i>	2	
<i>oralone</i>	1	
<i>paroex oral rinse</i>	1	
PATANASE	4	
PERIDEX	4	
<i>periogard</i>	1	
<i>pilocarpine hcl oral tablet 7.5 mg</i>	1	
PREVIDENT 5000 ENAMEL PROTECT	4	
PREVIDENT 5000 ORTHO DEFENSE	4	
PREVIDENT 5000 PLUS	4	
PREVIDENT 5000 SENSITIVE	4	
PREVIDENT DENTAL GEL	4	
SALAGEN (PILOCARPINE) ORAL TABLET 7.5 MG	4	
<i>sf</i>	1	
<i>sf 5000 plus</i>	1	
<i>sodium fluoride 5000 plus</i>	1	
<i>sodium fluoride-pot nitrate</i>	1	
<i>triamcinolone acetonide dental</i>	1	
<b>MISCELLANEOUS OTIC PREPARATIONS</b>		
<i>acetic acid otic (ear)</i>	1	
CETRAXAL	CED	PA
<i>ciprofloxacin hcl otic (ear)</i>	2	
DERMOTIC OIL	4	
<i>flac otic oil</i>	1	
<i>fluocinolone acetonide oil</i>	1	
<i>hydrocortisone-acetic acid</i>	1	
<i>ofloxacin otic (ear)</i>	1	
<b>OTIC STEROID / ANTIBIOTIC</b>		
CIPRO HC	4	
<i>ciprofloxacin-dexamethasone</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
CIPROFLOXACIN-FLUOCINOLONE	4	PA
CORTISPORIN-TC	4	
<i>neomycin-polymyxin-hc otic (ear)</i>	1	
OTOVEL	CED	PA

## ENDOCRINE/DIABETES

### ADRENAL HORMONES

ACTHAR	5	PA
ALKINDI SPRINKLE	CED	PA
CORTEF	4	
<i>cortisone</i>	1	
CORTROPHIN GEL	5	PA
<i>deflazacort</i>	5	PA
<i>dexabliss</i>	CED	PA
<i>dexamethasone intensol</i>	2	
<i>dexamethasone oral elixir</i>	1	
<i>dexamethasone oral solution</i>	1	
<i>dexamethasone oral tablet</i>	1	
<i>dexamethasone oral tablets,dose pack</i>	CED	PA
EMFLAZA	5	PA; LA
<i>fludrocortisone</i>	1	
HEMADY	CED	PA
<i>hydrocortisone oral</i>	1	
MEDROL (PAK)	4	
MEDROL ORAL TABLET 16 MG, 2 MG, 4 MG, 8 MG	4	
<i>methylprednisolone oral tablet 16 mg, 32 mg, 8 mg</i>	2	
<i>methylprednisolone oral tablet 4 mg</i>	1	
<i>methylprednisolone oral tablets,dose pack</i>	1	
<i>millipred dp</i>	CED	PA
<i>millipred oral tablet</i>	CED	PA
ORAPRED ODT	CED	PA
<i>prednisolone oral solution</i>	1	
<i>prednisolone oral tablet</i>	2	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>prednisolone sodium phosphate oral solution 10 mg/5 ml, 20 mg/5 ml (4 mg/ml)</i>	CED	PA
<i>prednisolone sodium phosphate oral solution 15 mg/5 ml (3 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	1	
<i>prednisolone sodium phosphate oral solution 25 mg/5 ml (5 mg/ml)</i>	2	
<i>prednisolone sodium phosphate oral tablet,disintegrating</i>	CED	PA
<i>prednisone</i>	1	
<i>prednisone intensol</i>	2	
<b>RAYOS</b>	CED	PA
<b>TAPERDEX</b>	CED	PA
<b>TARPEYO</b>	5	PA; QL (4 per 1 day)
<b>ZCORT</b>	CED	PA
<b>ANTITHYROID AGENTS</b>		
<i>methimazole oral tablet 10 mg, 5 mg</i>	1	
<i>propylthiouracil</i>	1	
<b>BLOOD GLUCOSE MONITORING DEVICES &amp; SUPPLIES</b>		
<b>ACCU-CHEK AVIVA PLUS TEST STRP</b>	3	OTC; QL (100 per 30 days)
<b>ACCU-CHEK GUIDE TEST STRIPS</b>	3	OTC; QL (100 per 30 days)
<b>ACCU-CHEK SMARTVIEW TEST STRIP</b>	3	OTC; QL (100 per 30 days)
<b>ONETOUCH ULTRA TEST</b>	3	OTC; QL (100 per 30 days)
<b>ONETOUCH VERIO TEST STRIPS</b>	3	OTC; QL (100 per 30 days)
<b>DIABETES, SUPPLIES, &amp; DURABLE MEDICAL EQUIPMENT</b>		
<b>AEROCHAMBER MINI</b>	2	
<b>AEROCHAMBER PLUS FLOW-VU</b>	2	
<b>AEROCHAMBER PLUS Z STAT</b>	2	
<b>AEROVENT PLUS</b>	2	
<b>COMPACT SPACE CHAMBER</b>	2	
<b>EASIVENT HOLDING CHAMBER</b>	2	
<b>FLEXICHAMBER</b>	2	
<b>INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.5 ML 29 GAUGE X 1/2"</b>	1	
<b>MICROCHAMBER</b>	2	
<b>OPTICHAMBER DIAMOND VHC</b>	2	

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

Drug Name	Drug Tier	Requirements / Limits
POCKET CHAMBER	2	
RITEFLO AEROCHAMBER	2	
SPACE CHAMBER	2	
VORTEX HOLDING CHAMBER	2	
<b>GLUCOSE ELEVATING AGENTS</b>		
BAQSIMI	3	
diazoxide	2	
GLUCAGEN HYPOKIT	4	ST
GLUCAGON (HCL) EMERGENCY KIT	3	
glucagon emergency kit (human)	2	
GVOKE	3	
GVOKE HYPOPEN 2-PACK	3	
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	3	
PROGLYCEM	4	
ZEGALOGUE AUTOINJECTOR	4	ST
ZEGALOGUE SYRINGE	4	ST
<b>INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQUIPMENT</b>		
ACCU-CHEK GUIDE GLUCOSE METER	9	OTC; QL (1 per 273 days)
ACCU-CHEK GUIDE L1-L2 CTRL SOL	1	OTC
ACCU-CHEK GUIDE ME GLUCOSE MTR	9	OTC; QL (1 per 273 days)
ACCU-CHEK SMARTVIEW CONTRL SOL	1	OTC
BD INTEGRA NEEDLE	1	
BD MICROTAINER LANCET 30 GAUGE	1	OTC; QL (1 per 30 days)
BD SPECIALTY USE NEEDLES NEEDLE 30 GAUGE X 1/2"	1	
BD ULTRA-FINE NANO PEN NEEDLE	1	OTC
DEXCOM G6 RECEIVER	4	PA; CGM; QL (1 per 720 days)
DEXCOM G6 SENSOR	4	PA; CGM; QL (1 per 30 days)
DEXCOM G6 TRANSMITTER	4	PA; CGM; QL (1 per 68 days)
DEXCOM G7 RECEIVER	4	PA; CGM; QL (1 per 720 days)
DEXCOM G7 SENSOR	4	PA; CGM; QL (1 per 30 days)
FREESTYLE LIBRE 14 DAY READER	3	PA; CGM; QL (1 per 720 days)
FREESTYLE LIBRE 14 DAY SENSOR	3	PA; CGM; QL (2 per 28 days)
FREESTYLE LIBRE 2 READER	4	PA; CGM; QL (1 per 720 days)

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FREESTYLE LIBRE 2 SENSOR	4	PA; CGM; QL (2 per 28 days)
FREESTYLE LIBRE 3 READER	CED	PA; CGM; QL (1 per 720 days)
FREESTYLE LIBRE 3 SENSOR	4	PA; CGM; QL (2 per 28 days)
GENTEEL VACUUM LANCING DEVICE	1	OTC
LANCETS 33 GAUGE	1	OTC; QL (210 per 30 days)
LANCING DEVICE	1	OTC
OMNIPOD 5 G6 INTRO KIT (GEN 5)	3	QL (1 per 720 days)
OMNIPOD 5 G6 PODS (GEN 5)	3	QL (1 per 30 days)
OMNIPOD 5 G6-G7 INTRO KT(GEN5)	3	QL (1 per 720 days)
OMNIPOD 5 G6-G7 PODS (GEN 5)	3	QL (1 per 30 days)
OMNIPOD CLASSIC PODS (GEN 3)	3	QL (1 per 30 days)
OMNIPOD DASH INTRO KIT (GEN 4)	3	QL (1 per 720 days)
OMNIPOD DASH PODS (GEN 4)	3	QL (1 per 30 days)
OMNIPOD GO PODS 10 UNITS/DAY	3	QL (1 per 30 days)
ONETOUCH ULTRA CONTROL	1	OTC
ONETOUCH ULTRA2 METER	9	OTC; QL (1 per 273 days)
ONETOUCH VERIO FLEX METER	9	OTC; QL (1 per 273 days)
ONETOUCH VERIO MID CONTROL	1	OTC
ONETOUCH VERIO REFLECT METER	9	OTC; QL (1 per 273 days)
PEN NEEDLE, DIABETIC NEEDLE 29 GAUGE X 1/2"	1	OTC
V-GO 20	3	QL (1 per 30 days)
V-GO 30	3	QL (1 per 30 days)
V-GO 40	3	QL (1 per 30 days)
<b>INSULIN THERAPY</b>		
ADMELOG SOLOSTAR U-100 INSULIN	4	PA; QL (100 per 30 days)
ADMELOG U-100 INSULIN LISPRO	4	PA; QL (100 per 30 days)
AFREZZA	4	PA; QL (20 per 30 days)
APIDRA SOLOSTAR U-100 INSULIN	4	PA; QL (100 per 30 days)
APIDRA U-100 INSULIN	4	PA; QL (100 per 30 days)
BASAGLAR KWIKPEN U-100 INSULIN	4	PA; QL (100 per 30 days)
BASAGLAR TEMPO PEN(U-100)INSLN	CED	PA; QL (100 per 30 days)
FIASP FLEXTOUCH U-100 INSULIN	4	PA; QL (100 per 30 days)
FIASP PENFILL U-100 INSULIN	4	PA; QL (100 per 30 days)

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FIASP PUMPCART	4	PA; QL (100 per 30 days)
FIASP U-100 INSULIN	4	PA; QL (100 per 30 days)
HUMALOG JUNIOR KWIKPEN U-100	1	QL (100 per 30 days)
HUMALOG KWIKPEN INSULIN	1	QL (100 per 30 days)
HUMALOG MIX 50-50 INSULN U-100	1	QL (100 per 30 days)
HUMALOG MIX 50-50 KWIKPEN	1	QL (100 per 30 days)
HUMALOG MIX 75-25 KWIKPEN	1	QL (100 per 30 days)
HUMALOG MIX 75-25(U-100)INSULN	1	QL (100 per 30 days)
HUMALOG TEMPO PEN(U-100)INSULN	CED	PA; QL (100 per 30 days)
HUMALOG U-100 INSULIN	1	QL (100 per 30 days)
HUMULIN 70/30 U-100 INSULIN	3	QL (100 per 30 days)
HUMULIN 70/30 U-100 KWIKPEN	3	QL (100 per 30 days)
HUMULIN N NPH INSULIN KWIKPEN	3	QL (100 per 30 days)
HUMULIN N NPH U-100 INSULIN	3	QL (100 per 30 days)
HUMULIN R REGULAR U-100 INSULN	3	QL (100 per 30 days)
HUMULIN R U-500 (CONC) INSULIN	3	QL (100 per 30 days)
HUMULIN R U-500 (CONC) KWIKPEN	3	QL (100 per 30 days)
INSULIN ASP PRT-INSULIN ASPART	3	PA; QL (10 per 30 days)
INSULIN ASPART U-100	3	PA; QL (10 per 30 days)
INSULIN DEGLUDEC	4	PA; QL (10 per 30 days)
INSULIN GLARGINE U-300 CONC	4	PA; QL (100 per 30 days)
INSULIN GLARGINE-YFGN	4	PA; QL (100 per 30 days)
INSULIN LISPRO	3	PA; QL (100 per 30 days)
INSULIN LISPRO PROTAMIN-LISPRO	3	PA; QL (100 per 30 days)
LANTUS SOLOSTAR U-100 INSULIN	3	QL (100 per 30 days)
LANTUS U-100 INSULIN	3	QL (100 per 30 days)
LEVEMIR FLEXPEN	CED	PA; QL (100 per 30 days)
LEVEMIR U-100 INSULIN	4	PA; QL (100 per 30 days)
LYUMJEV KWIKPEN U-100 INSULIN	4	PA; QL (100 per 30 days)
LYUMJEV KWIKPEN U-200 INSULIN	4	PA; QL (100 per 30 days)
LYUMJEV TEMPO PEN(U-100)INSULN	CED	PA; QL (100 per 30 days)
LYUMJEV U-100 INSULIN	4	PA; QL (100 per 30 days)
NOVOLIN 70-30 FLEXPEN U-100	4	ST; QL (100 per 30 days)
NOVOLIN N FLEXPEN	4	ST; QL (100 per 30 days)

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
NOVOLIN R FLEXPEN	4	ST; QL (100 per 30 days)
NOVOLOG FLEXPEN U-100 INSULIN	4	PA; QL (100 per 30 days)
NOVOLOG MIX 70-30 U-100 INSULIN	4	PA; QL (100 per 30 days)
NOVOLOG MIX 70-30FLEXPEN U-100	4	PA; QL (100 per 30 days)
NOVOLOG PENFILL U-100 INSULIN	4	PA; QL (100 per 30 days)
NOVOLOG U-100 INSULIN ASPART	4	PA; QL (100 per 30 days)
RELION NOVOLIN 70/30	4	ST; QL (100 per 30 days)
RELION NOVOLIN N	4	ST; QL (100 per 30 days)
RELION NOVOLIN R	4	ST; QL (100 per 30 days)
REZVOGLAR KWIKPEN	CED	PA; QL (100 per 30 days)
SEMGLEE(INSULIN GLARGINE-YFGN)	4	PA; QL (20 per 30 days)
SEMGLEE(INSULIN GLARG-YFGN)PEN	4	PA; QL (100 per 30 days)
SOLIQUA 100/33	4	ST; QL (18 per 28 days)
TOUJEO MAX U-300 SOLOSTAR	3	QL (100 per 30 days)
TOUJEO SOLOSTAR U-300 INSULIN	3	QL (100 per 30 days)
TRESIBA FLEXTOUCH U-100	3	QL (100 per 30 days)
TRESIBA FLEXTOUCH U-200	3	QL (100 per 30 days)
TRESIBA U-100 INSULIN	3	QL (100 per 30 days)
XULTOPHY 100/3.6	4	ST; QL (15 per 28 days)
<b>MISCELLANEOUS HORMONES</b>		
ANDRODERM	4	PA
ANDROGEL	4	PA
<i>cabergoline</i>	1	
<i>calcitonin (salmon) nasal</i>	1	
<i>calcitriol oral</i>	1	
CERDELGA	5	PA; QL (20 per 1 day)
CHORIONIC GONADOTROPIN, HUMAN INJECTION RECON SOLN 6,000 UNIT	5	PA
CHORIONIC GONADOTROPIN, HUMAN INTRAMUSCULAR	5	PA
<i>cinacalcet oral tablet 30 mg, 60 mg</i>	2	PA; QL (20 per 1 day)
<i>cinacalcet oral tablet 90 mg</i>	2	PA; QL (4 per 1 day)
<i>danazol</i>	2	
DDAVP ORAL	4	
DEPO-TESTOSTERONE	4	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>desmopressin injection</i>	1	
<i>desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)</i>	1	
DESMOPRESSIN NASAL SPRAY,NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	5	SP
<i>desmopressin oral</i>	1	
<i>doxercalciferol oral</i>	2	
FORTESTA	4	PA
GALAFOLD	5	PA; LA; QL (14 per 28 days)
ISTURISA ORAL TABLET 1 MG, 5 MG	5	PA; LA; QL (4 per 1 day)
JATENZO	CED	PA
<i>javygtor</i>	5	PA
JYNARQUE ORAL TABLET	5	PA; SP; LA; QL (4 per 1 day)
JYNARQUE ORAL TABLETS, SEQUENTIAL	5	PA; SP; LA; QL (20 per 28 days)
KORLYM	5	PA; QL (4 per 1 day)
KUVAN	5	PA
KYZATREX	4	PA; QL (2 per 1 day)
METHITEST	CED	PA
<i>methyltestosterone oral capsule</i>	2	QL (5 per 1 day)
<i>mifepristone oral tablet 300 mg</i>	5	PA; SP; QL (4 per 1 day)
<i> miglustat</i>	5	PA; SP; LA; QL (3 per 1 day)
MYALEPT	5	PA; LA
NATESTO	4	PA
NOCDURNA (MEN)	4	PA; QL (20 per 1 day)
NOCDURNA (WOMEN)	4	PA; QL (20 per 1 day)
NOCTIVA	4	
NOVAREL INTRAMUSCULAR RECON SOLN 5,000 UNIT	5	PA
OPFOLDA	5	PA; SP; QL (8 per 28 days)
ORILISSA	4	PA
OVIDREL	5	PA; SP
PALYNZIQ SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 2.5 MG/0.5 ML	5	PA; LA; QL (20 per 1 day)
PALYNZIQ SUBCUTANEOUS SYRINGE 20 MG/ML	5	PA; LA; QL (3 per 1 day)
<i>paricalcitol oral</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
PREGNYL	5	PA
RAYALDEE	4	PA; QL (20 per 1 day)
RECORLEV	5	PA; QL (8 per 1 day)
ROCALTROL	4	
SAMSCA	5	PA; SP; QL (20 per 365 days)
sapropterin	5	PA
SENSIPAR ORAL TABLET 30 MG, 60 MG	4	PA; QL (20 per 1 day)
SENSIPAR ORAL TABLET 90 MG	4	PA; QL (4 per 1 day)
SOMAVERT	5	PA
STRENSIQ	5	PA; SP; LA
SYNAREL	5	PA; QL (8 per 28 days)
TESTIM	4	PA
<i>testosterone cypionate intramuscular oil 100 mg/ml</i>	1	PA
<i>testosterone cypionate intramuscular oil 200 mg/ml</i>	2	PA
<i>testosterone enanthate</i>	1	PA
<i>testosterone transdermal</i>	2	PA
TLANDO	CED	PA
<i>tolvaptan</i>	5	PA; SP; LA; QL (20 per 365 days)
VOGELXO	4	PA
VOXZOGO	5	PA; QL (20 per 1 day)
XYOSTED	CED	PA
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	4	
<b>NON-INSULIN HYPOGLYCEMIC AGENTS</b>		
<i>acarbose</i>	1	
ACTOPLUS MET ORAL TABLET 15-850 MG	4	
ACTOS	4	
ALOGLIPTIN	4	ST
ALOGLIPTIN-METFORMIN	4	ST
ALOGLIPTIN-PIOGLITAZONE ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG	4	ST
BRENZAVVY	4	ST; QL (1 per 1 day)
BYDUREON BCISE	4	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
BYETTA	4	PA
CYCLOSET	4	
DAPAGLIFLOZ PROPANED-METFORMIN	4	ST; QL (20 per 1 day)
DAPAGLIFLOZIN PROPANEDIOL	4	ST; QL (20 per 1 day)
DUETACT	CED	PA
FARXIGA	3	QL (1 per 1 day)
<i>glimepiride</i>	1	
<i>glipizide oral tablet 10 mg, 5 mg</i>	1	
GLIPIZIDE ORAL TABLET 2.5 MG	CED	PA
<i>glipizide oral tablet extended release 24hr</i>	1	
<i>glipizide-metformin</i>	1	
GLUCOTROL XL	4	
GLUMETZA ORAL TABLET,ER GAST.RETENTION 24 HR 1,000 MG	CED	PA; QL (20 per 1 day)
GLUMETZA ORAL TABLET,ER GAST.RETENTION 24 HR 500 MG	CED	PA
<i>glyburide</i>	1	
<i>glyburide micronized</i>	1	
<i>glyburide-metformin</i>	1	
GLYNASE	4	
GLYXAMBI	3	
INPEFA	4	PA; QL (20 per 1 day)
INVOKAMET	4	ST; QL (20 per 1 day)
INVOKAMET XR	4	ST; QL (20 per 1 day)
INVOKANA	4	ST; QL (20 per 1 day)
JANUMET	3	
JANUMET XR	3	
JANUVIA	3	
JARDIANCE	3	
JENTADUETO	3	
JENTADUETO XR	3	
KAZANO	4	ST
<i>metformin oral solution</i>	CED	PA
<i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i>	1	
METFORMIN ORAL TABLET 625 MG	CED	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>metformin oral tablet extended release 24 hr</i>	1	
<i>metformin oral tablet extended release 24hr</i>	CED	PA
<i>metformin oral tablet,er gast.retention 24 hr 1,000 mg</i>	CED	PA; QL (2 per 1 day)
<i>metformin oral tablet,er gast.retention 24 hr 500 mg</i>	CED	PA
<i>miglitol</i>	2	
MOUNJARO	3	PA; QL (2 per 28 days)
<i>nateglinide</i>	2	
NESINA	4	ST
ONGLYZA ORAL TABLET 5 MG	4	ST
OSENI ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG	4	ST
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML)	3	PA; QL (9 per 63 days)
OZEMPIC SUBCUTANEOUS PEN INJECTOR 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	3	PA; QL (3 per 28 days)
<i>pioglitazone</i>	1	
<i>pioglitazone-glimepiride</i>	CED	PA
<i>pioglitazone-metformin</i>	1	
PRECOSE	4	
QTERN	4	ST
<i>repaglinide</i>	2	
RIOMET	CED	PA
RIOMET ER	CED	PA
RYBELSUS ORAL TABLET 14 MG, 7 MG	3	PA; QL (1 per 1 day)
RYBELSUS ORAL TABLET 3 MG	3	PA; QL (30 per 365 days)
<i>saxagliptin</i>	2	ST
<i>saxagliptin-metformin</i>	2	ST
SEGLUROMET	4	ST
STEGLATRO	4	ST
STEGLUJAN	4	ST
SYMLINPEN 120	4	
SYMLINPEN 60	4	
SYNJARDY	3	

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

Drug Name	Drug Tier	Requirements / Limits
SYNJARDY XR	3	
TRADJENTA	3	
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-5-1,000 MG, 25-5-1,000 MG	3	QL (1 per 1 day)
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-2.5-1,000 MG, 5-2.5-1,000 MG	3	QL (2 per 1 day)
TRULICITY	3	PA; QL (2 per 28 days)
VICTOZA 2-PAK	4	PA; QL (9 per 28 days)
VICTOZA 3-PAK	4	PA; QL (9 per 28 days)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 10-500 MG, 5-500 MG	3	QL (1 per 1 day)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG, 5-1,000 MG	3	QL (2 per 1 day)
ZITUVIO	CED	ST
<b>THYROID HORMONES</b>		
ARMOUR THYROID	4	
CYTOMEL	4	
ERMEZA	CED	PA
<i>euthyrox</i>	1	
<i>levo-t</i>	1	
LEVOHYROXINE ORAL CAPSULE	4	
<i>levothyroxine oral tablet</i>	1	
<i>levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
<i>liothyronine oral</i>	1	
<i>np thyroid</i>	1	
SYNTHROID	4	
THYQUIDITY	CED	PA
<i>thyroid (pork)</i>	2	
TIROSINT	4	
TIROSINT-SOL	CED	PA
<i>unithroid</i>	1	
<b>GASTROENTEROLOGY</b>		

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
<b>ANTIDIARRHEALS &amp; ANTISPASMODICS</b>		
<i>anaspaz</i>	1	
<i>chlordiazepoxide-clidinium</i>	2	
CUVPOSA	4	PA
DARTISLA	CED	PA
<i>dicyclomine oral capsule</i>	1	
<i>dicyclomine oral solution</i>	2	QL (40 per 1 day)
<i>dicyclomine oral tablet</i>	1	
<i>diphenoxylate-atropine oral liquid</i>	CED	PA; QL (40 per 1 day)
<i>diphenoxylate-atropine oral tablet</i>	1	
<i>ed-spaz</i>	1	
GLYCATE	CED	PA
<i>glycopyrrolate oral solution</i>	2	PA
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	1	
<i>glycopyrrolate oral tablet 1.5 mg</i>	CED	PA
<i>hyoscyamine sulfate oral elixir</i>	1	
<i>hyoscyamine sulfate oral tablet</i>	1	
<i>hyoscyamine sulfate oral tablet extended release 12 hr</i>	1	
<i>hyoscyamine sulfate oral tablet,disintegrating</i>	1	
<i>hyoscyamine sulfate sublingual</i>	1	
<i>hyosyne oral drops</i>	CED	PA
<i>hyosyne oral elixir</i>	1	
LEVBID	4	
LEVSIN ORAL	4	
LEVSIN/SL	4	
LIBRAX (WITH CLIDINIUM)	4	
LOMOTIL	4	
<i>methscopolamine</i>	1	
MOTOFEN	CED	PA
MYTESI	4	PA
NULEV	4	
<i>oscimin</i>	1	
<i>oscimin sl</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
ROBINUL FORTE	4	
ROBINUL ORAL	4	
<i>symax fastabs</i>	1	
<i>symax-sl</i>	1	
<i>symax-sr</i>	1	
<b>MISCELLANEOUS AGENTS</b>		
AURYXIA	4	ST; QL (20 per 1 day)
FOSRENOL ORAL POWDER IN PACKET	CED	PA; QL (3 per 1 day)
FOSRENOL ORAL TABLET,CHEWABLE	4	ST; QL (3 per 1 day)
<i>lanthanum</i>	2	ST; QL (3 per 1 day)
LOKELMA	4	PA; QL (3 per 1 day)
RENELA ORAL POWDER IN PACKET 0.8 GRAM	CED	PA; QL (20 per 1 day)
RENELA ORAL POWDER IN PACKET 2.4 GRAM	CED	PA; QL (5 per 1 day)
RENELA ORAL TABLET	4	QL (20 per 1 day)
<i>sevelamer carbonate oral powder in packet 0.8 gram</i>	CED	PA; QL (20 per 1 day)
<i>sevelamer carbonate oral powder in packet 2.4 gram</i>	CED	PA; QL (5 per 1 day)
<i>sevelamer carbonate oral tablet</i>	1	QL (20 per 1 day)
<i>sevelamer hcl oral tablet 400 mg</i>	CED	PA; QL (32 per 1 day)
<i>sevelamer hcl oral tablet 800 mg</i>	CED	PA; QL (20 per 1 day)
<i>sodium polystyrene sulfonate oral powder</i>	1	
<i>sps (with sorbitol)</i>	2	
VELPHORO	4	ST; QL (6 per 1 day)
VELTASSA	4	PA; QL (20 per 1 day)
XPHOZAH	4	PA; QL (2 per 1 day)
<b>MISCELLANEOUS GASTROINTESTINAL AGENTS</b>		
AKYNZEO (NETUPITANT)	4	QL (20 per 28 days)
<i>alosetron oral tablet 0.5 mg</i>	2	PA; QL (2 per 1 day)
<i>alosetron oral tablet 1 mg</i>	2	PA; QL (20 per 1 day)
<i>alvimopan</i>	2	
AMITIZA	4	QL (20 per 1 day)
ANALPRAM-HC RECTAL	4	

