

MEDICARE  
ADVANTAGE  
HMO



Kaiser Permanente Medicare Advantage (HMO) Part D Formulary

# 2018 Formulary

(List of covered drugs)

**PLEASE READ:**

THIS DOCUMENT CONTAINS INFORMATION ABOUT  
THE DRUGS WE COVER IN THESE PLANS.

Formulary ID #18150, Version 13

This formulary was updated on 10/25/2018. For more recent information or other questions, please contact Kaiser Permanente Medicare Member Services at **1-888-901-4600** or, for TTY users, **1-800-833-6388** or **711**, seven days a week, 8 a.m. to 8 p.m or visit [www.kp.org/wa/medicare](http://www.kp.org/wa/medicare).

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

When this drug list (formulary) refers to “we,” “us”, or “our,” it means Kaiser Permanente. When it refers to “plan” or “our plan,” it means Kaiser Permanente Medicare Advantage.

This document includes a list of the drugs (formulary) for our plan which is current as of October 25, 2018. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2019, and from time to time during the year.

## **What is the Kaiser Permanente Medicare Advantage Formulary?**

A formulary is a list of covered drugs selected by Kaiser Permanente in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Kaiser Permanente will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a Kaiser Permanente network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

## **Can the Formulary (drug list) change?**

Generally, if you are taking a drug on our 2018 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2018 coverage year except when a new, less expensive generic drug becomes available or when new adverse information about the safety or effectiveness of a drug is released. Other types of formulary changes, such as removing a drug from our formulary, will not affect members who are currently taking the drug. It will remain available at the same cost-sharing for those members taking it for the remainder of the coverage year. We feel it is important that you have continued access for the remainder of the coverage year to the formulary drugs that were available when you chose our plan, except for cases in which you can save additional money or we can ensure your safety.

If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 60 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 60-day supply of the drug. If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug’s manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug. The enclosed formulary is current as of October 25, 2018. To get updated information about the drugs covered by Kaiser Permanente, please contact us. Our contact information appears on the front and back cover pages. Kaiser Permanente will update print formularies in the event of mid-year non-maintenance formulary changes.

## How do I use the Formulary?

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

### Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, “Cardiovascular Agents”. If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

### Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 183. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

## What are generic drugs?

Kaiser Permanente covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

## Are there any restrictions on my coverage?

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

- **Prior Authorization:** Kaiser Permanente requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from Kaiser Permanente before you fill your prescriptions. If you don't get approval, our plan may not cover the drug.
- **Quantity Limits:** For certain drugs, Kaiser Permanente limits the amount of the drug that our plan will cover. For example, Kaiser Permanente provides 9 tablets per prescription for sumatriptan succinate tablets. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, Kaiser Permanente requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, Kaiser Permanente may not cover Drug B unless you try Drug A first. If Drug A does not work for you, our plan will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our Web site. We have posted on line documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date

we last updated the formulary, appears on the front and back cover pages.

You can ask Kaiser Permanente to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, “How do I request an exception to the Kaiser Permanente Medicare Advantage formulary?” on page iii for information about how to request an exception.

## **What if my drug is not on the Formulary?**

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that Kaiser Permanente does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by Kaiser Permanente. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by Kaiser Permanente.
- You can ask Kaiser Permanente to make an exception and cover your drug. See below for information about how to request an exception.

## **How do I request an exception to the Kaiser Permanente Medicare Advantage Formulary?**

You can ask Kaiser Permanente to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to cover a formulary drug at a lower cost-sharing level if this drug is not on the specialty tier. If approved this would lower the amount you must pay for your drug.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, Kaiser Permanente limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

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

You should contact us to ask us for an initial coverage decision for a formulary, tiering or utilization restriction exception. **When you request a formulary, tiering or utilization restriction exception you**

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

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

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

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, we will allow you to refill your prescription until we have provided you with at least 91 and up to 98-day transition supply, consistent with dispensing increment, (unless you have a prescription written for fewer days). We will cover more than one refill of these drugs for the first 90 days you are a member of our plan. If you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug (unless you have a prescription for fewer days) while you pursue a formulary exception.

Kaiser Permanente assures that members in transition have access to all Medicare Part D covered medications without an interruption in therapy.

### **For more information**

For more detailed information about your Kaiser Permanente Medicare Advantage prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about Kaiser Permanente Medicare Advantage, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

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

## **Kaiser Permanente Medicare Advantage Formulary**

The formulary below provides coverage information about the drugs covered by Kaiser Permanente Medicare Advantage. If you have trouble finding your drug in the list, turn to the Index that begins on page 183. The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., IMITREX) and generic drugs are listed in lower-case italics (e.g., *sumatriptan succinate*).

The second column of the chart lists the drug tier or coverage level. Kaiser Permanente covers all Medicare Part D allowable prescription drugs at six levels of coverage: Preferred Generic (Tier 1), Generic (Tier 2), Preferred Brand (Tier 3), Nonpreferred Brand (Tier 4), Specialty (Tier 5), and Injectable Part D Vaccines (Tier 6). To determine the coverage level you will need to determine the tier level (1, 2, 3, 4, 5, or 6) of your drug. Once you have found your drug, look in the “Tier” column to determine whether your drug is Tier 1 (Preferred Generic), Tier 2 (Generic), Tier 3 (Preferred Brand), Tier 4 (Nonpreferred Brand), Tier 5 (Specialty), or Tier 6 (Injectable Part D Vaccines). Once you have determined the drug tier, you can refer to your 2018 Summary of Benefits or Evidence of Coverage for information on the level of coverage.

The information in the Requirements/Limits column tells you if Kaiser Permanente has any special requirements for coverage of your drug.

**The following Utilization Management abbreviations may be found within the body of this document**  
**COVERAGE NOTES ABBREVIATIONS**

ABBREVIATION	DESCRIPTION	EXPLANATION
<b>Utilization Management Restrictions</b>		
PA	Prior Authorization Restriction	You (or your physician) are required to get prior authorization from Kaiser Permanente before you fill your prescription for this drug. Without prior approval, Kaiser Permanente may not cover this drug.
B/D	Prior Authorization Restriction for Part B vs Part D Determination	This drug may be eligible for payment under Medicare Part B or Part D. You (or your physician) are required to get prior authorization from Kaiser Permanente to determine that this drug is covered under Medicare Part D before you fill your prescription for this drug. Without prior approval, Kaiser Permanente may not cover this drug.
QL	Quantity Limit Restriction	Kaiser Permanente limits the amount of this drug that is covered per prescription, or within a specific time frame.
ST	Step Therapy Restriction	Before Kaiser Permanente will provide coverage for this drug, you must first try another drug(s) to treat your medical condition. This drug may only be covered if the other drug(s) does not work for you.

**The following additional coverage note abbreviations may be found within the body of this document**  
**OTHER SPECIAL REQUIREMENTS FOR COVERAGE**

ABBREVIATION	DESCRIPTION	EXPLANATION
*	Non-Mail Order Drug	Drugs <u>not</u> available via your mail order benefit are noted with asterisk (*) in the Requirements/Limits column of your formulary.
HI	Home Infusion Drug	This prescription drug is covered under our medical benefit. For more information, call Member Services at 1-888-901-4600, seven days a week, 8 a.m. to 8 p.m. TTY users should call 1-800-833-6388 or 711.

Drug Name	Drug Tier	Requirements/Limits
<b>Anti-infective Agents</b>		
<b>Anthelmintics</b>		
ALBENZA TABS 200MG	5	
BILTRICIDE TABS 600MG	3	
EMVERM CHEW 100MG	4	
<i>ivermectin tabs 3mg</i>	2	
<i>praziquantel tabs 600mg</i>	2	
STROMECTOL TABS 3MG	4	
<b>Antibacterials</b>		
ADOXA CAPS 150MG	4	
<i>amikacin sulfate inj 1gm/4ml</i>	1	HI
<i>amikacin sulfate inj 500mg/2ml</i>	1	HI
<i>amoxicillin/clavulanate potassium er tb12 1000mg; 62.5mg</i>	2	
<i>amoxicillin/clavulanate potassium chew 200mg; 28.5mg</i>	1	
<i>amoxicillin/clavulanate potassium chew 400mg; 57mg</i>	1	
<i>amoxicillin/clavulanate potassium susr 200mg/5ml; 28.5mg/5ml</i>	1	
<i>amoxicillin/clavulanate potassium susr 250mg/5ml; 62.5mg/5ml</i>	1	
<i>amoxicillin/clavulanate potassium susr 400mg/5ml; 57mg/5ml</i>	1	
<i>amoxicillin/clavulanate potassium susr 600mg/5ml; 42.9mg/5ml</i>	1	
<i>amoxicillin/clavulanate potassium tabs 250mg; 125mg</i>	1	
<i>amoxicillin/clavulanate potassium tabs 500mg; 125mg</i>	1	
<i>amoxicillin/clavulanate potassium tabs 875mg; 125mg</i>	1	
<i>amoxicillin caps 250mg</i>	1	
<i>amoxicillin caps 500mg</i>	1	
<i>amoxicillin chew 125mg</i>	1	
<i>amoxicillin chew 250mg</i>	1	
<i>amoxicillin susr 125mg/5ml</i>	1	
<i>amoxicillin susr 200mg/5ml</i>	1	
<i>amoxicillin susr 250mg/5ml</i>	1	
<i>amoxicillin susr 400mg/5ml</i>	1	
<i>amoxicillin tabs 500mg</i>	1	
<i>amoxicillin tabs 875mg</i>	1	
<i>ampicillin sodium inj 10gm</i>	1	HI; *
<i>ampicillin sodium inj 125mg</i>	1	HI
<i>ampicillin sodium inj 1gm</i>	1	HI; *
<i>ampicillin sodium inj 1gm</i>	1	HI
<i>ampicillin sodium inj 250mg</i>	1	HI
<i>ampicillin sodium inj 2gm</i>	1	HI
<i>ampicillin sodium inj 2gm</i>	1	HI; *
<i>ampicillin sodium inj 500mg</i>	1	HI
<i>ampicillin-sulbactam inj 10gm; 5gm</i>	2	HI; *
<i>ampicillin-sulbactam inj 10gm; 5gm</i>	2	HI; *
<i>ampicillin-sulbactam inj 1gm; 0.5gm</i>	2	HI
<i>ampicillin-sulbactam inj 1gm; 0.5gm</i>	2	HI
<i>ampicillin-sulbactam inj 2gm; 1gm</i>	2	HI

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document



Drug Name	Drug Tier	Requirements/Limits
<i>ampicillin caps 250mg</i>	2	
<i>ampicillin caps 500mg</i>	2	
<i>ampicillin susr 125mg/5ml</i>	2	
<i>ampicillin susr 250mg/5ml</i>	2	
AUGMENTIN ES-600 SUSR 600MG/5ML; 42.9MG/5ML	4	
AUGMENTIN XR TB12 1000MG; 62.5MG	4	
AUGMENTIN SUSR 125MG/5ML; 31.25MG/5ML	4	
AUGMENTIN SUSR 250MG/5ML; 62.5MG/5ML	4	
AUGMENTIN TABS 500MG; 125MG	4	
AUGMENTIN TABS 875MG; 125MG	4	
AVELOX ABC PACK TABS 400MG	4	
AVELOX INJ 400MG/250ML; 0.8%	3	HI; *
AVELOX TABS 400MG	4	
<i>avidoxy tabs 100mg</i>	1	
AVYCAZ INJ 0.5GM; 2GM	4	HI; *
AZACTAM IN ISO-OSMOTIC DEXTROSE INJ 1GM/50ML; 0	4	HI; *
AZACTAM IN ISO-OSMOTIC DEXTROSE INJ 2GM/50ML; 0	4	HI; *
AZACTAM INJ 1GM	4	HI
AZACTAM INJ 2GM	4	HI
<i>azithromycin inj 500mg</i>	1	HI; *
<i>azithromycin pack 1gm</i>	1	
<i>azithromycin susr 100mg/5ml</i>	1	
<i>azithromycin susr 200mg/5ml</i>	1	
<i>azithromycin tabs 250mg</i>	1	
<i>azithromycin tabs 250mg</i>	1	
<i>azithromycin tabs 500mg</i>	1	
<i>azithromycin tabs 500mg</i>	1	
<i>azithromycin tabs 600mg</i>	1	
<i>aztreonam inj 1gm</i>	2	HI
<i>aztreonam inj 2gm</i>	2	HI
AZULFIDINE EN-TABS TBEC 500MG	4	
AZULFIDINE TABS 500MG	4	
<i>baciim inj 50000unit</i>	1	
<i>bacitracin inj 50000unit</i>	1	
BACTOCILL IN DEXTROSE INJ 5%; 1GM/50ML	3	HI; *
BACTOCILL IN DEXTROSE INJ 5%; 2GM/50ML	3	HI; *
BACTRIM DS TABS 800MG; 160MG	4	
BACTRIM TABS 400MG; 80MG	4	
BAXDELA INJ 300MG	5	HI
BAXDELA TABS 450MG	5	
BETHKIS NEBU 300MG/4ML	5	PA
BIAXIN SUSR 250MG/5ML	4	
BIAXIN TABS 250MG	4	
BIAXIN TABS 500MG	4	
BICILLIN C-R INJ 300000UNIT/ML; 300000UNIT/ML	3	
BICILLIN C-R INJ 900000UNIT/2ML; 300000UNIT/2ML	3	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
BICILLIN L-A INJ 1200000UNIT/2ML	3	
BICILLIN L-A INJ 2400000UNIT/4ML	3	
BICILLIN L-A INJ 600000UNIT/ML	3	
CAYSTON SOLR 75MG	5	PA
CEDAX CAPS 400MG	4	
CEDAX SUSR 180MG/5ML	4	
<i>cefaclor er tb12 500mg</i>	2	
<i>cefaclor caps 250mg</i>	2	
<i>cefaclor caps 500mg</i>	2	
<i>cefaclor susr 125mg/5ml</i>	2	
<i>cefaclor susr 250mg/5ml</i>	2	
<i>cefaclor susr 375mg/5ml</i>	2	
<i>cefadroxil caps 500mg</i>	2	
<i>cefadroxil susr 250mg/5ml</i>	2	
<i>cefadroxil susr 500mg/5ml</i>	2	
<i>cefadroxil tabs 1gm</i>	2	
<i>cefazolin sodium/dextrose inj 1gm; 4%</i>	1	HI; *
<i>cefazolin sodium/dextrose inj 2gm; 3%</i>	1	HI; *
<i>cefazolin sodium inj 10gm</i>	1	HI
<i>cefazolin sodium inj 1gm/50ml; 4%</i>	1	HI; *
<i>cefazolin sodium inj 1gm</i>	1	HI; *
<i>cefazolin sodium inj 1gm</i>	1	HI
<i>cefazolin sodium inj 500mg</i>	1	HI
<i>cefazolin inj 2gm/100ml; 4%</i>	1	HI; *
<i>cefdinir caps 300mg</i>	2	
<i>cefdinir susr 125mg/5ml</i>	1	
<i>cefdinir susr 250mg/5ml</i>	1	
<i>cefepime/dextrose inj 1gm/50ml; 5%</i>	1	HI; *
<i>cefepime/dextrose inj 2gm/50ml; 5%</i>	1	HI; *
<i>cefepime inj 1gm/50ml</i>	1	HI; *
<i>cefepime inj 1gm</i>	1	HI
<i>cefepime inj 2gm/100ml</i>	1	HI; *
<i>cefepime inj 2gm</i>	1	HI
<i>cefixime susr 100mg/5ml</i>	1	
<i>cefixime susr 200mg/5ml</i>	1	
CEFOTAN INJ 1GM	4	HI
<i>cefotan inj 2gm</i>	1	HI
<i>cefotaxime sodium inj 10gm</i>	1	HI
<i>cefotaxime sodium inj 1gm</i>	1	HI
<i>cefotaxime sodium inj 2gm</i>	1	HI
<i>cefotaxime sodium inj 500mg</i>	1	HI
<i>cefotetan/dextrose inj 1gm; 3.58%</i>	1	HI; *
<i>cefotetan/dextrose inj 2gm; 2.08%</i>	1	HI; *
<i>cefotetan inj 10gm</i>	1	HI
<i>cefotetan inj 1gm</i>	1	HI
<i>cefotetan inj 2gm</i>	1	HI
<i>cefoxitin sodium inj 10gm</i>	1	HI
<i>cefoxitin sodium inj 1gm</i>	1	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>cefoxitin sodium inj 1gm; 4%</i>	1	HI; *
<i>cefoxitin sodium inj 2gm</i>	1	HI; *
<i>cefoxitin sodium inj 2gm; 2.2%</i>	1	HI; *
<i>cefpodoxime proxetil susr 100mg/5ml</i>	2	
<i>cefpodoxime proxetil susr 50mg/5ml</i>	2	
<i>cefpodoxime proxetil tabs 100mg</i>	2	
<i>cefpodoxime proxetil tabs 200mg</i>	2	
<i>cefprozil susr 125mg/5ml</i>	1	
<i>cefprozil susr 250mg/5ml</i>	1	
<i>cefprozil tabs 250mg</i>	2	
<i>cefprozil tabs 500mg</i>	2	
<i>ceftazidime/dextrose inj 1gm/50ml; 5%</i>	1	HI; *
<i>ceftazidime/dextrose inj 2gm/50ml; 5%</i>	1	HI; *
<i>ceftazidime inj 1gm</i>	1	HI
<i>ceftazidime inj 2gm</i>	1	HI
<i>ceftazidime inj 6gm</i>	1	HI
<i>ceftibuten caps 400mg</i>	2	
<i>ceftibuten susr 180mg/5ml</i>	2	
CEFTIN SUSR 125MG/5ML	3	
CEFTIN SUSR 250MG/5ML	3	
CEFTIN TABS 250MG	4	
CEFTIN TABS 500MG	4	
<i>ceftriaxone in iso-osmotic dextrose inj 20mg/ml; 0</i>	1	HI; *
<i>ceftriaxone in iso-osmotic dextrose inj 40mg/ml; 0</i>	1	HI; *
<i>ceftriaxone sodium inj 100gm</i>	1	HI
<i>ceftriaxone sodium inj 10gm</i>	1	HI; *
<i>ceftriaxone sodium inj 1gm</i>	1	HI; *
<i>ceftriaxone sodium inj 1gm</i>	1	HI; *
<i>ceftriaxone sodium inj 250mg</i>	1	HI
<i>ceftriaxone sodium inj 2gm</i>	1	HI; *
<i>ceftriaxone sodium inj 2gm</i>	1	HI; *
<i>ceftriaxone sodium inj 500mg</i>	1	HI
<i>ceftriaxone/dextrose inj 1gm; 3.74%</i>	1	HI; *
<i>ceftriaxone/dextrose inj 2gm; 2.22%</i>	1	HI; *
<i>cefuroxime axetil tabs 250mg</i>	1	
<i>cefuroxime axetil tabs 500mg</i>	1	
<i>cefuroxime sodium inj 1.5gm</i>	1	HI
<i>cefuroxime sodium inj 7.5gm</i>	1	HI
<i>cefuroxime sodium inj 750mg</i>	1	HI
<i>cephalexin caps 250mg</i>	1	
<i>cephalexin caps 500mg</i>	1	
<i>cephalexin caps 750mg</i>	2	
<i>cephalexin susr 125mg/5ml</i>	1	
<i>cephalexin susr 250mg/5ml</i>	1	
<i>cephalexin tabs 250mg</i>	1	
<i>cephalexin tabs 500mg</i>	1	
<i>chloramphenicol sodium succinate inj 1gm</i>	2	HI; *
CIPRO I.V.-IN D5W INJ 400MG/200ML; 5%	4	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
CIPRO XR TB24 1000MG; 0	4	
CIPRO XR TB24 500MG; 0	4	
<i>ciprofloxacin er tb24 1000mg; 0</i>	2	
<i>ciprofloxacin er tb24 500mg; 0</i>	2	
<i>ciprofloxacin hcl tabs 100mg</i>	1	
<i>ciprofloxacin hcl tabs 250mg</i>	1	
<i>ciprofloxacin hcl tabs 750mg</i>	1	
<i>ciprofloxacin hydrochloride tabs 500mg</i>	1	
<i>ciprofloxacin i.v.-in d5w inj 200mg/100ml; 5%</i>	1	HI; *
<i>ciprofloxacin i.v.-in d5w inj 400mg/200ml; 5%</i>	1	HI; *
<i>ciprofloxacin inj 200mg/20ml</i>	1	HI; *
<i>ciprofloxacin inj 400mg/40ml</i>	1	HI; *
<i>ciprofloxacin susr 250mg/5ml</i>	1	
<i>ciprofloxacin susr 500mg/5ml</i>	1	
CIPRO SUSR 500MG/5ML	4	
CIPRO SUSR 5GM/100ML	4	
CIPRO TABS 250MG	4	
CIPRO TABS 500MG	4	
CLAFORAN/D5W INJ 1GM/50ML; 5%	4	HI
CLAFORAN/D5W INJ 2GM/50ML; 5%	4	HI
CLAFORAN INJ 10GM	4	HI
CLAFORAN INJ 1GM	4	HI; *
CLAFORAN INJ 2GM	3	HI; *
CLAFORAN INJ 2GM	3	HI
CLAFORAN INJ 500MG	4	HI
<i>clarithromycin er tb24 500mg</i>	2	
<i>clarithromycin susr 125mg/5ml</i>	1	
<i>clarithromycin susr 250mg/5ml</i>	1	
<i>clarithromycin tabs 250mg</i>	1	
<i>clarithromycin tabs 500mg</i>	1	
CLEOCIN IN D5W INJ 300MG/50ML; 5%	4	HI; *
CLEOCIN IN D5W INJ 600MG/50ML; 5%	4	HI; *
CLEOCIN IN D5W INJ 900MG/50ML; 5%	4	HI; *
CLEOCIN PEDIATRIC GRANULES SOLR 75MG/5ML	4	
CLEOCIN PHOSPHATE INJ 300MG/2ML	4	HI
CLEOCIN PHOSPHATE INJ 300MG/2ML	4	HI; *
CLEOCIN PHOSPHATE INJ 600MG/4ML	4	HI; *
CLEOCIN PHOSPHATE INJ 600MG/4ML	4	HI
CLEOCIN PHOSPHATE INJ 600MG/50ML; 5%	4	HI; *
CLEOCIN PHOSPHATE INJ 900MG/50ML; 5%	4	HI; *
CLEOCIN PHOSPHATE INJ 900MG/6ML	4	HI; *
CLEOCIN PHOSPHATE INJ 900MG/6ML	4	HI
CLEOCIN PHOSPHATE INJ 9GM/60ML	4	HI
CLEOCIN CAPS 150MG	4	
CLEOCIN CAPS 300MG	4	
CLEOCIN CAPS 75MG	4	
<i>clindamycin hcl caps 150mg</i>	1	
<i>clindamycin hcl caps 300mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin hcl caps 75mg</i>	1	
<i>clindamycin hydrochloride caps 150mg</i>	1	
<i>clindamycin palmitate hcl solr 75mg/5ml</i>	1	
<i>clindamycin phosphate add-vantage inj 900mg/6ml</i>	1	HI; *
<i>clindamycin phosphate in d5w inj 300mg/50ml; 5%</i>	1	HI; *
<i>clindamycin phosphate in d5w inj 600mg/50ml; 5%</i>	1	HI; *
<i>clindamycin phosphate in d5w inj 900mg/50ml; 5%</i>	1	HI; *
<i>clindamycin phosphate inj 150mg/ml</i>	1	HI
<i>clindamycin phosphate inj 150mg/ml</i>	1	HI
<i>clindamycin phosphate inj 150mg/ml</i>	1	HI; *
<i>clindamycin phosphate inj 300mg/2ml</i>	1	HI
<i>clindamycin phosphate inj 600mg/4ml</i>	1	HI
<i>clindamycin phosphate inj 900mg/6ml</i>	1	HI
CLINDAMYCIN/SODIUM CHLORIDE INJ 300MG/50ML; 4 0.9%	4	HI
CLINDAMYCIN/SODIUM CHLORIDE INJ 600MG/50ML; 4 0.9%	4	HI
CLINDAMYCIN/SODIUM CHLORIDE INJ 900MG/50ML; 4 0.9%	4	HI
<i>clindamycin inj 900mg/6ml</i>	1	HI; *
<i>colistimethate sodium inj 150mg</i>	1	HI
COLY-MYCIN M INJ 150MG	4	HI
CUBICIN INJ 500MG	5	HI; *
DALVANCE INJ 500MG	5	HI; *
DAPTOMYCIN INJ 350MG	5	HI
<i>daptomycin inj 500mg</i>	2	HI; *
DAXBIA CAPS 333MG	4	
<i>demeclocycline hcl tabs 150mg</i>	2	
<i>demeclocycline hcl tabs 300mg</i>	2	
<i>dicloxacillin sodium caps 250mg</i>	1	
<i>dicloxacillin sodium caps 500mg</i>	1	
DIFICID TABS 200MG	5	
DORIBAX INJ 250MG	4	HI; *
DORIBAX INJ 500MG	4	HI; *
<i>doripenem inj 250mg</i>	2	HI; *
<i>doripenem inj 500mg</i>	2	HI; *
DORYX MPC TBEC 120MG	4	
DORYX TBEC 200MG	4	
DORYX TBEC 50MG	4	
<i>doxy 100 inj 100mg</i>	1	HI; *
<i>doxycycline hyclate dr tbec 100mg</i>	2	
<i>doxycycline hyclate dr tbec 150mg</i>	2	
<i>doxycycline hyclate dr tbec 200mg</i>	2	
<i>doxycycline hyclate dr tbec 50mg</i>	2	
<i>doxycycline hyclate dr tbec 75mg</i>	2	
<i>doxycycline hyclate caps 100mg</i>	1	
<i>doxycycline hyclate caps 50mg</i>	1	
<i>doxycycline hyclate inj 100mg</i>	1	HI; *

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Drug Name	Drug Tier	Requirements/Limits
<i>doxycycline hyclate tabs 100mg</i>	1	
<i>doxycycline hyclate tabs 150mg</i>	4	
<i>doxycycline hyclate tabs 20mg</i>	1	
<i>doxycycline hyclate tabs 50mg</i>	1	
<i>doxycycline hyclate tabs 75mg</i>	4	
<i>doxycycline monohydrate caps 100mg</i>	1	
<i>doxycycline monohydrate caps 150mg</i>	1	
<i>doxycycline monohydrate caps 50mg</i>	1	
<i>doxycycline monohydrate caps 75mg</i>	1	
<i>doxycycline monohydrate tabs 100mg</i>	1	
<i>doxycycline monohydrate tabs 150mg</i>	1	
<i>doxycycline monohydrate tabs 50mg</i>	1	
<i>doxycycline monohydrate tabs 75mg</i>	1	
<i>doxycycline susr 25mg/5ml</i>	1	
<i>doxycycline tabs 100mg</i>	1	
<i>e.e.s. 400 tabs 400mg</i>	2	
E.E.S. GRANULES SUSR 200MG/5ML	4	
<i>ertapenem inj 1gm</i>	2	HI
ERY-TAB TBEC 250MG	4	
ERY-TAB TBEC 333MG	4	
ERY-TAB TBEC 500MG	4	
ERYPED 200 SUSR 200MG/5ML	4	
ERYPED 400 SUSR 400MG/5ML	4	
ERYTHROCIN LACTOBIONATE INJ 500MG	3	HI; *
ERYTHROCIN STEARATE TABS 250MG	4	
<i>erythromycin base tabs 250mg</i>	2	
<i>erythromycin base tabs 500mg</i>	2	
<i>erythromycin ethylsuccinate susr 200mg/5ml</i>	2	
<i>erythromycin ethylsuccinate tabs 400mg</i>	2	
<i>erythromycin cpep 250mg</i>	2	
FORTAZ INJ 1GM/50ML; 5%	3	HI; *
FORTAZ INJ 1GM	3	HI
FORTAZ INJ 1GM	3	HI; *
FORTAZ INJ 2GM/50ML; 5%	3	HI; *
FORTAZ INJ 2GM	3	HI
FORTAZ INJ 2GM	3	HI; *
FORTAZ INJ 500MG	4	HI
FORTAZ INJ 6GM	4	HI
<i>gentamicin sulfate pediatric inj 10mg/ml</i>	1	HI
<i>gentamicin sulfate/0.9% sodium chloride inj 0.8mg/ml; 0.9%</i>	1	HI; *
<i>gentamicin sulfate/0.9% sodium chloride inj 0.9mg/ml; 0.9%</i>	1	HI; *
<i>gentamicin sulfate/0.9% sodium chloride inj 1.2mg/ml; 0.9%</i>	1	HI; *
<i>gentamicin sulfate/0.9% sodium chloride inj 1.4mg/ml; 0.9%</i>	1	HI; *
<i>gentamicin sulfate/0.9% sodium chloride inj 1.6mg/ml; 0.9%</i>	1	HI; *
<i>gentamicin sulfate/0.9% sodium chloride inj 1mg/ml; 0.9%</i>	1	HI; *
<i>gentamicin sulfate/0.9% sodium chloride inj 2mg/ml; 0.9%</i>	1	HI; *
<i>gentamicin sulfate inj 10mg/ml</i>	1	HI

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Drug Name	Drug Tier	Requirements/Limits
<i>gentamicin sulfate inj 10mg/ml</i>	1	HI; *
<i>gentamicin sulfate inj 40mg/ml</i>	1	HI
<i>imipenem/cilastatin inj 250mg; 250mg</i>	1	HI; *
<i>imipenem/cilastatin inj 500mg; 500mg</i>	1	HI; *
INVANZ INJ 1GM	4	HI
INVANZ INJ 1GM	4	HI; *
<i>isotonic gentamicin inj 0.8mg/ml; 0.9%</i>	1	HI; *
KEFLEX CAPS 250MG	4	
KEFLEX CAPS 500MG	4	
KEFLEX CAPS 750MG	4	
<i>kitabisa pak nebu 300mg/5ml</i>	5	PA
LEVAQUIN TABS 250MG	4	
LEVAQUIN TABS 500MG	4	
LEVAQUIN TABS 750MG	4	
<i>levofloxacin in d5w inj 5%; 250mg/50ml</i>	1	HI; *
<i>levofloxacin in d5w inj 5%; 250mg/50ml</i>	1	HI
<i>levofloxacin in d5w inj 5%; 250mg/50ml</i>	1	HI
<i>levofloxacin in d5w inj 5%; 500mg/100ml</i>	1	HI; *
<i>levofloxacin in d5w inj 5%; 750mg/150ml</i>	1	HI; *
<i>levofloxacin inj 25mg/ml</i>	1	HI; *
<i>levofloxacin soln 25mg/ml</i>	1	
<i>levofloxacin tabs 250mg</i>	1	
<i>levofloxacin tabs 500mg</i>	1	
<i>levofloxacin tabs 750mg</i>	1	
LINCOCIN INJ 300MG/ML	4	HI
<i>lincomycin hcl inj 300mg/ml</i>	2	HI
<i>linezolid inj 600mg/300ml</i>	1	HI; *
<i>linezolid susr 100mg/5ml</i>	2	
<i>linezolid tabs 600mg</i>	2	
MAXIPIME INJ 1GM	4	HI; *
MAXIPIME INJ 1GM	4	HI
MAXIPIME INJ 2GM	4	HI
MAXIPIME INJ 2GM	4	HI; *
<i>meropenem/sodium chloride inj 1gm/50ml; 0.9%</i>	1	HI; *
<i>meropenem/sodium chloride inj 500mg/50ml; 0.9%</i>	1	HI; *
<i>meropenem inj 1gm</i>	1	HI; *
<i>meropenem inj 500mg</i>	1	HI; *
MERREM INJ 1GM	4	HI; *
MERREM INJ 500MG	4	HI; *
MINOCIN CAPS 100MG	4	
MINOCIN CAPS 50MG	4	
MINOCIN CAPS 75MG	4	
MINOCIN INJ 100MG	4	HI; *
<i>minocycline hcl caps 100mg</i>	1	
<i>minocycline hcl caps 50mg</i>	1	
<i>minocycline hcl caps 75mg</i>	1	
<i>minocycline hcl tabs 100mg</i>	1	
<i>minocycline hcl tabs 50mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>minocycline hcl tabs 75mg</i>	1	
<i>mondoxyne nl caps 100mg</i>	1	
<i>mondoxyne nl caps 50mg</i>	1	
<i>mondoxyne nl caps 75mg</i>	1	
<i>morgidox 1x100mg caps 100mg</i>	2	
<i>morgidox 1x50mg caps 50mg</i>	2	
<i>morgidox 2x100mg caps 100mg</i>	2	
MOXATAG TB24 775MG	4	
<i>moxifloxacin hydrochloride/sodium hydrochloride inj 400mg/250ml; 0.8%</i>	1	HI; *
<i>moxifloxacin hcl inj 400mg/250ml</i>	1	HI; *
<i>moxifloxacin hcl tabs 400mg</i>	1	
<i>nafcillin sodium inj 10gm</i>	2	HI
<i>nafcillin sodium inj 1gm</i>	2	HI; *
<i>nafcillin sodium inj 1gm</i>	2	HI
<i>nafcillin sodium inj 2gm</i>	2	HI
<i>nafcillin sodium inj 2gm</i>	2	HI; *
NAFCILLIN INJ 5%; 1GM/50ML	4	HI; *
<i>nafcillin inj 5%; 2gm/100ml</i>	2	HI; *
<i>neomycin sulfate tabs 500mg</i>	1	
<i>ofloxacin tabs 300mg</i>	2	
<i>ofloxacin tabs 400mg</i>	2	
<i>okebo caps 100mg</i>	1	
<i>okebo caps 75mg</i>	1	
ORBACTIV INJ 400MG	5	HI; *
<i>oxacillin sodium inj 10gm</i>	1	HI
<i>oxacillin sodium inj 1gm</i>	1	HI
<i>oxacillin sodium inj 2gm</i>	1	HI
PCE TBEC 333MG	4	
PCE TBEC 500MG	4	
<i>penicillin g potassium in iso-osmotic dextrose inj 0; 20000unit/ml</i>	1	HI; *
<i>penicillin g potassium in iso-osmotic dextrose inj 0; 40000unit/ml</i>	1	HI; *
<i>penicillin g potassium in iso-osmotic dextrose inj 0; 60000unit/ml</i>	1	HI; *
<i>penicillin g potassium inj 20000000unit</i>	1	HI
<i>penicillin g potassium inj 5000000unit</i>	1	HI
<i>penicillin g procaine inj 600000unit/ml</i>	1	
<i>penicillin g sodium inj 5000000unit</i>	2	HI
<i>penicillin v potassium solr 125mg/5ml</i>	1	
<i>penicillin v potassium solr 250mg/5ml</i>	1	
<i>penicillin v potassium tabs 250mg</i>	1	
<i>penicillin v potassium tabs 500mg</i>	1	
<i>pfizerpen inj 20mu</i>	1	HI
<i>pfizerpen inj 5000000unit</i>	1	HI
<i>piperacillin sodium/ tazobactam sodium inj 36gm; 4.5gm</i>	1	HI; *
<i>piperacillin sodium/tazobactam sodium inj 2gm; 0.25gm</i>	1	HI; *

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Drug Name	Drug Tier	Requirements/Limits
<i>piperacillin sodium/tazobactam sodium inj 3gm; 0.375gm</i>	1	HI; *
<i>piperacillin/tazobactam inj 12gm; 1.5gm</i>	1	HI
<i>piperacillin/tazobactam inj 2gm; 0.25gm</i>	1	HI; *
<i>piperacillin/tazobactam inj 36gm; 4.5gm</i>	1	HI; *
<i>piperacillin/tazobactam inj 4gm; 0.5gm</i>	1	HI; *
<i>polymyxin b sulfate inj 500000unit</i>	2	HI
PRIMAXIN IV ADD-VANTAGE INJ 250MG; 250MG	4	HI; *
PRIMAXIN IV ADD-VANTAGE INJ 500MG; 500MG	4	HI; *
PRIMAXIN IV INJ 250MG; 250MG	4	HI; *
PRIMAXIN IV INJ 500MG; 500MG	4	HI; *
SIVEXTRO INJ 200MG	5	HI; *
SIVEXTRO TABS 200MG	5	
<i>streptomycin sulfate inj 1gm</i>	1	
<i>sulfadiazine tabs 500mg</i>	1	
<i>sulfamethoxazole/trimethoprim ds tabs 800mg; 160mg</i>	1	
<i>sulfamethoxazole/trimethoprim inj 400mg/5ml; 80mg/5ml</i>	1	HI; *
<i>sulfamethoxazole/trimethoprim susp 200mg/5ml; 40mg/5ml</i>	1	
<i>sulfamethoxazole/trimethoprim tabs 400mg; 80mg</i>	1	
<i>sulfasalazine tabs 500mg</i>	1	
<i>sulfasalazine tbec 500mg</i>	1	
<i>sulfatrim pediatric susp 200mg/5ml; 40mg/5ml</i>	1	
SUPRAX CAPS 400MG	4	
SUPRAX CHEW 100MG	4	
SUPRAX CHEW 200MG	4	
SUPRAX SUSR 100MG/5ML	4	
SUPRAX SUSR 200MG/5ML	4	
SUPRAX SUSR 500MG/5ML	4	
SYNERCID INJ 350MG; 150MG	4	HI; *
TARGADOX TABS 50MG	4	
<i>tazicef inj 1gm</i>	1	HI
<i>tazicef inj 1gm</i>	1	HI; *
<i>tazicef inj 2gm</i>	1	HI; *
<i>tazicef inj 2gm</i>	1	HI
<i>tazicef inj 6gm</i>	1	HI
TEFLARO INJ 400MG	4	HI; *
TEFLARO INJ 600MG	4	HI; *
<i>tetracycline hcl caps 250mg</i>	2	
<i>tetracycline hcl caps 500mg</i>	2	
<i>tetracycline hydrochloride caps 250mg</i>	2	
<i>tetracycline hydrochloride caps 500mg</i>	2	
<i>tigecycline inj 50mg</i>	2	HI; *
TOBI PODHALER CAPS 28MG	5	PA
TOBI NEBU 300MG/5ML	5	PA
<i>tobramycin sulfate inj 1.2gm</i>	1	HI
<i>tobramycin sulfate inj 10mg/ml</i>	1	HI
<i>tobramycin sulfate inj 40mg/ml</i>	1	HI
<i>tobramycin sulfate inj 80mg/2ml</i>	1	HI
<i>tobramycin nebu 300mg/5ml</i>	5	PA

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Drug Name	Drug Tier	Requirements/Limits
TYGACIL INJ 50MG	4	HI; *
UNASYN BULK PACK INJ 10GM; 5GM	4	HI
UNASYN INJ 1GM; 0.5GM	4	HI
UNASYN INJ 2GM; 1GM	4	HI
VABOMERE INJ 1GM; 1GM	4	HI
VANCOCIN HCL CAPS 125MG	5	
VANCOCIN HCL CAPS 250MG	5	
<i>vancomycin hcl in dextrose inj 5%; 1gm/200ml</i>	1	HI; *
<i>vancomycin hcl in dextrose inj 5%; 500mg/100ml</i>	1	HI; *
<i>vancomycin hcl in dextrose inj 5%; 750mg/150ml</i>	1	HI; *
<i>vancomycin hcl caps 125mg</i>	1	
<i>vancomycin hcl caps 250mg</i>	1	
<i>vancomycin hcl inj 0.9%; 1gm/200ml</i>	1	HI
<i>vancomycin hcl inj 10gm</i>	1	HI; *
<i>vancomycin hcl inj 1gm</i>	1	HI; *
<i>vancomycin hcl inj 500mg</i>	1	HI; *
<i>vancomycin hcl inj 5gm</i>	1	HI; *
<i>vancomycin hcl inj 750mg</i>	1	HI; *
<i>vancomycin hydrochloride/sodium chloride inj 0.9%; 1.5gm/500ml</i>	1	HI
VANCOMYCIN HYDROCHLORIDE INJ 250MG	4	HI
<i>vancomycin inj 0.9%; 500mg/100ml</i>	1	HI
<i>vancomycin inj 0.9%; 750mg/150ml</i>	1	HI
VIBATIV INJ 250MG	4	HI
VIBATIV INJ 750MG	4	HI; *
VIBRAMYCIN CAPS 100MG	4	
VIBRAMYCIN SUSR 25MG/5ML	4	
VIBRAMYCIN SYRP 50MG/5ML	4	
XIFAXAN TABS 200MG	5	
XIFAXAN TABS 550MG	5	
ZEMDRI INJ 500MG/10ML	5	
ZERBAXA INJ 1GM; 0.5GM	4	HI; *
ZINACEF INJ 1.5GM	4	HI; *
ZINACEF INJ 1.5GM	4	HI
ZINACEF INJ 1.5GM; 0	4	HI; *
ZINACEF INJ 7.5GM	4	HI
ZINACEF INJ 750MG	4	HI
ZINACEF INJ 750MG	4	HI; *
ZITHROMAX TRI-PAK TABS 500MG	4	
ZITHROMAX Z-PAK TABS 250MG	4	
ZITHROMAX INJ 500MG	4	HI; *
ZITHROMAX PACK 1GM	4	
ZITHROMAX SUSR 100MG/5ML	4	
ZITHROMAX SUSR 200MG/5ML	4	
ZITHROMAX TABS 250MG	4	
ZITHROMAX TABS 500MG	4	
ZITHROMAX TABS 600MG	4	
ZMAX SUSR 2GM	3	

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Drug Name	Drug Tier	Requirements/Limits
ZOSYN INJ 2GM; 0.25GM	3	HI; *
ZOSYN INJ 36GM; 4.5GM	4	HI; *
ZOSYN INJ 3GM; 0.375GM	3	HI; *
ZOSYN INJ 4GM; 0.5GM	3	HI; *
ZOSYN INJ 5%; 2GM/50ML; 0.25GM/50ML	3	HI; *
ZOSYN INJ 5%; 3GM/50ML; 0.375GM/50ML	3	HI; *
ZOSYN INJ 5%; 4GM/100ML; 0.5GM/100ML	3	HI; *
ZYVOX INJ 200MG/100ML	5	HI; *
ZYVOX INJ 600MG/300ML	5	HI; *
ZYVOX SUSR 100MG/5ML	5	
ZYVOX TABS 600MG	5	
<b>Antifungals</b>		
ABELCET INJ 5MG/ML	4	HI; *
AMBISOME INJ 50MG	5	HI; *
<i>amphotericin b inj 50mg</i>	1	HI
ANCOBON CAPS 250MG	5	
ANCOBON CAPS 500MG	5	
CANCIDAS INJ 50MG	5	HI; *
CANCIDAS INJ 70MG	5	HI; *
<i>casposfungin acetate inj 50mg</i>	2	HI
<i>casposfungin acetate inj 70mg</i>	2	HI
CRESEMBA CAPS 186MG	5	
CRESEMBA INJ 372MG	5	HI; *
DIFLUCAN SUSR 10MG/ML	4	
DIFLUCAN SUSR 40MG/ML	4	
DIFLUCAN TABS 100MG	4	
DIFLUCAN TABS 150MG	4	
DIFLUCAN TABS 200MG	4	
DIFLUCAN TABS 50MG	4	
ERAXIS INJ 100MG	4	HI; *
ERAXIS INJ 50MG	4	HI; *
<i>fluconazole in dextrose inj 56mg/ml; 200mg/100ml</i>	1	HI; *
<i>fluconazole in nacl inj 100mg/50ml; 0.9%</i>	1	HI; *
<i>fluconazole in nacl inj 200mg/100ml; 0.9%</i>	1	HI; *
<i>fluconazole in nacl inj 400mg/200ml; 0.9%</i>	1	HI; *
<i>fluconazole susr 10mg/ml</i>	1	
<i>fluconazole susr 40mg/ml</i>	1	
<i>fluconazole tabs 100mg</i>	1	
<i>fluconazole tabs 150mg</i>	1	
<i>fluconazole tabs 200mg</i>	1	
<i>fluconazole tabs 50mg</i>	1	
<i>flucytosine caps 250mg</i>	5	
<i>flucytosine caps 500mg</i>	5	
GRIS-PEG TABS 125MG	4	
GRIS-PEG TABS 250MG	4	
<i>griseofulvin microsize susp 125mg/5ml</i>	1	
<i>griseofulvin microsize tabs 500mg</i>	1	
<i>griseofulvin ultramicrosize tabs 125mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>griseofulvin ultramicrosize tabs 250mg</i>	1	
<i>itraconazole caps 100mg</i>	1	
<i>itraconazole soln 10mg/ml</i>	1	
<i>ketoconazole tabs 200mg</i>	1	
LAMISIL PACK 125MG	4	
LAMISIL PACK 187.5MG	4	
LAMISIL TABS 250MG	4	
MYCAMINE INJ 100MG	4	HI; *
MYCAMINE INJ 50MG	4	HI; *
NOXAFIL INJ 300MG/16.7ML	4	HI
NOXAFIL SUSP 40MG/ML	5	
NOXAFIL TBEC 100MG	5	
<i>nystatin susp 100000unit/ml</i>	1	
<i>nystatin tabs 500000unit</i>	1	
ONMEL TABS 200MG	4	
SPORANOX PULSEPAK CAPS 100MG	4	
SPORANOX CAPS 100MG	4	
SPORANOX SOLN 10MG/ML	4	
<i>terbinafine hcl tabs 250mg</i>	1	
VFEND IV INJ 200MG	4	HI; *
VFEND SUSR 40MG/ML	5	
VFEND TABS 200MG	5	
VFEND TABS 50MG	5	
<i>voriconazole inj 200mg</i>	5	HI; *
<i>voriconazole susr 40mg/ml</i>	2	
<i>voriconazole tabs 200mg</i>	2	
<i>voriconazole tabs 50mg</i>	2	
<b>Antimycobacterials</b>		
CAPASTAT SULFATE INJ 1GM	4	
<i>cycloserine caps 250mg</i>	2	
<i>dapsone tabs 100mg</i>	1	
<i>dapsone tabs 25mg</i>	1	
<i>ethambutol hcl tabs 100mg</i>	1	
<i>ethambutol hcl tabs 400mg</i>	1	
<i>isoniazid inj 100mg/ml</i>	1	
<i>isoniazid syrp 50mg/5ml</i>	1	
<i>isoniazid tabs 100mg</i>	1	
<i>isoniazid tabs 300mg</i>	1	
MYAMBUTOL TABS 100MG	4	
MYAMBUTOL TABS 400MG	4	
MYCOBUTIN CAPS 150MG	4	
PASER PACK 4GM	4	
PRIFTIN TABS 150MG	3	
<i>pyrazinamide tabs 500mg</i>	1	
<i>rifabutin caps 150mg</i>	2	
RIFADIN CAPS 150MG	4	
RIFADIN CAPS 300MG	4	
RIFADIN INJ 600MG	4	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
RIFAMATE CAPS 150MG; 300MG	4	
<i>rifampin caps 150mg</i>	1	
<i>rifampin caps 300mg</i>	1	
<i>rifampin inj 600mg</i>	1	HI; *
RIFATER TABS 50MG; 300MG; 120MG	4	
SIRTURO TABS 100MG	5	
TRECTOR TABS 250MG	4	
<b>Antiprotozoals</b>		
ALINIA SUSR 100MG/5ML	3	
ALINIA TABS 500MG	3	
<i>atovaquone/proguanil hcl tabs 250mg; 100mg</i>	1	
<i>atovaquone/proguanil hcl tabs 62.5mg; 25mg</i>	1	
<i>atovaquone susp 750mg/5ml</i>	5	
BENZNIDAZOLE TABS 100MG	4	
BENZNIDAZOLE TABS 12.5MG	4	
<i>chloroquine phosphate tabs 250mg</i>	2	
<i>chloroquine phosphate tabs 500mg</i>	2	
COARTEM TABS 20MG; 120MG	4	
DARAPRIM TABS 25MG	5	
FLAGYL CAPS 375MG	4	
FLAGYL TABS 250MG	4	
FLAGYL TABS 500MG	4	
<i>hydroxychloroquine sulfate tabs 200mg</i>	1	
MALARONE TABS 250MG; 100MG	4	
MALARONE TABS 62.5MG; 25MG	4	
<i>mefloquine hcl tabs 250mg</i>	1	
MEPRON SUSP 750MG/5ML	5	
<i>metronidazole in nacl 0.79% inj 500mg/100ml; 0.79%</i>	1	HI; *
<i>metronidazole caps 375mg</i>	2	
<i>metronidazole inj 500mg/100ml; 0.74%</i>	1	HI; *
<i>metronidazole inj 5mg/ml</i>	2	HI
<i>metronidazole tabs 250mg</i>	1	
<i>metronidazole tabs 500mg</i>	1	
NEBUPENT SOLR 300MG	3	B/D
<i>paromomycin sulfate caps 250mg</i>	1	
PENTAM 300 INJ 300MG	4	
PLAQUENIL TABS 200MG	4	
<i>primaquine phosphate tabs 26.3mg</i>	1	
QUALAQUIN CAPS 324MG	4	
<i>quinine sulfate caps 324mg</i>	2	
SOLOSEC PACK 2GM	4	
TINDAMAX TABS 250MG	4	
TINDAMAX TABS 500MG	4	
<i>tinidazole tabs 250mg</i>	2	
<i>tinidazole tabs 500mg</i>	2	
<b>Antivirals</b>		
<i>abacavir sulfate/lamivudine/zidovudine tabs 300mg; 150mg; 300mg</i>	5	

