



P.O. Box 25610
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Formulary Introduction

FORMULARY

The QualChoice Formulary, or Prescription Drug List, is a guide to available brand and generic drugs that are approved by the Food and Drug Administration (FDA) and covered through your prescription drug benefit. Generic drugs have the same active ingredients as their brand name counterparts and should be considered the first line of treatment. The FDA requires generics to be safe and work the same as brand name drugs. If there is no generic available, there may be more than one brand name drug to treat a condition. Preferred non-specialty brand name drugs are listed on Tier 2 to help identify brand drugs that are clinically appropriate, safe, and cost-effective treatment options, if a generic medication on the formulary is not suitable for your condition. Preferred specialty drugs are listed on Tier 4 while non-preferred specialty drugs are listed on Tier 5.

Please note, the Formulary is not meant to be a complete list of the drugs covered under your prescription drug benefit. Not all dosage forms or strengths of a drug may be covered. This list is periodically reviewed and updated and may be subject to change. Drugs may be added or removed, or additional requirements may be added in order to approve continued usage of a specific drug.

Specific prescription benefit plan designs may not cover certain products or categories, regardless of their appearance in this document. Please check your benefits for coverage limitations and your share of cost for your drugs.

Drug List Key:

Brand name drugs are listed in CAPS and generic drugs are listed in lower case. Drugs are covered under different cost-share tiers depending on your benefit.

Tier 1 – Lowest cost share tier for select drugs that offer the greatest value compared to other drugs used to treat similar conditions.

Tier 2 – Medium cost share tier that covers non-specialty brand name drugs that may be preferred compared to other drugs used to treat the same conditions.

Tier 3 – High cost share tier that covers higher cost (non-preferred) non-specialty brand name and non-preferred generic drugs. This tier will also apply to non-specialty drugs that are not on the Prescription Drug List but approval was granted due to formulary exception.

Tier 4 – Higher cost share tier that covers preferred specialty drugs (generic and brand) used to treat complex, chronic conditions that may require special handling, storage, or clinical management.

Tier 5 – Highest cost share tier that covers non-preferred specialty drugs (generic and brand)



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used to treat complex, chronic conditions that may require specialty handling, storage, or clinical management. This tier will also apply to specialty drugs that are not on the Prescription Drug List, but approval was granted due to formulary exception.

Preventative Drugs – Drugs marked as preventative drugs are covered at no cost share (\$0) for certain plans. Please check your coverage documents for further information regarding coverage of these drugs.

Request for Formulary Exception

To request coverage for a drug not on the Prescription Drug List, your provider must complete and submit a Prior Authorization form (see [QualChoice.com](https://www.qualchoice.com) and click on the Pharmacy and Drug Formularies Page page). The PBM will respond within 24 hours of receipt of all necessary information for requests meeting the definition of urgent and within two (2) business days (not to exceed 72 hours) for non-urgent requests. If the request is disapproved, the notice of adverse benefit determination will contain a clear explanation of the specific reasons for the disapproval or, if the request was incomplete, the explanation will identify the missing material information necessary to complete the request.

Formulary Abbreviations:

Abbreviation	Term	What it means
AL	Age Limit	Some drugs are only covered for certain ages.
QL	Quantity Limit	Some drugs are only covered for a certain amount.
PA	Prior Authorization	Some drugs require prior approval by QualChoice before they will be covered. Your doctor must submit a request for prior authorization for review.
ST	Step Therapy	In some cases, you must first try certain drugs before QualChoice covers another drug for your medical condition.
NF	Non-formulary	This product is not covered unless you or your provider request an exception. Alternative medications are listed next to non-covered products.
PV	Preventative Drug	These products are preventative drugs which are covered at no cost share (\$0) for certain plans.
Rx/OTC	Prescription and OTC	These drugs are made in both prescription form and over the counter (OTC) form.
SP	Specialty Drug	These products are Specialty Drugs that may have special fill requirements.

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders			DEXEDRINE CP24 10 MG, 15 MG (Use <i>dextroamphetamine sulfate</i>)	NF	QL(4 EA daily)
Amphetamines			<i>dextroamphetamine sulfate</i> CP24 10 MG, 15 MG	1	QL(4 EA daily)
ADDERALL XR CP24 20 MG, 25 MG, 30 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF	QL(2 EA daily)	<i>dextroamphetamine sulfate</i> CP24 5 MG	1	
ADDERALL XR CP24 5 MG, 10 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF	QL(1 EA daily)	<i>dextroamphetamine sulfate</i> TABS 5 MG, 10 MG	1	QL(4 EA daily)
ADDERALL XR CP24 15 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF		<i>dextroamphetamine sulfate</i> TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG	1	
ADDERALL TABS 30 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF	QL(2 EA daily)	<i>lisdexamfetamine dimesylate</i> CAPS	1	QL(1 EA daily); ST
ADDERALL TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF	QL(3 EA daily)	<i>lisdexamfetamine dimesylate</i> CHEW	1	QL(1 EA daily); ST
<i>amphetamine-dextroamphetamine</i> CP24 20 MG, 25 MG, 30 MG	1	QL(2 EA daily)	<i>methamphetamine hcl</i>	1	QL(5 EA daily); AL(At least 6 yrs old)
<i>amphetamine-dextroamphetamine</i> CP24 5 MG, 10 MG	1	QL(1 EA daily)	VYVANSE CAPS (Use <i>lisdexamfetamine dimesylate</i>)	NF	QL(1 EA daily); ST
<i>amphetamine-dextroamphetamine</i> CP24 15 MG	1		VYVANSE CHEW (Use <i>lisdexamfetamine dimesylate</i>)	NF	QL(1 EA daily); ST
<i>amphetamine-dextroamphetamine</i> TABS 30 MG	1	QL(2 EA daily)	Anorexiants Non-Amphetamine		
<i>amphetamine-dextroamphetamine</i> TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG	1	QL(3 EA daily)	<i>phendimetrazine tartrate</i> TABS	1	PA
DESOXYN (Use <i>methamphetamine hcl</i>)	NF	QL(5 EA daily); AL(At least 6 yrs old)	<i>phentermine hcl</i> CAPS	1	PA
			Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
			<i>atomoxetine hcl</i> 10 MG, 18 MG, 25 MG, 40 MG	1	QL(2 EA daily); AL(At least 6 yrs old)
			<i>atomoxetine hcl</i> 60 MG, 80 MG, 100 MG	1	QL(1 EA daily); AL(At least 6 yrs old)
			<i>clonidine hcl (adhd)</i> TB12	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>guanfacine hcl (adhd)</i>	1	QL(1 EA daily); AL(At least 6 yrs old)	METHYLIN SOLN (<i>Use methylphenidate hcl</i>)	NF	QL(30 ML daily); AL(At least 6 yrs old)
INTUNIV (<i>Use guanfacine hcl (adhd)</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl CHEW 10 MG</i>	1	QL(5 EA daily)
STRATTERA 10 MG, 18 MG, 25 MG, 40 MG (<i>Use atomoxetine hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl CHEW 2.5 MG</i>	1	QL(2 EA daily)
STRATTERA 60 MG, 80 MG, 100 MG (<i>Use atomoxetine hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl CHEW 5 MG</i>	1	QL(6 EA daily)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)			<i>methylphenidate hcl CP24 30 MG</i>	1	QL(2 EA daily); AL(At least 6 yrs old)
SUNOSI 150 MG	3	QL(1 EA daily); PA	<i>methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
SUNOSI 75 MG	3	QL(2 EA daily); PA	<i>methylphenidate hcl CP24</i>	1	QL(1 EA daily)
Stimulants - Misc.			<i>methylphenidate hcl CPCR</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
APTENSIO XR CP24 (<i>Use methylphenidate hcl</i>)	NF	QL(1 EA daily)	<i>methylphenidate hcl SOLN</i>	1	QL(30 ML daily); AL(At least 6 yrs old)
<i>armodafinil</i>	1	QL(1 EA daily); AL(At least 17 yrs old); PA	<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	1	QL(5 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 36 MG, 54 MG (<i>Use methylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl TABS 5 MG</i>	1	QL(6 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 18 MG, 27 MG (<i>Use methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl TB24 36 MG, 54 MG</i>	1	QL(2 EA daily); AL(At least 6 yrs old)
DAYTRANA PTCH (<i>Use methylphenidate</i>)	NF	QL(1 EA daily); PA	<i>methylphenidate hcl TB24 18 MG, 27 MG</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
<i>dexmethylphenidate hcl CP24</i>	1	QL(1 EA daily)	<i>methylphenidate hcl TBCR 36 MG, 54 MG</i>	1	QL(2 EA daily); AL(At least 6 yrs old)
<i>dexmethylphenidate hcl TABS</i>	1	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl TBCR 18 MG, 27 MG</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
FOCALIN XR CP24 (<i>Use dexmethylphenidate hcl</i>)	NF	QL(1 EA daily)	<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1	QL(3 EA daily); AL(At least 6 yrs old)
FOCALIN TABS (<i>Use dexmethylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate PTCH</i>	1	QL(1 EA daily); PA
METADATE CD CPCR (<i>Use methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>modafinil 200 MG</i>	1	QL(2 EA daily); PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>modafinil 100 MG</i>	1	QL(1 EA daily); PA
NUVIGIL (Use <i>armodafinil</i>)	NF	QL(1 EA daily); AL(At least 17 yrs old); PA
PROVIGIL 100 MG (Use <i>modafinil</i>)	NF	QL(1 EA daily); PA
PROVIGIL 200 MG (Use <i>modafinil</i>)	NF	QL(2 EA daily); PA
RITALIN LA CP24 30 MG (Use <i>methylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)
RITALIN LA CP24 10 MG, 20 MG, 40 MG (Use <i>methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)
RITALIN TABS 10 MG, 20 MG (Use <i>methylphenidate hcl</i>)	NF	QL(5 EA daily); AL(At least 6 yrs old)
RITALIN TABS 5 MG (Use <i>methylphenidate hcl</i>)	NF	QL(6 EA daily); AL(At least 6 yrs old)
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
GRASTEK SUBL	3	PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1	
ARIKAYCE	5	SP; PA
<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %</i>	1	
<i>gentamicin sulfate IJ 40 MG/ML</i>	1	
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (Use <i>tobramycin</i>)	NF	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); SP; PA
<i>neomycin sulfate TABS</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>streptomycin sulfate SOLR</i>	3	
TOBI NEBU (Use <i>tobramycin</i>)	NF	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); SP; PA
<i>tobramycin NEBU</i>	4	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); SP; PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
RINVOQ TB24	4	QL(1 EA daily); SP; PA
<i>tofacitinib citrate SOLN 1 MG/ML</i>	4	QL(20 ML daily); SP; PA
<i>tofacitinib citrate TABS 5 MG, 10 MG</i>	4	QL(2 EA daily); SP; PA
<i>tofacitinib citrate TB24 11 MG, 22 MG</i>	4	QL(1 EA daily); SP; PA
XELJANZ XR TB24 11 MG, 22 MG (Use <i>tofacitinib citrate</i>)	4	QL(1 EA daily); SP; PA
XELJANZ SOLN 1 MG/ML (Use <i>tofacitinib citrate</i>)	4	QL(20 ML daily); SP; PA
XELJANZ TABS 5 MG, 10 MG (Use <i>tofacitinib citrate</i>)	4	QL(2 EA daily); SP; PA
Anti-TNF-alpha - Monoclonal Antibodies		
ADALIMUMAB-AATY (1 PEN) AJKT	4	QL(0.29 EA daily); SP; PA
ADALIMUMAB-AATY (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA
ADALIMUMAB-AATY (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADALIMUMAB-ADAZ SOAJ	4	QL(0.143 ML daily); SP; PA	HUMIRA-PS/UV/ADOL HS STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA
ADALIMUMAB-ADAZ SOSY	4	QL(0.143 ML daily); SP; PA			
ADALIMUMAB-ADBM (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA	HUMIRA-PSORIASIS/UEIT STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA			
ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	4	QL(0.143 EA daily); SP; PA	SIMLANDI (1 PEN) AJKT	4	QL(0.143 EA daily); SP; PA
ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	4	QL(0.143 EA daily); SP; PA	SIMLANDI (1 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA
HUMIRA (2 PEN) AJKT 80 MG/0.8ML	4	QL(0.072 EA daily); SP; PA	SIMLANDI (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA
HUMIRA (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA	SIMLANDI (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA
HUMIRA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA	SIMPONI ARIA SOLN	4	SP; PA
HUMIRA-CD/UC/HS STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA	YUFLYMA (1 PEN) AJKT 40 MG/0.4ML	4	QL(0.29 EA daily); SP; PA
			YUFLYMA (1 PEN) AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); SP; PA
HUMIRA-PED<40KG CROHNS STARTER PSKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA	YUFLYMA (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA
			YUFLYMA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA
HUMIRA-PED>=40KG CROHNS START PSKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA	YUFLYMA-CD/UC/HS STARTER AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA
HUMIRA-PED>=40KG UC STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA	Gold Compounds		
			AURANOFIN 3 MG	3	QL(3 EA daily)
			RIDAURA	3	QL(3 EA daily)
			Interleukin-1 Blockers		
			ARCALYST	5	QL(0.286 EA daily); SP; PA
			Interleukin-6 Receptor Inhibitors		

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ACTEMRA ACTPEN SOAJ	4	QL(3.6 ML per 28 day(s) retail); SP; PA	<i>ibuprofen TABS 400 MG, 600 MG, 800 MG</i>	1	
ACTEMRA SOLN 80 MG/4ML	4	QL(20 ML per 28 day(s) retail); SP; PA	<i>indomethacin CAPS 25 MG, 50 MG</i>	1	
ACTEMRA SOLN 200 MG/10ML, 400 MG/20ML	4	QL(40 ML per 28 day(s) retail); SP; PA	<i>indomethacin CPCR</i>	1	
ACTEMRA SOSY	4	QL(3.6 ML per 28 day(s) retail); SP; PA	<i>ketoprofen CAPS 50 MG</i>	1	
KEVZARA SOAJ	5	QL(0.082 ML daily); SP; PA	<i>ketorolac tromethamine TABS</i>	1	QL(20 EA per fill retail; 20 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
KEVZARA SOSY	5	QL(0.082 ML daily); SP; PA	LODINE TABS (<i>Use etodolac</i>)	NF	
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			LURBIPR TABS 100 MG (<i>Use flurbiprofen</i>)	NF	
ANAPROX DS TABS (<i>Use naproxen sodium</i>)	NF		LURBIRO TABS 100 MG (<i>Use flurbiprofen</i>)	NF	
ARTHROTEC TBEC (<i>Use diclofenac w/ misoprostol</i>)	NF		<i>meclofenamate sodium CAPS</i>	1	
CELEBREX (<i>Use celecoxib</i>)	NF	QL(2 EA daily)	<i>mefenamic acid CAPS</i>	1	Must try ibuprofen.; QL(5 EA daily); ST
<i>celecoxib</i>	1	QL(2 EA daily)	<i>meloxicam TABS</i>	1	QL(1 EA daily)
DAYPRO TABS (<i>Use oxaprozin</i>)	NF		<i>nabumetone</i>	1	
<i>diclofenac potassium TABS 50 MG</i>	1		NAPROSYN SUSP (<i>Use naproxen</i>)	NF	PA
<i>diclofenac sodium TB24</i>	1		NAPROSYN TABS 500 MG (<i>Use naproxen</i>)	NF	
<i>diclofenac sodium TBEC</i>	1		<i>naproxen sodium TABS 550 MG</i>	1	
<i>diclofenac w/ misoprostol TBEC</i>	1		<i>naproxen SUSP</i>	1	PA
EC-NAPROSYN TBEC 375 MG (<i>Use naproxen</i>)	NF		<i>naproxen TABS</i>	1	
EC-NAPROSYN TBEC 500 MG (<i>Use naproxen</i>)	NF	QL(3 EA daily)	<i>naproxen TBEC 500 MG</i>	1	QL(3 EA daily)
<i>etodolac CAPS</i>	1		<i>oxaprozin TABS</i>	1	
<i>etodolac TABS</i>	1		<i>piroxicam CAPS</i>	1	
<i>fenoprofen calcium TABS</i>	1	QL(4 EA daily); ST	<i>sulindac TABS</i>	1	
<i>flurbiprofen TABS</i>	1		TOLECTIN DS CAPS 400 MG (<i>Use tolmetin sodium</i>)	NF	
<i>ibuprofen SUSP 100 MG/5ML, 200 MG/10ML</i>	1	RX/OTC	<i>tolmetin sodium CAPS</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>tolmetin sodium TABS 600 MG</i>	1	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA XR TB24 PO 75 MG	4	QL(1 EA daily); SP; PA
OTEZLA/OTEZLA XR INITIATION PK TBPk	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA
OTEZLA TABS	4	QL(2 EA daily); SP; PA
OTEZLA TBPk	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA
OTEZLA TBPk	4	1 package(s) per 180 day(s) retail; SP; PA
Pyrimidine Synthesis Inhibitors		
ARAVA (Use <i>leflunomide</i>)	NF	QL(1 EA daily)
<i>leflunomide</i>	1	QL(1 EA daily)
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL MINI SOCT	4	QL(0.146 ML daily); SP; PA
ENBREL SURECLICK SOAJ	4	QL(0.146 ML daily); SP; PA
ENBREL SOLN	4	QL(0.146 ML daily); SP; PA
ENBREL SOSY 25 MG/0.5ML	4	QL(0.146 ML daily); SP; PA
ENBREL SOSY 50 MG/ML	4	QL(0.286 ML daily); SP; PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1	QL(6 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1	
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1	QL(6 EA daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1	QL(6 EA daily)
<i>butalbital-aspirin-caffeine CAPS</i>	1	QL(4 EA daily)
ESGIC TABS (Use <i>butalbital-acetaminophen-caffeine</i>)	NF	QL(6 EA daily)
FIORICET CAPS (Use <i>butalbital-acetaminophen-caffeine</i>)	NF	QL(6 EA daily)
Salicylates		
<i>aspirin CHEW</i>	1	AL(At least 45 yrs old - Up to 79 yrs old); PV
<i>aspirin TABS 325 MG</i>	1	AL(At least 45 yrs old - Up to 79 yrs old); PV
<i>aspirin TBEC 81 MG</i>	1	AL(At least 45 yrs old - Up to 79 yrs old); PV
<i>aspirin TBEC 325 MG</i>	1	
<i>diflunisal TABS</i>	1	
<i>salsalate</i>	1	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
ACTIQ LPOP 400 MCG (Use <i>fentanyl citrate</i>)	NF	QL(4 EA daily); PA
<i>codeine sulfate TABS 30 MG</i>	1	New starts limited to 7 day supply
CODEINE SULFATE TABS	1	New starts limited to 7 day supply
DEMEROL SOLN IJ (Use <i>meperidine hcl</i>)	NF	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DILAUDID LIQD (<i>Use hydromorphone hcl</i>)	NF	New starts limited to 7 day supply	<i>meperidine hcl SOLN PO 50 MG/5ML</i>	1	New starts limited to 7 day supply; QL(500 ML per fill retail)
DILAUDID TABS (<i>Use hydromorphone hcl</i>)	NF	New starts limited to 7 day supply; QL(8 EA daily)	<i>meperidine hcl TABS 50 MG</i>	1	New starts limited to 7 day supply; QL(6 EA daily)
DISKETTS TBSO 40 MG (<i>Use methadone hcl</i>)	NF	QL(2 EA daily); PV	<i>methadone hcl CONC</i>	1	QL(10 ML daily); PV
DURAMORPH SOLN IJ 0.5 MG/ML, 1 MG/ML (<i>Use morphine sulfate</i>)	NF		<i>methadone hcl SOLN PO</i>	1	PV
<i>fentanyl citrate LPOP</i>	1	QL(4 EA daily); PA	METHADONE HCL SOLN IJ (<i>Use methadone hcl</i>)	NF	PV
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	1	QL(0.34 EA daily)	<i>methadone hcl TABS 5 MG</i>	1	QL(4 EA daily); PV
<i>hydrocodone bitartrate CP12</i>	3	QL(2 EA daily); PA	<i>methadone hcl TABS 10 MG</i>	1	QL(10 EA daily); PV
<i>hydrocodone bitartrate T24A</i>	3	QL(2 EA daily); PA	<i>methadone hcl TBSO</i>	1	QL(2 EA daily); PV
HYDROMORPHONE HCL PF SOLN IJ (<i>Use hydromorphone hcl</i>)	NF		METHADOSE SUGAR-FREE CONC (<i>Use methadone hcl</i>)	NF	QL(10 ML daily); PV
<i>hydromorphone hcl LIQD</i>	1	New starts limited to 7 day supply	METHADOSE CONC (<i>Use methadone hcl</i>)	NF	QL(10 ML daily); PV
<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1		<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1	QL(2 EA daily); PA
<i>hydromorphone hcl TABS</i>	1	New starts limited to 7 day supply; QL(8 EA daily)	<i>morphine sulfate SOLN PO 20 MG/5ML</i>	1	New starts limited to 7 day supply; QL(50 ML daily)
<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1	QL(2 EA daily); PA	<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1	
<i>hydromorphone hcl TB24 32 MG</i>	1	QL(1 EA daily); PA	<i>morphine sulfate SOLN PO 10 MG/5ML</i>	1	New starts limited to 7 day supply; QL(100 ML daily)
<i>levorphanol tartrate TABS 2 MG</i>	1	New starts limited to 7 day supply	<i>morphine sulfate TABS</i>	1	New starts limited to 7 day supply; QL(6 EA daily)
<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1		<i>morphine sulfate TBCR</i>	1	QL(2 EA daily)
			MS CONTIN TBCR (<i>Use morphine sulfate</i>)	NF	QL(2 EA daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG</i>	3	QL(2 EA daily); PA	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	1	New starts limited to 7 day supply
<i>oxycodone hcl TABS</i>	1	New starts limited to 7 day supply; QL(12 EA daily)	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1	New starts limited to 7 day supply; QL(6 EA daily)
<i>oxymorphone hcl TABS</i>	1	QL(12 EA daily); PA	<i>butalbital-aspirin-caffeine w/cod</i>	1	New starts limited to 7 day supply; QL(6 EA daily)
<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	1	QL(2 EA daily); PA	FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (Use <i>butalbital-acetaminophen-caffeine w/ codeine</i>)	NF	New starts limited to 7 day supply
<i>oxymorphone hcl TB12 40 MG</i>	1	QL(4 EA daily); PA	<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1	New starts limited to 7 day supply; QL(180 ML daily)
ROXICODONE TABS 15 MG, 30 MG (Use <i>oxycodone hcl</i>)	NF	New starts limited to 7 day supply; QL(12 EA daily)	<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	1	New starts limited to 7 day supply
<i>tramadol hcl TABS 50 MG</i>	1	New starts limited to 7 day supply; QL(8 EA daily)	<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	1	New starts limited to 7 day supply; QL(13 EA daily)
<i>tramadol hcl TB24</i>	1	QL(1 EA daily)	<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	New starts limited to 7 day supply; QL(12 EA daily)
Opioid Combinations			<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1	PA
<i>acetaminophen w/ codeine SOLN</i>	1	New starts limited to 7 day supply; QL(75 ML daily)	<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1	New starts limited to 7 day supply; QL(5 EA daily)
<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	1	New starts limited to 7 day supply; QL(6 EA daily)	<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	1	New starts limited to 7 day supply; QL(13 EA daily)
<i>acetaminophen w/ codeine TABS 15 MG-300 MG</i>	1	New starts limited to 7 day supply; QL(13 EA daily)			
<i>acetaminophen w/ codeine TABS 30 MG-300 MG</i>	1	New starts limited to 7 day supply; QL(12 EA daily)			
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	3	New starts limited to 7 day supply; PA			
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1	New starts limited to 7 day supply			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	New starts limited to 7 day supply; QL(12 EA daily)	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (<i>Use buprenorphine hcl-naloxone hcl dihydrate</i>)	NF	QL(3 EA daily)
PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (<i>Use oxycodone w/ acetaminophen</i>)	NF	New starts limited to 7 day supply; QL(12 EA daily)	SUBOXONE FILM SL 3 MG-12 MG (<i>Use buprenorphine hcl-naloxone hcl dihydrate</i>)	NF	QL(2 EA daily)
PERCOCET TABS 325 MG-2.5 MG (<i>Use oxycodone w/ acetaminophen</i>)	NF	New starts limited to 7 day supply; QL(13 EA daily)	ZUBSOLV SUBL	3	
<i>tramadol-acetaminophen</i>	1	New starts limited to 7 day supply; QL(8 EA daily)	ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Opioid Partial Agonists			Androgens		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1	QL(2 EA daily)	ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	2	QL(1 EA daily); PA
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1	QL(3 EA daily)	<i>danazol CAPS</i>	1	
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1	QL(3 EA daily); PV	<i>methyltestosterone TABS</i>	1	
<i>buprenorphine hcl SOLN</i>	1		<i>testosterone cypionate SOLN IM</i>	1	
<i>buprenorphine hcl SUBL</i>	1	QL(3 EA daily); PV	TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	1	
<i>buprenorphine PTWK</i>	1	QL(0.143 EA daily); PA	<i>testosterone enanthate SOLN IM</i>	1	
<i>butorphanol tartrate NA 10 MG/ML</i>	1	QL(0.34 ML daily); PA	ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1		Intrarectal Steroids		
BUTRANS PTWK (<i>Use buprenorphine</i>)	NF	QL(0.143 EA daily); PA	<i>budesonide (intrarectal)</i>	4	QL(3.2 GM daily); PA
<i>pentazocine w/ naloxone hcl</i>	1	New starts limited to 7 day supply	CORTENEMA (<i>Use hydrocortisone (intrarectal)</i>)	NF	
SUBLOCADE SOSY	3	SP	<i>hydrocortisone (intrarectal)</i>	1	
			UCERIS (<i>Use budesonide (intrarectal)</i>)	NF	QL(3.2 GM daily); PA
			Rectal Steroids		
			ANUCORT-HC 25 MG (<i>Use hydrocortisone acetate (rectal)</i>)	NF	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
ANUSOL-HC 25 MG (<i>Use hydrocortisone acetate (rectal)</i>)	NF	
ANUSOL-HC EX (<i>Use hydrocortisone (rectal)</i>)	NF	
HEMMOREX-HC 25 MG, 30 MG (<i>Use hydrocortisone acetate (rectal)</i>)	NF	
<i>hydrocortisone (rectal) EX</i>	1	
<i>hydrocortisone acetate (rectal)</i>	1	
PROCTOCORT (<i>Use hydrocortisone acetate (rectal)</i>)	NF	
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1	
RECTIV (<i>Use nitroglycerin (intra-anal)</i>)	NF	
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<i>albendazole</i>	1	PA
BILTRICIDE (<i>Use praziquantel</i>)	NF	PA
EMVERM CHEW	2	QL(2 EA daily; 6 EA per fill retail; 6 per fill mail); 1 max fill(s) per 60 day(s) retail; 1 max fill(s) per 60 day(s) mail
<i>ivermectin</i>	1	QL(9 EA per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail
<i>praziquantel</i>	1	PA

Drug Name	Drug Tier	Requirements/ Limits
STROMEKTOL (<i>Use ivermectin</i>)	NF	QL(9 EA per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
<i>ranolazine TB12 1000 MG</i>	1	QL(2 EA daily)
<i>ranolazine TB12 500 MG</i>	1	QL(3 EA daily)
Nitrates		
ISORDIL TITRADOSE TABS 5 MG (<i>Use isosorbide dinitrate</i>)	NF	
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1	
<i>isosorbide mononitrate TABS</i>	1	
<i>isosorbide mononitrate TB24</i>	1	
NITRO-DUR PT24 (<i>Use nitroglycerin</i>)	NF	
<i>nitroglycerin OINT</i>	1	
<i>nitroglycerin PT24</i>	1	
NITROGLYCERIN SOLN IV	1	
<i>nitroglycerin SUBL</i>	1	
NITROSTAT SUBL (<i>Use nitroglycerin</i>)	NF	
ANTIANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl</i>	1	
<i>hydroxyzine hcl SOLN 50 MG/ML</i>	1	
<i>hydroxyzine hcl SYRP</i>	1	
<i>hydroxyzine hcl TABS</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>hydroxyzine pamoate CAPS</i>	1	
<i>meprobamate</i>	1	
VISTARIL CAPS 25 MG (Use <i>hydroxyzine pamoate</i>)	NF	
Benzodiazepines		
<i>alprazolam TABS</i>	1	QL(4 EA daily)
<i>alprazolam TB24</i>	1	
<i>alprazolam TBDP</i>	1	
ATIVAN TABS 1 MG (Use <i>lorazepam</i>)	NF	QL(4 EA daily)
ATIVAN TABS 0.5 MG, 2 MG (Use <i>lorazepam</i>)	NF	QL(3 EA daily)
<i>chlordiazepoxide hcl CAPS</i>	1	
<i>clorazepate dipotassium TABS</i>	1	
<i>diazepam CONC</i>	1	
<i>diazepam SOLN PO 5 MG/5ML</i>	1	
<i>diazepam TABS</i>	1	QL(4 EA daily)
<i>lorazepam CONC</i>	1	
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1	QL(3 EA daily)
<i>lorazepam TABS 1 MG</i>	1	QL(4 EA daily)
<i>oxazepam CAPS</i>	1	
VALIUM TABS (Use <i>diazepam</i>)	NF	QL(4 EA daily)
XANAX XR TB24 (Use <i>alprazolam</i>)	NF	
XANAX TABS (Use <i>alprazolam</i>)	NF	QL(4 EA daily)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
NORPACE CAPS (Use <i>disopyramide phosphate</i>)	NF	
<i>procainamide hcl SOLN 500 MG/ML</i>	1	
<i>quinidine sulfate TABS</i>	1	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	1	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1	
<i>propafenone hcl CP12</i>	1	
<i>propafenone hcl TABS</i>	1	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 150 MG/3ML</i>	1	
<i>amiodarone hcl TABS</i>	1	
<i>dofetilide</i>	1	
TIKOSYN (Use <i>dofetilide</i>)	NF	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
FASENRA PEN SOAJ	4	QL(0.036 ML daily); SP; PA
FASENRA SOSY 30 MG/ML	4	QL(0.036 ML daily); SP; PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1	QL(8 ML daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA 17 MCG/ACT (Use <i>ipratropium bromide hfa</i>)	3	QL(0.44 GM daily)
INCRUSE ELLIPTA 62.5 MCG/ACT (Use <i>umeclidinium bromide</i>)	2	QL(1 EA daily)
<i>ipratropium bromide hfa 17 MCG/ACT</i>	1	QL(0.44 GM daily)
<i>ipratropium bromide SOLN 0.02 %</i>	1	QL(15 ML daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SPIRIVA HANDIHALER CAPS IN (<i>Use tiotropium bromide</i>)	NF	QL(1 EA daily)	ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (<i>Use fluticasone furoate (inhalation)</i>)	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
SPIRIVA RESPIMAT AERS IN	2	QL(0.14 GM daily)	<i>budesonide (inhalation) SUSP</i>	1	QL(4 ML daily); PA
<i>tiotropium bromide CAPS IN 18 MCG</i>	1	QL(1 EA daily)	FLOVENT HFA 44 MCG/ACT (<i>Use fluticasone propionate hfa</i>)	NF	
<i>umeclidinium bromide 62.5 MCG/INH</i>	1	QL(1 EA daily)	<i>fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
Leukotriene Modulators			<i>fluticasone propionate (inhalation) AEPB</i>	1	
ACCOLATE (<i>Use zafirlukast</i>)	NF	QL(2 EA daily)	<i>fluticasone propionate hfa</i>	1	QL(0.8 GM daily)
<i>montelukast sodium CHEW</i>	1	QL(1 EA daily)	PULMICORT FLEXHALER AEPB	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>montelukast sodium PACK</i>	1	QL(1 EA daily)	PULMICORT FLEXHALER AEPB	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>montelukast sodium TABS</i>	1	QL(1 EA daily)	PULMICORT SUSP (<i>Use budesonide (inhalation)</i>)	NF	QL(4 ML daily); PA
SINGULAIR CHEW (<i>Use montelukast sodium</i>)	NF	QL(1 EA daily)	QVAR REDIHALER	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
SINGULAIR PACK (<i>Use montelukast sodium</i>)	NF	QL(1 EA daily)	Sympathomimetics		
SINGULAIR TABS (<i>Use montelukast sodium</i>)	NF	QL(1 EA daily)	ADVAIR DISKUS AEPB (<i>Use fluticasone-salmeterol</i>)	NF	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>zafirlukast</i>	1	QL(2 EA daily)	ADVAIR HFA AERO (<i>Use fluticasone-salmeterol</i>)	NF	
<i>zileuton TB12</i>	3	QL(4 EA daily); PA			
Selective Phosphodiesterase 4 (PDE4) Inhibitors					
DALIRESP (<i>Use roflumilast</i>)	NF	QL(1 EA daily)			
<i>roflumilast</i>	3	QL(1 EA daily)			
Steroid Inhalants					
ALVESCO	3	3 package(s) per 30 day(s) retail; 9 package(s) per 90 day(s) mail; PA			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AIRDUO RESPICLICK 113/14 AEPB (Use <i>fluticasone-salmeterol</i>)	NF		<i>fluticasone furoate-vilanterol</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
AIRDUO RESPICLICK 232/14 AEPB (Use <i>fluticasone-salmeterol</i>)	NF		<i>fluticasone-salmeterol</i> AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
AIRDUO RESPICLICK 55/14 AEPB (Use <i>fluticasone-salmeterol</i>)	NF		<i>fluticasone-salmeterol</i> AERO	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>albuterol sulfate</i> AERS	1		<i>formoterol fumarate</i> NEBU	1	QL(4 ML daily)
<i>albuterol sulfate</i> NEBU	1		<i>ipratropium-albuterol</i> SOLN	1	QL(18 ML daily)
<i>albuterol sulfate</i> NEBU	1	QL(15 ML daily)	<i>levalbuterol hcl</i>	1	QL(12 ML daily)
<i>albuterol sulfate</i> SYRP	1		<i>levalbuterol hcl</i> 1.25 MG/0.5ML	1	
<i>albuterol sulfate</i> TABS	1		<i>levalbuterol tartrate</i>	1	QL(0.5 GM daily)
ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (Use <i>umeclidinium-vilanterol</i>)	NF		PERFOROMIST NEBU (Use <i>formoterol fumarate</i>)	NF	QL(4 ML daily)
<i>arformoterol tartrate</i>	1	QL(4 ML daily)	PROVENTIL HFA AERS (Use <i>albuterol sulfate</i>)	NF	
BREO ELLIPTA	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	SEREVENT DISKUS	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
BREO ELLIPTA (Use <i>fluticasone furoate-vilanterol</i>)	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	STIOLTO RESPIMAT	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
BREZTRI AEROSPHERE	2	QL(0.38 GM daily)	STRIVERDI RESPIMAT	2	
BROVANA (Use <i>arformoterol tartrate</i>)	NF	QL(4 ML daily)			
<i>budesonide-formoterol fumarate dihydrate</i>	1	1 package(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; 1 max fill(s) per 30 day(s) mail			
COMBIVENT RESPIMAT AERS	2	QL(0.16 GM daily)			
DULERA	2				

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SYMBICORT (<i>Use budesonide-formoterol fumarate dihydrate</i>)	NF	1 package(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; 1 max fill(s) per 30 day(s) mail	XARELTO SUSR 1 MG/ML (<i>Use rivaroxaban</i>)	NF	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)
<i>terbutaline sulfate SOLN</i>	1		XARELTO TABS 15 MG	2	QL(2 EA daily)
<i>terbutaline sulfate TABS</i>	1		XARELTO TABS 10 MG, 20 MG	2	QL(1 EA daily)
TRELEGY ELLIPTA	2	QL(2 EA daily)	XARELTO TABS 2.5 MG (<i>Use rivaroxaban</i>)	NF	QL(2 EA daily)
<i>umeclidinium-vilanterol</i>	2	QL(2 EA daily)	Heparins And Heparinoid-Like Agents		
VENTOLIN HFA AERS (<i>Use albuterol sulfate</i>)	NF		ARIXTRA 10 MG/0.8ML (<i>Use fondaparinux sodium</i>)	NF	QL(7.2 ML per 180 day(s) retail; 7 ML per 180 days mail); SP
XOPENEX HFA (<i>Use levalbuterol tartrate</i>)	NF		ARIXTRA 7.5 MG/0.6ML (<i>Use fondaparinux sodium</i>)	NF	QL(5.4 ML per 180 day(s) retail; 5 ML per 180 days mail); SP
Xanthines			ARIXTRA 5 MG/0.4ML (<i>Use fondaparinux sodium</i>)	NF	QL(3.6 ML per 180 day(s) retail; 4 ML per 180 days mail); SP
<i>theophylline ELIX</i>	1		ARIXTRA 2.5 MG/0.5ML (<i>Use fondaparinux sodium</i>)	NF	QL(4.5 ML per 180 day(s) retail; 4 ML per 180 days mail); SP
<i>theophylline SOLN</i>	1	QL(56 ML daily)	<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ML daily); SP
<i>theophylline TB12</i>	1		<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ML daily); SP
<i>theophylline TB24</i>	1		<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ML daily); SP
ANTICOAGULANTS - Blood Thinners			<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ML daily); SP
Coumarin Anticoagulants			<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ML daily); SP
<i>warfarin sodium TABS</i>	1		<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ML daily); SP
Direct Factor Xa Inhibitors					
ELIQUIS DVT/PE STARTER PACK TBPB	2	QL(2.47 EA daily); 1 max fill(s) per 180 day(s) retail			
ELIQUIS TABS	2	QL(2 EA daily)			
<i>rivaroxaban SUSR 1 MG/ML</i>	1	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)			
<i>rivaroxaban TABS 2.5 MG</i>	1	QL(2 EA daily)			
XARELTO STARTER PACK TBPB	2	1 max fill(s) per 365 day(s) retail			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fondaparinux sodium 5 MG/0.4ML</i>	4	QL(3.6 ML per 180 day(s) retail; 4 ML per 180 days mail); SP	Thrombin Inhibitors		
<i>fondaparinux sodium 2.5 MG/0.5ML</i>	4	QL(4.5 ML per 180 day(s) retail; 4 ML per 180 days mail); SP	<i>dabigatran etexilate mesylate CAPS</i>	1	
<i>fondaparinux sodium 10 MG/0.8ML</i>	4	QL(7.2 ML per 180 day(s) retail; 7 ML per 180 days mail); SP	PRADAXA CAPS (<i>Use dabigatran etexilate mesylate</i>)	NF	
<i>fondaparinux sodium 7.5 MG/0.6ML</i>	4	QL(5.4 ML per 180 day(s) retail; 5 ML per 180 days mail); SP	ANTICONVULSANTS - Drugs to Treat Seizures		
FRAGMIN SOSY	4	SP; PA	AMPA Glutamate Receptor Antagonists		
HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML	1		FYCOMPA TABS 8 MG, 10 MG, 12 MG (<i>Use perampanel</i>)	NF	QL(1 EA daily); PA
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1		FYCOMPA TABS 6 MG (<i>Use perampanel</i>)	NF	QL(2 EA daily); PA
LOVENOX SOLN IJ 300 MG/3ML (<i>Use enoxaparin sodium</i>)	NF	QL(6 ML daily); SP	FYCOMPA TABS 4 MG (<i>Use perampanel</i>)	NF	QL(3 EA daily); PA
LOVENOX SOSY 30 MG/0.3ML (<i>Use enoxaparin sodium</i>)	NF	QL(0.6 ML daily); SP	FYCOMPA TABS 2 MG (<i>Use perampanel</i>)	NF	QL(6 EA daily); PA
LOVENOX SOSY 60 MG/0.6ML (<i>Use enoxaparin sodium</i>)	NF	QL(1.2 ML daily); SP	<i>perampanel TABS 2 MG</i>	1	QL(6 EA daily); PA
LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>Use enoxaparin sodium</i>)	NF	QL(2 ML daily); SP	<i>perampanel TABS 8 MG, 10 MG, 12 MG</i>	1	QL(1 EA daily); PA
LOVENOX SOSY 40 MG/0.4ML (<i>Use enoxaparin sodium</i>)	NF	QL(0.8 ML daily); SP	<i>perampanel TABS 6 MG</i>	1	QL(2 EA daily); PA
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>Use enoxaparin sodium</i>)	NF	QL(1.6 ML daily); SP	<i>perampanel TABS 4 MG</i>	1	QL(3 EA daily); PA
			Anticonvulsants - Benzodiazepines		
			<i>clobazam SUSP</i>	1	QL(16 ML daily); PA
			<i>clobazam TABS</i>	1	QL(2 EA daily); PA
			<i>clonazepam TABS</i>	1	
			DIASTAT PEDIATRIC GEL (<i>Use diazepam (anticonvulsant)</i>)	NF	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
			<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
			KLONOPIN TABS (<i>Use clonazepam</i>)	NF	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NAYZILAM	3	QL(10 EA per 30 day(s) retail); PA	CARBATROL CP12 100 MG (<i>Use carbamazepine</i>)	NF	
ONFI SUSP (<i>Use clobazam</i>)	NF	QL(16 ML daily); PA	CARBATROL CP12 300 MG (<i>Use carbamazepine</i>)	NF	QL(4 EA daily)
ONFI TABS (<i>Use clobazam</i>)	NF	QL(2 EA daily); PA	CARBATROL CP12 200 MG (<i>Use carbamazepine</i>)	NF	QL(6 EA daily)
VALTOCO 10 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA	DIACOMIT CAPS	5	QL(12 EA daily); SP; PA
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA	DIACOMIT PACK 500 MG	5	QL(6 EA daily); SP; PA
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA	DIACOMIT PACK 250 MG	5	QL(12 EA daily); SP; PA
VALTOCO 5 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA	EPIDIOLEX	3	SP; PA
Anticonvulsants - Misc.			<i>eslicarbazepine acetate</i> 200 MG, 400 MG, 600 MG, 800 MG	1	QL(2 EA daily); ST
APTiom 200 MG, 400 MG, 600 MG, 800 MG (<i>Use eslicarbazepine acetate</i>)	3	QL(2 EA daily); ST	<i>gabapentin</i> CAPS	1	
BANZEL SUSP (<i>Use rufinamide</i>)	NF	QL(80 ML daily); SP; PA	<i>gabapentin</i> SOLN	1	QL(60 ML daily)
BANZEL TABS 400 MG (<i>Use rufinamide</i>)	2	QL(8 EA daily); SP; PA	<i>gabapentin</i> TABS 600 MG, 800 MG	1	
BANZEL TABS 200 MG (<i>Use rufinamide</i>)	2	QL(2 EA daily); SP; PA	KEPPRA XR TB24 (<i>Use levetiracetam</i>)	NF	QL(4 EA daily)
<i>carbamazepine</i> CHEW	1		KEPPRA SOLN PO 100 MG/ML (<i>Use levetiracetam</i>)	NF	QL(30 ML daily)
<i>carbamazepine</i> CP12 200 MG	1	QL(6 EA daily)	KEPPRA TABS 1000 MG (<i>Use levetiracetam</i>)	NF	QL(3 EA daily)
<i>carbamazepine</i> CP12 100 MG	1		KEPPRA TABS 250 MG, 750 MG (<i>Use levetiracetam</i>)	NF	QL(4 EA daily)
<i>carbamazepine</i> CP12 300 MG	1	QL(4 EA daily)	KEPPRA TABS 500 MG (<i>Use levetiracetam</i>)	NF	QL(6 EA daily)
<i>carbamazepine</i> SUSP	1		<i>lacosamide</i> SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML	1	QL(40 ML daily)
<i>carbamazepine</i> TABS	1		<i>lacosamide</i> TABS	1	QL(2 EA daily)
<i>carbamazepine</i> TB12 200 MG	1	QL(6 EA daily)	LAMICTAL ODT TBDP (<i>Use lamotrigine</i>)	NF	QL(1 EA daily)
<i>carbamazepine</i> TB12 100 MG, 400 MG	1	QL(4 EA daily)	LAMICTAL CHEW 5 MG (<i>Use lamotrigine</i>)	NF	QL(100 EA daily)
			LAMICTAL CHEW 25 MG (<i>Use lamotrigine</i>)	NF	QL(20 EA daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LAMICTAL TABS 150 MG, 200 MG (Use lamotrigine)	3		pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG	3	QL(3 EA daily)
LAMICTAL TABS 25 MG, 100 MG (Use lamotrigine)	NF		pregabalin SOLN	3	QL(30 ML daily)
lamotrigine CHEW 5 MG	1	QL(100 EA daily)	primidone 50 MG, 250 MG	1	
lamotrigine CHEW 25 MG	1	QL(20 EA daily)	QUDEXY XR CS24 (Use topiramate)	NF	PA
lamotrigine TABS	1		rufinamide SUSP	1	QL(80 ML daily); SP; PA
lamotrigine TBDP	1	QL(1 EA daily)	rufinamide TABS 400 MG	1	QL(8 EA daily); SP; PA
levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	1	QL(30 ML daily)	rufinamide TABS 200 MG	1	QL(2 EA daily); SP; PA
levetiracetam TABS 250 MG, 750 MG	1	QL(4 EA daily)	TEGRETOL SUSP (Use carbamazepine)	2	
levetiracetam TABS 1000 MG	1	QL(3 EA daily)	TEGRETOL TABS (Use carbamazepine)	2	
levetiracetam TABS 500 MG	1	QL(6 EA daily)	TEGRETOL-XR TB12 200 MG (Use carbamazepine)	NF	QL(6 EA daily)
levetiracetam TB24	1	QL(4 EA daily)	TEGRETOL-XR TB12 100 MG, 400 MG (Use carbamazepine)	NF	QL(4 EA daily)
LYRICA CAPS 225 MG, 300 MG (Use pregabalin)	NF	QL(2 EA daily)	TOPAMAX SPRINKLE CPSP 25 MG (Use topiramate)	NF	QL(8 EA daily)
LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG (Use pregabalin)	NF	QL(3 EA daily)	TOPAMAX SPRINKLE CPSP 15 MG (Use topiramate)	NF	QL(6 EA daily)
LYRICA SOLN (Use pregabalin)	NF	QL(30 ML daily)	TOPAMAX TABS 200 MG (Use topiramate)	NF	QL(2 EA daily)
MYSOLINE (Use primidone)	NF		TOPAMAX TABS 25 MG, 100 MG (Use topiramate)	NF	QL(4 EA daily)
NEURONTIN CAPS (Use gabapentin)	NF		TOPAMAX TABS 50 MG (Use topiramate)	NF	QL(6 EA daily)
NEURONTIN SOLN (Use gabapentin)	NF	QL(60 ML daily)	topiramate CPSP 15 MG	1	QL(6 EA daily)
NEURONTIN TABS (Use gabapentin)	NF		topiramate CPSP 25 MG	1	QL(8 EA daily)
oxcarbazepine SUSP	1	QL(40 ML daily)	topiramate CS24	3	PA
oxcarbazepine TABS 150 MG, 300 MG	1	QL(3 EA daily)	topiramate TABS 50 MG	1	QL(6 EA daily)
oxcarbazepine TABS 600 MG	1	QL(4 EA daily)	topiramate TABS 200 MG	1	QL(2 EA daily)
pregabalin CAPS 225 MG, 300 MG	3	QL(2 EA daily)	topiramate TABS 25 MG, 100 MG	1	QL(4 EA daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
TRILEPTAL SUSP (<i>Use oxcarbazepine</i>)	NF	QL(40 ML daily)
TRILEPTAL TABS 150 MG, 300 MG (<i>Use oxcarbazepine</i>)	NF	QL(3 EA daily)
TRILEPTAL TABS 600 MG (<i>Use oxcarbazepine</i>)	NF	QL(4 EA daily)
VIMPAT SOLN PO 10 MG/ML (<i>Use lacosamide</i>)	NF	QL(40 ML daily)
VIMPAT TABS (<i>Use lacosamide</i>)	NF	QL(2 EA daily)
ZONEGRAN CAPS 25 MG, 100 MG (<i>Use zonisamide</i>)	NF	QL(6 EA daily)
zonisamide CAPS	1	QL(6 EA daily)
Carbamates		
felbamate SUSP	1	QL(30 ML daily)
felbamate TABS 600 MG	1	QL(6 EA daily)
felbamate TABS 400 MG	1	QL(9 EA daily)
FELBATOL SUSP (<i>Use felbamate</i>)	NF	QL(30 ML daily)
FELBATOL TABS 400 MG (<i>Use felbamate</i>)	NF	QL(9 EA daily)
FELBATOL TABS 600 MG (<i>Use felbamate</i>)	NF	QL(6 EA daily)
GABA Modulators		
SABRIL PACK (<i>Use vigabatrin</i>)	NF	QL(6 EA daily); SP; PA
SABRIL TABS (<i>Use vigabatrin</i>)	NF	QL(6 EA daily); SP; PA
tiagabine hcl	1	
vigabatrin PACK	4	QL(6 EA daily); SP; PA
vigabatrin TABS	4	QL(6 EA daily); SP; PA
Hydantoins		
CEREBYX (<i>Use fosphenytoin sodium</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits
DILANTIN (<i>Use phenytoin sodium extended</i>)	2	
DILANTIN	2	
DILANTIN INFATABS CHEW (<i>Use phenytoin</i>)	2	
DILANTIN-125 SUSP (<i>Use phenytoin</i>)	2	
DILANTIN SUSP (<i>Use phenytoin</i>)	2	
fosphenytoin sodium	1	
phenytoin sodium extended 100 MG, 200 MG, 300 MG	1	
phenytoin sodium SOLN	1	
phenytoin CHEW	1	
phenytoin SUSP	1	
Succinimides		
CELONTIN (<i>Use methsuximide</i>)	NF	QL(4 EA daily)
ethosuximide CAPS	1	QL(6 EA daily)
ethosuximide SOLN	1	QL(30 ML daily)
methsuximide	1	QL(4 EA daily)
ZARONTIN CAPS (<i>Use ethosuximide</i>)	2	QL(6 EA daily)
ZARONTIN SOLN (<i>Use ethosuximide</i>)	NF	QL(30 ML daily)
Valproic Acid		
DEPAKOTE ER TB24 (<i>Use divalproex sodium</i>)	NF	
DEPAKOTE TBEC (<i>Use divalproex sodium</i>)	NF	
divalproex sodium TB24	1	
divalproex sodium TBEC	1	
valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML	1	
valproic acid CAPS	1	