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
ANALPRAM-HC SINGLES	4	
ANTIVERT ORAL TABLET 50 MG	4	
<i>anucort-hc</i>	1	
ANUSOL-HC RECTAL SUPPOSITORY	4	
ANUSOL-HC TOPICAL	4	
ANZEMET ORAL TABLET 50 MG	4	
<i>aprepitant oral capsule 125 mg, 80 mg</i>	2	QL (1 per 28 days)
<i>aprepitant oral capsule 40 mg</i>	2	1 capsule per fill
<i>aprepitant oral capsule,dose pack</i>	2	QL (1 per 28 days)
APRISO	4	
AZULFIDINE	4	
AZULFIDINE EN-TABS	4	
<i>balsalazide</i>	1	
<i>betaine</i>	5	SP
BONJESTA	CED	PA
<i>budesonide oral capsule,delayed,extend.release</i>	1	
<i>budesonide oral tablet,delayed and ext.release</i>	2	PA
<i>budesonide rectal</i>	2	
BYLVAY ORAL CAPSULE 1,200 MCG	5	PA; LA; QL (5 per 1 day)
BYLVAY ORAL CAPSULE 400 MCG	5	PA; LA; QL (10 per 1 day)
BYLVAY ORAL PELLET 200 MCG	5	PA; LA; QL (8 per 1 day)
BYLVAY ORAL PELLET 600 MCG	5	PA; LA; QL (4 per 1 day)
CANASA	4	QL (20 per 1 day)
CHENODAL	5	LA
CHOLBAM ORAL CAPSULE 250 MG	5	PA; SP; QL (7 per 1 day)
CHOLBAM ORAL CAPSULE 50 MG	5	PA; SP; QL (4 per 1 day)
CIMZIA	5	PA; QL (20 per 28 days)
CIMZIA POWDER FOR RECONST	5	PA; QL (20 per 28 days)
<i>citrate of magnesia</i>	9	ACA; OTC
<i>citromta</i>	9	ACA; OTC
<i>clearlax oral powder</i>	9	ACA; OTC
CLENPIQ	4	
COLAZAL	4	
COMPАЗИНЕ	4	

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>compro</i>	1	
<i>constulose</i>	1	
CORTENEMA	4	
CORTIFOAM	4	
CREON	3	
<i>cromolyn oral</i>	1	
CYSTADANE	5	SP
DELZICOL	4	
DICLEGIS	4	ST; QL (4 per 1 day)
DIPENTUM	4	ST
<i>doxylamine-pyridoxine (vit b6)</i>	2	ST; QL (4 per 1 day)
<i>dronabinol</i>	1	
<i>dulcolax (magnesium hydroxide) oral suspension</i>	9	ACA; OTC
EMEND ORAL CAPSULE 80 MG	4	QL (10 per 28 days)
EMEND ORAL CAPSULE,DOSE PACK	4	QL (15 per 28 days)
EMEND ORAL SUSPENSION FOR RECONSTITUTION	4	QL (5 per 28 days)
ENTEREG	4	
ENTYVIO PEN	5	PA; SP; QL (1.36 per 28 days)
<i>enulose</i>	1	
GASTROCROM	4	
GATTEX 30-VIAL	5	PA; SP
<i>gavilax oral powder</i>	9	ACA; OTC
<i>gavilyte-c</i>	1	ACA
<i>gavilyte-g</i>	1	ACA
<i>gentle laxative (bisacodyl) oral</i>	9	ACA; OTC
<i>gentlelax</i>	9	ACA; OTC
GIMOTI	CED	PA
GOLYTELY	4	
<i>gransetron hcl oral</i>	1	QL (20 per 30 days)
<i>hemmorex-hc rectal suppository 25 mg</i>	1	
<i>hydrocortisone acetate rectal suppository 25 mg</i>	1	
<i>hydrocortisone rectal</i>	1	
<i>hydrocortisone topical cream with perineal applicator</i>	1	

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>hydrocortisone-pramoxine rectal cream</i>	2	
IBSRELA	4	PA; QL (2 per 1 day)
KRISTALOSE	CED	PA
<i>lactulose oral packet</i>	CED	PA
<i>lactulose oral solution 10 gram/15 ml, 20 gram/30 ml</i>	1	
<i>laxative (bisacodyl) oral tablet,delayed release (dr/ec)</i>	9	ACA; OTC
<i>laxative peg 3350</i>	9	ACA; OTC
LIALDA	4	
<i>lidocaine hcl-hydrocortison ac rectal cream</i>	1	
LINZESS	3	QL (1 per 1 day)
LIVMARLI	5	PA; SP; QL (3 per 1 day)
LOTRONEX	4	PA; QL (20 per 1 day)
<i>lubiprostone</i>	2	QL (2 per 1 day)
<i>magnesium citrate oral solution</i>	9	ACA; OTC
MARINOL	4	
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	1	
MECLIZINE ORAL TABLET 50 MG	CED	
<i>mesalamine oral capsule (with del rel tablets)</i>	2	
<i>mesalamine oral capsule, extended release</i>	2	
<i>mesalamine oral capsule,extended release 24hr</i>	2	
<i>mesalamine oral tablet,delayed release (dr/ec) 1.2 gram</i>	2	
<i>mesalamine oral tablet,delayed release (dr/ec) 800 mg</i>	2	ST
<i>mesalamine rectal enema</i>	1	
<i>mesalamine rectal suppository</i>	1	QL (20 per 1 day)
<i>mesalamine with cleansing wipe</i>	CED	PA
<i>metoclopramide hcl oral solution</i>	1	
<i>metoclopramide hcl oral tablet</i>	1	
<i>milk of magnesia</i>	9	ACA; OTC
<i>milk of magnesia concentrated</i>	9	ACA; OTC
MOTEGRITY	4	ST; QL (20 per 1 day)
MOVANTIK	3	QL (1 per 1 day)

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
MOVIPREP	CED	PA
<i>natura-lax</i>	9	ACA; OTC
OCALIVA	5	PA; SP; LA; QL (20 per 1 day)
OMVOH PEN	5	PA; SP; QL (2 per 28 days)
<i>ondansetron</i>	1	
<i>ondansetron hcl oral solution</i>	1	
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	1	
<i>onelax magnesium citrate</i>	9	ACA; OTC
<i>oral saline laxative</i>	9	ACA; OTC
PANCREAZE ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,500-35,500- 61,500 UNIT, 16,800-56,800- 98,400 UNIT, 2,600-8,800- 15,200 UNIT, 21,000-54,700- 83,900 UNIT, 37,000- 97,300- 149,900 UNIT, 4,200-14,200- 24,600 UNIT	4	ST
<i>peg 3350-electrolytes</i>	1	ACA
<i>peg3350-sod sul-nacl-kcl-asb-c</i>	CED	PA; ACA
<i>peg-electrolyte soln</i>	1	ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG	3	
PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG	4	
PERTZYE	4	ST
<i>phosphate laxative</i>	9	ACA; OTC
PLENVU	4	
<i>polyethylene glycol 3350 oral powder</i>	9	ACA; OTC
<i>powderlax oral powder</i>	9	ACA; OTC
<i>prochlorperazine</i>	1	
<i>prochlorperazine maleate</i>	1	
PROCTOFOAM HC	3	
<i>procto-med hc</i>	1	
<i>proctosol hc topical</i>	1	
<i>proctozone-hc</i>	1	
<i>purelax oral powder</i>	9	ACA; OTC
RECTIV	4	
REGLAN ORAL	4	

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
RELISTOR ORAL	4	PA; QL (3 per 1 day)
RELISTOR SUBCUTANEOUS SOLUTION	4	PA; QL (20 per 1 day)
RELISTOR SUBCUTANEOUS SYRINGE	4	PA; QL (20 per 1 day)
RELTONE	CED	PA
ROWASA RECTAL ENEMA KIT	CED	PA
SANCUSO	4	QL (20 per 28 days)
<i>scopolamine base</i>	1	QL (10 per 30 days)
SFROWASA	4	
SKYRIZI INTRAVENOUS	5	PA; QL (3 per 365 days)
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 180 MG/1.2 ML (150 MG/ML)	5	PA; SP; QL (1.2 per 42 days)
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 360 MG/2.4 ML (150 MG/ML)	5	PA; SP; QL (2.4 per 42 days)
<i>smoothlax oral powder</i>	9	ACA; OTC
<i>sodium,potassium,mag sulfates</i>	2	ACA
SUCRAID	5	PA; SP; QL (8 per 1 day)
SUFLAVE	4	
<i>sulfasalazine</i>	1	
SUPREP BOWEL PREP KIT	4	
SUTAB	CED	PA
SYMPROIC	3	QL (20 per 1 day)
SYNDROS	4	PA
TRANSDERM-SCOP	4	QL (1 per 30 days)
<i>trimethobenzamide oral</i>	1	
TRULANCE	4	PA; QL (20 per 1 day)
UCERIS ORAL	4	PA
UCERIS RECTAL	4	
URSO 250	4	
URSO FORTE	4	
<i>ursodiol oral capsule 200 mg, 400 mg</i>	CED	PA
<i>ursodiol oral capsule 300 mg</i>	2	
<i>ursodiol oral tablet</i>	2	
VARUBI	4	QL (20 per 28 days)
VELSIPITY	5	PA; SP; QL (1 per 1 day)
VIBERZI	4	PA; QL (20 per 1 day)

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
VIOKACE	4	ST
VOWST	5	PA; QL (12 per 365 days)
women's gentle laxative(bisac)	9	ACA; OTC
ZELNORM	4	PA; QL (2 per 1 day)
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT	3	

### ULCER THERAPY

ACIPHEX	4	QL (20 per 1 day)
amoxicil-clarithromy-lansopraz	2	QL (20 per 365 days)
bismuth subcit k-metronidz-tcn	CED	PA; QL (20 per 365 days)
CARAFATE	4	
cimetidine oral tablet 300 mg, 400 mg, 800 mg	1	
CYTOTEC	4	
DEXILANT	4	ST; QL (20 per 1 day)
dexlansoprazole	2	ST; QL (20 per 1 day)
esomeprazole magnesium oral capsule,delayed release(dr/ec)	1	QL (2 per 1 day)
esomeprazole magnesium oral granules dr for susp in packet	2	PA for age 9 and older; QL (20 per 1 day)
famotidine oral suspension for reconstitution	2	
famotidine oral tablet 20 mg, 40 mg	1	
KONVOMEP	CED	PA
lansoprazole oral capsule,delayed release(dr/ec)	1	QL (2 per 1 day)
lansoprazole oral tablet,disintegrat, delay rel	2	PA for age 8 and older; QL (1 per 1 day)
misoprostol	1	
NEXIUM	4	QL (2 per 1 day)
NEXIUM PACKET	4	PA for age 9 and older; QL (2 per 1 day)
nizatidine oral capsule	2	
OMECLAMOX-PAK	CED	PA
omeprazole oral capsule,delayed release(dr/ec)	1	QL (20 per 1 day)

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-sodium bicarbonate oral capsule 40-1.1 mg-gram</i>	CED	PA
<i>omeprazole-sodium bicarbonate oral packet</i>	CED	PA
<i>pantoprazole oral granules dr for susp in packet</i>	CED	PA; QL (20 per 1 day)
<i>pantoprazole oral tablet,delayed release (dr/ec)</i>	1	QL (2 per 1 day)
PEPCID ORAL TABLET 40 MG	4	
PREVACID ORAL CAPSULE,DELAYED RELEASE(DR/EC) 30 MG	4	QL (20 per 1 day)
PREVACID SOLUTAB	4	PA for age 8 and older; QL (20 per 1 day)
PRILOSEC ORAL SUSP,DELAYED RELEASE FOR RECON	CED	PA
PROTONIX ORAL GRANULES DR FOR SUSP IN PACKET	CED	PA; QL (1 per 1 day)
PROTONIX ORAL TABLET,DELAYED RELEASE (DR/EC)	4	QL (2 per 1 day)
PYLERA	CED	PA; QL (20 per 365 days)
RABEPRAZOLE ORAL CAPSULE, DELAYED REL SPRINKLE	CED	PA; QL (10 per 1 day)
<i>rabeprazole oral tablet,delayed release (dr/ec)</i>	2	QL (2 per 1 day)
<i>sucralfate oral suspension</i>	2	
<i>sucralfate oral tablet</i>	1	
TALICIA	4	QL (20 per 365 days)
VOQUEZNA	4	ST; QL (10 per 1 day)
VOQUEZNA DUAL PAK	4	QL (10 per 365 days)
VOQUEZNA TRIPLE PAK	4	QL (10 per 365 days)
ZEGERID ORAL CAPSULE 40-1.1 MG-GRAM	CED	PA
ZEGERID ORAL PACKET	CED	PA

## IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

### ANTIVIRALS

<i>ribavirin oral capsule</i>	5	
<i>ribavirin oral tablet 200 mg</i>	5	SP

### BIOTECHNOLOGY DRUGS

ARANESP (IN POLYSORBATE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	5	PA; SP
---	---	--------

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
ARANESP (IN POLYSORBATE) INJECTION SYRINGE	5	PA; SP
ARCALYST	5	PA; QL (10 per 28 days)
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	5	PA
FULPHILA	5	PA
FYLNETRA	5	PA
GRANIX SUBCUTANEOUS SOLUTION 300 MCG/ML	5	PA; QL (4 per 1 day)
GRANIX SUBCUTANEOUS SOLUTION 480 MCG/1.6 ML	5	PA; QL (4.8 per 1 day)
GRANIX SUBCUTANEOUS SYRINGE	5	PA; SP; QL (20 per 1 day)
LEUKINE INJECTION RECON SOLN	5	PA; SP
MIRCERA	5	PA; SP
NEULASTA	5	PA; SP
NEULASTA ONPRO	5	PA; SP
NEUPOGEN INJECTION SOLUTION 300 MCG/ML	5	PA; QL (3 per 1 day)
NEUPOGEN INJECTION SOLUTION 480 MCG/1.6 ML	5	PA; QL (4.8 per 1 day)
NEUPOGEN INJECTION SYRINGE	5	PA; QL (20 per 1 day)
NIVESTYM INJECTION SOLUTION 300 MCG/ML	5	PA; SP; QL (3 per 1 day)
NIVESTYM INJECTION SOLUTION 480 MCG/1.6 ML	5	PA; SP; QL (4.8 per 1 day)
NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML	5	PA; SP; QL (1.5 per 1 day)
NIVESTYM SUBCUTANEOUS SYRINGE 480 MCG/0.8 ML	5	PA; SP; QL (2.4 per 1 day)
NYVEPRIA	5	
PROCRT	5	PA
RELEUKO SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML	5	PA; QL (20 per 1 day)
RELEUKO SUBCUTANEOUS SYRINGE 480 MCG/0.8 ML	5	QL (20 per 1 day)
RETACRIT	5	PA; SP

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
ROLVEDON	5	PA
STIMUFEND	5	PA
UDENYCA	5	PA; SP
UDENYCA AUTOINJECTOR	5	PA
UDENYCA ONBODY	5	PA; SP
ZARXIO	5	PA; SP; QL (20 per 1 day)
ZIEXTENZO	5	PA
<b>GROWTH HORMONES</b>		
EGRIFTA SV	5	PA
GENOTROPIN	5	PA; SP
GENOTROPIN MINIQUICK	5	PA; SP
HUMATROPE INJECTION CARTRIDGE	5	PA
NGENLA	5	PA
NORDITROPIN FLEXPRO	5	PA; SP
NUTROPIN AQ NUSPIN	5	PA
OMNITROPE	5	PA
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	5	PA
SKYTROFA	5	PA
SOGROYA	5	PA; QL (3 per 28 days)
ZOMACTON	5	PA
<b>INTERFERONS</b>		
ACTIMMUNE	5	PA; SP
ALFERON N	5	SP
BESREMI	5	PA; QL (2 per 28 days)
PEGASYS	5	SP
<b>MULTIPLE SCLEROSIS AGENTS</b>		
AUBAGIO	5	SP
AVONEX INTRAMUSCULAR PEN INJECTOR KIT	5	
AVONEX INTRAMUSCULAR SYRINGE KIT	5	
BAFIERTAM	5	PA; QL (4 per 1 day)
BETASERON SUBCUTANEOUS KIT	5	SP
COPAXONE SUBCUTANEOUS SYRINGE	5	SP

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
dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg (14)- 240 mg (46)	5	SP; QL (20 per 365 days)
dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg, 240 mg	5	SP; QL (2 per 1 day)
EXTAVIA	5	PA; SP
fingolimod	5	SP
GILENYA ORAL CAPSULE 0.25 MG	CED	
GILENYA ORAL CAPSULE 0.5 MG	5	PA
glatiramer	5	
glatopa	5	
KESIMPTA PEN	5	PA; SP; QL (0.4 per 28 days)
MAVENCLAD (10 TABLET PACK)	5	PA; 2 tablets per day ;40 tablets in 720 days; SP; LA
MAVENCLAD (4 TABLET PACK)	5	PA; 2 tablets per day ;40 tablets in 720 days; SP; LA
MAVENCLAD (5 TABLET PACK)	5	PA; 2 tablets per day ;40 tablets in 720 days; SP; LA
MAVENCLAD (6 TABLET PACK)	5	PA; 2 tablets per day ;40 tablets in 720 days; SP; LA
MAVENCLAD (7 TABLET PACK)	5	PA; 2 tablets per day ;40 tablets in 720 days; SP; LA
MAVENCLAD (8 TABLET PACK)	5	PA; 2 tablets per day ;40 tablets in 720 days; SP; LA
MAVENCLAD (9 TABLET PACK)	5	PA; 2 tablets per day ;40 tablets in 720 days; SP; LA
MAYZENT ORAL TABLET 0.25 MG	5	PA; SP; QL (12 per 365 days)
MAYZENT ORAL TABLET 1 MG, 2 MG	5	PA; SP; QL (1 per 1 day)
MAYZENT STARTER(FOR 1MG MAINT)	5	PA; SP; QL (7 per 365 days)
MAYZENT STARTER(FOR 2MG MAINT)	5	PA; SP; QL (12 per 365 days)
PLEGRIDY INTRAMUSCULAR	5	QL (20 per 28 days)
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML	5	QL (20 per 28 days)
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 63 MCG/0.5 ML- 94 MCG/0.5 ML	5	QL (20 per 365 days)
PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML	5	QL (20 per 28 days)
PLEGRIDY SUBCUTANEOUS SYRINGE 63 MCG/0.5 ML- 94 MCG/0.5 ML	5	QL (20 per 365 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
PONVORY	5	PA; QL (20 per 1 day)
PONVORY 14-DAY STARTER PACK	5	PA; QL (20 per 365 days)
REBIF (WITH ALBUMIN)	5	SP; QL (6 per 28 days)
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML	5	SP; QL (6 per 28 days)
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 8.8MCG/0.2ML-22 MCG/0.5ML (6)	5	SP; QL (4.2 per 365 days)
REBIF TITRATION PACK	5	SP; QL (4.2 per 365 days)
TASCENO ODT	CED	PA; QL (20 per 1 day)
TECFIDERA ORAL CAPSULE,DELAYED RELEASE(DR/EC) 120 MG (14)- 240 MG (46)	5	SP; QL (20 per 365 days)
TECFIDERA ORAL CAPSULE,DELAYED RELEASE(DR/EC) 120 MG, 240 MG	5	SP; QL (20 per 1 day)
<i>teriflunomide</i>	5	
VUMERTY	5	PA; SP; QL (4 per 1 day)

#### VACCINES & MISCELLANEOUS IMMUNOLOGICALS

ABRYSVO	9	PA for age 59 and younger; ACA
ACTHIB (PF)	9	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF)	9	ACA
AFLURIA QD 2023-24(3YR UP)(PF)	9	ACA
AFLURIA QUAD 2023-2024(6MO UP)	9	ACA
AREXVY (PF)	9	PA for age 59 and younger; ACA
BEXSERO	9	ACA
BOOSTRIX TDAP	9	ACA
COMIRNATY 2023-24 (12Y UP)(PF)	9	ACA
DAPTACEL (DTAP PEDIATRIC) (PF)	9	ACA
DENGVAXIA (PF)	CED	ACA
ENGERIX-B (PF)	9	ACA
ENGERIX-B PEDIATRIC (PF)	9	ACA
FLUAD QUAD 2023-24(65Y UP)(PF)	9	ACA
FLUARIX QUAD 2023-2024 (PF)	9	ACA
FLUBLOK QUAD 2023-2024 (PF)	9	ACA
FLUCELVAX QUAD 2023-2024	9	ACA
FLUCELVAX QUAD 2023-2024 (PF)	9	ACA
FLULAVAL QUAD 2023-2024 (PF)	9	ACA

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FLUMIST QUAD 2023-2024	9	ACA
FLUZONE HIGHDOSE QUAD 23-24 PF	9	ACA
FLUZONE QUAD 2023-2024	9	ACA
FLUZONE QUAD 2023-2024 (PF)	9	ACA
GARDASIL 9 (PF)	9	ACA
GRASTEK	4	PA; QL (20 per 1 day)
HAVRIX (PF)	9	ACA
HEPLISAV-B (PF)	9	ACA
HIBERIX (PF)	9	ACA
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE	9	ACA
I-POL	9	ACA
IXCHIQ	CED	
KINRIX (PF) INTRAMUSCULAR SYRINGE	9	ACA
MENQUADFI (PF)	9	ACA
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT	9	ACA
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR SOLUTION	CED	ACA
M-M-R II (PF)	9	ACA
MODERNA COVID 23-24(6M-11Y)PF	9	ACA
NOVAVAX COVID 2023-24(PF)(EUA)	9	ACA
ODACTRA	4	PA; QL (20 per 1 day)
ORALAIR SUBLINGUAL TABLET 300 INDX REACTIVITY	4	PA; QL (20 per 1 day)
PALFORZIA (LEVEL 1)	5	PA; QL (10 per 365 days)
PALFORZIA (LEVEL 2)	5	PA; QL (10 per 365 days)
PALFORZIA (LEVEL 3)	5	PA; QL (10 per 365 days)
PALFORZIA (LEVEL 4)	5	PA; QL (10 per 365 days)
PALFORZIA (LEVEL 5)	5	PA; QL (10 per 365 days)
PALFORZIA (LEVEL 6)	5	PA; QL (10 per 365 days)
PALFORZIA (LEVEL 7)	5	PA; QL (10 per 365 days)
PALFORZIA (LEVEL 8)	5	PA; QL (10 per 365 days)
PALFORZIA (LEVEL 9)	5	PA; QL (10 per 365 days)
PALFORZIA (LEVEL 10)	5	PA; QL (10 per 365 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
PALFORZIA INITIAL DOSE	5	PA; QL (10 per 365 days)
PALFORZIA LEVEL 11 MAINTENANCE	5	PA; QL (10 per 30 days)
PEDIARIX (PF)	9	ACA
PEDVAX HIB (PF)	9	ACA
PENBRAYA (PF)	9	ACA
PENTACEL (PF) INTRAMUSCULAR KIT 15LF-48MCG-62DU -10 MCG/0.5ML	9	ACA
PFIZER COVID 2023-24(5Y-11Y)PF	9	ACA
PFIZER COVID 2023-24(6MO-4Y)PF	9	ACA
PNEUMOVAX-23	9	ACA
PREHEVBRIO (PF)	9	ACA
PREVNAR 20 (PF)	9	ACA
PRIORIX (PF)	9	ACA
PROQUAD (PF)	9	ACA
QUADRACEL (PF)	9	ACA
RAGWITEK	4	PA; QL (20 per 1 day)
RECOMBIVAX HB (PF)	9	ACA
ROTARIX ORAL SUSPENSION	9	ACA
ROTATEQ VACCINE	9	ACA
SHINGRIX (PF)	9	ACA
SPIKEVAX 2023-2024(12Y UP)(PF)	9	ACA
TDVAX	9	ACA
TENIVAC (PF)	9	ACA
TRUMENBA	9	ACA
TWINRIX (PF)	9	ACA
VAQTA (PF)	9	ACA
VARIVAX (PF)	9	ACA
VAXELIS (PF)	9	ACA
VAXNEUVANCE (PF)	9	ACA

## IMMUNOLOGY

### INTERLEUKINS

<i>imiquimod topical cream in metered-dose pump</i>	2	PA; QL (20 per 365 days)
<i>imiquimod topical cream in packet 3.75 %</i>	2	PA; QL (20 per 365 days)
<i>imiquimod topical cream in packet 5 %</i>	1	QL (20 per 365 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
ZYCLARA TOPICAL CREAM IN METERED-DOSE PUMP	4	PA; QL (15 per 365 days)
ZYCLARA TOPICAL CREAM IN PACKET	4	PA; QL (56 per 365 days)
<b>MUSCULOSKELETAL &amp; RHEUMATOLOGY</b>		
<b>GOUT THERAPY</b>		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	1	
ALLOPURINOL ORAL TABLET 200 MG	CED	PA
<i>colchicine oral capsule</i>	CED	PA
<i>colchicine oral tablet</i>	1	
COLCRYS	4	
<i>febuxostat</i>	1	ST
GLOPERBA	CED	PA
MITIGARE	CED	PA
<i>probencid</i>	1	
<i>probencid-colchicine</i>	1	
ULORIC	4	ST
ZYLOPRIM ORAL TABLET 100 MG	4	
<b>OSTEOPOROSIS THERAPY</b>		
ACTONEL ORAL TABLET 150 MG, 35 MG	4	
<i>alendronate oral solution</i>	CED	PA
<i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>	1	
ATELVIA	4	PA
BINOSTO	CED	PA
EVISTA	4	
FORTEO	5	PA; SP; QL (1 per 28 days)
FOSAMAX ORAL TABLET 70 MG	4	
FOSAMAX PLUS D	3	
<i>ibandronate oral</i>	1	
<i>raloxifene</i>	1	ACA
<i>risedronate oral tablet 150 mg, 35 mg, 5 mg</i>	2	
<i>risedronate oral tablet,delayed release (dr/ec)</i>	CED	PA
<i>teriparatide subcutaneous pen injector 20 mcg/dose (600mcg/2.4ml)</i>	5	PA; 1 PEN IN 28D OR 3 PENS IN 63D;; SP
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (620MCG/2.48ML)	5	PA; SP; QL (20 per 28 days)

