

NAVITUS MEDICARERX (PDP) 2025 LIST OF COVERED DRUGS, "DRUG LIST" UNIVERSITY OF CALIFORNIA

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

HPMS Approved Drug List File Submission ID 00025027, Version Number 07

This Drug List was updated on 09/27/2024. For more recent information or other questions, please contact Navitus MedicareRx Prescription Drug Plan (PDP) Customer Care at 1-833-837-4309 (for TTY/TDD users, please call 711), available 24 hours a day, 7 days a week (except on Thanksgiving and Christmas Day) or visit our website at memberportal.navitus.com or UChealthplans.com/medicare.

- **Important Message About What You Pay for Vaccines** - Our plan covers most Part D vaccines at no cost to you. Call Customer Care for more information.
- **Important Message About What You Pay for Insulin** - You won't pay more than \$35 for a one-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it's on.

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

When this Drug List (Formulary) refers to "we", "us", "our", "plan" or "our plan", it means Navitus MedicareRx (PDP).

This document includes a list of the drugs (Drug List) for our plan which is current as of 09/27/2024. For an updated Drug List, please contact us. Our contact information, along with the date we last updated the Drug List, appears on the front and back cover pages.

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

What is the Navitus MedicareRx (PDP) Drug List (formulary)?

In this document, we use the terms Drug List and formulary to mean the same thing. A Drug List is a list of covered drugs selected by Navitus MedicareRx (PDP) in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Navitus MedicareRx (PDP) will generally cover the drugs listed in our Drug List if the drug is medically necessary, the prescription is filled at a Navitus MedicareRx (PDP) network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

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

For a complete listing of all prescription drugs covered by Navitus MedicareRx (PDP), please visit our website at memberportal.navitus.com or UChealthplans.com/medicare or call us. Our contact information, along with the date we last updated the Drug List, appears on the front and back cover pages.

Can the Drug List (formulary) change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: memberportal.navitus.com or UChealthplans.com/medicare.

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

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our drug list if we are replacing it with a certain new version of that drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our drug list, but immediately move it to a different cost-sharing tier or add new restrictions.

We can make these immediate changes only if we are adding a new generic version of a brand name drug or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription).

If you are currently taking the brand name drug or original biological product, we may not tell you in advance before we make an immediate change, but we will later provide you with information about the specific change(s) we have made.

If we make such a change, you or your prescriber can ask us to make an exception and continue to cover for you the drug that is being changed. For more information, see the section below titled “How do I request an exception to the Navitus MedicareRx (PDP) Drug List?”

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

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a generic drug that is not new to the market to replace a brand-name drug currently on the Drug List or add new restrictions to the brand-name drug or move it to a different cost-sharing tier or both. Or we may make changes based on new clinical guidelines. If we remove drugs from our Drug List, add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug.
 - If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand-name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the Navitus MedicareRx (PDP) Drug List?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2025 Drug List that is covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2025 coverage year except as described above. This means these drugs will remain available at the same cost-sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the Drug List for the new benefit year for any changes to drugs.

The enclosed Drug List is current as of 09/27/2024. The Drug List is updated each month and is available on the website at memberportal.navitus.com or UHealthplans.com/medicare. We update our online Drug List on a regularly scheduled basis to include any changes that have occurred after the last update. When changes to the Drug List occur during the year, we post the Drug List on our Member Portal including those changes. In the event of CMS-approved non-maintenance changes to the Drug List throughout the plan year, Navitus MedicareRx (PDP) will notify you. To get updated information about the drugs covered by Navitus MedicareRx (PDP) please contact us. Our contact information appears on the front and back cover pages.

How do I use the Drug List?

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

Medical Condition

The Drug List begins on page 10. The drugs in this Drug List are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, “Cardiovascular Agents”. If you know what your drug is used

for, look for the category name in the list that begins on page 10. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 100. The Index provides an alphabetical list of all the drugs included in this document. Both brand-name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

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

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

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

- For discussion of drug types, please see the Evidence of Coverage, Chapter 3 Section 3.1, “The ‘Drug List’ tells which Part D drugs are covered.”

Are there any restrictions on my coverage?

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

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

MedicareRx (PDP) may then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the Drug List that begins on page 10. You can also get more information about the restrictions applied to specific covered drugs by visiting the member portal. We have posted online documents that explain our prior authorization restriction and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the Drug List, appears on the front and back cover pages.

You can ask Navitus MedicareRx (PDP) to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, “How do I request an exception to the Navitus MedicareRx (PDP) Drug List?” for information about how to request an exception.

Cost Sharing – Brand vs. Generic Drugs

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

What are Over the Counter (OTC) drugs?

OTC drugs are non-prescription drugs that are not normally covered by a Medicare Prescription Drug Plan. Navitus MedicareRx (PDP) pays for certain OTC drugs. The cost to Navitus MedicareRx (PDP) of these OTC drugs will not count toward your total Part D drug costs (that is, the cost of the OTC drugs does not count for the coverage gap).

What if my drug is not on the Drug List?

If your drug is not included in this Drug List (list of covered drugs), you should first contact Customer Care and ask if your drug is covered. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

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

- You can ask Customer Care for a list of similar drugs covered by Navitus MedicareRx (PDP). When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by Navitus MedicareRx (PDP).
- You can ask Navitus MedicareRx (PDP) to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the Navitus MedicareRx (PDP) Drug List?

You can ask Navitus MedicareRx (PDP) to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our Drug List. If approved, this drug will be covered at a pre-determined cost-sharing level, and you cannot ask us to provide the drug at a lower cost-sharing level.

- You can ask us to cover a Drug List drug at a lower cost-sharing level unless the drug is on a specialty tier. If approved, this would lower the amount you must pay for your drug.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, Navitus MedicareRx (PDP) limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

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

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

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

As a new or continuing member in our plan you may be taking drugs that are not on our Drug List. Or, you may be taking a drug that is on our Drug List but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a Drug List (Formulary) exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

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

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

Level of Care Changes

Navitus MedicareRx's level of care transition process accounts for unplanned changes for members. In some instances, these changes may result in the prescribed drug regimen(s) not being available on our Drug List. These instances usually occur when a member moves from one treatment setting to another. This could include members who:

- Enter long-term care (LTC) facilities with a discharge list of medications from the hospital with very short-term planning taken into account (e.g., less than 8 hours).
- Are discharged from a hospital to a home with very short-term planning taken into account.

- End their skilled nursing facility Medicare Part A stay (where payments include all pharmacy charges) and who need to go back to their Part D plan Drug List.
- Give up hospice status to revert to standard Medicare Part A and Part B benefits.
- End an LTC facility stay and return to their home.
- Are discharged from psychiatric hospitals with drug regimens that are highly tailored to them.

These changes often result in members and/or prescribers using Navitus' exceptions and/or appeals processes. For these types of changes, we will make coverage determinations and re-determinations as quickly as the member's health requires.

Navitus MedicareRx (PDP) ensures proper medication continuance for members upon discharge from an LTC facility or other facilities to ensure an effective transition of care. This may include:

- A refill upon entrance to, or discharge from, an LTC facility. The current standard of care promotes caregivers receiving outpatient Part D prescriptions before discharge from a Part A stay. Members, through no fault of their own, may not have access to the balance of their prescription.
- Navitus MedicareRx (PDP) allows the member to access a refill upon entrance to, or discharge from, an LTC facility.

To process these transition refills, the pharmacy may need to call Navitus MedicareRx (PDP) Customer Care (phone numbers are on the back cover of this booklet). Navitus MedicareRx (PDP) Customer Care can help the pharmacy process an override.

For more information

Please review your Evidence of Coverage and other plan materials for more detailed information about your Navitus MedicareRx (PDP) prescription drug coverage.

If you have questions about Navitus MedicareRx (PDP), please contact us. Our contact information, along with the date we last updated the Drug List, appears on the front and back cover pages.

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

Navitus MedicareRx (PDP) Drug List

The Drug List below provides coverage information about the drugs covered by Navitus MedicareRx (PDP). If you have trouble finding your drug in the list, turn to the Index that begins on page 100.

The first column of the chart lists the drug name.

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

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

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

And

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

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

- **Insulin (INS):** Insulin products on the Drug List are available at a reduced copay.
- **Limited Distribution (LD):** This prescription may be available only at certain pharmacies. For more information consult your Pharmacy Directory or call Customer Care at 1-833-837-4309 (TTY/TDD users should call 711), 24 hours a day, 7 days a week (except on Thanksgiving and Christmas Day) or visit the website at memberportal.navitus.com or UChealthplans.com/medicare.
- **Non-extended Day Supply (NDS):** You may be able to receive greater than a 1-month supply of most of the drugs on your Drug List. Drugs noted with “NDS” are limited to a 1-month supply for Retail, Mail Order and Specialty.
- **Prior Authorization (PA):** The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from The Plan before you fill your prescriptions. If you don’t get approval, Navitus MedicareRx (PDP) may not cover the drug.
- **Prior Authorization Restriction for Part B vs Part D Determination (PA_BvD):** This drug may be eligible for payment under Medicare Part B or Part D. You (or your physician) are required to get prior authorization from Navitus MedicareRx (PDP) to determine that this drug is covered under Medicare Part D before you fill your prescription for this drug. Without prior approval, Navitus MedicareRx (PDP) may not cover this drug.
- **Prior Authorization Restriction for New Starts Only (PA_NSO):** If this drug is new to you, you (or your physician) are required to get prior authorization from Navitus MedicareRx (PDP) before you fill your prescription for this drug. Without prior approval, Navitus MedicareRx (PDP) may not cover this drug.
- **Step Therapy (ST):** In some cases, Navitus MedicareRx (PDP) requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, Navitus MedicareRx (PDP) may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Navitus MedicareRx (PDP) will then cover Drug B.
- **Step Therapy for New Starts Only (ST_NSO):** If this drug is new to you, you are required to first try certain drugs to treat your medical condition before we will cover another drug for that condition.

- **Quantity Limits (QL):** For certain drugs, Navitus MedicareRx (PDP) limits the amount of the drug that Navitus MedicareRx (PDP) will cover. This could include a per fill, daily, monthly, or yearly limitation.
- **Rx Cents (RXC):** This medication is offered at half the stated tier copay when your prescriber writes a prescription for half-tab daily. For example, if you take one 20mg tablet per day that is listed on the Drug List as a Tier 1 drug, the prescriber might write the prescription for half of a 40mg tab per day. Then you would pay \$2.50 per month instead of \$5 per month. For more information or to acquire a tablet splitter, contact Customer Care.
- **Vaccines for Part D (VAC)** Part D vaccines are covered at no cost to you.

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

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>methylphenidate 10mg er tab</i>	1	
<i>methylphenidate 10mg tab</i>	1	
<i>methylphenidate 18mg er tab</i>	2	
METHYLPHENIDATE 18MG ER TAB	2	
<i>methylphenidate 1mg/ml oral soln</i>	2	
<i>methylphenidate 20mg er tab</i>	1	
<i>methylphenidate 20mg tab</i>	1	
METHYLPHENIDATE 27MG SR TAB	2	
<i>methylphenidate 2mg/ml oral soln</i>	2	
METHYLPHENIDATE 36MG SR TAB	2	
METHYLPHENIDATE 54MG SR TAB	2	
<i>methylphenidate 5mg tab</i>	1	
<i>methylphenidate ER osmotic 27mg tab</i>	2	
<i>methylphenidate ER osmotic 36mg tab</i>	2	
<i>methylphenidate ER osmotic 54mg tab</i>	2	
<i>modafinil 100mg tab</i>	1	PA QL=60 Quantity/30 Days
<i>modafinil 200mg tab</i>	1	PA QL=60 Quantity/30 Days
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
<i>amikacin 250mg/ml inj</i>	2	
<i>amikacin sulfate 1gm/4ml inj</i>	2	
ARIKAYCE 590MG/8.4ML INH SUSP	4	LD NDS PA QL=252 Quantity/30 Days
GENTAMICIN 0.8MG/ML INJ	2	
<i>gentamicin 1.2mg/ml inj</i>	2	
GENTAMICIN 1.6MG/ML INJ	2	
GENTAMICIN 1MG/ML INJ	2	
<i>gentamicin 40mg/ml inj</i>	2	
<i>neomycin sulfate 500mg tab</i>	1	
STREPTOMYCIN 1000MG INJ	2	
<i>tobramycin 1.2gm inj</i>	2	
<i>tobramycin 1.2gm/30ml inj</i>	2	
TOBRAMYCIN 10MG/ML INJ	2	
TOBRAMYCIN 2GM/50ML INJ	2	
<i>tobramycin 40mg/ml inj</i>	2	
<i>tobramycin 60mg/ml inh soln</i>	1	PA QL=300 Quantity/30 Days
TOBRAMYCIN 60MG/ML INH SOLN	1	PA QL=300 Quantity/30 Days
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
<i>leflunomide 10mg tab</i>	1	
<i>leflunomide 20mg tab</i>	1	
OLUMIANT 1MG TAB	4	NDS PA QL=30 Quantity/30 Days
OLUMIANT 2MG TAB	4	NDS PA QL=30 Quantity/30 Days
OLUMIANT 4MG TAB	4	NDS PA QL=30 Quantity/30 Days
RINVOQ 15MG ER TAB	4	NDS PA QL=30 Quantity/30 Days
RINVOQ 30MG ER TAB	4	NDS PA QL=30 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RINVOQ 45MG ER TAB	4	NDS PA QL=30 Quantity/30 Days
XELJANZ 10MG TAB	4	NDS PA QL=60 Quantity/30 Days
XELJANZ 1MG/ML ORAL SOLN	4	NDS PA QL=300 Quantity/30 Days
XELJANZ 5MG TAB	4	NDS PA QL=60 Quantity/30 Days
XELJANZ XR 11MG TAB	4	NDS PA QL=30 Quantity/30 Days
XELJANZ XR 22MG TAB	4	NDS PA QL=30 Quantity/30 Days
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
CIMZIA 200MG INJ	4	NDS PA QL=2 Quantity/28 Days
CIMZIA 200MG/ML INJ	4	NDS PA QL=2 Quantity/28 Days
CIMZIA 200MG/ML INJ STARTER KIT	4	NDS PA QL=2 Quantity/28 Days
ENBREL 25MG INJ	4	NDS PA QL=8 Quantity/28 Days
ENBREL 25MG/0.5ML INJ	4	NDS PA QL=8 Quantity/28 Days
ENBREL 25MG/0.5ML SYRINGE	4	NDS PA QL=16 Quantity/28 Days
ENBREL 50MG/ML AUTO-INJECTOR	4	NDS PA QL=8 Quantity/28 Days
ENBREL 50MG/ML CARTRIDGE	4	NDS PA QL=8 Quantity/28 Days
ENBREL 50MG/ML SYRINGE	4	NDS PA QL=8 Quantity/28 Days
HADLIMA 40MG/0.4ML AUTO-INJECTOR	4	NDS PA QL=6 Quantity/28 Days
HADLIMA 40MG/0.4ML SYRINGE	4	NDS PA QL=6 Quantity/28 Days
HADLIMA 40MG/0.8ML AUTO-INJECTOR	4	NDS PA QL=6 Quantity/28 Days
HADLIMA 40MG/0.8ML SYRINGE	4	NDS PA QL=6 Quantity/28 Days
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA 162MG/0.9ML AUTO-INJECTOR	4	NDS PA QL=3.60 Quantity/28 Days
ACTEMRA 162MG/0.9ML SYRINGE	4	NDS PA QL=3.60 Quantity/28 Days
KEVZARA 150MG/1.14ML AUTO-INJECTOR	4	NDS PA QL=2.28 Quantity/28 Days
KEVZARA 150MG/1.14ML SYRINGE	4	NDS PA QL=2.28 Quantity/28 Days
KEVZARA 200MG/1.14ML AUTO-INJECTOR	4	NDS PA QL=1 Quantity/28 Days
KEVZARA 200MG/1.14ML SYRINGE	4	NDS PA QL=2.28 Quantity/28 Days
TYENNE 162MG/0.9ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
TYENNE 162MG/0.9ML SYRINGE	4	NDS PA QL=4 Quantity/30 Days
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
<i>celecoxib 100mg cap</i>	1	
<i>celecoxib 200mg cap</i>	1	
<i>celecoxib 400mg cap</i>	1	
<i>celecoxib 50mg cap</i>	1	
<i>diclofenac potassium 50mg tab</i>	1	
<i>diclofenac sodium 1.5% topical soln</i>	2	QL=300 Quantity/30 Days
<i>diclofenac sodium 100mg er tab</i>	1	
<i>diclofenac sodium 25mg dr tab</i>	1	
<i>diclofenac sodium 50mg dr tab</i>	1	
<i>diclofenac sodium 75mg dr tab</i>	1	
<i>diflunisal 500mg tab</i>	1	
<i>etodolac 200mg cap</i>	1	
<i>etodolac 300mg cap</i>	1	
<i>etodolac 400mg tab</i>	1	
<i>etodolac 500mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>flurbiprofen 100mg tab</i>	1	
<i>ibuprofen 400mg tab</i>	1	
<i>ibuprofen 600mg tab</i>	1	
<i>ibuprofen 800mg tab</i>	1	
<i>indomethacin 25mg cap</i>	1	
<i>indomethacin 50mg cap</i>	1	
<i>indomethacin 75mg er cap</i>	1	
<i>ketorolac tromethamine 10mg tab</i>	1	QL=20 Quantity/5 Days
<i>meloxicam 15mg tab</i>	1	
<i>meloxicam 7.5mg tab</i>	1	
<i>nabumetone 500mg tab</i>	1	
<i>nabumetone 750mg tab</i>	1	
<i>naproxen 250mg tab</i>	1	
<i>naproxen 375mg dr tab</i>	2	
<i>naproxen 375mg tab</i>	1	
<i>naproxen 500mg tab</i>	1	
<i>naproxen sodium 275mg tab</i>	2	
<i>naproxen sodium 550mg tab</i>	2	
<i>oxaprozin 600mg tab</i>	2	
<i>piroxicam 10mg cap</i>	1	
<i>piroxicam 20mg cap</i>	1	
<i>salsalate 500mg tab</i>	2	
<i>salsalate 750mg tab</i>	2	
<i>sulindac 150mg tab</i>	1	
<i>sulindac 200mg tab</i>	1	
<i>aspirin 81mg chew tab</i>	1*	
<i>aspirin 81mg EC tab</i>	1*	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA 20MG TAB	4	NDS PA QL=60 Quantity/30 Days
OTEZLA TAB 28-DAY STARTER PACK (55)	4	NDS PA QL=1 Quantity/28 Days
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA 125MG/ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
ORENCIA 125MG/ML SYRINGE	4	NDS PA QL=4 Quantity/28 Days
ORENCIA 50MG/0.4ML SYRINGE	4	NDS PA QL=1.60 Quantity/28 Days
ORENCIA 87.5MG/0.7ML SYRINGE	4	NDS PA QL=2.80 Quantity/28 Days
ANALGESICS - OPIOID		
OPIOID AGONISTS		
<i>fentanyl 100mcg/hr patch</i>	2	QL=10 Quantity/30 Days
<i>fentanyl 1200mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
FENTANYL 1200MCG LOZENGE ON A HANDLE	2	PA QL=120 Quantity/30 Days
<i>fentanyl 12mcg/hr patch</i>	2	QL=10 Quantity/30 Days
<i>fentanyl 1600mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
FENTANYL 1600MCG LOZENGE ON A HANDLE	2	PA QL=120 Quantity/30 Days
<i>fentanyl 200mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
FENTANYL 200MCG LOZENGE ON A HANDLE	2	PA QL=120 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fentanyl 25mcg/hr patch</i>	2	QL=10 Quantity/30 Days
<i>fentanyl 400mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
FENTANYL 400MCG LOZENGE ON A HANDLE	2	PA QL=120 Quantity/30 Days
<i>fentanyl 50mcg/hr patch</i>	2	QL=10 Quantity/30 Days
<i>fentanyl 600mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
FENTANYL 600MCG LOZENGE ON A HANDLE	2	PA QL=120 Quantity/30 Days
<i>fentanyl 75mcg/hr patch</i>	2	QL=10 Quantity/30 Days
<i>fentanyl 800mcg lozenge</i>	2	PA QL=120 Quantity/30 Days
FENTANYL 800MCG LOZENGE ON A HANDLE	2	PA QL=120 Quantity/30 Days
<i>hydromorphone 2mg tab</i>	1	QL=450 Quantity/30 Days
<i>hydromorphone 4mg tab</i>	1	QL=240 Quantity/30 Days
<i>hydromorphone 8mg tab</i>	1	QL=120 Quantity/30 Days
<i>methadone 10mg tab</i>	1	QL=360 Quantity/30 Days
<i>methadone 10mg/5ml oral soln</i>	1	QL=1800 Quantity/30 Days
METHADONE 1MG/ML ORAL SOLN	1	QL=3600 Quantity/30 Days
METHADONE 2MG/ML ORAL SOLN	1	QL=1800 Quantity/30 Days
<i>methadone 5mg tab</i>	1	QL=360 Quantity/30 Days
<i>methadone 5mg/5ml oral soln</i>	1	QL=3600 Quantity/30 Days
<i>morphine sulfate 100mg er tab</i>	1	QL=120 Quantity/30 Days
<i>morphine sulfate 15mg er tab</i>	1	QL=120 Quantity/30 Days
<i>morphine sulfate 15mg tab</i>	1	QL=180 Quantity/30 Days
MORPHINE SULFATE 15MG TAB	1	QL=180 Quantity/30 Days
<i>morphine sulfate 200mg er tab</i>	1	QL=120 Quantity/30 Days
MORPHINE SULFATE 20MG/5ML ORAL SOLN	1	QL=900 Quantity/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	1	QL=180 Quantity/30 Days
MORPHINE SULFATE 20MG/ML ORAL SOLN	1	QL=180 Quantity/30 Days
MORPHINE SULFATE 2MG/ML ORAL SOLN	1	QL=1800 Quantity/30 Days
<i>morphine sulfate 2mg/ml oral soln</i>	1	QL=1800 Quantity/30 Days
<i>morphine sulfate 30mg er tab</i>	1	QL=120 Quantity/30 Days
MORPHINE SULFATE 30MG TAB	1	QL=180 Quantity/30 Days
<i>morphine sulfate 30mg tab</i>	1	QL=180 Quantity/30 Days
<i>morphine sulfate 60mg er tab</i>	1	QL=120 Quantity/30 Days
<i>oxycodone 10mg tab</i>	1	QL=180 Quantity/30 Days
<i>oxycodone 15mg tab</i>	1	QL=180 Quantity/30 Days
<i>oxycodone 1mg/ml oral soln</i>	2	QL=5400 Quantity/30 Days
<i>oxycodone 20mg tab</i>	1	QL=180 Quantity/30 Days
<i>oxycodone 30mg tab</i>	1	QL=180 Quantity/30 Days
<i>oxycodone 5mg tab</i>	1	QL=360 Quantity/30 Days
OXYCONTIN 10MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 15MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 20MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 30MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 40MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 60MG ER TAB	2	QL=60 Quantity/30 Days
OXYCONTIN 80MG ER TAB	2	QL=60 Quantity/30 Days

You can find information 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>tramadol 100mg er tab</i>	2	QL=30 Quantity/30 Days
<i>tramadol 200mg er tab</i>	2	QL=30 Quantity/30 Days
<i>tramadol 300mg er tab</i>	2	QL=30 Quantity/30 Days
<i>tramadol 50mg tab</i>	1	QL=240 Quantity/30 Days
OPIOID COMBINATIONS		
ACETAMINOPHEN/CODEINE PHOSPHATE 120-12MG/5ML ORAL SOLN	1	QL=4980 Quantity/30 Days
<i>acetaminophen/codeine phosphate 120-12mg/5ml oral soln</i>	1	QL=4980 Quantity/30 Days
<i>codeine phosphate/acetaminophen 15-300mg tab</i>	1	QL=390 Quantity/30 Days
<i>codeine phosphate/acetaminophen 30-300mg tab</i>	1	QL=390 Quantity/30 Days
<i>codeine phosphate/acetaminophen 60-300mg tab</i>	1	QL=390 Quantity/30 Days
<i>hydrocodone/acetaminophen 10-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>hydrocodone/acetaminophen 5-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>hydrocodone/acetaminophen 7.5-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>hydrocodone/acetaminophen 7.5-325mg/5ml oral soln</i>	1	QL=5400 Quantity/30 Days
<i>hydrocodone/ibuprofen 7.5-200mg tab</i>	2	QL=480 Quantity/30 Days
<i>oxycodone/acetaminophen 10-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>oxycodone/acetaminophen 2.5-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>oxycodone/acetaminophen 5-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	1	QL=360 Quantity/30 Days
<i>tramadol/acetaminophen 37.5-325mg tab</i>	1	QL=360 Quantity/30 Days
OPIOID PARTIAL AGONISTS		
<i>buprenorphine 10mcg/hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>buprenorphine 15mcg/hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>buprenorphine 20mcg/hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>buprenorphine 2mg sl tab</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine 5mcg/hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>buprenorphine 7.5mcg/hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>buprenorphine 8mg sl tab</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine/naloxone 12-3mg sublingual film</i>	1	QL=60 Quantity/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine/naloxone 2-0.5mg sublingual film</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine/naloxone 4-1mg sublingual film</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	1	QL=90 Quantity/30 Days
<i>buprenorphine/naloxone 8-2mg sublingual film</i>	1	QL=90 Quantity/30 Days
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol 100mg cap</i>	2	
<i>danazol 200mg cap</i>	2	
<i>danazol 50mg cap</i>	2	
TESTOSTERONE 1% (12.5MG) GEL PUMP BOTTLE	2	PA QL=4 Quantity/30 Days
<i>testosterone 1% (12.5mg) gel pump bottle</i>	2	PA QL=4 Quantity/30 Days
<i>testosterone 1% (25mg) gel packet</i>	2	PA QL=120 Quantity/30 Days
TESTOSTERONE 1% (50MG) GEL PACKET	2	PA QL=60 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>testosterone 1.62% (1.25gm) gel packet</i>	2	PA QL=60 Quantity/30 Days
<i>testosterone 1.62% (2.5gm) gel packet</i>	2	PA QL=60 Quantity/30 Days
<i>testosterone 20.25mg/act gel pump</i>	2	PA QL=2 Quantity/30 Days
<i>testosterone 30mg/act topical soln</i>	2	PA QL=2 Quantity/30 Days
<i>testosterone cypionate 100mg/ml inj</i>	1	
<i>testosterone cypionate 200mg/ml inj</i>	1	
TESTOSTERONE ENANTHATE 200MG/ML INJ	2	
<i>testosterone gel 1% (50mg) packet</i>	2	PA QL=60 Quantity/30 Days
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide 2mg/act rectal foam</i>	2	PA
<i>hydrocortisone 1.67mg/ml enema</i>	2	
RECTAL COMBINATIONS		
HYDROCORTISONE/PRAMOXINE 2.5-1% RECTAL CREAM	1*	
<i>hydrocortisone/pramoxine 2.5-1% rectal cream</i>	1*	
<i>lidocaine/hydrocortisone cream</i>	2*	
RECTAL STEROIDS		
<i>hydrocortisone 2.5% cream</i>	1	QL=60 Quantity/30 Days
<i>procto-med 2.5% cream</i>	1	QL=60 Quantity/30 Days
<i>hydrocortisone supp</i>	2*	
VASODILATING AGENTS		
<i>nitroglycerin 0.4% rectal ointment</i>	2	QL=30 Quantity/30 Days
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole 200mg tab</i>	2	
<i>ivermectin 3mg tab</i>	2	PA QL=15 Quantity/90 Days
<i>praziquantel 600mg tab</i>	2	
ANTIANGINAL AGENTS		
NITRATES		
<i>isosorbide dinitrate 10mg tab</i>	1	
<i>isosorbide dinitrate 20mg tab</i>	1	
<i>isosorbide dinitrate 30mg tab</i>	1	
<i>isosorbide dinitrate 5mg tab</i>	1	
<i>isosorbide mononitrate 10mg tab</i>	1	
<i>isosorbide mononitrate 120mg er tab</i>	1	
<i>isosorbide mononitrate 20mg tab</i>	1	
<i>isosorbide mononitrate 30mg er tab</i>	1	
<i>isosorbide mononitrate 60mg er tab</i>	1	
NITRO-BID 2% OINTMENT	2	
<i>nitroglycerin 0.1mg/hr patch</i>	1	
<i>nitroglycerin 0.2mg/hr patch</i>	1	
<i>nitroglycerin 0.3mg sl tab</i>	1	
<i>nitroglycerin 0.4mg sl tab</i>	1	
<i>nitroglycerin 0.4mg/hr patch</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>nitroglycerin 0.6mg sl tab</i>	1	
<i>nitroglycerin 0.6mg/hr patch</i>	1	
NITROGLYCERIN CAP	1*	
ANTI-ANXIETY AGENTS		
ANTI-ANXIETY AGENTS - MISC.		
<i>bupirone 10mg tab</i>	1	
<i>bupirone 15mg tab</i>	1	
<i>bupirone 30mg tab</i>	1	
<i>bupirone 5mg tab</i>	1	
<i>bupirone 7.5mg tab</i>	1	
<i>hydroxyzine 10mg tab</i>	1	
<i>hydroxyzine 25mg tab</i>	1	
<i>hydroxyzine 2mg/ml oral soln</i>	1	
<i>hydroxyzine 50mg tab</i>	1	
HYDROXYZINE PAMOATE 100MG CAP	1	
<i>hydroxyzine pamoate 25mg cap</i>	1	
<i>hydroxyzine pamoate 50mg cap</i>	1	
BENZODIAZEPINES		
<i>alprazolam 0.25mg tab</i>	1	QL=120 Quantity/30 Days
<i>alprazolam 0.5mg tab</i>	1	QL=120 Quantity/30 Days
<i>alprazolam 1mg tab</i>	1	QL=120 Quantity/30 Days
<i>alprazolam 2mg tab</i>	1	QL=150 Quantity/30 Days
<i>chlordiazepoxide 10mg cap</i>	1	QL=120 Quantity/30 Days
<i>chlordiazepoxide 25mg cap</i>	1	QL=120 Quantity/30 Days
<i>chlordiazepoxide 5mg cap</i>	1	QL=120 Quantity/30 Days
<i>clorazepate dipotassium 15mg tab</i>	2	QL=180 Quantity/30 Days
<i>clorazepate dipotassium 3.75mg tab</i>	2	QL=180 Quantity/30 Days
<i>clorazepate dipotassium 7.5mg tab</i>	2	QL=180 Quantity/30 Days
<i>diazepam 10mg tab</i>	1	QL=120 Quantity/30 Days
<i>diazepam 1mg/ml oral soln</i>	1	QL=1200 Quantity/30 Days
<i>diazepam 2mg tab</i>	1	QL=120 Quantity/30 Days
<i>diazepam 5mg tab</i>	1	QL=120 Quantity/30 Days
<i>diazepam 5mg/ml oral soln</i>	1	QL=240 Quantity/30 Days
<i>lorazepam 0.5mg tab</i>	1	QL=150 Quantity/30 Days
<i>lorazepam 1mg tab</i>	1	QL=150 Quantity/30 Days
<i>lorazepam 2mg tab</i>	1	QL=150 Quantity/30 Days
<i>lorazepam 2mg/ml oral soln</i>	1	QL=150 Quantity/30 Days
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide 100mg cap</i>	1	
<i>disopyramide 150mg cap</i>	1	
QUINIDINE SULFATE 200MG TAB	2	
QUINIDINE SULFATE 300MG TAB	2	
<i>quinidine sulfate 300mg tab</i>	2	
ANTIARRHYTHMICS TYPE I-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
<i>mexiletine 150mg cap</i>	2	
<i>mexiletine 200mg cap</i>	2	
<i>mexiletine 250mg cap</i>	2	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate 100mg tab</i>	1	
<i>flecainide acetate 150mg tab</i>	1	
<i>flecainide acetate 50mg tab</i>	1	
<i>propafenone 150mg tab</i>	1	
<i>propafenone 225mg er cap</i>	2	
<i>propafenone 225mg tab</i>	1	
<i>propafenone 300mg tab</i>	1	
<i>propafenone 325mg er cap</i>	2	
<i>propafenone 425mg er cap</i>	2	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone 100mg tab</i>	1	
<i>amiodarone 200mg tab</i>	1	
<i>amiodarone 400mg tab</i>	1	
<i>dofetilide 125mcg cap</i>	2	
<i>dofetilide 250mcg cap</i>	2	
<i>dofetilide 500mcg cap</i>	2	
MULTAQ 400MG TAB	2	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
DUPIXENT 100MG/0.67ML SYRINGE	4	NDS PA QL=2 Quantity/28 Days
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
DUPIXENT 200MG/1.14ML SYRINGE	4	NDS PA QL=4 Quantity/28 Days
DUPIXENT 300MG/2ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
DUPIXENT 300MG/2ML SYRINGE	4	NDS PA QL=4 Quantity/28 Days
FASENRA 10MG/0.5ML SYRINGE	4	PA QL=1 Quantity/28 Days
FASENRA 30MG/ML AUTO-INJECTOR	4	LD PA QL=1 Quantity/28 Days
FASENRA 30MG/ML SYRINGE	4	PA QL=1 Quantity/28 Days
NUCALA 100MG INJ	4	NDS PA QL=3 Quantity/28 Days
NUCALA 100MG/ML AUTO-INJECTOR	4	NDS PA QL=3 Quantity/28 Days
NUCALA 100MG/ML SYRINGE	4	NDS PA QL=3 Quantity/28 Days
NUCALA 40MG/0.4ML SYRINGE	4	NDS PA QL=1 Quantity/28 Days
XOLAIR 150MG INJ	4	NDS PA QL=2 Quantity/28 Days
XOLAIR 150MG/ML AUTO-INJECTOR	4	NDS PA QL=2 Quantity/28 Days
XOLAIR 150MG/ML SYRINGE	4	NDS PA QL=2 Quantity/28 Days
XOLAIR 300MG/2ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
XOLAIR 300MG/2ML SYRINGE	4	NDS PA QL=4 Quantity/28 Days
XOLAIR 75MG/0.5ML AUTO-INJECTOR	4	NDS PA QL=2 Quantity/28 Days
XOLAIR 75MG/0.5ML SYRINGE	4	NDS PA QL=2 Quantity/28 Days
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT 17MCG INHALER	2	QL=2 Quantity/30 Days
INCRUSE 62.5MCG/INH INHALER	2	QL=1 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ipratropium bromide 0.2mg/ml inh soln</i>	1	PA_BvD
LEUKOTRIENE MODULATORS		
<i>montelukast 10mg tab</i>	1	
<i>montelukast 4mg chew tab</i>	1	
<i>montelukast 5mg chew tab</i>	1	
<i>zafirlukast 10mg tab</i>	2	QL=60 Quantity/30 Days
<i>zafirlukast 20mg tab</i>	2	QL=60 Quantity/30 Days
STEROID INHALANTS		
ALVESCO 160MCG INHALER	2	QL=2 Quantity/30 Days
ALVESCO 80MCG INHALER	2	QL=2 Quantity/30 Days
ARNUIITY ELLIPTA 100MCG INHALER	2	QL=1 Quantity/30 Days
ARNUIITY ELLIPTA 200MCG INHALER	2	QL=1 Quantity/30 Days
ARNUIITY ELLIPTA 50MCG INHALER	2	QL=1 Quantity/30 Days
ASMANEX (14 METERED DOSES) 220MCG INHALER	2	QL=2 Quantity/28 Days
ASMANEX 100MCG HFA INHALER	2	QL=1 Quantity/30 Days
ASMANEX 110MCG (30ACT) INHALER	2	QL=1 Quantity/30 Days
ASMANEX 200MCG HFA INHALER	2	QL=1 Quantity/30 Days
ASMANEX 220MCG INHALER	2	QL=1 Quantity/30 Days
ASMANEX 50MCG HFA INHALER	2	QL=1 Quantity/30 Days
<i>budesonide 0.125mg/ml inh susp</i>	2	PA_BvD QL=120 Quantity/30 Days
<i>budesonide 0.25mg/ml inh susp</i>	2	PA_BvD QL=120 Quantity/30 Days
<i>budesonide 0.5mg/ml inh susp</i>	2	PA_BvD QL=120 Quantity/30 Days
FLUTICASONE PROPIONATE 110MCG INHALER	3	QL=2 Quantity/30 Days
FLUTICASONE PROPIONATE 220MCG INHALER	3	QL=2 Quantity/30 Days
FLUTICASONE PROPIONATE 44MCG INHALER	3	QL=2 Quantity/30 Days
QVAR 40MCG REDIHALER	2	QL=2 Quantity/30 Days
QVAR 80MCG REDIHALER	2	QL=2 Quantity/30 Days
SYMPATHOMIMETICS		
ADVAIR 115-21MCG/ACT HFA INHALER	2	QL=1 Quantity/30 Days
ADVAIR 115-21MCG/ACT HFA INHALER 8GM	2	QL=2 Quantity/30 Days
ADVAIR 230-21MCG/ACT HFA INHALER	2	QL=1 Quantity/30 Days
ADVAIR 230-21MCG/ACT HFA INHALER 8GM	2	QL=2 Quantity/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER	2	QL=1 Quantity/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER 8GM	2	QL=2 Quantity/30 Days
<i>albuterol 0.21mg/ml inh soln</i>	1	PA_BvD
<i>albuterol 0.417mg/ml inh soln</i>	1	PA_BvD
<i>albuterol 0.4mg/ml oral soln</i>	1	
<i>albuterol 0.83mg/ml inh soln</i>	1	PA_BvD
<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	1	QL=2 Quantity/30 Days
<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	1	QL=2 Quantity/30 Days
<i>albuterol 2mg tab</i>	2	
<i>albuterol 4mg tab</i>	2	
ALBUTEROL 5MG/ML INH SOLN	1	PA_BvD
<i>albuterol 5mg/ml inh soln</i>	1	PA_BvD

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANORO ELLIPTA 62.5-25MCG INHALER	2	QL=1 Quantity/30 Days
<i>arformoterol tartrate 15mcg/2ml neb soln</i>	2	PA_BvD QL=120 Quantity/30 Days
BREO ELLIPTA 100-25MCG INHALER	2	QL=1 Quantity/30 Days
BREO ELLIPTA 200-25MCG INHALER	2	QL=1 Quantity/30 Days
BREO ELLIPTA 50-25MCG INH	2	QL=1 Quantity/30 Days
<i>breyana 160-4.5mcg/act inh</i>	2	QL=1 Quantity/30 Days
<i>breyana 80-4.5mcg/act inh</i>	2	QL=1 Quantity/30 Days
BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER	2	QL=1 Quantity/30 Days
BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER 5.9GM	2	QL=4 Quantity/28 Days
<i>budesonide/formoterol fumarate 160-4.5mcg inhaler</i>	2	QL=1 Quantity/30 Days
<i>budesonide/formoterol fumarate 80-4.5mcg inhaler</i>	2	QL=1 Quantity/30 Days
COMBIVENT 20-100MCG/ACT INHALER	2	QL=2 Quantity/30 Days
DULERA 100-5MCG INHALER	2	QL=1 Quantity/30 Days
DULERA 100-5MCG INHALER 8.8GM	2	QL=2 Quantity/30 Days
DULERA 200-5MCG INHALER	2	QL=1 Quantity/30 Days
DULERA 200-5MCG INHALER 8.8GM	2	QL=2 Quantity/30 Days
DULERA 50-5MCG INHALER	2	QL=1 Quantity/30 Days
<i>epinephrine 0.15mg/0.3ml auto-injector (2 pack)</i>	1	QL=2 Quantity/15 Days
<i>epinephrine 0.3mg/0.3ml auto-injector (2 pack)</i>	1	QL=2 Quantity/15 Days
<i>fluticasone propionate/salmeterol 100-50mcg/act dry powder inhaler, wixela 100-50mcg inhaler</i>	1	QL=1 Quantity/30 Days
<i>fluticasone propionate/salmeterol 250-50mcg/act dry powder inhaler, wixela 250-50mcg inhaler</i>	1	QL=1 Quantity/30 Days
<i>fluticasone propionate/salmeterol 500-50mcg/act dry powder inhaler, wixela 500-50mcg inhaler</i>	1	QL=1 Quantity/30 Days
<i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i>	1	PA_BvD
<i>levalbuterol 0.31mg/3ml neb soln</i>	2	PA_BvD
<i>levalbuterol 0.63mg/3ml inh soln</i>	2	PA_BvD
<i>levalbuterol 1.25mg/3ml neb soln</i>	2	PA_BvD
LEVALBUTEROL 45MCG INHALER, XOPENEX 45MCG INHALER	3	ST QL=2 Quantity/30 Days
STIOLTO (10 METERED DOSES) 2.5-2.5MCG/ACT INHALER	2	QL=6 Quantity/30 Days
STIOLTO 2.5-2.5MCG/ACT INHALER	2	QL=1 Quantity/30 Days
STRIVERDI RESPIMAT 2.5MCG/ACT INHALER	2	QL=1 Quantity/30 Days
<i>terbutaline sulfate 2.5mg tab</i>	2	
<i>terbutaline sulfate 5mg tab</i>	2	
TRELEGY ELLIPTA 100- 62.5-25MCG INHALER	2	QL=1 Quantity/30 Days
TRELEGY ELLIPTA 200-62.5-25MCG INHALER	2	QL=1 Quantity/30 Days
VENTOLIN 108MCG INHALER (18GM)	2	QL=2 Quantity/30 Days
VENTOLIN 108MCG INHALER (8GM)	2	QL=5 Quantity/30 Days
ANTICOAGULANTS		
ANTICOAGULANTS - MISC.		

You can find information 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>dabigatran etexilate mesylate 110mg cap</i>	2	QL=60 Quantity/30 Days
<i>dabigatran etexilate mesylate 150mg cap</i>	2	QL=60 Quantity/30 Days
<i>dabigatran etexilate mesylate 75mg cap</i>	2	QL=60 Quantity/30 Days
ELIQUIS 2.5MG TAB	2	QL=60 Quantity/30 Days
ELIQUIS 5MG 30-DAY STARTER PACK (74)	2	QL=1 Quantity/30 Days
ELIQUIS 5MG TAB	2	QL=74 Quantity/30 Days
XARELTO 10MG TAB	2	QL=30 Quantity/30 Days
XARELTO 15MG TAB	2	QL=60 Quantity/30 Days
XARELTO 1MG/ML SUSP	2	QL=620 Quantity/30 Days
XARELTO 2.5MG TAB	2	QL=60 Quantity/30 Days
XARELTO 20MG TAB	2	QL=30 Quantity/30 Days
XARELTO TAB STARTER PACK (51)	2	QL=1 Quantity/30 Days
COUMARIN ANTICOAGULANTS		
<i>warfarin sodium 10mg tab</i>	1	
<i>warfarin sodium 1mg tab</i>	1	
<i>warfarin sodium 2.5mg tab</i>	1	
<i>warfarin sodium 2mg tab</i>	1	
<i>warfarin sodium 3mg tab</i>	1	
<i>warfarin sodium 4mg tab</i>	1	
<i>warfarin sodium 5mg tab</i>	1	
<i>warfarin sodium 6mg tab</i>	1	
<i>warfarin sodium 7.5mg tab</i>	1	
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>enoxaparin sodium 100mg/1ml syringe</i>	2	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	2	
<i>enoxaparin sodium 150mg/1ml syringe</i>	2	
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	2	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	2	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	2	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	2	
<i>fondaparinux sodium 12.5mg/ml (0.4ml) inj</i>	2	
<i>fondaparinux sodium 12.5mg/ml (0.6ml) inj</i>	2	
<i>fondaparinux sodium 12.5mg/ml (0.8ml) inj</i>	2	
<i>fondaparinux sodium 5mg/ml (0.5mg) inj</i>	2	
<i>heparin sodium 5000unit/0.5ml inj (PF)</i>	2	
<i>heparin sodium porcine 10000unit/ml inj</i>	2	
<i>heparin sodium porcine 1000unit/ml inj</i>	2	
<i>heparin sodium porcine 20000unit/ml inj</i>	2	
<i>heparin sodium porcine 5000unit/ml inj</i>	2	
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	1	QL=60 Quantity/30 Days
<i>clobazam 2.5mg/ml susp</i>	2	QL=480 Quantity/30 Days
<i>clobazam 20mg tab</i>	1	QL=60 Quantity/30 Days
<i>clonazepam 0.125mg odt</i>	2	QL=90 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>clonazepam 0.25mg odt</i>	2	QL=90 Quantity/30 Days
<i>clonazepam 0.5mg odt</i>	2	QL=90 Quantity/30 Days
<i>clonazepam 0.5mg tab</i>	1	QL=90 Quantity/30 Days
<i>clonazepam 1mg odt</i>	2	QL=90 Quantity/30 Days
<i>clonazepam 1mg tab</i>	1	QL=90 Quantity/30 Days
<i>clonazepam 2mg odt</i>	2	QL=300 Quantity/30 Days
<i>clonazepam 2mg tab</i>	1	QL=300 Quantity/30 Days
<i>diazepam 10mg/2ml rectal gel</i>	2	QL=10 Quantity/30 Days
DIAZEPAM 2.5MG/0.5ML RECTAL GEL	2	QL=10 Quantity/30 Days
<i>diazepam 20mg/4ml rectal gel</i>	2	QL=10 Quantity/30 Days
LIBERVANT 10MG BUCCAL FILM	3	PA_NSO QL=10 Quantity/30 Days
LIBERVANT 12.5MG BUCCAL FILM	3	PA_NSO QL=10 Quantity/30 Days
LIBERVANT 15MG BUCCAL FILM	3	PA_NSO QL=10 Quantity/30 Days
LIBERVANT 5MG BUCCAL FILM	3	PA_NSO QL=10 Quantity/30 Days
LIBERVANT 7.5MG BUCCAL FILM	3	PA_NSO QL=10 Quantity/30 Days
NAYZILAM 5MG/0.1ML NASAL SPRAY	3	QL=10 Quantity/30 Days
SYMPAZAN 10MG ORAL FILM	3	PA_NSO QL=60 Quantity/30 Days
SYMPAZAN 20MG ORAL FILM	3	PA_NSO QL=60 Quantity/30 Days
SYMPAZAN 5MG ORAL FILM	3	PA_NSO QL=60 Quantity/30 Days
VALTOCO 10MG DOSE KIT 10MG/0.1ML PACK	3	QL=10 Quantity/30 Days
VALTOCO 15MG DOSE KIT 7.5MG/0.1ML PACK	3	QL=10 Quantity/30 Days
VALTOCO 20MG DOSE KIT 10MG/0.1ML PACK	3	QL=10 Quantity/30 Days
VALTOCO 5MG DOSE KIT 5MG/0.1ML PACK	3	QL=10 Quantity/30 Days
ANTICONVULSANTS - MISC.		
APTIOM 200MG TAB	3	PA_NSO QL=30 Quantity/30 Days
APTIOM 400MG TAB	3	PA_NSO QL=30 Quantity/30 Days
APTIOM 600MG TAB	3	PA_NSO QL=60 Quantity/30 Days
APTIOM 800MG TAB	3	PA_NSO QL=60 Quantity/30 Days
BRIVIACT 100MG TAB	3	PA_NSO QL=60 Quantity/30 Days
BRIVIACT 10MG TAB	3	PA_NSO QL=60 Quantity/30 Days
BRIVIACT 10MG/ML ORAL SOLN	3	PA_NSO QL=600 Quantity/30 Days
BRIVIACT 25MG TAB	3	PA_NSO QL=60 Quantity/30 Days
BRIVIACT 50MG TAB	3	PA_NSO QL=60 Quantity/30 Days
BRIVIACT 75MG TAB	3	PA_NSO QL=60 Quantity/30 Days
<i>carbamazepine 100mg chew tab</i>	1	
<i>carbamazepine 100mg er cap</i>	2	
<i>carbamazepine 100mg er tab</i>	2	
<i>carbamazepine 200mg er cap</i>	2	
<i>carbamazepine 200mg er tab</i>	2	
<i>carbamazepine 200mg tab</i>	1	
<i>carbamazepine 20mg/ml susp</i>	1	
<i>carbamazepine 300mg er cap</i>	2	
<i>carbamazepine 400mg er tab</i>	2	
DIACOMIT 250MG CAP	4	LD NDS PA_NSO QL=360 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DIACOMIT 250MG POWDER FOR ORAL SUSP	4	LD NDS PA_NSO QL=360 Quantity/30 Days
DIACOMIT 500MG CAP	4	LD NDS PA_NSO QL=180 Quantity/30 Days
DIACOMIT 500MG POWDER FOR ORAL SUSP	4	LD NDS PA_NSO QL=180 Quantity/30 Days
EPIDIOLEX 100MG/ML ORAL SOLN	4	LD NDS PA_NSO QL=600 Quantity/30 Days
EPRONTIA 25MG/ML ORAL SOLN	3	PA_NSO QL=480 Quantity/30 Days
FINTEPLA 2.2MG/ML ORAL SOLN	4	LD NDS PA_NSO QL=360 Quantity/30 Days
FYCOMPA 0.5MG/ML SUSP	3	PA_NSO QL=720 Quantity/30 Days
FYCOMPA 10MG TAB	3	PA_NSO QL=30 Quantity/30 Days
FYCOMPA 12MG TAB	3	PA_NSO QL=30 Quantity/30 Days
FYCOMPA 2MG TAB	3	PA_NSO QL=30 Quantity/30 Days
FYCOMPA 4MG TAB	3	PA_NSO QL=30 Quantity/30 Days
FYCOMPA 6MG TAB	3	PA_NSO QL=30 Quantity/30 Days
FYCOMPA 8MG TAB	3	PA_NSO QL=30 Quantity/30 Days
<i>gabapentin 100mg cap</i>	1	
<i>gabapentin 300mg cap</i>	1	
<i>gabapentin 400mg cap</i>	1	
<i>gabapentin 50mg/ml oral soln</i>	2	QL=2160 Quantity/30 Days
<i>gabapentin 600mg tab (Neurontin equiv)</i>	1	
<i>gabapentin 800mg tab</i>	1	
<i>lacosamide 100mg tab</i>	1	QL=60 Quantity/30 Days
<i>lacosamide 10mg/ml oral solution</i>	1	QL=1200 Quantity/30 Days
<i>lacosamide 150mg tab</i>	1	QL=60 Quantity/30 Days
<i>lacosamide 200mg tab</i>	1	QL=60 Quantity/30 Days
<i>lacosamide 50mg tab</i>	1	QL=120 Quantity/30 Days
<i>lamotrigine 100mg tab</i>	1	
<i>lamotrigine 150mg tab</i>	1	
<i>lamotrigine 200mg tab</i>	1	
<i>lamotrigine 25mg chew tab</i>	1	
<i>lamotrigine 25mg tab</i>	1	
<i>lamotrigine 5mg chew tab</i>	1	
<i>levetiracetam 1000mg tab</i>	1	
<i>levetiracetam 100mg/ml oral soln</i>	1	
<i>levetiracetam 250mg tab</i>	1	
<i>levetiracetam 500mg er tab</i>	1	
<i>levetiracetam 500mg tab</i>	1	
<i>levetiracetam 750mg er tab</i>	1	
<i>levetiracetam 750mg tab</i>	1	
<i>oxcarbazepine 150mg tab</i>	1	
<i>oxcarbazepine 300mg tab</i>	1	
<i>oxcarbazepine 600mg tab</i>	1	