ANTIDEPRESSANTS - Drugs to Treat Depression

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Alpha-2 Receptor Antagonists (Tetracyclics)			<i>citalopram hydrobromide TABS</i>	1	
<i>mirtazapine TABS</i>	1		<i>escitalopram oxalate SOLN</i>	1	
<i>mirtazapine TBDP</i>	1		<i>escitalopram oxalate TABS</i>	1	
REMERON SOLTAB TBDP (Use mirtazapine)	NF		<i>fluoxetine hcl CAPS</i>	1	
REMERON TABS 15 MG, 30 MG (Use mirtazapine)	NF		<i>fluoxetine hcl CPDR</i>	1	
Antidepressants - Misc.			<i>fluoxetine hcl SOLN</i>	1	
<i>bupropion hcl TABS</i>	1		<i>fluoxetine hcl TABS</i>	1	
<i>bupropion hcl TB12</i>	1		FLUOXETINE HCL TABS (Use fluoxetine hcl)	NF	
<i>bupropion hcl TB24 150 MG, 300 MG</i>	1		<i>fluvoxamine maleate TABS</i>	1	
FORFIVO XL TB24 (Use bupropion hcl)	NF		LEXAPRO TABS (Use escitalopram oxalate)	NF	
WELLBUTRIN SR TB12 (Use bupropion hcl)	NF		<i>paroxetine hcl SUSP</i>	1	
WELLBUTRIN XL TB24 (Use bupropion hcl)	NF		<i>paroxetine hcl TABS</i>	1	
Monoamine Oxidase Inhibitors (MAOIs)			<i>paroxetine hcl TB24</i>	1	
EMSAM	3	QL(1 EA daily)	PAXIL CR TB24 (Use paroxetine hcl)	NF	
MARPLAN	2	QL(6 EA daily)	PAXIL SUSP (Use paroxetine hcl)	NF	
NARDIL (Use phenelzine sulfate)	NF		PAXIL TABS (Use paroxetine hcl)	NF	
PARNATE (Use tranylcypromine sulfate)	NF		PROZAC CAPS (Use fluoxetine hcl)	NF	
<i>phenelzine sulfate</i>	1		<i>sertraline hcl CONC</i>	1	
<i>tranylcypromine sulfate</i>	1		<i>sertraline hcl TABS</i>	1	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists			ZOLOFT CONC (Use sertraline hcl)	NF	
SPRAVATO (56 MG DOSE)	4	SP; PA	ZOLOFT TABS (Use sertraline hcl)	NF	
SPRAVATO (84 MG DOSE)	4	SP; PA	Serotonin Modulators		
Selective Serotonin Reuptake Inhibitors (SSRIs)			<i>nefazodone hcl</i>	1	
CELEXA TABS (Use citalopram hydrobromide)	NF		<i>trazodone hcl TABS</i>	1	
<i>citalopram hydrobromide SOLN</i>	1		TRINTELLIX	3	QL(1 EA daily); PA
			VIIBRYD TABS (Use vilazodone hcl)	NF	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>vilazodone hcl TABS</i>	1		ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			Alpha-Glucosidase Inhibitors		
<i>CYMBALTA CPEP (Use duloxetine hcl)</i>	NF		<i>acarbose</i>	1	QL(3 EA daily)
<i>desvenlafaxine succinate</i>	1		<i>miglitol</i>	1	QL(3 EA daily)
<i>duloxetine hcl CPEP</i>	1		Antidiabetic Combinations		
<i>EFFEXOR XR CP24 (Use venlafaxine hcl)</i>	NF		<i>ACTOPLUS MET TABS 850 MG-15 MG (Use pioglitazone hcl-metformin hcl)</i>	NF	QL(2 EA daily)
<i>FETZIMA TITRATION C4PK</i>	3	PA	<i>alogliptin-metformin hcl</i>	1	QL(2 EA daily); PA
<i>FETZIMA CP24</i>	3	QL(1 EA daily); PA	<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1	QL(1 EA daily); PA
<i>PRISTIQ (Use desvenlafaxine succinate)</i>	NF		<i>alogliptin-pioglitazone 30 MG-12.5 MG</i>	1	QL(2 EA daily); PA
<i>venlafaxine hcl CP24</i>	1		<i>dapagliflozin free base-metformin hcl TB24 PO 1000 MG-5 MG</i>	1	QL(2 EA daily)
<i>venlafaxine hcl TABS</i>	1		<i>dapagliflozin free base-metformin hcl TB24 PO 1000 MG-10 MG</i>	1	QL(1 EA daily)
<i>venlafaxine hcl TB24</i>	1		<i>dapagliflozin-saxagliptin</i>	1	QL(1 EA daily)
Tricyclic Agents			<i>DUETACT (Use pioglitazone hcl-glimepiride)</i>	NF	QL(1 EA daily)
<i>amitriptyline hcl TABS</i>	1		<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1	QL(2 EA daily)
<i>amoxapine</i>	1		<i>glipizide-metformin hcl 500 MG-5 MG</i>	1	QL(4 EA daily)
<i>ANAFRANIL (Use clomipramine hcl)</i>	NF		<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1	QL(4 EA daily)
<i>clomipramine hcl</i>	1		<i>glyburide-metformin 250 MG-1.25 MG</i>	1	QL(2 EA daily)
<i>desipramine hcl TABS</i>	1		<i>GLYXAMBI</i>	2	QL(1 EA daily)
<i>doxepin hcl CAPS</i>	1		<i>JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG</i>	2	QL(2 EA daily)
<i>doxepin hcl CONC</i>	1		<i>JANUMET XR TB24 1000 MG-100 MG</i>	2	QL(1 EA daily)
<i>imipramine hcl TABS</i>	1				
<i>imipramine pamoate</i>	1				
<i>NORPRAMIN TABS 10 MG, 25 MG (Use desipramine hcl)</i>	NF				
<i>nortriptyline hcl CAPS</i>	1				
<i>nortriptyline hcl SOLN</i>	1				
<i>PAMELOR CAPS (Use nortriptyline hcl)</i>	NF				
<i>protriptyline hcl</i>	1				
<i>trimipramine maleate CAPS</i>	1				

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
JANUMET TABS 1000 MG-50 MG, 500 MG-50 MG (Use sitagliptin phosphate-metformin hcl)	NF	QL(2 EA daily)
pioglitazone hcl-glimepiride	1	QL(1 EA daily)
pioglitazone hcl-metformin hcl TABS	1	QL(2 EA daily)
saxagliptin-metformin hcl 1000 MG-2.5 MG	1	QL(2 EA daily)
saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG	1	QL(1 EA daily)
sitagliptin phosphate-metformin hcl TABS	1	QL(2 EA daily)
SOLIQUA	2	QL(0.5 ML daily); PA
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 EA daily)
SYNJARDY TABS	2	QL(2 EA daily)
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 EA daily)
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 EA daily)
XIGDUO XR TB24 PO 1000 MG-2.5 MG	2	QL(2 EA daily)
XIGDUO XR TB24 PO (Use dapagliflozin free base-metformin hcl)	NF	QL(2 EA daily)
XIGDUO XR TB24 PO (Use dapagliflozin free base-metformin hcl)	NF	QL(1 EA daily)
XULTOPHY	2	QL(0.5 ML daily); PA
Biguanides		
GLUMETZA TB24 (Use metformin hcl)	NF	

Drug Name	Drug Tier	Requirements/ Limits
metformin hcl TABS 500 MG	1	QL(5 EA daily)
metformin hcl TABS 850 MG	1	QL(3 EA daily); PV
metformin hcl TABS 1000 MG	1	QL(2.5 EA daily)
metformin hcl TB24 500 MG	1	QL(4 EA daily)
metformin hcl TB24 750 MG	1	QL(3 EA daily)
Diabetic Other		
diazoxide	3	
GLUCAGON EMERGENCY SOLR IJ 1 MG (Use glucagon)	NF	QL(0.035 EA daily)
glucagon SOLR IJ 1 MG	1	QL(0.035 EA daily)
PROGLYCEM (Use diazoxide)	NF	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
alogliptin benzoate	1	QL(1 EA daily)
JANUVIA 25 MG, 50 MG, 100 MG (Use sitagliptin phosphate)	NF	QL(1 EA daily)
ONGLYZA 5 MG (Use saxagliptin hcl)	NF	QL(1 EA daily)
saxagliptin hcl	1	QL(1 EA daily)
sitagliptin phosphate 25 MG, 50 MG, 100 MG	1	QL(1 EA daily)
Incretin Mimetic Agents		
liraglutide	1	QL(0.3 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail
MOUNJARO	2	QL(0.072 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	QL(0.108 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	2	QL(0.108 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
OZEMPIC (2 MG/DOSE) SOPN	2	QL(0.108 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
OZEMPIC TABS 1.5 MG, 4 MG, 9 MG	2	QL(1 EA daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
RYBELSUS TABS	2	QL(1 EA daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
TRULICITY	2	QL(0.143 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
VICTOZA (Use liraglutide)	NF	QL(0.3 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail
Insulin		
APIDRA SOLOSTAR SOPN	3	PA

Drug Name	Drug Tier	Requirements/ Limits
APIDRA SOLN	3	PA
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	QL(1.34 ML daily)
HUMULIN R U-500 KWIKPEN SOPN SC	2	QL(1.34 ML daily)
INSULIN GLARGINE-YFGN SOLN	2	
INSULIN GLARGINE-YFGN SOPN	2	
INSULIN LISPRO (1 UNIT DIAL) SOPN	1	
INSULIN LISPRO JUNIOR KWIKPEN SOPN	1	
INSULIN LISPRO PROT & LISPRO SUPN	1	
INSULIN LISPRO SOLN IJ	1	
NOVOLIN 70/30 FLEXPEN SUPN	2	
NOVOLIN 70/30 SUSP	2	
NOVOLIN N FLEXPEN SUPN	2	
NOVOLIN N SUSP	2	
NOVOLIN R FLEXPEN SOPN IJ	2	
NOVOLIN R SOLN IJ	2	
NOVOLOG FLEXPEN SOPN	1	
NOVOLOG MIX 70/30 FLEXPEN SUPN	1	
NOVOLOG MIX 70/30 SUSP	1	
NOVOLOG PENFILL SOCT	1	
NOVOLOG SOLN IJ	1	
REZVOGLAR KWIKPEN	3	PA
TRESIBA FLEXTOUCH SOPN	2	
TRESIBA SOLN	2	
Insulin Sensitizing Agents		

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
ACTOS (<i>Use pioglitazone hcl</i>)	NF	QL(1 EA daily)
<i>pioglitazone hcl</i>	1	QL(1 EA daily)
Meglitinide Analogues		
<i>nateglinide</i>	1	QL(3 EA daily)
<i>repaglinide 2 MG</i>	1	QL(8 EA daily)
<i>repaglinide 0.5 MG, 1 MG</i>	1	QL(4 EA daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin TABS PO 5 MG, 10 MG</i>	1	QL(1 EA daily)
FARXIGA TABS PO (<i>Use dapagliflozin</i>)	NF	QL(1 EA daily)
JARDIANCE	2	QL(1 EA daily)
Sulfonylureas		
<i>glimepiride 4 MG</i>	1	QL(2 EA daily)
<i>glimepiride 1 MG, 2 MG</i>	1	QL(4 EA daily)
<i>glipizide TABS 5 MG, 10 MG</i>	1	QL(4 EA daily)
<i>glipizide TB24</i>	1	QL(2 EA daily)
GLUCOTROL XL TB24 5 MG, 10 MG (<i>Use glipizide</i>)	NF	QL(2 EA daily)
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1	QL(4 EA daily)
<i>glyburide TABS</i>	1	QL(4 EA daily)
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1	
<i>diphenoxylate w/ atropine TABS</i>	1	
LOMOTIL TABS (<i>Use diphenoxylate w/ atropine</i>)	NF	
<i>loperamide hcl CAPS</i>	1	RX/OTC
MOTOFEN	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		

Drug Name	Drug Tier	Requirements/ Limits
Antidotes - Chelating Agents		
CHEMET	3	
<i>deferasirox PACK</i>	4	SP; PA
<i>deferasirox TABS</i>	4	SP; PA
<i>deferasirox TBSO</i>	4	SP; PA
EXJADE TBSO (<i>Use deferasirox</i>)	NF	SP; PA
JADENU SPRINKLE PACK (<i>Use deferasirox</i>)	NF	SP; PA
JADENU TABS (<i>Use deferasirox</i>)	NF	SP; PA
Antidotes and Specific Antagonists		
VISTOGARD	5	PA
Opioid Antagonists		
KLOXXADO LIQD	3	2 max fill(s) per 30 day(s) retail
<i>naloxone hcl LIQD</i>	1	QL(2 EA per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	1	PV
<i>naltrexone hcl</i>	1	PV
NARCAN LIQD (<i>Use naloxone hcl</i>)	NF	QL(2 EA per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC
VIVITROL	3	SP
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	3	QL(0.167 EA daily); PA
<i>granisetron hcl SOLN IV 1 MG/ML</i>	1	
<i>granisetron hcl TABS</i>	1	QL(0.34 EA daily)
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	1	QL(3.34 ML daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>ondansetron hcl SOLN IJ 4 MG/2ML</i>	1		MARINOL CAPS (<i>Use dronabinol</i>)	NF	
<i>ondansetron hcl SOSY</i>	1		Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>ondansetron hcl TABS 24 MG</i>	1	QL(0.143 EA daily)	<i>aprepitant CAPS 80 MG</i>	1	QL(0.134 EA daily); PA
<i>ondansetron hcl TABS 8 MG</i>	1	QL(3 EA daily; 45 EA per fill retail; 45 per fill mail)	<i>aprepitant CAPS 40 MG, 125 MG</i>	1	QL(0.067 EA daily); PA
<i>ondansetron hcl TABS 4 MG</i>	1	QL(4 EA daily; 60 EA per fill retail; 60 per fill mail)	<i>aprepitant CPPK PO</i>	1	PA
<i>ondansetron TBDP 4 MG</i>	1	QL(1 EA daily)	EMEND BIPACK CAPS 80 MG (<i>Use aprepitant</i>)	NF	QL(0.134 EA daily); PA
<i>ondansetron TBDP 8 MG</i>	1		EMEND TRIPACK CPPK PO (<i>Use aprepitant</i>)	NF	PA
<i>palonosetron hcl SOLN</i>	1		VARUBI (180 MG DOSE) TBPK	3	PA
Antiemetics - Anticholinergic			ANTIFUNGALS - Drugs to Treat Fungal Infections		
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	1	RX/OTC	Antifungals		
<i>scopolamine</i>	1	QL(0.34 EA daily)	<i>amphotericin b IV</i>	3	
TRANSDERM SCOP 1 MG/3DAYS (<i>Use scopolamine</i>)	NF	QL(0.34 EA daily)	ANCOBON (<i>Use flucytosine</i>)	NF	
TRANSDERM-SCOP (<i>Use scopolamine</i>)	NF	QL(0.34 EA daily)	<i>flucytosine</i>	1	
<i>trimethobenzamide hcl CAPS</i>	1		<i>griseofulvin microsize SUSP</i>	1	AL(At least 2 yrs old)
Antiemetics - Miscellaneous			<i>griseofulvin microsize TABS</i>	1	
AKYNZEO	3	PA	<i>griseofulvin ultramicrosize</i>	1	
DICLEGIS TBEC (<i>Use doxylamine-pyridoxine</i>)	NF	QL(4 EA daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA	<i>nystatin TABS</i>	1	
<i>doxylamine-pyridoxine TBEC</i>	1	QL(4 EA daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA	<i>terbinafine hcl TABS</i>	1	QL(1 EA daily)
<i>dronabinol CAPS</i>	1		Imidazole-Related Antifungals		
			CRESEMBA CAPS 186 MG	3	PA
			DIFLUCAN SUSR 40 MG/ML (<i>Use fluconazole</i>)	NF	
			DIFLUCAN TABS 100 MG, 200 MG (<i>Use fluconazole</i>)	NF	
			<i>fluconazole SUSR</i>	1	
			<i>fluconazole TABS</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>itraconazole CAPS</i>	1	QL(4 EA daily); PA	<i>cetirizine hcl TABS</i>	1	QL(1 EA daily)
<i>itraconazole SOLN</i>	1	QL(20 ML daily); PA	CLARINEX TABS (<i>Use desloratadine</i>)	NF	QL(1 EA daily)
<i>ketoconazole</i>	1		CLARITIN ALLERGY CHILDRENS SOLN (<i>Use loratadine</i>)	NF	
NOXAFIL SUSP (<i>Use posaconazole</i>)	NF	QL(20 ML daily)	CLARITIN CHILDRENS CHEW (<i>Use loratadine</i>)	NF	
NOXAFIL TBEC (<i>Use posaconazole</i>)	NF	QL(6 EA daily)	CLARITIN REDITABS TBDP (<i>Use loratadine</i>)	NF	
<i>posaconazole SUSP</i>	3	QL(20 ML daily)	CLARITIN CAPS (<i>Use loratadine</i>)	NF	
<i>posaconazole TBEC</i>	3	QL(6 EA daily)	CLARITIN CHEW (<i>Use loratadine</i>)	NF	
SPORANOX CAPS (<i>Use itraconazole</i>)	NF	QL(4 EA daily); PA	CLARITIN SOLN (<i>Use loratadine</i>)	NF	
SPORANOX SOLN (<i>Use itraconazole</i>)	NF	QL(20 ML daily); PA	CLARITIN TABS (<i>Use loratadine</i>)	NF	
TOLSURA CAPS	4	PA	<i>desloratadine TABS</i>	1	QL(1 EA daily)
VFEND TABS 200 MG (<i>Use voriconazole</i>)	NF	QL(4 EA daily)	<i>desloratadine TBDP 2.5 MG</i>	1	QL(1 EA daily)
<i>voriconazole TABS</i>	1	QL(4 EA daily)	<i>levocetirizine dihydrochloride SOLN</i>	1	QL(10 ML daily); RX/OTC
ANTIHISTAMINES - Drugs to Treat Allergies			<i>levocetirizine dihydrochloride TABS</i>	1	QL(1 EA daily); RX/OTC
Antihistamines - Ethanolamines			<i>loratadine CAPS</i>	1	
<i>carbinoxamine maleate SOLN</i>	1		<i>loratadine CHEW</i>	1	
<i>carbinoxamine maleate TABS 4 MG</i>	1		<i>loratadine SOLN</i>	1	
<i>clemastine fumarate SYRP</i>	1		<i>loratadine TABS</i>	1	
<i>clemastine fumarate TABS 2.68 MG</i>	1		<i>loratadine TBDP</i>	1	
CLEMASZ TABS 2.68 MG (<i>Use clemastine fumarate</i>)	NF		XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML	2	QL(10 ML daily); RX/OTC
CLEMSZA TABS 2.68 MG (<i>Use clemastine fumarate</i>)	NF		ZYRTEC ALLERGY TABS (<i>Use cetirizine hcl</i>)	NF	QL(1 EA daily)
<i>diphenhydramine hcl CAPS 50 MG</i>	1		Antihistamines - Phenothiazines		
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1		<i>promethazine hcl SUPP 50 MG</i>	1	
<i>diphenhydramine hcl LIQD 12.5 MG/5ML</i>	1		<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1	QL(6 EA daily)
Antihistamines - Non-Sedating			<i>promethazine hcl TABS</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
Antihistamines - Piperidines		
<i>cyproheptadine hcl SYRP</i>	1	
<i>cyproheptadine hcl TABS</i>	1	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	1	QL(1 EA daily)
VYTORIN (Use <i>ezetimibe-simvastatin</i>)	NF	QL(1 EA daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl 1 GM</i>	1	QL(4 EA daily); PA
LOVAZA (Use <i>omega-3-acid ethyl esters</i>)	NF	QL(4 EA daily)
<i>omega-3-acid ethyl esters</i>	1	QL(4 EA daily)
VASCEPA 1 GM (Use <i>icosapent ethyl</i>)	NF	QL(4 EA daily); PA
Bile Acid Sequestrants		
<i>cholestyramine light PACK</i>	1	QL(6 EA daily)
<i>cholestyramine light POWD</i>	1	QL(24 GM daily)
<i>cholestyramine PACK</i>	1	QL(6 EA daily)
<i>cholestyramine POWD</i>	1	QL(25.2 GM daily)
<i>colesevelam hcl PACK</i>	1	QL(1 EA daily); PA
<i>colesevelam hcl TABS</i>	1	QL(7 EA daily)
COLESTID GRAN (Use <i>colestipol hcl</i>)	NF	QL(6 GM daily)
COLESTID PACK (Use <i>colestipol hcl</i>)	NF	QL(6 EA daily)
COLESTID TABS (Use <i>colestipol hcl</i>)	NF	QL(16 EA daily)
<i>colestipol hcl GRAN</i>	1	QL(6 GM daily)
<i>colestipol hcl PACK</i>	1	QL(6 EA daily)
<i>colestipol hcl TABS</i>	1	QL(16 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
QUESTRAN LIGHT POWD (Use <i>cholestyramine light</i>)	NF	QL(24 GM daily)
QUESTRAN PACK (Use <i>cholestyramine</i>)	NF	QL(6 EA daily)
QUESTRAN POWD (Use <i>cholestyramine</i>)	NF	QL(25.2 GM daily)
WELCHOL PACK (Use <i>colesevelam hcl</i>)	NF	QL(1 EA daily); PA
WELCHOL TABS (Use <i>colesevelam hcl</i>)	NF	QL(7 EA daily)
Fibric Acid Derivatives		
<i>choline fenofibrate</i>	1	QL(1 EA daily)
<i>fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG</i>	1	QL(1 EA daily)
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1	QL(1 EA daily)
FENOGLIDE TABS (Use <i>fenofibrate</i>)	NF	
<i>gemfibrozil TABS</i>	1	QL(2 EA daily)
LOPID TABS (Use <i>gemfibrozil</i>)	NF	QL(2 EA daily)
TRICOR TABS (Use <i>fenofibrate</i>)	NF	QL(1 EA daily)
TRILIPIX (Use <i>choline fenofibrate</i>)	NF	QL(1 EA daily)
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium TABS</i>	1	QL(1 EA daily)
CRESTOR TABS (Use <i>rosuvastatin calcium</i>)	NF	QL(1 EA daily)
<i>fluvastatin sodium CAPS 20 MG</i>	1	QL(1 EA daily)
<i>fluvastatin sodium CAPS 40 MG</i>	1	QL(2 EA daily)
LIPITOR TABS (Use <i>atorvastatin calcium</i>)	NF	QL(1 EA daily)
<i>lovastatin TABS 40 MG</i>	1	\$0 copay for generic only, age 40 to 76; QL(2 EA daily); PV

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>lovastatin TABS 10 MG, 20 MG</i>	1	\$0 copay for generic only, age 40 to 76; QL(1 EA daily); PV
<i>pravastatin sodium</i>	1	QL(1 EA daily)
<i>rosuvastatin calcium TABS</i>	3	QL(1 EA daily)
<i>simvastatin TABS</i>	1	QL(1 EA daily)
ZOCOR TABS 10 MG, 20 MG, 40 MG (<i>Use simvastatin</i>)	NF	QL(1 EA daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	1	QL(1 EA daily)
ZETIA (<i>Use ezetimibe</i>)	NF	QL(1 EA daily)
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR</i>	1	QL(2 EA daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
REPATHA PUSHTRONEX SYSTEM SOCT	4	QL(0.25 ML daily); SP; PA
REPATHA SURECLICK SOAJ	4	QL(0.0714 ML daily); SP; PA
REPATHA SOSY	4	QL(0.0714 ML daily); SP; PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
ACCUPRIL 5 MG, 10 MG (<i>Use quinapril hcl</i>)	NF	QL(2 EA daily)
ACCUPRIL 20 MG, 40 MG (<i>Use quinapril hcl</i>)	NF	
ALTACE CAPS 1.25 MG, 5 MG, 10 MG (<i>Use ramipril</i>)	NF	
<i>benazepril hcl</i>	1	
<i>captopril 12.5 MG</i>	1	
<i>captopril 25 MG, 50 MG, 100 MG</i>	1	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>enalapril maleate TABS</i>	1	
<i>fosinopril sodium</i>	1	
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1	
LOTENSIN 10 MG, 20 MG, 40 MG (<i>Use benazepril hcl</i>)	NF	
<i>moexipril hcl</i>	1	QL(2 EA daily)
<i>perindopril erbumine 2 MG, 8 MG</i>	1	QL(2 EA daily)
<i>perindopril erbumine 4 MG</i>	1	
<i>quinapril hcl 20 MG, 40 MG</i>	1	
<i>quinapril hcl 5 MG, 10 MG</i>	1	QL(2 EA daily)
<i>ramipril CAPS</i>	1	
<i>trandolapril 1 MG, 2 MG</i>	1	QL(1 EA daily)
<i>trandolapril 4 MG</i>	1	QL(2 EA daily)
VASOTEC TABS (<i>Use enalapril maleate</i>)	NF	
ZESTRIL TABS (<i>Use lisinopril</i>)	NF	
Agents for Pheochromocytoma		
DIBENZYLINE (<i>Use phenoxybenzamine hcl</i>)	NF	PA
<i>phenoxybenzamine hcl</i>	3	PA
Angiotensin II Receptor Antagonists		
ATACAND (<i>Use candesartan cilexetil</i>)	NF	QL(1 EA daily)
AVAPRO 150 MG, 300 MG (<i>Use irbesartan</i>)	NF	QL(1 EA daily)
<i>azilsartan medoxomil 40 MG, 80 MG</i>	1	QL(1 EA daily); ST
BENICAR (<i>Use olmesartan medoxomil</i>)	NF	QL(1 EA daily)
<i>candesartan cilexetil</i>	1	QL(1 EA daily)
COZAAR (<i>Use losartan potassium</i>)	NF	QL(1 EA daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DIOVAN TABS (<i>Use valsartan</i>)	NF	QL(1 EA daily)	<i>amlodipine besylate-valsartan</i>	1	QL(1 EA daily)
EDARBI 40 MG, 80 MG (<i>Use azilsartan medoxomil</i>)	3	QL(1 EA daily); ST	<i>amlodipine-valsartan-hydrochlorothiazide</i>	3	
<i>irbesartan</i>	1	QL(1 EA daily)	ATACAND HCT (<i>Use candesartan cilexetil-hydrochlorothiazide</i>)	NF	
<i>losartan potassium</i>	1	QL(1 EA daily)	<i>atenolol & chlorthalidone</i>	1	
MICARDIS (<i>Use telmisartan</i>)	NF	QL(1 EA daily)	AVALIDE (<i>Use irbesartan-hydrochlorothiazide</i>)	NF	
<i>olmesartan medoxomil</i>	1	QL(1 EA daily)	AZOR (<i>Use amlodipine besylate-olmesartan medoxomil</i>)	NF	ST
<i>telmisartan</i>	1	QL(1 EA daily)	<i>benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1	
<i>valsartan TABS</i>	1	QL(1 EA daily)	<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1	QL(1 EA daily)
Antiadrenergic Antihypertensives			BENICAR HCT (<i>Use olmesartan medoxomil-hydrochlorothiazide</i>)	NF	
CARDURA (<i>Use doxazosin mesylate</i>)	NF		<i>bisoprolol & hydrochlorothiazide</i>	1	QL(2 EA daily)
CATAPRES-TTS-1 PTWK (<i>Use clonidine</i>)	NF	QL(0.15 EA daily)	<i>candesartan cilexetil-hydrochlorothiazide</i>	1	
CATAPRES-TTS-2 PTWK (<i>Use clonidine</i>)	NF	QL(0.15 EA daily)	DIOVAN HCT (<i>Use valsartan-hydrochlorothiazide</i>)	NF	QL(1 EA daily)
CATAPRES-TTS-3 PTWK (<i>Use clonidine</i>)	NF	QL(0.15 EA daily)	<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1	
<i>clonidine hcl TABS</i>	1	QL(8 EA daily)	<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1	QL(2 EA daily)
<i>clonidine PTWK</i>	3	QL(0.15 EA daily)	EXFORGE (<i>Use amlodipine besylate-valsartan</i>)	NF	QL(1 EA daily)
<i>doxazosin mesylate</i>	1		EXFORGE HCT (<i>Use amlodipine-valsartan-hydrochlorothiazide</i>)	NF	
<i>guanfacine hcl</i>	1				
<i>methyldopa TABS</i>	1	QL(6 EA daily)			
<i>prazosin hcl CAPS</i>	1	QL(4 EA daily)			
<i>terazosin hcl</i>	1				
Antihypertensive Combinations					
ACCURETIC 12.5 MG-10 MG (<i>Use quinapril-hydrochlorothiazide</i>)	NF	QL(3 EA daily)			
ACCURETIC 12.5 MG-20 MG (<i>Use quinapril-hydrochlorothiazide</i>)	NF	QL(4 EA daily)			
<i>amlodipine besylate-benazepril hcl</i>	1				
<i>amlodipine besylate-olmesartan medoxomil</i>	1	ST			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fosinopril sodium & hydrochlorothiazide</i>	1	QL(1 EA daily)	<i>olmesartan medoxomil-hydrochlorothiazide</i>	1	
<i>HYZAAR 12.5 MG-50 MG (Use losartan potassium & hydrochlorothiazide)</i>	NF	QL(2 EA daily)	<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1	QL(4 EA daily)
<i>HYZAAR 12.5 MG-100 MG, 25 MG-100 MG (Use losartan potassium & hydrochlorothiazide)</i>	NF	QL(1 EA daily)	<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1	QL(3 EA daily)
<i>irbesartan-hydrochlorothiazide</i>	1		<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1	QL(2 EA daily)
<i>lisinopril & hydrochlorothiazide</i>	1		<i>telmisartan-amlodipine</i>	1	QL(1 EA daily)
<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1	QL(1 EA daily)	<i>telmisartan-hydrochlorothiazide</i>	1	QL(1 EA daily)
<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1	QL(2 EA daily)	<i>TENORETIC 100 (Use atenolol & chlorthalidone)</i>	NF	
<i>LOTENSIN HCT 12.5 MG-10 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide)</i>	NF	QL(1 EA daily)	<i>TENORETIC 50 (Use atenolol & chlorthalidone)</i>	NF	
<i>LOTENSIN HCT 12.5 MG-20 MG (Use benazepril & hydrochlorothiazide)</i>	NF		<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
<i>LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)</i>	NF		<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 EA daily)
<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1		<i>TRIBENZOR (Use olmesartan medoxomil-amlodipine-hydrochlorothiazide)</i>	NF	ST
<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1	QL(1 EA daily)	<i>valsartan-hydrochlorothiazide</i>	1	QL(1 EA daily)
<i>MICARDIS HCT (Use telmisartan-hydrochlorothiazide)</i>	NF	QL(1 EA daily)	<i>VASERETIC 25 MG-10 MG (Use enalapril maleate & hydrochlorothiazide)</i>	NF	
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1	ST	<i>ZESTORETIC (Use lisinopril & hydrochlorothiazide)</i>	NF	
			Antihypertensives - Misc.		
			<i>VECAMEYL</i>	3	SP; PA
			Direct Renin Inhibitors		
			<i>aliskiren fumarate</i>	1	QL(1 EA daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
TEKTURNA (<i>Use aliskiren fumarate</i>)	NF	QL(1 EA daily)
Selective Aldosterone Receptor Antagonists (SARAs)		
<i>eplerenone</i>	1	
INSPRA (<i>Use eplerenone</i>)	NF	
Vasodilators		
<i>hydralazine hcl SOLN</i>	1	
<i>hydralazine hcl TABS</i>	1	
<i>minoxidil 2.5 MG, 10 MG</i>	1	
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
<i>metronidazole TABS 250 MG, 500 MG</i>	1	
<i>trimethoprim TABS</i>	1	
XIFAXAN 200 MG	3	QL(3 EA daily; 9 EA per 3 day(s) retail; 9 EA per 3 days mail); AL(At least 12 yrs old); PA
XIFAXAN 550 MG	3	QL(3 EA daily); AL(At least 12 yrs old); PA
Anti-infective Misc. - Combinations		
BACTRIM DS TABS (<i>Use sulfamethoxazole-trimethoprim</i>)	NF	
BACTRIM TABS (<i>Use sulfamethoxazole-trimethoprim</i>)	NF	
<i>sulfamethoxazole-trimethoprim SOLN</i>	1	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1	
<i>sulfamethoxazole-trimethoprim TABS</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
Antiprotozoal Agents		
ALINIA SUSR	2	PA
ALINIA TABS (<i>Use nitazoxanide</i>)	NF	PA
<i>atovaquone</i>	1	
MEPRON (<i>Use atovaquone</i>)	NF	
<i>nitazoxanide TABS</i>	1	PA
Carbapenems		
<i>ertapenem sodium IJ</i>	1	SP
Chloramphenicols		
<i>chloramphenicol sodium succinate</i>	4	PA
Cyclic Lipopeptides		
<i>daptomycin 500 MG</i>	1	
DAPTOMYCIN (<i>Use daptomycin</i>)	NF	
Glycopeptides		
FIRVANQ SOLR PO (<i>Use vancomycin hcl</i>)	NF	QL(300 ML per fill retail)
VANCOCIN CAPS (<i>Use vancomycin hcl</i>)	NF	QL(4 EA daily; 40 EA per fill retail)
<i>vancomycin hcl CAPS</i>	1	QL(4 EA daily; 40 EA per fill retail)
<i>vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG</i>	1	
<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1	QL(300 ML per fill retail)
Leprostatics		
<i>dapsone</i>	1	
Lincosamides		
CLEOCIN (<i>Use clindamycin hcl</i>)	NF	
CLEOCIN (<i>Use clindamycin palmitate hydrochloride</i>)	NF	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
CLEOCIN PHOSPHATE SOLN IJ (Use clindamycin phosphate)	NF	
clindamycin hcl	1	
clindamycin palmitate hydrochloride	1	
clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML	1	
LINCOCIN (Use lincomycin hcl)	NF	
lincomycin hcl	1	
Monobactams		
AZACTAM 1 GM (Use aztreonam)	NF	
aztreonam 1 GM	1	
CAYSTON	5	QL(3 ML daily); SP; PA
Oxazolidinones		
linezolid SUSR	1	
linezolid TABS	1	QL(2 EA daily); PA
ZYVOX SUSR (Use linezolid)	NF	
ZYVOX TABS (Use linezolid)	NF	QL(2 EA daily); PA
Urinary Anti-infectives		
fosfomycin tromethamine	1	
HIPREX (Use methenamine hippurate)	NF	
MACROBID (Use nitrofurantoin monohyd macro)	NF	
MACRODANTIN (Use nitrofurantoin macrocrystal)	NF	
methenamine hippurate	1	
nitrofurantoin	1	

Drug Name	Drug Tier	Requirements/ Limits
nitrofurantoin macrocrystal 50 MG, 100 MG	1	
nitrofurantoin monohyd macro	1	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
atovaquone-proguanil hcl	1	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
COARTEM	2	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(24 EA per fill retail; 24 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
MALARONE (Use atovaquone-proguanil hcl)	NF	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
Antimalarials		