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
TYMLOS	5	PA; SP; QL (20 per 28 days)
<b>OTHER RHEUMATOLOGICALS</b>		
ABRILADA(CF)	CED	PA; QL (2 per 28 days)
ABRILADA(CF) PEN	CED	PA; QL (2 per 28 days)
ACTEMRA ACTPEN	5	PA; QL (20 per 28 days)
ACTEMRA SUBCUTANEOUS	5	PA; QL (20 per 28 days)
ADALIMUMAB-AACF	CED	PA; QL (2 per 28 days)
ADALIMUMAB-ADAZ	CED	PA; QL (0.8 per 28 days)
ADALIMUMAB-ADBM	CED	PA; QL (2 per 28 days)
ADALIMUMAB-ADBM(CF) PEN CROHNS	CED	PA; QL (6 per 365 days)
ADALIMUMAB-ADBM(CF) PEN PS-UV	CED	PA; QL (4 per 365 days)
ADALIMUMAB-FKJP	CED	PA; QL (2 per 28 days)
AMJEVITA(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.4 ML	CED	PA; QL (0.8 per 28 days)
AMJEVITA(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.8 ML, 80 MG/0.8 ML	CED	PA; QL (1.6 per 28 days)
AMJEVITA(CF) SUBCUTANEOUS SYRINGE 10 MG/0.2 ML	CED	PA; QL (0.36 per 28 days)
AMJEVITA(CF) SUBCUTANEOUS SYRINGE 20 MG/0.2 ML	CED	PA; QL (0.4 per 28 days)
AMJEVITA(CF) SUBCUTANEOUS SYRINGE 20 MG/0.4 ML	CED	PA; SP; QL (0.8 per 28 days)
AMJEVITA(CF) SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	CED	PA; QL (0.8 per 28 days)
AMJEVITA(CF) SUBCUTANEOUS SYRINGE 40 MG/0.8 ML	CED	PA; SP; QL (1.6 per 28 days)
ARAVA	4	
BENLYSTA SUBCUTANEOUS	5	PA; QL (20 per 28 days)
CUPRIMINE	5	PA; QL (20 per 1 day)
CYLTEZO(CF)	5	PA; QL (2 per 28 days)
CYLTEZO(CF) PEN	5	PA; QL (2 per 28 days)
CYLTEZO(CF) PEN CROHN'S-UC-HS	5	PA; QL (1 per 365 days)
CYLTEZO(CF) PEN PSORIASIS-UV	5	PA; QL (1 per 365 days)
DEPEN TITRATABS	5	PA; QL (16 per 1 day)
ENBREL MINI	5	PA; SP; QL (20 per 28 days)

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
ENBREL SUBCUTANEOUS SOLUTION	5	PA; SP; QL (20 per 28 days)
ENBREL SUBCUTANEOUS SYRINGE	5	PA; SP; QL (20 per 28 days)
ENBREL SURECLICK	5	PA; SP; QL (20 per 28 days)
HADLIMA	CED	PA; QL (1.6 per 28 days)
HADLIMA PUSHTOUCH	CED	PA; QL (1.6 per 28 days)
HADLIMA(CF)	CED	PA; QL (0.8 per 28 days)
HADLIMA(CF) PUSHTOUCH	CED	PA; QL (0.8 per 28 days)
HULIO(CF)	CED	PA; QL (2 per 28 days)
HULIO(CF) PEN	CED	PA; QL (2 per 28 days)
HUMIRA PEN	5	PA; SP; QL (2 per 28 days)
HUMIRA PEN CROHNS-UC-HS START	5	PA; SP; QL (6 per 365 days)
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	5	PA; SP; QL (2 per 28 days)
HUMIRA(CF)	5	PA; SP; QL (2 per 28 days)
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML	5	PA; SP; QL (3 per 365 days)
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML-40 MG/0.4 ML	5	PA; SP; QL (2 per 365 days)
HUMIRA(CF) PEN CROHNS-UC-HS	5	PA; SP; QL (3 per 365 days)
HUMIRA(CF) PEN PEDIATRIC UC	5	PA; SP; QL (4 per 365 days)
HUMIRA(CF) PEN PSOR-UV-ADOL HS	5	PA; SP; QL (3 per 365 days)
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	5	PA; SP; QL (2 per 28 days)
HYRIMOZ	5	PA; QL (1.6 per 28 days)
HYRIMOZ PEN	5	PA; QL (1.6 per 28 days)
HYRIMOZ PEN CROHN'S-UC STARTER	5	PA; QL (20 per 365 days)
HYRIMOZ PEN PSORIASIS STARTER	5	PA; QL (20 per 365 days)
HYRIMOZ(CF)	5	PA; QL (2 per 28 days)
HYRIMOZ(CF) PEDI CROHN STARTER SUBCUTANEOUS SYRINGE 80 MG/0.8 ML	5	PA; QL (20 per 365 days)
HYRIMOZ(CF) PEDI CROHN STARTER SUBCUTANEOUS SYRINGE 80 MG/0.8 ML-40 MG/0.4 ML	5	PA; QL (2 per 28 days)
HYRIMOZ(CF) PEN SUBCUTANEOUS PEN INJECTOR 40 MG/0.4 ML	5	PA; QL (2 per 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
HYRIMOZ(CF) PEN SUBCUTANEOUS PEN INJECTOR 80 MG/0.8 ML	5	PA; QL (1.6 per 28 days)
IDACIO(CF)	CED	PA; QL (1 per 28 days)
IDACIO(CF) PEN	CED	PA; QL (2 per 28 days)
IDACIO(CF) PEN CROHN-UC STARTR	CED	PA; QL (3 per 365 days)
IDACIO(CF) PEN PSORIASIS START	CED	PA; QL (2 per 365 days)
KEVZARA	5	PA; SP; QL (2.28 per 28 days)
KINERET	5	PA; SP; QL (20 per 28 days)
<i>leflunomide</i>	1	
OLUMIANT	5	PA; QL (1 per 1 day)
ORENCIA CLICKJECT	5	PA; QL (4 per 28 days)
ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML	5	PA; QL (4 per 28 days)
ORENCIA SUBCUTANEOUS SYRINGE 50 MG/0.4 ML	5	PA; QL (1.6 per 28 days)
ORENCIA SUBCUTANEOUS SYRINGE 87.5 MG/0.7 ML	5	PA; QL (2.8 per 28 days)
OTEZLA	5	PA; SP; QL (20 per 1 day)
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	5	PA; SP; QL (20 per 365 days)
OTREXUP (PF)	4	ST
<i>penicillamine</i>	5	PA; QL (16 per 1 day)
RASUVO (PF)	4	ST
RIDAURA	4	
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG	5	PA; SP; QL (1 per 1 day)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 45 MG	5	PA; SP; QL (56 per 365 days)
SAVELLA	4	ST
SIMPONI	5	PA; QL (20 per 28 days)
XELJANZ ORAL SOLUTION	5	PA; SP; QL (10 per 1 day)
XELJANZ ORAL TABLET 10 MG	5	PA; SP; QL (2 per 1 day)
XELJANZ ORAL TABLET 5 MG	5	PA; QL (2 per 1 day)
XELJANZ XR	5	PA; SP; QL (1 per 1 day)
YUFLYMA(CF) AI CROHN'S-UC-HS	CED	PA; QL (3 per 365 days)
YUFLYMA(CF) AUTOINJECTOR	CED	PA; QL (2 per 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
YUFLYMA(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	CED	PA; QL (2 per 28 days)
YUSIMRY(CF) PEN	CED	PA; QL (1.6 per 28 days)
<b>OBSTETRICS &amp; GYNECOLOGY</b>		
<b>DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES</b>		
CAYA CONTOURED	9	ACA
DUREX AVANTI BARE REAL FEEL	9	ACA; OTC
FC2 FEMALE CONDOM	9	ACA; OTC
FEMCAP VAGINAL DEVICE 22 MM	9	ACA
TRUSTEX LUBRICATED CONDOMS	9	ACA; OTC
TRUSTEX-RIA NON-LUB CONDOMS	9	ACA; OTC
WIDE-SEAL DIAPHRAGM	9	ACA
<b>ESTROGENS &amp; PROGESTINS</b>		
ACTIVELLA	4	
<i>amabelz</i>	1	
ANGELIQ	4	
BIJUVA	4	QL (20 per 1 day)
<i>camila</i>	1	ACA
CLIMARA	4	
CLIMARA PRO	4	
COMBIPATCH	4	
<i>covaryx</i>	2	
<i>covaryx h.s.</i>	2	
CRINONE	4	PA
<i>deblitane</i>	1	ACA
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	4	
DEPO-PROVERA INTRAMUSCULAR SYRINGE	4	
DIVIGEL	4	
<i>dotti</i>	1	
DUAVEE	4	PA
<i>eemt</i>	2	
<i>eemt hs</i>	2	
ELESTRIN	4	

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>errin</i>	1	ACA
ESTRACE	4	
<i>estradiol oral</i>	1	
<i>estradiol transdermal gel in packet</i>	2	
<i>estradiol transdermal patch semiweekly</i>	1	
<i>estradiol transdermal patch weekly</i>	1	
<i>estradiol vaginal</i>	2	
<i>estradiol-norethindrone acet</i>	1	
ESTRING	4	
ESTROGEL	4	
<i>estrogens-methyltestosterone</i>	2	
EVAMIST	4	
FEMRING	4	
<i>fyavolv</i>	2	
<i>heather</i>	1	ACA
IMVEXXY MAINTENANCE PACK	4	
IMVEXXY STARTER PACK	4	
<i>incassia</i>	1	ACA
<i>jencycla</i>	1	ACA
<i>jinteli</i>	2	
<i>lyleq</i>	1	ACA
<i>lyllana</i>	1	
<i>lyza</i>	1	ACA
<i>medroxyprogesterone intramuscular</i>	1	ACA
<i>medroxyprogesterone oral</i>	1	
MENEST	4	
MENOSTAR	4	
<i>mimvey</i>	1	
MINIVELLE	4	
<i>nora-be</i>	1	ACA
<i>norethindrone (contraceptive)</i>	1	ACA
<i>norethindrone acetate</i>	1	
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
PREMARIN ORAL	3	
PREMARIN VAGINAL	3	
PREMPHASE	3	
PREMPRO	3	
<i>progesterone</i>	1	
<i>progesterone micronized</i>	1	
PROMETRIUM	4	
PROVERA	4	
<i>sharobel</i>	1	ACA
<i>tulana</i>	1	ACA
VAGIFEM	4	
VIVELLE-DOT	4	
<i>yuvafem</i>	2	
<b>MISCELLANEOUS OB/GYN</b>		
ANNOVERA	4	QL (20 per 365 days)
CLEOCIN VAGINAL	4	
<i>clindamycin phosphate vaginal</i>	1	
CLINDESSE	4	
<i>eluryng</i>	1	ACA
<i>enilloring</i>	1	ACA
<i>etonogestrel-ethynodiol</i>	1	ACA
GYNAZOLE-1	3	
<i>haloette</i>	1	ACA
INTRAROSA	4	
<i>metronidazole vaginal</i>	1	
<i>miconazole-3 vaginal suppository</i>	1	
MIFEPREX	4	
<i>mifepristone oral tablet 200 mg</i>	2	
MYFEMBREE	4	PA; QL (10 per 1 day)
<i>norelgestromin-ethynodiol</i>	1	ACA
NUVARING	4	
NUVESSA	4	
ORIAHNN	4	PA; SP; QL (2 per 1 day)
OSPHENA	4	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
PHEXXI	CED	PA
<i>terconazole</i>	1	
<i>tranexamic acid oral</i>	2	
TWIRLA	CED	PA
<i>vandazole</i>	1	
VCF CONTRACEPTIVE FILM	CED	PA; OTC
VCF CONTRACEPTIVE GEL	CED	PA; ACA; OTC
VEOZAH	CED	PA; QL (1 per 1 day)
XACIATO	4	
<i>xulane</i>	1	ACA
<i>zafemy</i>	1	ACA
<b>ORAL CONTRACEPTIVES &amp; RELATED AGENTS</b>		
<i>afirmelle</i>	1	ACA
<i>after pill</i>	9	ACA; OTC
AFTERA	CED	PA; OTC
<i>altavera (28)</i>	1	ACA
<i>alyacen 1/35 (28)</i>	1	ACA
<i>alyacen 7/7/7 (28)</i>	1	ACA
<i>amethia</i>	1	ACA
<i>amethyst (28)</i>	1	ACA
<i>apri</i>	1	ACA
<i>aranelle (28)</i>	1	ACA
<i>ashlyna</i>	1	ACA
<i>aubra</i>	1	ACA
<i>aubra eq</i>	1	ACA
<i>aurovela 1.5/30 (21)</i>	1	ACA
<i>aurovela 1/20 (21)</i>	1	ACA
<i>aurovela 24 fe</i>	1	ACA
<i>aurovela fe 1.5/30 (28)</i>	1	ACA
<i>aurovela fe 1-20 (28)</i>	1	ACA
<i>aviane</i>	1	ACA
<i>ayuna</i>	1	ACA
<i>azurette (28)</i>	1	ACA
BALCOLTRA	4	

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</i> (28)	1	ACA
BEYAZ	4	
<i>blisovi 24 fe</i>	1	ACA
<i>blisovi fe 1.5/30 (28)</i>	1	ACA
<i>blisovi fe 1/20 (28)</i>	1	ACA
<i>briellyn</i>	1	ACA
<i>camrese</i>	1	ACA
<i>camrese lo</i>	1	ACA
<i>caziant</i> (28)	1	ACA
<i>charlotte 24 fe</i>	1	ACA
<i>chateal</i> (28)	1	ACA
<i>chateal eq</i> (28)	1	ACA
<i>cryselle</i> (28)	1	ACA
<i>curae</i>	9	ACA; OTC
<i>cyred</i>	1	ACA
<i>cyred eq</i>	1	ACA
<i>dasetta 1/35 (28)</i>	1	ACA
<i>dasetta 7/7/7 (28)</i>	1	ACA
<i>daysee</i>	1	ACA
<i>desog-e.estradiol/e.estradiol</i>	1	ACA
<i>dolishale</i>	1	ACA
<i>drospirenone-e.estradiol-lm.fa</i>	1	ACA
<i>drospirenone-ethinyl estradiol</i>	1	ACA
<i>econtra ez</i>	9	ACA; OTC
<i>econtra one-step</i>	9	ACA; OTC
<i>elinest</i>	1	ACA
ELLA	4	ACA
<i>enpresse</i>	1	ACA
<i>enskyce</i>	1	ACA
<i>estarrylla</i>	1	ACA
<i>ethynodiol diac-eth estradiol</i>	1	ACA
<i>falmina</i> (28)	1	ACA
<i>finzala</i>	2	ACA
<i>gemmafly</i>	CED	PA; ACA

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>hailey</i>	1	ACA
<i>hailey 24 fe</i>	1	ACA
<i>hailey fe 1.5/30 (28)</i>	1	ACA
<i>hailey fe 1/20 (28)</i>	1	ACA
<i>her style</i>	9	ACA; OTC
<i>iclevia</i>	1	ACA
<i>isibloom</i>	1	ACA
<i>jaimiess</i>	1	ACA
<i>jasmiel (28)</i>	1	ACA
<i>jolessa</i>	1	ACA
<i>joyeaux</i>	2	ACA
<i>juleber</i>	1	ACA
<i>junel 1.5/30 (21)</i>	1	ACA
<i>junel 1/20 (21)</i>	1	ACA
<i>junel fe 1.5/30 (28)</i>	1	ACA
<i>junel fe 1/20 (28)</i>	1	ACA
<i>junel fe 24</i>	1	ACA
<i>kaitlib fe</i>	1	ACA
<i>kalliga</i>	1	ACA
<i>kariva (28)</i>	1	ACA
<i>kelnor 1/35 (28)</i>	1	ACA
<i>kelnor 1-50 (28)</i>	1	ACA
<i>kurvelo (28)</i>	1	ACA
<i>l norgest/e.estradiol-e.estrad</i>	1	ACA
<i>larin 1.5/30 (21)</i>	1	ACA
<i>larin 1/20 (21)</i>	1	ACA
<i>larin 24 fe</i>	1	ACA
<i>larin fe 1.5/30 (28)</i>	1	ACA
<i>larin fe 1/20 (28)</i>	1	ACA
<i>layolis fe</i>	1	ACA
<i>leena 28</i>	1	ACA
<i>lessina</i>	1	ACA
<i>levonest (28)</i>	1	ACA
<i>levonorgest-eth.estradiol-iron</i>	2	ACA

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>levonorgestrel</i>	9	ACA; OTC
<i>levonorgestrel-ethinyl estrad</i>	1	ACA
<i>levonorg-eth estrad triphasic</i>	1	ACA
<i>levora-28</i>	1	ACA
<b>LO LOESTRIN FE</b>	3	
<b>LOESTRIN 1.5/30 (21)</b>	4	
<b>LOESTRIN 1/20 (21)</b>	4	
<b>LOESTRIN FE 1.5/30 (28-DAY)</b>	4	
<b>LOESTRIN FE 1/20 (28-DAY)</b>	4	
<i>lojaimiess</i>	1	ACA
<i>loryna (28)</i>	1	ACA
<i>low-ogestrel (28)</i>	1	ACA
<i>lo-zumandimine (28)</i>	1	ACA
<i>lutera (28)</i>	1	ACA
<i>marlissa (28)</i>	1	ACA
<i>merzee</i>	1	PA; ACA
<i>mibelas 24 fe</i>	1	ACA
<i>microgestin 1.5/30 (21)</i>	1	ACA
<i>microgestin 1/20 (21)</i>	1	ACA
<i>microgestin 24 fe</i>	1	ACA
<i>microgestin fe 1.5/30 (28)</i>	1	ACA
<i>microgestin fe 1/20 (28)</i>	1	ACA
<i>mil</i>	1	ACA
<i>mono-linyah</i>	1	ACA
<i>my choice</i>	9	ACA; OTC
<i>my way</i>	9	ACA; OTC
<b>NATAZIA</b>	4	
<i>necon 0.5/35 (28)</i>	1	ACA
<i>new day</i>	9	ACA; OTC
<b>NEXTSTELLIS</b>	4	
<i>nikki (28)</i>	1	ACA
<i>noreth-ethinyl estradiol-iron</i>	1	ACA
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	1	ACA

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>norethindrone-e.estradiol-iron oral capsule</i>	CED	PA; ACA
<i>norethindrone-e.estradiol-iron oral tablet</i>	1	ACA
<i>norethindrone-e.estradiol-iron oral tablet, chewable</i>	1	ACA
<i>norgestimate-ethynodiol dihydrogen phosphate oral tablet</i>	1	ACA
<i>nortrel 0.5/35 (28)</i>	1	ACA
<i>nortrel 1/35 (21)</i>	1	ACA
<i>nortrel 1/35 (28)</i>	1	ACA
<i>nortrel 7/7/7 (28)</i>	1	ACA
<i>nylia 1/35 (28)</i>	1	ACA
<i>nylia 7/7/7 (28)</i>	1	ACA
<i>nymyo</i>	1	ACA
<i>ocella</i>	1	ACA
<i>opcicon one-step</i>	9	ACA; OTC
<i>option-2</i>	9	ACA; OTC
<i>philith</i>	1	ACA
<i>pimtrea (28)</i>	1	ACA
<b>PLAN B ONE-STEP</b>	CED	PA; OTC
<i>portia 28</i>	1	ACA
<b>QUARTETTE</b>	4	
<i>reclipsen (28)</i>	1	ACA
<i>rivilsa</i>	1	ACA
<b>SAFYRAL</b>	4	
<i>setlakin</i>	1	ACA
<i>simliya (28)</i>	1	ACA
<i>simpesse</i>	1	ACA
<b>SLYND</b>	4	
<i>sprintec (28)</i>	1	ACA
<i>sronyx</i>	1	ACA
<i>syeda</i>	1	ACA
<b>TAKE ACTION</b>	CED	PA; OTC
<i>tarina 24 fe</i>	1	ACA
<i>tarina fe 1/20 (28)</i>	1	ACA
<b>TAYTULLA</b>	CED	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>tilia fe</i>	1	ACA
<i>tri-estarrylla</i>	1	ACA
<i>tri-legest fe</i>	1	ACA
<i>tri-linyah</i>	1	ACA
<i>tri-lo-estarrylla</i>	1	ACA
<i>tri-lo-marzia</i>	1	ACA
<i>tri-lo-mili</i>	1	ACA
<i>tri-lo-sprintec</i>	1	ACA
<i>tri-mili</i>	1	ACA
<i>tri-nymyo</i>	1	ACA
<i>tri-sprintec (28)</i>	1	ACA
<i>trivora (28)</i>	1	ACA
<i>tri-vylibra</i>	1	ACA
<i>tri-vylibra lo</i>	1	ACA
<i>turqoz (28)</i>	1	ACA
TYBLUME	CED	PA
<i>tydemy</i>	1	ACA
<i>velivet triphasic regimen (28)</i>	1	ACA
<i>vestura (28)</i>	1	ACA
<i>vienna</i>	1	ACA
<i>viorele (28)</i>	1	ACA
<i>volnea (28)</i>	1	ACA
<i>vyfemla (28)</i>	1	ACA
<i>vylibra</i>	1	ACA
<i>wera (28)</i>	1	ACA
<i>wymzya fe</i>	1	ACA
YASMIN (28)	4	
YAZ (28)	4	
<i>zarah</i>	1	ACA
<i>zovia 1-35 (28)</i>	1	ACA
<i>zumandimine (28)</i>	1	ACA
<b>OXYTOCICS</b>		
<i>methylergonovine oral</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<b>ANTIBIOTICS</b>		
AZASITE	4	
<i>bacitracin ophthalmic (eye)</i>	2	
<i>bacitracin-polymyxin b</i>	1	
BESIVANCE	4	
BETADINE OPHTHALMIC PREP	4	
CILOXAN OPHTHALMIC (EYE) OINTMENT	4	
<i>ciprofloxacin hcl ophthalmic (eye)</i>	1	
<i>erythromycin ophthalmic (eye)</i>	1	
<i>gatifloxacin</i>	2	
<i>gentamicin ophthalmic (eye) drops</i>	1	
<i>levofloxacin ophthalmic (eye) drops 1.5 %</i>	2	
<i>moxifloxacin ophthalmic (eye) drops</i>	1	
<i>moxifloxacin ophthalmic (eye) drops, viscous</i>	CED	PA
NATACYN	4	
<i>neomycin-bacitracin-polymyxin</i>	1	
<i>neomycin-polymyxin-gramicidin</i>	1	
<i>neo-polycin</i>	1	
OCUFLOX	4	
<i>ofloxacin ophthalmic (eye)</i>	1	
<i>polycin</i>	1	
<i>polymyxin b sulf-trimethoprim</i>	1	
<i>tobramycin ophthalmic (eye)</i>	1	
TOBREX OPHTHALMIC (EYE) OINTMENT	3	
VIGAMOX	4	
<b>ANTIVIRALS</b>		
<i>trifluridine</i>	1	
ZIRGAN	4	
<b>BETA-BLOCKERS</b>		
<i>betaxolol ophthalmic (eye)</i>	2	
BETIMOL	4	ST
BETOPTIC S	4	ST
<i>carteolol</i>	2	
ISTALOL	CED	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>levobunolol ophthalmic (eye) drops 0.5 %</i>	1	
<i>timolol maleate (pf)</i>	CED	PA
<i>timolol maleate ophthalmic (eye) drops</i>	1	
<i>timolol maleate ophthalmic (eye) drops, once daily</i>	CED	PA
<i>timolol maleate ophthalmic (eye) gel forming solution</i>	2	PA
TIMOPTIC OCUDOSE (PF)	CED	PA
<b>CHOLINESTERASE INHIBITOR MIOTICS</b>		
PHOSPHOLINE IODIDE	4	
<b>CYCLOPLEGIC MYDRIATICS</b>		
<i>atropine ophthalmic (eye) drops 1 %</i>	2	
<i>atropine ophthalmic (eye) ointment</i>	2	
ATROPINE SULFATE (PF)	CED	PA
CYCLOGYL	4	
<i>cyclopentolate ophthalmic (eye) drops 1 %</i>	1	
<i>homatropaire</i>	1	
MYDRIACYL	4	
<i>tropicamide</i>	1	
<b>DIRECT ACTING MIOTICS</b>		
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	1	
VUITY	CED	PA
<b>MISCELLANEOUS OPHTHALMOLOGICS</b>		
AKTEN (PF)	CED	PA; QL (20 per 30 days)
ALCAINE	4	
<i>allergy eye (ketotifen)</i>	1	OTC
ALOCRIL	4	ST
ALOMIDE	4	ST
<i>altacaine</i>	1	
<i>azelastine ophthalmic (eye)</i>	1	
<i>bepotastine besilate</i>	2	ST
BEPREVE	4	ST
CEQUA	4	ST
<i>cromolyn ophthalmic (eye)</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>cyclosporine ophthalmic (eye)</i>	2	QL (2 per 1 day)
CYSTADROPS	5	PA; QL (20 per 28 days)
CYSTARAN	5	PA; SP; QL (20 per 28 days)
<i>epinastine</i>	2	
<i>eye itch relief</i>	1	OTC
<i>ketotifen fumarate</i>	1	OTC
LACRISERT	4	ST
<i>olopatadine ophthalmic (eye)</i>	1	
OXERVATE	5	PA; SP; QL (10 per 720 days)
<i>proparacaine</i>	1	
RESTASIS	4	QL (2 per 1 day)
RESTASIS MULTIDOSE	4	ST; QL (5.5 per 28 days)
<i>tetracaine hcl</i>	1	
TETRACAINE HCL (PF) OPHTHALMIC (EYE)	1	
TYRVAYA	4	ST; 8.4 ML IN 30 DAYS;183 DAY SUPPLY IN 365 DAYS
VERKAZIA	CED	PA
VEVYE	CED	PA
XDEMVY	5	PA; SP; QL (10 per 365 days)
XiIDRA	3	QL (2 per 1 day)
ZERVIATE	4	ST
<b>NON-STEROIDAL ANTI-INFLAMMATORY AGENTS</b>		
ACULAR	4	
ACULAR LS	4	
ACUVAIL (PF)	CED	PA
<i>bromfenac</i>	2	
BROMSITE	4	
<i>diclofenac sodium ophthalmic (eye)</i>	1	
<i>flurbiprofen sodium</i>	2	
ILEVRO	4	
<i>ketorolac ophthalmic (eye)</i>	1	
NEVANAC	4	
PROLENSA	4	
<b>ORAL DRUGS FOR GLAUCOMA</b>		

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>acetazolamide</i>	1	
<i>methazolamide</i>	2	
<b>OTHER GLAUCOMA DRUGS</b>		
AZOPT	4	
<i>bimatoprost ophthalmic (eye)</i>	2	
<i>brimonidine-timolol</i>	2	
<i>brinzolamide</i>	2	
COMBIGAN	4	
COSOPT	4	
COSOPT (PF)	4	
<i>dorzolamide</i>	1	
<i>dorzolamide-timolol</i>	1	
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette</i>	2	
IYUZEH	CED	PA
<i>latanoprost</i>	1	
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	3	
RHOPRESSA	4	ST
ROCKLATAN	4	ST
SIMBRINZA	4	ST
<i>tafluprost (pf)</i>	2	ST
TRAVATAN Z	4	ST
<i>travoprost</i>	2	ST
VYZULTA	4	ST; QL (20 per 30 days)
XALATAN	4	
XELPROS	CED	PA
ZIOPTAN (PF)	4	ST
<b>STEROID-ANTIBIOTIC COMBINATIONS</b>		
MAXITROL	4	
<i>neomycin-bacitracin-poly-hc</i>	1	
<i>neomycin-polymyxin b-dexameth</i>	1	
<i>neomycin-polymyxin-hc ophthalmic (eye)</i>	1	
<i>neo-polycin hc</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
TOBRADEX OPHTHALMIC (EYE) OINTMENT	CED	PA
TOBRADEX ST	CED	PA
<i>tobramycin-dexamethasone</i>	1	
ZYLET	4	
<b>STEROIDS</b>		
ALREX	4	
<i>dexamethasone sodium phosphate ophthalmic (eye)</i>	1	
<i>difluprednate</i>	2	
DUREZOL	4	
EYSUVIS	CED	PA
FLAREX	4	
<i>fluorometholone</i>	1	
FML FORTE	CED	PA
FML LIQUIFILM	4	
INVELTYS	CED	PA
LOTEMAX OPHTHALMIC (EYE) DROPS,GEL	CED	PA
LOTEMAX OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
LOTEMAX OPHTHALMIC (EYE) OINTMENT	CED	PA
LOTEMAX SM	CED	PA
<i>loteprednol etabonate ophthalmic (eye) drops,gel</i>	CED	PA
<i>loteprednol etabonate ophthalmic (eye) drops,suspension</i>	2	
MAXIDEX	4	
PRED FORTE	4	
PRED MILD	CED	PA
<i>prednisolone acetate</i>	1	
<i>prednisolone sodium phosphate ophthalmic (eye)</i>	1	
<b>STEROID-SULFONAMIDE COMBINATIONS</b>		
<i>sulfacetamide-prednisolone</i>	1	
<b>SULFONAMIDES</b>		
<i>sulfacetamide sodium ophthalmic (eye)</i>	2	
<b>SYMPATHOMIMETICS</b>		