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Drug Name	Drug Tier	Requirements/Limits
<i>abacavir/lamivudine tabs 600mg; 300mg</i>	5	
<i>abacavir soln 20mg/ml</i>	2	
<i>abacavir tabs 300mg</i>	1	
<i>acyclovir sodium inj 50mg/ml</i>	1	HI; *
<i>acyclovir caps 200mg</i>	1	
<i>acyclovir susp 200mg/5ml</i>	1	
<i>acyclovir tabs 400mg</i>	1	
<i>acyclovir tabs 800mg</i>	1	
<i>adefovir dipivoxil tabs 10mg</i>	5	
APTIVUS CAPS 250MG	5	
APTIVUS SOLN 100MG/ML	5	
<i>atazanavir sulfate caps 150mg</i>	2	
<i>atazanavir sulfate caps 200mg</i>	2	
<i>atazanavir sulfate caps 300mg</i>	2	
<i>atazanavir caps 150mg</i>	2	
<i>atazanavir caps 200mg</i>	2	
<i>atazanavir caps 300mg</i>	2	
ATRIPLA TABS 600MG; 200MG; 300MG	5	
BARACLUDE SOLN 0.05MG/ML	5	
BARACLUDE TABS 0.5MG	5	
BARACLUDE TABS 1MG	5	
BIKTARVY TABS 50MG; 200MG; 25MG	5	
<i>cidofovir inj 75mg/ml</i>	2	HI; *
CIMDUO TABS 300MG; 300MG	5	
COMBIVIR TABS 150MG; 300MG	4	
COMPLERA TABS 200MG; 25MG; 300MG	5	
COPEGUS TABS 200MG	4	
CRIXIVAN CAPS 200MG	3	
CRIXIVAN CAPS 400MG	3	
CYTOVENE INJ 500MG	4	HI; *
DAKLINZA TABS 30MG	5	PA
DAKLINZA TABS 60MG	5	PA
DAKLINZA TABS 90MG	5	PA
DELSTRIGO TABS 100MG; 300MG; 300MG	5	
DESCOVY TABS 200MG; 25MG	5	
<i>didanosine cpdr 125mg</i>	1	
<i>didanosine cpdr 200mg</i>	1	
<i>didanosine cpdr 250mg</i>	1	
<i>didanosine cpdr 400mg</i>	1	
EDURANT TABS 25MG	3	
<i>efavirenz caps 200mg</i>	2	
<i>efavirenz caps 50mg</i>	2	
<i>efavirenz tabs 600mg</i>	2	
EMTRIVA CAPS 200MG	3	
EMTRIVA SOLN 10MG/ML	3	
<i>entecavir tabs 0.5mg</i>	1	
<i>entecavir tabs 1mg</i>	1	
EPCLUSA TABS 400MG; 100MG	5	PA

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Drug Name	Drug Tier	Requirements/Limits
EPIVIR HBV SOLN 5MG/ML	3	
EPIVIR HBV TABS 100MG	4	
EPIVIR SOLN 10MG/ML	4	
EPIVIR TABS 150MG	4	
EPIVIR TABS 300MG	4	
EPZICOM TABS 600MG; 300MG	5	
EVOTAZ TABS 300MG; 150MG	5	
<i>famciclovir tabs 125mg</i>	2	
<i>famciclovir tabs 250mg</i>	2	
<i>famciclovir tabs 500mg</i>	2	
FAMVIR TABS 125MG	4	
FAMVIR TABS 250MG	4	
FAMVIR TABS 500MG	4	
FLUMADINE TABS 100MG	4	
<i>fosamprenavir calcium tabs 700mg</i>	5	
FOSCAVIR INJ 6000MG/250ML	4	HI
FUZEON INJ 90MG	5	
<i>ganciclovir inj 500mg/10ml</i>	1	HI
GANCICLOVIR INJ 500MG/250ML	4	HI
<i>ganciclovir inj 500mg</i>	1	HI; *
GENVOYA TABS 150MG; 150MG; 200MG; 10MG	5	
HARVONI TABS 90MG; 400MG	5	QL (30 EA per 30 days) PA
HEPSERA TABS 10MG	5	
INTELENCE TABS 100MG	3	
INTELENCE TABS 200MG	3	
INTELENCE TABS 25MG	3	
INVIRASE CAPS 200MG	3	
INVIRASE TABS 500MG	3	
ISENTRESS HD TABS 600MG	3	
ISENTRESS CHEW 100MG	4	
ISENTRESS CHEW 25MG	4	
ISENTRESS PACK 100MG	4	
ISENTRESS TABS 400MG	3	
JULUCA TABS 50MG; 25MG	5	
KALETRA SOLN 400MG/5ML; 100MG/5ML	3	
KALETRA TABS 100MG; 25MG	3	
KALETRA TABS 200MG; 50MG	3	
<i>lamivudine/zidovudine tabs 150mg; 300mg</i>	1	
<i>lamivudine soln 10mg/ml</i>	1	
<i>lamivudine tabs 100mg</i>	1	
<i>lamivudine tabs 150mg</i>	1	
<i>lamivudine tabs 300mg</i>	1	
LEXIVA SUSP 50MG/ML	3	
LEXIVA TABS 700MG	5	
<i>lopinavir/ritonavir soln 400mg/5ml; 100mg/5ml</i>	2	
MAVYRET TABS 100MG; 40MG	5	PA
<i>moderiba 1200 dose pack tabs 600mg</i>	2	
<i>moderiba 800 dose pack tabs 400mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>moderiba tabs 200mg</i>	2	
<i>moderiba tbpk 0</i>	2	
<i>moderiba tbpk 0</i>	2	
<i>nevirapine er tb24 100mg</i>	1	
<i>nevirapine er tb24 400mg</i>	1	
<i>nevirapine susp 50mg/5ml</i>	1	
<i>nevirapine susp 50mg/5ml</i>	1	
<i>nevirapine tabs 200mg</i>	1	
NORVIR CAPS 100MG	3	
NORVIR PACK 100MG	3	
NORVIR SOLN 80MG/ML	3	
NORVIR TABS 100MG	3	
ODEFSEY TABS 200MG; 25MG; 25MG	5	
OLYSIO CAPS 150MG	5	QL (28 EA per 28 days) PA
<i>oseltamivir phosphate caps 30mg</i>	1	
<i>oseltamivir phosphate caps 45mg</i>	1	
<i>oseltamivir phosphate caps 75mg</i>	1	
<i>oseltamivir phosphate susr 6mg/ml</i>	1	
PEG-INTRON REDIPEN PAK 4 INJ 120MCG/0.5ML	5	
PEG-INTRON REDIPEN INJ 120MCG/0.5ML	5	
PEG-INTRON REDIPEN INJ 150MCG/0.5ML	5	
PEG-INTRON REDIPEN INJ 50MCG/0.5ML	5	
PEG-INTRON REDIPEN INJ 80MCG/0.5ML	5	
PEG-INTRON INJ 50MCG/0.5ML	5	
PEGASYS PROCLICK INJ 135MCG/0.5ML	5	
PEGASYS PROCLICK INJ 180MCG/0.5ML	5	
PEGASYS INJ 180MCG/0.5ML	5	
PEGASYS INJ 180MCG/ML	5	
PEGINTRON INJ 120MCG/0.5ML	5	
PEGINTRON INJ 150MCG/0.5ML	5	
PEGINTRON INJ 50MCG/0.5ML	5	
PEGINTRON INJ 80MCG/0.5ML	5	
PIFELTRO TABS 100MG	5	
PLEGRIDY STARTER PACK INJ 0	5	QL (2 ML per 28 days) PA
PLEGRIDY STARTER PACK INJ 0	5	QL (2 ML per 28 days) PA
PLEGRIDY INJ 125MCG/0.5ML	5	QL (2 ML per 28 days) PA
PLEGRIDY INJ 125MCG/0.5ML	5	QL (2 ML per 28 days) PA
PREVYMIS INJ 240MG/12ML	5	
PREVYMIS INJ 480MG/24ML	5	
PREVYMIS TABS 240MG	5	
PREVYMIS TABS 480MG	5	
PREZCOBIX TABS 150MG; 800MG	5	
PREZISTA SUSP 100MG/ML	3	
PREZISTA TABS 150MG	3	
PREZISTA TABS 600MG	3	
PREZISTA TABS 75MG	3	
PREZISTA TABS 800MG	3	
RAPIVAB INJ 200MG/20ML	5	*

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Drug Name	Drug Tier	Requirements/Limits
REBETOL CAPS 200MG	4	
REBETOL SOLN 40MG/ML	4	
RELENZA DISKHALER AEPB 5MG/BLISTER	3	
RESCRIPTOR TABS 100MG	3	
RESCRIPTOR TABS 200MG	3	
RETROVIR IV INFUSION INJ 10MG/ML	4	HI; *
RETROVIR CAPS 100MG	4	
RETROVIR SYRP 50MG/5ML	4	
REYATAZ CAPS 150MG	5	
REYATAZ CAPS 200MG	5	
REYATAZ CAPS 300MG	5	
REYATAZ PACK 50MG	3	
<i>ribasphere ribapak tabs 400mg</i>	2	
<i>ribasphere ribapak tabs 600mg</i>	2	
<i>ribasphere ribapak tbpk 0</i>	2	
<i>ribasphere ribapak tbpk 0</i>	2	
<i>ribasphere caps 200mg</i>	2	
<i>ribasphere tabs 200mg</i>	2	
<i>ribasphere tabs 400mg</i>	2	
<i>ribasphere tabs 600mg</i>	2	
<i>ribavirin caps 200mg</i>	1	
<i>ribavirin solr 6gm</i>	2	
<i>ribavirin tabs 200mg</i>	2	
<i>rimantadine hcl tabs 100mg</i>	1	
<i>ritonavir tabs 100mg</i>	2	
SELZENTRY TABS 150MG	5	
SELZENTRY TABS 25MG	4	
SELZENTRY TABS 300MG	5	
SELZENTRY TABS 75MG	4	
SOVALDI TABS 400MG	5	QL (30 EA per 30 days) PA
<i>stavudine caps 15mg</i>	1	
<i>stavudine caps 20mg</i>	1	
<i>stavudine caps 30mg</i>	1	
<i>stavudine caps 40mg</i>	1	
<i>stavudine solr 1mg/ml</i>	1	
STRIBILD TABS 150MG; 150MG; 200MG; 300MG	5	
SUSTIVA CAPS 200MG	3	
SUSTIVA CAPS 50MG	3	
SUSTIVA TABS 600MG	3	
<i>symfi lo tabs 400mg; 300mg; 300mg</i>	2	
<i>symfi tabs 600mg; 300mg; 300mg</i>	2	
SYMTUZA TABS 150MG; 800MG; 200MG; 10MG	5	
SYNAGIS INJ 100MG/ML	5	*
SYNAGIS INJ 50MG/0.5ML	5	*
TAMIFLU CAPS 30MG	3	
TAMIFLU CAPS 45MG	3	
TAMIFLU CAPS 75MG	3	
TAMIFLU SUSR 6MG/ML	3	

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Drug Name	Drug Tier	Requirements/Limits
TECHNIVIE TABS 12.5MG; 75MG; 50MG	5	PA
<i>tenofovir disoproxil fumarate tabs 300mg</i>	2	
TIVICAY TABS 10MG	3	
TIVICAY TABS 25MG	3	
TIVICAY TABS 50MG	3	
TRIUMEQ TABS 600MG; 50MG; 300MG	5	
TRIZIVIR TABS 300MG; 150MG; 300MG	5	
TROGARZO INJ 200MG/1.33ML	4	
TRUVADA TABS 100MG; 150MG	5	
TRUVADA TABS 133MG; 200MG	5	
TRUVADA TABS 167MG; 250MG	5	
TRUVADA TABS 200MG; 300MG	5	
TYZEKA TABS 600MG	5	
<i>valacyclovir hcl tabs 1gm</i>	1	
<i>valacyclovir hcl tabs 500mg</i>	1	
<i>valacyclovir hydrochloride tabs 500mg</i>	1	
VALCYTE SOLR 50MG/ML	5	
VALCYTE TABS 450MG	5	
<i>valganciclovir hydrochloride solr 50mg/ml</i>	5	
<i>valganciclovir tabs 450mg</i>	5	
VALTREX TABS 1GM	4	
VALTREX TABS 500MG	4	
VEMLIDY TABS 25MG	5	
VICTRELIS CAPS 200MG	5	
VIDEX EC CPDR 125MG	4	
VIDEX EC CPDR 200MG	4	
VIDEX EC CPDR 250MG	4	
VIDEX EC CPDR 400MG	4	
VIDEX PEDIATRIC SOLR 2GM	3	
VIDEX PEDIATRIC SOLR 4GM	3	
VIEKIRA PAK TBPK 250MG; 12.5MG; 75MG; 50MG	5	PA
VIEKIRA XR TB24 200MG; 8.33MG; 50MG; 33.33MG	5	PA
VIRACEPT TABS 250MG	3	
VIRACEPT TABS 625MG	3	
VIRAMUNE XR TB24 100MG	3	
VIRAMUNE XR TB24 400MG	4	
VIRAMUNE SUSP 50MG/5ML	4	
VIRAMUNE TABS 200MG	4	
VIRAZOLE SOLR 6GM	4	
VIREAD POWD 40MG/GM	3	
VIREAD TABS 150MG	3	
VIREAD TABS 200MG	3	
VIREAD TABS 250MG	3	
VIREAD TABS 300MG	3	
VITEKTA TABS 150MG	5	
VITEKTA TABS 85MG	5	
VOSEVI TABS 400MG; 100MG; 100MG	5	PA
ZEPATIER TABS 50MG; 100MG	5	PA

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Drug Name	Drug Tier	Requirements/Limits
ZERIT CAPS 15MG	4	
ZERIT CAPS 20MG	4	
ZERIT CAPS 30MG	4	
ZERIT CAPS 40MG	4	
ZERIT SOLR 1MG/ML	4	
ZIAGEN SOLN 20MG/ML	3	
ZIAGEN TABS 300MG	4	
<i>zidovudine caps 100mg</i>	1	
<i>zidovudine syrp 50mg/5ml</i>	1	
<i>zidovudine tabs 300mg</i>	1	
ZOVIRAX CAPS 200MG	4	
ZOVIRAX SUSP 200MG/5ML	4	
ZOVIRAX TABS 400MG	4	
ZOVIRAX TABS 800MG	4	
<b>Urinary Anti-infectives</b>		
FURADANTIN SUSP 25MG/5ML	4	
HIPREX TABS 1GM	4	
MACROBID CAPS 100MG	4	
MACRODANTIN CAPS 100MG	4	
MACRODANTIN CAPS 25MG	4	
MACRODANTIN CAPS 50MG	4	
<i>methenamine hippurate tabs 1gm</i>	1	
MONUROL PACK 5.631GM	3	
<i>nitrofurantoin macrocrystals caps 100mg</i>	2	
<i>nitrofurantoin macrocrystals caps 25mg</i>	2	
<i>nitrofurantoin macrocrystals caps 50mg</i>	2	
<i>nitrofurantoin monohydrate/macrocrystals caps 100mg</i>	2	
<i>nitrofurantoin monohydrate caps 100mg</i>	2	
<i>nitrofurantoin susp 25mg/5ml</i>	2	
PRIMSOL SOLN 50MG/5ML	4	
<i>trimethoprim tabs 100mg</i>	1	
<b>Antihistamine Drugs</b>		
<b>First Generation Antihistamines</b>		
<i>arbinoxa soln 4mg/5ml</i>	2	
<i>arbinoxa tabs 4mg</i>	2	
<i>carbinoxamine maleate soln 4mg/5ml</i>	2	
<i>carbinoxamine maleate tabs 4mg</i>	2	
<i>clemastine fumarate tabs 2.68mg</i>	2	
<i>cyproheptadine hcl syrp 2mg/5ml</i>	2	
<i>cyproheptadine hcl tabs 4mg</i>	2	
<i>diphenhydramine hcl elix 12.5mg/5ml</i>	2	
<i>diphenhydramine hcl inj 50mg/ml</i>	2	
KARBINAL ER SUER 4MG/5ML	4	
<i>phenadoz supp 12.5mg</i>	2	
<i>phenadoz supp 25mg</i>	2	
PHENERGAN INJ 25MG/ML	4	
PHENERGAN INJ 50MG/ML	4	
<i>phenergan supp 12.5mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>phenergan supp 25mg</i>	2	
<i>phenergan supp 50mg</i>	2	
<i>promethazine hcl plain syrp 6.25mg/5ml</i>	2	
<i>promethazine hcl plain syrp 6.25mg/5ml</i>	2	
<i>promethazine hcl inj 25mg/ml</i>	2	
<i>promethazine hcl inj 50mg/ml</i>	2	
<i>promethazine hcl supp 12.5mg</i>	2	
<i>promethazine hcl supp 25mg</i>	2	
<i>promethazine hcl supp 50mg</i>	2	
<i>promethazine hcl syrp 6.25mg/5ml</i>	2	
<i>promethazine hcl tabs 12.5mg</i>	2	
<i>promethazine hcl tabs 25mg</i>	2	
<i>promethazine hcl tabs 50mg</i>	2	
<i>promethazine hydrochloride tabs 50mg</i>	2	
<i>promethazine vc plain soln 5mg/5ml; 6.25mg/5ml</i>	2	
<i>promethegan supp 12.5mg</i>	2	
<i>promethegan supp 25mg</i>	2	
<i>promethegan supp 50mg</i>	2	
<b>RYVENT TABS 6MG</b>	4	
<b>Second Generation Antihistamines</b>		
<i>cetirizine hcl soln 1mg/ml</i>	1	
<b>CLARINEX-D 12 HOUR TB12 2.5MG; 120MG</b>	4	
<b>CLARINEX SYRP 0.5MG/ML</b>	4	
<b>CLARINEX TABS 5MG</b>	4	
<i>desloratadine odt tbdp 2.5mg</i>	1	
<i>desloratadine odt tbdp 5mg</i>	1	
<i>desloratadine tabs 5mg</i>	1	
<i>levocetirizine dihydrochloride soln 2.5mg/5ml</i>	1	
<i>levocetirizine dihydrochloride tabs 5mg</i>	1	
<b>SEMPREX-D CAPS 8MG; 60MG</b>	4	
<b>XYZAL SOLN 2.5MG/5ML</b>	4	
<b>XYZAL TABS 5MG</b>	4	
<b>Antineoplastic Agents</b>		
<b>Antineoplastic Agents</b>		
<b>ABRAXANE INJ 900MG; 100MG</b>	3	*
<i>adriamycin inj 2mg/ml</i>	1	*
<i>adrucil inj 2.5gm/50ml</i>	1	HI; *
<i>adrucil inj 500mg/10ml</i>	1	HI; *
<i>adrucil inj 5gm/100ml</i>	1	HI; *
<b>AFINITOR DISPERZ TBSO 2MG</b>	5	
<b>AFINITOR DISPERZ TBSO 3MG</b>	5	
<b>AFINITOR DISPERZ TBSO 5MG</b>	5	
<b>AFINITOR TABS 10MG</b>	5	
<b>AFINITOR TABS 2.5MG</b>	5	
<b>AFINITOR TABS 5MG</b>	5	
<b>AFINITOR TABS 7.5MG</b>	5	
<b>ALECENSA CAPS 150MG</b>	5	
<b>ALIMTA INJ 100MG</b>	3	*

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Drug Name	Drug Tier	Requirements/Limits
ALIMTA INJ 500MG	3	*
ALIQOPA INJ 60MG	5	
ALKERAN INJ 50MG	4	*
ALUNBRIG TABS 180MG	5	
ALUNBRIG TABS 30MG	5	
ALUNBRIG TABS 90MG	5	
ALUNBRIG TBPk 0	5	
<i>anastrozole tabs 1mg</i>	1	
ARIMIDEX TABS 1MG	4	
AROMASIN TABS 25MG	4	
ARRANON INJ 5MG/ML	4	*
ARZERRA INJ 1000MG/50ML	5	*
ARZERRA INJ 100MG/5ML	5	*
AVASTIN INJ 100MG/4ML	3	*
AVASTIN INJ 400MG/16ML	3	*
<i>azacitidine inj 100mg</i>	2	*
BAVENCIO INJ 200MG/10ML	5	
BELEODAQ INJ 500MG	5	*
<i>bendamustine hydrochloride inj 100mg/4ml</i>	5	
BENDEKA INJ 100MG/4ML	5	*
<i>bexarotene caps 75mg</i>	5	
<i>bicalutamide tabs 50mg</i>	1	
BICNU INJ 100MG	3	*
<i>bleomycin sulfate inj 15unit</i>	1	HI; *
<i>bleomycin sulfate inj 30unit</i>	1	HI; *
BLINCYTO INJ 35MCG	5	*
BORTEZOMIB INJ 3.5MG	5	
BOSULIF TABS 100MG	5	
BOSULIF TABS 400MG	5	
BOSULIF TABS 500MG	5	
BRAFTOVI CAPS 50MG	5	
BRAFTOVI CAPS 75MG	5	
BUSULFAN INJ 6MG/ML	4	
BUSULFEX INJ 6MG/ML	4	*
CABOMETYX TABS 20MG	5	
CABOMETYX TABS 40MG	5	
CABOMETYX TABS 60MG	5	
CALQUENCE CAPS 100MG	5	
CAMPTOSAR INJ 100MG/5ML	4	*
CAMPTOSAR INJ 300MG/15ML	4	*
CAMPTOSAR INJ 40MG/2ML	4	*
CAPRELSA TABS 100MG	5	
CAPRELSA TABS 300MG	5	
<i>carboplatin inj 150mg/15ml</i>	1	*
<i>carmustine inj 100mg</i>	2	
CASODEX TABS 50MG	4	
<i>cisplatin inj 100mg/100ml</i>	1	*
<i>cisplatin inj 50mg/50ml</i>	1	*

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Drug Name	Drug Tier	Requirements/Limits
<i>cladribine inj 10mg/10ml</i>	2	B/D; *
<i>clofarabine inj 1mg/ml</i>	2	
CLOLAR INJ 1MG/ML	4	*
COMETRIQ KIT 0	5	
COMETRIQ KIT 0	5	
COMETRIQ KIT 20MG	5	
COSMEGEN INJ 0.5MG	4	*
COTELLIC TABS 20MG	5	
<i>cyclophosphamide caps 25mg</i>	1	B/D
<i>cyclophosphamide caps 50mg</i>	1	B/D
<i>cyclophosphamide inj 1gm</i>	2	*
<i>cyclophosphamide inj 2gm</i>	2	*
<i>cyclophosphamide inj 500mg</i>	2	*
CYRAMZA INJ 100MG/10ML	5	*
CYRAMZA INJ 500MG/50ML	5	*
<i>cytarabine aqueous inj 100mg/ml</i>	1	HI; *
<i>cytarabine aqueous inj 20mg/ml</i>	1	HI; *
<i>dacarbazine inj 100mg</i>	1	*
<i>dacarbazine inj 200mg</i>	1	*
DACOGEN INJ 50MG	5	*
<i>dactinomycin inj 0.5mg</i>	2	
DARZALEX INJ 100MG/5ML	5	*
DARZALEX INJ 400MG/20ML	5	*
<i>daunorubicin hcl inj 20mg/4ml</i>	1	*
<i>daunorubicin hydrochloride inj 20mg/4ml</i>	1	
<i>daunorubicin hydrochloride inj 50mg/10ml</i>	1	
<i>decitabine inj 50mg</i>	5	*
DEPOCYT INJ 50MG/5ML	4	*
DOCEFREZ INJ 20MG	4	*
<i>docetaxel inj 140mg/7ml</i>	3	*
<i>docetaxel inj 160mg/16ml</i>	3	*
<i>docetaxel inj 160mg/8ml</i>	3	
DOCETAXEL INJ 200MG/10ML	5	
<i>docetaxel inj 200mg/20ml</i>	3	*
<i>docetaxel inj 20mg/2ml</i>	3	*
<i>docetaxel inj 20mg/ml</i>	3	*
<i>docetaxel inj 80mg/4ml</i>	3	*
<i>docetaxel inj 80mg/8ml</i>	3	*
DOXIL INJ 2MG/ML	4	HI; *
<i>doxorubicin hcl liposome inj 2mg/ml</i>	1	HI; *
<i>doxorubicin hcl inj 10mg</i>	1	*
<i>doxorubicin hcl inj 2mg/ml</i>	1	*
<i>doxorubicin hcl inj 50mg</i>	1	*
DROXIA CAPS 200MG	4	
DROXIA CAPS 300MG	4	
DROXIA CAPS 400MG	4	
ELIGARD INJ 22.5MG	4	
ELIGARD INJ 30MG	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
ELIGARD INJ 45MG	4	
ELIGARD INJ 7.5MG	4	
ELLEENCE INJ 200MG/100ML	4	HI; *
ELLEENCE INJ 50MG/25ML	4	HI; *
EMCYT CAPS 140MG	4	
EMPLICITI INJ 300MG	5	*
EMPLICITI INJ 400MG	5	*
<i>epirubicin hcl inj 200mg/100ml</i>	2	HI; *
<i>epirubicin hcl inj 50mg/25ml</i>	2	HI; *
ERBITUX INJ 100MG/50ML	3	*
ERBITUX INJ 200MG/100ML	3	*
ERIVEDGE CAPS 150MG	5	
ERLEADA TABS 60MG	5	
ERWINAZE INJ 10000UNIT	4	*
ETOPOPHOS INJ 100MG	4	*
<i>etoposide inj 100mg/5ml</i>	1	*
<i>etoposide inj 500mg/25ml</i>	1	*
EVOMELA INJ 50MG	5	*
<i>exemestane tabs 25mg</i>	2	
FARESTON TABS 60MG	5	
FARYDAK CAPS 10MG	5	
FARYDAK CAPS 15MG	5	
FARYDAK CAPS 20MG	5	
FASLODEX INJ 250MG/5ML	5	*
FEMARA TABS 2.5MG	4	
FIRMAGON INJ 120MG	4	*
FIRMAGON INJ 80MG	4	*
<i>floxuridine inj 0.5gm</i>	2	HI; *
<i>fludarabine phosphate inj 50mg/2ml</i>	1	*
<i>fludarabine phosphate inj 50mg</i>	1	*
<i>fluorouracil inj 1gm/20ml</i>	1	HI
<i>fluorouracil inj 2.5gm/50ml</i>	1	HI; *
<i>fluorouracil inj 500mg/10ml</i>	1	HI; *
<i>fluorouracil inj 5gm/100ml</i>	1	HI; *
<i>flutamide caps 125mg</i>	1	
FOLOTYN INJ 20MG/ML	4	*
FOLOTYN INJ 40MG/2ML	4	*
GAZYVA INJ 1000MG/40ML	5	*
<i>gemcitabine hcl inj 1gm</i>	1	*
<i>gemcitabine hcl inj 200mg</i>	1	*
<i>gemcitabine hcl inj 200mg</i>	1	*
<i>gemcitabine hcl inj 2gm</i>	1	*
GEMCITABINE HYDROCHLORIDE INJ 1.5GM/15ML	4	
GEMCITABINE HYDROCHLORIDE INJ 1GM/10ML	4	
<i>gemcitabine hydrochloride inj 1gm/26.3ml</i>	1	
GEMCITABINE HYDROCHLORIDE INJ 200MG/2ML	4	
<i>gemcitabine hydrochloride inj 200mg/5.26ml</i>	1	
GEMCITABINE HYDROCHLORIDE INJ 2GM/20ML	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>gemcitabine hydrochloride inj 2gm/52.6ml</i>	1	
<i>gemcitabine inj 1gm/26.3ml</i>	1	*
<i>gemcitabine inj 200mg/5.26ml</i>	1	*
<i>gemcitabine inj 2gm/52.6ml</i>	1	*
GEMZAR INJ 1GM	4	*
GEMZAR INJ 200MG	4	*
GILOTRIF TABS 20MG	5	
GILOTRIF TABS 30MG	5	
GILOTRIF TABS 40MG	5	
GLEEVEC TABS 100MG	5	
GLEEVEC TABS 400MG	5	
GLEOSTINE CAPS 100MG	3	
GLEOSTINE CAPS 10MG	3	
GLEOSTINE CAPS 40MG	3	
GLEOSTINE CAPS 5MG	3	
HALAVEN INJ 1MG/2ML	5	*
HERCEPTIN INJ 150MG	5	
HERCEPTIN INJ 440MG	3	*
HEXALEN CAPS 50MG	5	
HYCAMTIN INJ 4MG	4	*
HYDREA CAPS 500MG	4	
<i>hydroxyurea caps 500mg</i>	1	
IBRANCE CAPS 100MG	5	
IBRANCE CAPS 125MG	5	
IBRANCE CAPS 75MG	5	
ICLUSIG TABS 15MG	5	
ICLUSIG TABS 45MG	5	
IDAMYCIN PFS INJ 20MG/20ML	4	*
<i>idarubicin hcl inj 10mg/10ml</i>	1	*
<i>idarubicin hcl inj 20mg/20ml</i>	1	
<i>idarubicin hcl inj 5mg/5ml</i>	1	*
<i>idarubicin hydrochloride inj 20mg/20ml</i>	1	
<i>idarubicin hydrochloride inj 5mg/5ml</i>	1	
IDHIFA TABS 100MG	5	
IDHIFA TABS 50MG	5	
IFEX INJ 1GM	4	*
IFEX INJ 3GM	4	*
<i>ifosfamide inj 1gm/20ml</i>	1	*
<i>ifosfamide inj 1gm</i>	1	*
<i>ifosfamide inj 3gm/60ml</i>	1	*
<i>ifosfamide inj 3gm</i>	1	*
<i>imatinib mesylate tabs 100mg</i>	5	
<i>imatinib mesylate tabs 400mg</i>	5	
IMBRUVICA CAPS 140MG	5	
IMBRUVICA CAPS 70MG	5	
IMBRUVICA TABS 140MG	5	
IMBRUVICA TABS 280MG	5	
IMBRUVICA TABS 420MG	5	

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Drug Name	Drug Tier	Requirements/Limits
IMBRUVICA TABS 560MG	5	
IMFINZI INJ 120MG/2.4ML	5	
IMFINZI INJ 500MG/10ML	5	
INLYTA TABS 1MG	5	
INLYTA TABS 5MG	5	
INTRON A W/DILUENT INJ 10MU	5	
INTRON A W/DILUENT INJ 18MU	5	
INTRON A W/DILUENT INJ 50MU	5	
INTRON A INJ 10MU/ML	5	
INTRON A INJ 10MU	5	
INTRON A INJ 18MU	5	
INTRON A INJ 50MU	5	
INTRON A INJ 6000000UNIT/ML	5	
IRESSA TABS 250MG	5	
<i>irinotecan hcl inj 100mg/5ml</i>	1	*
<i>irinotecan hydrochloride inj 40mg/2ml</i>	1	
<i>irinotecan inj 100mg/5ml</i>	1	*
<i>irinotecan inj 40mg/2ml</i>	1	*
<i>irinotecan inj 500mg/25ml</i>	1	*
ISTODAX (OVERFILL) INJ 10MG	3	*
ISTODAX INJ 10MG	3	*
IXEMPRA KIT INJ 15MG	5	*
JAKAFI TABS 10MG	5	
JAKAFI TABS 15MG	5	
JAKAFI TABS 20MG	5	
JAKAFI TABS 25MG	5	
JAKAFI TABS 5MG	5	
JEVTANA INJ 60MG/1.5ML	4	*
KADCYLA INJ 100MG	5	*
KADCYLA INJ 160MG	5	*
KEYTRUDA INJ 100MG/4ML	5	*
KEYTRUDA INJ 50MG	5	*
KISQALI FEMARA 200 DOSE TBPK 2.5MG; 200MG	5	
KISQALI FEMARA 400 DOSE TBPK 2.5MG; 200MG	5	
KISQALI FEMARA 600 DOSE TBPK 2.5MG; 200MG	5	
KISQALI TABS 200MG	5	
KISQALI TABS 200MG	5	
KISQALI TABS 200MG	5	
KYPROLIS INJ 10MG	5	
KYPROLIS INJ 30MG	5	*
<i>kyprolis inj 60mg</i>	5	*
LARTRUVO INJ 190MG/19ML	5	
LARTRUVO INJ 500MG/50ML	5	*
LENVIMA 10 MG DAILY DOSE CPPK 10MG	5	
LENVIMA 12MG DAILY DOSE CPPK 4MG	5	
LENVIMA 14 MG DAILY DOSE CPPK 0	5	
LENVIMA 18 MG DAILY DOSE CPPK 0	5	
LENVIMA 20 MG DAILY DOSE CPPK 10MG	5	

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Drug Name	Drug Tier	Requirements/Limits
LENVIMA 24 MG DAILY DOSE CPPK 0	5	
LENVIMA 4 MG DAILY DOSE CPPK 4MG	5	
LENVIMA 8 MG DAILY DOSE CPPK 4MG	5	
<i>letrozole tabs 2.5mg</i>	1	
LEUKERAN TABS 2MG	3	
<i>leuprolide acetate inj 1mg/0.2ml</i>	1	
<i>lipodox 50 inj 2mg/ml</i>	1	HI; *
LONSURF TABS 6.14MG; 15MG	5	
LONSURF TABS 8.19MG; 20MG	5	
LUPANETA PACK KIT 11.25MG; 5MG	4	
LUPANETA PACK KIT 3.75MG; 5MG	4	
LUPRON DEPOT (1-MONTH) INJ 3.75MG	3	
LUPRON DEPOT (1-MONTH) INJ 7.5MG	3	
LUPRON DEPOT (3-MONTH) INJ 11.25MG	3	
LUPRON DEPOT (3-MONTH) INJ 22.5MG	3	
LUPRON DEPOT (4-MONTH) INJ 30MG	3	
LUPRON DEPOT (6-MONTH) INJ 45MG	3	
LUPRON DEPOT-PED (1-MONTH) INJ 11.25MG	3	
LUPRON DEPOT-PED (1-MONTH) INJ 15MG	3	
LUPRON DEPOT-PED (1-MONTH) INJ 7.5MG	3	
LUPRON DEPOT-PED (3-MONTH) INJ 11.25MG	3	
LUPRON DEPOT-PED (3-MONTH) INJ 30MG	3	
LYNPARZA CAPS 50MG	5	
LYSODREN TABS 500MG	3	
MARQIBO INJ 5MG/31ML	5	*
MATULANE CAPS 50MG	5	
MEGACE ORAL SUSP 40MG/ML	4	
<i>megestrol acetate susp 40mg/ml</i>	2	
<i>megestrol acetate tabs 20mg</i>	2	
<i>megestrol acetate tabs 40mg</i>	2	
MEKINIST TABS 0.5MG	5	
MEKINIST TABS 2MG	5	
MEKTOVI TABS 15MG	5	
<i>melphalan hydrochloride inj 50mg</i>	1	*
<i>mercaptopurine tabs 50mg</i>	1	
<i>methotrexate sodium inj 100mg/4ml</i>	1	
<i>methotrexate sodium inj 1gm/40ml</i>	1	
<i>methotrexate sodium inj 1gm</i>	1	HI
<i>methotrexate sodium inj 200mg/8ml</i>	1	
<i>methotrexate sodium inj 250mg/10ml</i>	1	
<i>methotrexate sodium inj 250mg/10ml</i>	1	
<i>methotrexate sodium inj 50mg/2ml</i>	1	
<i>methotrexate sodium inj 50mg/2ml</i>	1	
<i>methotrexate tabs 2.5mg</i>	1	
<i>mitomycin inj 20mg</i>	2	*
<i>mitomycin inj 40mg</i>	2	*
<i>mitomycin inj 5mg</i>	2	*
<i>mitoxantrone hcl inj 2mg/ml</i>	1	*

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>mitoxantrone hcl inj 2mg/ml</i>	1	*
MUSTARGEN INJ 10MG	3	
MYLOTARG INJ 4.5MG	5	
NERLYNX TABS 40MG	5	
NEXAVAR TABS 200MG	5	
NILANDRON TABS 150MG	5	
NILUTAMIDE TABS 150MG	4	
NINLARO CAPS 2.3MG	5	
NINLARO CAPS 3MG	5	
NINLARO CAPS 4MG	5	
NIPENT INJ 10MG	4	*
ODOMZO CAPS 200MG	5	
ONCASPAR INJ 750UNIT/ML	4	*
OPDIVO INJ 100MG/10ML	5	*
OPDIVO INJ 240MG/24ML	5	
OPDIVO INJ 40MG/4ML	5	*
<i>oxaliplatin inj 100mg/20ml</i>	1	*
<i>oxaliplatin inj 100mg</i>	1	
<i>oxaliplatin inj 50mg/10ml</i>	1	*
<i>oxaliplatin inj 50mg</i>	1	
<i>paclitaxel inj 100mg/16.7ml</i>	1	*
<i>paclitaxel inj 150mg/25ml</i>	1	*
<i>paclitaxel inj 300mg/50ml</i>	1	*
PERJETA INJ 420MG/14ML	5	*
POMALYST CAPS 1MG	5	*
POMALYST CAPS 2MG	5	*
POMALYST CAPS 3MG	5	*
POMALYST CAPS 4MG	5	*
PORTRAZZA INJ 800MG/50ML	5	*
POTELIGEO INJ 20MG/5ML	5	
PROLEUKIN INJ 22000000UNIT	5	*
PURIXAN SUSP 2000MG/100ML	5	
REVLIMID CAPS 10MG	5	*
REVLIMID CAPS 15MG	5	*
REVLIMID CAPS 2.5MG	5	*
REVLIMID CAPS 20MG	5	*
REVLIMID CAPS 25MG	5	*
REVLIMID CAPS 5MG	5	*
RHEUMATREX TABS 2.5MG	4	
RHEUMATREX TABS 2.5MG	4	
RHEUMATREX TABS 2.5MG	4	
RHEUMATREX TABS 2.5MG	4	
RHEUMATREX TABS 2.5MG	4	
RITUXAN HYCELA INJ 23400UNT/11.7ML; 1400MG/11.7ML	5	
RITUXAN HYCELA INJ 26800UNT/13.4ML; 1600MG/13.4ML	5	
RITUXAN INJ 100MG/10ML	3	*

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
RITUXAN INJ 500MG/50ML	3	*
RUBRACA TABS 200MG	5	
RUBRACA TABS 250MG	5	
RUBRACA TABS 300MG	5	
RYDAPT CAPS 25MG	5	
SIKLOS TABS 100MG	4	
SOLTAMOX SOLN 10MG/5ML	4	
SPRYCEL TABS 100MG	5	
SPRYCEL TABS 140MG	5	
SPRYCEL TABS 20MG	5	
SPRYCEL TABS 50MG	5	
SPRYCEL TABS 70MG	5	
SPRYCEL TABS 80MG	5	
STIVARGA TABS 40MG	5	
SUTENT CAPS 12.5MG	5	
SUTENT CAPS 25MG	5	
SUTENT CAPS 37.5MG	5	
SUTENT CAPS 50MG	5	
SYLATRON INJ 200MCG	5	
SYLATRON INJ 300MCG	5	
SYLATRON INJ 600MCG	5	
SYLVANT INJ 100MG	5	*
SYLVANT INJ 400MG	5	*
SYNRIBO INJ 3.5MG	5	*
TABLOID TABS 40MG	3	
TAFINLAR CAPS 50MG	5	
TAFINLAR CAPS 75MG	5	
TAGRISSO TABS 40MG	5	
TAGRISSO TABS 80MG	5	
<i>tamoxifen citrate tabs 10mg</i>	1	
<i>tamoxifen citrate tabs 20mg</i>	1	
TARCEVA TABS 100MG	5	
TARCEVA TABS 150MG	5	
TARCEVA TABS 25MG	5	
TARGRETIN CAPS 75MG	5	
TASIGNA CAPS 150MG	5	
TASIGNA CAPS 200MG	5	
TASIGNA CAPS 50MG	5	
TAXOTERE INJ 20MG/ML	4	*
TAXOTERE INJ 80MG/4ML	4	*
TECENTRIQ INJ 1200MG/20ML	5	*
TEMODAR INJ 100MG	5	*
TEMSIROLIMUS INJ 25MG/ML	3	
TEPADINA INJ 100MG	5	
<i>thiotepa inj 15mg</i>	2	
TIBSOVO TABS 250MG	5	
<i>toposar inj 1gm/50ml</i>	1	*
<i>topotecan hcl inj 4mg/4ml</i>	4	*

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>topotecan hcl inj 4mg</i>	4	*
TORISEL INJ 25MG/ML	3	*
TREANDA INJ 100MG	4	*
TREANDA INJ 180MG/2ML	4	*
TREANDA INJ 25MG	4	*
TREANDA INJ 45MG/0.5ML	4	*
TRELSTAR MIXJECT INJ 11.25MG	4	
TRELSTAR MIXJECT INJ 22.5MG	4	
TRELSTAR MIXJECT INJ 3.75MG	4	
<i>tretinoin caps 10mg</i>	1	
TREXALL TABS 10MG	4	
TREXALL TABS 15MG	4	
TREXALL TABS 5MG	4	
TREXALL TABS 7.5MG	4	
TRISENOX INJ 10MG/10ML	4	*
TRISENOX INJ 12MG/6ML	4	
TYKERB TABS 250MG	5	
UNITUXIN INJ 17.5MG/5ML	5	*
VALSTAR INJ 40MG/ML	4	*
VANTAS INJ 50MG	3	*
VECTIBIX INJ 100MG/5ML	4	*
VECTIBIX INJ 400MG/20ML	4	*
VELCADE INJ 3.5MG	4	
VENCLEXTA STARTING PACK TBPK 0	5	
VENCLEXTA TABS 100MG	5	
VENCLEXTA TABS 10MG	4	
VENCLEXTA TABS 50MG	4	
VERZENIO TABS 100MG	5	
VERZENIO TABS 150MG	5	
VERZENIO TABS 200MG	5	
VERZENIO TABS 50MG	5	
VIDAZA INJ 100MG	4	*
<i>vinblastine sulfate inj 1mg/ml</i>	1	HI; *
<i>vincasar pfs inj 1mg/ml</i>	1	B/D; *
<i>vincristine sulfate inj 1mg/ml</i>	1	B/D; *
<i>vinorelbine tartrate inj 10mg/ml</i>	1	*
<i>vinorelbine tartrate inj 50mg/5ml</i>	1	*
VOTRIENT TABS 200MG	5	
VYXEOS INJ 100MG; 44MG	5	
XALKORI CAPS 200MG	5	
XALKORI CAPS 250MG	5	
XATMEP SOLN 2.5MG/ML	5	
XTANDI CAPS 40MG	5	
YERVOY INJ 200MG/40ML	3	*
YERVOY INJ 50MG/10ML	3	*
YONDELIS INJ 1MG	5	*
YONSA TABS 125MG	5	
ZALTRAP INJ 100MG/4ML	5	*