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>chloroquine phosphate TABS 250 MG</i>	1	QL(3 EA daily)	MESTINON TABS (<i>Use pyridostigmine bromide</i>)	NF	
<i>chloroquine phosphate TABS 500 MG</i>	1		MESTINON TBCR (<i>Use pyridostigmine bromide</i>)	NF	
DARAPRIM (<i>Use pyrimethamine</i>)	NF	QL(3 EA daily); SP; PA	NEOSTIGMINE METHYLSULFATE RFID SOSY (<i>Use neostigmine methylsulfate</i>)	NF	PA
<i>hydroxychloroquine sulfate 100 MG</i>	1	QL(4 EA daily)	<i>neostigmine methylsulfate SOSY</i>	3	PA
<i>hydroxychloroquine sulfate 200 MG</i>	1	QL(3 EA daily)	NEOSTIGMINE METHYLSULFATE SOSY (<i>Use neostigmine methylsulfate</i>)	NF	PA
<i>hydroxychloroquine sulfate 400 MG</i>	1	QL(1 EA daily)	<i>pyridostigmine bromide SOLN PO</i>	1	
KRINTAFEL	3	QL(2 EA per 30 day(s) retail)	<i>pyridostigmine bromide TABS 60 MG</i>	1	
<i>mefloquine hcl</i>	1	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	<i>pyridostigmine bromide TBCR</i>	1	
PLAQUENIL (<i>Use hydroxychloroquine sulfate</i>)	NF	QL(3 EA daily)	ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
<i>primaquine phosphate TABS</i>	3		Antimycobacterial Agents		
PRIMAQUINE PHOSPHATE TABS (<i>Use primaquine phosphate</i>)	NF		<i>cycloserine</i>	1	QL(4 EA daily)
<i>pyrimethamine</i>	1	QL(3 EA daily); SP; PA	<i>ethambutol hcl TABS</i>	1	
QUALAQUIN CAPS (<i>Use quinine sulfate</i>)	NF	PA	<i>isoniazid SOLN</i>	1	
<i>quinine sulfate CAPS 324 MG</i>	1	PA	<i>isoniazid SYRP</i>	1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS			<i>isoniazid TABS</i>	1	
Antimyaesthetic/Cholinergic Agents			MYAMBUTOL TABS 400 MG (<i>Use ethambutol hcl</i>)	NF	
MESTINON SOLN PO (<i>Use pyridostigmine bromide</i>)	NF		MYCOBUTIN (<i>Use rifabutin</i>)	NF	PA
			PRIFTIN	3	
			<i>pyrazinamide</i>	1	
			<i>rifabutin</i>	1	PA
			RIFADIN SOLR (<i>Use rifampin</i>)	NF	
			<i>rifampin CAPS</i>	1	
			<i>rifampin SOLR</i>	1	
			SIRTURO	3	PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer			ALIMTA SOLR 100 MG (Use pemetrexed disodium)	NF	SP
Alkylating Agents			ARRANON (Use nelarabine)	NF	PA
busulfan SOLN	4	PA	azacitidine SUSR	4	SP; PA
BUSULFEX SOLN (Use busulfan)	NF	PA	capecitabine	4	SP; PA
carmustine	4	PA	clofarabine	4	PA
cisplatin SOLN 100 MG/100ML	4	SP; PA	decitabine	4	SP; PA
cyclophosphamide CAPS	1	PA	floxuridine	4	PA
cyclophosphamide SOLR IJ	4	SP; PA	fludarabine phosphate SOLN	4	SP; PA
GLEOSTINE 10 MG (Use lomustine)	NF	PA	fludarabine phosphate SOLR	4	SP; PA
GLEOSTINE 40 MG, 100 MG (Use lomustine)	NF	PA	fluorouracil 500 MG/10ML	4	PA
IFEX SOLR (Use ifosfamide)	NF	PA	FOLOTYN 20 MG/ML (Use pralatrexate)	NF	SP; PA
ifosfamide SOLN 1 GM/20ML	4	PA	gemcitabine hcl SOLR 2 GM, 200 MG	4	PA
ifosfamide SOLR	4	PA	mercaptopurine TABS	1	
LEUKERAN	4	PA	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML	1	
lomustine 40 MG, 100 MG	4	PA	methotrexate sodium SOLR	1	
lomustine 10 MG	4	PA	methotrexate sodium TABS 2.5 MG	1	
melphalan hcl IV	1	SP	nelarabine	4	PA
MYLERAN TABS	4	PA	pemetrexed disodium SOLR 500 MG	4	SP; PA
oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML	4	PA	pralatrexate 20 MG/ML	4	SP; PA
TEMODAR SOLR	4	SP; PA	TABLOID	4	SP; PA
temozolomide CAPS	4	SP; PA	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	PA
TEPADINA 15 MG (Use thiotepa)	NF	SP; PA	VIDAZA SUSR (Use azacitidine)	NF	SP; PA
thiotepa 15 MG	4	SP; PA	XELODA (Use capecitabine)	NF	SP; PA
ZANOSAR	4	PA	Antineoplastic - Angiogenesis Inhibitors		
Antimetabolites			INLYTA	4	QL(2 EA daily); SP; PA
ALIMTA SOLR 500 MG (Use pemetrexed disodium)	NF	SP; PA			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LENVIMA (10 MG DAILY DOSE)	4	QL(1 EA daily); SP; PA	TAGRISSO 80 MG	4	QL(1 EA daily); SP; PA
LENVIMA (12 MG DAILY DOSE)	4	QL(3 EA daily); SP; PA	TAGRISSO 40 MG	4	QL(2 EA daily); SP; PA
LENVIMA (14 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA	TARCEVA (Use erlotinib hcl)	NF	QL(1 EA daily); SP; PA
LENVIMA (18 MG DAILY DOSE)	4	QL(3 EA daily); SP; PA	VECTIBIX 100 MG/5ML	4	SP; PA
LENVIMA (20 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA	VIZIMPRO	5	QL(1 EA daily); SP; PA
LENVIMA (24 MG DAILY DOSE)	4	QL(3 EA daily); SP; PA	Antineoplastic - Hedgehog Pathway Inhibitors		
LENVIMA (4 MG DAILY DOSE)	4	QL(1 EA daily); SP; PA	DAURISMO	5	SP; PA
LENVIMA (8 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA	ERIVEDGE	4	QL(1 EA daily); SP; PA
MVASI	4	SP; PA	ODOMZO	4	QL(1 EA daily); SP; PA
ZALTRAP 100 MG/4ML	4	SP; PA	Antineoplastic - Hormonal and Related Agents		
ZIRABEV	4	SP; PA	abiraterone acetate 500 MG	4	QL(2 EA daily); SP; PA
Antineoplastic - Antibodies			abiraterone acetate 250 MG	4	QL(4 EA daily); SP; PA
ARZERRA	4	SP; PA	anastrozole	1	QL(1 EA daily)
LOQTORZI	4	SP; PA	ARIMIDEX (Use anastrozole)	NF	QL(1 EA daily)
RUXIENCE	4	SP; PA	AROMASIN (Use exemestane)	NF	QL(1 EA daily)
TRUXIMA	4	SP; PA	bicalutamide	1	QL(1 EA daily)
YERVOY	4	SP; PA	CASODEX (Use bicalutamide)	NF	QL(1 EA daily)
Antineoplastic - Anti-HER2 Agents			ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA
KANJINTI	4	SP; PA	ELIGARD KIT SC 7.5 MG	4	QL(0.0089 EA daily); SP; PA
OGIVRI	4	SP; PA	EMCYT	4	SP; PA
TRAZIMERA	4	SP; PA	ERLEADA 60 MG	4	QL(4 EA daily); SP; PA
TUKYSA	5	SP; PA	ERLEADA 240 MG	4	QL(1 EA daily); SP; PA
Antineoplastic - EGFR Inhibitors			exemestane	4	QL(1 EA daily)
ERBITUX	4	SP; PA	FARESTON (Use toremifene citrate)	NF	
erlotinib hcl	4	QL(1 EA daily); SP; PA	FASLODEX SOSY (Use fulvestrant)	NF	QL(0.357 ML daily); PA
gefitinib	4	QL(2 EA daily); SP; PA			
GILOTRIF	4	QL(1 EA daily); SP; PA			
IRESSA (Use gefitinib)	NF	QL(2 EA daily); SP; PA			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
FEMARA (<i>Use letrozole</i>)	NF	
FIRMAGON 80 MG	4	QL(0.143 EA daily); SP; PA
FIRMAGON (240 MG DOSE)	4	QL(0.143 EA daily); SP; PA
<i>fulvestrant SOSY</i>	4	QL(0.357 ML daily); PA
<i>letrozole</i>	1	
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA
LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0357 EA daily); SP; PA
LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 EA daily); SP; PA
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 EA daily); SP; PA
LYSODREN	4	SP; PA
<i>megestrol acetate SUSP</i>	1	
<i>megestrol acetate TABS</i>	1	
NILANDRON (<i>Use nilutamide</i>)	NF	QL(2 EA daily)
<i>nilutamide</i>	1	QL(2 EA daily)
<i>tamoxifen citrate TABS</i>	1	PV
<i>toremifene citrate</i>	1	
TRELSTAR MIXJECT	4	SP; PA
VABRINTY SC 22.5 MG, 30 MG, 45 MG	4	SP; PA
VABRINTY KIT SC 7.5 MG	4	QL(0.0089 EA daily); SP; PA
XTANDI CAPS	4	QL(4 EA daily); SP; PA
XTANDI TABS 80 MG	4	QL(2 EA daily); SP; PA
XTANDI TABS 40 MG	4	QL(4 EA daily); SP; PA
YONSA	4	QL(4 EA daily); SP; PA
ZOLADEX 3.6 MG	4	QL(0.0357 EA daily); SP; PA
ZOLADEX 10.8 MG	4	QL(0.0119 EA daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ZYTIGA 500 MG (<i>Use abiraterone acetate</i>)	NF	QL(2 EA daily); SP; PA
ZYTIGA 250 MG (<i>Use abiraterone acetate</i>)	NF	QL(4 EA daily); SP; PA
Antineoplastic - Immunomodulators		
<i>pomalidomide 1 MG, 2 MG, 3 MG, 4 MG</i>	4	QL(1 EA daily); SP; PA
POMALYST 1 MG, 2 MG, 3 MG, 4 MG (<i>Use pomalidomide</i>)	4	QL(1 EA daily); SP; PA
Antineoplastic Antibiotics		
<i>bleomycin sulfate 15 UNIT</i>	4	PA
<i>dactinomycin</i>	4	PA
<i>doxorubicin hcl SOLN</i>	4	PA
DOXORUBICIN HCL SOLN (<i>Use doxorubicin hcl</i>)	NF	PA
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	PA
IDAMYCIN PFS 20 MG/20ML (<i>Use idarubicin hcl</i>)	NF	PA
IDAMYCIN PFS 5 MG/5ML, 10 MG/10ML (<i>Use idarubicin hcl</i>)	NF	PA
<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	PA
<i>idarubicin hcl 20 MG/20ML</i>	4	PA
<i>mitomycin SOLR IV 20 MG</i>	4	PA
<i>mitoxantrone hcl 25 MG/12.5ML</i>	4	SP; PA
<i>valrubicin</i>	4	SP; PA
VALSTAR (<i>Use valrubicin</i>)	NF	SP; PA
Antineoplastic Enzyme Inhibitors		
AFINITOR TABS (<i>Use everolimus</i>)	NF	QL(1 EA daily); SP; PA
ALECENSA	4	QL(4 EA daily); SP; PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>bortezomib SOLR IJ</i>	4	SP; PA	MEKINIST TABS 2 MG	4	QL(1 EA daily); SP; PA
CABOMETYX TABS	4	QL(1 EA daily); SP; PA	MEKINIST TABS 0.5 MG	4	QL(3 EA daily); SP; PA
CAPRELSA 300 MG	4	QL(1 EA daily); SP; PA	NEXAVAR (<i>Use sorafenib tosylate</i>)	NF	QL(4 EA daily); SP; PA
CAPRELSA 100 MG	5	QL(1 EA daily); SP; PA	<i>pazopanib hcl</i>	4	QL(2 EA daily); SP; PA
COMETRIQ (100 MG DAILY DOSE) KIT	4	QL(2 EA daily); SP; PA	<i>pazopanib hcl</i>	4	QL(4 EA daily); SP; PA
COMETRIQ (140 MG DAILY DOSE) KIT	4	QL(4 EA daily); SP; PA	PIQRAY (200 MG DAILY DOSE)	4	QL(1 EA daily); SP; PA
COMETRIQ (60 MG DAILY DOSE) KIT	4	QL(3 EA daily); SP; PA	PIQRAY (250 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
<i>everolimus TABS</i>	4	QL(1 EA daily); SP; PA	PIQRAY (300 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
GLEEVEC TABS (<i>Use imatinib mesylate</i>)	NF	QL(2 EA daily); SP; PA	<i>romidepsin SOLR</i>	4	SP; PA
IBRANCE CAPS 100 MG, 125 MG	4	QL(1 EA daily); SP; PA	ROZLYTREK CAPS	4	SP; PA
IBRANCE TABS	4	QL(1 EA daily); SP; PA	RUBRACA	4	QL(4 EA daily); SP; PA
ICLUSIG	4	QL(1 EA daily); SP; PA	<i>sorafenib tosylate</i>	4	QL(4 EA daily); SP; PA
<i>imatinib mesylate TABS</i>	4	QL(2 EA daily); SP; PA	STIVARGA	5	QL(4 EA daily); SP; PA
ISTODAX SOLR (<i>Use romidepsin</i>)	NF	SP; PA	<i>sunitinib malate</i>	4	QL(1 EA daily); SP; PA
JAKAFI	4	QL(2 EA daily); SP; PA	<i>sunitinib malate</i>	4	QL(1 EA daily); SP; PA
KISQALI (200 MG DOSE)	4	QL(2 EA daily); SP; PA	SUTENT (<i>Use sunitinib malate</i>)	NF	QL(1 EA daily); SP; PA
KISQALI (400 MG DOSE)	4	QL(2 EA daily); SP; PA	SUTENT (<i>Use sunitinib malate</i>)	NF	QL(1 EA daily); SP; PA
KISQALI (600 MG DOSE)	4	QL(2.5 EA daily); SP; PA	TAFINLAR CAPS	4	QL(4 EA daily); SP; PA
KYPROLIS	4	SP; PA	TALZENNA	4	QL(1 EA daily); SP; PA
<i>lapatinib ditosylate</i>	4	QL(6 EA daily); SP; PA	TAZVERIK	5	SP; PA
LORBRENA	5	QL(1 EA daily); SP; PA	<i>temsirolimus</i>	4	QL(0.143 ML daily); SP; PA
LUMAKRAS 320 MG	4	QL(3 EA daily); SP; PA	TORISEL (<i>Use temsirolimus</i>)	NF	QL(0.143 ML daily); SP; PA
LUMAKRAS 120 MG, 240 MG	4	QL(2 EA daily); SP; PA	TURALIO 125 MG	5	SP; PA
LYNPARZA TABS	4	QL(4 EA daily); SP; PA	TYKERB (<i>Use lapatinib ditosylate</i>)	NF	QL(6 EA daily); SP; PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
VELCADE SOLR IJ (<i>Use bortezomib</i>)	NF	SP; PA
VERZENIO	4	QL(2 EA daily); SP; PA
VITRAKVI CAPS	4	SP; PA
VITRAKVI SOLN	4	SP; PA
VOTRIENT (<i>Use pazopanib hcl</i>)	NF	QL(4 EA daily); SP; PA
XALKORI CAPS	4	QL(2 EA daily); SP; PA
XOSPATA	5	SP; PA
ZEJULA TABS	4	QL(1 EA daily); SP
ZELBORAF	4	QL(8 EA daily); SP; PA
ZOLINZA	4	QL(4 EA daily); SP; PA
ZYDELIG	4	QL(2 EA daily); SP; PA
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	4	SP; PA
<i>arsenic trioxide 10 MG/10ML</i>	4	SP; PA
<i>bexarotene</i>	4	SP; PA
HYDREA (<i>Use hydroxyurea</i>)	NF	
<i>hydroxyurea</i>	1	
MATULANE	4	SP; PA
NIPENT	4	PA
PHOTOFRIN	4	SP; PA
PROLEUKIN	4	SP; PA
TARGRETIN (<i>Use bexarotene</i>)	NF	SP; PA
<i>tretinoin (chemotherapy)</i>	1	SP
UVADEX	4	PA
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium SOLR</i>	1	
<i>leucovorin calcium TABS</i>	1	
VORAXAZE	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Mitotic Inhibitors		
ABRAXANE (<i>Use paclitaxel protein-bound particles</i>)	NF	SP; PA
ETOPOPHOS	4	PA
<i>etoposide CAPS</i>	4	SP; PA
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	SP; PA
IXEMPRA KIT 15 MG	4	SP; PA
<i>paclitaxel 100 MG/16.7ML, 150 MG/25ML</i>	4	PA
<i>paclitaxel protein-bound particles</i>	4	SP; PA
<i>vincristine sulfate</i>	4	SP; PA
<i>vinorelbine tartrate 10 MG/ML</i>	4	PA
Topoisomerase I Inhibitors		
CAMPTOSAR 40 MG/2ML, 100 MG/5ML (<i>Use irinotecan hcl</i>)	NF	SP; PA
HYCANTIN CAPS	4	SP; PA
HYCANTIN SOLR (<i>Use topotecan hcl</i>)	NF	SP; PA
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA
<i>topotecan hcl SOLR</i>	4	SP; PA
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	1	
LODOSYN (<i>Use carbidopa</i>)	NF	
Antiparkinson Anticholinergics		
<i>benztropine mesylate TABS</i>	1	
<i>trihexyphenidyl hcl SOLN</i>	1	
<i>trihexyphenidyl hcl TABS</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
Antiparkinson COMT Inhibitors		
<i>entacapone</i>	1	QL(8 EA daily)
TASMAR (Use <i>tolcapone</i>)	NF	
<i>tolcapone</i>	1	
Antiparkinson Dopaminergics		
<i>amantadine hcl CAPS</i>	1	
<i>amantadine hcl SOLN</i>	1	
<i>amantadine hcl TABS</i>	1	
<i>apomorphine hydrochloride SOCT</i>	4	SP; PA
<i>bromocriptine mesylate CAPS</i>	1	
<i>bromocriptine mesylate TABS 2.5 MG</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
<i>carbidopa-levodopa TABS</i>	1	
<i>carbidopa-levodopa TBCR</i>	1	
<i>carbidopa-levodopa TBDP</i>	1	
NEUPRO	2	
PARLODEL CAPS (Use <i>bromocriptine mesylate</i>)	NF	
PARLODEL TABS (Use <i>bromocriptine mesylate</i>)	NF	
<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1	
<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1	QL(4 EA daily)
<i>ropinirole hydrochloride TABS</i>	1	
<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1	QL(1 EA daily); ST
<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1	QL(2 EA daily); ST

Drug Name	Drug Tier	Requirements/ Limits
SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (Use <i>carbidopa-levodopa</i>)	NF	
STALEVO 150 (Use <i>carbidopa-levodopa-entacapone</i>)	NF	
Antiparkinson Monoamine Oxidase Inhibitors		
AZILECT (Use <i>rasagiline mesylate</i>)	NF	QL(1 EA daily); PA
<i>rasagiline mesylate</i>	1	QL(1 EA daily); PA
<i>selegiline hcl CAPS</i>	1	
<i>selegiline hcl TABS</i>	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	1	
<i>lithium carbonate CAPS</i>	1	
<i>lithium carbonate TABS</i>	1	
<i>lithium carbonate TBCR</i>	1	
LITHOBID TBCR (Use <i>lithium carbonate</i>)	NF	
Antipsychotics - Misc.		
EQUETRO	3	
GEODON (Use <i>ziprasidone hcl</i>)	NF	QL(2 EA daily); AL(At least 18 yrs old)
LATUDA 80 MG (Use <i>lurasidone hcl</i>)	NF	QL(2 EA daily)
LATUDA 20 MG, 40 MG, 60 MG, 120 MG (Use <i>lurasidone hcl</i>)	NF	QL(1 EA daily)
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1	QL(1 EA daily)
<i>lurasidone hcl 80 MG</i>	1	QL(2 EA daily)
<i>ziprasidone hcl</i>	1	QL(2 EA daily); AL(At least 18 yrs old)
Benzisoxazoles		
FANAPT	2	QL(2 EA daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FANAPT TITRATION PACK A	2		<i>loxapine succinate</i>	1	
INVEGA 3 MG, 6 MG, 9 MG (Use <i>paliperidone</i>)	NF		<i>olanzapine SOLR</i>	1	QL(0.215 EA daily)
<i>paliperidone</i>	1		<i>olanzapine TABS 2.5 MG, 5 MG</i>	1	QL(4 EA daily)
PERSERIS PRSY	2	QL(0.072 EA daily); SP; PA	<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1	QL(2 EA daily)
RISPERDAL CONSTA (Use <i>risperidone microspheres</i>)	NF	QL(0.072 EA daily); SP; PA	<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1	QL(2 EA daily)
RISPERDAL SOLN (Use <i>risperidone</i>)	NF		<i>olanzapine TBDP 20 MG</i>	1	QL(1 EA daily)
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use <i>risperidone</i>)	NF		<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	1	AL(At least 10 yrs old)
<i>risperidone microspheres</i>	1	QL(0.072 EA daily); SP; PA	<i>quetiapine fumarate TB24</i>	1	
<i>risperidone SOLN</i>	1		SAPHRIS 5 MG, 10 MG (Use <i>asenapine maleate</i>)	NF	QL(2 EA daily)
<i>risperidone TABS</i>	1		SAPHRIS 2.5 MG (Use <i>asenapine maleate</i>)	NF	QL(4 EA daily)
<i>risperidone TBDP</i>	1		SEROQUEL XR TB24 (Use <i>quetiapine fumarate</i>)	NF	
Butyrophenones			SEROQUEL TABS (Use <i>quetiapine fumarate</i>)	NF	AL(At least 10 yrs old)
HALDOL DECANOATE (Use <i>haloperidol decanoate</i>)	NF	QL(0.036 ML daily)	ZYPREXA ZYDIS TBDP 20 MG (Use <i>olanzapine</i>)	NF	QL(1 EA daily)
<i>haloperidol decanoate</i>	1	QL(0.036 ML daily)	ZYPREXA ZYDIS TBDP 5 MG, 10 MG, 15 MG (Use <i>olanzapine</i>)	NF	QL(2 EA daily)
<i>haloperidol lactate CONC</i>	1		ZYPREXA SOLR (Use <i>olanzapine</i>)	NF	QL(0.215 EA daily)
<i>haloperidol lactate SOLN</i>	1		ZYPREXA TABS 2.5 MG, 5 MG (Use <i>olanzapine</i>)	NF	QL(4 EA daily)
<i>haloperidol TABS</i>	1		ZYPREXA TABS 7.5 MG, 10 MG, 15 MG, 20 MG (Use <i>olanzapine</i>)	NF	QL(2 EA daily)
Dibenzapines			Phenothiazines		
<i>asenapine maleate 2.5 MG</i>	1	QL(4 EA daily)	<i>chlorpromazine hcl SOLN</i>	3	
<i>asenapine maleate 5 MG, 10 MG</i>	1	QL(2 EA daily)	<i>chlorpromazine hcl TABS</i>	1	
<i>clozapine TABS</i>	1		<i>fluphenazine hcl CONC</i>	1	
<i>clozapine TBDP 100 MG</i>	1	QL(9 EA daily)	<i>fluphenazine hcl ELIX</i>	1	
<i>clozapine TBDP 25 MG</i>	1	QL(3 EA daily)	<i>fluphenazine hcl SOLN</i>	1	
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1	QL(6 EA daily)			
CLOZARIL TABS (Use <i>clozapine</i>)	NF				

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fluphenazine hcl TABS</i>	1		<i>darunavir TABS 600 MG</i>	1	QL(2 EA daily)
<i>perphenazine TABS</i>	1		<i>darunavir TABS 800 MG</i>	1	QL(1 EA daily)
<i>prochlorperazine</i>	1		DELSTRIGO	3	QL(1 EA daily)
<i>prochlorperazine maleate TABS</i>	1		DESCOVY 200 MG-25 MG	3	
<i>thioridazine hcl</i>	1		DOVATO	3	QL(1 EA daily)
<i>trifluoperazine hcl TABS</i>	1		EDURANT 25 MG (<i>Use rilpivirine hcl</i>)	3	QL(1 EA daily)
Quinolinone Derivatives			<i>efavirenz CAPS 200 MG</i>	1	QL(2 EA daily)
ABILIFY TABS (<i>Use aripiprazole</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>efavirenz CAPS 50 MG</i>	1	QL(3 EA daily)
<i>aripiprazole SOLN PO</i>	1	QL(30 ML daily); AL(At least 6 yrs old)	<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1	QL(1 EA daily)
<i>aripiprazole TABS</i>	1	QL(1 EA daily); AL(At least 6 yrs old)	<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1	QL(1 EA daily)
REXULTI	3	PA	<i>efavirenz TABS</i>	1	QL(1 EA daily)
Thioxanthenes			<i>emtricitabine CAPS</i>	1	QL(1 EA daily)
<i>thiothixene</i>	1		<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	1	QL(1 EA daily)
ANTIVIRALS - Drugs to Treat Viral Infections			<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	1	QL(1 EA daily); PV
Antiretrovirals			<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1	QL(1 EA daily)
<i>abacavir sulfate-lamivudine</i>	1	QL(1 EA daily)	EMTRIVA CAPS (<i>Use emtricitabine</i>)	NF	QL(1 EA daily)
<i>abacavir sulfate SOLN</i>	1	QL(32 ML daily)	EMTRIVA SOLN	3	QL(24 ML daily)
<i>abacavir sulfate TABS</i>	1	QL(2 EA daily)	EPIVIR SOLN (<i>Use lamivudine</i>)	NF	QL(30 ML daily)
APTIVUS CAPS	3	QL(4 EA daily)	EPIVIR TABS 300 MG (<i>Use lamivudine</i>)	NF	QL(1 EA daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1	QL(1 EA daily)	EPIVIR TABS 150 MG (<i>Use lamivudine</i>)	NF	QL(2 EA daily)
<i>atazanavir sulfate CAPS 200 MG</i>	1	QL(2 EA daily)	<i>etravirine 200 MG</i>	1	QL(2 EA daily)
BIKTARVY	3	QL(1 EA daily)	<i>etravirine 100 MG</i>	1	QL(4 EA daily)
CABENUVA	3		EVOTAZ	3	QL(1 EA daily)
CIMDUO	3	QL(1 EA daily)			
COMPLERA 200 MG-300 MG-25 MG (<i>Use emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	3	QL(1 EA daily)			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fosamprenavir calcium TABS</i>	1	QL(4 EA daily)	PREZISTA TABS 75 MG, 150 MG	3	QL(2 EA daily)
FUZEON SOLR	5	SP; PA	PREZISTA TABS 600 MG (<i>Use darunavir</i>)	NF	QL(2 EA daily)
GENVOYA	3	QL(1 EA daily)	PREZISTA TABS 800 MG (<i>Use darunavir</i>)	NF	QL(1 EA daily)
INTELENCE 25 MG	3	QL(8 EA daily)	RETROVIR CAPS (<i>Use zidovudine</i>)	NF	QL(6 EA daily)
INTELENCE 100 MG (<i>Use etravirine</i>)	NF	QL(4 EA daily)	RETROVIR SOLN	3	
INTELENCE 200 MG (<i>Use etravirine</i>)	NF	QL(2 EA daily)	RETROVIR SYRP (<i>Use zidovudine</i>)	NF	QL(60 ML daily)
ISENTRESS HD TABS	3	QL(2 EA daily)	REYATAZ CAPS 300 MG (<i>Use atazanavir sulfate</i>)	NF	QL(1 EA daily)
ISENTRESS CHEW	3	QL(6 EA daily)	REYATAZ CAPS 200 MG (<i>Use atazanavir sulfate</i>)	NF	QL(2 EA daily)
ISENTRESS TABS	3	QL(2 EA daily)	<i>rilpivirine hcl 25 MG</i>	3	QL(1 EA daily)
JULUCA	3	QL(1 EA daily)	<i>ritonavir TABS</i>	1	QL(12 EA daily)
KALETRA SOLN	2	QL(12.5 ML daily)	SELZENTRY SOLN	3	QL(30 ML daily)
KALETRA TABS (<i>Use lopinavir-ritonavir</i>)	NF	QL(4 EA daily)	SELZENTRY TABS 300 MG (<i>Use maraviroc</i>)	NF	QL(4 EA daily)
<i>lamivudine SOLN</i>	1	QL(30 ML daily)	SELZENTRY TABS 150 MG (<i>Use maraviroc</i>)	NF	QL(2 EA daily)
<i>lamivudine TABS 150 MG</i>	1	QL(2 EA daily)	STRIBILD	3	QL(1 EA daily)
<i>lamivudine TABS 300 MG</i>	1	QL(1 EA daily)	SYMFI (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
<i>lamivudine-zidovudine</i>	1	QL(2 EA daily)	SYMFI LO (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
<i>lopinavir-ritonavir SOLN</i>	1	QL(12.5 ML daily)	SYMTUZA	3	
<i>lopinavir-ritonavir TABS</i>	1	QL(4 EA daily)	<i>tenofovir disoproxil fumarate TABS</i>	1	
<i>maraviroc TABS 300 MG</i>	1	QL(4 EA daily)	TIVICAY TABS 50 MG	3	QL(2 EA daily)
<i>maraviroc TABS 150 MG</i>	1	QL(2 EA daily)	TRIUMEQ TABS	3	QL(1 EA daily)
<i>nevirapine SUSP</i>	1	QL(40 ML daily)	TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (<i>Use emtricitabine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
<i>nevirapine TABS</i>	1	QL(2 EA daily)			
<i>nevirapine TB24 400 MG</i>	1	QL(1 EA daily)			
NORVIR PACK	3	QL(12 EA daily)			
NORVIR TABS (<i>Use ritonavir</i>)	NF	QL(12 EA daily)			
ODEFSEY	3	QL(1 EA daily)			
PIFELTRO	3	QL(1 EA daily)			
PREZCOBIX	3	QL(1 EA daily)			
PREZISTA SUSP	3	QL(12 ML daily)			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRUVADA 200 MG-300 MG (<i>Use emtricitabine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily); PV	PEGASYS SOLN	4	QL(0.0714 ML daily); SP; PA
TYBOST	3	QL(1 EA daily)	PEGASYS SOSY	4	QL(0.072 ML daily); SP; PA
VIRACEPT TABS 250 MG	3	QL(10 EA daily)	<i>ribavirin (hepatitis c) CAPS</i>	1	QL(7 EA daily); SP
VIRACEPT TABS 625 MG	3	QL(4 EA daily)	<i>ribavirin (hepatitis c) TABS 200 MG</i>	1	QL(7 EA daily); SP
VIREAD POWD	3	QL(7.5 GM daily)	SOFOSBUVIR-VELPATASVIR TABS	1	QL(1 EA daily); SP; PA
VIREAD TABS (<i>Use tenofovir disoproxil fumarate</i>)	NF		VOSEVI	4	QL(1 EA daily); SP; PA
VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 EA daily)	Herpes Agents		
ZIAGEN SOLN (<i>Use abacavir sulfate</i>)	NF	QL(32 ML daily)	<i>acyclovir CAPS</i>	1	QL(5 EA daily; 50 EA per fill retail; 50 per fill mail)
<i>zidovudine CAPS</i>	1	QL(6 EA daily)	<i>acyclovir SUSP</i>	1	QL(13.34 ML daily)
<i>zidovudine SYRP</i>	1	QL(60 ML daily)	<i>acyclovir TABS PO</i>	1	QL(5 EA daily)
<i>zidovudine TABS</i>	1	QL(2 EA daily)	<i>famciclovir 125 MG, 250 MG</i>	1	QL(3 EA daily)
Antiviral Combinations			<i>famciclovir 500 MG</i>	1	QL(4 EA daily)
PAXLOVID (150/100)	3	QL(4 EA daily; 20 EA per 30 day(s) retail)	<i>valacyclovir hcl 500 MG</i>	1	QL(2 EA daily)
PAXLOVID (300/100)	3	QL(6 EA daily; 30 EA per 30 day(s) retail)	<i>valacyclovir hcl 1 GM</i>	1	QL(4 EA daily)
CMV Agents			VALTREX 1 GM (<i>Use valacyclovir hcl</i>)	NF	QL(4 EA daily)
<i>cidofovir</i>	3		VALTREX 500 MG (<i>Use valacyclovir hcl</i>)	NF	QL(2 EA daily)
<i>ganciclovir sodium SOLR</i>	1		Influenza Agents		
VALCYTE TABS (<i>Use valganciclovir hcl</i>)	NF	QL(4 EA daily); PA	<i>oseltamivir phosphate CAPS</i>	1	Limit 1 fill every 90 days.; QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>valganciclovir hcl TABS</i>	1	QL(4 EA daily); PA	<i>oseltamivir phosphate SUSR</i>	1	Limit 1 fill every 90 days.; QL(125 ML per fill retail); 1 max fill(s) per 90 day(s) retail
Hepatitis Agents					
<i>adefovir dipivoxil</i>	4	QL(1 EA daily); PA			
BARACLUDE TABS (<i>Use entecavir</i>)	NF	QL(1 EA daily); PA			
<i>entecavir TABS</i>	4	QL(1 EA daily); PA			
<i>lamivudine (hbv) TABS</i>	1	QL(3 EA daily)			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail	<i>metoprolol succinate TB24 200 MG</i>	1	QL(2 EA daily)
<i>rimantadine hydrochloride TABS</i>	1	QL(2 EA daily)	<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1	
TAMIFLU CAPS (<i>Use oseltamivir phosphate</i>)	NF	Limit 1 fill every 90 days.; QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1	
TAMIFLU SUSR (<i>Use oseltamivir phosphate</i>)	NF	Limit 1 fill every 90 days.; QL(125 ML per fill retail); 1 max fill(s) per 90 day(s) retail	<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1	
BETA BLOCKERS - Drugs to Treat High Blood Pressure			<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 EA daily)
Alpha-Beta Blockers			<i>nebivolol hcl 20 MG</i>	3	QL(2 EA daily)
<i>carvedilol</i>	1		TENORMIN TABS (<i>Use atenolol</i>)	NF	
<i>carvedilol phosphate</i>	3	QL(1 EA daily)	TOPROL XL TB24 25 MG, 50 MG, 100 MG (<i>Use metoprolol succinate</i>)	NF	
COREG (<i>Use carvedilol</i>)	NF		TOPROL XL TB24 200 MG (<i>Use metoprolol succinate</i>)	NF	QL(2 EA daily)
COREG CR (<i>Use carvedilol phosphate</i>)	NF	QL(1 EA daily)	Beta Blockers Non-Selective		
<i>labetalol hcl SOLN</i>	1		BETAPACE AF (<i>Use sotalol hcl (afib/afll)</i>)	NF	
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1		BETAPACE TABS 80 MG, 120 MG, 160 MG (<i>Use sotalol hcl</i>)	NF	QL(2 EA daily)
<i>labetalol hcl TABS 300 MG</i>	1	QL(8 EA daily)	CORGARD TABS 40 MG (<i>Use nadolol</i>)	NF	QL(6 EA daily)
Beta Blockers Cardio-Selective			CORGARD TABS 20 MG (<i>Use nadolol</i>)	NF	QL(3 EA daily)
<i>acebutolol hcl CAPS</i>	1		HEMANGEOL SOLN PO	4	QL(75 ML daily); SP; PA
<i>atenolol TABS</i>	1		INDERAL LA CP24 (<i>Use propranolol hcl</i>)	NF	QL(2 EA daily)
<i>betaxolol hcl</i>	1		<i>nadolol TABS 40 MG</i>	1	QL(6 EA daily)
<i>bisoprolol fumarate</i>	1		<i>nadolol TABS 20 MG</i>	1	QL(3 EA daily)
BYSTOLIC 2.5 MG, 5 MG, 10 MG (<i>Use nebivolol hcl</i>)	NF	QL(1 EA daily)	<i>nadolol TABS 80 MG</i>	1	
BYSTOLIC 20 MG (<i>Use nebivolol hcl</i>)	NF	QL(2 EA daily)	<i>pindolol TABS</i>	1	
			<i>propranolol hcl CP24</i>	1	QL(2 EA daily)
			<i>propranolol hcl SOLN IV 1 MG/ML</i>	1	
			<i>propranolol hcl TABS</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sotalol hcl (afib/af)</i>	1		<i>felodipine</i>	1	
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1	QL(2 EA daily)	<i>isradipine CAPS</i>	1	
<i>sotalol hcl TABS 240 MG</i>	1		<i>nicardipine hcl CAPS</i>	1	
<i>timolol maleate TABS</i>	1		<i>nicardipine hcl SOLN</i>	1	
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure			NICARDIPINE HCL SOLN (Use <i>nicardipine hcl</i>)	NF	
Calcium Channel Blockers			<i>nifedipine CAPS 20 MG</i>	1	QL(9 EA daily)
<i>amlodipine besylate TABS</i>	1		<i>nifedipine CAPS 10 MG</i>	1	
CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML, 2.5 MG/ML (Use <i>nicardipine hcl</i>)	NF		<i>nifedipine TB24</i>	1	
CARDIZEM CD CP24 120 MG, 300 MG, 360 MG (Use <i>diltiazem hcl coated beads</i>)	NF		<i>nimodipine CAPS</i>	1	
CARDIZEM CD CP24 180 MG, 240 MG (Use <i>diltiazem hcl coated beads</i>)	NF	QL(2 EA daily)	<i>nisoldipine</i>	1	
CARDIZEM LA TB24 (Use <i>diltiazem hcl</i>)	NF		NORVASC TABS (Use <i>amlodipine besylate</i>)	NF	
CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use <i>diltiazem hcl</i>)	NF		PROCARDIA XL TB24 (Use <i>nifedipine</i>)	NF	
<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1		SULAR 8.5 MG, 17 MG, 34 MG (Use <i>nisoldipine</i>)	NF	
<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1	QL(2 EA daily)	TIAZAC (Use <i>diltiazem hcl extended release beads</i>)	NF	
<i>diltiazem hcl extended release beads</i>	1		VERAPAMIL HCL ER CP24 (Use <i>verapamil hcl</i>)	NF	
<i>diltiazem hcl CP12</i>	1	QL(2 EA daily)	<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1	
<i>diltiazem hcl CP24</i>	1		<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1	QL(1 EA daily)
<i>diltiazem hcl SOLN 50 MG/10ML</i>	1		<i>verapamil hcl TABS</i>	1	
DILTIAZEM HCL SOLR	1		<i>verapamil hcl TBCR</i>	1	
<i>diltiazem hcl TABS</i>	1		VERELAN PM CP24 (Use <i>verapamil hcl</i>)	NF	
<i>diltiazem hcl TB24</i>	1		VERELAN CP24 (Use <i>verapamil hcl</i>)	NF	QL(1 EA daily)
			CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
			Cardiac Glycosides		
			<i>digoxin SOLN PO 0.05 MG/ML</i>	1	
			<i>digoxin TABS 62.5 MCG, 125 MCG, 250 MCG</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
LANOXIN SOLN IJ (<i>Use digoxin</i>)	2	
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (<i>Use digoxin</i>)	2	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	1	QL(1 EA daily)
BIDIL (<i>Use isosorbide dinitrate-hydralazine hcl</i>)	NF	
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (<i>Use amlodipine besylate-atorvastatin calcium</i>)	NF	QL(1 EA daily)
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (<i>Use sacubitril-valsartan</i>)	NF	QL(2 EA daily)
<i>isosorbide dinitrate-hydralazine hcl</i>	1	
sacubitril-valsartan TABS	1	QL(2 EA daily)
Impotence Agents		
<i>avanafil</i>	1	QL(0.134 EA daily)
CIALIS 5 MG (<i>Use tadalafil</i>)	NF	BPH Only; QL(1 EA daily); PA
<i>sildenafil citrate</i>	1	QL(0.1334 EA daily); PA
STENDRA (<i>Use avanafil</i>)	3	QL(0.134 EA daily)
<i>tadalafil 5 MG</i>	1	BPH Only; QL(1 EA daily); PA
VIAGRA (<i>Use sildenafil citrate</i>)	NF	QL(0.1334 EA daily); PA
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
FLOLAN 1.5 MG (<i>Use epoprostenol sodium</i>)	NF	SP; PA
ORENITRAM TBCR	5	SP; PA
<i>treprostinil SOLN IJ</i>	4	SP; PA
TYVASO REFILL KIT SOLN IN	5	SP; PA
TYVASO STARTER KIT SOLN IN	5	SP; PA
TYVASO SOLN IN	5	SP; PA
VELETRI (<i>Use epoprostenol sodium</i>)	NF	SP; PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	4	QL(1 EA daily); SP; PA
<i>bosentan TABS</i>	4	QL(2 EA daily); SP; PA
<i>bosentan TBSO 32 MG</i>	4	QL(2 EA daily); SP; PA
LETAIRIS (<i>Use ambrisentan</i>)	NF	QL(1 EA daily); SP; PA
<i>macitentan 10 MG</i>	4	QL(1 EA daily); SP; PA
OPSUMIT 10 MG (<i>Use macitentan</i>)	4	QL(1 EA daily); SP; PA
TRACLEER TABS (<i>Use bosentan</i>)	NF	QL(2 EA daily); SP; PA
TRACLEER TBSO 32 MG (<i>Use bosentan</i>)	4	QL(2 EA daily); SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS (<i>Use tadalafil (pulmonary hypertension)</i>)	NF	QL(2 EA daily); SP; PA
REVATIO SOLN (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(37.5 ML daily); SP; PA
REVATIO SUSR (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(6 ML daily); SP; PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
REVATIO TABS (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(3 EA daily); SP; PA
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ML daily); SP; PA
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	4	QL(6 ML daily); SP; PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 EA daily); SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 EA daily); SP; PA
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION TBPk	4	1 max fill(s) per 180 day(s) retail; SP; PA
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 EA daily); SP; PA
UPTRAVI TABS 200 MCG	4	SP; PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	5	QL(3 EA daily); SP; PA
Sinus Node Inhibitors		
CORLANOR TABS (<i>Use ivabradine hcl</i>)	NF	QL(2 EA daily); PA
<i>ivabradine hcl TABS</i>	3	QL(2 EA daily); PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	1	
<i>cefadroxil SUSR</i>	1	
<i>cefadroxil TABS</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1	
<i>cephalexin CAPS</i>	1	
<i>cephalexin SUSR</i>	1	
Cephalosporins - 2nd Generation		
<i>cefaclor CAPS</i>	1	
<i>cefaclor SUSR 250 MG/5ML</i>	1	
CEFOTAN IJ (<i>Use cefotetan disodium</i>)	NF	
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1	
<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1	
<i>cefprozil SUSR</i>	1	
<i>cefprozil TABS</i>	1	
<i>cefuroxime axetil TABS</i>	1	
<i>cefuroxime sodium IJ 750 MG</i>	1	
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	1	
<i>cefdinir SUSR</i>	1	
<i>cefixime CAPS</i>	1	
<i>cefixime SUSR</i>	1	ST
<i>cefpodoxime proxetil SUSR</i>	1	
<i>cefpodoxime proxetil TABS</i>	1	
<i>ceftazidime IJ 1 GM, 6 GM</i>	1	
<i>ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG</i>	1	
Cephalosporins - 4th Generation		
<i>cefepime hcl SOLR IJ 1 GM</i>	1	
Cephalosporins - 5th Generation		
<i>ceftaroline fosamil 400 MG, 600 MG</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
TEFLARO 400 MG, 600 MG (Use ceftaroline fosamil)	3	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
AVERI TABS PO	2	PV
BALCOLTRA (Use levonorgestrel-ethinyl estradiol-iron)	NF	PV
BEYAZ (Use drospirenone-ethinyl estradiol-levomefolate calcium)	NF	PV
desogestrel & ethinyl estradiol	1	PV
desogestrel-ethinyl estradiol (biphasic)	1	PV
desogestrel-ethinyl estradiol (triphasic)	1	PV
drospirenone-ethinyl estradiol	1	PV
drospirenone-ethinyl estradiol-levomefolate calcium	1	PV
ethynodiol diacet & eth estrad	1	PV
levonorgestrel & eth estradiol TABS	1	PV
levonorgestrel-eth estradiol (triphasic)	1	PV
levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	1	PV
levonorgestrel-ethinyl estradiol (continuous)	1	PV
levonorgestrel-ethinyl estradiol-iron	1	PV
LO LOESTRIN FE TABS	2	PV
MIRCETTE (Use desogestrel-ethinyl estradiol (biphasic))	NF	PV
NATAZIA	2	PV

Drug Name	Drug Tier	Requirements/ Limits
NEXTSTELLIS	2	PV
norethin acet & estrad-fe CAPS	1	PV
norethin acet & estrad-fe CHEW	1	PV
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	1	PV
norethindrone & eth estradiol	1	PV
norethindrone & ethinyl estradiol-fe	1	PV
norethindrone acet & eth estra TABS	1	PV
norethindrone acetate-ethinyl estradiol-fe	1	PV
norethindrone-eth estradiol (triphasic)	1	PV
norgestimate-ethinyl estradiol	1	PV
norgestimate-ethinyl estradiol (triphasic)	1	PV
norgestrel & ethinyl estradiol 30 MCG-0.3 MG	1	PV
SAFYRAL (Use drospirenone-ethinyl estradiol-levomefolate calcium)	NF	PV
SEASONIQUE (Use levonorgestrel-ethinyl estradiol (91-day))	NF	PV
TAYTULLA CAPS (Use norethin acet & estrad-fe)	NF	PV
TYBLUME CHEW	2	PV
YASMIN 28 (Use drospirenone-ethinyl estradiol)	NF	PV
YAZ (Use drospirenone-ethinyl estradiol)	NF	PV
Combination Contraceptives - Transdermal		

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>norelgestromin-ethinyl estradiol</i>	1	PV
TWIRLA	2	QL(3 EA per 28 day(s) retail); PV
Combination Contraceptives - Vaginal		
ANNOVERA	2	PV
<i>etonogestrel-ethinyl estradiol</i>	1	QL(0.05 EA daily); PV
NUVARING (<i>Use etonogestrel-ethinyl estradiol</i>)	NF	QL(0.05 EA daily); PV
Emergency Contraceptives		
ELLA	2	PV
<i>levonorgestrel (emergency oc) 1.5 MG</i>	1	PV
Progestin Contraceptives - Injectable		
DEPO-PROVERA SUSP IM (<i>Use medroxyprogesterone acetate (contraceptive)</i>)	NF	QL(1 ML per 90 day(s) retail); PV
DEPO-PROVERA SUSY IM (<i>Use medroxyprogesterone acetate (contraceptive)</i>)	NF	QL(1 ML per 90 day(s) retail; 1 ML per 90 days mail); PV
DEPO-SUBQ PROVERA 104 SUSY SC	2	PV
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	1	QL(1 ML per 90 day(s) retail); PV
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	1	QL(1 ML per 90 day(s) retail; 1 ML per 90 days mail); PV
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	1	PV
OPILL	2	PV
SLYND	2	QL(1 EA daily); PV
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		

Drug Name	Drug Tier	Requirements/ Limits
Glucocorticosteroids		
<i>budesonide CPEP</i>	1	QL(3 EA daily)
CORTEF TABS (<i>Use hydrocortisone</i>)	NF	
<i>deflazacort TABS</i>	4	SP; PA
DEPO-MEDROL SUSP (<i>Use methylprednisolone acetate</i>)	NF	
DEPO-MEDROL SUSP	3	
DEXAMETHASONE INTENSOL CONC	1	
<i>dexamethasone ELIX</i>	1	
<i>dexamethasone SOLN</i>	1	
<i>dexamethasone TABS</i>	1	
EMFLAZA TABS (<i>Use deflazacort</i>)	NF	SP; PA
<i>hydrocortisone sod succinate 100 MG</i>	1	2 max fill(s) per 30 day(s) retail
<i>hydrocortisone TABS</i>	1	
KENALOG-40 SUSP (<i>Use triamcinolone acetonide</i>)	NF	
MEDROL TABS	3	
MEDROL TABS 4 MG, 8 MG, 16 MG (<i>Use methylprednisolone</i>)	NF	
MEDROL TBPB (<i>Use methylprednisolone</i>)	NF	
<i>methylprednisolone acetate SUSP</i>	1	
<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1	
<i>methylprednisolone TABS</i>	1	
<i>methylprednisolone TBPB</i>	1	
PEDIAPRED SOLN (<i>Use prednisolone sodium phosphate</i>)	NF	
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>prednisolone sodium phosphate TBDP</i>	3	
<i>prednisolone SOLN</i>	1	
<i>prednisolone TABS</i>	1	
<i>prednisone SOLN</i>	1	
<i>prednisone TABS</i>	1	
<i>prednisone TBPk</i>	1	
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
SOLU-CORTEF 250 MG	3	
SOLU-CORTEF (Use hydrocortisone sod succinate)	3	2 max fill(s) per 30 day(s) retail
SOLU-MEDROL 2 GM	3	
SOLU-MEDROL 500 MG, 1000 MG (Use methylprednisolone sod succ)	NF	
<i>triamcinolone acetonide SUSP 40 MG/ML</i>	1	
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	1	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate 100 MG</i>	1	QL(6 EA daily)
<i>benzonatate 150 MG</i>	1	QL(4 EA daily)
<i>benzonatate 200 MG</i>	1	QL(3 EA daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1	
Misc. Respiratory Inhalants		
HYPERSAL NEBU	1	
HYPERSAL NEBU (Use sodium chloride (inhalant))	NF	

Drug Name	Drug Tier	Requirements/ Limits
NEBUSAL NEBU	1	
PULMOSAL NEBU 7 % (Use sodium chloride (inhalant))	NF	
<i>sodium chloride (inhalant) NEBU 7 %</i>	1	
Mucolytics		
<i>acetylcysteine SOLN</i>	1	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (Use isotretinoin)	NF	AL(At least 12 yrs old); PA
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1	AL(At least 12 yrs old); ST
<i>adapalene CREA</i>	1	AL(At least 12 yrs old)
<i>adapalene GEL</i>	1	AL(At least 12 yrs old)
AVAR CLEANSER LIQD 10 %-5 % (Use sulfacetamide sodium w/ sulfur)	NF	AL(At least 12 yrs old)
AVAR-E EMOLLIENT CREA 10 %-5 % (Use sulfacetamide sodium w/ sulfur)	NF	AL(At least 12 yrs old)
AVAR-E LS CREA (Use sulfacetamide sodium w/ sulfur)	NF	
BENZAMYCIN GEL (Use benzoyl peroxide-erythromycin)	NF	AL(At least 12 yrs old); PA
BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old)
BENZEPRO FOAM 5.3 %	2	AL(At least 12 yrs old)
<i>benzoyl peroxide-erythromycin GEL</i>	1	AL(At least 12 yrs old); PA
<i>benzoyl peroxide FOAM 5.3 %, 9.8 %</i>	1	AL(At least 12 yrs old)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>benzoyl peroxide GEL 5 %</i>	1	QL(3 GM daily); AL(At least 12 yrs old)	<i>erythromycin (acne aid) SOLN</i>	1	AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 10 %</i>	1	AL(At least 12 yrs old)	<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	3	AL(At least 12 yrs old); PA
<i>benzoyl peroxide LIQD 4 %, 10 %</i>	1	AL(At least 12 yrs old)	KLARON (Use <i>sulfacetamide sodium (acne)</i>)	NF	AL(At least 12 yrs old)
CLEOCIN-T LOTN (Use <i>clindamycin phosphate (topical)</i>)	NF	AL(At least 12 yrs old)	PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old)
CLINDAGEL GEL (Use <i>clindamycin phosphate (topical)</i>)	NF	QL(8 ML daily)	RETIN-A MICRO 0.1 % (Use <i>tretinoin microsphere</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<i>clindamycin phosphate (topical) FOAM</i>	1	AL(At least 12 yrs old); PA	RETIN-A MICRO 0.04 % (Use <i>tretinoin microsphere</i>)	NF	
<i>clindamycin phosphate (topical) GEL</i>	1	QL(8 ML daily)	RETIN-A MICRO PUMP 0.1 % (Use <i>tretinoin microsphere</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<i>clindamycin phosphate (topical) LOTN</i>	1	AL(At least 12 yrs old)	RETIN-A MICRO PUMP (Use <i>tretinoin microsphere</i>)	NF	
<i>clindamycin phosphate (topical) SOLN</i>	1	QL(4 ML daily); AL(At least 12 yrs old)	RETIN-A CREA (Use <i>tretinoin</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
<i>clindamycin phosphate (topical) SWAB</i>	1	AL(At least 12 yrs old)	RETIN-A GEL (Use <i>tretinoin</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1	AL(At least 12 yrs old); PA	SSS 10-5 CREA 10 %-5 % (Use <i>sulfacetamide sodium w/ sulfur</i>)	NF	AL(At least 12 yrs old)
<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1	AL(At least 12 yrs old); PA	<i>sulfacetamide sodium (acne)</i>	1	AL(At least 12 yrs old)
<i>clindamycin phosphate-tretinoin</i>	1	AL(At least 12 yrs old)	<i>sulfacetamide sodium w/ sulfur CREA 10 %-5 %</i>	1	AL(At least 12 yrs old)
DIFFERIN CREA (Use <i>adapalene</i>)	NF	AL(At least 12 yrs old)	<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %, 9 %-4.5 %</i>	1	AL(At least 12 yrs old)
DIFFERIN GEL (Use <i>adapalene</i>)	NF	AL(At least 12 yrs old)			
DIFFERIN LOTN	1	AL(At least 12 yrs old); ST			
EPIDUO GEL (Use <i>adapalene-benzoyl peroxide</i>)	NF	AL(At least 12 yrs old); ST			
<i>erythromycin (acne aid) PADS</i>	1	AL(At least 12 yrs old)			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SUMADAN WASH LIQD (Use sulfacetamide sodium w/ sulfur)	NF	AL(At least 12 yrs old)	ciclopirox SHAM	1	QL(10 ML daily)
tretinoin microsphere 0.1 %	1	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA	ciclopirox SOLN	1	QL(0.22 ML daily)
tretinoin CREA 0.025 %, 0.05 %, 0.1 %	1	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)	clotrimazole (topical) CREA	1	QL(4.5 GM daily); RX/OTC
tretinoin GEL 0.01 %, 0.025 %	1	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)	clotrimazole (topical) SOLN	1	QL(10 ML daily); RX/OTC
ZIANA (Use clindamycin phosphate-tretinoin)	NF	AL(At least 12 yrs old)	clotrimazole w/ betamethasone CREA	1	QL(8 GM daily)
Agents for External Genital and Perianal Warts			clotrimazole w/ betamethasone LOTN	1	
VEREGEN	3	QL(1 GM daily)	econazole nitrate CREA	1	QL(85 GM per fill retail; 85 per fill mail)
Antibiotics - Topical			ERTACZO	3	QL(2.15 GM daily)
gentamicin sulfate (topical) CREA	1	QL(1 GM daily)	EXELDERM CREA (Use sulconazole nitrate)	NF	
gentamicin sulfate (topical) OINT	1		EXELDERM SOLN (Use sulconazole nitrate)	NF	
mupirocin calcium (topical)	1		ketoconazole (topical) CREA	1	QL(10 GM daily)
mupirocin OINT	1	QL(6 GM daily)	ketoconazole (topical) SHAM 2 %	1	QL(20 ML daily)
NEO-SYNALAR	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail); PA	LOTRIMIN AF JOCK ITCH CREA (Use clotrimazole (topical))	NF	QL(4.5 GM daily); RX/OTC
Antifungals - Topical			LOTRIMIN AF CREA (Use clotrimazole (topical))	NF	QL(4.5 GM daily); RX/OTC
butenafine hcl	1	QL(6 GM daily)	LOTRIMIN ULTRA (Use butenafine hcl)	NF	QL(6 GM daily)
ciclopirox olamine CREA	1	QL(90 GM per fill retail); 1 max fill(s) per 30 day(s) retail	luliconazole	1	PA
ciclopirox olamine SUSP	1		LUZU (Use luliconazole)	NF	
ciclopirox GEL	1	QL(3.35 GM daily)	naftifine hcl CREA 1 %	1	QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>naftifine hcl CREA 2 %</i>	1	QL(2 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>nystatin (topical) CREA</i>	1	QL(10 GM daily)
<i>nystatin (topical) OINT</i>	1	QL(6 GM daily)
<i>nystatin (topical) POWD EX</i>	1	QL(10 GM daily)
<i>nystatin-triamcinolone CREA</i>	1	QL(10 GM daily)
<i>nystatin-triamcinolone OINT</i>	1	QL(4 GM daily)
<i>oxiconazole nitrate CREA</i>	1	Limit 1 Fill per 180 days; QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>OXISTAT CREA (Use oxiconazole nitrate)</i>	NF	Limit 1 Fill per 180 days; QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>OXISTAT LOTN</i>	2	Limit 1 Fill per 180 days; QL(2 ML daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>sulconazole nitrate CREA</i>	1	
<i>sulconazole nitrate SOLN</i>	1	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>tavaborole</i>	1	PA
Anti-inflammatory Agents - Topical		