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
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.1 %	4	ST
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.15 %	4	
<i>apraclonidine</i>	1	
<i>brimonidine ophthalmic (eye) drops 0.1 %</i>	2	ST
<i>brimonidine ophthalmic (eye) drops 0.15 %</i>	2	
<i>brimonidine ophthalmic (eye) drops 0.2 %</i>	1	
IOPIDINE OPHTHALMIC (EYE) DROPPERETTE	4	
<b>VASOCONSTRICTOR DECONGESTANTS</b>		
CYCLOMYDRIL	4	
<i>phenylephrine hcl ophthalmic (eye)</i>	2	
<b>RESPIRATORY, ALLERGY, COUGH &amp; COLD</b>		
<b>ANTIHISTAMINE &amp; ANTIALLERGENIC AGENTS</b>		
AUVI-Q INJECTION AUTO-INJECTOR 0.1 MG/0.1 ML	4	
AUVI-Q INJECTION AUTO-INJECTOR 0.15 MG/0.15 ML, 0.3 MG/0.3 ML	CED	PA
<i>carbinoxamine maleate oral liquid</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>cetirizine oral solution 1 mg/ml</i>	1	
CLARINEX ORAL TABLET	4	
<i>clemastine oral syrup</i>	CED	PA; QL (60 per 1 day)
<i>clemastine oral tablet</i>	2	QL (3 per 1 day)
<i>cyproheptadine</i>	1	
<i>desloratadine oral tablet</i>	1	
<i>desloratadine oral tablet,disintegrating</i>	CED	PA
<i>dexchlorpheniramine maleate oral solution</i>	CED	PA
EPINEPHRINE INJECTION AUTO-INJECTOR 0.15 MG/0.15 ML	CED	PA
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	1	
EPIPEN	4	
EPIPEN JR	4	
<i>hydroxyzine hcl oral solution 10 mg/5 ml</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>hydroxyzine hcl oral tablet</i>	1	
<i>hydroxyzine pamoate</i>	1	
KARBINAL ER	CED	PA
<i>levocetirizine</i>	1	
<i>promethazine oral</i>	1	
<i>promethazine rectal suppository 12.5 mg, 25 mg</i>	1	
<i>promethegan</i>	1	
RYCLORA	CED	PA
RYVENT	3	
SYMJEPI	3	
VISTARIL ORAL CAPSULE 25 MG	4	
<b>COUGH &amp; COLD THERAPY</b>		
<i>benzonatate oral capsule 100 mg, 200 mg</i>	1	
<i>benzonatate oral capsule 150 mg</i>	2	
BROMFED DM	4	
<i>brompheniramine-pseudoeph-dm</i>	1	
CLARINEX-D 12 HOUR	CED	PA
<i>codeine-guaifenesin</i>	1	
<i>g tussin ac</i>	1	
HYCODAN (WITH HOMATROPINE)	4	
<i>hydrocodone-chlorpheniramine</i>	1	QL (20 per 30 days)
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml</i>	1	
<i>hydrocodone-homatropine oral tablet</i>	1	
hydromet	1	
<i>maxi-tuss ac</i>	1	
<i>promethazine vc</i>	1	
<i>promethazine vc-codeine</i>	1	
<i>promethazine-codeine</i>	1	
<i>promethazine-dm</i>	1	
TUXARIN ER	4	QL (10 per 30 days)
<b>PULMONARY AGENTS</b>		
24 HOUR NASAL ALLERGY	1	OTC
ACCOLATE	4	

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>acetylcysteine</i>	1	
ADCIRCA	5	PA; SP; QL (20 per 1 day)
ADEMPAS	5	PA; SP; LA; QL (3 per 1 day)
ADVAIR DISKUS	4	PA
ADVAIR HFA	3	
AIRDUO DIGIHALER	4	PA
AIRDUO RESPICLICK	4	PA
AIRSUPRA	CED	PA
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	2	PA
<i>albuterol sulfate inhalation solution for nebulization</i>	1	
<i>albuterol sulfate oral</i>	1	
ALVESCO	4	PA
<i>alyq</i>	5	PA; SP; QL (2 per 1 day)
<i>ambrisentan</i>	5	PA; SP; LA; QL (20 per 1 day)
ANORO ELLIPTA	3	
<i>arformoterol</i>	2	
ARMONAIR DIGIHALER	4	ST
ARNUITY ELLIPTA	3	
ASMANEX HFA	4	ST
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	4	ST
ATROVENT HFA	4	
<i>azelastine-fluticasone</i>	2	ST
BEVESPI AEROSPHERE	4	ST
<i>bosentan</i>	5	PA; SP; QL (20 per 1 day)
BREO ELLIPTA	3	
<i>breyna</i>	2	
BREZTRI AEROSPHERE	4	ST; QL (1 per 30 days)
BRONCHITOL	5	PA; QL (20 per 1 day)
BROVANA	4	
<i>budesonide inhalation</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>budesonide nasal</i>	1	OTC
<i>budesonide-formoterol</i>	2	
COMBIVENT RESPIMAT	3	
<i>cromolyn inhalation</i>	1	
DALIRESP	4	QL (1 per 1 day)
DUAKLIR PRESSAIR	4	ST; QL (1 per 30 days)
DULERA	3	
DYMISTA	4	ST
ELIXOPHYLLIN	CED	PA
<i>epinephrine hcl</i>	2	
ESBRIET ORAL CAPSULE	5	PA; SP; QL (6 per 1 day)
ESBRIET ORAL TABLET 267 MG	5	PA; SP; QL (6 per 1 day)
ESBRIET ORAL TABLET 801 MG	5	PA; SP; QL (3 per 1 day)
FASENRA	5	PA; QL (1 per 42 days)
FASENRA PEN	5	PA; QL (1 per 42 days)
FIRAZYR	5	PA; SP; QL (20 per 28 days)
<i>flunisolide</i>	2	ST
FLUTICASONE FUROATE-VILANTEROL	4	PA
FLUTICASONE PROPIONATE INHALATION	4	PA
<i>fluticasone propionate nasal</i>	1	
FLUTICASONE PROPION-SALMETEROL INHALATION AEROSOL POWDR BREATH ACTIVATED	1	
<i>fluticasone propion-salmeterol inhalation blister with device</i>	1	
FLUTICASONE PROPION-SALMETEROL INHALATION HFA AEROSOL INHALER	4	PA
<i>formoterol fumarate</i>	2	
HAEGARDA	5	PA; SP; LA
HYPER-SAL	4	
<i>icatibant</i>	5	PA; SP; QL (9 per 28 days)
INCRUSE ELLIPTA	3	
<i>ipratropium bromide inhalation</i>	1	
<i>ipratropium-albuterol</i>	1	
KALYDECO ORAL GRANULES IN PACKET 13.4 MG, 5.8 MG	5	PA; QL (20 per 1 day)

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
KALYDECO ORAL GRANULES IN PACKET 25 MG, 50 MG, 75 MG	5	PA; SP; QL (20 per 1 day)
KALYDECO ORAL TABLET	5	PA; SP; QL (20 per 1 day)
LETAIRIS	5	PA; SP; LA; QL (20 per 1 day)
<i>levalbuterol hcl</i>	2	
LEVALBUTEROL TARTRATE	3	ST
LIQREV	5	PA; QL (6 per 1 day)
<i>mometasone nasal</i>	2	ST
<i>montelukast</i>	1	
NASAL ALLERGY	1	OTC
<i>nebusal inhalation solution for nebulization 3 %</i>	1	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	4	
NUCALA	5	PA; SP; LA; QL (1 per 28 days)
OFEV	5	PA; SP; QL (2 per 1 day)
OMNARIS	4	ST
OPSUMIT	5	PA; LA; QL (20 per 1 day)
ORKAMBI ORAL GRANULES IN PACKET	5	PA; SP; QL (20 per 1 day)
ORKAMBI ORAL TABLET	5	PA; SP; QL (4 per 1 day)
ORLADEYO	5	PA; LA; QL (10 per 1 day)
PERFOROMIST	4	
<i>pirfenidone oral capsule</i>	5	PA; SP; QL (6 per 1 day)
<i>pirfenidone oral tablet 267 mg</i>	5	PA; SP; QL (6.7 per 1 day)
PIRFENIDONE ORAL TABLET 534 MG	5	PA; QL (3 per 1 day)
<i>pirfenidone oral tablet 801 mg</i>	5	PA; SP; QL (3 per 1 day)
PROAIR DIGIHALER	4	PA
PROAIR RESPICLICK	4	PA
PROVENTIL HFA	4	PA
PULMICORT	4	
PULMICORT FLEXHALER	3	
<i>pulmosal</i>	1	
PULMOZYME	5	PA; SP; QL (5 per 1 day)
QNASL	4	ST
QVAR REDIHALER	3	

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

Drug Name	Drug Tier	Requirements / Limits
REVATIO ORAL SUSPENSION FOR RECONSTITUTION	5	PA; SP; QL (6 per 1 day)
REVATIO ORAL TABLET	5	PA; SP; QL (3 per 1 day)
<i>roflumilast oral tablet 250 mcg</i>	2	QL (10 per 1 day)
<i>roflumilast oral tablet 500 mcg</i>	2	QL (1 per 1 day)
RUCONEST	5	PA; QL (10 per 28 days)
RYALTRIS	CED	PA; QL (20 per 90 days)
<i>sajazir</i>	5	PA; SP; QL (20 per 28 days)
SEREVENT DISKUS	3	
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution</i>	5	PA; SP; QL (6 per 1 day)
<i>sildenafil (pulm.hypertension) oral tablet</i>	5	PA; SP; QL (3 per 1 day)
SINGULAIR	4	
<i>sodium chloride inhalation</i>	1	
SPIRIVA RESPIMAT	3	
SPIRIVA WITH HANDIHALER	CED	PA
STIOLTO RESPIMAT	3	
STRIVERDI RESPIMAT	3	
SYMBICORT	4	PA
SYMDEKO	5	PA; SP; QL (20 per 1 day)
<i>tadalafil (pulm. hypertension)</i>	5	PA; SP; QL (20 per 1 day)
TADLIQ	5	PA; QL (20 per 1 day)
TAKHZYRO SUBCUTANEOUS SOLUTION	5	PA; LA; QL (20 per 28 days)
TAKHZYRO SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; LA; QL (1 per 28 days)
TAKHZYRO SUBCUTANEOUS SYRINGE 300 MG/2 ML (150 MG/ML)	5	PA; LA; QL (20 per 28 days)
<i>terbutaline oral</i>	1	
TEZSPIRE	5	PA; QL (20 per 28 days)
THEO-24	4	
<i>theophylline oral elixir</i>	CED	PA
<i>theophylline oral solution</i>	CED	PA
<i>theophylline oral tablet extended release 12 hr</i>	1	
<i>theophylline oral tablet extended release 24 hr</i>	1	
<i>tiotropium bromide</i>	CED	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
TRACLEER ORAL TABLET	5	PA; SP; LA; QL (20 per 1 day)
TRACLEER ORAL TABLET FOR SUSPENSION	5	PA; LA; QL (4 per 1 day)
TRELEGY ELLIPTA	3	
<i>triamcinolone acetonide nasal</i>	1	OTC
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL	5	PA; SP; QL (20 per 1 day)
TRIKAFTA ORAL TABLETS, SEQUENTIAL	5	PA; SP; QL (3 per 1 day)
TUDORZA PRESSAIR	4	ST
TYVASO	5	PA; SP; QL (20 per 365 days)
TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG (112)- 32 MCG (84), 16(112)-32(112) -48(28) MCG	5	PA; SP; QL (20 per 365 days)
TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 32 MCG, 48 MCG, 64 MCG	5	PA; SP; QL (20 per 30 days)
TYVASO REFILL KIT	5	PA; SP; QL (20 per 28 days)
TYVASO STARTER KIT	5	PA; SP; QL (20 per 365 days)
VENTAVIS	5	PA; SP; QL (9 per 1 day)
VENTOLIN HFA	1	
<i>wixela inh</i>	1	
XHANCE	4	PA; QL (10 per 30 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 150 MG/ML	5	PA; LA; QL (1 per 28 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 300 MG/2 ML	5	PA; LA; QL (2 per 28 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 75 MG/0.5 ML	5	PA; LA; QL (0.5 per 28 days)
XOLAIR SUBCUTANEOUS RECON SOLN	5	PA; LA; QL (20 per 28 days)
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML, 75 MG/0.5 ML	5	PA; LA; QL (20 per 28 days)
XOLAIR SUBCUTANEOUS SYRINGE 300 MG/2 ML	5	PA; LA; QL (2 per 28 days)
XOPENEX HFA	4	ST
YUPELRI	4	ST; QL (20 per 1 day)
<i>zafirlukast</i>	2	
ZETONNA	4	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>zileuton</i>	2	PA; QL (4 per 1 day)
ZYFLO	4	PA; QL (4.5 per 1 day)
<b>UROLOGICALS</b>		
<b>ANTICHOLINERGICS &amp; ANTISPASMODICS</b>		
<i>darifenacin</i>	2	
DETROL	4	
DETROL LA	4	
<i>fesoterodine</i>	2	ST
<i>flavoxate</i>	1	
GELNIQUE TRANSDERMAL GEL IN PACKET	CED	PA
GEMTESA	4	ST; QL (10 per 1 day)
MYRBETRIQ ORAL SUSPENSION,EXTENDED REL RECON	CED	PA
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR	4	ST
<i>oxybutynin chloride oral syrup</i>	1	
OXYBUTYNIN CHLORIDE ORAL TABLET 2.5 MG	CED	PA
<i>oxybutynin chloride oral tablet 5 mg</i>	1	
<i>oxybutynin chloride oral tablet extended release 24hr</i>	1	
OXYTROL	CED	PA
<i>solifenacin</i>	1	
<i>tolterodine</i>	2	
TOVIAZ	4	ST
<i>trospium oral capsule,extended release 24hr</i>	2	
<i>trospium oral tablet</i>	1	
VESICARE	4	
VESICARE LS	CED	PA
<b>BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY</b>		
<i>alfuzosin</i>	1	
AVODART	4	
<i>dutasteride</i>	1	
<i>dutasteride-tamsulosin</i>	2	
ENTADFI	CED	PA; QL (1 per 1 day)

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>finasteride oral tablet 5 mg</i>	1	
FLOMAX	4	
JALYN	4	
PROSCAR	4	
RAPAFLO	4	
<i>silodosin</i>	2	
<i>tamsulosin</i>	1	
UROXATRAL	4	
<b>CHOLINERGIC STIMULANTS</b>		
<i>bethanechol chloride</i>	1	
<b>MISCELLANEOUS UROLOGICALS</b>		
CYSTAGON	5	SP; LA
ELMIRON	4	
K-PHOS NO 2	4	
OXLUMO	5	PA
<i>potassium citrate oral tablet extended release</i>	1	
PROCYSBI	5	PA; SP
UROCIT-K 10	4	
UROCIT-K 15	4	
UROCIT-K 5	4	
<b>URINARY ANESTHETICS</b>		
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	1	
PYRIDIUM	4	
<b>VITAMINS, HEMATINICS &amp; ELECTROLYTES</b>		
<b>ELECTROLYTES</b>		
<i>calcium acetate(phosphat bind) oral capsule</i>	1	QL (12 per 1 day)
<i>calcium acetate(phosphat bind) oral tablet</i>	1	QL (20 per 1 day)
<i>effer-k oral tablet, effervescent 25 meq</i>	1	
GALZIN	4	
<i>klor-con</i>	CED	PA
<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</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
klor-con m20	1	
klor-con/ef	1	
K-TAB ORAL TABLET EXTENDED RELEASE 20 MEQ	4	
POKONZA	CED	PA; QL (1 per 1 day)
<i>potassium chloride oral capsule, extended release</i>	1	
<i>potassium chloride oral liquid</i>	1	
<i>potassium chloride oral packet</i>	CED	PA
<i>potassium chloride oral tablet extended release</i>	1	
<i>potassium chloride oral tablet,er particles/crystals</i>	1	
<b>MISCELLANEOUS VITAMINS, HEMATINICS, &amp; ELECTROLYTES</b>		
DOJOLVI	5	PA; LA
<b>VITAMINS &amp; HEMATINICS</b>		
<i>b complex 1 (with folic acid)</i>	9	ACA; OTC
<i>b complex-vitamin c-folic acid oral tablet</i>	9	ACA; OTC
<i>balanced b-100 oral tablet</i>	9	ACA; OTC
<i>bal-care dha</i>	1	
<i>b-complex with vitamin c oral tablet 400-500 mcg-mg</i>	9	ACA; OTC
<i>classic prenatal</i>	9	ACA; OTC
<i>c-nate dha</i>	1	
<i>complete natal dha</i>	1	
<i>cyanocobalamin (vitamin b-12) injection</i>	1	
<i>dalyvite 800 oral tablet</i>	9	ACA; OTC
<i>dodex</i>	1	
DRISDOL	4	
<i>elite-ob</i>	1	
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	1	
<i>ferocon</i>	CED	ACA; OTC
<i>fluoride (sodium) oral drops</i>	9	ACA; OTC
<i>fluoride (sodium) oral tablet,chewable</i>	9	ACA; OTC
<i>folic acid oral tablet 1 mg</i>	1	
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	9	ACA; OTC
<i>folitab</i>	9	ACA; OTC

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>folivane-ob</i>	1	
<i>foltabs 800</i>	9	ACA; OTC
<i>full spectrum b-vitamin c</i>	9	ACA; OTC
<i>kobee</i>	9	ACA; OTC
<i>ludent fluoride</i>	9	ACA; OTC
<i>m-natal plus</i>	1	
<i>multi-vitamin with fluoride</i>	9	ACA; OTC
<i>mvc-fluoride</i>	9	ACA; OTC
<i>mynatal</i>	1	
<i>mynatal plus</i>	1	
<i>mynatal-z</i>	1	
<i>nephronex-sl</i>	CED	ACA; OTC
<i>newgen</i>	1	
<i>one daily prenatal</i>	9	ACA; OTC
<i>pnv-dha</i>	1	
<i>pnv-omega</i>	1	
<i>pnv-select</i>	1	
<i>pr natal 400</i>	1	
<i>pr natal 400 ec</i>	1	
<i>pr natal 430</i>	1	
<i>pr natal 430 ec</i>	1	
<i>prenatabs fa</i>	1	
<i>prenatabs rx</i>	1	
<i>prenatal complete</i>	9	ACA; OTC
<i>prenatal multi-dha (algal oil)</i>	9	ACA; OTC
<i>prenatal multivitamins</i>	9	ACA; OTC
<i>prenatal one daily</i>	9	ACA; OTC
<i>prenatal oral tablet 28 mg iron- 800 mcg</i>	9	ACA; OTC
<i>prenatal plus</i>	1	
<i>prenatal plus (calcium carb)</i>	1	
<i>prenatal vit no.179-iron-folic</i>	9	ACA; OTC
<i>prenatal vitamin oral tablet 27 mg iron- 0.8 mg</i>	9	ACA; OTC
<i>prenatal vitamin with minerals</i>	9	ACA; OTC
<i>prenatal-u</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>rena-vite</i>	9	ACA; OTC
<i>se-natal 19 chewable</i>	1	
<i>se-natal-19</i>	1	
<i>stress formula with iron</i>	9	ACA; OTC
<i>stress formula with iron(sulf)</i>	9	ACA; OTC
<i>super b maxi complex</i>	9	ACA; OTC
<i>super quints</i>	9	ACA; OTC
<i>taron-c dha</i>	1	
<i>tricon</i>	CED	ACA; OTC
<i>trinatal rx 1</i>	1	
<i>trinate</i>	1	
<i>tri-vitamin with fluoride</i>	9	ACA; OTC
<i>vitamin b complex-folic acid oral tablet</i>	9	ACA; OTC
<i>vitamins a,c,d and fluoride</i>	9	ACA; OTC
<i>wescap-c dha</i>	1	
<i>wesnatal dha complete</i>	1	
<i>westab plus</i>	1	
<i>zatean-pn dha</i>	1	
<i>zatean-pn plus</i>	1	

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

# Index

<b>2</b>	ACIPHEX.....	113	ADVAIR HFA.....	141
24 HOUR NASAL ALLERGY .....	acitretin .....	77	ADZENYS XR-ODT .....	51
.....140	ACTEMRA .....	122	AEMCOLO .....	18
<b>A</b>	ACTEMRA ACTPEN.....	122	AEROCHAMBER MINI .....	96
<i>abacavir</i> .....13	ACTHAR.....	95	AEROCHAMBER PLUS .....	
<i>abacavir-lamivudine</i> .....13	ACTHIB (PF) .....	118	FLOW-VU.....	96
ABILIFY .....	ACTICLATE.....	21	AEROCHAMBER PLUS Z .....	
51	ACTIMMUNE .....	116	STAT .....	96
ABILIFY ASIMTUFII.....51	ACTIVELLA.....	125	AEROVENT PLUS .....	96
ABILIFY MAINTENA.....51	ACTIVE-PAC .....	32	AFINITOR .....	23
ABILIFY MYCITE	ACTONEL .....	121	AFINITOR DISPERZ .....	23
MAINTENANCE KIT .....	ACTOPLUS MET .....	102	<i>afirmelle</i> .....	128
51	ACTOS .....	102	AFLURIA QD 2023-24(3YR	
ABILIFY MYCITE	ACULAR.....	136	UP)(PF).....	118
STARTER KIT .....	ACULAR LS .....	136	AFLURIA QUAD 2023-	
51	ACUVAIL (PF) .....	136	2024(6MO UP).....	118
<i>abiraterone</i> .....	<i>acyclovir</i> .....	13, 86	AFREZZA .....	98
23	ACZONE .....	80	<i>after pill</i> .....	128
ABRILADA(CF) .....	ADACEL(TDAP		AFTERA .....	128
122	ADOLESN/ADULT)(PF)		AGRYLIN .....	90
ABRILADA(CF) PEN .....	.....118		AIMOVIG AUTOINJECTOR .....	38
122	ADALIMUMAB-AACF....	122	AIRDUO DIGIHALER.....	141
ABRYSVO.....118	ADALIMUMAB-ADAZ....	122	AIRDUO RESPICLICK.....	141
ABSORICA.....80	ADALIMUMAB-ADBM...122		AIRSUPRA .....	141
ABSORICA LD .....	ADALIMUMAB-ADBM(CF)		AJOVY AUTOINJECTOR ..38	
80	PEN CROHNS .....	122	AJOVY SYRINGE .....	38
<i>acamprosate</i> .....	ADALIMUMAB-ADBM(CF)		AKEEGA .....	23
90	PEN PS-UV .....	122	AKLIEF .....	81
ACANYA.....80	ADALIMUMAB-FKJP .....	122	AKTEN (PF) .....	135
<i>acarbose</i> .....	<i>adapalene</i> .....	80	AKYNZEO (NETUPITANT)	
102	ADAPALENE .....	80	.....107	
ACCOLATE.....140	<i>adapalene-benzoyl peroxide</i> .80		ALA-SCALP .....	86
ACCU-CHEK AVIVA PLUS	ADASUVE.....	51	<i>albendazole</i> .....	18
TEST STRP .....	ADBRY .....	79	<i>albuterol sulfate</i> .....	141
96	ADCIRCA .....	141	ALCAINE .....	135
ACCU-CHEK GUIDE	ADDERALL .....	51	<i>alclometasone</i> .....	86
GLUCOSE METER .....	ADDERALL XR.....	51	ALDACTONE .....	66
97	ADDYI .....	51	ALECENSA .....	23
ACCU-CHEK GUIDE L1-L2	<i>adefovir</i> .....	13	<i>alendronate</i> .....	121
CTRL SOL .....	ADEMPAS .....	141	ALFERON N .....	116
97	ADLARITY .....	39	<i>alfuzosin</i> .....	146
ACCU-CHEK GUIDE ME	ADMELOG SOLOSTAR U-		ALINIA .....	18
GLUCOSE MTR .....	100 INSULIN .....	98	<i>aliskiren</i> .....	66
97	ADMELOG U-100 INSULIN		ALKERAN .....	23
ACCU-CHEK GUIDE TEST	LISPRO .....	98	ALKINDI SPRINKLE .....	95
STRIPS .....	<i>adult aspirin regimen</i> .....	46	<i>allergy eye (ketotifen)</i> .....	135
96	ADVAIR DISKUS .....	141		
ACCU-CHEK SMARTVIEW				
CONTRL SOL .....				
97				
ACCU-CHEK SMARTVIEW				
TEST STRIP .....				
96				
ACCUPRIL .....				
66				
ACCURETIC .....				
66				
<i>accutane</i> .....				
80				
acebutolol .....				
66				
<i>acetaminophen-caff-</i>				
<i>dihydrocod</i> .....42				
<i>acetaminophen-codeine</i> .....42				
<i>acetazolamide</i> .....137				
<i>acetic acid</i> .....				
94				
<i>acetylcysteine</i> .....				
141				