You can find information 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>oxcarbazepine 60mg/ml susp</i>	2	
<i>phenobarbital 100mg tab</i>	1	QL=120 Quantity/30 Days
<i>phenobarbital 15mg tab</i>	1	QL=120 Quantity/30 Days
<i>phenobarbital 16.2mg tab</i>	1	QL=120 Quantity/30 Days
<i>phenobarbital 30mg tab</i>	1	QL=120 Quantity/30 Days
<i>phenobarbital 32.4mg tab</i>	1	QL=120 Quantity/30 Days
<i>phenobarbital 4mg/ml oral soln</i>	1	QL=1500 Quantity/30 Days
<i>phenobarbital 60mg tab</i>	1	QL=120 Quantity/30 Days
<i>phenobarbital 64.8mg tab</i>	1	QL=120 Quantity/30 Days
<i>phenobarbital 97.2mg tab</i>	1	QL=120 Quantity/30 Days
<i>phenytoin 25mg/ml susp</i>	1	
<i>phenytoin 50mg chew tab</i>	2	
<i>phenytoin sodium 100mg er cap</i>	1	
<i>phenytoin sodium 200mg er cap</i>	1	
<i>phenytoin sodium 300mg er cap</i>	1	
<i>pregabalin 100mg cap</i>	1	
<i>pregabalin 150mg cap</i>	1	
<i>pregabalin 200mg cap</i>	1	
<i>pregabalin 20mg/ml oral soln</i>	2	QL=900 Quantity/30 Days
<i>pregabalin 225mg cap</i>	1	
<i>pregabalin 25mg cap</i>	1	
<i>pregabalin 300mg cap</i>	1	
<i>pregabalin 50mg cap</i>	1	
<i>pregabalin 75mg cap</i>	1	
<i>primidone 250mg tab</i>	1	
<i>primidone 50mg tab</i>	1	
<i>rufinamide 200mg tab</i>	2	PA_NSO QL=480 Quantity/30 Days
<i>rufinamide 200mg tab</i>	2	PA_NSO QL=240 Quantity/30 Days
<i>rufinamide 40mg/ml susp</i>	2	PA_NSO QL=2760 Quantity/30 Days
SPRITAM 1000MG TAB FOR ORAL SUSP	3	PA_NSO QL=90 Quantity/30 Days
SPRITAM 250MG TAB FOR ORAL SUSP	3	PA_NSO QL=360 Quantity/30 Days
SPRITAM 500MG TAB FOR ORAL SUSP	3	PA_NSO QL=180 Quantity/30 Days
SPRITAM 750MG TAB FOR ORAL SUSP	3	PA_NSO QL=120 Quantity/30 Days
<i>topiramate 100mg tab</i>	1	
<i>topiramate 15mg cap</i>	1	
<i>topiramate 200mg tab</i>	1	
<i>topiramate 25mg cap</i>	1	
<i>topiramate 25mg tab</i>	1	
<i>topiramate 50mg tab</i>	1	
ZONISADE 100MG/5ML SUSP	3	PA_NSO QL=900 Quantity/30 Days
<i>zonisamide 100mg cap</i>	1	
<i>zonisamide 25mg cap</i>	1	
<i>zonisamide 50mg cap</i>	1	
ZTALMY 50MG/ML SUSP	4	LD NDS PA_NSO QL=1100 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CARBAMATES		
<i>felbamate 120mg/ml susp</i>	2	
<i>felbamate 400mg tab</i>	2	
<i>felbamate 600mg tab</i>	2	
XCOPRI (250 MG DAILY DOSE) TAB PACK	3	PA_NSO QL=56 Quantity/28 Days
XCOPRI 100MG TAB	3	PA_NSO QL=30 Quantity/30 Days
XCOPRI 12.5/25MG TITRATION PACK	3	PA_NSO QL=28 Quantity/28 Days
XCOPRI 150/200MG TITRATION PACK	3	PA_NSO QL=28 Quantity/28 Days
XCOPRI 150MG TAB	3	PA_NSO QL=60 Quantity/30 Days
XCOPRI 200MG TAB	3	PA_NSO QL=60 Quantity/30 Days
XCOPRI 25MG TAB	3	PA_NSO QL=30 Quantity/30 Days
XCOPRI 50/100MG TITRATION PACK	3	PA_NSO QL=28 Quantity/28 Days
XCOPRI 50MG TAB	3	PA_NSO QL=30 Quantity/30 Days
XCOPRI TAB 150/200MG PACK	3	PA_NSO QL=56 Quantity/28 Days
GABA MODULATORS		
<i>tiagabine 12mg tab</i>	2	
<i>tiagabine 16mg tab</i>	2	
<i>tiagabine 2mg tab</i>	2	
<i>tiagabine 4mg tab</i>	2	
<i>vigabatrin 500mg powder for oral soln</i>	1	PA_NSO QL=180 Quantity/30 Days
<i>vigabatrin 500mg tab</i>	1	PA_NSO QL=180 Quantity/30 Days
VIGAFYDE 100MG/ML ORAL SOLN	3	PA_NSO QL=720 Quantity/30 Days
SUCCINIMIDES		
<i>ethosuximide 250mg cap</i>	2	
<i>ethosuximide 50mg/ml oral soln</i>	1	
<i>methsuximide 300mg cap</i>	2	
VALPROIC ACID		
<i>divalproex sodium 125mg dr cap</i>	1	
<i>divalproex sodium 125mg dr tab</i>	1	
<i>divalproex sodium 250mg dr tab</i>	1	
<i>divalproex sodium 250mg er tab</i>	1	
<i>divalproex sodium 500mg dr tab</i>	1	
<i>divalproex sodium 500mg er tab</i>	1	
<i>valproic acid 250mg cap</i>	1	
<i>valproic acid 50mg/ml oral soln</i>	1	
ANTIDEPRESSANTS		
ANTIDEPRESSANTS - MISC.		
AUVELITY 105-45MG ER TAB	3	PA_NSO QL=60 Quantity/30 Days
<i>bupropion 100mg er tab</i>	1	
<i>bupropion 100mg tab</i>	1	
<i>bupropion 150mg sr (12 hr) tab</i>	1	
<i>bupropion 150mg xl (24 hr) tab</i>	1	
<i>bupropion 200mg er tab</i>	1	
<i>bupropion 300mg er tab</i>	1	
<i>bupropion 75mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>mirtazapine 15mg odt</i>	1	
<i>mirtazapine 15mg tab</i>	1	
<i>mirtazapine 30mg odt</i>	1	
<i>mirtazapine 30mg tab</i>	1	
<i>mirtazapine 45mg odt</i>	1	
<i>mirtazapine 45mg tab</i>	1	
<i>mirtazapine 7.5mg tab</i>	1	
ZURZUVAE 20MG CAP	4	LD NDS PA_NSO QL=28 Quantity/14 Days
ZURZUVAE 25MG CAP	4	LD NDS PA_NSO QL=28 Quantity/14 Days
ZURZUVAE 30MG CAP	4	LD NDS PA_NSO QL=14 Quantity/14 Days
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM 12MG/24HR PATCH	3	PA_NSO QL=30 Quantity/30 Days
EMSAM 6MG/24HR PATCH	3	PA_NSO QL=30 Quantity/30 Days
EMSAM 9MG/24HR PATCH	3	PA_NSO QL=30 Quantity/30 Days
MARPLAN 10MG TAB	2	
<i>phenelzine 15mg tab</i>	1	
PHENELZINE 15MG TAB	1	
<i>tranylcypromine 10mg tab</i>	2	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram 10mg tab</i>	1	
<i>citalopram 20mg tab</i>	1	
<i>citalopram 2mg/ml oral soln</i>	1	QL=600 Quantity/30 Days
<i>citalopram 40mg tab</i>	1	
<i>escitalopram 10mg tab</i>	1	
<i>escitalopram 1mg/ml oral soln</i>	2	QL=600 Quantity/30 Days
<i>escitalopram 20mg tab</i>	1	
<i>escitalopram 5mg tab</i>	1	
<i>fluoxetine 10mg cap</i>	1	
<i>fluoxetine 20mg cap</i>	1	
<i>fluoxetine 40mg cap</i>	1	
<i>fluoxetine 4mg/ml oral soln</i>	1	QL=600 Quantity/30 Days
<i>fluoxetine 60mg tab</i>	1	
<i>fluvoxamine maleate 100mg tab</i>	1	
<i>fluvoxamine maleate 25mg tab</i>	1	
<i>fluvoxamine maleate 50mg tab</i>	1	
<i>paroxetine 10mg tab</i>	1	
<i>paroxetine 10mg/ml susp</i>	2	QL=900 Quantity/30 Days
<i>paroxetine 12.5mg er tab</i>	2	
<i>paroxetine 20mg tab</i>	1	
<i>paroxetine 25mg er tab</i>	2	
<i>paroxetine 30mg tab</i>	1	
<i>paroxetine 37.5mg er tab</i>	2	

You can find information 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>paroxetine 40mg tab</i>	1	
<i>sertraline 100mg tab</i>	1	
<i>sertraline 20mg/ml oral soln</i>	1	QL=300 Quantity/30 Days
<i>sertraline 25mg tab</i>	1	
<i>sertraline 50mg tab</i>	1	
SEROTONIN MODULATORS		
NEFAZODONE 100MG TAB	2	
NEFAZODONE 150MG TAB	2	
NEFAZODONE 200MG TAB	2	
NEFAZODONE 250MG TAB	2	
NEFAZODONE 50MG TAB	2	
<i>trazodone 100mg tab</i>	1	
<i>trazodone 150mg tab</i>	1	
<i>trazodone 50mg tab</i>	1	
TRINTELLIX 10MG TAB	2	ST_NSO RXC QL=30 Quantity/30 Days
TRINTELLIX 20MG TAB	2	ST_NSO RXC QL=30 Quantity/30 Days
TRINTELLIX 5MG TAB	2	ST_NSO RXC QL=30 Quantity/30 Days
<i>vilazodone hcl 10mg tab</i>	2	PA_NSO QL=30 Quantity/30 Days
<i>vilazodone hcl 20mg tab</i>	2	PA_NSO QL=30 Quantity/30 Days
<i>vilazodone hcl 40mg tab</i>	2	PA_NSO QL=30 Quantity/30 Days
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<i>desvenlafaxine succinate 100mg er tab</i>	1	
<i>desvenlafaxine succinate 25mg er tab</i>	1	
<i>desvenlafaxine succinate 50mg er tab</i>	1	
DRIZALMA 20MG DR SPRINKLE CAP	3	PA_NSO QL=60 Quantity/30 Days
DRIZALMA 30MG DR SPRINKLE CAP	3	PA_NSO QL=60 Quantity/30 Days
DRIZALMA 40MG DR SPRINKLE CAP	3	PA_NSO QL=60 Quantity/30 Days
DRIZALMA 60MG DR SPRINKLE CAP	3	PA_NSO QL=60 Quantity/30 Days
<i>duloxetine 20mg dr cap</i>	1	
<i>duloxetine 30mg dr cap</i>	1	
<i>duloxetine 60mg dr cap</i>	1	
FETZIMA 120MG ER CAP	3	PA_NSO QL=30 Quantity/30 Days
FETZIMA 20MG ER CAP	3	PA_NSO QL=30 Quantity/30 Days
FETZIMA 40MG ER CAP	3	PA_NSO QL=30 Quantity/30 Days
FETZIMA 80MG ER CAP	3	PA_NSO QL=30 Quantity/30 Days
FETZIMA PACK	3	PA_NSO QL=30 Quantity/30 Days
<i>venlafaxine 100mg tab</i>	1	
<i>venlafaxine 150mg er cap</i>	1	
<i>venlafaxine 25mg tab</i>	1	
<i>venlafaxine 37.5mg er cap</i>	1	
<i>venlafaxine 37.5mg tab</i>	1	
<i>venlafaxine 50mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>venlafaxine 75mg er cap</i>	1	
<i>venlafaxine 75mg tab</i>	1	
TRICYCLIC AGENTS		
<i>amitriptyline 100mg tab</i>	1	
<i>amitriptyline 10mg tab</i>	1	
<i>amitriptyline 150mg tab</i>	1	
<i>amitriptyline 25mg tab</i>	1	
<i>amitriptyline 50mg tab</i>	1	
<i>amitriptyline 75mg tab</i>	1	
<i>amoxapine 100mg tab</i>	1	
<i>amoxapine 150mg tab</i>	1	
<i>amoxapine 25mg tab</i>	1	
<i>amoxapine 50mg tab</i>	1	
<i>clomipramine 25mg cap</i>	2	
<i>clomipramine 50mg cap</i>	2	
<i>clomipramine 75mg cap</i>	2	
<i>desipramine 100mg tab</i>	2	
<i>desipramine 10mg tab</i>	2	
<i>desipramine 150mg tab</i>	2	
<i>desipramine 25mg tab</i>	2	
<i>desipramine 50mg tab</i>	2	
<i>desipramine 75mg tab</i>	2	
<i>doxepin 100mg cap</i>	1	
<i>doxepin 10mg cap</i>	1	
<i>doxepin 10mg/ml oral soln</i>	1	
<i>doxepin 150mg cap</i>	1	
<i>doxepin 25mg cap</i>	1	
<i>doxepin 50mg cap</i>	1	
<i>doxepin 75mg cap</i>	1	
<i>imipramine 10mg tab</i>	1	
<i>imipramine 25mg tab</i>	1	
<i>imipramine 50mg tab</i>	1	
<i>nortriptyline 10mg cap</i>	1	
<i>nortriptyline 25mg cap</i>	1	
<i>nortriptyline 2mg/ml oral soln</i>	2	
<i>nortriptyline 50mg cap</i>	1	
<i>nortriptyline 75mg cap</i>	1	
<i>protriptyline 10mg tab</i>	2	
<i>protriptyline 5mg tab</i>	2	
<i>trimipramine 100mg cap</i>	2	
<i>trimipramine 25mg cap</i>	2	
<i>trimipramine 50mg cap</i>	2	
ANTIDIABETICS		
ANTIDIABETIC COMBINATIONS		
<i>glipizide/metformin 2.5-250mg tab</i>	\$0	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>glipizide/metformin 2.5-500mg tab</i>	\$0	
<i>glipizide/metformin 5-500mg tab</i>	\$0	
<i>glyburide/metformin 1.25-250mg tab</i>	1	
<i>glyburide/metformin 2.5-500mg tab</i>	1	
<i>glyburide/metformin 5-500mg tab</i>	1	
GLYXAMBI 10-5MG TAB	2	QL=30 Quantity/30 Days
GLYXAMBI 25-5MG TAB	2	QL=30 Quantity/30 Days
JANUMET 1000-100MG ER TAB	2	QL=30 Quantity/30 Days
JANUMET 1000-50MG ER TAB	2	QL=60 Quantity/30 Days
JANUMET 1000-50MG TAB	2	QL=60 Quantity/30 Days
JANUMET 500-50MG ER TAB	2	QL=60 Quantity/30 Days
JANUMET 500-50MG TAB	2	QL=60 Quantity/30 Days
JENTADUETO 2.5-1000MG ER TAB	2	QL=60 Quantity/30 Days
JENTADUETO 2.5-1000MG TAB	2	QL=60 Quantity/30 Days
JENTADUETO 2.5-500MG TAB	2	QL=60 Quantity/30 Days
JENTADUETO 5-1000MG ER TAB	2	QL=30 Quantity/30 Days
SYNJARDY 10-1000MG ER TAB	2	QL=30 Quantity/30 Days
SYNJARDY 12.5-1000MG ER TAB	2	QL=60 Quantity/30 Days
SYNJARDY 12.5-1000MG TAB	2	QL=60 Quantity/30 Days
SYNJARDY 12.5-500MG TAB	2	QL=60 Quantity/30 Days
SYNJARDY 25-1000MG ER TAB	2	QL=30 Quantity/30 Days
SYNJARDY 5-1000MG ER TAB	2	QL=60 Quantity/30 Days
SYNJARDY 5-1000MG TAB	2	QL=60 Quantity/30 Days
SYNJARDY 5-500MG TAB	2	QL=60 Quantity/30 Days
TRIJARDY 10-5-1000MG ER TAB	2	QL=30 Quantity/30 Days
TRIJARDY 12.5-2.5-1000MG ER TAB	2	QL=60 Quantity/30 Days
TRIJARDY 25-5-1000MG ER TAB	2	QL=30 Quantity/30 Days
TRIJARDY 5-2.5-1000MG ER TAB	2	QL=60 Quantity/30 Days
XIGDUO 10-500MG ER TAB	2	QL=30 Quantity/30 Days
XIGDUO 2.5-1000MG ER TAB	2	QL=60 Quantity/30 Days
XIGDUO 5-500MG ER TAB	2	QL=30 Quantity/30 Days
XIGDUO XR 10-1000MG TAB	2	QL=30 Quantity/30 Days
XIGDUO XR 5-1000MG TAB	2	QL=60 Quantity/30 Days
DIABETIC OTHER		
<i>acarbose 100mg tab</i>	1	
<i>acarbose 25mg tab</i>	1	
<i>acarbose 50mg tab</i>	1	
BAQSIMI 3MG/DOSE NASAL POWDER	2	QL=2 Quantity/7 Days
<i>diazoxide 50mg/ml susp</i>	2	
GVOKE 0.5MG/0.1ML AUTO-INJECTOR	2	QL=2 Quantity/7 Days
GVOKE 1MG/0.2ML AUTO-INJECTOR	2	QL=2 Quantity/7 Days
GVOKE 1MG/0.2ML INJ	2	QL=2 Quantity/7 Days
GVOKE 1MG/0.2ML SYRINGE	2	QL=2 Quantity/7 Days
<i>metformin 1000mg tab</i>	\$0	
<i>metformin 500mg er tab</i>	\$0	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>metformin 500mg tab</i>	\$0	
<i>metformin 750mg er tab</i>	\$0	
<i>metformin 850mg tab</i>	\$0	
<i>mifepristone 300mg tab</i>	1	PA QL=120 Quantity/30 Days
<i>nateglinide 120mg tab</i>	1	
<i>nateglinide 60mg tab</i>	1	
<i>pioglitazone 15mg tab</i>	1	
<i>pioglitazone 30mg tab</i>	1	
<i>pioglitazone 45mg tab</i>	1	
<i>repaglinide 0.5mg tab</i>	1	
<i>repaglinide 1mg tab</i>	1	
<i>repaglinide 2mg tab</i>	1	
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA 100MG TAB	2	RXC QL=30 Quantity/30 Days
JANUVIA 25MG TAB	2	RXC QL=30 Quantity/30 Days
JANUVIA 50MG TAB	2	RXC QL=30 Quantity/30 Days
TRADJENTA 5MG TAB	2	QL=30 Quantity/30 Days
INCRETIN MIMETIC AGENTS		
BYDUREON 2MG/0.85ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
LIRAGLUTIDE 18MG/3ML PEN INJ	2	PA QL=9 Quantity/30 Days
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
OZEMPIC 2.68MG/ML PEN INJ	2	PA QL=1 Quantity/28 Days
OZEMPIC 2MG/3ML PEN INJ	2	PA QL=1 Quantity/28 Days
OZEMPIC 4MG/3ML PEN INJ	2	PA QL=1 Quantity/28 Days
RYBELSUS 14MG TAB	2	PA QL=30 Quantity/30 Days
RYBELSUS 3MG TAB	2	PA QL=30 Quantity/30 Days
RYBELSUS 7MG TAB	2	PA QL=30 Quantity/30 Days
TRULICITY 0.75MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
TRULICITY 1.5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
TRULICITY 3MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
TRULICITY 4.5MG/0.5ML AUTO-INJECTOR	2	PA QL=4 Quantity/28 Days
INSULIN		
HUMALOG 100UNIT/ML CARTRIDGE	2	INS
HUMALOG 100UNIT/ML KWIKPEN	2	INS
HUMALOG 200UNIT/ML PEN INJ	2	INS
HUMALOG JUNIOR 100UNIT/ML PEN INJ	2	INS
HUMALOG MIX 25-75UNIT/ML INJ	2	INS
HUMALOG MIX 25-75UNIT/ML PEN INJ	2	INS
HUMALOG MIX 50-50UNIT/ML PEN INJ	2	INS
HUMULIN 70-30UNIT/ML INJ	2	INS

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HUMULIN 70-30UNIT/ML PEN INJ	2	INS
HUMULIN N 100UNIT/ML INJ	2	INS
HUMULIN N 100UNIT/ML PEN INJ	2	INS
HUMULIN R 100UNIT/ML INJ	2	INS
HUMULIN R 500UNIT/ML INJ	2	INS PA_BvD
HUMULIN R 500UNIT/ML PEN INJ	2	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (1.5ML), TOUJEO 300UNIT/ML PEN INJ (1.5ML)	2	INS
INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML), TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	2	INS
INSULIN LISPRO 100UNIT/ML INJ	2	INS PA_BvD
LANTUS 100UNIT/ML INJ	2	INS
LANTUS SOLOSTAR 100UNIT/ML INJ	2	INS
TRESIBA 100UNIT/ML INJ	2	INS
TRESIBA 100UNIT/ML PEN INJ	2	INS
TRESIBA 200UNIT/ML PEN INJ	2	INS
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA 10MG TAB	2	QL=30 Quantity/30 Days
FARXIGA 5MG TAB	2	QL=30 Quantity/30 Days
JARDIANCE 10MG TAB	2	QL=30 Quantity/30 Days
JARDIANCE 25MG TAB	2	QL=30 Quantity/30 Days
SULFONYLUREAS		
<i>glimepiride 1mg tab</i>	\$0	
<i>glimepiride 2mg tab</i>	\$0	
<i>glimepiride 4mg tab</i>	\$0	
<i>glipizide 10mg er tab</i>	\$0	
<i>glipizide 10mg tab</i>	\$0	
<i>glipizide 2.5mg er tab</i>	\$0	
<i>glipizide 5mg er tab</i>	\$0	
<i>glipizide 5mg tab</i>	\$0	
<i>glyburide 1.25mg tab</i>	1	
GLYBURIDE 1.5MG TAB	1	
<i>glyburide 2.5mg tab</i>	1	
GLYBURIDE 3MG TAB	1	
<i>glyburide 5mg tab</i>	1	
GLYBURIDE 6MG TAB	1	
ANTIDIARRHEALS		
ANTIDIARRHEAL AGENTS - MISC.		
<i>alosetron 0.5mg tab</i>	2	QL=60 Quantity/30 Days
<i>alosetron 1mg tab</i>	2	QL=60 Quantity/30 Days
<i>atropine sulfate 0.025mg/diphenoxylate 2.5mg tab</i>	1	
<i>loperamide 2mg cap (RX Only)</i>	1	
XERMELO 250MG TAB	4	LD NDS PA QL=84 Quantity/28 Days
ANTIDOTES AND SPECIFIC ANTAGONISTS		
OPIOID ANTAGONISTS		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
KLOXXADO 8MG/0.1ML NASAL SPRAY	2	
NALOXONE 0.4MG/ML CARTRIDGE	2	
<i>naloxone 0.4mg/ml inj</i>	1	
NALOXONE 0.4MG/ML SYRINGE	1	
<i>naloxone 1mg/ml syringe</i>	1	
<i>naloxone 4mg/0.1ml nasal spray</i>	1	
<i>naltrexone 50mg tab</i>	1	
OPVEE 2.7MG/0.1ML NASAL SPRAY	2	
VIVITROL 380MG INJ	4	NDS
ZIMHI 5MG/0.5ML SYRINGE	2	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron 1mg tab</i>	1	PA_BvD QL=60 Quantity/30 Days
<i>ondansetron 0.8mg/ml oral soln</i>	1	PA_BvD
<i>ondansetron 4mg odt</i>	1	PA_BvD
<i>ondansetron 4mg tab</i>	1	PA_BvD
<i>ondansetron 8mg odt</i>	1	PA_BvD
<i>ondansetron 8mg tab</i>	1	PA_BvD
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine 12.5mg tab (RX Only)</i>	1	
<i>meclizine 25mg tab (RX Only)</i>	1	
<i>scopolamine 1mg/72hr patch</i>	2	QL=10 Quantity/30 Days
ANTIEMETICS - MISCELLANEOUS		
<i>aprepitant 125mg cap</i>	2	PA_BvD QL=3 Quantity/2 Days
<i>aprepitant 125mg/aprepitant 80mg pack</i>	2	PA_BvD QL=6 Quantity/4 Days
<i>aprepitant 40mg cap</i>	2	PA_BvD QL=3 Quantity/2 Days
<i>aprepitant 80mg cap</i>	2	PA_BvD QL=6 Quantity/4 Days
<i>dronabinol 10mg cap</i>	2	PA QL=60 Quantity/30 Days
<i>dronabinol 2.5mg cap</i>	2	PA QL=60 Quantity/30 Days
<i>dronabinol 5mg cap</i>	2	PA QL=60 Quantity/30 Days
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
CASPOFUNGIN ACETATE 50MG INJ	2	
<i>casposfungin acetate 50mg inj</i>	2	
CASPOFUNGIN ACETATE 70MG INJ	2	
<i>casposfungin acetate 70mg inj</i>	2	
MICAFUNGIN SODIUM 100MG INJ	2	
<i>micafungin sodium 100mg inj</i>	2	
MICAFUNGIN SODIUM 50MG INJ	2	
<i>micafungin sodium 50mg inj</i>	2	
ANTIFUNGALS		
ABELCET 5MG/ML INJ	3	PA_BvD
AMPHOTERICIN B 50MG INJ	2	PA_BvD
<i>flucytosine 250mg cap</i>	2	
<i>flucytosine 500mg cap</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>griseofulvin 125mg tab</i>	2	
<i>griseofulvin 250mg tab</i>	2	
<i>griseofulvin 25mg/ml susp</i>	2	
<i>griseofulvin 500mg tab</i>	2	
<i>nystatin 500000unit tab</i>	1	
<i>terbinafine 250mg tab</i>	1	
IMIDAZOLE-RELATED ANTIFUNGALS		
<i>fluconazole 100mg tab</i>	1	
<i>fluconazole 10mg/ml susp</i>	1	
<i>fluconazole 150mg tab</i>	1	
<i>fluconazole 200mg tab</i>	1	
<i>fluconazole 2mg/ml (100ml) inj</i>	2	
<i>fluconazole 2mg/ml (200ml) inj</i>	2	
<i>fluconazole 40mg/ml susp</i>	1	
<i>fluconazole 50mg tab</i>	1	
<i>itraconazole 100mg cap</i>	2	QL=120 Quantity/30 Days
<i>ketoconazole 200mg tab</i>	1	
<i>posaconazole 100mg dr tab</i>	2	PA QL=96 Quantity/30 Days
<i>posaconazole 40mg/ml susp</i>	2	PA QL=630 Quantity/30 Days
<i>voriconazole 200mg inj</i>	2	PA
VORICONAZOLE 200MG INJ	2	PA
<i>voriconazole 200mg tab</i>	2	PA QL=120 Quantity/30 Days
<i>voriconazole 40mg/ml susp</i>	2	PA QL=400 Quantity/30 Days
<i>voriconazole 50mg tab</i>	2	PA QL=480 Quantity/30 Days
ANTIHYPERLIPIDEMICS		
ANTIHYPERLIPIDEMICS - MISC.		
<i>ezetimibe 10mg tab</i>	1	QL=30 Quantity/30 Days
<i>icosapent ethyl 0.5gm cap</i>	2	QL=120 Quantity/30 Days
<i>icosapent ethyl 1gm cap</i>	2	QL=120 Quantity/30 Days
NEXLETOL 180MG TAB	2	PA QL=30 Quantity/30 Days
NEXLIZET 180-10MG TAB	2	PA QL=30 Quantity/30 Days
<i>niacin 1000mg er tab</i>	1	
<i>niacin 500mg er tab</i>	1	
<i>niacin 750mg er tab</i>	1	
<i>omega-3 acid ethyl esters (usp) 1000mg cap</i>	2	
REPATHA 140MG/ML AUTO-INJECTOR	2	PA QL=2 Quantity/28 Days
REPATHA 140MG/ML SYRINGE	2	PA QL=2 Quantity/28 Days
REPATHA 420MG/3.5ML CARTRIDGE	2	PA QL=1 Quantity/28 Days
BILE ACID SEQUESTRANTS		
<i>cholestyramine 4gm bulk powder</i>	1	
<i>cholestyramine resin 4gm sf powder for oral susp</i>	1	
<i>cholestyramine resin 4gm sf powder for oral susp (sugar free)</i>	1	
<i>colesevelam 625mg tab</i>	2	
<i>colestipol 1000mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>colestipol 5000mg granules for oral susp</i>	2	
<i>colestipol 5gm granule</i>	2	
<i>prevalite 4gm powder for oral susp</i>	1	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate 134mg cap</i>	1	
<i>fenofibrate 145mg tab</i>	1	
<i>fenofibrate 160mg tab</i>	1	
<i>fenofibrate 200mg cap</i>	1	
<i>fenofibrate 48mg tab</i>	1	
<i>fenofibrate 54mg tab</i>	1	
<i>fenofibrate 67mg cap</i>	1	
<i>fenofibric acid 135mg dr cap</i>	1	
<i>fenofibric acid 45mg dr cap</i>	1	
<i>gemfibrozil 600mg tab</i>	1	
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin 10mg tab</i>	\$0	
<i>atorvastatin 20mg tab</i>	\$0	
<i>atorvastatin 40mg tab</i>	\$0	
<i>atorvastatin 80mg tab</i>	\$0	
<i>lovastatin 10mg tab</i>	\$0	
<i>lovastatin 20mg tab</i>	\$0	
<i>lovastatin 40mg tab</i>	\$0	
<i>pravastatin sodium 10mg tab</i>	\$0	
<i>pravastatin sodium 20mg tab</i>	\$0	
<i>pravastatin sodium 40mg tab</i>	\$0	
<i>pravastatin sodium 80mg tab</i>	\$0	
<i>rosuvastatin calcium 10mg tab</i>	\$0	
<i>rosuvastatin calcium 20mg tab</i>	\$0	
<i>rosuvastatin calcium 40mg tab</i>	\$0	
<i>rosuvastatin calcium 5mg tab</i>	\$0	
<i>simvastatin 10mg tab</i>	\$0	
<i>simvastatin 20mg tab</i>	\$0	
<i>simvastatin 40mg tab</i>	\$0	
<i>simvastatin 5mg tab</i>	\$0	
<i>simvastatin 80mg tab</i>	\$0	
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril 10mg tab</i>	\$0	
<i>benazepril 20mg tab</i>	\$0	
<i>benazepril 40mg tab</i>	\$0	
<i>benazepril 5mg tab</i>	\$0	
<i>captopril 100mg tab</i>	2	
<i>captopril 12.5mg tab</i>	2	
<i>captopril 25mg tab</i>	2	
<i>captopril 50mg tab</i>	2	

You can find information 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>enalapril maleate 10mg tab</i>	\$0	
<i>enalapril maleate 2.5mg tab</i>	\$0	
<i>enalapril maleate 20mg tab</i>	\$0	
<i>enalapril maleate 5mg tab</i>	\$0	
<i>fosinopril sodium 10mg tab</i>	1	
<i>fosinopril sodium 20mg tab</i>	1	
<i>fosinopril sodium 40mg tab</i>	1	
<i>lisinopril 10mg tab</i>	\$0	
<i>lisinopril 2.5mg tab</i>	\$0	
<i>lisinopril 20mg tab</i>	\$0	
<i>lisinopril 30mg tab</i>	\$0	
<i>lisinopril 40mg tab</i>	\$0	
<i>lisinopril 5mg tab</i>	\$0	
<i>moexipril 15mg tab</i>	1	
<i>moexipril 7.5mg tab</i>	1	
PERINDOPRIL 2MG TAB	1	
<i>perindopril erbumine 4mg tab</i>	1	
PERINDOPRIL ERBUMINE 8MG TAB	1	
<i>perindopril erbumine 8mg tab</i>	1	
<i>quinapril 10mg tab</i>	1	
<i>quinapril 20mg tab</i>	1	
<i>quinapril 40mg tab</i>	1	
<i>quinapril 5mg tab</i>	1	
<i>ramipril 1.25mg cap</i>	\$0	
<i>ramipril 10mg cap</i>	\$0	
<i>ramipril 2.5mg cap</i>	\$0	
<i>ramipril 5mg cap</i>	\$0	
<i>trandolapril 1mg tab</i>	1	
<i>trandolapril 2mg tab</i>	1	
<i>trandolapril 4mg tab</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil 16mg tab</i>	1	
<i>candesartan cilexetil 32mg tab</i>	1	
<i>candesartan cilexetil 4mg tab</i>	1	
<i>candesartan cilexetil 8mg tab</i>	1	
<i>irbesartan 150mg tab</i>	\$0	
<i>irbesartan 300mg tab</i>	\$0	
<i>irbesartan 75mg tab</i>	\$0	
<i>losartan potassium 100mg tab</i>	\$0	
<i>losartan potassium 25mg tab</i>	\$0	
<i>losartan potassium 50mg tab</i>	\$0	
<i>olmesartan medoxomil 20mg tab</i>	1	
<i>olmesartan medoxomil 40mg tab</i>	1	
<i>olmesartan medoxomil 5mg tab</i>	1	
<i>telmisartan 20mg tab</i>	1	

You can find information 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>telmisartan 40mg tab</i>	1	
<i>telmisartan 80mg tab</i>	1	
<i>valsartan 160mg tab</i>	\$0	
<i>valsartan 320mg tab</i>	\$0	
<i>valsartan 40mg tab</i>	\$0	
<i>valsartan 80mg tab</i>	\$0	
ANTIADRENERGIC ANTIHYPERTENSIVES		
<i>clonidine 0.1mg tab</i>	1	
<i>clonidine 0.1mg/24hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>clonidine 0.2mg tab</i>	1	
<i>clonidine 0.2mg/24hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>clonidine 0.3mg tab</i>	1	
<i>clonidine 0.3mg/24hr weekly patch</i>	2	QL=4 Quantity/28 Days
<i>doxazosin 1mg tab</i>	1	
<i>doxazosin 2mg tab</i>	1	
<i>doxazosin 4mg tab</i>	1	
<i>doxazosin 8mg tab</i>	1	
<i>guanfacine 1mg tab</i>	1	
<i>guanfacine 2mg tab</i>	1	
<i>prazosin 1mg cap</i>	1	
<i>prazosin 2mg cap</i>	1	
<i>prazosin 5mg cap</i>	1	
<i>terazosin 10mg cap</i>	1	
<i>terazosin 1mg cap</i>	1	
<i>terazosin 2mg cap</i>	1	
<i>terazosin 5mg cap</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	1	
<i>amlodipine/benazepril 10-40mg cap</i>	1	
<i>amlodipine/benazepril 2.5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-10mg cap</i>	1	
<i>amlodipine/benazepril 5-20mg cap</i>	1	
<i>amlodipine/benazepril 5-40mg cap</i>	1	
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	2	
<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	2	
<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	2	
<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	2	
<i>amlodipine/valsartan 10-160mg tab</i>	2	
<i>amlodipine/valsartan 10-320mg tab</i>	2	
<i>amlodipine/valsartan 5-160mg tab</i>	2	
<i>amlodipine/valsartan 5-320mg tab</i>	2	
<i>atenolol/chlorthalidone 100-25mg tab</i>	\$0	
<i>atenolol/chlorthalidone 50-25mg tab</i>	\$0	
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	\$0	
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	\$0	

You can find information 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>benazepril/hydrochlorothiazide 20-25mg tab</i>	\$0	
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	\$0	
<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	\$0	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	\$0	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	\$0	
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	\$0	
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	\$0	
<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	1	
<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	1	
<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	\$0	
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	\$0	
<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	\$0	
<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	\$0	
<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	\$0	
<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	\$0	
<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	\$0	
<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	\$0	
<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	2	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	2	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	2	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	1	
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	1	
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	\$0	
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	\$0	
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	\$0	
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	\$0	
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	\$0	
ANTIHYPERTENSIVES - MISC.		
<i>aliskiren 150mg tab</i>	2	
<i>aliskiren 300mg tab</i>	2	
<i>eplerenone 25mg tab</i>	1	
<i>eplerenone 50mg tab</i>	1	
<i>metyrosine 250mg cap</i>	4	NDS PA
VASODILATORS		
<i>hydralazine 100mg tab</i>	1	
<i>hydralazine 10mg tab</i>	1	
<i>hydralazine 25mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydralazine 50mg tab</i>	1	
<i>minoxidil 10mg tab</i>	1	
<i>minoxidil 2.5mg tab</i>	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
<i>azithromycin 20mg/ml susp</i>	1	
<i>azithromycin 250mg pack</i>	1	
<i>azithromycin 40mg/ml susp</i>	1	
<i>azithromycin 500mg inj</i>	2	
<i>azithromycin 500mg tab</i>	1	
<i>azithromycin 600mg tab</i>	1	
<i>aztreonam 1000mg inj</i>	2	
<i>aztreonam 2000mg inj</i>	2	
<i>cefepime 1000mg inj</i>	2	
CEFEPIME 1GM/50ML IV SOLN	2	
<i>cefepime 2000mg inj</i>	2	
CEFEPIME 2GM/100ML IV SOLN	2	
CEFEPIME/DEXTROSE 1GM/50ML-5% INJ	2	
CEFEPIME/DEXTROSE 2GM/50ML-5% INJ	2	
<i>clarithromycin 250mg tab</i>	1	
CLARITHROMYCIN 25MG/ML SUSP	2	
<i>clarithromycin 500mg tab</i>	1	
CLARITHROMYCIN 50MG/ML SUSP	2	
<i>clindamycin 12mg/ml inj</i>	2	
<i>clindamycin 150mg cap</i>	1	
<i>clindamycin 150mg/ml (2ml) inj</i>	2	
<i>clindamycin 150mg/ml (4ml) inj</i>	2	
<i>clindamycin 150mg/ml (6ml) inj</i>	2	
<i>clindamycin 15mg/ml oral soln</i>	2	
<i>clindamycin 18mg/ml inj</i>	2	
<i>clindamycin 300mg cap</i>	1	
<i>clindamycin 6mg/ml inj</i>	2	
<i>clindamycin 75mg cap</i>	1	
<i>clindamycin 9gm/60ml inj</i>	2	
CLINDAMYCIN/NACL 9%-300MG/50ML IV SOLN	2	
CLINDAMYCIN/NACL 9%-600MG/50ML IV SOLN	2	
CLINDAMYCIN/NACL 9%-900MG/50ML IV SOLN	2	
<i>colistin 75mg/ml inj</i>	2	
<i>daptomycin 500mg inj</i>	2	
DAPTOMYCIN 500MG INJ	2	
DIFICID 200MG TAB	2	PA QL=20 Quantity/10 Days
DIFICID 40MG/ML SUSP	2	PA QL=136 Quantity/10 Days
<i>ery-tab 250mg dr tab</i>	2	
<i>erythromycin 250mg tab</i>	2	
<i>erythromycin 333mg dr tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>erythromycin 500mg dr tab</i>	2	
<i>erythromycin 500mg tab</i>	2	
<i>erythromycin ethylsuccinate 40mg/ml susp</i>	2	
<i>erythromycin ethylsuccinate 80mg/ml susp</i>	2	
<i>linezolid 20mg/ml susp</i>	2	QL=1800 Quantity/30 Days
LINEZOLID 2MG/ML INJ	2	
<i>linezolid 2mg/ml inj</i>	2	
<i>linezolid 600mg tab</i>	2	QL=60 Quantity/30 Days
<i>metronidazole 250mg tab</i>	1	
<i>metronidazole 500mg tab</i>	1	
<i>metronidazole 5mg/ml inj</i>	2	
METRONIDAZOLE/NAACL 0.74%-500MG/100ML INJ	2	
<i>pentamidine isethionate 300mg inj</i>	2	
<i>pentamidine isethionate 50mg/ml inh soln</i>	2	PA_BvD QL=1 Quantity/28 Days
TEFLARO 400MG INJ	4	NDS
TEFLARO 600MG INJ	4	NDS
TIGECYCLINE 50MG INJ	4	NDS
<i>tigecycline 50mg inj</i>	4	NDS
<i>tinidazole 250mg tab</i>	1	
<i>tinidazole 500mg tab</i>	1	
TRIMETHOPRIM 100MG TAB	1	
<i>trimethoprim 100mg tab</i>	1	
<i>vancomycin 1.25gm iv soln</i>	2	
VANCOMYCIN 1.25GM IV SOLN	2	
VANCOMYCIN 1000MG INJ	2	
<i>vancomycin 1000mg inj</i>	2	
VANCOMYCIN 100GM INJ	2	
<i>vancomycin 100mg/ml inj</i>	2	
VANCOMYCIN 100MG/ML INJ	2	
<i>vancomycin 125mg cap</i>	1	QL=120 Quantity/30 Days
<i>vancomycin 250mg cap</i>	1	QL=120 Quantity/30 Days
VANCOMYCIN 500MG INJ	2	
<i>vancomycin 500mg inj</i>	2	
VANCOMYCIN 5GM INJ	2	
<i>vancomycin 5gm inj</i>	2	
VANCOMYCIN 750MG INJ	2	
<i>vancomycin 750mg inj</i>	2	
XIFAXAN 550MG TAB	2	PA QL=60 Quantity/30 Days
ANTIPROTOZOAL AGENTS		
<i>atovaquone 150mg/ml susp</i>	2	
<i>nitazoxanide 500mg tab</i>	2	PA QL=6 Quantity/3 Days
NITAZOXANIDE 500MG TAB	2	PA QL=6 Quantity/3 Days
CARBAPENEMS		
CILASTATIN/IMIPENEM 250-250MG INJ	2	
<i>cilastatin/imipenem 500-500mg inj</i>	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ertapenem 1000mg inj</i>	2	
MEROPENEM 0.9%-1GM/50ML INJ	2	
<i>meropenem 1000mg inj</i>	2	
<i>meropenem 500mg inj</i>	2	
MEROPENEM 500MG/50ML INJ	2	
URINARY ANTI-INFECTIVES		
<i>fosfomycin 3000mg powder for oral soln</i>	2	
<i>methenamine hippurate 1gm tab</i>	2	
<i>nitrofurantoin 100mg cap</i>	1	
<i>nitrofurantoin 50mg macro cap</i>	1	
<i>nitrofurantoin macro 100mg cap</i>	1	
<i>methenamine mandelate tab</i>	1*	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone/proguanil 250-100mg tab</i>	1	
<i>atovaquone/proguanil 62.5-25mg tab</i>	1	
COARTEM 20-120MG TAB	2	
ANTIMALARIALS		
<i>chloroquine 500mg tab</i>	2	
<i>chloroquine phosphate 250mg tab</i>	2	
<i>hydroxychloroquine sulfate 200mg tab</i>	1	
<i>hydroxychloroquine sulfate 300mg tab</i>	1	
<i>hydroxychloroquine sulfate 400mg tab</i>	1	
<i>hydroxychloroquine 100mg tab</i>	1	
<i>mefloquine hcl 250mg tab</i>	2	
PRIMAQUINE PHOSPHATE 26.3MG TAB	2	
<i>primaquine phosphate 26.3mg tab</i>	2	
<i>pyrimethamine 25mg tab</i>	2	PA QL=90 Quantity/30 Days
<i>quinine sulfate 324mg cap</i>	2	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE 10MG TAB	4	LD NDS PA
<i>pyridostigmine bromide 60mg tab</i>	1	
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>dapsone 100mg tab</i>	1	
<i>dapsone 25mg tab</i>	1	
<i>ethambutol 100mg tab</i>	2	
<i>ethambutol 400mg tab</i>	2	
ISONIAZID 100MG TAB	1	
<i>isoniazid 10mg/ml oral soln</i>	2	
<i>isoniazid 300mg tab</i>	1	
PRIFTIN 150MG TAB	2	
<i>pyrazinamide 500mg tab</i>	1	
<i>rifabutin 150mg cap</i>	2	

You can find information 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>rifampin 150mg cap</i>	2	
<i>rifampin 300mg cap</i>	2	
<i>rifampin 600mg inj</i>	2	
SIRTURO 100MG TAB	4	NDS PA
SIRTURO 20MG TAB	4	NDS PA
TRECTOR 250MG TAB	3	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE 25MG TAB	2	PA_BvD
CYCLOPHOSPHAMIDE 50MG TAB	2	PA_BvD
GLEOSTINE 100MG CAP	2	
GLEOSTINE 10MG CAP	2	
GLEOSTINE 40MG CAP	2	
ALKERAN TAB	\$0*	
MELPHALAN TAB	\$0*	
MYLERAN TAB	\$0*	
<i>temozolomide cap</i>	\$0*	
ANTIMETABOLITES		
JYLAMVO 2MG/ML ORAL SOLN	3	PA_NSO
<i>mercaptopurine 50mg tab</i>	2	
<i>methotrexate 2.5mg tab</i>	1	
METHOTREXATE 250MG/10ML INJ	1	
<i>methotrexate 25mg/ml (2ml) inj</i>	1	
<i>methotrexate 25mg/ml inj</i>	1	
ONUREG 200MG TAB	4	NDS PA_NSO QL=14 Quantity/28 Days
ONUREG 300MG TAB	4	NDS PA_NSO QL=14 Quantity/28 Days
PURIXAN 2000MG/100ML SUSP	3	PA_NSO QL=300 Quantity/30 Days
XATMEP 2.5MG/ML ORAL SOLN	3	PA_NSO
<i>capecitabine tab</i>	\$0*	
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1MG CAP	4	LD NDS PA_NSO QL=84 Quantity/28 Days
FRUZAQLA 5MG CAP	4	LD NDS PA_NSO QL=21 Quantity/28 Days
INLYTA 1MG TAB	4	NDS PA_NSO QL=180 Quantity/30 Days
INLYTA 5MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
LENVIMA CAP THERAPY PACK (10MG)	4	LD NDS PA_NSO QL=30 Quantity/30 Days
LENVIMA CAP THERAPY PACK (12MG)	4	LD NDS PA_NSO QL=90 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LENVIMA CAP THERAPY PACK (14MG)	4	LD NDS PA_NSO QL=60 Quantity/30 Days
LENVIMA CAP THERAPY PACK (18MG)	4	LD NDS PA_NSO QL=90 Quantity/30 Days
LENVIMA CAP THERAPY PACK (20MG)	4	LD NDS PA_NSO QL=60 Quantity/30 Days
LENVIMA CAP THERAPY PACK (24MG)	4	LD NDS PA_NSO QL=90 Quantity/30 Days
LENVIMA CAP THERAPY PACK (4MG)	4	LD NDS PA_NSO QL=30 Quantity/30 Days
LENVIMA CAP THERAPY PACK (8MG)	4	LD NDS PA_NSO QL=60 Quantity/30 Days
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>erlotinib 150mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>erlotinib 25mg tab</i>	1	PA_NSO QL=90 Quantity/30 Days
<i>gefitinib 250mg tab</i>	1	PA_NSO QL=60 Quantity/30 Days
GILOTRIF 20MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
GILOTRIF 30MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
GILOTRIF 40MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
TAGRISSE 40MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
TAGRISSE 80MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
VIZIMPRO 15MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
VIZIMPRO 30MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
VIZIMPRO 45MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
DAURISMO 25MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
ERIVEDGE 150MG CAP	4	NDS PA_NSO QL=28 Quantity/28 Days
ODOMZO 200MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	1	QL=120 Quantity/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
AKEEGA 500-100MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
AKEEGA 500-50MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
<i>anastrozole 1mg tab</i>	\$0	
<i>bicalutamide 50mg tab</i>	1	
ELIGARD 22.5MG INJ	3	QL=1 Quantity/84 Days
ELIGARD 30MG INJ	3	QL=1 Quantity/112 Days
ELIGARD 45MG INJ	3	QL=1 Quantity/168 Days
ELIGARD 7.5MG INJ	3	QL=1 Quantity/28 Days
ERLEADA 240MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
ERLEADA 60MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
<i>exemestane 25mg tab</i>	\$0	QL=60 Quantity/30 Days
FIRMAGON 120MG INJ	2	PA_NSO QL=4 Quantity/365 Days
FIRMAGON 80MG INJ	2	PA_NSO QL=1 Quantity/28 Days
<i>letrozole 2.5mg tab</i>	1	
LUPRON 11.25MG INJ	4	QL=1 Quantity/84 Days
LUPRON 3.75MG INJ	4	NDS QL=1 Quantity/28 Days
LYSODREN 500MG TAB	2	
<i>megestrol acetate 20mg tab</i>	1	PA_NSO
<i>megestrol acetate 40mg tab</i>	1	PA_NSO
<i>megestrol acetate 40mg/ml susp</i>	1	PA
<i>nilutamide 150mg tab</i>	1	
NUBEQA 300MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
ORGOVYX 120MG TAB	4	LD NDS PA_NSO QL=30 Quantity/28 Days
ORSERDU 345MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ORSERDU 86MG TAB	4	LD NDS PA_NSO QL=90 Quantity/30 Days
SOLTAMOX 10MG/5ML ORAL SOLN	3	PA_NSO QL=600 Quantity/30 Days
<i>tamoxifen 10mg tab</i>	\$0	
<i>tamoxifen 20mg tab</i>	\$0	
<i>toremifene 60mg tab</i>	2	QL=30 Quantity/30 Days
TRELSTAR 11.25MG INJ	3	QL=1 Quantity/84 Days
TRELSTAR 22.5MG INJ	3	QL=1 Quantity/168 Days
TRELSTAR 3.75MG INJ	3	QL=1 Quantity/28 Days
XTANDI 40MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
XTANDI 40MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XTANDI 80MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
ANTINEOPLASTIC COMBINATIONS		
INQOVI 5 TABLET PACK	4	NDS PA_NSO QL=1 Quantity/28 Days
KISQALI FEMARA CO-PACK 200 PACK	4	NDS PA_NSO QL=49 Quantity/28 Days
KISQALI FEMARA CO-PACK 400 PACK	4	NDS PA_NSO QL=70 Quantity/28 Days
KISQALI FEMARA CO-PACK 600 PACK	4	NDS PA_NSO QL=91 Quantity/28 Days
LONSURF 6.14-15MG TAB	4	NDS PA_NSO QL=100 Quantity/28 Days
LONSURF 8.19-20MG TAB	4	NDS PA_NSO QL=80 Quantity/28 Days
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA 150MG CAP	4	NDS PA_NSO QL=240 Quantity/30 Days
ALUNBRIG 180MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ALUNBRIG 30MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
ALUNBRIG 90MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ALUNBRIG TAB STARTER PACK	4	NDS PA_NSO QL=30 Quantity/30 Days
AUGTYRO 40MG CAP	4	NDS PA_NSO QL=240 Quantity/30 Days
BALVERSA 3MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
BALVERSA 4MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
BALVERSA 5MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
BOSULIF 100MG CAP	4	NDS PA_NSO QL=180 Quantity/30 Days
BOSULIF 100MG TAB	4	NDS PA_NSO QL=90 Quantity/30 Days
BOSULIF 400MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
BOSULIF 500MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
BOSULIF 50MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
BRAFTOVI 75MG CAP	4	LD NDS PA_NSO QL=180 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BRUKINSA 80MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
CABOMETYX 20MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
CABOMETYX 40MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
CABOMETYX 60MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
CALQUENCE 100MG CAP	4	LD NDS PA_NSO QL=60 Quantity/30 Days
CALQUENCE 100MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
CAPRELSA 100MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
CAPRELSA 300MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
COMETRIQ CAP DOSE PACK (100MG)	4	LD NDS PA_NSO QL=56 Quantity/28 Days
COMETRIQ CAP DOSE PACK (140MG)	4	LD NDS PA_NSO QL=112 Quantity/28 Days
COMETRIQ CAP DOSE PACK (60MG)	4	LD NDS PA_NSO QL=84 Quantity/28 Days
COPIKTRA 15MG CAP	4	LD NDS PA_NSO QL=60 Quantity/30 Days
COPIKTRA 25MG CAP	4	LD NDS PA_NSO QL=60 Quantity/30 Days
COTELLIC 20MG TAB	4	NDS PA_NSO QL=63 Quantity/28 Days
<i>dasatinib 100mg tab</i>	4	NDS PA_NSO QL=30 Quantity/30 Days
<i>dasatinib 140mg tab</i>	4	NDS PA_NSO QL=30 Quantity/30 Days
<i>dasatinib 20mg tab</i>	4	NDS PA_NSO QL=90 Quantity/30 Days
<i>dasatinib 50mg tab</i>	4	NDS PA_NSO QL=30 Quantity/30 Days
<i>dasatinib 70mg tab</i>	4	NDS PA_NSO QL=30 Quantity/30 Days
<i>dasatinib 80mg tab</i>	4	NDS PA_NSO QL=30 Quantity/30 Days
<i>everolimus 10mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>everolimus 2.5mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>everolimus 2mg tab for oral susp</i>	1	PA_NSO QL=150 Quantity/30 Days
<i>everolimus 3mg tab for oral susp</i>	1	PA_NSO QL=90 Quantity/30 Days
<i>everolimus 5mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>everolimus 5mg tab for oral susp</i>	1	PA_NSO QL=60 Quantity/30 Days
<i>everolimus 7.5mg tab</i>	1	PA_NSO QL=30 Quantity/30 Days
FOTIVDA 0.89MG CAP	4	LD NDS PA_NSO QL=21 Quantity/28 Days
FOTIVDA 1.34MG CAP	4	LD NDS PA_NSO QL=21 Quantity/28 Days
GAVRETO 100MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
IBRANCE 100MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
IBRANCE 100MG TAB	4	NDS PA_NSO QL=21 Quantity/28 Days
IBRANCE 125MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
IBRANCE 125MG TAB	4	NDS PA_NSO QL=21 Quantity/28 Days
IBRANCE 75MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
IBRANCE 75MG TAB	4	NDS PA_NSO QL=21 Quantity/28 Days
ICLUSIG 10MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ICLUSIG 15MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ICLUSIG 30MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ICLUSIG 45MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
IDHIFA 100MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
IDHIFA 50MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
<i>imatinib 100mg tab</i>	1	QL=90 Quantity/30 Days
<i>imatinib 400mg tab</i>	1	QL=60 Quantity/30 Days
IMBRUVICA 140MG CAP	4	LD NDS PA_NSO QL=90 Quantity/30 Days
IMBRUVICA 420MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
IMBRUVICA 70MG CAP	4	LD NDS PA_NSO QL=30 Quantity/30 Days
IMBRUVICA 70MG/ML SUSP	4	LD NDS PA_NSO QL=216 Quantity/27 Days
INREBIC 100MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
JAKAFI 10MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAKAFI 15MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAKAFI 20MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAKAFI 25MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAKAFI 5MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAYPIRCA 100MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
JAYPIRCA 50MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
KISQALI 200MG DAILY DOSE PACK	4	NDS PA_NSO QL=21 Quantity/28 Days
KISQALI 400MG DAILY DOSE PACK	4	NDS PA_NSO QL=42 Quantity/28 Days
KISQALI 600MG DAILY DOSE PACK	4	NDS PA_NSO QL=63 Quantity/28 Days
KOSELUGO 10MG CAP	4	LD NDS PA_NSO QL=240 Quantity/30 Days
KOSELUGO 25MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
KRAZATI 200MG TAB	4	LD NDS PA_NSO QL=180 Quantity/30 Days
<i>lapatinib ditosylate 250mg tab</i>	1	PA_NSO QL=180 Quantity/30 Days
LORBRENA 100MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
LORBRENA 25MG TAB	4	NDS PA_NSO QL=90 Quantity/30 Days
LUMAKRAS 120MG TAB	4	LD NDS PA_NSO QL=240 Quantity/30 Days
LUMAKRAS 320MG TAB	4	LD NDS PA_NSO QL=90 Quantity/30 Days
LYNPARZA 100MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
LYNPARZA 150MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
LYTGOBI 12MG DAILY DOSE 4MG PACK	4	LD NDS PA_NSO QL=84 Quantity/28 Days
LYTGOBI 16MG DAILY DOSE 4MG PACK	4	LD NDS PA_NSO QL=112 Quantity/28 Days
LYTGOBI 20MG DAILY DOSE 4MG PACK	4	LD NDS PA_NSO QL=140 Quantity/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MEKINIST 0.05MG/ML ORAL SOLN	4	NDS PA_NSO QL=1260 Quantity/30 Days
MEKINIST 0.5MG TAB	4	NDS PA_NSO QL=90 Quantity/30 Days
MEKINIST 2MG TAB	4	NDS PA_NSO QL=30 Quantity/30 Days
MEKTOVI 15MG TAB	4	NDS PA_NSO QL=180 Quantity/30 Days
NERLYNX 40MG TAB	4	LD NDS PA_NSO QL=180 Quantity/30 Days
NINLARO 2.3MG CAP	4	LD NDS PA_NSO QL=3 Quantity/28 Days
NINLARO 3MG CAP	4	LD NDS PA_NSO QL=3 Quantity/28 Days
NINLARO 4MG CAP	4	LD NDS PA_NSO QL=3 Quantity/28 Days
OGSIVEO 100MG TAB	4	LD NDS PA_NSO QL=56 Quantity/28 Days
OGSIVEO 150MG TAB	4	LD NDS PA_NSO QL=56 Quantity/28 Days
OGSIVEO 50MG TAB	4	LD NDS PA_NSO QL=180 Quantity/30 Days
OJEMDA 100MG TAB	4	NDS PA_NSO QL=24 Quantity/28 Days
OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	4	NDS PA_NSO QL=1 Quantity/28 Days
OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	4	NDS PA_NSO QL=1 Quantity/28 Days
OJEMDA 25MG/ML POWDER FOR ORAL SUSP	4	NDS PA_NSO QL=96 Quantity/28 Days
OJJAARA 100MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
OJJAARA 150MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
OJJAARA 200MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
<i>pazopanib 200mg tab</i>	1	PA_NSO QL=120 Quantity/30 Days
PEMAZYRE 13.5MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
PEMAZYRE 4.5MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
PEMAZYRE 9MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
PIQRAY 200MG DAILY DOSE PACK	4	NDS PA_NSO QL=28 Quantity/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PIQRAY TAB 250MG DAILY DOSE PACK (56)	4	NDS PA_NSO QL=56 Quantity/28 Days
PIQRAY TAB 300MG DAILY DOSE PACK (56)	4	NDS PA_NSO QL=56 Quantity/28 Days
QINLOCK 50MG TAB	4	LD NDS PA_NSO QL=90 Quantity/30 Days
RETEVMO 120MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
RETEVMO 160MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
RETEVMO 40MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
RETEVMO 40MG TAB	4	NDS PA_NSO QL=90 Quantity/30 Days
RETEVMO 80MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
RETEVMO 80MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
REZLIDHIA 150MG CAP	4	LD NDS PA_NSO QL=60 Quantity/30 Days
ROZLYTREK 100MG CAP	4	NDS PA_NSO QL=150 Quantity/30 Days
ROZLYTREK 200MG CAP	4	NDS PA_NSO QL=90 Quantity/30 Days
ROZLYTREK 50MG ORAL PELLETT	4	NDS PA_NSO QL=336 Quantity/28 Days
RUBRACA 200MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
RUBRACA 250MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
RUBRACA 300MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
RYDAPT 25MG CAP	4	NDS PA_NSO QL=224 Quantity/28 Days
SCSEMBLIX 100MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
SCSEMBLIX 20MG TAB	4	NDS PA_NSO QL=60 Quantity/30 Days
SCSEMBLIX 40MG TAB	4	NDS PA_NSO QL=300 Quantity/30 Days
<i>sorafenib 200mg tab</i>	1	PA_NSO QL=120 Quantity/30 Days
STIVARGA 40MG TAB	4	NDS PA_NSO QL=84 Quantity/28 Days
<i>sunitinib malate 12.5mg cap</i>	1	PA_NSO QL=28 Quantity/28 Days
<i>sunitinib malate 25mg cap</i>	1	PA_NSO QL=28 Quantity/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>sunitinib malate 37.5mg cap</i>	1	PA_NSO QL=28 Quantity/28 Days
<i>sunitinib malate 50mg cap</i>	1	PA_NSO QL=28 Quantity/28 Days
TABRECTA 150MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
TABRECTA 200MG TAB	4	NDS PA_NSO QL=120 Quantity/30 Days
TAFINLAR 10MG TAB FOR ORAL SUSP	4	NDS PA_NSO QL=840 Quantity/28 Days
TAFINLAR 50MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
TAFINLAR 75MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
TALZENNA 0.1MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
TALZENNA 0.25MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
TALZENNA 0.35MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
TALZENNA 0.5MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
TALZENNA 0.75MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
TALZENNA 1MG CAP	4	NDS PA_NSO QL=30 Quantity/30 Days
TASIGNA 150MG CAP	4	NDS PA_NSO QL=112 Quantity/28 Days
TASIGNA 200MG CAP	4	NDS PA_NSO QL=112 Quantity/28 Days
TASIGNA 50MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
TAZVERIK 200MG TAB	4	LD NDS PA_NSO QL=240 Quantity/30 Days
TEPMETKO 225MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
TIBSOVO 250MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
TRUQAP 160MG TAB	4	LD NDS PA_NSO QL=64 Quantity/28 Days
TRUQAP 200MG TAB	4	LD NDS PA_NSO QL=64 Quantity/28 Days
TURALIO 125MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
VANFLYTA 17.7MG TAB	4	LD NDS PA_NSO QL=28 Quantity/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VANFLYTA 26.5MG TAB	4	LD NDS PA_NSO QL=56 Quantity/28 Days
VERZENIO 100MG TAB	4	NDS PA_NSO QL=56 Quantity/28 Days
VERZENIO 150MG TAB	4	NDS PA_NSO QL=56 Quantity/28 Days
VERZENIO 200MG TAB	4	NDS PA_NSO QL=56 Quantity/28 Days
VERZENIO 50MG TAB	4	NDS PA_NSO QL=56 Quantity/28 Days
VITRAKVI 100MG CAP	4	LD NDS PA_NSO QL=60 Quantity/30 Days
VITRAKVI 20MG/ML ORAL SOLN	4	LD NDS PA_NSO QL=300 Quantity/30 Days
VITRAKVI 25MG CAP	4	LD NDS PA_NSO QL=180 Quantity/30 Days
VONJO 100MG CAP	4	LD NDS PA_NSO QL=120 Quantity/30 Days
XALKORI 150MG ORAL PELLETT	4	NDS PA_NSO QL=180 Quantity/30 Days
XALKORI 200MG CAP	4	NDS PA_NSO QL=60 Quantity/30 Days
XALKORI 20MG ORAL PELLETT	4	NDS PA_NSO QL=120 Quantity/30 Days
XALKORI 250MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
XALKORI 50MG ORAL PELLETT	4	NDS PA_NSO QL=120 Quantity/30 Days
XOSPATA 40MG TAB	4	LD NDS PA_NSO QL=90 Quantity/30 Days
ZEJULA 100MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ZEJULA 200MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ZEJULA 300MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
ZELBORAF 240MG TAB	4	NDS PA_NSO QL=240 Quantity/30 Days
ZOLINZA 100MG CAP	4	NDS PA_NSO QL=120 Quantity/30 Days
ZYDELIG 100MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days
ZYDELIG 150MG TAB	4	LD NDS PA_NSO QL=60 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ZYKADIA 150MG TAB	4	NDS PA_NSO QL=90 Quantity/30 Days
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000UNIT/0.5ML INJ	4	LD NDS PA_NSO
AYVAKIT 100MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
AYVAKIT 200MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
AYVAKIT 25MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
AYVAKIT 300MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
AYVAKIT 50MG TAB	4	LD NDS PA_NSO QL=30 Quantity/30 Days
BESREMI 500MCG/ML SYRINGE	4	LD NDS PA_NSO QL=2 Quantity/28 Days
<i>bexarotene 75mg cap</i>	1	PA_NSO QL=300 Quantity/30 Days
<i>hydroxyurea 500mg cap</i>	1	
MATULANE 50MG CAP	4	NDS
POMALYST 1MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
POMALYST 2MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
POMALYST 3MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
POMALYST 4MG CAP	4	NDS PA_NSO QL=21 Quantity/28 Days
<i>tretinoin 10mg cap</i>	1	
TUKYSA 150MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
TUKYSA 50MG TAB	4	LD NDS PA_NSO QL=120 Quantity/30 Days
VENCLEXTA 100MG TAB	4	LD NDS PA_NSO QL=180 Quantity/30 Days
VENCLEXTA 10MG TAB	2	PA_NSO QL=60 Quantity/30 Days
VENCLEXTA 50MG TAB	2	PA_NSO QL=30 Quantity/30 Days
VENCLEXTA STARTING PACK	4	LD NDS PA_NSO QL=42 Quantity/28 Days
WELIREG 40MG TAB	4	LD NDS PA_NSO QL=90 Quantity/30 Days
XPOVIO 100MG ONCE WEEKLY CARTON (8-PACK)	4	LD NDS PA_NSO QL=8 Quantity/28 Days
XPOVIO 40MG ONCE WEEKLY CARTON (4-PACK)	4	LD NDS PA_NSO QL=4 Quantity/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XPOVIO 40MG TWICE WEEKLY CARTON (8-PACK)	4	LD NDS PA_NSO QL=8 Quantity/28 Days
XPOVIO 60MG ONCE WEEKLY CARTON (4-PACK)	4	LD NDS PA_NSO QL=4 Quantity/28 Days
XPOVIO 60MG TWICE WEEKLY PACK	4	LD NDS PA_NSO QL=24 Quantity/28 Days
XPOVIO 80 MG TWICE WEEKLY	4	LD NDS PA_NSO QL=32 Quantity/28 Days
XPOVIO 80MG ONCE WEEKLY CARTON (8-PACK)	4	LD NDS PA_NSO QL=8 Quantity/28 Days
ETOPOSIDE CAP	\$0*	
HYCANTIN CAP	\$0*	PA
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
IWILFIN 192MG TAB	4	LD NDS PA_NSO QL=240 Quantity/30 Days
<i>leucovorin 10mg tab</i>	1	
<i>leucovorin 15mg tab</i>	1	
<i>leucovorin 25mg tab</i>	1	
<i>leucovorin 5mg tab</i>	1	
MESNEX 400MG TAB	2	
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa 25mg tab</i>	2	
<i>entacapone 200mg tab</i>	2	
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate 0.5mg tab</i>	1	
<i>benztropine mesylate 1mg tab</i>	1	
<i>benztropine mesylate 2mg tab</i>	1	
<i>trihexyphenidyl 2mg tab</i>	1	
<i>trihexyphenidyl 5mg tab</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine 100mg cap</i>	1	
<i>amantadine 10mg/ml oral soln</i>	2	
<i>bromocriptine 2.5mg tab</i>	2	
<i>bromocriptine 5mg cap</i>	2	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	2	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	2	
CARBIDOPA/LEVODOPA 10-100MG ODT	2	
<i>carbidopa/levodopa 10-100mg tab</i>	1	
CARBIDOPA/LEVODOPA 10-250MG ODT	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>carbidopa/levodopa 25-100mg er tab</i>	1	
CARBIDOPA/LEVODOPA 25-100MG ODT	2	
<i>carbidopa/levodopa 25-100mg tab</i>	1	
<i>carbidopa/levodopa 25-250mg tab</i>	1	
<i>carbidopa/levodopa 50-200mg er tab</i>	1	
<i>pramipexole 0.125mg tab</i>	1	
<i>pramipexole 0.25mg tab</i>	1	
<i>pramipexole 0.5mg tab</i>	1	
<i>pramipexole 0.75mg tab</i>	1	
<i>pramipexole 1.5mg tab</i>	1	
<i>pramipexole 1mg tab</i>	1	
<i>ropinirole 0.25mg tab</i>	1	
<i>ropinirole 0.5mg tab</i>	1	
<i>ropinirole 1mg tab</i>	1	
<i>ropinirole 2mg tab</i>	1	
<i>ropinirole 3mg tab</i>	1	
<i>ropinirole 4mg tab</i>	1	
<i>ropinirole 5mg tab</i>	1	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline 0.5mg tab</i>	2	RXC QL=30 Quantity/30 Days
<i>rasagiline 1mg tab</i>	2	RXC QL=30 Quantity/30 Days
<i>selegiline 5mg cap</i>	1	
<i>selegiline 5mg tab</i>	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<i>lithium carbonate 150mg cap</i>	1	
LITHIUM CARBONATE 150MG CAP	1	
<i>lithium carbonate 300mg cap</i>	1	
LITHIUM CARBONATE 300MG CAP	1	
<i>lithium carbonate 300mg er tab</i>	1	
<i>lithium carbonate 300mg tab</i>	1	
<i>lithium carbonate 450mg er tab</i>	1	
<i>lithium carbonate 600mg cap</i>	1	
LITHIUM CARBONATE 600MG CAP	1	
<i>lithium citrate 60mg/ml oral soln</i>	1	
ANTIPSYCHOTICS - MISC.		
CAPLYTA 10.5MG CAP	3	PA_NSO QL=30 Quantity/30 Days
CAPLYTA 21MG CAP	3	PA_NSO QL=30 Quantity/30 Days
CAPLYTA 42MG CAP	3	PA_NSO QL=30 Quantity/30 Days
<i>haloperidol 0.5mg tab</i>	1	
<i>haloperidol 10mg tab</i>	1	
<i>haloperidol 1mg tab</i>	1	
<i>haloperidol 20mg tab</i>	1	
<i>haloperidol 2mg tab</i>	1	
<i>haloperidol 2mg/ml oral soln</i>	1	