Drug Name	Drug Tier	Requirements/ Limits
<i>diclofenac epolamine PTCH EX</i>	1	QL(2 EA daily); PA
<i>diclofenac sodium (topical) GEL EX</i>	1	QL(3.34 GM daily); RX/OTC
<i>FLECTOR PTCH EX (Use diclofenac epolamine)</i>	NF	
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	4	SP; PA
<i>CARAC CREA (Use fluorouracil (topical))</i>	NF	
<i>diclofenac sodium (actinic keratoses) EX</i>	1	QL(3.34 GM daily); PA
<i>EFUDEX CREA (Use fluorouracil (topical))</i>	NF	QL(4 GM daily)
<i>fluorouracil (topical) CREA 5 %</i>	1	QL(4 GM daily)
<i>fluorouracil (topical) SOLN</i>	1	QL(2 ML daily)
<i>PANRETIN</i>	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail)
<i>TARGRETIN (Use bexarotene (topical))</i>	NF	SP; PA
Antipruritics - Topical		
<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRUDOXIN <i>(Use doxepin hcl (antipruritic))</i>	NF	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	PYZCHIVA 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
			PYZCHIVA 90 MG/ML	4	QL(0.018 ML daily); SP; PA
			PYZCHIVA SC 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
			SKYRIZI PEN SOAJ	4	QL(0.025 ML daily); SP; PA
			SKYRIZI SOSY	4	QL(0.025 ML daily); SP; PA
ZONALON <i>(Use doxepin hcl (antipruritic))</i>	NF	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
			STELARA SOSY 90 MG/ML	4	QL(0.018 ML daily); SP; PA
			STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
			STEQEYMA 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
			STEQEYMA 90 MG/ML	4	QL(0.018 ML daily); SP; PA
Antipsoriatics			tazarotene CREA 0.1 %	1	QL(1 GM daily)
acitretin 10 MG, 17.5 MG	1	QL(1 EA daily)	TAZORAC CREA 0.1 % <i>(Use tazarotene)</i>	NF	QL(1 GM daily)
acitretin 25 MG	1	QL(2 EA daily)	TREMFYA ONE-PRESS SOPN SC 100 MG/ML	4	QL(0.018 ML daily); SP; PA
calcipotriene CREA	1	QL(4 GM daily); PA	TREMFYA PEN SOAJ 100 MG/ML	4	QL(0.018 ML daily); SP; PA
calcipotriene OINT	1	QL(4 GM daily); PA	TREMFYA SOSY 100 MG/ML	4	QL(0.018 ML daily); SP; PA
calcipotriene SOLN	1	QL(4 ML daily); PA	VECTICAL <i>(Use calcitriol topical))</i>	NF	QL(3.34 GM daily)
calcitriol (topical)	1	QL(3.34 GM daily)	YESINTEK SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
COSENTYX (300 MG DOSE) SOSY	4	QL(0.072 ML daily); SP; PA	YESINTEK SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
COSENTYX SENSOREADY (300 MG) SOAJ	4	QL(0.072 ML daily); SP; PA	YESINTEK SOSY 90 MG/ML	4	QL(0.018 ML daily); SP; PA
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ML daily); SP; PA	Antiseborrheic Products		
COSENTYX UNOREADY SOAJ	4	QL(0.072 ML daily); SP; PA	selenium sulfide LOTN 2.5 %	1	
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ML daily); SP; PA	Antivirals - Topical		
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ML daily); SP; PA			
methoxsalen rapid	1	QL(4 EA daily)			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>acyclovir topical CREA</i>	1	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone dipropionate (topical) LOTN</i>	1	
<i>acyclovir topical OINT</i>	1	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone dipropionate (topical) OINT</i>	1	QL(3 GM daily)
DENAVIR (Use <i>penciclovir</i>)	NF	QL(0.18 GM daily)	<i>betamethasone dipropionate augmented CREA</i>	1	QL(3.5 GM daily)
<i>penciclovir</i>	3	QL(0.18 GM daily)	<i>betamethasone dipropionate augmented LOTN</i>	1	QL(5 ML daily)
ZOVIRAX CREA (Use <i>acyclovir topical</i>)	NF	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone dipropionate augmented OINT</i>	1	QL(3.5 GM daily)
ZOVIRAX OINT (Use <i>acyclovir topical</i>)	NF	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone valerate CREA</i>	1	QL(2.5 GM daily)
Burn Products			<i>betamethasone valerate FOAM</i>	1	QL(6 GM daily)
<i>mafenide acetate PACK</i>	3		<i>betamethasone valerate LOTN</i>	1	QL(5 ML daily)
SILVADENE (Use <i>silver sulfadiazine</i>)	NF	QL(20 GM daily)	<i>betamethasone valerate OINT</i>	1	QL(3 GM daily)
<i>silver sulfadiazine</i>	1	QL(20 GM daily)	<i>calcipotriene-betamethasone dipropionate OINT</i>	1	ST
SULFAMYLLON CREA	3		<i>calcipotriene-betamethasone dipropionate SUSP</i>	1	ST
Corticosteroids - Topical			<i>clobetasol propionate emollient base 0.05 %</i>	1	QL(1 GM daily); PA
<i>alclometasone dipropionate CREA</i>	1	QL(2 GM daily)	<i>clobetasol propionate CREA 0.05 %</i>	1	QL(3 GM daily); PA
<i>alclometasone dipropionate OINT</i>	1	QL(3 GM daily)	<i>clobetasol propionate FOAM</i>	1	QL(3 GM daily); ST
<i>amcinonide CREA</i>	1	QL(60 GM per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	<i>clobetasol propionate GEL 0.05 %</i>	1	QL(2 GM daily); ST
<i>amcinonide OINT</i>	3		<i>clobetasol propionate OINT 0.05 %</i>	1	QL(1 GM daily); PA
<i>betamethasone dipropionate (topical) CREA</i>	1	QL(3 GM daily)	<i>clobetasol propionate SOLN 0.05 %</i>	1	QL(3.34 ML daily); PA
			<i>clocortolone pivalate</i>	3	QL(3 GM daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CLODERM (Use clocortolone pivalate)	NF	QL(3 GM daily)	fluocinolone acetonide OINT	1	QL(4 GM daily)
CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail	fluocinolone acetonide SOLN	1	QL(4 ML daily)
DERMA-SMOOTH/FS BODY OIL (Use fluocinolone acetonide)	NF	QL(118.28 ML per fill retail; 118.28 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	fluocinonide emulsified base	1	
DERMA-SMOOTH/FS SCALP OIL (Use fluocinolone acetonide)	NF	QL(8 ML daily)	fluocinonide CREA	1	QL(4 GM daily)
desonide CREA	1	QL(4 GM daily)	fluocinonide GEL	1	
desonide LOTN	1	QL(4 ML daily)	fluocinonide OINT	1	
desonide OINT	1	QL(3 GM daily)	fluocinonide SOLN	1	
desoximetasone CREA 0.25 %	1	QL(4 GM daily)	flurandrenolide CREA	2	QL(2 GM daily)
desoximetasone GEL	1	QL(3 GM daily)	flurandrenolide LOTN	2	QL(2 ML daily)
desoximetasone OINT 0.25 %	1	QL(4 GM daily)	fluticasone propionate CREA 0.05 %	1	QL(4 GM daily)
diflorasone diacetate CREA	1	PA	fluticasone propionate LOTN	1	QL(3.34 ML daily)
diflorasone diacetate OINT	1	PA	fluticasone propionate OINT	1	QL(4 GM daily)
DIPROLENE OINT (Use betamethasone dipropionate augmented)	NF	QL(3.5 GM daily)	halcinonide CREA	1	PA
fluocinolone acetonide CREA 0.025 %	1	QL(4 GM daily)	halobetasol propionate CREA	1	QL(3.5 GM daily)
fluocinolone acetonide CREA 0.01 %	1		halobetasol propionate OINT	1	QL(3.5 GM daily)
fluocinolone acetonide OIL	1	QL(118.28 ML per fill retail; 118.28 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	HALOG CREA (Use halcinonide)	NF	PA
			HALOG OINT	3	PA
			hydrocortisone (topical) CREA 1 %, 2.5 %	1	QL(15.15 EA daily); RX/OTC
			hydrocortisone (topical) LOTN 2.5 %	1	
			hydrocortisone (topical) OINT 1 %, 2.5 %	1	QL(15.15 GM daily); RX/OTC
			hydrocortisone butyrate CREA	1	QL(3 GM daily)
			hydrocortisone butyrate OINT	1	QL(3 GM daily)
			hydrocortisone butyrate SOLN	1	QL(5 ML daily)
			hydrocortisone valerate CREA	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocortisone valerate OINT</i>	1		DUPIXENT SOAJ 300 MG/2ML	4	QL(0.29 ML daily; 8 ML per 28 day(s) retail); SP; PA
<i>mometasone furoate CREA</i>	1	QL(3 GM daily)	DUPIXENT SOAJ 200 MG/1.14ML	4	QL(0.082 ML daily; 4.6 ML per 28 day(s) retail); SP; PA
<i>mometasone furoate OINT</i>	1	QL(4 GM daily)	DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ML daily; 4.6 ML per 28 day(s) retail); SP; PA
<i>mometasone furoate SOLN</i>	1	QL(5 ML daily)	DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ML daily; 8 ML per 28 day(s) retail); SP; PA
SYNALAR CREA (Use <i>fluocinolone acetonide</i>)	NF	QL(4 GM daily)	Emollients		
SYNALAR OINT (Use <i>fluocinolone acetonide</i>)	NF	QL(4 GM daily)	<i>lactic acid (ammonium lactate) CREA</i>	1	QL(12.9 GM daily); RX/OTC
TACLONEX SUSP (Use <i>calcipotriene-betamethasone dipropionate</i>)	NF	ST	<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1	RX/OTC
TOPICORT CREA 0.25 % (Use <i>desoximetasone</i>)	NF	QL(4 GM daily)	Enzymes - Topical		
TOPICORT CREA 0.05 % (Use <i>desoximetasone</i>)	NF		SANTYL OINT	3	PA
TOPICORT GEL (Use <i>desoximetasone</i>)	NF	QL(3 GM daily)	Immunomodulating Agents - Topical		
TOPICORT OINT 0.25 % (Use <i>desoximetasone</i>)	NF	QL(4 GM daily)	<i>imiquimod 5 %</i>	1	QL(12 EA per fill retail; 12 per fill mail)
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1	QL(5 GM daily)	Immunosuppressive Agents - Topical		
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1	QL(3.34 GM daily)	ELIDEL (Use <i>pimecrolimus</i>)	NF	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1	QL(15.15 GM daily)	<i>pimecrolimus</i>	1	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1	QL(6 ML daily)	<i>tacrolimus (topical) OINT</i>	1	AL(At least 2 yrs old); PA
<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1		Keratolytic/Antimitotic/Vesicant Agents		
<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1	QL(6 GM daily)	<i>podofilox SOLN</i>	1	
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1	QL(15.15 GM daily)	Local Anesthetics - Topical		
VANOS CREA (Use <i>fluocinonide</i>)	NF	QL(4 GM daily)	<i>lidocaine hcl GEL 2 %</i>	1	QL(4 GM daily); RX/OTC
Eczema Agents					

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>lidocaine hcl PRSY</i>	1	QL(4 ML daily)
<i>lidocaine hcl SOLN</i>	1	QL(10 ML daily)
<i>lidocaine-prilocaine CREA</i>	1	QL(1 GM daily)
<i>lidocaine PTCH 5 %</i>	1	PA
LIDODERM PTCH (<i>Use lidocaine</i>)	NF	PA
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA	3	QL(2 GM daily); PA
Rosacea Agents		
<i>azelaic acid GEL</i>	1	QL(1.67 GM daily)
<i>brimonidine tartrate (topical)</i>	3	QL(1 GM daily); PA
METROCREAM CREA (<i>Use metronidazole (topical)</i>)	NF	QL(3 GM daily)
METROGEL GEL 1 % (<i>Use metronidazole (topical)</i>)	NF	QL(5 GM daily)
<i>metronidazole (topical) CREA</i>	1	QL(3 GM daily)
<i>metronidazole (topical) GEL 1 %</i>	1	QL(5 GM daily)
<i>metronidazole (topical) GEL 0.75 %</i>	1	QL(3 GM daily)
<i>metronidazole (topical) LOTN</i>	1	
MIRVASO (<i>Use brimonidine tartrate (topical)</i>)	NF	QL(1 GM daily); PA
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	1	PA
ELIMITE CREA (<i>Use permethrin</i>)	NF	
<i>ivermectin (pediculicide)</i>	1	PA
<i>malathion</i>	1	
NATROBA (<i>Use spinosad</i>)	NF	PA
OVIDE (<i>Use malathion</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits
<i>permethrin CREA</i>	1	
PERMETHRIN CREA 5 % (<i>Use permethrin</i>)	NF	
<i>permethrin LIQD EX</i>	1	
<i>spinosad</i>	1	PA
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
GLUCAGEN DIAGNOSTIC	3	QL(0.035 EA daily)
THYROGEN 0.9 MG	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; SP; PA
Diagnostic Tests		
ACCU-CHEK GUIDE TEST STRP	1	Limit 100 per month; QL(3.34 EA daily); RX/OTC
CHEMSTRIP K STRP	1	
FORA GTEL BLOOD KETONE TEST	1	
FORA TEST N'GO ADV-VOICE-6 CON	1	
GOJJI BLOOD KETONE TEST	1	
KETONE TEST STRP	1	
KETOSTIX STRP	1	
NOVA MAX PLUS KETONE TEST	1	
PRECISION XTRA KETONE	1	
RELION KETONE TEST STRP	1	
RELION TRUE METRIX TEST STRIPS STRP	1	QL(3.34 EA daily); RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	1	QL(3.34 EA daily); RX/OTC

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRUE METRIX BLOOD GLUCOSE TEST STRP	1	Limit 100 per month; QL(3.34 EA daily); RX/OTC	<i>triamterene & hydrochlorothiazide TABS</i>	1	
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes			Loop Diuretics		
Digestive Enzymes			<i>bumetanide SOLN 0.25 MG/ML</i>	1	
CREON CPEP	2		<i>bumetanide TABS</i>	1	QL(5 EA daily)
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2		BUMEX TABS 0.5 MG (Use <i>bumetanide</i>)	NF	QL(5 EA daily)
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	Non-FDA approved uses require Prior Authorization	EDECIN (Use <i>ethacrynic acid</i>)	NF	QL(16 EA daily)
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure			<i>ethacrynic acid</i>	1	QL(16 EA daily)
Carbonic Anhydrase Inhibitors			<i>furosemide SOLN IJ 10 MG/ML</i>	1	
<i>acetazolamide sodium</i>	1		<i>furosemide TABS</i>	1	
<i>acetazolamide CP12</i>	1	QL(2 EA daily)	LASIX TABS (Use <i>furosemide</i>)	NF	
<i>acetazolamide TABS 250 MG</i>	1	QL(4 EA daily)	<i>torseamide TABS</i>	1	
<i>acetazolamide TABS 125 MG</i>	1	QL(8 EA daily)	Potassium Sparing Diuretics		
<i>methazolamide TABS</i>	1	QL(6 EA daily)	ALDACTONE TABS (Use <i>spironolactone</i>)	NF	
Diuretic Combinations			<i>amiloride hcl TABS</i>	1	
<i>amiloride & hydrochlorothiazide</i>	1		DYRENIUM CAPS (Use <i>triamterene</i>)	NF	QL(3 EA daily)
<i>spironolactone & hydrochlorothiazide</i>	1		<i>spironolactone TABS</i>	1	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1		<i>triamterene CAPS</i>	1	QL(3 EA daily)
			Thiazides and Thiazide-Like Diuretics		
			<i>chlorthalidone 25 MG, 50 MG</i>	1	
			<i>hydrochlorothiazide CAPS</i>	1	QL(2 EA daily)
			<i>hydrochlorothiazide TABS</i>	1	QL(2 EA daily)
			<i>indapamide TABS 1.25 MG</i>	1	QL(1 EA daily)
			<i>indapamide TABS 2.5 MG</i>	1	QL(2 EA daily)
			<i>metolazone</i>	1	QL(2 EA daily)
			ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
Bone Density Regulators		
ACTONEL TABS 35 MG (Use risedronate sodium)	NF	QL(0.143 EA daily); PA
ACTONEL TABS 150 MG (Use risedronate sodium)	NF	QL(0.036 EA daily); PA
alendronate sodium TABS 5 MG, 10 MG	1	QL(1 EA daily)
alendronate sodium TABS 35 MG, 70 MG	1	QL(0.143 EA daily)
ATELVIA TBEC (Use risedronate sodium)	NF	PA
calcitonin (salmon) NA	1	QL(0.14 ML daily)
FORTEO SOPN (Use teriparatide)	NF	QL(0.09 ML daily); PA
FOSAMAX PLUS D	3	QL(0.143 EA daily); PA
FOSAMAX TABS 70 MG (Use alendronate sodium)	NF	QL(0.143 EA daily)
ibandronate sodium SOLN	4	SP; PA
ibandronate sodium TABS	1	QL(0.036 EA daily)
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	4	SP; PA
PAMIDRONATE DISODIUM SOLN	4	SP; PA
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA
RECLAST SOLN (Use zoledronic acid)	NF	SP; PA
risedronate sodium TABS 150 MG	1	QL(0.036 EA daily); PA
risedronate sodium TABS 35 MG	1	QL(0.143 EA daily); PA
risedronate sodium TABS 5 MG, 30 MG	1	QL(1 EA daily); PA
risedronate sodium TBEC	1	PA
teriparatide SOPN	4	QL(0.09 ML daily); PA
TYMLOS	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
zoledronic acid SOLN 5 MG/100ML	4	SP; PA
Corticotropin		
ACTHAR GEL	5	SP; PA
GnRH/LHRH Antagonists		
ORILISSA	2	SP; PA
Growth Hormones		
GENOTROPIN MINIQUICK PRSY	4	SP; PA
GENOTROPIN CART SC	4	SP; PA
HUMATROPE CART IJ	4	SP; PA
NORDITROPIN FLEXPRO SOPN 30 MG/3ML	4	SP; PA
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA
Hormone Receptor Modulators		
EVISTA (Use raloxifene hcl)	NF	QL(1 EA daily); PV
OSPHEA	3	PA
raloxifene hcl	1	QL(1 EA daily); PV
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX	4	SP; PA
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI (6 MONTH) SC	4	SP; PA
SYNAREL	5	SP; PA
Metabolic Modifiers		
ALDURAZYME	4	SP; PA
betaine	4	SP; PA
BUPHENYL POWD (Use sodium phenylbutyrate)	NF	SP; PA
BUPHENYL TABS (Use sodium phenylbutyrate)	NF	SP; PA
calcitriol CAPS	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>calcitriol SOLN PO</i>	1	
<i>cinacalcet hcl</i>	4	QL(4 EA daily); SP; PA
CYSTADANE (Use betaine)	NF	SP; PA
<i>doxercalciferol CAPS</i>	1	
<i>doxercalciferol SOLN</i>	1	
ELAPRASE	4	SP; PA
MYALEPT	5	SP; PA
<i>nitisinone CAPS</i>	4	SP; PA
ORFADIN CAPS (Use nitisinone)	NF	SP; PA
<i>paricalcitol CAPS</i>	1	
<i>paricalcitol SOLN</i>	1	SP
ROCALTROL CAPS (Use calcitriol)	NF	
ROCALTROL SOLN PO (Use calcitriol)	NF	
SENSIPAR (Use cinacalcet hcl)	NF	QL(4 EA daily); SP; PA
<i>sodium phenylbutyrate POWD</i>	1	SP; PA
<i>sodium phenylbutyrate TABS</i>	1	SP; PA
ZEMPLAR CAPS 1 MCG, 2 MCG (Use paricalcitol)	NF	
ZEMPLAR SOLN (Use paricalcitol)	NF	SP
Posterior Pituitary Hormones		
DDAVP PF SOLN IJ (Use desmopressin acetate)	NF	SP; PA
DDAVP SOLN IJ 4 MCG/ML (Use desmopressin acetate)	NF	SP; PA
DDAVP TABS 0.2 MG (Use desmopressin acetate)	NF	QL(8 EA daily)
DDAVP TABS 0.1 MG (Use desmopressin acetate)	NF	QL(6 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>desmopressin acetate spray</i>	1	
<i>desmopressin acetate spray refrigerated 0.01 %</i>	1	
<i>desmopressin acetate SOLN IJ</i>	1	SP; PA
DESMOPRESSIN ACETATE SOLN NA	4	SP; PA
<i>desmopressin acetate TABS 0.1 MG</i>	1	QL(6 EA daily)
<i>desmopressin acetate TABS 0.2 MG</i>	1	QL(8 EA daily)
Prolactin Inhibitors		
<i>cabergoline</i>	1	
Somatostatic Agents		
<i>octreotide acetate SOLN</i>	4	SP; PA
SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (Use octreotide acetate)	NF	SP; PA
SIGNIFOR	5	SP; PA
Vasopressin Receptor Antagonists		
JYNARQUE TABS 15 MG, 30 MG (Use tolvaptan)	NF	QL(2 EA daily); SP; PA
SAMSCA TABS PO (Use tolvaptan (hyponatremia))	NF	QL(2 EA daily); SP; PA
<i>tolvaptan (hyponatremia) TABS PO 15 MG, 30 MG</i>	4	QL(2 EA daily); SP; PA
<i>tolvaptan TABS</i>	4	QL(2 EA daily); SP; PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
BIJUVA	3	PA
CLIMARA PRO	3	
DUAVEE	3	PA
<i>norethindrone acetate-ethinyl estradiol</i>	1	
PREMPHASE	2	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
PREMPRO	2	QL(1 EA daily)
Estrogens		
CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol)	NF	
DELESTROGEN (Use estradiol valerate)	NF	
DEPO-ESTRADIOL	3	
DIVIGEL GEL (Use estradiol)	NF	
ELESTRIN GEL	3	
ESTRACE TABS (Use estradiol)	NF	
estradiol valerate	1	
estradiol GEL	1	
estradiol GEL	3	
estradiol PTTW	1	QL(0.286 EA daily)
estradiol PTWK	1	
estradiol TABS	1	
ESTROGEL GEL (Use estradiol)	3	
estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	1	QL(1 EA daily)
EVAMIST SOLN	3	
MENEST 2.5 MG	3	
MENOSTAR PTWK	3	
MINIVELLE PTTW (Use estradiol)	NF	QL(0.286 EA daily)
PREMARIN SOLR	2	
PREMARIN TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (Use estrogens, conjugated)	NF	QL(1 EA daily)
VIVELLE-DOT PTTW (Use estradiol)	NF	QL(0.286 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA SOLR	3	PA
BAXDELA TABS	3	PA
ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG	1	
ciprofloxacin in d5w 200 MG/100ML	3	
CIPRO TABS 250 MG, 500 MG (Use ciprofloxacin hcl)	NF	
levofloxacin in d5w 500 MG/100ML	1	
levofloxacin SOLN PO	1	
levofloxacin TABS	1	
moxifloxacin hcl in sodium chloride	1	
moxifloxacin hcl TABS	1	
ofloxacin 300 MG, 400 MG	1	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
MOTEGRITY (Use prucalopride succinate)	NF	QL(1 EA daily)
prucalopride succinate	1	QL(1 EA daily)
Gallstone Solubilizing Agents		
URSO 250 TABS (Use ursodiol)	NF	
URSO FORTE TABS (Use ursodiol)	NF	
ursodiol CAPS	1	QL(3 EA daily)
ursodiol TABS	1	
Gastrointestinal Chloride Channel Activators		
AMITIZA (Use lubiprostone)	NF	QL(2 EA daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>lubiprostone</i>	1	QL(2 EA daily)
Gastrointestinal Stimulants		
<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1	
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	1	QL(60 ML daily)
<i>metoclopramide hcl TABS</i>	1	QL(6 EA daily)
REGLAN TABS (<i>Use metoclopramide hcl</i>)	NF	QL(6 EA daily)
Inflammatory Bowel Agents		
APRISO CP24 (<i>Use mesalamine</i>)	NF	PA
AZULFIDINE EN-TABS TBEC (<i>Use sulfasalazine</i>)	NF	
AZULFIDINE TABS (<i>Use sulfasalazine</i>)	NF	
<i>balsalazide disodium CAPS</i>	1	QL(9 EA daily)
CANASA SUPP (<i>Use mesalamine</i>)	NF	
COLAZAL CAPS (<i>Use balsalazide disodium</i>)	NF	QL(9 EA daily)
DELZICOL CPDR (<i>Use mesalamine</i>)	NF	
DIPENTUM	2	
INFLECTRA SOLR	4	SP; PA
LIALDA TBEC (<i>Use mesalamine</i>)	NF	
<i>mesalamine CP24</i>	1	PA
<i>mesalamine CPDR</i>	1	
<i>mesalamine ENEM</i>	3	
<i>mesalamine SUPP</i>	3	
<i>mesalamine TBEC 800 MG</i>	3	QL(6 EA daily)
<i>mesalamine TBEC 1.2 GM</i>	3	
PYZCHIVA 130 MG/26ML	4	QL(3.47 ML daily); SP; PA
RENFLEXIS	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
SKYRIZI SOCT	4	QL(0.043 ML daily); SP; PA
SKYRIZI SOLN	4	QL(0.36 ML daily); SP; PA
STELARA 130 MG/26ML	4	QL(3.47 ML daily); SP; PA
STEQEYMA	4	QL(3.47 ML daily); SP; PA
<i>sulfasalazine TABS</i>	1	
<i>sulfasalazine TBEC</i>	1	
TREMFYA PEN SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); SP; PA
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); SP; PA
TREMFYA SOLN IV	4	QL(0.72 ML daily); SP; PA
TREMFYA SOSY SC 200 MG/2ML	4	QL(0.072 ML daily); SP; PA
YESINTEK 130 MG/26ML	4	QL(3.47 ML daily); SP; PA
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	1	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosectron hcl</i>	1	QL(2 EA daily)
LINZESS	2	QL(1 EA daily)
LOTIRONEX (<i>Use alosetron hcl</i>)	NF	QL(2 EA daily)
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	1	
MOVANTIK	3	QL(1 EA daily); PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	1	
<i>calcium acetate (phosphate binder) TABS</i>	1	RX/OTC
FOSRENOL CHEW (<i>Use lanthanum carbonate</i>)	NF	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>lanthanum carbonate CHEW</i>	1		<i>sodium chloride (gu irrigant) 0.9 %</i>	1	
RENVELA PACK (<i>Use sevelamer carbonate</i>)	NF		SORBITOL 3 %	1	
RENVELA TABS (<i>Use sevelamer carbonate</i>)	NF		SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	1	
<i>sevelamer carbonate PACK</i>	1		Interstitial Cystitis Agents		
<i>sevelamer carbonate TABS</i>	1		ELMIRON CAPS	2	QL(3 EA daily)
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System			Prostatic Hypertrophy Agents		
Alkalinizers			<i>alfuzosin hcl</i>	1	QL(1 EA daily)
<i>potassium citrate (alkalinizer) TBCR</i>	1		AVODART (<i>Use dutasteride</i>)	NF	QL(1 EA daily)
<i>sodium citrate & citric acid</i>	1	RX/OTC	<i>dutasteride</i>	1	QL(1 EA daily)
UROCIT-K 10 TBCR (<i>Use potassium citrate (alkalinizer)</i>)	NF		<i>finasteride</i>	1	5 mg only
UROCIT-K 15 TBCR (<i>Use potassium citrate (alkalinizer)</i>)	NF		PROSCAR (<i>Use finasteride</i>)	NF	5 mg only
UROCIT-K 5 TBCR (<i>Use potassium citrate (alkalinizer)</i>)	NF		RAPAFLO (<i>Use silodosin</i>)	NF	
Cystinosis Agents			<i>silodosin</i>	1	
CYSTAGON CAPS	3	SP; PA	<i>tamsulosin hcl</i>	1	
Genitourinary Irrigants			UROXATRAL (<i>Use alfuzosin hcl</i>)	NF	QL(1 EA daily)
<i>acetic acid 0.25 %</i>	1		Urinary Analgesics		
ARGYLE STERILE SALINE 0.9 % (<i>Use sodium chloride (gu irrigant)</i>)	NF		<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	1	
CURITY STERILE SALINE 0.9 % (<i>Use sodium chloride (gu irrigant)</i>)	NF		PYRIDIUM TABS (<i>Use phenazopyridine hcl</i>)	NF	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	1		GOUT AGENTS - Drugs to Treat Gout		
			Gout Agent Combinations		
			<i>colchicine w/ probenecid</i>	1	
			Gout Agents		
			<i>allopurinol 100 MG, 300 MG</i>	1	
			<i>colchicine TABS</i>	1	QL(1 EA daily)
			<i>febuxostat</i>	1	QL(1 EA daily); PA
			ULORIC (<i>Use febuxostat</i>)	NF	QL(1 EA daily); PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
Uricosurics		
<i>probenecid</i>	1	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Bradykinin B2 Receptor Antagonists		
FIRAZYR SOSY (<i>Use icatibant acetate</i>)	NF	QL(9 ML daily); SP; PA
<i>icatibant acetate SOSY</i>	4	QL(9 ML daily); SP; PA
Complement Inhibitors		
GOHIBIC	4	PA
HAEGARDA SOLR SC	4	SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1	QL(3 EA daily)
Plasma Kallikrein Inhibitors		
ORLADEYO	5	SP; PA
TAKHZYRO SOLN	4	SP; PA
TAKHZYRO SOSY	4	SP; PA
Platelet Aggregation Inhibitors		
AGRYLIN 0.5 MG (<i>Use anagrelide hcl</i>)	NF	
<i>anagrelide hcl</i>	1	
<i>aspirin-dipyridamole</i>	1	QL(2 EA daily); PA
BRILINTA 60 MG, 90 MG (<i>Use ticagrelor</i>)	NF	QL(2 EA daily)
<i>cilostazol</i>	1	
<i>clopidogrel bisulfate 75 MG</i>	1	QL(1 EA daily)
<i>clopidogrel bisulfate 300 MG</i>	1	
<i>dipyridamole</i>	1	
EFFIENT (<i>Use prasugrel hcl</i>)	NF	QL(1 EA daily)
PLAVIX 75 MG (<i>Use clopidogrel bisulfate</i>)	NF	QL(1 EA daily)
<i>prasugrel hcl</i>	1	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>ticagrelor 60 MG, 90 MG</i>	1	QL(2 EA daily)
ZONTIVITY	3	PA
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	4	QL(2 EA daily); SP; PA
<i>miglustat</i>	4	QL(3 EA daily); SP; PA
ZAVESCA (<i>Use miglustat</i>)	NF	QL(3 EA daily); SP; PA
Agents for Sickle Cell Disease		
DROXIA CAPS	3	
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1	QL(1 ML daily)
Folic Acid/Folates		
<i>folic acid TABS</i>	1	PV; RX/OTC
Hematopoietic Growth Factors		
<i>eltrombopag olamine PACK 12.5 MG, 25 MG</i>	4	QL(1 EA daily); SP; PA
<i>eltrombopag olamine TABS 50 MG, 75 MG</i>	4	QL(2 EA daily); SP; PA
<i>eltrombopag olamine TABS 12.5 MG, 25 MG</i>	4	QL(1 EA daily); SP; PA
FULPHILA	4	SP; PA
LEUKINE SOLR IJ	4	SP; PA
PROMACTA PACK 12.5 MG, 25 MG (<i>Use eltrombopag olamine</i>)	NF	QL(1 EA daily); SP; PA
PROMACTA TABS 50 MG, 75 MG (<i>Use eltrombopag olamine</i>)	NF	QL(2 EA daily); SP; PA
PROMACTA TABS 12.5 MG, 25 MG (<i>Use eltrombopag olamine</i>)	NF	QL(1 EA daily); SP; PA
RETACRIT	4	SP; PA
UDENYCA ONBODY SOSY	4	SP; PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
UDENYCA SOAJ	4	SP; PA
UDENYCA SOSY	4	SP; PA
ZARXIO	4	SP; PA
Hematopoietic Mixtures		
HEMATINIC/FOLIC ACID	1	QL(1 EA daily)
Iron		
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	1	AL(Up to 1 yrs old); PV
<i>ferrous sulfate TABS</i>	1	PV
<i>ferrous sulfate TBEC 325 MG</i>	1	PV
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	1	SP; PA
CYKLOKAPRON SOLN (<i>Use tranexamic acid</i>)	NF	
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1	
<i>tranexamic acid TABS</i>	1	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1	
<i>phenobarbital TABS</i>	1	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1	QL(1 EA daily); PA
SILENOR (<i>Use doxepin hcl (sleep)</i>)	NF	QL(1 EA daily); PA
Non-Barbiturate Hypnotics		
AMBIEN CR TBCR (<i>Use zolpidem tartrate</i>)	NF	QL(1 EA daily)
AMBIEN TABS (<i>Use zolpidem tartrate</i>)	NF	QL(1 EA daily); AL(At least 18 yrs old)
<i>estazolam</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>eszopiclone</i>	1	QL(1 EA daily); AL(At least 18 yrs old); ST
<i>flurazepam hcl</i>	1	
HALCION 0.25 MG (<i>Use triazolam</i>)	NF	
LUNESTA (<i>Use eszopiclone</i>)	NF	QL(1 EA daily); AL(At least 18 yrs old); ST
RESTORIL (<i>Use temazepam</i>)	NF	QL(1 EA daily)
<i>temazepam</i>	1	QL(1 EA daily)
<i>triazolam</i>	1	
<i>zaleplon 5 MG</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
<i>zaleplon 10 MG</i>	1	QL(2 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TABS</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TBCR</i>	1	QL(1 EA daily)
Orexin Receptor Antagonists		
BELSOMRA	3	PA
Selective Melatonin Receptor Agonists		
<i>ramelteon</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
ROZEREM (<i>Use ramelteon</i>)	NF	QL(1 EA daily); AL(At least 18 yrs old)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	1	
Laxative Combinations		
GOLYTELY SOLR (<i>Use peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	NF	PV

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MOVIPREP (Use peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid)	NF		azithromycin TABS 500 MG	1	QL(4 EA per fill retail; 4 per fill mail)
peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	1		azithromycin TABS 600 MG	1	QL(0.286 EA daily)
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 236 GM	1	PV	ZITHROMAX TRI-PAK TABS (Use azithromycin)	NF	QL(4 EA per fill retail; 4 per fill mail)
peg 3350-potassium chloride-sod bicarbonate-sod chloride	1	PA	ZITHROMAX Z-PAK TABS (Use azithromycin)	NF	QL(6 EA per fill retail; 6 per fill mail)
sodium sulfate-potassium sulfate-magnesium sulfate	1		ZITHROMAX SUSR (Use azithromycin)	NF	
SUPREP BOWEL PREP KIT (Use sodium sulfate-potassium sulfate-magnesium sulfate)	NF		ZITHROMAX TABS 250 MG (Use azithromycin)	NF	QL(6 EA per fill retail; 6 per fill mail)
Laxatives - Miscellaneous			ZITHROMAX TABS 500 MG (Use azithromycin)	NF	QL(4 EA per fill retail; 4 per fill mail)
lactulose SOLN	1		Clarithromycin		
Stimulant Laxatives			clarithromycin SUSR	1	
bisacodyl SUPP	1		clarithromycin TABS	1	
bisacodyl TBEC	1		clarithromycin TB24	1	
DULCOLAX TBEC (Use bisacodyl)	NF		Erythromycins		
Surfactant Laxatives			E.E.S. GRANULES SUSR (Use erythromycin ethylsuccinate)	NF	
docusate calcium	1	QL(1 EA daily)	ERYPED 200 SUSR (Use erythromycin ethylsuccinate)	NF	
docusate sodium CAPS 250 MG	1		ERYPED 400 SUSR (Use erythromycin ethylsuccinate)	NF	
docusate sodium CAPS 100 MG	1	QL(4 EA daily)	erythromycin base CPEP	3	
MACROLIDES - Drugs to Treat Bacterial Infections			erythromycin base TABS	3	
Azithromycin			erythromycin base TBEC	1	
azithromycin PACK	1		erythromycin ethylsuccinate SUSR	1	
azithromycin SUSR	1		erythromycin ethylsuccinate TABS	3	
azithromycin TABS 250 MG	1	QL(6 EA per fill retail; 6 per fill mail)	Fidaxomicin		

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DIFICID TABS 200 MG (Use fidaxomicin)	2		KIMONO SENSATION MISC	2	QL(2 EA daily); PV
fidaxomicin TABS 200 MG	1		KIMONO SPECIAL DEVI	2	QL(2 EA daily); PV
MEDICAL DEVICES AND SUPPLIES			KIMONO MISC	2	QL(2 EA daily); PV
Contraceptives			MAXX PLUS MISC	2	QL(2 EA daily); PV
AIMSCO LUBRICATED MISC	2	QL(2 EA daily); PV	MAXX MISC	2	QL(2 EA daily); PV
CAYA DPRH	2	PV	OMNIFLEX DIAPHRAGM	2	PV
DUREX EXTRA SENSITIVE THIN DEVI	2	QL(2 EA daily); PV	REALITY LATEX CONDOMS MISC	2	QL(2 EA daily); PV
DUREX EXTRA SENSITIVE THIN MISC	2	QL(2 EA daily); PV	REALITY LATEX/ULTRA TEXTURED DEVI	2	QL(2 EA daily); PV
DUREX TROPICAL MISC	2	QL(2 EA daily); PV	REALITY LATEX/ULTRA THIN DEVI	2	QL(2 EA daily); PV
FANTASY LUBRICATED/SPERMICIDE MISC	2	QL(2 EA daily); PV	TROJAN BARESKIN DEVI	2	QL(2 EA daily); PV
FANTASY LUBRICATED MISC	2	QL(2 EA daily); PV	TROJAN MAGNUM MISC	2	QL(2 EA daily); PV
FC2 FEMALE CONDOM	2	QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail; PV	TROJAN ULTRA THIN/SPERMICIDAL MISC	2	QL(2 EA daily); PV
FEMCAP DEVI	2	PV	TROJAN ULTRA THIN MISC	2	QL(2 EA daily); PV
KAMELEON LUBRICATED MISC	2	QL(2 EA daily); PV	TROJAN-ENZ LUBRICATED MISC	2	QL(2 EA daily); PV
KIMONO COLORS DEVI	2	QL(2 EA daily); PV	TROJAN-ENZ/SPERMICIDAL MISC	2	QL(2 EA daily); PV
KIMONO MAXX-LARGE FLARE MISC	2	QL(2 EA daily); PV	TRUE COVER DEVI	2	QL(2 EA daily); PV
KIMONO MICRO THIN PLUS MISC	2	QL(2 EA daily); PV	TRUSTEX COLOR CONDOMS + LUBE MISC	2	QL(2 EA daily); PV
KIMONO PLUS MISC	2	QL(2 EA daily); PV	TRUSTEX LUB/RIBBED/STUDDED MISC	2	QL(2 EA daily); PV
KIMONO PS PLUS MISC	2	QL(2 EA daily); PV	TRUSTEX LUB/SPERMICIDE EX ST MISC	2	QL(2 EA daily); PV
KIMONO PS MISC	2	QL(2 EA daily); PV	TRUSTEX LUB/SPERMICIDE XL MISC	2	QL(2 EA daily); PV
KIMONO SENSATION PLUS MISC	2	QL(2 EA daily); PV	TRUSTEX LUBRICATED EX LARGE MISC	2	QL(2 EA daily); PV

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRUSTEX LUBRICATED EXTRA ST MISC	2	QL(2 EA daily); PV	DEXCOM G7 RECEIVER	2	QL(1 EA per 365 day(s) retail); PA
TRUSTEX LUBRICATED/SPERMICIDE MISC	2	QL(2 EA daily); PV	DEXCOM G7 SENSOR	2	QL(0.1 EA daily); PA
TRUSTEX LUBRICATED MISC	2	QL(2 EA daily); PV	FREESTYLE LIBRE 14 DAY READER	2	QL(1 EA per 365 day(s) retail); PA
TRUSTEX NATURAL CONDOMS + LUBE MISC	2	QL(2 EA daily); PV	FREESTYLE LIBRE 14 DAY SENSOR	2	QL(0.072 EA daily); PA
TRUSTEX RIA LUB/SPERMICIDE MISC	2	QL(2 EA daily); PV	FREESTYLE LIBRE 2 PLUS SENSOR	2	QL(0.072 EA daily); PA
TRUSTEX RIA LUBRICATED MISC	2	QL(2 EA daily); PV	FREESTYLE LIBRE 2 READER	2	QL(1 EA per 365 day(s) retail); PA
TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	2	QL(2 EA daily); PV	FREESTYLE LIBRE 2 SENSOR	2	QL(0.072 EA daily); PA
WIDE-SEAL DIAPHRAGM 60	2	PV	FREESTYLE LIBRE 3 PLUS SENSOR	2	QL(0.072 EA daily); PA
WIDE-SEAL DIAPHRAGM 65	2	PV	FREESTYLE LIBRE 3 READER	2	QL(1 EA per 365 day(s) retail); PA
WIDE-SEAL DIAPHRAGM 70	2	PV	FREESTYLE LIBRE 3 SENSOR	2	QL(0.072 EA daily); PA
WIDE-SEAL DIAPHRAGM 75	2	PV	FREESTYLE LIBRE READER	2	QL(1 EA per 365 day(s) retail); PA
WIDE-SEAL DIAPHRAGM 80	2	PV	OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	2	QL(1 EA per 999 day(s) retail; 1 EA per 999 days mail); PA
WIDE-SEAL DIAPHRAGM 85	2	PV	OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); PA
WIDE-SEAL DIAPHRAGM 90	2	PV	OMNIPOD 5 LIBRE INTRO KIT	2	QL(1 EA per 999 day(s) retail; 1 EA per 999 days mail); PA
WIDE-SEAL DIAPHRAGM 95	2	PV	OMNIPOD 5 LIBRE PODS MISC	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); PA
Diabetic Supplies					
DEXCOM G6 RECEIVER	2	QL(1 EA per 365 day(s) retail); PA			
DEXCOM G6 SENSOR	2	QL(0.1 EA daily); PA			
DEXCOM G6 TRANSMITTER	2	QL(1 EA per 90 day(s) retail); PA			
DEXCOM G7 15 DAY SENSOR	2	QL(0.072 EA daily); PA			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OMNIPOD CLASSIC PODS (GEN 3) MISC	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); PA	COMFORT EZ PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC
OMNIPOD DASH INTRO (GEN 4) KIT	2	QL(1 EA per 999 day(s) retail; 1 EA per 999 days mail); PA	DROPLET PEN NEEDLES	1	QL(5 EA daily); RX/OTC
OMNIPOD DASH PDM (GEN 4) KIT	2	QL(1 EA per 999 day(s) retail; 1 EA per 999 days mail); PA	EASY COMFORT PEN NEEDLES	1	QL(5 EA daily); RX/OTC
OMNIPOD DASH PODS (GEN 4) MISC	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); PA	EMBECTA AUTOSHIELD DUO	1	QL(5 EA daily); RX/OTC
OMNIPOD POD PALS	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)	EMBECTA PEN NEEDLE NANO	1	QL(5 EA daily); RX/OTC
ONETOUCH DELICA SAFETY LANCING	1	RX/OTC	EMBECTA PEN NEEDLE NANO 2 GEN	1	QL(5 EA daily); RX/OTC
RELION LANCET DEVICES 30G	1	RX/OTC	EMBECTA PEN NEEDLE ULTRAFINE	1	QL(5 EA daily)
RELION LANCETS	1	RX/OTC	EMBRACE PEN NEEDLES	1	QL(5 EA daily); RX/OTC
TRUE METRIX LEVEL 3 SOLN	1		GNP PEN NEEDLES	1	QL(5 EA daily); RX/OTC
Parenteral Therapy Supplies			GNP ULTICARE PEN NEEDLES	1	QL(5 EA daily); RX/OTC
ADVOCATE INSULIN PEN NEEDLE	1	QL(5 EA daily); RX/OTC	INCONTROL ULTICARE PEN NEEDLES	1	QL(5 EA daily); RX/OTC
AQINJECT PEN NEEDLE	1	QL(5 EA daily); RX/OTC	INSUPEN PEN NEEDLES	1	QL(5 EA daily); RX/OTC
ASSURE ID DUO PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC	PEN NEEDLE/5-BEVEL TIP	1	QL(5 EA daily); RX/OTC
ASSURE ID PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC	PEN NEEDLES	1	QL(5 EA daily); RX/OTC
AUM INSULIN SAFETY PEN NEEDLE	1	QL(5 EA daily); RX/OTC	PENTIPS	1	QL(5 EA daily); RX/OTC
AUM PEN NEEDLE	1	QL(5 EA daily); RX/OTC	PENTIPS GENERIC PEN NEEDLES	1	QL(5 EA daily)
BD PEN NEEDLE NANO 2ND GEN	1	QL(5 EA daily); RX/OTC	PIP PEN NEEDLES 31G X 5MM	1	QL(5 EA daily); RX/OTC
			PIP PEN NEEDLES 32G X 4MM	1	QL(5 EA daily); RX/OTC
			PURE COMFORT SAFETY PEN NEEDLE	1	QL(5 EA daily); RX/OTC
			QC UNIFINE PENTIPS	1	QL(5 EA daily); RX/OTC
			QUICK TOUCH INSULIN PEN NEEDLE	1	QL(5 EA daily); RX/OTC
			RAYA SURE PEN NEEDLE	1	QL(5 EA daily); RX/OTC