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Drug Name	Drug Tier	Requirements/Limits
ZALTRAP INJ 200MG/8ML	5	*
ZANOSAR INJ 1GM	3	*
ZEJULA CAPS 100MG	5	
ZELBORAF TABS 240MG	5	
ZOLADEX INJ 10.8MG	4	*
ZOLADEX INJ 3.6MG	4	*
ZOLINZA CAPS 100MG	5	
ZYDELIG TABS 100MG	5	
ZYDELIG TABS 150MG	5	
ZYKADIA CAPS 150MG	5	
ZYTIGA TABS 250MG	5	
ZYTIGA TABS 500MG	5	
<b>Antineoplastics</b>		
<i>Monoclonal Antibodies</i>		
BESPARA INJ 0.9MG	5	
LYNPARZA TABS 100MG	5	
LYNPARZA TABS 150MG	5	
<b>Antipsychotics</b>		
<i>2nd Generation/Atypical</i>		
ARISTADA INJ 1064MG/3.9ML	5	
SELZENTRY SOLN 20MG/ML	5	
<b>Antitoxins, Immune Globulins, Toxoids, and Vaccines</b>		
<i>Allergenic Extracts</i>		
GRASSTEK SUBL 2800BAU	4	
ODACTRA SUBL 0; 0	4	
ODACTRA SUBL 0; 0	4	
ORALAIR CHILDREN/ADOLESCENTS STARTER PACK	4	
SUBL 0; 0; 0; 0; 0		
ORALAIR SUBL 0; 0; 0; 0; 0	4	
RAGWITEK SUBL 12AMB A 1-U	4	
<i>Antitoxins and Immune Globulins</i>		
BIVIGAM INJ 10GM/100ML	4	B/D HI; *
BIVIGAM INJ 5GM/50ML	4	B/D HI; *
CARIMUNE NANOFILTERED INJ 12GM	4	B/D HI; *
CARIMUNE NANOFILTERED INJ 6GM	4	B/D HI; *
CUVITRU INJ 1GM/5ML	4	B/D HI
CUVITRU INJ 2GM/10ML	4	B/D HI
CUVITRU INJ 4GM/20ML	4	B/D HI
CUVITRU INJ 8GM/40ML	4	B/D HI
CYTOGAM INJ 50MG/ML	4	*
FLEBOGAMMA DIF INJ 0.5GM/10ML	4	B/D HI; *
FLEBOGAMMA DIF INJ 10%	4	B/D HI; *
FLEBOGAMMA DIF INJ 10%	4	B/D HI; *
FLEBOGAMMA DIF INJ 10%	4	B/D HI; *
FLEBOGAMMA DIF INJ 10GM/200ML	4	B/D HI; *
FLEBOGAMMA DIF INJ 2.5GM/50ML	4	B/D HI; *
FLEBOGAMMA DIF INJ 20GM/400ML	4	B/D HI; *
FLEBOGAMMA DIF INJ 5GM/100ML	4	B/D HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
GAMASTAN S/D INJ 0	3	*
GAMASTAN S/D INJ 0	3	*
GAMMAGARD LIQUID INJ 10GM/100ML	4	HI
GAMMAGARD LIQUID INJ 1GM/10ML	4	HI
GAMMAGARD LIQUID INJ 2.5GM/25ML	4	HI; *
GAMMAGARD LIQUID INJ 20GM/200ML	4	HI
GAMMAGARD LIQUID INJ 30GM/300ML	3	HI; *
GAMMAGARD LIQUID INJ 5GM/50ML	4	HI
GAMMAGARD S/D IGA LESS THAN 1MCG/ML INJ 10GM	3	HI; *
GAMMAGARD S/D IGA LESS THAN 1MCG/ML INJ 5GM	3	HI; *
GAMMAKED INJ 10GM/100ML	4	HI; *
GAMMAKED INJ 1GM/10ML	4	HI; *
GAMMAKED INJ 2.5GM/25ML	4	HI; *
GAMMAKED INJ 20GM/200ML	4	HI; *
GAMMAKED INJ 5GM/50ML	4	HI; *
GAMMAPLEX INJ 10GM/100ML; 0	4	B/D HI
GAMMAPLEX INJ 10GM/200ML	3	B/D HI; *
GAMMAPLEX INJ 20GM/200ML	4	B/D HI
GAMMAPLEX INJ 20GM/400ML	3	B/D HI; *
GAMMAPLEX INJ 5GM/100ML	3	B/D HI; *
GAMMAPLEX INJ 5GM/50ML	4	B/D HI
GAMUNEX-C INJ 10GM/100ML	3	HI; *
GAMUNEX-C INJ 1GM/10ML	3	HI; *
GAMUNEX-C INJ 2.5GM/25ML	3	HI; *
GAMUNEX-C INJ 20GM/200ML	3	HI; *
GAMUNEX-C INJ 40GM/400ML	3	HI; *
GAMUNEX-C INJ 5GM/50ML	3	HI; *
HEPAGAM B INJ 0	3	*
HIZENTRA INJ 10GM/50ML	4	B/D HI
HIZENTRA INJ 1GM/5ML	4	B/D HI
HIZENTRA INJ 2GM/10ML	4	B/D HI
HIZENTRA INJ 4GM/20ML	4	B/D HI
HYPERHEP B S/D INJ 0	3	*
HYPERRAB S/D INJ 1500UNIT/10ML	3	*
HYPERRAB S/D INJ 300UNIT/2ML	3	*
HYPERRAB INJ 1500UNIT/5ML	3	
HYPERRAB INJ 300UNIT/ML	3	
HYPERRHO S/D MINI-DOSE INJ 250UNIT	3	*
HYPERRHO S/D INJ 1500UNIT	4	*
HYQVIA INJ 10GM/100ML; 800UNIT/5ML	5	HI; *
HYQVIA INJ 2.5GM/25ML; 200UNIT/1.25ML	5	HI; *
HYQVIA INJ 20GM/200ML; 1600UNIT/10ML	5	HI; *
HYQVIA INJ 30GM/300ML; 2400UNIT/15ML	5	HI; *
HYQVIA INJ 5GM/50ML; 400UNIT/2.5ML	5	HI; *
IMOGAM RABIES-HT INJ 300UNIT/2ML	3	*
KEDRAB INJ 1500UNIT/10ML	3	
KEDRAB INJ 300UNIT/2ML	3	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
LOCORT 11-DAY TBPk 1.5MG	4	B/D
LOCORT 7-DAY TBPk 1.5MG	4	B/D
MICRHOGAM ULTRA-FILTERED PLUS INJ 250UNIT	4	*
NABI-HB INJ 0	3	*
OCTAGAM INJ 10GM/100ML	4	B/D HI
OCTAGAM INJ 10GM/200ML	3	B/D HI; *
OCTAGAM INJ 1GM/20ML	3	B/D HI; *
OCTAGAM INJ 2.5GM/50ML	3	B/D HI; *
OCTAGAM INJ 20GM/200ML	3	B/D HI; *
OCTAGAM INJ 25GM/500ML	3	HI
OCTAGAM INJ 2GM/20ML	3	B/D HI; *
OCTAGAM INJ 5GM/100ML	3	B/D HI; *
OCTAGAM INJ 5GM/50ML	4	B/D HI
PRIVIGEN INJ 10GM/100ML	3	B/D HI; *
PRIVIGEN INJ 20GM/200ML	3	B/D HI; *
PRIVIGEN INJ 40GM/400ML	3	B/D HI
PRIVIGEN INJ 5GM/50ML	3	B/D HI; *
RHOGAM ULTRA-FILTERED PLUS INJ 1500UNIT	4	*
RHOPHYLAC INJ 1500UNIT/2ML	4	*
VARIZIG INJ 125UNIT/1.2ML	6	*
WINRHO SDF INJ 15000UNIT/13ML	4	HI; *
WINRHO SDF INJ 1500UNIT/1.3ML	4	HI; *
WINRHO SDF INJ 2500UNIT/2.2ML	4	HI; *
WINRHO SDF INJ 5000UNIT/4.4ML	4	HI; *
ZINPLAVA INJ 1000MG/40ML	4	*
<b>Toxoids</b>		
ADACEL INJ 15.5MCG/0.5ML; 2LF/0.5ML; 5LF/0.5ML	6	*
ADACEL INJ 15.5MCG/0.5ML; 2LF/0.5ML; 5LF/0.5ML	6	*
BOOSTRIX INJ 18.5MCG/0.5ML; 2.5LF/0.5ML; 5LF/0.5ML	6	*
BOOSTRIX INJ 18.5MCG/0.5ML; 2.5LF/0.5ML; 5LF/0.5ML	6	*
DAPTACEL INJ 23MCG/0.5ML; 15LF/0.5ML; 5LF/0.5ML	6	*
DIPHThERIA/TETANUS TOXOIDS ADSORBED	6	
PEDIATRIC INJ 25LFU/0.5ML; 5LFU/0.5ML		
INFANRIX INJ 58MCG/0.5ML; 25LFU/0.5ML; 10LFU/0.5ML	6	
KINRIX INJ 58MCG/0.5ML; 25LFU/0.5ML; 0; 10LFU/0.5ML	6	
KINRIX INJ 58MCG/0.5ML; 25LFU/0.5ML; 0; 10LFU/0.5ML	6	
QUADRACEL INJ 48MCG/0.5ML; 15LFU/0.5ML; 0; 5LFU/0.5ML	6	
TENIVAC INJ 2LFU; 5LFU	6	
TETANUS/DIPHThERIA TOXOIDS-ADSORBED INJ 2LF/0.5ML; 2LF/0.5ML	6	
<b>Vaccines</b>		
ACTHIB INJ 0	6	*

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document



Drug Name	Drug Tier	Requirements/Limits
BCG VACCINE INJ 0	6	*
BEXSERO INJ 0	6	*
BIOTHRAX INJ 0	6	
CERVARIX INJ 0	6	*
COMVAX INJ 7.5MCG/0.5ML; 5MCG/0.5ML	6	*
ENGERIX-B INJ 10MCG/0.5ML	6	B/D
ENGERIX-B INJ 10MCG/0.5ML	6	B/D; *
ENGERIX-B INJ 20MCG/ML	6	B/D
ENGERIX-B INJ 20MCG/ML	6	B/D; *
GARDASIL 9 INJ 0	6	*
GARDASIL 9 INJ 0	6	*
GARDASIL INJ 0	6	*
GARDASIL INJ 0	6	*
HAVRIX INJ 1440ELU/ML	6	*
HAVRIX INJ 1440ELU/ML	6	
HAVRIX INJ 720ELU/0.5ML	6	
HAVRIX INJ 720ELU/0.5ML	6	*
HEPLISAV-B INJ 20MCG/0.5ML	6	B/D
HEPLISAV-B INJ 20MCG/0.5ML	6	B/D
HIBERIX INJ 10MCG	6	*
IMOVAX RABIES (H.D.C.V.) INJ 2.5UNIT/ML	6	B/D; *
IPOX INACTIVATED IPV INJ 0	6	*
IXIARO INJ 0	6	*
M-M-R II INJ 0; 0; 0	6	*
MENACTRA INJ 0	6	*
MENHIBRIX INJ 2.5MCG; 5MCG; 5MCG	6	*
MENOMUNE-A/C/Y/W-135 INJ 0	6	*
MENVEO INJ 0	6	*
PEDIARIX INJ 58MCG/0.5ML; 25LFU/0.5ML; 10MCG/0.5ML; 0; 10LFU/0.5ML	6	*
PEDVAX HIB INJ 7.5MCG/0.5ML	6	*
PENTACEL INJ 48MCG/0.5ML; 15LFU/0.5ML; 0; 0; 5LFU/0.5ML	6	
PROQUAD INJ 0; 0; 0; 0	6	*
RABAVERT INJ 0	6	B/D; *
RECOMBIVAX HB INJ 10MCG/ML	6	B/D; *
RECOMBIVAX HB INJ 10MCG/ML	6	B/D; *
RECOMBIVAX HB INJ 40MCG/ML	6	B/D; *
RECOMBIVAX HB INJ 5MCG/0.5ML	6	B/D; *
ROTARIX SUSR 0	4	*
ROTATEQ SOLN 0	4	*
SHINGRIX INJ 50MCG/0.5ML	6	
STAMARIL INJ 0	3	
THERACYS INJ 81MG/VIAL	3	*
TICE BCG INJ 50MG	3	*
TRUMENBA INJ 0	6	*
TWINRIX INJ 720ELU/ML; 20MCG/ML	6	
TYPHIM VI INJ 25MCG/0.5ML	6	*

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Drug Name	Drug Tier	Requirements/Limits
TYPHIM VI INJ 25MCG/0.5ML	6	*
VAQTA INJ 25UNIT/0.5ML	6	
VAQTA INJ 25UNIT/0.5ML	6	*
VAQTA INJ 50UNIT/ML	6	
VAQTA INJ 50UNIT/ML	6	*
VARIVAX INJ 1350PFU/0.5ML	6	*
YF-VAX INJ 0	6	*
ZOSTAVAX INJ 19400UNT/0.65ML	6	*

### Autonomic Drugs

#### Anticholinergic Agents

ANORO ELLIPTA AEPB 62.5MCG/INH; 25MCG/INH	4	
<i>atropine sulfate inj 0.25mg/5ml</i>	1	
<i>atropine sulfate inj 0.5mg/5ml</i>	1	
<i>atropine sulfate inj 1mg/10ml</i>	1	
ATROVENT HFA AERS 17MCG/ACT	3	
ATROVENT SOLN 0.03%	4	
ATROVENT SOLN 0.06%	4	
BENTYL CAPS 10MG	4	
BENTYL INJ 10MG/ML	3	
BENTYL TABS 20MG	4	
BEVESPI AEROSPHERE AERO 4.8MCG/ACT; 9MCG/ACT	4	
CANTIL TABS 25MG	4	
CUVPOSA SOLN 1MG/5ML	4	
<i>dicyclomine hcl caps 10mg</i>	1	
<i>dicyclomine hcl inj 10mg/ml</i>	1	
<i>dicyclomine hcl soln 10mg/5ml</i>	1	
<i>dicyclomine hydrochloride tabs 20mg</i>	1	
<i>glycopyrrolate inj 4mg/20ml</i>	1	
<i>glycopyrrolate tabs 1mg</i>	1	
<i>glycopyrrolate tabs 2mg</i>	1	
GLYRX-PF INJ 0.2MG/ML	4	
GLYRX-PF INJ 0.4MG/2ML	4	
INCRUSE ELLIPTA AEPB 62.5MCG/INH	4	
<i>ipratropium bromide soln 0.02%</i>	1	B/D
<i>ipratropium bromide soln 0.03%</i>	2	
<i>ipratropium bromide soln 0.06%</i>	2	
LONHALA MAGNAIR REFILL KIT SOLN 25MCG/ML	5	
LONHALA MAGNAIR STARTER KIT SOLN 25MCG/ML	5	
<i>methscopolamine bromide tabs 2.5mg</i>	2	
<i>methscopolamine bromide tabs 5mg</i>	2	
PAMINE FORTE TABS 5MG	4	
PAMINE TABS 2.5MG	4	
<i>propantheline bromide tabs 15mg</i>	1	
ROBINUL FORTE TABS 2MG	4	
ROBINUL INJ 0.2MG/ML	4	
ROBINUL INJ 0.4MG/2ML	4	
ROBINUL INJ 4MG/20ML	4	

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Drug Name	Drug Tier	Requirements/Limits
ROBINUL TABS 1MG	4	
SEEBRI NEOHALER CAPS 15.6MCG	4	
SPIRIVA HANDIHALER CAPS 18MCG	3	
SPIRIVA RESPIMAT AERS 1.25MCG/ACT	3	
SPIRIVA RESPIMAT AERS 2.5MCG/ACT	3	
STIOLTO RESPIMAT AERS 2.5MCG/ACT; 2.5MCG/ACT	3	
TUDORZA PRESSAIR AEPB 400MCG/ACT	4	
TUDORZA PRESSAIR AEPB 400MCG/ACT	4	
<b>Autonomic Drugs, Miscellaneous</b>		
CHANTIX CONTINUING MONTH PAK TABS 1MG	3	
CHANTIX STARTING MONTH PAK TABS 0	3	
CHANTIX TABS 0.5MG	3	
CHANTIX TABS 1MG	3	
NICOTROL INHALER INHA 10MG	4	
NICOTROL NS SOLN 10MG/ML	4	
<b>Parasympathomimetic (Cholinergic) Agents</b>		
ARICEPT TABS 10MG	4	
ARICEPT TABS 23MG	4	
ARICEPT TABS 5MG	4	
<i>bethanechol chloride tabs 10mg</i>	1	
<i>bethanechol chloride tabs 25mg</i>	1	
<i>bethanechol chloride tabs 50mg</i>	1	
<i>bethanechol chloride tabs 5mg</i>	1	
<i>cevimeline hcl caps 30mg</i>	2	
<i>donepezil hcl tabs 10mg</i>	1	
<i>donepezil hcl tabs 23mg</i>	2	
<i>donepezil hcl tabs 5mg</i>	1	
<i>donepezil hcl tbdp 10mg</i>	2	
<i>donepezil hcl tbdp 5mg</i>	2	
EVOXAC CAPS 30MG	4	
EXELON CAPS 1.5MG	4	
EXELON CAPS 3MG	4	
EXELON CAPS 4.5MG	4	
EXELON CAPS 6MG	4	
EXELON PT24 13.3MG/24HR	4	
EXELON PT24 4.6MG/24HR	4	
EXELON PT24 9.5MG/24HR	4	
<i>galantamine hydrobromide er cp24 16mg</i>	1	
<i>galantamine hydrobromide er cp24 24mg</i>	1	
<i>galantamine hydrobromide er cp24 8mg</i>	1	
<i>galantamine hydrobromide soln 4mg/ml</i>	1	
<i>galantamine hydrobromide tabs 12mg</i>	1	
<i>galantamine hydrobromide tabs 4mg</i>	1	
<i>galantamine hydrobromide tabs 8mg</i>	1	
<i>guanidine hcl tabs 125mg</i>	2	
MESTINON TIMESPAN TBCR 180MG	4	
MESTINON SYRP 60MG/5ML	3	
MESTINON TABS 60MG	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>pilocarpine hcl tabs 7.5mg</i>	1	
<i>pilocarpine hydrochloride tabs 5mg</i>	1	
<i>pyridostigmine bromide er tbcr 180mg</i>	1	
<i>pyridostigmine bromide tabs 60mg</i>	1	
RAZADYNE ER CP24 16MG	4	
RAZADYNE ER CP24 24MG	4	
RAZADYNE ER CP24 8MG	4	
RAZADYNE TABS 12MG	4	
RAZADYNE TABS 4MG	4	
RAZADYNE TABS 8MG	4	
REGONOL INJ 10MG/2ML	3	*
<i>rivastigmine tartrate caps 1.5mg</i>	1	
<i>rivastigmine tartrate caps 3mg</i>	1	
<i>rivastigmine tartrate caps 4.5mg</i>	1	
<i>rivastigmine tartrate caps 6mg</i>	1	
<i>rivastigmine transdermal system pt24 13.3mg/24hr</i>	2	
<i>rivastigmine transdermal system pt24 4.6mg/24hr</i>	2	
<i>rivastigmine transdermal system pt24 9.5mg/24hr</i>	2	
SALAGEN TABS 5MG	4	
SALAGEN TABS 7.5MG	4	
URECHOLINE TABS 10MG	4	
URECHOLINE TABS 25MG	4	
URECHOLINE TABS 50MG	4	
URECHOLINE TABS 5MG	4	
<b><i>Skeletal Muscle Relaxants</i></b>		
AMRIX CP24 15MG	4	PA
AMRIX CP24 30MG	4	PA
<i>baclofen tabs 10mg</i>	1	
<i>baclofen tabs 20mg</i>	1	
<i>baclofen tabs 5mg</i>	1	
<i>carisoprodol/aspirin/codeine tabs 325mg; 200mg; 16mg</i>	2	QL (240 EA per 30 days) PA
<i>carisoprodol/aspirin tabs 325mg; 200mg</i>	2	PA
<i>carisoprodol tabs 250mg</i>	2	PA
<i>carisoprodol tabs 350mg</i>	2	PA
<i>chlorzoxazone tabs 250mg</i>	2	
<i>chlorzoxazone tabs 500mg</i>	2	
<i>cyclobenzaprine hcl tabs 10mg</i>	2	PA
<i>cyclobenzaprine hcl tabs 5mg</i>	2	PA
<i>cyclobenzaprine hcl tabs 7.5mg</i>	2	PA
DANTRIUM CAPS 25MG	4	
DANTRIUM CAPS 50MG	4	
<i>dantrolene sodium caps 100mg</i>	1	
<i>dantrolene sodium caps 25mg</i>	1	
<i>dantrolene sodium caps 50mg</i>	1	
FEXMID TABS 7.5MG	4	PA
GABLOFEN INJ 10000MCG/20ML	4	B/D HI; *
GABLOFEN INJ 20000MCG/20ML	4	B/D HI; *
GABLOFEN INJ 40000MCG/20ML	4	B/D HI; *

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Drug Name	Drug Tier	Requirements/Limits
GABLOFEN INJ 50MCG/ML	4	B/D HI; *
LIORESAL INTRATHECAL INJ 0.05MG/ML	3	B/D HI; *
LIORESAL INTRATHECAL INJ 2000MCG/ML	3	B/D HI; *
LIORESAL INTRATHECAL INJ 40MG/20ML	3	B/D HI; *
LIORESAL INTRATHECAL INJ 500MCG/ML	3	B/D HI; *
LORZONE TABS 375MG	4	
LORZONE TABS 750MG	4	
<i>metaxall tabs 800mg</i>	2	PA
<i>metaxalone tabs 400mg</i>	2	PA
<i>metaxalone tabs 800mg</i>	2	PA
<i>methocarbamol inj 1000mg/10ml</i>	2	PA
<i>methocarbamol tabs 500mg</i>	2	PA
<i>methocarbamol tabs 750mg</i>	2	PA
<i>orphenadrine citrate er tb12 100mg</i>	2	PA
<i>orphenadrine citrate inj 30mg/ml</i>	2	PA
PARAFON FORTE DSC TABS 500MG	4	
ROBAXIN-750 TABS 750MG	4	PA
ROBAXIN INJ 1000MG/10ML	4	PA
ROBAXIN TABS 500MG	4	PA
SKELAXIN TABS 800MG	4	PA
SOMA TABS 250MG	4	PA
SOMA TABS 350MG	4	PA
<i>succinylcholine chloride inj 20mg/ml</i>	2	
<i>tizanidine hcl caps 2mg</i>	2	
<i>tizanidine hcl caps 4mg</i>	2	
<i>tizanidine hcl caps 6mg</i>	2	
<i>tizanidine hcl tabs 2mg</i>	1	
<i>tizanidine hcl tabs 4mg</i>	1	
ZANAFLEX CAPS 2MG	4	
ZANAFLEX CAPS 4MG	4	
ZANAFLEX CAPS 6MG	4	
ZANAFLEX TABS 4MG	4	
<b>Sympatholytic (Adrenergic Blocking) Agents</b>		
<i>alfuzosin hcl er tb24 10mg</i>	1	
D.H.E. 45 INJ 1MG/ML	5	
DIBENZYLINE CAPS 10MG	5	
<i>dihydroergotamine mesylate inj 1mg/ml</i>	1	
<i>dihydroergotamine mesylate soln 4mg/ml</i>	5	
<i>ergoloid mesylates tabs 1mg</i>	2	
ERGOMAR SUBL 2MG	3	
FLOMAX CAPS 0.4MG	4	
MIGRANAL SOLN 4MG/ML	5	
<i>phenoxybenzamine hydrochloride caps 10mg</i>	5	
<i>phentolamine mesylate inj 5mg</i>	1	
RAPAFLO CAPS 4MG	4	
RAPAFLO CAPS 8MG	4	
<i>tamsulosin hcl caps 0.4mg</i>	1	
UROXATRAL TB24 10MG	4	

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Drug Name	Drug Tier	Requirements/Limits
<b>Sympathomimetic (Adrenergic) Agents</b>		
ADRENALIN INJ 0.15MG/0.15ML	4	
ADRENALIN INJ 0.3MG/0.3ML	4	
ADRENALIN INJ 1MG/ML	4	
ADRENALIN INJ 30MG/30ML	4	
ADVAIR DISKUS AEPB 100MCG/DOSE; 50MCG/DOSE	3	
ADVAIR DISKUS AEPB 250MCG/DOSE; 50MCG/DOSE	3	
ADVAIR DISKUS AEPB 500MCG/DOSE; 50MCG/DOSE	3	
ADVAIR HFA AERO 115MCG/ACT; 21MCG/ACT	3	
ADVAIR HFA AERO 230MCG/ACT; 21MCG/ACT	3	
ADVAIR HFA AERO 45MCG/ACT; 21MCG/ACT	3	
<i>albuterol sulfate er tb12 4mg</i>	1	
<i>albuterol sulfate er tb12 8mg</i>	1	
<i>albuterol sulfate nebu 0.083%</i>	1	B/D
<i>albuterol sulfate nebu 0.5%</i>	1	B/D
<i>albuterol sulfate nebu 0.63mg/3ml</i>	1	B/D
<i>albuterol sulfate nebu 1.25mg/3ml</i>	1	B/D
<i>albuterol sulfate syrp 2mg/5ml</i>	1	
<i>albuterol sulfate tabs 2mg</i>	1	
<i>albuterol sulfate tabs 4mg</i>	1	
ARCAPTA NEOHALER CAPS 75MCG	4	
AUVI-Q INJ 0.15MG/0.15ML	4	
AUVI-Q INJ 0.1MG/0.1ML	4	
AUVI-Q INJ 0.3MG/0.3ML	4	
BROVANA NEBU 15MCG/2ML	4	B/D
COMBIVENT RESPIMAT AERS 100MCG/ACT; 20MCG/ACT	3	
<i>dobutamine hcl/d5w inj 5%; 1mg/ml</i>	1	HI; *
<i>dobutamine hcl inj 250mg/20ml</i>	1	*
<i>dobutamine hcl inj 500mg/40ml</i>	1	*
<i>dobutamine hydrochloride/dextrose inj 5%; 2mg/ml</i>	1	HI; *
<i>dobutamine hydrochloride/dextrose inj 5%; 4mg/ml</i>	1	HI; *
<i>dobutamine/dextrose 5% inj 5%; 2mg/ml</i>	1	HI; *
<i>dobutamine/dextrose 5% inj 5%; 4mg/ml</i>	1	HI; *
<i>dopamine hcl inj 160mg/ml</i>	1	HI; *
<i>dopamine hcl inj 40mg/ml</i>	1	HI; *
<i>dopamine hcl inj 80mg/ml</i>	1	HI; *
<i>dopamine hydrochloride/dextrose inj 5%; 0.8mg/ml</i>	1	HI; *
<i>dopamine hydrochloride/dextrose inj 5%; 0.8mg/ml</i>	1	HI; *
<i>dopamine hydrochloride/dextrose inj 5%; 0.8mg/ml</i>	1	HI; *
<i>dopamine hydrochloride/dextrose inj 5%; 1.6mg/ml</i>	1	HI; *
<i>dopamine hydrochloride/dextrose inj 5%; 1.6mg/ml</i>	1	HI; *
<i>dopamine/d5w inj 5%; 3.2mg/ml</i>	1	HI; *
<i>epinephrine inj 0.15mg/0.15ml</i>	1	
<i>epinephrine inj 0.15mg/0.3ml</i>	1	
<i>epinephrine inj 0.3mg/0.3ml</i>	1	
<i>epinephrine inj 0.3mg/0.3ml</i>	1	
EPIPEN 2-PAK INJ 0.3MG/0.3ML	3	

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Drug Name	Drug Tier	Requirements/Limits
EIPEN-JR 2-PAK INJ 0.15MG/0.3ML	3	
<i>ipratropium bromide/albuterol sulfate soln 2.5mg/3ml; 0.5mg/3ml</i>	1	B/D
<i>isoproterenol hydrochloride inj 0.2mg/ml</i>	2	
<i>isoproterenol hydrochloride inj 0.2mg/ml</i>	2	
ISUPREL INJ 0.2MG/ML	4	
<i>levalbuterol hcl nebu 0.31mg/3ml</i>	2	B/D
<i>levalbuterol hcl nebu 0.63mg/3ml</i>	2	B/D
<i>levalbuterol hcl nebu 1.25mg/3ml</i>	2	B/D
<i>levalbuterol tartrate hfa aero 45mcg/act</i>	2	QL (30 GM per 30 days)
<i>levalbuterol nebu 1.25mg/0.5ml</i>	2	B/D
LEVOPHED INJ 1MG/ML	4	*
LUCEMYRA TABS 0.18MG	5	
<i>metaproterenol sulfate syrup 10mg/5ml</i>	1	
<i>metaproterenol sulfate tabs 10mg</i>	1	
<i>metaproterenol sulfate tabs 20mg</i>	1	
<i>midodrine hcl tabs 10mg</i>	1	
<i>midodrine hcl tabs 2.5mg</i>	1	
<i>midodrine hcl tabs 5mg</i>	1	
<i>norepinephrine bitartrate inj 1mg/ml</i>	2	*
NORTHERA CAPS 100MG	5	PA
NORTHERA CAPS 200MG	5	PA
NORTHERA CAPS 300MG	5	PA
PERFOROMIST NEBU 20MCG/2ML	4	B/D
<i>phenylephrine hydrochloride inj 10mg/ml</i>	2	
PROAIR HFA AERS 108MCG/ACT	4	QL (17 GM per 30 days)
PROAIR RESPICLICK AEPB 108MCG/ACT	4	
PROVENTIL HFA AERS 108MCG/ACT	4	QL (13.4 GM per 30 days)
SEREVENT DISKUS AEPB 50MCG/DOSE	3	
STRIVERDI RESPIMAT AERS 2.5MCG/ACT	3	
<i>terbutaline sulfate inj 1mg/ml</i>	1	
<i>terbutaline sulfate tabs 2.5mg</i>	1	
<i>terbutaline sulfate tabs 5mg</i>	1	
UTIBRON NEOHALER CAPS 15.6MCG; 27.5MCG	4	
VAZCULEP INJ 10MG/ML	4	
VENTOLIN HFA AERS 108MCG/ACT	3	QL (36 GM per 30 days)
VOSPIRE ER TB12 4MG	4	
VOSPIRE ER TB12 8MG	4	
XOPENEX CONCENTRATE NEBU 1.25MG/0.5ML	4	B/D
XOPENEX HFA AERO 45MCG/ACT	4	QL (30 GM per 30 days)
XOPENEX NEBU 0.31MG/3ML	4	B/D
XOPENEX NEBU 0.63MG/3ML	4	B/D
XOPENEX NEBU 1.25MG/3ML	4	B/D

### Blood Formation, Coagulation & Thrombosis

#### Antianemia Drugs

<i>sodium ferric gluconate complex/sucrose inj 12.5mg/ml</i>	2	HI
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#### Antihemorrhagic Agents

AMICAR SOLN 0.25GM/ML	4	
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You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
AMICAR TABS 1000MG	4	
AMICAR TABS 500MG	4	
<i>aminocaproic acid inj 250mg/ml</i>	1	*
CYKLOKAPRON INJ 1000MG/10ML	4	*
LYSTEDA TABS 650MG	4	QL (30 EA per 30 days)
<i>tranexamic acid inj 1000mg/10ml</i>	2	*
<i>tranexamic acid tabs 650mg</i>	1	QL (30 EA per 30 days)
<b>Antithrombotic Agents</b>		
AGGRENOX CP12 25MG; 200MG	1	
AGRYLIN CAPS 0.5MG	4	
<i>anagrelide hydrochloride caps 0.5mg</i>	1	
<i>anagrelide hydrochloride caps 1mg</i>	1	
<i>argatroban inj 125mg/125ml; 0.9%</i>	2	*
<i>argatroban inj 250mg/2.5ml</i>	2	*
ARIXTRA INJ 10MG/0.8ML	5	
ARIXTRA INJ 2.5MG/0.5ML	5	
ARIXTRA INJ 5MG/0.4ML	5	
ARIXTRA INJ 7.5MG/0.6ML	5	
<i>aspirin/dipyridamole cp12 25mg; 200mg</i>	1	
BRILINTA TABS 60MG	3	
BRILINTA TABS 90MG	3	
<i>cilostazol tabs 100mg</i>	1	
<i>cilostazol tabs 50mg</i>	1	
<i>clopidogrel tabs 300mg</i>	2	
<i>clopidogrel tabs 75mg</i>	1	
COUMADIN TABS 10MG	4	
COUMADIN TABS 1MG	4	
COUMADIN TABS 2.5MG	4	
COUMADIN TABS 2MG	4	
COUMADIN TABS 3MG	4	
COUMADIN TABS 4MG	4	
COUMADIN TABS 5MG	4	
COUMADIN TABS 6MG	4	
COUMADIN TABS 7.5MG	4	
DURLAZA CP24 162.5MG	4	
EFFIENT TABS 10MG	4	
EFFIENT TABS 5MG	4	
ELIQUIS TABS 2.5MG	4	
ELIQUIS TABS 5MG	4	
<i>enoxaparin sodium inj 100mg/ml</i>	1	
<i>enoxaparin sodium inj 120mg/0.8ml</i>	1	
<i>enoxaparin sodium inj 150mg/ml</i>	1	
<i>enoxaparin sodium inj 300mg/3ml</i>	1	
<i>enoxaparin sodium inj 30mg/0.3ml</i>	1	
<i>enoxaparin sodium inj 40mg/0.4ml</i>	1	
<i>enoxaparin sodium inj 60mg/0.6ml</i>	1	
<i>enoxaparin sodium inj 80mg/0.8ml</i>	1	
<i>eptifibatide inj 200mg/100ml</i>	1	*

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document



Drug Name	Drug Tier	Requirements/Limits
<i>eptifibatide inj 20mg/10ml</i>	1	*
<i>eptifibatide inj 75mg/100ml</i>	1	*
<i>fondaparinux sodium inj 10mg/0.8ml</i>	5	
<i>fondaparinux sodium inj 2.5mg/0.5ml</i>	2	
<i>fondaparinux sodium inj 5mg/0.4ml</i>	5	
<i>fondaparinux sodium inj 7.5mg/0.6ml</i>	5	
FRAGMIN INJ 10000UNIT/ML	4	
FRAGMIN INJ 12500UNIT/0.5ML	4	
FRAGMIN INJ 15000UNIT/0.6ML	4	
FRAGMIN INJ 18000UNT/0.72ML	4	
FRAGMIN INJ 2500UNIT/0.2ML	4	
FRAGMIN INJ 5000UNIT/0.2ML	4	
FRAGMIN INJ 7500UNIT/0.3ML	4	
FRAGMIN INJ 95000UNIT/3.8ML	4	
<i>heparin sodium dcu inj 20000unit/ml</i>	1	HI
<i>heparin sodium/d5w inj 5%; 100unit/ml</i>	1	HI; *
<i>heparin sodium/d5w inj 5%; 40unit/ml</i>	1	HI; *
<i>heparin sodium/d5w inj 5%; 50unit/ml</i>	1	HI; *
<i>heparin sodium/nacl 0.45% inj 100unit/ml; 0.45%</i>	1	HI
<i>heparin sodium/nacl 0.45% inj 50unit/ml; 0.45%</i>	1	HI
<i>heparin sodium/nacl 0.9% inj 2unit/ml; 0.9%</i>	1	HI
<i>heparin sodium/sodium chloride 0.9% premix inj 2unit/ml; 0.9%</i>	1	HI
<i>heparin sodium/sodium chloride 0.9% inj 2unit/ml; 0.9%</i>	1	HI
<i>heparin sodium/sodium chloride 0.9% inj 2unit/ml; 0.9%</i>	1	HI
HEPARIN SODIUM/SODIUM CHLORIDE INJ 25000UNIT/500ML; 0.45%	4	HI
<i>heparin sodium inj 10000unit/ml</i>	1	HI
<i>heparin sodium inj 1000unit/ml</i>	1	HI
<i>heparin sodium inj 20000unit/ml</i>	1	HI
<i>heparin sodium inj 5000unit/0.5ml</i>	1	HI
<i>heparin sodium inj 5000unit/ml</i>	1	HI
IPRIVASK INJ 15MG	4	
<i>jantoven tabs 10mg</i>	1	
<i>jantoven tabs 1mg</i>	1	
<i>jantoven tabs 2.5mg</i>	1	
<i>jantoven tabs 2mg</i>	1	
<i>jantoven tabs 3mg</i>	1	
<i>jantoven tabs 4mg</i>	1	
<i>jantoven tabs 5mg</i>	1	
<i>jantoven tabs 6mg</i>	1	
<i>jantoven tabs 7.5mg</i>	1	
<i>lovenox inj 100mg/ml</i>	1	
<i>lovenox inj 120mg/0.8ml</i>	1	
<i>lovenox inj 150mg/ml</i>	1	
<i>lovenox inj 300mg/3ml</i>	1	
<i>lovenox inj 30mg/0.3ml</i>	1	
<i>lovenox inj 40mg/0.4ml</i>	1	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>lovenox inj 60mg/0.6ml</i>	1	
<i>lovenox inj 80mg/0.8ml</i>	1	
PLAVIX TABS 300MG	4	
PLAVIX TABS 75MG	4	
PRADAXA CAPS 110MG	3	
PRADAXA CAPS 150MG	3	
PRADAXA CAPS 75MG	3	
SAVAYSA TABS 15MG	4	
SAVAYSA TABS 30MG	4	
SAVAYSA TABS 60MG	4	
<i>warfarin sodium tabs 10mg</i>	1	
<i>warfarin sodium tabs 1mg</i>	1	
<i>warfarin sodium tabs 2.5mg</i>	1	
<i>warfarin sodium tabs 2mg</i>	1	
<i>warfarin sodium tabs 3mg</i>	1	
<i>warfarin sodium tabs 4mg</i>	1	
<i>warfarin sodium tabs 5mg</i>	1	
<i>warfarin sodium tabs 6mg</i>	1	
<i>warfarin sodium tabs 7.5mg</i>	1	
XARELTO STARTER PACK TBPK 0	3	
XARELTO TABS 10MG	3	
XARELTO TABS 15MG	3	
XARELTO TABS 20MG	3	
YOSPRALA TBEC 325MG; 40MG	4	
YOSPRALA TBEC 81MG; 40MG	4	
ZONTIVITY TABS 2.08MG	4	
<b>Hematopoietic Agents</b>		
ARANESP ALBUMIN FREE INJ 100MCG/0.5ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 100MCG/ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 10MCG/0.4ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 150MCG/0.3ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 200MCG/0.4ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 200MCG/ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 25MCG/0.42ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 25MCG/ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 300MCG/0.6ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 300MCG/ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 40MCG/0.4ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 40MCG/ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 500MCG/ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 60MCG/0.3ML	4	B/D; *
ARANESP ALBUMIN FREE INJ 60MCG/ML	4	B/D; *
EPOGEN INJ 10000UNIT/ML	3	B/D
EPOGEN INJ 20000UNIT/ML	3	B/D
EPOGEN INJ 2000UNIT/ML	3	B/D
EPOGEN INJ 3000UNIT/ML	3	B/D
EPOGEN INJ 4000UNIT/ML	3	B/D
GRANIX INJ 300MCG/0.5ML	5	

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Drug Name	Drug Tier	Requirements/Limits
GRANIX INJ 480MCG/0.8ML	5	
LEUKINE INJ 250MCG	4	*
MIRCERA INJ 100MCG/0.3ML	4	
MIRCERA INJ 200MCG/0.3ML	4	
MIRCERA INJ 50MCG/0.3ML	4	
MIRCERA INJ 75MCG/0.3ML	4	
MOZOBIL INJ 24MG/1.2ML	3	*
NEULASTA ONPRO KIT INJ 6MG/0.6ML	5	*
NEULASTA INJ 6MG/0.6ML	5	*
NEUPOGEN INJ 300MCG/0.5ML	5	
NEUPOGEN INJ 300MCG/ML	5	
NEUPOGEN INJ 480MCG/0.8ML	5	
NEUPOGEN INJ 480MCG/1.6ML	5	
NPLATE INJ 250MCG	4	*
NPLATE INJ 500MCG	4	*
PROCRIT INJ 10000UNIT/ML	3	B/D
PROCRIT INJ 20000UNIT/ML	3	B/D
PROCRIT INJ 2000UNIT/ML	3	B/D
PROCRIT INJ 3000UNIT/ML	3	B/D
PROCRIT INJ 40000UNIT/ML	3	B/D
PROCRIT INJ 4000UNIT/ML	3	B/D
PROMACTA TABS 12.5MG	5	
PROMACTA TABS 25MG	5	
PROMACTA TABS 50MG	5	
PROMACTA TABS 75MG	5	
RETACRIT INJ 10000UNIT/ML	4	B/D
RETACRIT INJ 2000UNIT/ML	4	B/D
RETACRIT INJ 3000UNIT/ML	4	B/D
RETACRIT INJ 40000UNIT/ML	5	B/D
RETACRIT INJ 4000UNIT/ML	4	B/D
ZARXIO INJ 300MCG/0.5ML	5	
ZARXIO INJ 480MCG/0.8ML	5	
<b>Hemorrhologic Agents</b>		
<i>pentoxifylline er tbc</i> 400mg	1	
<b>Blood Formation,Coagulation + Thrombosis</b>		
<b>Antithrombotic Agents</b>		
<i>argatroban inj</i> 250mg/250ml; 0.9%	2	
<i>argatroban inj</i> 50mg/50ml	2	
BEVYXXA CAPS 40MG	4	
BEVYXXA CAPS 80MG	4	
ELIQUIS STARTER PACK TABS 5MG	4	
<i>prasugrel tabs</i> 10mg	2	
<i>prasugrel tabs</i> 5mg	2	
<b>Blood Formation, Coagulation, and Thrombosis Agents Misc.</b>		
TAVALISSE TABS 100MG	5	
TAVALISSE TABS 150MG	5	
<b>Hematopoietic Agents</b>		
DOPTELET TABS 20MG	5	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
DOPTELET TABS 20MG	5	
FULPHILA INJ 6MG/0.6ML	5	
MULPLETA TABS 3MG	5	
NIVESTYM INJ 300MCG/0.5ML	5	
NIVESTYM INJ 480MCG/0.8ML	5	
<b>Cardiovascular Drugs</b>		
<i>alpha-Adrenergic Blocking Agents</i>		
CARDURA XL TB24 4MG	4	
CARDURA XL TB24 8MG	4	
CARDURA TABS 1MG	4	
CARDURA TABS 2MG	4	
CARDURA TABS 4MG	4	
CARDURA TABS 8MG	4	
<i>doxazosin mesylate tabs 1mg</i>	1	
<i>doxazosin mesylate tabs 2mg</i>	1	
<i>doxazosin mesylate tabs 4mg</i>	1	
<i>doxazosin mesylate tabs 8mg</i>	1	
MINIPRESS CAPS 1MG	4	
MINIPRESS CAPS 2MG	4	
MINIPRESS CAPS 5MG	4	
<i>prazosin hcl caps 1mg</i>	1	
<i>prazosin hcl caps 2mg</i>	1	
<i>prazosin hcl caps 5mg</i>	1	
<i>terazosin hcl caps 10mg</i>	1	
<i>terazosin hcl caps 1mg</i>	1	
<i>terazosin hcl caps 2mg</i>	1	
<i>terazosin hcl caps 5mg</i>	1	
<i>Antilipemic Agents</i>		
ADVICOR TB24 20MG; 500MG	4	
ALTOPREV TB24 20MG	4	
ALTOPREV TB24 40MG	4	
ALTOPREV TB24 60MG	4	
ANTARA CAPS 30MG	4	
ANTARA CAPS 90MG	4	
<i>atorvastatin calcium tabs 10mg</i>	1	
<i>atorvastatin calcium tabs 20mg</i>	1	
<i>atorvastatin calcium tabs 40mg</i>	1	
<i>atorvastatin calcium tabs 80mg</i>	1	
<i>cholestyramine light pack 4gm</i>	1	
<i>cholestyramine light powd 4gm/dose</i>	1	
<i>cholestyramine pack 4gm</i>	1	
<i>cholestyramine powd 4gm/dose</i>	1	
<i>colesevelam hydrochloride pack 3.75gm</i>	2	
<i>colesevelam hydrochloride tabs 625mg</i>	2	
COLESTID FLAVORED GRAN 5GM	4	
COLESTID FLAVORED PACK 5GM/7.5GM	4	
COLESTID GRAN 5GM	4	
COLESTID PACK 5GM	4	