You can find information 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>haloperidol 5mg tab</i>	1	
<i>haloperidol 5mg/ml inj</i>	2	
<i>haloperidol decanoate 100mg/ml inj</i>	2	
<i>haloperidol decanoate 50mg/ml inj</i>	2	
<i>lurasidone hcl 120mg tab</i>	1	QL=30 Quantity/30 Days
<i>lurasidone hcl 20mg tab</i>	1	QL=30 Quantity/30 Days
<i>lurasidone hcl 40mg tab</i>	1	QL=30 Quantity/30 Days
<i>lurasidone hcl 60mg tab</i>	1	QL=30 Quantity/30 Days
<i>lurasidone hcl 80mg tab</i>	1	QL=60 Quantity/30 Days
MOLINDONE 10MG TAB	2	
MOLINDONE 25MG TAB	2	
MOLINDONE 5MG TAB	2	
NUPLAZID 10MG TAB	3	PA_NSO QL=30 Quantity/30 Days
NUPLAZID 34MG CAP	3	PA_NSO QL=30 Quantity/30 Days
<i>thiothixene 10mg cap</i>	1	
<i>thiothixene 1mg cap</i>	1	
<i>thiothixene 2mg cap</i>	1	
<i>thiothixene 5mg cap</i>	1	
VRAYLAR 1.5MG CAP	3	PA_NSO QL=30 Quantity/30 Days
VRAYLAR 3MG CAP	3	PA_NSO QL=30 Quantity/30 Days
VRAYLAR 4.5MG CAP	3	PA_NSO QL=30 Quantity/30 Days
VRAYLAR 6MG CAP	3	PA_NSO QL=30 Quantity/30 Days
<i>ziprasidone 20mg cap</i>	1	
<i>ziprasidone 20mg inj</i>	2	QL=60 Quantity/30 Days
<i>ziprasidone 40mg cap</i>	1	
<i>ziprasidone 60mg cap</i>	1	
<i>ziprasidone 80mg cap</i>	1	
BENZISOXAZOLES		
FANAPT 10MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 12MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 1MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 2MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 4MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 6MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT 8MG TAB	3	PA_NSO QL=60 Quantity/30 Days
FANAPT TITRATION PACK	3	PA_NSO QL=60 Quantity/30 Days
INVEGA HAFYERA 1092MG/3.5ML SYRINGE	3	QL=1 Quantity/180 Days
INVEGA HAFYERA 1560MG/5ML SYRINGE	3	QL=1 Quantity/180 Days
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	3	QL=1 Quantity/28 Days
INVEGA SUSTENNA 156MG/ML SYRINGE	3	QL=1 Quantity/28 Days
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	3	QL=1 Quantity/28 Days
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	3	QL=1 Quantity/28 Days
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	3	QL=1 Quantity/28 Days
INVEGA TRINZA 273MG/0.875ML SYRINGE	3	QL=1 Quantity/84 Days
INVEGA TRINZA 410MG/1.315ML SYRINGE	3	QL=1 Quantity/84 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 546MG/1.75ML SYRINGE	3	QL=1 Quantity/84 Days
INVEGA TRINZA 819MG/2.625ML SYRINGE	3	QL=1 Quantity/84 Days
<i>paliperidone 1.5mg er tab</i>	2	QL=30 Quantity/30 Days
<i>paliperidone 3mg er tab</i>	2	QL=30 Quantity/30 Days
<i>paliperidone 6mg er tab</i>	2	QL=60 Quantity/30 Days
<i>paliperidone 9mg er tab</i>	2	QL=30 Quantity/30 Days
PERSERIS 120MG INJ	4	NDS QL=1 Quantity/28 Days
PERSERIS 90MG INJ	4	NDS QL=1 Quantity/28 Days
RISPERIDONE 0.25MG ODT	2	QL=60 Quantity/30 Days
<i>risperidone 0.25mg tab</i>	1	
<i>risperidone 0.5mg odt</i>	2	QL=60 Quantity/30 Days
<i>risperidone 0.5mg tab</i>	1	
<i>risperidone 1mg odt</i>	2	QL=60 Quantity/30 Days
<i>risperidone 1mg tab</i>	1	
<i>risperidone 1mg/ml oral soln</i>	1	QL=240 Quantity/30 Days
<i>risperidone 2mg odt</i>	2	QL=60 Quantity/30 Days
<i>risperidone 2mg tab</i>	1	
<i>risperidone 3mg odt</i>	2	QL=60 Quantity/30 Days
<i>risperidone 3mg tab</i>	1	
<i>risperidone 4mg odt</i>	2	QL=60 Quantity/30 Days
<i>risperidone 4mg tab</i>	1	
<i>risperidone microspheres 12.5mg inj</i>	2	QL=2 Quantity/28 Days
<i>risperidone microspheres 25mg inj</i>	2	QL=2 Quantity/28 Days
<i>risperidone microspheres 37.5mg inj</i>	2	QL=2 Quantity/28 Days
<i>risperidone microspheres 50mg inj</i>	2	QL=2 Quantity/28 Days
UZEDY 100MG/0.28ML SYRINGE	4	QL=1 Quantity/30 Days
UZEDY 125MG/0.35ML SYRINGE	4	NDS QL=1 Quantity/30 Days
UZEDY 150MG/0.42ML SYRINGE	4	QL=1 Quantity/60 Days
UZEDY 200MG/0.56ML SYRINGE	4	QL=1 Quantity/60 Days
UZEDY 250MG/0.7ML SYRINGE	4	QL=1 Quantity/60 Days
UZEDY 50MG/0.14ML SYRINGE	4	NDS QL=1 Quantity/30 Days
UZEDY 75MG/0.21ML SYRINGE	4	NDS QL=1 Quantity/30 Days
DIBENZAPINES		
<i>asenapine 10mg sl tab</i>	2	QL=60 Quantity/30 Days
<i>asenapine 2.5mg sl tab</i>	2	QL=60 Quantity/30 Days
<i>asenapine 5mg sl tab</i>	2	QL=60 Quantity/30 Days
<i>clozapine 100mg odt</i>	2	QL=270 Quantity/30 Days
<i>clozapine 100mg tab</i>	2	
CLOZAPINE 12.5MG ODT	2	QL=90 Quantity/30 Days
<i>clozapine 150mg odt</i>	2	QL=180 Quantity/30 Days
<i>clozapine 200mg odt</i>	2	QL=120 Quantity/30 Days
<i>clozapine 200mg tab</i>	2	
<i>clozapine 25mg odt</i>	2	QL=270 Quantity/30 Days
<i>clozapine 25mg tab</i>	2	
<i>clozapine 50mg tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>loxapine 10mg cap</i>	1	
<i>loxapine 25mg cap</i>	1	
<i>loxapine 50mg cap</i>	1	
<i>loxapine 5mg cap</i>	1	
<i>olanzapine 10mg inj</i>	2	QL=90 Quantity/30 Days
<i>olanzapine 10mg odt</i>	2	QL=60 Quantity/30 Days
<i>olanzapine 10mg tab</i>	1	
<i>olanzapine 15mg odt</i>	2	QL=30 Quantity/30 Days
<i>olanzapine 15mg tab</i>	1	
<i>olanzapine 2.5mg tab</i>	1	
<i>olanzapine 20mg odt</i>	2	QL=30 Quantity/30 Days
<i>olanzapine 20mg tab</i>	1	
<i>olanzapine 5mg odt</i>	2	QL=30 Quantity/30 Days
<i>olanzapine 5mg tab</i>	1	
<i>olanzapine 7.5mg tab</i>	1	
<i>quetiapine 100mg tab</i>	1	
<i>quetiapine 150mg er tab</i>	1	QL=30 Quantity/30 Days
<i>quetiapine 200mg er tab</i>	1	QL=30 Quantity/30 Days
<i>quetiapine 200mg tab</i>	1	
<i>quetiapine 25mg tab</i>	1	
<i>quetiapine 300mg er tab</i>	1	QL=60 Quantity/30 Days
<i>quetiapine 300mg tab</i>	1	
<i>quetiapine 400mg er tab</i>	1	QL=60 Quantity/30 Days
<i>quetiapine 400mg tab</i>	1	
<i>quetiapine 50mg er tab</i>	1	QL=60 Quantity/30 Days
<i>quetiapine 50mg tab</i>	1	
SECUADO 3.8MG/24HR PATCH	3	PA_NSO QL=30 Quantity/30 Days
SECUADO 5.7MG/24HR PATCH	3	PA_NSO QL=30 Quantity/30 Days
SECUADO 7.6MG/24HR PATCH	3	PA_NSO QL=30 Quantity/30 Days
VERSACLOZ 50MG/ML SUSP	3	PA_NSO QL=600 Quantity/30 Days
ZYPREXA RELPREVV 210MG INJ	3	QL=2 Quantity/28 Days
PHENOTHIAZINES		
<i>chlorpromazine 100mg tab</i>	1	
CHLORPROMAZINE 100MG/ML ORAL SOLN	2	
<i>chlorpromazine 10mg tab</i>	1	
<i>chlorpromazine 200mg tab</i>	1	
<i>chlorpromazine 25mg tab</i>	1	
CHLORPROMAZINE 30MG/ML ORAL SOLN	2	
<i>chlorpromazine 50mg tab</i>	1	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	2	
<i>fluphenazine 10mg tab</i>	1	
<i>fluphenazine 1mg tab</i>	1	
<i>fluphenazine 2.5mg tab</i>	1	
FLUPHENAZINE 2.5MG/ML INJ	2	
<i>fluphenazine 5mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FLUPHENAZINE 5MG/ML ORAL SOLN	2	
<i>fluphenazine decanoate 25mg/ml inj</i>	2	
<i>perphenazine 16mg tab</i>	1	
<i>perphenazine 2mg tab</i>	1	
<i>perphenazine 4mg tab</i>	1	
<i>perphenazine 8mg tab</i>	1	
<i>prochlorperazine 10mg tab</i>	1	
<i>prochlorperazine 25mg rectal supp</i>	1	
<i>prochlorperazine 5mg tab</i>	1	
<i>thioridazine 100mg tab</i>	1	
<i>thioridazine 10mg tab</i>	1	
<i>thioridazine 25mg tab</i>	1	
<i>thioridazine 50mg tab</i>	1	
<i>trifluoperazine 10mg tab</i>	1	
<i>trifluoperazine 1mg tab</i>	1	
<i>trifluoperazine 2mg tab</i>	1	
<i>trifluoperazine 5mg tab</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY 300MG INJ	4	NDS QL=1 Quantity/28 Days
ABILIFY 300MG SYRINGE	4	NDS QL=1 Quantity/28 Days
ABILIFY 400MG INJ	4	NDS QL=1 Quantity/28 Days
ABILIFY 400MG SYRINGE	4	NDS QL=1 Quantity/28 Days
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	4	QL=1 Quantity/56 Days
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	4	QL=1 Quantity/56 Days
<i>aripiprazole 10mg odt</i>	2	PA_NSO QL=60 Quantity/30 Days
<i>aripiprazole 10mg tab</i>	1	
<i>aripiprazole 15mg odt</i>	2	PA_NSO QL=60 Quantity/30 Days
<i>aripiprazole 15mg tab</i>	1	
<i>aripiprazole 1mg/ml oral soln</i>	2	QL=900 Quantity/30 Days
<i>aripiprazole 20mg tab</i>	1	
<i>aripiprazole 2mg tab</i>	1	
<i>aripiprazole 30mg tab</i>	1	
<i>aripiprazole 5mg tab</i>	1	
ARISTADA 1064MG/3.9ML INJ	4	QL=3.90 Quantity/56 Days
ARISTADA 441MG/1.6ML INJ	4	NDS QL=1.60 Quantity/28 Days
ARISTADA 662MG/2.4ML INJ	4	NDS QL=2.40 Quantity/28 Days
ARISTADA 675MG/2.4ML INJ	4	QL=2.40 Quantity/42 Days
ARISTADA 882MG/3.2ML INJ	4	QL=3.20 Quantity/28 Days
REXULTI 0.25MG TAB	3	PA_NSO QL=30 Quantity/30 Days
REXULTI 0.5MG TAB	3	PA_NSO QL=30 Quantity/30 Days
REXULTI 1MG TAB	3	PA_NSO QL=30 Quantity/30 Days
REXULTI 2MG TAB	3	PA_NSO QL=30 Quantity/30 Days
REXULTI 3MG TAB	3	PA_NSO QL=30 Quantity/30 Days
REXULTI 4MG TAB	3	PA_NSO QL=30 Quantity/30 Days
ANTIVIRALS		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIRETROVIRALS		
<i>abacavir 20mg/ml oral soln</i>	2	QL=960 Quantity/30 Days
<i>abacavir 300mg tab</i>	2	QL=60 Quantity/30 Days
<i>abacavir/lamivudine 600-300mg tab</i>	2	QL=30 Quantity/30 Days
APTIVUS 250MG CAP	4	QL=120 Quantity/30 Days
<i>atazanavir 150mg cap</i>	2	QL=30 Quantity/30 Days
<i>atazanavir 200mg cap</i>	2	QL=60 Quantity/30 Days
<i>atazanavir 300mg cap</i>	2	QL=30 Quantity/30 Days
BIKTARVY 30-120-15MG TAB	4	QL=30 Quantity/30 Days
BIKTARVY 50-200-25MG TAB	4	QL=30 Quantity/30 Days
CIMDUO 300-300MG TAB	4	QL=30 Quantity/30 Days
COMPLERA 200-25-300MG TAB	4	QL=30 Quantity/30 Days
<i>darunavir 600mg tab</i>	2	QL=60 Quantity/30 Days
<i>darunavir 800mg tab</i>	2	QL=30 Quantity/30 Days
DELSTRIGO 100-300-300MG TAB	4	QL=30 Quantity/30 Days
DESCOVY 120-15MG TAB	\$0	QL=30 Quantity/30 Days
DESCOVY 200-25MG TAB	\$0	QL=30 Quantity/30 Days
DOVATO 50-300MG TAB	4	QL=30 Quantity/30 Days
EDURANT 25MG TAB	4	QL=30 Quantity/30 Days
<i>efavirenz 600mg tab</i>	2	QL=30 Quantity/30 Days
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	2	QL=30 Quantity/30 Days
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 400-300-300mg tab</i>	2	QL=30 Quantity/30 Days
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	2	QL=30 Quantity/30 Days
<i>emtricitabine 200mg cap</i>	2	QL=30 Quantity/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	\$0	QL=30 Quantity/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	\$0	QL=30 Quantity/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	\$0	QL=30 Quantity/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	\$0	QL=30 Quantity/30 Days
EMTRIVA 10MG/ML ORAL SOLN	2	QL=850 Quantity/30 Days
<i>etravirine 100mg tab</i>	2	QL=60 Quantity/30 Days
<i>etravirine 200mg tab</i>	2	QL=60 Quantity/30 Days
EVOTAZ 300-150MG TAB	4	QL=30 Quantity/30 Days
<i>fosamprenavir 700mg tab</i>	2	QL=120 Quantity/30 Days
FUZEON 90MG INJ	4	QL=60 Quantity/30 Days
GENVOYA 150-150-200-10MG TAB	4	QL=30 Quantity/30 Days
INTELENCE 25MG TAB	2	QL=120 Quantity/30 Days
ISENTRESS 100MG CHEW TAB	2	QL=180 Quantity/30 Days
ISENTRESS 100MG GRANULES FOR ORAL SUSP	2	QL=60 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ISENTRESS 25MG CHEW TAB	2	QL=180 Quantity/30 Days
ISENTRESS 400MG TAB	2	QL=60 Quantity/30 Days
ISENTRESS 600MG TAB	2	QL=60 Quantity/30 Days
JULUCA 50-25MG TAB	4	QL=30 Quantity/30 Days
<i>lamivudine 10mg/ml oral soln</i>	2	QL=960 Quantity/30 Days
<i>lamivudine 150mg tab</i>	2	QL=60 Quantity/30 Days
<i>lamivudine 300mg tab</i>	2	QL=30 Quantity/30 Days
<i>lamivudine/zidovudine 150-300mg tab</i>	2	QL=60 Quantity/30 Days
<i>lopinavir/ritonavir 100-25mg tab</i>	2	QL=300 Quantity/30 Days
<i>lopinavir/ritonavir 200-50mg tab</i>	2	QL=120 Quantity/30 Days
<i>lopinavir/ritonavir 80-20mg/ml oral solution</i>	2	QL=480 Quantity/30 Days
<i>maraviroc 150mg tab</i>	2	QL=60 Quantity/30 Days
<i>maraviroc 300mg tab</i>	2	QL=120 Quantity/30 Days
NEVIRAPINE 10MG/ML SUSP	2	QL=1200 Quantity/30 Days
<i>nevirapine 200mg tab</i>	1	QL=60 Quantity/30 Days
<i>nevirapine 400mg er tab</i>	2	QL=30 Quantity/30 Days
NORVIR 100MG ORAL POWDER	2	QL=360 Quantity/30 Days
ODEFSEY 200-25-25MG TAB	4	QL=30 Quantity/30 Days
PIFELTRO 100MG TAB	4	QL=30 Quantity/30 Days
PREZCOBIX 150-800MG TAB	4	QL=30 Quantity/30 Days
PREZISTA 100MG/ML SUSP	2	QL=400 Quantity/30 Days
PREZISTA 150MG TAB	2	QL=240 Quantity/30 Days
PREZISTA 75MG TAB	2	QL=480 Quantity/30 Days
REYATAZ 50MG ORAL POWDER	4	QL=240 Quantity/30 Days
<i>ritonavir 100mg tab</i>	2	QL=360 Quantity/30 Days
RUKOBIA 600MG ER TAB	4	QL=60 Quantity/30 Days
SELZENTRY 20MG/ML ORAL SOLN	4	QL=1840 Quantity/30 Days
SELZENTRY 25MG TAB	2	QL=240 Quantity/30 Days
SELZENTRY 75MG TAB	4	QL=60 Quantity/30 Days
STRIBILD 150-150-200-300MG TAB	4	QL=30 Quantity/30 Days
SUNLENCA 300MG TAB 4-TABLET PACK	4	QL=4 Quantity/28 Days
SUNLENCA 300MG TAB 5-TABLET PACK	4	QL=5 Quantity/28 Days
SYMTUZA 800-150-200-10MG TAB	4	QL=30 Quantity/30 Days
<i>tenofovir disoproxil fumarate 300mg tab</i>	2	QL=30 Quantity/30 Days
TIVICAY 10MG TAB	2	QL=60 Quantity/30 Days
TIVICAY 25MG TAB	2	QL=60 Quantity/30 Days
TIVICAY 50MG TAB	4	QL=60 Quantity/30 Days
TIVICAY 5MG TAB FOR ORAL SUSP	2	QL=180 Quantity/30 Days
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	2	QL=180 Quantity/30 Days
TRIUMEQ 600-50-300MG TAB	4	QL=30 Quantity/30 Days
TYBOST 150MG TAB	2	QL=30 Quantity/30 Days
VIRACEPT 250MG TAB	4	QL=300 Quantity/30 Days
VIRACEPT 625MG TAB	4	QL=120 Quantity/30 Days
VIREAD 150MG TAB	4	QL=30 Quantity/30 Days
VIREAD 200MG TAB	4	QL=30 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VIREAD 250MG TAB	4	QL=30 Quantity/30 Days
VIREAD 40MG/GM ORAL POWDER	2	QL=240 Quantity/30 Days
<i>zidovudine 100mg cap</i>	2	QL=180 Quantity/30 Days
<i>zidovudine 10mg/ml oral soln</i>	2	QL=1920 Quantity/30 Days
<i>zidovudine 300mg tab</i>	2	QL=60 Quantity/30 Days
CMV AGENTS		
LIVTENCITY 200MG TAB	4	LD NDS PA QL=120 Quantity/30 Days
PREVYMIS 240MG TAB	4	NDS PA QL=30 Quantity/30 Days
PREVYMIS 480MG TAB	4	NDS PA QL=30 Quantity/30 Days
<i>valganciclovir 450mg tab</i>	2	
<i>valganciclovir 50mg/ml oral soln</i>	2	
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	2	QL=30 Quantity/30 Days
<i>entecavir 0.5mg tab</i>	2	QL=30 Quantity/30 Days
<i>entecavir 1mg tab</i>	2	QL=30 Quantity/30 Days
<i>lamivudine 100mg tab</i>	2	QL=90 Quantity/30 Days
MAVYRET 100-40MG TAB	4	NDS PA QL=90 Quantity/30 Days
MAVYRET 50-20MG ORAL PELLETT	4	NDS PA QL=150 Quantity/30 Days
PEGASYS 180MCG/0.5ML SYRINGE	4	NDS QL=4 Quantity/28 Days
PEGASYS 180MCG/ML INJ	4	NDS QL=4 Quantity/28 Days
RIBAVIRIN 200MG CAP	1	QL=210 Quantity/30 Days
<i>ribavirin 200mg cap</i>	1	QL=210 Quantity/30 Days
RIBAVIRIN 200MG TAB	1	QL=210 Quantity/30 Days
SOFOSBUVIR/VELPATASVIR 400-100MG TAB	4	NDS PA QL=30 Quantity/30 Days
VEMLIDY 25MG TAB	4	NDS QL=30 Quantity/30 Days
VOSEVI 400-100-100MG TAB	4	NDS PA QL=30 Quantity/30 Days
HERPES AGENTS		
<i>acyclovir 200mg cap</i>	1	
<i>acyclovir 400mg tab</i>	1	
<i>acyclovir 40mg/ml susp</i>	1	
<i>acyclovir 50mg/ml inj</i>	2	PA_BvD
<i>acyclovir 800mg tab</i>	1	
<i>famciclovir 125mg tab</i>	2	
<i>famciclovir 250mg tab</i>	2	
<i>famciclovir 500mg tab</i>	2	
<i>valacyclovir 1000mg tab</i>	1	
<i>valacyclovir 500mg tab</i>	1	
INFLUENZA AGENTS		
<i>oseltamivir 30mg cap</i>	1	QL=84 Quantity/180 Days
<i>oseltamivir 45mg cap</i>	1	QL=42 Quantity/180 Days
<i>oseltamivir 6mg/ml susp</i>	2	QL=540 Quantity/180 Days
<i>oseltamivir 75mg cap</i>	1	QL=42 Quantity/180 Days
RELENZA 5MG/BLISTER INHALER	2	QL=120 Quantity/30 Days
RIMANTADINE 100MG TAB	2	
XOFLUZA 40MG THERAPY PACK	3	QL=2 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XOFLUZA 80MG TAB	3	QL=1 Quantity/30 Days
MISC. ANTIVIRALS		
PAXLOVID 150MG/100MG TAB PACK	2	QL=20 Quantity/5 Days
PAXLOVID 300MG/100MG TAB PACK	2	QL=30 Quantity/5 Days
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol 12.5mg tab</i>	\$0	
<i>carvedilol 25mg tab</i>	\$0	
<i>carvedilol 3.125mg tab</i>	\$0	
<i>carvedilol 6.25mg tab</i>	\$0	
<i>labetalol 100mg tab</i>	1	
<i>labetalol 200mg tab</i>	1	
<i>labetalol 300mg tab</i>	1	
<i>carvedilol phosphate ER 10mg cap</i>	\$0*	
<i>carvedilol phosphate ER 20mg cap</i>	\$0*	
<i>carvedilol phosphate ER 40mg cap</i>	\$0*	
<i>carvedilol phosphate ER 80mg cap</i>	\$0*	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol 200mg cap</i>	1	
<i>acebutolol 400mg cap</i>	1	
<i>atenolol 100mg tab</i>	\$0	
<i>atenolol 25mg tab</i>	\$0	
<i>atenolol 50mg tab</i>	\$0	
<i>betaxolol 10mg tab</i>	1	
<i>betaxolol 20mg tab</i>	1	
<i>bisoprolol fumarate 10mg tab</i>	1	
<i>bisoprolol fumarate 5mg tab</i>	1	
<i>metoprolol succinate 100mg er tab</i>	1	
<i>metoprolol succinate 200mg er tab</i>	1	
<i>metoprolol succinate 25mg er tab</i>	1	
<i>metoprolol succinate 50mg er tab</i>	1	
<i>metoprolol tartrate 100mg tab</i>	\$0	
<i>metoprolol tartrate 25mg tab</i>	\$0	
<i>metoprolol tartrate 37.5mg tab</i>	1	
<i>metoprolol tartrate 50mg tab</i>	\$0	
<i>metoprolol tartrate 75mg tab</i>	1	
<i>nebivolol 10mg tab</i>	2	RXC
<i>nebivolol 2.5mg tab</i>	2	RXC
<i>nebivolol 20mg tab</i>	2	RXC
<i>nebivolol 5mg tab</i>	2	RXC
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol 20mg tab</i>	2	
<i>nadolol 40mg tab</i>	2	
<i>nadolol 80mg tab</i>	2	
<i>pindolol 10mg tab</i>	1	

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

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>isradipine 2.5mg cap</i>	2	
<i>isradipine 5mg cap</i>	2	
<i>nifedipine 30mg er tab</i>	1	
<i>nifedipine 30mg osmotic er tab</i>	1	
<i>nifedipine 60mg er tab</i>	1	
<i>nifedipine 60mg osmotic er tab</i>	1	
<i>nifedipine 90mg er tab</i>	1	
<i>nifedipine 90mg osmotic er tab</i>	1	
<i>nimodipine 30mg cap</i>	2	
<i>tiadylt 120mg er (24hr) cap</i>	1	
<i>tiadylt 180mg er (24hr) cap</i>	1	
<i>tiadylt 240mg er (24hr) cap</i>	1	
<i>tiadylt 300mg er (24hr) cap</i>	1	
<i>tiadylt 360mg er (24hr) cap</i>	1	
<i>verapamil 120mg er cap</i>	1	
<i>verapamil 120mg er tab</i>	1	
<i>verapamil 120mg tab</i>	1	
<i>verapamil 180mg er cap</i>	1	
<i>verapamil 180mg er tab</i>	1	
<i>verapamil 240mg er cap</i>	1	
<i>verapamil 240mg er tab</i>	1	
VERAPAMIL 360MG ER CAP	2	
<i>verapamil 40mg tab</i>	1	
<i>verapamil 80mg tab</i>	1	
CARDIOVASCULAR AGENTS		
ALPHA-ADRENERGIC AGONISTS		
<i>droxidopa 100mg cap</i>	1	PA QL=90 Quantity/30 Days
<i>droxidopa 200mg cap</i>	1	PA QL=180 Quantity/30 Days
<i>droxidopa 300mg cap</i>	1	PA QL=180 Quantity/30 Days
<i>midodrine 10mg tab</i>	1	
<i>midodrine 2.5mg tab</i>	1	
<i>midodrine 5mg tab</i>	1	
CARDIOVASCULAR AGENTS, OTHER		
CAMZYOS 10MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
CAMZYOS 15MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
CAMZYOS 2.5MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
CAMZYOS 5MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
<i>digox 125mcg tab</i>	1	
<i>digoxin 0.25mg tab</i>	1	
ENTRESTO 24-26MG TAB	2	QL=60 Quantity/30 Days
ENTRESTO 49-51MG TAB	2	QL=60 Quantity/30 Days
ENTRESTO 97-103MG TAB	2	QL=60 Quantity/30 Days
<i>ivabradine hcl 5mg tab</i>	2	PA QL=60 Quantity/30 Days
<i>ivabradine hcl 7.5mg tab</i>	2	PA QL=60 Quantity/30 Days
<i>pentoxifylline 400mg er tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>ranolazine 1000mg er tab</i>	2	
<i>ranolazine 500mg er tab</i>	2	
VERQUVO 10MG TAB	2	PA QL=30 Quantity/30 Days
VERQUVO 2.5MG TAB	2	PA QL=30 Quantity/30 Days
VERQUVO 5MG TAB	2	PA QL=30 Quantity/30 Days
VYNDAMAX 61MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
VYNDAQEL 20MG CAP	4	LD NDS PA QL=120 Quantity/30 Days
CARDIOVASCULAR AGENTS - MISC.		
IMPOTENCE AGENTS		
CAVERJECT IMPULSE INJ	2*	QL=6 Quantity/30 Days
CAVERJECT INJ	2*	QL=6 Quantity/30 Days
EDEX 10MCG INJ KIT	2*	QL=3 Quantity/30 Days
EDEX 20MCG INJ KIT	2*	QL=3 Quantity/30 Days
EDEX 40MCG INJ KIT	2*	QL=3 Quantity/30 Days
EDEX INJ	2*	QL=1 Quantity/30 Days
MUSE SUPP	2*	QL=6 Quantity/30 Days
<i>sildenafil tab</i>	1*	QL=6 Quantity/30 Days
STENDRA TAB	2*	QL=6 Quantity/30 Days
<i>tadalafil 10mg tab</i>	1*	QL=6 Quantity/30 Days
<i>tadalafil tab 20mg</i>	1*	QL=6 Quantity/30 Days
<i>vardenafil ODT</i>	2*	QL=6 Quantity/30 Days
<i>vardenafil tab</i>	2*	QL=6 Quantity/30 Days
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil 100mg/ml susp</i>	1	
<i>cefadroxil 500mg cap</i>	1	
<i>cefadroxil 50mg/ml susp</i>	1	
<i>cefazolin 1000mg inj</i>	2	
CEFAZOLIN 100GM INJ	2	
CEFAZOLIN 1GM INJ	2	
<i>cefazolin 200mg/ml inj</i>	2	
CEFAZOLIN 300GM INJ	2	
<i>cefazolin 500mg inj</i>	2	
CEFAZOLIN/DEXTROSE 1GM-4% IV SOLN	2	
CEFAZOLIN/DEXTROSE 1GM/50ML-4% IV SOLN	2	
<i>cephalexin 250mg cap</i>	1	
<i>cephalexin 25mg/ml susp</i>	1	
<i>cephalexin 500mg cap</i>	1	
<i>cephalexin 50mg/ml susp</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
CEFACLOR 250MG CAP	2	
CEFACLOR 500MG CAP	2	
<i>cefoxitin 1000mg inj</i>	2	
<i>cefoxitin 2000mg inj</i>	2	
<i>cefoxitin 200mg/ml inj</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CEFOXITIN/DEXTROSE 1GM-4% INJ	2	
CEFOXITIN/DEXTROSE 2GM-2.2% INJ	2	
<i>cefprozil 250mg tab</i>	1	
<i>cefprozil 25mg/ml susp</i>	1	
<i>cefprozil 500mg tab</i>	1	
<i>cefprozil 50mg/ml susp</i>	1	
<i>cefuroxime 1500mg inj</i>	2	
<i>cefuroxime 250mg tab</i>	1	
<i>cefuroxime 500mg tab</i>	1	
<i>cefuroxime 750mg inj</i>	2	
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir 25mg/ml susp</i>	1	
<i>cefdinir 300mg cap</i>	1	
<i>cefdinir 50mg/ml susp</i>	1	
<i>cefixime 20mg/ml susp</i>	2	
<i>cefixime 400mg cap</i>	2	
<i>cefixime 40mg/ml susp</i>	2	
<i>cefpodoxime 100mg tab</i>	2	
<i>cefpodoxime 10mg/ml susp</i>	2	
<i>cefpodoxime 200mg tab</i>	2	
<i>cefpodoxime 20mg/ml susp</i>	2	
<i>ceftazidime 1000mg inj</i>	2	
<i>ceftazidime 200mg/ml inj</i>	2	
<i>ceftazidime 2gm inj</i>	2	
<i>ceftriaxone 1000mg inj</i>	2	
<i>ceftriaxone 100mg/ml inj</i>	2	
<i>ceftriaxone 2000mg inj</i>	2	
<i>ceftriaxone 250mg inj</i>	2	
<i>ceftriaxone 500mg inj</i>	2	
CEFTRIAXONE SODIUM 100GM INJ	2	
<i>ceftriaxone sodium 1gm inj</i>	2	
<i>ceftriaxone sodium 2gm inj</i>	2	
CEFTRIAXONE/DEXTROSE 1GM-3.74% IV SOLN	2	
CEFTRIAXONE/DEXTROSE 20MG/ML INJ	2	
CEFTRIAXONE/DEXTROSE 2GM-2.22% IV SOLN	2	
CEFTRIAXONE/DEXTROSE 40MG/ML INJ	2	
TAZICEF 1GM INJ	2	
TAZICEF 6GM INJ	2	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>budesonide 3mg dr cap</i>	2	QL=90 Quantity/30 Days
<i>budesonide 9mg er tab</i>	2	PA QL=30 Quantity/30 Days
<i>dexamethasone 0.1mg/ml oral soln</i>	1	
<i>dexamethasone 0.5mg tab</i>	1	
DEXAMETHASONE 0.5MG/5ML ORAL SOLN	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dexamethasone 0.75mg tab</i>	1	
<i>dexamethasone 1.5mg tab</i>	1	
<i>dexamethasone 1mg tab</i>	1	
<i>dexamethasone 2mg tab</i>	1	
<i>dexamethasone 4mg tab</i>	1	
<i>dexamethasone 6mg tab</i>	1	
<i>hydrocortisone 10mg tab</i>	1	
<i>hydrocortisone 20mg tab</i>	1	
<i>hydrocortisone 5mg tab</i>	1	
<i>methylprednisolone 16mg tab</i>	1	PA_BvD
<i>methylprednisolone 32mg tab</i>	1	PA_BvD
<i>methylprednisolone 4mg pack</i>	1	
<i>methylprednisolone 4mg tab</i>	1	PA_BvD
<i>methylprednisolone 8mg tab</i>	1	PA_BvD
<i>prednisolone 1mg/ml oral soln</i>	1	PA_BvD
<i>prednisolone 3mg/ml oral soln</i>	1	PA_BvD
<i>prednisolone 5mg/ml oral soln</i>	2	PA_BvD
<i>prednisolone sodium phosphate 15mg/5ml oral soln</i>	1	PA_BvD
<i>prednisone 10mg tab</i>	1	PA_BvD
<i>prednisone 1mg tab</i>	1	PA_BvD
PREDNISON 1MG/ML ORAL SOLN	2	PA_BvD
<i>prednisone 2.5mg tab</i>	1	PA_BvD
<i>prednisone 20mg tab</i>	1	PA_BvD
<i>prednisone 50mg tab</i>	1	PA_BvD
<i>prednisone 5mg tab</i>	1	PA_BvD
MINERALOCORTICOIDS		
<i>fludrocortisone 0.1mg tab</i>	1	
COUGH/COLD/ALLERGY		
ANTITUSSIVES		
<i>benzonatate 100mg cap, 200mg cap</i>	1*	
<i>hydrocodone/homatropine syrup</i>	1*	
COUGH/COLD/ALLERGY COMBINATIONS		
<i>guaifenesin/codeine syrup</i>	1*	QL=240 Quantity/ Per Dispensing
GUAIFENESIN/CODEINE SYRUP	1*	QL=240 Quantity/ Per Dispensing
HYDROCODONE/CHLORPHENIRAMINE SUSP	3*	QL=120 Quantity/ Per Dispensing
<i>hydrocodone/chlorpheniramine susp</i>	3*	QL=120 Quantity/ Per Dispensing
<i>promethazine DM syrup</i>	1*	
<i>promethazine VC w/codeine syrup</i>	1*	
PROMETHAZINE VC W/CODEINE SYRUP	1*	
<i>promethazine/codeine syrup</i>	1*	
MISC. RESPIRATORY INHALANTS		
HYPER SAL NEB SOLN	\$0*	
NEBUSAL NEB SOLN	\$0*	
<i>sodium chloride neb soln</i>	\$0*	
MUCOLYTICS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>acetylcysteine 100mg/ml inh soln</i>	1	PA_BvD
<i>acetylcysteine 200mg/ml inh soln</i>	1	PA_BvD
DENTAL AND ORAL AGENTS		
DENTAL AND ORAL AGENTS		
<i>cevimeline 30mg cap</i>	2	
<i>chlorhexidine gluconate 0.12% mouthwash</i>	1	
<i>clotrimazole 10mg lozenge</i>	1	
<i>lidocaine 2% topical soln</i>	1	
NYSTATIN 100000UNIT/ML ORAL SUSP	1	
<i>nystatin 100000unit/ml susp</i>	1	
<i>pilocarpine 5mg tab</i>	1	
<i>pilocarpine 7.5mg tab</i>	1	
PREVIDENT 5000 1.1-5% PASTE	1	
PREVIDENT 5000 1.1-5% PASTE	2	
PREVIDENT 5000 BOOSTER 1.1% PASTE	2	
PREVIDENT 5000 DRY MOUTH 1.1% GEL	2	
PREVIDENT 5000 PLUS 1.1% CREAM	\$0	
<i>sodium fluoride 0.2% rinse</i>	1	
<i>sodium fluoride 1.1% cream</i>	\$0	
<i>sodium fluoride 1.1% gel</i>	1	
<i>sodium fluoride 1.1% paste</i>	1	
<i>sodium fluoride/potassium nitrate 1.1-5% paste</i>	1	
<i>triamcinolone acetonide 0.1% oral paste</i>	1	
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>clindamycin 1% gel</i>	1	QL=75 Quantity/30 Days
<i>clindamycin 1% lotion</i>	1	QL=60 Quantity/30 Days
<i>clindamycin 1% pad</i>	1	QL=120 Quantity/30 Days
<i>clindamycin 1% topical soln</i>	1	QL=60 Quantity/30 Days
ERY 2% PAD	2	QL=60 Quantity/30 Days
<i>erythromycin 2% gel</i>	1	QL=60 Quantity/30 Days
<i>erythromycin 2% topical soln</i>	1	QL=60 Quantity/30 Days
<i>isotretinoin 10mg cap</i>	2	
<i>isotretinoin 20mg cap</i>	2	
<i>isotretinoin 30mg cap</i>	2	
<i>isotretinoin 40mg cap</i>	2	
<i>sulfacetamide sodium 10% lotion</i>	2	QL=118 Quantity/30 Days
<i>tretinoin 0.01% gel</i>	2	PA QL=45 Quantity/30 Days
<i>tretinoin 0.025% cream</i>	2	PA QL=45 Quantity/30 Days
<i>tretinoin 0.025% gel</i>	2	PA QL=45 Quantity/30 Days
<i>tretinoin 0.05% cream</i>	2	PA QL=45 Quantity/30 Days
<i>tretinoin 0.1% cream</i>	2	PA QL=45 Quantity/30 Days
<i>sodium sulfacetamide/sulfur 10-5% cleanser</i>	2*	
<i>sodium sulfacetamide/sulfur 9-4.5% cleanser</i>	2*	
<i>sulfacetamide sodium/sulfur 10-5% cream</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>sulfacetamide sodium/sulfur emulsion</i>	2*	
<i>sulfacleanse susp</i>	2*	
SUMADAN 9-4.5% WASH	3*	
ANTIBIOTICS - TOPICAL		
<i>gentamicin 0.1% cream</i>	1	QL=30 Quantity/30 Days
<i>gentamicin 0.1% ointment</i>	1	QL=120 Quantity/30 Days
<i>mupirocin 2% ointment</i>	1	QL=220 Quantity/30 Days
ANTIFUNGALS - TOPICAL		
<i>betamethasone/clotrimazole 1-0.05% cream</i>	1	QL=90 Quantity/30 Days
<i>ciclopirox 0.77% cream</i>	1	QL=90 Quantity/30 Days
<i>ciclopirox 0.77% gel</i>	1	QL=100 Quantity/30 Days
<i>ciclopirox 0.77% lotion</i>	1	QL=60 Quantity/30 Days
<i>ciclopirox 1% shampoo</i>	2	QL=120 Quantity/30 Days
<i>ciclopirox 8% topical soln</i>	1	QL=13.20 Quantity/30 Days
<i>clotrimazole 1% cream</i>	1	QL=45 Quantity/30 Days
<i>econazole nitrate 1% cream</i>	1	QL=85 Quantity/30 Days
<i>ketoconazole 2% cream</i>	1	QL=120 Quantity/30 Days
<i>ketoconazole 2% shampoo</i>	1	QL=240 Quantity/30 Days
<i>nystatin 100000unit/ml cream</i>	1	QL=30 Quantity/30 Days
<i>nystatin 10000unit/gm ointment</i>	1	QL=30 Quantity/30 Days
<i>nystatin 100unit/mg topical powder</i>	1	QL=60 Quantity/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	1	QL=60 Quantity/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	1	QL=60 Quantity/30 Days
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene 1% gel</i>	1	PA_NSO QL=60 Quantity/30 Days
<i>diclofenac sodium 3% gel</i>	2	PA QL=1 Quantity/30 Days
FLUOROURACIL 2% TOPICAL SOLN	2	QL=10 Quantity/30 Days
<i>fluorouracil 5% cream</i>	1	QL=1 Quantity/30 Days
<i>fluorouracil 5% topical solution</i>	2	QL=10 Quantity/30 Days
PANRETIN 0.1% GEL	4	NDS PA_NSO QL=60 Quantity/30 Days
VALCHLOR 0.016% GEL	4	LD NDS PA_NSO QL=240 Quantity/30 Days
ANTIPSORIATICS		
<i>acitretin 10mg cap</i>	2	
<i>acitretin 17.5mg cap</i>	2	
<i>acitretin 25mg cap</i>	2	
<i>calcipotriene 0.005% cream</i>	2	PA QL=120 Quantity/30 Days
<i>calcipotriene 0.005% ointment</i>	2	PA QL=120 Quantity/30 Days
CALCIPOTRIENE 0.005% TOPICAL SOLN	2	PA QL=120 Quantity/30 Days
<i>calcipotriene 0.005% topical soln</i>	2	PA QL=120 Quantity/30 Days
COSENTYX 150MG/ML AUTO-INJECTOR	4	NDS PA QL=8 Quantity/28 Days
COSENTYX 150MG/ML SYRINGE	4	NDS PA QL=8 Quantity/28 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
COSENTYX 75MG/0.5ML SYRINGE	4	NDS PA QL=4 Quantity/28 Days
COSENTYX UNOREADY 300MG/2ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
METHOXSALLEN 10MG CAP	2	
OTEZLA 28-DAY STARTER PACK	4	NDS PA QL=55 Quantity/28 Days
OTEZLA 30MG TAB	4	NDS PA QL=60 Quantity/30 Days
SKYRIZI 150MG/ML AUTO-INJECTOR	4	PA QL=7 Quantity/365 Days
SKYRIZI 150MG/ML SYRINGE	4	PA QL=7 Quantity/365 Days
STELARA 45MG/0.5ML INJ	4	PA QL=.50 Quantity/28 Days
STELARA 45MG/0.5ML SYRINGE	4	PA QL=.50 Quantity/28 Days
STELARA 90MG/ML SYRINGE	4	PA QL=1 Quantity/28 Days
<i>tazarotene 0.1% cream</i>	2	PA QL=60 Quantity/30 Days
TREMFYA 100MG/ML AUTO-INJECTOR	4	PA QL=2 Quantity/28 Days
TREMFYA 100MG/ML SYRINGE	4	PA QL=2 Quantity/28 Days
CORTICOSTEROIDS - TOPICAL		
<i>ala-cort 2.5% cream</i>	1	QL=454 Quantity/30 Days
<i>alclometasone dipropionate 0.05% cream</i>	2	QL=120 Quantity/30 Days
<i>alclometasone dipropionate 0.05% ointment</i>	2	QL=120 Quantity/30 Days
<i>betamethasone 0.05% aug cream</i>	1	QL=100 Quantity/30 Days
<i>betamethasone 0.05% aug lotion</i>	2	QL=120 Quantity/30 Days
<i>betamethasone 0.05% aug ointment</i>	1	QL=100 Quantity/30 Days
<i>betamethasone 0.05% cream</i>	1	QL=90 Quantity/30 Days
BETAMETHASONE 0.05% GEL	2	QL=100 Quantity/30 Days
<i>betamethasone 0.05% lotion</i>	1	QL=120 Quantity/30 Days
<i>betamethasone 0.05% ointment</i>	2	QL=90 Quantity/30 Days
<i>betamethasone 0.1% cream</i>	1	QL=180 Quantity/30 Days
<i>betamethasone 0.1% lotion</i>	1	QL=120 Quantity/30 Days
<i>betamethasone 0.1% ointment</i>	1	QL=180 Quantity/30 Days
<i>clobetasol propionate 0.05% cream</i>	1	QL=120 Quantity/30 Days
<i>clobetasol propionate 0.05% e cream</i>	2	QL=120 Quantity/30 Days
<i>clobetasol propionate 0.05% foam</i>	2	QL=100 Quantity/30 Days
<i>clobetasol propionate 0.05% gel</i>	2	QL=120 Quantity/30 Days
<i>clobetasol propionate 0.05% lotion</i>	2	QL=118 Quantity/30 Days
<i>clobetasol propionate 0.05% ointment</i>	1	QL=120 Quantity/30 Days
<i>clobetasol propionate 0.05% shampoo</i>	2	QL=2 Quantity/30 Days
<i>clobetasol propionate 0.05% spray</i>	2	QL=125 Quantity/30 Days
<i>clobetasol propionate 0.05% topical soln</i>	1	QL=100 Quantity/30 Days
<i>desonide 0.05% ointment</i>	2	QL=120 Quantity/30 Days
<i>desoximetasone 0.25% cream</i>	2	QL=120 Quantity/30 Days
<i>desoximetasone 0.25% ointment</i>	2	QL=120 Quantity/30 Days
<i>fluocinolone acetonide 0.01% body oil</i>	2	QL=120 Quantity/30 Days
<i>fluocinolone acetonide 0.01% cream</i>	1	QL=120 Quantity/30 Days
<i>fluocinolone acetonide 0.01% topical soln</i>	1	QL=90 Quantity/30 Days
<i>fluocinolone acetonide 0.025% cream</i>	1	QL=120 Quantity/30 Days
<i>fluocinolone acetonide 0.025% ointment</i>	1	QL=120 Quantity/30 Days