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
SAFETY PEN NEEDLES	1	QL(5 EA daily); RX/OTC
SURE COMFORT PEN NEEDLES	1	QL(5 EA daily); RX/OTC
TECHLITE PLUS PEN NEEDLES	1	QL(5 EA daily); RX/OTC
TRUE COMFORT PEN NEEDLES	1	QL(5 EA daily); RX/OTC
TRUE COMFORT PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC
TRUE COMFORT SAFETY PEN NEEDLE	1	QL(5 EA daily); RX/OTC
TRUEPLUS PEN NEEDLES	1	QL(5 EA daily); RX/OTC
ULTIGUARD SAFEPAK PEN NEEDLE	1	QL(5 EA daily); RX/OTC
UNIFINE OTC PEN NEEDLES	1	QL(5 EA daily); RX/OTC
UNIFINE PENTIPS	1	QL(5 EA daily); RX/OTC
UNIFINE PROTECT PEN NEEDLE	1	QL(5 EA daily); RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE	1	QL(5 EA daily); RX/OTC
VERIFINE INSULIN PEN NEEDLE	1	QL(5 EA daily); RX/OTC
VERIFINE PLUS PEN NEEDLE	1	QL(5 EA daily); RX/OTC
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	2	QL(0.04 ML daily); SP; PA
EMGALITY (300 MG DOSE) SOSY	2	QL(0.1 ML daily); SP; PA
EMGALITY SOAJ	2	QL(0.07 ML daily); SP; PA
EMGALITY SOSY	2	QL(0.07 ML daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
UBRELVY	3	QL(16 EA per 30 day(s) retail; 16 EA per 30 days mail); ST
Migraine Combinations		
CAFERGOT TABS (<i>Use ergotamine w/ caffeine</i>)	NF	QL(1.5 EA daily)
<i>ergotamine w/ caffeine TABS</i>	1	QL(1.5 EA daily)
<i>sumatriptan-naproxen sodium</i>	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)
TREXIMET (<i>Use sumatriptan-naproxen sodium</i>)	NF	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)
Migraine Products		
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1	
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1	QL(0.267 ML daily)
ERGOMAR SUBL	3	QL(0.667 EA daily)
MIGRANAL SOLN NA (<i>Use dihydroergotamine mesylate</i>)	NF	QL(0.267 ML daily)
Serotonin Agonists		
<i>almotriptan malate 12.5 MG</i>	1	QL(0.4 EA daily); AL(At least 12 yrs old); ST
<i>almotriptan malate 6.25 MG</i>	1	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>eletriptan hydrobromide</i>	1	QL(0.2 EA daily); AL(At least 18 yrs old); ST
FROVA (<i>Use frovatriptan succinate</i>)	NF	QL(0.4 EA daily); AL(At least 18 yrs old); ST

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>frovatriptan succinate</i>	1	QL(0.4 EA daily); AL(At least 18 yrs old); ST	<i>sumatriptan</i>	1	QL(0.2 EA daily); AL(At least 18 yrs old)
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML, 6 MG/0.5ML	2	QL(0.134 ML daily); AL(At least 18 yrs old)	<i>sumatriptan succinate SOAJ</i>	1	QL(0.134 ML daily); AL(At least 18 yrs old)
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	2	QL(0.134 ML daily); AL(At least 18 yrs old)	<i>sumatriptan succinate SOCT</i>	1	QL(0.134 ML daily); AL(At least 18 yrs old)
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (<i>Use sumatriptan succinate</i>)	NF	QL(0.134 ML daily); AL(At least 18 yrs old)	<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1	QL(0.134 ML daily); AL(At least 18 yrs old)
IMITREX TABS (<i>Use sumatriptan succinate</i>)	NF	QL(0.3 EA daily); AL(At least 18 yrs old)	<i>sumatriptan succinate TABS</i>	1	QL(0.3 EA daily); AL(At least 18 yrs old)
MAXALT-MLT TBDP 10 MG (<i>Use rizatriptan benzoate</i>)	NF	QL(0.6 EA daily); AL(At least 6 yrs old)	<i>zolmitriptan SOLN</i>	1	QL(0.2 EA daily); AL(At least 12 yrs old); ST
MAXALT TABS 10 MG (<i>Use rizatriptan benzoate</i>)	NF	QL(0.6 EA daily); AL(At least 6 yrs old)	<i>zolmitriptan TABS</i>	1	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>naratriptan hcl</i>	1	QL(0.3 EA daily); AL(At least 18 yrs old)	<i>zolmitriptan TBDP</i>	1	QL(0.3 EA daily); AL(At least 12 yrs old); ST
RELPAK (<i>Use eletriptan hydrobromide</i>)	NF	QL(0.2 EA daily); AL(At least 18 yrs old); ST	ZOMIG SOLN (<i>Use zolmitriptan</i>)	NF	QL(0.2 EA daily); AL(At least 12 yrs old); ST
<i>rizatriptan benzoate TABS 5 MG</i>	1	QL(0.4 EA daily); AL(At least 6 yrs old)	MINERALS & ELECTROLYTES		
<i>rizatriptan benzoate TABS 10 MG</i>	1	QL(0.6 EA daily); AL(At least 6 yrs old)	Bicarbonates		
<i>rizatriptan benzoate TBDP 10 MG</i>	1	QL(0.6 EA daily); AL(At least 6 yrs old)	<i>sodium acetate SOLN</i>	1	
<i>rizatriptan benzoate TBDP 5 MG</i>	1	QL(0.4 EA daily); AL(At least 6 yrs old)	SODIUM ACETATE SOLN (<i>Use sodium acetate</i>)	1	
			Calcium		
			<i>calcium chloride (dihydrate) SOLN</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CALCIUM CHLORIDE SOLN 10 % (Use calcium chloride (dihydrate))	NF		KLOR-CON 10 TBCR 10 MEQ (Use potassium chloride)	NF	
Electrolyte Mixtures			KLOR-CON TBCR 8 MEQ (Use potassium chloride)	NF	
electrolyte-148	1		K-TAB TBCR 20 MEQ (Use potassium chloride)	NF	
electrolyte-a	1		potassium acetate SOLN 2 MEQ/ML	1	
IONOSOL-MB IN D5W	1		POTASSIUM ACETATE SOLN (Use potassium acetate)	NF	
ISOLYTE-P IN D5W	1		potassium bicarbonate TBEF	1	
ISOLYTE-S	1		potassium chloride microencapsulated crystals er	1	
NORMOSOL-M IN D5W	1		potassium chloride CPCR	1	
NORMOSOL-R PH 7.4	1		potassium chloride PACK PO 20 MEQ	1	PA
PLASMA-LYTE 148	1		potassium chloride SOLN PO 10 %, 10 %	1	
PLASMA-LYTE A (Use electrolyte-a)	1		POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (Use potassium chloride)	1	
potassium chloride in dextrose 20 MEQ/L	1		potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ	1	
POTASSIUM CL IN DEXTROSE 5% 20 MEQ/L (Use potassium chloride in dextrose)	NF		Sodium		
ringer's	1		sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %	1	
Fluoride			MISCELLANEOUS THERAPEUTIC CLASSES		
sodium fluoride CHEW	1	QL(1 EA daily); PV	Chelating Agents		
Magnesium			CUPRIMINE CAPS (Use penicillamine)	NF	PA
magnesium sulfate IJ 50 %	1		DEPEN TITRATABS TABS (Use penicillamine)	NF	QL(8 EA daily)
Phosphate			penicillamine CAPS	1	PA
potassium phosphates 45 MMOLE/15ML	1		penicillamine TABS	1	QL(8 EA daily)
POTASSIUM PHOSPHATES (Use potassium phosphates)	NF		SYPRINE (Use trientine hcl)	NF	QL(8 EA daily); SP; PA
POTASSIUM PHOSPHATES(66 MEQ K) (Use potassium phosphates)	NF				
Potassium					

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>trientine hcl 250 MG</i>	4	QL(8 EA daily); SP; PA	NEORAL CAPS (<i>Use cyclosporine modified (for microemulsion)</i>)	NF	
Immunomodulators			NEORAL SOLN (<i>Use cyclosporine modified (for microemulsion)</i>)	NF	
<i>lenalidomide</i>	4	QL(1 EA daily); SP; PA	PROGRAF CAPS (<i>Use tacrolimus</i>)	NF	
REVLIMID (<i>Use lenalidomide</i>)	NF	QL(1 EA daily); SP; PA	PROGRAF PACK	2	PA
THALOMID 50 MG, 100 MG, 200 MG	4	QL(3 EA daily); SP; PA	PROGRAF SOLN 5 MG/ML (<i>Use tacrolimus</i>)	2	
Immunosuppressive Agents			RAPAMUNE TABS (<i>Use sirolimus</i>)	NF	
ATGAM	4	SP; PA	SANDIMMUNE CAPS (<i>Use cyclosporine</i>)	NF	
AZATHIOPRINE SODIUM	1		SIMULECT	3	
<i>azathioprine TABS</i>	1		<i>sirolimus TABS</i>	1	
CELLCEPT CAPS (<i>Use mycophenolate mofetil</i>)	NF		<i>tacrolimus CAPS</i>	1	
CELLCEPT TABS (<i>Use mycophenolate mofetil</i>)	NF		<i>tacrolimus SOLN 5 MG/ML</i>	1	
<i>cyclosporine modified (for microemulsion) CAPS</i>	1		THYMOGLOBULIN	4	SP; PA
<i>cyclosporine modified (for microemulsion) SOLN</i>	1		ZORTRESS 0.25 MG, 0.5 MG, 0.75 MG (<i>Use everolimus (immunosuppressant)</i>)	NF	QL(20 EA daily); PA
<i>cyclosporine CAPS</i>	1		ZORTRESS 1 MG (<i>Use everolimus (immunosuppressant)</i>)	NF	QL(10 EA daily); PA
<i>cyclosporine SOLN IV 50 MG/ML</i>	1		Irrigation Solutions		
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 EA daily); PA	ARGYLE STERILE WATER (<i>Use water for irrigation, sterile</i>)	NF	
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 EA daily); PA	<i>irrigation solutions, physiological</i>	1	
IMURAN TABS (<i>Use azathioprine</i>)	NF		<i>lactated ringer's (irrigation)</i>	1	
<i>mycophenolate mofetil CAPS</i>	1		<i>ringer's irrigation</i>	1	
<i>mycophenolate mofetil TABS</i>	1		<i>water for irrigation, sterile</i>	1	
<i>mycophenolate sodium</i>	1		Potassium Removing Agents		
MYFORTIC (<i>Use mycophenolate sodium</i>)	NF		LOKELMA	2	QL(1 EA daily); PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>sodium polystyrene sulfonate POWD</i>	1	
<i>sodium polystyrene sulfonate SUSP PR 30 GM/120ML</i>	1	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 2 %</i>	1	QL(4 ML daily)
<i>lidocaine hcl (mouth-throat) 4 %</i>	1	
Anti-infectives - Throat		
<i>clotrimazole</i>	1	
NYSTATIN (<i>Use nystatin (mouth-throat)</i>)	NF	
<i>nystatin (mouth-throat)</i>	1	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1	
DEBACTEROL	2	
PERIDEX (<i>Use chlorhexidine gluconate (mouth-throat)</i>)	NF	
Dental Products		
<i>stannous fluoride CONC</i>	1	PV; RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1	
Throat Products - Misc.		
<i>cevimeline hcl</i>	1	
EVOXAC (<i>Use cevimeline hcl</i>)	NF	
<i>pilocarpine hcl (oral)</i>	1	
SALAGEN (<i>Use pilocarpine hcl (oral)</i>)	NF	
MULTIVITAMINS		
Ped MV w/ Fluoride		

Drug Name	Drug Tier	Requirements/ Limits
<i>pediatric multivitamins w/fl CHEW</i>	1	RX/OTC
Prenatal Vitamins		
CLASSIC PRENATAL TABS	2	QL(1 EA daily)
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	2	QL(1 EA daily)
EQL PRENATAL FORMULA TABS	2	QL(1 EA daily)
FT PRENATAL TABS	2	QL(1 EA daily)
GNP PRENATAL/FOLIC ACID TABS	2	QL(1 EA daily)
GNP PRENATAL TABS	2	QL(1 EA daily)
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)
MASONATAL TABS	2	QL(1 EA daily)
MATRONEX TABS	2	QL(1 EA daily); RX/OTC
M-NATAL PLUS TABS	2	QL(1 EA daily); RX/OTC
MULTI PRENATAL TABS	2	QL(1 EA daily)
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	QL(1 EA daily); RX/OTC
NEONATAL PLUS TABS	2	QL(1 EA daily); RX/OTC
NEONATAL PRENATAL TABS	2	QL(1 EA daily)
NEONATAL VITAMIN TABS	2	QL(1 EA daily)
NIVA-PLUS TABS	2	QL(1 EA daily); RX/OTC
ONE VITE WOMENS PLUS TABS	2	QL(1 EA daily); RX/OTC
ONE VITE WOMENS TABS	2	QL(1 EA daily)

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRENATAL ONE DAILY TABS	2	QL(1 EA daily)	<i>chlorzoxazone TABS 750 MG</i>	1	QL(4 EA daily)
PRENATAL PLUS VITAMIN/MINERAL TABS	2	QL(1 EA daily); RX/OTC	<i>chlorzoxazone TABS 500 MG</i>	1	QL(6 EA daily)
PRENATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1	QL(3 EA daily)
PRENATAL VITAMIN AND MINERAL TABS	2	QL(1 EA daily)	<i>metaxalone 800 MG</i>	1	QL(4 EA daily)
PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 EA daily)	<i>methocarbamol TABS 500 MG, 750 MG</i>	1	
PRENATAL TABS	2	QL(1 EA daily)	<i>orphenadrine citrate TB12</i>	1	QL(2 EA daily)
PRENATRIX TABS	2	QL(1 EA daily); RX/OTC	SOMA TABS (Use <i>carisoprodol</i>)	NF	
PRENATRYL TABS	2	QL(1 EA daily); RX/OTC	<i>tizanidine hcl CAPS</i>	1	
QC PRENATAL TABS	2	QL(1 EA daily)	<i>tizanidine hcl TABS</i>	1	
RELEVIA TABS	2	QL(1 EA daily); RX/OTC	ZANAFLEX TABS 4 MG (Use <i>tizanidine hcl</i>)	NF	
SM PRENATAL VITAMINS TABS	2	QL(1 EA daily)	Direct Muscle Relaxants		
THERANATAL CORE NUTRITION TABS	2	QL(1 EA daily); RX/OTC	DANTRIUM CAPS 25 MG (Use <i>dantrolene sodium</i>)	NF	QL(4 EA daily)
TRICARE TABS	2	QL(1 EA daily); RX/OTC	<i>dantrolene sodium CAPS</i>	1	QL(4 EA daily)
VITATHELY WITH GINGER TABS	2	QL(1 EA daily); RX/OTC	NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
WESTAB PLUS TABS	2	QL(1 EA daily); RX/OTC	Nasal Antiallergy		
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms			<i>azelastine hcl</i>	1	
Central Muscle Relaxants			<i>olopatadine hcl (nasal)</i>	1	
<i>baclofen TABS 10 MG, 20 MG</i>	1		Nasal Anticholinergics		
<i>carisoprodol TABS</i>	1		<i>ipratropium bromide (nasal) 0.06 %</i>	1	
			<i>ipratropium bromide (nasal) 0.03 %</i>	1	QL(1 ML daily)
			Nasal Steroids		
			<i>budesonide (nasal)</i>	1	
			<i>flunisolide (nasal)</i>	1	1 package(s) per fill retail
			<i>fluticasone propionate (nasal) SUSP</i>	1	Limit 2 inhalers per month; QL(32 ML per 30 day(s) retail); RX/OTC

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>mometasone furoate (nasal) SUSP</i>	1	QL(1.14 ML daily); RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	1	
XHANCE EXHU	3	PA
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>riluzole TABS</i>	3	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	1	
<i>brimonidine tartrate-timolol maleate</i>	1	
<i>carteolol hcl (ophth)</i>	1	
COMBIGAN (Use <i>brimonidine tartrate-timolol maleate</i>)	NF	
COSOPT (Use <i>dorzolamide hcl-timolol maleate</i>)	NF	
<i>dorzolamide hcl-timolol maleate</i>	1	
<i>levobunolol hcl 0.5 %</i>	1	
<i>timolol maleate (ophth) SOLG</i>	1	
<i>timolol maleate (ophth) SOLN</i>	1	
Cycloplegic Mydriatics		
MYDRIACYL SOLN (Use <i>tropicamide</i>)	NF	
<i>tropicamide SOLN 0.5 %</i>	1	QL(2.5 ML daily)
<i>tropicamide SOLN 1 %</i>	1	
Miotics		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1	
Ophthalmic Adrenergic Agents		

Drug Name	Drug Tier	Requirements/ Limits
<i>apraclonidine hcl</i>	1	
<i>brimonidine tartrate 0.15 %, 0.2 %</i>	1	
Ophthalmic Anti-infectives		
<i>bacitracin (ophthalmic)</i>	3	
<i>ciprofloxacin hcl (ophth) SOLN</i>	1	
<i>erythromycin (ophth)</i>	1	
<i>gatifloxacin (ophth)</i>	1	
<i>gentamicin sulfate (ophth) SOLN</i>	1	
<i>levofloxacin (ophth) 0.5 %</i>	1	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1	
NATACYN	2	
<i>neomycin-bacitracin zn-polymyxin</i>	1	
OCUFLOX (Use <i>ofloxacin (ophth)</i>)	NF	
<i>ofloxacin (ophth)</i>	1	
<i>polymyxin b-trimethoprim</i>	1	
<i>sulfacetamide sodium (ophth) SOLN</i>	1	
<i>tobramycin (ophth) SOLN</i>	1	
<i>trifluridine</i>	1	
VIGAMOX SOLN OP (Use <i>moxifloxacin hcl (ophth)</i>)	NF	
ZIRGAN GEL	2	
Ophthalmic Immunomodulators		
<i>cyclosporine (ophth) EMUL</i>	3	PA
RESTASIS EMUL (Use <i>cyclosporine (ophth)</i>)	NF	PA
Ophthalmic Local Anesthetics		
ALCAINE (Use <i>proparacaine hcl</i>)	NF	
<i>proparacaine hcl</i>	1	
Ophthalmic Steroids		

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ALREX SUSP (<i>Use loteprednol etabonate</i>)	3	PA	PREDNISOLONE SODIUM PHOSPHATE	3	
dexamethasone sodium phosphate (<i>ophth</i>)	1	QL(0.4 ML daily)	tobramycin-dexamethasone SUSP	1	
difluprednate	1	PA	Ophthalmics - Misc.		
DUREZOL (<i>Use difluprednate</i>)	NF	PA	ACULAR (<i>Use ketorolac tromethamine (ophth)</i>)	NF	
fluorometholone (<i>ophth</i>) SUSP	1		ACULAR LS (<i>Use ketorolac tromethamine (ophth)</i>)	NF	
FML FORTE SUSP	3	PA	ALOCRIAL	3	PA
FML LIQUIFILM SUSP (<i>Use fluorometholone (ophth)</i>)	NF		ALOMIDE	3	PA
LOTEMAX GEL (<i>Use loteprednol etabonate</i>)	NF	PA	azelastine hcl (<i>ophth</i>)	1	
LOTEMAX OINT	3	PA	bepotastine besilate	3	PA
LOTEMAX SUSP (<i>Use loteprednol etabonate</i>)	NF	PA	BEPREVE (<i>Use bepotastine besilate</i>)	NF	PA
loteprednol etabonate GEL	1	PA	bromfenac sodium (<i>ophth</i>)	1	
loteprednol etabonate SUSP	1	PA	BROMSITE (<i>Use bromfenac sodium (ophth)</i>)	NF	
MAXIDEX SUSP OP	3	PA	cromolyn sodium (<i>ophth</i>)	1	
MAXITROL OINT (<i>Use neomycin-polymyx-dexameth</i>)	NF		CYSTARAN	2	QL(2.143 ML daily); SP; PA
MAXITROL SUSP (<i>Use neomycin-polymyx-dexameth</i>)	NF		diclofenac sodium (<i>ophth</i>)	1	
neomycin-polymyx-dexameth OINT	1		dorzolamide hcl	1	
neomycin-polymyx-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %	1		epinastine hcl (<i>ophth</i>)	1	
neomycin-polymyxin-hc (<i>ophth</i>)	1	QL(2.5 ML daily)	flurbiprofen sodium	1	
PRED FORTE (<i>Use prednisolone acetate (ophth)</i>)	NF		ketorolac tromethamine (<i>ophth</i>)	1	
PRED MILD	3	PA	ketotifen fumarate (<i>ophth</i>) 0.035 %	1	
prednisolone acetate (<i>ophth</i>)	1		LASTACRAFT	3	PA
			NEVANAC	3	QL(0.2 ML daily); ST
			olopatadine hcl 0.1 %	1	QL(0.34 ML daily)
			olopatadine hcl 0.2 %	1	RX/OTC
			PROLENSA (<i>Use bromfenac sodium (ophth)</i>)	NF	
			Prostaglandins - Ophthalmic		

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>bimatoprost SOLN</i>	3	
<i>latanoprost SOLN</i>	1	
<i>tafluprost</i>	1	
TRAVATAN Z SOLN (<i>Use travoprost</i>)	NF	
<i>travoprost SOLN</i>	1	
XALATAN SOLN (<i>Use latanoprost</i>)	NF	
ZIOPTAN (<i>Use tafluprost</i>)	NF	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1	QL(0.5 ML daily)
Otic Anti-infectives		
CETRAXAL (<i>Use ciprofloxacin hcl (otic)</i>)	NF	
<i>ciprofloxacin hcl (otic)</i>	1	
<i>ofloxacin (otic)</i>	1	
Otic Combinations		
<i>ciprofloxacin-dexamethasone</i>	1	
<i>ciprofloxacin-fluocinolone acetonide</i>	1	QL(0.5 EA daily); PA
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1	QL(2 ML daily)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1	
OTOVEL (<i>Use ciprofloxacin-fluocinolone acetonide</i>)	NF	
Otic Steroids		
DERMOTIC (<i>Use fluocinolone acetonide (otic)</i>)	NF	
<i>fluocinolone acetonide (otic)</i>	1	
<i>hydrocortisone w/acetic acid</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Monoclonal Antibodies		
BEYFORTUS	5	SP; PV
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	1	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1	
<i>amoxicillin SUSR</i>	1	
<i>amoxicillin TABS</i>	1	
<i>ampicillin sodium IJ 1 GM</i>	1	
<i>ampicillin CAPS 500 MG</i>	1	
Natural Penicillins		
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1	
<i>penicillin g potassium 5000000 UNIT</i>	1	
<i>penicillin g sodium</i>	3	
<i>penicillin v potassium SOLR</i>	1	
<i>penicillin v potassium TABS</i>	1	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	1	
<i>amoxicillin & pot clavulanate SUSR</i>	1	
<i>amoxicillin & pot clavulanate TABS</i>	1	
<i>amoxicillin & pot clavulanate TB12</i>	1	
AUGMENTIN ES-600 SUSR (<i>Use amoxicillin & pot clavulanate</i>)	NF	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AUGMENTIN TABS 125 MG-500 MG (Use amoxicillin & pot clavulanate)	NF		ARICEPT TABS 5 MG, 23 MG (Use donepezil hydrochloride)	NF	QL(1 EA daily)
Penicillinase-Resistant Penicillins			ARICEPT TABS 10 MG (Use donepezil hydrochloride)	NF	QL(2 EA daily)
dicloxacillin sodium	1		donepezil hydrochloride TABS 5 MG, 23 MG	1	QL(1 EA daily)
naftillin sodium IJ 1 GM	1		donepezil hydrochloride TABS 10 MG	1	QL(2 EA daily)
oxacillin sodium IJ 1 GM	1		donepezil hydrochloride TBDP 5 MG	1	QL(1 EA daily)
PROGESTINS - Hormone Replacement/Modifying Drugs			donepezil hydrochloride TBDP 10 MG	1	QL(2 EA daily)
Progestins			galantamine hydrobromide CP24	1	QL(1 EA daily)
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	1		galantamine hydrobromide SOLN	1	QL(6 ML daily)
megestrol acetate (appetite)	1	PA	galantamine hydrobromide TABS	1	QL(2 EA daily)
norethindrone acetate TABS	1	PV	memantine hcl TABS	1	
progesterone CAPS	1		memantine hcl TABS	1	QL(2 EA daily)
PROMETRIUM CAPS (Use progesterone)	NF		NAMENDA TITRATION PAK TABS (Use memantine hcl)	NF	
PROVERA 5 MG, 10 MG (Use medroxyprogesterone acetate)	NF		rivastigmine tartrate CAPS	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions			Combination Psychotherapeutics		
Agents for Chemical Dependency			chlordiazepoxide-amitriptyline	1	
acamprosate calcium	1		perphenazine-amitriptyline	1	QL(4 EA daily)
disulfiram	1		Fibromyalgia Agents		
lofexidine hcl	1	QL(224 EA per 14 day(s) retail); PA	milnacipran hcl MISC	1	1 max fill(s) per 365 day(s) retail; PA
LUCEMYRA (Use lofexidine hcl)	3	QL(224 EA per 14 day(s) retail); PA	milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG	1	QL(2 EA daily); PA
Antidementia Agents			SAVELLA TITRATION PACK MISC (Use milnacipran hcl)	2	1 max fill(s) per 365 day(s) retail; PA

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
SAVELLA TABS 12.5 MG, 25 MG, 50 MG, 100 MG (Use <i>milnacipran hcl</i>)	2	QL(2 EA daily); PA
Movement Disorder Drug Therapy		
AUSTEDO TABS	5	QL(4 EA daily); SP; PA
<i>tetrabenazine</i>	4	QL(3 EA daily); SP; PA
XENAZINE (Use <i>tetrabenazine</i>)	NF	QL(3 EA daily); SP; PA
Multiple Sclerosis Agents		
AMPYRA (Use <i>dalfampridine</i>)	NF	QL(2 EA daily); SP; PA
AUBAGIO (Use <i>teriflunomide</i>)	NF	QL(1 EA daily); SP
AVONEX PEN AJKT	4	QL(0.0714 EA daily); SP; PA
AVONEX PREFILLED PSKT	4	QL(0.0714 EA daily); SP; PA
BETASERON KIT	4	QL(0.0357 EA daily); SP; PA
COPAXONE SOSY 40 MG/ML (Use <i>glatiramer acetate</i>)	NF	QL(0.43 ML daily); SP
COPAXONE SOSY 20 MG/ML (Use <i>glatiramer acetate</i>)	NF	QL(1 ML daily); SP
<i>dalfampridine</i>	4	QL(2 EA daily); SP; PA
<i>dimethyl fumarate CDPK</i>	1	QL(2 EA daily); SP
<i>dimethyl fumarate CPDR</i>	1	QL(2 EA daily); SP
<i> fingolimod hcl</i>	4	QL(1 EA daily); SP
GILENYA (Use <i> fingolimod hcl</i>)	NF	QL(1 EA daily); SP
<i>glatiramer acetate SOSY 20 MG/ML</i>	4	QL(1 ML daily); SP
<i>glatiramer acetate SOSY 40 MG/ML</i>	4	QL(0.43 ML daily); SP
LEMTRADA	4	QL(1.2 ML daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
PLEGRIDY STARTER PACK SOAJ	4	QL(0.036 ML daily); SP; PA
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ML daily); SP; PA
PLEGRIDY SOAJ	4	QL(0.036 ML daily); SP; PA
PLEGRIDY SOSY IM	4	QL(0.036 ML daily); SP; PA
REBIF REBIDOSE TITRATION PACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF REBIDOSE SOAJ	4	QL(0.214 ML daily); SP; PA
REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF SOSY	4	QL(0.214 ML daily); SP; PA
TECFIDERA CDPK (Use <i>dimethyl fumarate</i>)	NF	QL(2 EA daily); SP
TECFIDERA CPDR (Use <i>dimethyl fumarate</i>)	NF	QL(2 EA daily); SP
<i>teriflunomide</i>	4	QL(1 EA daily); SP
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
LYRICA CR 330 MG (Use <i>pregabalin (once-daily)</i>)	NF	QL(2 EA daily); PA
LYRICA CR 82.5 MG, 165 MG (Use <i>pregabalin (once-daily)</i>)	NF	QL(1 EA daily); PA
<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 EA daily); PA
<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 EA daily); PA
Pseudobulbar Affect (PBA) Agents		
NUDEXTA	3	QL(2 EA daily); PA
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS</i>	1	
<i>pimozide</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent)</i>	1	QL(2 EA daily); PV
CHANTIX CONTINUING MONTH PAK TABS (<i>Use varenicline tartrate</i>)	NF	QL(2 EA daily); PV
CHANTIX STARTING MONTH PAK TBPk (<i>Use varenicline tartrate</i>)	NF	PV
CHANTIX TABS (<i>Use varenicline tartrate</i>)	NF	QL(2 EA daily); PV
NICORETTE MINI LOZG 4 MG (<i>Use nicotine polacrilex</i>)	NF	PV
NICORETTE STARTER KIT GUM 2 MG (<i>Use nicotine polacrilex</i>)	NF	PV
NICORETTE GUM 4 MG (<i>Use nicotine polacrilex</i>)	NF	PV
<i>nicotine polacrilex GUM</i>	1	PV
<i>nicotine polacrilex LOZG</i>	1	PV
NICOTINE KIT	2	PV
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	1	QL(1 EA daily); PV
NICOTROL NS SOLN	2	PV
NICOTROL INHA	2	PV
<i>varenicline tartrate TABS</i>	1	QL(2 EA daily); PV
<i>varenicline tartrate TBPk</i>	1	PV
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
PROLASTIN-C SOLN	4	SP; PA
Cystic Fibrosis Agents		
KALYDECO TABS	4	QL(2 EA daily); SP; PA
ORKAMBI PACK	5	QL(2 EA daily); SP; PA
ORKAMBI TABS	5	QL(4 EA daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
PULMOZYME	4	QL(2.5 ML daily); SP; PA
TRIKAFTA TBPk	4	QL(3 EA daily); SP; PA
Pulmonary Fibrosis Agents		
ESBRIET CAPS (<i>Use pirfenidone</i>)	NF	SP
ESBRIET TABS (<i>Use pirfenidone</i>)	NF	SP
<i>nintedanib esylate 100 MG, 150 MG</i>	5	QL(2 EA daily); SP; PA
OFEV 100 MG, 150 MG (<i>Use nintedanib esylate</i>)	5	QL(2 EA daily); SP; PA
<i>pirfenidone CAPS</i>	4	SP
<i>pirfenidone TABS 267 MG, 801 MG</i>	4	SP
<i>pirfenidone TABS 534 MG</i>	4	QL(3 EA daily); SP; PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine TABS</i>	1	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Glycylcyclines		
<i>tigecycline</i>	1	
TYGACIL (<i>Use tigecycline</i>)	NF	
Tetracyclines		
<i>demeclocycline hcl TABS</i>	1	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1	QL(2 EA daily)
<i>doxycycline (monohydrate) CAPS 75 MG</i>	1	
<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>doxycycline (monohydrate) TABS 100 MG</i>	1	QL(2 EA daily)
<i>doxycycline hyclate CAPS</i>	1	QL(2 EA daily)
<i>doxycycline hyclate SOLR</i>	1	
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1	QL(2 EA daily)
<i>minocycline hcl CAPS</i>	1	QL(3 EA daily)
<i>minocycline hcl TABS</i>	1	QL(3 EA daily)
<i>tetracycline hcl CAPS</i>	1	QL(8 EA daily)
<i>VIBRAMYCIN CAPS (Use doxycycline hyclate)</i>	NF	QL(2 EA daily)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	1	
<i>propylthiouracil</i>	1	
Thyroid Hormones		
<i>ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG</i>	2	
<i>AMERITHROID TABS 180 MG, 240 MG, 300 MG</i>	2	QL(1 EA daily)
<i>ARMOUR THYROID TABS</i>	2	QL(1 EA daily)
<i>CYTOMEL TABS (Use liothyronine sodium)</i>	NF	
<i>EVEXITHROID TABS 180 MG</i>	2	QL(1 EA daily)
<i>levothyroxine sodium TABS</i>	1	
<i>liothyronine sodium SOLN</i>	1	
<i>liothyronine sodium TABS</i>	1	
<i>NP THYROID TABS</i>	1	QL(1 EA daily)
<i>SYNTHROID TABS (Use levothyroxine sodium)</i>	2	
TOXOIDS		
Toxoid Combinations		

Drug Name	Drug Tier	Requirements/ Limits
ADACEL SUSP	2	PV
ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	2	PV
BOOSTRIX SUSP	2	PV
BOOSTRIX SUSY	2	PV
DAPTACEL	2	PV
INFANRIX	2	PV
KINRIX SUSY	2	PV
PEDIARIX SUSY	2	PV
PENTACEL	2	PV
QUADRACEL SUSP	2	PV
QUADRACEL SUSY	2	PV
TDVAX SUSP	2	PV
TENIVAC SUSP 2 LFU-5 LFU	2	PV
TETANUS-DIPHTHERIA TOXOIDS TD SUSP	2	PV
VAXELIS SUSP	2	PV
VAXELIS SUSY	2	PV
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
<i>BENTYL SOLN IM (Use dicyclomine hcl)</i>	NF	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1	
<i>dicyclomine hcl CAPS</i>	1	
<i>dicyclomine hcl SOLN PO</i>	1	
<i>dicyclomine hcl TABS</i>	1	
<i>glycopyrrolate SOLN IJ 4 MG/20ML</i>	1	
<i>glycopyrrolate TABS 2 MG</i>	1	QL(6 EA daily)
<i>glycopyrrolate TABS 1 MG</i>	1	
<i>LIBRAX (Use chlordiazepoxide hcl-clidinium bromide)</i>	NF	

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>methscopolamine bromide</i>	1		NEXIUM 24HR TBEC 20 MG	1	QL(2 EA daily)
ROBINUL-FORTE TABS (Use <i>glycopyrrolate</i>)	NF	QL(6 EA daily)	NEXIUM CPDR 40 MG (Use <i>esomeprazole magnesium</i>)	NF	QL(1 EA daily)
ROBINUL TABS (Use <i>glycopyrrolate</i>)	NF		NEXIUM CPDR 20 MG (Use <i>esomeprazole magnesium</i>)	NF	QL(2 EA daily); RX/OTC
H-2 Antagonists			<i>omeprazole magnesium CPDR</i>	1	QL(4 EA daily)
<i>cimetidine TABS</i>	1	RX/OTC	<i>omeprazole CPDR</i>	1	QL(2 EA daily)
<i>famotidine SUSR</i>	1	QL(10 ML daily)	<i>omeprazole TBEC</i>	1	QL(2 EA daily)
<i>famotidine TABS 20 MG, 40 MG</i>	1	RX/OTC	<i>pantoprazole sodium TBEC 40 MG</i>	1	
<i>nizatidine CAPS</i>	1		<i>pantoprazole sodium TBEC 20 MG</i>	1	QL(1 EA daily)
PEPCID TABS (Use <i>famotidine</i>)	NF	RX/OTC	PREVACID 24HR CPDR (Use <i>lansoprazole</i>)	NF	QL(2 EA daily); RX/OTC
<i>ranitidine hcl TABS 150 MG</i>	1		PREVACID CPDR 30 MG (Use <i>lansoprazole</i>)	NF	
Misc. Anti-Ulcer			PROTONIX TBEC 20 MG (Use <i>pantoprazole sodium</i>)	NF	QL(1 EA daily)
CARAFATE SUSP (Use <i>sucralfate</i>)	NF	QL(40 ML daily)	PROTONIX TBEC 40 MG (Use <i>pantoprazole sodium</i>)	NF	
CARAFATE TABS (Use <i>sucralfate</i>)	NF	QL(4 EA daily)	<i>rabeprazole sodium TBEC</i>	3	QL(1 EA daily)
<i>sucralfate SUSP</i>	1	QL(40 ML daily)	Ulcer Drugs - Prostaglandins		
<i>sucralfate TABS</i>	1	QL(4 EA daily)	CYTOTEC (Use <i>misoprostol</i>)	NF	QL(4 EA daily)
Proton Pump Inhibitors			<i>misoprostol</i>	1	QL(4 EA daily)
ACIPHEX TBEC (Use <i>rabeprazole sodium</i>)	NF	QL(1 EA daily)	Ulcer Therapy Combinations		
DEXILANT (Use <i>dexlansoprazole</i>)	NF	QL(1 EA daily)	<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail
<i>dexlansoprazole</i>	3	QL(1 EA daily)	<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1	QL(1 EA daily); RX/OTC
<i>esomeprazole magnesium CPDR 20 MG</i>	1	QL(2 EA daily); RX/OTC			
<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 EA daily)			
<i>esomeprazole magnesium TBEC</i>	1	QL(2 EA daily)			
<i>lansoprazole CPDR 30 MG</i>	1				
<i>lansoprazole CPDR 15 MG</i>	1	QL(2 EA daily); RX/OTC			

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
ZEGERID CAPS 1100 MG-20 MG (<i>Use omeprazole-sodium bicarbonate</i>)	NF	QL(1 EA daily); RX/OTC
ZEGERID CAPS 1100 MG-40 MG (<i>Use omeprazole-sodium bicarbonate</i>)	NF	
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>darifenacin hydrobromide</i>	1	QL(1 EA daily)
DETROL LA CP24 (<i>Use tolterodine tartrate</i>)	NF	QL(1 EA daily)
DETROL TABS (<i>Use tolterodine tartrate</i>)	NF	
<i>fesoterodine fumarate</i>	1	QL(1 EA daily)
<i>oxybutynin chloride SOLN</i>	1	
<i>oxybutynin chloride TABS 5 MG</i>	1	
<i>oxybutynin chloride TB24</i>	1	
<i>solifenacin succinate TABS</i>	1	QL(1 EA daily)
<i>tolterodine tartrate CP24</i>	1	QL(1 EA daily)
<i>tolterodine tartrate TABS</i>	1	
TOVIAZ (<i>Use fesoterodine fumarate</i>)	NF	QL(1 EA daily)
<i>trospium chloride CP24</i>	1	QL(1 EA daily)
<i>trospium chloride TABS</i>	1	QL(3 EA daily)
VESICARE TABS (<i>Use solifenacin succinate</i>)	NF	QL(1 EA daily)
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1	QL(4 EA daily)
<i>bethanechol chloride 25 MG</i>	1	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	2	PV
BEXSERO 0.5 ML	2	PV
CAPVAXIVE	5	PV
HIBERIX SOLR IJ	2	PV
MENQUADFI 0.5 ML	2	PV
MENVEO SOLR	2	PV
PEDVAXHIB SUSP 7.5 MCG/0.5ML	2	PV
PENBRAYA	2	PV
PENMENVY SUSR IM	2	AL(At least 10 yrs old - Up to 25 yrs old); PV
PNEUMOVAX 23 SOLN	2	PV
PNEUMOVAX 23 SOSY	2	PV
PREVNAR 20	2	1 max fill(s) per 999 day(s) retail; PV
TRUMENBA 0.5 ML	2	PV
VAXNEUVANCE	2	4 max fill(s) per 999 day(s) retail; PV
Viral Vaccines		
ABRYSVO	2	PV
AFLURIA PRESERVATIVE FREE SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
AFLURIA QUADRIVALENT SUSP	2	Limit 1 dose per season; QL(0.5 ML per fill retail); 1 max fill(s) per 180 day(s) retail; PV
AFLURIA QUADRIVALENT SUSY 0.5 ML	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
AFLURIA SUSP	2	1 max fill(s) per 180 day(s) retail; PV
AREXVY	2	PV
AUDENZ EMUL	2	PV
AUDENZ PRSY	2	PV
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	2	PV
COMIRNATY SUSP	2	PV
COMIRNATY SUSY	2	PV
ENGERIX-B SUSP 20 MCG/ML	2	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PV
ENGERIX-B SUSY	2	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PV
FLUAD	2	1 max fill(s) per 180 day(s) retail; PV
FLUAD QUADRIVALENT	2	1 max fill(s) per 180 day(s) retail; PV
FLUARIX QUADRIVALENT SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
FLUARIX SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
FLUBLOK SOSY	2	1 max fill(s) per 180 day(s) retail; PV
FLUCELVAX QUADRIVALENT SUSP	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV

Drug Name	Drug Tier	Requirements/ Limits
FLUCELVAX QUADRIVALENT SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
FLUCELVAX SUSP	2	1 max fill(s) per 180 day(s) retail; PV
FLUCELVAX SUSY	2	1 max fill(s) per 180 day(s) retail; PV
FLULAVAL SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
FLUMIST	2	1 max fill(s) per 180 day(s) retail; PV
FLUMIST QUADRIVALENT	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
FLUZONE HIGH-DOSE QUADRIVALENT	2	1 max fill(s) per 180 day(s) retail; PV
FLUZONE HIGH-DOSE SUSY	2	1 max fill(s) per 180 day(s) retail; PV
FLUZONE QUADRIVALENT SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
FLUZONE SUSP	2	1 max fill(s) per 180 day(s) retail; PV
FLUZONE SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
GARDASIL 9 SUSP 0.5 ML	2	3 max fill(s) per 365 day(s) retail; PV
GARDASIL 9 SUSY 0.5 ML	2	3 max fill(s) per 365 day(s) retail; PV

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	2	PV
HEPLISAV-B SOSY	2	2 max fill(s) per 292 day(s) retail; 2 max fill(s) per 292 day(s) mail; PV
IPOL IJ	2	PV
JYNNEOS	2	PV
M-M-R II SOLR	2	2 max fill(s) per 365 day(s) retail; PV
MNEXSPIKE SUSY 10 MCG/0.2ML	2	PV
MODERNA COVID-19 VAC 6M-11Y SUSP	2	PV
MODERNA COVID-19 VAC 6M-11Y SUSY	2	PV
MRESVIA	2	PV
NOVAVAX COVID-19 VACCINE SUSP	2	PV
NOVAVAX COVID-19 VACCINE SUSY	2	PV
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	2	PV
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	2	PV
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	2	PV
PREHEVBRIO	2	3 max fill(s) per 365 day(s) retail; PV
PRIORIX SUSR	2	3 max fill(s) per 365 day(s) retail; PV
PROQUAD SUSR	2	3 max fill(s) per 365 day(s) retail; PV
RECOMBIVAX HB SUSP	2	PV
RECOMBIVAX HB SUSY	2	PV
ROTARIX SUSP	2	PV
ROTATEQ SOLN	2	PV

Drug Name	Drug Tier	Requirements/ Limits
SHINGRIX	2	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old); PV
SHINGRIX IM 50 MCG/0.5ML	2	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old); PV
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	2	PV
SPIKEVAX SUSP	2	PV
SPIKEVAX SUSY	2	PV
TWINRIX SUSY	2	PV
VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	2	PV
VAQTA	2	PV
VARIVAX SUSR	2	2 max fill(s) per 365 day(s) retail; PV
VAGINAL AND RELATED PRODUCTS		
Spermicides		
TODAY SPONGE MISC	2	PV
Vaginal Anti-infectives		
CLEOCIN CREA (<i>Use clindamycin phosphate vaginal</i>)	NF	
<i>clindamycin phosphate vaginal CREA</i>	1	
<i>clotrimazole vaginal CREA 1 %</i>	1	
GYNAZOLE-1	3	QL(5 GM per 30 day(s) retail; 5 GM per 30 days mail)
<i>metronidazole vaginal</i>	1	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1	
<i>terconazole vaginal CREA</i>	1	
<i>terconazole vaginal SUPP</i>	1	
Vaginal Anti-inflammatory Agents		

Updated August 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocortisone vaginal</i>	1	QL(15.15 GM daily)
Vaginal Contraceptive - pH Modulators		
PHEXX	2	PV
PHEXXI	2	PV
Vaginal Estrogens		
ESTRACE CREA (Use estradiol vaginal)	NF	QL(2 GM daily)
estradiol vaginal CREA	1	QL(2 GM daily)
estradiol vaginal TABS	1	
FEMRING	3	PA
PREMARIN	2	QL(1.5 GM daily)
VAGIFEM TABS (Use estradiol vaginal)	NF	
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
<i>epinephrine (anaphylaxis) SOAJ</i>	1	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis))	NF	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
EPIPEN JR 2-PAK SOAJ (Use epinephrine (anaphylaxis))	NF	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
Vasopressors		
<i>midodrine hcl</i>	1	
VITAMINS		

Drug Name	Drug Tier	Requirements/ Limits
Oil Soluble Vitamins		
<i>cholecalciferol CAPS</i>	1	
<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	1	PV
DRISDOL CAPS (Use ergocalciferol)	NF	PV
<i>ergocalciferol CAPS</i>	1	PV
<i>ergocalciferol SOLN PO 200 MCG/ML</i>	1	
VITAMIN D2 TABS 400 UNIT	2	AL(At least 65 yrs old); PV
Water Soluble Vitamins		
<i>ascorbic acid SOLN IJ</i>	3	QL(0.4 ML daily)
NIACIN ER TBCR	1	
<i>niacinamide TABS</i>	1	
<i>niacin CPCR 250 MG</i>	1	
<i>niacin TABS</i>	1	
<i>niacin TBCR</i>	1	