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

<i>allopurinol</i>	121	<i>amlodipine-atorvastatin</i>	74	APTIOM	32
ALLOPURINOL	121	<i>amlodipine-benazepril</i>	66	APTIVUS	13
<i>almotriptan malate</i>	38	<i>amlodipine-olmesartan</i>	66	ARAKODA	18
ALOCRIL	135	<i>amlodipine-valsartan</i>	66	<i>aranelle</i> (28)	128
ALOGLIPTIN	102	<i>amlodipine-valsartan-hcthiazid</i>	66	ARANESP (IN POLYSORBATE)	114, 115
ALOGLIPTIN-METFORMIN	102			ARAVA	122
ALOGLIPTIN- PIOGLITAZONE	102	<i>ammonium lactate</i>	79	ARAZLO	81
ALOMIDE	135	<i>amnesteem</i>	81	ARCALYST	115
<i>alosetron</i>	107	<i>amoxapine</i>	51	AREXVY (PF)	118
ALPHAGAN P	139	<i>amoxicil-clarithromy-</i>		<i>arformoterol</i>	141
<i>alprazolam</i>	51	<i>lansopraz</i>	113	ARICEPT	39
<i>alprazolam intensol</i>	51	<i>amoxicillin</i>	20	ARIKAYCE	18
ALREX	138	<i>amoxicillin-pot clavulanate</i>	20	ARIMIDEX	24
ALTABAX	84	<i>amphetamine sulfate</i>	51, 52	<i>aripiprazole</i>	52
<i>altacaine</i>	135	<i>ampicillin</i>	20	ARISTADA	52
ALTACE	66	<i>AMPYRA</i>	39	ARISTADA INITIO	52
<i>altavera</i> (28)	128	<i>AMRIX</i>	41	ARIIXTRA	72
ALTOPREV	74	<i>AMZEEQ</i>	81	<i>armodafinil</i>	52
ALTRENO	81	<i>ANAFRANIL</i>	52	ARMONAIR DIGIHALER	141
ALUNBRIG	23, 24	<i>anagrelide</i>	90	ARMOUR THYROID	105
ALVESCO	141	<i>ANALPRAM-HC</i>	77, 107	ARNUITY ELLIPTA	141
<i>alvimopan</i>	107	<i>ANALPRAM-HC SINGLES</i>		AROMASIN	24
<i>alyacen 1/35</i> (28)	128		108	ARTHROTEC 50	46
<i>alyacen 7/7/7</i> (28)	128	<i>ANAPROX DS</i>	46	ARTHROTEC 75	46
<i>alyq</i>	141	<i>anaspaz</i>	106	<i>ascomp with codeine</i>	42
<i>amabelz</i>	125	<i>anastrozole</i>	24	<i>asenapine maleate</i>	52
<i>amantadine hcl</i>	13	<i>ANCOBON</i>	12	<i>ashlyna</i>	128
AMBIEN	51	<i>ANDRODERM</i>	100	ASMANEX HFA	141
AMBIEN CR	51	<i>ANDROGEL</i>	100	ASMANEX TWISTHALER	
<i>ambrisentan</i>	141	<i>ANGELIQ</i>	125		141
<i>amcinonide</i>	86	<i>ANNOVERA</i>	127	<i>aspirin</i>	46
<i>amethia</i>	128	<i>ANODYNE LPT</i>	84	<i>aspirin childrens</i>	46
<i>amethyst</i> (28)	128	<i>ANORO ELLIPTA</i>	141	<i>aspirin-dipyridamole</i>	72
AMICAR	72	<i>ANTIVERT</i>	108	ASPIRIN-OMEPRAZOLE	73
<i>amikacin</i>	18	<i>anucort-hc</i>	108	ASPRUZZO SPRINKLE	76
<i>amiloride</i>	66	<i>ANUSOL-HC</i>	108	ASTAGRAF XL	24
<i>amiloride-hydrochlorothiazide</i>	66	<i>ANZEMET</i>	108	ATACAND	66
		<i>apexicon e</i>	86	ATACAND HCT	66
		<i>APIDRA SOLOSTAR U-100</i>		<i>atazanavir</i>	13
		<i>INSULIN</i>	98	ATELVIA	121
		<i>APIDRA U-100 INSULIN</i>	98	<i>atenolol</i>	66
		<i>APLENZIN</i>	52	<i>atenolol-chlorthalidone</i>	66
		<i>APOKYN</i>	37	ATIVAN	52
		<i>apomorphine</i>	37	<i>atomoxetine</i>	52
		<i>apraclonidine</i>	139	ATORVALIQ	74
		<i>aprepitant</i>	108	<i>atorvastatin</i>	74
		<i>APRETUDE</i>	13	<i>atovaquone</i>	18
		<i>apri</i>	128	<i>atovaquone-proguanil</i>	18
		<i>APRISO</i>	108	ATRALIN	81
		<i>APTENSIO XR</i>	52		

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

ATRIPLA .....	13
<i>atropine</i> .....	135
ATROPINE SULFATE (PF) .....	135
ATROVENT HFA .....	141
AUBAGIO .....	116
<i>aubra</i> .....	128
<i>aubra eq</i> .....	128
AUGMENTIN .....	20
AUGMENTIN ES-600 .....	20
AUGMENTIN XR .....	20
AUGTYRO .....	24
<i>aurovela 1.5/30 (21)</i> .....	128
<i>aurovela 1/20 (21)</i> .....	128
<i>aurovela 24 fe</i> .....	128
<i>aurovela fe 1.5/30 (28)</i> .....	128
<i>aurovela fe 1-20 (28)</i> .....	128
AURYXIA .....	107
AUSTEDO .....	39
AUSTEDO XR .....	39
AUSTEDO XR TITRATION KT(WK1-4) .....	39
AUVELITY .....	52
AUVI-Q .....	139
AVALIDE .....	66
AVAPRO .....	67
<i>avar</i> .....	81
<i>aviane</i> .....	128
<i>avidoxy</i> .....	21
AVIDOXY DK .....	21
AVODART .....	146
AVONEX .....	116
<i>ayuna</i> .....	128
AYVAKIT .....	24
AZASAN .....	24
AZASITE .....	134
<i>azathioprine</i> .....	24
<i>azelaic acid</i> .....	81
<i>azelastine</i> .....	93, 135
<i>azelastine-fluticasone</i> .....	141
AZELEX .....	81
AZILECT .....	37
<i>azithromycin</i> .....	17
AZOPT .....	137
AZOR .....	67
AZSTARYS .....	52
AZULFIDINE .....	108
AZULFIDINE EN-TABS ..	108
<i>azurette (28)</i> .....	128
<b>B</b>	
<i>b complex 1 (with folic acid)</i> .....	148
<i>b complex-vitamin c-folic acid</i> .....	148
<i>bacitracin</i> .....	134
<i>bacitracin-polymyxin b</i> .....	134
<i>baclofen</i> .....	41
BACLOFEN .....	41
BACTRIM .....	21
BACTRIM DS .....	21
BAFIERTAM .....	116
<i>balanced b-100</i> .....	148
<i>bal-care dha</i> .....	148
BALCOLTRA .....	128
<i>balsalazide</i> .....	108
BALVERSA .....	24
<i>balziva (28)</i> .....	129
BANZEL .....	32
BAQSIMI .....	97
BARACLUIDE .....	13
BASAGLAR KWIKPEN U-100 INSULIN .....	98
BASAGLAR TEMPO PEN(U-100)INSLN .....	98
BAXDELA .....	21
<i>bayer low dose aspirin</i> .....	46
<i>b-complex with vitamin c</i> .....	148
BD INTEGRA NEEDLE .....	97
BD MICROTAINER LANCET .....	97
BD SPECIALTY USE NEEDLES .....	97
BD ULTRA-FINE NANO PEN NEEDLE .....	97
BELBUCA .....	42
BELSOMRA .....	52
<i>benazepril</i> .....	67
<i>benazepril-hydrochlorothiazide</i> .....	67
BENICAR .....	67
BENICAR HCT .....	67
BENLYSTA .....	122
BENZAMYCIN .....	81
<i>benzepro</i> .....	81
BENZEPRO (MICROSPHERES) .....	81
BENZNIDAZOLE .....	18
<i>benzonataate</i> .....	140
<i>benztropine</i> .....	37
<i>bepotastine besilate</i> .....	135
BEPREVE .....	135
<i>beser</i> .....	86
BESER KIT .....	86
BESIVANCE .....	134
BESREMI .....	116
BETADINE OPHTHALMIC PREP .....	134
<i>betaine</i> .....	108
<i>betamethasone dipropionate</i> .....	86
<i>betamethasone valerate</i> .....	86
<i>betamethasone, augmented</i> .....	86, 87
BETAPACE .....	65
BETAPACE AF .....	65
BETASERON .....	116
<i>betaxolol</i> .....	67, 134
<i>bethanechol chloride</i> .....	147
BETHKIS .....	18
BETIMOL .....	134
BETOPTIC S .....	134
BEVESPI AEROSPHERE .....	141
<i>bexarotene</i> .....	24
BEXSERO .....	118
BEYAZ .....	129
<i>bicalutamide</i> .....	24
BIDIL .....	67
BIJUVA .....	125
BIKTARVY .....	13
BILTRICIDE .....	18
<i>bimatoprost</i> .....	137
BIMZELX .....	77
BINOSTO .....	121
<i>bismuth subcit k-metronidz-tn</i> .....	113
<i>bisoprolol fumarate</i> .....	67
<i>bisoprolol-hydrochlorothiazide</i> .....	67
<i>blisovi 24 fe</i> .....	129
<i>blisovi fe 1.5/30 (28)</i> .....	129
<i>blisovi fe 1/20 (28)</i> .....	129
BONJESTA .....	108
BOOSTRIX TDAP .....	118
<i>bosentan</i> .....	141
BOSULIF .....	24
BRAFTOVI .....	24
BRENZAVVY .....	102
BREO ELLIPTA .....	141
BREXAFEMME .....	12
<i>breyna</i> .....	141

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

BREZTRI AEROSPHERE	141
<i>briellyn</i>	129
BRILINTA	73
<i>brimonidine</i>	81, 139
<i>brimonidine-timolol</i>	137
<i>brinzolamide</i>	137
BRIVIACT	32
BRIXADI	42, 43
BROMFED DM	140
<i>bromfenac</i>	136
<i>bromocriptine</i>	37
<i>brompheniramine-pseudoeph-</i> <i>dm</i>	140
BROMSITE	136
BRONCHITOL	141
BROVANA	141
BRUKINSA	24
BRYHALI	87
<i>budesonide</i>	108, 141, 142
<i>budesonide-formoterol</i>	142
<i>bumetanide</i>	67
BUPAP	43
BUPHENYL	90, 91
<i>buprenorphine</i>	43
<i>buprenorphine hcl</i>	43
<i>buprenorphine-naloxone</i>	46
<i>bupropion hcl</i>	52, 53
BUPROPION HCL	53
<i>bupropion hcl (smoking deter)</i>	92
buspirone	53
<i>butalbital compound w/codeine</i>	43
<i>butalbital-acetaminop-caf-cod</i>	43
<i>butalbital-acetaminophen</i>	43
<i>butalbital-acetaminophen-caff</i>	43
<i>butalbital-aspirin-caffeine</i>	43
<i>butorphanol</i>	46
BUTRANS	43
BYDUREON BCISE	102
BYETTA	103
BYLVAY	108
BYSTOLIC	67
C	
CABENUVA	13
<i>cabergoline</i>	100
CABLIVI	73
CABOMETYX	24
CABTREO	81
CADUET	74
<i>caffeine citrate</i>	91
<i>calcipotriene</i>	77
CALCIPOTRIENE	77
<i>calcipotriene-betamethasone</i>	77
<i>calcitonin (salmon)</i>	100
<i>calcitriol</i>	77, 100
<i>calcium acetate(phosphat bind)</i>	147
CALQUENCE (ACALABRUTINIB MAL)	24
<i>calsodore</i>	77
CALSODORE KIT	77
CAMBIA	46
<i>camila</i>	125
<i>camrese</i>	129
<i>camrese lo</i>	129
CAMZYOS	76
CANASA	108
<i>candesartan</i>	67
<i>candesartan-</i> <i>hydrochlorothiazid</i>	67
<i>capecitabine</i>	24
CAPEX	87
CAPLYTA	53
CAPRELSA	24
CAPSFENAC PAK	46
CAPSINAC	46
<i>captopril</i>	67
<i>captopril-hydrochlorothiazide</i>	67
CARAC	79
CARAFATE	113
CARBAGLU	91
<i>carbamazepine</i>	32, 33
CARBATROL	33
<i>carbidopa</i>	37
<i>carbidopa-levodopa</i>	37
<i>carbidopa-levodopa-</i> <i>entacapone</i>	37
<i>carbinoxamine maleate</i>	139
CARDIZEM	67
CARDIZEM CD	67
CARDIZEM LA	67
CARDURA	67
CARDURA XL	67
<i>carglumic acid</i>	91
<i>carisoprodol</i>	41
<i>carisoprodol-aspirin</i>	41
<i>carisoprodol-aspirin-codeine</i>	41
CARNITOR	91
CARNITOR (SUGAR-FREE)	91
CAROSPIR	67
<i>carteolol</i>	134
<i>cartia xt</i>	67
<i>carvedilol</i>	67
<i>carvedilol phosphate</i>	67
CASODEX	24
CATAPRES-TTS-1	67
CATAPRES-TTS-2	67
CATAPRES-TTS-3	67
CAYA CONTOURED	125
CAYSTON	18
<i>caziant (28)</i>	129
<i>cefaclor</i>	16, 17
<i>cefadroxil</i>	17
<i>cefdinir</i>	17
<i>cefixime</i>	17
<i>cefpodoxime</i>	17
<i>cefprozil</i>	17
<i>cefuroxime axetil</i>	17
CELEBREX	46
<i>celecoxib</i>	46
CELEXA	53
CELLCEPT	24
CELONTIN	33
CENTANY	84
CENTANY AT	84
<i>cephalexin</i>	17
CEQUA	135
CERDELGA	100
<i>cetirizine</i>	139
CETRAXAL	94
<i>cevimeline</i>	91
CHANTIX	93
CHANTIX CONTINUING MONTH BOX	92
CHANTIX STARTING MONTH BOX	93
<i>charlotte 24 fe</i>	129
<i>chateal (28)</i>	129
<i>chateal eq (28)</i>	129
CHEMET	91
CHENODAL	108
<i>chlordiazepoxide hcl</i>	53
<i>chlordiazepoxide-clidinium</i>	106

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

<i>chlorhexidine gluconate</i>	93	CLIMARA PRO	125	COMPACT SPACE	
<i>chloroquine phosphate</i>	18	<i>clindacin</i>	81	CHAMBER	96
<i>chlorpromazine</i>	53	<i>clindacin etz</i>	81	COMPAZINE	108
<i>chlorthalidone</i>	67	CLINDACIN ETZ	81	COMPLERA	13
<i>chlorzoxazone</i>	41	<i>clindacin p</i>	81	<i>complete natal dha</i>	148
CHOLBAM	108	CLINDACIN PAC	81	<i>compro</i>	109
<i>cholestyramine (with sugar)</i>	74	CLINDAGEL	81	CONCERTA	54
<i>cholestyramine light</i>	74	<i>clindamycin hcl</i>	18	CONDYLOX	79
CHORIONIC		<i>clindamycin pediatric</i>	18	CONJUPRI	68
GONADOTROPIN,		<i>clindamycin phosphate</i>	81, 127	CONSENSI	68
HUMAN	100	<i>clindamycin-benzoyl peroxide</i>		<i>constulose</i>	109
CIBINQO	79		81	CONZIP	47
ciclodan	85	<i>clindamycin-tretinoin</i>	82	COPAXONE	116
CICLODAN KIT	85	CLINDESSE	127	COPIKTRA	24
ciclopirox	85	<i>clobazam</i>	33	CORDRAN	87
<i>ciclopirox-ure-camph-menth-euc</i>	85	<i>clobetasol</i>	87	CORDRAN TAPE LARGE	
cilostazol	73	<i>clobetasol-emollient</i>	87	ROLL	87
CILOXAN	134	CLOBEX	87	COREG	68
CIMDUO	13	<i>clocortolone pivalate</i>	87	COREG CR	68
cimetidine	113	<i>clodan</i>	87	CORGARD	68
CIMZIA	108	CLODAN KIT	87	CORLANOR	76
CIMZIA POWDER FOR RECONST	108	<i>clomipramine</i>	53	CORTANE-B	79
cinacalcet	100	<i>clonazepam</i>	33	CORTEF	95
CIPRO	21	<i>clonidine</i>	67	CORTENEMA	109
CIPRO HC	94	<i>clonidine hcl</i>	53, 67	CORTIFOAM	109
ciprofloxacin	21	CLONIDINE HCL	68	<i>cortisone</i>	95
<i>ciprofloxacin hcl</i>	21, 94, 134	<i>clopидогрел</i>	73	CORTISPORIN-TC	95
<i>ciprofloxacin-dexamethasone</i>	94	<i>clorazepate dipotassium</i>	53	CORTROPHIN GEL	95
CIPROFLOXACIN-FLUOCINOLONE	95	<i>clotrimazole</i>	12	COSENTYX	78
<i>citalopram</i>	53	<i>clotrimazole-betamethasone</i>	85	COSENTYX (2 SYRINGES)	
CITALOPRAM	53	<i>clozapine</i>	53, 54		77
<i>citrate of magnesia</i>	108	CLOZARIL	54	COSENTYX PEN	78
<i>citroma</i>	108	<i>c-nate dha</i>	148	COSENTYX PEN (2 PENS)	78
<i>claravis</i>	81	COARTEM	18	COSENTYX UNREADY	
CLARINEX	139	<i>codeine sulfate</i>	43	PEN	78
CLARINEX-D 12 HOUR	140	<i>codeine-butalbital-asa-caff</i>	43	COSOPT	137
<i>clarithromycin</i>	17	<i>codeine-guaifenesin</i>	140	COSOPT (PF)	137
<i>classic prenatal</i>	148	COLAZAL	108	COTELLIC	24
<i>clearlax</i>	108	<i>colchicine</i>	121	COTEMPLA XR-ODT	54
<i>clemastine</i>	139	COLCRYS	121	<i>covaryx</i>	125
CLENPIQ	108	<i>colesevelam</i>	74	<i>covaryx h.s.</i>	125
CLEOCIN	127	COLESTID	74	COXANTO	47
CLEOCIN HCL	18	COLESTID FLAVORED	74	COZAAR	68
CLEOCIN PEDIATRIC	18	<i>colestipol</i>	74	CREON	109
CLEOCIN T	81	COMBIGAN	137	CRESEMBA	12
CLIMARA	125	COMBIPATCH	125	CRESTOR	75
		COMBIVENT RESPIMAT	142	CRINONE	125
		COMETRIQ	24	<i>cromolyn</i>	109, 135, 142
		COMIRNATY 2023-24 (12Y UP)(PF)	118	<i>crotan</i>	90
				<i>cryselle (28)</i>	129

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

CUPRIMINE .....	122	<i>darunavir</i> .....	13
<i>curae</i> .....	129	<i>dasetta 1/35 (28)</i> .....	129
CUVPOSA .....	106	<i>dasetta 7/7/7 (28)</i> .....	129
CUVRIOR .....	91	<b>DAURISMO</b> .....	25
<i>cyanocobalamin (vitamin b-12)</i> .....	148	<b>DAYBUE</b> .....	40
<i>cyclobenzaprine</i> .....	41	<b>DAYPRO</b> .....	47
CYCLOGYL .....	135	<i>daysee</i> .....	129
CYCLOMYDRIL .....	139	<b>DAYTRANA</b> .....	54
<i>cyclopentolate</i> .....	135	<b>DAYVIGO</b> .....	54
<i>cyclophosphamide</i> .....	25	<b>DDAVP</b> .....	100
CYCLOPHOSPHAMIDE .....	25	<i>deblitane</i> .....	125
CYCLOSERINE .....	18	<i>deferasirox</i> .....	91
CYCLOSET .....	103	<i>deferiprone</i> .....	91
<i>cyclosporine</i> .....	25, 136	<i>deflazacort</i> .....	95
<i>cyclosporine modified</i> .....	25	<b>DELSTRIGO</b> .....	13
CYLTEZO(CF) .....	122	<b>DELZICOL</b> .....	109
CYLTEZO(CF) PEN .....	122	<i>demeclacycline</i> .....	21
CYLTEZO(CF) PEN CROHN'S-UC-HS .....	122	<b>DEM SER</b> .....	68
CYMBALTA .....	54	<b>DENAVIR</b> .....	86
<i>cyproheptadine</i> .....	139	<b>DENGVAXIA (PF)</b> .....	118
<i>cyred</i> .....	129	<i>denta 5000 plus</i> .....	93
<i>cyred eq</i> .....	129	<i>dentagel</i> .....	93
CYSTADANE .....	109	<b>DEPAKOTE</b> .....	33
CYSTADROPS .....	136	<b>DEPAKOTE ER</b> .....	33
CYSTAGON .....	147	<b>DEPAKOTE SPRINKLES</b> .....	33
CYSTARAN .....	136	<b>DEPEN TITRATABS</b> .....	122
CYTOMEL .....	105	<b>DEPO-PROVERA</b> .....	125
CYTOTEC .....	113	<b>DEPO-TESTOSTERONE</b> .....	100
<b>D</b>		<b>DERMA-SMOOTH/EFS BODY OIL</b> .....	87
<i>dabigatran etexilate</i> .....	73	<b>DERMA-SMOOTH/EFS SCALP OIL</b> .....	87
<i>dalfampridine</i> .....	39	<b>DERMAWERX SDS</b> .....	87
DALIRESP .....	142	<b>DERMOTIC OIL</b> .....	94
<i>danazol</i> .....	100	<b>DESCOVY</b> .....	13
DANTRIUM .....	41	<i>desipramine</i> .....	54
<i>dantrolene</i> .....	41	<i>desloratadine</i> .....	139
DAPAGLIFLOZ PROPANED-METFORMIN .....	103	<i>desmopressin</i> .....	101
DAPAGLIFLOZIN PROPANEDIOL .....	103	<b>DESMOPRESSIN</b> .....	101
<i>dapsone</i> .....	18, 82	<i>desog-e.estriadiol/e.estriadiol</i> .....	129
DAPTACEL (DTAP PEDIATRIC) (PF) .....	118	<b>desonide</b> .....	87
DARAPRIM .....	18	<i>desoximetasone</i> .....	87, 88
<i>darifenacin</i> .....	146	<b>DESOXYN</b> .....	54
DARTISLA .....	106	<b>DESVENLAFAXINE</b> .....	54
		<i>desvenlafaxine succinate</i> .....	54
		<b>DETROL</b> .....	146
		<b>DETROL LA</b> .....	146
		<i>dexabliss</i> .....	95
		<i>dexamethasone</i> .....	95
		<b>dexamethasone intensol</b> .....	95
		<i>dexamethasone sodium phosphate</i> .....	138
		<i>dexchlorpheniramine maleate</i> .....	139
		<b>DEXCOM G6 RECEIVER</b> .....	97
		<b>DEXCOM G6 SENSOR</b> .....	97
		<b>DEXCOM G6 TRANSMITTER</b> .....	97
		<b>DEXCOM G7 RECEIVER</b> .....	97
		<b>DEXCOM G7 SENSOR</b> .....	97
		<b>DEXEDRINE SPANSULE</b> .....	54
		<b>DEXILANT</b> .....	113
		<i>dexlansoprazole</i> .....	113
		<i>dexmethylphenidate</i> .....	54
		<i>dextroamphetamine sulfate</i> .....	54, 55
		<i>dextroamphetamine-amphetamine</i> .....	55
		<b>DHIVY</b> .....	37
		<b>DIACOMIT</b> .....	33
		<i>dialyvite 800</i> .....	148
		<i>diazepam</i> .....	33, 55
		<i>diazepam intensol</i> .....	55
		<i>diazoxide</i> .....	97
		<b>DIBENZYLINE</b> .....	68
		<i>dichlorphenamide</i> .....	40
		<b>DICLEGIS</b> .....	109
		<b>DICLOFENAC EPOLAMINE</b> .....	47
		<i>diclofenac potassium</i> .....	47
		<i>diclofenac sodium</i> .....	47, 79, 136
		<b>DICLOFENAC SUBMICRONIZED</b> .....	47
		<i>diclofenac-misoprostol</i> .....	47
		<b>DICLOFEX DC</b> .....	47
		<b>DICLOHEAL-60</b> .....	47
		<b>DICLOPR</b> .....	47
		<b>DICLOSAICIN</b> .....	47
		<b>DICLOTRAL</b> .....	47
		<i>dicloxacillin</i> .....	20
		<i>dicyclomine</i> .....	106
		<i>didanosine</i> .....	13
		<b>DIFFERIN</b> .....	82
		<b>DIFCID</b> .....	17
		<i>diflorasone</i> .....	88
		<b>DIFLUCAN</b> .....	12
		<i>diflunisal</i> .....	47
		<i>diluprednate</i> .....	138
		<i>digox</i> .....	72

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

<i>digoxin</i> .....	72
<i>dihydroergotamine</i> .....	38
DILANTIN .....	33
DILANTIN EXTENDED ....	33
DILANTIN INFATABS ....	33
DILANTIN-125 .....	33
DILAUDID .....	43
<i>diltiazem</i> .....	68
<i>dilt-xr</i> .....	68
DIMENTHO.....	47
<i>dimethyl fumarate</i> .....	117
DIOVAN .....	68
DIOVAN HCT .....	68
DIPENTUM .....	109
<i>diphenoxylate-atropine</i> .....	106
DIPROLENE (AUGMENTED).....	88
<i>dipyridamole</i> .....	73
DISALCID .....	47
<i>disopyramide phosphate</i> .....	65
<i>disulfiram</i> .....	91
DITHOL .....	47
DIURIL .....	68
<i>divalproex</i> .....	33
DIVIGEL.....	125
<i>dodex</i> .....	148
<i>dofetilide</i> .....	66
DOJOLVI.....	148
<i>dolishale</i> .....	129
DOLOTRANZ .....	84
<i>donepezil</i> .....	40
DOPTELET (15 TAB PACK) .....	73
DORAL .....	55
DORYX .....	21
DORYX MPC .....	21
<i>dorzolamide</i> .....	137
<i>dorzolamide-timolol</i> .....	137
<i>dorzolamide-timolol (pf)</i> .....	137
<i>dotti</i> .....	125
DOVATO .....	14
<i>doxazosin</i> .....	68
<i>doxepin</i> .....	55, 79
<i>doxercalciferol</i> .....	101
<i>doxycycline hyclate</i> .....	21
DOXYCYCLINE HYCLATE .....	21
<i>doxycycline monohydrate</i> .....	21, 22
DOXYCYCLINE MONOHYDRATE.....	22
<i>doxylamine-pyridoxine (vit b6)</i> .....	109
DRISDOL.....	148
DRIZALMA SPRINKLE.....	55
<i>dronabinol</i> .....	109
<i>drospirenone-e.estradiol-lm.fa</i> .....	129
<i>drospirenone-ethinyl estradiol</i> .....	129
DROXIA .....	25
<i>droxidopa</i> .....	91
DRYSOL DAB-O-MATIC ..	79
DUAKLIR PRESSAIR .....	142
DUAVEE.....	125
DUETACT .....	103
DUEXIS .....	47
<i>dulcolax (magnesium hydroxide)</i> .....	109
DULERA.....	142
<i>duloxetine</i> .....	55
DUOBRII .....	88
DUOPA .....	37
DUPIXENT PEN .....	79
DUPIXENT SYRINGE.....	79
DUREX AVANTI BARE REAL FEEL .....	125
DUREZOL .....	138
<i>dutasteride</i> .....	146
<i>dutasteride-tamsulosin</i> .....	146
DYANAVEL XR .....	55
DYMISTA.....	142
DYRENIUM .....	68
E <i>e.e.s. 400</i> .....	17
E.E.S. GRANULES.....	17
EASIVENT HOLDING CHAMBER .....	96
EC-NAPROSYN .....	47
<i>econazole</i> .....	85
<i>econtra ez</i> .....	129
<i>econtra one-step</i> .....	129
<i>ecotrin low strength</i> .....	47
ECOZA.....	85
EDARBI .....	68
EDARBYCLO.....	68
EDECRIN.....	68
EDLUAR.....	55
<i>ed-spaz</i> .....	106
EDURANT .....	14
<i>eemt</i> .....	125
<i>eemt hs</i> .....	125
<i>efavirenz</i> .....	14
<i>efavirenz-emtricitabin-tenofovir</i> .....	14
<i>efavirenz-lamivu-tenofovir disop</i> .....	14
<i>effer-k</i> .....	147
EFFEXOR XR.....	55
EFFIENT .....	73
EFUDEX .....	79
EGRIFTA SV .....	116
ELEPSIA XR.....	33
ELESTRIN .....	125
<i>eletriptan</i> .....	38
ELIDEL .....	79
ELIGARD .....	25
ELIGARD (3 MONTH) .....	25
ELIGARD (4 MONTH) .....	25
ELIGARD (6 MONTH) .....	25
ELIMITE .....	90
<i>elinet</i> .....	129
ELIQUIS .....	73
ELIQUIS DVT-PE TREAT 30D START .....	73
<i>elite-ob</i> .....	148
ELIXOPHYLLIN .....	142
ELLA .....	129
ELMIRON .....	147
<i>eluryng</i> .....	127
ELYXYB .....	38
EMCYT .....	25
EMEND .....	109
EMFLAZA .....	95
EMGALITY PEN .....	38
EMGALITY SYRINGE .....	38
<i>emreal</i> .....	84
EMSAM .....	55
<i>emtricitabine</i> .....	14
<i>emtricitabine-tenofovir (tdf)</i> .....	14
EMTRIVA .....	14
EMVERM .....	18
<i>enalapril maleate</i> .....	68
<i>enalapril-hydrochlorothiazide</i> .....	68
ENBREL .....	123
ENBREL MINI .....	122
ENBREL SURECLICK .....	123
ENDARI .....	91