You can find information 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>fluocinolone acetonide 0.1mg/ml oil</i>	2	QL=120 Quantity/30 Days
<i>fluocinonide 0.05% cream</i>	1	QL=60 Quantity/30 Days
<i>fluocinonide 0.05% e cream</i>	1	QL=120 Quantity/30 Days
<i>fluocinonide 0.05% gel</i>	1	QL=60 Quantity/30 Days
FLUOCINONIDE 0.05% GEL	1	QL=60 Quantity/30 Days
<i>fluocinonide 0.05% ointment</i>	1	QL=60 Quantity/30 Days
<i>fluocinonide 0.05% topical soln</i>	1	QL=60 Quantity/30 Days
<i>fluocinonide 0.1% cream</i>	1	QL=60 Quantity/30 Days
<i>fluticasone propionate 0.005% ointment</i>	1	QL=240 Quantity/30 Days
<i>fluticasone propionate 0.05% cream</i>	1	QL=240 Quantity/30 Days
<i>halobetasol propionate 0.05% cream</i>	2	QL=50 Quantity/30 Days
<i>halobetasol propionate 0.05% ointment</i>	2	QL=50 Quantity/30 Days
<i>hydrocortisone 1% cream (RX Only)</i>	1	QL=240 Quantity/30 Days
<i>hydrocortisone 2.5% lotion</i>	1	QL=118 Quantity/30 Days
HYDROCORTISONE 2.5% LOTION	1	QL=118 Quantity/30 Days
<i>hydrocortisone 2.5% ointment</i>	1	QL=240 Quantity/30 Days
<i>mometasone furoate 0.1% cream</i>	1	QL=180 Quantity/30 Days
<i>mometasone furoate 0.1% lotion</i>	1	QL=180 Quantity/30 Days
<i>mometasone furoate 0.1% ointment</i>	1	QL=180 Quantity/30 Days
<i>triamcinolone acetonide 0.025% cream</i>	1	QL=454 Quantity/30 Days
<i>triamcinolone acetonide 0.025% lotion</i>	1	QL=120 Quantity/30 Days
<i>triamcinolone acetonide 0.025% ointment</i>	1	QL=454 Quantity/30 Days
<i>triamcinolone acetonide 0.1% cream</i>	1	QL=454 Quantity/30 Days
<i>triamcinolone acetonide 0.1% lotion</i>	1	QL=120 Quantity/30 Days
<i>triamcinolone acetonide 0.1% ointment</i>	1	QL=454 Quantity/30 Days
<i>triamcinolone acetonide 0.5% cream</i>	1	QL=454 Quantity/30 Days
<i>triamcinolone acetonide 0.5% ointment</i>	1	QL=120 Quantity/30 Days
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus 1% cream</i>	2	QL=100 Quantity/30 Days
<i>tacrolimus 0.03% ointment</i>	1	QL=100 Quantity/30 Days
<i>tacrolimus 0.1% ointment</i>	1	QL=100 Quantity/30 Days
LOCAL ANESTHETICS - TOPICAL		
LIDOCAINE 4% ORAL SOLN	1	QL=50 Quantity/30 Days
<i>lidocaine 4% topical soln</i>	1	QL=50 Quantity/30 Days
<i>lidocaine 5% ointment</i>	1	PA QL=107 Quantity/30 Days
<i>lidocaine 5% patch</i>	2	PA QL=90 Quantity/30 Days
<i>lidocaine/prilocaine 2.5-2.5% cream</i>	1	QL=30 Quantity/30 Days
<i>lidocaine 3% cream (rx only)</i>	1*	
MISC. TOPICAL		
<i>acyclovir 5% ointment</i>	1	QL=30 Quantity/30 Days
<i>ammonium lactate 12% cream</i>	1	
<i>ammonium lactate 12% lotion</i>	1	
<i>imiquimod 5% cream</i>	1	QL=24 Quantity/30 Days
<i>malathion 0.5% lotion</i>	2	QL=59 Quantity/30 Days
<i>permethrin 5% cream</i>	1	QL=60 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PODOFILOX 0.5% TOPICAL SOLN	2	QL=7 Quantity/30 Days
<i>selenium sulfide 2.5% shampoo</i>	1	QL=120 Quantity/30 Days
DRYSOL SOLN	1*	
<i>salicylic acid shampoo</i>	2*	
<i>selenium sulfide 2.25% shampoo</i>	2*	
<i>sulfacetamide sodium wash</i>	2*	
ROSACEA AGENTS		
<i>azelaic acid 15% gel</i>	2	QL=50 Quantity/30 Days
<i>metronidazole 0.75% cream</i>	1	QL=45 Quantity/30 Days
<i>metronidazole 0.75% gel</i>	1	QL=45 Quantity/30 Days
<i>metronidazole 1% gel</i>	2	QL=60 Quantity/30 Days
WOUND CARE PRODUCTS		
REGRANEX 0.01% GEL	2	PA QL=2 Quantity/15 Days
SANTYL 250UNIT/GM OINTMENT	2	QL=1 Quantity/30 Days
<i>silver sulfadiazine 1% cream</i>	1	
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC TESTS		
ACCU-CHEK AVIVA PLUS TEST STRIP	\$0*	
ACCU-CHEK GUIDE TEST STRIP	\$0*	
ACCU-CHEK SMARTVIEW TEST STRIP	\$0*	
ACCU-CHEK TEST STRIP	\$0*	
CLINISTIX	1*	
KETO-DIASTIX	1*	
KETOSTIX	1*	
ONETOUCH TEST STRIP	\$0*	
ONETOUCH ULTRA	\$0*	
ONETOUCH VERIO TEST STRIP	\$0*	
TRUE METRIX TEST STRIPS	\$0*	
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON 120000-76000-24000UNIT DR CAP	2	
CREON 15000-9500-3000UNIT DR CAP	2	
CREON 30000-19000-6000UNIT DR CAP	2	
CREON 36000-114000-180000UNIT DR CAP	2	
CREON 60000-38000-12000UNIT DR CAP	2	
SUCRAID 8500UNIT/ML ORAL SOLN	4	NDS PA
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide 125mg tab</i>	1	
<i>acetazolamide 250mg tab</i>	1	
<i>acetazolamide 500mg er cap</i>	1	
<i>methazolamide 25mg tab</i>	2	
<i>methazolamide 50mg tab</i>	2	
DIURETIC COMBINATIONS		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
AMILORIDE 5MG/HYDROCHLOROTHIAZIDE 50MG TAB	1	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	1	
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	1	
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	1	
LOOP DIURETICS		
<i>bumetanide 0.25mg/ml inj</i>	2	
<i>bumetanide 0.5mg tab</i>	1	
<i>bumetanide 1mg tab</i>	1	
<i>bumetanide 2mg tab</i>	1	
FUROSCIX 80MG/10ML CARTRIDGE	4	LD NDS QL=8 Quantity/7 Days
<i>furosemide 10mg/ml inj</i>	2	
<i>furosemide 10mg/ml oral soln</i>	1	
<i>furosemide 20mg tab</i>	\$0	
<i>furosemide 40mg tab</i>	\$0	
<i>furosemide 80mg tab</i>	\$0	
FUROSEMIDE 8MG/ML ORAL SOLN	1	
<i>torseamide 100mg tab</i>	1	
<i>torseamide 10mg tab</i>	1	
<i>torseamide 20mg tab</i>	1	
<i>torseamide 5mg tab</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride 5mg tab</i>	1	
<i>spironolactone 100mg tab</i>	1	
<i>spironolactone 25mg tab</i>	1	
<i>spironolactone 50mg tab</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone 25mg tab</i>	\$0	
<i>chlorthalidone 50mg tab</i>	\$0	
<i>hydrochlorothiazide 12.5mg cap</i>	\$0	
<i>hydrochlorothiazide 12.5mg tab</i>	\$0	
<i>hydrochlorothiazide 25mg tab</i>	\$0	
<i>hydrochlorothiazide 50mg tab</i>	\$0	
<i>indapamide 1.25mg tab</i>	1	
<i>indapamide 2.5mg tab</i>	1	
<i>metolazone 10mg tab</i>	1	
<i>metolazone 2.5mg tab</i>	1	
<i>metolazone 5mg tab</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
<i>alendronate 10mg tab</i>	\$0	
<i>alendronate 35mg tab</i>	\$0	
<i>alendronate 70mg tab</i>	\$0	
<i>ibandronate 150mg tab</i>	1	QL=1 Quantity/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PROLIA 60MG/ML SYRINGE	3	ST QL=1 Quantity/168 Days
<i>raloxifene 60mg tab</i>	\$0	
<i>risedronate sodium 150mg tab</i>	2	
<i>risedronate sodium 30mg tab</i>	2	
<i>risedronate sodium 35mg tab</i>	2	
<i>risedronate sodium 5mg tab</i>	2	
<i>salmon calcitonin 200unit/act nasal spray</i>	1	QL=1 Quantity/28 Days
TERIPARATIDE 0.02MG/ACT PEN INJ	4	NDS QL=1 Quantity/28 Days
<i>teriparatide 0.02mg/act pen inj</i>	4	NDS QL=1 Quantity/28 Days
TYMLOS 3120MCG/1.56ML PEN INJ	4	NDS QL=1.56 Quantity/30 Days
XGEVA 120MG/1.7ML INJ	4	NDS PA QL=1 Quantity/28 Days
GROWTH HORMONES		
NORDITROPIN 10MG/1.5ML PEN INJ	4	NDS PA
NORDITROPIN 15MG/1.5ML PEN INJ	4	NDS PA
NORDITROPIN 30MG/3ML PEN INJ	4	NDS PA
NORDITROPIN 5MG/1.5ML PEN INJ	4	NDS PA
OMNITROPE 10MG/1.5ML CARTRIDGE	4	NDS PA
OMNITROPE 5.8MG INJ	4	NDS PA
OMNITROPE 5MG/1.5ML CARTRIDGE	4	NDS PA
SOGROYA 10MG/1.5ML PEN INJ	4	NDS PA
SOGROYA 15MG/1.5ML PEN INJ	4	NDS PA
SOGROYA 5MG/1.5ML PEN INJ	4	NDS PA
METABOLIC MODIFIERS		
<i>betaine 1000mg powder for oral soln</i>	1	
<i>calcitriol 0.25mcg cap</i>	1	
<i>calcitriol 0.5mcg cap</i>	1	
<i>calcitriol 1mcg/ml oral soln</i>	1	
<i>carglumic acid 200mg tab</i>	1	PA
<i>cinacalcet 30mg tab</i>	2	QL=60 Quantity/30 Days
<i>cinacalcet 60mg tab</i>	2	QL=60 Quantity/30 Days
<i>cinacalcet 90mg tab</i>	2	QL=120 Quantity/30 Days
<i>levocarnitine 100mg/ml oral soln</i>	1	
<i>levocarnitine 330mg tab</i>	1	
<i>paricalcitol 1mcg cap</i>	2	
<i>paricalcitol 2mcg cap</i>	2	
<i>paricalcitol 4mcg cap</i>	2	
<i>sapropterin 100mg powder for oral soln</i>	1	PA
<i>sapropterin 500mg powder for oral soln</i>	1	PA
<i>sapropterin dihydrochloride 100mg tab</i>	1	PA
<i>sodium phenylbutyrate 0.94mg/mg oral powder</i>	2	
SOMATOSTATIC AGENTS		
<i>octreotide 0.05mg/ml inj</i>	1	PA
<i>octreotide 0.1mg/ml inj</i>	1	PA
<i>octreotide 0.2mg/ml inj</i>	1	PA
<i>octreotide 0.5mg/ml inj</i>	1	PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>octreotide 1mg/ml inj</i>	1	PA
SIGNIFOR 0.3MG/ML INJ	4	LD NDS PA QL=60 Quantity/30 Days
SIGNIFOR 0.6MG/ML INJ	4	LD NDS PA QL=60 Quantity/30 Days
SIGNIFOR 0.9MG/ML INJ	4	LD NDS PA QL=60 Quantity/30 Days
ENDOCRINE MEDICATIONS		
OTHER ENDOCRINE DRUGS		
<i>cabergoline 0.5mg tab</i>	1	
<i>desmopressin 0.01% nasal spray</i>	2	
<i>desmopressin acetate 0.01mg/act nasal spray</i>	2	
<i>desmopressin acetate 0.1mg tab</i>	2	
<i>desmopressin acetate 0.2mg tab</i>	2	
INCRELEX 40MG/4ML INJ	4	LD NDS PA
KERENDIA 10MG TAB	2	PA QL=30 Quantity/30 Days
KERENDIA 20MG TAB	2	PA QL=30 Quantity/30 Days
SOMAVERT 10MG INJ	4	LD NDS PA QL=60 Quantity/30 Days
SOMAVERT 15MG INJ	4	LD NDS PA QL=60 Quantity/30 Days
SOMAVERT 20MG INJ	4	LD NDS PA QL=60 Quantity/30 Days
SOMAVERT 25MG INJ	4	LD NDS PA QL=30 Quantity/30 Days
SOMAVERT 30MG INJ	4	LD NDS PA QL=30 Quantity/30 Days
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>altavera 28 day pack</i>	\$0	
<i>amabelz 0.5/0.1mg 28 day pack</i>	1	
<i>apri 28 day pack</i>	\$0	
<i>aranelle 28 pack</i>	\$0	
<i>ashlyna 91 day pack</i>	\$0	
<i>briellyn 28 day pack</i>	\$0	
<i>camreselo 91 day pack</i>	\$0	
<i>cyclafem 7/7/7 28 day pack</i>	\$0	
<i>desogestrel/ethinyl estradiol pack</i>	\$0	
<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	\$0	
<i>estarylla 28 day pack</i>	\$0	
<i>estradiol/norethindrone acetate 1-0.5mg 28-day pack</i>	1	
<i>ethinyl estradiol 0.02mg/inert ingredients 1mg/levonorgestrel 0.1mg pack</i>	\$0	
<i>ethinyl estradiol 0.035mg/ethynodiol 1mg 28 day pack</i>	\$0	
<i>ethinyl estradiol 0.035mg/inert/norgestimate 0.18mg/0.215mg/0.25mg pack</i>	\$0	
<i>ethinyl estradiol 0.03mg/inert ingredients 1mg/levonorgestrel 0.15mg pack</i>	\$0	
<i>ethinyl estradiol 0.05mg/ethynodiol 1mg/inert ingredients 1mg 28 day pack</i>	\$0	
<i>ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg 21 day pack</i>	\$0	
<i>fyavolv 0.0025-0.5mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fyavolv 0.005-1mg tab</i>	1	
<i>jasmiel 28 day pack</i>	\$0	
<i>junel fe 1.5/30 28 day pack</i>	\$0	
<i>larin 1.5/30 pack</i>	\$0	
<i>larin 1/20 pack</i>	\$0	
<i>low-ogestrel 28 day pack</i>	\$0	
<i>melodetta 24 fe chewable 28 day pack</i>	\$0	
<i>microgestin fe 1/20 28 day pack</i>	\$0	
<i>nortrel 0.5/35 28 day pack</i>	\$0	
<i>ocella 28 day pack</i>	\$0	
<i>pirmella 1/35 28 day pack</i>	\$0	
PREMPHASE 28 DAY PACK	2	
PREMPRO 0.3/1.5MG 28 DAY PACK	2	
PREMPRO 0.45/1.5 28 DAY PACK	2	
PREMPRO 0.625/2.5MG 28 DAY PACK	2	
PREMPRO 0.625/5MG 28 DAY PACK	2	
<i>tarina 24 fe 1/20 28 day pack</i>	\$0	
<i>tri-lo-sprintec 28 day pack</i>	\$0	
<i>trivora 28 day pack</i>	\$0	
VELIVET 28 DAY PAK	\$0	
<i>xulane 150-35mcg/24hr patch</i>	\$0	
<i>esterified estrogens/methyltestosterone tab</i>	1*	
ESTROGENS		
<i>estradiol 0.025mg/24hr twice weekly patch</i>	1	QL=8 Quantity/28 Days
<i>estradiol 0.025mg/24hr weekly patch</i>	1	QL=4 Quantity/28 Days
<i>estradiol 0.0375mg/24hr twice weekly patch</i>	1	QL=8 Quantity/28 Days
<i>estradiol 0.0375mg/24hr weekly patch</i>	1	QL=4 Quantity/28 Days
<i>estradiol 0.05mg/24hr twice weekly patch</i>	1	QL=8 Quantity/28 Days
<i>estradiol 0.05mg/24hr weekly patch</i>	1	QL=4 Quantity/28 Days
<i>estradiol 0.06mg/24hr weekly patch</i>	1	QL=4 Quantity/28 Days
<i>estradiol 0.075mg/24hr twice weekly patch</i>	1	QL=8 Quantity/28 Days
<i>estradiol 0.075mg/24hr weekly patch</i>	1	QL=4 Quantity/28 Days
<i>estradiol 0.1mg/24hr twice weekly patch</i>	1	QL=8 Quantity/28 Days
<i>estradiol 0.1mg/24hr weekly patch</i>	1	QL=4 Quantity/28 Days
<i>estradiol 0.5mg tab</i>	1	
<i>estradiol 1mg tab</i>	1	
<i>estradiol 2mg tab</i>	1	
<i>estradiol valerate 10mg/ml inj</i>	2	
<i>estradiol valerate 20mg/ml inj</i>	2	
<i>estradiol valerate 40mg/ml inj</i>	2	
PREMARIN 0.3MG TAB	2	
PREMARIN 0.45MG TAB	2	
PREMARIN 0.625MG TAB	2	
PREMARIN 0.9MG TAB	2	
PREMARIN 1.25MG TAB	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FLUOROQUINOLONES		
FLUOROQUINOLONES		
<i>ciprofloxacin 250mg tab</i>	1	
<i>ciprofloxacin 2mg/ml inj</i>	2	
<i>ciprofloxacin 500mg tab</i>	1	
<i>ciprofloxacin 750mg tab</i>	1	
<i>ciprofloxacin/d5w 400mg/200ml inj</i>	2	
<i>levofloxacin 250mg tab</i>	1	
<i>levofloxacin 25mg/ml oral soln</i>	2	
<i>levofloxacin 500mg tab</i>	1	
<i>levofloxacin 5mg/ml (100ml) inj</i>	2	
<i>levofloxacin 5mg/ml (150ml) inj</i>	2	
<i>levofloxacin 750mg tab</i>	1	
<i>levofloxacin/D5W 250mg/50ml inj</i>	2	
MOXIFLOXACIN 1.6MG/ML INJ	2	
<i>moxifloxacin 400mg tab</i>	2	
MOXIFLOXACIN 400MG/250ML IV SOLN	2	
GASTROINTESTINAL AGENTS		
GASTROINTESTINAL AGENTS, OTHER		
<i>cromolyn sodium 20mg/ml oral soln</i>	2	
<i>enulose 10gm/15ml oral soln</i>	1	
GATTEX 5MG INJ	4	NDS PA
<i>metoclopramide 10mg tab</i>	1	
<i>metoclopramide 1mg/ml oral soln</i>	1	
<i>metoclopramide 5mg tab</i>	1	
<i>ursodiol 250mg tab</i>	1	
<i>ursodiol 300mg cap</i>	1	
<i>ursodiol 500mg tab</i>	1	
VOWST 30000000UNIT CAP	4	LD NDS PA QL=12 Quantity/30 Days
GASTROINTESTINAL AGENTS - MISC.		
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium 750mg cap</i>	1	
<i>mesalamine 1000mg rectal supp</i>	2	QL=30 Quantity/30 Days
<i>mesalamine 1200mg dr tab</i>	2	QL=120 Quantity/30 Days
<i>mesalamine 375mg er cap</i>	2	QL=120 Quantity/30 Days
<i>mesalamine 400mg dr cap</i>	2	QL=180 Quantity/30 Days
<i>mesalamine 66.7mg/ml enema</i>	2	QL=1800 Quantity/30 Days
SKYRIZI 180MG/1.2ML CARTRIDGE	4	PA QL=1 Quantity/56 Days
SKYRIZI 360MG/2.4ML CARTRIDGE	4	PA QL=1 Quantity/56 Days
<i>sulfasalazine 500mg dr tab</i>	1	
<i>sulfasalazine 500mg tab</i>	1	
GENITOURINARY AGENTS		
GENITOURINARY AGENTS, OTHER		
CYSTAGON 150MG CAP	2	
CYSTAGON 50MG CAP	2	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ELMIRON 100MG CAP	2	QL=90 Quantity/30 Days
<i>phenazopyridine 100mg tab</i>	1	
<i>phenazopyridine 200mg tab</i>	1	
<i>potassium citrate 10meq er tab</i>	2	
<i>potassium citrate 15meq er tab</i>	2	
<i>potassium citrate 5meq er tab</i>	2	
<i>sodium chloride 0.154meq/ml soln</i>	2	
CYTRA K CRYSTALS	1*	
ORACIT SOLN	1*	
<i>potassium citrate/citric acid soln</i>	1*	
<i>sodium citrate/citric acid soln</i>	1*	
<i>tricitrates soln</i>	1*	
GENITOURINARY AGENTS - MISCELLANEOUS		
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	1	
<i>dutasteride 0.5mg cap</i>	1	
<i>finasteride 5mg tab</i>	1	
<i>silodosin 4mg cap</i>	1	
<i>silodosin 8mg cap</i>	1	
<i>tadalafil 2.5mg tab</i>	2	PA QL=30 Quantity/30 Days
<i>tadalafil 5mg tab</i>	2	PA QL=30 Quantity/30 Days
<i>tamsulosin 0.4mg cap</i>	1	
GOUT AGENTS		
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	1	
<i>allopurinol 300mg tab</i>	1	
<i>colchicine 0.6mg tab</i>	2	
<i>colchicine/probenecid 0.5-500mg tab</i>	1	
<i>febuxostat 40mg tab</i>	2	ST RXC
<i>febuxostat 80mg tab</i>	2	ST RXC
<i>probenecid 500mg tab</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide 0.5mg cap</i>	1	
<i>anagrelide 1mg cap</i>	1	
<i>aspirin 25mg/dipyridamole 200mg er cap</i>	2	QL=60 Quantity/30 Days
BRILINTA 60MG TAB	2	QL=60 Quantity/30 Days
BRILINTA 90MG TAB	2	QL=60 Quantity/30 Days
<i>cilostazol 100mg tab</i>	1	
<i>cilostazol 50mg tab</i>	1	
<i>clopidogrel 75mg tab</i>	1	
<i>dipyridamole 25mg tab</i>	1	
<i>dipyridamole 50mg tab</i>	1	
<i>dipyridamole 75mg tab</i>	1	
<i>prasugrel 10mg tab</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>prasugrel 5mg tab</i>	1	
HEMATOPOIETIC AGENTS		
AGENTS FOR SICKLE CELL DISEASE		
DROXIA 200MG CAP	2	
DROXIA 300MG CAP	2	
DROXIA 400MG CAP	2	
<i>l-glutamine 5gm powder for oral soln</i>	1	PA QL=180 Quantity/30 Days
OXBRYTA 300MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
OXBRYTA 300MG TAB FOR ORAL SUSP	4	LD NDS PA QL=150 Quantity/30 Days
OXBRYTA 500MG TAB	4	LD NDS PA QL=150 Quantity/30 Days
COBALAMINS		
<i>cyanocobalamin inj</i>	1*	
FOLIC ACID/FOLATES		
<i>folic acid tab 1mg</i>	1*	
<i>folic acid tab 400mcg</i>	1*	
<i>folic acid tab 800mcg</i>	1*	
HEMATOPOIETIC GROWTH FACTORS		
DOPTELET 20MG TAB	4	LD NDS PA QL=60 Quantity/30 Days
DOPTELET TAB 40MG DAILY DOSE PACK	4	LD NDS PA QL=1 Quantity/5 Days
DOPTELET TAB 60MG DAILY DOSE PACK	4	LD NDS PA QL=1 Quantity/5 Days
NIVESTYM 300MCG/0.5ML SYRINGE	4	NDS
NIVESTYM 300MCG/ML INJ	4	NDS
NIVESTYM 480MCG/0.8ML SYRINGE	4	NDS
NIVESTYM 480MCG/1.6ML INJ	4	NDS
NYVEPRIA 6MG/0.6ML SYRINGE	4	NDS
PROMACTA 12.5MG POWDER FOR ORAL SUSP	4	NDS PA QL=90 Quantity/30 Days
PROMACTA 12.5MG TAB	4	NDS PA QL=30 Quantity/30 Days
PROMACTA 25MG POWDER FOR ORAL SUSP	4	NDS PA QL=180 Quantity/30 Days
PROMACTA 25MG TAB	4	NDS PA QL=30 Quantity/30 Days
PROMACTA 50MG TAB	4	NDS PA QL=60 Quantity/30 Days
PROMACTA 75MG TAB	4	NDS PA QL=60 Quantity/30 Days
RETACRIT 20000UNIT/2ML INJ	2	PA
RETACRIT 20000UNIT/ML INJ	2	PA
RETACRIT 2000UNIT/ML INJ	2	PA
RETACRIT 3000UNIT/ML INJ	2	PA
RETACRIT 40000UNIT/ML INJ	2	PA
STIMUFEND 6MG/0.6ML SYRINGE	4	NDS
HEMATOPOIETIC MIXTURES		
<i>ferrex forte cap</i>	1*	
<i>folbee tab</i>	1*	
MULTIGEN FOLIC TAB	1*	
MULTIGEN PLUS TAB	1*	
MULTIGEN TAB	1*	
<i>tricon cap</i>	1*	
HEMOSTATICS		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
HEMOSTATICS - SYSTEMIC		
<i>tranexamic acid 650mg tab</i>	2	QL=30 Quantity/5 Days
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
NON-BARBITURATE HYPNOTICS		
<i>eszopiclone 1mg tab</i>	1	QL=30 Quantity/30 Days
<i>eszopiclone 2mg tab</i>	1	QL=30 Quantity/30 Days
<i>eszopiclone 3mg tab</i>	1	QL=30 Quantity/30 Days
<i>ramelteon 8mg tab</i>	2	QL=30 Quantity/30 Days
<i>temazepam 15mg cap</i>	1	QL=30 Quantity/30 Days
<i>temazepam 30mg cap</i>	1	QL=30 Quantity/30 Days
<i>triazolam 0.125mg tab</i>	2	QL=30 Quantity/30 Days
<i>triazolam 0.25mg tab</i>	2	QL=60 Quantity/30 Days
<i>zaleplon 10mg cap</i>	1	QL=30 Quantity/30 Days
<i>zaleplon 5mg cap</i>	1	QL=30 Quantity/30 Days
<i>zolpidem tartrate 10mg tab</i>	1	QL=30 Quantity/30 Days
<i>zolpidem tartrate 12.5mg er tab</i>	2	QL=30 Quantity/30 Days
<i>zolpidem tartrate 5mg tab</i>	1	QL=60 Quantity/30 Days
<i>zolpidem tartrate 6.25mg er tab</i>	2	QL=30 Quantity/30 Days
IMMUNOLOGICAL AGENTS		
ANGIOEDEMA (HAE) AGENTS		
BERINERT 500UNIT INJ	4	LD NDS PA
HAEGARDA 2000UNIT INJ	4	LD NDS PA
HAEGARDA 3000UNIT INJ	4	LD NDS PA
<i>icatibant 10mg/ml inj</i>	1	PA QL=9 Quantity/30 Days
TAKHZYRO 300MG/2ML INJ	4	LD NDS PA QL=2 Quantity/28 Days
TAKHZYRO 300MG/2ML SYRINGE	4	LD NDS PA QL=2 Quantity/28 Days
LAXATIVES		
LAXATIVE COMBINATIONS		
GAVILYTE-C ORAL SOLN	\$0	
<i>gavilyte-g powder for oral soln</i>	\$0	
<i>gavilyte-n powder for oral soln</i>	\$0	
<i>peg 3350 powder for oral soln (100gm Moviprep equiv)</i>	\$0	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6gm/177ml prep kit</i>	\$0	
SUFLAVE SOLN PACK	2	
LAXATIVES - MISCELLANEOUS		
<i>constulose 10gm/15ml oral soln</i>	1	
LINZESS 145MCG CAP	2	QL=30 Quantity/30 Days
LINZESS 290MCG CAP	2	QL=30 Quantity/30 Days
LINZESS 72MCG CAP	2	QL=30 Quantity/30 Days
<i>lubiprostone 24mcg cap</i>	2	QL=60 Quantity/30 Days
<i>lubiprostone 8mcg cap</i>	2	QL=60 Quantity/30 Days
MOVANTIK 12.5MG TAB	2	PA QL=30 Quantity/30 Days
MOVANTIK 25MG TAB	2	PA QL=30 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
TRULANCE 3MG TAB	2	QL=30 Quantity/30 Days
MEDICAL DEVICES AND SUPPLIES		
BANDAGES-DRESSINGS-TAPE		
GAUZE PADS DRESSINGS - PADS 2 X 2	2	
DIABETIC SUPPLIES		
OMNIPOD 5 G6 INTRO KIT	2	QL=1 Quantity/365 Days
OMNIPOD 5 G6 PODS	2	QL=10 Quantity/30 Days
OMNIPOD 5 G7 INTRO KIT	2	QL=1 Quantity/365 Days
OMNIPOD 5 G7 PODS	2	QL=10 Quantity/30 Days
OMNIPOD 5 INTRO KIT	2	QL=1 Quantity/365 Days
OMNIPOD 5 PACK PODS	2	QL=10 Quantity/30 Days
OMNIPOD DASH INTRO KIT	2	QL=1 Quantity/365 Days
OMNIPOD DASH PODS	2	QL=10 Quantity/30 Days
OMNIPOD GO KIT	2	QL=10 Quantity/30 Days
OMNIPOD STARTER KIT	2	QL=1 Quantity/365 Days
V-GO INJ KIT	2	QL=30 Quantity/30 Days
ACCU-CHEK AVIVA PLUS METER	\$0*	
ACCU-CHEK GUIDE CARE METER	\$0*	
ACCU-CHEK GUIDE ME KIT	\$0*	
CALIBRATION LIQUID	\$0*	
DEXCOM G6 RECEIVER	\$0*	
DEXCOM G6 SENSOR	\$0*	
DEXCOM G6 TRANSMITTER	\$0*	
DEXCOM G7 RECEIVER	\$0*	
DEXCOM G7 SENSOR	\$0*	
FREESTYLE LIBRE 2 RECEIVER	\$0*	
FREESTYLE LIBRE 2 SENSOR	\$0*	
FREESTYLE LIBRE 3 READER	\$0*	
FREESTYLE LIBRE 3 SENSOR	\$0*	
FREESTYLE LIBRE RECEIVER	\$0*	
FREESTYLE LIBRE SENSOR (14-DAY)	\$0*	
LANCET DEVICE	\$0*	
LANCET KIT	\$0*	
LANCETS	\$0*	
ONETOUCH METER	\$0*	
ONETOUCH VERIO FLEX METER	\$0*	
ONETOUCH VERIO REFLECT METER	\$0*	
TRUE METRIX KIT METER	\$0*	
MISC. DEVICES		
ALCOHOL SWAB 1"x1" (DIABETIC)	\$0	
<i>alcohol swab 1"x1" (diabetic)</i>	\$0	
PARENTERAL THERAPY SUPPLIES		
INSULIN SYRINGE	2	
INSULIN SYRINGE U-500	2	
PEN NEEDLE	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
MIGRAINE PRODUCTS		
MIGRAINE PRODUCTS		
AJOVY 225MG/1.5ML AUTO-INJECTOR	2	PA QL=1 Quantity/30 Days
AJOVY 225MG/1.5ML SYRINGE	2	PA QL=1 Quantity/30 Days
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	2	PA QL=16 Quantity/30 Days
EMGALITY 100MG/ML INJ	2	PA QL=3 Quantity/30 Days
EMGALITY 120MG/ML AUTO-INJECTOR	2	PA QL=2 Quantity/30 Days
EMGALITY 120MG/ML INJ	2	PA QL=2 Quantity/30 Days
UBRELVY 100MG TAB	2	PA QL=16 Quantity/30 Days
UBRELVY 50MG TAB	2	PA QL=16 Quantity/30 Days
ZAVZPRET 10MG/ACT NASAL SPRAY	2	PA QL=6 Quantity/30 Days
SEROTONIN AGONISTS		
<i>naratriptan 1mg tab</i>	2	QL=18 Quantity/30 Days
<i>naratriptan 2.5mg tab</i>	2	QL=18 Quantity/30 Days
<i>rizatriptan 10mg odt</i>	1	QL=36 Quantity/60 Days
<i>rizatriptan 10mg tab</i>	1	QL=36 Quantity/60 Days
<i>rizatriptan 5mg odt</i>	1	QL=36 Quantity/60 Days
<i>rizatriptan 5mg tab</i>	1	QL=36 Quantity/60 Days
<i>sumatriptan 100mg tab</i>	1	QL=18 Quantity/30 Days
<i>sumatriptan 12mg/ml auto-injector</i>	2	QL=10 Quantity/30 Days
<i>sumatriptan 12mg/ml inj</i>	2	QL=10 Quantity/30 Days
<i>sumatriptan 20mg/act nasal spray</i>	2	QL=12 Quantity/30 Days
<i>sumatriptan 25mg tab</i>	1	QL=18 Quantity/30 Days
<i>sumatriptan 50mg tab</i>	1	QL=18 Quantity/30 Days
<i>sumatriptan 5mg/act nasal spray</i>	2	QL=12 Quantity/30 Days
SUMATRIPTAN 6MG/0.5ML REFILL INJ	2	QL=10 Quantity/30 Days
<i>sumatriptan 8mg/ml cartridge</i>	2	QL=10 Quantity/30 Days
SUMATRIPTAN INJ 4MG/0.5ML REFILL INJ	2	QL=10 Quantity/30 Days
<i>zolmitriptan 2.5mg tab</i>	2	QL=18 Quantity/30 Days
<i>zolmitriptan 5mg tab</i>	2	QL=18 Quantity/30 Days
MINERALS & ELECTROLYTES		
ELECTROLYTE MIXTURES		
<i>d2.5w/nacl 0.45% inj</i>	2	
<i>d5w/nacl 5%-0.33% inj</i>	2	
D5W/NACL 5%-0.33% INJ	2	
DEXTROSE 10% W/ SODIUM CHLORIDE 0.2%	2	PA_BvD
DEXTROSE 10% W/ SODIUM CHLORIDE 0.45%	2	PA_BvD
DEXTROSE/SODIUM CHLORIDE 5-0.225% INJ	2	
<i>dextrose/sodium chloride 5%-0.225% inj</i>	2	
ELECTROLYTE-148 SOLUTION	2	
<i>electrolyte-a solution</i>	2	
GLUCOSE 25MG/ML/SODIUM CHLORIDE 0.0769 MEQ/ML INJ	2	
<i>glucose 50 mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>glucose 50mg/ml/potassium chloride 0.01 meq/ml/sodium chloride 0.0769 meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02 meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02 meq/ml/sodium chloride 0.0342 meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02 meq/ml/sodium chloride 0.154 meq/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.02 meq/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/potassium chloride 0.03 meq/ml/sodium chloride 0.0769 meq/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 0.0342 meq/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	2	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	2	
<i>KCL 20 MEQ/L (0.15%) IN NACL 0.45% INJ</i>	2	
<i>KCL 20 MEQ/L (0.15%) IN NACL 0.9% INJ</i>	2	
<i>kcl 40 meq/l (0.3%) in dextrose 5% nacl 0.9% inj</i>	2	
<i>KCL 40 MEQ/L (0.3%) IN DEXTROSE 5% NACL 0.9% INJ</i>	2	
<i>KCL 40 MEQ/L (0.3%) IN NACL 0.9% INJ</i>	2	
<i>KCL/D5W/LR 0.15% INJ</i>	2	
<i>kcl/d5w/nacl 20meq/5%/0.225% inj</i>	2	
<i>KCL/D5W/NACL 20MEQ/5%/0.225% INJ</i>	2	
<i>KCL/NACL 20MEQ-0.45% INJ</i>	2	
<i>kcl/nacl 40meq/0.9% inj</i>	2	
<i>KCL/NACL INJ 0.02 MEQ/ML/SODIUM CHLORIDE 0.154 MEQ/ML INJ</i>	2	
<i>KCL/NACL INJ 40 MEQ/0.9% INJ</i>	2	
<i>PLASMA-LYTE 148 INJ</i>	2	
<i>PLASMALYTE A INJ</i>	2	
<i>potassium chloride 0.02 meq/ml/sodium chloride 0.0769 meq/ml inj</i>	2	
<i>potassium chloride 0.02 meq/ml/sodium chloride 0.154 meq/ml inj</i>	2	
<i>TPN ELECTROLYTES INJ</i>	2	PA_BvD
MAGNESIUM		
<i>magnesium sulfate 500mg/ml inj</i>	2	
PHOSPHATE		
<i>K-PHOS 500MG TAB</i>	2	
<i>potassium phosphate monobasic 500mg tab</i>	2	
<i>phospha 250 neutral tab</i>	1*	
POTASSIUM		
<i>klor-con 10meq er tab</i>	1	
<i>klor-con 10meq micro er tab</i>	1	
<i>klor-con 20meq powder for oral soln</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>klor-con 8meq er tab</i>	1	
<i>potassium bicarbonate 25meq effer tab</i>	1	
<i>potassium chloride 1.33meq/ml oral soln</i>	2	
<i>potassium chloride 10meq ER cap</i>	1	
<i>potassium chloride 10meq inj</i>	2	
POTASSIUM CHLORIDE 10MEQ INJ	2	
POTASSIUM CHLORIDE 10MEQ/50ML INJ	2	
<i>potassium chloride 10meq/50ml inj</i>	2	
<i>potassium chloride 15meq micro tab</i>	1	
<i>potassium chloride 2.67meq/ml oral soln</i>	2	
<i>potassium chloride 20meq er tab</i>	1	
<i>potassium chloride 20meq inj</i>	2	
<i>potassium chloride 20meq micro er tab</i>	1	
POTASSIUM CHLORIDE 20MEQ/100ML INJ	2	
<i>potassium chloride 20meq/100ml inj</i>	2	
<i>potassium chloride 2meq/ml (20ml) inj</i>	2	
<i>potassium chloride 40meq inj</i>	2	
POTASSIUM CHLORIDE 40MEQ INJ	2	
<i>potassium chloride 8meq er cap</i>	1	
POTASSIUM CHLORIDE 8MEQ ER TAB	1	
SODIUM		
<i>sodium chloride 2.5meq/ml inj</i>	2	
<i>sodium chloride 23.4% inj</i>	2	
<i>sodium chloride 30mg/ml inj</i>	2	
<i>sodium chloride 4.5mg/ml inj</i>	2	
<i>sodium chloride 50mg/ml inj</i>	2	
<i>sodium chloride 9mg/ml inj</i>	2	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
CHEMET 100MG CAP	2	
<i>deferasirox 180mg tab</i>	1	PA
<i>deferasirox 360mg tab</i>	1	PA
<i>deferasirox 90mg tab</i>	1	PA
<i>penicillamine 250mg tab</i>	2	
<i>trientine 250mg cap</i>	1	PA QL=240 Quantity/30 Days
IMMUNOMODULATORS		
<i>lenalidomide 10mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>lenalidomide 15mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>lenalidomide 2.5mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>lenalidomide 20mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>lenalidomide 25mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
<i>lenalidomide 5mg cap</i>	1	PA_NSO QL=30 Quantity/30 Days
REZUROCK 200MG TAB	4	LD NDS PA QL=30 Quantity/30 Days
THALOMID 100MG CAP	4	NDS QL=30 Quantity/30 Days
THALOMID 150MG CAP	4	NDS QL=60 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
THALOMID 200MG CAP	4	NDS QL=60 Quantity/30 Days
THALOMID 50MG CAP	4	NDS QL=30 Quantity/30 Days
IMMUNOSUPPRESSIVE AGENTS		
ARCALYST 220MG INJ	4	NDS PA
<i>azathioprine 50mg tab</i>	1	PA_BvD
BENLYSTA 200MG/ML AUTO-INJECTOR	4	NDS PA QL=4 Quantity/28 Days
BENLYSTA 200MG/ML SYRINGE	4	NDS PA QL=4 Quantity/28 Days
<i>cyclosporine 100mg cap</i>	2	PA_BvD
<i>cyclosporine 25mg cap</i>	2	PA_BvD
<i>cyclosporine modified 100mg cap</i>	2	PA_BvD
<i>cyclosporine modified 100mg/ml oral soln</i>	2	PA_BvD
<i>cyclosporine modified 25mg cap</i>	2	PA_BvD
<i>cyclosporine modified 50mg cap</i>	2	PA_BvD
ENVARUSUS 0.75MG ER TAB	3	PA_BvD
ENVARUSUS 1MG ER TAB	3	PA_BvD
ENVARUSUS 4MG ER TAB	3	PA_BvD
<i>everolimus 0.25mg tab</i>	2	PA_BvD QL=60 Quantity/30 Days
<i>everolimus 0.5mg tab</i>	2	PA_BvD QL=120 Quantity/30 Days
<i>everolimus 0.75mg tab</i>	2	PA_BvD QL=60 Quantity/30 Days
<i>everolimus 1mg tab</i>	2	PA_BvD QL=60 Quantity/30 Days
LITFULO 50MG CAP	4	LD NDS PA QL=28 Quantity/28 Days
LUPKYNIS 7.9MG CAP	4	LD NDS PA QL=180 Quantity/30 Days
<i>mycophenolate mofetil 200mg/ml susp</i>	2	PA_BvD
<i>mycophenolate mofetil 250mg cap</i>	1	PA_BvD
<i>mycophenolate mofetil 500mg tab</i>	1	PA_BvD
<i>mycophenolic acid 180mg dr tab</i>	2	PA_BvD
<i>mycophenolic acid 360mg dr tab</i>	2	PA_BvD
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	3	PA_BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	3	PA_BvD
<i>sirolimus 0.5mg tab</i>	2	PA_BvD
<i>sirolimus 1mg tab</i>	2	PA_BvD
<i>sirolimus 1mg/ml oral soln</i>	2	PA_BvD
<i>sirolimus 2mg tab</i>	2	PA_BvD
<i>tacrolimus 0.5mg cap</i>	1	PA_BvD
<i>tacrolimus 1mg cap</i>	1	PA_BvD
<i>tacrolimus 5mg cap</i>	1	PA_BvD
POTASSIUM REMOVING AGENTS		
LOKELMA 10GM POWDER FOR ORAL SUSP	2	PA QL=90 Quantity/30 Days
LOKELMA 5GM POWDER FOR ORAL SUSP	2	PA QL=30 Quantity/30 Days
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	2	
<i>sodium polystyrene sulfonate 15gm/60ml oral susp</i>	2	
VELTASSA 16.8GM POWDER FOR ORAL SUSP	2	PA QL=30 Quantity/30 Days
VELTASSA 25.2GM POWDER FOR ORAL SUSP	2	PA QL=30 Quantity/30 Days
VELTASSA 8.4GM POWDER FOR ORAL SUSP	2	PA QL=30 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MOUTH/THROAT/DENTAL AGENTS		
DENTAL PRODUCTS		
PREVIDENT 0.2% RINSE	2	
MULTIVITAMINS		
B-COMPLEX W/ FOLIC ACID		
DIALYVITE TAB	1*	
<i>dialyvite tab</i>	1*	
DIALYVITE/ZINC TAB	1*	
FOLBEE PLUS CZ TAB	1*	
<i>renaphro cap</i>	1*	
MULTIPLE VITAMINS W/ MINERALS		
<i>multivitamin/minerals tab</i>	1*	
V-C FORTE CAP	3*	
<i>v-c forte cap</i>	3*	
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen 10mg tab</i>	1	
<i>baclofen 20mg tab</i>	1	
<i>baclofen 5mg tab</i>	1	
<i>carisoprodol 350mg tab</i>	1	
<i>chlorzoxazone 500mg tab</i>	2	
<i>cyclobenzaprine 10mg tab</i>	1	
<i>cyclobenzaprine 5mg tab</i>	1	
<i>metaxalone 800mg tab</i>	2	
<i>methocarbamol 500mg tab</i>	1	
<i>methocarbamol 750mg tab</i>	1	
<i>orphenadrine citrate 100mg er tab</i>	1	
<i>tizanidine 2mg cap</i>	2	
<i>tizanidine 2mg tab</i>	1	
<i>tizanidine 4mg cap</i>	2	
<i>tizanidine 4mg tab</i>	1	
<i>tizanidine 6mg cap</i>	2	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium 100mg cap</i>	2	
<i>dantrolene sodium 25mg cap</i>	2	
<i>dantrolene sodium 50mg cap</i>	2	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine 0.137mg/act nasal inhaler</i>	1	QL=2 Quantity/30 Days
<i>flunisolide 25mcg/act nasal inhaler</i>	2	QL=2 Quantity/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	1	QL=2 Quantity/30 Days
<i>ipratropium 0.03% nasal spray</i>	1	QL=1 Quantity/30 Days
<i>ipratropium 0.06% nasal spray</i>	1	QL=3 Quantity/30 Days
<i>olopatadine 0.665mg/act nasal inhaler</i>	2	QL=1 Quantity/30 Days
NEUROMUSCULAR AGENTS		