Updated August 2026

INDEX

abacavir sulfate SOLN	40	acetazolamide CP12	58	acyclovir CAPS	42
abacavir sulfate TABS	40	acetazolamide sodium	58	acyclovir SUSP	42
abacavir sulfate-lamivudine	40	acetazolamide TABS 125 MG	58	acyclovir TABS PO	42
ABILIFY TABS (Use aripiprazole) .	40	acetazolamide TABS 250 MG	58	acyclovir topical CREA	54
abiraterone acetate 250 MG	34	acetic acid (otic)	78	acyclovir topical OINT	54
abiraterone acetate 500 MG	34	acetic acid 0.25 %	63	ADACEL SUSP	82
ABRAXANE (Use paclitaxel protein-bound particles)	37	acetylcysteine SOLN	49	ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	82
ABRYSVO	84	ACIPHEX TBEC (Use rabeprazole sodium)	83	ADALIMUMAB-AATY (1 PEN) AJKT .	3
ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (Use isotretinoin)	49	acitretin 10 MG, 17.5 MG	53	ADALIMUMAB-AATY (2 PEN) AJKT .	3
acamprosate calcium	79	acitretin 25 MG	53	ADALIMUMAB-AATY (2 SYRINGE) PSKT	3
acarbose	20	ACTEMRA ACTPEN SOAJ	5	ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	3
ACCOLATE (Use zafirlukast)	12	ACTEMRA SOLN 200 MG/10ML, 400 MG/20ML	5	ADALIMUMAB-ADAZ SOAJ	4
ACCU-CHEK GUIDE TEST STRP	57	ACTEMRA SOLN 80 MG/4ML	5	ADALIMUMAB-ADAZ SOSY	4
ACCUPRIL 20 MG, 40 MG (Use quinapril hcl)	27	ACTEMRA SOSY	5	ADALIMUMAB-ADBM (2 PEN) AJKT	4
ACCUPRIL 5 MG, 10 MG (Use quinapril hcl)	27	ACTHAR GEL	59	ADALIMUMAB-ADBM (2 SYRINGE) PSKT	4
ACCURETIC 12.5 MG-10 MG (Use quinapril-hydrochlorothiazide)	28	ACTHIB SOLR IM	84	ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	4
ACCURETIC 12.5 MG-20 MG (Use quinapril-hydrochlorothiazide)	28	ACTIMMUNE 100 MCG/0.5ML	37	ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	4
acebutolol hcl CAPS	43	ACTIQ LPOP 400 MCG (Use fentanyl citrate)	6	adapalene CREA	49
acetaminophen w/ codeine SOLN ..	8	ACTONEL TABS 150 MG (Use risedronate sodium)	59	adapalene GEL	49
acetaminophen w/ codeine TABS 15 MG-300 MG	8	ACTONEL TABS 35 MG (Use risedronate sodium)	59	adapalene-benzoyl peroxide GEL 2.5 %-0.1 %	49
acetaminophen w/ codeine TABS 30 MG-300 MG	8	ACTOPLUS MET TABS 850 MG-15 MG (Use pioglitazone hcl-metformin hcl)	20	ADCIRCA TABS (Use tadalafil (pulmonary hypertension))	45
acetaminophen w/ codeine TABS 60 MG-300 MG	8	ACTOS (Use pioglitazone hcl)	23	ADDERALL TABS 30 MG (Use amphetamine-dextroamphetamine) .	1
acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG	8	ACULAR (Use ketorolac tromethamine (ophth))	77		
		ACULAR LS (Use ketorolac tromethamine (ophth))	77		

ADDERALL TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG (Use amphetamine-dextroamphetamine) .1	AIRDUO RESPICLICK 232/14 AEPB (Use fluticasone-salmeterol)13	ALOCRIIL77
ADDERALL XR CP24 15 MG (Use amphetamine-dextroamphetamine) .1	AIRDUO RESPICLICK 55/14 AEPB (Use fluticasone-salmeterol)13	alogliptin benzoate21
ADDERALL XR CP24 20 MG, 25 MG, 30 MG (Use amphetamine-dextroamphetamine)1	AKYNZEO24	alogliptin-metformin hcl20
ADDERALL XR CP24 5 MG, 10 MG (Use amphetamine-dextroamphetamine)1	albendazole10	alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG20
adefovir dipivoxil42	albuterol sulfate AERS13	alogliptin-pioglitazone 30 MG-12.5 MG20
ADEMPAS46	albuterol sulfate NEBU13	ALOMIDE77
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG82	albuterol sulfate SYRP13	alosetron hcl62
ADVAIR DISKUS AEPB (Use fluticasone-salmeterol)12	albuterol sulfate TABS13	alprazolam TABS11
ADVAIR HFA AERO (Use fluticasone-salmeterol)12	ALCAINE (Use proparacaine hcl) .76	alprazolam TB2411
ADVOCATE INSULIN PEN NEEDLE69	alclometasone dipropionate CREA 54	alprazolam TBDP11
AFINITOR TABS (Use everolimus) 35	alclometasone dipropionate OINT .54	ALREX SUSP (Use loteprednol etabonate)77
AFLURIA PRESERVATIVE FREE SUSY84	ALDACTONE TABS (Use spironolactone)58	ALTACE CAPS 1.25 MG, 5 MG, 10 MG (Use ramipril)27
AFLURIA QUADRIVALENT SUSP 84	ALDURAZYME59	ALVESCO12
AFLURIA QUADRIVALENT SUSY 0.5 ML84	ALECENSA35	alvimopan62
AFLURIA SUSP85	alendronate sodium TABS 35 MG, 70 MG59	amantadine hcl CAPS38
AGRYLIN 0.5 MG (Use anagrelide hcl)64	alendronate sodium TABS 5 MG, 10 MG59	amantadine hcl SOLN38
AIMOVIG70	alfuzosin hcl63	amantadine hcl TABS38
AIMSCO LUBRICATED MISC67	ALIMTA SOLR 100 MG (Use pemetrexed disodium)33	AMBIEN CR TBCR (Use zolpidem tartrate)65
AIRDUO RESPICLICK 113/14 AEPB (Use fluticasone-salmeterol)13	ALIMTA SOLR 500 MG (Use pemetrexed disodium)33	AMBIEN TABS (Use zolpidem tartrate)65
	ALINIA SUSR30	ambrisentan45
	ALINIA TABS (Use nitazoxanide) .30	amcinonide CREA54
	aliskiren fumarate29	amcinonide OINT54
	allopurinol 100 MG, 300 MG63	AMERITHROID TABS 180 MG, 240 MG, 300 MG82
	almotriptan malate 12.5 MG70	amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML3
	almotriptan malate 6.25 MG70	amiloride & hydrochlorothiazide ..58

amiloride hcl TABS58	amphetamine-dextroamphetamine CP24 20 MG, 25 MG, 30 MG 1	APIDRA SOLOSTAR SOPN22
aminocaproic acid TABS65	amphetamine-dextroamphetamine CP24 5 MG, 10 MG 1	apomorphine hydrochloride SOCT 38
amiodarone hcl SOLN 150 MG/3ML . 11	amphetamine-dextroamphetamine TABS 30 MG 1	apraclonidine hcl 76
amiodarone hcl TABS11	amphetamine-dextroamphetamine TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG 1	aprepitant CAPS 40 MG, 125 MG .24
AMITIZA (Use lubiprostone) 61	amphotericin b IV 24	aprepitant CAPS 80 MG24
amitriptyline hcl TABS 20	ampicillin CAPS 500 MG78	aprepitant CPPK PO24
amlodipine besylate TABS44	ampicillin sodium IJ 1 GM78	APRISO CP24 (Use mesalamine) .62
amlodipine besylate-atorvastatin calcium 45	AMPYRA (Use dalfampridine) 80	APTENSIO XR CP24 (Use methlyphenidate hcl)2
amlodipine besylate-benazepril hcl 28	ANAFRANIL (Use clomipramine hcl) 20	APTIOM 200 MG, 400 MG, 600 MG, 800 MG (Use eslicarbazepine acetate)16
amlodipine besylate-olmesartan medoxomil28	anagrelide hcl 64	APTIVUS CAPS 40
amlodipine besylate-valsartan 28	ANAPROX DS TABS (Use naproxen sodium)5	AQINJECT PEN NEEDLE 69
amlodipine-valsartan- hydrochlorothiazide28	anastrozole34	ARAVA (Use leflunomide)6
amoxapine20	ANCOBON (Use flucytosine) 24	ARCALYST4
amoxicillin & pot clavulanate CHEW . 78	ANDRODERM PT24 2 MG/24HR, 4 MG/24HR9	AREXVY85
amoxicillin & pot clavulanate SUSR 78	ANNOVERA48	arformoterol tartrate 13
amoxicillin & pot clavulanate TABS 78	ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (Use umeclidinium- vilanterol)13	ARGYLE STERILE SALINE 0.9 % (Use sodium chloride (gu irrigant)) 63
amoxicillin & pot clavulanate TB12 78	ANUCORT-HC 25 MG (Use hydrocortisone acetate (rectal))9	ARGYLE STERILE WATER (Use water for irrigation, sterile) 73
amoxicillin CAPS78	ANUSOL-HC 25 MG (Use hydrocortisone acetate (rectal))10	ARICEPT TABS 10 MG (Use donepezil hydrochloride)79
amoxicillin CHEW 125 MG, 250 MG . 78	ANUSOL-HC EX (Use hydrocortisone (rectal)) 10	ARICEPT TABS 5 MG, 23 MG (Use donepezil hydrochloride)79
amoxicillin SUSR78	ANZEMET TABS 50 MG23	ARIKAYCE3
amoxicillin TABS78	APIDRA SOLN22	ARIMIDEX (Use anastrozole)34
amoxicillin-clarithromycin w/ lansoprazole THPK 83		aripiprazole SOLN PO 40
amphetamine-dextroamphetamine CP24 15 MG1		aripiprazole TABS 40
		ARIXTRA 10 MG/0.8ML (Use fondaparinux sodium)14
		ARIXTRA 2.5 MG/0.5ML (Use

fondaparinux sodium)14	300 MG40	hydrochlorothiazide)28
ARIXTRA 5 MG/0.4ML (Use fondaparinux sodium)14	atazanavir sulfate CAPS 200 MG .40	avanafil45
ARIXTRA 7.5 MG/0.6ML (Use fondaparinux sodium)14	ATELVIA TBEC (Use risedronate sodium)59	AVAPRO 150 MG, 300 MG (Use irbesartan)27
armodafinil2	atenolol & chlorthalidone28	AVAR CLEANSER LIQD 10 %-5 % (Use sulfacetamide sodium w/ sulfur) 49
ARMOUR THYROID TABS82	atenolol TABS43	AVAR-E EMOLLIENT CREA 10 %-5 % (Use sulfacetamide sodium w/ sulfur)49
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (Use fluticasone furoate (inhalation))12	ATGAM73	AVAR-E LS CREA (Use sulfacetamide sodium w/ sulfur) ...49
AROMASIN (Use exemestane) ...34	ATIVAN TABS 0.5 MG, 2 MG (Use lorazepam)11	AVERI TABS PO47
ARRANON (Use nelarabine)33	ATIVAN TABS 1 MG (Use lorazepam)11	AVODART (Use dutasteride)63
arsenic trioxide 10 MG/10ML37	atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG1	AVONEX PEN AJKT80
ARTHROTEC TBEC (Use diclofenac w/ misoprostol)5	atomoxetine hcl 60 MG, 80 MG, 100 MG1	AVONEX PREFILLED PSKT80
ARZERRA34	atorvastatin calcium TABS26	azacitidine SUSR33
ascorbic acid SOLN IJ87	atovaquone30	AZACTAM 1 GM (Use aztreonam) 31
asenapine maleate 2.5 MG39	atovaquone-proguanil hcl31	AZATHIOPRINE SODIUM73
asenapine maleate 5 MG, 10 MG .39	ATROVENT HFA 17 MCG/ACT (Use ipratropium bromide hfa)11	azathioprine TABS73
aspirin CHEW6	AUBAGIO (Use teriflunomide)80	azelaic acid GEL57
aspirin TABS 325 MG6	AUDENZ EMUL85	azelastine hcl (ophth)77
aspirin TBEC 325 MG6	AUDENZ PRSY85	azelastine hcl75
aspirin TBEC 81 MG6	AUGMENTIN ES-600 SUSR (Use amoxicillin & pot clavulanate)78	AZILECT (Use rasagiline mesylate) . 38
aspirin-dipyridamole64	AUGMENTIN TABS 125 MG-500 MG (Use amoxicillin & pot clavulanate) 79	azilsartan medoxomil 40 MG, 80 MG 27
ASSURE ID DUO PRO PEN NEEDLES69	AUM INSULIN SAFETY PEN NEEDLE69	azithromycin PACK66
ASSURE ID PRO PEN NEEDLES 69	AUM PEN NEEDLE69	azithromycin SUSR66
ATACAND (Use candesartan cilexetil)27	AURANOFIN 3 MG4	azithromycin TABS 250 MG66
ATACAND HCT (Use candesartan cilexetil-hydrochlorothiazide)28	AUSTEDO TABS80	azithromycin TABS 500 MG66
atazanavir sulfate CAPS 150 MG,	AVALIDE (Use irbesartan-	azithromycin TABS 600 MG66
		AZOR (Use amlodipine besylate-

olmesartan medoxomil)28	BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide) ...28	betamethasone dipropionate augmented OINT54
aztreonam 1 GM31	BENTYL SOLN IM (Use dicyclomine hcl)82	betamethasone valerate CREA ...54
AZULFIDINE EN-TABS TBEC (Use sulfasalazine)62	BENZAMYCIN GEL (Use benzoyl peroxide-erythromycin)49	betamethasone valerate FOAM ...54
AZULFIDINE TABS (Use sulfasalazine)62	BENZEPRO CREAMY WASH LIQD .49	betamethasone valerate LOTN54
bacitracin (ophthalmic)76	BENZEPRO FOAM 5.3 %49	betamethasone valerate OINT54
baclofen TABS 10 MG, 20 MG75	benzonatate 100 MG49	BETAPACE AF (Use sotalol hcl (afib/af))43
BACTRIM DS TABS (Use sulfamethoxazole-trimethoprim) ...30	benzonatate 150 MG49	BETAPACE TABS 80 MG, 120 MG, 160 MG (Use sotalol hcl)43
BACTRIM TABS (Use sulfamethoxazole-trimethoprim) ...30	benzonatate 200 MG49	BETASERON KIT80
BALCOLTRA (Use levonorgestrel-ethinyl estradiol-iron)47	benzoyl peroxide FOAM 5.3 %, 9.8 %49	betaxolol hcl (ophth) SOLN76
balsalazide disodium CAPS62	benzoyl peroxide GEL 10 %50	betaxolol hcl43
BANZEL SUSP (Use rufinamide) ..16	benzoyl peroxide GEL 5 %50	bethanechol chloride 25 MG84
BANZEL TABS 200 MG (Use rufinamide)16	benzoyl peroxide LIQD 4 %, 10 % .50	bethanechol chloride 5 MG, 10 MG, 50 MG84
BANZEL TABS 400 MG (Use rufinamide)16	benzoyl peroxide-erythromycin GEL .49	bexarotene (topical)52
BARACLUDE TABS (Use entecavir) .42	benztropine mesylate TABS37	bexarotene37
BAXDELA SOLR61	bepotastine besilate77	BEXSERO 0.5 ML84
BAXDELA TABS61	BEPREVE (Use bepotastine besilate)77	BEYAZ (Use drospirenone-ethinyl estradiol-levomefolate calcium) ...47
BD PEN NEEDLE NANO 2ND GEN .69	betaine59	BEYFORTUS78
BELSOMRA65	betamethasone dipropionate (topical) CREA54	bicalutamide34
benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG ...28	betamethasone dipropionate (topical) LOTN54	BIDIL (Use isosorbide dinitrate-hydralazine hcl)45
benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG ..28	betamethasone dipropionate (topical) OINT54	BIJUVA60
benazepril hcl27	betamethasone dipropionate augmented CREA54	BIKTARVY40
BENICAR (Use olmesartan medoxomil)27	betamethasone dipropionate augmented LOTN54	BILTRICIDE (Use praziquantel) ...10
		bimatoprost SOLN78
		bisacodyl SUPP66
		bisacodyl TBEC66
		bisoprolol & hydrochlorothiazide ..28

bisoprolol fumarate	43	bumetanide TABS	58	codeine 30 MG-40 MG-50 MG-300 MG	8
bleomycin sulfate 15 UNIT	35	BUMEX TABS 0.5 MG (Use bumetanide)	58	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	8
BOOSTRIX SUSP	82	BUPHENYL POWD (Use sodium phenylbutyrate)	59	butalbital-aspirin-caffeine CAPS	6
BOOSTRIX SUSY	82	BUPHENYL TABS (Use sodium phenylbutyrate)	59	butalbital-aspirin-caffeine w/cod	8
bortezomib SOLR IJ	36	buprenorphine hcl SOLN	9	butenafine hcl	51
bosentan TABS	45	buprenorphine hcl SUBL	9	butorphanol tartrate IJ 1 MG/ML, 2 MG/ML	9
bosentan TBSO 32 MG	45	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG	9	butorphanol tartrate NA 10 MG/ML	9
BREO ELLIPTA (Use fluticasone furoate-vilanterol)	13	buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG	9	BUTRANS PTWK (Use buprenorphine)	9
BREO ELLIPTA	13	buprenorphine hcl-naloxone hcl dihydrate SUBL	9	BYSTOLIC 2.5 MG, 5 MG, 10 MG (Use nebivolol hcl)	43
BREZTRI AEROSPHERE	13	buprenorphine PTWK	9	BYSTOLIC 20 MG (Use nebivolol hcl)	43
BRILINTA 60 MG, 90 MG (Use ticagrelor)	64	bupropion hcl (smoking deterrent)	81	CABENUVA	40
brimonidine tartrate (topical)	57	bupropion hcl TABS	19	cabergoline	60
brimonidine tartrate 0.15 %, 0.2 %	76	bupropion hcl TB12	19	CABOMETYX TABS	36
brimonidine tartrate-timolol maleate	76	bupropion hcl TB24 150 MG, 300 MG	19	CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (Use amlodipine besylate-atorvastatin calcium)	45
bromfenac sodium (ophth)	77	buspirone hcl	10	CAFERGOT TABS (Use ergotamine w/ caffeine)	70
bromocriptine mesylate CAPS	38	busulfan SOLN	33	calcipotriene CREA	53
bromocriptine mesylate TABS 2.5 MG	38	BUSULFEX SOLN (Use busulfan)	33	calcipotriene OINT	53
BROMSITE (Use bromfenac sodium (ophth))	77	butalbital-acetaminophen TABS 50 MG-325 MG	6	calcipotriene SOLN	53
BROVANA (Use arformoterol tartrate)	13	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG	6	calcipotriene-betamethasone dipropionate OINT	54
budesonide (inhalation) SUSP	12	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	6	calcipotriene-betamethasone dipropionate SUSP	54
budesonide (intrarectal)	9	butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	6	calcitonin (salmon) NA	59
budesonide (nasal)	75	butalbital-acetaminophen-caffeine w/			
budesonide CPEP	48				
budesonide-formoterol fumarate dihydrate	13				
bumetanide SOLN 0.25 MG/ML	58				

calcitriol (topical)	53	carbamazepine CP12 300 MG	16	carisoprodol TABS	75
calcitriol CAPS	59	carbamazepine SUSP	16	carmustine	33
calcitriol SOLN PO	60	carbamazepine TABS	16	carteolol hcl (ophth)	76
calcium acetate (phosphate binder) CAPS	62	carbamazepine TB12 100 MG, 400 MG	16	carvedilol	43
calcium acetate (phosphate binder) TABS	62	carbamazepine TB12 200 MG	16	carvedilol phosphate	43
calcium chloride (dihydrate) SOLN 71		CARBATROL CP12 100 MG (Use carbamazepine)	16	CASODEX (Use bicalutamide)	34
CALCIUM CHLORIDE SOLN 10 % (Use calcium chloride (dihydrate)) .	72	CARBATROL CP12 200 MG (Use carbamazepine)	16	CATAPRES-TTS-1 PTWK (Use clonidine)	28
calcium polycarbophil TABS	65	CARBATROL CP12 300 MG (Use carbamazepine)	16	CATAPRES-TTS-2 PTWK (Use clonidine)	28
CAMPTOSAR 40 MG/2ML, 100 MG/5ML (Use irinotecan hcl)	37	carbidopa	37	CATAPRES-TTS-3 PTWK (Use clonidine)	28
CANASA SUPP (Use mesalamine) 62		carbidopa-levodopa TABS	38	CAYA DPRH	67
candesartan cilexetil	27	carbidopa-levodopa TBCR	38	CAYSTON	31
candesartan cilexetil- hydrochlorothiazide	28	carbidopa-levodopa TBDP	38	cefaclor CAPS	46
capecitabine	33	carbidopa-levodopa-entacapone .	38	cefaclor SUSR 250 MG/5ML	46
CAPRELSA 100 MG	36	carbinoxamine maleate SOLN	25	cefadroxil CAPS	46
CAPRELSA 300 MG	36	carbinoxamine maleate TABS 4 MG . 25		cefadroxil SUSR	46
captopril 12.5 MG	27	CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML, 2.5 MG/ML (Use nicardipine hcl) ..	44	cefadroxil TABS	46
captopril 25 MG, 50 MG, 100 MG .	27	CARDIZEM CD CP24 120 MG, 300 MG, 360 MG (Use diltiazem hcl coated beads)	44	cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG	46
CAPVAXIVE	84	CARDIZEM CD CP24 180 MG, 240 MG (Use diltiazem hcl coated beads) 44		cefdinir CAPS	46
CARAC CREA (Use fluorouracil (topical))	52	CARDIZEM CD CP24 180 MG, 240 MG (Use diltiazem hcl coated beads) 44		cefdinir SUSR	46
CARAFATE SUSP (Use sucralfate) 83		CARDIZEM LA TB24 (Use diltiazem hcl)	44	cefepime hcl SOLR IJ 1 GM	46
CARAFATE TABS (Use sucralfate) 83		CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use diltiazem hcl)	44	cefepime CAPS	46
carbamazepine CHEW	16	CARDURA (Use doxazosin mesylate)	28	cefepime SUSR	46
carbamazepine CP12 100 MG	16			CEFOTAN IJ (Use cefotetan disodium)	46
carbamazepine CP12 200 MG	16			cefotetan disodium IJ 1 GM, 2 GM	46
				cefoxitin sodium IV 1 GM, 2 GM ...	46
				cefpodoxime proxetil SUSR	46
				cefpodoxime proxetil TABS	46

cefprozil SUSR	46	CHEMET	23	ciclopirox SOLN	51
cefprozil TABS	46	CHEMSTRIP K STRP	57	cidofovir	42
ceftaroline fosamil 400 MG, 600 MG .	46	chloramphenicol sodium succinate		cilostazol	64
		30		CIMDUO	40
ceftazidime IJ 1 GM, 6 GM	46	chlordiazepoxide hcl CAPS	11	cimetidine TABS	83
ceftriaxone sodium IJ 1 GM, 2 GM,		chlordiazepoxide hcl-clidinium		cinacalcet hcl	60
250 MG, 500 MG	46	bromide	82	CIPRO TABS 250 MG, 500 MG (Use	
cefuroxime axetil TABS	46	chlordiazepoxide-amitriptyline	79	ciprofloxacin hcl)	61
cefuroxime sodium IJ 750 MG	46	chlorhexidine gluconate (mouth-		ciprofloxacin hcl (ophth) SOLN	76
CELEBREX (Use celecoxib)	5	throat)	74	ciprofloxacin hcl (otic)	78
celecoxib	5	chloroquine phosphate TABS 250		ciprofloxacin hcl TABS 250 MG, 500	
		MG	32	MG, 750 MG	61
CELEXA TABS (Use citalopram		chloroquine phosphate TABS 500		ciprofloxacin in d5w 200 MG/100ML .	
hydrobromide)	19	MG	32	61	
CELLCEPT CAPS (Use		chlorpromazine hcl SOLN	39	ciprofloxacin-dexamethasone	78
mycophenolate mofetil)	73	chlorpromazine hcl TABS	39	ciprofloxacin-fluocinolone acetonide .	
CELLCEPT TABS (Use		chlorthalidone 25 MG, 50 MG	58	78	
mycophenolate mofetil)	73	chlorzoxazone TABS 500 MG	75	cisplatin SOLN 100 MG/100ML	33
CELONTIN (Use methsuximide) ..	18	chlorzoxazone TABS 750 MG	75	citalopram hydrobromide SOLN ...	19
cephalexin CAPS	46	cholecalciferol CAPS	87	citalopram hydrobromide TABS ...	19
cephalexin SUSR	46	cholecalciferol TABS 10 MCG, 400		CLARINEX TABS (Use	
CERDELGA	64	UNIT	87	desloratadine)	25
CEREBYX (Use fosphenytoin		cholestyramine light PACK	26	clarithromycin SUSR	66
sodium)	18	cholestyramine light POWD	26	clarithromycin TABS	66
cetirizine hcl TABS	25	cholestyramine PACK	26	clarithromycin TB24	66
CETRAXAL (Use ciprofloxacin hcl		cholestyramine POWD	26	CLARITIN ALLERGY CHILDRENS	
(otic))	78	choline fenofibrate	26	SOLN (Use loratadine)	25
cevimeline hcl	74	CIALIS 5 MG (Use tadalafil)	45	CLARITIN CAPS (Use loratadine) .	25
CHANTIX CONTINUING MONTH		ciclopirox GEL	51	CLARITIN CHEW (Use loratadine) 25	
PAK TABS (Use varenicline tartrate) .		ciclopirox olamine CREA	51	CLARITIN CHILDRENS CHEW (Use	
81		ciclopirox olamine SUSP	51	loratadine)	25
CHANTIX STARTING MONTH PAK		ciclopirox SHAM	51	CLARITIN REDITABS TBDP (Use	
TBPK (Use varenicline tartrate) ...	81			loratadine)	25
CHANTIX TABS (Use varenicline					
tartrate)	81				

CLARITIN SOLN (Use loratadine) .25	clindamycin phosphate (topical) SOLN50	clonidine PTWK28
CLARITIN TABS (Use loratadine) .25	clindamycin phosphate (topical) SWAB50	clopidogrel bisulfate 300 MG 64
CLASSIC PRENATAL TABS 74	clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML31	clopidogrel bisulfate 75 MG64
clemastine fumarate SYRP25	clindamycin phosphate vaginal CREA86	clorazepate dipotassium TABS11
clemastine fumarate TABS 2.68 MG . 25	clindamycin phosphate-benzoyl peroxide (refrigerate)50	clotrimazole (topical) CREA 51
CLEMASZ TABS 2.68 MG (Use clemastine fumarate)25	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %50	clotrimazole (topical) SOLN51
CLEMSZA TABS 2.68 MG (Use clemastine fumarate)25	clindamycin phosphate-tretinoin ..50	clotrimazole74
CLEOCIN (Use clindamycin hcl) ..30	clobazam SUSP15	clotrimazole vaginal CREA 1 % ...86
CLEOCIN (Use clindamycin palmitate hydrochloride)30	clobazam TABS15	clotrimazole w/ betamethasone CREA51
CLEOCIN CREA (Use clindamycin phosphate vaginal)86	clobetasol propionate CREA 0.05 % . 54	clotrimazole w/ betamethasone LOTN51
CLEOCIN PHOSPHATE SOLN IJ (Use clindamycin phosphate)31	clobetasol propionate emollient base 0.05 %54	clozapine TABS39
CLEOCIN-T LOTN (Use clindamycin phosphate (topical))50	clobetasol propionate FOAM54	clozapine TBDP 100 MG39
CLIMARA PRO60	clobetasol propionate GEL 0.05 % 54	clozapine TBDP 12.5 MG, 150 MG 39
CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol)61	clobetasol propionate OINT 0.05 % 54	clozapine TBDP 25 MG39
CLINDAGEL GEL (Use clindamycin phosphate (topical))50	clobetasol propionate SOLN 0.05 % . 54	CLOZARIL TABS (Use clozapine) .39
clindamycin hcl31	clocortolone pivalate54	COARTEM31
clindamycin palmitate hydrochloride . 31	CLODERM (Use clocortolone pivalate)55	codeine sulfate TABS 30 MG6
clindamycin phosphate (topical) FOAM50	clofarabine33	CODEINE SULFATE TABS6
clindamycin phosphate (topical) GEL 50	clomipramine hcl20	COLAZAL CAPS (Use balsalazide disodium)62
clindamycin phosphate (topical) LOTN50	clonazepam TABS15	colchicine TABS63
	clonidine hcl (adhd) TB121	colchicine w/ probenecid63
	clonidine hcl TABS28	colesevelam hcl PACK26
		colesevelam hcl TABS26
		COLESTID GRAN (Use colestipol hcl)26
		COLESTID PACK (Use colestipol hcl)26
		COLESTID TABS (Use colestipol hcl)

.....26	CORGARD TABS 20 MG (Use nadolol)43	(Use sodium chloride (gu irrigant)) 63
colestipol hcl GRAN26	CORGARD TABS 40 MG (Use nadolol)43	CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT74
colestipol hcl PACK26	CORLANOR TABS (Use ivabradine hcl)46	cyanocobalamin SOLN IJ 1000 MCG/ML64
colestipol hcl TABS26	CORTEF TABS (Use hydrocortisone)48	cyclobenzaprine hcl TABS 5 MG, 10 MG75
COMBIGAN (Use brimonidine tartrate-timolol maleate)76	CORTENEMA (Use hydrocortisone (intrarectal))9	cyclophosphamide CAPS33
COMBIVENT RESPIMAT AERS ..13	CORTISPORIN-TC78	cyclophosphamide SOLR IJ33
COMETRIQ (100 MG DAILY DOSE) KIT36	COSENTYX (300 MG DOSE) SOSY .53	cycloserine32
COMETRIQ (140 MG DAILY DOSE) KIT36	COSENTYX SENSOREADY (300 MG) SOAJ53	cyclosporine (ophth) EMUL76
COMETRIQ (60 MG DAILY DOSE) KIT36	COSENTYX SENSOREADY PEN SOAJ53	cyclosporine CAPS73
COMFORT EZ PRO PEN NEEDLES69	COSENTYX SOSY 150 MG/ML ...53	cyclosporine modified (for microemulsion) CAPS73
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML85	COSENTYX SOSY 75 MG/0.5ML .53	cyclosporine modified (for microemulsion) SOLN73
COMIRNATY SUSP85	COSENTYX UNOREADY SOAJ ..53	cyclosporine SOLN IV 50 MG/ML .73
COMIRNATY SUSY85	COSOPT (Use dorzolamide hcl-timolol maleate)76	CYKLOKAPRON SOLN (Use tranexamic acid)65
COMPLERA 200 MG-300 MG-25 MG (Use emtricitabine- rilpivirine-tenofovir disoproxil fumarate)40	COZAAR (Use losartan potassium) 27	CYMBALTA CPEP (Use duloxetine hcl)20
CONCERTA TBCR 18 MG, 27 MG (Use methylphenidate hcl)2	CREON CPEP58	cyproheptadine hcl SYRP26
CONCERTA TBCR 36 MG, 54 MG (Use methylphenidate hcl)2	CRESEMBA CAPS 186 MG24	cyproheptadine hcl TABS26
COPAXONE SOSY 20 MG/ML (Use glatiramer acetate)80	CRESTOR TABS (Use rosuvastatin calcium)26	CYSTADANE (Use betaine)60
COPAXONE SOSY 40 MG/ML (Use glatiramer acetate)80	cromolyn sodium (ophth)77	CYSTAGON CAPS63
CORDRAN TAPE55	cromolyn sodium NEBU11	CYSTARAN77
COREG (Use carvedilol)43	crotamiton LOTN57	CYTOMEL TABS (Use liothyronine sodium)82
COREG CR (Use carvedilol phosphate)43	CUPRIMINE CAPS (Use penicillamine)72	CYTOTEC (Use misoprostol)83
	CURITY STERILE SALINE 0.9 %	dabigatran etexilate mesylate CAPS .15
		dactinomycin35

dalfampridine	80	DEBACTEROL	74	(Use fluocinolone acetonide)	55
DALIRESP (Use roflumilast)	12	decitabine	33	DERMA-SMOOTH/FS SCALP OIL (Use fluocinolone acetonide)	55
danazol CAPS	9	deferasirox PACK	23	DERMOTIC (Use fluocinolone acetonide (otic))	78
DANTRIUM CAPS 25 MG (Use dantrolene sodium)	75	deferasirox TABS	23	DESCOVY 200 MG-25 MG	40
dantrolene sodium CAPS	75	deferasirox TBSO	23	desipramine hcl TABS	20
dapagliflozin free base-metformin hcl TB24 PO 1000 MG-10 MG	20	deflazacort TABS	48	desloratadine TABS	25
dapagliflozin free base-metformin hcl TB24 PO 1000 MG-5 MG	20	DELESTROGEN (Use estradiol valerate)	61	desloratadine TBDP 2.5 MG	25
dapagliflozin TABS PO 5 MG, 10 MG	23	DELSTRIGO	40	desmopressin acetate SOLN IJ ...	60
dapagliflozin-saxagliptin	20	DELZICOL CPDR (Use mesalamine) 62		DESMOPRESSIN ACETATE SOLN NA	60
dapsone	30	demeclocycline hcl TABS	81	desmopressin acetate spray	60
DAPTACEL	82	DEMEROL SOLN IJ (Use meperidine hcl)	6	desmopressin acetate spray refrigerated 0.01 %	60
DAPTOMYCIN (Use daptomycin) .	30	DENAVIR (Use penciclovir)	54	desmopressin acetate TABS 0.1 MG 60	
daptomycin 500 MG	30	DEPAKOTE ER TB24 (Use divalproex sodium)	18	desmopressin acetate TABS 0.2 MG 60	
DARAPRIM (Use pyrimethamine) .	32	DEPAKOTE TBEC (Use divalproex sodium)	18	desogestrel & ethinyl estradiol	47
darifenacin hydrobromide	84	DEPEN TITRATABS TABS (Use penicillamine)	72	desogestrel-ethinyl estradiol (biphasic)	47
darunavir TABS 600 MG	40	DEPO-ESTRADIOL	61	desogestrel-ethinyl estradiol (triphasic)	47
darunavir TABS 800 MG	40	DEPO-MEDROL SUSP (Use methylprednisolone acetate)	48	desonide CREA	55
DAURISMO	34	DEPO-MEDROL SUSP	48	desonide LOTN	55
DAYPRO TABS (Use oxaprozin) ...	5	DEPO-PROVERA SUSP IM (Use medroxyprogesterone acetate (contraceptive))	48	desonide OINT	55
DAYTRANA PTCH (Use methylphenidate)	2	DEPO-PROVERA SUSY IM (Use medroxyprogesterone acetate (contraceptive))	48	desoximetasone CREA 0.25 %	55
DDAVP PF SOLN IJ (Use desmopressin acetate)	60	DEPO-SUBQ PROVERA 104 SUSY SC	48	desoximetasone GEL	55
DDAVP SOLN IJ 4 MCG/ML (Use desmopressin acetate)	60	DERMA-SMOOTH/FS BODY OIL		desoximetasone OINT 0.25 %	55
DDAVP TABS 0.1 MG (Use desmopressin acetate)	60			DESODYN (Use methamphetamine hcl)	1
DDAVP TABS 0.2 MG (Use desmopressin acetate)	60			desvenlafaxine succinate	20

DETROL LA CP24 (Use tolterodine tartrate)	84	DIACOMIT PACK 250 MG	16	fidaxomicin)	67
DETROL TABS (Use tolterodine tartrate)	84	DIACOMIT PACK 500 MG	16	diflorasone diacetate CREA	55
dexamethasone ELIX	48	DIASTAT PEDIATRIC GEL (Use diazepam (anticonvulsant))	15	diflorasone diacetate OINT	55
DEXAMETHASONE INTENSOL CONC	48	diazepam (anticonvulsant) GEL ...	15	DIFLUCAN SUSR 40 MG/ML (Use fluconazole)	24
dexamethasone sodium phosphate (ophth)	77	diazepam CONC	11	DIFLUCAN TABS 100 MG, 200 MG (Use fluconazole)	24
dexamethasone SOLN	48	diazepam SOLN PO 5 MG/5ML ...	11	diflunisal TABS	6
dexamethasone TABS	48	diazepam TABS	11	difluprednate	77
DEXCOM G6 RECEIVER	68	diazoxide	21	digoxin SOLN PO 0.05 MG/ML	44
DEXCOM G6 SENSOR	68	DIBENZYLINE (Use phenoxybenzamine hcl)	27	digoxin TABS 62.5 MCG, 125 MCG, 250 MCG	44
DEXCOM G6 TRANSMITTER	68	DICLEGIS TBEC (Use doxylamine-pyridoxine)	24	dihydroergotamine mesylate SOLN IJ 1 MG/ML	70
DEXCOM G7 15 DAY SENSOR ..	68	diclofenac epolamine PTCH EX ...	52	dihydroergotamine mesylate SOLN NA 4 MG/ML	70
DEXCOM G7 RECEIVER	68	diclofenac potassium TABS 50 MG .	5	DILANTIN (Use phenytoin sodium extended)	18
DEXCOM G7 SENSOR	68	diclofenac sodium (actinic keratoses) EX	52	DILANTIN	18
DEXEDRINE CP24 10 MG, 15 MG (Use dextroamphetamine sulfate) ...	1	diclofenac sodium (ophth)	77	DILANTIN INFATABS CHEW (Use phenytoin)	18
DEXILANT (Use dexlansoprazole) 83		diclofenac sodium (topical) GEL EX 52		DILANTIN SUSP (Use phenytoin) .	18
dexlansoprazole	83	diclofenac sodium TB24	5	DILANTIN-125 SUSP (Use phenytoin)	18
dexmethylphenidate hcl CP24	2	diclofenac sodium TBEC	5	DILAUDID LIQD (Use hydromorphone hcl)	7
dexmethylphenidate hcl TABS	2	diclofenac w/ misoprostol TBEC	5	DILAUDID TABS (Use hydromorphone hcl)	7
dextroamphetamine sulfate CP24 10 MG, 15 MG	1	dicloxacillin sodium	79	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	44
dextroamphetamine sulfate CP24 5 MG	1	dicyclomine hcl CAPS	82	diltiazem hcl coated beads CP24 180 MG, 240 MG	44
dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG .	1	dicyclomine hcl SOLN PO	82	diltiazem hcl CP12	44
dextroamphetamine sulfate TABS 5 MG, 10 MG	1	dicyclomine hcl TABS	82	diltiazem hcl CP24	44
DIACOMIT CAPS	16	DIFFERIN CREA (Use adapalene) 50			
		DIFFERIN GEL (Use adapalene) ..	50		
		DIFFERIN LOTN	50		
		DIFICID TABS 200 MG (Use			

diltiazem hcl extended release beads	44	docusate sodium CAPS 250 MG ..	66	doxycycline hyclate CAPS	82
diltiazem hcl SOLN 50 MG/10ML ..	44	dofetilide	11	doxycycline hyclate SOLR	82
DILTIAZEM HCL SOLR	44	donepezil hydrochloride TABS 10 MG	79	doxycycline hyclate TABS 20 MG, 100 MG	82
diltiazem hcl TABS	44	donepezil hydrochloride TABS 5 MG, 23 MG	79	doxylamine-pyridoxine TBEC	24
diltiazem hcl TB24	44	donepezil hydrochloride TBDP 10 MG	79	DRISDOL CAPS (Use ergocalciferol) 87	
dimethyl fumarate CDPK	80	donepezil hydrochloride TBDP 5 MG 79		dronabinol CAPS	24
dimethyl fumarate CPDR	80	dorzolamide hcl	77	DROPLET PEN NEEDLES	69
DIOVAN HCT (Use valsartan-hydrochlorothiazide)	28	dorzolamide hcl-timolol maleate ..	76	drospirenone-ethinyl estradiol	47
DIOVAN TABS (Use valsartan)	28	DOVATO	40	drospirenone-ethinyl estradiol-levomefolate calcium	47
DIPENTUM	62	doxazosin mesylate	28	DROXIA CAPS	64
diphenhydramine hcl CAPS 50 MG 25		doxepin hcl (antipruritic)	52	DUAVEE	60
diphenhydramine hcl ELIX 12.5 MG/5ML	25	doxepin hcl (sleep)	65	DUETACT (Use pioglitazone hcl-glimepiride)	20
diphenhydramine hcl LIQD 12.5 MG/5ML	25	doxepin hcl CAPS	20	DULCOLAX TBEC (Use bisacodyl) 66	
diphenoxylate w/ atropine LIQD ...	23	doxepin hcl CONC	20	DULERA	13
diphenoxylate w/ atropine TABS ..	23	doxercalciferol CAPS	60	duloxetine hcl CPEP	20
DIPROLENE OINT (Use betamethasone dipropionate augmented)	55	doxercalciferol SOLN	60	DUPIXENT SOAJ 200 MG/1.14ML 56	
dipyridamole	64	DOXORUBICIN HCL SOLN (Use doxorubicin hcl)	35	DUPIXENT SOAJ 300 MG/2ML ...	56
DISKETTS TBSO 40 MG (Use methadone hcl)	7	doxorubicin hcl SOLN	35	DUPIXENT SOSY 200 MG/1.14ML 56	
disopyramide phosphate CAPS ...	11	doxorubicin hcl SOLR 10 MG, 50 MG	35	DUPIXENT SOSY 300 MG/2ML ...	56
disulfiram	79	doxycycline (monohydrate) CAPS 50 MG, 100 MG	81	DURAMORPH SOLN IJ 0.5 MG/ML, 1 MG/ML (Use morphine sulfate) ...	7
divalproex sodium TB24	18	doxycycline (monohydrate) CAPS 75 MG	81	DUREX EXTRA SENSITIVE THIN DEVI	67
divalproex sodium TBEC	18	doxycycline (monohydrate) TABS 100 MG	82	DUREX EXTRA SENSITIVE THIN MISC	67
DIVIGEL GEL (Use estradiol)	61	doxycycline (monohydrate) TABS 50 MG, 75 MG	81	DUREX TROPICAL MISC	67
docusate calcium	66				
docusate sodium CAPS 100 MG ..	66				

DUREZOL (Use difluprednate)77	eletriptan hydrobromide70	EMGALITY SOSY70
dutasteride63	ELIDEL (Use pimecrolimus)56	EMSAM19
DYRENIUM CAPS (Use triamterene) 58	ELIGARD KIT SC 7.5 MG34	emtricitabine CAPS40
E.E.S. GRANULES SUSR (Use erythromycin ethylsuccinate)66	ELIGARD SC 22.5 MG, 30 MG, 45 MG34	emtricitabine-rilpivirine-tenofovir disoproxil fumarate40
EASY COMFORT PEN NEEDLES 69	ELIMITE CREA (Use permethrin) .57	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG40
EC-NAPROSYN TBEC 375 MG (Use naproxen)5	ELIQUIS DVT/PE STARTER PACK TBPK14	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG40
EC-NAPROSYN TBEC 500 MG (Use naproxen)5	ELIQUIS TABS14	EMTRIVA CAPS (Use emtricitabine) .40
econazole nitrate CREA51	ELLA48	EMTRIVA SOLN40
EDARBI 40 MG, 80 MG (Use azilsartan medoxomil)28	ELMIRON CAPS63	EMVERM CHEW10
EDECIN (Use ethacrynic acid) ..58	eltrombopag olamine PACK 12.5 MG, 25 MG64	enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 28
EDURANT 25 MG (Use rilpivirine hcl)40	eltrombopag olamine TABS 12.5 MG, 25 MG64	enalapril maleate & hydrochlorothiazide 25 MG-10 MG 28
efavirenz CAPS 200 MG40	eltrombopag olamine TABS 50 MG, 75 MG64	enalapril maleate TABS27
efavirenz CAPS 50 MG40	EMBECTA AUTOSHIELD DUO ..69	ENBREL MINI SOCT6
efavirenz TABS40	EMBECTA PEN NEEDLE NANO .69	ENBREL SOLN6
efavirenz-emtricitabine-tenofovir disoproxil fumarate40	EMBECTA PEN NEEDLE NANO 2 GEN69	ENBREL SOSY 25 MG/0.5ML6
efavirenz-lamivudine-tenofovir disoproxil fumarate40	EMBECTA PEN NEEDLE ULTRAFINE69	ENBREL SOSY 50 MG/ML6
EFFEXOR XR CP24 (Use venlafaxine hcl)20	EMBRACE PEN NEEDLES69	ENBREL SURECLICK SOAJ6
EFFIENT (Use prasugrel hcl)64	EMCYT34	ENGERIX-B SUSP 20 MCG/ML ...85
EFUDEX CREA (Use fluorouracil (topical))52	EMEND BIPACK CAPS 80 MG (Use aprepitant)24	ENGERIX-B SUSY85
ELAPRASE60	EMEND TRIPACK CPPK PO (Use aprepitant)24	enoxaparin sodium SOLN IJ 300 MG/3ML14
electrolyte-14872	EMFLAZA TABS (Use deflazacort) 48	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML14
electrolyte-a72	EMGALITY (300 MG DOSE) SOSY 70	enoxaparin sodium SOSY 30 MG/0.3ML14
ELESTRIN GEL61	EMGALITY SOAJ70	enoxaparin sodium SOSY 40