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Drug Name	Drug Tier	Requirements/Limits
COLESTID TABS 1GM	4	
<i>colestipol hcl gran 5gm</i>	1	
<i>colestipol hcl pack 5gm</i>	1	
<i>colestipol hcl tabs 1gm</i>	1	
CRESTOR TABS 10MG	4	
CRESTOR TABS 20MG	4	
CRESTOR TABS 40MG	4	
CRESTOR TABS 5MG	4	
<i>ezetimibe/simvastatin tabs 10mg; 10mg</i>	1	
<i>ezetimibe/simvastatin tabs 10mg; 20mg</i>	1	
<i>ezetimibe/simvastatin tabs 10mg; 40mg</i>	1	
<i>ezetimibe/simvastatin tabs 10mg; 80mg</i>	1	
<i>ezetimibe tabs 10mg</i>	1	
<i>fenofibrate micronized caps 134mg</i>	1	
<i>fenofibrate micronized caps 200mg</i>	1	
<i>fenofibrate micronized caps 67mg</i>	1	
<i>fenofibrate caps 130mg</i>	1	
<i>fenofibrate caps 150mg</i>	2	
<i>fenofibrate caps 43mg</i>	1	
<i>fenofibrate caps 50mg</i>	2	
<i>fenofibrate tabs 120mg</i>	2	
<i>fenofibrate tabs 145mg</i>	2	
<i>fenofibrate tabs 160mg</i>	1	
<i>fenofibrate tabs 40mg</i>	2	
<i>fenofibrate tabs 48mg</i>	2	
<i>fenofibrate tabs 54mg</i>	1	
<i>fenofibric acid dr cpdr 135mg</i>	2	
<i>fenofibric acid dr cpdr 45mg</i>	2	
<i>fenofibric acid tabs 105mg</i>	1	
<i>fenofibric acid tabs 35mg</i>	1	
FENOGLIDE TABS 120MG	4	
FENOGLIDE TABS 40MG	4	
FIBRICOR TABS 105MG	4	
FIBRICOR TABS 35MG	4	
<i>fluvastatin sodium er tb24 80mg</i>	2	
<i>fluvastatin caps 20mg</i>	2	
<i>fluvastatin caps 40mg</i>	2	
<i>gemfibrozil tabs 600mg</i>	1	
JUXTAPID CAPS 10MG	5	QL (56 EA per 28 days) PA
JUXTAPID CAPS 20MG	5	QL (56 EA per 28 days) PA
JUXTAPID CAPS 30MG	5	QL (28 EA per 28 days) PA
JUXTAPID CAPS 40MG	5	QL (28 EA per 28 days) PA
JUXTAPID CAPS 5MG	5	QL (56 EA per 28 days) PA
JUXTAPID CAPS 60MG	5	QL (28 EA per 28 days) PA
KYNAMRO INJ 200MG/ML	5	QL (4 ML per 28 days) PA
LESCOL XL TB24 80MG	4	
LIPITOR TABS 10MG	4	
LIPITOR TABS 20MG	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
LIPITOR TABS 40MG	4	
LIPITOR TABS 80MG	4	
LIPOFEN CAPS 150MG	4	
LIPOFEN CAPS 50MG	4	
LIVALO TABS 1MG	4	
LIVALO TABS 2MG	4	
LIVALO TABS 4MG	4	
LOFIBRA CAPS 134MG	4	
LOFIBRA CAPS 200MG	4	
LOFIBRA CAPS 67MG	4	
LOFIBRA TABS 160MG	4	
LOFIBRA TABS 54MG	4	
LOPID TABS 600MG	4	
<i>lovastatin tabs 10mg</i>	1	
<i>lovastatin tabs 20mg</i>	1	
<i>lovastatin tabs 40mg</i>	1	
LOVAZA CAPS 375MG; 465MG; 1GM	4	
<i>niacin er tbc 1000mg</i>	2	
<i>niacin er tbc 500mg</i>	2	
<i>niacin er tbc 750mg</i>	2	
NIASPAN TBCR 1000MG	4	
NIASPAN TBCR 500MG	4	
NIASPAN TBCR 750MG	4	
<i>omega-3-acid ethyl esters caps 375mg; 465mg; 1gm</i>	2	
PRALUENT INJ 150MG/ML	5	QL (2 ML per 28 days) PA
PRALUENT INJ 150MG/ML	5	QL (2 ML per 28 days) PA
PRALUENT INJ 75MG/ML	5	QL (2 ML per 28 days) PA
PRALUENT INJ 75MG/ML	5	QL (2 ML per 28 days) PA
PRAVACHOL TABS 20MG	4	
PRAVACHOL TABS 40MG	4	
PRAVACHOL TABS 80MG	4	
<i>pravastatin sodium tabs 10mg</i>	1	
<i>pravastatin sodium tabs 20mg</i>	1	
<i>pravastatin sodium tabs 40mg</i>	1	
<i>pravastatin sodium tabs 80mg</i>	1	
<i>prevalite pack 4gm</i>	1	
<i>prevalite powd 4gm/dose</i>	1	
QUESTRAN LIGHT POWD 4GM/DOSE	4	
QUESTRAN PACK 4GM	4	
QUESTRAN POWD 4GM/DOSE	4	
REPATHA PUSHTRONEX SYSTEM INJ 420MG/3.5ML	4	PA
REPATHA SURECLICK INJ 140MG/ML	4	PA
REPATHA INJ 140MG/ML	4	PA
<i>rosuvastatin calcium tabs 10mg</i>	1	
<i>rosuvastatin calcium tabs 20mg</i>	1	
<i>rosuvastatin calcium tabs 40mg</i>	1	
<i>rosuvastatin calcium tabs 5mg</i>	1	
SIMCOR TB24 1000MG; 20MG	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
SIMCOR TB24 500MG; 20MG	4	
<i>simvastatin tabs 10mg</i>	1	
<i>simvastatin tabs 20mg</i>	1	
<i>simvastatin tabs 40mg</i>	1	
<i>simvastatin tabs 5mg</i>	1	
<i>simvastatin tabs 80mg</i>	1	
TRICOR TABS 145MG	4	
TRICOR TABS 48MG	4	
TRIGLIDE TABS 160MG	4	
<i>triklo caps 375mg; 465mg; 1gm</i>	2	
TRILIPIX CPDR 135MG	4	
TRILIPIX CPDR 45MG	4	
VASCEPA CAPS 0.5GM	4	
VASCEPA CAPS 1GM	4	
VYTORIN TABS 10MG; 10MG	4	
VYTORIN TABS 10MG; 20MG	4	
VYTORIN TABS 10MG; 40MG	4	
VYTORIN TABS 10MG; 80MG	4	
WELCHOL PACK 3.75GM	4	
WELCHOL TABS 625MG	4	
ZETIA TABS 10MG	4	
ZOCOR TABS 10MG	4	
ZOCOR TABS 20MG	4	
ZOCOR TABS 40MG	4	
ZOCOR TABS 5MG	4	
ZOCOR TABS 80MG	4	
ZYPITAMAG TABS 1MG	4	
ZYPITAMAG TABS 2MG	4	
ZYPITAMAG TABS 4MG	4	
<b><i>beta-Adrenergic Blocking Agents</i></b>		
<i>acebutolol hcl caps 200mg</i>	1	
<i>acebutolol hcl caps 400mg</i>	1	
<i>atenolol/chlorthalidone tabs 100mg; 25mg</i>	1	
<i>atenolol/chlorthalidone tabs 50mg; 25mg</i>	1	
<i>atenolol tabs 100mg</i>	1	
<i>atenolol tabs 25mg</i>	1	
<i>atenolol tabs 50mg</i>	1	
BETAPACE AF TABS 120MG	4	
BETAPACE AF TABS 160MG	4	
BETAPACE AF TABS 80MG	4	
BETAPACE TABS 120MG	4	
BETAPACE TABS 160MG	4	
BETAPACE TABS 80MG	4	
<i>betaxolol hcl tabs 10mg</i>	1	
<i>betaxolol hcl tabs 20mg</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide tabs 10mg; 6.25mg</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide tabs 2.5mg; 6.25mg</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide tabs 5mg; 6.25mg</i>	1	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>bisoprolol fumarate tabs 10mg</i>	1	
<i>bisoprolol fumarate tabs 5mg</i>	1	
BREVIBLOC PREMIXED DOUBLESTRENGTH INJ 2000MG/100ML; 4.1MG/ML	3	
BREVIBLOC PREMIXED INJ 2500MG/250ML; 5.9MG/ML	3	
BREVIBLOC INJ 100MG/10ML	3	*
BREVIBLOC INJ 2000MG/100ML; 4.1MG/ML	3	*
BREVIBLOC INJ 2500MG/250ML; 5.9MG/ML	3	*
BYSTOLIC TABS 10MG	4	
BYSTOLIC TABS 2.5MG	4	
BYSTOLIC TABS 20MG	4	
BYSTOLIC TABS 5MG	4	
BYVALSON TABS 5MG; 80MG	4	
<i>carvedilol phosphate cp24 10mg</i>	2	
<i>carvedilol phosphate cp24 20mg</i>	2	
<i>carvedilol phosphate cp24 40mg</i>	2	
<i>carvedilol phosphate cp24 80mg</i>	2	
<i>carvedilol tabs 12.5mg</i>	1	
<i>carvedilol tabs 25mg</i>	1	
<i>carvedilol tabs 3.125mg</i>	1	
<i>carvedilol tabs 6.25mg</i>	1	
COREG CR CP24 10MG	4	
COREG CR CP24 20MG	4	
COREG CR CP24 40MG	4	
COREG CR CP24 80MG	4	
COREG TABS 12.5MG	4	
COREG TABS 25MG	4	
COREG TABS 3.125MG	4	
COREG TABS 6.25MG	4	
CORGARD TABS 20MG	4	
CORGARD TABS 40MG	4	
CORGARD TABS 80MG	4	
CORZIDE TABS 5MG; 40MG	4	
CORZIDE TABS 5MG; 80MG	4	
DUTOPROL TB24 12.5MG; 100MG	4	
DUTOPROL TB24 12.5MG; 25MG	4	
DUTOPROL TB24 12.5MG; 50MG	4	
<i>esmolol hcl inj 100mg/10ml</i>	2	*
<i>esmolol hydrochloride in water double strength inj 2000mg/100ml</i>	2	
<i>esmolol hydrochloride in water inj 2500mg/250ml</i>	2	
<i>esmolol hydrochloride/sodium chloride inj 2000mg/100ml; 4.1mg/ml</i>	2	
<i>esmolol hydrochloride/sodium chloride inj 2500mg/250ml; 5.9mg/ml</i>	2	
HEMANGEOL SOLN 4.28MG/ML	4	
INDERAL LA CP24 120MG	4	
INDERAL LA CP24 160MG	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document



Drug Name	Drug Tier	Requirements/Limits
INDERAL LA CP24 60MG	4	
INDERAL LA CP24 80MG	4	
INNOPRAN XL CP24 120MG	4	
INNOPRAN XL CP24 80MG	4	
KASPARGO SPRINKLE CS24 100MG	4	
KASPARGO SPRINKLE CS24 200MG	4	
KASPARGO SPRINKLE CS24 25MG	4	
KASPARGO SPRINKLE CS24 50MG	4	
<i>labetalol hcl inj 5mg/ml</i>	2	*
<i>labetalol hcl tabs 100mg</i>	1	
<i>labetalol hcl tabs 200mg</i>	1	
<i>labetalol hcl tabs 300mg</i>	1	
LABETALOL HYDROCHLORIDE INJ 20MG/4ML	4	
LABETALOL HYDROCHLORIDE INJ 25MG/5ML	4	
LABETALOL HYDROCHLORIDE INJ 50MG/10ML	4	
LOPRESSOR HCT TABS 25MG; 50MG	4	
LOPRESSOR TABS 100MG	4	
LOPRESSOR TABS 50MG	4	
<i>metoprolol succinate er tb24 100mg</i>	1	
<i>metoprolol succinate er tb24 200mg</i>	1	
<i>metoprolol succinate er tb24 25mg</i>	1	
<i>metoprolol succinate er tb24 50mg</i>	1	
<i>metoprolol tartrate inj 5mg/5ml</i>	1	*
<i>metoprolol tartrate inj 5mg/5ml</i>	1	*
<i>metoprolol tartrate tabs 100mg</i>	1	
<i>metoprolol tartrate tabs 25mg</i>	1	
<i>metoprolol tartrate tabs 37.5mg</i>	1	
<i>metoprolol tartrate tabs 50mg</i>	1	
<i>metoprolol tartrate tabs 75mg</i>	1	
<i>metoprolol/hydrochlorothiazide tabs 25mg; 100mg</i>	1	
<i>metoprolol/hydrochlorothiazide tabs 25mg; 50mg</i>	1	
<i>metoprolol/hydrochlorothiazide tabs 50mg; 100mg</i>	1	
<i>nadolol/bendroflumethiazide tabs 5mg; 40mg</i>	2	
<i>nadolol/bendroflumethiazide tabs 5mg; 80mg</i>	2	
<i>nadolol tabs 20mg</i>	1	
<i>nadolol tabs 40mg</i>	1	
<i>nadolol tabs 80mg</i>	1	
<i>pindolol tabs 10mg</i>	1	
<i>pindolol tabs 5mg</i>	1	
<i>propranolol hcl er cp24 120mg</i>	1	
<i>propranolol hcl er cp24 160mg</i>	1	
<i>propranolol hcl er cp24 60mg</i>	1	
<i>propranolol hcl er cp24 80mg</i>	1	
<i>propranolol hcl inj 1mg/ml</i>	1	*
<i>propranolol hcl soln 20mg/5ml</i>	1	
<i>propranolol hcl soln 40mg/5ml</i>	1	
<i>propranolol hcl tabs 10mg</i>	1	
<i>propranolol hcl tabs 20mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>propranolol hcl tabs 40mg</i>	1	
<i>propranolol hcl tabs 60mg</i>	1	
<i>propranolol hcl tabs 80mg</i>	1	
<i>propranolol hydrochloride tabs 60mg</i>	1	
<i>propranolol/hydrochlorothiazide tabs 25mg; 40mg</i>	1	
<i>propranolol/hydrochlorothiazide tabs 25mg; 80mg</i>	1	
SECTRAL CAPS 200MG	4	
SECTRAL CAPS 400MG	4	
<i>sorine tabs 120mg</i>	1	
<i>sorine tabs 160mg</i>	1	
<i>sorine tabs 240mg</i>	1	
<i>sorine tabs 80mg</i>	1	
<i>sotalol hcl (af) tabs 120mg</i>	1	
<i>sotalol hcl (af) tabs 80mg</i>	1	
<i>sotalol hcl af tabs 160mg</i>	1	
<i>sotalol hcl tabs 120mg</i>	1	
<i>sotalol hcl tabs 160mg</i>	1	
<i>sotalol hcl tabs 240mg</i>	1	
<i>sotalol hcl tabs 80mg</i>	1	
<i>sotalol hydrochloride (af) tabs 80mg</i>	1	
<i>sotalol hydrochloride af tabs 160mg</i>	1	
SOTALOL HYDROCHLORIDE INJ 150MG/10ML	4	*
<i>sotalol hydrochloride tabs 120mg</i>	1	
SOTYLIZE SOLN 5MG/ML	4	
TENORETIC 100 TABS 100MG; 25MG	4	
TENORETIC 50 TABS 50MG; 25MG	4	
TENORMIN TABS 100MG	4	
TENORMIN TABS 25MG	4	
TENORMIN TABS 50MG	4	
<i>timolol maleate tabs 10mg</i>	1	
<i>timolol maleate tabs 20mg</i>	1	
<i>timolol maleate tabs 5mg</i>	1	
TOPROL XL TB24 100MG	4	
TOPROL XL TB24 200MG	4	
TOPROL XL TB24 25MG	4	
TOPROL XL TB24 50MG	4	
ZEBETA TABS 10MG	4	
ZEBETA TABS 5MG	4	
ZIAC TABS 10MG; 6.25MG	4	
ZIAC TABS 2.5MG; 6.25MG	4	
ZIAC TABS 5MG; 6.25MG	4	
<b>Calcium-Channel Blocking Agents</b>		
ADALAT CC TB24 30MG	4	
ADALAT CC TB24 60MG	4	
ADALAT CC TB24 90MG	4	
<i>afeditab cr tb24 30mg</i>	2	
<i>afeditab cr tb24 60mg</i>	2	
<i>amlodipine besylate/atorvastatin calcium tabs 10mg; 10mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate/atorvastatin calcium tabs 10mg; 20mg</i>	2	
<i>amlodipine besylate/atorvastatin calcium tabs 10mg; 40mg</i>	2	
<i>amlodipine besylate/atorvastatin calcium tabs 10mg; 80mg</i>	2	
<i>amlodipine besylate/atorvastatin calcium tabs 2.5mg; 10mg</i>	2	
<i>amlodipine besylate/atorvastatin calcium tabs 2.5mg; 20mg</i>	2	
<i>amlodipine besylate/atorvastatin calcium tabs 2.5mg; 40mg</i>	2	
<i>amlodipine besylate/atorvastatin calcium tabs 5mg; 10mg</i>	2	
<i>amlodipine besylate/atorvastatin calcium tabs 5mg; 20mg</i>	2	
<i>amlodipine besylate/atorvastatin calcium tabs 5mg; 40mg</i>	2	
<i>amlodipine besylate/atorvastatin calcium tabs 5mg; 80mg</i>	2	
<i>amlodipine besylate/benazepril hcl caps 10mg; 40mg</i>	1	
<i>amlodipine besylate/benazepril hcl caps 5mg; 40mg</i>	1	
<i>amlodipine besylate/benazepril hydrochloride caps 10mg; 20mg</i>	1	
<i>amlodipine besylate/benazepril hydrochloride caps 10mg; 40mg</i>	1	
<i>amlodipine besylate/benazepril hydrochloride caps 2.5mg; 10mg</i>	1	
<i>amlodipine besylate/benazepril hydrochloride caps 5mg; 10mg</i>	1	
<i>amlodipine besylate/benazepril hydrochloride caps 5mg; 20mg</i>	1	
<i>amlodipine besylate/benazepril hydrochloride caps 5mg; 40mg</i>	1	
<i>amlodipine besylate/valsartan tabs 10mg; 160mg</i>	2	
<i>amlodipine besylate/valsartan tabs 10mg; 320mg</i>	2	
<i>amlodipine besylate/valsartan tabs 5mg; 160mg</i>	2	
<i>amlodipine besylate/valsartan tabs 5mg; 320mg</i>	2	
<i>amlodipine besylate tabs 10mg</i>	1	
<i>amlodipine besylate tabs 2.5mg</i>	1	
<i>amlodipine besylate tabs 5mg</i>	1	
<i>amlodipine/olmesartan medoxomil tabs 10mg; 20mg</i>	2	
<i>amlodipine/olmesartan medoxomil tabs 10mg; 40mg</i>	2	
<i>amlodipine/olmesartan medoxomil tabs 5mg; 20mg</i>	2	
<i>amlodipine/olmesartan medoxomil tabs 5mg; 40mg</i>	2	
<i>amlodipine/valsartan/hctz tabs 10mg; 12.5mg; 160mg</i>	2	
<i>amlodipine/valsartan/hctz tabs 10mg; 25mg; 160mg</i>	2	
<i>amlodipine/valsartan/hctz tabs 10mg; 25mg; 320mg</i>	2	
<i>amlodipine/valsartan/hctz tabs 5mg; 12.5mg; 160mg</i>	2	
<i>amlodipine/valsartan/hctz tabs 5mg; 25mg; 160mg</i>	2	
AZOR TABS 10MG; 20MG	4	
AZOR TABS 10MG; 40MG	4	
AZOR TABS 5MG; 20MG	4	
AZOR TABS 5MG; 40MG	4	
CADUET TABS 10MG; 10MG	4	
CADUET TABS 10MG; 20MG	4	
CADUET TABS 10MG; 40MG	4	
CADUET TABS 10MG; 80MG	4	

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Drug Name	Drug Tier	Requirements/Limits
CADUET TABS 2.5MG; 10MG	4	
CADUET TABS 2.5MG; 20MG	4	
CADUET TABS 2.5MG; 40MG	4	
CADUET TABS 5MG; 10MG	4	
CADUET TABS 5MG; 20MG	4	
CADUET TABS 5MG; 40MG	4	
CADUET TABS 5MG; 80MG	4	
CALAN SR TBCR 120MG	4	
CALAN SR TBCR 180MG	4	
CALAN SR TBCR 240MG	4	
CALAN TABS 120MG	4	
CALAN TABS 80MG	4	
CARDENE IV INJ 20MG/200ML; 0.86%	4	*
CARDENE IV INJ 4.8%; 20MG/200ML	4	*
CARDENE IV INJ 40MG/200ML; 0.83%	4	*
CARDENE IV INJ 5%; 40MG/200ML	4	*
CARDIZEM CD CP24 120MG	4	
CARDIZEM CD CP24 180MG	4	
CARDIZEM CD CP24 240MG	4	
CARDIZEM CD CP24 300MG	4	
CARDIZEM CD CP24 360MG	4	
CARDIZEM LA TB24 120MG	4	
CARDIZEM LA TB24 180MG	4	
CARDIZEM LA TB24 240MG	4	
CARDIZEM LA TB24 300MG	4	
CARDIZEM LA TB24 360MG	4	
CARDIZEM LA TB24 420MG	4	
CARDIZEM TABS 120MG	4	
CARDIZEM TABS 30MG	4	
CARDIZEM TABS 60MG	4	
<i>cartia xt cp24 120mg</i>	1	
<i>cartia xt cp24 180mg</i>	1	
<i>cartia xt cp24 240mg</i>	1	
<i>cartia xt cp24 300mg</i>	1	
<i>dilt-xr cp24 120mg</i>	1	
<i>dilt-xr cp24 180mg</i>	1	
<i>dilt-xr cp24 240mg</i>	1	
<i>diltiazem cd cp24 180mg</i>	1	
<i>diltiazem cd cp24 240mg</i>	1	
<i>diltiazem cd cp24 300mg</i>	1	
<i>diltiazem hcl cd cp24 360mg</i>	1	
<i>diltiazem hcl er cp12 120mg</i>	1	
<i>diltiazem hcl er cp12 60mg</i>	1	
<i>diltiazem hcl er cp12 90mg</i>	1	
<i>diltiazem hcl er cp24 120mg</i>	1	
<i>diltiazem hcl er cp24 120mg</i>	1	
<i>diltiazem hcl er cp24 120mg</i>	1	
<i>diltiazem hcl er cp24 180mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl er cp24 180mg</i>	1	
<i>diltiazem hcl er cp24 180mg</i>	1	
<i>diltiazem hcl er cp24 240mg</i>	1	
<i>diltiazem hcl er cp24 240mg</i>	1	
<i>diltiazem hcl er cp24 240mg</i>	1	
<i>diltiazem hcl er cp24 300mg</i>	1	
<i>diltiazem hcl er cp24 300mg</i>	1	
<i>diltiazem hcl er cp24 360mg</i>	1	
<i>diltiazem hcl er cp24 360mg</i>	1	
<i>diltiazem hcl er cp24 420mg</i>	1	
<i>diltiazem hcl er tb24 180mg</i>	1	
<i>diltiazem hcl er tb24 240mg</i>	1	
<i>diltiazem hcl er tb24 300mg</i>	1	
<i>diltiazem hcl er tb24 360mg</i>	1	
<i>diltiazem hcl er tb24 420mg</i>	1	
<i>diltiazem hcl inj 100mg</i>	1	HI; *
<i>diltiazem hcl inj 125mg/25ml</i>	1	
<i>diltiazem hcl inj 25mg/5ml</i>	1	*
<i>diltiazem hcl inj 50mg/10ml</i>	1	*
<i>diltiazem hcl tabs 120mg</i>	1	
<i>diltiazem hcl tabs 30mg</i>	1	
<i>diltiazem hcl tabs 60mg</i>	1	
<i>diltiazem hcl tabs 90mg</i>	1	
EXFORGE HCT TABS 10MG; 12.5MG; 160MG	4	
EXFORGE HCT TABS 10MG; 25MG; 160MG	4	
EXFORGE HCT TABS 10MG; 25MG; 320MG	4	
EXFORGE HCT TABS 5MG; 12.5MG; 160MG	4	
EXFORGE HCT TABS 5MG; 25MG; 160MG	4	
EXFORGE TABS 10MG; 160MG	4	
EXFORGE TABS 10MG; 320MG	4	
EXFORGE TABS 5MG; 160MG	4	
EXFORGE TABS 5MG; 320MG	4	
<i>felodipine er tb24 10mg</i>	1	
<i>felodipine er tb24 2.5mg</i>	1	
<i>felodipine er tb24 5mg</i>	1	
<i>isradipine caps 2.5mg</i>	1	
<i>isradipine caps 5mg</i>	1	
LOTREL CAPS 10MG; 20MG	4	
LOTREL CAPS 10MG; 40MG	4	
LOTREL CAPS 2.5MG; 10MG	4	
LOTREL CAPS 5MG; 10MG	4	
LOTREL CAPS 5MG; 20MG	4	
<i>matzim la tb24 180mg</i>	1	
<i>matzim la tb24 240mg</i>	1	
<i>matzim la tb24 300mg</i>	1	
<i>matzim la tb24 360mg</i>	1	
<i>matzim la tb24 420mg</i>	1	
<i>nicardipine hcl caps 20mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>nicardipine hcl caps 30mg</i>	1	
<i>nicardipine hcl inj 2.5mg/ml</i>	2	*
NICARDIPINE HYDROCHLORIDE/DEXTROSE INJ 5%; 25MG/250ML	4	
<i>nifedical xl tb24 30mg</i>	2	
<i>nifedical xl tb24 60mg</i>	2	
<i>nifedipine er tb24 30mg</i>	2	
<i>nifedipine er tb24 30mg</i>	2	
<i>nifedipine er tb24 60mg</i>	2	
<i>nifedipine er tb24 60mg</i>	2	
<i>nifedipine er tb24 90mg</i>	2	
<i>nifedipine er tb24 90mg</i>	2	
<i>nifedipine caps 10mg</i>	2	
<i>nifedipine caps 20mg</i>	2	
<i>nimodipine caps 0; 30mg</i>	2	
<i>nisoldipine er tb24 17mg</i>	2	
<i>nisoldipine er tb24 20mg</i>	2	
<i>nisoldipine er tb24 25.5mg</i>	2	
<i>nisoldipine er tb24 30mg</i>	2	
<i>nisoldipine er tb24 34mg</i>	2	
<i>nisoldipine er tb24 40mg</i>	2	
<i>nisoldipine er tb24 8.5mg</i>	2	
NORVASC TABS 10MG	4	
NORVASC TABS 2.5MG	4	
NORVASC TABS 5MG	4	
NYMALIZE SOLN 30MG/10ML	5	
<i>olmesartan medoxomil/amlodipine/hydrochlorothiazide tabs 10mg; 12.5mg; 40mg</i>	2	
<i>olmesartan medoxomil/amlodipine/hydrochlorothiazide tabs 10mg; 25mg; 40mg</i>	2	
<i>olmesartan medoxomil/amlodipine/hydrochlorothiazide tabs 5mg; 12.5mg; 20mg</i>	2	
<i>olmesartan medoxomil/amlodipine/hydrochlorothiazide tabs 5mg; 12.5mg; 40mg</i>	2	
<i>olmesartan medoxomil/amlodipine/hydrochlorothiazide tabs 5mg; 25mg; 40mg</i>	2	
PROCARDIA XL TB24 30MG	4	
PROCARDIA XL TB24 60MG	4	
PROCARDIA XL TB24 90MG	4	
PROCARDIA CAPS 10MG	4	
SULAR TB24 17MG	4	
SULAR TB24 34MG	4	
SULAR TB24 8.5MG	4	
TARKA TBCR 1MG; 240MG	4	
TARKA TBCR 2MG; 180MG	4	
TARKA TBCR 2MG; 240MG	4	
TARKA TBCR 4MG; 240MG	4	
<i>taztia xt cp24 120mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>taztia xt cp24 180mg</i>	1	
<i>taztia xt cp24 240mg</i>	1	
<i>taztia xt cp24 300mg</i>	1	
<i>taztia xt cp24 360mg</i>	1	
<i>telmisartan/amlodipine tabs 10mg; 40mg</i>	2	
<i>telmisartan/amlodipine tabs 10mg; 80mg</i>	2	
<i>telmisartan/amlodipine tabs 5mg; 40mg</i>	2	
<i>telmisartan/amlodipine tabs 5mg; 80mg</i>	2	
TIAZAC CP24 120MG	4	
TIAZAC CP24 180MG	4	
TIAZAC CP24 240MG	4	
TIAZAC CP24 300MG	4	
TIAZAC CP24 360MG	4	
TIAZAC CP24 420MG	4	
<i>trandolapril/verapamil hcl er tbc 1mg; 240mg</i>	2	
<i>trandolapril/verapamil hcl er tbc 2mg; 180mg</i>	2	
<i>trandolapril/verapamil hcl er tbc 2mg; 240mg</i>	2	
<i>trandolapril/verapamil hcl er tbc 4mg; 240mg</i>	2	
TRIBENZOR TABS 10MG; 12.5MG; 40MG	4	
TRIBENZOR TABS 10MG; 25MG; 40MG	4	
TRIBENZOR TABS 5MG; 12.5MG; 20MG	4	
TRIBENZOR TABS 5MG; 12.5MG; 40MG	4	
TRIBENZOR TABS 5MG; 25MG; 40MG	4	
TWYNSTA TABS 10MG; 40MG	4	
TWYNSTA TABS 10MG; 80MG	4	
TWYNSTA TABS 5MG; 40MG	4	
TWYNSTA TABS 5MG; 80MG	4	
<i>verapamil hcl er cp24 100mg</i>	1	
<i>verapamil hcl er cp24 120mg</i>	1	
<i>verapamil hcl er cp24 180mg</i>	1	
<i>verapamil hcl er cp24 200mg</i>	1	
<i>verapamil hcl er cp24 240mg</i>	1	
<i>verapamil hcl er cp24 300mg</i>	1	
<i>verapamil hcl er tbc 120mg</i>	1	
<i>verapamil hcl er tbc 180mg</i>	1	
<i>verapamil hcl er tbc 240mg</i>	1	
<i>verapamil hcl sr cp24 120mg</i>	1	
<i>verapamil hcl sr cp24 180mg</i>	1	
<i>verapamil hcl sr cp24 240mg</i>	1	
<i>verapamil hcl sr cp24 360mg</i>	1	
<i>verapamil hcl inj 2.5mg/ml</i>	1	*
<i>verapamil hcl tabs 120mg</i>	1	
<i>verapamil hcl tabs 40mg</i>	1	
<i>verapamil hcl tabs 80mg</i>	1	
VERELAN PM CP24 100MG	4	
VERELAN PM CP24 200MG	4	
VERELAN PM CP24 300MG	4	
VERELAN CP24 120MG	4	

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Drug Name	Drug Tier	Requirements/Limits
VERELAN CP24 180MG	4	
VERELAN CP24 240MG	4	
VERELAN CP24 360MG	4	
<b>Cardiac Drugs</b>		
<i>amiodarone hcl inj 50mg/ml</i>	1	*
<i>amiodarone hcl inj 50mg/ml</i>	1	*
<i>amiodarone hcl tabs 100mg</i>	1	
<i>amiodarone hcl tabs 200mg</i>	1	
<i>amiodarone hcl tabs 400mg</i>	1	
<i>amiodarone hydrochloride inj 450mg/9ml</i>	1	
CORLANOR TABS 5MG	4	
CORLANOR TABS 7.5MG	4	
<i>digitek tabs 0.125mg</i>	1	
<i>digitek tabs 0.25mg</i>	1	
<i>digoxin inj 0.25mg/ml</i>	1	
<i>digoxin soln 0.05mg/ml</i>	1	
<i>digoxin tabs 125mcg</i>	1	
<i>digoxin tabs 250mcg</i>	1	
<i>digox tabs 125mcg</i>	1	
<i>digox tabs 250mcg</i>	1	
<i>disopyramide phosphate caps 100mg</i>	2	
<i>disopyramide phosphate caps 150mg</i>	2	
<i>dofetilide caps 125mcg</i>	2	
<i>dofetilide caps 250mcg</i>	2	
<i>dofetilide caps 500mcg</i>	2	
<i>flecainide acetate tabs 100mg</i>	1	
<i>flecainide acetate tabs 150mg</i>	1	
<i>flecainide acetate tabs 50mg</i>	1	
LANOXIN PEDIATRIC INJ 0.1MG/ML	3	
LANOXIN INJ 0.25MG/ML	4	
LANOXIN TABS 125MCG	4	
LANOXIN TABS 187.5MCG	4	
LANOXIN TABS 250MCG	4	
LANOXIN TABS 62.5MCG	4	
<i>lidocaine hcl in d5w inj 5%; 4mg/ml</i>	1	HI; *
<i>lidocaine hcl in d5w inj 5%; 8mg/ml</i>	1	HI; *
<i>lidocaine hcl/dextrose inj 5%; 4mg/ml</i>	1	HI; *
<i>lidocaine hcl/dextrose inj 5%; 8mg/ml</i>	1	HI; *
<i>lidocaine hcl inj 10mg/ml</i>	1	HI; *
<i>lidocaine hcl inj 20mg/ml</i>	1	HI; *
<i>lidocaine hcl inj 20mg/ml</i>	1	HI; *
<i>lidocaine hcl inj 20mg/ml</i>	1	HI; *
<i>mexiletine hcl caps 150mg</i>	1	
<i>mexiletine hcl caps 200mg</i>	1	
<i>mexiletine hcl caps 250mg</i>	1	
<i>milrinone in dextrose inj 5%; 20mg/100ml</i>	2	*
<i>milrinone lactate inj 10mg/10ml</i>	2	*
<i>milrinone lactate inj 20mg/20ml</i>	2	*

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Drug Name	Drug Tier	Requirements/Limits
<i>milrinone lactate inj 20mg/20ml</i>	2	*
<i>milrinone lactate inj 50mg/50ml</i>	2	*
MULTAQ TABS 400MG	4	
NEXTERONE INJ 150MG/100ML; 42.1MG/ML	4	*
NEXTERONE INJ 360MG/200ML; 41.4MG/ML	4	*
NORPACE CR CP12 100MG	4	
NORPACE CR CP12 150MG	4	
NORPACE CAPS 100MG	4	
NORPACE CAPS 150MG	4	
<i>pacerone tabs 100mg</i>	2	
<i>pacerone tabs 200mg</i>	2	
<i>pacerone tabs 400mg</i>	2	
<i>procainamide hcl inj 100mg/ml</i>	1	
<i>procainamide hcl inj 500mg/ml</i>	1	
<i>propafenone hcl er cp12 225mg</i>	2	
<i>propafenone hcl er cp12 325mg</i>	2	
<i>propafenone hcl tabs 150mg</i>	1	
<i>propafenone hcl tabs 225mg</i>	1	
<i>propafenone hcl tabs 300mg</i>	1	
<i>propafenone hydrochloride er cp12 425mg</i>	2	
<i>quinidine gluconate cr tbc 324mg</i>	1	
<i>quinidine gluconate er tbc 324mg</i>	1	
<i>quinidine gluconate inj 80mg/ml</i>	1	
<i>quinidine sulfate tabs 200mg</i>	1	
<i>quinidine sulfate tabs 300mg</i>	1	
RANEXA TB12 1000MG	4	
RANEXA TB12 500MG	4	
RYTHMOL SR CP12 225MG	4	
RYTHMOL SR CP12 325MG	4	
RYTHMOL SR CP12 425MG	4	
RYTHMOL TABS 150MG	4	
RYTHMOL TABS 225MG	4	
TIKOSYN CAPS 125MCG	4	*
TIKOSYN CAPS 250MCG	4	*
TIKOSYN CAPS 500MCG	4	*
XYLOCAINE INJ 20MG/ML	4	HI; *
<b>Hypotensive Agents</b>		
CATAPRES-TTS-1 PTWK 0.1MG/24HR	4	
CATAPRES-TTS-2 PTWK 0.2MG/24HR	4	
CATAPRES-TTS-3 PTWK 0.3MG/24HR	4	
CATAPRES TABS 0.1MG	4	
CATAPRES TABS 0.2MG	4	
CATAPRES TABS 0.3MG	4	
<i>clonidine hcl er tb12 0.1mg</i>	2	
<i>clonidine hcl ptwk 0.1mg/24hr</i>	1	
<i>clonidine hcl ptwk 0.2mg/24hr</i>	1	
<i>clonidine hcl ptwk 0.3mg/24hr</i>	1	
<i>clonidine hcl tabs 0.1mg</i>	1	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>clonidine hcl tabs 0.2mg</i>	1	
<i>clonidine hcl tabs 0.3mg</i>	1	
<i>clonidine hydrochloride er tb12 0.1mg</i>	2	
CLORPRES TABS 15MG; 0.1MG	4	
CLORPRES TABS 15MG; 0.2MG	4	
CLORPRES TABS 15MG; 0.3MG	4	
<i>guanfacine hcl tabs 1mg</i>	2	
<i>guanfacine hcl tabs 2mg</i>	2	
<i>hydralazine hcl inj 20mg/ml</i>	1	HI
<i>hydralazine hcl tabs 100mg</i>	1	
<i>hydralazine hcl tabs 10mg</i>	1	
<i>hydralazine hcl tabs 25mg</i>	1	
<i>hydralazine hcl tabs 50mg</i>	1	
KAPVAY TB12 0.1MG	4	
<i>methyldopa/hydrochlorothiazide tabs 15mg; 250mg</i>	2	
<i>methyldopa/hydrochlorothiazide tabs 25mg; 250mg</i>	2	
<i>methyldopa tabs 250mg</i>	2	
<i>methyldopa tabs 500mg</i>	2	
<i>methyldopate hcl inj 250mg/5ml</i>	2	*
<i>minoxidil tabs 10mg</i>	1	
<i>minoxidil tabs 2.5mg</i>	1	
PRESTALIA TABS 2.5MG; 3.5MG	4	
<i>reserpine tabs 0.1mg</i>	2	
<i>reserpine tabs 0.25mg</i>	2	
TENEX TABS 1MG	4	
TENEX TABS 2MG	4	
VECAMYL TABS 2.5MG	5	
<b><i>Renin-Angiotensin-Aldosterone Sys Inhib</i></b>		
ACCUPRIL TABS 10MG	4	
ACCUPRIL TABS 20MG	4	
ACCUPRIL TABS 40MG	4	
ACCUPRIL TABS 5MG	4	
ACCURETIC TABS 12.5MG; 10MG	4	
ACCURETIC TABS 12.5MG; 20MG	4	
ACCURETIC TABS 25MG; 20MG	4	
ALDACTAZIDE TABS 25MG; 25MG	4	
ALDACTAZIDE TABS 50MG; 50MG	4	
ALDACTONE TABS 100MG	4	
ALDACTONE TABS 25MG	4	
ALDACTONE TABS 50MG	4	
ALTACE CAPS 1.25MG	4	
ALTACE CAPS 10MG	4	
ALTACE CAPS 2.5MG	4	
ALTACE CAPS 5MG	4	
ATACAND HCT TABS 16MG; 12.5MG	4	
ATACAND HCT TABS 32MG; 12.5MG	4	
ATACAND HCT TABS 32MG; 25MG	4	
ATACAND TABS 16MG	4	

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Drug Name	Drug Tier	Requirements/Limits
ATACAND TABS 32MG	4	
ATACAND TABS 4MG	4	
ATACAND TABS 8MG	4	
AVALIDE TABS 12.5MG; 150MG	4	
AVALIDE TABS 12.5MG; 300MG	4	
AVAPRO TABS 150MG	4	
AVAPRO TABS 300MG	4	
AVAPRO TABS 75MG	4	
<i>benazepril hcl/hydrochlorothiazide tabs 10mg; 12.5mg</i>	1	
<i>benazepril hcl/hydrochlorothiazide tabs 20mg; 12.5mg</i>	1	
<i>benazepril hcl/hydrochlorothiazide tabs 20mg; 25mg</i>	1	
<i>benazepril hcl/hydrochlorothiazide tabs 5mg; 6.25mg</i>	1	
<i>benazepril hcl tabs 10mg</i>	1	
<i>benazepril hcl tabs 20mg</i>	1	
<i>benazepril hcl tabs 40mg</i>	1	
<i>benazepril hcl tabs 5mg</i>	1	
BENICAR HCT TABS 12.5MG; 20MG	4	
BENICAR HCT TABS 12.5MG; 40MG	4	
BENICAR HCT TABS 25MG; 40MG	4	
BENICAR TABS 20MG	4	
BENICAR TABS 40MG	4	
BENICAR TABS 5MG	4	
<i>candesartan cilexetil/hydrochlorothiazide tabs 16mg; 12.5mg</i>	2	
<i>candesartan cilexetil/hydrochlorothiazide tabs 32mg; 12.5mg</i>	2	
<i>candesartan cilexetil/hydrochlorothiazide tabs 32mg; 25mg</i>	2	
<i>candesartan cilexetil tabs 16mg</i>	2	
<i>candesartan cilexetil tabs 32mg</i>	2	
<i>candesartan cilexetil tabs 4mg</i>	2	
<i>candesartan cilexetil tabs 8mg</i>	2	
<i>captopril/hydrochlorothiazide tabs 25mg; 15mg</i>	1	
<i>captopril/hydrochlorothiazide tabs 25mg; 25mg</i>	1	
<i>captopril/hydrochlorothiazide tabs 50mg; 15mg</i>	1	
<i>captopril/hydrochlorothiazide tabs 50mg; 25mg</i>	1	
<i>captopril tabs 100mg</i>	1	
<i>captopril tabs 12.5mg</i>	1	
<i>captopril tabs 25mg</i>	1	
<i>captopril tabs 50mg</i>	1	
CAROSPIR SUSP 25MG/5ML	4	
COZAAR TABS 100MG	4	
COZAAR TABS 25MG	4	
COZAAR TABS 50MG	4	
DIOVAN HCT TABS 12.5MG; 160MG	4	
DIOVAN HCT TABS 12.5MG; 320MG	4	
DIOVAN HCT TABS 12.5MG; 80MG	4	
DIOVAN HCT TABS 25MG; 160MG	4	
DIOVAN HCT TABS 25MG; 320MG	4	
DIOVAN TABS 160MG	4	
DIOVAN TABS 320MG	4	

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Drug Name	Drug Tier	Requirements/Limits
DIOVAN TABS 40MG	4	
DIOVAN TABS 80MG	4	
EDARBI TABS 40MG	4	
EDARBI TABS 80MG	4	
EDARBYCLOR TABS 40MG; 12.5MG	4	
EDARBYCLOR TABS 40MG; 25MG	4	
<i>enalapril maleate/hydrochlorothiazide tabs 10mg; 25mg</i>	1	
<i>enalapril maleate/hydrochlorothiazide tabs 5mg; 12.5mg</i>	1	
<i>enalapril maleate tabs 10mg</i>	1	
<i>enalapril maleate tabs 2.5mg</i>	1	
<i>enalapril maleate tabs 20mg</i>	1	
<i>enalapril maleate tabs 5mg</i>	1	
<i>enalaprilat inj 1.25mg/ml</i>	1	HI; *
ENTRESTO TABS 24MG; 26MG	3	
ENTRESTO TABS 49MG; 51MG	3	
ENTRESTO TABS 97MG; 103MG	3	
EPANED SOLN 1MG/ML	4	
EPANED SOLR 1MG/ML	4	
<i>eplerenone tabs 25mg</i>	1	
<i>eplerenone tabs 50mg</i>	1	
<i>eprosartan mesylate tabs 600mg</i>	2	
<i>fosinopril sodium/hydrochlorothiazide tabs 10mg; 12.5mg</i>	1	
<i>fosinopril sodium/hydrochlorothiazide tabs 20mg; 12.5mg</i>	1	
<i>fosinopril sodium tabs 10mg</i>	1	
<i>fosinopril sodium tabs 20mg</i>	1	
<i>fosinopril sodium tabs 40mg</i>	1	
HYZAAR TABS 12.5MG; 100MG	4	
HYZAAR TABS 12.5MG; 50MG	4	
HYZAAR TABS 25MG; 100MG	4	
INSPRA TABS 25MG	4	
INSPRA TABS 50MG	4	
<i>irbesartan/hydrochlorothiazide tabs 12.5mg; 150mg</i>	1	
<i>irbesartan/hydrochlorothiazide tabs 12.5mg; 300mg</i>	1	
<i>irbesartan tabs 150mg</i>	1	
<i>irbesartan tabs 300mg</i>	1	
<i>irbesartan tabs 75mg</i>	1	
<i>lisinopril/hydrochlorothiazide tabs 12.5mg; 10mg</i>	1	
<i>lisinopril/hydrochlorothiazide tabs 12.5mg; 20mg</i>	1	
<i>lisinopril/hydrochlorothiazide tabs 25mg; 20mg</i>	1	
<i>lisinopril tabs 10mg</i>	1	
<i>lisinopril tabs 2.5mg</i>	1	
<i>lisinopril tabs 20mg</i>	1	
<i>lisinopril tabs 30mg</i>	1	
<i>lisinopril tabs 40mg</i>	1	
<i>lisinopril tabs 5mg</i>	1	
<i>losartan potassium/hydrochlorothiazide tabs 12.5mg; 100mg</i>	1	
<i>losartan potassium/hydrochlorothiazide tabs 12.5mg; 50mg</i>	1	
<i>losartan potassium/hydrochlorothiazide tabs 25mg; 100mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>losartan potassium tabs 100mg</i>	1	
<i>losartan potassium tabs 25mg</i>	1	
<i>losartan potassium tabs 50mg</i>	1	
LOTENSIN HCT TABS 10MG; 12.5MG	4	
LOTENSIN HCT TABS 20MG; 12.5MG	4	
LOTENSIN HCT TABS 20MG; 25MG	4	
LOTENSIN TABS 10MG	4	
LOTENSIN TABS 20MG	4	
LOTENSIN TABS 40MG	4	
MAVIK TABS 1MG	4	
MAVIK TABS 2MG	4	
MICARDIS HCT TABS 12.5MG; 40MG	4	
MICARDIS HCT TABS 12.5MG; 80MG	4	
MICARDIS HCT TABS 25MG; 80MG	4	
MICARDIS TABS 20MG	4	
MICARDIS TABS 40MG	4	
MICARDIS TABS 80MG	4	
<i>moexipril hcl tabs 15mg</i>	1	
<i>moexipril hcl tabs 7.5mg</i>	1	
<i>moexipril/hydrochlorothiazide tabs 12.5mg; 15mg</i>	1	
<i>moexipril/hydrochlorothiazide tabs 12.5mg; 7.5mg</i>	1	
<i>moexipril/hydrochlorothiazide tabs 25mg; 15mg</i>	1	
<i>olmesartan medoxomil/hydrochlorothiazide tabs 12.5mg; 20mg</i>	2	
<i>olmesartan medoxomil/hydrochlorothiazide tabs 12.5mg; 40mg</i>	2	
<i>olmesartan medoxomil/hydrochlorothiazide tabs 25mg; 40mg</i>	2	
<i>olmesartan medoxomil tabs 20mg</i>	2	
<i>olmesartan medoxomil tabs 40mg</i>	2	
<i>olmesartan medoxomil tabs 5mg</i>	2	
<i>perindopril erbumine tabs 2mg</i>	1	
<i>perindopril erbumine tabs 4mg</i>	1	
<i>perindopril erbumine tabs 8mg</i>	1	
PRINIVIL TABS 10MG	4	
PRINIVIL TABS 20MG	4	
PRINIVIL TABS 5MG	4	
QBRELIS SOLN 1MG/ML	4	
<i>quinapril hcl tabs 10mg</i>	1	
<i>quinapril hcl tabs 20mg</i>	1	
<i>quinapril hcl tabs 40mg</i>	1	
<i>quinapril hcl tabs 5mg</i>	1	
<i>quinapril/hydrochlorothiazide tabs 12.5mg; 10mg</i>	1	
<i>quinapril/hydrochlorothiazide tabs 12.5mg; 20mg</i>	1	
<i>quinapril/hydrochlorothiazide tabs 25mg; 20mg</i>	1	
<i>ramipril caps 1.25mg</i>	1	
<i>ramipril caps 10mg</i>	1	
<i>ramipril caps 2.5mg</i>	1	
<i>ramipril caps 5mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>spironolactone/hydrochlorothiazide tabs 25mg; 25mg</i>	1	
<i>spironolactone tabs 100mg</i>	1	
<i>spironolactone tabs 25mg</i>	1	
<i>spironolactone tabs 50mg</i>	1	
TEKTURNA HCT TABS 150MG; 12.5MG	4	
TEKTURNA HCT TABS 150MG; 25MG	4	
TEKTURNA HCT TABS 300MG; 12.5MG	4	
TEKTURNA HCT TABS 300MG; 25MG	4	
TEKTURNA TABS 150MG	4	
TEKTURNA TABS 300MG	4	
<i>telmisartan/hydrochlorothiazide tabs 12.5mg; 40mg</i>	2	
<i>telmisartan/hydrochlorothiazide tabs 12.5mg; 80mg</i>	2	
<i>telmisartan/hydrochlorothiazide tabs 25mg; 80mg</i>	2	
<i>telmisartan tabs 20mg</i>	2	
<i>telmisartan tabs 40mg</i>	2	
<i>telmisartan tabs 80mg</i>	2	
<i>trandolapril tabs 1mg</i>	1	
<i>trandolapril tabs 2mg</i>	1	
<i>trandolapril tabs 4mg</i>	1	
<i>valsartan/hydrochlorothiazide tabs 12.5mg; 160mg</i>	1	
<i>valsartan/hydrochlorothiazide tabs 12.5mg; 320mg</i>	1	
<i>valsartan/hydrochlorothiazide tabs 12.5mg; 80mg</i>	1	
<i>valsartan/hydrochlorothiazide tabs 25mg; 160mg</i>	1	
<i>valsartan/hydrochlorothiazide tabs 25mg; 320mg</i>	1	
<i>valsartan tabs 160mg</i>	1	
<i>valsartan tabs 320mg</i>	1	
<i>valsartan tabs 40mg</i>	1	
<i>valsartan tabs 80mg</i>	1	
VASERETIC TABS 10MG; 25MG	4	
VASOTEC TABS 10MG	4	
VASOTEC TABS 2.5MG	4	
VASOTEC TABS 20MG	4	
VASOTEC TABS 5MG	4	
ZESTORETIC TABS 12.5MG; 10MG	4	
ZESTORETIC TABS 12.5MG; 20MG	4	
ZESTORETIC TABS 25MG; 20MG	4	
ZESTRIL TABS 10MG	4	
ZESTRIL TABS 2.5MG	4	
ZESTRIL TABS 20MG	4	
ZESTRIL TABS 30MG	4	
ZESTRIL TABS 40MG	4	
ZESTRIL TABS 5MG	4	
<b>Vasodilating Agents</b>		
ADCIRCA TABS 20MG	5	PA
BIDIL TABS 37.5MG; 20MG	4	
CIALIS TABS 2.5MG	4	PA
CIALIS TABS 5MG	4	PA
DILATRATE SR CPR 40MG	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>dipyridamole tabs 25mg</i>	2	
<i>dipyridamole tabs 50mg</i>	2	
<i>dipyridamole tabs 75mg</i>	2	
GONITRO PACK 400MCG	4	
ISORDIL TITRADOSE TABS 40MG	3	
ISORDIL TITRADOSE TABS 5MG	4	
<i>isosorbide dinitrate er tbcr 40mg</i>	1	
<i>isosorbide dinitrate tabs 10mg</i>	1	
<i>isosorbide dinitrate tabs 20mg</i>	1	
<i>isosorbide dinitrate tabs 30mg</i>	1	
<i>isosorbide dinitrate tabs 5mg</i>	1	
<i>isosorbide mononitrate er tb24 120mg</i>	1	
<i>isosorbide mononitrate er tb24 30mg</i>	1	
<i>isosorbide mononitrate er tb24 60mg</i>	1	
<i>isosorbide mononitrate tabs 10mg</i>	1	
<i>isosorbide mononitrate tabs 20mg</i>	1	
<i>minitran pt24 0.1mg/hr</i>	1	
<i>minitran pt24 0.2mg/hr</i>	1	
<i>minitran pt24 0.4mg/hr</i>	1	
<i>minitran pt24 0.6mg/hr</i>	1	
NITRO-BID OINT 2%	4	
NITRO-DUR PT24 0.1MG/HR	4	
NITRO-DUR PT24 0.2MG/HR	4	
NITRO-DUR PT24 0.3MG/HR	3	
NITRO-DUR PT24 0.4MG/HR	4	
NITRO-DUR PT24 0.6MG/HR	4	
NITRO-DUR PT24 0.8MG/HR	4	
<i>nitroglycerin in 5% dextrose inj 5%; 200mcg/ml</i>	1	*
<i>nitroglycerin in 5% dextrose inj 5%; 400mcg/ml</i>	1	*
<i>nitroglycerin in dextrose 5% inj 5%; 100mcg/ml</i>	1	*
<i>nitroglycerin in dextrose 5% inj 5%; 200mcg/ml</i>	1	*
<i>nitroglycerin in dextrose 5% inj 5%; 400mcg/ml</i>	1	*
<i>nitroglycerin lingual aers 400mcg/spray</i>	2	
<i>nitroglycerin lingual soln 0.4mg/spray</i>	2	
<i>nitroglycerin transdermal pt24 0.1mg/hr</i>	1	
<i>nitroglycerin transdermal pt24 0.2mg/hr</i>	1	
<i>nitroglycerin transdermal pt24 0.4mg/hr</i>	1	
<i>nitroglycerin transdermal pt24 0.6mg/hr</i>	1	
<i>nitroglycerin inj 5mg/ml</i>	1	*
<i>nitroglycerin subl 0.3mg</i>	1	
<i>nitroglycerin subl 0.4mg</i>	1	
<i>nitroglycerin subl 0.6mg</i>	1	
NITROLINGUAL PUMPSPRAY SOLN 0.4MG/SPRAY	4	
NITROMIST AERS 400MCG/SPRAY	4	
NITROSTAT SUBL 0.3MG	4	
NITROSTAT SUBL 0.4MG	4	
NITROSTAT SUBL 0.6MG	4	
PERSANTINE TABS 25MG	4	