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ALS AGENTS		
RADICAVA 105MG/5ML SUSP	4	LD NDS PA QL=70 Quantity/28 Days
<i>riluzole 50mg tab</i>	2	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI 0.75MG/ML ORAL SOLN	4	LD NDS PA QL=240 Quantity/30 Days
NUTRIENTS		
CARBOHYDRATES		
<i>glucose 100mg/ml inj</i>	2	PA_BvD
<i>glucose 50mg/ml inj</i>	2	
PROTEINS		
CLINIMIX 4.25/10 INJ	2	PA_BvD
CLINIMIX 4.25/5 INJ	2	PA_BvD
CLINIMIX 5/15 INJ	2	PA_BvD
CLINIMIX 5/20 INJ	2	PA_BvD
<i>clinisol 15% inj</i>	2	PA_BvD
PROSOL 20% INJ	3	PA_BvD
TRAVASOL 10% INJ	2	PA_BvD
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPTHALMIC		
BETAXOLOL 0.5% OPTH SOLN	1	
<i>betaxolol 0.5% opth soln</i>	1	
<i>brimonidine tartrate/timolol maleate 0.2-0.5% opth soln</i>	2	
CARTEOLOL 1% OPTH SOLN	1	
<i>dorzolamide/timolol 22.3-6.8mg/ml opth soln</i>	1	
<i>dorzolamide/timolol 22.3-6.8mg/ml opth soln (preservative-free)</i>	1	
LEVOBUNOLOL 0.5% OPTH SOLN	1	
<i>timolol 0.25% opth gel</i>	2	
<i>timolol 0.25% opth soln</i>	1	
<i>timolol 0.5% opth gel</i>	2	
<i>timolol 0.5% opth soln</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
APRACLONIDINE 0.5% OPTH SOLN	2	
<i>apraclonidine 0.5% opth soln</i>	2	
<i>brimonidine 0.1% opth soln</i>	2	
<i>brimonidine tartrate 0.15% opth soln</i>	2	
<i>brimonidine tartrate 0.2% opth soln</i>	1	
SIMBRINZA 0.2-1% OPTH SUSP	2	
OPHTHALMIC ANTI-INFECTIVES		
BACITRACIN 0.5UNIT/MG OPTH OINTMENT	2	
<i>bacitracin/polymyxin B 3.5gm opth ointment</i>	1	QL=7 Quantity/7 Days
<i>ciprofloxacin 0.3% opth soln</i>	1	QL=60 Quantity/30 Days
<i>erythromycin 0.5% opth ointment</i>	1	QL=7 Quantity/7 Days
<i>gentamicin 0.3% opth soln</i>	1	QL=10 Quantity/7 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MOXIFLOXACIN 0.5% OPHTH SOLN	1	QL=2 Quantity/7 Days
<i>moxifloxacin 0.5% ophth soln</i>	1	QL=2 Quantity/7 Days
<i>neomycin/bacitracin/polymyxin ophth ointment</i> <i>5(3.5)mg-400unit-10000unit</i>	1	QL=7 Quantity/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	1	QL=1 Quantity/7 Days
<i>ofloxacin 0.3% ophth soln</i>	1	QL=60 Quantity/30 Days
<i>polymyxin B/trimethoprim 10000unit/ml-0.1% ophth soln</i>	1	QL=1 Quantity/7 Days
<i>sulfacetamide sodium 10% ophth soln</i>	1	QL=15 Quantity/7 Days
<i>tobramycin 0.3% ophth soln</i>	1	QL=12 Quantity/30 Days
TRIFLURIDINE 1% OPHTH SOLN	2	QL=2 Quantity/7 Days
XDEMVIY 0.25% OPHTH SOLN	4	LD PA QL=10 Quantity/42 Days
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA 0.02% OPHTH SOLN	2	QL=2 Quantity/30 Days
ROCKLATAN 0.05-0.2MG/ML OPHTH SOLN	2	QL=2 Quantity/30 Days
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	2	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>	1	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth susp</i>	1	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	1	
<i>difluprednate 0.05% ophth emulsion</i>	2	
<i>fluorometholone 0.1% ophth susp</i>	1	
<i>loteprednol etabonate 0.5% ophth gel</i>	2	
<i>loteprednol etabonate 0.5% ophth susp</i>	2	
<i>neomycin/polymyxin/bacitracin/hydrocortisone 1% ophth ointment</i>	2	
PREDNISOLONE 1% OPHTH SOLN	1	
PREDNISOLONE ACETATE 1% OPHTH SUSP	1	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN	1	
OPHTHALMICS - MISC.		
<i>atropine sulfate 1% ophth soln</i>	2	
ATROPINE SULFATE 1% OPHTH SOLN	2	
<i>azelastine 0.05% ophth soln</i>	1	
<i>cromolyn sodium 4% ophth soln</i>	1	
CROMOLYN SODIUM 4% OPHTH SOLN	1	
<i>cyclosporine 0.05% ophth emulsion</i>	1	QL=60 Quantity/30 Days
CYSTADROPS 0.37% OPHTH SOLN	4	LD NDS PA QL=4 Quantity/28 Days
CYSTARAN 0.44% OPHTH SOLN	4	LD NDS PA QL=60 Quantity/28 Days
<i>diclofenac sodium 0.1% ophth soln</i>	1	QL=20 Quantity/365 Days
<i>dorzolamide 2% ophth soln</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FLURBIPROFEN SODIUM 0.03% OPHTH SOLN	2	
<i>ketorolac tromethamine 0.4% ophth soln</i>	1	QL=20 Quantity/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	1	
<i>pilocarpine 1% ophth soln</i>	1	
<i>pilocarpine 2% ophth soln</i>	1	
<i>pilocarpine 4% ophth soln</i>	1	
XIIDRA 5% OPHTH SOLN	2	QL=60 Quantity/30 Days
HOMATROPINE OPHTH SOLN	2*	
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03% ophth soln</i>	2	QL=5 Quantity/30 Days
<i>latanoprost 0.005% ophth soln</i>	1	QL=5 Quantity/30 Days
LUMIGAN 0.01% OPHTH SOLN	2	QL=5 Quantity/30 Days
<i>travoprost 0.004% ophth soln</i>	2	QL=5 Quantity/30 Days
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2% otic soln</i>	1	
<i>fluocinolone acetonide 0.01% otic soln</i>	2	
<i>ofloxacin 0.3% otic soln</i>	1	
OTIC COMBINATIONS		
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	2	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	1	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
GAMUNEX 1GM/10ML INJ	4	NDS PA
GAMUNEX-C 40GM/400ML INJ	4	NDS PA
OCTAGAM 1GM/20ML INJ	4	NDS PA
OCTAGAM 2.5GM/50ML INJ	4	NDS PA
OCTAGAM 25GM/500ML INJ	4	NDS PA
OCTAGAM 2GM/20ML INJ	4	NDS PA
OCTAGAM 30GM/300ML INJ	4	NDS PA
OCTAGAM 5GM/100ML INJ	4	NDS PA
PRIVIGEN 20GM/200ML INJ	4	NDS PA
PRIVIGEN 40GM/400ML INJ	4	NDS PA
PENICILLINS		
AMINOPENICILLINS		
AMOXICILLIN 125MG CHEW TAB	1	
<i>amoxicillin 250mg cap</i>	1	
AMOXICILLIN 250MG CHEW TAB	1	
<i>amoxicillin 25mg/ml susp</i>	1	
<i>amoxicillin 40mg/ml susp</i>	1	
<i>amoxicillin 500mg cap</i>	1	
<i>amoxicillin 500mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>amoxicillin 50mg/ml susp</i>	1	
AMOXICILLIN 80MG/ML ORAL SUSP	1	
<i>amoxicillin 80mg/ml susp</i>	1	
<i>amoxicillin 875mg tab</i>	1	
<i>ampicillin 1000mg inj</i>	2	
<i>ampicillin 100mg/ml inj</i>	2	
AMPICILLIN 125MG INJ	2	
<i>ampicillin 250mg inj</i>	2	
AMPICILLIN 2GM INJ	2	
<i>ampicillin 2gm inj</i>	2	
<i>ampicillin 500mg cap</i>	1	
<i>ampicillin 500mg inj</i>	2	
AMPICILLIN SODIUM 1GM INJ	2	
NATURAL PENICILLINS		
BICILLIN L-A 1200000UNIT/2ML INJ	2	
BICILLIN L-A 2400000UNIT/4ML INJ	2	
BICILLIN L-A 600000UNIT/ML INJ	2	
<i>penicillin g potassium 1000000unit/ml inj</i>	2	
PENICILLIN G SODIUM 100000UNIT/ML INJ	2	
<i>penicillin gk 5000000unit inj</i>	2	
<i>penicillin v potassium 250mg tab</i>	1	
PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN	1	
<i>penicillin v potassium 500mg tab</i>	1	
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin/clavulanate 120-8.58mg/ml susp</i>	1	
<i>amoxicillin/clavulanate 250-125mg tab</i>	1	
<i>amoxicillin/clavulanate 40-5.7mg/ml susp</i>	1	
<i>amoxicillin/clavulanate 50-12.5mg/ml susp</i>	1	
<i>amoxicillin/clavulanate 500-125mg tab</i>	1	
<i>amoxicillin/clavulanate 80-11.4mg/ml susp</i>	1	
<i>amoxicillin/clavulanate 875-125mg tab</i>	1	
AMPICILLIN/SULBACTAM 1.5GM INJ	2	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	2	
<i>ampicillin/sulbactam 1000-500mg inj</i>	2	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	2	
AMPICILLIN/SULBACTAM 3GM INJ	2	
<i>piperacillin/tazobactam 12-1.5gm inj</i>	2	
<i>piperacillin/tazobactam 200-25mg/ml inj</i>	2	
<i>piperacillin/tazobactam 2000-250mg inj</i>	2	
<i>piperacillin/tazobactam 3000-375mg inj</i>	2	
<i>piperacillin/tazobactam 4000-500mg inj</i>	2	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin 250mg cap</i>	1	
<i>dicloxacillin 500mg cap</i>	1	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>nafcillin 1000mg inj</i>	2	
<i>nafcillin 100mg/ml inj</i>	2	
NAFCILLIN 1GM INJ	2	
<i>nafcillin 2000mg inj</i>	2	
NAFCILLIN 2GM INJ	2	
<i>oxacillin 1000mg inj</i>	2	
<i>oxacillin 100mg/ml inj</i>	2	
<i>oxacillin 2000mg inj</i>	2	
PROGESTINS		
PROGESTINS		
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	\$0	
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	2	
<i>medroxyprogesterone acetate 10mg tab</i>	1	
<i>medroxyprogesterone acetate 150mg/ml inj</i>	\$0	
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	\$0	
<i>medroxyprogesterone acetate 2.5mg tab</i>	1	
<i>medroxyprogesterone acetate 5mg tab</i>	1	
MEGESTROL ACETATE 125MG/ML SUSP	2	PA
NEXPLANON 68MG IMPLANT	2	
<i>norethindrone 0.35mg pack</i>	\$0	
<i>norethindrone acetate 5mg tab</i>	1	
<i>progesterone 100mg cap</i>	1	
<i>progesterone 200mg cap</i>	1	
OPILL TAB	\$0*	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium 333mg dr tab</i>	2	
<i>disulfiram 250mg tab</i>	1	
<i>disulfiram 500mg tab</i>	1	
ANTIDEMENTIA AGENTS		
<i>donepezil 10mg odt</i>	1	QL=30 Quantity/30 Days
<i>donepezil 10mg tab</i>	1	
<i>donepezil 23mg tab</i>	2	QL=30 Quantity/30 Days
<i>donepezil 5mg odt</i>	1	QL=30 Quantity/30 Days
<i>donepezil 5mg tab</i>	1	
<i>galantamine 12mg tab</i>	1	QL=60 Quantity/30 Days
<i>galantamine 4mg tab</i>	1	QL=60 Quantity/30 Days
<i>galantamine 8mg tab</i>	1	QL=60 Quantity/30 Days
<i>galantamine hydrobromide 16mg er cap</i>	2	QL=30 Quantity/30 Days
<i>galantamine hydrobromide 24mg er cap</i>	2	QL=30 Quantity/30 Days
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	2	QL=200 Quantity/30 Days
<i>galantamine hydrobromide 8mg er cap</i>	2	QL=30 Quantity/30 Days
<i>memantine 10mg tab</i>	1	
<i>memantine 14mg er cap</i>	2	QL=30 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>memantine 21mg er cap</i>	2	QL=30 Quantity/30 Days
<i>memantine 28mg er cap</i>	2	QL=30 Quantity/30 Days
<i>memantine 2mg/ml oral soln</i>	2	QL=300 Quantity/30 Days
<i>memantine 5mg tab</i>	1	
<i>memantine 7mg er cap</i>	2	QL=30 Quantity/30 Days
<i>rivastigmine 1.5mg cap</i>	1	QL=60 Quantity/30 Days
<i>rivastigmine 13.3mg/24hr patch</i>	2	QL=30 Quantity/30 Days
<i>rivastigmine 3mg cap</i>	1	QL=60 Quantity/30 Days
<i>rivastigmine 4.5mg cap</i>	1	QL=60 Quantity/30 Days
<i>rivastigmine 4.6mg/24hr patch</i>	2	QL=30 Quantity/30 Days
<i>rivastigmine 6mg cap</i>	1	QL=60 Quantity/30 Days
<i>rivastigmine 9.5mg/24hr patch</i>	2	QL=30 Quantity/30 Days
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12MG TAB	4	NDS PA QL=120 Quantity/30 Days
AUSTEDO 6MG TAB	4	NDS PA QL=120 Quantity/30 Days
AUSTEDO 9MG TAB	4	NDS PA QL=120 Quantity/30 Days
AUSTEDO XR 12MG TAB	4	NDS PA QL=60 Quantity/30 Days
AUSTEDO XR 18MG TAB	4	NDS PA QL=30 Quantity/30 Days
AUSTEDO XR 24MG TAB	4	NDS PA QL=60 Quantity/30 Days
AUSTEDO XR 30MG TAB	4	NDS PA QL=30 Quantity/30 Days
AUSTEDO XR 36MG TAB	4	NDS PA QL=30 Quantity/30 Days
AUSTEDO XR 42MG TAB	4	NDS PA QL=30 Quantity/30 Days
AUSTEDO XR 48MG TAB	4	NDS PA QL=30 Quantity/30 Days
AUSTEDO XR 6MG TAB	4	NDS PA QL=90 Quantity/30 Days
AUSTEDO XR ONCE DAILY 4 WEEK TITRATION PACK	4	NDS PA QL=42 Quantity/28 Days
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATION PACK	4	NDS PA QL=1 Quantity/28 Days
INGREZZA 40MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
INGREZZA 40MG SPRINKLE CAP	4	LD NDS PA QL=30 Quantity/30 Days
INGREZZA 60MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
INGREZZA 60MG SPRINKLE CAP	4	LD NDS PA QL=30 Quantity/30 Days
INGREZZA 80MG CAP	4	LD NDS PA QL=30 Quantity/30 Days
INGREZZA 80MG SPRINKLE CAP	4	LD NDS PA QL=30 Quantity/30 Days
INGREZZA CAP PACK	4	LD NDS PA QL=28 Quantity/28 Days
<i>tetrabenazine 12.5mg tab</i>	1	QL=90 Quantity/30 Days
<i>tetrabenazine 25mg tab</i>	1	QL=120 Quantity/30 Days
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	4	NDS QL=2 Quantity/28 Days
AVONEX 30MCG/0.5ML SYRINGE	4	NDS QL=1 Quantity/28 Days
BETASERON 0.3MG INJ	4	NDS QL=14 Quantity/28 Days
<i>dalfampridine 10mg er tab</i>	1	QL=60 Quantity/30 Days
<i>dimethyl fumarate 120mg dr cap</i>	1	QL=14 Quantity/7 Days
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	1	QL=1 Quantity/180 Days
<i>dimethyl fumarate 240mg dr cap</i>	1	QL=60 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fingolimod 0.5mg cap</i>	1	QL=30 Quantity/30 Days
<i>glatiramer acetate 20mg/ml syringe</i>	1	QL=30 Quantity/30 Days
<i>glatiramer acetate 40mg/ml syringe</i>	1	QL=12 Quantity/28 Days
KESIMPTA 20MG/0.4ML PEN INJ	4	NDS QL=3 Quantity/28 Days
MAYZENT 0.25MG TAB	4	NDS QL=120 Quantity/30 Days
MAYZENT 1MG TAB	4	NDS QL=30 Quantity/30 Days
MAYZENT 2MG TAB	4	NDS QL=30 Quantity/30 Days
MAYZENT TAB STARTER PACK (12)	4	NDS QL=1 Quantity/28 Days
MAYZENT TAB STARTER PACK (7)	2	QL=1 Quantity/28 Days
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	4	NDS QL=2 Quantity/28 Days
PLEGRIDY 125MCG/0.5ML SYRINGE	4	NDS QL=2 Quantity/28 Days
PLEGRIDY IM 125MCG/0.5ML INJ	4	NDS QL=2 Quantity/28 Days
PLEGRIDY INJ STARTER PACK	4	NDS QL=1 Quantity/28 Days
PLEGRIDY PEN STARTER PACK	4	NDS QL=1 Quantity/28 Days
<i>teriflunomide 14mg tab</i>	1	QL=30 Quantity/30 Days
<i>teriflunomide 7mg tab</i>	1	QL=30 Quantity/30 Days
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
NUEDEXTA 20-10MG CAP	2	PA QL=60 Quantity/30 Days
PIMOZIDE 1MG TAB	2	
PIMOZIDE 2MG TAB	2	
SMOKING DETERRENTS		
<i>bupropion 150mg sr tab</i>	\$0	
NICOTROL 10MG INH SOLN	\$0	
NICOTROL 10MG/ML NASAL INHALER	\$0	
<i>varenicline 0.5mg/1mg first month pack</i>	\$0	QL=1 Quantity/28 Days
<i>varenicline tartrate 0.5mg tab</i>	\$0	QL=56 Quantity/28 Days
<i>varenicline tartrate 1mg tab</i>	\$0	QL=56 Quantity/28 Days
<i>nicotine gum</i>	\$0*	
<i>nicotine lozenge</i>	\$0*	
<i>nicotine patch</i>	\$0*	
NICOTINE PATCH KIT	\$0*	
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
PROLASTIN 1000MG INJ, ZEMAIRA 1000MG INJ	4	NDS PA
PROLASTIN-C 1000MG INJ	4	NDS PA
ZEMAIRA 4000MG INJ	4	NDS PA
ZEMAIRA 5000MG INJ	4	NDS PA
CYSTIC FIBROSIS AGENTS		
CAYSTON 75MG INH SOLN	4	LD NDS PA QL=84 Quantity/28 Days
KALYDECO 13.4MG GRANULES	4	LD NDS PA QL=56 Quantity/28 Days
KALYDECO 150MG TAB	4	LD NDS PA QL=60 Quantity/30 Days
KALYDECO 25MG GRANULES	4	LD NDS PA QL=60 Quantity/30 Days
KALYDECO 5.8MG GRANULES	4	LD NDS PA QL=56 Quantity/28 Days
KALYDECO 50MG GRANULES	4	LD NDS PA QL=60 Quantity/30 Days
KALYDECO 75MG GRANULES	4	LD NDS PA QL=60 Quantity/30 Days

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ORKAMBI 125-100MG GRANULES	4	LD NDS PA QL=60 Quantity/30 Days
ORKAMBI 125-100MG TAB	4	LD NDS PA QL=120 Quantity/30 Days
ORKAMBI 125-200MG TAB	4	LD NDS PA QL=120 Quantity/30 Days
ORKAMBI 188-150MG GRANULES	4	LD NDS PA QL=60 Quantity/30 Days
ORKAMBI 94-75MG GRANULES	4	LD NDS PA QL=56 Quantity/28 Days
PULMOZYME 1MG/ML INH SOLN	4	NDS PA_BvD QL=150 Quantity/30 Days
SYMDEKO 50-75MG/75MG PACK	4	LD NDS PA QL=60 Quantity/30 Days
SYMDEKO TAB 4-WEEK PACK	4	LD NDS PA QL=60 Quantity/30 Days
TRIKAFTA 100-50-75MG/150MG PACK	4	LD NDS PA QL=90 Quantity/30 Days
TRIKAFTA 100-50-75MG/75MG GRANULES PACK	4	LD NDS PA QL=56 Quantity/28 Days
TRIKAFTA 50-37.5-25MG/75MG TAB PACK	4	LD NDS PA QL=84 Quantity/28 Days
TRIKAFTA 80-40-60MG/59.5MG GRANULES PACK	4	LD NDS PA QL=56 Quantity/28 Days
PULMONARY FIBROSIS AGENTS		
OFEV 100MG CAP	4	LD NDS PA QL=60 Quantity/30 Days
OFEV 150MG CAP	4	LD NDS PA QL=60 Quantity/30 Days
<i>pirfenidone 267mg cap</i>	1	PA QL=270 Quantity/30 Days
<i>pirfenidone 267mg tab</i>	1	PA QL=270 Quantity/30 Days
<i>pirfenidone 801mg tab</i>	1	PA QL=90 Quantity/30 Days
RESPIRATORY TRACT AGENTS		
ANTI-HISTAMINES		
<i>cyproheptadine 0.4mg/ml oral soln</i>	1	
<i>cyproheptadine 4mg tab</i>	1	
<i>desloratadine 5mg tab</i>	2	
<i>levocetirizine 5mg tab</i>	1	
<i>promethazine 1.25mg/ml oral syrup</i>	1	
<i>promethazine 12.5mg tab</i>	1	
<i>promethazine 25mg tab</i>	1	
<i>promethazine 50mg tab</i>	1	
PULMONARY ANTIHYPERTENSIVES		
ADEMPAS 0.5MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
ADEMPAS 1.5MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
ADEMPAS 1MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
ADEMPAS 2.5MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
ADEMPAS 2MG TAB	4	LD NDS PA QL=90 Quantity/30 Days
<i>ambrisentan 10mg tab</i>	1	PA QL=30 Quantity/30 Days
<i>ambrisentan 5mg tab</i>	1	PA QL=30 Quantity/30 Days
<i>bosentan 125mg tab</i>	1	PA QL=60 Quantity/30 Days
<i>bosentan 62.5mg tab</i>	1	PA QL=60 Quantity/30 Days
OPSUMIT 10MG TAB	4	LD NDS PA QL=30 Quantity/30 Days
<i>sildenafil 20mg tab</i>	1	PA QL=360 Quantity/30 Days
<i>tadalafil 20mg tab (PAH)</i>	1	PA QL=60 Quantity/30 Days
RESPIRATORY TRACT/PULMONARY AGENTS		
PHOSPHODIESTERASE INHIBITORS, AIRWAYS DISEASE		
<i>roflumilast 250mcg tab</i>	1	QL=28 Quantity/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
<i>roflumilast 500mcg tab</i>	1	QL=30 Quantity/30 Days
THEOPHYLLINE 100MG ER TAB	2	
THEOPHYLLINE 200MG ER TAB	2	
<i>theophylline 300mg SR tab</i>	2	
<i>theophylline 400mg er tab</i>	1	
<i>theophylline 450 er tab</i>	2	
<i>theophylline 600mg er tab</i>	1	
SLEEP DISORDER AGENTS		
SLEEP DISORDERS, OTHER		
LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	4	LD NDS PA QL=30 Quantity/30 Days
LUMRYZ 6GM GRANULES FOR ORAL SUSP	4	LD NDS PA QL=30 Quantity/30 Days
LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	4	LD NDS PA QL=30 Quantity/30 Days
LUMRYZ 9GM GRANULES FOR ORAL SUSP	4	LD NDS PA QL=30 Quantity/30 Days
SODIUM OXYBATE 500MG/ML ORAL SOLN, XYREM 500MG/ML ORAL SOLN	4	LD NDS PA QL=540 Quantity/30 Days
SUNOSI 150MG TAB	2	PA QL=30 Quantity/30 Days
SUNOSI 75MG TAB	2	PA QL=30 Quantity/30 Days
SULFONAMIDES		
SULFONAMIDES		
SULFADIAZINE 500MG TAB	2	
<i>sulfamethoxazole/trimethoprim 40-8mg/ml susp</i>	1	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	1	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	1	
TETRACYCLINES		
TETRACYCLINES		
<i>doxy 100mg inj</i>	2	
<i>doxycycline hyclate 100mg cap</i>	1	
<i>doxycycline hyclate 100mg tab</i>	1	
<i>doxycycline hyclate 20mg tab</i>	1	
<i>doxycycline hyclate 50mg cap</i>	1	
<i>doxycycline monohydrate 100mg tab</i>	1	
<i>doxycycline monohydrate 50mg cap</i>	1	
<i>doxycycline monohydrate 50mg tab</i>	1	
<i>doxycycline monohydrate 5mg/ml susp</i>	2	
<i>minocycline 100mg cap</i>	1	
<i>minocycline 50mg cap</i>	1	
<i>minocycline 75mg cap</i>	1	
<i>mondoxyne 100mg cap</i>	1	
<i>tetracycline 250mg cap</i>	2	
<i>tetracycline 500mg cap</i>	2	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole 10mg tab</i>	1	
<i>methimazole 5mg tab</i>	1	
<i>propylthiouracil 50mg tab</i>	1	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
THYROID HORMONES		
ARMOUR THYROID 120MG TAB	1	
ARMOUR THYROID 15MG TAB	1	
ARMOUR THYROID 30MG TAB	1	
ARMOUR THYROID 60MG TAB	1	
ARMOUR THYROID 90MG TAB	1	
<i>levothyroxine 100mcg tab</i>	1	
<i>levothyroxine 112mcg tab</i>	1	
<i>levothyroxine 125mcg tab</i>	1	
<i>levothyroxine 137mcg tab</i>	1	
<i>levothyroxine 150mcg tab</i>	1	
<i>levothyroxine 175mcg tab</i>	1	
<i>levothyroxine 200mcg tab</i>	1	
<i>levothyroxine 25mcg tab</i>	1	
<i>levothyroxine 300mcg tab</i>	1	
<i>levothyroxine 50mcg tab</i>	1	
<i>levothyroxine 75mcg tab</i>	1	
<i>levothyroxine 88mcg tab</i>	1	
<i>liothyronine sodium 25mcg tab</i>	1	
<i>liothyronine sodium 50mcg tab</i>	1	
<i>liothyronine sodium 5mcg tab</i>	1	
SYNTHROID 100MCG TAB	2	
SYNTHROID 112MCG TAB	2	
SYNTHROID 125MCG TAB	2	
SYNTHROID 137MCG TAB	2	
SYNTHROID 150MCG TAB	2	
SYNTHROID 175MCG TAB	2	
SYNTHROID 200MCG TAB	2	
SYNTHROID 25MCG TAB	2	
SYNTHROID 300MCG TAB	2	
SYNTHROID 50MCG TAB	2	
SYNTHROID 75MCG TAB	2	
SYNTHROID 88MCG TAB	2	
THYROID 180MG TAB	1	
THYROID 240MG TAB	1	
THYROID 300MG TAB	1	
THYROID 65MG TAB	1	
TOXOIDS		
TOXOID COMBINATIONS		
ADACEL INJ	\$0	VAC
BOOSTRIX INJ	\$0	VAC
DAPTACEL INJ	\$0	
DIPHThERIA/TETANUS TOXOID INJ	\$0	PA_BvD
INFANRIX INJ	\$0	
KINRIX INJ	\$0	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PEDIARIX INJ	\$0	
PENTACEL INJ	\$0	
QUADRACEL INJ	\$0	
TDVAX 4-4UNIT/ML INJ	\$0	PA_BvD VAC
TENIVAC 4-10UNIT/ML INJ	\$0	PA_BvD VAC
VAXELIS INJ	\$0*	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>dicyclomine 10mg cap</i>	1	
<i>dicyclomine 20mg tab</i>	1	
<i>dicyclomine 2mg/ml oral soln</i>	2	
<i>glycopyrrolate 1mg tab</i>	2	
<i>glycopyrrolate 2mg tab</i>	2	
<i>hyoscyamine sulfate CR tab</i>	1*	
<i>hyoscyamine sulfate elixir</i>	1*	
<i>hyoscyamine sulfate ODT</i>	1*	
<i>hyoscyamine sulfate SL tab</i>	1*	
<i>hyoscyamine sulfate tab</i>	1*	
H-2 ANTAGONISTS		
<i>cimetidine 200mg tab</i>	1	
<i>cimetidine 300mg tab</i>	1	
<i>cimetidine 400mg tab</i>	1	
<i>cimetidine 800mg tab</i>	1	
<i>famotidine 20mg tab</i>	1	
<i>famotidine 40mg tab</i>	1	
MISC. ANTI-ULCER		
<i>misoprostol 100mcg tab</i>	1	
<i>misoprostol 200mcg tab</i>	1	
<i>sucralfate 1000mg tab</i>	1	
<i>sucralfate 100mg/ml susp</i>	2	
PROTON PUMP INHIBITORS		
<i>esomeprazole 20mg dr cap (rx only)</i>	1	
<i>esomeprazole 40mg dr cap</i>	1	
<i>lansoprazole 15mg dr cap</i>	1	
<i>lansoprazole 30mg dr cap</i>	1	
<i>omeprazole 10mg dr cap</i>	1	
<i>omeprazole 20mg dr cap</i>	1	
<i>omeprazole 40mg dr cap</i>	1	
<i>pantoprazole 20mg dr tab</i>	1	
<i>pantoprazole 40mg dr tab</i>	1	
<i>rabeprazole sodium 20mg dr tab</i>	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>darifenacin 15mg er tab</i>	2	
<i>darifenacin 7.5mg er tab</i>	2	

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fesoterodine fumarate 4mg er tab</i>	2	QL=30 Quantity/30 Days
<i>fesoterodine fumarate 8mg er tab</i>	2	QL=30 Quantity/30 Days
<i>oxybutynin chloride 10mg er tab</i>	1	
<i>oxybutynin chloride 15mg er tab</i>	1	
<i>oxybutynin chloride 1mg/ml oral soln</i>	1	
<i>oxybutynin chloride 5mg er tab</i>	1	
<i>oxybutynin chloride 5mg tab</i>	1	
<i>solifenacin succinate 10mg tab</i>	1	
<i>solifenacin succinate 5mg tab</i>	1	
<i>tolterodine tartrate 1mg tab</i>	1	QL=60 Quantity/30 Days
<i>tolterodine tartrate 2mg er cap</i>	2	QL=30 Quantity/30 Days
<i>tolterodine tartrate 2mg tab</i>	1	QL=60 Quantity/30 Days
<i>tolterodine tartrate 4mg er cap</i>	2	QL=30 Quantity/30 Days
<i>tropium chloride 20mg tab</i>	1	QL=60 Quantity/30 Days
<i>tropium chloride 60mg er cap</i>	2	QL=30 Quantity/30 Days
URINARY ANTISPASMODICS		
<i>bethanechol chloride 10mg tab</i>	1	
<i>bethanechol chloride 25mg tab</i>	1	
<i>bethanechol chloride 50mg tab</i>	1	
<i>bethanechol chloride 5mg tab</i>	1	
<i>flavoxate 100mg tab</i>	2	
<i>mirabegron 25mg er tab</i>	2	QL=30 Quantity/30 Days
<i>mirabegron 50mg er tab</i>	2	QL=30 Quantity/30 Days
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ	\$0	
BCG LIVE TICE STRAIN 50MG INJ	\$0	VAC
BEXSERO SYRINGE	\$0	VAC
HIBERIX 10MCG INJ	\$0	
MENACTRA INJ	\$0	VAC
MENQUADFI INJ	\$0	VAC
MENVEO INJ	\$0	VAC
PEDVAXHIB 7.5MCG/0.5ML INJ	\$0	
PENBRAYA INJ	\$0	VAC
TRUMENBA INJ	\$0	VAC
TYPHIM VI 25MCG/0.5ML INJ	\$0	VAC
TYPHIM VI 25MCG/0.5ML SYRINGE	\$0	VAC
VAXCHORA SUSP	\$0	VAC
VIVOTIF BERNA CAP	\$0*	QL=4 Quantity/ Per Dispensing
VIRAL VACCINES		
ABRYSVO 120MCG/0.5ML INJ	\$0	VAC
AREXVY 120MCG/0.5ML INJ	\$0	VAC
DENGVAXIA SUSP	\$0	
ENGERIX-B 10MCG/0.5ML INJ	\$0	PA_BvD VAC
ENGERIX-B 20MCG/ML INJ	\$0	PA_BvD VAC

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

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ERVEBO INJ	\$0	VAC
GARDASIL 9 INJ	\$0	VAC
GARDASIL 9 SYRINGE	\$0	VAC
HAVRIX 1440ELU/ML INJ	\$0	VAC
HAVRIX 720ELU/0.5ML INJ	\$0	
HEPLISAV-B 20MCG/0.5ML SYRINGE	\$0	PA_BvD VAC
IMOVAX 2.5UNIT/ML INJ	\$0	PA_BvD VAC
IPOL INJ	\$0	VAC
IXCHIQ INJ	\$0	VAC
IXIARO 0.012MG/ML INJ	\$0	VAC
JYNNEOS 0.5ML INJ	\$0	VAC
M-M-R II INJ	\$0	VAC
MRESVIA 50MCG/0.5ML INJ	\$0	VAC
PREHEVBRIO 10MCG/ML INJ	\$0	PA_BvD VAC
PRIORIX INJ	\$0	VAC
PROQUAD INJ	\$0	
RABAVERT 2.5UNIT/ML INJ	\$0	PA_BvD VAC
RECOMBIVAX 10MCG/ML INJ	\$0	PA_BvD VAC
RECOMBIVAX 40MCG/ML INJ	\$0	PA_BvD VAC
RECOMBIVAX 5MCG/0.5ML INJ	\$0	PA_BvD VAC
ROTARIX SUSP	\$0	
ROTATEQ SUSP	\$0	
SHINGRIX 50MCG/0.5ML INJ	\$0	QL=2 Quantity/365 DaysVAC
TICOVAC 1.2MCG/0.25ML SYRINGE	\$0	
TICOVAC 2.4MCG/0.5ML SYRINGE	\$0	VAC
TWINRIX 720UNIT INJ	\$0	VAC
VAQTA 25UNIT/0.5ML INJ	\$0	
VAQTA 50UNIT/ML INJ	\$0	VAC
VARIVAX 1350PFU/0.5ML INJ	\$0	VAC
YF-VAX 4000UNIT/ML INJ	\$0	VAC
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<i>clindamycin 2% vaginal cream</i>	1	
<i>metronidazole 0.75% vaginal gel</i>	1	
<i>terconazole 0.4% vaginal cream</i>	1	
<i>terconazole 0.8% vaginal cream</i>	1	
<i>terconazole 80mg vaginal insert</i>	1	
VAGINAL ESTROGENS		
<i>estradiol 0.01% vaginal cream</i>	1	
<i>estradiol 0.01mg vaginal insert</i>	2	
PREMARIN 0.625MG/GM VAGINAL CREAM	2	
VITAMINS		
OIL SOLUBLE VITAMINS		
<i>vitamin D 50000unit cap</i>	1*	

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

ALPHABETICAL LISTING OF DRUGS

A		ACETAMINOPHEN/COD		ADVAIR	
<i>abacavir 20mg/ml oral soln</i>	59	EINE PHOSPHATE	15	115-21MCG/ACT HFA	19
<i>abacavir 300mg tab</i>	59	120-12MG/5ML ORAL		INHALER 8GM	
<i>abacavir/lamivudine 600-300mg tab</i>	59	SOLN		ADVAIR	19
ABELCET 5MG/ML INJ	32	<i>acetaminophen/codeine phosphate 120-12mg/5ml oral soln</i>	15	230-21MCG/ACT HFA	
ABILIFY 300MG INJ	58	<i>acetazolamide 125mg tab</i>	72	INHALER	19
ABILIFY 300MG SYRINGE	58	<i>acetazolamide 250mg tab</i>	72	ADVAIR 45-21MCG/ACT HFA INHALER	19
ABILIFY 400MG INJ	58	<i>acetazolamide 500mg er cap</i>	72	ADVAIR 45-21MCG/ACT HFA INHALER 8GM	19
ABILIFY 400MG SYRINGE	58	<i>acetic acid 2% otic soln</i>	89	AJOVY 225MG/1.5ML	82
ABILIFY ASIMTUFII 720MG/2.4ML SYRINGE	58	<i>acetylcysteine 100mg/ml inh soln</i>	68	AUTO-INJECTOR	
ABILIFY ASIMTUFII 960MG/3.2ML SYRINGE	58	<i>acetylcysteine 200mg/ml inh soln</i>	68	AJOVY 225MG/1.5ML SYRINGE	82
<i>abiraterone acetate 250mg tab</i>	42	<i>acitretin 10mg cap</i>	69	AKEEGA 500-100MG TAB	43
ABRYSVO 120MCG/0.5ML INJ	98	<i>acitretin 17.5mg cap</i>	69	TAB	
<i>acamprosate calcium 333mg dr tab</i>	91	<i>acitretin 25mg cap</i>	69	AKEEGA 500-50MG TAB	43
<i>acarbose 100mg tab</i>	29	ACTEMRA 162MG/0.9ML	12	<i>ala-cort 2.5% cream</i>	70
<i>acarbose 25mg tab</i>	29	AUTO-INJECTOR		<i>albendazole 200mg tab</i>	16
<i>acarbose 50mg tab</i>	29	ACTEMRA 162MG/0.9ML SYRINGE	12	<i>albuterol 0.21mg/ml inh soln</i>	19
ACCU-CHEK AVIVA PLUS METER	81	ACTHIB INJ	98	<i>albuterol 0.417mg/ml inh soln</i>	19
ACCU-CHEK AVIVA PLUS TEST STRIP	72	ACTIMMUNE 2000000UNIT/0.5ML INJ	52	<i>albuterol 0.4mg/ml oral soln</i>	19
ACCU-CHEK GUIDE CARE METER	81	<i>acyclovir 200mg cap</i>	61	<i>albuterol 0.83mg/ml inh soln</i>	19
ACCU-CHEK GUIDE ME KIT	81	<i>acyclovir 400mg tab</i>	61	<i>albuterol 108mcg HFA inhaler (6.7gm)</i>	19
ACCU-CHEK GUIDE TEST STRIP	72	<i>acyclovir 40mg/ml susp</i>	61	<i>albuterol 108mcg HFA inhaler (8.5gm)</i>	19
ACCU-CHEK SMARTVIEW TEST STRIP	72	<i>acyclovir 5% ointment</i>	71	<i>albuterol 2mg tab</i>	19
<i>acebutolol 200mg cap</i>	62	<i>acyclovir 50mg/ml inj</i>	61	<i>albuterol 4mg tab</i>	19
<i>acebutolol 400mg cap</i>	62	<i>acyclovir 800mg tab</i>	61	ALBUTEROL 5MG/ML INH SOLN	19
		ADACEL INJ	96	<i>alclometasone dipropionate 0.05% cream</i>	70
		<i>adefovir dipivoxil 10mg tab</i>	61		
		ADEMPAS 0.5MG TAB	94		
		ADEMPAS 1.5MG TAB	94		
		ADEMPAS 1MG TAB	94		
		ADEMPAS 2.5MG TAB	94		
		ADEMPAS 2MG TAB	94		
		ADVAIR 115-21MCG/ACT HFA INHALER	19		

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

ALPHABETICAL LISTING OF DRUGS

<i>alclometasone</i>	70	AMILORIDE	73	<i>ammonium lactate 12% cream</i>	71
<i>dipropionate 0.05% ointment</i>		5MG/HYDROCHLOROT HIAZIDE 50MG TAB		<i>ammonium lactate 12% lotion</i>	71
ALCOHOL SWAB 1"x1" (DIABETIC)	81	<i>amiodarone 100mg tab</i>	18	<i>amoxapine 100mg tab</i>	28
<i>alcohol swab 1"x1" (diabetic)</i>	81	<i>amiodarone 200mg tab</i>	18	<i>amoxapine 150mg tab</i>	28
ALECENSA 150MG CAP	44	<i>amiodarone 400mg tab</i>	18	<i>amoxapine 25mg tab</i>	28
<i>alendronate 10mg tab</i>	73	<i>amitriptyline 100mg tab</i>	28	<i>amoxapine 50mg tab</i>	28
<i>alendronate 35mg tab</i>	73	<i>amitriptyline 10mg tab</i>	28	AMOXICILLIN 125MG CHEW TAB	89
<i>alendronate 70mg tab</i>	73	<i>amitriptyline 150mg tab</i>	28	<i>amoxicillin 250mg cap</i>	89
<i>alfuzosin 10mg er tab</i>	78	<i>amitriptyline 25mg tab</i>	28	AMOXICILLIN 250MG CHEW TAB	89
<i>aliskiren 150mg tab</i>	37	<i>amitriptyline 50mg tab</i>	28	<i>amoxicillin 25mg/ml susp</i>	89
<i>aliskiren 300mg tab</i>	37	<i>amitriptyline 75mg tab</i>	28	<i>amoxicillin 40mg/ml susp</i>	89
ALKERAN TAB	41	<i>amlodipine 10mg tab</i>	63	<i>amoxicillin 500mg cap</i>	89
<i>allopurinol 100mg tab</i>	78	<i>amlodipine 2.5mg tab</i>	63	<i>amoxicillin 500mg tab</i>	89
<i>allopurinol 300mg tab</i>	78	<i>amlodipine 5mg tab</i>	63	<i>amoxicillin 50mg/ml susp</i>	90
<i>alosetron 0.5mg tab</i>	31	<i>amlodipine/benazepril 10-20mg cap</i>	36	AMOXICILLIN 80MG/ML ORAL SUSP	90
<i>alosetron 1mg tab</i>	31	<i>amlodipine/benazepril 10-40mg cap</i>	36	<i>amoxicillin 80mg/ml susp</i>	90
<i>alprazolam 0.25mg tab</i>	17	<i>amlodipine/benazepril 2.5-10mg cap</i>	36	<i>amoxicillin 875mg tab</i>	90
<i>alprazolam 0.5mg tab</i>	17	<i>amlodipine/benazepril 5-10mg cap</i>	36	<i>amoxicillin/clavulanate 120-8.58mg/ml susp</i>	90
<i>alprazolam 1mg tab</i>	17	<i>amlodipine/benazepril 5-20mg cap</i>	36	<i>amoxicillin/clavulanate 250-125mg tab</i>	90
<i>alprazolam 2mg tab</i>	17	<i>amlodipine/benazepril 5-40mg cap</i>	36	<i>amoxicillin/clavulanate 40-5.7mg/ml susp</i>	90
<i>altavera 28 day pack</i>	75	<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	36	<i>amoxicillin/clavulanate 500-125mg tab</i>	90
ALUNBRIG 180MG TAB	44	<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	36	<i>amoxicillin/clavulanate 50-12.5mg/ml susp</i>	90
ALUNBRIG 30MG TAB	44	<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	36	<i>amoxicillin/clavulanate 80-11.4mg/ml susp</i>	90
ALUNBRIG 90MG TAB	44	<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	36	<i>amoxicillin/clavulanate 875-125mg tab</i>	90
ALUNBRIG TAB STARTER PACK	44	<i>amlodipine/valsartan 10-160mg tab</i>	36	<i>amphetamine/dextroamph etamine 10mg tab</i>	10
ALVESCO 160MCG INHALER	19	<i>amlodipine/valsartan 10-320mg tab</i>	36	<i>amphetamine/dextroamph etamine 12.5mg tab</i>	10
ALVESCO 80MCG INHALER	19	<i>amlodipine/valsartan 5-160mg tab</i>	36	<i>amphetamine/dextroamph etamine 15mg tab</i>	10
<i>amabelz 0.5/0.1mg 28 day pack</i>	75	<i>amlodipine/valsartan 5-320mg tab</i>	36	<i>amphetamine/dextroamph etamine 20mg tab</i>	10
<i>amantadine 100mg cap</i>	53				
<i>amantadine 10mg/ml oral soln</i>	53				
<i>ambrisentan 10mg tab</i>	94				
<i>ambrisentan 5mg tab</i>	94				
<i>amikacin 250mg/ml inj</i>	11				
<i>amikacin sulfate 1gm/4ml inj</i>	11				
<i>amiloride 5mg tab</i>	73				

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

ALPHABETICAL LISTING OF DRUGS

<i>amphetamine/dextroamphetamine 30mg tab</i>	10	ANORO ELLIPTA 62.5-25MCG INHALER	20	ARISTADA 882MG/3.2ML INJ	58
<i>amphetamine/dextroamphetamine 5mg tab</i>	10	APRACLONIDINE 0.5% OPHTH SOLN	87	<i>armodafinil 150mg tab</i>	10
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	10	<i>apraclonidine 0.5% ophthalmic solution</i>	87	<i>armodafinil 200mg tab</i>	10
<i>amphetamine-dextroamphetamine 10mg ER cap</i>	10	<i>aprepitant 125mg cap</i>	32	<i>armodafinil 250mg tab</i>	10
<i>amphetamine-dextroamphetamine 15mg ER cap</i>	10	<i>aprepitant</i>	32	<i>armodafinil 50mg tab</i>	10
<i>amphetamine-dextroamphetamine 20mg ER cap</i>	10	<i>125mg/aprepitant 80mg pack</i>		ARMOUR THYROID 120MG TAB	96
<i>amphetamine-dextroamphetamine 25mg ER cap</i>	10	<i>aprepitant 40mg cap</i>	32	ARMOUR THYROID 15MG TAB	96
<i>amphetamine-dextroamphetamine 30mg ER cap</i>	10	<i>aprepitant 80mg cap</i>	32	ARMOUR THYROID 30MG TAB	96
<i>amphetamine-dextroamphetamine 5mg ER cap</i>	10	<i>apri 28 day pack</i>	75	ARMOUR THYROID 60MG TAB	96
AMPHOTERICIN B 50MG INJ	32	APTIOM 200MG TAB	22	ARMOUR THYROID 90MG TAB	96
<i>ampicillin 1000mg inj</i>	90	APTIOM 400MG TAB	22	ARNUITY ELLIPTA 100MCG INHALER	19
<i>ampicillin 100mg/ml inj</i>	90	APTIOM 600MG TAB	22	ARNUITY ELLIPTA 200MCG INHALER	19
AMPICILLIN 125MG INJ	90	APTIOM 800MG TAB	22	ARNUITY ELLIPTA 50MCG INHALER	19
<i>ampicillin 250mg inj</i>	90	APTIVUS 250MG CAP	59	<i>asenapine 10mg sl tab</i>	56
AMPICILLIN 2GM INJ	90	<i>aranelle 28 pack</i>	75	<i>asenapine 2.5mg sl tab</i>	56
<i>ampicillin 2gm inj</i>	90	ARCALYST 220MG INJ	85	<i>asenapine 5mg sl tab</i>	56
<i>ampicillin 500mg cap</i>	90	AREXVY 120MCG/0.5ML INJ	98	<i>ashlyna 91 day pack</i>	75
<i>ampicillin 500mg inj</i>	90	<i>arformoterol tartrate 15mcg/2ml neb soln</i>	20	ASMANEX (14 METERED DOSES) 220MCG INHALER	19
AMPICILLIN SODIUM 1GM INJ	90	ARIKAYCE 590MG/8.4ML INH SUSP	11	ASMANEX 100MCG HFA INHALER	19
AMPICILLIN/SULBACTAM 1.5GM INJ	90	<i>aripiprazole 10mg odt</i>	58	ASMANEX 110MCG (30ACT) INHALER	19
<i>ampicillin/sulbactam 1000-500mg inj</i>	90	<i>aripiprazole 10mg tab</i>	58	ASMANEX 200MCG HFA INHALER	19
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	90	<i>aripiprazole 15mg odt</i>	58	ASMANEX 220MCG INHALER	19
<i>ampicillin/sulbactam 2000-1000mg inj</i>	90	<i>aripiprazole 15mg tab</i>	58	ASMANEX 50MCG HFA INHALER	19
AMPICILLIN/SULBACTAM 3GM INJ	90	<i>aripiprazole 1mg/ml oral soln</i>	58	<i>aspirin 25mg/dipyridamole 200mg er cap</i>	78
<i>anagrelide 0.5mg cap</i>	78	<i>aripiprazole 20mg tab</i>	58	<i>aspirin 81mg chew tab</i>	13
<i>anagrelide 1mg cap</i>	78	<i>aripiprazole 2mg tab</i>	58	<i>aspirin 81mg EC tab</i>	13
<i>anastrozole 1mg tab</i>	43	<i>aripiprazole 30mg tab</i>	58		
		<i>aripiprazole 5mg tab</i>	58		
		ARISTADA 1064MG/3.9ML INJ	58		
		ARISTADA 441MG/1.6ML INJ	58		
		ARISTADA 662MG/2.4ML INJ	58		
		ARISTADA 675MG/2.4ML INJ	58		

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

ALPHABETICAL LISTING OF DRUGS

<i>atazanavir 150mg cap</i>	59	AUSTEDO XR 36MG TAE	92	<i>baclofen 20mg tab</i>	86
<i>atazanavir 200mg cap</i>	59	AUSTEDO XR 42MG TAE	92	<i>baclofen 5mg tab</i>	86
<i>atazanavir 300mg cap</i>	59	AUSTEDO XR 48MG TAE	92	<i>balsalazide disodium</i>	77
<i>atenolol 100mg tab</i>	62	AUSTEDO XR 6MG TAB	92	<i>750mg cap</i>	
<i>atenolol 25mg tab</i>	62	AUSTEDO XR ONCE	92	BALVERSA 3MG TAB	44
<i>atenolol 50mg tab</i>	62	DAILY 4 WEEK		BALVERSA 4MG TAB	44
<i>atenolol/chlorthalidone</i>	36	TITRATION PACK		BALVERSA 5MG TAB	44
<i>100-25mg tab</i>		AUSTEDO XR TAB ONCE	92	BAQSIMI 3MG/DOSE	29
<i>atenolol/chlorthalidone</i>	36	DAILY 4 WEEK		NASAL POWDER	
<i>50-25mg tab</i>		TITRATION PACK		BCG LIVE TICE STRAIN	98
<i>atomoxetine 100mg cap</i>	10	AUVELITY 105-45MG ER	25	50MG INJ	
<i>atomoxetine 10mg cap</i>	10	TAB		<i>benazepril 10mg tab</i>	34
<i>atomoxetine 18mg cap</i>	10	AVONEX 30MCG/0.5ML	92	<i>benazepril 20mg tab</i>	34
<i>atomoxetine 25mg cap</i>	10	AUTO-INJECTOR		<i>benazepril 40mg tab</i>	34
<i>atomoxetine 40mg cap</i>	10	AVONEX 30MCG/0.5ML	92	<i>benazepril 5mg tab</i>	34
<i>atomoxetine 60mg cap</i>	10	SYRINGE		<i>benazepril/hydrochloroth</i>	36
<i>atomoxetine 80mg cap</i>	10	AYVAKIT 100MG TAB	52	<i>iazide 10-12.5mg tab</i>	
<i>atorvastatin 10mg tab</i>	34	AYVAKIT 200MG TAB	52	<i>benazepril/hydrochloroth</i>	36
<i>atorvastatin 20mg tab</i>	34	AYVAKIT 25MG TAB	52	<i>iazide 20-12.5mg tab</i>	
<i>atorvastatin 40mg tab</i>	34	AYVAKIT 300MG TAB	52	<i>benazepril/hydrochloroth</i>	37
<i>atorvastatin 80mg tab</i>	34	AYVAKIT 50MG TAB	52	<i>iazide 20-25mg tab</i>	
<i>atovaquone 150mg/ml</i>	39	<i>azathioprine 50mg tab</i>	85	<i>benazepril/hydrochloroth</i>	37
<i>susp</i>		<i>azelaic acid 15% gel</i>	72	<i>iazide 5-6.25mg tab</i>	
<i>atovaquone/proguanil</i>	40	<i>azelastine 0.05% ophth</i>	88	BENLYSTA 200MG/ML	85
<i>250-100mg tab</i>		<i>soln</i>		AUTO-INJECTOR	
<i>atovaquone/proguanil</i>	40	<i>azelastine 0.137mg/act</i>	86	BENLYSTA 200MG/ML	85
<i>62.5-25mg tab</i>		<i>nasal inhaler</i>		SYRINGE	
<i>atropine sulfate</i>	31	<i>azithromycin 20mg/ml</i>	38	<i>benzonatate 100mg cap,</i>	67
<i>0.025mg/diphenoxylate</i>		<i>susp</i>		<i>200mg cap</i>	
<i>2.5mg tab</i>		<i>azithromycin 250mg pack</i>	38	<i>benztropine mesylate</i>	53
<i>atropine sulfate 1% ophth</i>	88	<i>azithromycin 40mg/ml</i>	38	<i>0.5mg tab</i>	
<i>soln</i>		<i>susp</i>		<i>benztropine mesylate 1mg</i>	53
ATROPINE SULFATE 1%	88	<i>azithromycin 500mg inj</i>	38	<i>tab</i>	
OPHTH SOLN		<i>azithromycin 500mg tab</i>	38	<i>benztropine mesylate 2mg</i>	53
ATROVENT 17MCG	18	<i>azithromycin 600mg tab</i>	38	<i>tab</i>	
INHALER		<i>aztreonam 1000mg inj</i>	38	BERINERT 500UNIT INJ	80
AUGTYRO 40MG CAP	44	<i>aztreonam 2000mg inj</i>	38	BESREMI 500MCG/ML	52
AUSTEDO 12MG TAB	92			SYRINGE	
AUSTEDO 6MG TAB	92	B		<i>betaine 1000mg powder</i>	74
AUSTEDO 9MG TAB	92	BACITRACIN	87	<i>for oral soln</i>	
AUSTEDO XR 12MG TAE	92	0.5UNIT/MG OPHTH		<i>betamethasone 0.05%</i>	70
AUSTEDO XR 18MG TAE	92	OINTMENT		<i>aug cream</i>	
AUSTEDO XR 24MG TAE	92	<i>bacitracin/polymyxin B</i>	87	<i>betamethasone 0.05%</i>	70
AUSTEDO XR 30MG TAE	92	<i>3.5gm ophth ointment</i>		<i>aug lotion</i>	
		<i>baclofen 10mg tab</i>	86		

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

ALPHABETICAL LISTING OF DRUGS

<i>betamethasone 0.05% aug ointment</i>	70	BIKTARVY 30-120-15MG TAB	59	BRILINTA 60MG TAB	78
<i>betamethasone 0.05% cream</i>	70	BIKTARVY 50-200-25MG TAB	59	BRILINTA 90MG TAB	78
BETAMETHASONE 0.05% GEL	70	<i>bimatoprost 0.03% ophth soln</i>	89	<i>brimonidine 0.1% ophth soln</i>	87
<i>betamethasone 0.05% lotion</i>	70	<i>bisoprolol fumarate 10mg tab</i>	62	<i>brimonidine tartrate 0.15% ophth soln</i>	87
<i>betamethasone 0.05% ointment</i>	70	<i>bisoprolol fumarate 5mg tab</i>	62	<i>brimonidine tartrate 0.2% ophth soln</i>	87
<i>betamethasone 0.1% cream</i>	70	<i>bisoprolol fumarate/hydrochlorothia zide 10-6.25mg tab</i>	37	<i>brimonidine tartrate/timolol maleate 0.2-0.5% ophth soln</i>	87
<i>betamethasone 0.1% lotion</i>	70	<i>bisoprolol fumarate/hydrochlorothia zide 2.5-6.25mg tab</i>	37	BRIVIACT 100MG TAB	22
<i>betamethasone 0.1% ointment</i>	70	<i>bisoprolol fumarate/hydrochlorothia zide 5-6.25mg tab</i>	37	BRIVIACT 10MG TAB	22
<i>betamethasone/clotrimaz ole 1-0.05% cream</i>	69	<i>bisoprolol fumarate/hydrochlorothia zide 5-6.25mg tab</i>	37	BRIVIACT 10MG/ML	22
BETASERON 0.3MG INJ	92	BOOSTRIX INJ	96	ORAL SOLN	
BETAXOLOL 0.5% OPHTH SOLN	87	<i>bosentan 125mg tab</i>	94	BRIVIACT 25MG TAB	22
<i>betaxolol 0.5% ophth soln</i>	87	<i>bosentan 62.5mg tab</i>	94	BRIVIACT 50MG TAB	22
<i>betaxolol 10mg tab</i>	62	BOSULIF 100MG CAP	44	BRIVIACT 75MG TAB	22
<i>betaxolol 20mg tab</i>	62	BOSULIF 100MG TAB	44	<i>bromocriptine 2.5mg tab</i>	53
<i>bethanechol chloride 10mg tab</i>	98	BOSULIF 400MG TAB	44	<i>bromocriptine 5mg cap</i>	53
<i>bethanechol chloride 25mg tab</i>	98	BOSULIF 500MG TAB	44	BRUKINSA 80MG CAP	45
<i>bethanechol chloride 50mg tab</i>	98	BOSULIF 50MG CAP	44	<i>budesonide 0.125mg/ml inh susp</i>	19
<i>bethanechol chloride 5mg tab</i>	98	BRAFTOVI 75MG CAP	44	<i>budesonide 0.25mg/ml inh susp</i>	19
<i>bexarotene 1% gel</i>	69	BREO ELLIPTA	20	<i>budesonide 0.5mg/ml inh susp</i>	19
<i>bexarotene 75mg cap</i>	52	100-25MCG INHALER		<i>budesonide 2mg/act rectal foam</i>	16
BEXSERO SYRINGE	98	BREO ELLIPTA	20	<i>budesonide 3mg dr cap</i>	66
<i>bicalutamide 50mg tab</i>	43	200-25MCG INHALER		<i>budesonide 9mg er tab</i>	66
BICILLIN L-A 1200000UNIT/2ML INJ	90	BREO ELLIPTA	20	<i>budesonide/formoterol fumarate 160-4.5mcg inhaler</i>	20
BICILLIN L-A 2400000UNIT/4ML INJ	90	50-25MCG INH	20	<i>budesonide/formoterol fumarate 80-4.5mcg inhaler</i>	20
BICILLIN L-A 600000UNIT/ML INJ	90	<i>breyana 160-4.5mcg/act inh</i>	20	<i>bumetanide 0.25mg/ml inj</i>	73
		<i>breyana 80-4.5mcg/act inh</i>	20	<i>bumetanide 0.5mg tab</i>	73
		BREZTRI AEROSPHERE 160-9-4.8MCG/ACT	20	<i>bumetanide 1mg tab</i>	73
		INHALER		<i>bumetanide 2mg tab</i>	73
		BREZTRI AEROSPHERE 160-9-4.8MCG/ACT	20	<i>buprenorphine 10mcg/hr weekly patch</i>	15
		INHALER 5.9GM			
		<i>briellyn 28 day pack</i>	75		

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

ALPHABETICAL LISTING OF DRUGS

<i>buprenorphine 15mcg/hr weekly patch</i>	15	CABOMETYX 60MG TAE	45	<i>carbamazepine 100mg er cap</i>	22
<i>buprenorphine 20mcg/hr weekly patch</i>	15	<i>calcipotriene 0.005% cream</i>	69	<i>carbamazepine 100mg er tab</i>	22
<i>buprenorphine 2mg sl tab</i>	15	<i>calcipotriene 0.005% ointment</i>	69	<i>carbamazepine 200mg er cap</i>	22
<i>buprenorphine 5mcg/hr weekly patch</i>	15	CALCIPOTRIENE 0.005% TOPICAL SOLN	69	<i>carbamazepine 200mg er tab</i>	22
<i>buprenorphine 7.5mcg/hr weekly patch</i>	15	<i>calcipotriene 0.005% topical soln</i>	69	<i>carbamazepine 200mg tab</i>	22
<i>buprenorphine 8mg sl tab</i>	15	<i>calcitriol 0.25mcg cap</i>	74	<i>carbamazepine 20mg/ml susp</i>	22
<i>buprenorphine/naloxone 12-3mg sublingual film</i>	15	<i>calcitriol 0.5mcg cap</i>	74	<i>carbamazepine 300mg er cap</i>	22
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	15	<i>calcitriol 1mcg/ml oral soln</i>	74	<i>carbamazepine 400mg er tab</i>	22
<i>buprenorphine/naloxone 2-0.5mg sublingual film</i>	15	CALIBRATION LIQUID	81	<i>carbidopa 25mg tab</i>	53
<i>buprenorphine/naloxone 4-1mg sublingual film</i>	15	CALQUENCE 100MG CAP	45	<i>carbidopa/entacapone/le vodopa 12.5-200-50mg tab</i>	53
<i>buprenorphine/naloxone 8-2mg sl tab</i>	15	CALQUENCE 100MG TAB	45	<i>carbidopa/entacapone/le vodopa 18.75-200-75mg tab</i>	53
<i>buprenorphine/naloxone 8-2mg sublingual film</i>	15	<i>camreselo 91 day pack</i>	75	<i>carbidopa/entacapone/le vodopa 25-200-100mg tab</i>	53
<i>bupropion 100mg er tab</i>	25	CAMZYOS 10MG CAP	64	<i>carbidopa/entacapone/le vodopa 31.25-200-125mg tab</i>	53
<i>bupropion 100mg tab</i>	25	CAMZYOS 15MG CAP	64	<i>carbidopa/entacapone/le vodopa 37.5-200-150mg tab</i>	53
<i>bupropion 150mg sr (12 hr) tab</i>	25	CAMZYOS 2.5MG CAP	64	<i>carbidopa/entacapone/le vodopa 50-200-200mg tab</i>	53
<i>bupropion 150mg sr tab</i>	93	CAMZYOS 5MG CAP	64	CARBIDOPA/LEVODOPA 10-100MG ODT	53
<i>bupropion 150mg xl (24 hr) tab</i>	25	<i>candesartan cilexetil 16mg tab</i>	35	<i>carbidopa/levodopa 10-100mg tab</i>	53
<i>bupropion 200mg er tab</i>	25	<i>candesartan cilexetil 32mg tab</i>	35	CARBIDOPA/LEVODOPA 10-250MG ODT	53
<i>bupropion 300mg er tab</i>	25	<i>candesartan cilexetil 4mg tab</i>	35	<i>carbidopa/levodopa 25-100mg er tab</i>	54
<i>bupropion 75mg tab</i>	25	<i>candesartan cilexetil 8mg tab</i>	35		
<i>bupirone 10mg tab</i>	17	<i>capecitabine tab</i>	41		
<i>bupirone 15mg tab</i>	17	CAPLYTA 10.5MG CAP	54		
<i>bupirone 30mg tab</i>	17	CAPLYTA 21MG CAP	54		
<i>bupirone 5mg tab</i>	17	CAPLYTA 42MG CAP	54		
<i>bupirone 7.5mg tab</i>	17	CAPRELSA 100MG TAB	45		
BYDUREON 2MG/0.85ML AUTO-INJECTOR	30	CAPRELSA 300MG TAB	45		
C		<i>captopril 100mg tab</i>	34		
<i>cabergoline 0.5mg tab</i>	75	<i>captopril 12.5mg tab</i>	34		
CABOMETYX 20MG TAE	45	<i>captopril 25mg tab</i>	34		
CABOMETYX 40MG TAE	45	<i>captopril 50mg tab</i>	34		
		<i>carbamazepine 100mg chew tab</i>	22		