MG/0.4ML	14	ERGOMAR SUBL	70	MG	83
enoxaparin sodium SOSY 60 MG/0.6ML	14	ergotamine w/ caffeine TABS	70	esomeprazole magnesium TBEC ..	83
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	14	ERIVEDGE	34	estazolam	65
entacapone	38	ERLEADA 240 MG	34	ESTRACE CREA (Use estradiol vaginal)	87
entecavir TABS	42	ERLEADA 60 MG	34	ESTRACE TABS (Use estradiol) ..	61
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (Use sacubitril-valsartan)	45	erlotinib hcl	34	estradiol GEL	61
EPIDIOLEX	16	ERTACZO	51	estradiol PTTW	61
EPIDUO GEL (Use adapalene- benzoyl peroxide)	50	ertapenem sodium IJ	30	estradiol PTWK	61
epinastine hcl (ophth)	77	ERYPED 200 SUSR (Use erythromycin ethylsuccinate)	66	estradiol TABS	61
epinephrine (anaphylaxis) SOAJ ..	87	ERYPED 400 SUSR (Use erythromycin ethylsuccinate)	66	estradiol vaginal CREA	87
EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis))	87	erythromycin (acne aid) PADS	50	estradiol vaginal TABS	87
EPIPEN JR 2-PAK SOAJ (Use epinephrine (anaphylaxis))	87	erythromycin (acne aid) SOLN	50	estradiol valerate	61
EPIVIR SOLN (Use lamivudine) ...	40	erythromycin (ophth)	76	ESTROGEL GEL (Use estradiol) ..	61
EPIVIR TABS 150 MG (Use lamivudine)	40	erythromycin base CPEP	66	estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	61
EPIVIR TABS 300 MG (Use lamivudine)	40	erythromycin base TABS	66	eszopiclone	65
eplerenone	30	erythromycin base TBEC	66	ethacrynic acid	58
epoprostenol sodium	45	erythromycin ethylsuccinate SUSR 66		ethambutol hcl TABS	32
EQL PRENATAL FORMULA TABS 74		erythromycin ethylsuccinate TABS 66		ethosuximide CAPS	18
EQUETRO	38	ESBRIET CAPS (Use pirfenidone) 81		ethosuximide SOLN	18
ERBITUX	34	ESBRIET TABS (Use pirfenidone) 81		ethynodiol diacet & eth estrad	47
ergocalciferol CAPS	87	escitalopram oxalate SOLN	19	etodolac CAPS	5
ergocalciferol SOLN PO 200 MCG/ML	87	escitalopram oxalate TABS	19	etodolac TABS	5
ergoloid mesylates TABS	80	ESGIC TABS (Use butalbital- acetaminophen-caffeine)	6	etonogestrel-ethinyl estradiol	48
		eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG	16	ETOPOPHOS	37
		esomeprazole magnesium CPDR 20 MG	83	etoposide CAPS	37
		esomeprazole magnesium CPDR 40		etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	37
				etravirine 100 MG	40

floxuridine	33	fluocinonide emulsified base	55	55	
FLUAD	85	fluocinonide GEL	55	fluticasone propionate hfa	12
FLUAD QUADRIVALENT	85	fluocinonide OINT	55	fluticasone propionate LOTN	55
FLUARIX QUADRIVALENT SUSY	85	fluocinonide SOLN	55	fluticasone propionate OINT	55
FLUARIX SUSY	85	fluorometholone (ophth) SUSP	77	fluticasone-salmeterol AEPB 100	
FLUBLOK SOSY	85	fluorouracil (topical) CREA 5 %	52	MCG/ACT-50 MCG/ACT, 250	
FLUCELVAX QUADRIVALENT		fluorouracil (topical) SOLN	52	MCG/ACT-50 MCG/ACT, 500	
SUSP	85	fluorouracil 500 MG/10ML	33	MCG/ACT-50 MCG/ACT	13
FLUCELVAX QUADRIVALENT		fluoxetine hcl CAPS	19	fluticasone-salmeterol AERO	13
SUSY	85	fluoxetine hcl CPDR	19	fluvastatin sodium CAPS 20 MG	26
FLUCELVAX SUSP	85	fluoxetine hcl SOLN	19	fluvastatin sodium CAPS 40 MG	26
FLUCELVAX SUSY	85	FLUOXETINE HCL TABS (Use		fluvoxamine maleate TABS	19
fluconazole SUSR	24	fluoxetine hcl)	19	FLUZONE HIGH-DOSE	
fluconazole TABS	24	fluoxetine hcl TABS	19	QUADRIVALENT	85
flucytosine	24	fluoxetine hcl TABS	19	FLUZONE HIGH-DOSE SUSY	85
fludarabine phosphate SOLN	33	fluphenazine hcl CONC	39	FLUZONE QUADRIVALENT SUSY	
fludarabine phosphate SOLR	33	fluphenazine hcl ELIX	39	85	
fludrocortisone acetate TABS	49	fluphenazine hcl SOLN	39	FLUZONE SUSP	85
FLULAVAL SUSY	85	fluphenazine hcl TABS	40	FLUZONE SUSY	85
FLUMIST	85	flurandrenolide CREA	55	FML FORTE SUSP	77
FLUMIST QUADRIVALENT	85	flurandrenolide LOTN	55	FML LIQUIFILM SUSP (Use	
flunisolide (nasal)	75	flurazepam hcl	65	fluorometholone (ophth))	77
fluocinolone acetonide (otic)	78	flurbiprofen sodium	77	FOCALIN TABS (Use	
fluocinolone acetonide CREA 0.01 %		flurbiprofen TABS	5	dexmethylphenidate hcl)	2
55		fluticasone furoate (inhalation) 50		FOCALIN XR CP24 (Use	
fluocinolone acetonide CREA 0.025		MCG/ACT, 100 MCG/ACT, 200		dexmethylphenidate hcl)	2
%	55	MCG/ACT	12	folic acid TABS	64
fluocinolone acetonide OIL	55	fluticasone furoate-vilanterol	13	FOLOTYN 20 MG/ML (Use	
fluocinolone acetonide OINT	55	fluticasone propionate (inhalation)		pralatrexate)	33
fluocinolone acetonide SOLN	55	AEPB	12	fondaparinux sodium 10 MG/0.8ML	
fluocinonide CREA	55	fluticasone propionate (nasal) SUSP	75	15	
		fluticasone propionate CREA 0.05 %		fondaparinux sodium 2.5 MG/0.5ML	15
				fondaparinux sodium 5 MG/0.4ML	15

fondaparinux sodium 7.5 MG/0.6ML . 15	FREESTYLE LIBRE READER68	gemfibrozil TABS 26
FORA GTEL BLOOD KETONE TEST57	FROVA (Use frovatriptan succinate) 70	GENOTROPIN CART SC 59
FORA TEST N'GO ADV-VOICE-6 CON57	frovatriptan succinate 71	GENOTROPIN MINIQUICK PRSY 59
FORFIVO XL TB24 (Use bupropion hcl) 19	FT PRENATAL TABS74	gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %3
formoterol fumarate NEBU13	FULPHILA64	gentamicin sulfate (ophth) SOLN ..76
FORTEO SOPN (Use teriparatide) 59	fulvestrant SOSY35	gentamicin sulfate (topical) CREA .51
FOSAMAX PLUS D59	furosemide SOLN IJ 10 MG/ML ...58	gentamicin sulfate (topical) OINT ..51
FOSAMAX TABS 70 MG (Use alendronate sodium)59	furosemide TABS58	gentamicin sulfate IJ 40 MG/ML 3
fosamprenavir calcium TABS41	FUZEON SOLR41	GENVOYA 41
fosfomycin tromethamine 31	FYCOMPA TABS 2 MG (Use perampanel)15	GEODON (Use ziprasidone hcl) ..38
fosinopril sodium & hydrochlorothiazide29	FYCOMPA TABS 4 MG (Use perampanel)15	GILENYA (Use fingolimod hcl)80
fosinopril sodium27	FYCOMPA TABS 6 MG (Use perampanel)15	GILOTRIF 34
fosphenytoin sodium 18	FYCOMPA TABS 8 MG, 10 MG, 12 MG (Use perampanel) 15	glatiramer acetate SOSY 20 MG/ML . 80
FOSRENOL CHEW (Use lanthanum carbonate)62	gabapentin CAPS16	glatiramer acetate SOSY 40 MG/ML . 80
FRAGMIN SOSY15	gabapentin SOLN16	GLEEVEC TABS (Use imatinib mesylate)36
FREESTYLE LIBRE 14 DAY READER68	gabapentin TABS 600 MG, 800 MG 16	GLEOSTINE 10 MG (Use lomustine) 33
FREESTYLE LIBRE 14 DAY SENSOR68	galantamine hydrobromide CP24 ..79	GLEOSTINE 40 MG, 100 MG (Use lomustine)33
FREESTYLE LIBRE 2 PLUS SENSOR68	galantamine hydrobromide SOLN .79	glimepiride 1 MG, 2 MG 23
FREESTYLE LIBRE 2 READER ..68	galantamine hydrobromide TABS .79	glimepiride 4 MG23
FREESTYLE LIBRE 2 SENSOR ..68	ganciclovir sodium SOLR42	glipizide TABS 5 MG, 10 MG23
FREESTYLE LIBRE 3 PLUS SENSOR68	GARDASIL 9 SUSP 0.5 ML85	glipizide TB2423
FREESTYLE LIBRE 3 READER ..68	GARDASIL 9 SUSY 0.5 ML85	glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG 20
FREESTYLE LIBRE 3 SENSOR ..68	gatifloxacin (ophth)76	glipizide-metformin hcl 500 MG-5 MG20
	gefitinib34	GLUCAGEN DIAGNOSTIC57
	gemcitabine hcl SOLR 2 GM, 200 MG 33	

GLUCAGON EMERGENCY SOLR IJ 1 MG (Use glucagon)	21	griseofulvin microsize SUSP	24	HEPLISAV-B SOSY	86
glucagon SOLR IJ 1 MG	21	griseofulvin microsize TABS	24	HIBERIX SOLR IJ	84
GLUCOTROL XL TB24 5 MG, 10 MG (Use glipizide)	23	griseofulvin ultramicrosize	24	HIPREX (Use methenamine hippurate)	31
GLUMETZA TB24 (Use metformin hcl)	21	guanfacine hcl (adhd)	2	HUMATROPE CART IJ	59
glyburide micronized 1.5 MG, 3 MG, 6 MG	23	guanfacine hcl	28	HUMIRA (2 PEN) AJKT 80 MG/0.8ML	4
glyburide TABS	23	GYNAZOLE-1	86	HUMIRA (2 PEN) AJKT	4
glyburide-metformin 250 MG-1.25 MG	20	HAEGARDA SOLR SC	64	HUMIRA (2 SYRINGE) PSKT	4
glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG	20	halcinonide CREA	55	HUMIRA-CD/UC/HS STARTER AJKT	4
glycine (gu irrigant) SOLN 1.5 % ..	63	HALCION 0.25 MG (Use triazolam) 65		HUMIRA-PED<40KG CROHNS STARTER PSKT	4
glycopyrrolate SOLN IJ 4 MG/20ML 82		HALDOL DECANOATE (Use haloperidol decanoate)	39	HUMIRA-PED>=40KG CROHNS START PSKT	4
glycopyrrolate TABS 1 MG	82	halobetasol propionate CREA	55	HUMIRA-PED>=40KG UC STARTER AJKT	4
glycopyrrolate TABS 2 MG	82	halobetasol propionate OINT	55	HUMIRA-PS/UV/ADOL HS STARTER AJKT	4
GLYXAMBI	20	HALOG CREA (Use halcinonide) ..	55	HUMIRA-PSORIASIS/UEIT STARTER AJKT	4
GNP PEN NEEDLES	69	HALOG OINT	55	HUMULIN R U-500 (CONCENTRATED) SOLN SC	22
GNP PRENATAL TABS	74	haloperidol decanoate	39	HUMULIN R U-500 KWIKPEN SOPN SC	22
GNP PRENATAL/FOLIC ACID TABS	74	haloperidol lactate CONC	39	HYCANTIN CAPS	37
GNP ULTICARE PEN NEEDLES ..	69	haloperidol lactate SOLN	39	HYCANTIN SOLR (Use topotecan hcl)	37
GOHIBIC	64	haloperidol TABS	39	hydralazine hcl SOLN	30
GOJJI BLOOD KETONE TEST ...	57	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	86	hydralazine hcl TABS	30
GOLYTELY SOLR (Use peg 3350- kcl-sod bicarb-sod chloride-sod sulfate)	65	HEMANGEOL SOLN PO	43	HYDREA (Use hydroxyurea)	37
granisetron hcl SOLN IV 1 MG/ML	23	HEMATINIC/FOLIC ACID	65	hydrochlorothiazide CAPS	58
granisetron hcl TABS	23	HEMMOREX-HC 25 MG, 30 MG (Use hydrocortisone acetate (rectal)) 10		hydrochlorothiazide TABS	58
GRASTEK SUBL	3	HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML 15		hydrocodone bitartrate CP12	7
		heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	15		

hydrocodone bitartrate T24A7	hydrocortisone valerate CREA55	ibandronate sodium TABS59
hydrocodone polistirex- chlorpheniramine polistirex SUER .49	hydrocortisone valerate OINT 56	IBRANCE CAPS 100 MG, 125 MG 36
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML 8	hydrocortisone w/acetic acid78	IBRANCE TABS 36
hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML 8	hydromorphone hcl LIQD 7	ibuprofen SUSP 100 MG/5ML, 200 MG/10ML5
hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG8	HYDROMORPHONE HCL PF SOLN IJ (Use hydromorphone hcl)7	ibuprofen TABS 400 MG, 600 MG, 800 MG5
hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG8	hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML . 7	icatibant acetate SOSY64
hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG8	hydromorphone hcl TABS7	ICLUSIG36
hydrocodone-ibuprofen 7.5 MG-200 MG8	hydromorphone hcl TB24 32 MG ... 7	icosapent ethyl 1 GM 26
hydrocortisone (intrarectal)9	hydromorphone hcl TB24 8 MG, 12 MG, 16 MG7	IDAMYCIN PFS 20 MG/20ML (Use idarubicin hcl) 35
hydrocortisone (rectal) EX 10	hydroxychloroquine sulfate 100 MG 32	IDAMYCIN PFS 5 MG/5ML, 10 MG/10ML (Use idarubicin hcl)35
hydrocortisone (topical) CREA 1 %, 2.5 %55	hydroxychloroquine sulfate 200 MG 32	idarubicin hcl 20 MG/20ML 35
hydrocortisone (topical) LOTN 2.5 % . 55	hydroxychloroquine sulfate 400 MG 32	idarubicin hcl 5 MG/5ML, 10 MG/10ML 35
hydrocortisone (topical) OINT 1 %, 2.5 %55	hydroxyurea37	IFEX SOLR (Use ifosfamide)33
hydrocortisone acetate (rectal)10	hydroxyzine hcl SOLN 50 MG/ML .10	ifosfamide SOLN 1 GM/20ML 33
hydrocortisone butyrate CREA 55	hydroxyzine hcl SYRP 10	ifosfamide SOLR33
hydrocortisone butyrate OINT 55	hydroxyzine hcl TABS 10	imatinib mesylate TABS 36
hydrocortisone butyrate SOLN55	hydroxyzine pamoate CAPS11	imipramine hcl TABS 20
hydrocortisone sod succinate 100 MG48	HYPERSAL NEBU (Use sodium chloride (inhalant))49	imipramine pamoate 20
hydrocortisone TABS48	HYPERSAL NEBU49	imiquimod 5 % 56
hydrocortisone vaginal87	HYZAAR 12.5 MG-100 MG, 25 MG- 100 MG (Use losartan potassium & hydrochlorothiazide) 29	IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML, 6 MG/0.5ML 71
	HYZAAR 12.5 MG-50 MG (Use losartan potassium & hydrochlorothiazide) 29	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML71
	ibandronate sodium SOLN59	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (Use sumatriptan succinate)71
		IMITREX TABS (Use sumatriptan succinate)71

IMURAN TABS (Use azathioprine) 73	INTUNIV (Use guanfacine hcl (adhd))2	45
INCONTROL ULTICARE PEN NEEDLES 69	INVEGA 3 MG, 6 MG, 9 MG (Use paliperidone) 39	isosorbide mononitrate TABS10
INCRELEX 59	IONOSOL-MB IN D5W72	isosorbide mononitrate TB24 10
INCRUSE ELLIPTA 62.5 MCG/ACT (Use umeclidinium bromide) 11	IPOL IJ86	isotretinoin 10 MG, 20 MG, 30 MG, 40 MG50
indapamide TABS 1.25 MG58	ipratropium bromide (nasal) 0.03 % 75	isradipine CAPS 44
indapamide TABS 2.5 MG58	ipratropium bromide (nasal) 0.06 % 75	ISTODAX SOLR (Use romidepsin) 36
INDERAL LA CP24 (Use propranolol hcl) 43	ipratropium bromide hfa 17 MCG/ACT 11	itraconazole CAPS25
indomethacin CAPS 25 MG, 50 MG 5	ipratropium bromide SOLN 0.02 % 11	itraconazole SOLN25
indomethacin CPCR5	ipratropium-albuterol SOLN13	ivabradine hcl TABS 46
INFANRIX 82	irbesartan28	ivermectin (pediculicide) 57
INFLECTRA SOLR 62	irbesartan-hydrochlorothiazide ...29	ivermectin10
INLYTA33	IRESSA (Use gefitinib)34	IXEMPRA KIT 15 MG37
INSPIRA (Use eplerenone)30	irinotecan hcl 40 MG/2ML, 100 MG/5ML37	JADENU SPRINKLE PACK (Use deferasirox) 23
INSULIN GLARGINE-YFGN SOLN 22	irrigation solutions, physiological ..73	JADENU TABS (Use deferasirox) .23
INSULIN GLARGINE-YFGN SOPN 22	ISENTRESS CHEW 41	JAKAFI 36
INSULIN LISPRO (1 UNIT DIAL) SOPN 22	ISENTRESS HD TABS 41	JANUMET TABS 1000 MG-50 MG, 500 MG-50 MG (Use sitagliptin phosphate-metformin hcl)21
INSULIN LISPRO JUNIOR KWIKPEN SOPN 22	ISENTRESS TABS 41	JANUMET XR TB24 1000 MG-100 MG 20
INSULIN LISPRO PROT & LISPRO SUPN 22	ISOLYTE-P IN D5W72	JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG 20
INSULIN LISPRO SOLN IJ22	ISOLYTE-S72	JANUVIA 25 MG, 50 MG, 100 MG (Use sitagliptin phosphate) 21
INSUPEN PEN NEEDLES69	isoniazid SOLN32	JARDIANCE23
INTELENCE 100 MG (Use etravirine)41	isoniazid SYRP32	JULUCA41
INTELENCE 200 MG (Use etravirine)41	isoniazid TABS32	JYNARQUE TABS 15 MG, 30 MG (Use tolvaptan)60
INTELENCE 25 MG41	ISORDIL TITRADOSE TABS 5 MG (Use isosorbide dinitrate) 10	JYNNEOS86
	isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG 10	KALETRA SOLN41
	isosorbide dinitrate-hydralazine hcl	KALETRA TABS (Use lopinavir-

ritonavir)41	KIMONO MISC67	labetalol hcl TABS 300 MG43
KALYDECO TABS81	KIMONO PLUS MISC67	lacosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML 16
KAMELEON LUBRICATED MISC .67	KIMONO PS MISC67	lacosamide TABS16
KANJINTI34	KIMONO PS PLUS MISC67	lactated ringer's (irrigation)73
KENALOG-40 SUSP (Use triamcinolone acetonide)48	KIMONO SENSATION MISC67	lactic acid (ammonium lactate) CREA56
KEPPRA SOLN PO 100 MG/ML (Use levetiracetam)16	KIMONO SENSATION PLUS MISC 67	lactic acid (ammonium lactate) LOTN 12 %56
KEPPRA TABS 1000 MG (Use levetiracetam)16	KIMONO SPECIAL DEVI67	lactulose (encephalopathy)62
KEPPRA TABS 250 MG, 750 MG (Use levetiracetam)16	KINRIX SUSY82	lactulose SOLN66
KEPPRA TABS 500 MG (Use levetiracetam)16	KISQALI (200 MG DOSE)36	LAMICTAL CHEW 25 MG (Use lamotrigine)16
KEPPRA XR TB24 (Use levetiracetam)16	KISQALI (400 MG DOSE)36	LAMICTAL CHEW 5 MG (Use lamotrigine)16
ketoconazole (topical) CREA51	KISQALI (600 MG DOSE)36	LAMICTAL ODT TBDP (Use lamotrigine)16
ketoconazole (topical) SHAM 2 % .51	KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (Use tobramycin)3	LAMICTAL TABS 150 MG, 200 MG (Use lamotrigine)17
ketoconazole25	KLARON (Use sulfacetamide sodium (acne))50	LAMICTAL TABS 25 MG, 100 MG (Use lamotrigine)17
KETONE TEST STRP57	KLONOPIN TABS (Use clonazepam)15	lamivudine (hbv) TABS42
ketoprofen CAPS 50 MG5	KLOR-CON 10 TBCR 10 MEQ (Use potassium chloride)72	lamivudine SOLN41
ketorolac tromethamine (ophth) ...77	KLOR-CON TBCR 8 MEQ (Use potassium chloride)72	lamivudine TABS 150 MG41
ketorolac tromethamine TABS5	KLOXXADO LIQD23	lamivudine TABS 300 MG41
KETOSTIX STRP57	KP PRENATAL MULTIVITAMINS TABS74	lamivudine-zidovudine41
ketotifen fumarate (ophth) 0.035 % 77	KRINTAFEL32	lamotrigine CHEW 25 MG17
KEVZARA SOAJ5	K-TAB TBCR 20 MEQ (Use potassium chloride)72	lamotrigine CHEW 5 MG17
KEVZARA SOSY5	KYPROLIS36	lamotrigine TABS17
KIMONO COLORS DEVI67	labetalol hcl SOLN43	lamotrigine TBDP17
KIMONO MAXX-LARGE FLARE MISC67	labetalol hcl TABS 100 MG, 200 MG . 43	LANOXIN SOLN IJ (Use digoxin) .45
KIMONO MICRO THIN PLUS MISC . 67		LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (Use digoxin)45

lansoprazole CPDR 15 MG83	levalbuterol hcl 1.25 MG/0.5ML13	oxalate)19
lansoprazole CPDR 30 MG83	levalbuterol tartrate13	LIALDA TBEC (Use mesalamine) .62
lanthanum carbonate CHEW63	levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML17	LIBRAX (Use chlordiazepoxide hcl-clidinium bromide)82
lapatinib ditosylate36	levetiracetam TABS 1000 MG17	lidocaine hcl (mouth-throat) 2 % ...74
LASIX TABS (Use furosemide)58	levetiracetam TABS 250 MG, 750 MG17	lidocaine hcl (mouth-throat) 4 % ...74
LASTACRAFT77	levetiracetam TABS 500 MG17	lidocaine hcl GEL 2 %56
latanoprost SOLN78	levetiracetam TB2417	lidocaine hcl PRSY57
LATUDA 20 MG, 40 MG, 60 MG, 120 MG (Use lurasidone hcl)38	levobunolol hcl 0.5 %76	lidocaine hcl SOLN57
LATUDA 80 MG (Use lurasidone hcl) 38	levocetirizine dihydrochloride SOLN 25	lidocaine PTCH 5 %57
leflunomide6	levocetirizine dihydrochloride TABS 25	lidocaine-prilocaine CREA57
LEMTRADA80	levofloxacin (ophth) 0.5 %76	LIDODERM PTCH (Use lidocaine) 57
lenalidomide73	levofloxacin in d5w 500 MG/100ML 61	LINCOCIN (Use lincomycin hcl) ..31
LENVIMA (10 MG DAILY DOSE) .34	levofloxacin SOLN PO61	lincomycin hcl31
LENVIMA (12 MG DAILY DOSE) .34	levofloxacin TABS61	linezolid SUSR31
LENVIMA (14 MG DAILY DOSE) .34	levonorgestrel & eth estradiol TABS 47	linezolid TABS31
LENVIMA (18 MG DAILY DOSE) .34	levonorgestrel (emergency oc) 1.5 MG48	LINZESS62
LENVIMA (20 MG DAILY DOSE) .34	levonorgestrel-eth estradiol (triphasic)47	liothyronine sodium SOLN82
LENVIMA (24 MG DAILY DOSE) .34	levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG47	liothyronine sodium TABS82
LENVIMA (4 MG DAILY DOSE) ..34	levonorgestrel-ethinyl estradiol (continuous)47	LIPITOR TABS (Use atorvastatin calcium)26
LENVIMA (8 MG DAILY DOSE) ..34	levonorgestrel-ethinyl estradiol-iron 47	liraglutide21
LETAIRIS (Use ambrisentan)45	levorphanol tartrate TABS 2 MG7	lisdexamphetamine dimesylate CAPS 1
letrozole35	levothyroxine sodium TABS82	lisdexamphetamine dimesylate CHEW .1
leucovorin calcium SOLR37	LEXAPRO TABS (Use escitalopram	
leucovorin calcium TABS37		
LEUKERAN33		
LEUKINE SOLR IJ64		
leuprolide acetate KIT IJ 1 MG/0.2ML35		
levalbuterol hcl13		

lithium carbonate TBCR	38	losartan potassium	28	LOVENOX SOSY 30 MG/0.3ML (Use enoxaparin sodium)	15
LITHOBID TBCR (Use lithium carbonate)	38	LOTEMAX GEL (Use loteprednol etabonate)	77	LOVENOX SOSY 40 MG/0.4ML (Use enoxaparin sodium)	15
LO LOESTRIN FE TABS	47	LOTEMAX OINT	77	LOVENOX SOSY 60 MG/0.6ML (Use enoxaparin sodium)	15
LODINE TABS (Use etodolac)	5	LOTEMAX SUSP (Use loteprednol etabonate)	77	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (Use enoxaparin sodium) .	15
LODOSYN (Use carbidopa)	37	LOTENSIN 10 MG, 20 MG, 40 MG (Use benazepril hcl)	27	loxapine succinate	39
lofexidine hcl	79	LOTENSIN HCT 12.5 MG-10 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide)	29	lubiprostone	62
LOKELMA	73	LOTENSIN HCT 12.5 MG-20 MG (Use benazepril & hydrochlorothiazide)	29	LUCEMYRA (Use lofexidine hcl) .	79
LOMOTIL TABS (Use diphenoxylate w/ atropine)	23	loteprednol etabonate GEL	77	luliconazole	51
lomustine 10 MG	33	loteprednol etabonate SUSP	77	LUMAKRAS 120 MG, 240 MG	36
lomustine 40 MG, 100 MG	33	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LUMAKRAS 320 MG	36
loperamide hcl CAPS	23	lotrimin af crea (Use clotrimazole (topical))	51	LUNESTA (Use eszopiclone)	65
LOPID TABS (Use gemfibrozil)	26	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LUPRON DEPOT (1-MONTH) KIT IM	35
lopinavir-ritonavir SOLN	41	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LUPRON DEPOT (3-MONTH) KIT IM	35
lopinavir-ritonavir TABS	41	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LUPRON DEPOT (4-MONTH) IM .	35
LOQTORZI	34	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LUPRON DEPOT (6-MONTH) IM .	35
loratadine CAPS	25	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	38
loratadine CHEW	25	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	lurasidone hcl 80 MG	38
loratadine SOLN	25	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LURBIPR TABS 100 MG (Use flurbiprofen)	5
loratadine TABS	25	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LURBIRO TABS 100 MG (Use flurbiprofen)	5
loratadine TBDP	25	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LUZU (Use luliconazole)	51
lorazepam CONC	11	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LYNPARZA TABS	36
lorazepam TABS 0.5 MG, 2 MG ...	11	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LYRICA CAPS 225 MG, 300 MG (Use pregabalin)	17
lorazepam TABS 1 MG	11	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LYRICA CAPS 25 MG, 50 MG, 75	
LORBRENA	36	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29		
losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	29	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29		
losartan potassium & hydrochlorothiazide 12.5 MG-50 MG .	29	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29		

MG, 100 MG, 150 MG, 200 MG (Use pregabalin)	17	polymy-dexameth)	77	50 MG/ML, 100 MG/ML	7
LYRICA CR 330 MG (Use pregabalin (once-daily))	80	MAXX MISC	67	meperidine hcl SOLN PO 50 MG/5ML	7
LYRICA CR 82.5 MG, 165 MG (Use pregabalin (once-daily))	80	MAXX PLUS MISC	67	meperidine hcl TABS 50 MG	7
LYRICA SOLN (Use pregabalin) ...	17	meclizine hcl TABS 12.5 MG, 25 MG 24		meprobamate	11
LYSODREN	35	meclofenamate sodium CAPS	5	MEPRON (Use atovaquone)	30
macitentan 10 MG	45	MEDROL TABS 4 MG, 8 MG, 16 MG (Use methylprednisolone)	48	mercaptopurine TABS	33
MACROBID (Use nitrofurantoin monohyd macro)	31	MEDROL TABS	48	mesalamine CP24	62
MACRODANTIN (Use nitrofurantoin macrocrystal)	31	MEDROL TBPK (Use methylprednisolone)	48	mesalamine CPDR	62
mafenide acetate PACK	54	medroxyprogesterone acetate (contraceptive) SUSP IM	48	mesalamine ENEM	62
magnesium sulfate IJ 50 %	72	medroxyprogesterone acetate (contraceptive) SUSY IM	48	mesalamine SUPP	62
MALARONE (Use atovaquone-proguanil hcl)	31	medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	79	mesalamine TBEC 1.2 GM	62
malathion	57	mefenamic acid CAPS	5	mesalamine TBEC 800 MG	62
maraviroc TABS 150 MG	41	mefloquine hcl	32	MESTINON SOLN PO (Use pyridostigmine bromide)	32
maraviroc TABS 300 MG	41	megestrol acetate (appetite)	79	MESTINON TABS (Use pyridostigmine bromide)	32
MARINOL CAPS (Use dronabinol) 24		megestrol acetate SUSP	35	MESTINON TBCR (Use pyridostigmine bromide)	32
MARPLAN	19	megestrol acetate TABS	35	METADATE CD CPCR (Use methylphenidate hcl)	2
MASONATAL TABS	74	MEKINIST TABS 0.5 MG	36	metaxalone 800 MG	75
MATRONEX TABS	74	MEKINIST TABS 2 MG	36	metformin hcl TABS 1000 MG	21
MATULANE	37	meloxicam TABS	5	metformin hcl TABS 500 MG	21
MAXALT TABS 10 MG (Use rizatriptan benzoate)	71	melphalan hcl IV	33	metformin hcl TABS 850 MG	21
MAXALT-MLT TBDP 10 MG (Use rizatriptan benzoate)	71	memantine hcl TABS	79	metformin hcl TB24 500 MG	21
MAXIDEX SUSP OP	77	MENEST 2.5 MG	61	metformin hcl TB24 750 MG	21
MAXITROL OINT (Use neomycin-polymy-dexameth)	77	MENOSTAR PTWK	61	methadone hcl CONC	7
MAXITROL SUSP (Use neomycin-		MENQUADFI 0.5 ML	84	METHADONE HCL SOLN IJ (Use methadone hcl)	7
		MENVEO SOLR	84	methadone hcl SOLN PO	7
		meperidine hcl SOLN IJ 25 MG/ML,		methadone hcl TABS 10 MG	7

methadone hcl TABS 5 MG7	methylphenidate hcl TABS 10 MG, 20 MG2	metoprolol tartrate SOLN IV 5 MG/5ML43
methadone hcl TBSO7	methylphenidate hcl TABS 5 MG ...2	metoprolol tartrate TABS 25 MG, 50 MG, 100 MG43
METHADOSE CONC (Use methadone hcl)7	methylphenidate hcl TB24 18 MG, 27 MG2	METROCREAM CREA (Use metronidazole (topical))57
METHADOSE SUGAR-FREE CONC (Use methadone hcl)7	methylphenidate hcl TB24 36 MG, 54 MG2	METROGEL GEL 1 % (Use metronidazole (topical))57
methamphetamine hcl1	methylphenidate hcl TBCR 10 MG, 20 MG2	metronidazole (topical) CREA57
methazolamide TABS58	methylphenidate hcl TBCR 18 MG, 27 MG2	metronidazole (topical) GEL 0.75 % 57
methenamine hippurate31	methylphenidate hcl TBCR 36 MG, 54 MG2	metronidazole (topical) GEL 1 % ..57
methimazole TABS82	methylphenidate PTCH2	metronidazole (topical) LOTN57
methocarbamol TABS 500 MG, 750 MG75	methylprednisolone acetate SUSP 48	metronidazole TABS 250 MG, 500 MG30
methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML33	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG48	metronidazole vaginal86
methotrexate sodium SOLR33	methylprednisolone TABS48	mexiletine hcl11
methotrexate sodium TABS 2.5 MG 33	methylprednisolone TBPk48	MICARDIS (Use telmisartan)28
methoxsalen rapid53	methyltestosterone TABS9	MICARDIS HCT (Use telmisartan-hydrochlorothiazide)29
methscopolamine bromide83	metoclopramide hcl SOLN IJ 5 MG/ML62	miconazole nitrate vaginal SUPP 200 MG86
methsuximide18	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML62	midodrine hcl87
methyldopa TABS28	metoclopramide hcl TABS62	miglitol20
METHYLIN SOLN (Use methylphenidate hcl)2	metolazone58	miglustat64
methylphenidate hcl CHEW 10 MG .2	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG29	MIGRANAL SOLN NA (Use dihydroergotamine mesylate)70
methylphenidate hcl CHEW 2.5 MG 2	metoprolol & hydrochlorothiazide TABS 25 MG-50 MG29	milnacipran hcl MISC79
methylphenidate hcl CHEW 5 MG ..2	metoprolol succinate TB24 200 MG 43	milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG79
methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG2	metoprolol succinate TB24 25 MG, 50 MG, 100 MG43	MINIVELLE PTTW (Use estradiol) 61
methylphenidate hcl CP24 30 MG ..2		minocycline hcl CAPS82
methylphenidate hcl CP242		minocycline hcl TABS82
methylphenidate hcl CPR2		
methylphenidate hcl SOLN2		

minoxidil 2.5 MG, 10 MG	30	MG/ML, 1 MG/ML	7	MYDRIACYL SOLN (Use tropicamide)	76
MIRCETTE (Use desogestrel-ethinyl estradiol (biphasic))	47	morphine sulfate SOLN PO 10 MG/5ML	7	MYFORTIC (Use mycophenolate sodium)	73
mirtazapine TABS	19	morphine sulfate SOLN PO 20 MG/5ML	7	MYLERAN TABS	33
mirtazapine TBDP	19	morphine sulfate TABS	7	MYSOLINE (Use primidone)	17
MIRVASO (Use brimonidine tartrate (topical))	57	morphine sulfate TBCR	7	nabumetone	5
misoprostol	83	MOTEGRITY (Use prucalopride succinate)	61	nadolol TABS 20 MG	43
mitomycin SOLR IV 20 MG	35	MOTOFEN	23	nadolol TABS 40 MG	43
mitoxantrone hcl 25 MG/12.5ML	35	MOUNJARO	21	nadolol TABS 80 MG	43
M-M-R II SOLR	86	MOVANTIK	62	nafcillin sodium IJ 1 GM	79
M-NATAL PLUS TABS	74	MOVIPREP (Use peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid)	66	naftifine hcl CREA 1 %	51
MNEXSPIKE SUSY 10 MCG/0.2ML . 86		moxifloxacin hcl (ophth) SOLN OP 61	76	naftifine hcl CREA 2 %	52
modafinil 100 MG	3	moxifloxacin hcl in sodium chloride	61	naloxone hcl LIQD	23
modafinil 200 MG	2	moxifloxacin hcl TABS	61	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	23
MODERNA COVID-19 VAC 6M-11Y SUSP	86	MRESVIA	86	naltrexone hcl	23
MODERNA COVID-19 VAC 6M-11Y SUSY	86	MS CONTIN TBCR (Use morphine sulfate)	7	NAMENDA TITRATION PAK TABS (Use memantine hcl)	79
moexipril hcl	27	MULTI PRENATAL TABS	74	NAPROSYN SUSP (Use naproxen) 5	
mometasone furoate (nasal) SUSP 76		mupirocin calcium (topical)	51	NAPROSYN TABS 500 MG (Use naproxen)	5
mometasone furoate CREA	56	mupirocin OINT	51	naproxen sodium TABS 550 MG ...	5
mometasone furoate OINT	56	MVASI	34	naproxen SUSP	5
mometasone furoate SOLN	56	MYALEPT	60	naproxen TABS	5
montelukast sodium CHEW	12	MYAMBUTOL TABS 400 MG (Use ethambutol hcl)	32	naproxen TBEC 500 MG	5
montelukast sodium PACK	12	MYCOBUTIN (Use rifabutin)	32	naratriptan hcl	71
montelukast sodium TABS	12	mycophenolate mofetil CAPS	73	NARCAN LIQD (Use naloxone hcl) 23	
morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	7	mycophenolate mofetil TABS	73	NARDIL (Use phenelzine sulfate) .19	
morphine sulfate SOLN IJ 0.5		mycophenolate sodium	73	NATACYN	76
				NATAZIA	47

nateglinide	23	methysulfate)	32	nicardipine hcl)	44
NATROBA (Use spinosad)	57	NEOSTIGMINE METHYLSULFATE		nicardipine hcl SOLN	44
NAYZILAM	16	SOSY (Use neostigmine		NICORETTE GUM 4 MG (Use	
nebivolol hcl 2.5 MG, 5 MG, 10 MG		methysulfate)	32	nicotine polacrilex)	81
43		neostigmine methysulfate SOSY ..	32	NICORETTE MINI LOZG 4 MG (Use	
nebivolol hcl 20 MG	43	NEO-SYNALAR	51	nicotine polacrilex)	81
NEBUSAL NEBU	49	NEUPRO	38	NICORETTE STARTER KIT GUM 2	
nefazodone hcl	19	NEURONTIN CAPS (Use		MG (Use nicotine polacrilex)	81
nelarabine	33	gabapentin)	17	NICOTINE KIT	81
neomycin sulfate TABS	3	NEURONTIN SOLN (Use		nicotine polacrilex GUM	81
neomycin-bacitracin zn-polymyxin	76	gabapentin)	17	nicotine polacrilex LOZG	81
neomycin-polymy-dexameth OINT	77	NEURONTIN TABS (Use		nicotine PT24 TD 7 MG/24HR, 14	
neomycin-polymy-dexameth SUSP		gabapentin)	17	MG/24HR, 21 MG/24HR	81
0.1 %-3.5 MG/ML-10000 UNIT/ML,		NEVANAC	77	NICOTROL INHA	81
0.1 %	77	nevirapine SUSP	41	NICOTROL NS SOLN	81
neomycin-polymyxin-hc (ophth) ...	77	nevirapine TABS	41	nifedipine CAPS 10 MG	44
neomycin-polymyxin-hc (otic) SOLN .		nevirapine TB24 400 MG	41	nifedipine CAPS 20 MG	44
78		NEXAVAR (Use sorafenib tosylate) .		nifedipine TB24	44
neomycin-polymyxin-hc (otic) SUSP .		36		NILANDRON (Use nilutamide)	35
78		NEXIUM 24HR TBEC 20 MG	83	nilutamide	35
NEONATAL COMPLETE TABS 120		NEXIUM CPDR 20 MG (Use		nimodipine CAPS	44
MG-10 MG-9.2 MG-1000 MCG-10		esomeprazole magnesium)	83	nintedanib esylate 100 MG, 150 MG .	
MCG-12 MCG-3 MG-5 MG-20 MG-		NEXIUM CPDR 40 MG (Use		81	
27 MG-200 MG-1.84 MG-25 MG-2		esomeprazole magnesium)	83	NIPENT	37
MG-1200 MCG-2 MG-0.2 MG	74	NEXTSTELLIS	47	nisoldipine	44
NEONATAL PLUS TABS	74	niacin (antihyperlipidemic) TBCR ..	27	nitazoxanide TABS	30
NEONATAL PRENATAL TABS	74	niacin CPCR 250 MG	87	nitisinone CAPS	60
NEONATAL VITAMIN TABS	74	NIACIN ER TBCR	87	NITRO-DUR PT24 (Use nitroglycerin)	
NEORAL CAPS (Use cyclosporine		niacin TABS	87		10
modified (for microemulsion))	73	niacin TBCR	87	nitrofurantoin	31
NEORAL SOLN (Use cyclosporine		niacinamide TABS	87	nitrofurantoin macrocrystal 50 MG,	
modified (for microemulsion))	73	nicardipine hcl CAPS	44	100 MG	31
NEOSTIGMINE METHYLSULFATE		NICARDIPINE HCL SOLN (Use			
RFID SOSY (Use neostigmine					

nitrofurantoin monohyd macro	31	norgestimate-ethinyl estradiol (triphasic)	47	NOVOLOG PENFILL SOCT	22
nitroglycerin (intra-anal)	10	norgestimate-ethinyl estradiol	47	NOVOLOG SOLN IJ	22
nitroglycerin OINT	10	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	47	NOXAFIL SUSP (Use posaconazole)	25
nitroglycerin PT24	10	NORMOSOL-M IN D5W	72	NOXAFIL TBEC (Use posaconazole) 25	
NITROGLYCERIN SOLN IV	10	NORMOSOL-R PH 7.4	72	NP THYROID TABS	82
nitroglycerin SUBL	10	NORPACE CAPS (Use disopyramide phosphate)	11	NUEDEXTA	80
NITROSTAT SUBL (Use nitroglycerin)	10	NORPRAMIN TABS 10 MG, 25 MG (Use desipramine hcl)	20	NUVARING (Use etonogestrel-ethinyl estradiol)	48
NIVA-PLUS TABS	74	nortriptyline hcl CAPS	20	NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	86
nizatidine CAPS	83	nortriptyline hcl SOLN	20	NUVIGIL (Use armodafinil)	3
NORDITROPIN FLEXPEN SOPN 30 MG/3ML	59	NORVASC TABS (Use amlodipine besylate)	44	NYSTATIN (Use nystatin (mouth-throat))	74
NORDITROPIN FLEXPEN SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	59	NORVIR PACK	41	nystatin (mouth-throat)	74
norelgestromin-ethinyl estradiol ...	48	NORVIR TABS (Use ritonavir)	41	nystatin (topical) CREA	52
norethin acet & estrad-fe CAPS ...	47	NOVA MAX PLUS KETONE TEST 57		nystatin (topical) OINT	52
norethin acet & estrad-fe CHEW ..	47	NOVAVAX COVID-19 VACCINE SUSP	86	nystatin (topical) POWD EX	52
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	47	NOVAVAX COVID-19 VACCINE SUSY	86	nystatin TABS	24
norethindrone & eth estradiol	47	NOVOLIN 70/30 FLEXPEN SUPN 22		nystatin-triamcinolone CREA	52
norethindrone & ethinyl estradiol-fe 47		NOVOLIN 70/30 SUSP	22	nystatin-triamcinolone OINT	52
norethindrone (contraceptive)	48	NOVOLIN N FLEXPEN SUPN	22	octreotide acetate SOLN	60
norethindrone acet & eth estra TABS 47		NOVOLIN N SUSP	22	OCUFLOX (Use ofloxacin (ophth)) 76	
norethindrone acetate TABS	79	NOVOLIN R FLEXPEN SOPN IJ ..	22	ODEFSEY	41
norethindrone acetate-ethinyl estradiol	60	NOVOLIN R SOLN IJ	22	ODOMZO	34
norethindrone acetate-ethinyl estradiol-fe	47	NOVOLOG FLEXPEN SOPN	22	OFEV 100 MG, 150 MG (Use nintedanib esylate)	81
norethindrone-eth estradiol (triphasic)	47	NOVOLOG MIX 70/30 FLEXPEN SUPN	22	ofloxacin (ophth)	76
		NOVOLOG MIX 70/30 SUSP	22	ofloxacin (otic)	78
				ofloxacin 300 MG, 400 MG	61

OGIVRI	34	OMNIPOD DASH PDM (GEN 4) KIT .	69	orphenadrine citrate TB12	75
olanzapine SOLR	39	OMNIPOD DASH PODS (GEN 4)		oseltamivir phosphate CAPS	42
olanzapine TABS 2.5 MG, 5 MG ...	39	MISC	69	oseltamivir phosphate SUSR	42
olanzapine TABS 7.5 MG, 10 MG, 15		OMNIPOD POD PALS	69	OSPHENA	59
MG, 20 MG	39	ondansetron hcl SOLN IJ 4 MG/2ML .	24	OTEZLA TABS	6
olanzapine TBDP 20 MG	39	ondansetron hcl SOLN PO 4		OTEZLA TBPk	6
olanzapine TBDP 5 MG, 10 MG, 15		MG/5ML	23	OTEZLA XR TB24 PO 75 MG	6
MG	39	ondansetron hcl SOSY	24	OTEZLA/OTEZLA XR INITIATION	
olmesartan medoxomil	28	ondansetron hcl TABS 24 MG	24	PK TBPk	6
olmesartan medoxomil-amlodipine-		ondansetron hcl TABS 4 MG	24	OTOVEL (Use ciprofloxacin-	
hydrochlorothiazide	29	ondansetron hcl TABS 8 MG	24	fluocinolone acetonide)	78
olmesartan medoxomil-		ondansetron TBDP 4 MG	24	OVIDE (Use malathion)	57
hydrochlorothiazide	29	ondansetron TBDP 8 MG	24	oxacillin sodium IJ 1 GM	79
olopatadine hcl (nasal)	75	ONE VITE WOMENS PLUS TABS	74	oxaliplatin SOLN 50 MG/10ML, 100	
olopatadine hcl 0.1 %	77	ONE VITE WOMENS TABS	74	MG/20ML	33
olopatadine hcl 0.2 %	77	ONETOUCH DELICA SAFETY		oxaprozin TABS	5
omega-3-acid ethyl esters	26	LANCING	69	oxazepam CAPS	11
omeprazole CPDR	83	ONFI SUSP (Use clobazam)	16	oxcarbazepine SUSP	17
omeprazole magnesium CPDR	83	ONFI TABS (Use clobazam)	16	oxcarbazepine TABS 150 MG, 300	
omeprazole TBEC	83	ONGLYZA 5 MG (Use saxagliptin		MG	17
omeprazole-sodium bicarbonate		hcl)	21	oxcarbazepine TABS 600 MG	17
CAPS 1100 MG-20 MG	83	OPILL	48	oxiconazole nitrate CREA	52
OMNIFLEX DIAPHRAGM	67	OPSUMIT 10 MG (Use macitentan)	45	OXISTAT CREA (Use oxiconazole	
OMNIPOD 5 DEXG7G6 INTRO GEN		ORENITRAM TBCR	45	nitrate)	52
5 KIT	68	ORFADIN CAPS (Use nitisinone) .	60	OXISTAT LOTN	52
OMNIPOD 5 DEXG7G6 PODS GEN		ORILISSA	59	oxybutynin chloride SOLN	84
5 MISC	68	ORKAMBI PACK	81	oxybutynin chloride TABS 5 MG ...	84
OMNIPOD 5 LIBRE INTRO KIT ...	68	ORKAMBI TABS	81	oxybutynin chloride TB24	84
OMNIPOD 5 LIBRE PODS MISC .	68	ORLADEYO	64	oxycodone hcl T12A 10 MG, 20 MG,	
OMNIPOD CLASSIC PODS (GEN 3)				40 MG	8
MISC	69			oxycodone hcl TABS	8
OMNIPOD DASH INTRO (GEN 4)				oxycodone w/ acetaminophen TABS	
KIT	69				

325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	9	bromocriptine mesylate)	38	PEN NEEDLES	69
oxycodone w/ acetaminophen TABS 325 MG-2.5 MG	8	PARLODEL TABS (Use bromocriptine mesylate)	38	PENBRAYA	84
oxymorphone hcl TABS	8	PARNATE (Use tranlycypromine sulfate)	19	penciclovir	54
oxymorphone hcl TB12 40 MG	8	paroxetine hcl SUSP	19	penicillamine CAPS	72
oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG 8		paroxetine hcl TABS	19	penicillamine TABS	72
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	22	paroxetine hcl TB24	19	PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML ..	78
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	22	PAXIL CR TB24 (Use paroxetine hcl)	19	penicillin g potassium 5000000 UNIT 78	
OZEMPIC (2 MG/DOSE) SOPN ...	22	PAXIL SUSP (Use paroxetine hcl) ..	19	penicillin g sodium	78
OZEMPIC TABS 1.5 MG, 4 MG, 9 MG	22	PAXIL TABS (Use paroxetine hcl) ..	19	penicillin v potassium SOLR	78
paclitaxel 100 MG/16.7ML, 150 MG/25ML	37	PAXLOVID (150/100)	42	penicillin v potassium TABS	78
paclitaxel protein-bound particles ..	37	PAXLOVID (300/100)	42	PENMENVY SUSR IM	84
paliperidone	39	pazopanib hcl	36	PENTACEL	82
palonosetron hcl SOLN	24	PEDIAPRED SOLN (Use prednisolone sodium phosphate) ..	48	pentazocine w/ naloxone hcl	9
PAMELOR CAPS (Use nortriptyline hcl)	20	PEDIARIX SUSY	82	PENTIPS	69
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	59	pediatric multivitamins w/fl CHEW ..	74	PENTIPS GENERIC PEN NEEDLES	69
PAMIDRONATE DISODIUM SOLN 59		PEDVAXHIB SUSP 7.5 MCG/0.5ML .	84	pentoxifylline	64
PANRETIN	52	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	66	PEPCID TABS (Use famotidine) ...	83
pantoprazole sodium TBEC 20 MG 83		peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 236 GM 66		perampanel TABS 2 MG	15
pantoprazole sodium TBEC 40 MG 83		peg 3350-potassium chloride-sod bicarbonate-sod chloride	66	perampanel TABS 4 MG	15
paricalcitol CAPS	60	PEGASYS SOLN	42	perampanel TABS 6 MG	15
paricalcitol SOLN	60	PEGASYS SOSY	42	perampanel TABS 8 MG, 10 MG, 12 MG	15
PARLODEL CAPS (Use		pemetrexed disodium SOLR 500 MG 33		PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (Use oxycodone w/ acetaminophen)	9
		PEN NEEDLE/5-BEVEL TIP	69	PERCOCET TABS 325 MG-2.5 MG (Use oxycodone w/ acetaminophen) .	9
				PERFOROMIST NEBU (Use formoterol fumarate)	13