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

<i>endocet</i>	43	ERYPED 400	17	EXELON PATCH	40
ENGERIX-B (PF)	118	<i>ery-tab</i>	17	<i>exemestane</i>	25
ENGERIX-B PEDIATRIC (PF)	118	ERY-TAB	17	EXFORGE	68
<i>enilloring</i>	127	<i>erythrocin (as stearate)</i>	17	EXFORGE HCT	68
<i>enoxaparin</i>	73	<i>erythromycin</i>	17, 18, 134	EXJADE	91
<i>enpresse</i>	129	<i>erythromycin ethylsuccinate</i>	17	EXKIVITY	25
<i>enskyce</i>	129	<i>erythromycin with ethanol</i>	82	EXODERM	85
ENSPRYNG	25	<i>erythromycin-benzoyl peroxide</i>	82	EXSERVAN	91
ENSTILAR	78	ESBRIET	142	EXTAVIA	117
<i>entacapone</i>	37	<i>escitalopram oxalate</i>	55	EXTINA	85
ENTADFI	146	ESGIC	43	<i>eye itch relief</i>	136
<i>entecavir</i>	14	<i>esomeprazole magnesium</i>	113	EYSUVIS	138
ENTEREG	109	<i>estarrylla</i>	129	EZALLOR SPRINKLE	75
ENTRESTO	76	<i>estazolam</i>	55	<i>ezetimibe</i>	75
ENTYVIO PEN	109	ESTRACE	126	EZETIMIBE-	
<i>enulose</i>	109	<i>estradiol</i>	126	ROSUVASTATIN	75
ENVARSUS XR	25	<i>estradiol-norethindrone acet</i>	126	<i>ezetimibe-simvastatin</i>	75
EPANED	68	ESTRING	126	<b>F</b>	
EPCLUSA	14	ESTROGEL	126	FABIOR	82
EPIDIOLEX	33	<i>estrogens-methyltestosterone</i>	126	FACTIVE	21
EPIDUO FORTE	82	<i>eszopiclone</i>	56	<i>falmina (28)</i>	129
EPIFOAM	78	<i>ethacrynic acid</i>	68	famciclovir	14
<i>epinastine</i>	136	<i>ethambutol</i>	18	<i>famotidine</i>	113
<i>epinephrine</i>	139	<i>ethosuximide</i>	33	FANAPT	56
EPINEPHRINE	139	<i>ethynodiol diac-eth estradiol</i>	126	FARESTON	25
<i>epinephrine hcl</i>	142	<i>etodolac</i>	48	FARXIGA	103
EPIPEN	139	<i>etogestrel-ethinyl estradiol</i>	127	FASENRA	142
EPIPEN JR	139	<i>etoposide</i>	25	FASENRA PEN	142
<i>epitol</i>	33	<i>etravirine</i>	14	FC2 FEMALE CONDOM	125
EPIVIR	14	EUCRISA	79	febuxostat	121
<i>eplerenone</i>	68	EULEXIN	25	felbamate	33
EPOGEN	115	EURAX	90	FELBATOL	33
EPRONTIA	33	<i>euthyrox</i>	105	FELDENE	48
<i>eprosartan</i>	68	EVAMIST	126	felodipine	69
EPSOLAY	82	EVEKEO	56	FEMARA	25
EQUETRO	33	EVEKEO ODT	56	FEMCAP	125
<i>ergocalciferol (vitamin d2)</i>	148	<i>everolimus (antineoplastic)</i>	25	FEMRING	126
<i>ergoloid</i>	55	<i>everolimus</i>		<i>fenofibrate</i>	75
ERGOMAR	38	<i>(immunosuppressive)</i>	25	FENOFIBRATE	75
<i>ergotamine-caffeine</i>	38	EVISTA	121	<i>fenofibrate micronized</i>	75
ERIVEDGE	25	EVOCLIN	82	FENOFIBRATE	
ERLEADA	25	EVOTAZ	14	MICRONIZED	75
<i>erlotinib</i>	25	EVOXAC	91	<i>fenofibrate nanocrystallized</i>	75
ERMEZA	105	EVRYSDI	40	<i>fenofibric acid</i>	75
<i>errin</i>	126	EXELDERM	85	<i>fenofibric acid (choline)</i>	75
ERTACZO	85			FENOGLIDE	75
<i>ery pads</i>	82			<i>fenoprofen</i>	48
<i>erygel</i>	82			FENOPROFEN	48
ERYPED 200	17			FENSOLVI	25
				<i>fentanyl</i>	43

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

<i>fentanyl citrate</i>	43
FENTANYL CITRATE	43
FENTORA	43
<i>ferocon</i>	148
FERRIPROX	91
FERRIPROX (2 TIMES A DAY)	91
<i>fesoterodine</i>	146
FETZIMA	56
FEXMID	41
FIASP FLEXTOUCH U-100 INSULIN	98
FIASP PENFILL U-100 INSULIN	98
FIASP PUMPCART	99
FIASP U-100 INSULIN	99
FIBRICOR	75
FILSPARI	76
FINACEA	82
<i>finasteride</i>	147
<i> fingolimod</i>	117
FINTEPLA	33
<i>finzala</i>	129
FIORICET	44
FIORICET WITH CODEINE	44
FIRAZYR	142
FIRDAPSE	40
FIRMAGON KIT W DILUENT SYRINGE	25
FIRVANQ	23
<i>flac otic oil</i>	94
FLAGYL	19
FLAREX	138
<i>flavoxate</i>	146
<i>flecainide</i>	66
FLECTOR	48
FLEQSUHV	41
FLEXICHAMBER	96
FLOLIPID	75
FLOMAX	147
FLUAD QUAD 2023-24(65Y UP)(PF)	118
FLUARIX QUAD 2023-2024 (PF)	118
FLUBLOK QUAD 2023-2024 (PF)	118
FLUCELVAX QUAD 2023-2024	118
FLUCELVAX QUAD 2023-	
2024 (PF)	118
<i>fluconazole</i>	12
<i>flucytosine</i>	12
<i>fludrocortisone</i>	95
FLULAVAL QUAD 2023-	
2024 (PF)	118
FLUMADINE	14
FLUMIST QUAD 2023-2024	119
<i>flunisolide</i>	142
<i>fluocinolone</i>	88
<i>fluocinolone acetonide oil</i>	94
<i>fluocinolone and shower cap</i>	88
<i>fluocinonide</i>	88
<i>fluocinonide-e</i>	88
<i>fluoride (sodium)</i>	93, 94, 148
<i>fluorometholone</i>	138
FLUOROPLEX	79
<i>fluorouracil</i>	79
FLUOROURACIL	79
FLUOVIX	88
FLUOVIX PLUS	88
<i>fluoxetine</i>	56
<i>fluphenazine decanoate</i>	56
<i>fluphenazine hcl</i>	56
<i>flurandrenolide</i>	88
<i>flurazepam</i>	56
<i>flurbiprofen</i>	48
<i>flurbiprofen sodium</i>	136
FLUTICASONE FUROATE-	
VILANTEROL	142
<i>fluticasone propionate</i>	88, 142
FLUTICASONE PROPIONATE	142
<i>fluticasone propion-salmeterol</i>	142
FLUTICASONE PROPION-	
SALMETEROL	142
<i>fluvastatin</i>	75
<i>fluvoxamine</i>	56
FLUZONE HIGHDOSE QUAD 23-24 PF	119
FLUZONE QUAD 2023-2024	119
FLUZONE QUAD 2023-2024 (PF)	119
FML FORTE	138
FML LIQUIFILM	138
FOCALIN	56
FOCALIN XR	56
<i>folic acid</i>	148
<i>folitab</i>	148
<i>folivane-ob</i>	149
<i>folkabs 800</i>	149
<i>fondaparinux</i>	73
FORFIVO XL	56
<i>formoterol fumarate</i>	142
FORTEO	121
FORTESTA	101
FOSAMAX	121
FOSAMAX PLUS D	121
<i>fosamprenavir</i>	14
<i>fosfomycin tromethamine</i>	22
<i>fosinopril</i>	69
<i>fosinopril-hydrochlorothiazide</i>	69
FOSRENOL	107
FOTIVDA	26
FRAGMIN	73
FREESTYLE LIBRE 14 DAY READER	97
FREESTYLE LIBRE 14 DAY SENSOR	97
FREESTYLE LIBRE 2 READER	97
FREESTYLE LIBRE 2 SENSOR	98
FREESTYLE LIBRE 3 READER	98
FREESTYLE LIBRE 3 SENSOR	98
FROVA	38
<i>frovatriptan</i>	38
FRUZAQLA	26
<i>full spectrum b-vitamin c</i>	149
FULPHILA	115
FURADANTIN	22
FUROSCIX	69
<i>furosemide</i>	69
FUZEON	14
<i>fyavolv</i>	126
FYCOMPRA	33
FYLNETRA	115
<b>G</b>	
<i>g tussin ac</i>	140
<i> gabapentin</i>	33, 34
GALAFOLD	101
<i>galantamine</i>	40
GALZIN	147

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

GARDASIL 9 (PF).....	119	GLYXAMBI .....	103	HIBERIX (PF).....	119
GASTROCROM .....	109	GOCOVRI.....	37	HIPREX.....	23
<i>gatifloxacin</i> .....	134	GOLYTELY.....	109	<i>homatropaire</i> .....	135
GATTEX 30-VIAL .....	109	GONITRO .....	77	HORIZANT .....	40
<i>gavilax</i> .....	109	GRALISE .....	34	HULIO(CF) .....	123
<i>gavilyte-c</i> .....	109	<i>granisetron hcl</i> .....	109	HULIO(CF) PEN.....	123
<i>gavilyte-g</i> .....	109	GRANIX .....	115	HUMALOG JUNIOR	
GAVRETO .....	26	GRASTEK.....	119	KWIKPEN U-100 .....	99
<i>gefitinib</i> .....	26	<i>griseofulvin microsize</i> .....	12	HUMALOG KWIKPEN	
GELCLAIR .....	94	<i>griseofulvin ultramicrosize</i> ...12		INSULIN .....	99
GELNIQUE.....	146	<i>guanfacine</i> .....	57, 69	HUMALOG MIX 50-50	
<i>gemfibrozil</i> .....	75	GVOKE .....	97	INSULN U-100 .....	99
<i>gemmily</i> .....	129	GVOKE HYPOEN 2-PACK	97	HUMALOG MIX 50-50	
GEMTESA .....	146	.....		KWIKPEN .....	99
<i>genograf</i> .....	26	GVOKE PFS 2-PACK		HUMALOG MIX 75-25	
GENOTROPIN .....	116	SYRINGE.....	97	KWIKPEN .....	99
GENOTROPIN MINIQUICK	.....	GYNAZOLE-1 .....	127	HUMALOG MIX 75-25(U-	
.....	116	<b>H</b>		100)INSULN .....	99
<i>gentamicin</i> .....	84, 134	HADLIMA .....	123	HUMALOG TEMPO PEN(U-	
GENTEEL VACUUM		HADLIMA PUSHTOUCH	123	100)INSULN .....	99
LANCING DEVICE .....	98	HADLIMA(CF).....	123	HUMALOG U-100 INSULIN	
<i>gentle laxative (bisacodyl)</i> .109		HADLIMA(CF)		.....	99
<i>gentlelax</i> .....	109	.....	123	HUMATIN .....	19
GENVOYA .....	14	HAEGARDA.....	142	HUMATROPE .....	116
GEODON .....	57	<i>hailey</i> .....	130	HUMIRA .....	123
GILENYA .....	117	<i>hailey 24 fe</i> .....	130	HUMIRA PEN .....	123
GILOTRIF.....	26	<i>hailey fe 1.5/30 (28)</i> .....	130	HUMIRA PEN CROHNS-UC-	
GIMOTI .....	109	<i>hailey fe 1/20 (28)</i> .....	130	HS START .....	123
<i>glatiramer</i> .....	117	<i>halcinonide</i> .....	88	HUMIRA(CF) .....	123
<i>glatopa</i> .....	117	HALCION .....	57	HUMIRA(CF) PEDI	
GLEEVEC.....	26	HALDOL DECANOATE .....	57	CROHNS STARTER ....	123
GLEOSTINE.....	26	<i>halobetasol propionate</i> .....	88	HUMIRA(CF) PEN .....	123
<i>glimepiride</i> .....	103	<i>haloette</i> .....	127	HUMIRA(CF) PEN	
<i>glipizide</i> .....	103	HALOG .....	88	CROHNS-UC-HS.....	123
GLIPIZIDE.....	103	<i>haloperidol</i> .....	57	HUMIRA(CF) PEN	
<i>glipizide-metformin</i> .....	103	<i>haloperidol decanoate</i> .....	57	PEDIATRIC UC.....	123
GLOPERBA.....	121	<i>haloperidol lactate</i> .....	57	HUMIRA(CF) PEN PSOR-	
GLUCAGEN HYPOKIT .....	97	HARVONI.....	14	UV-ADOL HS.....	123
GLUCAGON (HCL)		HAVRIX (PF) .....	119	HUMULIN 70/30 U-100	
EMERGENCY KIT .....	97	<i>heather</i> .....	126	INSULIN .....	99
<i>glucagon emergency kit</i>		HEMADY .....	95	HUMULIN 70/30 U-100	
(human) .....	97	HEMANGEOL.....	69	KWIKPEN .....	99
GLUCOTROL XL .....	103	<i>hemmorex-hc</i> .....	109	HUMULIN N NPH INSULIN	
GLUMETZA .....	103	<i>heparin (porcine)</i> .....	73	KWIKPEN .....	99
<i>glyburide</i> .....	103	<i>heparin, porcine (pf)</i> .....	73	HUMULIN N NPH U-100	
<i>glyburide micronized</i> .....	103	HEPARIN, PORCINE (PF) .73		INSULIN .....	99
<i>glyburide-metformin</i> .....	103	HEPLISAV-B (PF).....	119	HUMULIN R REGULAR U-	
GLYCATE .....	106	<i>her style</i> .....	130	100 INSULN .....	99
<i>glycopyrrolate</i> .....	106	HETLIOZ .....	57	HUMULIN R U-500 (CONC)	
GLYNASE .....	103	HETLIOZ LQ.....	57	INSULIN .....	99

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

HUMULIN R U-500 (CONC)	
KWIKPEN	99
HYCAMTIN	26
HYCODAN (WITH HOMATROPINE)	140
hydralazine	69
HYDREA	26
hydrochlorothiazide	69
hydrocodone bitartrate	44
hydrocodone-acetaminophen	44
hydrocodone-	
chlorpheniramine	140
hydrocodone-homatropine	140
hydrocodone-ibuprofen	44
hydrocortisone	88, 89, 95, 109
hydrocortisone acetate	109
hydrocortisone butyrate	88
hydrocortisone valerate	89
hydrocortisone-acetic acid	94
hydrocortisone-pramoxine	110
hydromet	140
hydromorphone	44
hydroxychloroquine	19
hydroxyurea	26
hydroxyzine hcl	139, 140
hydroxyzine pamoate	140
HYFTOR	79
hyoscyamine sulfate	106
hyosyne	106
HYPER-SAL	142
HYRIMOZ	123
HYRIMOZ PEN	123
HYRIMOZ PEN CROHN'S-UC STARTER	123
HYRIMOZ PEN PSORIASIS STARTER	123
HYRIMOZ(CF)	123
HYRIMOZ(CF) PEDI CROHN STARTER	123
HYRIMOZ(CF) PEN	123, 124
HYSINGLA ER	44
HYZAAR	69
I	
ibandronate	121
IBRANCE	26
IBSRELA	110
ibu	48
ibuprofen	48
ibuprofen-famotidine	48
icatibant	142
iclevia	130
ICLOFENAC CP	48
ICLUSIG	26
icosapent ethyl	75
IDACIO(CF)	124
IDACIO(CF) PEN	124
IDACIO(CF) PEN CROHN-UC STARTR	124
IDACIO(CF) PEN PSORIASIS START	124
IDHIFA	26
ILEVRO	136
ILUMYA	78
imatinib	26
IMBRUVICA	26
IMCIVREE	90
imipramine hcl	57
imipramine pamoate	57
imiquimod	120
IMITREX	38
IMITREX STATDOSE PEN	38
IMITREX STATDOSE REFILL	38
IMPAVIDO	19
IMPOYZ	89
IMURAN	26
IMVEXXY MAINTENANCE PACK	126
IMVEXXY STARTER PACK	126
INBRIJA	37
incassia	126
INCRELEX	91
INCRUSE ELLIPTA	142
indapamide	69
INDERAL LA	69
INDERAL XL	69
INDOCIN	48
indomethacin	48
INDOMETHACIN	48
INFANRIX (DTAP) (PF)	119
INGREZZA	40
INGREZZA INITIATION PACK	40
INLYTA	26
INNOPRAN XL	69
INPEFA	103
INQOVI	26
INREBIC	26
INSPRA	69
INSULIN ASP PRT-INSULIN	
ASPART	99
INSULIN ASPART U-100	99
INSULIN DEGLUDEC	99
INSULIN GLARGINE U-300 CONC	99
INSULIN GLARGINE-YFGN	99
INSULIN LISPRO	99
INSULIN LISPRO PROTAMIN-LISPRO	99
INSULIN SYRINGE-NEEDLE U-100	96
INTELENCE	14
INTRAROSA	127
INTUNIV ER	57
INVEGA	57
INVEGA HAFYERA	57
INVEGA SUSTENNA	57
INVEGA TRINZA	57, 58
INVELTYS	138
INVOKAMET	103
INVOKAMET XR	103
INVOKANA	103
IOPIDINE	139
IPOL	119
ipratropium bromide	94, 142
ipratropium-albuterol	142
irbesartan	69
irbesartan-hydrochlorothiazide	69
IRESSA	26
ISENTRESS	14
ISENTRESS HD	14
isibloom	130
isoniazid	19
ISORDIL	77
ISORDIL TITRADOSE	77
isosorbide dinitrate	77
isosorbide mononitrate	77
isosorbide-hydralazine	69
isotretinoin	82
isradipine	69
ISTALOL	134
ISTURISA	101
itraconazole	12
ivermectin	19, 82
IWLFIN	26
IXCHIQ	119
IUZEH	137

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

<b>J</b>	
JADENU .....	91
JADENU SPRINKLE .....	91
jaimiess.....	130
JAKAFI .....	26
JALYN .....	147
jantoven .....	73
JANUMET .....	103
JANUMET XR.....	103
JANUVIA.....	103
JARDIANC.....	103
jasmiel (28).....	130
JATENZO .....	101
javygtor.....	101
JAYPIRCA.....	26
jencycla.....	126
JENTADUETO .....	103
JENTADUETO XR.....	103
jinteli.....	126
JOENJA.....	91
jolessa.....	130
JORNAY PM .....	58
joyeaux .....	130
JUBLIA .....	85
juleber.....	130
JULUCA.....	14
junel 1.5/30 (21).....	130
junel 1/20 (21).....	130
junel fe 1.5/30 (28).....	130
junel fe 1/20 (28).....	130
junel fe 24 .....	130
JUXTAPID .....	75
JYLAMVO .....	26
JYNARQUE .....	101
<b>K</b>	
kaitlib fe .....	130
KALETRA .....	14
kalliga.....	130
KALYDECO .....	142, 143
KAPSPARGO SPRINKLE ..	69
KARBINAL ER .....	140
kariva (28).....	130
KATERZIA .....	69
KAZANO .....	103
kelnor 1/35 (28).....	130
kelnor 1-50 (28).....	130
KENALOG .....	89
KEPPRA .....	34
KEPPRA XR .....	34
keralyt.....	79
KERALYT RX .....	79
KERALYT SCALP .....	79
KERENDIA.....	69
KESIMPTA PEN .....	117
<i>ketococonazole</i> .....	12, 85
<i>ketodan</i> .....	85
<i>ketodan kit</i> .....	85
<i>ketoprofen</i> .....	48
<i>ketorolac</i> .....	48, 136
KETOROLAC .....	48
<i>ketotifen fumarate</i> .....	136
KEVEYIS .....	40
KEVZARA .....	124
KINERET .....	124
KINRIX (PF).....	119
KISQALI .....	27
KISQALI FEMARA CO- PACK .....	26, 27
KITABIS PAK .....	19
KLARON .....	84
<i>klayesta</i> .....	85
KLISYRI .....	27
KLONOPIN.....	34
<i>klor-con</i> .....	147
<i>klor-con 10</i> .....	147
<i>klor-con 8</i> .....	147
<i>klor-con m10</i> .....	147
<i>klor-con m15</i> .....	147
<i>klor-con m20</i> .....	148
<i>klor-con/ef</i> .....	148
KLOXXADO .....	48
<i>kobee</i> .....	149
KONVOMEP .....	113
KORLYM.....	101
KOSELUGO .....	27
K-PHOS NO 2.....	147
KRAZATI .....	27
KRINTAFEL .....	19
KRISTALOSE .....	110
K-TAB .....	148
<i>kurvelo</i> (28) .....	130
KUVAN.....	101
KYZATREX .....	101
<b>L</b>	
<i>l norgest/e.estradiol-e.estrad</i> .....	130
<i>labetalol</i> .....	69
<i>lacosamide</i> .....	34
LACRISERT .....	136
<i>lactulose</i> .....	110
LAGEVRIO (EUA).....	14
LAMICTAL .....	34
LAMICTAL ODT .....	34
LAMICTAL ODT STARTER (BLUE) .....	34
LAMICTAL ODT STARTER (GREEN) .....	34
LAMICTAL ODT STARTER (ORANGE) .....	34
LAMICTAL STARTER (BLUE) KIT .....	34
LAMICTAL STARTER (GREEN) KIT .....	34
LAMICTAL STARTER (ORANGE) KIT .....	34
LAMICTAL XR .....	34
LAMICTAL XR STARTER (BLUE) .....	34
LAMICTAL XR STARTER (GREEN) .....	34
LAMICTAL XR STARTER (ORANGE) .....	34
<i>lamivudine</i> .....	14
<i>lamivudine-zidovudine</i> .....	14
<i>lamotrigine</i> .....	34
LAMPIT .....	19
LANCETS .....	98
LANCING DEVICE .....	98
LANOXIN .....	72
<i>lansoprazole</i> .....	113
<i>lanthanum</i> .....	107
LANTUS SOLOSTAR U-100 INSULIN .....	99
LANTUS U-100 INSULIN ..	99
<i>lapatinib</i> .....	27
<i>arin 1.5/30 (21)</i> .....	130
<i>arin 1/20 (21)</i> .....	130
<i>arin 24 fe</i> .....	130
<i>arin fe 1.5/30 (28)</i> .....	130
<i>arin fe 1/20 (28)</i> .....	130
LASIX .....	69
<i>latanoprost</i> .....	137
LATUDA .....	58
<i>laxative (bisacodyl)</i> .....	110
<i>laxative peg 3350</i> .....	110
<i>layolis fe</i> .....	130
LEDIPASVIR-SOFOSBUVIR .....	14
leena 28 .....	130
<i>leflunomide</i> .....	124

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

<i>lenalidomide</i>	27	<i>lidocaine-prilocaine</i>	84	LOPRESSOR	69
LENVIMA	27	LIDOCAINE-TETRACAIN	84	LOPROX (AS OLAMINE)	85
LESCOL XL	75	.....	84	LOPROX KIT	85
<i>lessina</i>	130	<i>lidocan iii</i>	84	<i>lorazepam</i>	58
LETAIRIS	143	<i>lidocort</i>	84	<i>lorazepam intensol</i>	58
<i>letrozole</i>	27	LIDODERM	84	LORBRENA	27
<i>leucovorin calcium</i>	23	LIDOLITE	84	LOREEV XR	58
LEUKERAN	27	<i>lidopin</i>	84	<i>loryna</i> (28)	131
LEUKINE	115	LIDO-PRILO CAINE PACK	84	LORZONE	41
<i>leuprolide</i>	27	.....	84	<i>losartan</i>	69
LEUPROLIDE (3 MONTH)	27	LIDOSOL	84	<i>losartan-hydrochlorothiazide</i>	69
<i>levalbuterol hcl</i>	143	LIFEMS NALOXONE	48	LOTEMAX	138
LEVALBUTEROL		LIKMEZ	19	LOTEMAX SM	138
TARTRATE	143	<i>linezolid</i>	19	LOTENSIN	69
LEVAMLODIPINE	69	LINZESS	110	LOTENSIN HCT	69
LEVIBID	106	<i>liothyronine</i>	105	<i>loteprednol etabonate</i>	138
LEVEMIR FLEXPEN	99	LIPITOR	75	LOTREL	70
LEVEMIR U-100 INSULIN	99	LIPOFEN	75	LOTRONEX	110
<i>levetiracetam</i>	34	LIQREV	143	<i>lovastatin</i>	75
<i>levobunolol</i>	135	<i>lisdexamphetamine</i>	58	LOVAZA	75
<i>levocarnitine</i>	91	<i>lisinopril</i>	69	LOVENOX	73
<i>levocarnitine (with sugar)</i>	91	<i>lisinopril-hydrochlorothiazide</i>	69	<i>low-ogestrel</i> (28)	131
<i>levocetirizine</i>	140	LITFULO	91	<i>loxapine succinate</i>	58
<i>levofloxacin</i>	21, 134	<i>lithium carbonate</i>	58	<i>lo-zumandimine</i> (28)	131
<i>levonest</i> (28)	130	<i>lithium citrate</i>	58	<i>lubiprostone</i>	110
<i>levonorgest-eth.estradiol-iron</i>		LITHOBID	58	LUCEMYRA	49
.....	130	LITHOSTAT	91	<i>ludent fluoride</i>	149
<i>levonorgestrel</i>	131	LIVALO	75	LULICONAZOLE	85
<i>levonorgestrel-ethinyl estrad</i>		LIVMARLI	110	LUMAKRAS	27
.....	131	LIVTENCITY	14	LUMIGAN	137
<i>levonorg-eth estrad triphasic</i>		LO LOESTRIN FE	131	LUMRYZ	58
.....	131	LOCOID	89	LUNESTA	58
<i>levora-28</i>	131	LOCOID LIPOCREAM	89	LUPKYNIS	27
<i>levorphanol tartrate</i>	44	LODINE	49	LUPRON DEPOT	28
<i>levo-t</i>	105	LODOC	76	LUPRON DEPOT (3	
<i>levothyroxine</i>	105	LODOSYN	37	MONTH)	28
LEVOHYROXINE	105	LOESTRIN 1.5/30 (21)	131	LUPRON DEPOT (4	
<i>levoxyl</i>	105	LOESTRIN 1/20 (21)	131	MONTH)	28
LEVSIN	106	LOESTRIN FE 1.5/30 (28-		LUPRON DEPOT (6	
LEVSIN/SL	106	DAY)	131	MONTH)	28
LEXAPRO	58	LOESTRIN FE 1/20 (28-DAY)	131	LUPRON DEPOT-PED	28
LIALDA	110	.....	131	LUPRON DEPOT-PED (3	
LIBRAX (WITH		<i>lofena</i>	49	MONTH)	28
CLIDINIUM)	106	<i>lojaimiess</i>	131	<i>lurasidone</i>	58
LICART	48	LOKELMA	107	<i>lutera</i> (28)	131
<i>lidocaine</i>	84	LOMOTIL	106	LUZU	85
<i>lidocaine hcl</i>	84	LONSURF	27	LYBALVI	58
<i>lidocaine hcl-hydrocortison ac</i>		LOPID	75	<i>lyleq</i>	126
.....	84, 110	<i>lopinavir-ritonavir</i>	15	<i>lyllana</i>	126
<i>lidocaine viscous</i>	84				