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Drug Name	Drug Tier	Requirements/Limits
PERSANTINE TABS 50MG	4	
PERSANTINE TABS 75MG	4	
REVATIO INJ 10MG/12.5ML	5	PA; *
REVATIO SUSR 10MG/ML	5	PA
REVATIO TABS 20MG	5	PA
<i>sildenafil inj 10mg/12.5ml</i>	2	PA; *
<i>sildenafil tabs 20mg</i>	2	PA
<i>tadalafil tabs 20mg</i>	5	PA

### Central Nervous System Agents

#### Analgesics and Antipyretics

ABSTRAL SUBL 100MCG	5	QL (120 EA per 30 days) PA
ABSTRAL SUBL 200MCG	5	QL (120 EA per 30 days) PA
ABSTRAL SUBL 300MCG	5	QL (120 EA per 30 days) PA
ABSTRAL SUBL 400MCG	5	QL (120 EA per 30 days) PA
ABSTRAL SUBL 600MCG	5	QL (120 EA per 30 days) PA
ABSTRAL SUBL 800MCG	5	QL (120 EA per 30 days) PA
<i>acetaminophen/caffeine/dihydrocodeine bitartrate tabs 325mg; 30mg; 16mg</i>	2	QL (360 EA per 30 days)
<i>acetaminophen/caffeine/dihydrocodeine caps 320.5mg; 30mg; 16mg</i>	2	QL (300 EA per 30 days)
<i>acetaminophen/codeine soln 120mg/5ml; 12mg/5ml</i>	1	QL (5000 ML per 30 days)
<i>acetaminophen/codeine tabs 300mg; 15mg</i>	1	QL (360 EA per 30 days)
<i>acetaminophen/codeine tabs 300mg; 30mg</i>	1	QL (360 EA per 30 days)
<i>acetaminophen/codeine tabs 300mg; 60mg</i>	1	QL (180 EA per 30 days)
ACTIQ LPOP 1200MCG	5	QL (120 EA per 30 days) PA
ACTIQ LPOP 1600MCG	5	QL (120 EA per 30 days) PA
ACTIQ LPOP 200MCG	5	QL (120 EA per 30 days) PA
ACTIQ LPOP 400MCG	5	QL (120 EA per 30 days) PA
ACTIQ LPOP 600MCG	5	QL (120 EA per 30 days) PA
ACTIQ LPOP 800MCG	5	QL (120 EA per 30 days) PA
ALLZITAL TABS 325MG; 25MG	4	
ANAPROX DS TABS 550MG	4	
ARTHROTEC 50 TBEC 50MG; 200MCG	4	
ARTHROTEC 75 TBEC 75MG; 200MCG	4	
ARYMO ER TBEA 15MG	4	QL (90 EA per 30 days)
ARYMO ER TBEA 30MG	4	QL (90 EA per 30 days)
ARYMO ER TBEA 60MG	4	QL (90 EA per 30 days)
<i>ascomp/codeine caps 325mg; 50mg; 40mg; 30mg</i>	2	QL (180 EA per 30 days)
<i>aspirin-caffeine-dihydrocodeine caps 356.4mg; 30mg; 16mg</i>	2	QL (360 EA per 30 days)
BELBUCA FILM 150MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 300MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 450MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 600MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 750MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 75MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 900MCG	4	QL (60 EA per 30 days)
BUNAVAIL FILM 2.1MG; 0.3MG	4	QL (30 EA per 30 days)
BUNAVAIL FILM 4.2MG; 0.7MG	4	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document



Drug Name	Drug Tier	Requirements/Limits
BUNAVAIL FILM 6.3MG; 1MG	4	QL (60 EA per 30 days)
BUPAP TABS 300MG; 50MG	4	
BUPRENEX INJ 0.3MG/ML	4	
<i>buprenorphine hcl/naloxone hcl subl 2mg; 0.5mg</i>	1	QL (90 EA per 30 days)
<i>buprenorphine hcl/naloxone hcl subl 8mg; 2mg</i>	1	QL (90 EA per 30 days)
<i>buprenorphine hcl inj 0.3mg/ml</i>	2	
<i>buprenorphine hcl inj 0.3mg/ml</i>	2	
<i>buprenorphine hcl subl 2mg</i>	1	QL (90 EA per 30 days)
<i>buprenorphine hcl subl 8mg</i>	1	QL (90 EA per 30 days)
<i>buprenorphine hydrochloride/naloxone hydrochloride film 8mg; 2mg</i>	2	QL (90 EA per 30 days)
<i>buprenorphine hydrochloride/naloxone hydrochloride subl 2mg; 0.5mg</i>	1	QL (90 EA per 30 days)
<i>buprenorphine ptwk 10mcg/hr</i>	2	QL (4 EA per 28 days)
<i>buprenorphine ptwk 15mcg/hr</i>	2	QL (4 EA per 28 days)
<i>buprenorphine ptwk 20mcg/hr</i>	2	QL (4 EA per 28 days)
<i>buprenorphine ptwk 5mcg/hr</i>	2	QL (4 EA per 28 days)
<i>buprenorphine ptwk 7.5mcg/hr</i>	2	QL (4 EA per 28 days)
<i>butalbital/acetaminophen/caffeine/codeine caps 300mg; 50mg; 40mg; 30mg</i>	2	QL (180 EA per 30 days)
<i>butalbital/acetaminophen/caffeine/codeine caps 325mg; 50mg; 40mg; 30mg</i>	2	QL (180 EA per 30 days)
<i>butalbital/acetaminophen/caffeine caps 300mg; 50mg; 40mg</i>	2	
<i>butalbital/acetaminophen/caffeine caps 325mg; 50mg; 40mg</i>	2	
<i>butalbital/acetaminophen/caffeine tabs 325mg; 50mg; 40mg</i>	2	
BUTALBITAL/ACETAMINOPHEN CAPS 300MG; 50MG	5	
BUTALBITAL/ACETAMINOPHEN TABS 300MG; 50MG	4	
<i>butalbital/acetaminophen tabs 325mg; 50mg</i>	2	
<i>butalbital/aspirin/caffeine/codeine caps 325mg; 50mg; 40mg; 30mg</i>	2	QL (180 EA per 30 days)
<i>butalbital/aspirin/caffeine caps 325mg; 50mg; 40mg</i>	1	
<i>butalbital/aspirin/caffeine tabs 325mg; 50mg; 40mg</i>	2	
<i>butorphanol tartrate inj 1mg/ml</i>	1	
<i>butorphanol tartrate inj 2mg/ml</i>	1	
<i>butorphanol tartrate soln 10mg/ml</i>	2	QL (5 ML per 28 days)
BUTRANS PTWK 10MCG/HR	4	QL (4 EA per 28 days)
BUTRANS PTWK 15MCG/HR	4	QL (4 EA per 28 days)
BUTRANS PTWK 20MCG/HR	4	QL (4 EA per 28 days)
BUTRANS PTWK 5MCG/HR	4	QL (4 EA per 28 days)
BUTRANS PTWK 7.5MCG/HR	4	QL (4 EA per 28 days)
CAMBIA PACK 50MG	4	
<i>capacet caps 325mg; 50mg; 40mg</i>	2	
CAPITAL/CODEINE SUSP 120MG/5ML; 12MG/5ML	4	QL (5000 ML per 30 days)
CELEBREX CAPS 100MG	4	
CELEBREX CAPS 200MG	4	
CELEBREX CAPS 400MG	4	
CELEBREX CAPS 50MG	4	
<i>celecoxib caps 100mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>celecoxib caps 200mg</i>	1	
<i>celecoxib caps 400mg</i>	1	
<i>celecoxib caps 50mg</i>	1	
<i>codeine sulfate tabs 15mg</i>	1	QL (180 EA per 30 days)
<i>codeine sulfate tabs 30mg</i>	1	QL (180 EA per 30 days)
<i>codeine sulfate tabs 60mg</i>	1	QL (180 EA per 30 days)
CONZIP CP24 100MG	4	QL (30 EA per 30 days)
CONZIP CP24 200MG	4	QL (30 EA per 30 days)
CONZIP CP24 300MG	4	QL (30 EA per 30 days)
DAYPRO TABS 600MG	4	
DEMEROL INJ 100MG/2ML	4	PA
DEMEROL INJ 100MG/ML	4	PA
DEMEROL INJ 25MG/0.5ML	4	PA
DEMEROL INJ 25MG/ML	4	PA
DEMEROL INJ 50MG/ML	4	PA
DEMEROL INJ 75MG/1.5ML	4	PA
DEMEROL INJ 75MG/ML	4	PA
DEMEROL TABS 100MG	4	QL (180 EA per 30 days)
DEMEROL TABS 50MG	4	QL (180 EA per 30 days)
<i>diclofenac potassium tabs 50mg</i>	2	
<i>diclofenac sodium dr tbec 25mg</i>	1	
<i>diclofenac sodium dr tbec 50mg</i>	1	
<i>diclofenac sodium dr tbec 75mg</i>	1	
<i>diclofenac sodium er tb24 100mg</i>	1	
<i>diclofenac sodium/misoprostol tbec 50mg; 200mcg</i>	2	
<i>diclofenac sodium/misoprostol tbec 75mg; 200mcg</i>	2	
<i>diflunisal tabs 500mg</i>	1	
DILAUDID INJ 2MG/ML	4	
DILAUDID INJ 4MG/ML	4	
<i>dilaudid liqd 1mg/ml</i>	2	QL (1200 ML per 30 days)
DILAUDID TABS 2MG	4	QL (180 EA per 30 days)
DILAUDID TABS 4MG	4	QL (180 EA per 30 days)
DILAUDID TABS 8MG	4	QL (240 EA per 30 days)
DISALCID TABS 500MG	4	
DISALCID TABS 750MG	4	
DOLOPHINE TABS 10MG	4	QL (180 EA per 30 days)
DOLOPHINE TABS 5MG	4	QL (360 EA per 30 days)
DUEXIS TABS 26.6MG; 800MG	5	
DURAGESIC PT72 100MCG/HR	4	QL (20 EA per 30 days)
DURAGESIC PT72 12MCG/HR	4	QL (15 EA per 30 days)
DURAGESIC PT72 25MCG/HR	4	QL (15 EA per 30 days)
DURAGESIC PT72 50MCG/HR	4	QL (15 EA per 30 days)
DURAGESIC PT72 75MCG/HR	4	QL (15 EA per 30 days)
DURAMORPH INJ 0.5MG/ML	4	HI
<i>duramorph inj 1mg/ml</i>	1	HI
DYLOJECT INJ 37.5MG/ML	4	*
EC-NAPROSYN TBEC 375MG	4	
EC-NAPROSYN TBEC 500MG	4	

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Drug Name	Drug Tier	Requirements/Limits
EMBEDA CPR 100MG; 4MG	4	QL (60 EA per 30 days)
EMBEDA CPR 20MG; 0.8MG	4	QL (60 EA per 30 days)
EMBEDA CPR 30MG; 1.2MG	4	QL (60 EA per 30 days)
EMBEDA CPR 50MG; 2MG	4	QL (60 EA per 30 days)
EMBEDA CPR 60MG; 2.4MG	4	QL (60 EA per 30 days)
EMBEDA CPR 80MG; 3.2MG	4	QL (60 EA per 30 days)
<i>endocet tabs 325mg; 10mg</i>	1	QL (360 EA per 30 days)
<i>endocet tabs 325mg; 2.5mg</i>	1	QL (360 EA per 30 days)
<i>endocet tabs 325mg; 5mg</i>	1	QL (360 EA per 30 days)
<i>endocet tabs 325mg; 7.5mg</i>	1	QL (360 EA per 30 days)
<i>esgic caps 325mg; 50mg; 40mg</i>	2	
<i>esgic tabs 325mg; 50mg; 40mg</i>	2	
<i>etodolac er tb24 400mg</i>	2	
<i>etodolac er tb24 500mg</i>	2	
<i>etodolac er tb24 600mg</i>	2	
<i>etodolac caps 200mg</i>	1	
<i>etodolac caps 300mg</i>	1	
<i>etodolac tabs 400mg</i>	1	
<i>etodolac tabs 500mg</i>	1	
EXALGO T24A 12MG	4	QL (30 EA per 30 days)
EXALGO T24A 16MG	4	QL (30 EA per 30 days)
EXALGO T24A 32MG	4	QL (60 EA per 30 days)
EXALGO T24A 8MG	4	QL (30 EA per 30 days)
FELDENE CAPS 10MG	4	
FELDENE CAPS 20MG	4	
FENOPROFEN CALCIUM CAPS 400MG	4	
<i>fenoprofen calcium tabs 600mg</i>	2	
<i>fentanyl citrate oral transmucosal lpop 1200mcg</i>	5	QL (120 EA per 30 days) PA
<i>fentanyl citrate oral transmucosal lpop 1600mcg</i>	5	QL (120 EA per 30 days) PA
<i>fentanyl citrate oral transmucosal lpop 200mcg</i>	5	QL (120 EA per 30 days) PA
<i>fentanyl citrate oral transmucosal lpop 400mcg</i>	5	QL (120 EA per 30 days) PA
<i>fentanyl citrate oral transmucosal lpop 600mcg</i>	5	QL (120 EA per 30 days) PA
<i>fentanyl citrate oral transmucosal lpop 800mcg</i>	5	QL (120 EA per 30 days) PA
<i>fentanyl pt72 100mcg/hr</i>	1	QL (20 EA per 30 days)
<i>fentanyl pt72 12mcg/hr</i>	1	QL (15 EA per 30 days)
<i>fentanyl pt72 25mcg/hr</i>	1	QL (15 EA per 30 days)
<i>fentanyl pt72 37.5mcg/hr</i>	1	QL (15 EA per 30 days)
<i>fentanyl pt72 50mcg/hr</i>	1	QL (15 EA per 30 days)
<i>fentanyl pt72 62.5mcg/hr</i>	1	QL (15 EA per 30 days)
<i>fentanyl pt72 75mcg/hr</i>	1	QL (15 EA per 30 days)
<i>fentanyl pt72 87.5mcg/hr</i>	1	QL (15 EA per 30 days)
FENTORA TABS 100MCG	5	QL (120 EA per 30 days) PA
FENTORA TABS 200MCG	5	QL (120 EA per 30 days) PA
FENTORA TABS 400MCG	5	QL (120 EA per 30 days) PA
FENTORA TABS 600MCG	5	QL (120 EA per 30 days) PA
FENTORA TABS 800MCG	5	QL (120 EA per 30 days) PA
FIORICET/CODEINE CAPS 300MG; 50MG; 40MG; 30MG	4	QL (180 EA per 30 days)
FIORICET CAPS 300MG; 50MG; 40MG	4	

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Drug Name	Drug Tier	Requirements/Limits
FIORINAL/CODEINE #3 CAPS 325MG; 50MG; 40MG; 30MG	4	QL (180 EA per 30 days)
FIORINAL CAPS 325MG; 50MG; 40MG	4	
<i>flurbiprofen tabs 100mg</i>	1	
<i>flurbiprofen tabs 50mg</i>	1	
GRALISE STARTER MISC 0	4	
GRALISE TABS 300MG	4	
GRALISE TABS 600MG	4	
HYCET SOLN 325MG/15ML; 7.5MG/15ML	4	QL (2700 ML per 30 days)
<i>hydrocodone bitartrate/acetaminophen soln 325mg/15ml; 10mg/15ml</i>	2	QL (2700 ML per 30 days)
<i>hydrocodone bitartrate/acetaminophen soln 325mg/15ml; 7.5mg/15ml</i>	2	QL (2700 ML per 30 days)
<i>hydrocodone bitartrate/acetaminophen tabs 300mg; 10mg</i>	2	QL (390 EA per 30 days)
<i>hydrocodone bitartrate/acetaminophen tabs 300mg; 5mg</i>	2	QL (390 EA per 30 days)
<i>hydrocodone bitartrate/acetaminophen tabs 300mg; 7.5mg</i>	2	QL (390 EA per 30 days)
<i>hydrocodone bitartrate/acetaminophen tabs 325mg; 2.5mg</i>	2	QL (360 EA per 30 days)
<i>hydrocodone/acetaminophen tabs 325mg; 10mg</i>	1	QL (360 EA per 30 days)
<i>hydrocodone/acetaminophen tabs 325mg; 5mg</i>	1	QL (360 EA per 30 days)
<i>hydrocodone/acetaminophen tabs 325mg; 7.5mg</i>	1	QL (360 EA per 30 days)
<i>hydrocodone/ibuprofen tabs 10mg; 200mg</i>	1	QL (150 EA per 30 days)
<i>hydrocodone/ibuprofen tabs 5mg; 200mg</i>	1	QL (150 EA per 30 days)
<i>hydrocodone/ibuprofen tabs 7.5mg; 200mg</i>	1	QL (150 EA per 30 days)
<i>hydromorphone hcl er t24a 12mg</i>	2	QL (30 EA per 30 days)
<i>hydromorphone hcl er t24a 16mg</i>	2	QL (30 EA per 30 days)
<i>hydromorphone hcl er t24a 32mg</i>	2	QL (60 EA per 30 days)
<i>hydromorphone hcl er t24a 8mg</i>	2	QL (30 EA per 30 days)
HYDROMORPHONE HCL/SODIUM CHLORIDE INJ 40MG/200ML; 0.9%	4	HI
<i>hydromorphone hcl inj 10mg/ml</i>	1	
<i>hydromorphone hcl inj 1mg/ml</i>	1	
<i>hydromorphone hcl inj 2mg/ml</i>	1	
<i>hydromorphone hcl inj 4mg/ml</i>	1	
<i>hydromorphone hcl inj 50mg/5ml</i>	1	
<i>hydromorphone hcl liqd 1mg/ml</i>	2	QL (1200 ML per 30 days)
<i>hydromorphone hcl tabs 2mg</i>	1	QL (180 EA per 30 days)
<i>hydromorphone hcl tabs 4mg</i>	1	QL (180 EA per 30 days)
<i>hydromorphone hcl tabs 8mg</i>	1	QL (240 EA per 30 days)
<i>hydromorphone hydrochloride er t24a 32mg</i>	2	QL (60 EA per 30 days)
HYDROMORPHONE HYDROCHLORIDE/ SODIUM CHLORIDE INJ 100MG/100ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 100MG/50ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 10MG/100ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 10MG/50ML; 0.9%	4	HI

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Drug Name	Drug Tier	Requirements/Limits
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 12MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 150MG/150ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 15MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 18MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 200MG/100ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 20MG/100ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 24MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 25MG/250ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 25MG/50ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 2MG/50ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 30MG/150ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 30MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 36MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 3MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 40MG/100ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 50MG/100ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 50MG/250ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 50MG/50ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 5MG/50ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 60MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 6MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 9MG/30ML; 0.9%	4	HI
HYSINGLA ER T24A 100MG	4	QL (30 EA per 30 days) PA
HYSINGLA ER T24A 120MG	4	QL (30 EA per 30 days) PA
HYSINGLA ER T24A 20MG	4	QL (30 EA per 30 days) PA
HYSINGLA ER T24A 30MG	4	QL (30 EA per 30 days) PA

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Drug Name	Drug Tier	Requirements/Limits
HYSINGLA ER T24A 40MG	4	QL (30 EA per 30 days) PA
HYSINGLA ER T24A 60MG	4	QL (30 EA per 30 days) PA
HYSINGLA ER T24A 80MG	4	QL (30 EA per 30 days) PA
IBUDONE TABS 10MG; 200MG	4	QL (150 EA per 30 days)
IBUDONE TABS 5MG; 200MG	4	QL (150 EA per 30 days)
<i>ibuprofen lysine inj 10mg/ml</i>	1	*
<i>ibuprofen susp 100mg/5ml</i>	1	
<i>ibuprofen tabs 400mg</i>	1	
<i>ibuprofen tabs 600mg</i>	1	
<i>ibuprofen tabs 800mg</i>	1	
<i>ibu tabs 600mg</i>	1	
<i>ibu tabs 800mg</i>	1	
ILARIS INJ 150MG/ML	5	
ILARIS INJ 150MG	5	*
INDOCIN SUPP 50MG	4	PA
INDOCIN SUSP 25MG/5ML	4	PA
<i>indomethacin er cpcr 75mg</i>	2	PA
<i>indomethacin caps 25mg</i>	2	PA
<i>indomethacin caps 50mg</i>	2	PA
<i>indomethacin inj 1mg</i>	2	*
INFUMORPH 200 INJ 10MG/ML	4	
INFUMORPH 500 INJ 25MG/ML	4	
KADIAN CP24 100MG	4	QL (60 EA per 30 days)
KADIAN CP24 10MG	4	QL (60 EA per 30 days)
KADIAN CP24 200MG	4	QL (120 EA per 30 days)
KADIAN CP24 20MG	4	QL (60 EA per 30 days)
KADIAN CP24 30MG	4	QL (60 EA per 30 days)
KADIAN CP24 40MG	4	QL (60 EA per 30 days)
KADIAN CP24 50MG	4	QL (60 EA per 30 days)
KADIAN CP24 60MG	4	QL (60 EA per 30 days)
KADIAN CP24 80MG	4	QL (60 EA per 30 days)
<i>ketoprofen er cp24 200mg</i>	2	
<i>ketoprofen caps 25mg</i>	2	
<i>ketoprofen caps 50mg</i>	2	
<i>ketoprofen caps 75mg</i>	2	
<i>ketorolac tromethamine inj 15mg/ml</i>	2	PA
<i>ketorolac tromethamine inj 30mg/ml</i>	2	PA
<i>ketorolac tromethamine inj 30mg/ml</i>	2	PA
<i>ketorolac tromethamine tabs 10mg</i>	2	PA
LAZANDA SOLN 100MCG/ACT	5	QL (30 EA per 30 days) PA
LAZANDA SOLN 300MCG/ACT	5	QL (30 EA per 30 days) PA
LAZANDA SOLN 400MCG/ACT	5	QL (30 EA per 30 days) PA
<i>levorphanol tartrate tabs 2mg</i>	2	QL (180 EA per 30 days)
LODINE TABS 400MG	4	
<i>lorcet hd tabs 325mg; 10mg</i>	2	QL (360 EA per 30 days)
<i>lorcet plus tabs 325mg; 7.5mg</i>	2	QL (360 EA per 30 days)
<i>lorcet tabs 325mg; 5mg</i>	2	QL (360 EA per 30 days)
LORTAB ELIX 300MG/15ML; 10MG/15ML	4	QL (2700 ML per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>loratab tabs 325mg; 10mg</i>	2	QL (360 EA per 30 days)
<i>loratab tabs 325mg; 5mg</i>	2	QL (360 EA per 30 days)
<i>loratab tabs 325mg; 7.5mg</i>	2	QL (360 EA per 30 days)
LYRICA CR TB24 165MG	4	QL (30 EA per 30 days)
LYRICA CR TB24 330MG	4	QL (30 EA per 30 days)
LYRICA CR TB24 82.5MG	4	QL (30 EA per 30 days)
<i>margesic caps 325mg; 50mg; 40mg</i>	2	
<i>marten-tab tabs 325mg; 50mg</i>	2	
<i>meclofenamate sodium caps 100mg</i>	1	
<i>meclofenamate sodium caps 50mg</i>	1	
<i>mefenamic acid caps 250mg</i>	1	
<i>meloxicam susp 7.5mg/5ml</i>	2	
<i>meloxicam tabs 15mg</i>	1	
<i>meloxicam tabs 7.5mg</i>	1	
<i>meperidine hcl inj 100mg/ml</i>	2	PA
<i>meperidine hcl inj 10mg/ml</i>	2	PA
<i>meperidine hcl inj 25mg/ml</i>	2	PA
<i>meperidine hcl inj 50mg/ml</i>	2	PA
<i>meperidine hcl soln 50mg/5ml</i>	2	QL (900 ML per 30 days) PA
<i>meperidine hcl tabs 100mg</i>	2	QL (180 EA per 30 days)
<i>meperidine hcl tabs 50mg</i>	2	QL (180 EA per 30 days)
<i>methadone hcl intensol conc 10mg/ml</i>	1	QL (900 ML per 30 days)
<i>methadone hcl conc 10mg/ml</i>	1	QL (900 ML per 30 days)
<i>methadone hcl inj 10mg/ml</i>	1	
<i>methadone hcl soln 10mg/5ml</i>	1	QL (900 ML per 30 days)
<i>methadone hcl soln 5mg/5ml</i>	1	QL (900 ML per 30 days)
<i>methadone hcl tabs 10mg</i>	1	QL (180 EA per 30 days)
<i>methadone hcl tabs 5mg</i>	1	QL (360 EA per 30 days)
METHADOSE SUGAR-FREE CONC 10MG/ML	4	QL (900 ML per 30 days)
METHADOSE CONC 10MG/ML	4	QL (900 ML per 30 days)
<i>mitigo inj 10mg/ml</i>	1	
<i>mitigo inj 25mg/ml</i>	1	
MOBIC SUSP 7.5MG/5ML	4	
MOBIC TABS 15MG	4	
MOBIC TABS 7.5MG	4	
MORPHABOND ER T12A 100MG	4	QL (60 EA per 30 days)
MORPHABOND ER T12A 15MG	4	QL (60 EA per 30 days)
MORPHABOND ER T12A 30MG	4	QL (60 EA per 30 days)
MORPHABOND ER T12A 60MG	4	QL (60 EA per 30 days)
<i>morphine sulfate er cp24 100mg</i>	2	QL (60 EA per 30 days)
<i>morphine sulfate er cp24 10mg</i>	2	QL (60 EA per 30 days)
<i>morphine sulfate er cp24 120mg</i>	2	QL (60 EA per 30 days)
<i>morphine sulfate er cp24 20mg</i>	2	QL (60 EA per 30 days)
<i>morphine sulfate er cp24 30mg</i>	2	QL (60 EA per 30 days)
<i>morphine sulfate er cp24 30mg</i>	2	QL (30 EA per 30 days)
<i>morphine sulfate er cp24 45mg</i>	2	QL (30 EA per 30 days)
<i>morphine sulfate er cp24 50mg</i>	2	QL (60 EA per 30 days)
<i>morphine sulfate er cp24 60mg</i>	2	QL (60 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate er cp24 60mg</i>	2	QL (30 EA per 30 days)
<i>morphine sulfate er cp24 75mg</i>	2	QL (30 EA per 30 days)
<i>morphine sulfate er cp24 80mg</i>	2	QL (60 EA per 30 days)
<i>morphine sulfate er cp24 90mg</i>	2	QL (30 EA per 30 days)
<i>morphine sulfate er tbcr 100mg</i>	1	QL (120 EA per 30 days)
<i>morphine sulfate er tbcr 15mg</i>	1	QL (120 EA per 30 days)
<i>morphine sulfate er tbcr 200mg</i>	1	QL (180 EA per 30 days)
<i>morphine sulfate er tbcr 30mg</i>	1	QL (120 EA per 30 days)
<i>morphine sulfate er tbcr 60mg</i>	1	QL (120 EA per 30 days)
<i>morphine sulfate/sodium chloride inj 0.5mg/ml; 0.9%</i>	1	HI; *
<i>morphine sulfate inj 0.5mg/ml</i>	1	HI
<i>morphine sulfate inj 10mg/ml</i>	1	HI; *
MORPHINE SULFATE INJ 10MG/ML	4	HI
<i>morphine sulfate inj 150mg/30ml</i>	2	HI; *
<i>morphine sulfate inj 15mg/ml</i>	1	HI; *
<i>morphine sulfate inj 1mg/ml</i>	1	HI
<i>morphine sulfate inj 1mg/ml</i>	1	HI; *
<i>morphine sulfate inj 2mg/ml</i>	1	HI; *
<i>morphine sulfate inj 4mg/ml</i>	1	HI; *
MORPHINE SULFATE INJ 4MG/ML	4	HI
MORPHINE SULFATE INJ 5MG/ML	4	
MORPHINE SULFATE INJ 5MG/ML	4	HI
<i>morphine sulfate inj 8mg/ml</i>	1	HI; *
MORPHINE SULFATE INJ 8MG/ML	4	HI
<i>morphine sulfate soln 100mg/5ml</i>	1	QL (200 ML per 30 days)
<i>morphine sulfate soln 10mg/5ml</i>	1	QL (700 ML per 30 days)
<i>morphine sulfate soln 20mg/5ml</i>	1	QL (300 ML per 30 days)
<i>morphine sulfate tabs 15mg</i>	1	QL (180 EA per 30 days)
<i>morphine sulfate tabs 30mg</i>	1	QL (180 EA per 30 days)
MS CONTIN TBCR 100MG	4	QL (120 EA per 30 days)
MS CONTIN TBCR 15MG	4	QL (120 EA per 30 days)
MS CONTIN TBCR 200MG	4	QL (180 EA per 30 days)
MS CONTIN TBCR 30MG	4	QL (120 EA per 30 days)
MS CONTIN TBCR 60MG	4	QL (120 EA per 30 days)
<i>nabumetone tabs 500mg</i>	1	
<i>nabumetone tabs 750mg</i>	1	
<i>nalbuphine hcl inj 10mg/ml</i>	1	
<i>nalbuphine hcl inj 20mg/ml</i>	1	
NALFON CAPS 400MG	4	
NALOCET TABS 300MG; 2.5MG	4	QL (390 EA per 30 days)
NAPRELAN TB24 375MG	4	
NAPRELAN TB24 500MG	4	
NAPRELAN TB24 750MG	4	
NAPROSYN TABS 500MG	4	
<i>naproxen dr tbec 375mg</i>	1	
<i>naproxen dr tbec 500mg</i>	1	
<i>naproxen sodium cr tb24 375mg</i>	2	
<i>naproxen sodium er tb24 375mg</i>	2	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document



Drug Name	Drug Tier	Requirements/Limits
<i>naproxen sodium er tb24 500mg</i>	2	
<i>naproxen sodium tabs 275mg</i>	1	
<i>naproxen sodium tabs 550mg</i>	1	
<i>naproxen sodium tb24 500mg</i>	2	
<i>naproxen susp 125mg/5ml</i>	1	
<i>naproxen tabs 250mg</i>	1	
<i>naproxen tabs 375mg</i>	1	
<i>naproxen tabs 500mg</i>	1	
NEOPROFEN INJ 10MG/ML	4	*
NORCO TABS 325MG; 10MG	4	QL (360 EA per 30 days)
NORCO TABS 325MG; 5MG	4	QL (360 EA per 30 days)
NORCO TABS 325MG; 7.5MG	4	QL (360 EA per 30 days)
NUCYNTA ER TB12 100MG	4	QL (60 EA per 30 days)
NUCYNTA ER TB12 150MG	4	QL (60 EA per 30 days)
NUCYNTA ER TB12 200MG	4	QL (60 EA per 30 days)
NUCYNTA ER TB12 250MG	4	QL (60 EA per 30 days)
NUCYNTA ER TB12 50MG	4	QL (60 EA per 30 days)
NUCYNTA TABS 100MG	4	QL (181 EA per 30 days)
NUCYNTA TABS 50MG	4	QL (181 EA per 30 days)
NUCYNTA TABS 75MG	4	QL (181 EA per 30 days)
OPANA ER (CRUSH RESISTANT) T12A 10MG	4	QL (60 EA per 30 days)
OPANA ER (CRUSH RESISTANT) T12A 15MG	4	QL (60 EA per 30 days)
OPANA ER (CRUSH RESISTANT) T12A 20MG	4	QL (60 EA per 30 days)
OPANA ER (CRUSH RESISTANT) T12A 30MG	4	QL (60 EA per 30 days)
OPANA ER (CRUSH RESISTANT) T12A 40MG	4	QL (60 EA per 30 days)
OPANA ER (CRUSH RESISTANT) T12A 5MG	4	QL (60 EA per 30 days)
OPANA ER (CRUSH RESISTANT) T12A 7.5MG	4	QL (60 EA per 30 days)
OPANA INJ 1MG/ML	4	
OPANA TABS 10MG	4	QL (180 EA per 30 days)
OPANA TABS 5MG	4	QL (180 EA per 30 days)
<i>oxaprozin tabs 600mg</i>	2	
OXAYDO TABA 5MG	4	QL (360 EA per 30 days)
OXAYDO TABA 7.5MG	4	QL (360 EA per 30 days)
<i>oxycodone hcl er t12a 10mg</i>	1	QL (90 EA per 30 days)
<i>oxycodone hcl er t12a 15mg</i>	1	QL (90 EA per 30 days)
<i>oxycodone hcl er t12a 20mg</i>	1	QL (90 EA per 30 days)
<i>oxycodone hcl er t12a 30mg</i>	1	QL (90 EA per 30 days)
<i>oxycodone hcl er t12a 40mg</i>	1	QL (90 EA per 30 days)
<i>oxycodone hcl er t12a 60mg</i>	1	QL (90 EA per 30 days)
<i>oxycodone hcl er t12a 80mg</i>	1	QL (120 EA per 30 days)
<i>oxycodone hcl caps 5mg</i>	1	QL (360 EA per 30 days)
<i>oxycodone hcl conc 100mg/5ml</i>	1	QL (180 ML per 30 days)
<i>oxycodone hcl soln 5mg/5ml</i>	1	QL (1300 ML per 30 days)
<i>oxycodone hcl tabs 10mg</i>	1	QL (360 EA per 30 days)
<i>oxycodone hcl tabs 15mg</i>	1	QL (360 EA per 30 days)
<i>oxycodone hcl tabs 20mg</i>	1	QL (360 EA per 30 days)
<i>oxycodone hcl tabs 30mg</i>	1	QL (360 EA per 30 days)
<i>oxycodone hcl tabs 5mg</i>	1	QL (360 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone/acetaminophen soln 325mg/5ml; 5mg/5ml</i>	2	QL (1800 ML per 30 days)
<i>oxycodone/acetaminophen tabs 325mg; 10mg</i>	1	QL (360 EA per 30 days)
<i>oxycodone/acetaminophen tabs 325mg; 2.5mg</i>	1	QL (360 EA per 30 days)
<i>oxycodone/acetaminophen tabs 325mg; 5mg</i>	1	QL (360 EA per 30 days)
<i>oxycodone/acetaminophen tabs 325mg; 7.5mg</i>	1	QL (360 EA per 30 days)
<i>oxycodone/aspirin tabs 325mg; 4.835mg</i>	1	QL (360 EA per 30 days)
<i>oxycodone/ibuprofen tabs 400mg; 5mg</i>	2	QL (28 EA per 30 days)
OXYCONTIN T12A 10MG	3	QL (90 EA per 30 days)
OXYCONTIN T12A 15MG	3	QL (90 EA per 30 days)
OXYCONTIN T12A 20MG	3	QL (90 EA per 30 days)
OXYCONTIN T12A 30MG	3	QL (90 EA per 30 days)
OXYCONTIN T12A 40MG	3	QL (90 EA per 30 days)
OXYCONTIN T12A 60MG	3	QL (90 EA per 30 days)
OXYCONTIN T12A 80MG	3	QL (120 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 10mg</i>	2	QL (60 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 15mg</i>	2	QL (60 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 20mg</i>	2	QL (60 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 30mg</i>	2	QL (60 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 40mg</i>	2	QL (60 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 5mg</i>	2	QL (60 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 7.5mg</i>	2	QL (60 EA per 30 days)
<i>oxymorphone hydrochloride tabs 10mg</i>	2	QL (180 EA per 30 days)
<i>oxymorphone hydrochloride tabs 5mg</i>	2	QL (180 EA per 30 days)
<i>panlor tabs 325mg; 30mg; 16mg</i>	2	QL (360 EA per 30 days)
<i>pentazocine/naloxone hcl tabs 0.5mg; 50mg</i>	2	QL (360 EA per 30 days)
PERCOCET TABS 325MG; 10MG	4	QL (360 EA per 30 days)
PERCOCET TABS 325MG; 2.5MG	4	QL (360 EA per 30 days)
PERCOCET TABS 325MG; 5MG	4	QL (360 EA per 30 days)
PERCOCET TABS 325MG; 7.5MG	4	QL (360 EA per 30 days)
<i>phrenilin forte caps 300mg; 50mg; 40mg</i>	2	
<i>piroxicam caps 10mg</i>	1	
<i>piroxicam caps 20mg</i>	1	
PONSTEL CAPS 250MG	4	
PRIALT INJ 100MCG/ML	4	HI; *
PRIALT INJ 500MCG/20ML	4	HI; *
PRIALT INJ 500MCG/5ML	4	HI; *
PRIMLEV TABS 300MG; 10MG	4	QL (390 EA per 30 days)
PRIMLEV TABS 300MG; 5MG	4	QL (390 EA per 30 days)
PRIMLEV TABS 300MG; 7.5MG	4	QL (390 EA per 30 days)
PROFENO TABS 600MG	4	
<i>reprexain tabs 10mg; 200mg</i>	1	QL (150 EA per 30 days)
REPREXAIN TABS 5MG; 200MG	4	QL (150 EA per 30 days)
ROXICODONE TABS 15MG	4	QL (360 EA per 30 days)
ROXICODONE TABS 30MG	4	QL (360 EA per 30 days)
ROXICODONE TABS 5MG	4	QL (360 EA per 30 days)
ROXYBOND TABA 15MG	5	QL (360 EA per 30 days)
ROXYBOND TABA 30MG	5	QL (360 EA per 30 days)
ROXYBOND TABA 5MG	5	QL (360 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>salsalate tabs 500mg</i>	2	
<i>salsalate tabs 750mg</i>	2	
SPRIX SOLN 15.75MG/SPRAY	4	
SUBOXONE FILM 12MG; 3MG	4	QL (90 EA per 30 days)
SUBOXONE FILM 2MG; 0.5MG	4	QL (90 EA per 30 days)
SUBOXONE FILM 4MG; 1MG	4	QL (90 EA per 30 days)
SUBOXONE FILM 8MG; 2MG	4	QL (90 EA per 30 days)
SUBSYS LIQD 100MCG	5	QL (120 EA per 30 days) PA
SUBSYS LIQD 200MCG	5	QL (120 EA per 30 days) PA
SUBSYS LIQD 400MCG	5	QL (120 EA per 30 days) PA
SUBSYS LIQD 600MCG	5	QL (120 EA per 30 days) PA
SUBSYS LIQD 800MCG	5	QL (120 EA per 30 days) PA
<i>sulindac tabs 150mg</i>	1	
<i>sulindac tabs 200mg</i>	1	
SYNALGOS-DC CAPS 356.4MG; 30MG; 16MG	4	QL (360 EA per 30 days)
TALWIN INJ 30MG/ML	4	
<i>tencon tabs 325mg; 50mg</i>	2	
TIVORBEX CAPS 20MG	4	PA
TIVORBEX CAPS 40MG	4	PA
<i>tolmetin sodium caps 400mg</i>	1	
<i>tolmetin sodium tabs 200mg</i>	1	
<i>tolmetin sodium tabs 600mg</i>	1	
<i>tramadol hcl er cp24 100mg</i>	2	QL (30 EA per 30 days)
<i>tramadol hcl er cp24 200mg</i>	2	QL (30 EA per 30 days)
<i>tramadol hcl er cp24 300mg</i>	2	QL (30 EA per 30 days)
<i>tramadol hcl er tb24 100mg</i>	2	QL (90 EA per 30 days)
<i>tramadol hcl er tb24 100mg</i>	2	QL (90 EA per 30 days)
<i>tramadol hcl er tb24 200mg</i>	2	QL (30 EA per 30 days)
<i>tramadol hcl er tb24 200mg</i>	2	QL (30 EA per 30 days)
<i>tramadol hcl er tb24 300mg</i>	2	QL (30 EA per 30 days)
<i>tramadol hcl er tb24 300mg</i>	2	QL (30 EA per 30 days)
<i>tramadol hcl er tb24 300mg</i>	2	QL (30 EA per 30 days)
<i>tramadol hcl tabs 50mg</i>	1	QL (240 EA per 30 days)
<i>tramadol hydrochloride/acetaminophen tabs 325mg; 37.5mg</i>	2	QL (240 EA per 30 days)
TREZIX CAPS 320.5MG; 30MG; 16MG	4	QL (300 EA per 30 days)
TYLENOL/CODEINE #3 TABS 300MG; 30MG	4	QL (360 EA per 30 days)
TYLENOL/CODEINE #4 TABS 300MG; 60MG	4	QL (180 EA per 30 days)
ULTRACET TABS 325MG; 37.5MG	4	QL (240 EA per 30 days)
ULTRAM ER TB24 100MG	4	QL (90 EA per 30 days)
ULTRAM ER TB24 200MG	4	QL (30 EA per 30 days)
ULTRAM ER TB24 300MG	4	QL (30 EA per 30 days)
ULTRAM TABS 50MG	4	QL (240 EA per 30 days)
<i>vanatol lq soln 325mg/15ml; 50mg/15ml; 40mg/15ml</i>	2	
<i>verdrocet tabs 325mg; 2.5mg</i>	2	QL (360 EA per 30 days)
<i>vicodin es tabs 300mg; 7.5mg</i>	2	QL (390 EA per 30 days)
<i>vicodin hp tabs 300mg; 10mg</i>	2	QL (390 EA per 30 days)
<i>vicodin tabs 300mg; 5mg</i>	2	QL (390 EA per 30 days)
VICOPROFEN TABS 7.5MG; 200MG	4	QL (150 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
VIMOVO TBEC 20MG; 375MG	5	
VIMOVO TBEC 20MG; 500MG	5	
VIVLODEX CAPS 10MG	4	
VIVLODEX CAPS 5MG	4	
XARTEMIS XR TBCR 325MG; 7.5MG	4	QL (360 EA per 30 days)
XODOL TABS 300MG; 10MG	4	QL (390 EA per 30 days)
XODOL TABS 300MG; 5MG	4	QL (390 EA per 30 days)
XODOL TABS 300MG; 7.5MG	4	QL (390 EA per 30 days)
XTAMPZA ER C12A 13.5MG	4	QL (90 EA per 30 days)
XTAMPZA ER C12A 18MG	4	QL (90 EA per 30 days)
XTAMPZA ER C12A 27MG	4	QL (90 EA per 30 days)
XTAMPZA ER C12A 36MG	4	QL (90 EA per 30 days)
XTAMPZA ER C12A 9MG	4	QL (90 EA per 30 days)
<i>xylon tabs 10mg; 200mg</i>	1	QL (150 EA per 30 days)
ZAMICET SOLN 325MG/15ML; 10MG/15ML	4	QL (2700 ML per 30 days)
<i>zebital caps 325mg; 50mg; 40mg</i>	2	
ZIPSOR CAPS 25MG	4	
ZOHYDRO ER C12A 10MG	4	QL (60 EA per 30 days) PA
ZOHYDRO ER C12A 15MG	4	QL (60 EA per 30 days) PA
ZOHYDRO ER C12A 20MG	4	QL (60 EA per 30 days) PA
ZOHYDRO ER C12A 30MG	4	QL (60 EA per 30 days) PA
ZOHYDRO ER C12A 40MG	4	QL (60 EA per 30 days) PA
ZOHYDRO ER C12A 50MG	4	QL (60 EA per 30 days) PA
ZORVOLEX CAPS 18MG	4	
ZORVOLEX CAPS 35MG	4	
ZUBSOLV SUBL 0.7MG; 0.18MG	4	QL (90 EA per 30 days)
ZUBSOLV SUBL 1.4MG; 0.36MG	4	QL (90 EA per 30 days)
ZUBSOLV SUBL 11.4MG; 2.9MG	4	QL (90 EA per 30 days)
ZUBSOLV SUBL 2.9MG; 0.71MG	4	QL (90 EA per 30 days)
ZUBSOLV SUBL 5.7MG; 1.4MG	4	QL (90 EA per 30 days)
ZUBSOLV SUBL 8.6MG; 2.1MG	4	QL (90 EA per 30 days)
<b>Anorexigenic Agents and Respiratory and CNS Stimulants</b>		
<i>adderall xr cp24 1.25mg; 1.25mg; 1.25mg; 1.25mg</i>	1	
<i>adderall xr cp24 2.5mg; 2.5mg; 2.5mg; 2.5mg</i>	1	
<i>adderall xr cp24 3.75mg; 3.75mg; 3.75mg; 3.75mg</i>	1	
<i>adderall xr cp24 5mg; 5mg; 5mg; 5mg</i>	1	
<i>adderall xr cp24 6.25mg; 6.25mg; 6.25mg; 6.25mg</i>	1	
<i>adderall xr cp24 7.5mg; 7.5mg; 7.5mg; 7.5mg</i>	1	
ADDERALL TABS 1.25MG; 1.25MG; 1.25MG; 1.25MG	4	
ADDERALL TABS 1.875MG; 1.875MG; 1.875MG; 1.875MG	4	
ADDERALL TABS 2.5MG; 2.5MG; 2.5MG; 2.5MG	4	
ADDERALL TABS 3.125MG; 3.125MG; 3.125MG; 3.125MG	4	
ADDERALL TABS 3.75MG; 3.75MG; 3.75MG; 3.75MG	4	
ADDERALL TABS 5MG; 5MG; 5MG; 5MG	4	
ADDERALL TABS 7.5MG; 7.5MG; 7.5MG; 7.5MG	4	
ADZENYS ER SUER 1.25MG/ML	4	