PERIDEX (Use chlorhexidine gluconate (mouth-throat))	74	pilocarpine hcl (oral)	74	PNEUMOVAX 23 SOLN	84
perindopril erbumine 2 MG, 8 MG	27	pilocarpine hcl SOLN 1 %, 2 %, 4 %	76	PNEUMOVAX 23 SOSY	84
perindopril erbumine 4 MG	27	pimecrolimus	56	podofilox SOLN	56
PERMETHRIN CREA 5 % (Use permethrin)	57	pimozide	80	polymyxin b-trimethoprim	76
permethrin CREA	57	pindolol TABS	43	pomalidomide 1 MG, 2 MG, 3 MG, 4 MG	35
permethrin LIQD EX	57	pioglitazone hcl	23	POMALYST 1 MG, 2 MG, 3 MG, 4 MG (Use pomalidomide)	35
perphenazine TABS	40	pioglitazone hcl-glimepiride	21	posaconazole SUSP	25
perphenazine-amitriptyline	79	pioglitazone hcl-metformin hcl TABS	21	posaconazole TBEC	25
PERSERIS PRSY	39	PIP PEN NEEDLES 31G X 5MM	69	POTASSIUM ACETATE SOLN (Use potassium acetate)	72
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	86	PIP PEN NEEDLES 32G X 4MM	69	potassium acetate SOLN 2 MEQ/ML	72
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	86	PIQRAY (200 MG DAILY DOSE)	36	potassium bicarbonate TBEF	72
phenazopyridine hcl TABS 100 MG, 200 MG	63	PIQRAY (250 MG DAILY DOSE)	36	potassium chloride CPCR	72
phendimetrazine tartrate TABS	1	PIQRAY (300 MG DAILY DOSE)	36	potassium chloride in dextrose 20 MEQ/L	72
phenelzine sulfate	19	pirfenidone CAPS	81	potassium chloride microencapsulated crystals er	72
phenobarbital ELIX	65	pirfenidone TABS 267 MG, 801 MG	81	potassium chloride PACK PO 20 MEQ	72
phenobarbital TABS	65	pirfenidone TABS 534 MG	81	POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (Use potassium chloride)	72
phenoxybenzamine hcl	27	piroxicam CAPS	5	potassium chloride SOLN PO 10 %, 10 %	72
phentermine hcl CAPS	1	PLAQUENIL (Use hydroxychloroquine sulfate)	32	potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ	72
phenytoin CHEW	18	PLASMA-LYTE 148	72	potassium citrate (alkalinizer) TBCR	63
phenytoin sodium extended 100 MG, 200 MG, 300 MG	18	PLASMA-LYTE A (Use electrolyte-a)	72	POTASSIUM CL IN DEXTROSE 5% 20 MEQ/L (Use potassium chloride in dextrose)	72
phenytoin sodium SOLN	18	PLAVIX 75 MG (Use clopidogrel bisulfate)	64	POTASSIUM PHOSPHATES (Use	
phenytoin SUSP	18	PLEGRIDY SOAJ	80		
PHEXX	87	PLEGRIDY SOSY IM	80		
PHEXXI	87	PLEGRIDY STARTER PACK SOAJ	80		
PHOTOFRIN	37	PLEGRIDY STARTER PACK SOSY SC	80		
PIFELTRO	41				

potassium phosphates)72	prednisone SOLN49	PRENATRYL TABS75
potassium phosphates 45 MMOLE/15ML72	prednisone TABS 49	PREVACID 24HR CPDR (Use lansoprazole)83
POTASSIUM PHOSPHATES(66 MEQ K) (Use potassium phosphates)72	prednisone TBPK 49	PREVACID CPDR 30 MG (Use lansoprazole)83
PR BENZOYL PEROXIDE WASH LIQD50	pregabalin (once-daily) 330 MG ...80	PREVNAR 20 84
PRADAXA CAPS (Use dabigatran etexilate mesylate)15	pregabalin (once-daily) 82.5 MG, 165 MG 80	PREZCOBIX41
pralatrexate 20 MG/ML33	pregabalin CAPS 225 MG, 300 MG 17	PREZISTA SUSP41
pramipexole dihydrochloride TABS 0.125 MG38	pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ...17	PREZISTA TABS 600 MG (Use darunavir)41
pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG38	pregabalin SOLN17	PREZISTA TABS 75 MG, 150 MG 41
prasugrel hcl64	PREHEVBRIO86	PREZISTA TABS 800 MG (Use darunavir)41
pravastatin sodium27	PREMARIN87	PRIFTIN32
praziquantel10	PREMARIN SOLR61	PRIMAQUINE PHOSPHATE TABS (Use primaquine phosphate)32
prazosin hcl CAPS28	PREMARIN TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (Use estrogens, conjugated)61	primaquine phosphate TABS32
PRECISION XTRA KETONE57	PREMPHASE60	primidone 50 MG, 250 MG17
PRED FORTE (Use prednisolone acetate (ophth))77	PREMPRO61	PRIORIX SUSR86
PRED MILD77	PRENATAL ONE DAILY TABS ...75	PRISTIQ (Use desvenlafaxine succinate)20
prednisolone acetate (ophth)77	PRENATAL PLUS TABS75	probenecid64
PREDNISOLONE SODIUM PHOSPHATE77	PRENATAL PLUS VITAMIN/MINERAL TABS75	procainamide hcl SOLN 500 MG/ML . 11
prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML48	PRENATAL TABS75	PROCARDIA XL TB24 (Use nifedipine)44
prednisolone sodium phosphate TBDP49	PRENATAL VITAMIN AND MINERAL TABS75	prochlorperazine40
prednisolone SOLN49	PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG- 4000 UNIT-30 UNIT75	prochlorperazine maleate TABS ...40
prednisolone TABS49	PRENATRIX TABS75	PROCTOCORT (Use hydrocortisone acetate (rectal))10
		progesterone CAPS79
		PROGLYCEM (Use diazoxide) ...21
		PROGRAF CAPS (Use tacrolimus)

73	pantoprazole sodium)83	QC PRENATAL TABS75
PROGRAF PACK73	protriptyline hcl20	QC UNIFINE PENTIPS69
PROGRAF SOLN 5 MG/ML (Use tacrolimus)73	PROVENTIL HFA AERS (Use albuterol sulfate)13	QUADRACEL SUSP82
PROLASTIN-C SOLN81	PROVERA 5 MG, 10 MG (Use medroxyprogesterone acetate)79	QUADRACEL SUSY82
PROLENSA (Use bromfenac sodium (ophth))77	PROVIGIL 100 MG (Use modafinil) .3	QUALAQUIN CAPS (Use quinine sulfate)32
PROLEUKIN37	PROVIGIL 200 MG (Use modafinil) .3	QUDEXY XR CS24 (Use topiramate) 17
PROLIA SOSY59	PROZAC CAPS (Use fluoxetine hcl) .19	QUESTRAN LIGHT POWD (Use cholestyramine light)26
PROMACTA PACK 12.5 MG, 25 MG (Use eltrombopag olamine)64	prucalopride succinate61	QUESTRAN PACK (Use cholestyramine)26
PROMACTA TABS 12.5 MG, 25 MG (Use eltrombopag olamine)64	PRUDOXIN (Use doxepin hcl (antipruritic))53	QUESTRAN POWD (Use cholestyramine)26
PROMACTA TABS 50 MG, 75 MG (Use eltrombopag olamine)64	PULMICORT FLEXHALER AEPB .12	quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG39
promethazine hcl SUPP 12.5 MG, 25 MG25	PULMICORT SUSP (Use budesonide (inhalation))12	quetiapine fumarate TB2439
promethazine hcl SUPP 50 MG ...25	PULMOSAL NEBU 7 % (Use sodium chloride (inhalant))49	QUICK TOUCH INSULIN PEN NEEDLE69
promethazine hcl TABS25	PULMOZYME81	quinapril hcl 20 MG, 40 MG27
PROMETRIUM CAPS (Use progesterone)79	PURE COMFORT SAFETY PEN NEEDLE69	quinapril hcl 5 MG, 10 MG27
propafenone hcl CP1211	pyrazinamide32	quinapril-hydrochlorothiazide 12.5 MG-10 MG29
propafenone hcl TABS11	PYRIDIDIUM TABS (Use phenazopyridine hcl)63	quinapril-hydrochlorothiazide 12.5 MG-20 MG29
proparacaine hcl76	pyridostigmine bromide SOLN PO .32	quinapril-hydrochlorothiazide 25 MG-20 MG29
propranolol hcl CP2443	pyridostigmine bromide TABS 60 MG32	quinidine sulfate TABS11
propranolol hcl SOLN IV 1 MG/ML 43	pyridostigmine bromide TBCR32	quinine sulfate CAPS 324 MG32
propranolol hcl TABS43	pyrimethamine32	QVAR REDHALER12
propylthiouracil82	PYZCHIVA 130 MG/26ML62	rabeprazole sodium TBEC83
PROQUAD SUSR86	PYZCHIVA 45 MG/0.5ML53	raloxifene hcl59
PROSCAR (Use finasteride)63	PYZCHIVA 90 MG/ML53	ramelteon65
PROTONIX TBEC 20 MG (Use pantoprazole sodium)83	PYZCHIVA SC 45 MG/0.5ML53	
PROTONIX TBEC 40 MG (Use		

ramipril CAPS	27	RELION TRUE METRIX TEST STRIPS STRP	57	RETROVIR SOLN	41
ranitidine hcl TABS 150 MG	83	RELPAK (Use eletriptan hydrobromide)	71	RETROVIR SYRP (Use zidovudine) .	41
ranolazine TB12 1000 MG	10	REMERON SOLTAB TBDP (Use mirtazapine)	19	REVATIO SOLN (Use sildenafil citrate (pulmonary hypertension)) .	45
ranolazine TB12 500 MG	10	REMERON TABS 15 MG, 30 MG (Use mirtazapine)	19	REVATIO SUSR (Use sildenafil citrate (pulmonary hypertension)) .	45
RAPAFLO (Use silodosin)	63	RENFLEXIS	62	REVATIO TABS (Use sildenafil citrate (pulmonary hypertension)) .	46
RAPAMUNE TABS (Use sirolimus) 73		RENVELA PACK (Use sevelamer carbonate)	63	REVLIMID (Use lenalidomide)	73
rasagiline mesylate	38	RENVELA TABS (Use sevelamer carbonate)	63	REXULTI	40
RAYA SURE PEN NEEDLE	69	repaglinide 0.5 MG, 1 MG	23	REYATAZ CAPS 200 MG (Use atazanavir sulfate)	41
REALITY LATEX CONDOMS MISC .	67	repaglinide 2 MG	23	REYATAZ CAPS 300 MG (Use atazanavir sulfate)	41
REALITY LATEX/ULTRA TEXTURED DEVI	67	REPATHA PUSHTRONEX SYSTEM SOCT	27	REZVOGLAR KWIKPEN	22
REALITY LATEX/ULTRA THIN DEVI	67	REPATHA SOSY	27	ribavirin (hepatitis c) CAPS	42
REBIF REBIDOSE SOAJ	80	REPATHA SURECLICK SOAJ	27	ribavirin (hepatitis c) TABS 200 MG	42
REBIF REBIDOSE TITRATION PACK SOAJ	80	RESTASIS EMUL (Use cyclosporine (ophth))	76	RIDAURA	4
REBIF SOSY	80	RESTORIL (Use temazepam)	65	rifabutin	32
REBIF TITRATION PACK SOSY ..	80	RETACRIT	64	RIFADIN SOLR (Use rifampin)	32
RECLAST SOLN (Use zoledronic acid)	59	RETIN-A CREA (Use tretinoin)	50	rifampin CAPS	32
RECOMBIVAX HB SUSP	86	RETIN-A GEL (Use tretinoin)	50	rifampin SOLR	32
RECOMBIVAX HB SUSY	86	RETIN-A MICRO 0.04 % (Use tretinoin microsphere)	50	rilpivirine hcl 25 MG	41
RECTIV (Use nitroglycerin (intra-anal))	10	RETIN-A MICRO 0.1 % (Use tretinoin microsphere)	50	riluzole TABS	76
REGLAN TABS (Use metoclopramide hcl)	62	RETIN-A MICRO PUMP (Use tretinoin microsphere)	50	rimantadine hydrochloride TABS ..	43
RELENZA DISKHALER	43	RETIN-A MICRO PUMP 0.1 % (Use tretinoin microsphere)	50	ringer's	72
RELEVIA TABS	75	RETROVIR CAPS (Use zidovudine) .		ringer's irrigation	73
RELION KETONE TEST STRP ...	57			RINVOQ TB24	3
RELION LANCET DEVICES 30G .	69			risedronate sodium TABS 150 MG	59
RELION LANCETS	69				

risedronate sodium TABS 35 MG ..59	ROBINUL-FORTE TABS (Use glycopyrrolate)83	SALAGEN (Use pilocarpine hcl (oral))74
risedronate sodium TABS 5 MG, 30 MG59	ROCALTROL CAPS (Use calcitriol) 60	salsalate6
risedronate sodium TBEC59	ROCALTROL SOLN PO (Use calcitriol)60	SAMSCA TABS PO (Use tolvaptan (hyponatremia))60
RISPERDAL CONSTA (Use risperidone microspheres)39	roflumilast12	SANDIMMUNE CAPS (Use cyclosporine)73
RISPERDAL SOLN (Use risperidone)39	romidepsin SOLR36	SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (Use octreotide acetate)60
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use risperidone) 39	ropinirole hydrochloride TABS38	SANTYL OINT56
risperidone microspheres39	ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG38	SAPHRIS 2.5 MG (Use asenapine maleate)39
risperidone SOLN39	ropinirole hydrochloride TB24 8 MG, 12 MG38	SAPHRIS 5 MG, 10 MG (Use asenapine maleate)39
risperidone TABS39	rosuvastatin calcium TABS27	SAVELLA TABS 12.5 MG, 25 MG, 50 MG, 100 MG (Use milnacipran hcl) 80
risperidone TBDP39	ROTARIX SUSP86	SAVELLA TITRATION PACK MISC (Use milnacipran hcl)79
RITALIN LA CP24 10 MG, 20 MG, 40 MG (Use methylphenidate hcl)3	ROTATEQ SOLN86	saxagliptin hcl21
RITALIN LA CP24 30 MG (Use methylphenidate hcl)3	ROXICODONE TABS 15 MG, 30 MG (Use oxycodone hcl)8	saxagliptin-metformin hcl 1000 MG-2.5 MG21
RITALIN TABS 10 MG, 20 MG (Use methylphenidate hcl)3	ROZEREM (Use ramelteon)65	saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG21
RITALIN TABS 5 MG (Use methylphenidate hcl)3	ROZLYTREK CAPS36	scopolamine24
ritonavir TABS41	RUBRACA36	SEASONIQUE (Use levonorgestrel-ethinyl estradiol (91-day))47
rivaroxaban SUSR 1 MG/ML14	rufinamide SUSP17	selegiline hcl CAPS38
rivaroxaban TABS 2.5 MG14	rufinamide TABS 200 MG17	selegiline hcl TABS38
rivastigmine tartrate CAPS79	rufinamide TABS 400 MG17	selenium sulfide LOTN 2.5 %53
rizatriptan benzoate TABS 10 MG .71	RUXIENCE34	SELZENTRY SOLN41
rizatriptan benzoate TABS 5 MG ..71	RYBELSUS TABS22	SELZENTRY TABS 150 MG (Use maraviroc)41
rizatriptan benzoate TBDP 10 MG .71	SABRIL PACK (Use vigabatrin) ...18	SELZENTRY TABS 300 MG (Use
rizatriptan benzoate TBDP 5 MG ..71	SABRIL TABS (Use vigabatrin) ...18	
ROBINUL TABS (Use glycopyrrolate)83	sacubitril-valsartan TABS45	
	SAFETY PEN NEEDLES70	
	SAFYRAL (Use drospirenone-ethinyl estradiol-levomefolate calcium)47	

maraviroc)41	SIMULECT73	sodium phenylbutyrate POWD60
SENSIPAR (Use cinacalcet hcl) ..60	simvastatin TABS27	sodium phenylbutyrate TABS60
SEREVENT DISKUS13	SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (Use carbidopa- levodopa)38	sodium polystyrene sulfonate POWD 74
SEROQUEL TABS (Use quetiapine fumarate)39	SINGULAIR CHEW (Use montelukast sodium)12	sodium polystyrene sulfonate SUSP PR 30 GM/120ML74
SEROQUEL XR TB24 (Use quetiapine fumarate)39	SINGULAIR PACK (Use montelukast sodium)12	sodium sulfate-potassium sulfate- magnesium sulfate66
sertraline hcl CONC19	SINGULAIR TABS (Use montelukast sodium)12	SOFOSBUVIR-VELPATASVIR TABS42
sertraline hcl TABS19	sirolimus TABS73	solifenacin succinate TABS84
sevelamer carbonate PACK63	SIRTURO32	SOLQUA21
sevelamer carbonate TABS63	sitagliptin phosphate 25 MG, 50 MG, 100 MG21	SOLU-CORTEF (Use hydrocortisone sod succinate)49
SHINGRIX86	sitagliptin phosphate-metformin hcl TABs21	SOLU-CORTEF 100 MG, 500 MG, 1000 MG49
SHINGRIX IM 50 MCG/0.5ML86	SKYRIZI PEN SOAJ53	SOLU-CORTEF 250 MG49
SIGNIFOR60	SKYRIZI SOCT62	SOLU-MEDROL 2 GM49
sildenafil citrate (pulmonary hypertension) SOLN46	SKYRIZI SOLN62	SOLU-MEDROL 500 MG, 1000 MG (Use methylprednisolone sod succ) 49
sildenafil citrate (pulmonary hypertension) SUSR46	SKYRIZI SOSY53	SOMA TABS (Use carisoprodol) ...75
sildenafil citrate (pulmonary hypertension) TABS46	SLYND48	sorafenib tosylate36
sildenafil citrate45	SM PRENATAL VITAMINS TABS .75	SORBITOL 3 %63
SILENOR (Use doxepin hcl (sleep)) . 65	SODIUM ACETATE SOLN (Use sodium acetate)71	SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML63
silodosin63	sodium acetate SOLN71	sotalol hcl (afib/af)44
SILVADENE (Use silver sulfadiazine)54	sodium chloride (gu irrigant) 0.9 % 63	sotalol hcl TABS 240 MG44
silver sulfadiazine54	sodium chloride (inhalant) NEBU 7 %49	sotalol hcl TABS 80 MG, 120 MG, 160 MG44
SIMLANDI (1 PEN) AJKT4	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %72	SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML86
SIMLANDI (1 SYRINGE) PSKT4	sodium citrate & citric acid63	SPIKEVAX SUSP86
SIMLANDI (2 PEN) AJKT4	sodium fluoride CHEW72	SPIKEVAX SUSY86
SIMLANDI (2 SYRINGE) PSKT4		
SIMPONI ARIA SOLN4		

spinosad	57	STRIBILD	41	sulindac TABS	5
SPIRIVA HANDIHALER CAPS IN (Use tiotropium bromide)	12	STRIVERDI RESPIMAT	13	SUMADAN WASH LIQD (Use sulfacetamide sodium w/ sulfur) ...	51
SPIRIVA RESPIMAT AERS IN	12	STROMECTOL (Use ivermectin) .	10	sumatriptan	71
spironolactone & hydrochlorothiazide	58	SUBLOCADE SOSY	9	sumatriptan succinate SOAJ	71
spironolactone TABS	58	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (Use buprenorphine hcl-naloxone hcl dihydrate)	9	sumatriptan succinate SOCT	71
SPORANOX CAPS (Use itraconazole)	25	SUBOXONE FILM SL 3 MG-12 MG (Use buprenorphine hcl-naloxone hcl dihydrate)	9	sumatriptan succinate SOLN 6 MG/0.5ML	71
SPORANOX SOLN (Use itraconazole)	25	sucralfate SUSP	83	sumatriptan succinate TABS	71
SPRAVATO (56 MG DOSE)	19	sucralfate TABS	83	sumatriptan-naproxen sodium	70
SPRAVATO (84 MG DOSE)	19	SULAR 8.5 MG, 17 MG, 34 MG (Use nisoldipine)	44	sunitinib malate	36
SSS 10-5 CREA 10 %-5 % (Use sulfacetamide sodium w/ sulfur) ...	50	sulconazole nitrate CREA	52	SUNOSI 150 MG	2
STALEVO 150 (Use carbidopa- levodopa-entacapone)	38	sulconazole nitrate SOLN	52	SUNOSI 75 MG	2
stannous fluoride CONC	74	sulfacetamide sodium (acne)	50	SUPREP BOWEL PREP KIT (Use sodium sulfate-potassium sulfate- magnesium sulfate)	66
STELARA 130 MG/26ML	62	sulfacetamide sodium (ophth) SOLN . 76		SURE COMFORT PEN NEEDLES 70	
STELARA SOLN 45 MG/0.5ML ...	53	sulfacetamide sodium w/ sulfur CREA 10 %-5 %	50	SUTENT (Use sunitinib malate) ..	36
STELARA SOSY 45 MG/0.5ML ...	53	sulfacetamide sodium w/ sulfur LIQD 10 %-5 %, 9 %-4.5 %	50	SYMBICORT (Use budesonide- formoterol fumarate dihydrate)	14
STELARA SOSY 90 MG/ML	53	sulfadiazine TABS	81	SYMFI (Use efavirenz-lamivudine- tenofovir disoproxil fumarate)	41
STENDRA (Use avanafil)	45	sulfamethoxazole-trimethoprim SOLN	30	SYMFI LO (Use efavirenz- lamivudine-tenofovir disoproxil fumarate)	41
STEQEYMA	62	sulfamethoxazole-trimethoprim SUSP	30	SYMTUZA	41
STEQEYMA 45 MG/0.5ML	53	sulfamethoxazole-trimethoprim TABS	30	SYNALAR CREA (Use fluocinolone acetonide)	56
STEQEYMA 90 MG/ML	53	SULFAMYLON CREA	54	SYNALAR OINT (Use fluocinolone acetonide)	56
STIOLTO RESPIMAT	13	sulfasalazine TABS	62	SYNAREL	59
STIVARGA	36	sulfasalazine TBEC	62	SYNJARDY TABS	21
STRATTERA 10 MG, 18 MG, 25 MG, 40 MG (Use atomoxetine hcl)	2			SYNJARDY XR TB24 1000 MG-10	
STRATTERA 60 MG, 80 MG, 100 MG (Use atomoxetine hcl)	2				
streptomycin sulfate SOLR	3				

MG, 1000 MG-12.5 MG, 1000 MG-5 MG 21	TARGRETIN (Use bexarotene) ... 37	temsirolimus 36
SYNJARDY XR TB24 1000 MG-25 MG 21	TASMAR (Use tolcapone) 38	TENIVAC SUSP 2 LFU-5 LFU 82
SYNTHROID TABS (Use levothyroxine sodium) 82	tavaborole 52	tenofovir disoproxil fumarate TABS 41
SYPRINE (Use trientine hcl) 72	TAYTULLA CAPS (Use norethin acet & estrad-fe) 47	TENORETIC 100 (Use atenolol & chlorthalidone) 29
TABLOID 33	tazarotene CREA 0.1 % 53	TENORETIC 50 (Use atenolol & chlorthalidone) 29
TACLONEX SUSP (Use calcipotriene-betamethasone dipropionate) 56	TAZORAC CREA 0.1 % (Use tazarotene) 53	TENORMIN TABS (Use atenolol) . 43
tacrolimus (topical) OINT 56	TAZVERIK 36	TEPADINA 15 MG (Use thiotepa) . 33
tacrolimus CAPS 73	TDVAX SUSP 82	terazosin hcl 28
tacrolimus SOLN 5 MG/ML 73	TECFIDERA CDPK (Use dimethyl fumarate) 80	terbinafine hcl TABS 24
tadalafil (pulmonary hypertension) TABS 46	TECFIDERA CPDR (Use dimethyl fumarate) 80	terbutaline sulfate SOLN 14
tadalafil 5 MG 45	TECHLITE PLUS PEN NEEDLES 70	terbutaline sulfate TABS 14
TAFINLAR CAPS 36	TEFLARO 400 MG, 600 MG (Use ceftaroline fosamil) 47	terconazole vaginal CREA 86
tafluprost 78	TEGRETOL SUSP (Use carbamazepine) 17	terconazole vaginal SUPP 86
TAGRISSO 40 MG 34	TEGRETOL TABS (Use carbamazepine) 17	teriflunomide 80
TAGRISSO 80 MG 34	TEGRETOL-XR TB12 100 MG, 400 MG (Use carbamazepine) 17	teriparatide SOPN 59
TAKHZYRO SOLN 64	TEGRETOL-XR TB12 200 MG (Use carbamazepine) 17	TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML 9
TAKHZYRO SOSY 64	TEKTRNA (Use aliskiren fumarate) 30	testosterone cypionate SOLN IM ... 9
TALZENNA 36	telmisartan 28	testosterone enanthate SOLN IM ... 9
TAMIFLU CAPS (Use oseltamivir phosphate) 43	telmisartan-amlodipine 29	TETANUS-DIPHTHERIA TOXOIDS TD SUSP 82
TAMIFLU SUSR (Use oseltamivir phosphate) 43	telmisartan-hydrochlorothiazide .. 29	tetrabenazine 80
tamoxifen citrate TABS 35	temazepam 65	tetracycline hcl CAPS 82
tamsulosin hcl 63	TEMODAR SOLR 33	THALOMID 50 MG, 100 MG, 200 MG 73
TARCEVA (Use erlotinib hcl) 34	temozolomide CAPS 33	theophylline ELIX 14
TARGRETIN (Use bexarotene (topical)) 52		theophylline SOLN 14
		theophylline TB12 14
		theophylline TB24 14

THERANATAL CORE NUTRITION TABS	75	tolcapone	38	topiramate TABS 50 MG	17
thioridazine hcl	40	TOLECTIN DS CAPS 400 MG (Use tolmetin sodium)	5	topotecan hcl SOLR	37
thiotepa 15 MG	33	tolmetin sodium CAPS	5	TOPROL XL TB24 200 MG (Use metoprolol succinate)	43
thiothixene	40	tolmetin sodium TABS 600 MG	6	TOPROL XL TB24 25 MG, 50 MG, 100 MG (Use metoprolol succinate) 43	
THYMOGLOBULIN	73	TOLSURA CAPS	25	toremifene citrate	35
THYROGEN 0.9 MG	57	tolterodine tartrate CP24	84	TORISEL (Use temsirolimus)	36
tiagabine hcl	18	tolterodine tartrate TABS	84	torsemide TABS	58
TIAZAC (Use diltiazem hcl extended release beads)	44	tolvaptan (hyponatremia) TABS PO 15 MG, 30 MG	60	TOVIAZ (Use fesoterodine fumarate)	84
ticagrelor 60 MG, 90 MG	64	tolvaptan TABS	60	TRACLEER TABS (Use bosentan) 45	
tigecycline	81	TOPAMAX SPRINKLE CPSP 15 MG (Use topiramate)	17	TRACLEER TBSO 32 MG (Use bosentan)	45
TIKOSYN (Use dofetilide)	11	TOPAMAX SPRINKLE CPSP 25 MG (Use topiramate)	17	tramadol hcl TABS 50 MG	8
timolol maleate (ophth) SOLG	76	TOPAMAX TABS 200 MG (Use topiramate)	17	tramadol hcl TB24	8
timolol maleate (ophth) SOLN	76	TOPAMAX TABS 25 MG, 100 MG (Use topiramate)	17	tramadol-acetaminophen	9
timolol maleate TABS	44	TOPAMAX TABS 50 MG (Use topiramate)	17	trandolapril 1 MG, 2 MG	27
tiotropium bromide CAPS IN 18 MCG	12	TOPICORT CREA 0.05 % (Use desoximetasone)	56	trandolapril 4 MG	27
TIVICAY TABS 50 MG	41	TOPICORT CREA 0.25 % (Use desoximetasone)	56	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	29
tizanidine hcl CAPS	75	TOPICORT GEL (Use desoximetasone)	56	trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	29
tizanidine hcl TABS	75	TOPICORT OINT 0.25 % (Use desoximetasone)	56	tranexamic acid SOLN 1000 MG/10ML	65
TOBI NEBU (Use tobramycin)	3	topiramate CPSP 15 MG	17	tranexamic acid TABS	65
tobramycin (ophth) SOLN	76	topiramate CPSP 25 MG	17	TRANSDERM SCOP 1 MG/3DAYS (Use scopolamine)	24
tobramycin NEBU	3	topiramate CS24	17	TRANSDERM-SCOP (Use scopolamine)	24
tobramycin-dexamethasone SUSP 77		topiramate TABS 200 MG	17	tranylcypromine sulfate	19
TODAY SPONGE MISC	86	topiramate TABS 25 MG, 100 MG	17	TRAVATAN Z SOLN (Use travoprost)	
tofacitinib citrate SOLN 1 MG/ML ...	3				
tofacitinib citrate TABS 5 MG, 10 MG 3					
tofacitinib citrate TB24 11 MG, 22 MG	3				

78	triamcinolone acetonide (topical)	TRIJARDY XR 1000 MG-5 MG-10
travoprost SOLN78	CREA 0.025 %56	MG, 1000 MG-5 MG-25 MG21
TRAZIMERA34	triamcinolone acetonide (topical)	TRIKAFTA TBPK81
trazodone hcl TABS19	CREA 0.1 %56	TRILEPTAL SUSP (Use
TRELEGY ELLIPTA14	triamcinolone acetonide (topical)	oxcarbazepine)18
TRELSTAR MIXJECT35	CREA 0.5 %56	TRILEPTAL TABS 150 MG, 300 MG
TREMFYA ONE-PRESS SOPN SC	triamcinolone acetonide (topical)	(Use oxcarbazepine)18
100 MG/ML53	LOTN 0.025 %56	TRILEPTAL TABS 600 MG (Use
TREMFYA PEN SOAJ 100 MG/ML	triamcinolone acetonide (topical)	oxcarbazepine)18
53	LOTN 0.1 %56	TRILIPIX (Use choline fenofibrate)
TREMFYA PEN SOAJ SC 200	triamcinolone acetonide (topical)	26
MG/2ML62	OINT 0.025 %, 0.1 %56	trimethobenzamide hcl CAPS24
TREMFYA SOLN IV62	triamcinolone acetonide (topical)	trimethoprim TABS30
TREMFYA SOSY 100 MG/ML53	OINT 0.5 %56	trimipramine maleate CAPS20
TREMFYA SOSY SC 200 MG/2ML	triamcinolone acetonide SUSP 40	TRINTELLIX19
62	MG/ML49	TRIUMEQ TABS41
TREMFYA-CD/UC INDUCTION	triamterene & hydrochlorothiazide	TROJAN BARESKIN DEVI67
SOAJ SC 200 MG/2ML62	CAPS 25 MG-37.5 MG58	TROJAN MAGNUM MISC67
treprostinil SOLN IJ45	triamterene & hydrochlorothiazide	TROJAN ULTRA THIN MISC67
TRESIBA FLEXTOUCH SOPN22	TABS58	TROJAN ULTRA
TRESIBA SOLN22	triamterene CAPS58	THIN/SPERMICIDAL MISC67
tretinoin (chemotherapy)37	triazolam65	TROJAN-ENZ LUBRICATED MISC
tretinoin CREA 0.025 %, 0.05 %, 0.1	TRIBENZOR (Use olmesartan	67
%51	medoxomil-amlodipine-	TROJAN-ENZ/SPERMICIDAL MISC .
tretinoin GEL 0.01 %, 0.025 %51	hydrochlorothiazide)29	67
tretinoin microsphere 0.1 %51	TRICARE TABS75	tropicamide SOLN 0.5 %76
TREXALL TABS 5 MG, 7.5 MG, 10	TRICOR TABS (Use fenofibrate) ..26	tropicamide SOLN 1 %76
MG, 15 MG33	trientine hcl 250 MG73	trospium chloride CP2484
TREXIMET (Use sumatriptan-	trifluoperazine hcl TABS40	trospium chloride TABS84
naproxen sodium)70	trifluridine76	TRUE COMFORT PEN NEEDLES
triamcinolone acetonide (mouth) ..74	trihexyphenidyl hcl SOLN37	70
triamcinolone acetonide (nasal)	trihexyphenidyl hcl TABS37	TRUE COMFORT PRO PEN
AERO76	TRIJARDY XR 1000 MG-2.5 MG-	NEEDLES70
	12.5 MG, 1000 MG-2.5 MG-5 MG .21	

TRUE COMFORT SAFETY PEN NEEDLE	70	TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (Use emtricitabine-tenofovir disoproxil fumarate)	41	UNIFINE OTC PEN NEEDLES ...	70
TRUE COVER DEVI	67	TRUVADA 200 MG-300 MG (Use emtricitabine-tenofovir disoproxil fumarate)	42	UNIFINE PENTIPS	70
TRUE METRIX BLOOD GLUCOSE TEST STRP	57	TRUXIMA	34	UNIFINE PROTECT PEN NEEDLE .	70
TRUE METRIX BLOOD GLUCOSE TEST STRP	58	TUKYSA	34	UNIFINE SAFECONTROL PEN NEEDLE	70
TRUE METRIX LEVEL 3 SOLN ...	69	TURALIO 125 MG	36	UPTRAVI TABS 200 MCG	46
TRUEPLUS PEN NEEDLES	70	TWINRIX SUSY	86	UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	46
TRULICITY	22	TWIRLA	48	UPTRAVI TITRATION TBPK	46
TRUMENBA 0.5 ML	84	TYBLUME CHEW	47	UROCIT-K 10 TBCR (Use potassium citrate (alkalinizer))	63
TRUSTEX COLOR CONDOMS + LUBE MISC	67	TYBOST	42	UROCIT-K 15 TBCR (Use potassium citrate (alkalinizer))	63
TRUSTEX LUB/RIBBED/STUDDED MISC	67	TYGACIL (Use tigecycline)	81	UROCIT-K 5 TBCR (Use potassium citrate (alkalinizer))	63
TRUSTEX LUB/SPERMICIDE EX ST MISC	67	TYKERB (Use lapatinib ditosylate) 36		UROXATRAL (Use alfuzosin hcl) .	63
TRUSTEX LUB/SPERMICIDE XL MISC	67	TYMLOS	59	URSO 250 TABS (Use ursodiol) ..	61
TRUSTEX LUBRICATED EX LARGE MISC	67	TYVASO REFILL KIT SOLN IN ...	45	URSO FORTE TABS (Use ursodiol) .	61
TRUSTEX LUBRICATED EXTRA ST MISC	68	TYVASO SOLN IN	45	ursodiol CAPS	61
TRUSTEX LUBRICATED MISC ...	68	TYVASO STARTER KIT SOLN IN	45	ursodiol TABS	61
TRUSTEX LUBRICATED/SPERMICIDE MISC	68	UBRELVY	70	UVADEX	37
TRUSTEX NATURAL CONDOMS + LUBE MISC	68	UCERIS (Use budesonide (intrarectal))	9	VABRINTY KIT SC 7.5 MG	35
TRUSTEX RIA LUB/SPERMICIDE MISC	68	UDENYCA ONBODY SOSY	64	VABRINTY SC 22.5 MG, 30 MG, 45 MG	35
TRUSTEX RIA LUBRICATED MISC .	68	UDENYCA SOAJ	65	VAGIFEM TABS (Use estradiol vaginal)	87
TRUSTEX-NONOXYNOL- 9/RIB/STUD MISC	68	UDENYCA SOSY	65	valacyclovir hcl 1 GM	42
		ULORIC (Use febuxostat)	63	valacyclovir hcl 500 MG	42
		ULTIGUARD SAFEPACK PEN NEEDLE	70	VALCYTE TABS (Use valganciclovir hcl)	42
		umeclidinium bromide 62.5 MCG/INH	12	valganciclovir hcl TABS	42
		umeclidinium-vilanterol	14		

VALIUM TABS (Use diazepam) ... 11	VASCEPA 1 GM (Use icosapent ethyl) 26	VERELAN PM CP24 (Use verapamil hcl) 44
valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML 18	VASERETIC 25 MG-10 MG (Use enalapril maleate & hydrochlorothiazide) 29	VERIFINE INSULIN PEN NEEDLE 70
valproic acid CAPS 18	VASOTEC TABS (Use enalapril maleate) 27	VERIFINE PLUS PEN NEEDLE .. 70
valrubicin 35	VAXELIS SUSP 82	VERZENIO 37
valsartan TABS 28	VAXELIS SUSY 82	VESICARE TABS (Use solifenacin succinate) 84
valsartan-hydrochlorothiazide 29	VAXNEUVANCE 84	VFEND TABS 200 MG (Use voriconazole) 25
VALSTAR (Use valrubicin) 35	VECAMEYL 29	VIAGRA (Use sildenafil citrate) ... 45
VALTOCO 10 MG DOSE LIQD 16	VECTIBIX 100 MG/5ML 34	VIBRAMYCIN CAPS (Use doxycycline hyclate) 82
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML 16	VECTICAL (Use calcitriol (topical)) 53	VICTOZA (Use liraglutide) 22
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML 16	VELCADE SOLR IJ (Use bortezomib) 37	VIDAZA SUSR (Use azacitidine) .. 33
VALTOCO 5 MG DOSE LIQD 16	VELETRI (Use epoprostenol sodium) 45	vigabatrin PACK 18
VALTREX 1 GM (Use valacyclovir hcl) 42	venlafaxine hcl CP24 20	vigabatrin TABS 18
VALTREX 500 MG (Use valacyclovir hcl) 42	venlafaxine hcl TABS 20	VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth)) 76
VANOCOCIN CAPS (Use vancomycin hcl) 30	venlafaxine hcl TB24 20	VIIBRYD TABS (Use vilazodone hcl) 19
vancomycin hcl CAPS 30	VENTOLIN HFA AERS (Use albuterol sulfate) 14	vilazodone hcl TABS 20
vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG 30	verapamil hcl CP24 100 MG, 200 MG, 300 MG 44	VIMPAT SOLN PO 10 MG/ML (Use lacosamide) 18
vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML . 30	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG 44	VIMPAT TABS (Use lacosamide) .. 18
VANOS CREA (Use fluocinonide) . 56	VERAPAMIL HCL ER CP24 (Use verapamil hcl) 44	vincristine sulfate 37
VAQTA 86	verapamil hcl TABS 44	vinorelbine tartrate 10 MG/ML 37
VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML 86	verapamil hcl TBCR 44	VIRACEPT TABS 250 MG 42
varenicline tartrate TABS 81	VEREGEN 51	VIRACEPT TABS 625 MG 42
varenicline tartrate TBPK 81	VERELAN CP24 (Use verapamil hcl) 44	VIREAD POWD 42
VARIVAX SUSR 86		VIREAD TABS (Use tenofovir disoproxil fumarate) 42
VARUBI (180 MG DOSE) TBPK .. 24		VIREAD TABS 150 MG, 200 MG,

250 MG	42	WESTAB PLUS TABS	75	XIFAXAN 550 MG	30
VISTARIL CAPS 25 MG (Use hydroxyzine pamoate)	11	WIDE-SEAL DIAPHRAGM 60	68	XIGDUO XR TB24 PO (Use dapagliflozin free base-metformin hcl)	21
VISTOGARD	23	WIDE-SEAL DIAPHRAGM 65	68	XIGDUO XR TB24 PO 1000 MG-2.5 MG	21
VITAMIN D2 TABS 400 UNIT	87	WIDE-SEAL DIAPHRAGM 70	68	XOPENEX HFA (Use levalbuterol tartrate)	14
VITATHELY WITH GINGER TABS 75	37	WIDE-SEAL DIAPHRAGM 75	68	XOSPATA	37
VITRAKVI CAPS	37	WIDE-SEAL DIAPHRAGM 80	68	XTANDI CAPS	35
VITRAKVI SOLN	37	WIDE-SEAL DIAPHRAGM 85	68	XTANDI TABS 40 MG	35
VIVELLE-DOT PTTW (Use estradiol) 61	23	WIDE-SEAL DIAPHRAGM 90	68	XTANDI TABS 80 MG	35
VIVITROL	23	WIDE-SEAL DIAPHRAGM 95	68	XULTOPHY	21
VIZIMPRO	34	XALATAN SOLN (Use latanoprost) 78	37	XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML ..	25
VORAXAZE	37	XALKORI CAPS	37	YASMIN 28 (Use drospirenone- ethinyl estradiol)	47
voriconazole TABS	25	XANAX TABS (Use alprazolam) ...	11	YAZ (Use drospirenone-ethinyl estradiol)	47
VOSEVI	42	XANAX XR TB24 (Use alprazolam) 11	14	YERVOY	34
VOTRIENT (Use pazopanib hcl) ..	37	XARELTO STARTER PACK TBPK 14	14	YESINTEK 130 MG/26ML	62
VYTORIN (Use ezetimibe- simvastatin)	26	XARELTO SUSR 1 MG/ML (Use rivaroxaban)	14	YESINTEK SOLN 45 MG/0.5ML ..	53
VYVANSE CAPS (Use lisdexamfetamine dimesylate)	1	XARELTO TABS 10 MG, 20 MG ..	14	YESINTEK SOSY 45 MG/0.5ML ..	53
VYVANSE CHEW (Use lisdexamfetamine dimesylate)	1	XARELTO TABS 15 MG	14	YESINTEK SOSY 90 MG/ML	53
warfarin sodium TABS	14	XARELTO TABS 2.5 MG (Use rivaroxaban)	14	YONSA	35
water for irrigation, sterile	73	XELJANZ SOLN 1 MG/ML (Use tofacitinib citrate)	3	YUFLYMA (1 PEN) AJKT 40 MG/0.4ML	4
WELCHOL PACK (Use colesevelam hcl)	26	XELJANZ TABS 5 MG, 10 MG (Use tofacitinib citrate)	3	YUFLYMA (1 PEN) AJKT 80 MG/0.8ML	4
WELCHOL TABS (Use colesevelam hcl)	26	XELJANZ XR TB24 11 MG, 22 MG (Use tofacitinib citrate)	3	YUFLYMA (2 PEN) AJKT	4
WELLBUTRIN SR TB12 (Use bupropion hcl)	19	XELODA (Use capecitabine)	33	YUFLYMA (2 SYRINGE) PSKT	4
WELLBUTRIN XL TB24 (Use bupropion hcl)	19	XENAZINE (Use tetrabenazine) ..	80	YUFLYMA-CD/UC/HS STARTER AJKT	4
		XHANCE EXHU	76		
		XIFAXAN 200 MG	30		

zafirlukast	12	ZESTORETIC (Use lisinopril & hydrochlorothiazide)	29	zolmitriptan SOLN	71
zaleplon 10 MG	65	ZESTRIL TABS (Use lisinopril)	27	zolmitriptan TABS	71
zaleplon 5 MG	65	ZETIA (Use ezetimibe)	27	zolmitriptan TBDP	71
ZALTRAP 100 MG/4ML	34	ZIAGEN SOLN (Use abacavir sulfate)	42	ZOLOFT CONC (Use sertraline hcl) 19	
ZANAFLEX TABS 4 MG (Use tizanidine hcl)	75	ZIANA (Use clindamycin phosphate-tretinoin)	51	ZOLOFT TABS (Use sertraline hcl) 19	
ZANOSAR	33	zidovudine CAPS	42	zolpidem tartrate TABS	65
ZARONTIN CAPS (Use ethosuximide)	18	zidovudine SYRP	42	zolpidem tartrate TBCR	65
ZARONTIN SOLN (Use ethosuximide)	18	zidovudine TABS	42	ZOMIG SOLN (Use zolmitriptan) ..	71
ZARXIO	65	zileuton TB12	12	ZONALON (Use doxepin hcl (antipruritic))	53
ZAVESCA (Use miglustat)	64	ZIOPTAN (Use tafluprost)	78	ZONEGRAN CAPS 25 MG, 100 MG (Use zonisamide)	18
ZEGERID CAPS 1100 MG-20 MG (Use omeprazole-sodium bicarbonate)	84	ziprasidone hcl	38	zonisamide CAPS	18
ZEGERID CAPS 1100 MG-40 MG (Use omeprazole-sodium bicarbonate)	84	ZIRABEV	34	ZONTIVITY	64
ZEJULA TABS	37	ZIRGAN GEL	76	ZORTRESS 0.25 MG, 0.5 MG, 0.75 MG (Use everolimus (immunosuppressant))	73
ZELBORAF	37	ZITHROMAX SUSR (Use azithromycin)	66	ZORTRESS 1 MG (Use everolimus (immunosuppressant))	73
ZEMPLAR CAPS 1 MCG, 2 MCG (Use paricalcitol)	60	ZITHROMAX TABS 250 MG (Use azithromycin)	66	ZOVIRAX CREA (Use acyclovir topical)	54
ZEMPLAR SOLN (Use paricalcitol) 60		ZITHROMAX TABS 500 MG (Use azithromycin)	66	ZOVIRAX OINT (Use acyclovir topical)	54
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	58	ZITHROMAX TRI-PAK TABS (Use azithromycin)	66	ZUBSOLV SUBL	9
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	58	ZITHROMAX Z-PAK TABS (Use azithromycin)	66	ZYDELIG	37
		ZOCOR TABS 10 MG, 20 MG, 40 MG (Use simvastatin)	27	ZYPREXA SOLR (Use olanzapine) 39	
		ZOLADEx 10.8 MG	35	ZYPREXA TABS 2.5 MG, 5 MG (Use olanzapine)	39
		ZOLADEx 3.6 MG	35	ZYPREXA TABS 7.5 MG, 10 MG, 15 MG, 20 MG (Use olanzapine)	39
		zoledronic acid SOLN 5 MG/100ML 59		ZYPREXA ZYDIS TBDP 20 MG (Use	
		ZOLINZA	37		

olanzapine)	39
ZYPREXA ZYDIS TBDP 5 MG, 10 MG, 15 MG (Use olanzapine)	39
ZYRTEC ALLERGY TABS (Use cetirizine hcl)	25
ZYTIGA 250 MG (Use abiraterone acetate)	35
ZYTIGA 500 MG (Use abiraterone acetate)	35
ZYVOX SUSR (Use linezolid)	31
ZYVOX TABS (Use linezolid)	31