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

LYMEPAK	22	MAXZIDE	70	METHITEST	101
LYNPARZA	28	MAXZIDE-25MG	70	<i>methocarbamol</i>	41
LYRICA	34	MAYZENT	117	METHOCARBAMOL	41
LYRICA CR	34	MAYZENT STARTER(FOR 1MG MAINT)	117	<i>methotrexate sodium</i>	28
LYSODREN	28	MAYZENT STARTER(FOR 2MG MAINT)	117	<i>methotrexate sodium (pf)</i>	28
LYTGOBI	28	<i>meclizine</i>	110	<i>methoxsalen</i>	79
LYUMJEV KWIKPEN U-100 INSULIN	99	MECLIZINE	110	<i>methscopolamine</i>	106
LYUMJEV KWIKPEN U-200 INSULIN	99	<i>meclofenamate</i>	49	<i>methsuximide</i>	35
LYUMJEV TEMPO PEN(U- 100)INSULN	99	MEDROL	95	<i>methyldopa</i>	70
LYUMJEV U-100 INSULIN	99	MEDROL (PAK)	95	<i>methyldopa-</i> <i>hydrochlorothiazide</i>	70
LYVISPAH	41	<i>medroxyprogesterone</i>	126	<i>methylergonovine</i>	133
<i>lyza</i>	126	<i>mefenamic acid</i>	49	METHYLIN	58, 59
<b>M</b>		<i>mefloquine</i>	19	<i>methylphenidate</i>	59
MACROBID	23	<i>megestrol</i>	28	<i>methylphenidate hcl</i>	59
MACRODANTIN	23	MEKINIST	28	METHYLPHENIDATE HCL	59
<i>mafenide acetate</i>	84	MEKTOVI	28	<i>methylprednisolone</i>	95
<i>magnesium citrate</i>	110	<i>meloxicam</i>	49	<i>methyltestosterone</i>	101
MALARONE	19	MELOXICAM	49	metoclopramide hcl	110
MALARONE PEDIATRIC	19	<i>meloxicam submicronized</i>	49	metolazone	70
<i>malathion</i>	90	<i>melphalan</i>	28	<i>metoprolol succinate</i>	70
<i>maraviroc</i>	15	<i>memantine</i>	40	<i>metoprolol ta-hydrochlorothiaz</i>	70
MARINOL	110	MEMANTINE	40	<i>metoprolol tartrate</i>	70
<i>marlissa (28)</i>	131	MENEST	126	METROCREAM	82
MARPLAN	58	MENOSTAR	126	METROGEL	82
MATULANE	28	MENQUADFI (PF)	119	metronidazole	19, 82, 127
<i>matzim la</i>	70	MENVEO A-C-Y-W-135-DIP (PF)	119	<i>metyrosine</i>	70
MAVENCLAD (10 TABLET PACK)	117	<i>meperidine</i>	44	<i>mexiletine</i>	66
MAVENCLAD (4 TABLET PACK)	117	<i>meprobamate</i>	41	<i>mibelas 24 fe</i>	131
MAVENCLAD (5 TABLET PACK)	117	MEPRON	19	MICARDIS	70
MAVENCLAD (6 TABLET PACK)	117	<i>mercaptopurine</i>	28	MICARDIS HCT	70
MAVENCLAD (7 TABLET PACK)	117	<i>merzee</i>	131	MICONAZOLE NITRATE-	
MAVENCLAD (8 TABLET PACK)	117	<i>mesalamine</i>	110	<b>ZINC OX-PET</b>	85
MAVENCLAD (9 TABLET PACK)	117	<i>mesalamine with cleansing</i> <i>wipe</i>	110	<i>miconazole-3</i>	127
MAVYRET	15	MESNEX	23	MICROCHAMBER	96
MAXALT	38	MESTINON	41	<i>microgestin 1.5/30 (21)</i>	131
MAXALT-MLT	38	MESTINON TIMESPAN	41	<i>microgestin 1/20 (21)</i>	131
MAXIDEX	138	<i>metaxalone</i>	41	<i>microgestin 24 fe</i>	131
MAXITROL	137	<i>metformin</i>	103, 104	<i>microgestin fe 1.5/30 (28)</i>	131
<i>maxi-tuss ac</i>	140	METFORMIN	103	<i>microgestin fe 1/20 (28)</i>	131
		<i>methadone</i>	44	<i>midazolam</i>	59
		<i>methadose</i>	44	MIDAZOLAM	59
		<i>methamphetamine</i>	58	<i>midodrine</i>	91
		<i>methazolamide</i>	137	MIFEPREX	127
		<i>methenamine hippurate</i>	23	<i>mifepristone</i>	101, 127
		<i>methenamine mandelate</i>	23	<i>migergot</i>	38
		<i>methimazole</i>	96	<i>miglitol</i>	104
				<i>miglustat</i>	101

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

MIGRANAL .....	38	<i>mvc-fluoride</i> .....	149	NEBUPENT .....	19
<i>mili</i> .....	131	<i>my choice</i> .....	131	<i>nebusal</i> .....	143
<i>milk of magnesia</i> .....	110	<i>my way</i> .....	131	NEBUSAL.....	143
<i>milk of magnesia concentrated</i> .....	110	MYALEPT .....	101	<i>necon 0.5/35 (28)</i> .....	131
<i>millipred</i> .....	95	MYAMBUTOL.....	19	<i>nefazodone</i> .....	59
<i>millipred dp</i> .....	95	MYCAPSSA .....	28	<i>neomycin</i> .....	19
<i>mimvey</i> .....	126	MYCOBUTIN.....	19	<i>neomycin-bacitracin-poly-hc</i> .....	137
MINIPRESS .....	70	<i>mycophenolate mofetil</i> .....	28	<i>neomycin-bacitracin-</i>	
MINIVELLE .....	126	<i>mycophenolate sodium</i> .....	28	<i>polymyxin</i> .....	134
<i>minocycline</i> .....	22	MYDAYIS .....	59	<i>neomycin-polymyxin b-</i>	
MINOCYCLINE .....	22	MYDRIACYL.....	135	<i>dexameth</i> .....	137
<i>minoxidil</i> .....	70	MYFEMBREE .....	127	<i>neomycin-polymyxin-</i>	
MIRAPEX ER.....	37	MYFORTIC .....	28	<i>gramicidin</i> .....	134
MIRCERA.....	115	MYLERAN .....	28	<i>neomycin-polymyxin-hc</i> 95, 137	
<i>mirtazapine</i> .....	59	<i>mynatal</i> .....	149	<i>neo-polycin</i> .....	134
MIRVASO .....	82	<i>mynatal plus</i> .....	149	<i>neo-polycin hc</i> .....	137
<i>misoprostol</i> .....	113	<i>mynatal-z</i> .....	149	NEORAL .....	28
MITIGARE .....	121	MYRBETRIQ .....	146	NEO-SYNALAR .....	85
M-M-R II (PF).....	119	mysoline .....	35	NEO-SYNALAR KIT .....	85
<i>m-natal plus</i> .....	149	MYTESI .....	106	<i>nephronex-sl</i> .....	149
<i>modafinil</i> .....	59	N		NERLYNX .....	28
MODERNA COVID 23- 24(6M-11Y)PF .....	119	<i>nabumetone</i> .....	49	NESINA .....	104
<i>moexipril</i> .....	70	<i>nadolol</i> .....	70	<i>neuac</i> .....	82
<i>molindone</i> .....	59	<i>naftifine</i> .....	85	NEUAC KIT .....	82
<i>mometasone</i> .....	89, 143	NAFTIN .....	86	NEULASTA .....	115
<i>monodoxyne nl</i> .....	22	NALFON .....	49	NEULASTA ONPRO .....	115
MONODOX .....	22	NALOCET .....	45	NEUPOGEN .....	115
<i>mono-linyah</i> .....	131	<i>naloxone</i> .....	49	NEUPRO .....	37
<i>montelukast</i> .....	143	<i>naltrexone</i> .....	49	NEURONTIN .....	35
<i>morgidox</i> .....	22	NAMENDA TITRATION		NEVANAC .....	136
MORGIDOX 1X 50 .....	22	PAK .....	40	<i>nevirapine</i> .....	15
MORGIDOX 1X100 .....	22	NAMENDA XR .....	40	<i>new day</i> .....	131
<i>morphine</i> .....	44, 45	NAMZARIC .....	40	<i>newgen</i> .....	149
<i>morphine concentrate</i> .....	44	NAPRELAN CR .....	49	NEXAVAR .....	29
MOTEGRITY .....	110	NAPROSYN .....	49	NEXICLON XR .....	70
MOTOFEN.....	106	<i>naproxen</i> .....	49	NEXIUM .....	113
MOTPOLY XR .....	35	<i>naproxen sodium</i> .....	49	NEXIUM PACKET .....	113
MOUNJARO.....	104	<i>naproxen-esomeprazole</i> .....	49	NEXLETOL .....	75
MOVANTIK .....	110	<i>naratriptan</i> .....	38	NEXLIZET .....	75
MOVIPREP.....	111	NARCAN .....	49	NEXTSTELLIS .....	131
MOXATAG .....	20	NARDIL .....	59	NGENLA .....	116
<i>moxifloxacin</i> .....	21, 134	NASAL ALLERGY .....	143	<i>niacin</i> .....	75
MS CONTIN .....	45	NATACYN .....	134	NIACOR .....	76
MULPLETA.....	73	NATAZIA .....	131	<i>nicardipine</i> .....	70
MULTAQ .....	66	<i>nateglinide</i> .....	104	NICODERM CQ .....	93
<i>multi-vitamin with fluoride</i> .....	149	NATESTO .....	101	<i>nicorette</i> .....	93
<i>mupirocin</i> .....	84	NATROBA .....	90	NICORETTE .....	93
<i>mupirocin calcium</i> .....	85	<i>natura-lax</i> .....	111	<i>nicotine</i> .....	93
		NAYZILAM .....	35	<i>nicotine (polacrilex)</i> .....	93
		<i>nebivolol</i> .....	70		

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

NICOTROL	93
NICOTROL NS	93
<i>nifedipine</i>	70
<i>nikki</i> (28)	131
NILANDRON	29
<i>nilutamide</i>	29
<i>nimodipine</i>	70
NINLARO	29
<i>nisoldipine</i>	70
<i>nitazoxanide</i>	19
<i>nitisinone</i>	91
<i>nitro-bid</i>	77
NITRO-DUR	77
<i>nitrofurantoin</i>	23
NITROFURANTOIN	23
<i>nitrofurantoin macrocrystal</i>	23
<i>nitrofurantoin monohyd/m-</i> <i>cryst</i>	23
<i>nitroglycerin</i>	77
NITROLINGUAL	77
NITROMIST	77
NITROSTAT	77
NITYR	91
NIVESTYM	115
<i>nizatidine</i>	113
NOCDURNA (MEN)	101
NOCDURNA (WOMEN)	101
NOCTIVA	101
<i>nora-be</i>	126
NORDITROPIN FLEXPRO	116
<i>norelgestromin-ethin.estriadiol</i>	127
<i>noreth-ethinyl estradiol-iron</i>	131
<i>norethindrone (contraceptive)</i>	126
<i>norethindrone acetate</i>	126
<i>norethindrone ac-eth estradiol</i>	126, 131
<i>norethindrone-e.estriadiol-iron</i>	132
NORGESIC	41
NORGESIC FORTE	41
<i>norgestimate-ethinyl estradiol</i>	132
NORITATE	82
NORLIQVA	70
NORPACE	66
NORPACE CR	66
NORPRAMIN	59
NORTHERA	92
<i>nortrel 0.5/35 (28)</i>	132
<i>nortrel 1/35 (21)</i>	132
<i>nortrel 1/35 (28)</i>	132
<i>nortrel 7/7/7 (28)</i>	132
<i>nortriptyline</i>	60
NORVASC	70
NORVIR	15
NOURIANZ	37
NOVAREL	101
NOVAVAX COVID 2023- 24(PF)(EUA)	119
NOVOLIN 70-30 FLEXPEN U-100	99
NOVOLIN N FLEXPEN	99
NOVOLIN R FLEXPEN	100
NOVOLOG FLEXPEN U-100 INSULIN	100
NOVOLOG MIX 70- 30FLEXPEN U-100	100
NOVOLOG PENFILL U-100 INSULIN	100
NOVOLOG U-100 INSULIN ASPART	100
NOXAFILE	12
NOXIPAK	89
<i>np thyroid</i>	105
NUBEQA	29
NUCALA	143
NUCARACLINPAK	82
NUCORT	89
NUCYNTA	49
NUCYNTA ER	50
NUDICLO SOLUPAK	50
NUEDEXTA	40
NULEV	106
NULIBRY	40
NUPLAZID	60
NURTEC ODT	38
NUTROPIN AQ NUSPIN	116
NUVARING	127
NUVESSA	127
NUVIGIL	60
NUZYRA	22
<i>nyamyc</i>	86
<i>nylia 1/35 (28)</i>	132
<i>nylia 7/7/7 (28)</i>	132
NYMALIZE	70
<i>nymyo</i>	132
<i>nystatin</i>	12, 86
<i>nystatin-triamcinolone</i>	86
<i>nystop</i>	86
NYVEPRIA	115
<b>O</b>	
OCALIVA	111
<i>ocella</i>	132
OCUFLOX	134
ODACTRA	119
ODEFSEY	15
ODOMZO	29
OFEV	143
<i>ofloxacin</i>	21, 94, 134
OGSIVEO	29
OJJAARA	29
<i>olanzapine</i>	60
<i>olanzapine-fluoxetine</i>	60
<i>olmesartan</i>	70
<i>olmesartanamlodipin-</i> <i>hctiazid</i>	70
<i>olmesartan-</i> <i>hydrochlorothiazide</i>	70
<i>olopatadine</i>	94, 136
OLPRUVA	92
OLUMIANT	124
OLUX	89
OLUX-E	89
OMECLAMOX-PAK	113
<i>omega-3 acid ethyl esters</i>	76
<i>omeprazole</i>	113
<i>omeprazole-sodium</i> <i>bicarbonate</i>	114
OMNARIS	143
OMNIPOD 5 G6 INTRO KIT (GEN 5)	98
OMNIPOD 5 G6 PODS (GEN 5)	98
OMNIPOD 5 G6-G7 INTRO KT(GEN5)	98
OMNIPOD 5 G6-G7 PODS (GEN 5)	98
OMNIPOD CLASSIC PODS (GEN 3)	98
OMNIPOD DASH INTRO KIT (GEN 4)	98
OMNIPOD DASH PODS (GEN 4)	98

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

OMNIPOD GO PODS	10
UNITS/DAY .....	98
OMNITROPE.....	116
OMVOH PEN .....	111
<i>ondansetron</i> .....	111
<i>ondansetron hcl</i> .....	111
<i>one daily prenatal</i> .....	149
<i>onelax magnesium citrate</i> ...111	
ONETOUCH ULTRA	
CONTROL.....	98
ONETOUCH ULTRA TEST	
.....	96
ONETOUCH ULTRA2	
METER .....	98
ONETOUCH VERIO FLEX	
METER .....	98
ONETOUCH VERIO MID	
CONTROL.....	98
ONETOUCH VERIO	
REFLECT METER .....	98
ONETOUCH VERIO TEST	
STRIPS.....	96
ONEXTON.....	82
ONFI.....	35
ONGENTYS .....	37
ONGLYZA.....	104
ONUREG .....	29
ONZETRA XSAIL .....	38
opcicon one-step.....	132
OPFOLDA .....	101
OPSUMIT .....	143
OPTICHAMBER DIAMOND	
VHC .....	96
option-2 .....	132
OPVEE.....	50
OPZELURA .....	80
ORACEA .....	22
<i>oral saline laxative</i> .....	111
ORALAIR .....	119
<i>oralone</i> .....	94
ORAPRED ODT .....	95
ORAVIG .....	12
ORENCIA .....	124
ORENCIA CLICKJECT ....	124
ORENITRAM .....	70
ORENITRAM MONTH 1	
TITRATION KT .....	70
ORENITRAM MONTH 2	
TITRATION KT .....	70
ORENITRAM MONTH 3	
TITRATION KT .....	70
ORFADIN .....	92
ORGOVYX .....	29
ORIAHNN.....	127
ORILISSA .....	101
ORKAMBI .....	143
ORLADEYO .....	143
<i>orphenadrine citrate</i> .....	41
<i>orphenadrine-asa-caffeine</i> ..41,	
42	
<i>orphengesic forte</i> .....	42
ORSERDU .....	29
oscimin.....	106
oscimin sl.....	106
oseltamivir.....	15
OSENI .....	104
OSMOLEX ER.....	37
OSPHENA.....	127
OTEZLA .....	124
OTEZLA STARTER.....	124
OTOVEL .....	95
OTREXUP (PF) .....	124
OVIDE.....	90
OVIDREL .....	101
oxaprozin .....	50
OXAPROZIN .....	50
oxazepam .....	60
OXBRYTA.....	92
oxcarbazepine.....	35
OXERVATE .....	136
oxiconazole .....	86
OXISTAT .....	86
OXLUMO .....	147
OXTELLAR XR .....	35
oxybutynin chloride .....	146
OXYBUTYNIN CHLORIDE	
.....	146
oxycodone .....	45
OXYCODONE .....	45
oxycodone-acetaminophen ...	45
OXYCONTIN .....	45
oxymorphone .....	45
OXYTROL.....	146
OZEMPIC .....	104
OZOBAX .....	42
OZOBAX DS .....	42
P	
pacerone .....	66
PALFORZIA (LEVEL 1)..119	
PALFORZIA (LEVEL 2)..119	
PALFORZIA (LEVEL 3)..119	
PALFORZIA (LEVEL 4)..119	
PALFORZIA (LEVEL 5)..119	
PALFORZIA (LEVEL 6)..119	
PALFORZIA (LEVEL 7)..119	
PALFORZIA (LEVEL 8)..119	
PALFORZIA (LEVEL 9)..119	
PALFORZIA (LEVEL 10).119	
PALFORZIA INITIAL DOSE	
.....	120
PALFORZIA LEVEL 11	
MAINTENANCE.....	120
paliperidone .....	60
PALYNZIQ .....	101
PAMELOR .....	60
PANCREAZE.....	111
PANDEL .....	89
PANRETIN .....	80
pantoprazole .....	114
paricalcitol .....	101
PARLODEL .....	37
PARNATE.....	60
paroex oral rinse .....	94
paromomycin .....	19
paroxetine hcl .....	60
paroxetine	
mesylate(menop.sym).....	60
PASER.....	19
PATANASE .....	94
PAXIL .....	60
PAXIL CR .....	60
PAXLOVID .....	15
pazopanib .....	29
PEDIARIX (PF) .....	120
PEDVAX HIB (PF) .....	120
peg 3350-electrolytes.....	111
peg3350-sod sul-nacl-kcl-asb-c	
.....	111
PEGASYS .....	116
peg-electrolyte soln .....	111
PEMAZYRE.....	29
PEN NEEDLE, DIABETIC	.98
PENBRAYA (PF) .....	120
penciclovir .....	86
penicillamine .....	124
penicillin v potassium .....	20
PENNSAID .....	50
PENTACEL (PF).....	120
pentamidine .....	19

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

PENTASA .....	111	PLENVU .....	111	prenatabs fa .....	149
<i>pentazocine-naloxone</i> .....	50	PLIAGLIS .....	84	<i>prenatabs rx</i> .....	149
<i>pentoxifylline</i> .....	73	PNEUMOVAX-23 .....	120	<i>prenatal</i> .....	149
PEPCID .....	114	<i>pnv-dha</i> .....	149	<i>prenatal complete</i> .....	149
PERCOCET .....	45	<i>pnv-omega</i> .....	149	<i>prenatal multi-dha (algal oil)</i> .....	149
PERFOROMIST .....	143	<i>pnv-select</i> .....	149	<i>prenatal multivitamins</i> .....	149
PERIDEX .....	94	POCKET CHAMBER .....	97	<i>prenatal one daily</i> .....	149
<i>perindopril erbumine</i> .....	70	<i>podofilox</i> .....	80	<i>prenatal plus</i> .....	149
<i>periogard</i> .....	94	POKONZA .....	148	<i>prenatal plus (calcium carb)</i> .....	149
<i>permethrin</i> .....	90	<i>polycin</i> .....	134	<i>prenatal vit no.179-iron-folic</i> .....	149
<i>perphenazine</i> .....	60	<i>Polyethylene glycol 3350</i> .....	111	<i>prenatal vitamin</i> .....	149
<i>perphenazine-amitriptyline</i> ..	60	<i>polymyxin b sulf-trimethoprim</i> .....	134	<i>prenatal vitamin with minerals</i> .....	149
PERSERIS .....	60	POMALYST .....	29	<i>prenatal-u</i> .....	149
PERTZYE .....	111	PONVORY .....	118	PRESTALIA .....	71
PFIZER COVID 2023-24(5Y-11Y)PF .....	120	PONVORY 14-DAY STARTER PACK .....	118	PRETOMANID .....	19
PFIZER COVID 2023-24(6MO-4Y)PF .....	120	portia 28 .....	132	PREVACID .....	114
PHEBURANE .....	92	<i>posaconazole</i> .....	12	PREVACID SOLUTAB .....	114
<i>phenazopyridine</i> .....	147	<i>potassium chloride</i> .....	148	<i>prevalite</i> .....	76
<i>phenelzine</i> .....	60	<i>potassium citrate</i> .....	147	PREVIDENT .....	94
<i>phenobarbital</i> .....	35	<i>powderlax</i> .....	111	PREVIDENT 5000 ENAMEL PROTECT .....	94
<i>phenoxybenzamine</i> .....	71	<i>pr natal 400</i> .....	149	PREVIDENT 5000 ORTHO DEFENSE .....	94
<i>phenylephrine hcl</i> .....	139	<i>pr natal 400 ec</i> .....	149	PREVIDENT 5000 PLUS .....	94
PHENYTEK .....	35	<i>pr natal 430</i> .....	149	PREVIDENT 5000	
<i>phenytoin</i> .....	35	<i>pr natal 430 ec</i> .....	149	SENSITIVE .....	94
<i>phenytoin sodium extended</i> ..	35	PRADAXA .....	73, 74	PREVNAR 20 (PF) .....	120
PHEXXI .....	128	PRALUENT PEN .....	76	PREVYMIS .....	15
<i>philith</i> .....	132	<i>pramipexole</i> .....	37	PREZCOBIX .....	15
<i>phosphate laxative</i> .....	111	PRAMOSONE .....	78	PREZISTA .....	15
PHOSPHOLINE IODIDE ..	135	<i>prasugrel</i> .....	74	PRIFTIN .....	19
<i>phytonadione (vitamin k1)</i> ....	73	<i>pravastatin</i> .....	76	PRILOSEC .....	114
PIFELTRO .....	15	<i>praziquantel</i> .....	19	<i>primaquine</i> .....	19
<i>pilocarpine hcl</i> .....	92, 94, 135	<i>prazosin</i> .....	71	<i>primidone</i> .....	35
<i>pimecrolimus</i> .....	80	PRECOSE .....	104	PRIMIDONE .....	35
<i>pimozone</i> .....	60	PRED FORTE .....	138	PRIMLEV .....	45
<i>pimtrea (28)</i> .....	132	PRED MILD .....	138	PRIMSOL .....	23
<i>pindolol</i> .....	71	<i>prednicarbate</i> .....	89	PRIORIX (PF) .....	120
<i>pioglitazone</i> .....	104	<i>prednisolone</i> .....	95	PRISTIQ .....	60
<i>pioglitazone-glimepiride</i> ...	104	<i>prednisolone acetate</i> .....	138	PROAIR DIGIHALER .....	143
<i>pioglitazone-metformin</i> .....	104	<i>prednisolone sodium</i> .....		PROAIR RESPICLICK .....	143
PIQRAY .....	29	<i>phosphate</i> .....	96, 138	<i>probenecid</i> .....	121
<i>pirfenidone</i> .....	143	<i>prednisone</i> .....	96	<i>probenecid-colchicine</i> .....	121
PIRFENIDONE .....	143	<i>prednisone intensol</i> .....	96	PROCARDIA XL .....	71
<i>piroxicam</i> .....	50	<i>pregabalin</i> .....	35	<i>procenutra</i> .....	61
<i>pitavastatin calcium</i> .....	76	PREGNYL .....	102	<i>prochlorperazine</i> .....	111
PLAN B ONE-STEP .....	132	PREHEVBARIO (PF) .....	120		
PLAQUENIL .....	19	PREMARIN .....	127		
PLAVIX .....	73	PREMPHASE .....	127		
PLEGRIDY .....	117	PREMPRO .....	127		