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Drug Name	Drug Tier	Requirements/Limits
ADZENYS XR-ODT TBED 12.5MG	4	
ADZENYS XR-ODT TBED 15.7MG	4	
ADZENYS XR-ODT TBED 18.8MG	4	
ADZENYS XR-ODT TBED 3.1MG	4	
ADZENYS XR-ODT TBED 6.3MG	4	
ADZENYS XR-ODT TBED 9.4MG	4	
<i>amphetamine/dextroamphetamine cp24 1.25mg; 1.25mg; 1.25mg; 1.25mg</i>	1	
<i>amphetamine/dextroamphetamine cp24 2.5mg; 2.5mg; 2.5mg; 2.5mg</i>	1	
<i>amphetamine/dextroamphetamine cp24 3.75mg; 3.75mg; 3.75mg; 3.75mg</i>	1	
<i>amphetamine/dextroamphetamine cp24 5mg; 5mg; 5mg; 5mg</i>	1	
<i>amphetamine/dextroamphetamine cp24 6.25mg; 6.25mg; 6.25mg; 6.25mg</i>	1	
<i>amphetamine/dextroamphetamine cp24 7.5mg; 7.5mg; 7.5mg; 7.5mg</i>	1	
<i>amphetamine/dextroamphetamine tabs 1.25mg; 1.25mg; 1.25mg; 1.25mg</i>	1	
<i>amphetamine/dextroamphetamine tabs 1.875mg; 1.875mg; 1.875mg; 1.875mg</i>	1	
<i>amphetamine/dextroamphetamine tabs 2.5mg; 2.5mg; 2.5mg; 2.5mg</i>	1	
<i>amphetamine/dextroamphetamine tabs 3.125mg; 3.125mg; 3.125mg; 3.125mg</i>	1	
<i>amphetamine/dextroamphetamine tabs 3.75mg; 3.75mg; 3.75mg; 3.75mg</i>	1	
<i>amphetamine/dextroamphetamine tabs 5mg; 5mg; 5mg; 5mg</i>	1	
<i>amphetamine/dextroamphetamine tabs 7.5mg; 7.5mg; 7.5mg; 7.5mg</i>	1	
APTENSIO XR CP24 10MG	4	
APTENSIO XR CP24 15MG	4	
APTENSIO XR CP24 20MG	4	
APTENSIO XR CP24 30MG	4	
APTENSIO XR CP24 40MG	4	
APTENSIO XR CP24 50MG	4	
APTENSIO XR CP24 60MG	4	
<i>armodafinil tabs 150mg</i>	2	PA
<i>armodafinil tabs 200mg</i>	2	PA
<i>armodafinil tabs 250mg</i>	2	PA
<i>armodafinil tabs 50mg</i>	2	PA
CAFCIT INJ 60MG/3ML	4	*
<i>caffeine citrate inj 60mg/3ml</i>	1	*
<i>caffeine citrate soln 60mg/3ml</i>	1	
<i>concerta tbc 18mg</i>	1	
<i>concerta tbc 27mg</i>	1	
<i>concerta tbc 36mg</i>	1	
<i>concerta tbc 54mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
COTEMPLA XR-ODT TBED 17.3MG	4	
COTEMPLA XR-ODT TBED 25.9MG	4	
COTEMPLA XR-ODT TBED 8.6MG	4	
DAYTRANA PTCH 10MG/9HR	4	
DAYTRANA PTCH 15MG/9HR	4	
DAYTRANA PTCH 20MG/9HR	4	
DAYTRANA PTCH 30MG/9HR	4	
DESOXYN TABS 5MG	4	PA
DEXEDRINE CP24 10MG	4	
DEXEDRINE CP24 15MG	4	
DEXEDRINE CP24 5MG	4	
<i>dexedrine tabs 10mg</i>	2	
<i>dexedrine tabs 5mg</i>	2	
<i>dexmethylphenidate hcl er cp24 10mg</i>	2	
<i>dexmethylphenidate hcl er cp24 15mg</i>	2	
<i>dexmethylphenidate hcl er cp24 20mg</i>	2	
<i>dexmethylphenidate hcl er cp24 25mg</i>	2	
<i>dexmethylphenidate hcl er cp24 30mg</i>	2	
<i>dexmethylphenidate hcl er cp24 35mg</i>	2	
<i>dexmethylphenidate hcl er cp24 40mg</i>	2	
<i>dexmethylphenidate hcl er cp24 5mg</i>	2	
<i>dexmethylphenidate hcl tabs 10mg</i>	1	
<i>dexmethylphenidate hcl tabs 2.5mg</i>	1	
<i>dexmethylphenidate hcl tabs 5mg</i>	1	
<i>dextroamphetamine sulfate er cp24 10mg</i>	1	
<i>dextroamphetamine sulfate er cp24 15mg</i>	1	
<i>dextroamphetamine sulfate er cp24 5mg</i>	1	
<i>dextroamphetamine sulfate soln 5mg/5ml</i>	2	
<i>dextroamphetamine sulfate tabs 10mg</i>	1	
<i>dextroamphetamine sulfate tabs 5mg</i>	1	
DYANAVAL XR SUER 2.5MG/ML	4	
EVEKEO TABS 10MG	4	
EVEKEO TABS 5MG	4	
FOCALIN XR CP24 10MG	4	
FOCALIN XR CP24 15MG	4	
FOCALIN XR CP24 20MG	4	
FOCALIN XR CP24 25MG	4	
FOCALIN XR CP24 30MG	4	
FOCALIN XR CP24 35MG	4	
FOCALIN XR CP24 40MG	4	
FOCALIN XR CP24 5MG	4	
FOCALIN TABS 10MG	4	
FOCALIN TABS 2.5MG	4	
FOCALIN TABS 5MG	4	
METADATE CD CPR 10MG	4	
METADATE CD CPR 20MG	4	
METADATE CD CPR 30MG	4	
METADATE CD CPR 40MG	4	

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Drug Name	Drug Tier	Requirements/Limits
METADATE CD CPCR 50MG	4	
METADATE CD CPCR 60MG	4	
<i>metadate er tbc 20mg</i>	2	
<i>methamphetamine hcl tabs 5mg</i>	2	PA
METHYLIN CHEW 10MG	4	
METHYLIN CHEW 2.5MG	4	
METHYLIN CHEW 5MG	4	
METHYLIN SOLN 10MG/5ML	4	
METHYLIN SOLN 5MG/5ML	4	
<i>methylphenidate hcl sr tbc 20mg</i>	1	
<i>methylphenidate hydrochloride cd cpcr 10mg</i>	1	
<i>methylphenidate hydrochloride cd cpcr 20mg</i>	1	
<i>methylphenidate hydrochloride cd cpcr 30mg</i>	1	
<i>methylphenidate hydrochloride cd cpcr 40mg</i>	1	
<i>methylphenidate hydrochloride cd cpcr 50mg</i>	1	
<i>methylphenidate hydrochloride cd cpcr 60mg</i>	1	
<i>methylphenidate hydrochloride er (la) cp24 60mg</i>	2	
<i>methylphenidate hydrochloride er cp24 10mg</i>	1	
<i>methylphenidate hydrochloride er cp24 20mg</i>	1	
<i>methylphenidate hydrochloride er cp24 30mg</i>	1	
<i>methylphenidate hydrochloride er cp24 40mg</i>	1	
<i>methylphenidate hydrochloride er cpcr 20mg</i>	1	
<i>methylphenidate hydrochloride er cpcr 30mg</i>	1	
<i>methylphenidate hydrochloride er cpcr 40mg</i>	1	
<i>methylphenidate hydrochloride er tb24 18mg</i>	1	
<i>methylphenidate hydrochloride er tb24 27mg</i>	1	
<i>methylphenidate hydrochloride er tb24 36mg</i>	1	
<i>methylphenidate hydrochloride er tb24 54mg</i>	1	
<i>methylphenidate hydrochloride er tbc 10mg</i>	1	
<i>methylphenidate hydrochloride er tbc 18mg</i>	1	
<i>methylphenidate hydrochloride er tbc 20mg</i>	1	
<i>methylphenidate hydrochloride er tbc 27mg</i>	1	
<i>methylphenidate hydrochloride er tbc 36mg</i>	1	
<i>methylphenidate hydrochloride er tbc 54mg</i>	1	
<i>methylphenidate hydrochloride er tbc 72mg</i>	2	
<i>methylphenidate hydrochloride chew 10mg</i>	2	
<i>methylphenidate hydrochloride chew 2.5mg</i>	2	
<i>methylphenidate hydrochloride chew 5mg</i>	2	
<i>methylphenidate hydrochloride soln 10mg/5ml</i>	2	
<i>methylphenidate hydrochloride soln 5mg/5ml</i>	2	
<i>methylphenidate hydrochloride tabs 10mg</i>	1	
<i>methylphenidate hydrochloride tabs 20mg</i>	1	
<i>methylphenidate hydrochloride tabs 5mg</i>	1	
<i>modafinil tabs 100mg</i>	1	PA
<i>modafinil tabs 200mg</i>	1	PA
MYDAYIS CP24 12.5MG; 12.5MG; 12.5MG; 12.5MG	4	
MYDAYIS CP24 3.125MG; 3.125MG; 3.125MG; 3.125MG	4	
MYDAYIS CP24 6.25MG; 6.25MG; 6.25MG; 6.25MG	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
MYDAYIS CP24 9.375MG; 9.375MG; 9.375MG; 9.375MG	4	
NUVIGIL TABS 150MG	4	PA
NUVIGIL TABS 200MG	4	PA
NUVIGIL TABS 250MG	4	PA
NUVIGIL TABS 50MG	4	PA
PROCENTRA SOLN 5MG/5ML	4	
PROVIGIL TABS 100MG	4	PA
PROVIGIL TABS 200MG	4	PA
QUILLICHEW ER CHER 20MG	4	
QUILLICHEW ER CHER 30MG	4	
QUILLICHEW ER CHER 40MG	4	
QUILLIVANT XR SUSR 25MG/5ML	4	
RITALIN LA CP24 10MG	4	
RITALIN LA CP24 20MG	4	
RITALIN LA CP24 30MG	4	
RITALIN LA CP24 40MG	4	
RITALIN LA CP24 60MG	4	
RITALIN TABS 10MG	4	
RITALIN TABS 20MG	4	
RITALIN TABS 5MG	4	
VYVANSE CAPS 10MG	4	
VYVANSE CAPS 20MG	4	
VYVANSE CAPS 30MG	4	
VYVANSE CAPS 40MG	4	
VYVANSE CAPS 50MG	4	
VYVANSE CAPS 60MG	4	
VYVANSE CAPS 70MG	4	
VYVANSE CHEW 10MG	4	
VYVANSE CHEW 20MG	4	
VYVANSE CHEW 30MG	4	
VYVANSE CHEW 40MG	4	
VYVANSE CHEW 50MG	4	
VYVANSE CHEW 60MG	4	
<i>zenzedi tabs 10mg</i>	2	
ZENZEDI TABS 15MG	4	
ZENZEDI TABS 2.5MG	4	
ZENZEDI TABS 20MG	4	
ZENZEDI TABS 30MG	4	
<i>zenzedi tabs 5mg</i>	2	
ZENZEDI TABS 7.5MG	4	
<b>Anticonvulsants</b>		
APTIOM TABS 200MG	5	
APTIOM TABS 400MG	5	
APTIOM TABS 600MG	5	
APTIOM TABS 800MG	5	
BANZEL SUSP 40MG/ML	5	
BANZEL TABS 200MG	5	
BANZEL TABS 400MG	5	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document



Drug Name	Drug Tier	Requirements/Limits
BRIVIACT INJ 50MG/5ML	4	*
BRIVIACT SOLN 10MG/ML	5	
BRIVIACT TABS 100MG	5	
BRIVIACT TABS 10MG	5	
BRIVIACT TABS 25MG	5	
BRIVIACT TABS 50MG	5	
BRIVIACT TABS 75MG	5	
<i>carbamazepine er cp12 100mg</i>	1	
<i>carbamazepine er cp12 200mg</i>	1	
<i>carbamazepine er cp12 300mg</i>	1	
<i>carbamazepine er tb12 100mg</i>	1	
<i>carbamazepine er tb12 200mg</i>	1	
<i>carbamazepine er tb12 400mg</i>	1	
<i>carbamazepine chew 100mg</i>	1	
<i>carbamazepine susp 100mg/5ml</i>	1	
<i>carbamazepine tabs 200mg</i>	1	
CARBATROL CP12 100MG	3	
CARBATROL CP12 200MG	3	
CARBATROL CP12 300MG	3	
CELONTIN CAPS 300MG	3	
CEREBYX INJ 100MG PE/2ML	4	HI
CEREBYX INJ 500MG PE/10ML	4	HI
<i>clonazepam odt tbdp 0.125mg</i>	2	
<i>clonazepam odt tbdp 0.25mg</i>	2	
<i>clonazepam odt tbdp 0.5mg</i>	2	
<i>clonazepam odt tbdp 1mg</i>	2	
<i>clonazepam odt tbdp 2mg</i>	2	
<i>clonazepam tabs 0.5mg</i>	1	
<i>clonazepam tabs 1mg</i>	1	
<i>clonazepam tabs 2mg</i>	1	
DEPACON INJ 100MG/ML	4	HI; *
DEPAKENE CAPS 250MG	4	
DEPAKENE SOLN 250MG/5ML	4	
DEPAKOTE ER TB24 250MG	4	
DEPAKOTE ER TB24 500MG	4	
DEPAKOTE SPRINKLES CSDR 125MG	4	
DEPAKOTE TBEC 125MG	4	
DEPAKOTE TBEC 250MG	4	
DEPAKOTE TBEC 500MG	4	
DILANTIN INFATABS CHEW 50MG	4	
DILANTIN-125 SUSP 125MG/5ML	4	
DILANTIN CAPS 100MG	4	
DILANTIN CAPS 30MG	3	
<i>divalproex sodium dr tbec 125mg</i>	1	
<i>divalproex sodium dr tbec 250mg</i>	1	
<i>divalproex sodium dr tbec 500mg</i>	1	
<i>divalproex sodium er tb24 250mg</i>	2	
<i>divalproex sodium er tb24 500mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>divalproex sodium csdr 125mg</i>	1	
<i>epitol tabs 200mg</i>	1	
EQUETRO CP12 100MG	4	
EQUETRO CP12 200MG	4	
EQUETRO CP12 300MG	4	
<i>ethosuximide caps 250mg</i>	1	
<i>ethosuximide soln 250mg/5ml</i>	1	
<i>felbamate susp 600mg/5ml</i>	5	
<i>felbamate tabs 400mg</i>	2	
<i>felbamate tabs 600mg</i>	2	
FELBATOL SUSP 600MG/5ML	5	
FELBATOL TABS 400MG	5	
FELBATOL TABS 600MG	5	
<i>fosphenytoin sodium inj 100mg pe/2ml</i>	1	HI
<i>fosphenytoin sodium inj 500mg pe/10ml</i>	1	HI
FYCOMPA SUSP 0.5MG/ML	4	
FYCOMPA TABS 10MG	4	
FYCOMPA TABS 12MG	4	
FYCOMPA TABS 2MG	4	
FYCOMPA TABS 4MG	4	
FYCOMPA TABS 6MG	4	
FYCOMPA TABS 8MG	4	
<i>gabapentin caps 100mg</i>	1	
<i>gabapentin caps 300mg</i>	1	
<i>gabapentin caps 400mg</i>	1	
<i>gabapentin soln 250mg/5ml</i>	2	
<i>gabapentin tabs 600mg</i>	1	
<i>gabapentin tabs 800mg</i>	1	
GABITRIL TABS 12MG	4	
GABITRIL TABS 16MG	4	
GABITRIL TABS 2MG	4	
GABITRIL TABS 4MG	4	
HORIZANT TBCR 300MG	4	
HORIZANT TBCR 600MG	4	
KEPPRA XR TB24 500MG	4	
KEPPRA XR TB24 750MG	4	
KEPPRA INJ 500MG/5ML	4	*
KEPPRA SOLN 100MG/ML	4	
KEPPRA TABS 1000MG	4	
KEPPRA TABS 250MG	4	
KEPPRA TABS 500MG	4	
KEPPRA TABS 750MG	4	
KLONOPIN TABS 0.5MG	4	
KLONOPIN TABS 1MG	4	
KLONOPIN TABS 2MG	4	
LAMICTAL CHEWABLE DISPERSIBLE CHEW 25MG	4	
LAMICTAL CHEWABLE DISPERSIBLE CHEW 5MG	4	
LAMICTAL ODT KIT 0	4	

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Drug Name	Drug Tier	Requirements/Limits
LAMICTAL ODT KIT 0	4	
LAMICTAL ODT KIT 0	4	
LAMICTAL ODT TBDP 100MG	4	
LAMICTAL ODT TBDP 200MG	4	
LAMICTAL ODT TBDP 25MG	4	
LAMICTAL ODT TBDP 50MG	4	
LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE KIT 0	4	
LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE KIT 0	4	
LAMICTAL STARTER/TAKING VALPROATE KIT 25MG	4	
LAMICTAL XR KIT 0	4	
LAMICTAL XR KIT 0	4	
LAMICTAL XR KIT 0	4	
LAMICTAL XR TB24 100MG	4	
LAMICTAL XR TB24 200MG	4	
LAMICTAL XR TB24 250MG	4	
LAMICTAL XR TB24 25MG	4	
LAMICTAL XR TB24 300MG	4	
LAMICTAL XR TB24 50MG	4	
LAMICTAL TABS 100MG	4	
LAMICTAL TABS 150MG	4	
LAMICTAL TABS 200MG	4	
LAMICTAL TABS 25MG	4	
<i>lamotrigine er tb24 100mg</i>	2	
<i>lamotrigine er tb24 200mg</i>	2	
<i>lamotrigine er tb24 250mg</i>	2	
<i>lamotrigine er tb24 25mg</i>	2	
<i>lamotrigine er tb24 300mg</i>	2	
<i>lamotrigine er tb24 50mg</i>	2	
<i>lamotrigine odt tbdp 100mg</i>	2	
<i>lamotrigine odt tbdp 200mg</i>	2	
<i>lamotrigine odt tbdp 25mg</i>	2	
<i>lamotrigine odt tbdp 50mg</i>	2	
<i>lamotrigine starter kit/blue kit 25mg</i>	2	
<i>lamotrigine starter kit/green kit 0</i>	2	
<i>lamotrigine starter kit/orange kit 0</i>	2	
<i>lamotrigine titration kit 0</i>	2	
<i>lamotrigine titration kit 0</i>	2	
<i>lamotrigine titration kit 0</i>	2	
<i>lamotrigine chew 25mg</i>	1	
<i>lamotrigine chew 5mg</i>	1	
<i>lamotrigine tabs 100mg</i>	1	
<i>lamotrigine tabs 150mg</i>	1	
<i>lamotrigine tabs 200mg</i>	1	
<i>lamotrigine tabs 25mg</i>	1	
<i>levetiracetam er tb24 500mg</i>	1	
<i>levetiracetam er tb24 750mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>levetiracetam inj 1000mg/100ml; 750mg/100ml</i>	2	*
<i>levetiracetam inj 1500mg/100ml; 540mg/100ml</i>	2	*
<i>levetiracetam inj 500mg/100ml; 820mg/100ml</i>	2	*
<i>levetiracetam inj 500mg/5ml</i>	2	*
<i>levetiracetam soln 100mg/ml</i>	1	
<i>levetiracetam tabs 1000mg</i>	1	
<i>levetiracetam tabs 250mg</i>	1	
<i>levetiracetam tabs 500mg</i>	1	
<i>levetiracetam tabs 750mg</i>	1	
LYRICA CAPS 100MG	4	QL (90 EA per 30 days)
LYRICA CAPS 150MG	4	QL (90 EA per 30 days)
LYRICA CAPS 200MG	4	QL (90 EA per 30 days)
LYRICA CAPS 225MG	4	QL (90 EA per 30 days)
LYRICA CAPS 25MG	4	QL (90 EA per 30 days)
LYRICA CAPS 300MG	4	QL (90 EA per 30 days)
LYRICA CAPS 50MG	4	QL (90 EA per 30 days)
LYRICA CAPS 75MG	4	QL (90 EA per 30 days)
LYRICA SOLN 20MG/ML	4	QL (900 ML per 30 days)
<i>magnesium sulfate inj 20gm/500ml</i>	1	HI; *
<i>magnesium sulfate inj 2gm/50ml</i>	1	HI; *
<i>magnesium sulfate inj 40gm/1000ml</i>	1	HI; *
<i>magnesium sulfate inj 4gm/100ml</i>	1	HI; *
<i>magnesium sulfate inj 4gm/50ml</i>	1	HI; *
<i>magnesium sulfate inj 50%</i>	1	HI
<i>magnesium sulfate inj 50%</i>	1	HI
MYSOLINE TABS 250MG	5	
MYSOLINE TABS 50MG	5	
NEURONTIN CAPS 100MG	4	
NEURONTIN CAPS 300MG	4	
NEURONTIN CAPS 400MG	4	
NEURONTIN SOLN 250MG/5ML	4	
NEURONTIN TABS 600MG	4	
NEURONTIN TABS 800MG	4	
ONFI SUSP 2.5MG/ML	5	
ONFI TABS 10MG	5	
ONFI TABS 20MG	5	
<i>oxcarbazepine susp 300mg/5ml</i>	1	
<i>oxcarbazepine tabs 150mg</i>	1	
<i>oxcarbazepine tabs 300mg</i>	1	
<i>oxcarbazepine tabs 600mg</i>	1	
OXTELLAR XR TB24 150MG	4	
OXTELLAR XR TB24 300MG	4	
OXTELLAR XR TB24 600MG	4	
PEGANONE TABS 250MG	4	
PHENYTEK CAPS 200MG	4	
PHENYTEK CAPS 300MG	4	
<i>phenytoin sodium extended caps 100mg</i>	1	
<i>phenytoin sodium extended caps 200mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>phenytoin sodium extended caps 300mg</i>	1	
<i>phenytoin sodium inj 50mg/ml</i>	1	HI
<i>phenytoin chew 50mg</i>	1	
<i>phenytoin susp 125mg/5ml</i>	1	
POTIGA TABS 200MG	4	
POTIGA TABS 300MG	4	
POTIGA TABS 400MG	4	
POTIGA TABS 50MG	4	
<i>primidone tabs 250mg</i>	1	
<i>primidone tabs 50mg</i>	1	
QUDEXY XR CS24 100MG	4	
QUDEXY XR CS24 150MG	4	
QUDEXY XR CS24 200MG	4	
QUDEXY XR CS24 25MG	4	
QUDEXY XR CS24 50MG	4	
<i>roweepra xr tb24 500mg</i>	1	
<i>roweepra xr tb24 750mg</i>	1	
ROWEEPRA TABS 1000MG	4	
ROWEEPRA TABS 500MG	4	
ROWEEPRA TABS 750MG	4	
SABRIL PACK 500MG	5	
SABRIL TABS 500MG	5	
SPRITAM TB3D 1000MG	4	
SPRITAM TB3D 250MG	4	
SPRITAM TB3D 500MG	4	
SPRITAM TB3D 750MG	5	
<i>subvenite starter kit/blue kit 25mg</i>	2	
<i>subvenite starter kit/green kit 0</i>	2	
<i>subvenite starter kit/orange kit 0</i>	2	
<i>subvenite tabs 100mg</i>	1	
<i>subvenite tabs 150mg</i>	1	
<i>subvenite tabs 200mg</i>	1	
<i>subvenite tabs 25mg</i>	1	
TEGRETOL-XR TB12 100MG	4	
TEGRETOL-XR TB12 200MG	4	
TEGRETOL-XR TB12 400MG	4	
TEGRETOL SUSP 100MG/5ML	4	
TEGRETOL TABS 200MG	4	
<i>tiagabine hydrochloride tabs 12mg</i>	2	
<i>tiagabine hydrochloride tabs 16mg</i>	2	
<i>tiagabine hydrochloride tabs 2mg</i>	2	
<i>tiagabine hydrochloride tabs 4mg</i>	2	
TOPAMAX SPRINKLE CPSP 15MG	4	
TOPAMAX SPRINKLE CPSP 25MG	4	
TOPAMAX TABS 100MG	4	
TOPAMAX TABS 200MG	4	
TOPAMAX TABS 25MG	4	
TOPAMAX TABS 50MG	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>topiramate er cs24 100mg</i>	2	
<i>topiramate er cs24 150mg</i>	2	
<i>topiramate er cs24 200mg</i>	2	
<i>topiramate er cs24 25mg</i>	2	
<i>topiramate er cs24 50mg</i>	2	
<i>topiramate csp 15mg</i>	1	
<i>topiramate csp 25mg</i>	1	
<i>topiramate tabs 100mg</i>	1	
<i>topiramate tabs 200mg</i>	1	
<i>topiramate tabs 25mg</i>	1	
<i>topiramate tabs 50mg</i>	1	
TRILEPTAL SUSP 300MG/5ML	4	
TRILEPTAL TABS 150MG	4	
TRILEPTAL TABS 300MG	4	
TRILEPTAL TABS 600MG	4	
TROKENDI XR CP24 100MG	4	
TROKENDI XR CP24 200MG	4	
TROKENDI XR CP24 25MG	4	
TROKENDI XR CP24 50MG	4	
<i>valproate sodium inj 100mg/ml</i>	1	HI; *
<i>valproic acid caps 250mg</i>	1	
<i>valproic acid soln 250mg/5ml</i>	1	
<i>vigabatrin pack 500mg</i>	5	
VIGADRONE PACK 500MG	5	
VIMPAT INJ 200MG/20ML	4	*
VIMPAT SOLN 10MG/ML	4	
VIMPAT TABS 100MG	5	
VIMPAT TABS 150MG	5	
VIMPAT TABS 200MG	5	
VIMPAT TABS 50MG	4	
ZARONTIN CAPS 250MG	4	
ZARONTIN SOLN 250MG/5ML	4	
ZONEGRAN CAPS 100MG	4	
ZONEGRAN CAPS 25MG	4	
<i>zonisamide caps 100mg</i>	1	
<i>zonisamide caps 25mg</i>	1	
<i>zonisamide caps 50mg</i>	1	
<b>Antimanic Agents</b>		
<i>lithium carbonate er tbc 300mg</i>	1	
<i>lithium carbonate er tbc 450mg</i>	1	
<i>lithium carbonate caps 150mg</i>	1	
<i>lithium carbonate caps 300mg</i>	1	
<i>lithium carbonate caps 600mg</i>	1	
<i>lithium carbonate tabs 300mg</i>	1	
<i>lithium soln 8meq/5ml</i>	1	
LITHOBID TBCR 300MG	4	
<b>Antimigraine Agents</b>		
AIMOVIG INJ 70MG/ML	4	PA

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
AJOVY INJ 225MG/1.5ML	4	PA
<i>almotriptan malate tabs 12.5mg</i>	2	
<i>almotriptan malate tabs 6.25mg</i>	2	
<i>almotriptan tabs 12.5mg</i>	2	
<i>almotriptan tabs 6.25mg</i>	2	
AMERGE TABS 1MG	4	
AMERGE TABS 2.5MG	4	
AXERT TABS 12.5MG	4	
AXERT TABS 6.25MG	4	
CAFERGOT TABS 100MG; 1MG	4	
<i>eletriptan hydrobromide tabs 20mg</i>	2	
<i>eletriptan hydrobromide tabs 40mg</i>	2	
<i>ergotamine tartrate/caffeine tabs 100mg; 1mg</i>	1	
FROVA TABS 2.5MG	4	
<i>frovatriptan succinate tabs 2.5mg</i>	2	
IMITREX STATDOSE REFILL INJ 4MG/0.5ML	4	
IMITREX STATDOSE REFILL INJ 6MG/0.5ML	4	
IMITREX STATDOSE SYSTEM INJ 4MG/0.5ML	4	
IMITREX STATDOSE SYSTEM INJ 6MG/0.5ML	4	
IMITREX INJ 6MG/0.5ML	4	
IMITREX SOLN 20MG/ACT	4	
IMITREX SOLN 5MG/ACT	4	
IMITREX TABS 100MG	4	
IMITREX TABS 25MG	4	
IMITREX TABS 50MG	4	
MAXALT-MLT TBDP 10MG	4	
MAXALT-MLT TBDP 5MG	4	
MAXALT TABS 10MG	4	
MAXALT TABS 5MG	4	
MIGERGOT SUPP 100MG; 2MG	3	
<i>naratriptan hcl tabs 1mg</i>	1	
<i>naratriptan hcl tabs 2.5mg</i>	1	
ONZETRA XSAIL EXHP 11MG/NOSEPC	4	
RELPAK TABS 20MG	4	
RELPAK TABS 40MG	4	
<i>rizatriptan benzoate odt tbdp 10mg</i>	1	
<i>rizatriptan benzoate odt tbdp 5mg</i>	1	
<i>rizatriptan benzoate tabs 10mg</i>	1	
<i>rizatriptan benzoate tabs 5mg</i>	1	
<i>sumatriptan succinate refill inj 4mg/0.5ml</i>	1	
<i>sumatriptan succinate refill inj 6mg/0.5ml</i>	1	
<i>sumatriptan succinate inj 4mg/0.5ml</i>	1	
<i>sumatriptan succinate inj 6mg/0.5ml</i>	1	
<i>sumatriptan succinate inj 6mg/0.5ml</i>	1	
<i>sumatriptan succinate inj 6mg/0.5ml</i>	1	
<i>sumatriptan succinate inj 6mg/0.5ml</i>	1	
<i>sumatriptan succinate tabs 100mg</i>	1	
<i>sumatriptan succinate tabs 25mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan succinate tabs 50mg</i>	1	
<i>sumatriptan/naproxen sodium tabs 500mg; 85mg</i>	2	
<i>sumatriptan soln 20mg/act</i>	1	
<i>sumatriptan soln 5mg/act</i>	1	
SUMAVEL DOSEPRO INJ 4MG/0.5ML	4	
SUMAVEL DOSEPRO INJ 6MG/0.5ML	4	
TREXIMET TABS 500MG; 85MG	4	
TREXIMET TABS 60MG; 10MG	4	
ZEMBRACE SYMTOUCH INJ 3MG/0.5ML	4	
<i>zolmitriptan odt tbdp 2.5mg</i>	1	
<i>zolmitriptan odt tbdp 5mg</i>	1	
<i>zolmitriptan tabs 2.5mg</i>	1	
<i>zolmitriptan tabs 5mg</i>	1	
ZOMIG ZMT TBDP 2.5MG	4	
ZOMIG ZMT TBDP 5MG	4	
ZOMIG SOLN 2.5MG	4	
ZOMIG SOLN 5MG	4	
ZOMIG TABS 2.5MG	4	
ZOMIG TABS 5MG	4	
<b>Antiparkinsonian Agents</b>		
<i>amantadine hcl caps 100mg</i>	1	
<i>amantadine hcl syrp 50mg/5ml</i>	1	
<i>amantadine hcl tabs 100mg</i>	1	
APOKYN INJ 30MG/3ML	5	
AZILECT TABS 0.5MG	4	
AZILECT TABS 1MG	4	
<i>benztropine mesylate inj 1mg/ml</i>	2	
<i>benztropine mesylate tabs 0.5mg</i>	2	
<i>benztropine mesylate tabs 1mg</i>	2	
<i>benztropine mesylate tabs 2mg</i>	2	
<i>bromocriptine mesylate caps 5mg</i>	1	
<i>bromocriptine mesylate tabs 2.5mg</i>	1	
<i>cabergoline tabs 0.5mg</i>	1	
<i>carbidopa/levodopa er tbcr 25mg; 100mg</i>	1	
<i>carbidopa/levodopa er tbcr 50mg; 200mg</i>	1	
<i>carbidopa/levodopa odt tbdp 10mg; 100mg</i>	2	
<i>carbidopa/levodopa odt tbdp 25mg; 100mg</i>	2	
<i>carbidopa/levodopa odt tbdp 25mg; 250mg</i>	2	
<i>carbidopa/levodopa/entacapone tabs 12.5mg; 200mg; 50mg</i>	1	
<i>carbidopa/levodopa/entacapone tabs 18.75mg; 200mg; 75mg</i>	1	
<i>carbidopa/levodopa/entacapone tabs 25mg; 200mg; 100mg</i>	1	
<i>carbidopa/levodopa/entacapone tabs 31.25mg; 200mg; 125mg</i>	1	
<i>carbidopa/levodopa/entacapone tabs 37.5mg; 200mg; 150mg</i>	1	
<i>carbidopa/levodopa/entacapone tabs 50mg; 200mg; 200mg</i>	1	
<i>carbidopa/levodopa tabs 10mg; 100mg</i>	1	
<i>carbidopa/levodopa tabs 25mg; 100mg</i>	1	
<i>carbidopa/levodopa tabs 25mg; 250mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa tabs 25mg</i>	1	
COGENTIN INJ 1MG/ML	4	
COMTAN TABS 200MG	4	
DUOPA SUSP 4.63MG/ML; 20MG/ML	4	
ELDEPRYL CAPS 5MG	4	
EMSAM PT24 12MG/24HR	5	
EMSAM PT24 6MG/24HR	5	
EMSAM PT24 9MG/24HR	5	
<i>entacapone tabs 200mg</i>	1	
GOCOVRI CP24 137MG	5	
GOCOVRI CP24 68.5MG	5	
LODOSYN TABS 25MG	4	
MIRAPEX ER TB24 0.375MG	4	
MIRAPEX ER TB24 0.75MG	4	
MIRAPEX ER TB24 1.5MG	4	
MIRAPEX ER TB24 2.25MG	4	
MIRAPEX ER TB24 3.75MG	4	
MIRAPEX ER TB24 3MG	4	
MIRAPEX ER TB24 4.5MG	4	
MIRAPEX TABS 0.125MG	4	
MIRAPEX TABS 0.25MG	4	
MIRAPEX TABS 0.5MG	4	
MIRAPEX TABS 0.75MG	4	
MIRAPEX TABS 1.5MG	4	
MIRAPEX TABS 1MG	4	
NEUPRO PT24 1MG/24HR	4	
NEUPRO PT24 2MG/24HR	4	
NEUPRO PT24 3MG/24HR	4	
NEUPRO PT24 4MG/24HR	4	
NEUPRO PT24 6MG/24HR	4	
NEUPRO PT24 8MG/24HR	4	
OSMOLEX ER TB24 129MG	4	
OSMOLEX ER TB24 193MG	4	
OSMOLEX ER TB24 258MG	4	
PARLODEL CAPS 5MG	4	
PARLODEL TABS 2.5MG	4	
<i>pramipexole dihydrochloride er tb24 0.375mg</i>	2	
<i>pramipexole dihydrochloride er tb24 0.75mg</i>	2	
<i>pramipexole dihydrochloride er tb24 1.5mg</i>	2	
<i>pramipexole dihydrochloride er tb24 2.25mg</i>	2	
<i>pramipexole dihydrochloride er tb24 3.75mg</i>	2	
<i>pramipexole dihydrochloride er tb24 3mg</i>	2	
<i>pramipexole dihydrochloride er tb24 4.5mg</i>	2	
<i>pramipexole dihydrochloride tabs 0.125mg</i>	1	
<i>pramipexole dihydrochloride tabs 0.25mg</i>	1	
<i>pramipexole dihydrochloride tabs 0.5mg</i>	1	
<i>pramipexole dihydrochloride tabs 0.75mg</i>	1	
<i>pramipexole dihydrochloride tabs 1.5mg</i>	1	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>pramipexole dihydrochloride tabs 1mg</i>	1	
<i>rasagiline mesylate tabs 0.5mg</i>	1	
<i>rasagiline mesylate tabs 1mg</i>	1	
REQUIP XL TB24 12MG	4	
REQUIP XL TB24 2MG	4	
REQUIP XL TB24 4MG	4	
REQUIP XL TB24 6MG	4	
REQUIP XL TB24 8MG	4	
REQUIP TABS 0.25MG	4	
REQUIP TABS 0.5MG	4	
REQUIP TABS 1MG	4	
REQUIP TABS 2MG	4	
REQUIP TABS 3MG	4	
REQUIP TABS 4MG	4	
REQUIP TABS 5MG	4	
<i>ropinirole er tb24 12mg</i>	2	
<i>ropinirole er tb24 2mg</i>	2	
<i>ropinirole er tb24 4mg</i>	2	
<i>ropinirole er tb24 6mg</i>	2	
<i>ropinirole er tb24 8mg</i>	2	
<i>ropinirole hcl tabs 0.25mg</i>	1	
<i>ropinirole hcl tabs 0.5mg</i>	1	
<i>ropinirole hcl tabs 1mg</i>	1	
<i>ropinirole hcl tabs 2mg</i>	1	
<i>ropinirole hcl tabs 3mg</i>	1	
<i>ropinirole hcl tabs 4mg</i>	1	
<i>ropinirole hcl tabs 5mg</i>	1	
RYTARY CPR 23.75MG; 95MG	4	
RYTARY CPR 36.25MG; 145MG	4	
RYTARY CPR 48.75MG; 195MG	4	
RYTARY CPR 61.25MG; 245MG	4	
<i>selegiline hcl caps 5mg</i>	1	
<i>selegiline hcl tabs 5mg</i>	1	
SINEMET CR TBCR 25MG; 100MG	4	
SINEMET CR TBCR 50MG; 200MG	4	
SINEMET TABS 10MG; 100MG	4	
SINEMET TABS 25MG; 100MG	4	
SINEMET TABS 25MG; 250MG	4	
STALEVO 100 TABS 25MG; 200MG; 100MG	4	
STALEVO 125 TABS 31.25MG; 200MG; 125MG	4	
STALEVO 150 TABS 37.5MG; 200MG; 150MG	4	
STALEVO 200 TABS 50MG; 200MG; 200MG	4	
STALEVO 50 TABS 12.5MG; 200MG; 50MG	4	
STALEVO 75 TABS 18.75MG; 200MG; 75MG	4	
TASMAR TABS 100MG	5	
TOLCAPONE TABS 100MG	5	
<i>trihexyphenidyl hcl elix 0.4mg/ml</i>	2	
<i>trihexyphenidyl hcl tabs 2mg</i>	2	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>trihexyphenidyl hcl tabs 5mg</i>	2	
XADAGO TABS 100MG	4	
XADAGO TABS 50MG	4	
ZELAPAR TBDP 1.25MG	4	
<b>Anxiolytics, Sedatives, and Hypnotics</b>		
<i>alprazolam er tb24 0.5mg</i>	1	
<i>alprazolam er tb24 1mg</i>	1	
<i>alprazolam er tb24 2mg</i>	1	
<i>alprazolam er tb24 3mg</i>	1	
ALPRAZOLAM INTENSOL CONC 1MG/ML	3	
<i>alprazolam odt tbdp 0.25mg</i>	1	
<i>alprazolam odt tbdp 0.5mg</i>	1	
<i>alprazolam odt tbdp 1mg</i>	1	
<i>alprazolam odt tbdp 2mg</i>	1	
<i>alprazolam xr tb24 0.5mg</i>	1	
<i>alprazolam xr tb24 1mg</i>	1	
<i>alprazolam xr tb24 2mg</i>	1	
<i>alprazolam xr tb24 3mg</i>	1	
<i>alprazolam tabs 0.25mg</i>	1	
<i>alprazolam tabs 0.5mg</i>	1	
<i>alprazolam tabs 1mg</i>	1	
<i>alprazolam tabs 2mg</i>	1	
AMBIEN CR TBCR 12.5MG	4	QL (30 EA per 30 days) PA
AMBIEN CR TBCR 6.25MG	4	QL (30 EA per 30 days) PA
AMBIEN TABS 10MG	4	QL (30 EA per 30 days) PA
AMBIEN TABS 5MG	4	QL (30 EA per 30 days) PA
ATIVAN INJ 2MG/ML	4	
ATIVAN INJ 4MG/ML	4	
ATIVAN TABS 0.5MG	4	
ATIVAN TABS 1MG	4	
ATIVAN TABS 2MG	4	
BELSOMRA TABS 10MG	4	QL (30 EA per 30 days)
BELSOMRA TABS 15MG	4	QL (30 EA per 30 days)
BELSOMRA TABS 20MG	4	QL (30 EA per 30 days)
BELSOMRA TABS 5MG	4	QL (30 EA per 30 days)
<i>bupirone hcl tabs 10mg</i>	1	
<i>bupirone hcl tabs 15mg</i>	1	
<i>bupirone hcl tabs 30mg</i>	1	
<i>bupirone hcl tabs 5mg</i>	1	
<i>bupirone hcl tabs 7.5mg</i>	1	
BUTISOL SODIUM TABS 30MG	4	
<i>chlordiazepoxide hcl caps 10mg</i>	2	
<i>chlordiazepoxide hcl caps 25mg</i>	2	
<i>chlordiazepoxide hcl caps 5mg</i>	2	
<i>clorazepate dipotassium tabs 15mg</i>	1	
<i>clorazepate dipotassium tabs 3.75mg</i>	1	
<i>clorazepate dipotassium tabs 7.5mg</i>	1	
DIASTAT ACUDIAL GEL 10MG	3	