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

ALPHABETICAL LISTING OF DRUGS

CARBIDOPA/LEVODOPA 25-100MG ODT	54	CEFAZOLIN 1GM INJ	65	<i>ceftriaxone 1000mg inj</i>	66
<i>carbidopa/levodopa 25-100mg tab</i>	54	<i>cefazolin 200mg/ml inj</i>	65	<i>ceftriaxone 100mg/ml inj</i>	66
<i>carbidopa/levodopa 25-250mg tab</i>	54	CEFAZOLIN 300GM INJ	65	<i>ceftriaxone 2000mg inj</i>	66
<i>carbidopa/levodopa 50-200mg er tab</i>	54	<i>cefazolin 500mg inj</i>	65	<i>ceftriaxone 250mg inj</i>	66
<i>carglumic acid 200mg tab</i>	74	CEFAZOLIN/DEXTROSE 1GM/50ML-4% IV SOLN	65	<i>ceftriaxone 500mg inj</i>	66
<i>carisoprodol 350mg tab</i>	86	CEFAZOLIN/DEXTROSE 1GM-4% IV SOLN	65	CEFTRIAZONE SODIUM 100GM INJ	66
CARTEOLOL 1% OPHTH SOLN	87	<i>cefepime 1000mg inj</i>	38	<i>ceftriaxone sodium 1gm inj</i>	66
<i>carvedilol 12.5mg tab</i>	62	CEFEPIME 1GM/50ML IV SOLN	38	<i>ceftriaxone sodium 2gm inj</i>	66
<i>carvedilol 25mg tab</i>	62	<i>cefepime 2000mg inj</i>	38	CEFTRIAZONE/DEXTROSE 1GM-3.74% IV SOLN	66
<i>carvedilol 3.125mg tab</i>	62	CEFEPIME 2GM/100ML IV SOLN	38	CEFTRIAZONE/DEXTROSE 20MG/ML INJ	66
<i>carvedilol 6.25mg tab</i>	62	CEFEPIME/DEXTROSE 1GM/50ML-5% INJ	38	CEFTRIAZONE/DEXTROSE 2GM-2.22% IV SOLN	66
<i>carvedilol phosphate ER 10mg cap</i>	62	CEFEPIME/DEXTROSE 2GM/50ML-5% INJ	38	CEFTRIAZONE/DEXTROSE 40MG/ML INJ	66
<i>carvedilol phosphate ER 20mg cap</i>	62	<i>cefuroxime 1500mg inj</i>	66	<i>cefuroxime 1500mg inj</i>	66
<i>carvedilol phosphate ER 40mg cap</i>	62	<i>cefuroxime 250mg tab</i>	66	<i>cefuroxime 250mg tab</i>	66
<i>carvedilol phosphate ER 80mg cap</i>	62	<i>cefuroxime 500mg tab</i>	66	<i>cefuroxime 500mg tab</i>	66
CASPOFUNGIN ACETATE 50MG INJ	32	<i>cefuroxime 750mg inj</i>	66	<i>celecoxib 100mg cap</i>	12
<i>casprofungin acetate 50mg inj</i>	32	<i>celecoxib 200mg cap</i>	12	<i>celecoxib 200mg cap</i>	12
CASPOFUNGIN ACETATE 70MG INJ	32	<i>celecoxib 400mg cap</i>	12	<i>celecoxib 400mg cap</i>	12
<i>casprofungin acetate 70mg inj</i>	32	<i>celecoxib 50mg cap</i>	12	<i>celecoxib 50mg cap</i>	12
CAVERJECT IMPULSE INJ	65	CEFOXITIN/DEXTROSE 1GM-4% INJ	66	<i>cephalexin 250mg cap</i>	65
CAVERJECT INJ	65	CEFOXITIN/DEXTROSE 2GM-2.2% INJ	66	<i>cephalexin 25mg/ml susp</i>	65
CAYSTON 75MG INH SOLN	93	<i>cefpodoxime 100mg tab</i>	66	<i>cephalexin 500mg cap</i>	65
CEFACLOR 250MG CAP	65	<i>cefpodoxime 10mg/ml susp</i>	66	<i>cephalexin 50mg/ml susp</i>	65
CEFACLOR 500MG CAP	65	<i>cefpodoxime 200mg tab</i>	66	<i>cevimeline 30mg cap</i>	68
<i>cefadroxil 100mg/ml susp</i>	65	<i>cefpodoxime 20mg/ml susp</i>	66	CHEMET 100MG CAP	84
<i>cefadroxil 500mg cap</i>	65	<i>cefprozil 250mg tab</i>	66	<i>chlordiazepoxide 10mg cap</i>	17
<i>cefadroxil 50mg/ml susp</i>	65	<i>cefprozil 25mg/ml susp</i>	66	<i>chlordiazepoxide 25mg cap</i>	17
<i>cefazolin 1000mg inj</i>	65	<i>cefprozil 500mg tab</i>	66	<i>chlordiazepoxide 5mg cap</i>	17
CEFAZOLIN 100GM INJ	65	<i>cefprozil 50mg/ml susp</i>	66	<i>chlorhexidine gluconate 0.12% mouthwash</i>	68
		<i>ceftazidime 1000mg inj</i>	66	<i>chloroquine 500mg tab</i>	40
		<i>ceftazidime 200mg/ml inj</i>	66	<i>chloroquine phosphate 250mg tab</i>	40
		<i>ceftazidime 2gm inj</i>	66		

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

ALPHABETICAL LISTING OF DRUGS

<i>chlorpromazine 100mg tab</i>	57	<i>cinacalcet 90mg tab</i>	74	CLINDAMYCIN/NACL	38
CHLORPROMAZINE	57	<i>ciprofloxacin 0.3% ophth soln</i>	87	9%-300MG/50ML IV SOLN	
100MG/ML ORAL SOLN		<i>ciprofloxacin 250mg tab</i>	77	CLINDAMYCIN/NACL	38
<i>chlorpromazine 10mg tab</i>	57	<i>ciprofloxacin 2mg/ml inj</i>	77	9%-600MG/50ML IV SOLN	
<i>chlorpromazine 200mg tab</i>	57	<i>ciprofloxacin 500mg tab</i>	77	CLINDAMYCIN/NACL	38
<i>chlorpromazine 25mg tab</i>	57	<i>ciprofloxacin 750mg tab</i>	77	9%-900MG/50ML IV SOLN	
CHLORPROMAZINE	57	<i>ciprofloxacin/d5w 400mg/200ml inj</i>	77	CLINIMIX 4.25/10 INJ	87
30MG/ML ORAL SOLN		<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	89	CLINIMIX 4.25/5 INJ	87
<i>chlorpromazine 50mg tab</i>	57	<i>citalopram 10mg tab</i>	26	CLINIMIX 5/15 INJ	87
<i>chlorthalidone 25mg tab</i>	73	<i>citalopram 20mg tab</i>	26	CLINIMIX 5/20 INJ	87
<i>chlorthalidone 50mg tab</i>	73	<i>citalopram 2mg/ml oral soln</i>	26	<i>clinisol 15% inj</i>	87
<i>chlorzoxazone 500mg tab</i>	86	<i>citalopram 40mg tab</i>	26	CLINISTIX	72
<i>cholestyramine 4gm bulk powder</i>	33	<i>clarithromycin 250mg tab</i>	38	<i>clobazam 10mg tab</i>	21
<i>cholestyramine resin 4gm sf powder for oral susp</i>	33	CLARITHROMYCIN	38	<i>clobazam 2.5mg/ml susp</i>	21
<i>cholestyramine resin 4gm sf powder for oral susp (sugar free)</i>	33	25MG/ML SUSP		<i>clobazam 20mg tab</i>	21
<i>ciclopirox 0.77% cream</i>	69	<i>clarithromycin 500mg tab</i>	38	<i>clobetasol propionate 0.05% cream</i>	70
<i>ciclopirox 0.77% gel</i>	69	CLARITHROMYCIN	38	<i>clobetasol propionate 0.05% e cream</i>	70
<i>ciclopirox 0.77% lotion</i>	69	50MG/ML SUSP		<i>clobetasol propionate 0.05% foam</i>	70
<i>ciclopirox 1% shampoo</i>	69	<i>clindamycin 1% gel</i>	68	<i>clobetasol propionate 0.05% topical soln</i>	70
<i>ciclopirox 8% topical soln</i>	69	<i>clindamycin 1% lotion</i>	68	<i>clobetasol propionate 0.05% gel</i>	70
CILASTATIN/IMIPENEM	39	<i>clindamycin 1% pad</i>	68	<i>clobetasol propionate 0.05% lotion</i>	70
250-250MG INJ		<i>clindamycin 1% topical soln</i>	68	<i>clobetasol propionate 0.05% ointment</i>	70
<i>cilastatin/imipenem 500-500mg inj</i>	39	<i>clindamycin 12mg/ml inj</i>	38	<i>clobetasol propionate 0.05% shampoo</i>	70
<i>cilostazol 100mg tab</i>	78	<i>clindamycin 150mg cap</i>	38	<i>clobetasol propionate 0.05% spray</i>	70
<i>cilostazol 50mg tab</i>	78	<i>clindamycin 150mg/ml (2ml) inj</i>	38	<i>clobetasol propionate 0.05% topical soln</i>	70
CIMDUO 300-300MG TAB	59	<i>clindamycin 150mg/ml (4ml) inj</i>	38	<i>clomipramine 25mg cap</i>	28
<i>cimetidine 200mg tab</i>	97	<i>clindamycin 150mg/ml (6ml) inj</i>	38	<i>clomipramine 50mg cap</i>	28
<i>cimetidine 300mg tab</i>	97	<i>clindamycin 15mg/ml oral soln</i>	38	<i>clomipramine 75mg cap</i>	28
<i>cimetidine 400mg tab</i>	97	<i>clindamycin 18mg/ml inj</i>	38	<i>clonazepam 0.125mg odt</i>	21
<i>cimetidine 800mg tab</i>	97	<i>clindamycin 2% vaginal cream</i>	99	<i>clonazepam 0.25mg odt</i>	22
CIMZIA 200MG INJ	12	<i>clindamycin 300mg cap</i>	38	<i>clonazepam 0.5mg odt</i>	22
CIMZIA 200MG/ML INJ	12	<i>clindamycin 6mg/ml inj</i>	38	<i>clonazepam 0.5mg tab</i>	22
CIMZIA 200MG/ML INJ STARTER KIT	12	<i>clindamycin 75mg cap</i>	38	<i>clonazepam 1mg odt</i>	22
<i>cinacalcet 30mg tab</i>	74	<i>clindamycin 9gm/60ml inj</i>	38		
<i>cinacalcet 60mg tab</i>	74				

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

ALPHABETICAL LISTING OF DRUGS

<i>clonazepam 1mg tab</i>	22	<i>colchicine 0.6mg tab</i>	78	CREON	72
<i>clonazepam 2mg odt</i>	22	<i>colchicine/probenecid</i>	78	36000-114000-180000U	
<i>clonazepam 2mg tab</i>	22	<i>0.5-500mg tab</i>		NIT DR CAP	
<i>clonidine 0.1mg er tab</i>	10	<i>colesevelam 625mg tab</i>	33	CREON	72
<i>clonidine 0.1mg tab</i>	36	<i>colestipol 1000mg tab</i>	33	60000-38000-12000UNIT	
<i>clonidine 0.1mg/24hr</i>	36	<i>colestipol 5000mg</i>	34	DR CAP	
<i>weekly patch</i>		<i>granules for oral susp</i>		<i>cromolyn sodium 20mg/ml</i>	77
<i>clonidine 0.2mg tab</i>	36	<i>colestipol 5gm granule</i>	34	<i>oral soln</i>	
<i>clonidine 0.2mg/24hr</i>	36	<i>colistin 75mg/ml inj</i>	38	<i>cromolyn sodium 4%</i>	88
<i>weekly patch</i>		COMBIVENT	20	<i>ophth soln</i>	
<i>clonidine 0.3mg tab</i>	36	20-100MCG/ACT		CROMOLYN SODIUM	88
<i>clonidine 0.3mg/24hr</i>	36	INHALER		4% OPHTH SOLN	
<i>weekly patch</i>		COMETRIQ CAP DOSE	45	<i>cyanocobalamin inj</i>	79
<i>clopidogrel 75mg tab</i>	78	PACK (100MG)		<i>cyclafem 7/7/7 28 day</i>	75
<i>clorazepate dipotassium</i>	17	COMETRIQ CAP DOSE	45	<i>pack</i>	
<i>15mg tab</i>		PACK (140MG)		<i>cyclobenzaprine 10mg</i>	86
<i>clorazepate dipotassium</i>	17	COMETRIQ CAP DOSE	45	<i>tab</i>	
<i>3.75mg tab</i>		PACK (60MG)		<i>cyclobenzaprine 5mg tab</i>	86
<i>clorazepate dipotassium</i>	17	COMPLERA	59	CYCLOPHOSPHAMIDE	41
<i>7.5mg tab</i>		200-25-300MG TAB		25MG TAB	
<i>clotrimazole 1% cream</i>	69	<i>constulose 10gm/15ml</i>	80	CYCLOPHOSPHAMIDE	41
<i>clotrimazole 10mg</i>	68	<i>oral soln</i>		50MG TAB	
<i>lozenge</i>		COPIKTRA 15MG CAP	45	<i>cyclosporine 0.05% ophth</i>	88
<i>clozapine 100mg odt</i>	56	COPIKTRA 25MG CAP	45	<i>emulsion</i>	
<i>clozapine 100mg tab</i>	56	COSENTYX 150MG/ML	69	<i>cyclosporine 100mg cap</i>	85
CLOZAPINE 12.5MG	56	AUTO-INJECTOR		<i>cyclosporine 25mg cap</i>	85
ODT		COSENTYX 150MG/ML	69	<i>cyclosporine modified</i>	85
<i>clozapine 150mg odt</i>	56	SYRINGE		<i>100mg cap</i>	
<i>clozapine 200mg odt</i>	56	COSENTYX	70	<i>cyclosporine modified</i>	85
<i>clozapine 200mg tab</i>	56	75MG/0.5ML SYRINGE		<i>100mg/ml oral soln</i>	
<i>clozapine 25mg odt</i>	56	COSENTYX UNOREADY	70	<i>cyclosporine modified</i>	85
<i>clozapine 25mg tab</i>	56	300MG/2ML		<i>25mg cap</i>	
<i>clozapine 50mg tab</i>	56	AUTO-INJECTOR		<i>cyclosporine modified</i>	85
COARTEM 20-120MG	40	COTELLIC 20MG TAB	45	<i>50mg cap</i>	
TAB		CREON	72	<i>cyproheptadine 0.4mg/ml</i>	94
<i>codeine</i>	15	120000-76000-24000UNI		<i>oral soln</i>	
<i>phosphate/acetaminophe</i>		T DR CAP		<i>cyproheptadine 4mg tab</i>	94
<i>n 15-300mg tab</i>		CREON	72	CYSTADROPS 0.37%	88
<i>codeine</i>	15	15000-9500-3000UNIT		OPHTH SOLN	
<i>phosphate/acetaminophe</i>		DR CAP		CYSTAGON 150MG CAP	77
<i>n 30-300mg tab</i>		CREON	72	CYSTAGON 50MG CAP	77
<i>codeine</i>	15	30000-19000-6000UNIT		CYSTARAN 0.44%	88
<i>phosphate/acetaminophe</i>		DR CAP		OPHTH SOLN	
<i>n 60-300mg tab</i>				CYTRA K CRYSTALS	78

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

ALPHABETICAL LISTING OF DRUGS

D		DELSTRIGO	59	<i>dexamethasone 0.75mg tab</i>	67
<i>d2.5w/nacl 0.45% inj</i>	82	100-300-300MG TAB		<i>dexamethasone 1.5mg tab</i>	67
<i>d5w/nacl 5%-0.33% inj</i>	82	DENG VAXIA SUSP	98	<i>dexamethasone 1mg tab</i>	67
D5W/NACL 5%-0.33% INJ	82	DEPO-SUBQ PROVERA	91	<i>dexamethasone 2mg tab</i>	67
<i>dabigatran etexilate mesylate 110mg cap</i>	21	104MG/0.65ML SYRINGE		<i>dexamethasone 4mg tab</i>	67
<i>dabigatran etexilate mesylate 150mg cap</i>	21	DESCOVY 120-15MG TAB	59	<i>dexamethasone 6mg tab</i>	67
<i>dabigatran etexilate mesylate 75mg cap</i>	21	DESCOVY 200-25MG TAB	59	DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN	88
<i>dalfampridine 10mg er tab</i>	92	<i>desipramine 100mg tab</i>	28	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	88
<i>danazol 100mg cap</i>	15	<i>desipramine 10mg tab</i>	28	<i>dexamethasone/neomycin /polymyxin b 0.1% ophth susp</i>	88
<i>danazol 200mg cap</i>	15	<i>desipramine 150mg tab</i>	28	<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	88
<i>danazol 50mg cap</i>	15	<i>desipramine 25mg tab</i>	28	DEXCOM G6 RECEIVER	81
<i>dantrolene sodium 100mg cap</i>	86	<i>desipramine 50mg tab</i>	28	DEXCOM G6 SENSOR	81
<i>dantrolene sodium 25mg cap</i>	86	<i>desipramine 75mg tab</i>	28	DEXCOM G6 TRANSMITTER	81
<i>dantrolene sodium 50mg cap</i>	86	<i>desloratadine 5mg tab</i>	94	DEXCOM G7 RECEIVER	81
<i>dapsone 100mg tab</i>	40	<i>desmopressin 0.01% nasal spray</i>	75	DEXCOM G7 SENSOR	81
<i>dapsone 25mg tab</i>	40	<i>desmopressin acetate 0.01mg/act nasal spray 0.1mg tab</i>	75	<i>dexmethylphenidate 10mg tab</i>	10
DAPTACEL INJ	96	<i>desmopressin acetate 0.1mg tab</i>	75	<i>dexmethylphenidate 2.5mg tab</i>	10
<i>daptomycin 500mg inj</i>	38	<i>desmopressin acetate 0.2mg tab</i>	75	<i>dexmethylphenidate 5mg tab</i>	10
DAPTOMYCIN 500MG INJ	38	<i>desogestrel/ethinyl estradiol pack</i>	75	<i>dextroamphetamine sulfate 10mg tab</i>	10
<i>darifenacin 15mg er tab</i>	97	<i>desonide 0.05% ointment</i>	70	<i>dextroamphetamine sulfate 5mg tab</i>	10
<i>darifenacin 7.5mg er tab</i>	97	<i>desoximetasone 0.25% cream</i>	70	DEXTROSE 10% W/ SODIUM CHLORIDE 0.2%	82
<i>darunavir 600mg tab</i>	59	<i>desoximetasone 0.25% ointment</i>	70	DEXTROSE 10% W/ SODIUM CHLORIDE 0.45%	82
<i>darunavir 800mg tab</i>	59	<i>desvenlafaxine succinate 100mg er tab</i>	27	DEXTROSE/SODIUM CHLORIDE 5-0.225% INJ	82
<i>dasatinib 100mg tab</i>	45	<i>desvenlafaxine succinate 25mg er tab</i>	27		
<i>dasatinib 140mg tab</i>	45	<i>desvenlafaxine succinate 50mg er tab</i>	27		
<i>dasatinib 20mg tab</i>	45	<i>dexamethasone 0.1mg/ml oral soln</i>	66		
<i>dasatinib 50mg tab</i>	45	<i>dexamethasone 0.5mg tab</i>	66		
<i>dasatinib 70mg tab</i>	45	DEXAMETHASONE	66		
<i>dasatinib 80mg tab</i>	45	0.5MG/5ML ORAL SOLN	66		
DAURISMO 100MG TAB	42				
DAURISMO 25MG TAB	42				
<i>deferasirox 180mg tab</i>	84				
<i>deferasirox 360mg tab</i>	84				
<i>deferasirox 90mg tab</i>	84				

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

ALPHABETICAL LISTING OF DRUGS

<i>dextrose/sodium chloride</i>	82	<i>dicloxacillin 500mg cap</i>	90	DIPHThERIA/TETANUS	96
<i>5%-0.225% inj</i>		<i>dicyclomine 10mg cap</i>	97	TOXOID INJ	
DIACOMIT 250MG CAP	22	<i>dicyclomine 20mg tab</i>	97	<i>dipyridamole 25mg tab</i>	78
DIACOMIT 250MG	23	<i>dicyclomine 2mg/ml oral</i>	97	<i>dipyridamole 50mg tab</i>	78
POWDER FOR ORAL		<i>soln</i>		<i>dipyridamole 75mg tab</i>	78
SUSP		DIFICID 200MG TAB	38	<i>disopyramide 100mg cap</i>	17
DIACOMIT 500MG CAP	23	DIFICID 40MG/ML SUSP	38	<i>disopyramide 150mg cap</i>	17
DIACOMIT 500MG	23	<i>diflunisal 500mg tab</i>	12	<i>disulfiram 250mg tab</i>	91
POWDER FOR ORAL		<i>difluprednate 0.05%</i>	88	<i>disulfiram 500mg tab</i>	91
SUSP		<i>ophth emulsion</i>		<i>divalproex sodium 125mg</i>	25
DIALYVITE TAB	86	<i>digox 125mcg tab</i>	64	<i>dr cap</i>	
<i>dialyvite tab</i>	86	<i>digoxin 0.25mg tab</i>	64	<i>divalproex sodium 125mg</i>	25
DIALYVITE/ZINC TAB	86	<i>dihydroergotamine</i>	82	<i>dr tab</i>	
<i>diazepam 10mg tab</i>	17	<i>mesylate 0.5mg/act nasal</i>		<i>divalproex sodium 250mg</i>	25
<i>diazepam 10mg/2ml</i>	22	<i>inhaler</i>		<i>dr tab</i>	
<i>rectal gel</i>		<i>dilt 120mg er cap</i>	63	<i>divalproex sodium 250mg</i>	25
<i>diazepam 1mg/ml oral</i>	17	<i>dilt 180mg er cap</i>	63	<i>er tab</i>	
<i>soln</i>		<i>dilt 240mg er cap</i>	63	<i>divalproex sodium 500mg</i>	25
DIAZEPAM	22	<i>diltiazem 120mg er (12</i>	63	<i>dr tab</i>	
2.5MG/0.5ML RECTAL		<i>hr) cap</i>		<i>divalproex sodium 500mg</i>	25
GEL		<i>diltiazem 120mg er (24</i>	63	<i>er tab</i>	
<i>diazepam 20mg/4ml</i>	22	<i>hr) cap</i>		<i>dofetilide 125mcg cap</i>	18
<i>rectal gel</i>		<i>diltiazem 120mg tab</i>	63	<i>dofetilide 250mcg cap</i>	18
<i>diazepam 2mg tab</i>	17	<i>diltiazem 180mg er (24hr)</i>	63	<i>dofetilide 500mcg cap</i>	18
<i>diazepam 5mg tab</i>	17	<i>cap</i>		<i>donepezil 10mg odt</i>	91
<i>diazepam 5mg/ml oral</i>	17	<i>diltiazem 240mg er (24hr)</i>	63	<i>donepezil 10mg tab</i>	91
<i>soln</i>		<i>cap</i>		<i>donepezil 23mg tab</i>	91
<i>diazoxide 50mg/ml susp</i>	29	<i>diltiazem 300mg er (24hr)</i>	63	<i>donepezil 5mg odt</i>	91
<i>diclofenac potassium</i>	12	<i>cap</i>		<i>donepezil 5mg tab</i>	91
<i>50mg tab</i>		<i>diltiazem 30mg tab</i>	63	DOPTELET 20MG TAB	79
<i>diclofenac sodium 0.1%</i>	88	<i>diltiazem 360mg cd cap</i>	63	DOPTELET TAB 40MG	79
<i>ophth soln</i>		<i>diltiazem 420mg er cap</i>	63	DAILY DOSE PACK	
<i>diclofenac sodium 1.5%</i>	12	<i>diltiazem 60mg er cap</i>	63	DOPTELET TAB 60MG	79
<i>topical soln</i>		<i>diltiazem 60mg tab</i>	63	DAILY DOSE PACK	
<i>diclofenac sodium 100mg</i>	12	<i>diltiazem 90mg er cap</i>	63	<i>dorzolamide 2% ophth</i>	88
<i>er tab</i>		<i>diltiazem 90mg tab</i>	63	<i>soln</i>	
<i>diclofenac sodium 25mg</i>	12	<i>dimethyl fumarate 120mg</i>	92	<i>dorzolamide/timolol</i>	87
<i>dr tab</i>		<i>dr cap</i>		<i>22.3-6.8mg/ml ophth soln</i>	
<i>diclofenac sodium 3% gel</i>	69	<i>dimethyl fumarate</i>	92	<i>dorzolamide/timolol</i>	87
<i>diclofenac sodium 50mg</i>	12	<i>120mg/240mg cap starter</i>		<i>22.3-6.8mg/ml ophth soln</i>	
<i>dr tab</i>		<i>pack (60)</i>		<i>(preservative-free)</i>	
<i>diclofenac sodium 75mg</i>	12	<i>dimethyl fumarate 240mg</i>	92	DOVATO 50-300MG TAB	59
<i>dr tab</i>		<i>dr cap</i>		<i>doxazosin 1mg tab</i>	36
<i>dicloxacillin 250mg cap</i>	90			<i>doxazosin 2mg tab</i>	36

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

ALPHABETICAL LISTING OF DRUGS

<i>doxazosin 4mg tab</i>	36	DRYSOL SOLN	72	<i>efavirenz/lamivudine/teno</i>	59
<i>doxazosin 8mg tab</i>	36	DULERA 100-5MCG	20	<i>fovir disoproxil fumarate</i>	
<i>doxepin 100mg cap</i>	28	INHALER		<i>600-300-300mg tab</i>	
<i>doxepin 10mg cap</i>	28	DULERA 100-5MCG	20	ELECTROLYTE-148	82
<i>doxepin 10mg/ml oral soln</i>	28	INHALER 8.8GM		SOLUTION	
<i>doxepin 150mg cap</i>	28	DULERA 200-5MCG	20	<i>electrolyte-a solution</i>	82
<i>doxepin 25mg cap</i>	28	INHALER		ELIGARD 22.5MG INJ	43
<i>doxepin 50mg cap</i>	28	DULERA 200-5MCG	20	ELIGARD 30MG INJ	43
<i>doxepin 75mg cap</i>	28	INHALER 8.8GM		ELIGARD 45MG INJ	43
<i>doxy 100mg inj</i>	95	DULERA 50-5MCG	20	ELIGARD 7.5MG INJ	43
<i>doxycycline hyclate</i>	95	INHALER		ELIQUIS 2.5MG TAB	21
<i>100mg cap</i>		<i>duloxetine 20mg dr cap</i>	27	ELIQUIS 5MG 30-DAY	21
<i>doxycycline hyclate</i>	95	<i>duloxetine 30mg dr cap</i>	27	STARTER PACK (74)	
<i>100mg tab</i>		<i>duloxetine 60mg dr cap</i>	27	ELIQUIS 5MG TAB	21
<i>doxycycline hyclate 20mg tab</i>	95	DUPIXENT	18	ELMIRON 100MG CAP	78
<i>doxycycline hyclate 50mg cap</i>	95	100MG/0.67ML		<i>eluryng</i>	75
<i>doxycycline monohydrate</i>	95	SYRINGE		<i>0.120-0.015mg/24hr</i>	
<i>100mg tab</i>		DUPIXENT	18	<i>vaginal system</i>	
<i>doxycycline monohydrate</i>	95	200MG/1.14ML		EMGALITY 100MG/ML	82
<i>50mg cap</i>		AUTO-INJECTOR		INJ	
<i>doxycycline monohydrate</i>	95	DUPIXENT	18	EMGALITY 120MG/ML	82
<i>100mg tab</i>		200MG/1.14ML		AUTO-INJECTOR	
<i>doxycycline monohydrate</i>	95	SYRINGE		EMGALITY 120MG/ML	82
<i>50mg cap</i>		DUPIXENT 300MG/2ML	18	INJ	
<i>doxycycline monohydrate</i>	95	AUTO-INJECTOR		EMSAM 12MG/24HR	26
<i>50mg tab</i>		DUPIXENT 300MG/2ML	18	PATCH	
<i>doxycycline monohydrate</i>	95	SYRINGE		EMSAM 6MG/24HR	26
<i>5mg/ml susp</i>		<i>dutasteride 0.5mg cap</i>	78	PATCH	
DRIZALMA 20MG DR	27			EMSAM 9MG/24HR	26
SPRINKLE CAP		E		PATCH	
DRIZALMA 30MG DR	27	<i>econazole nitrate 1%</i>	69	<i>emtricitabine 200mg cap</i>	59
SPRINKLE CAP		<i>cream</i>		<i>emtricitabine/tenofovir</i>	59
DRIZALMA 40MG DR	27	EDEX 10MCG INJ KIT	65	<i>disoproxil fumarate</i>	
SPRINKLE CAP		EDEX 20MCG INJ KIT	65	<i>100-150mg tab</i>	
DRIZALMA 60MG DR	27	EDEX 40MCG INJ KIT	65	<i>emtricitabine/tenofovir</i>	59
SPRINKLE CAP		EDEX INJ	65	<i>disoproxil fumarate</i>	
<i>dronabinol 10mg cap</i>	32	EDURANT 25MG TAB	59	<i>133-200mg tab</i>	
<i>dronabinol 2.5mg cap</i>	32	<i>efavirenz 600mg tab</i>	59	<i>emtricitabine/tenofovir</i>	59
<i>dronabinol 5mg cap</i>	32	<i>efavirenz/emtricitabine/te</i>	59	<i>disoproxil fumarate</i>	
DROXIA 200MG CAP	79	<i>nofovir disoproxil</i>		<i>167-250mg tab</i>	
DROXIA 300MG CAP	79	<i>fumarate 600-200-300mg</i>		<i>emtricitabine/tenofovir</i>	59
DROXIA 400MG CAP	79	<i>tab</i>		<i>disoproxil fumarate</i>	
<i>droxidopa 100mg cap</i>	64	<i>efavirenz/lamivudine/teno</i>	59	<i>200-300mg tab</i>	
<i>droxidopa 200mg cap</i>	64	<i>fovir disoproxil fumarate</i>			
<i>droxidopa 300mg cap</i>	64	<i>400-300-300mg tab</i>			

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

ALPHABETICAL LISTING OF DRUGS

EMTRIVA 10MG/ML ORAL SOLN	59	<i>enoxaparin sodium</i> 80mg/0.8ml syringe	21	<i>erythromycin 333mg dr</i> <i>tab</i>	38
<i>enalapril maleate 10mg</i> <i>tab</i>	35	<i>entacapone 200mg tab</i>	53	<i>erythromycin 500mg dr</i> <i>tab</i>	39
<i>enalapril maleate 2.5mg</i> <i>tab</i>	35	<i>entecavir 0.5mg tab</i>	61	<i>erythromycin 500mg tab</i>	39
<i>enalapril maleate 20mg</i> <i>tab</i>	35	<i>entecavir 1mg tab</i>	61	<i>erythromycin</i>	39
<i>enalapril maleate 5mg</i> <i>tab</i>	35	ENTRESTO 24-26MG TAB	64	<i>ethylsuccinate 40mg/ml</i> <i>susp</i>	
<i>enalapril</i> <i>maleate/hydrochlorothiaz</i> <i>ide 10-25mg tab</i>	37	ENTRESTO 49-51MG TAB	64	<i>erythromycin</i>	39
<i>enalapril</i> <i>maleate/hydrochlorothiaz</i> <i>ide 5-12.5mg tab</i>	37	ENTRESTO 97-103MG TAB	64	<i>ethylsuccinate 80mg/ml</i> <i>susp</i>	
ENBREL 25MG INJ	12	<i>enulose 10gm/15ml oral</i> <i>soln</i>	77	<i>escitalopram 10mg tab</i>	26
ENBREL 25MG/0.5ML INJ	12	ENVARUSUS 0.75MG ER TAB	85	<i>escitalopram 1mg/ml oral</i> <i>soln</i>	26
ENBREL 25MG/0.5ML SYRINGE	12	ENVARUSUS 1MG ER TAB	85	<i>escitalopram 20mg tab</i>	26
ENBREL 50MG/ML AUTO-INJECTOR	12	ENVARUSUS 4MG ER TAB	85	<i>escitalopram 5mg tab</i>	26
ENBREL 50MG/ML CARTRIDGE	12	EPIDIOLEX 100MG/ML ORAL SOLN	23	<i>esomeprazole 20mg dr</i> <i>cap (rx only)</i>	97
ENBREL 50MG/ML SYRINGE	12	<i>epinephrine</i> 0.15mg/0.3ml <i>auto-injector (2 pack)</i>	20	<i>esomeprazole 40mg dr</i> <i>cap</i>	97
ENGERIX-B 10MCG/0.5ML INJ	98	<i>epinephrine 0.3mg/0.3ml</i> <i>auto-injector (2 pack)</i>	20	<i>estarylla 28 day pack</i> <i>esterified</i>	75 76
ENGERIX-B 20MCG/ML INJ	98	<i>eplerenone 25mg tab</i>	37	<i>estrogens/methyltestoster</i> <i>one tab</i>	
<i>enoxaparin sodium</i> 100mg/1ml syringe	21	<i>eplerenone 50mg tab</i>	37	<i>estradiol 0.01% vaginal</i> <i>cream</i>	99
<i>enoxaparin sodium</i> 120mg/0.8ml syringe	21	EPRONTIA 25MG/ML ORAL SOLN	23	<i>estradiol 0.01mg vaginal</i> <i>insert</i>	99
<i>enoxaparin sodium</i> 150mg/1ml syringe	21	ERIVEDGE 150MG CAP	42	<i>estradiol 0.025mg/24hr</i> <i>twice weekly patch</i>	76
<i>enoxaparin sodium</i> 30mg/0.3ml syringe	21	ERLEADA 240MG TAB	43	<i>estradiol 0.025mg/24hr</i> <i>weekly patch</i>	76
<i>enoxaparin sodium</i> 40mg/0.4ml syringe	21	ERLEADA 60MG TAB	43	<i>estradiol 0.0375mg/24hr</i> <i>twice weekly patch</i>	76
<i>enoxaparin sodium</i> 60mg/0.6ml syringe	21	<i>erlotinib 100mg tab</i>	42	<i>estradiol 0.0375mg/24hr</i> <i>weekly patch</i>	76
		<i>erlotinib 150mg tab</i>	42	<i>estradiol 0.05mg/24hr</i> <i>twice weekly patch</i>	76
		<i>ertapenem 1000mg inj</i>	40	<i>estradiol 0.05mg/24hr</i> <i>weekly patch</i>	76
		ERVEBO INJ	99	<i>estradiol 0.075mg/24hr</i> <i>twice weekly patch</i>	76
		ERY 2% PAD	68		
		<i>ery-tab 250mg dr tab</i>	38		
		<i>erythromycin 0.5% ophth</i> <i>ointment</i>	87		
		<i>erythromycin 2% gel</i>	68		
		<i>erythromycin 2% topical</i> <i>soln</i>	68		
		<i>erythromycin 250mg tab</i>	38		

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

ALPHABETICAL LISTING OF DRUGS

<i>estradiol 0.075mg/24hr weekly patch</i>	76	<i>ethinyl estradiol/inert ingredients/levonorgestre</i>	75	FANAPT 4MG TAB	55
<i>estradiol 0.1mg/24hr twice weekly patch</i>	76	<i>l 0.02-1-0.1mg 21 day pack</i>		FANAPT 6MG TAB	55
<i>estradiol 0.1mg/24hr weekly patch</i>	76	<i>ethosuximide 250mg cap</i>	25	FANAPT 8MG TAB	55
<i>estradiol 0.5mg tab</i>	76	<i>ethosuximide 50mg/ml oral soln</i>	25	FANAPT TITRATION PACK	55
<i>estradiol 1mg tab</i>	76	<i>etodolac 200mg cap</i>	12	FARXIGA 10MG TAB	31
<i>estradiol 2mg tab</i>	76	<i>etodolac 300mg cap</i>	12	FARXIGA 5MG TAB	31
<i>estradiol valerate 10mg/ml inj</i>	76	<i>etodolac 400mg tab</i>	12	FASENRA 10MG/0.5ML SYRINGE	18
<i>estradiol valerate 20mg/ml inj</i>	76	<i>etodolac 500mg tab</i>	12	FASENRA 30MG/ML	18
<i>estradiol valerate 40mg/ml inj</i>	76	ETOPOSIDE CAP	53	FASENRA 30MG/ML SYRINGE	18
<i>estradiol/norethindrone acetate 1-0.5mg 28-day pack</i>	75	<i>etravirine 100mg tab</i>	59	<i>febuxostat 40mg tab</i>	78
<i>eszopiclone 1mg tab</i>	80	<i>etravirine 200mg tab</i>	59	<i>febuxostat 80mg tab</i>	78
<i>eszopiclone 2mg tab</i>	80	<i>everolimus 0.25mg tab</i>	85	<i>felbamate 120mg/ml susp</i>	25
<i>eszopiclone 3mg tab</i>	80	<i>everolimus 0.5mg tab</i>	85	<i>felbamate 400mg tab</i>	25
<i>ethambutol 100mg tab</i>	40	<i>everolimus 0.75mg tab</i>	85	<i>felbamate 600mg tab</i>	25
<i>ethambutol 400mg tab</i>	40	<i>everolimus 10mg tab</i>	45	<i>felodipine 10mg er tab</i>	63
<i>ethinyl estradiol 0.02mg/inert ingredients 1mg/levonorgestrel 0.1mg pack</i>	75	<i>everolimus 1mg tab</i>	85	<i>felodipine 2.5mg er tab</i>	63
<i>ethinyl estradiol 0.035mg/ethynodiol 1mg 28 day pack</i>	75	<i>everolimus 2.5mg tab</i>	45	<i>felodipine 5mg er tab</i>	63
<i>ethinyl estradiol 0.035mg/inert/norgestimate 0.18mg/0.215mg/0.25mg pack</i>	75	<i>everolimus 3mg tab for oral susp</i>	45	<i>fenofibrate 134mg cap</i>	34
<i>ethinyl estradiol 0.03mg/inert ingredients 1mg/levonorgestrel 0.15mg pack</i>	75	<i>everolimus 5mg tab</i>	45	<i>fenofibrate 145mg tab</i>	34
<i>ethinyl estradiol 0.05mg/ethynodiol 1mg/inert ingredients 1mg 28 day pack</i>	75	<i>everolimus 5mg tab for oral susp</i>	46	<i>fenofibrate 160mg tab</i>	34
		<i>everolimus 7.5mg tab</i>	46	<i>fenofibrate 200mg cap</i>	34
		EVOTAZ 300-150MG TAB	59	<i>fenofibrate 48mg tab</i>	34
		EVRYSDI 0.75MG/ML ORAL SOLN	87	<i>fenofibrate 54mg tab</i>	34
		<i>exemestane 25mg tab</i>	43	<i>fenofibrate 67mg cap</i>	34
		<i>ezetimibe 10mg tab</i>	33	<i>fenofibric acid 135mg dr cap</i>	34
		F		<i>fenofibric acid 45mg dr cap</i>	34
		<i>famciclovir 125mg tab</i>	61	<i>fentanyl 100mcg/hr patch</i>	13
		<i>famciclovir 250mg tab</i>	61	<i>fentanyl 1200mcg lozenge</i>	13
		<i>famciclovir 500mg tab</i>	61	FENTANYL 1200MCG LOZENGE ON A HANDLE	13
		<i>famotidine 20mg tab</i>	97	<i>fentanyl 12mcg/hr patch</i>	13
		<i>famotidine 40mg tab</i>	97	<i>fentanyl 1600mcg lozenge</i>	13
		FANAPT 10MG TAB	55	FENTANYL 1600MCG LOZENGE ON A HANDLE	13
		FANAPT 12MG TAB	55	<i>fentanyl 200mcg lozenge</i>	13
		FANAPT 1MG TAB	55		
		FANAPT 2MG TAB	55		

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

ALPHABETICAL LISTING OF DRUGS

FENTANYL 200MCG LOZENGE ON A HANDLE	13	<i>fluconazole 10mg/ml susp</i>	33	<i>fluorouracil 5% topical solution</i>	69
<i>fentanyl 25mcg/hr patch</i>	14	<i>fluconazole 150mg tab</i>	33	<i>fluoxetine 10mg cap</i>	26
<i>fentanyl 400mcg lozenge</i>	14	<i>fluconazole 200mg tab</i>	33	<i>fluoxetine 20mg cap</i>	26
FENTANYL 400MCG LOZENGE ON A HANDLE	14	<i>fluconazole 2mg/ml (100ml) inj</i>	33	<i>fluoxetine 40mg cap</i>	26
<i>fentanyl 50mcg/hr patch</i>	14	<i>fluconazole 2mg/ml (200ml) inj</i>	33	<i>fluoxetine 4mg/ml oral soln</i>	26
<i>fentanyl 600mcg lozenge</i>	14	<i>fluconazole 40mg/ml susp</i>	33	<i>fluoxetine 60mg tab</i>	26
FENTANYL 600MCG LOZENGE ON A HANDLE	14	<i>fluconazole 50mg tab</i>	33	FLUPHENAZINE	57
<i>fentanyl 75mcg/hr patch</i>	14	<i>flucytosine 250mg cap</i>	32	0.5MG/ML ORAL SOLN	
<i>fentanyl 800mcg lozenge</i>	14	<i>flucytosine 500mg cap</i>	32	<i>fluphenazine 10mg tab</i>	57
FENTANYL 800MCG LOZENGE ON A HANDLE	14	<i>fludrocortisone 0.1mg tab</i>	67	<i>fluphenazine 1mg tab</i>	57
<i>ferrex forte cap</i>	79	<i>flunisolide 25mcg/act nasal inhaler</i>	86	<i>fluphenazine 2.5mg tab</i>	57
<i>fesoterodine fumarate 4mg er tab</i>	98	<i>fluocinolone acetonide 0.01% body oil</i>	70	FLUPHENAZINE	57
<i>fesoterodine fumarate 8mg er tab</i>	98	<i>fluocinolone acetonide 0.01% cream</i>	70	5MG/ML ORAL SOLN	
FETZIMA 120MG ER CAP	27	<i>fluocinolone acetonide 0.01% otic soln</i>	89	<i>fluphenazine decanoate 25mg/ml inj</i>	58
FETZIMA 20MG ER CAP	27	<i>fluocinolone acetonide 0.01% topical soln</i>	70	<i>flurbiprofen 100mg tab</i>	13
FETZIMA 40MG ER CAP	27	<i>fluocinolone acetonide 0.025% cream</i>	70	FLURBIPROFEN	89
FETZIMA 80MG ER CAP	27	<i>fluocinolone acetonide 0.025% ointment</i>	70	SODIUM 0.03% OPHTH SOLN	
FETZIMA PACK	27	<i>fluocinolone acetonide 0.1mg/ml oil</i>	70	<i>fluticasone propionate 0.005% ointment</i>	71
<i>finasteride 5mg tab</i>	78	<i>fluocinonide 0.05% cream</i>	71	<i>fluticasone propionate 0.05% cream</i>	71
<i>fingolimod 0.5mg cap</i>	93	<i>fluocinonide 0.05% e cream</i>	71	FLUTICASONE	19
FINTEPLA 2.2MG/ML ORAL SOLN	23	<i>fluocinonide 0.05% gel</i>	71	PROPIONATE 110MCG INHALER	
FIRDAPSE 10MG TAB	40	FLUOCINONIDE 0.05% GEL	71	FLUTICASONE	19
FIRMAGON 120MG INJ	43	<i>fluocinonide 0.05% ointment</i>	71	PROPIONATE 220MCG INHALER	
FIRMAGON 80MG INJ	43	<i>fluocinonide 0.05% topical soln</i>	71	FLUTICASONE	19
<i>flavoxate 100mg tab</i>	98	<i>fluocinonide 0.1% cream</i>	71	PROPIONATE 44MCG INHALER	
<i>flecainide acetate 100mg tab</i>	18	<i>fluorometholone 0.1% ophth susp</i>	88	<i>fluticasone propionate 50mcg/act nasal inhaler</i>	86
<i>flecainide acetate 150mg tab</i>	18	FLUOROURACIL 2% TOPICAL SOLN	69	<i>fluticasone propionate/salmeterol 100-50mcg/act dry powder inhaler, wixela 100-50mcg inhaler</i>	20
<i>flecainide acetate 50mg tab</i>	18	<i>fluorouracil 5% cream</i>	69		

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

ALPHABETICAL LISTING OF DRUGS

<i>fluticasone</i>	20	FOTIVDA 0.89MG CAP	46	<i>gabapentin 600mg tab</i>	23
<i>propionate/salmeterol</i>		FOTIVDA 1.34MG CAP	46	<i>(Neurontin equiv)</i>	
<i>250-50mcg/act dry</i>		FREESTYLE LIBRE 2	81	<i>gabapentin 800mg tab</i>	23
<i>powder inhaler, wixela</i>		RECEIVER		<i>galantamine 12mg tab</i>	91
<i>250-50mcg inhaler</i>		FREESTYLE LIBRE 2	81	<i>galantamine 4mg tab</i>	91
<i>fluticasone</i>	20	SENSOR		<i>galantamine 8mg tab</i>	91
<i>propionate/salmeterol</i>		FREESTYLE LIBRE 3	81	<i>galantamine</i>	91
<i>500-50mcg/act dry</i>		READER		<i>hydrobromide 16mg er</i>	
<i>powder inhaler, wixela</i>		FREESTYLE LIBRE 3	81	<i>cap</i>	
<i>500-50mcg inhaler</i>		SENSOR		<i>galantamine</i>	91
<i>fluvoxamine maleate</i>	26	FREESTYLE LIBRE	81	<i>hydrobromide 24mg er</i>	
<i>100mg tab</i>		RECEIVER		<i>cap</i>	
<i>fluvoxamine maleate</i>	26	FREESTYLE LIBRE	81	GALANTAMINE	91
<i>25mg tab</i>		SENSOR (14-DAY)		HYDROBROMIDE	
<i>fluvoxamine maleate</i>	26	FRUZAQLA 1MG CAP	41	4MG/ML ORAL SOLN	
<i>50mg tab</i>		FRUZAQLA 5MG CAP	41	<i>galantamine</i>	91
FOLBEE PLUS CZ TAB	86	FUROSCIX 80MG/10ML	73	<i>hydrobromide 8mg er cap</i>	
<i>folbee tab</i>	79	CARTRIDGE		GAMUNEX 1GM/10ML	89
<i>folic acid tab 1mg</i>	79	<i>furosemide 10mg/ml inj</i>	73	INJ	
<i>folic acid tab 400mcg</i>	79	<i>furosemide 10mg/ml oral</i>	73	GAMUNEX-C	89
<i>folic acid tab 800mcg</i>	79	<i>soln</i>		40GM/400ML INJ	
<i>fondaparinux sodium</i>	21	<i>furosemide 20mg tab</i>	73	GARDASIL 9 INJ	99
<i>12.5mg/ml (0.4ml) inj</i>		<i>furosemide 40mg tab</i>	73	GARDASIL 9 SYRINGE	99
<i>fondaparinux sodium</i>	21	<i>furosemide 80mg tab</i>	73	GATTEX 5MG INJ	77
<i>12.5mg/ml (0.6ml) inj</i>		FUROSEMIDE 8MG/ML	73	GAUZE PADS	81
<i>fondaparinux sodium</i>	21	ORAL SOLN		DRESSINGS - PADS 2 X 2	
<i>12.5mg/ml (0.8ml) inj</i>		FUZEON 90MG INJ	59	GAVILYTE-C ORAL	80
<i>fondaparinux sodium</i>	21	<i>fyavolv 0.0025-0.5mg tab</i>	75	SOLN	
<i>5mg/ml (0.5mg) inj</i>		<i>fyavolv 0.005-1mg tab</i>	76	<i>gavilyte-g powder for</i>	80
<i>fosamprenavir 700mg tab</i>	59	FYCOMPA 0.5MG/ML	23	<i>oral soln</i>	
<i>fosfomycin 3000mg</i>	40	SUSP		<i>gavilyte-n powder for</i>	80
<i>powder for oral soln</i>		FYCOMPA 10MG TAB	23	<i>oral soln</i>	
<i>fosinopril sodium 10mg</i>	35	FYCOMPA 12MG TAB	23	GAVRETO 100MG CAP	46
<i>tab</i>		FYCOMPA 2MG TAB	23	<i>gefitinib 250mg tab</i>	42
<i>fosinopril sodium 20mg</i>	35	FYCOMPA 4MG TAB	23	<i>gemfibrozil 600mg tab</i>	34
<i>tab</i>		FYCOMPA 6MG TAB	23	<i>gentamicin 0.1% cream</i>	69
<i>fosinopril sodium 40mg</i>	35	FYCOMPA 8MG TAB	23	<i>gentamicin 0.1% ointment</i>	69
<i>tab</i>				<i>gentamicin 0.3% ophth</i>	87
<i>fosinopril</i>	37	G		<i>soln</i>	
<i>sodium/hydrochlorothiazide</i>		<i>gabapentin 100mg cap</i>	23	GENTAMICIN 0.8MG/ML	11
<i>de 10-12.5mg tab</i>		<i>gabapentin 300mg cap</i>	23	INJ	
<i>fosinopril</i>	37	<i>gabapentin 400mg cap</i>	23	<i>gentamicin 1.2mg/ml inj</i>	11
<i>sodium/hydrochlorothiazide</i>		<i>gabapentin 50mg/ml oral</i>	23	GENTAMICIN 1.6MG/ML	11
<i>de 20-12.5mg tab</i>		<i>soln</i>		INJ	

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

ALPHABETICAL LISTING OF DRUGS

GENTAMICIN 1MG/ML INJ	11	<i>glucose</i>	83	GLYXAMBI 10-5MG TAB	29
<i>gentamicin 40mg/ml inj</i>	11	<i>50mg/ml/potassium chloride 0.02 meq/ml inj</i>		GLYXAMBI 25-5MG TAB	29
GENVOYA	59	<i>glucose</i>	83	<i>granisetron 1mg tab</i>	32
150-150-200-10MG TAB		<i>50mg/ml/potassium chloride 0.02 meq/ml/sodium chloride</i>		<i>griseofulvin 125mg tab</i>	33
GILOTRIF 20MG TAB	42	<i>0.0342 meq/ml inj</i>		<i>griseofulvin 250mg tab</i>	33
GILOTRIF 30MG TAB	42	<i>glucose</i>	83	<i>griseofulvin 25mg/ml susp</i>	33
GILOTRIF 40MG TAB	42	<i>50mg/ml/potassium chloride 0.02 meq/ml/sodium chloride</i>		<i>griseofulvin 500mg tab</i>	33
<i>glatiramer acetate 20mg/ml syringe</i>	93	<i>0.154 meq/ml inj</i>		<i>guaifenesin/codeine syrup</i>	67
<i>glatiramer acetate 40mg/ml syringe</i>	93	<i>glucose</i>	83	GUAIFENESIN/CODEINE SYRUP	67
GLEOSTINE 100MG CAP	41	<i>chloride 0.02 meq/ml/sodium chloride</i>		<i>guanfacine 1mg er tab</i>	10
GLEOSTINE 10MG CAP	41	<i>0.02meq/ml/sodium chloride 4.5mg/ml inj</i>	83	<i>guanfacine 1mg tab</i>	36
GLEOSTINE 40MG CAP	41	<i>glucose</i>	83	<i>guanfacine 2mg er tab</i>	10
<i>glimepiride 1mg tab</i>	31	<i>50mg/ml/potassium chloride</i>		<i>guanfacine 2mg tab</i>	36
<i>glimepiride 2mg tab</i>	31	<i>0.02meq/ml/sodium chloride 4.5mg/ml inj</i>		<i>guanfacine 3mg er tab</i>	10
<i>glimepiride 4mg tab</i>	31	<i>glucose</i>	83	<i>guanfacine 4mg er tab</i>	10
<i>glipizide 10mg er tab</i>	31	<i>50mg/ml/potassium chloride 0.03 meq/ml/sodium chloride</i>		GVOKE 0.5MG/0.1ML AUTO-INJECTOR	29
<i>glipizide 10mg tab</i>	31	<i>0.0769 meq/ml inj</i>		GVOKE 1MG/0.2ML AUTO-INJECTOR	29
<i>glipizide 2.5mg er tab</i>	31	<i>glucose 50mg/ml/sodium chloride 0.0342 meq/ml inj</i>	83	GVOKE 1MG/0.2ML INJ	29
<i>glipizide 5mg er tab</i>	31	<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	83	GVOKE 1MG/0.2ML SYRINGE	29
<i>glipizide 5mg tab</i>	31	<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	83	H	
<i>glipizide/metformin 2.5-250mg tab</i>	28	<i>glyburide 1.25mg tab</i>	31	HADLIMA 40MG/0.4ML AUTO-INJECTOR	12
<i>glipizide/metformin 2.5-500mg tab</i>	29	GLYBURIDE 1.5MG TAB	31	HADLIMA 40MG/0.4ML SYRINGE	12
<i>glipizide/metformin 5-500mg tab</i>	29	<i>glyburide 2.5mg tab</i>	31	HADLIMA 40MG/0.8ML AUTO-INJECTOR	12
<i>glucose 100mg/ml inj</i>	87	GLYBURIDE 3MG TAB	31	HADLIMA 40MG/0.8ML SYRINGE	12
GLUCOSE	82	<i>glyburide 5mg tab</i>	31	HAEGARDA 2000UNIT INJ	80
25MG/ML/SODIUM CHLORIDE 0.0769 MEQ/ML INJ		GLYBURIDE 6MG TAB	31	HAEGARDA 3000UNIT INJ	80
<i>glucose 50 mg/ml/potassium chloride 0.04meq/ml/sodium chloride 4.5mg/ml inj</i>	82	<i>glyburide/metformin 1.25-250mg tab</i>	29	<i>halobetasol propionate 0.05% cream</i>	71
<i>glucose 50mg/ml inj</i>	87	<i>glyburide/metformin 2.5-500mg tab</i>	29	<i>halobetasol propionate 0.05% ointment</i>	71
<i>glucose 50mg/ml/potassium chloride 0.01 meq/ml/sodium chloride 0.0769 meq/ml inj</i>	83	<i>glycopyrrolate 1mg tab</i>	97	<i>haloperidol 0.5mg tab</i>	54
		<i>glycopyrrolate 2mg tab</i>	97	<i>haloperidol 10mg tab</i>	54