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

<i>prochlorperazine maleate</i>	..111	PYRIDOSTIGMINE	
PROCIT	115	BROMIDE	42
PROCTOFOAM HC	111	<i>pyrimethamine</i>	19
<i>procto-med hc</i>	111	PYRUKYND	92
<i>proctosol hc</i>	111	<b>Q</b>	
<i>protozone-hc</i>	111	QBRELIS	71
PROCYSB	147	QBREXZA	80
PROFINAC	50	QDOLO	50
<i>progesterone</i>	127	QELBREE	61
<i>progesterone micronized</i>	127	QINLOCK	29
PROGLYCEM	97	QNDSL	143
PROGRAF	29	QTERN	104
<i>prolate</i>	46	QUADRACEL (PF)	120
PROLATE	45	QUALAQUIN	20
PROLENSA	136	QUARTETTE	132
PROMACTA	74	QUAZEPAM	61
<i>promethazine</i>	140	QUDEXY XR	35
<i>promethazine vc</i>	140	QUESTRAN	76
<i>promethazine vc-codeine</i>	140	QUESTRAN LIGHT	76
<i>promethazine-codeine</i>	140	<i>quetiapine</i>	61
<i>promethazine-dm</i>	140	QUETIAPINE	61
<i>promethegan</i>	140	QUILLICHEW ER	61
PROMETRIUM	127	QUILLIVANT XR	61
<i>propafenone</i>	66	quinapril	71
<i>proparacaine</i>	136	<i>quinapril-hydrochlorothiazide</i>	71
<i>propranolol</i>	71	<i>quinidine gluconate</i>	66
<i>propranolol-</i>		<i>quinidine sulfate</i>	66
<i>hydrochlorothiazid</i>	71	<i>quinine sulfate</i>	20
<i>propylthiouracil</i>	96	QUINIXIL	89
PROQUAD (PF)	120	<i>quit 2</i>	93
PROSCAR	147	<i>quit 4</i>	93
PROTONIX	114	QULIPTA	38
<i>protriptyline</i>	61	QUTENZA	80
PROVENTIL HFA	143	QUVIVIQ	61
PROVERA	127	QVAR REDIHALER	143
PROVIGIL	61	<b>R</b>	
PROZAC	61	<i>rabeprazole</i>	114
<i>prudoxin</i>	80	RABEPRAZOLE	114
PULMICORT	143	RADICAVA ORS STARTER	
PULMICORT FLEXHALER	143	KIT SUSP	40
<i>pulmosal</i>	143	RAGWITEK	120
PULMOZYME	143	<i>raloxifene</i>	121
<i>purelax</i>	111	ramelteon	61
PURIXAN	29	ramipril	71
PYLERA	114	ranolazine	77
<i>pyrazinamide</i>	19	RAPAFLO	147
PYRIDIUM	147	RAPAMUNE	29
<i>pyridostigmine bromide</i>	42	<i>rasagiline</i>	37
		RASUVO (PF)	124
		RAVICTI	92
		RAYALDEE	102
		RAYOS	96
		REBIF (WITH ALBUMIN)	118
			.....
		REBIF REBIDOSE	118
		REBIF TITRATION PACK	118
			.....
		reclipsen (28)	132
		RECOMBIVAX HB (PF)	120
		RECORLEV	102
		RECTIV	111
		REGLAN	111
		REGRANEX	80
		RELAFEN DS	50
		RELENZA DISKHALER	15
		RELEUKO	115
		RELEXXII	61
		RELION NOVOLIN 70/30	100
		RELION NOVOLIN N	100
		RELION NOVOLIN R	100
		RELISTOR	112
		RELPAX	38
		RELTONE	112
		RELYVRIA	40
		REMERON	61
		REMERON SOLTAB	61
		<i>rena-vite</i>	150
		RENVELA	107
		<i>repaglinide</i>	104
		REPATHA PUSHTRONEX	76
		REPATHA SURECLICK	76
		REPATHA SYRINGE	76
		RESTASIS	136
		RESTASIS MULTIDOSE	136
		RESTORIL	61
		RETACRIT	115
		RETEVMO	29
		RETIN-A	82
		RETIN-A MICRO	82
		RETIN-A MICRO PUMP	83
		RETROVIR	15
		REVATIO	144
		REVCORI	92
		REVLIMID	29
		REXULTI	61
		REYATAZ	15
		REYVOW	39
		REZLIDHIA	29
		REZUROCK	29

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

REZVOGLAR KWIKPEN	100	RUKOBIA	15	SERTRALINE	62
RHOFADE	83	RYALTRIS	144	<i>setlakin</i>	132
RHOPRESSA	137	RYBELSUS	104	<i>sevelamer carbonate</i>	107
<i>ribavirin</i>	15, 114	RYCLORA	140	<i>sevelamer hcl</i>	107
RIDAURA	124	RYDAPT	29	SEYSARA	22
<i>rifabutin</i>	20	RYKINDO	62	<i>sf 94</i>	
<i>rifampin</i>	20	RYTARY	37	<i>sf 5000 plus</i>	94
RILUTEK	92	RYVENT	140	SFROWASA	112
<i>riluzole</i>	92	<b>S</b>		<i>sharobel</i>	127
<i>rimantadine</i>	15	SABRIL	35	SHINGRIX (PF)	120
RINVOQ	124	SAFYRAL	132	SIGNIFOR	30
RIOMET	104	<i>sajazir</i>	144	SIKLOS	30
RIOMET ER	104	SALAGEN (PILOCARPINE)	92, 94	<i>sildenafil (pulm.hypertension)</i>	
<i>risedronate</i>	92, 121	<i>salsalate</i>	50	SILENOR	62
RISPERDAL	62	SAMSCA	102	SILIQ	78
RISPERDAL CONSTA	61	SANCUSO	112	<i>silodosin</i>	147
<i>risperidone</i>	62	SANDIMMUNE	29, 30	SILVADENE	79
<i>risperidone microspheres</i>	62	SANDOSTATIN LAR		<i>silver sulfadiazine</i>	79
RITALIN	62	DEPOT	30	SIMBRINZA	137
RITALIN LA	62	SANTYL	90	<i>simliya (28)</i>	132
RITEFLO AEROCHAMBER	97	SAPHRIS	62	<i>simpesse</i>	132
<i>ritonavir</i>	15	<i>sapropterin</i>	102	SIMPONI	124
<i>rivastigmine</i>	40	SAVAYSA	74	<i>simvastatin</i>	76
<i>rivastigmine tartrate</i>	40	SAVELLA	124	SINEMET	37
<i>rivelsa</i>	132	<i>saxagliptin</i>	104	SINGULAIR	144
<i>rizatriptan</i>	39	<i>saxagliptin-metformin</i>	104	<i>sirolimus</i>	30
ROBINUL	107	<i>scalacort</i>	89	SIRTURO	20
ROBINUL FORTE	107	SCALACORT DK	89	SIVEXTRO	20
ROCALTROL	102	SCEMBLIX	30	SKYCLARYS	40
ROCKLATAN	137	<i>scopolamine base</i>	112	SKYRIZI	78, 112
<i>roflumilast</i>	144	SECUADO	62	SKYTROFA	116
ROLVEDON	116	SEGLENTIS	46	SLYND	132
<i>ropinirole</i>	37	SEGLUROMET	104	<i>smoothlax</i>	112
<i>rosadan</i>	83	<i>selegiline hcl</i>	37	SOAANZ	71
ROSADAN	83	<i>selenium sulfide</i>	78	<i>sodium chloride</i>	92, 144
ROSULA	83	SELZENTRY	15	<i>sodium fluoride 5000 plus</i>	94
<i>rosuvastatin</i>	76	SEMGLEE(INSULIN GLARGINE-YFGN)	100	<i>sodium fluoride-pot nitrate</i>	94
ROSZET	76	SEMGLEE(INSULIN GLARG-YFGN)PEN	100	SODIUM OXYBATE	62
ROTARIX	120	<i>se-natal 19 chewable</i>	150	<i>sodium phenylbutyrate</i>	92
ROTATEQ VACCINE	120	<i>se-natal-19</i>	150	<i>sodium polystyrene sulfonate</i>	
ROWASA	112	SENSIPAR	102		107
<i>roweepra</i>	35	SEREVENT DISKUS	144	<i>sodium,potassium,mag sulfates</i>	
ROXICODONE	46	SERNIVO	89		112
ROXYBOND	46	SEROQUEL	62	SOFOSBUVIR-	
ROZEREM	62	SEROQUEL XR	62	VELPATASVIR	15
ROZLYTREK	29	SEROSTIM	116	SOGROYA	116
RUBRACA	29	<i>sertraline</i>	62	SOHONOS	92
RUCONEST	144			<i>solifenacin</i>	146
<i>rufinamide</i>	35			SOLIQUA 100/33	100

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

SOLODYN	22	SUBLOCADE	46	SYMPROIC	112
SOLOSEC	20	SUBOXONE	50	SYMTUZA	16
SOLTAMOX	30	<i>subvenite</i>	35	SYNAGIS	16
SOMA	42	<i>subvenite starter (blue) kit</i>	35	SYNALAR	89
SOMAVERT	102	<i>subvenite starter (green) kit</i>	35	SYNALAR CREAM KIT	89
SOOLANTRA	83	<i>subvenite starter (orange) kit</i>	35	SYNALAR OINTMENT KIT	89
<i>sorafenib</i>	30	SUCRAID	112	SYNALAR TS	89
SORILUX	78	<i>sucralfate</i>	114	SYNAREL	102
<i>sotalol</i>	66	SUFLAVE	112	SYNDROS	112
<i>sotalol af</i>	66	SULAR	71	SYNJARDY	104
SOTYKTU	78	SULCONAZOLE	86	SYNJARDY XR	105
SOTYLIZE	66	<i>sulfacetamide sodium</i>	138	SYNTROID	105
SOVALDI	15	<i>sulfacetamide sodium (acne)</i>	85	SYPRINE	92
SPACE CHAMBER	97	<i>sulfacetamide sodium-sulfur</i>	83	T	
SPIKEVAX 2023-2024(12Y UP)(PF)	120	<i>sulfacetamide-prednisolone</i>	138	TABLOID	30
<i>spinosalad</i>	90	<i>sulfacleanse 8-4</i>	83	TABRECTA	30
SPIRIVA RESPIMAT	144	<i>sulfadiazine</i>	21	TACLONEX	78
SPIRIVA WITH HANDIHALER	144	<i>sulfamethoxazole-trimethoprim</i>	21	<i>tacrolimus</i>	30, 80
<i>spironolactone</i>	71	SULFAMYLYON	85	<i>tadalafil (pulm. hypertension)</i>	144
<i>spironolacton-hydrochlorothiaz</i>	71	<i>sulfasalazine</i>	112	TADLIQ	144
SPORANOX	13	<i>sulfatrim</i>	21	TAFINLAR	30
SPRAVATO	62	<i>sulindac</i>	50	<i>tafluprost (pf)</i>	137
sprintec (28)	132	<i>sumatriptan</i>	39	TAGRISSO	30
SPRITAM	35	<i>sumatriptan succinate</i>	39	TAKE ACTION	132
SPRIX	50	<i>sumatriptan-naproxen</i>	39	TAKHYRO	144
SPRYCEL	30	<i>sunitinib malate</i>	30	TALICIA	114
<i>sps (with sorbitol)</i>	107	SUNLENCA	16	TALTZ AUTOINJECTOR	78
<i>sronyx</i>	132	SUNOSI	63	TALTZ AUTOINJECTOR (2 PACK)	78
<i>ssd</i>	79	<i>super b maxi complex</i>	150	TALTZ AUTOINJECTOR (3 PACK)	78
<i>st joseph aspirin</i>	50	<i>super quints</i>	150	TALTZ SYRINGE	78
<i>st. joseph aspirin</i>	50	SUPPRELIN LA	30	TALZENNA	30
<i>stavudine</i>	15	SUPREP BOWEL PREP KIT	112	TAMIFLU	16
STEGLATRO	104	SURE RESULT TAC PAK	89	<i>tamoxifen</i>	30
STEGLUJAN	104	SUTAB	112	<i>tamsulosin</i>	147
STELARA	78	SUTENT	30	TAPERDEX	96
STIMUFEND	116	<i>syeda</i>	132	TARCEVA	30
STIOLTO RESPIMAT	144	<i>symax fastabs</i>	107	TARGADOX	22
STIVARGA	30	<i>symax-sl</i>	107	TARGRETIN	30
<i>stop smoking aid</i>	93	<i>symax-sr</i>	107	<i>tarina 24 fe</i>	132
STRATTERA	62, 63	SYMBICORT	144	<i>tarina fe 1/20 (28)</i>	132
STRENSIQ	102	SYMBYAX	63	<i>taron-c dha</i>	150
<i>stress formula with iron</i>	150	SYMDEKO	144	TARPEYO	96
<i>stress formula with iron(sulf)</i>	150	SYMFI	16	TASCENO ODT	118
		SYMFI LO	16	TASIGNA	30
STRIBILD	15	SYMJEPI	140	<i>tasimelteon</i>	63
STRIVERDI RESPIMAT	144	SYMLINPEN 120	104	TASMAR	37
STROMECTOL	20	SYMLINPEN 60	104		
		SYMPAZAN	35		

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

<i>tavaborole</i>	86	<i>theophylline</i>	144	TOUJEO MAX U-300
TAVALISSE	74	THIOLA	92	SOLOSTAR .....100
TAVNEOS	92	THIOLA EC	92	TOUJEO SOLOSTAR U-300
TAYTULLA	132	<i>thioridazine</i>	63	INSULIN .....100
<i>tazarotene</i>	83	<i>thiothixene</i>	63	<i>tovet emollient</i> .....89
TAZAROTENE	83	THYQUIDITY	105	TOVET KIT .....89
TAZORAC	83	<i>thyroid (pork)</i>	105	TOVIAZ .....146
<i>taztia xt</i>	71	<i>tiadylt er</i>	71	TRACLEER .....145
TAZVERIK	30	<i>tiagabine</i>	36	TRADJENTA .....105
TDVAX	120	TIAZAC	71	<i>tramadol</i> .....50
TECFIDERA	118	TIBSOVO	31	TRAMADOL .....50
TEGRETOL	35, 36	TIGLUTIK	92	<i>tramadol-acetaminophen</i> .....50
TEGRETOL XR	36	TIKOSYN	66	<i>trandolapril</i> .....71
TEKTURNA	71	<i>tilia fe</i>	133	<i>trandolapril-verapamil</i> .....71
<i>telmisartan</i>	71	<i>timolol maleate</i>	71, 135	<i>tranexamic acid</i> .....128
<i>telmisartanamlodipine</i>	71	<i>timolol maleate (pf)</i>	135	TRANSDERM-SCOP .....112
<i>telmisartanhydrochlorothiazid</i>	71	TIMOPTIC OCUDOSE (PF)	135	<i>tranylcypromine</i> .....63
<i>temazepam</i>	63	<i>tinidazole</i>	20	TRAVATAN Z .....137
TEMBEXA	16	<i>tiopronin</i>	92	<i>travoprost</i> .....137
TEMOVATE	89	<i>tiotropium bromide</i>	144	<i>trazodone</i> .....63
<i>temozolomide</i>	30	TIROSINT	105	TRECATOR .....20
<i>tencon</i>	46	TIROSINT-SOL	105	TRELEGY ELLIPTA .....145
TENIVAC (PF)	120	TIVICAY	16	TRELSTAR .....31
<i>tenofovir disoproxil fumarate</i>	16	TIVICAY PD	16	TREMFYA .....78
TENORETIC 100	71	TIVORBEX	50	TRESIBA FLEXTOUCH U-
TENORETIC 50	71	<i>tizanidine</i>	42	100 .....100
TENORMIN	71	TLANDO	102	TRESIBA FLEXTOUCH U-
TEPMETKO	30	TOBI	20	200 .....100
<i>terazosin</i>	71	TOBI PODHALER	20	TRESIBA U-100 INSULIN
<i>terbinafine hcl</i>	13	TOBRADEX	138	.....100
<i>terbutaline</i>	144	TOBRADEX ST	138	<i>tretinoin</i> .....83
<i>terconazole</i>	128	<i>tobramycin</i>	20, 134	<i>tretinoin (antineoplastic)</i> .....31
<i>teriflunomide</i>	118	<i>tobramycin in 0.225 % nacl</i>	.20	<i>tretinoin microspheres</i> .....83
<i>teriparatide</i>	121	TOBRAMYCIN WITH		TREXALL .....31
TERIPARATIDE	121	NEBULIZER	20	TREXIMET .....39
TESTIM	102	<i>tobramycin-dexamethasone</i>	138	TREZIX .....46
<i>testosterone</i>	102	TOBREX	134	<i>triamicinolone acetonide</i> 90, 94,
<i>testosterone cypionate</i>	102	TOLAK	80	145
<i>testosterone enanthate</i>	102	<i>tolcapone</i>	37	<i>triamterene</i> .....72
<i>tetrabenazine</i>	40	TOLSURA	13	<i>triamterene-hydrochlorothiazid</i>
<i>tetracaine hcl</i>	136	<i>tolterodine</i>	146	.....72
TETRACAINE HCL (PF)	136	<i>tolvaptan</i>	102	<i>triazolam</i> .....63
<i>tetracycline</i>	22	TOPAMAX	36	TRIBENZOR .....72
TEXACORT	89	TOPICORT	89	<i>tricon</i> .....150
TEZSPIRE	144	<i>topiramate</i>	36	TRICOR .....76
THALITONE	71	TOPROL XL	71	<i>triderm</i> .....90
THALOMID	31	<i>toremifene</i>	31	<i>trientine</i> .....92
THEO-24	144	<i>torsemide</i>	71	TRIENTINE .....92
		TOSYMRA	39	<i>tri-estarrylla</i> .....133
				<i>trifluoperazine</i> .....63

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

<i>trifluridine</i>	134	TYBLUME	133	<i>vandazole</i>	128
<i>trihexyphenidyl</i>	37	TYBOST	16	VANFLYTA	31
TRIJARDY XR	105	<i>tydemy</i>	133	VANOS	90
TRIKAFTA	145	TYKERB	31	VAQTA (PF)	120
<i>tri-legest fe</i>	133	TYMLOS	122	<i>varenicline</i>	93
TRILEPTAL	36	TYRVAYA	136	VARIVAX (PF)	120
<i>tri-linyah</i>	133	TYVASO	145	VAROPHEN (DICLOFENAC)	
TRILIPIX	76	TYVASO DPI	145		50
<i>tri-lo-estarrylla</i>	133	TYVASO REFILL KIT	145	VARUBI	112
<i>tri-lo-marzia</i>	133	TYVASO STARTER KIT	145	VASCEPA	76
<i>tri-lo-mili</i>	133	<b>U</b>		VASERETIC	72
<i>tri-lo-sprintec</i>	133	UBRELVY	39	VASOTEC	72
<i>trimethobenzamide</i>	112	UCERIS	112	VAXELIS (PF)	120
<i>trimethoprim</i>	23	UDENYCA	116	VAXNEUVANCE (PF)	120
<i>tri-mili</i>	133	UDENYCA AUTOINJECTOR		VCF CONTRACEPTIVE	
<i>trimipramine</i>	63		116	FILM	128
<i>trinatal rx 1</i>	150	UDENYCA ONBODY	116	VCF CONTRACEPTIVE GEL	
<i>trinate</i>	150	ULESFIA	90		128
TRINTELLIX	63	ULORIC	121	VECTICAL	78
<i>tri-nymyo</i>	133	ULTRAVATE	90	<i>velvet triphasic regimen (28)</i>	
TRIPTODUR	31	<i>unithroid</i>	105		133
<i>tri-sprintec (28)</i>	133	UPTRAVI	72	VELPHORO	107
TRIUMEQ	16	urea	80	VELSIPITY	112
TRIUMEQ PD	16	UROCIT-K 10	147	VELTASSA	107
<i>tri-vitamin with fluoride</i>	150	UROCIT-K 15	147	VELTIN	83
<i>trivora (28)</i>	133	UROXATRAL	147	VEMLIDY	16
<i>tri-vylibra</i>	133	URSO 250	112	VENCLEXTA	31
<i>tri-vylibra lo</i>	133	URSO FORTE	112	VENCLEXTA STARTING	
TROKENDI XR	36	<i>ursodiol</i>	112	PACK	31
<i>tropicamide</i>	135	UZEDY	63, 64	<i>venlafaxine</i>	64
<i>trospium</i>	146	<b>V</b>		VENLAFAXINE BESYLATE	
TRUDHESA	39	VAGIFEM	127		64
TRULANCE	112	<i>valacyclovir</i>	16	VENTAVIS	145
TRULICITY	105	VALCHLOR	80	VENTOLIN HFA	145
TRUMENBA	120	VALCYTE	16	VEOZAH	128
TRUQAP	31	<i>valganciclovir</i>	16	<i>verapamil</i>	72
TRUSTEX LUBRICATED CONDOMS	125	VALIUM	64	VERDESO	90
TRUSTEX-RIA NON-LUB CONDOMS	125	<i>valproic acid</i>	36	VEREGEN	80
TRUVADA	16	<i>valproic acid (as sodium salt)</i>		VERELAN PM	72
TUDORZA PRESSAIR	145		36	VERKAZIA	136
TUKYSA	31	valsartan	72	VERQUVO	77
<i>tulana</i>	127	VALSARTAN	72	VERSACLOZ	64
TURALIO	31	<i>valsartan-hydrochlorothiazide</i>		VERZENIO	31
<i>turqoz (28)</i>	133		72	VESICARE	146
TUXARIN ER	140	VALTOCO	36	VESICARE LS	146
TWINRIX (PF)	120	VALTREX	16	<i>vestura (28)</i>	133
TWIRLA	128	<i>vanadom</i>	42	VEVYEE	136
TWYNEO	83	VANCOCIN	23	VFEND	13
		<i>vancomycin</i>	23	V-GO 20	98
				V-GO 30	98

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

V-GO 40	98	<i>vyfemla</i> (28)	133	XELJANZ	124
VIBERZI	112	VYLEESI	64	XELJANZ XR	124
VIBRAMYCIN	22	<i>vylibra</i>	133	XELODA	31, 32
VICTOZA 2-PAK	105	VYNDAMAX	77	XELPROS	137
VICTOZA 3-PAK	105	VYNDAQEL	77	XELSTRYM	64
vienna	133	VYTORIN 10-10	76	XENAZINE	40
vigabatrin	36	VYTORIN 10-20	76	XENLETA	20
vigadrone	36	VYTORIN 10-40	76	XEPI	85
VIGAMOX	134	VYTORIN 10-80	76	XERESE	86
vigpoder	36	VYVANSE	64	XERMELO	32
VIIBRYD	64	VYZULTA	137	XHANCE	145
VIJOICE	31	<b>W</b>		XIFAXAN	20
vilazodone	64	WAKIX	64	XIGDUO XR	105
VIMOVO	50	<i>warfarin</i>	74	XXIIDRA	136
VIMPAT	36	WELCHOL	76	XILAPAK	90
VIOKACE	113	WELIREG	31	XIMINO	22
viorele (28)	133	WELLBUTRIN SR	64	XOFLUZA	16
VIRACEPT	16	WELLBUTRIN XL	64	XOLAIR	145
VIRAZOLE	16	<i>wera</i> (28)	133	XOLEGEL	86
VIREAD	16	<i>wescap-c dha</i>	150	XOPENEX HFA	145
VISTARIL	140	<i>wesnatal dha complete</i>	150	XOSPATA	32
VISTOGARD	23	<i>westab plus</i>	150	XPHOZAH	107
vitamin b complex-folic acid	150	WHYTEDERM TDPAK	90	XPOVIO	32
vitamins a,c,d and fluoride	150	WHYTEDERM TRILASIL		XTAMPZA ER	46
VITRAKVI	31	PAK	90	XTANDI	32
VIVELLE-DOT	127	<b>WIDE-SEAL DIAPHRAGM</b>		xulane	128
VIVITROL	51	125		XULTOPHY 100/3.6	100
VIVJOA	13	WINLEVI	83	XURIDEN	92
VIVLODEX	51	<i>wixela inhub</i>	145	XYOSTED	102
VIZIMPRO	31	<i>women's gentle laxative(bisac)</i>	113	XYREM	64
VOGELXO	102	<i>wymzya fe</i>	133	XYWAV	65
volnea (28)	133	WYNZORA	78	<b>Y</b>	
VONJO	31	<b>X</b>		YASMIN (28)	133
VOQUEZNA	114	XACIATO	128	YAZ (28)	133
VOQUEZNA DUAL PAK	114	XADAGO	37	YONSA	32
VOQUEZNA TRIPLE PAK	114	XALATAN	137	YOSPRALA	74
voriconazole	13	XALKORI	31	YUFLYMA(CF)	125
<b>VORTEX HOLDING</b>		XANAX	64	YUFLYMA(CF) AI	
CHAMBER	97	XANAX XR	64	CROHN'S-UC-HS	124
VOSEVI	16	XARELTO	74	YUFLYMA(CF)	
VOTRIENT	31	XARELTO DVT-PE TREAT		AUTOINJECTOR	124
VOWST	113	30D START	74	YUPELRI	145
VOXZOGO	102	XATMEP	31	YUSIMRY(CF) PEN	125
VRAYLAR	64	XCOPRI	36	<i>yuvafem</i>	127
VTAMA	78	XCOPRI MAINTENANCE		<b>Z</b>	
VUITY	135	PACK	36	zafemy	128
VUMERTY	118	XCOPRI TITRATION PACK		zafirlukast	145
VUSION	86	36		zaleplon	65
		XDEMVY	136	ZANAFLEX	42
				zarah	133

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

ZARONTIN .....	36	ZESTRIL .....	72	ZOMIG .....	39
ZARXIO .....	116	ZETIA .....	76	ZONALON .....	80
<i>zatean-pn dha</i> .....	150	ZETONNA .....	145	ZONEGRAN .....	36
<i>zatean-pn plus</i> .....	150	ZIAGEN .....	16	ZONISADE .....	36
ZAVZPRET .....	39	ZIANA .....	84	<i>zonisamide</i> .....	36
ZCORT .....	96	ZICLOPRO .....	51	ZONTIVITY .....	74
ZEGALOGUE AUTOINJECTOR.....	97	<i>zidovudine</i> .....	16	ZORTRESS .....	32
ZEGALOGUE SYRINGE .....	97	ZIEXTENZO .....	116	ZORVOLEX .....	51
ZEGERID .....	114	<i>zileuton</i> .....	146	ZORYVE .....	78
ZEJULA .....	32	ZILXI .....	84	<i>zovia 1-35 (28)</i> .....	133
ZELAPAR .....	38	ZIMHI .....	51	ZOVIRAX .....	86
ZELBORA <small>F</small> .....	32	ZIOPTAN (PF) .....	137	ZTALMY .....	36
ZELNORM .....	113	<i>ziprasidone hcl</i> .....	65	ZTLIDO .....	84
ZEMBRACE SYMTOUCH .....	39	ZIPSOR .....	51	ZUBSOLV .....	51
ZEMPLAR .....	102	ZIRGAN .....	134	<i>zumandimine (28)</i> .....	133
<i>zenatane</i> .....	83	ZITHROMAX .....	18	ZURZUVAE .....	65
ZENPEP .....	113	ZITHROMAX TRI-PAK .....	18	ZYCLARA .....	121
<i>zenzedi</i> .....	65	ZITHROMAX Z-PAK .....	18	ZYDELIG .....	32
ZENZEDI .....	65	ZITUVIO .....	105	ZYFLO .....	146
ZEPATIER .....	16	ZOCOR .....	76	ZYKADIA .....	32
ZEPOSIA .....	40	ZOKINVY .....	92	ZYLET .....	138
ZEPOSIA STARTER KIT (28-DAY) .....	41	ZOLADEX .....	32	ZYLOPRIM .....	121
ZEPOSIA STARTER PACK (7-DAY) .....	41	ZOLINZA .....	32	ZYPITAMAG .....	76
ZERVIA <small>T</small> E .....	136	<i>zolmitriptan</i> .....	39	ZYPREXA .....	65
ZESTORETIC .....	72	ZOLOFT .....	65	ZYPREXA RELPREVV .....	65
		<i>zolpidem</i> .....	65	ZYPREXA ZYDIS .....	65
		ZOLPIDEM .....	65	ZYTIGA .....	32
		ZOMACTON .....	116	ZYVOX .....	20

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