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Drug Name	Drug Tier	Requirements/Limits
DIASTAT ACUDIAL GEL 20MG	3	
DIASTAT PEDIATRIC GEL 2.5MG	3	
<i>diazepam intensol conc 5mg/ml</i>	2	
<i>diazepam rectal gel gel 10mg</i>	1	
<i>diazepam rectal gel gel 2.5mg</i>	1	
<i>diazepam gel 10mg</i>	1	
<i>diazepam gel 2.5mg</i>	1	
<i>diazepam gel 20mg</i>	1	
<i>diazepam inj 5mg/ml</i>	2	
<i>diazepam soln 5mg/5ml</i>	2	
<i>diazepam tabs 10mg</i>	2	
<i>diazepam tabs 2mg</i>	2	
<i>diazepam tabs 5mg</i>	2	
DORAL TABS 15MG	4	
<i>droperidol inj 2.5mg/ml</i>	1	
EDLUAR SUBL 10MG	4	QL (30 EA per 30 days) PA
EDLUAR SUBL 5MG	4	QL (30 EA per 30 days) PA
<i>estazolam tabs 1mg</i>	2	
<i>estazolam tabs 2mg</i>	2	
<i>eszopiclone tabs 1mg</i>	2	QL (30 EA per 30 days) PA
<i>eszopiclone tabs 2mg</i>	2	QL (30 EA per 30 days) PA
<i>eszopiclone tabs 3mg</i>	2	QL (30 EA per 30 days) PA
<i>flurazepam hcl caps 15mg</i>	2	
<i>flurazepam hcl caps 30mg</i>	2	
HALCION TABS 0.25MG	4	
HETLIOZ CAPS 20MG	5	PA
<i>hydroxyzine hcl inj 25mg/ml</i>	2	
<i>hydroxyzine hcl inj 50mg/ml</i>	2	
<i>hydroxyzine hcl syrp 10mg/5ml</i>	2	
<i>hydroxyzine hcl tabs 10mg</i>	2	
<i>hydroxyzine hcl tabs 25mg</i>	2	
<i>hydroxyzine hydrochloride tabs 50mg</i>	2	
<i>hydroxyzine pamoate caps 100mg</i>	2	
<i>hydroxyzine pamoate caps 25mg</i>	2	
<i>hydroxyzine pamoate caps 50mg</i>	2	
INTERMEZZO SUBL 1.75MG	4	QL (30 EA per 30 days) PA
INTERMEZZO SUBL 3.5MG	4	QL (30 EA per 30 days) PA
<i>lorazepam intensol conc 2mg/ml</i>	2	
<i>lorazepam conc 2mg/ml</i>	2	
<i>lorazepam inj 2mg/ml</i>	1	
<i>lorazepam inj 4mg/ml</i>	1	
<i>lorazepam tabs 0.5mg</i>	1	
<i>lorazepam tabs 1mg</i>	1	
<i>lorazepam tabs 2mg</i>	1	
LUNESTA TABS 1MG	4	QL (30 EA per 30 days) PA
LUNESTA TABS 2MG	4	QL (30 EA per 30 days) PA
LUNESTA TABS 3MG	4	QL (30 EA per 30 days) PA
<i>meprobamate tabs 200mg</i>	2	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>meprobamate tabs 400mg</i>	2	PA
<i>midazolam hcl inj 10mg/10ml</i>	1	
<i>midazolam hcl inj 25mg/5ml</i>	1	
<i>midazolam hcl inj 2mg/2ml</i>	1	
<i>midazolam hcl inj 50mg/10ml</i>	1	
<i>midazolam hcl inj 5mg/5ml</i>	1	
<i>midazolam hcl inj 5mg/ml</i>	1	
<i>midazolam hcl inj 5mg/ml</i>	1	
<i>midazolam hcl inj 5mg/ml</i>	1	
<i>midazolam hcl syrp 2mg/ml</i>	1	
<i>midazolam hydrochloride inj 2mg/2ml</i>	1	
<i>midazolam hydrochloride inj 50mg/10ml</i>	1	
<i>midazolam hydrochloride inj 5mg/5ml</i>	1	
NEMBUTAL SODIUM INJ 50MG/ML	4	QL (30 ML per 30 days)
<i>oxazepam caps 10mg</i>	1	
<i>oxazepam caps 15mg</i>	1	
<i>oxazepam caps 30mg</i>	1	
<i>pentobarbital sodium inj 50mg/ml</i>	2	QL (30 ML per 30 days)
<i>phenobarbital sodium inj 130mg/ml</i>	2	
<i>phenobarbital sodium inj 65mg/ml</i>	2	
<i>phenobarbital elix 20mg/5ml</i>	2	
<i>phenobarbital tabs 100mg</i>	2	
<i>phenobarbital tabs 15mg</i>	2	
<i>phenobarbital tabs 16.2mg</i>	2	
<i>phenobarbital tabs 30mg</i>	2	
<i>phenobarbital tabs 32.4mg</i>	2	
<i>phenobarbital tabs 60mg</i>	2	
<i>phenobarbital tabs 64.8mg</i>	2	
<i>phenobarbital tabs 97.2mg</i>	2	
RESTORIL CAPS 15MG	4	
RESTORIL CAPS 22.5MG	4	
RESTORIL CAPS 30MG	4	
RESTORIL CAPS 7.5MG	4	
ROZEREM TABS 8MG	4	
SECONAL SODIUM CAPS 100MG	5	QL (30 EA per 30 days)
SECONAL CAPS 100MG	5	QL (30 EA per 30 days)
SONATA CAPS 10MG	4	QL (30 EA per 30 days) PA
SONATA CAPS 5MG	4	QL (30 EA per 30 days) PA
<i>temazepam caps 15mg</i>	1	
<i>temazepam caps 22.5mg</i>	1	
<i>temazepam caps 30mg</i>	1	
<i>temazepam caps 7.5mg</i>	1	
TRANXENE T TABS 3.75MG	4	
TRANXENE T TABS 7.5MG	4	
<i>triazolam tabs 0.125mg</i>	2	
<i>triazolam tabs 0.25mg</i>	2	
VALIUM TABS 10MG	4	
VALIUM TABS 2MG	4	

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Drug Name	Drug Tier	Requirements/Limits
VALIUM TABS 5MG	4	
VISTARIL CAPS 25MG	4	
VISTARIL CAPS 50MG	4	
XANAX XR TB24 0.5MG	4	
XANAX XR TB24 1MG	4	
XANAX XR TB24 2MG	4	
XANAX XR TB24 3MG	4	
XANAX TABS 0.25MG	4	
XANAX TABS 0.5MG	4	
XANAX TABS 1MG	4	
XANAX TABS 2MG	4	
<i>zaleplon caps 10mg</i>	2	QL (30 EA per 30 days) PA
<i>zaleplon caps 5mg</i>	2	QL (30 EA per 30 days) PA
<i>zolpidem tartrate er tbcr 12.5mg</i>	2	QL (30 EA per 30 days) PA
<i>zolpidem tartrate er tbcr 6.25mg</i>	2	QL (30 EA per 30 days) PA
<i>zolpidem tartrate subl 1.75mg</i>	2	QL (30 EA per 30 days) PA
<i>zolpidem tartrate subl 3.5mg</i>	2	QL (30 EA per 30 days) PA
<i>zolpidem tartrate tabs 10mg</i>	2	QL (30 EA per 30 days) PA
<i>zolpidem tartrate tabs 5mg</i>	2	QL (30 EA per 30 days) PA
ZOLPIMIST SOLN 5MG/ACT	4	QL (8 ML per 30 days) PA
<b>Central Nervous System Agents, Misc</b>		
<i>acamprosate calcium dr tbec 333mg</i>	1	
<i>atomoxetine caps 100mg</i>	1	
<i>atomoxetine caps 10mg</i>	1	
<i>atomoxetine caps 18mg</i>	1	
<i>atomoxetine caps 25mg</i>	1	
<i>atomoxetine caps 40mg</i>	1	
<i>atomoxetine caps 60mg</i>	1	
<i>atomoxetine caps 80mg</i>	1	
AUSTEDO TABS 12MG	5	
AUSTEDO TABS 6MG	5	
AUSTEDO TABS 9MG	5	
<i>guanfacine er tb24 1mg</i>	2	
<i>guanfacine er tb24 2mg</i>	2	
<i>guanfacine er tb24 3mg</i>	2	
<i>guanfacine er tb24 4mg</i>	2	
INGREZZA CAPS 40MG	5	
INGREZZA CAPS 80MG	5	
INTUNIV TB24 1MG	4	
INTUNIV TB24 2MG	4	
INTUNIV TB24 3MG	4	
INTUNIV TB24 4MG	4	
<i>memantine hcl titration pak tabs 0</i>	1	
<i>memantine hcl tabs 10mg</i>	1	
<i>memantine hcl tabs 5mg</i>	1	
<i>memantine hydrochloride er cp24 14mg</i>	2	
<i>memantine hydrochloride er cp24 21mg</i>	2	
<i>memantine hydrochloride er cp24 28mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>memantine hydrochloride er cp24 7mg</i>	2	
<i>memantine hydrochloride soln 2mg/ml</i>	1	
NAMENDA TITRATION PAK TABS 0	4	
NAMENDA XR TITRATION PACK CP24 0	4	
NAMENDA XR CP24 14MG	4	
NAMENDA XR CP24 21MG	4	
NAMENDA XR CP24 28MG	4	
NAMENDA XR CP24 7MG	4	
NAMENDA SOLN 10MG/5ML	4	
NAMENDA TABS 10MG	4	
NAMENDA TABS 5MG	4	
NAMZARIC C4PK 10MG; 0	4	
NAMZARIC CP24 10MG; 14MG	4	
NAMZARIC CP24 10MG; 21MG	4	
NAMZARIC CP24 10MG; 28MG	4	
NAMZARIC CP24 10MG; 7MG	4	
NUEDEXTA CAPS 20MG; 10MG	4	
ORENCIA INJ 50MG/0.4ML	5	
ORENCIA INJ 87.5MG/0.7ML	5	
RADICAVA INJ 30MG/100ML	5	
RILUTEK TABS 50MG	5	
<i>riluzole tabs 50mg</i>	1	
STRATTERA CAPS 100MG	4	
STRATTERA CAPS 10MG	4	
STRATTERA CAPS 18MG	4	
STRATTERA CAPS 25MG	4	
STRATTERA CAPS 40MG	4	
STRATTERA CAPS 60MG	4	
STRATTERA CAPS 80MG	4	
<i>tetrabenazine tabs 12.5mg</i>	5	QL (240 EA per 30 days)
<i>tetrabenazine tabs 25mg</i>	5	QL (120 EA per 30 days)
XENAZINE TABS 12.5MG	5	QL (240 EA per 30 days)
XENAZINE TABS 25MG	5	QL (120 EA per 30 days)
XYREM SOLN 500MG/ML	5	PA
<b><i>Fibromyalgia Agents</i></b>		
SAVELLA TITRATION PACK MISC 0	4	
SAVELLA TABS 100MG	4	
SAVELLA TABS 12.5MG	4	
SAVELLA TABS 25MG	4	
SAVELLA TABS 50MG	4	
<b><i>Opiate Antagonists</i></b>		
EVZIO INJ 0.4MG/0.4ML	5	
EVZIO INJ 2MG/0.4ML	5	
<i>naloxone hcl inj 0.4mg/ml</i>	1	
<i>naloxone hcl inj 0.4mg/ml</i>	1	
<i>naloxone hcl inj 2mg/2ml</i>	1	
<i>naloxone hcl inj 4mg/10ml</i>	1	
<i>naltrexone hcl tabs 50mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
NARCAN LIQD 4MG/0.1ML	3	
VIVITROL INJ 380MG	5	*
<b>Psychotherapeutic Agents</b>		
ABILIFY MAINTENA INJ 300MG	5	
ABILIFY MAINTENA INJ 300MG	5	
ABILIFY MAINTENA INJ 400MG	5	
ABILIFY MAINTENA INJ 400MG	5	
ABILIFY TABS 10MG	4	
ABILIFY TABS 15MG	4	
ABILIFY TABS 20MG	4	
ABILIFY TABS 2MG	4	
ABILIFY TABS 30MG	4	
ABILIFY TABS 5MG	4	
<i>amitriptyline hcl tabs 100mg</i>	2	PA
<i>amitriptyline hcl tabs 10mg</i>	2	PA
<i>amitriptyline hcl tabs 150mg</i>	2	PA
<i>amitriptyline hcl tabs 25mg</i>	2	PA
<i>amitriptyline hcl tabs 50mg</i>	2	PA
<i>amitriptyline hcl tabs 75mg</i>	2	PA
<i>amoxapine tabs 100mg</i>	1	PA
<i>amoxapine tabs 150mg</i>	1	PA
<i>amoxapine tabs 25mg</i>	1	PA
<i>amoxapine tabs 50mg</i>	1	PA
ANAFRANIL CAPS 25MG	4	PA
ANAFRANIL CAPS 50MG	4	PA
ANAFRANIL CAPS 75MG	4	PA
APLENZIN TB24 174MG	4	
APLENZIN TB24 348MG	4	
APLENZIN TB24 522MG	4	
<i>aripiprazole odt tbdp 10mg</i>	2	
<i>aripiprazole odt tbdp 15mg</i>	2	
<i>aripiprazole soln 1mg/ml</i>	1	
<i>aripiprazole tabs 10mg</i>	1	
<i>aripiprazole tabs 15mg</i>	1	
<i>aripiprazole tabs 20mg</i>	1	
<i>aripiprazole tabs 2mg</i>	1	
<i>aripiprazole tabs 30mg</i>	1	
<i>aripiprazole tabs 5mg</i>	1	
ARISTADA INITIO INJ 675MG/2.4ML	5	
ARISTADA INJ 441MG/1.6ML	5	
ARISTADA INJ 662MG/2.4ML	5	
ARISTADA INJ 882MG/3.2ML	5	
BRINTELLIX TABS 10MG	4	
BRINTELLIX TABS 20MG	4	
BRINTELLIX TABS 5MG	4	
BRISDELLE CAPS 7.5MG	4	
<i>buproban tb12 150mg</i>	1	
<i>bupropion hcl sr tb12 100mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl sr tb12 150mg</i>	1	
<i>bupropion hcl sr tb12 150mg</i>	1	
<i>bupropion hcl sr tb12 200mg</i>	1	
<i>bupropion hcl xl tb24 150mg</i>	1	
<i>bupropion hcl xl tb24 300mg</i>	1	
<i>bupropion hcl tabs 100mg</i>	1	
<i>bupropion hydrochloride tabs 75mg</i>	1	
CELEXA TABS 10MG	4	
CELEXA TABS 20MG	4	
CELEXA TABS 40MG	4	
<i>chlordiazepoxide/amitriptyline tabs 12.5mg; 5mg</i>	2	
<i>chlordiazepoxide/amitriptyline tabs 25mg; 10mg</i>	2	
<i>chlorpromazine hcl inj 25mg/ml</i>	1	
<i>chlorpromazine hcl inj 50mg/2ml</i>	1	
<i>chlorpromazine hcl tabs 100mg</i>	1	
<i>chlorpromazine hcl tabs 10mg</i>	1	
<i>chlorpromazine hcl tabs 200mg</i>	1	
<i>chlorpromazine hcl tabs 25mg</i>	1	
<i>chlorpromazine hcl tabs 50mg</i>	1	
<i>citalopram hydrobromide soln 10mg/5ml</i>	1	
<i>citalopram hydrobromide tabs 10mg</i>	1	
<i>citalopram hydrobromide tabs 20mg</i>	1	
<i>citalopram hydrobromide tabs 40mg</i>	1	
<i>clomipramine hcl caps 25mg</i>	2	PA
<i>clomipramine hcl caps 50mg</i>	2	PA
<i>clomipramine hcl caps 75mg</i>	2	PA
<i>clozapine odt tbdp 100mg</i>	2	*
<i>clozapine odt tbdp 12.5mg</i>	2	*
<i>clozapine odt tbdp 150mg</i>	2	*
<i>clozapine odt tbdp 200mg</i>	2	*
<i>clozapine odt tbdp 25mg</i>	2	*
<i>clozapine tabs 100mg</i>	1	*
<i>clozapine tabs 200mg</i>	1	*
<i>clozapine tabs 25mg</i>	1	*
<i>clozapine tabs 50mg</i>	1	*
CLOZARIL TABS 100MG	4	*
CLOZARIL TABS 25MG	4	*
<i>compro supp 25mg</i>	1	
CYMBALTA CPEP 20MG	4	
CYMBALTA CPEP 30MG	4	
CYMBALTA CPEP 60MG	4	
<i>desipramine hcl tabs 100mg</i>	1	PA
<i>desipramine hcl tabs 10mg</i>	1	PA
<i>desipramine hcl tabs 150mg</i>	1	PA
<i>desipramine hcl tabs 25mg</i>	1	PA
<i>desipramine hcl tabs 50mg</i>	1	PA
<i>desipramine hcl tabs 75mg</i>	1	PA
DESVENLAFAXINE ER TB24 100MG	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
DESVENLAFAXINE ER TB24 100MG	4	
<i>desvenlafaxine er tb24 100mg</i>	2	
<i>desvenlafaxine er tb24 25mg</i>	2	
DESVENLAFAXINE ER TB24 50MG	4	
DESVENLAFAXINE ER TB24 50MG	4	
<i>desvenlafaxine er tb24 50mg</i>	2	
<i>doxepin hcl caps 100mg</i>	2	
<i>doxepin hcl caps 10mg</i>	2	
<i>doxepin hcl caps 150mg</i>	2	
<i>doxepin hcl caps 25mg</i>	2	
<i>doxepin hcl caps 50mg</i>	2	
<i>doxepin hcl caps 75mg</i>	2	
<i>doxepin hcl conc 10mg/ml</i>	1	
<i>duloxetine hcl cpep 20mg</i>	1	
<i>duloxetine hcl cpep 40mg</i>	1	
<i>duloxetine hydrochloride cpep 30mg</i>	1	
<i>duloxetine hydrochloride cpep 40mg</i>	1	
<i>duloxetine hydrochloride cpep 60mg</i>	1	
EFFEXOR XR CP24 150MG	4	
EFFEXOR XR CP24 37.5MG	4	
EFFEXOR XR CP24 75MG	4	
ELAVIL TABS 25MG	4	PA
<i>escitalopram oxalate soln 5mg/5ml</i>	1	
<i>escitalopram oxalate tabs 10mg</i>	1	
<i>escitalopram oxalate tabs 20mg</i>	1	
<i>escitalopram oxalate tabs 5mg</i>	1	
FANAPT TITRATION PACK TABS 0	4	
FANAPT TABS 10MG	4	
FANAPT TABS 12MG	4	
FANAPT TABS 1MG	4	
FANAPT TABS 2MG	4	
FANAPT TABS 4MG	4	
FANAPT TABS 6MG	4	
FANAPT TABS 8MG	4	
FAZACLO TBDP 100MG	4	*
FAZACLO TBDP 12.5MG	4	*
FAZACLO TBDP 150MG	4	*
FAZACLO TBDP 200MG	4	*
FAZACLO TBDP 25MG	4	*
FETZIMA TITRATION PACK C4PK 0	4	
FETZIMA CP24 120MG	4	
FETZIMA CP24 20MG	4	
FETZIMA CP24 40MG	4	
FETZIMA CP24 80MG	4	
<i>fluoxetine dr cpdr 90mg</i>	2	
<i>fluoxetine hcl caps 10mg</i>	1	
<i>fluoxetine hcl caps 20mg</i>	1	
<i>fluoxetine hcl caps 40mg</i>	1	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>fluoxetine hcl soln 20mg/5ml</i>	1	
<i>fluoxetine hydrochloride tabs 10mg</i>	1	
<i>fluoxetine hydrochloride tabs 10mg</i>	2	
<i>fluoxetine hydrochloride tabs 20mg</i>	1	
<i>fluoxetine hydrochloride tabs 20mg</i>	2	
<i>fluoxetine hydrochloride tabs 60mg</i>	2	
<i>fluoxetine caps 10mg</i>	2	
<i>fluoxetine caps 20mg</i>	2	
<i>fluphenazine decanoate inj 25mg/ml</i>	1	
<i>fluphenazine hcl conc 5mg/ml</i>	1	
<i>fluphenazine hcl elix 2.5mg/5ml</i>	1	
<i>fluphenazine hcl inj 2.5mg/ml</i>	1	
<i>fluphenazine hcl tabs 10mg</i>	1	
<i>fluphenazine hcl tabs 1mg</i>	1	
<i>fluphenazine hcl tabs 2.5mg</i>	1	
<i>fluphenazine hcl tabs 5mg</i>	1	
<i>fluvoxamine maleate er cp24 100mg</i>	2	
<i>fluvoxamine maleate er cp24 150mg</i>	2	
<i>fluvoxamine maleate tabs 100mg</i>	1	
<i>fluvoxamine maleate tabs 25mg</i>	1	
<i>fluvoxamine maleate tabs 50mg</i>	1	
FORFIVO XL TB24 450MG	4	
GEODON CAPS 20MG	4	
GEODON CAPS 40MG	4	
GEODON CAPS 60MG	4	
GEODON CAPS 80MG	4	
GEODON INJ 20MG	3	
HALDOL DECANOATE 100 INJ 100MG/ML	4	
HALDOL DECANOATE 50 INJ 50MG/ML	4	
HALDOL INJ 5MG/ML	4	
<i>haloperidol decanoate inj 100mg/ml</i>	1	
<i>haloperidol decanoate inj 100mg/ml</i>	1	
<i>haloperidol decanoate inj 50mg/ml</i>	1	
<i>haloperidol lactate inj 5mg/ml</i>	1	
<i>haloperidol lactate inj 5mg/ml</i>	1	
<i>haloperidol conc 2mg/ml</i>	1	
<i>haloperidol tabs 0.5mg</i>	1	
<i>haloperidol tabs 10mg</i>	1	
<i>haloperidol tabs 1mg</i>	1	
<i>haloperidol tabs 20mg</i>	1	
<i>haloperidol tabs 2mg</i>	1	
<i>haloperidol tabs 5mg</i>	1	
<i>imipramine hcl tabs 25mg</i>	2	PA
<i>imipramine hcl tabs 50mg</i>	2	PA
<i>imipramine hydrochloride tabs 10mg</i>	2	PA
<i>imipramine pamoate caps 100mg</i>	2	PA
<i>imipramine pamoate caps 125mg</i>	2	PA
<i>imipramine pamoate caps 150mg</i>	2	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>imipramine pamoate caps 75mg</i>	2	PA
INVEGA SUSTENNA INJ 117MG/0.75ML	5	
INVEGA SUSTENNA INJ 156MG/ML	5	
INVEGA SUSTENNA INJ 234MG/1.5ML	5	
INVEGA SUSTENNA INJ 39MG/0.25ML	4	
INVEGA SUSTENNA INJ 78MG/0.5ML	5	
INVEGA TRINZA INJ 273MG/0.875ML	5	
INVEGA TRINZA INJ 410MG/1.315ML	5	
INVEGA TRINZA INJ 546MG/1.75ML	5	
INVEGA TRINZA INJ 819MG/2.625ML	5	
INVEGA TB24 1.5MG	4	
INVEGA TB24 3MG	4	
INVEGA TB24 6MG	4	
INVEGA TB24 9MG	4	
KHEDEZLA TB24 100MG	4	
KHEDEZLA TB24 50MG	4	
LATUDA TABS 120MG	5	
LATUDA TABS 20MG	5	
LATUDA TABS 40MG	5	
LATUDA TABS 60MG	5	
LATUDA TABS 80MG	5	
LEXAPRO SOLN 5MG/5ML	4	
LEXAPRO TABS 10MG	4	
LEXAPRO TABS 20MG	4	
LEXAPRO TABS 5MG	4	
<i>loxapine succinate caps 10mg</i>	1	
<i>loxapine succinate caps 25mg</i>	1	
<i>loxapine succinate caps 50mg</i>	1	
<i>loxapine succinate caps 5mg</i>	1	
<i>loxapine caps 10mg</i>	1	
<i>maprotiline hcl tabs 25mg</i>	1	
<i>maprotiline hcl tabs 50mg</i>	1	
<i>maprotiline hcl tabs 75mg</i>	1	
MARPLAN TABS 10MG	4	
<i>mirtazapine odt tbdp 15mg</i>	2	
<i>mirtazapine odt tbdp 30mg</i>	2	
<i>mirtazapine odt tbdp 45mg</i>	2	
<i>mirtazapine tabs 15mg</i>	1	
<i>mirtazapine tabs 30mg</i>	1	
<i>mirtazapine tabs 45mg</i>	1	
<i>mirtazapine tabs 7.5mg</i>	1	
<i>molindone hydrochloride tabs 10mg</i>	2	
<i>molindone hydrochloride tabs 25mg</i>	2	
<i>molindone hydrochloride tabs 5mg</i>	2	
NARDIL TABS 15MG	4	
<i>nefazodone hcl tabs 100mg</i>	2	
<i>nefazodone hcl tabs 150mg</i>	2	
<i>nefazodone hydrochloride tabs 200mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>nefazodone hydrochloride tabs 250mg</i>	2	
<i>nefazodone hydrochloride tabs 50mg</i>	2	
NORPRAMIN TABS 100MG	4	PA
NORPRAMIN TABS 10MG	4	PA
NORPRAMIN TABS 150MG	4	PA
NORPRAMIN TABS 25MG	4	PA
NORPRAMIN TABS 50MG	4	PA
NORPRAMIN TABS 75MG	4	PA
<i>nortriptyline hcl caps 10mg</i>	1	PA
<i>nortriptyline hcl caps 25mg</i>	1	PA
<i>nortriptyline hcl caps 50mg</i>	1	PA
<i>nortriptyline hcl caps 75mg</i>	1	PA
<i>nortriptyline hcl soln 10mg/5ml</i>	1	PA
NUPLAZID CAPS 34MG	5	
NUPLAZID TABS 10MG	5	
NUPLAZID TABS 17MG	5	
<i>olanzapine odt tbdp 10mg</i>	2	
<i>olanzapine odt tbdp 15mg</i>	2	
<i>olanzapine odt tbdp 20mg</i>	2	
<i>olanzapine odt tbdp 5mg</i>	2	
<i>olanzapine/fluoxetine caps 25mg; 12mg</i>	2	
<i>olanzapine/fluoxetine caps 25mg; 3mg</i>	2	
<i>olanzapine/fluoxetine caps 25mg; 6mg</i>	2	
<i>olanzapine/fluoxetine caps 50mg; 12mg</i>	2	
<i>olanzapine/fluoxetine caps 50mg; 6mg</i>	2	
<i>olanzapine inj 10mg</i>	1	*
<i>olanzapine tabs 10mg</i>	1	
<i>olanzapine tabs 15mg</i>	1	
<i>olanzapine tabs 2.5mg</i>	1	
<i>olanzapine tabs 20mg</i>	1	
<i>olanzapine tabs 5mg</i>	1	
<i>olanzapine tabs 7.5mg</i>	1	
ORAP TABS 1MG	4	
ORAP TABS 2MG	4	
<i>paliperidone er tb24 1.5mg</i>	2	
<i>paliperidone er tb24 3mg</i>	2	
<i>paliperidone er tb24 6mg</i>	2	
<i>paliperidone er tb24 9mg</i>	2	
PAMELOR CAPS 10MG	4	PA
PAMELOR CAPS 25MG	4	PA
PAMELOR CAPS 50MG	4	PA
PAMELOR CAPS 75MG	4	PA
PARNATE TABS 10MG	4	
<i>paroxetine hcl er tb24 12.5mg</i>	2	PA
<i>paroxetine hcl er tb24 25mg</i>	2	PA
<i>paroxetine hcl er tb24 37.5mg</i>	2	PA
<i>paroxetine hcl tabs 10mg</i>	1	PA
<i>paroxetine hcl tabs 20mg</i>	1	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>paroxetine hcl tabs 30mg</i>	1	PA
<i>paroxetine hcl tabs 40mg</i>	1	PA
<i>paroxetine caps 7.5mg</i>	2	
PAXIL CR TB24 12.5MG	4	PA
PAXIL CR TB24 25MG	4	PA
PAXIL CR TB24 37.5MG	4	PA
PAXIL SUSP 10MG/5ML	4	PA
PAXIL TABS 10MG	4	PA
PAXIL TABS 20MG	4	PA
PAXIL TABS 30MG	4	PA
PAXIL TABS 40MG	4	PA
<i>perphenazine/amitriptyline tabs 10mg; 2mg</i>	2	
<i>perphenazine/amitriptyline tabs 10mg; 4mg</i>	2	
<i>perphenazine/amitriptyline tabs 25mg; 2mg</i>	2	
<i>perphenazine/amitriptyline tabs 25mg; 4mg</i>	2	
<i>perphenazine/amitriptyline tabs 50mg; 4mg</i>	2	
<i>perphenazine tabs 16mg</i>	1	
<i>perphenazine tabs 2mg</i>	1	
<i>perphenazine tabs 4mg</i>	1	
<i>perphenazine tabs 8mg</i>	1	
PERSERIS INJ 120MG	5	
PERSERIS INJ 90MG	5	
PEXEVA TABS 10MG	4	PA
PEXEVA TABS 20MG	4	PA
PEXEVA TABS 30MG	4	PA
PEXEVA TABS 40MG	4	PA
<i>phenelzine sulfate tabs 15mg</i>	1	
<i>pimozide tabs 1mg</i>	2	
<i>pimozide tabs 2mg</i>	2	
PRISTIQ TB24 100MG	4	
PRISTIQ TB24 25MG	4	
PRISTIQ TB24 50MG	4	
<i>prochlorperazine edisylate inj 5mg/ml</i>	1	
<i>prochlorperazine maleate tabs 10mg</i>	1	
<i>prochlorperazine maleate tabs 5mg</i>	1	
<i>prochlorperazine supp 25mg</i>	1	
<i>protriptyline hcl tabs 10mg</i>	1	PA
<i>protriptyline hcl tabs 5mg</i>	1	PA
PROZAC WEEKLY CPDR 90MG	4	
PROZAC CAPS 10MG	4	
PROZAC CAPS 20MG	4	
PROZAC CAPS 40MG	4	
<i>quetiapine fumarate er tb24 150mg</i>	2	
<i>quetiapine fumarate er tb24 200mg</i>	2	
<i>quetiapine fumarate er tb24 300mg</i>	2	
<i>quetiapine fumarate er tb24 400mg</i>	2	
<i>quetiapine fumarate er tb24 50mg</i>	2	
<i>quetiapine fumarate tabs 100mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>quetiapine fumarate tabs 200mg</i>	1	
<i>quetiapine fumarate tabs 25mg</i>	1	
<i>quetiapine fumarate tabs 300mg</i>	1	
<i>quetiapine fumarate tabs 400mg</i>	1	
<i>quetiapine fumarate tabs 50mg</i>	1	
REMERON SOLTAB TBDP 15MG	4	
REMERON SOLTAB TBDP 30MG	4	
REMERON SOLTAB TBDP 45MG	4	
REMERON TABS 15MG	4	
REMERON TABS 30MG	4	
REMERON TABS 45MG	4	
REXULTI TABS 0.25MG	4	
REXULTI TABS 0.5MG	4	
REXULTI TABS 1MG	4	
REXULTI TABS 2MG	4	
REXULTI TABS 3MG	4	
REXULTI TABS 4MG	4	
RISPERDAL CONSTA INJ 12.5MG	3	
RISPERDAL CONSTA INJ 25MG	3	
RISPERDAL CONSTA INJ 37.5MG	3	
RISPERDAL CONSTA INJ 50MG	3	
RISPERDAL M-TAB TBDP 0.5MG	4	
RISPERDAL M-TAB TBDP 1MG	4	
RISPERDAL M-TAB TBDP 1MG	4	
RISPERDAL M-TAB TBDP 2MG	4	
RISPERDAL M-TAB TBDP 3MG	4	
RISPERDAL M-TAB TBDP 4MG	4	
RISPERDAL SOLN 1MG/ML	4	
RISPERDAL TABS 0.25MG	4	
RISPERDAL TABS 0.5MG	4	
RISPERDAL TABS 1MG	4	
RISPERDAL TABS 2MG	4	
RISPERDAL TABS 3MG	4	
RISPERDAL TABS 4MG	4	
<i>risperidone m-tab tbdp 0.5mg</i>	2	
<i>risperidone m-tab tbdp 1mg</i>	2	
<i>risperidone m-tab tbdp 2mg</i>	2	
<i>risperidone m-tab tbdp 3mg</i>	2	
<i>risperidone m-tab tbdp 4mg</i>	2	
<i>risperidone odt tbdp 0.25mg</i>	2	
<i>risperidone odt tbdp 0.5mg</i>	2	
<i>risperidone odt tbdp 1mg</i>	2	
<i>risperidone odt tbdp 2mg</i>	2	
<i>risperidone odt tbdp 3mg</i>	2	
<i>risperidone odt tbdp 4mg</i>	2	
<i>risperidone soln 1mg/ml</i>	1	
<i>risperidone tabs 0.25mg</i>	1	
<i>risperidone tabs 0.5mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>risperidone tabs 1mg</i>	1	
<i>risperidone tabs 2mg</i>	1	
<i>risperidone tabs 3mg</i>	1	
<i>risperidone tabs 4mg</i>	1	
SAPHRIS SUBL 10MG	4	
SAPHRIS SUBL 2.5MG	4	
SAPHRIS SUBL 5MG	4	
SARAFEM TABS 10MG	4	
SARAFEM TABS 20MG	4	
SEROQUEL XR TB24 150MG	4	
SEROQUEL XR TB24 200MG	4	
SEROQUEL XR TB24 300MG	4	
SEROQUEL XR TB24 400MG	4	
SEROQUEL XR TB24 50MG	4	
SEROQUEL TABS 100MG	4	
SEROQUEL TABS 200MG	4	
SEROQUEL TABS 25MG	4	
SEROQUEL TABS 300MG	4	
SEROQUEL TABS 400MG	4	
SEROQUEL TABS 50MG	4	
<i>sertraline hcl conc 20mg/ml</i>	1	
<i>sertraline hcl tabs 100mg</i>	1	
<i>sertraline hcl tabs 25mg</i>	1	
<i>sertraline hcl tabs 50mg</i>	1	
SILENOR TABS 3MG	4	
SILENOR TABS 6MG	4	
SURMONTIL CAPS 100MG	4	PA
SURMONTIL CAPS 25MG	4	PA
SURMONTIL CAPS 50MG	4	PA
SYMBYAX CAPS 25MG; 12MG	4	
SYMBYAX CAPS 25MG; 3MG	4	
SYMBYAX CAPS 25MG; 6MG	4	
SYMBYAX CAPS 50MG; 12MG	4	
SYMBYAX CAPS 50MG; 6MG	4	
<i>thioridazine hcl tabs 100mg</i>	2	
<i>thioridazine hcl tabs 10mg</i>	2	
<i>thioridazine hcl tabs 25mg</i>	2	
<i>thioridazine hcl tabs 50mg</i>	2	
<i>thiothixene caps 10mg</i>	1	
<i>thiothixene caps 1mg</i>	1	
<i>thiothixene caps 2mg</i>	1	
<i>thiothixene caps 5mg</i>	1	
TOFRANIL TABS 10MG	4	PA
TOFRANIL TABS 25MG	4	PA
TOFRANIL TABS 50MG	4	PA
<i>tranylcypromine sulfate tabs 10mg</i>	1	
<i>trazodone hydrochloride tabs 100mg</i>	1	
<i>trazodone hydrochloride tabs 150mg</i>	1	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document



Drug Name	Drug Tier	Requirements/Limits
<i>trazodone hydrochloride tabs 300mg</i>	1	
<i>trazodone hydrochloride tabs 50mg</i>	1	
<i>trifluoperazine hcl tabs 10mg</i>	1	
<i>trifluoperazine hcl tabs 1mg</i>	1	
<i>trifluoperazine hcl tabs 2mg</i>	1	
<i>trifluoperazine hcl tabs 5mg</i>	1	
<i>trimipramine maleate caps 100mg</i>	2	PA
<i>trimipramine maleate caps 25mg</i>	2	PA
<i>trimipramine maleate caps 50mg</i>	2	PA
TRINTELLIX TABS 10MG	4	
TRINTELLIX TABS 20MG	4	
TRINTELLIX TABS 5MG	4	
<i>venlafaxine hcl er cp24 150mg</i>	1	
<i>venlafaxine hcl er cp24 37.5mg</i>	1	
<i>venlafaxine hcl er cp24 75mg</i>	1	
<i>venlafaxine hcl er tb24 150mg</i>	2	
<i>venlafaxine hcl er tb24 225mg</i>	2	
<i>venlafaxine hcl er tb24 37.5mg</i>	2	
<i>venlafaxine hcl er tb24 75mg</i>	2	
<i>venlafaxine hcl tabs 100mg</i>	1	
<i>venlafaxine hcl tabs 25mg</i>	1	
<i>venlafaxine hcl tabs 37.5mg</i>	1	
<i>venlafaxine hcl tabs 50mg</i>	1	
<i>venlafaxine hcl tabs 75mg</i>	1	
<i>venlafaxine hydrochloride er tb24 37.5mg</i>	2	
<i>venlafaxine hydrochloride er tb24 75mg</i>	2	
VERSACLOZ SUSP 50MG/ML	4	
VIIBRYD STARTER PACK KIT 0	4	
VIIBRYD TABS 10MG	4	
VIIBRYD TABS 20MG	4	
VIIBRYD TABS 40MG	4	
VRAYLAR CAPS 1.5MG	5	
VRAYLAR CAPS 3MG	5	
VRAYLAR CAPS 4.5MG	5	
VRAYLAR CAPS 6MG	5	
VRAYLAR CPPK 0	4	
WELLBUTRIN SR TB12 100MG	4	
WELLBUTRIN SR TB12 150MG	4	
WELLBUTRIN SR TB12 200MG	4	
WELLBUTRIN XL TB24 150MG	4	
WELLBUTRIN XL TB24 300MG	4	
WELLBUTRIN TABS 100MG	4	
WELLBUTRIN TABS 75MG	4	
<i>ziprasidone hcl caps 20mg</i>	1	
<i>ziprasidone hcl caps 40mg</i>	1	
<i>ziprasidone hcl caps 60mg</i>	1	
<i>ziprasidone hcl caps 80mg</i>	1	
ZOLOFT CONC 20MG/ML	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
ZOLOFT TABS 100MG	4	
ZOLOFT TABS 25MG	4	
ZOLOFT TABS 50MG	4	
ZYBAN TB12 150MG	4	
ZYPREXA RELPREVV INJ 210MG	4	*
ZYPREXA RELPREVV INJ 300MG	4	*
ZYPREXA RELPREVV INJ 405MG	4	*
ZYPREXA ZYDIS TBDP 10MG	4	
ZYPREXA ZYDIS TBDP 15MG	4	
ZYPREXA ZYDIS TBDP 20MG	4	
ZYPREXA ZYDIS TBDP 5MG	4	
ZYPREXA INJ 10MG	4	*
ZYPREXA TABS 10MG	4	
ZYPREXA TABS 15MG	4	
ZYPREXA TABS 2.5MG	4	
ZYPREXA TABS 20MG	4	
ZYPREXA TABS 5MG	4	
ZYPREXA TABS 7.5MG	4	

### Devices

#### Devices

<i>alcohol prep pads pads 70%</i>	1	
<i>autopen devi</i>	2	
<i>autopen devi</i>	2	
<i>autopen devi</i>	2	
<i>autopen devi</i>	2	
<i>autopen devi</i>	2	
<i>autopen devi</i>	2	
<i>autopen devi</i>	2	
<i>autopen misc</i>	2	
<i>autopen misc</i>	2	
<i>bd eclipse syringe/1ml/30gx1/2" misc</i>	1	
<i>bd insulin syringe safetyglide/1ml/29g x 1/2" misc</i>	1	
<i>bd insulin syringe ultrafine/0.3ml/31g x 5/16" misc</i>	1	
<i>bd insulin syringe ultrafine/0.5ml/30g x 1/2" misc</i>	1	
<i>bd insulin syringe ultrafine/1ml/31g x 5/16" misc</i>	1	
<i>bd pen mini misc</i>	1	*
<i>bd pen needle/ultrafine/29g x 12.7mm misc</i>	1	
<i>bd pen misc</i>	1	*
<i>curity gauze pads 2"x2" pads</i>	1	
<i>inpen 100/blue/lilly devi</i>	2	
<i>inpen 100/blue/novo devi</i>	2	
<i>inpen 100/gray/lilly devi</i>	2	
<i>inpen 100/grey/novo devi</i>	2	
<i>inpen 100/pink/lilly devi</i>	2	
<i>inpen 100/pink/novo devi</i>	2	
OMNIPOD 5 PACK MISC	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
OMNIPOD STARTER KIT KIT	4	
OMNIPOD MISC	4	
v-go 20 kit	1	
v-go 30 kit	1	
v-go 40 kit	1	
<b>Electrolytic, Caloric, and Water Balance</b>		
<b>Alkalinizing Agents</b>		
potassium citrate er tbc 1080mg	1	
potassium citrate er tbc 15meq	1	
potassium citrate er tbc 540mg	1	
sodium acetate inj 2meq/ml	1	HI; *
sodium acetate inj 4meq/ml	2	HI
sodium bicarbonate/dextrose inj 5%; 150meq/l	2	HI
sodium bicarbonate inj 4.2%	2	HI
sodium bicarbonate inj 7.5%	2	HI
sodium bicarbonate inj 8.4%	2	HI
sodium lactate inj 5meq/ml	1	HI; *
UROCIT-K 10 TBCR 1080MG	4	
UROCIT-K 15 TBCR 15MEQ	4	
UROCIT-K 5 TBCR 540MG	4	
<b>Ammonia Detoxicants</b>		
AMMONUL INJ 10%; 10%	4	*
BUPHENYL POWD 3GM/TSP	5	
BUPHENYL TABS 500MG	5	
CARBAGLU TABS 200MG	5	
constulose soln 10gm/15ml	1	
enulose soln 10gm/15ml	1	
generlac soln 10gm/15ml	1	
KRISTALOSE PACK 10GM	4	
KRISTALOSE PACK 20GM	4	
lactulose soln 10gm/15ml	1	
lactulose soln 10gm/15ml	1	
LITHOSTAT TABS 250MG	4	
RAVICTI LIQD 1.1GM/ML	5	
sodium phenylacetate/sodium benzoate inj 10%; 10%	2	*
sodium phenylbutyrate powd 3gm/tsp	2	
sodium phenylbutyrate tabs 500mg	5	
<b>Caloric Agents</b>		
AMINOSYN 7%/ELECTROLYTES INJ 124MEQ/L; 900MG/100ML; 690MG/100ML; 96MEQ/L; 900MG/100ML; 210MG/100ML; 510MG/100ML; 660MG/100ML; 510MG/100ML; 10MEQ/L; 280MG/100ML; 310MG/100ML; 30MMOLE/L; 65MEQ/L; 610MG/100ML; 300MG/100ML; 65MEQ/L; 370MG/100ML; 120MG/100ML; 44MG/100ML; 560MG/100ML	3	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
AMINOSYN 8.5%/ELECTROLYTES INJ 142MEQ/L; 1100MG/100ML; 850MG/100ML; 98MEQ/L; 1100MG/100ML; 260MG/100ML; 620MG/100ML; 810MG/100ML; 624MG/100ML; 10MEQ/L; 340MG/100ML; 380MG/100ML; 30MEQ/L; 65MEQ/L; 750MG/100ML; 370MG/100ML; 65MEQ/L; 460MG/100ML; 150MG/100ML; 44MG/100ML; 680MG/100ML	3	HI; *
AMINOSYN II 8.5%/ELECTROLYTES INJ 61MEQ/L; 844MG/100ML; 865MG/100ML; 595MG/100ML; 86MEQ/L; 627MG/100ML; 425MG/100ML; 255MG/100ML; 561MG/100ML; 850MG/100ML; 893MG/100ML; 10MEQ/L; 146MG/100ML; 253MG/100ML; 30MMOLE/L; 66MEQ/L; 614MG/100ML; 450MG/100ML; 80MEQ/L; 340MG/100ML; 170MG/100ML; 230MG/100ML; 425MG/100ML	3	HI; *
AMINOSYN II INJ 107.6MEQ/L; 1490MG/100ML; 1527MG/100ML; 1050MG/100ML; 1107MG/100ML; 750MG/100ML; 450MG/100ML; 990MG/100ML; 1500MG/100ML; 1575MG/100ML; 258MG/100ML; 447MG/100ML; 1083MG/100ML; 795MG/100ML; 50MEQ/L; 600MG/100ML; 300MG/100ML; 405MG/100ML; 750MG/100ML	3	B/D HI; *
AMINOSYN II INJ 50.3MEQ/L; 695MG/100ML; 713MG/100ML; 490MG/100ML; 517MG/100ML; 350MG/100ML; 210MG/100ML; 462MG/100ML; 700MG/100ML; 735MG/100ML; 120MG/100ML; 209MG/100ML; 505MG/100ML; 371MG/100ML; 31.3MEQ/L; 280MG/100ML; 140MG/100ML; 189MG/100ML; 350MG/100ML	3	B/D HI; *
AMINOSYN II INJ 61.1MEQ/L; 844MG/100ML; 865MG/100ML; 595MG/100ML; 627MG/100ML; 425MG/100ML; 255MG/100ML; 561MG/100ML; 850MG/100ML; 893MG/100ML; 146MG/100ML; 253MG/100ML; 614MG/100ML; 450MG/100ML; 33.3MEQ/L; 340MG/100ML; 170MG/100ML; 230MG/100ML; 425MG/100ML	3	B/D HI; *
AMINOSYN II INJ 71.8MEQ/L; 993MG/100ML; 1018MG/100ML; 700MG/100ML; 738MG/100ML; 500MG/100ML; 300MG/100ML; 660MG/100ML; 1000MG/100ML; 1050MG/100ML; 172MG/100ML; 298MG/100ML; 722MG/100ML; 530MG/100ML; 38MEQ/L; 400MG/100ML; 200MG/100ML; 270MG/100ML; 500MG/100ML	3	B/D HI; *
AMINOSYN M INJ 65MEQ/L; 448MG/100ML; 343MG/100ML; 40MEQ/L; 448MG/100ML; 105MG/100ML; 252MG/100ML; 329MG/100ML; 252MG/100ML; 3MEQ/L; 140MG/100ML; 154MG/100ML; 3.5MMOLE/L; 13MEQ/L; 300MG/100ML; 147MG/100ML; 40MEQ/L; 182MG/100ML; 56MG/100ML; 31MG/100ML; 280MG/100ML	3	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
AMINOSYN-HBC INJ 7.1MEQ/100ML; 660MG/100ML; 507MG/100ML; 4MEQ/100ML; 660MG/100ML; 154MG/100ML; 789MG/100ML; 1576MG/100ML; 265MG/100ML; 206MG/100ML; 1.12GM/100ML; 228MG/100ML; 448MG/100ML; 221MG/100ML; 272MG/100ML; 88MG/100ML; 33MG/100ML; 789MG/100ML	3	B/D HI; *
AMINOSYN-PF 7% INJ 32.5MEQ/L; 490MG/100ML; 861MG/100ML; 370MG/100ML; 576MG/100ML; 270MG/100ML; 220MG/100ML; 534MG/100ML; 831MG/100ML; 475MG/100ML; 125MG/100ML; 10.69GM/L; 300MG/100ML; 570MG/100ML; 70GM/L; 347MG/100ML; 50MG/100ML; 360MG/100ML; 125MG/100ML; 44MG/100ML; 452MG/100ML	3	B/D HI; *
AMINOSYN-PF INJ 46MEQ/L; 698MG/100ML; 1227MG/100ML; 527MG/100ML; 820MG/100ML; 385MG/100ML; 312MG/100ML; 760MG/100ML; 1200MG/100ML; 677MG/100ML; 180MG/100ML; 427MG/100ML; 812MG/100ML; 495MG/100ML; 3.4MEQ/L; 70MG/100ML; 512MG/100ML; 180MG/100ML; 44MG/100ML; 673MG/100ML	3	B/D HI; *
AMINOSYN-RF INJ 113MEQ/L; 600MG/100ML; 429MG/100ML; 462MG/100ML; 726MG/100ML; 535MG/100ML; 726MG/100ML; 726MG/100ML; 330MG/100ML; 165MG/100ML; 528MG/100ML	4	B/D HI; *
AMINOSYN INJ 148MEQ/L; 1280MG/100ML; 980MG/100ML; 1280MG/100ML; 300MG/100ML; 720MG/100ML; 940MG/100ML; 720MG/100ML; 400MG/100ML; 440MG/100ML; 5.4MEQ/L; 860MG/100ML; 420MG/100ML; 520MG/100ML; 160MG/100ML; 44MG/100ML; 800MG/100ML	3	B/D HI; *
AMINOSYN INJ 90MEQ/L; 1100MG/100ML; 850MG/100ML; 35MEQ/L; 1100MG/100ML; 260MG/100ML; 620MG/100ML; 810MG/100ML; 624MG/100ML; 340MG/100ML; 380MG/100ML; 5.4MEQ/L; 750MG/100ML; 370MG/100ML; 460MG/100ML; 150MG/100ML; 44MG/100ML; 680MG/100ML	3	B/D HI; *
CLINIMIX 2.75%/DEXTROSE 5% INJ 24MEQ/1000ML; 570MG/100ML; 316MG/100ML; 11MEQ/1000ML; 5GM/100ML; 283MG/100ML; 132MG/100ML; 165MG/100ML; 201MG/100ML; 159MG/100ML; 110MG/100ML; 154MG/100ML; 187MG/100ML; 138MG/100ML; 116MG/100ML; 50MG/100ML; 11MG/100ML; 160MG/100ML	3	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX 4.25%/DEXTROSE 10% INJ 37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 10GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	HI; *
CLINIMIX 4.25%/DEXTROSE 20% INJ 37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 20GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	HI; *
CLINIMIX 4.25%/DEXTROSE 25% INJ 37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 25GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	HI; *
CLINIMIX 4.25%/DEXTROSE 5% INJ 37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 5GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	HI; *
CLINIMIX 5%/DEXTROSE 15% INJ 42MEQ/1000ML; 1035MG/100ML; 575MG/100ML; 20MEQ/1000ML; 15GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 200MG/100ML; 280MG/100ML; 340MG/100ML; 250MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	HI; *
CLINIMIX 5%/DEXTROSE 20% INJ 42MEQ/L; 1035MG/100ML; 575MG/100ML; 20MEQ/L; 20GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 200MG/100ML; 280MG/100ML; 340MG/100ML; 250MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX 5%/DEXTROSE 25% INJ 42MEQ/L; 1035MG/100ML; 575MG/100ML; 20MEQ/L; 25GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 200MG/100ML; 280MG/100ML; 340MG/100ML; 250MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	HI; *
CLINIMIX E 2.75%/DEXTROSE 10% INJ 570MG/100ML; 316MG/100ML; 33MG/100ML; 10GM/100ML; 132MG/100ML; 165MG/100ML; 201MG/100ML; 159MG/100ML; 51MG/100ML; 110MG/100ML; 454MG/100ML; 154MG/100ML; 261MG/100ML; 187MG/100ML; 138MG/100ML; 217MG/100ML; 112MG/100ML; 116MG/100ML; 50MG/100ML; 11MG/100ML; 160MG/100ML	3	HI; *
CLINIMIX E 2.75%/DEXTROSE 5% INJ 570MG/100ML; 316MG/100ML; 33MG/100ML; 5GM/100ML; 132MG/100ML; 165MG/100ML; 201MG/100ML; 159MG/100ML; 51MG/100ML; 110MG/100ML; 454MG/100ML; 154MG/100ML; 261MG/100ML; 187MG/100ML; 138MG/100ML; 217MG/100ML; 112MG/100ML; 116MG/100ML; 50MG/100ML; 11MG/100ML; 160MG/100ML	3	HI; *
CLINIMIX E 4.25%/DEXTROSE 10% INJ 880MG/100ML; 489MG/100ML; 33MG/100ML; 10GM/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 51MG/100ML; 170MG/100ML; 702MG/100ML; 238MG/100ML; 261MG/100ML; 289MG/100ML; 213MG/100ML; 297MG/100ML; 77MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	HI; *
CLINIMIX E 4.25%/DEXTROSE 25% INJ 880MG/100ML; 489MG/100ML; 33MG/100ML; 25GM/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 51MG/100ML; 170MG/100ML; 702MG/100ML; 238MG/100ML; 261MG/100ML; 289MG/100ML; 213MG/100ML; 297MG/100ML; 77MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	HI; *
CLINIMIX E 4.25%/DEXTROSE 5% INJ 880MG/100ML; 489MG/100ML; 33MG/100ML; 5GM/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 51MG/100ML; 170MG/100ML; 702MG/100ML; 238MG/100ML; 261MG/100ML; 289MG/100ML; 213MG/100ML; 297MG/100ML; 77MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX E 5%/DEXTROSE 15% INJ 1035MG/100ML; 575MG/100ML; 33MG/100ML; 15GM/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 51MG/100ML; 200MG/100ML; 826MG/100ML; 280MG/100ML; 261MG/100ML; 340MG/100ML; 250MG/100ML; 340MG/100ML; 59MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	HI; *
CLINIMIX E 5%/DEXTROSE 20% INJ 1035MG/100ML; 575MG/100ML; 33MG/100ML; 20GM/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 51MG/100ML; 200MG/100ML; 826MG/100ML; 280MG/100ML; 261MG/100ML; 340MG/100ML; 250MG/100ML; 340MG/100ML; 59MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	HI; *
CLINIMIX E 5%/DEXTROSE 25% INJ 1035MG/100ML; 575MG/100ML; 33MG/100ML; 25GM/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 51MG/100ML; 200MG/100ML; 826MG/100ML; 280MG/100ML; 261MG/100ML; 340MG/100ML; 250MG/100ML; 340MG/100ML; 59MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	HI; *
CLINIMIX N14G30E INJ 17.6GM/2000ML; 9.78GM/2000ML; 15%; 8.76GM/2000ML; 4.08GM/2000ML; 5.1GM/2000ML; 6.2GM/2000ML; 4.93GM/2000ML; 1.02GM/2000ML; 3.4GM/2000ML; 4.76GM/2000ML; 5.22GM/2000ML; 5.78GM/2000ML; 4.25GM/2000ML; 1.54GM/2000ML; 3.57GM/2000ML; 1.53GM/2000ML; 0.34GM/2000ML; 4.93GM/2000ML	3	HI
CLINIMIX N9G15E INJ 5MMOL/100ML; 570MG/100ML; 317MG/100ML; 0.23MMOL/100ML; 4MMOL/100ML; 7.5GM/100ML; 284MG/100ML; 132MG/100ML; 165MG/100ML; 201MG/100ML; 200MG/100ML; 0.25MMOL/100ML; 110MG/100ML; 460MG/100ML; 154MG/100ML; 1.5MMOL/100ML; 3MMOL/100ML; 187MG/100ML; 138MG/100ML; 3.5MMOL/100ML; 116MG/100ML; 50MG/100ML; 11MG/100ML; 160MG/100ML	3	HI
<i>clinisol sf 15% inj 151meq/l; 2170mg/100ml; 1470mg/100ml; 434mg/100ml; 749mg/100ml; 1040mg/100ml; 894mg/100ml; 749mg/100ml; 1040mg/100ml; 1180mg/100ml; 749mg/100ml; 1040mg/100ml; 894mg/100ml; 592mg/100ml; 749mg/100ml; 250mg/100ml; 39mg/100ml; 960mg/100ml</i>	1	B/D HI; *
<i>dextrose 10% inj 10%</i>	1	HI; *
<i>dextrose 20% inj 20%</i>	1	HI; *
<i>dextrose 25% inj 250mg/ml</i>	1	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document