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

ALPHABETICAL LISTING OF DRUGS

<i>haloperidol 1mg tab</i>	54	HUMULIN	30	<i>hydrochlorothiazide/losar</i>	37
<i>haloperidol 20mg tab</i>	54	70-30UNIT/ML INJ		<i>tan potassium 25-100mg</i>	
<i>haloperidol 2mg tab</i>	54	HUMULIN	31	<i>tab</i>	
<i>haloperidol 2mg/ml oral</i>	54	70-30UNIT/ML PEN INJ		<i>hydrochlorothiazide/meto</i>	37
<i>soln</i>		HUMULIN N	31	<i>prolol tartrate 25-100mg</i>	
<i>haloperidol 5mg tab</i>	55	100UNIT/ML INJ		<i>tab</i>	
<i>haloperidol 5mg/ml inj</i>	55	HUMULIN N	31	<i>hydrochlorothiazide/meto</i>	37
<i>haloperidol decanoate</i>	55	100UNIT/ML PEN INJ		<i>prolol tartrate 25-50mg</i>	
<i>100mg/ml inj</i>		HUMULIN R	31	<i>tab</i>	
<i>haloperidol decanoate</i>	55	100UNIT/ML INJ		<i>hydrochlorothiazide/meto</i>	37
<i>50mg/ml inj</i>		HUMULIN R	31	<i>prolol tartrate 50-100mg</i>	
HAVRIX 1440ELU/ML	99	500UNIT/ML INJ		<i>tab</i>	
INJ		HUMULIN R	31	<i>hydrochlorothiazide/olme</i>	37
HAVRIX 720ELU/0.5ML	99	500UNIT/ML PEN INJ		<i>sartan medoxomil</i>	
INJ		HYCAMTIN CAP	53	<i>12.5-20mg tab</i>	
<i>heparin sodium</i>	21	<i>hydralazine 100mg tab</i>	37	<i>hydrochlorothiazide/olme</i>	37
<i>5000unit/0.5ml inj (PF)</i>		<i>hydralazine 10mg tab</i>	37	<i>sartan medoxomil</i>	
<i>heparin sodium porcine</i>	21	<i>hydralazine 25mg tab</i>	37	<i>12.5-40mg tab</i>	
<i>10000unit/ml inj</i>		<i>hydralazine 50mg tab</i>	38	<i>hydrochlorothiazide/olme</i>	37
<i>heparin sodium porcine</i>	21	<i>hydrochlorothiazide</i>	73	<i>sartan medoxomil</i>	
<i>1000unit/ml inj</i>		<i>12.5mg cap</i>		<i>25-40mg tab</i>	
<i>heparin sodium porcine</i>	21	<i>hydrochlorothiazide</i>	73	<i>hydrochlorothiazide/spiro</i>	73
<i>20000unit/ml inj</i>		<i>12.5mg tab</i>		<i>nolactone 25-25mg tab</i>	
<i>heparin sodium porcine</i>	21	<i>hydrochlorothiazide</i>	73	<i>hydrochlorothiazide/tria</i>	73
<i>5000unit/ml inj</i>		<i>25mg tab</i>		<i>mterene 25-37.5mg cap</i>	
HEPLISAV-B	99	<i>hydrochlorothiazide</i>	73	<i>hydrochlorothiazide/tria</i>	73
20MCG/0.5ML SYRINGE		<i>50mg tab</i>		<i>mterene 25-37.5mg tab</i>	
HIBERIX 10MCG INJ	98	<i>hydrochlorothiazide/irbes</i>	37	<i>hydrochlorothiazide/tria</i>	73
HOMATROPINE OPHTH	89	<i>artan 12.5-150mg tab</i>		<i>mterene 50-75mg tab</i>	
SOLN		<i>hydrochlorothiazide/irbes</i>	37	<i>hydrochlorothiazide/vals</i>	37
HUMALOG 100UNIT/ML	30	<i>artan 12.5-300mg tab</i>		<i>artan 12.5-160mg tab</i>	
CARTRIDGE		<i>hydrochlorothiazide/lisin</i>	37	<i>hydrochlorothiazide/vals</i>	37
HUMALOG 100UNIT/ML	30	<i>opril 12.5-10mg tab</i>		<i>artan 12.5-320mg tab</i>	
KWIKPEN		<i>hydrochlorothiazide/lisin</i>	37	<i>hydrochlorothiazide/vals</i>	37
HUMALOG 200UNIT/ML	30	<i>opril 12.5-20mg tab</i>		<i>artan 12.5-80mg tab</i>	
PEN INJ		<i>hydrochlorothiazide/lisin</i>	37	<i>hydrochlorothiazide/vals</i>	37
HUMALOG JUNIOR	30	<i>opril 25-20mg tab</i>		<i>artan 25-160mg tab</i>	
100UNIT/ML PEN INJ		<i>hydrochlorothiazide/losar</i>	37	<i>hydrochlorothiazide/vals</i>	37
HUMALOG MIX	30	<i>tan potassium</i>		<i>artan 25-320mg tab</i>	
25-75UNIT/ML INJ		<i>12.5-100mg tab</i>		<i>hydrocodone/acetaminop</i>	15
HUMALOG MIX	30	<i>hydrochlorothiazide/losar</i>	37	<i>hen 10-325mg tab</i>	
25-75UNIT/ML PEN INJ		<i>tan potassium 12.5-50mg</i>		<i>hydrocodone/acetaminop</i>	15
HUMALOG MIX	30	<i>tab</i>		<i>hen 5-325mg tab</i>	
50-50UNIT/ML PEN INJ					

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

ALPHABETICAL LISTING OF DRUGS

<i>hydrocodone/acetaminop</i>	15	<i>hydroxychloroquine</i>	40	IMBRUVICA 140MG CAP	46
<i>hen 7.5-325mg tab</i>		<i>g tab</i>		IMBRUVICA 420MG TAB	46
<i>hydrocodone/acetaminop</i>	15	<i>hydroxyurea 500mg cap</i>	52	IMBRUVICA 70MG CAP	46
<i>hen 7.5-325mg/5ml oral</i>		<i>hydroxyzine 10mg tab</i>	17	IMBRUVICA 70MG/ML	46
<i>soln</i>		<i>hydroxyzine 25mg tab</i>	17	SUSP	
HYDROCODONE/CHLO	67	<i>hydroxyzine 2mg/ml oral</i>	17	<i>imipramine 10mg tab</i>	28
RPHENIRAMINE SUSP		<i>soln</i>		<i>imipramine 25mg tab</i>	28
<i>hydrocodone/chlorphenir</i>	67	<i>hydroxyzine 50mg tab</i>	17	<i>imipramine 50mg tab</i>	28
<i>amine susp</i>		HYDROXYZINE	17	<i>imiquimod 5% cream</i>	71
<i>hydrocodone/homatropin</i>	67	PAMOATE 100MG CAP		IMOVAX 2.5UNIT/ML INJ	99
<i>e syrup</i>		<i>hydroxyzine pamoate</i>	17	INCRELEX 40MG/4ML	75
<i>hydrocodone/ibuprofen</i>	15	<i>25mg cap</i>		INJ	
<i>7.5-200mg tab</i>		<i>hydroxyzine pamoate</i>	17	INCRUSE 62.5MCG/INH	18
<i>hydrocortisone 1% cream</i>	71	<i>50mg cap</i>		INHALER	
<i>(RX Only)</i>		<i>hyoscyamine sulfate CR</i>	97	<i>indapamide 1.25mg tab</i>	73
<i>hydrocortisone 1.67mg/ml</i>	16	<i>tab</i>		<i>indapamide 2.5mg tab</i>	73
<i>enema</i>		<i>hyoscyamine sulfate elixir</i>	97	<i>indomethacin 25mg cap</i>	13
<i>hydrocortisone 10mg tab</i>	67	<i>hyoscyamine sulfate ODT</i>	97	<i>indomethacin 50mg cap</i>	13
<i>hydrocortisone 2.5%</i>	16	<i>hyoscyamine sulfate SL</i>	97	<i>indomethacin 75mg er</i>	13
<i>cream</i>		<i>tab</i>		<i>cap</i>	
<i>hydrocortisone 2.5%</i>	71	<i>hyoscyamine sulfate tab</i>	97	INFANRIX INJ	96
<i>lotion</i>		HYPER SAL NEB SOLN	67	INGREZZA 40MG CAP	92
HYDROCORTISONE	71			INGREZZA 40MG	92
2.5% LOTION		I		SPRINKLE CAP	
<i>hydrocortisone 2.5%</i>	71	<i>ibandronate 150mg tab</i>	73	INGREZZA 60MG CAP	92
<i>ointment</i>		IBRANCE 100MG CAP	46	INGREZZA 60MG	92
<i>hydrocortisone 20mg tab</i>	67	IBRANCE 100MG TAB	46	SPRINKLE CAP	
<i>hydrocortisone 5mg tab</i>	67	IBRANCE 125MG CAP	46	INGREZZA 80MG CAP	92
<i>hydrocortisone supp</i>	16	IBRANCE 125MG TAB	46	INGREZZA 80MG	92
HYDROCORTISONE/PRA	16	IBRANCE 75MG CAP	46	SPRINKLE CAP	
MOXINE 2.5-1% RECTAL		IBRANCE 75MG TAB	46	INGREZZA CAP PACK	92
CREAM		<i>ibuprofen 400mg tab</i>	13	INLYTA 1MG TAB	41
<i>hydrocortisone/pramoxin</i>	16	<i>ibuprofen 600mg tab</i>	13	INLYTA 5MG TAB	41
<i>e 2.5-1% rectal cream</i>		<i>ibuprofen 800mg tab</i>	13	INQOVI 5 TABLET PACK	44
<i>hydromorphone 2mg tab</i>	14	<i>icatibant 10mg/ml inj</i>	80	INREBIC 100MG CAP	46
<i>hydromorphone 4mg tab</i>	14	ICLUSIG 10MG TAB	46	INSULIN GLARGINE	31
<i>hydromorphone 8mg tab</i>	14	ICLUSIG 15MG TAB	46	300UNIT/ML PEN INJ	
<i>hydroxychloroquine</i>	40	ICLUSIG 30MG TAB	46	(1.5ML), TOUJEO	
<i>sulfate 200mg tab</i>		ICLUSIG 45MG TAB	46	300UNIT/ML PEN INJ	
<i>hydroxychloroquine</i>	40	<i>icosapent ethyl 0.5gm cap</i>	33	(1.5ML)	
<i>sulfate 300mg tab</i>		<i>icosapent ethyl 1gm cap</i>	33		
<i>hydroxychloroquine</i>	40	IDHIFA 100MG TAB	46		
<i>sulfate 400mg tab</i>		IDHIFA 50MG TAB	46		
		<i>imatinib 100mg tab</i>	46		
		<i>imatinib 400mg tab</i>	46		

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

ALPHABETICAL LISTING OF DRUGS

INSULIN GLARGINE 300UNIT/ML PEN INJ (3ML), TOUJEO MAX 300UNIT/ML PEN INJ (3ML)	31	<i>ipratropium bromide</i> 0.2mg/ml inh soln	19	<i>itraconazole 100mg cap</i>	33
INSULIN LISPRO 100UNIT/ML INJ	31	<i>ipratropium/albuterol</i> 0.5-2.5mg/3ml inh soln	20	<i>ivabradine hcl 5mg tab</i>	64
INSULIN SYRINGE U-500	81	<i>irbesartan 150mg tab</i>	35	<i>ivabradine hcl 7.5mg tab</i>	64
INTELENCE 25MG TAB	59	<i>irbesartan 300mg tab</i>	35	<i>ivermectin 3mg tab</i>	16
INVEGA HAFYERA 1092MG/3.5ML SYRINGE	55	<i>irbesartan 75mg tab</i>	35	IWILFIN 192MG TAB	53
INVEGA HAFYERA 1560MG/5ML SYRINGE	55	ISENTRESS 100MG CHEW TAB	59	IXCHIQ INJ	99
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	55	ISENTRESS 100MG	59	IXIARO 0.012MG/ML INJ	99
INVEGA SUSTENNA 156MG/ML SYRINGE	55	GRANULES FOR ORAL SUSP		J	
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	55	ISENTRESS 25MG CHEW TAB	60	JAKAFI 10MG TAB	47
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	55	ISENTRESS 400MG TAB	60	JAKAFI 15MG TAB	47
INVEGA TRINZA 273MG/0.875ML SYRINGE	55	ISENTRESS 600MG TAB	60	JAKAFI 20MG TAB	47
INVEGA TRINZA 410MG/1.315ML SYRINGE	55	ISONIAZID 100MG TAB	40	JAKAFI 25MG TAB	47
INVEGA TRINZA 546MG/1.75ML SYRINGE	56	<i>isoniazid 10mg/ml oral soln</i>	40	JAKAFI 5MG TAB	47
INVEGA TRINZA 819MG/2.625ML SYRINGE	56	<i>isoniazid 300mg tab</i>	40	JANUMET 1000-100MG ER TAB	29
IPOL INJ	99	<i>isosorbide dinitrate 10mg tab</i>	16	JANUMET 1000-50MG ER TAB	29
<i>ipratropium 0.03% nasal spray</i>	86	<i>isosorbide dinitrate 20mg tab</i>	16	JANUMET 1000-50MG TAB	29
<i>ipratropium 0.06% nasal spray</i>	86	<i>isosorbide dinitrate 30mg tab</i>	16	JANUMET 500-50MG ER TAB	29
		<i>isosorbide dinitrate 5mg tab</i>	16	JANUVIA 100MG TAB	30
		<i>isosorbide mononitrate 10mg tab</i>	16	JANUVIA 25MG TAB	30
		<i>isosorbide mononitrate 120mg er tab</i>	16	JANUVIA 50MG TAB	30
		<i>isosorbide mononitrate 20mg tab</i>	16	JARDIANCE 10MG TAB	31
		<i>isosorbide mononitrate 30mg er tab</i>	16	JARDIANCE 25MG TAB	31
		<i>isosorbide mononitrate 60mg er tab</i>	16	<i>jasmiel 28 day pack</i>	76
		<i>isotretinoin 10mg cap</i>	68	JAYPIRCA 100MG TAB	47
		<i>isotretinoin 20mg cap</i>	68	JAYPIRCA 50MG TAB	47
		<i>isotretinoin 30mg cap</i>	68	JENTADUETO	29
		<i>isotretinoin 40mg cap</i>	68	2.5-1000MG ER TAB	
		<i>isradipine 2.5mg cap</i>	64	JENTADUETO	29
		<i>isradipine 5mg cap</i>	64	2.5-1000MG TAB	
				JENTADUETO	29
				2.5-500MG TAB	
				JENTADUETO 5-1000MG ER TAB	29
				JULUCA 50-25MG TAB	60
				<i>junel fe 1.5/30 28 day pack</i>	76
				JYLAMVO 2MG/ML ORAL SOLN	41

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

ALPHABETICAL LISTING OF DRUGS

JYNNEOS 0.5ML INJ	99	<i>ketoconazole 2% shampoo</i>	69	KOSELUGO 10MG CAP	47
K		<i>ketoconazole 200mg tab</i>	33	KOSELUGO 25MG CAP	47
KALYDECO 13.4MG GRANULES	93	KETO-DIASTIX	72	K-PHOS 500MG TAB	83
KALYDECO 150MG TAB	93	<i>ketorolac tromethamine 0.4% ophth soln</i>	89	KRAZATI 200MG TAB	47
KALYDECO 25MG GRANULES	93	<i>ketorolac tromethamine 0.5% ophth soln</i>	89		
KALYDECO 5.8MG GRANULES	93	<i>ketorolac tromethamine 10mg tab</i>	13	L	
KALYDECO 50MG GRANULES	93	KETOSTIX	72	<i>labetalol 100mg tab</i>	62
KALYDECO 75MG GRANULES	93	KEVZARA	12	<i>labetalol 200mg tab</i>	62
KCL 20 MEQ/L (0.15%) IN NACL 0.45% INJ	83	150MG/1.14ML AUTO-INJECTOR	12	<i>labetalol 300mg tab</i>	62
KCL 20 MEQ/L (0.15%) IN NACL 0.9% INJ	83	KEVZARA	12	<i>lacosamide 100mg tab</i>	23
<i>kcl 40 meq/l (0.3%) in dextrose 5% nacl 0.9% inj</i>	83	150MG/1.14ML SYRINGE	12	<i>lacosamide 10mg/ml oral solution</i>	23
KCL 40 MEQ/L (0.3%) IN DEXTROSE 5% NACL 0.9% INJ	83	KEVZARA	12	<i>lacosamide 150mg tab</i>	23
KCL 40 MEQ/L (0.3%) IN NACL 0.9% INJ	83	200MG/1.14ML AUTO-INJECTOR	12	<i>lacosamide 200mg tab</i>	23
KCL/D5W/LR 0.15% INJ	83	KEVZARA	12	<i>lacosamide 50mg tab</i>	23
<i>kcl/d5w/nacl 20meq/5%/0.225% inj</i>	83	150MG/1.14ML SYRINGE	12	<i>lamivudine 100mg tab</i>	61
KCL/D5W/NACL 20MEQ/5%/0.225% INJ	83	KINRIX INJ	96	<i>lamivudine 10mg/ml oral soln</i>	60
KCL/NACL 20MEQ-0.45% INJ	83	KISQALI 200MG DAILY DOSE PACK	47	<i>lamivudine 150mg tab</i>	60
<i>kcl/nacl 40meq/0.9% inj</i>	83	KISQALI 400MG DAILY DOSE PACK	47	<i>lamivudine 300mg tab</i>	60
KCL/NACL INJ 0.02 MEQ/ML/SODIUM CHLORIDE 0.154 MEQ/ML INJ	83	KISQALI 600MG DAILY DOSE PACK	47	<i>lamivudine/zidovudine 150-300mg tab</i>	60
KCL/NACL INJ 40 MEQ/0.9% INJ	83	KISQALI FEMARA CO-PACK 200 PACK	44	<i>lamotrigine 100mg tab</i>	23
KERENDIA 10MG TAB	75	KISQALI FEMARA CO-PACK 400 PACK	44	<i>lamotrigine 150mg tab</i>	23
KERENDIA 20MG TAB	75	KISQALI FEMARA CO-PACK 600 PACK	44	<i>lamotrigine 200mg tab</i>	23
KESIMPTA 20MG/0.4ML PEN INJ	93	<i>klor-con 10meq er tab</i>	83	<i>lamotrigine 25mg chew tab</i>	23
<i>ketoconazole 2% cream</i>	69	<i>klor-con 10meq micro er tab</i>	83	<i>lamotrigine 25mg tab</i>	23
		<i>klor-con 20meq powder for oral soln</i>	83	<i>lamotrigine 5mg chew tab</i>	23
		<i>klor-con 8meq er tab</i>	84	LANCET DEVICE	81
		KLOXXADO 8MG/0.1ML NASAL SPRAY	32	LANCET KIT	81
				LANCETS	81
				<i>lansoprazole 15mg dr cap</i>	97
				<i>lansoprazole 30mg dr cap</i>	97
				LANTUS 100UNIT/ML INJ	31
				LANTUS SOLOSTAR 100UNIT/ML INJ	31
				<i>lapatinib ditosylate 250mg tab</i>	47
				<i>larin 1.5/30 pack</i>	76
				<i>larin 1/20 pack</i>	76
				<i>latanoprost 0.005% ophth soln</i>	89
				<i>leflunomide 10mg tab</i>	11

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

ALPHABETICAL LISTING OF DRUGS

<i>leflunomide 20mg tab</i>	11	<i>levetiracetam 750mg er tab</i>	23	<i>lidocaine 2% topical soln</i>	68
<i>lenalidomide 10mg cap</i>	84	<i>levetiracetam 750mg tab</i>	23	<i>lidocaine 3% cream (rx only)</i>	71
<i>lenalidomide 15mg cap</i>	84	LEVOBUNOLOL 0.5% OPTH SOLN	87	LIDOCAINE 4% ORAL SOLN	71
<i>lenalidomide 2.5mg cap</i>	84	<i>levocarnitine 100mg/ml oral soln</i>	74	<i>lidocaine 4% topical soln</i>	71
<i>lenalidomide 20mg cap</i>	84	<i>levocarnitine 330mg tab</i>	74	<i>lidocaine 5% ointment</i>	71
<i>lenalidomide 25mg cap</i>	84	<i>levocetirizine 5mg tab</i>	94	<i>lidocaine 5% patch</i>	71
<i>lenalidomide 5mg cap</i>	84	<i>levofloxacin 250mg tab</i>	77	<i>lidocaine/hydrocortisone cream</i>	16
LENVIMA CAP THERAPY PACK (10MG)	41	<i>levofloxacin 25mg/ml oral soln</i>	77	<i>lidocaine/prilocaine 2.5-2.5% cream</i>	71
LENVIMA CAP THERAPY PACK (12MG)	41	<i>levofloxacin 500mg tab</i>	77	LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	91
LENVIMA CAP THERAPY PACK (14MG)	42	<i>levofloxacin 5mg/ml (100ml) inj</i>	77	<i>linezolid 20mg/ml susp</i>	39
LENVIMA CAP THERAPY PACK (18MG)	42	<i>levofloxacin 5mg/ml (150ml) inj</i>	77	LINEZOLID 2MG/ML INJ	39
LENVIMA CAP THERAPY PACK (20MG)	42	<i>levofloxacin 750mg tab</i>	77	<i>linezolid 2mg/ml inj</i>	39
LENVIMA CAP THERAPY PACK (24MG)	42	<i>levofloxacin/D5W 250mg/50ml inj</i>	77	<i>linezolid 600mg tab</i>	39
LENVIMA CAP THERAPY PACK (4MG)	42	<i>levothyroxine 100mcg tab</i>	96	LINZESS 145MCG CAP	80
LENVIMA CAP THERAPY PACK (8MG)	42	<i>levothyroxine 112mcg tab</i>	96	LINZESS 290MCG CAP	80
<i>letrozole 2.5mg tab</i>	43	<i>levothyroxine 125mcg tab</i>	96	LINZESS 72MCG CAP	80
<i>leucovorin 10mg tab</i>	53	<i>levothyroxine 137mcg tab</i>	96	<i>liothyronine sodium 25mcg tab</i>	96
<i>leucovorin 15mg tab</i>	53	<i>levothyroxine 150mcg tab</i>	96	<i>liothyronine sodium 50mcg tab</i>	96
<i>leucovorin 25mg tab</i>	53	<i>levothyroxine 175mcg tab</i>	96	<i>liothyronine sodium 5mcg tab</i>	96
<i>leucovorin 5mg tab</i>	53	<i>levothyroxine 200mcg tab</i>	96	LIRAGLUTIDE 18MG/3ML PEN INJ	30
<i>levalbuterol 0.31mg/3ml neb soln</i>	20	<i>levothyroxine 25mcg tab</i>	96	<i>lisdexamfetamine dimesylate 10mg cap</i>	10
<i>levalbuterol 0.63mg/3ml inh soln</i>	20	<i>levothyroxine 300mcg tab</i>	96	<i>lisdexamfetamine dimesylate 20mg cap</i>	10
<i>levalbuterol 1.25mg/3ml neb soln</i>	20	<i>levothyroxine 50mcg tab</i>	96	<i>lisdexamfetamine dimesylate 30mg cap</i>	10
LEVALBUTEROL 45MCG INHALER, XOPENEX 45MCG INHALER	20	<i>levothyroxine 75mcg tab</i>	96	<i>lisdexamfetamine dimesylate 40mg cap</i>	10
<i>levetiracetam 1000mg tab</i>	23	<i>levothyroxine 88mcg tab</i>	96	<i>lisdexamfetamine dimesylate 50mg cap</i>	10
<i>levetiracetam 100mg/ml oral soln</i>	23	<i>l-glutamine 5gm powder for oral soln</i>	79	<i>lisdexamfetamine dimesylate 60mg cap</i>	10
<i>levetiracetam 250mg tab</i>	23	LIBERVANT 10MG BUCCAL FILM	22	<i>lisdexamfetamine dimesylate 70mg cap</i>	10
<i>levetiracetam 500mg er tab</i>	23	LIBERVANT 12.5MG BUCCAL FILM	22	<i>lisinopril 10mg tab</i>	35
<i>levetiracetam 500mg tab</i>	23	LIBERVANT 15MG BUCCAL FILM	22		
		LIBERVANT 5MG BUCCAL FILM	22		
		LIBERVANT 7.5MG BUCCAL FILM	22		

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

ALPHABETICAL LISTING OF DRUGS

<i>lisinopril 2.5mg tab</i>	35	<i>lopinavir/ritonavir</i>	60	LUMRYZ 9GM	95
<i>lisinopril 20mg tab</i>	35	<i>80-20mg/ml oral solution</i>		GRANULES FOR ORAL	
<i>lisinopril 30mg tab</i>	35	<i>lorazepam 0.5mg tab</i>	17	SUSP	
<i>lisinopril 40mg tab</i>	35	<i>lorazepam 1mg tab</i>	17	LUPKYNIS 7.9MG CAP	85
<i>lisinopril 5mg tab</i>	35	<i>lorazepam 2mg tab</i>	17	LUPRON 11.25MG INJ	43
LITFULO 50MG CAP	85	<i>lorazepam 2mg/ml oral</i>	17	LUPRON 3.75MG INJ	43
<i>lithium carbonate 150mg</i>	54	<i>soln</i>		<i>lurasidone hcl 120mg tab</i>	55
<i>cap</i>		LORBRENA 100MG TAB	47	<i>lurasidone hcl 20mg tab</i>	55
LITHIUM CARBONATE	54	LORBRENA 25MG TAB	47	<i>lurasidone hcl 40mg tab</i>	55
150MG CAP		<i>losartan potassium</i>	35	<i>lurasidone hcl 60mg tab</i>	55
<i>lithium carbonate 300mg</i>	54	<i>100mg tab</i>		<i>lurasidone hcl 80mg tab</i>	55
<i>cap</i>		<i>losartan potassium 25mg</i>	35	LYNPARZA 100MG TAB	47
LITHIUM CARBONATE	54	<i>tab</i>		LYNPARZA 150MG TAB	47
300MG CAP		<i>losartan potassium 50mg</i>	35	LYSODREN 500MG TAB	43
<i>lithium carbonate 300mg</i>	54	<i>tab</i>		LYTGOBI 12MG DAILY	47
<i>er tab</i>		<i>loteprednol etabonate</i>	88	DOSE 4MG PACK	
<i>lithium carbonate 300mg</i>	54	<i>0.5% ophth gel</i>		LYTGOBI 16MG DAILY	47
<i>tab</i>		<i>loteprednol etabonate</i>	88	DOSE 4MG PACK	
<i>lithium carbonate 450mg</i>	54	<i>0.5% ophth susp</i>		LYTGOBI 20MG DAILY	47
<i>er tab</i>		<i>lovastatin 10mg tab</i>	34	DOSE 4MG PACK	
<i>lithium carbonate 600mg</i>	54	<i>lovastatin 20mg tab</i>	34		
<i>cap</i>		<i>lovastatin 40mg tab</i>	34	M	
LITHIUM CARBONATE	54	<i>low-ogestrel 28 day pack</i>	76	<i>magnesium sulfate</i>	83
600MG CAP		<i>loxapine 10mg cap</i>	57	<i>500mg/ml inj</i>	
<i>lithium citrate 60mg/ml</i>	54	<i>loxapine 25mg cap</i>	57	<i>malathion 0.5% lotion</i>	71
<i>oral soln</i>		<i>loxapine 50mg cap</i>	57	<i>maraviroc 150mg tab</i>	60
LIVTENCITY 200MG TAF	61	<i>loxapine 5mg cap</i>	57	<i>maraviroc 300mg tab</i>	60
LOKELMA 10GM	85	<i>lubiprostone 24mcg cap</i>	80	MARPLAN 10MG TAB	26
POWDER FOR ORAL		<i>lubiprostone 8mcg cap</i>	80	MATULANE 50MG CAP	52
SUSP		LUMAKRAS 120MG TAB	47	MAVYRET 100-40MG	61
LOKELMA 5GM	85	LUMAKRAS 320MG TAB	47	TAB	
POWDER FOR ORAL		LUMIGAN 0.01% OPHTH	89	MAVYRET 50-20MG	61
SUSP		SOLN		ORAL PELLETT	
LONSURF 6.14-15MG	44	LUMRYZ 4.5GM	95	MAYZENT 0.25MG TAB	93
TAB		GRANULES FOR ORAL		MAYZENT 1MG TAB	93
LONSURF 8.19-20MG	44	SUSP		MAYZENT 2MG TAB	93
TAB		LUMRYZ 6GM	95	MAYZENT TAB STARTEF	93
<i>loperamide 2mg cap (RX</i>	31	GRANULES FOR ORAL		PACK (12)	
<i>Only)</i>		SUSP		MAYZENT TAB STARTEF	93
<i>lopinavir/ritonavir</i>	60	LUMRYZ 7.5GM	95	PACK (7)	
<i>100-25mg tab</i>		GRANULES FOR ORAL		<i>meclizine 12.5mg tab (RX</i>	32
<i>lopinavir/ritonavir</i>	60	SUSP		<i>Only)</i>	
<i>200-50mg tab</i>				<i>meclizine 25mg tab (RX</i>	32
				<i>Only)</i>	

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

ALPHABETICAL LISTING OF DRUGS

<i>medroxyprogesterone acetate 10mg tab</i>	91	<i>meropenem 500mg inj</i>	40	<i>methotrexate 25mg/ml (2ml) inj</i>	41
<i>medroxyprogesterone acetate 150mg/ml inj</i>	91	MEROPENEM	40	<i>methotrexate 25mg/ml inj</i>	41
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	91	500MG/50ML INJ		METHOXSALEN 10MG CAP	70
<i>medroxyprogesterone acetate 2.5mg tab</i>	91	<i>mesalamine 1000mg rectal supp</i>	77	<i>methsuximide 300mg cap</i>	25
<i>medroxyprogesterone acetate 5mg tab</i>	91	<i>mesalamine 1200mg dr tab</i>	77	<i>methylphenidate 10mg er tab</i>	11
<i>mefloquine hcl 250mg tab</i>	40	<i>mesalamine 375mg er cap</i>	77	<i>methylphenidate 10mg tab</i>	11
MEGESTROL ACETATE 125MG/ML SUSP	91	<i>mesalamine 400mg dr cap</i>	77	<i>methylphenidate 18mg er tab</i>	11
<i>megestrol acetate 20mg tab</i>	43	<i>mesalamine 66.7mg/ml enema</i>	77	METHYLPHENIDATE 18MG ER TAB	11
<i>megestrol acetate 40mg tab</i>	43	MESNEX 400MG TAB	53	<i>methylphenidate 1mg/ml oral soln</i>	11
<i>megestrol acetate 40mg/ml susp</i>	43	<i>metaxalone 800mg tab</i>	86	<i>methylphenidate 20mg er tab</i>	11
MEKINIST 0.05MG/ML ORAL SOLN	48	<i>metformin 1000mg tab</i>	29	<i>methylphenidate 20mg tab</i>	11
MEKINIST 0.5MG TAB	48	<i>metformin 500mg er tab</i>	29	METHYLPHENIDATE 27MG SR TAB	11
MEKINIST 2MG TAB	48	<i>metformin 500mg tab</i>	30	<i>methylphenidate 2mg/ml oral soln</i>	11
MEKTOVI 15MG TAB	48	<i>metformin 750mg er tab</i>	30	METHYLPHENIDATE 36MG SR TAB	11
<i>melodetta 24 fe chewable 28 day pack</i>	76	<i>metformin 850mg tab</i>	30	METHYLPHENIDATE 54MG SR TAB	11
<i>meloxicam 15mg tab</i>	13	<i>methadone 10mg tab</i>	14	<i>methylphenidate 5mg tab</i>	11
<i>meloxicam 7.5mg tab</i>	13	<i>methadone 10mg/5ml oral soln</i>	14	<i>methylphenidate ER osmotic 27mg tab</i>	11
MELPHALAN TAB	41	<i>methadone 5mg tab</i>	14	<i>methylphenidate ER osmotic 36mg tab</i>	11
<i>memantine 10mg tab</i>	91	<i>methadone 5mg/5ml oral soln</i>	14	<i>methylphenidate ER osmotic 54mg tab</i>	11
<i>memantine 14mg er cap</i>	91	<i>methazolamide 25mg tab</i>	72	<i>methylprednisolone 16mg tab</i>	67
<i>memantine 21mg er cap</i>	92	<i>methazolamide 50mg tab</i>	72	<i>methylprednisolone 32mg tab</i>	67
<i>memantine 28mg er cap</i>	92	<i>methenamine hippurate 1gm tab</i>	40	<i>methylprednisolone 4mg pack</i>	67
<i>memantine 2mg/ml oral soln</i>	92	<i>methenamine mandelate tab</i>	40	<i>methylprednisolone 4mg tab</i>	67
<i>memantine 5mg tab</i>	92	<i>methimazole 10mg tab</i>	95		
<i>memantine 7mg er cap</i>	92	<i>methimazole 5mg tab</i>	95		
MENACTRA INJ	98	<i>methocarbamol 500mg tab</i>	86		
MENQUADFI INJ	98	<i>methocarbamol 750mg tab</i>	86		
MENVEO INJ	98	<i>methotrexate 2.5mg tab</i>	41		
<i>mercaptapurine 50mg tab</i>	41	METHOTREXATE	41		
MEROPENEM 0.9%-1GM/50ML INJ	40	250MG/10ML INJ	41		
<i>meropenem 1000mg inj</i>	40				

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

ALPHABETICAL LISTING OF DRUGS

<i>methylprednisolone 8mg tab</i>	67	MICAFUNGIN SODIUM 100MG INJ	32	<i>mondoxyne 100mg cap</i>	95
<i>metoclopramide 10mg tab</i>	77	<i>micafungin sodium 100mg inj</i>	32	<i>montelukast 10mg tab</i>	19
<i>metoclopramide 1mg/ml oral soln</i>	77	MICAFUNGIN SODIUM 50MG INJ	32	<i>montelukast 4mg chew tab</i>	19
<i>metoclopramide 5mg tab</i>	77	<i>micafungin sodium 50mg inj</i>	32	<i>montelukast 5mg chew tab</i>	19
<i>metolazone 10mg tab</i>	73	<i>microgestin fe 1/20 28 day pack</i>	76	<i>morphine sulfate 100mg er tab</i>	14
<i>metolazone 2.5mg tab</i>	73	<i>midodrine 10mg tab</i>	64	<i>morphine sulfate 15mg er tab</i>	14
<i>metoprolol succinate 100mg er tab</i>	62	<i>midodrine 2.5mg tab</i>	64	MORPHINE SULFATE 15MG TAB	14
<i>metoprolol succinate 200mg er tab</i>	62	<i>midodrine 5mg tab</i>	64	<i>morphine sulfate 200mg er tab</i>	14
<i>metoprolol succinate 25mg er tab</i>	62	<i>mifepristone 300mg tab</i>	30	MORPHINE SULFATE 20MG/5ML ORAL SOLN	14
<i>metoprolol succinate 50mg er tab</i>	62	<i>minocycline 100mg cap</i>	95	<i>morphine sulfate 20mg/ml oral soln</i>	14
<i>metoprolol tartrate 100mg tab</i>	62	<i>minocycline 50mg cap</i>	95	MORPHINE SULFATE 20MG/ML ORAL SOLN	14
<i>metoprolol tartrate 25mg tab</i>	62	<i>minocycline 75mg cap</i>	95	<i>morphine sulfate 2mg/ml oral soln</i>	14
<i>metoprolol tartrate 37.5mg tab</i>	62	<i>minoxidil 10mg tab</i>	38	<i>morphine sulfate 30mg er tab</i>	14
<i>metoprolol tartrate 50mg tab</i>	62	<i>minoxidil 2.5mg tab</i>	38	MORPHINE SULFATE 30MG TAB	14
<i>metoprolol tartrate 75mg tab</i>	62	<i>mirabegron 25mg er tab</i>	98	<i>morphine sulfate 30mg tab</i>	14
<i>metronidazole 0.75% cream</i>	72	<i>mirabegron 50mg er tab</i>	98	MORPHINE SULFATE 60MG ER TAB	14
<i>metronidazole 0.75% gel</i>	72	<i>mirtazapine 15mg odt</i>	26	MOUNJARO 10MG/0.5ML AUTO-INJECTOR	30
<i>metronidazole 0.75% vaginal gel</i>	99	<i>mirtazapine 15mg tab</i>	26	MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	30
<i>metronidazole 1% gel</i>	72	<i>mirtazapine 30mg odt</i>	26	MOUNJARO 15MG/0.5ML AUTO-INJECTOR	30
<i>metronidazole 250mg tab</i>	39	<i>mirtazapine 30mg tab</i>	26		
<i>metronidazole 500mg tab</i>	39	<i>mirtazapine 45mg odt</i>	26		
<i>metronidazole 5mg/ml inj</i>	39	<i>mirtazapine 45mg tab</i>	26		
METRONIDAZOLE/NAC L 0.74%-500MG/100ML INJ	39	<i>mirtazapine 7.5mg tab</i>	26		
<i>metyrosine 250mg cap</i>	37	<i>misoprostol 100mcg tab</i>	97		
<i>mexiletine 150mg cap</i>	18	<i>misoprostol 200mcg tab</i>	97		
<i>mexiletine 200mg cap</i>	18	M-M-R II INJ	99		
<i>mexiletine 250mg cap</i>	18	<i>modafinil 100mg tab</i>	11		
		<i>modafinil 200mg tab</i>	11		
		<i>moexipril 15mg tab</i>	35		
		<i>moexipril 7.5mg tab</i>	35		
		MOLINDONE 10MG TAB	55		
		MOLINDONE 25MG TAB	55		
		MOLINDONE 5MG TAB	55		
		<i>mometasone furoate 0.1% cream</i>	71		
		<i>mometasone furoate 0.1% lotion</i>	71		
		<i>mometasone furoate 0.1% ointment</i>	71		

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

ALPHABETICAL LISTING OF DRUGS

MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	30	<i>nadolol 80mg tab</i>	62	<i>neomycin sulfate 500mg tab</i>	11
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	30	<i>nafacillin 1000mg inj</i>	91	<i>neomycin/bacitracin/poly myxin ophth ointment</i>	88
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	30	<i>nafacillin 100mg/ml inj</i>	91	<i>5(3.5)mg-400unit-10000u nit</i>	
MOVANTIK 12.5MG TAB	80	NAFCILLIN 1GM INJ	91	NEOMYCIN/POLYMYXI N B/GRAMICIDIN	88
MOVANTIK 25MG TAB	80	<i>nafacillin 2000mg inj</i>	91	1.75-10000-0.025MG-UN T-MG/ML OPHTH SOLN	
MOXIFLOXACIN 0.5% OPHTH SOLN	88	NALOXONE 0.4MG/ML CARTRIDGE	32	<i>neomycin/polymyxin/bacit racin/hydrocortisone 1%</i>	88
<i>moxifloxacin 0.5% ophth soln</i>	88	<i>naloxone 0.4mg/ml inj</i>	32	<i>ophth ointment</i>	
MOXIFLOXACIN 1.6MG/ML INJ	77	<i>naloxone 1mg/ml syringe</i>	32	<i>neomycin/polymyxin/hydr ocortisone</i>	89
<i>moxifloxacin 400mg tab</i>	77	<i>naloxone 4mg/0.1ml nasal spray</i>	32	<i>3.5-10000unit-1% otic soln</i>	
MOXIFLOXACIN 400MG/250ML IV SOLN	77	<i>naltrexone 50mg tab</i>	32	<i>neomycin/polymyxin/hydr ocortisone</i>	89
MRESVIA 50MCG/0.5ML INJ	99	<i>naproxen 250mg tab</i>	13	<i>3.5-10000unit-1% otic susp</i>	
MULTAQ 400MG TAB	18	<i>naproxen 375mg dr tab</i>	13	NERLYNX 40MG TAB	48
MULTIGEN FOLIC TAB	79	<i>naproxen 375mg tab</i>	13	NEVIRAPINE 10MG/ML SUSP	60
MULTIGEN PLUS TAB	79	<i>naproxen 500mg tab</i>	13	<i>nevirapine 200mg tab</i>	60
MULTIGEN TAB	79	<i>naproxen sodium 275mg tab</i>	13	<i>nevirapine 400mg er tab</i>	60
<i>multivitamin/minerals tab</i>	86	<i>naproxen sodium 550mg tab</i>	13	NEXLETOL 180MG TAB	33
<i>mupirocin 2% ointment</i>	69	<i>naratriptan 1mg tab</i>	82	NEXLIZET 180-10MG TAB	33
MUSE SUPP	65	<i>naratriptan 2.5mg tab</i>	82	NEXPLANON 68MG IMPLANT	91
<i>mycophenolate mofetil 200mg/ml susp</i>	85	<i>nateglinide 120mg tab</i>	30	<i>niacin 1000mg er tab</i>	33
<i>mycophenolate mofetil 250mg cap</i>	85	<i>nateglinide 60mg tab</i>	30	<i>niacin 500mg er tab</i>	33
<i>mycophenolate mofetil 500mg tab</i>	85	NAYZILAM 5MG/0.1ML NASAL SPRAY	22	<i>niacin 750mg er tab</i>	33
<i>mycophenolic acid 180mg dr tab</i>	85	<i>neбиволol 10mg tab</i>	62	<i>nicotine gum</i>	93
<i>mycophenolic acid 360mg dr tab</i>	85	<i>neбиволol 2.5mg tab</i>	62	<i>nicotine lozenge</i>	93
MYLERAN TAB	41	<i>neбиволol 20mg tab</i>	62	<i>nicotine patch</i>	93
N		<i>neбиволol 5mg tab</i>	62	NICOTINE PATCH KIT	93
<i>nabumetone 500mg tab</i>	13	NEBUSAL NEB SOLN	67	NICOTROL 10MG INH SOLN	93
<i>nabumetone 750mg tab</i>	13	NEFAZODONE 100MG TAB	27	NICOTROL 10MG/ML NASAL INHALER	93
<i>nadolol 20mg tab</i>	62	NEFAZODONE 150MG TAB	27	<i>nifedipine 30mg er tab</i>	64
<i>nadolol 40mg tab</i>	62	NEFAZODONE 200MG TAB	27		
		NEFAZODONE 250MG TAB	27		
		NEFAZODONE 50MG TAB	27		

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

ALPHABETICAL LISTING OF DRUGS

<i>nifedipine 30mg osmotic er tab</i>	64	NIVESTYM 480MCG/0.8ML	79	<i>nystatin 100000unit/ml susp</i>	68
<i>nifedipine 60mg er tab</i>	64	SYRINGE		<i>nystatin 10000unit/gm ointment</i>	69
<i>nifedipine 60mg osmotic er tab</i>	64	NIVESTYM 480MCG/1.6ML INJ	79	<i>nystatin 100unit/mg topical powder</i>	69
<i>nifedipine 90mg er tab</i>	64	NORDITROPIN	74	<i>nystatin 500000unit tab</i>	33
<i>nifedipine 90mg osmotic er tab</i>	64	10MG/1.5ML PEN INJ NORDITROPIN	74	<i>nystatin/triamcinolone acetonide 100000-0.1 unit/gm-% ointment</i>	69
<i>nilutamide 150mg tab</i>	43	15MG/1.5ML PEN INJ		<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% cream</i>	69
<i>nimodipine 30mg cap</i>	64	NORDITROPIN	74	NYVEPRIA 6MG/0.6ML	79
NINLARO 2.3MG CAP	48	30MG/3ML PEN INJ		SYRINGE	
NINLARO 3MG CAP	48	NORDITROPIN	74	<hr/>	
NINLARO 4MG CAP	48	5MG/1.5ML PEN INJ		O	
<i>nitazoxanide 500mg tab</i>	39	<i>norethindrone 0.35mg pack</i>	91	<i>ocella 28 day pack</i>	76
NITAZOXANIDE 500MG TAB	39	<i>norethindrone acetate 5mg tab</i>	91	OCTAGAM 1GM/20ML	89
NITRO-BID 2%	16	<i>nortrel 0.5/35 28 day pack</i>	76	INJ	
OINTMENT		<i>nortriptyline 10mg cap</i>	28	OCTAGAM 2.5GM/50ML	89
<i>nitrofurantoin 100mg cap</i>	40	<i>nortriptyline 25mg cap</i>	28	INJ	
<i>nitrofurantoin 50mg macro cap</i>	40	<i>nortriptyline 2mg/ml oral soln</i>	28	OCTAGAM 25GM/500ML	89
<i>nitrofurantoin macro 100mg cap</i>	40	<i>nortriptyline 50mg cap</i>	28	INJ	
<i>nitroglycerin 0.1mg/hr patch</i>	16	<i>nortriptyline 75mg cap</i>	28	OCTAGAM 2GM/20ML	89
<i>nitroglycerin 0.2mg/hr patch</i>	16	NORVIR 100MG ORAL POWDER	60	INJ	
<i>nitroglycerin 0.3mg sl tab</i>	16	NUBEQA 300MG TAB	43	OCTAGAM 30GM/300ML	89
<i>nitroglycerin 0.4% rectal ointment</i>	16	NUCALA 100MG INJ	18	INJ	
<i>nitroglycerin 0.4mg sl tab</i>	16	NUCALA 100MG/ML	18	OCTAGAM 5GM/100ML	89
<i>nitroglycerin 0.4mg/hr patch</i>	16	AUTO-INJECTOR		INJ	
<i>nitroglycerin 0.6mg sl tab</i>	17	NUCALA 100MG/ML	18	<i>octreotide 0.05mg/ml inj</i>	74
<i>nitroglycerin 0.6mg/hr patch</i>	17	SYRINGE		<i>octreotide 0.1mg/ml inj</i>	74
NITROGLYCERIN CAP	17	NUCALA 40MG/0.4ML	18	<i>octreotide 0.2mg/ml inj</i>	74
NIVESTYM	79	SYRINGE		<i>octreotide 0.5mg/ml inj</i>	74
300MCG/0.5ML		NUEDEXTA 20-10MG	93	<i>octreotide 1mg/ml inj</i>	75
SYRINGE		CAP		ODEFSEY 200-25-25MG	60
NIVESTYM 300MCG/ML	79	NUPLAZID 10MG TAB	55	TAB	
INJ		NUPLAZID 34MG CAP	55	ODOMZO 200MG CAP	42
		<i>nystatin 100000unit/ml cream</i>	69	OFEV 100MG CAP	94
		NYSTATIN	68	OFEV 150MG CAP	94
		100000UNIT/ML ORAL		<i>ofloxacin 0.3% ophth soln</i>	88
		SUSP		<i>ofloxacin 0.3% otic soln</i>	89
				OGSIVEO 100MG TAB	48
				OGSIVEO 150MG TAB	48

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

ALPHABETICAL LISTING OF DRUGS

OGSIVEO 50MG TAB	48	OMNIPOD 5 G7 INTRO KIT	81	ORENCIA 87.5MG/0.7ML SYRINGE	13
OJEMDA 100MG TAB	48	OMNIPOD 5 G7 PODS	81	ORGOVYX 120MG TAB	43
OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	48	OMNIPOD 5 INTRO KIT	81	ORKAMBI 125-100MG GRANULES	94
OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	48	OMNIPOD 5 PACK PODS	81	ORKAMBI 125-100MG TAB	94
OJEMDA 25MG/ML POWDER FOR ORAL SUSP	48	OMNIPOD DASH INTRO KIT	81	ORKAMBI 125-200MG TAB	94
OJJAARA 100MG TAB	48	OMNIPOD DASH PODS	81	ORKAMBI 125-200MG TAB	94
OJJAARA 150MG TAB	48	OMNIPOD GO KIT	81	ORKAMBI 188-150MG GRANULES	94
OJJAARA 200MG TAB	48	OMNIPOD STARTER KIT	81	ORKAMBI 188-150MG GRANULES	94
<i>olanzapine 10mg inj</i>	57	OMNITROPE 10MG/1.5ML CARTRIDGE	74	ORKAMBI 94-75MG GRANULES	94
<i>olanzapine 10mg odt</i>	57	OMNITROPE 5.8MG INJ	74	<i>orphenadrine citrate 100mg er tab</i>	86
<i>olanzapine 10mg tab</i>	57	OMNITROPE 5MG/1.5ML CARTRIDGE	74	ORSERDU 345MG TAB	43
<i>olanzapine 15mg odt</i>	57	<i>ondansetron 0.8mg/ml oral soln</i>	32	ORSERDU 86MG TAB	43
<i>olanzapine 15mg tab</i>	57	<i>ondansetron 4mg odt</i>	32	<i>oseltamivir 30mg cap</i>	61
<i>olanzapine 2.5mg tab</i>	57	<i>ondansetron 4mg tab</i>	32	<i>oseltamivir 45mg cap</i>	61
<i>olanzapine 20mg odt</i>	57	<i>ondansetron 8mg odt</i>	32	<i>oseltamivir 6mg/ml susp</i>	61
<i>olanzapine 20mg tab</i>	57	<i>ondansetron 8mg tab</i>	32	<i>oseltamivir 75mg cap</i>	61
<i>olanzapine 5mg odt</i>	57	ONETOUCH METER	81	OTEZLA 20MG TAB	13
<i>olanzapine 5mg tab</i>	57	ONETOUCH TEST STRIP	72	OTEZLA 28-DAY STARTER PACK	70
<i>olanzapine 7.5mg tab</i>	57	ONETOUCH ULTRA	72	OTEZLA 30MG TAB	70
<i>olmesartan medoxomil 20mg tab</i>	35	ONETOUCH VERIO FLEX METER	81	OTEZLA TAB 28-DAY STARTER PACK (55)	13
<i>olmesartan medoxomil 40mg tab</i>	35	ONETOUCH VERIO REFLECT METER	81	<i>oxacillin 1000mg inj</i>	91
<i>olmesartan medoxomil 5mg tab</i>	35	ONETOUCH VERIO TEST STRIP	72	<i>oxacillin 100mg/ml inj</i>	91
<i>olopatadine 0.665mg/act nasal inhaler</i>	86	ONUREG 200MG TAB	41	<i>oxacillin 2000mg inj</i>	91
OLUMIANT 1MG TAB	11	ONUREG 300MG TAB	41	<i>oxaprozin 600mg tab</i>	13
OLUMIANT 2MG TAB	11	OPILL TAB	91	OXBRYTA 300MG TAB FOR ORAL SUSP	79
OLUMIANT 4MG TAB	11	OPSUMIT 10MG TAB	94	OXBRYTA 300MG TAB FOR ORAL SUSP	79
<i>omega-3 acid ethyl esters (usp) 1000mg cap</i>	33	OPVEE 2.7MG/0.1ML NASAL SPRAY	32	OXBRYTA 500MG TAB	79
<i>omeprazole 10mg dr cap</i>	97	ORACIT SOLN	78	<i>oxcarbazepine 150mg tab</i>	23
<i>omeprazole 20mg dr cap</i>	97	ORENCIA 125MG/ML AUTO-INJECTOR	13	<i>oxcarbazepine 300mg tab</i>	23
<i>omeprazole 40mg dr cap</i>	97	ORENCIA 125MG/ML SYRINGE	13	<i>oxcarbazepine 600mg tab</i>	23
OMNIPOD 5 G6 INTRO KIT	81	ORENCIA 50MG/0.4ML SYRINGE	13	<i>oxcarbazepine 60mg/ml susp</i>	24
OMNIPOD 5 G6 PODS	81			<i>oxybutynin chloride 10mg er tab</i>	98
				<i>oxybutynin chloride 15mg er tab</i>	98

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

ALPHABETICAL LISTING OF DRUGS

<i>oxybutynin chloride</i>	98	<i>paliperidone 6mg er tab</i>	56	<i>penicillin gk 5000000unit</i>	90
<i>1mg/ml oral soln</i>		<i>paliperidone 9mg er tab</i>	56	<i>inj</i>	
<i>oxybutynin chloride 5mg</i>	98	PANRETIN 0.1% GEL	69	<i>penicillin v potassium</i>	90
<i>er tab</i>		<i>pantoprazole 20mg dr tab</i>	97	<i>250mg tab</i>	
<i>oxybutynin chloride 5mg</i>	98	<i>pantoprazole 40mg dr tab</i>	97	PENICILLIN V	90
<i>tab</i>		<i>paricalcitol 1mcg cap</i>	74	POTASSIUM 25MG/ML	
<i>oxycodone 10mg tab</i>	14	<i>paricalcitol 2mcg cap</i>	74	ORAL SOLN	
<i>oxycodone 15mg tab</i>	14	<i>paricalcitol 4mcg cap</i>	74	<i>penicillin v potassium</i>	90
<i>oxycodone 1mg/ml oral</i>	14	<i>paroxetine 10mg tab</i>	26	<i>500mg tab</i>	
<i>soln</i>		<i>paroxetine 10mg/ml susp</i>	26	PENICILLIN V	90
<i>oxycodone 20mg tab</i>	14	<i>paroxetine 12.5mg er tab</i>	26	POTASSIUM 50MG/ML	
<i>oxycodone 30mg tab</i>	14	<i>paroxetine 20mg tab</i>	26	ORAL SOLN	
<i>oxycodone 5mg tab</i>	14	<i>paroxetine 25mg er tab</i>	26	PENTACEL INJ	97
<i>oxycodone/acetaminophe</i>	15	<i>paroxetine 30mg tab</i>	26	<i>pentamidine isethionate</i>	39
<i>n 10-325mg tab</i>		<i>paroxetine 37.5mg er tab</i>	26	<i>300mg inj</i>	
<i>oxycodone/acetaminophe</i>	15	<i>paroxetine 40mg tab</i>	27	<i>pentamidine isethionate</i>	39
<i>n 2.5-325mg tab</i>		PAXLOVID	62	<i>50mg/ml inh soln</i>	
<i>oxycodone/acetaminophe</i>	15	150MG/100MG TAB		<i>pentoxifylline 400mg er</i>	64
<i>n 5-325mg tab</i>		PACK		<i>tab</i>	
<i>oxycodone/acetaminophe</i>	15	PAXLOVID	62	PERINDOPRIL 2MG TAB	35
<i>n 7.5-325mg tab</i>		300MG/100MG TAB		<i>perindopril erbumine</i>	35
OXYCONTIN 10MG ER	14	PACK		<i>4mg tab</i>	
TAB		<i>pazopanib 200mg tab</i>	48	PERINDOPRIL	35
OXYCONTIN 15MG ER	14	PEDIARIX INJ	97	ERBUMINE 8MG TAB	
TAB		PEDVAXHIB	98	<i>perindopril erbumine</i>	35
OXYCONTIN 20MG ER	14	7.5MCG/0.5ML INJ		<i>8mg tab</i>	
TAB		<i>peg 3350 powder for oral</i>	80	<i>permethrin 5% cream</i>	71
OXYCONTIN 30MG ER	14	<i>soln (100gm Moviprep</i>		<i>perphenazine 16mg tab</i>	58
TAB		<i>equiv)</i>		<i>perphenazine 2mg tab</i>	58
OXYCONTIN 40MG ER	14	PEGASYS	61	<i>perphenazine 4mg tab</i>	58
TAB		180MCG/0.5ML		<i>perphenazine 8mg tab</i>	58
OXYCONTIN 60MG ER	14	SYRINGE		PERSERIS 120MG INJ	56
TAB		PEGASYS 180MCG/ML	61	PERSERIS 90MG INJ	56
OXYCONTIN 80MG ER	14	INJ		<i>phenazopyridine 100mg</i>	78
TAB		PEMAZYRE 13.5MG TAB	48	<i>tab</i>	
OZEMPIC 2.68MG/ML	30	PEMAZYRE 4.5MG TAB	48	<i>phenazopyridine 200mg</i>	78
PEN INJ		PEMAZYRE 9MG TAB	48	<i>tab</i>	
OZEMPIC 2MG/3ML	30	PEN NEEDLE	81	<i>phenelzine 15mg tab</i>	26
PEN INJ		PENBRAYA INJ	98	PHENELZINE 15MG TAB	26
OZEMPIC 4MG/3ML	30	<i>penicillamine 250mg tab</i>	84	<i>phenobarbital 100mg tab</i>	24
PEN INJ		<i>penicillin g potassium</i>	90	<i>phenobarbital 15mg tab</i>	24
		<i>1000000unit/ml inj</i>		<i>phenobarbital 16.2mg tab</i>	24
P		PENICILLIN G SODIUM	90	<i>phenobarbital 30mg tab</i>	24
<i>paliperidone 1.5mg er tab</i>	56	100000UNIT/ML INJ		<i>phenobarbital 32.4mg tab</i>	24
<i>paliperidone 3mg er tab</i>	56				

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

ALPHABETICAL LISTING OF DRUGS

<i>phenobarbital 4mg/ml oral soln</i>	24	PIQRAY TAB 250MG DAILY DOSE PACK (56)	49	<i>potassium chloride 0.02 meq/ml/sodium chloride 0.154 meq/ml inj</i>	83
<i>phenobarbital 60mg tab</i>	24	PIQRAY TAB 300MG DAILY DOSE PACK (56)	49	<i>potassium chloride 1.33meq/ml oral soln</i>	84
<i>phenobarbital 64.8mg tab</i>	24	<i>pirfenidone 267mg cap</i>	94	<i>potassium chloride 10meq ER cap</i>	84
<i>phenobarbital 97.2mg tab</i>	24	<i>pirfenidone 267mg tab</i>	94	<i>potassium chloride 10meq inj</i>	84
<i>phenytoin 25mg/ml susp</i>	24	<i>pirfenidone 801mg tab</i>	94	POTASSIUM CHLORIDE 10MEQ INJ	84
<i>phenytoin 50mg chew tab</i>	24	<i>pirmella 1/35 28 day pack</i>	76	POTASSIUM CHLORIDE 10MEQ/50ML INJ	84
<i>phenytoin sodium 100mg er cap</i>	24	<i>piroxicam 10mg cap</i>	13	<i>potassium chloride 10meq/50ml inj</i>	84
<i>phenytoin sodium 200mg er cap</i>	24	<i>piroxicam 20mg cap</i>	13	<i>potassium chloride 15meq micro tab</i>	84
<i>phenytoin sodium 300mg er cap</i>	24	PLASMA-LYTE 148 INJ	83	<i>potassium chloride 2.67meq/ml oral soln</i>	84
<i>phospha 250 neutral tab</i>	83	PLASMA-LYTE A INJ	83	<i>potassium chloride 20meq er tab</i>	84
PIFELTRO 100MG TAB	60	PLEGRIDY	93	<i>potassium chloride 20meq inj</i>	84
<i>pilocarpine 1% ophth soln</i>	89	125MCG/0.5ML AUTO-INJECTOR		<i>potassium chloride 20meq micro er tab</i>	84
<i>pilocarpine 2% ophth soln</i>	89	PLEGRIDY	93	POTASSIUM CHLORIDE 20MEQ/100ML INJ	84
<i>pilocarpine 4% ophth soln</i>	89	125MCG/0.5ML SYRINGE		<i>potassium chloride 20meq/100ml inj</i>	84
<i>pilocarpine 5mg tab</i>	68	PLEGRIDY IM	93	<i>potassium chloride 2meq/ml (20ml) inj</i>	84
<i>pilocarpine 7.5mg tab</i>	68	125MCG/0.5ML INJ		<i>potassium chloride 40meq inj</i>	84
<i>pimecrolimus 1% cream</i>	71	PLEGRIDY INJ STARTER PACK	93	POTASSIUM CHLORIDE 40MEQ INJ	84
PIMOZIDE 1MG TAB	93	PACK		<i>potassium chloride 8meq er cap</i>	84
PIMOZIDE 2MG TAB	93	PLEGRIDY PEN	93	POTASSIUM CHLORIDE 8MEQ ER TAB	84
<i>pindolol 10mg tab</i>	62	STARTER PACK		<i>potassium citrate 10meq er tab</i>	78
<i>pindolol 5mg tab</i>	63	PODOFILOX 0.5%	72	<i>potassium citrate 15meq er tab</i>	78
<i>pioglitazone 15mg tab</i>	30	TOPICAL SOLN			
<i>pioglitazone 30mg tab</i>	30	<i>polymyxin B/trimethoprim 10000unit/ml-0.1% ophth soln</i>	88		
<i>pioglitazone 45mg tab</i>	30	POMALYST 1MG CAP	52		
<i>piperacillin/tazobactam 12-1.5gm inj</i>	90	POMALYST 2MG CAP	52		
<i>piperacillin/tazobactam 2000-250mg inj</i>	90	POMALYST 3MG CAP	52		
<i>piperacillin/tazobactam 200-25mg/ml inj</i>	90	POMALYST 4MG CAP	52		
<i>piperacillin/tazobactam 3000-375mg inj</i>	90	<i>posaconazole 100mg dr tab</i>	33		
<i>piperacillin/tazobactam 4000-500mg inj</i>	90	<i>posaconazole 40mg/ml susp</i>	33		
PIQRAY 200MG DAILY DOSE PACK	48	<i>potassium bicarbonate 25meq effer tab</i>	84		
		<i>potassium chloride 0.02 meq/ml/sodium chloride 0.0769 meq/ml inj</i>	83		

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

ALPHABETICAL LISTING OF DRUGS

<i>potassium citrate 5meq er tab</i>	78	<i>prednisone 2.5mg tab</i>	67	PREVIDENT 5000 DRY MOUTH 1.1% GEL	68
<i>potassium citrate/citric acid soln</i>	78	<i>prednisone 20mg tab</i>	67	PREVIDENT 5000 PLUS 1.1% CREAM	68
<i>potassium phosphate monobasic 500mg tab</i>	83	<i>prednisone 50mg tab</i>	67	PREVYMIS 240MG TAB	61
<i>pramipexole 0.125mg tab</i>	54	<i>prednisone 5mg tab</i>	67	PREVYMIS 480MG TAB	61
<i>pramipexole 0.25mg tab</i>	54	<i>pregabalin 100mg cap</i>	24	PREZCOBIX 150-800MG TAB	60
<i>pramipexole 0.5mg tab</i>	54	<i>pregabalin 150mg cap</i>	24	PREZISTA 100MG/ML SUSP	60
<i>pramipexole 0.75mg tab</i>	54	<i>pregabalin 200mg cap</i>	24	PREZISTA 150MG TAB	60
<i>pramipexole 1.5mg tab</i>	54	<i>pregabalin 20mg/ml oral soln</i>	24	PREZISTA 75MG TAB	60
<i>prasugrel 10mg tab</i>	78	<i>pregabalin 225mg cap</i>	24	PRIFTIN 150MG TAB	40
<i>prasugrel 5mg tab</i>	79	<i>pregabalin 25mg cap</i>	24	PRIMAQUINE PHOSPHATE 26.3MG TAB	40
<i>pravastatin sodium 10mg tab</i>	34	<i>pregabalin 300mg cap</i>	24	<i>primaquine phosphate 26.3mg tab</i>	40
<i>pravastatin sodium 20mg tab</i>	34	<i>pregabalin 50mg cap</i>	24	<i>primidone 250mg tab</i>	24
<i>pravastatin sodium 40mg tab</i>	34	PREHEVBRIO 10MCG/ML INJ	99	<i>primidone 50mg tab</i>	24
<i>pravastatin sodium 80mg tab</i>	34	PREMARIN 0.3MG TAB	76	PRIORIX INJ	99
<i>praziquantel 600mg tab</i>	16	PREMARIN 0.45MG TAB	76	PRIVIGEN 20GM/200ML INJ	89
<i>prazosin 1mg cap</i>	36	PREMARIN 0.625MG TAB	76	PRIVIGEN 40GM/400ML INJ	89
<i>prazosin 2mg cap</i>	36	PREMARIN	99	<i>probenecid 500mg tab</i>	78
<i>prazosin 5mg cap</i>	36	PREMARIN 0.625MG/GM VAGINAL CREAM	99	<i>prochlorperazine 10mg tab</i>	58
PREDNISOLONE 1% OPTH SOLN	88	PREMARIN 0.9MG TAB	76	<i>prochlorperazine 25mg rectal supp</i>	58
<i>prednisolone 1mg/ml oral soln</i>	67	PREMARIN 1.25MG TAB	76	<i>prochlorperazine 5mg tab</i>	58
<i>prednisolone 3mg/ml oral soln</i>	67	PREMPHASE 28 DAY PACK	76	<i>procto-med 2.5% cream</i>	16
<i>prednisolone 5mg/ml oral soln</i>	67	PREMPRO 0.3/1.5MG 28 DAY PACK	76	<i>progesterone 100mg cap</i>	91
PREDNISOLONE ACETATE 1% OPTH SUSP	88	PREMPRO 0.45/1.5 28 DAY PACK	76	<i>progesterone 200mg cap</i>	91
<i>prednisolone sodium phosphate 15mg/5ml oral soln</i>	67	PREMPRO 0.625/2.5MG 28 DAY PACK	76	PROGRAF 0.2MG GRANULES FOR ORAL SUSP	85
<i>prednisone 10mg tab</i>	67	PREMPRO 0.625/5MG 28 DAY PACK	76	PROGRAF 1MG GRANULES FOR ORAL SUSP	85
<i>prednisone 1mg tab</i>	67	<i>prevalite 4gm powder for oral susp</i>	34	PROLASTIN 1000MG INJ, ZEMAIRA 1000MG INJ	93
PREDNISONE 1MG/ML ORAL SOLN	67	PREVIDENT 0.2% RINSE	86		
		PREVIDENT 5000 1.1-5% PASTE	68		
		PREVIDENT 5000 1.1-5% PASTE	68		
		PREVIDENT 5000 BOOSTER 1.1% PASTE	68		

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

ALPHABETICAL LISTING OF DRUGS

PROLASTIN-C 1000MG INJ	93	<i>propranolol 60mg er cap</i>	63	<i>quinine sulfata 324mg cap</i>	40
PROLIA 60MG/ML SYRINGE	74	<i>propranolol 60mg tab</i>	63	QVAR 40MCG REDIHALER	19
PROMACTA 12.5MG POWDER FOR ORAL SUSP	79	<i>propranolol 80mg er cap</i>	63	QVAR 80MCG REDIHALER	19
PROMACTA 12.5MG TAB	79	<i>propranolol 80mg tab</i>	63		
PROMACTA 25MG POWDER FOR ORAL SUSP	79	PROPRANOLOL 8MG/ML ORAL SOLN	63		
PROMACTA 25MG TAB	79	<i>propylthiouracil 50mg tab</i>	95	R	
PROMACTA 50MG TAB	79	PROQUAD INJ	99	RABAVERT 2.5UNIT/ML INJ	99
PROMACTA 75MG TAB	79	PROSOL 20% INJ	87	<i>rabeprazole sodium 20mg dr tab</i>	97
<i>promethazine 1.25mg/ml oral syrup</i>	94	<i>protriptyline 10mg tab</i>	28	RADICAVA 105MG/5ML SUSP	87
<i>promethazine 12.5mg tab</i>	94	<i>protriptyline 5mg tab</i>	28	<i>raloxifene 60mg tab</i>	74
<i>promethazine 25mg tab</i>	94	PULMOZYME 1MG/ML INH SOLN	94	<i>ramelteon 8mg tab</i>	80
<i>promethazine 50mg tab</i>	94	PURIXAN 2000MG/100ML SUSP	41	<i>ramipril 1.25mg cap</i>	35
<i>promethazine DM syrup</i>	67	<i>pyrazinamide 500mg tab</i>	40	<i>ramipril 10mg cap</i>	35
<i>promethazine VC w/codeine syrup</i>	67	<i>pyridostigmine bromide 60mg tab</i>	40	<i>ramipril 2.5mg cap</i>	35
PROMETHAZINE VC W/CODEINE SYRUP	67	<i>pyrimethamine 25mg tab</i>	40	<i>ramipril 5mg cap</i>	35
<i>promethazine/codeine syrup</i>	67	Q		<i>ranolazine 1000mg er tab</i>	65
<i>propafenone 150mg tab</i>	18	QINLOCK 50MG TAB	49	<i>ranolazine 500mg er tab</i>	65
<i>propafenone 225mg er cap</i>	18	QUADRACEL INJ	97	<i>rasagiline 0.5mg tab</i>	54
<i>propafenone 225mg tab</i>	18	<i>quetiapine 100mg tab</i>	57	<i>rasagiline 1mg tab</i>	54
<i>propafenone 300mg tab</i>	18	<i>quetiapine 150mg er tab</i>	57	RECOMBIVAX 10MCG/ML INJ	99
<i>propafenone 325mg er cap</i>	18	<i>quetiapine 200mg er tab</i>	57	RECOMBIVAX 40MCG/ML INJ	99
<i>propafenone 425mg er cap</i>	18	<i>quetiapine 200mg tab</i>	57	RECOMBIVAX 5MCG/0.5ML INJ	99
<i>propranolol 10mg tab</i>	63	<i>quetiapine 25mg tab</i>	57	REGANEX 0.01% GEL	72
<i>propranolol 120mg er cap</i>	63	<i>quetiapine 300mg er tab</i>	57	RELENZA 5MG/BLISTER INHALER	61
<i>propranolol 160mg ER cap</i>	63	<i>quetiapine 300mg tab</i>	57	<i>renaphro cap</i>	86
<i>propranolol 20mg tab</i>	63	<i>quetiapine 400mg er tab</i>	57	<i>repaglinide 0.5mg tab</i>	30
<i>propranolol 20mg/5ml oral soln</i>	63	<i>quetiapine 400mg tab</i>	57	<i>repaglinide 1mg tab</i>	30
<i>propranolol 40mg tab</i>	63	<i>quetiapine 50mg er tab</i>	57	<i>repaglinide 2mg tab</i>	30
		<i>quetiapine 50mg tab</i>	57	REPATHA 140MG/ML AUTO-INJECTOR	33
		<i>quinapril 10mg tab</i>	35	REPATHA 140MG/ML SYRINGE	33
		<i>quinapril 20mg tab</i>	35	REPATHA 420MG/3.5ML CARTRIDGE	33
		<i>quinapril 40mg tab</i>	35	RETACRIT 20000UNIT/2ML INJ	79
		<i>quinapril 5mg tab</i>	35		
		QUINIDINE SULFATE 200MG TAB	17		
		QUINIDINE SULFATE 300MG TAB	17		
		<i>quinidine sulfata 300mg tab</i>	17		

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

ALPHABETICAL LISTING OF DRUGS

RETACRIT 20000UNIT/ML INJ	79	<i>risedronate sodium 35mg tab</i>	74	ROCKLATAN 0.05-0.2MG/ML OPHTH SOLN	88
RETACRIT 2000UNIT/ML INJ	79	<i>risedronate sodium 5mg tab</i>	74	<i>roflumilast 250mcg tab</i>	94
RETACRIT 3000UNIT/ML INJ	79	RISPERIDONE 0.25MG ODT	56	<i>roflumilast 500mcg tab</i>	95
RETACRIT 40000UNIT/ML INJ	79	<i>risperidone 0.25mg tab</i>	56	<i>ropinirole 0.25mg tab</i>	54
RETEVMO 120MG TAB	49	<i>risperidone 0.5mg odt</i>	56	<i>ropinirole 0.5mg tab</i>	54
RETEVMO 160MG TAB	49	<i>risperidone 0.5mg tab</i>	56	<i>ropinirole 1mg tab</i>	54
RETEVMO 40MG CAP	49	<i>risperidone 1mg odt</i>	56	<i>ropinirole 2mg tab</i>	54
RETEVMO 40MG TAB	49	<i>risperidone 1mg tab</i>	56	<i>ropinirole 3mg tab</i>	54
RETEVMO 80MG CAP	49	<i>risperidone 1mg/ml oral soln</i>	56	<i>ropinirole 4mg tab</i>	54
RETEVMO 80MG TAB	49	<i>risperidone 2mg odt</i>	56	<i>ropinirole 5mg tab</i>	54
REXULTI 0.25MG TAB	58	<i>risperidone 2mg tab</i>	56	<i>rosuvastatin calcium 10mg tab</i>	34
REXULTI 0.5MG TAB	58	<i>risperidone 3mg odt</i>	56	<i>rosuvastatin calcium 20mg tab</i>	34
REXULTI 1MG TAB	58	<i>risperidone 3mg tab</i>	56	<i>rosuvastatin calcium 40mg tab</i>	34
REXULTI 2MG TAB	58	<i>risperidone 4mg odt</i>	56	<i>rosuvastatin calcium 5mg tab</i>	34
REXULTI 3MG TAB	58	<i>risperidone 4mg tab</i>	56	ROTARIX SUSP	99
REXULTI 4MG TAB	58	<i>risperidone microspheres 12.5mg inj</i>	56	ROTATEQ SUSP	99
REYATAZ 50MG ORAL POWDER	60	<i>risperidone microspheres 25mg inj</i>	56	ROZLYTREK 100MG CAP	49
REZLIDHIA 150MG CAP	49	<i>risperidone microspheres 37.5mg inj</i>	56	ROZLYTREK 200MG CAP	49
REZUROCK 200MG TAB	84	<i>risperidone microspheres 50mg inj</i>	56	ROZLYTREK 50MG ORAL PELLETT	49
RHOPRESSA 0.02% OPHTH SOLN	88	<i>ritonavir 100mg tab</i>	60	RUBRACA 200MG TAB	49
RIBAVIRIN 200MG CAP	61	<i>rivastigmine 1.5mg cap</i>	92	RUBRACA 250MG TAB	49
<i>ribavirin 200mg cap</i>	61	<i>rivastigmine 13.3mg/24hr patch</i>	92	RUBRACA 300MG TAB	49
RIBAVIRIN 200MG TAB	61	<i>rivastigmine 3mg cap</i>	92	<i>rufinamide 200mg tab</i>	24
<i>rifabutin 150mg cap</i>	40	<i>rivastigmine 4.5mg cap</i>	92	<i>rufinamide 200mg tab</i>	24
<i>rifampin 150mg cap</i>	41	<i>rivastigmine 4.6mg/24hr patch</i>	92	<i>rufinamide 40mg/ml susp</i>	24
<i>rifampin 300mg cap</i>	41	<i>rivastigmine 6mg cap</i>	92	RUKOBIA 600MG ER TAB	60
<i>rifampin 600mg inj</i>	41	<i>rivastigmine 9.5mg/24hr patch</i>	92	RYBELSUS 14MG TAB	30
<i>riluzole 50mg tab</i>	87	<i>rizatriptan 10mg odt</i>	82	RYBELSUS 3MG TAB	30
RIMANTADINE 100MG TAB	61	<i>rizatriptan 10mg tab</i>	82	RYBELSUS 7MG TAB	30
RINVOQ 15MG ER TAB	11	<i>rizatriptan 5mg odt</i>	82	RYDAPT 25MG CAP	49
RINVOQ 30MG ER TAB	11	<i>rizatriptan 5mg tab</i>	82	<hr/>	
RINVOQ 45MG ER TAB	12			S	
<i>risedronate sodium 150mg tab</i>	74			<i>salicylic acid shampoo</i>	72
<i>risedronate sodium 30mg tab</i>	74			<i>salmon calcitonin 200unit/act nasal spray</i>	74

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

ALPHABETICAL LISTING OF DRUGS

<i>salsalate 500mg tab</i>	13	<i>silodosin 4mg cap</i>	78	<i>sodium fluoride 0.2%</i>	68
<i>salsalate 750mg tab</i>	13	<i>silodosin 8mg cap</i>	78	<i>rinse</i>	
SANTYL 250UNIT/GM OINTMENT	72	<i>silver sulfadiazine 1% cream</i>	72	<i>sodium fluoride 1.1% cream</i>	68
<i>sapropterin 100mg powder for oral soln</i>	74	SIMBRINZA 0.2-1% OPHTH SUSP	87	<i>sodium fluoride 1.1% gel</i>	68
<i>sapropterin 500mg powder for oral soln</i>	74	<i>simvastatin 10mg tab</i>	34	<i>sodium fluoride 1.1% paste</i>	68
<i>sapropterin dihydrochloride 100mg tab</i>	74	<i>simvastatin 20mg tab</i>	34	<i>sodium fluoride/potassium nitrate 1.1-5% paste</i>	68
SCSEMBLIX 100MG TAB	49	<i>simvastatin 40mg tab</i>	34	SODIUM OXYBATE 500MG/ML ORAL SOLN,	95
SCSEMBLIX 20MG TAB	49	<i>simvastatin 5mg tab</i>	34	XYREM 500MG/ML ORAL SOLN	
SCSEMBLIX 40MG TAB	49	<i>simvastatin 80mg tab</i>	34	<i>sodium phenylbutyrate 0.94mg/mg oral powder</i>	74
<i>scopolamine 1mg/72hr patch</i>	32	<i>sirolimus 0.5mg tab</i>	85	<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	85
SECUADO 3.8MG/24HR PATCH	57	<i>sirolimus 1mg tab</i>	85	<i>sodium polystyrene sulfonate 15gm/60ml oral susp</i>	85
SECUADO 5.7MG/24HR PATCH	57	<i>sirolimus 1mg/ml oral soln</i>	85	<i>sodium</i>	68
SECUADO 7.6MG/24HR PATCH	57	<i>sirolimus 2mg tab</i>	85	<i>sulfacetamide/sulfur 10-5% cleanser</i>	68
<i>selegiline 5mg cap</i>	54	SIRTURO 100MG TAB	41	<i>sulfacetamide/sulfur 9-4.5% cleanser</i>	80
<i>selegiline 5mg tab</i>	54	SIRTURO 20MG TAB	41	<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6gm/177ml prep kit</i>	61
<i>selenium sulfide 2.25% shampoo</i>	72	SKYRIZI 150MG/ML AUTO-INJECTOR	70	SOFOSBUVIR/VELPATAS VIR 400-100MG TAB	74
<i>selenium sulfide 2.5% shampoo</i>	72	SKYRIZI 150MG/ML SYRINGE	70	SOGROYA 10MG/1.5ML PEN INJ	74
SELZENTRY 20MG/ML ORAL SOLN	60	SKYRIZI 180MG/1.2ML CARTRIDGE	77	SOGROYA 15MG/1.5ML PEN INJ	74
SELZENTRY 25MG TAB	60	SKYRIZI 360MG/2.4ML CARTRIDGE	77	SOGROYA 5MG/1.5ML PEN INJ	74
SELZENTRY 75MG TAB	60	<i>sodium chloride 0.154meq/ml soln</i>	78	<i>solifenacin succinate 10mg tab</i>	98
<i>sertraline 100mg tab</i>	27	<i>sodium chloride</i>	84	<i>solifenacin succinate 5mg tab</i>	98
<i>sertraline 20mg/ml oral soln</i>	27	<i>0.154meq/ml soln</i>	84		
<i>sertraline 25mg tab</i>	27	<i>sodium chloride 2.5meq/ml inj</i>	84		
<i>sertraline 50mg tab</i>	27	<i>sodium chloride 23.4% inj</i>	84		
SHINGRIX 50MCG/0.5ML INJ	99	<i>sodium chloride 30mg/ml inj</i>	84		
SIGNIFOR 0.3MG/ML INJ	75	<i>sodium chloride 4.5mg/ml inj</i>	84		
SIGNIFOR 0.6MG/ML INJ	75	<i>sodium chloride 50mg/ml inj</i>	84		
SIGNIFOR 0.9MG/ML INJ	75	<i>sodium chloride 9mg/ml inj</i>	84		
<i>sildenafil 20mg tab</i>	94	<i>sodium chloride neb soln</i>	67		
<i>sildenafil tab</i>	65	<i>sodium citrate/citric acid soln</i>	78		

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

ALPHABETICAL LISTING OF DRUGS

SOLTAMOX 10MG/5ML ORAL SOLN	43	STREPTOMYCIN 1000MG INJ	11	<i>sumatriptan 12mg/ml auto-injector</i>	82
SOMAVERT 10MG INJ	75	STRIBILD 150-150-200-300MG TAB	60	<i>sumatriptan 12mg/ml inj</i>	82
SOMAVERT 15MG INJ	75	STRIVERDI RESPIMAT 2.5MCG/ACT INHALER	20	<i>sumatriptan 20mg/act nasal spray</i>	82
SOMAVERT 20MG INJ	75	SUCRAID 8500UNIT/ML ORAL SOLN	72	<i>sumatriptan 25mg tab</i>	82
SOMAVERT 25MG INJ	75	<i>sucralfate 1000mg tab</i>	97	<i>sumatriptan 50mg tab</i>	82
SOMAVERT 30MG INJ	75	<i>sucralfate 100mg/ml susp</i>	97	<i>sumatriptan 5mg/act nasal spray</i>	82
<i>sorafenib 200mg tab</i>	49	SUFLAVE SOLN PACK	80	<i>sumatriptan 8mg/ml cartridge</i>	82
<i>sorine 120mg tab</i>	63	<i>sulfacetamide sodium 10% lotion</i>	68	SUMATRIPTAN 6MG/0.5ML REFILL INJ	82
<i>sorine 160mg tab</i>	63	<i>sulfacetamide sodium 10% ophth soln</i>	88	<i>sumatriptan 8mg/ml cartridge</i>	82
<i>sotalol 120mg tab</i>	63	<i>sulfacetamide sodium 10% ophth soln</i>	72	SUMATRIPTAN INJ 4MG/0.5ML REFILL INJ	82
<i>sotalol 240mg tab</i>	63	<i>sulfacetamide sodium wash</i>	72	<i>sunitinib malate 12.5mg cap</i>	49
<i>sotalol 80mg tab</i>	63	<i>sulfacetamide sodium/sulfur 10-5% cream</i>	68	<i>sunitinib malate 25mg cap</i>	49
<i>sotalol AF 160mg tab</i>	63	<i>sulfacetamide sodium/sulfur emulsion</i>	69	<i>sunitinib malate 37.5mg cap</i>	50
<i>sotalol AF 80mg tab</i>	63	SULFACETAMIDE/PRED	88	<i>sunitinib malate 50mg cap</i>	50
<i>spironolactone 100mg tab</i>	73	NISOLONE 10-0.25% OPTH SOLN	88	SUNLENCA 300MG TAB 4-TABLET PACK	60
<i>spironolactone 25mg tab</i>	73	<i>sulfacleanse susp</i>	69	SUNLENCA 300MG TAB 5-TABLET PACK	60
<i>spironolactone 50mg tab</i>	73	SULFADIAZINE 500MG TAB	95	SUNOSI 150MG TAB	95
SPRITAM 1000MG TAB FOR ORAL SUSP	24	<i>sulfamethoxazole/trimeth oprim 400-80mg tab</i>	95	SUNOSI 75MG TAB	95
SPRITAM 250MG TAB FOR ORAL SUSP	24	<i>sulfamethoxazole/trimeth oprim 40-8mg/ml susp</i>	95	SYMDEKO 50-75MG/75MG PACK	94
SPRITAM 500MG TAB FOR ORAL SUSP	24	<i>sulfamethoxazole/trimeth oprim 800-160mg tab</i>	95	SYMDEKO TAB 4-WEEK PACK	94
SPRITAM 750MG TAB FOR ORAL SUSP	24	<i>sulfasalazine 500mg dr tab</i>	77	SYMPAZAN 10MG ORAL FILM	22
STELARA 45MG/0.5ML INJ	70	<i>sulfasalazine 500mg tab</i>	77	SYMPAZAN 20MG ORAL FILM	22
STELARA 45MG/0.5ML SYRINGE	70	<i>sulindac 150mg tab</i>	13	SYMPAZAN 5MG ORAL FILM	22
STELARA 90MG/ML SYRINGE	70	<i>sulindac 200mg tab</i>	13	SYMPTUZA 800-150-200-10MG TAB	60
STENDRA TAB	65	SUMADAN 9-4.5% WASH	69	SYNJARDY 10-1000MG ER TAB	29
STIMUFEND 6MG/0.6ML SYRINGE	79	<i>sumatriptan 100mg tab</i>	82		
STIOLTO (10 METERED DOSES)	20				
2.5-2.5MCG/ACT INHALER					
STIOLTO 2.5-2.5MCG/ACT INHALER	20				
STIVARGA 40MG TAB	49				

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

ALPHABETICAL LISTING OF DRUGS

SYNJARDY	29	<i>tacrolimus 0.5mg cap</i>	85	<i>temozolomide cap</i>	41
12.5-1000MG ER TAB		<i>tacrolimus 1mg cap</i>	85	TENIVAC 4-10UNIT/ML	97
SYNJARDY	29	<i>tacrolimus 5mg cap</i>	85	INJ	
12.5-1000MG TAB		<i>tadalafil 10mg tab</i>	65	<i>tenofovir disoproxil fumarate 300mg tab</i>	60
SYNJARDY 12.5-500MG TAB	29	<i>tadalafil 2.5mg tab</i>	78	TEPMETKO 225MG TAB	50
SYNJARDY 25-1000MG ER TAB	29	<i>tadalafil 20mg tab (PAH)</i>	94	<i>terazosin 10mg cap</i>	36
SYNJARDY 5-1000MG ER TAB	29	<i>tadalafil 5mg tab</i>	78	<i>terazosin 1mg cap</i>	36
SYNJARDY 5-1000MG ER TAB	29	<i>tadalafil tab 20mg</i>	65	<i>terazosin 2mg cap</i>	36
SYNJARDY 5-500MG TAB	29	TAFINLAR 10MG TAB	50	<i>terazosin 5mg cap</i>	36
SYNJARDY 5-500MG TAB	29	FOR ORAL SUSP		<i>terbinafine 250mg tab</i>	33
SYNTHROID 100MCG TAB	96	TAFINLAR 50MG CAP	50	<i>terbutaline sulfate 2.5mg tab</i>	20
SYNTHROID 112MCG TAB	96	TAFINLAR 75MG CAP	50	<i>terbutaline sulfate 5mg tab</i>	20
SYNTHROID 125MCG TAB	96	TAGRISSE 40MG TAB	42	<i>terconazole 0.4% vaginal cream</i>	99
SYNTHROID 137MCG TAB	96	TAGRISSE 80MG TAB	42	<i>terconazole 0.8% vaginal cream</i>	99
SYNTHROID 150MCG TAB	96	TAKHZYRO 300MG/2ML INJ	80	<i>terconazole 80mg vaginal insert</i>	99
SYNTHROID 175MCG TAB	96	TAKHZYRO 300MG/2ML SYRINGE	80	<i>teriflunomide 14mg tab</i>	93
SYNTHROID 200MCG TAB	96	TALZENNA 0.1MG CAP	50	<i>teriflunomide 7mg tab</i>	93
SYNTHROID 25MCG TAB	96	TALZENNA 0.25MG CAP	50	TERIPARATIDE	74
SYNTHROID 300MCG TAB	96	TALZENNA 0.35MG CAP	50	0.02MG/ACT PEN INJ	
SYNTHROID 50MCG TAB	96	TALZENNA 0.5MG CAP	50	<i>teriparatide 0.02mg/act pen inj</i>	74
SYNTHROID 75MCG TAB	96	TALZENNA 0.75MG CAP	50	TESTOSTERONE 1% (12.5MG) GEL PUMP BOTTLE	15
SYNTHROID 88MCG TAB	96	TALZENNA 1MG CAP	50	<i>testosterone 1% (12.5mg) gel pump bottle</i>	15
		<i>tamoxifen 10mg tab</i>	43	<i>testosterone 1% (25mg) gel packet</i>	15
		<i>tamoxifen 20mg tab</i>	43	TESTOSTERONE 1% (50MG) GEL PACKET	15
		<i>tamsulosin 0.4mg cap</i>	78	<i>testosterone 1.62% (1.25gm) gel packet</i>	16
		<i>tarina 24 fe 1/20 28 day pack</i>	76	<i>testosterone 1.62% (2.5gm) gel packet</i>	16
		TASIGNA 150MG CAP	50	<i>testosterone 20.25mg/act gel pump</i>	16
		TASIGNA 200MG CAP	50	<i>testosterone 30mg/act topical soln</i>	16
		TASIGNA 50MG CAP	50		
		<i>tazarotene 0.1% cream</i>	70		
		TAZICEF 1GM INJ	66		
		TAZICEF 6GM INJ	66		
		TAZVERIK 200MG TAB	50		
		TDVAX 4-4UNIT/ML INJ	97		
		TEFLARO 400MG INJ	39		
		TEFLARO 600MG INJ	39		
		<i>telmisartan 20mg tab</i>	35		
		<i>telmisartan 40mg tab</i>	36		
		<i>telmisartan 80mg tab</i>	36		
		<i>temazepam 15mg cap</i>	80		
		<i>temazepam 30mg cap</i>	80		
T					
TABRECTA 150MG TAB	50				
TABRECTA 200MG TAB	50				
<i>tacrolimus 0.03% ointment</i>	71				
<i>tacrolimus 0.1% ointment</i>	71				

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

ALPHABETICAL LISTING OF DRUGS

<i>testosterone cypionate</i>	16	<i>tiadylt 240mg er (24hr)</i>	64	TOBRAMYCIN	11
<i>100mg/ml inj</i>		<i>cap</i>		2GM/50ML INJ	
<i>testosterone cypionate</i>	16	<i>tiadylt 300mg er (24hr)</i>	64	<i>tobramycin 40mg/ml inj</i>	11
<i>200mg/ml inj</i>		<i>cap</i>		<i>tobramycin 60mg/ml inh</i>	11
TESTOSTERONE	16	<i>tiadylt 360mg er (24hr)</i>	64	<i>soln</i>	
ENANTHATE 200MG/ML		<i>cap</i>		TOBRAMYCIN	11
INJ		<i>tiagabine 12mg tab</i>	25	60MG/ML INH SOLN	
<i>testosterone gel 1%</i>	16	<i>tiagabine 16mg tab</i>	25	<i>tolterodine tartrate 1mg</i>	98
<i>(50mg) packet</i>		<i>tiagabine 2mg tab</i>	25	<i>tab</i>	
<i>tetrabenazine 12.5mg tab</i>	92	<i>tiagabine 4mg tab</i>	25	<i>tolterodine tartrate 2mg</i>	98
<i>tetrabenazine 25mg tab</i>	92	TIBSOVO 250MG TAB	50	<i>er cap</i>	
<i>tetracycline 250mg cap</i>	95	TICOVAC	99	<i>tolterodine tartrate 2mg</i>	98
<i>tetracycline 500mg cap</i>	95	1.2MCG/0.25ML		<i>tab</i>	
THALOMID 100MG CAP	84	SYRINGE		<i>tolterodine tartrate 4mg</i>	98
THALOMID 150MG CAP	84	TICOVAC 2.4MCG/0.5ML	99	<i>er cap</i>	
THALOMID 200MG CAP	85	SYRINGE		<i>topiramate 100mg tab</i>	24
THALOMID 50MG CAP	85	TIGECYCLINE 50MG INJ	39	<i>topiramate 15mg cap</i>	24
THEOPHYLLINE 100MG	95	<i>tigecycline 50mg inj</i>	39	<i>topiramate 200mg tab</i>	24
ER TAB		<i>timolol 0.25% ophth gel</i>	87	<i>topiramate 25mg cap</i>	24
THEOPHYLLINE 200MG	95	<i>timolol 0.25% ophth soln</i>	87	<i>topiramate 25mg tab</i>	24
ER TAB		<i>timolol 0.5% ophth gel</i>	87	<i>topiramate 50mg tab</i>	24
<i>theophylline 300mg SR</i>	95	<i>timolol 0.5% ophth soln</i>	87	<i>toremifene 60mg tab</i>	43
<i>tab</i>		<i>timolol 10mg tab</i>	63	<i>toremide 100mg tab</i>	73
<i>theophylline 400mg er</i>	95	<i>timolol 5mg tab</i>	63	<i>toremide 10mg tab</i>	73
<i>tab</i>		<i>tinidazole 250mg tab</i>	39	<i>toremide 20mg tab</i>	73
<i>theophylline 450 er tab</i>	95	<i>tinidazole 500mg tab</i>	39	<i>toremide 5mg tab</i>	73
<i>theophylline 600mg er</i>	95	TIVICAY 10MG TAB	60	TPN ELECTROLYTES IN.	83
<i>tab</i>		TIVICAY 25MG TAB	60	TRADJENTA 5MG TAB	30
<i>thioridazine 100mg tab</i>	58	TIVICAY 50MG TAB	60	<i>tramadol 100mg er tab</i>	15
<i>thioridazine 10mg tab</i>	58	TIVICAY 5MG TAB FOR	60	<i>tramadol 200mg er tab</i>	15
<i>thioridazine 25mg tab</i>	58	ORAL SUSP		<i>tramadol 300mg er tab</i>	15
<i>thioridazine 50mg tab</i>	58	<i>tizanidine 2mg cap</i>	86	<i>tramadol 50mg tab</i>	15
<i>thiothixene 10mg cap</i>	55	<i>tizanidine 2mg tab</i>	86	<i>tramadol/acetaminophen</i>	15
<i>thiothixene 1mg cap</i>	55	<i>tizanidine 4mg cap</i>	86	<i>37.5-325mg tab</i>	
<i>thiothixene 2mg cap</i>	55	<i>tizanidine 4mg tab</i>	86	<i>trandolapril 1mg tab</i>	35
<i>thiothixene 5mg cap</i>	55	<i>tizanidine 6mg cap</i>	86	<i>trandolapril 2mg tab</i>	35
THYROID 180MG TAB	96	<i>tobramycin 0.3% ophth</i>	88	<i>trandolapril 4mg tab</i>	35
THYROID 240MG TAB	96	<i>soln</i>		<i>tranexamic acid 650mg</i>	80
THYROID 300MG TAB	96	<i>tobramycin 1.2gm inj</i>	11	<i>tab</i>	
THYROID 65MG TAB	96	<i>tobramycin 1.2gm/30ml</i>	11	<i>tranylecypromine 10mg</i>	26
<i>tiadylt 120mg er (24hr)</i>	64	<i>inj</i>		<i>tab</i>	
<i>cap</i>		TOBRAMYCIN	11	TRAVASOL 10% INJ	87
<i>tiadylt 180mg er (24hr)</i>	64	10MG/ML INJ		<i>travoprost 0.004% ophth</i>	89
<i>cap</i>				<i>soln</i>	

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

ALPHABETICAL LISTING OF DRUGS

<i>trazodone 100mg tab</i>	27	<i>triamcinolone acetamide</i>	71	TRINTELLIX 10MG TAB	27
<i>trazodone 150mg tab</i>	27	<i>0.5% ointment</i>		TRINTELLIX 20MG TAB	27
<i>trazodone 50mg tab</i>	27	<i>triazolam 0.125mg tab</i>	80	TRINTELLIX 5MG TAB	27
TRECATOR 250MG TAB	41	<i>triazolam 0.25mg tab</i>	80	TRIUMEQ	60
TRELEGY ELLIPTA 100-62.5-25MCG INHALER	20	<i>tricitrates soln</i>	78	600-50-300MG TAB	
TRELEGY ELLIPTA 200-62.5-25MCG INHALER	20	<i>tricon cap</i>	79	TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	60
TRELSTAR 11.25MG INJ	43	<i>trientine 250mg cap</i>	84	<i>trivora 28 day pack</i>	76
TRELSTAR 22.5MG INJ	43	<i>trifluoperazine 10mg tab</i>	58	<i>trospium chloride 20mg tab</i>	98
TRELSTAR 3.75MG INJ	43	<i>trifluoperazine 1mg tab</i>	58	<i>trospium chloride 60mg er cap</i>	98
TREMFYA 100MG/ML AUTO-INJECTOR	70	<i>trifluoperazine 2mg tab</i>	58	TRUE METRIX KIT	81
TREMFYA 100MG/ML SYRINGE	70	<i>trifluoperazine 5mg tab</i>	58	METER	
TRESIBA 100UNIT/ML INJ	31	TRIFLURIDINE 1% OPTH SOLN	88	TRUE METRIX TEST	72
TRESIBA 100UNIT/ML PEN INJ	31	<i>trihexyphenidyl 2mg tab</i>	53	STRIPS	
TRESIBA 200UNIT/ML PEN INJ	31	<i>trihexyphenidyl 5mg tab</i>	53	TRULANCE 3MG TAB	81
<i>tretinoin 0.01% gel</i>	68	TRIJARDY 10-5-1000MG ER TAB	29	TRULICITY	30
<i>tretinoin 0.025% cream</i>	68	12.5-2.5-1000MG ER TAB		0.75MG/0.5ML AUTO-INJECTOR	
<i>tretinoin 0.025% gel</i>	68	TRIJARDY 25-5-1000MG ER TAB	29	TRULICITY	30
<i>tretinoin 0.05% cream</i>	68	TRIJARDY	29	1.5MG/0.5ML AUTO-INJECTOR	
<i>tretinoin 0.1% cream</i>	68	5-2.5-1000MG ER TAB		TRULICITY 3MG/0.5ML AUTO-INJECTOR	30
<i>tretinoin 10mg cap</i>	52	TRIKAFTA	94	TRULICITY	30
<i>triamcinolone acetamide 0.025% cream</i>	71	100-50-75MG/150MG PACK		4.5MG/0.5ML AUTO-INJECTOR	
<i>triamcinolone acetamide 0.025% lotion</i>	71	TRIKAFTA	94	TRUMENBA INJ	98
<i>triamcinolone acetamide 0.025% ointment</i>	71	100-50-75MG/75MG GRANULES PACK		TRUQAP 160MG TAB	50
<i>triamcinolone acetamide 0.1% cream</i>	71	TRIKAFTA	94	TRUQAP 200MG TAB	50
<i>triamcinolone acetamide 0.1% lotion</i>	71	50-37.5-25MG/75MG TAB PACK		TUKYSA 150MG TAB	52
<i>triamcinolone acetamide 0.1% ointment</i>	71	TRIKAFTA	94	TUKYSA 50MG TAB	52
<i>triamcinolone acetamide 0.1% oral paste</i>	68	80-40-60MG/59.5MG GRANULES PACK		TURALIO 125MG CAP	50
<i>triamcinolone acetamide 0.5% cream</i>	71	<i>tri-lo-sprintec 28 day pack</i>	76	TWINRIX 720UNIT INJ	99
		TRIMETHOPRIM 100MG TAB	39	TYBOST 150MG TAB	60
		<i>trimethoprim 100mg tab</i>	39	TYENNE 162MG/0.9ML AUTO-INJECTOR	12
		<i>trimipramine 100mg cap</i>	28	TYENNE 162MG/0.9ML SYRINGE	12
		<i>trimipramine 25mg cap</i>	28	TYMLOS	74
		<i>trimipramine 50mg cap</i>	28	3120MCG/1.56ML PEN INJ	

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

ALPHABETICAL LISTING OF DRUGS

TYPHIM VI	98	VALTOCO 20MG DOSE	22	<i>v-c forte cap</i>	86
25MCG/0.5ML INJ		KIT 10MG/0.1ML PACK		VELIVET 28 DAY PAK	76
TYPHIM VI	98	VALTOCO 5MG DOSE	22	VELTASSA 16.8GM	85
25MCG/0.5ML SYRINGE		KIT 5MG/0.1ML PACK		POWDER FOR ORAL	
<hr/>					
U		<i>vancomycin 1.25gm iv</i>	39	SUSP	
UBRELVY 100MG TAB	82	<i>soln</i>		VELTASSA 25.2GM	85
UBRELVY 50MG TAB	82	VANCOMYCIN 1.25GM	39	POWDER FOR ORAL	
<i>ursodiol 250mg tab</i>	77	IV SOLN		SUSP	
<i>ursodiol 300mg cap</i>	77	VANCOMYCIN 1000MG	39	VELTASSA 8.4GM	85
<i>ursodiol 500mg tab</i>	77	INJ		POWDER FOR ORAL	
UZEDY 100MG/0.28ML	56	<i>vancomycin 1000mg inj</i>	39	SUSP	
SYRINGE		VANCOMYCIN 100GM	39	VEMLIDY 25MG TAB	61
UZEDY 125MG/0.35ML	56	INJ		VENCLEXTA 100MG	52
SYRINGE		<i>vancomycin 100mg/ml inj</i>	39	TAB	
UZEDY 150MG/0.42ML	56	VANCOMYCIN	39	VENCLEXTA 10MG TAB	52
SYRINGE		100MG/ML INJ		VENCLEXTA 50MG TAB	52
UZEDY 200MG/0.56ML	56	<i>vancomycin 125mg cap</i>	39	VENCLEXTA STARTING	52
SYRINGE		<i>vancomycin 250mg cap</i>	39	PACK	
UZEDY 250MG/0.7ML	56	VANCOMYCIN 500MG	39	<i>venlafaxine 100mg tab</i>	27
SYRINGE		INJ		<i>venlafaxine 150mg er cap</i>	27
UZEDY 50MG/0.14ML	56	<i>vancomycin 500mg inj</i>	39	<i>venlafaxine 25mg tab</i>	27
SYRINGE		VANCOMYCIN 5GM INJ	39	<i>venlafaxine 37.5mg er</i>	27
UZEDY 75MG/0.21ML	56	<i>vancomycin 5gm inj</i>	39	<i>cap</i>	
SYRINGE		VANCOMYCIN 750MG	39	<i>venlafaxine 37.5mg tab</i>	27
<hr/>					
V		INJ		<i>venlafaxine 50mg tab</i>	27
<i>valacyclovir 1000mg tab</i>	61	<i>vancomycin 750mg inj</i>	39	<i>venlafaxine 75mg er cap</i>	28
<i>valacyclovir 500mg tab</i>	61	VANFLYTA 17.7MG TAB	50	<i>venlafaxine 75mg tab</i>	28
VALCHLOR 0.016% GEL	69	VANFLYTA 26.5MG TAB	51	VENTOLIN 108MCG	20
<i>valganciclovir 450mg tab</i>	61	VAQTA 25UNIT/0.5ML	99	INHALER (18GM)	
<i>valganciclovir 50mg/ml</i>	61	INJ		VENTOLIN 108MCG	20
<i>oral soln</i>		VAQTA 50UNIT/ML INJ	99	INHALER (8GM)	
<i>valproic acid 250mg cap</i>	25	<i>vardenafil ODT</i>	65	<i>verapamil 120mg er cap</i>	64
<i>valproic acid 50mg/ml</i>	25	<i>vardenafil tab</i>	65	<i>verapamil 120mg er tab</i>	64
<i>oral soln</i>		<i>varenicline 0.5mg/1mg</i>	93	<i>verapamil 120mg tab</i>	64
<i>valsartan 160mg tab</i>	36	<i>first month pack</i>		<i>verapamil 180mg er cap</i>	64
<i>valsartan 320mg tab</i>	36	<i>varenicline tartrate 0.5mg</i>	93	<i>verapamil 180mg er tab</i>	64
<i>valsartan 40mg tab</i>	36	<i>tab</i>		<i>verapamil 240mg er cap</i>	64
<i>valsartan 80mg tab</i>	36	<i>varenicline tartrate 1mg</i>	93	<i>verapamil 240mg er tab</i>	64
VALTOCO 10MG DOSE	22	<i>tab</i>		VERAPAMIL 360MG ER	64
KIT 10MG/0.1ML PACK		VARIVAX	99	CAP	
VALTOCO 15MG DOSE	22	1350PFU/0.5ML INJ		<i>verapamil 40mg tab</i>	64
KIT 7.5MG/0.1ML PACK		VAXCHORA SUSP	98	<i>verapamil 80mg tab</i>	64
		VAXELIS INJ	97	VERQUVO 10MG TAB	65
		V-C FORTE CAP	86	VERQUVO 2.5MG TAB	65

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

ALPHABETICAL LISTING OF DRUGS

VERQUVO 5MG TAB	65	VOWST 30000000UNIT	77	XCOPRI 100MG TAB	25
VERSACLOZ 50MG/ML	57	CAP		XCOPRI 12.5/25MG	25
SUSP		VRAYLAR 1.5MG CAP	55	TITRATION PACK	
VERZENIO 100MG TAB	51	VRAYLAR 3MG CAP	55	XCOPRI 150/200MG	25
VERZENIO 150MG TAB	51	VRAYLAR 4.5MG CAP	55	TITRATION PACK	
VERZENIO 200MG TAB	51	VRAYLAR 6MG CAP	55	XCOPRI 150MG TAB	25
VERZENIO 50MG TAB	51	VYNDAMAX 61MG CAP	65	XCOPRI 200MG TAB	25
V-GO INJ KIT	81	VYNDAQEL 20MG CAP	65	XCOPRI 25MG TAB	25
<i>vigabatrin 500mg powder</i>	25			XCOPRI 50/100MG	25
<i>for oral soln</i>		W		TITRATION PACK	
<i>vigabatrin 500mg tab</i>	25	<i>warfarin sodium 10mg</i>	21	XCOPRI 50MG TAB	25
VIGAFYDE 100MG/ML	25	<i>tab</i>		XCOPRI TAB 150/200MG	25
ORAL SOLN		<i>warfarin sodium 1mg tab</i>	21	PACK	
<i>vilazodone hcl 10mg tab</i>	27	<i>warfarin sodium 2.5mg</i>	21	XDEMVI 0.25% OPHTH	88
<i>vilazodone hcl 20mg tab</i>	27	<i>tab</i>		SOLN	
<i>vilazodone hcl 40mg tab</i>	27	<i>warfarin sodium 2mg tab</i>	21	XELJANZ 10MG TAB	12
VIRACEPT 250MG TAB	60	<i>warfarin sodium 3mg tab</i>	21	XELJANZ 1MG/ML	12
VIRACEPT 625MG TAB	60	<i>warfarin sodium 4mg tab</i>	21	ORAL SOLN	
VIREAD 150MG TAB	60	<i>warfarin sodium 5mg tab</i>	21	XELJANZ 5MG TAB	12
VIREAD 200MG TAB	60	<i>warfarin sodium 6mg tab</i>	21	XELJANZ XR 11MG TAB	12
VIREAD 250MG TAB	61	<i>warfarin sodium 7.5mg</i>	21	XELJANZ XR 22MG TAB	12
VIREAD 40MG/GM	61	<i>tab</i>		XERMELO 250MG TAB	31
ORAL POWDER		WELIREG 40MG TAB	52	XGEVA 120MG/1.7ML	74
<i>vitamin D 50000unit cap</i>	99	X		INJ	
VITRAKVI 100MG CAP	51	XALKORI 150MG ORAL	51	XIFAXAN 550MG TAB	39
VITRAKVI 20MG/ML	51	PELLET		XIGDUO 10-500MG ER	29
ORAL SOLN		XALKORI 200MG CAP	51	TAB	
VITRAKVI 25MG CAP	51	XALKORI 20MG ORAL	51	XIGDUO 2.5-1000MG ER	29
VIVITROL 380MG INJ	32	PELLET		TAB	
VIVOTIF BERNA CAP	98	XALKORI 250MG CAP	51	XIGDUO 5-500MG ER	29
VIZIMPRO 15MG TAB	42	XALKORI 50MG ORAL	51	TAB	
VIZIMPRO 30MG TAB	42	PELLET		XIGDUO XR 10-1000MG	29
VIZIMPRO 45MG TAB	42	XARELTO 10MG TAB	21	TAB	
VONJO 100MG CAP	51	XARELTO 15MG TAB	21	XIGDUO XR 5-1000MG	29
<i>voriconazole 200mg inj</i>	33	XARELTO 1MG/ML	21	TAB	
VORICONAZOLE 200MG	33	SUSP		XIIDRA 5% OPHTH	89
INJ		XARELTO 2.5MG TAB	21	SOLN	
<i>voriconazole 200mg tab</i>	33	XARELTO 20MG TAB	21	XOFLUZA 40MG	61
<i>voriconazole 40mg/ml</i>	33	XARELTO TAB STARTER	21	THERAPY PACK	
<i>susp</i>		PACK (51)		XOFLUZA 80MG TAB	62
<i>voriconazole 50mg tab</i>	33	XATMEP 2.5MG/ML	41	XOLAIR 150MG INJ	18
VOSEVI 400-100-100MG	61	ORAL SOLN		XOLAIR 150MG/ML	18
TAB		XCOPRI (250 MG DAILY	25	AUTO-INJECTOR	
		DOSE) TAB PACK			

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

ALPHABETICAL LISTING OF DRUGS

XOLAIR 150MG/ML SYRINGE	18	ZAVZPRET 10MG/ACT NASAL SPRAY	82
XOLAIR 300MG/2ML AUTO-INJECTOR	18	ZEJULA 100MG TAB	51
XOLAIR 300MG/2ML SYRINGE	18	ZEJULA 200MG TAB	51
XOLAIR 75MG/0.5ML AUTO-INJECTOR	18	ZEJULA 300MG TAB	51
XOLAIR 75MG/0.5ML SYRINGE	18	ZELBORAF 240MG TAB	51
XOSPATA 40MG TAB	51	ZEMAIRA 4000MG INJ	93
XPOVIO 100MG ONCE WEEKLY CARTON (8-PACK)	52	ZEMAIRA 5000MG INJ	93
XPOVIO 40MG ONCE WEEKLY CARTON (4-PACK)	52	<i>zidovudine 100mg cap</i>	61
XPOVIO 40MG TWICE WEEKLY CARTON (8-PACK)	53	<i>zidovudine 10mg/ml oral soln</i>	61
XPOVIO 60MG ONCE WEEKLY CARTON (4-PACK)	53	<i>zidovudine 300mg tab</i>	61
XPOVIO 60MG TWICE WEEKLY PACK	53	ZIMHI 5MG/0.5ML SYRINGE	32
XPOVIO 80 MG TWICE WEEKLY	53	<i>ziprasidone 20mg cap</i>	55
XPOVIO 80MG ONCE WEEKLY CARTON (8-PACK)	53	<i>ziprasidone 20mg inj</i>	55
XTANDI 40MG CAP	43	<i>ziprasidone 40mg cap</i>	55
XTANDI 40MG TAB	43	<i>ziprasidone 60mg cap</i>	55
XTANDI 80MG TAB	44	<i>ziprasidone 80mg cap</i>	55
<i>xulane 150-35mcg/24hr patch</i>	76	ZOLINZA 100MG CAP	51
<hr/>		<i>zolmitriptan 2.5mg tab</i>	82
Y		<i>zolmitriptan 5mg tab</i>	82
YF-VAX 4000UNIT/ML INJ	99	<i>zolidem tartrate 10mg tab</i>	80
<hr/>		<i>zolidem tartrate 12.5mg er tab</i>	80
Z		<i>zolidem tartrate 5mg tab</i>	80
<i>zafirlukast 10mg tab</i>	19	<i>zolidem tartrate 6.25mg er tab</i>	80
<i>zafirlukast 20mg tab</i>	19	ZONISADE 100MG/5ML SUSP	24
<i>zaleplon 10mg cap</i>	80	<i>zonisamide 100mg cap</i>	24
<i>zaleplon 5mg cap</i>	80	<i>zonisamide 25mg cap</i>	24
		<i>zonisamide 50mg cap</i>	24
		ZTALMY 50MG/ML SUSP	24
		ZURZUVAE 20MG CAP	26
		ZURZUVAE 25MG CAP	26
		ZURZUVAE 30MG CAP	26
		ZYDELIG 100MG TAB	51
		ZYDELIG 150MG TAB	51
		ZYKADIA 150MG TAB	52
		ZYPREXA RELPREVV 210MG INJ	57

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



This Drug List was updated on 09/27/2024.

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

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