Drug Name	Drug Tier	Requirements/Limits
<i>dextrose 30% inj 30%</i>	1	HI; *
<i>dextrose 40% inj 40%</i>	1	HI; *
<i>dextrose 5% inj 5%</i>	1	HI; *
<i>dextrose 70% inj 70%</i>	1	HI; *
FREAMINE HBC 6.9% INJ 59.3MEQ/L; 400MG/100ML; 580MG/100ML; 3MEQ/L; 14MG/100ML; 330MG/100ML; 160MG/100ML; 760MG/100ML; 1370MG/100ML; 410MG/100ML; 250MG/100ML; 320MG/100ML; 630MG/100ML; 330MG/100ML; 10MEQ/L; 200MG/100ML; 90MG/100ML; 880MG/100ML	3	B/D HI; *
FREAMINE III INJ 89MEQ/L; 710MG/100ML; 950MG/100ML; 3MEQ/L; 24MG/100ML; 1400MG/100ML; 280MG/100ML; 690MG/100ML; 910MG/100ML; 730MG/100ML; 530MG/100ML; 560MG/100ML; 10MMOLE/L; 120MG/100ML; 1120MG/100ML; 590MG/100ML; 10MEQ/L; 400MG/100ML; 150MG/100ML; 660MG/100ML	3	B/D HI; *
HEPATAMINE INJ 62MEQ/L; 770MG/100ML; 600MG/100ML; 3MEQ/L; 20MG/100ML; 900MG/100ML; 240MG/100ML; 900MG/100ML; 1100MG/100ML; 610MG/100ML; 100MG/100ML; 100MG/100ML; 115MG/100ML; 800MG/100ML; 500MG/100ML; 100MG/100ML; 450MG/100ML; 66MG/100ML; 840MG/100ML	3	B/D HI; *
INTRALIPID INJ 20GM/100ML	3	B/D HI
INTRALIPID INJ 30GM/100ML	3	B/D HI; *
KABIVEN INJ 467MG/100ML; 330MG/100ML; 99MG/100ML; 29MG/100ML; 9.8GM/100ML; 164MG/100ML; 231MG/100ML; 199MG/100ML; 164MG/100ML; 263MG/100ML; 231MG/100ML; 96MG/100ML; 164MG/100ML; 231MG/100ML; 174MG/100ML; 199MG/100ML; 131MG/100ML; 239MG/100ML; 147MG/100ML; 164MG/100ML; 55MG/100ML; 6.7MG/100ML; 213MG/100ML	4	HI; *
NEPHRAMINE INJ 44MEQ/L; 20MG/100ML; 250MG/100ML; 560MG/100ML; 880MG/100ML; 640MG/100ML; 880MG/100ML; 880MG/100ML; 6MEQ/L; 400MG/100ML; 200MG/100ML; 640MG/100ML	3	B/D HI; *
NUTRILIPID INJ 20GM/100ML	3	B/D HI; *
PERIKABIVEN INJ 333MG/100ML; 235MG/100ML; 71MG/100ML; 20MG/100ML; 6.8GM/100ML; 116MG/100ML; 164MG/100ML; 141MG/100ML; 116MG/100ML; 164MG/100ML; 187MG/100ML; 68MG/100ML; 116MG/100ML; 164MG/100ML; 124MG/100ML; 141MG/100ML; 94MG/100ML; 170MG/100ML; 105MG/100ML; 116MG/100ML; 40MG/100ML; 4.8MG/100ML; 152MG/100ML	4	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>plenamine inj 151meq/l; 2170mg/100ml; 1470mg/100ml; 434mg/100ml; 749mg/100ml; 1040mg/100ml; 894mg/100ml; 749mg/100ml; 1040mg/100ml; 1180mg/100ml; 749mg/100ml; 1040mg/100ml; 894mg/100ml; 592mg/100ml; 749mg/100ml; 250mg/100ml; 39mg/100ml; 960mg/100ml</i>	1	B/D HI; *
PREMASOL INJ 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D HI; *
<i>premasol inj 56meq/l; 320mg/100ml; 730mg/100ml; 190mg/100ml; 3meq/l; 20mg/100ml; 300mg/100ml; 220mg/100ml; 290mg/100ml; 490mg/100ml; 840mg/100ml; 490mg/100ml; 200mg/100ml; 290mg/100ml; 410mg/100ml; 230mg/100ml; 5meq/l; 15mg/100ml; 250mg/100ml; 120mg/100ml; 140mg/100ml; 470mg/100ml</i>	1	B/D HI; *
PROCALAMINE INJ 47MEQ/L; 210MG/100ML; 290MG/100ML; 3MEQ/L; 41MEQ/L; 20MG/100ML; 420MG/100ML; 85MG/100ML; 210MG/100ML; 270MG/100ML; 220MG/100ML; 5MEQ/L; 160MG/100ML; 170MG/100ML; 7MMOLE/L; 24MEQ/L; 340MG/100ML; 180MG/100ML; 35MEQ/L; 120MG/100ML; 46MG/100ML; 200MG/100ML	3	HI; *
PROSOL INJ 2.76GM/100ML; 1.96GM/100ML; 600MG/100ML; 1.02GM/100ML; 2.06GM/100ML; 1.18GM/100ML; 1.08GM/100ML; 1.08GM/100ML; 1.35GM/100ML; 760MG/100ML; 1GM/100ML; 1.34GM/100ML; 1.02GM/100ML; 980MG/100ML; 320MG/100ML; 50MG/100ML; 1.44GM/100ML	3	B/D HI; *
SMOFLIPID INJ 3%; 6%; 5%; 6%	4	HI
TRAVASOL INJ 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D HI; *
TROPHAMINE INJ 0; 0.32GM/100ML; 0.73GM/100ML; 0.19GM/100ML; 0.014GM/100ML; 0.22GM/100ML; 0.29GM/100ML; 0.49GM/100ML; 0.3GM/100ML; 0.84GM/100ML; 0.49GM/100ML; 0.2GM/100ML; 0.29GM/100ML; 0.41GM/100ML; 0.23GM/100ML; 0.05GM/100ML; 0.015GM/100ML; 0.25GM/100ML; 0.12GM/100ML; 0.14GM/100ML; 0.47GM/100ML	3	B/D HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
TROPHAMINE INJ 97MEQ/L; 0.54GM/100ML; 1.2GM/100ML; 0.32GM/100ML; 0; 0; 0.5GM/100ML; 0.36GM/100ML; 0.48GM/100ML; 0.82GM/100ML; 1.4GM/100ML; 1.2GM/100ML; 0.34GM/100ML; 0.48GM/100ML; 0.68GM/100ML; 0.38GM/100ML; 5MEQ/L; 0.025GM/100ML; 0.42GM/100ML; 0.2GM/100ML; 0.24GM/100ML; 0.78GM/100ML	3	B/D HI; *
<b>Diuretics</b>		
<i>amiloride hcl tabs 5mg</i>	1	
<i>amiloride/hydrochlorothiazide tabs 5mg; 50mg</i>	1	
<i>bumetanide inj 0.25mg/ml</i>	1	HI
<i>bumetanide tabs 0.5mg</i>	1	
<i>bumetanide tabs 1mg</i>	1	
<i>bumetanide tabs 2mg</i>	1	
CALCIUM GLUCONATE/DEXTROSE INJ 1GM/100ML; 5%	4	HI
CALCIUM GLUCONATE/DEXTROSE INJ 1GM/50ML; 5%	4	HI
CALCIUM GLUCONATE/DEXTROSE INJ 2GM/100ML; 5%	4	HI
CALCIUM GLUCONATE/DEXTROSE INJ 4GM/250ML; 5%	4	HI
CALCIUM GLUCONATE/SODIUM CHLORIDE INJ 1GM/100ML; 0.9%	4	HI
CALCIUM GLUCONATE/SODIUM CHLORIDE INJ 1GM/50ML; 0.9%	4	HI
CALCIUM GLUCONATE/SODIUM CHLORIDE INJ 2GM/100ML; 0.9%	4	HI
CALCIUM GLUCONATE/SODIUM CHLORIDE INJ 2GM/50ML; 0.9%	4	HI
CALCIUM GLUCONATE/SODIUM CHLORIDE INJ 2GM/50ML; 0.9%	4	HI
CALCIUM GLUCONATE/SODIUM CHLORIDE INJ 3GM/100ML; 0.9%	4	HI
<i>chlorothiazide sodium inj 500mg</i>	1	HI; *
<i>chlorothiazide tabs 250mg</i>	1	
<i>chlorothiazide tabs 500mg</i>	1	
<i>chlorthalidone tabs 25mg</i>	1	
<i>chlorthalidone tabs 50mg</i>	1	
DEMADEX TABS 10MG	4	
DEMADEX TABS 20MG	4	
DEMADEX TABS 5MG	4	
DEXTROSE 10%/NACL 0.225% INJ 10%; 0.225%	4	HI
DIURIL SUSP 250MG/5ML	3	
DYAZIDE CAPS 25MG; 37.5MG	4	
DYRENIUM CAPS 0; 100MG	3	
DYRENIUM CAPS 50MG	3	
EDECIN TABS 25MG	4	
<i>ethacrynate sodium inj 50mg</i>	2	HI; *

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>ethacrynic acid tabs 25mg</i>	2	
FUROSEMIDE/SODIUM CHLORIDE INJ 100MG/100ML; 0.9%	4	HI
<i>furosemide inj 10mg/ml</i>	1	HI
<i>furosemide inj 10mg/ml</i>	1	HI
<i>furosemide soln 10mg/ml</i>	1	
<i>furosemide soln 8mg/ml</i>	1	
<i>furosemide tabs 20mg</i>	1	
<i>furosemide tabs 40mg</i>	1	
<i>furosemide tabs 80mg</i>	1	
HEXTEND INJ 5MEQ/L; 124MEQ/L; 99MG/100ML; 6%; 28MEQ/L; 0.9MEQ/L; 3MEQ/L; 143MEQ/L	4	HI
<i>hydrochlorothiazide caps 12.5mg</i>	2	
<i>hydrochlorothiazide tabs 12.5mg</i>	1	
<i>hydrochlorothiazide tabs 25mg</i>	1	
<i>hydrochlorothiazide tabs 50mg</i>	1	
HYDROMORPHONE HCL/SODIUM CHLORIDE INJ 30MG/30ML; 0.9%	4	HI
HYDROMORPHONE HCL/SODIUM CHLORIDE INJ 55MG/55ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 0.4MG/2ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 0.5MG/ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 10MG/25ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 10MG/50ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 12.5MG/25ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 12MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 12MG/60ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 15MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 15MG/50ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 1MG/5ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 1MG/ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 2.5MG/25ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 20MG/50ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 250MG/250ML; 0.9%	4	HI

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Drug Name	Drug Tier	Requirements/Limits
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 25MG/25ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 25MG/50ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 2MG/10ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 3MG/30ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 50MG/50ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 5MG/25ML; 0.9%	4	HI
HYDROMORPHONE HYDROCHLORIDE/SODIUM CHLORIDE INJ 6MG/30ML; 0.9%	4	HI
<i>indapamide tabs 1.25mg</i>	1	
<i>indapamide tabs 2.5mg</i>	1	
JYNARQUE TBPK 0	5	
JYNARQUE TBPK 0	5	
JYNARQUE TBPK 0	5	
LASIX TABS 20MG	4	
LASIX TABS 40MG	4	
LASIX TABS 80MG	4	
LMD 10% DEXTROSE 5% INJ 10%; 5%	4	HI
LMD 10% SODIUM CHLORIDE 0.9% INJ 10%; 0.9%	4	HI
MANGANESE TRACE METAL INJ 0.1MG/ML	4	HI
<i>mannitol inj 20%</i>	2	HI
<i>mannitol inj 25%</i>	2	HI
MAXZIDE-25 TABS 25MG; 37.5MG	4	
MAXZIDE TABS 50MG; 75MG	4	
<i>methyclothiazide tabs 5mg</i>	1	
<i>metolazone tabs 10mg</i>	1	
<i>metolazone tabs 2.5mg</i>	1	
<i>metolazone tabs 5mg</i>	1	
MICROZIDE CAPS 12.5MG	4	
MORPHINE SULFATE INJ 25MG/ML	4	HI
MORPHINE SULFATE INJ 50MG/ML	4	HI
NEUT INJ 4%	4	HI
OSMITROL VIAFLEX INJ 10%	4	HI
OSMITROL VIAFLEX INJ 15%	4	HI
<i>osmitrol viaflex inj 20%</i>	2	HI
OSMITROL VIAFLEX INJ 5%	4	HI
SAMSCA TABS 15MG	5	
SAMSCA TABS 30MG	5	
SODIUM DIURIL INJ 500MG	4	HI; *
SODIUM EDECRIN INJ 50MG	4	HI; *
<i>toremide tabs 100mg</i>	1	
<i>toremide tabs 10mg</i>	1	
<i>toremide tabs 20mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>toremide tabs 5mg</i>	1	
<i>triamterene/hydrochlorothiazide caps 25mg; 37.5mg</i>	1	
<i>triamterene/hydrochlorothiazide caps 25mg; 50mg</i>	1	
<i>triamterene/hydrochlorothiazide tabs 25mg; 37.5mg</i>	1	
<i>triamterene/hydrochlorothiazide tabs 50mg; 75mg</i>	1	
ZINC SULFATE INJ 5MG/ML	4	HI
ZINC TRACE METAL INJ 1MG/ML	4	HI
<b><i>Electrolytic, Caloric, and Water Balance Agents Misc</i></b>		
CRYSVITA INJ 10MG/ML	5	
CRYSVITA INJ 20MG/ML	5	
CRYSVITA INJ 30MG/ML	5	
<b><i>Ion-removing Agents</i></b>		
AURYXIA TABS 210MG	4	PA
FOSRENOL CHEW 1000MG	5	
FOSRENOL CHEW 500MG	5	
FOSRENOL CHEW 750MG	5	
FOSRENOL PACK 1000MG	5	
FOSRENOL PACK 750MG	5	
KAYEXALATE POWD 0	4	
<i>kionex powd 0</i>	1	
<i>kionex susp 15gm/60ml</i>	1	
<i>lanthanum carbonate chew 1000mg</i>	2	
<i>lanthanum carbonate chew 500mg</i>	2	
<i>lanthanum carbonate chew 750mg</i>	2	
LOKELMA PACK 10GM	4	
LOKELMA PACK 5GM	4	
RENAGEL TABS 400MG	3	
RENAGEL TABS 800MG	3	
REVELA PACK 0.8GM	3	
REVELA PACK 2.4GM	3	
REVELA TABS 800MG	3	
<i>sevelamer carbonate pack 0.8gm</i>	1	
<i>sevelamer carbonate pack 2.4gm</i>	1	
<i>sevelamer carbonate tabs 800mg</i>	1	
<i>sodium polystyrene sulfonate powd 0</i>	1	
<i>sodium polystyrene sulfonate susp 15gm/60ml</i>	1	
<i>sodium polystyrene sulfonate susp 30gm/120ml</i>	2	
<i>sps susp 15gm/60ml</i>	1	
VELPHORO CHEW 500MG	5	
VELTASSA PACK 16.8GM	4	
VELTASSA PACK 25.2GM	4	
VELTASSA PACK 8.4GM	4	
<b><i>Irrigating Solutions</i></b>		
<i>acetic acid 0.25% soln 0.25%</i>	1	
LACTATED RINGERS IRRIGATION SOLN 3MEQ/L; 109MEQ/L; 28MEQ/L; 4MEQ/L; 130MEQ/L	4	

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Drug Name	Drug Tier	Requirements/Limits
PHYSIOLYTE SOLN 27MEQ/1000ML; 98MEQ/1000ML; 23MEQ/1000ML; 3MEQ/1000ML; 5MEQ/1000ML; 140MEQ/1000ML	4	
PHYSIOSOL IRRIGATION SOLN 30MG/100ML; 37MG/100ML; 222MG/100ML; 526MG/100ML; 502MG/100ML	4	
RENACIDIN SOLN 6.602GM/100ML; 0.198GM/100ML; 3.177GM/100ML	3	*
ringers irrigation soln 4.5meq/l; 156meq/l; 4meq/l; 147meq/l	1	
sodium chloride 0.9% soln 0.9%	1	
sodium chloride 0.9% soln 0.9%	1	
sterile water irrigation plastic bottle soln 0	1	
sterile water irrigation soln 0	1	
tis-u-sol soln 4.5meq/l; 156meq/l; 4meq/l; 147meq/l	1	
<b>Replacement Preparations</b>		
av-phos 250 neutral tabs 155mg; 852mg; 130mg	1	
calcium acetate caps 667mg	1	
calcium acetate tabs 667mg	1	
calcium chloride inj 10%	2	HI
calcium gluconate inj 10%	2	HI
dextrose 10%/nacl 0.45% inj 10%; 0.45%	1	HI; *
dextrose 5%/electrolyte #48 viaflex inj 24meq/l; 5%; 23meq/l; 3meq/l; 3meq/l; 20meq/l; 25meq/l	1	HI; *
dextrose 10%/nacl 0.2% inj 10%; 0.2%	1	HI; *
dextrose 2.5%/nacl 0.45% inj 2.5%; 0.45%	1	HI; *
dextrose 5%/lactated ringers inj 2.7meq/l; 109meq/l; 5%; 28meq/l; 4meq/l; 130meq/l	1	HI; *
dextrose 5%/nacl 0.2% inj 5%; 0.2%	1	HI; *
dextrose 5%/nacl 0.225% inj 5%; 0.225%	1	HI; *
dextrose 5%/nacl 0.3% inj 5%; 0.3%	1	HI; *
dextrose 5%/nacl 0.33% inj 5%; 0.33%	1	HI; *
dextrose 5%/nacl 0.45% inj 5%; 0.45%	1	HI; *
dextrose 5%/nacl 0.9% inj 5%; 0.9%	1	HI; *
dextrose 50% inj 50%	1	HI
ELIPHOS TABS 667MG	4	
hetastarch 6%/nacl inj 6%; 0.9%	2	HI
IONOSOL-B/DEXTROSE 5% INJ 49MEQ/L; 5%; 25MEQ/L; 5MEQ/L; 13MEQ/L; 25MEQ/L; 57MEQ/L	3	HI; *
IONOSOL-MB/DEXTROSE 5% INJ 22MEQ/L; 5%; 23MEQ/L; 3MEQ/L; 3MEQ/L; 20MEQ/L; 25MEQ/L	3	HI; *
ISOLYTE-P/DEXTROSE 5% INJ 23MEQ/L; 23MEQ/L; 5%; 3 3MEQ/L; 3MEQ/L; 20MEQ/L; 25MEQ/L	3	HI; *
ISOLYTE-S PH 7.4 INJ 27MEQ/1000ML; 98MEQ/1000ML; 23MEQ/1000ML; 3MEQ/1000ML; 1MEQ/1000ML; 5MEQ/1000ML; 141MEQ/1000ML	3	HI; *
ISOLYTE-S INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 3 5MEQ/L; 140MEQ/L	3	HI; *
K-PHOS NEUTRAL TABS 155MG; 852MG; 130MG	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>k-tab tbc</i> 10meq	1	
<i>k-tab tbc</i> 20meq	1	
<i>k-tab tbc</i> 8meq	1	
<i>kcl</i> 0.075%/d5w/nacl 0.45% inj 5%; 10meq/l; 0.45%	1	HI; *
<i>kcl</i> 0.15%/d5w/nacl 0.2% inj 5%; 20meq/l; 0.2%	1	HI; *
<i>kcl</i> 0.15%/d5w/nacl 0.225% inj 5%; 20meq/l; 0.225%	1	HI; *
<i>kcl</i> 0.15%/d5w/nacl 0.45% inj 5%; 20meq/l; 0.45%	1	HI; *
<i>kcl</i> 0.15%/d5w/nacl 0.9% inj 5%; 20meq/l; 0.9%	1	HI; *
<i>kcl</i> 0.3%/d5w/nacl 0.45% inj 5%; 40meq/l; 0.45%	1	HI; *
<i>kcl</i> 0.3%/d5w/nacl 0.9% inj 5%; 40meq/l; 0.9%	1	HI; *
<i>klor-con</i> 10 tbc 10meq	1	
<i>klor-con</i> 8 tbc 8meq	1	
<i>klor-con m10 tbc</i> 10meq	1	
<i>klor-con m15 tbc</i> 15meq	2	
<i>klor-con m20 tbc</i> 20meq	1	
<i>klor-con sprinkle cpcr</i> 10meq	2	
<i>klor-con sprinkle cpcr</i> 8meq	2	
<i>klor-con pack</i> 20meq	2	
LACTATED RINGERS VIAFLEX INJ 3MEQ/L; 109MEQ/L; 28MEQ/L; 4MEQ/L; 130MEQ/L	4	HI; *
<i>magnesium sulfate in d5w inj</i> 5%; 1gm/100ml	1	HI; *
MICRO-K CPCR 10MEQ	4	
MICRO-K CPCR 8MEQ	4	
NORMOSOL -R INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	3	HI; *
NORMOSOL-M IN D5W INJ 16MEQ/L; 40MEQ/L; 5%; 3MEQ/L; 13MEQ/L; 40MEQ/L	3	HI; *
NORMOSOL-R IN D5W INJ 27MEQ/L; 98MEQ/L; 5%; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	4	HI; *
NORMOSOL-R INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	3	HI; *
PHOSLYRA SOLN 667MG/5ML	4	
<i>phospha</i> 250 neutral tabs 155mg; 852mg; 130mg	1	
PHOSPHO-TRIN 250 NEUTRAL TABS 155MG; 852MG; 130MG	4	
<i>phosphorous tabs</i> 155mg; 852mg; 130mg	1	
PLASMA-LYTE A INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	3	HI; *
PLASMA-LYTE-148 INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	3	HI; *
PLASMA-LYTE-56/D5W INJ 16MEQ/L; 40MEQ/L; 5%; 3MEQ/L; 13MEQ/L; 40MEQ/L	3	HI; *
<i>potassium acetate inj</i> 2meq/ml	1	HI; *
<i>potassium chloride cr tbc</i> 10meq	1	
<i>potassium chloride cr tbc</i> 10meq	1	
<i>potassium chloride er cpcr</i> 10meq	1	
<i>potassium chloride er cpcr</i> 8meq	1	
<i>potassium chloride er tbc</i> 10meq	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride er tbc</i> 10meq	1	
<i>potassium chloride er tbc</i> 20meq	1	
<i>potassium chloride er tbc</i> 20meq	1	
<i>potassium chloride er tbc</i> 8meq	1	
<i>potassium chloride sr tbc</i> 8meq	1	
<i>potassium chloride/dextrose/lactated ringers inj</i> 3meq/l; 149meq/l; 5%; 28meq/l; 24meq/l; 130meq/l	1	HI; *
<i>potassium chloride/dextrose/lactated ringers inj</i> 3meq/l; 149meq/l; 5%; 28meq/l; 44meq/l; 130meq/l	1	HI; *
<i>potassium chloride/dextrose/sodium chloride inj</i> 5%; 20meq/l; 1 0.33%	1	HI; *
<i>potassium chloride/dextrose/sodium chloride inj</i> 5%; 30meq/l; 1 0.45%	1	HI; *
<i>potassium chloride/dextrose inj</i> 5%; 20meq/l	1	HI; *
<i>potassium chloride/dextrose inj</i> 5%; 40meq/l	1	HI; *
<i>potassium chloride/sodium chloride inj</i> 20meq/l; 0.45%	1	HI; *
<i>potassium chloride/sodium chloride inj</i> 20meq/l; 0.9%	1	HI; *
<i>potassium chloride/sodium chloride inj</i> 40meq/l; 0.9%	1	HI; *
<i>potassium chloride inj</i> 10meq/100ml	1	HI; *
<i>potassium chloride inj</i> 10meq/50ml	1	HI; *
<i>potassium chloride inj</i> 20meq/100ml	1	HI; *
<i>potassium chloride inj</i> 20meq/50ml	1	HI; *
<i>potassium chloride inj</i> 2meq/ml	1	HI; *
<i>potassium chloride inj</i> 2meq/ml	1	HI
<i>potassium chloride inj</i> 40meq/100ml	1	HI; *
<i>potassium chloride pack</i> 20meq	1	
<i>potassium chloride soln</i> 10%	1	
<i>potassium chloride soln</i> 20%	1	
<i>potassium phosphate inj</i> 236mg/ml; 224mg/ml	2	HI
<i>ringers injection inj</i> 4.5meq/l; 156meq/l; 4meq/l; 147meq/l	1	HI; *
<i>sodium chloride 0.45% inj</i> 0.45%	1	HI; *
<i>sodium chloride inj</i> 0.9%	1	HI
<i>sodium chloride inj</i> 0.9%	1	HI; *
<i>sodium chloride inj</i> 2.5meq/ml	1	HI
<i>sodium chloride inj</i> 3%	1	HI; *
<i>sodium chloride inj</i> 4meq/ml	2	HI
<i>sodium chloride inj</i> 5%	1	HI; *
<i>sodium phosphate inj</i> 142mg/ml; 276mg/ml	2	HI
TPN ELECTROLYTES INJ 29.5MEQ/20ML; 4.5MEQ/20ML; 35MEQ/20ML; 5MEQ/20ML; 20MEQ/20ML; 35MEQ/20ML	4	HI; *
<i>virt-phos 250 neutral tabs</i> 155mg; 852mg; 130mg	1	
<b>Uricosuric Agents</b>		
DUZALLO TABS 200MG; 200MG	4	
DUZALLO TABS 300MG; 200MG	4	
<i>probenecid/colchicine tabs</i> 0.5mg; 500mg	1	
<i>probenecid tabs</i> 500mg	1	
ZURAMPIC TABS 200MG	4	

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Drug Name	Drug Tier	Requirements/Limits
<b>Enzymes</b>		
<i>Enzymes</i>		
ADAGEN INJ 250UNIT/ML	3	
ALDURAZYME INJ 2.9MG/5ML	3	HI; *
CEREZYME INJ 400UNIT	5	HI; *
ELAPRASE INJ 6MG/3ML	5	HI; *
ELELYSO INJ 200UNIT	5	HI; *
ELITEK INJ 1.5MG	4	HI; *
ELITEK INJ 7.5MG	4	HI; *
FABRAZYME INJ 35MG	5	HI; *
FABRAZYME INJ 5MG	5	HI; *
KANUMA INJ 20MG/10ML	5	*
LUMIZYME INJ 50MG	5	HI; *
NAGLAZYME INJ 1MG/ML	5	HI; *
PALYNZIQ INJ 10MG/0.5ML	5	PA
PALYNZIQ INJ 2.5MG/0.5ML	5	PA
PALYNZIQ INJ 20MG/ML	5	PA
STRENSIQ INJ 18MG/0.45ML	5	
STRENSIQ INJ 28MG/0.7ML	5	
STRENSIQ INJ 40MG/ML	5	
STRENSIQ INJ 80MG/0.8ML	5	
SUCRAID SOLN 8500UNIT/ML	5	
VIMIZIM INJ 5MG/5ML	5	*
VPRIV INJ 400UNIT	5	HI; *
XIAFLEX INJ 0.9MG	5	*

**Eye, Ear, Nose & Throat Preparations**

*Anti-infectives*

<i>ak-poly-bac oint 500unit/gm; 10000unit/gm</i>	1	
ARESTIN MISC 1MG	4	
AZASITE SOLN 1%	4	
<i>bacitracin/polymyxin b oint 500unit/gm; 10000unit/gm</i>	1	
<i>bacitracin oint 500unit/gm</i>	1	
BESIVANCE SUSP 0.6%	4	
BLEPH-10 SOLN 10%	4	
<i>chlorhexidine gluconate oral rinse soln 0.12%</i>	2	
<i>chlorhexidine gluconate soln 0.12%</i>	2	
CILOXAN OINT 0.3%	3	
CILOXAN SOLN 0.3%	4	
<i>ciprofloxacin hcl soln 0.3%</i>	1	
<i>ciprofloxacin soln 0.2%</i>	2	
<i>erythromycin oint 5mg/gm</i>	1	
FLOXIN OTIC SOLN 0.3%	4	
<i>gatifloxacin soln 0.5%</i>	1	
<i>gentak oint 0.3%</i>	1	
<i>gentamicin sulfate oint 0.3%</i>	1	
<i>gentamicin sulfate soln 0.3%</i>	1	
<i>ilotycin oint 5mg/gm</i>	2	
<i>levofloxacin soln 0.5%</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
MOXEZA SOLN 0.5%	4	
NATACYN SUSP 5%	4	
<i>neo-polycin oint 400unit/gm; 3.5mg/gm; 10000unit/gm</i>	2	
<i>neomycin/bacitracin/polymyxin oint 400unit/gm; 5mg/gm; 10000unit/gm</i>	2	
<i>neomycin/polymyxin/bacitracin zinc oint 400unit/gm; 5mg/gm; 10000unit/gm</i>	2	
<i>neomycin/polymyxin/gramicidin soln 0.025mg/ml; 1.75mg/ml; 10000unit/ml</i>	1	
NEOSPORIN SOLN 0.025MG/ML; 1.75MG/ML; 10000UNIT/ML	4	
OCUFLOX SOLN 0.3%	4	
<i>ofloxacin soln 0.3%</i>	1	
<i>ofloxacin soln 0.3%</i>	1	
OTOVEL SOLN 0.3%; 0.025%	4	
<i>paroex soln 0.12%</i>	2	
<i>perio gard soln 0.12%</i>	2	
<i>polycin oint 500unit/gm; 10000unit/gm</i>	1	
<i>polymyxin b sulfate/trimethoprim sulfate soln 10000unit/ml; 0.1%</i>	1	
POLYTRIM SOLN 10000UNIT/ML; 0.1%	4	
<i>sodium sulfacetamide soln 10%</i>	1	
<i>sulfacetamide sodium oint 10%</i>	1	
<i>sulfacetamide sodium soln 10%</i>	1	
<i>tobramycin sulfate soln 0.3%</i>	1	
TOBREX OINT 0.3%	3	
TOBREX SOLN 0.3%	4	
<i>trifluridine soln 1%</i>	1	
VIGAMOX SOLN 0.5%	3	
VIROPTIC SOLN 1%	4	
ZIRGAN GEL 0.15%	4	
ZYMAXID SOLN 0.5%	4	
<b>Anti-inflammatory Agents</b>		
<i>acetasol hc soln 2%; 1%</i>	2	
ACULAR LS SOLN 0.4%	4	
ACULAR SOLN 0.5%	4	
ACUVAIL SOLN 0.45%	4	
ALREX SUSP 0.2%	4	
BECONASE AQ SUSP 42MCG/SPRAY	4	
BLEPHAMIDE S.O.P. OINT 0.2%; 10%	3	
BLEPHAMIDE SUSP 0.2%; 10%	3	
<i>bromfenac soln 0.09%</i>	2	
BROMSITE SOLN 0.075%	4	
<i>budesonide nasal spray susp 32mcg/act</i>	2	
CIPRO HC SUSP 0.2%; 1%	4	
CIPRODEX SUSP 0.3%; 0.1%	3	
COLY-MYCIN S SUSP 3MG/ML; 10MG/ML; 3.3MG/ML; 0.5MG/ML	4	

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Drug Name	Drug Tier	Requirements/Limits
CORTISPORIN-TC SUSP 3MG/ML; 10MG/ML; 3.3MG/ML; 0.5MG/ML	4	
DERMOTIC OIL 0.01%	4	
<i>dexamethasone sodium phosphate soln 0.1%</i>	1	
<i>diclofenac sodium soln 0.1%</i>	1	
DUREZOL EMUL 0.05%	3	
FLAREX SUSP 0.1%	4	
<i>flunisolide soln 0.025%</i>	1	
<i>fluocinolone acetonide oil 0.01%</i>	2	
<i>fluorometholone susp 0.1%</i>	1	
<i>flurbiprofen sodium soln 0.03%</i>	1	
<i>fluticasone propionate susp 50mcg/act</i>	1	
FML FORTE SUSP 0.25%	3	
FML LIQUIFILM SUSP 0.1%	4	
FML OINT 0.1%	3	
<i>hydrocortisone/acetic acid soln 2%; 1%</i>	2	
ILEVRO SUSP 0.3%	4	
<i>ketorolac tromethamine soln 0.4%</i>	1	
<i>ketorolac tromethamine soln 0.5%</i>	1	
LOTEMAX GEL 0.5%	4	
LOTEMAX OINT 0.5%	4	
LOTEMAX SUSP 0.5%	4	
MAXIDEX SUSP 0.1%	3	
MAXITROL OINT 0.1%; 3.5MG/GM; 10000UNIT/GM	4	
MAXITROL SUSP 0.1%; 3.5MG/ML; 10000UNIT/ML	4	
<i>mometasone furoate susp 50mcg/act</i>	2	
NASONEX SUSP 50MCG/ACT	4	
<i>neo-polycin hc oint 400unit/gm; 1%; 3.5mg/gm; 10000unit/gm</i>	1	
<i>neomycin/polymyxin/bacitracin/hydrocortisone oint 400unit/gm; 1%; 0.5%; 10000unit/gm</i>	1	
<i>neomycin/polymyxin/dexamethasone oint 0.1%; 3.5mg/gm; 10000unit/gm</i>	1	
<i>neomycin/polymyxin/dexamethasone susp 0.1%; 3.5mg/ml; 10000unit/ml</i>	1	
<i>neomycin/polymyxin/hc soln 1%; 3.5mg/ml; 10000unit/ml</i>	1	
<i>neomycin/polymyxin/hydrocortisone soln 1%; 3.5mg/ml; 10000unit/ml</i>	1	
<i>neomycin/polymyxin/hydrocortisone susp 1%; 3.5mg/ml; 10000unit/ml</i>	1	
<i>neomycin/polymyxin/hydrocortisone susp 1%; 3.5mg/ml; 10000unit/ml</i>	1	
NEVANAC SUSP 0.1%	4	
OCUFEN SOLN 0.03%	4	
OMNARIS SUSP 50MCG/ACT	4	
OMNIPRED SUSP 1%	4	
PRED FORTE SUSP 1%	4	
PRED MILD SUSP 0.12%	3	
PRED-G S.O.P. OINT 0.3%; 0.6%	3	

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Drug Name	Drug Tier	Requirements/Limits
PRED-G SUSP 0.3%; 1%	3	
<i>prednisolone acetate susp 1%</i>	1	
<i>prednisolone sodium phosphate soln 1%</i>	1	
PROLENSA SOLN 0.07%	4	
QNASL CHILDRENS AERS 40MCG/ACT	4	
QNASL AERS 80MCG/ACT	4	
RESTASIS EMUL 0.05%	4	
RHINOCORT AQUA SUSP 32MCG/ACT	4	
<i>sulfacetamide sodium/prednisolone sodium phosphate soln 0.23%; 10%</i>	1	
TOBRADEX ST SUSP 0.05%; 0.3%	4	
TOBRADEX OINT 0.1%; 0.3%	3	
TOBRADEX SUSP 0.1%; 0.3%	4	
<i>tobramycin/dexamethasone susp 0.1%; 0.3%</i>	1	
<i>triamcinolone acetate aero 55mcg/act</i>	2	
VERAMYST SUSP 27.5MCG/SPRAY	4	
VEXOL SUSP 1%	3	
XIIDRA SOLN 5%	3	
ZETONNA AERS 37MCG/ACT	4	
ZYLET SUSP 0.5%; 0.3%	4	
<b>Antiallergic Agents</b>		
ALOCRIOL SOLN 2%	4	
ALOMIDE SOLN 0.1%	3	
ASTEPRO SOLN 0.15%	4	
<i>azelastine hcl soln 0.1%</i>	1	
<i>azelastine hcl soln 0.15%</i>	2	
<i>azelastine hcl soln 0.05%</i>	1	
BEPREVE SOLN 1.5%	4	
<i>cromolyn sodium soln 4%</i>	1	
DYMISTA SUSP 137MCG/ACT; 50MCG/ACT	4	
ELESTAT SOLN 0.05%	4	
EMADINE SOLN 0.05%	4	
<i>epinastine hcl soln 0.05%</i>	2	
LASTACAFT SOLN 0.25%	4	
<i>olopatadine hcl soln 0.6%</i>	2	
<i>olopatadine hcl soln 0.1%</i>	1	
PATADAY SOLN 0.2%	4	
PATANASE SOLN 0.6%	4	
PATANOL SOLN 0.1%	4	
PAZEO SOLN 0.7%	4	
<b>Antiglaucoma Agents</b>		
<i>acetazolamide er cp12 500mg</i>	1	
<i>acetazolamide sodium inj 500mg</i>	1	
<i>acetazolamide tabs 125mg</i>	1	
<i>acetazolamide tabs 250mg</i>	1	
ALPHAGAN P SOLN 0.1%	4	
ALPHAGAN P SOLN 0.15%	4	
AZOPT SUSP 1%	3	

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Drug Name	Drug Tier	Requirements/Limits
BETAGAN SOLN 0.5%	4	
<i>betaxolol hcl soln 0.5%</i>	1	
BETIMOL SOLN 0.25%	4	
BETIMOL SOLN 0.5%	4	
BETOPTIC-S SUSP 0.25%	3	
<i>bimatoprost soln 0.03%</i>	2	
<i>brimonidine tartrate soln 0.15%</i>	1	
<i>brimonidine tartrate soln 0.2%</i>	1	
<i>carteolol hcl soln 1%</i>	1	
COMBIGAN SOLN 0.2%; 0.5%	4	
COSOPT PF SOLN 22.3MG/ML; 6.8MG/ML	4	
COSOPT SOLN 22.3MG/ML; 6.8MG/ML	4	
DIAMOX CP12 500MG	4	
<i>dorzolamide hcl/timolol maleate soln 22.3mg/ml; 6.8mg/ml</i>	1	
<i>dorzolamide hcl soln 2%</i>	1	
ISOPTO CARPINE SOLN 1%	4	
ISOPTO CARPINE SOLN 2%	4	
ISOPTO CARPINE SOLN 4%	4	
ISTALOL SOLN 0.5%	4	
<i>latanoprost soln 0.005%</i>	1	
<i>levobunolol hcl soln 0.5%</i>	1	
LUMIGAN SOLN 0.01%	3	
<i>methazolamide tabs 25mg</i>	1	
<i>methazolamide tabs 50mg</i>	1	
<i>metipranolol soln 0.3%</i>	1	
NEPTAZANE TABS 25MG	4	
NEPTAZANE TABS 50MG	4	
PHOSPHOLINE IODIDE SOLR 0.125%	4	
<i>pilocarpine hcl soln 1%</i>	1	
<i>pilocarpine hcl soln 2%</i>	1	
<i>pilocarpine hcl soln 4%</i>	1	
SIMBRINZA SUSP 0.2%; 1%	4	
<i>timolol maleate ophthalmic gel forming solg 0.25%</i>	1	
<i>timolol maleate ophthalmic gel forming solg 0.5%</i>	1	
<i>timolol maleate soln 0.25%</i>	1	
<i>timolol maleate soln 0.5%</i>	1	
<i>timolol maleate soln 0.5%</i>	1	
TIMOPTIC OCUDOSE SOLN 0.25%	4	
TIMOPTIC OCUDOSE SOLN 0.5%	4	
TIMOPTIC-XE SOLG 0.25%	4	
TIMOPTIC-XE SOLG 0.5%	4	
TIMOPTIC SOLN 0.25%	4	
TIMOPTIC SOLN 0.5%	4	
TRAVATAN Z SOLN 0.004%	3	
<i>travoprost soln 0.004%</i>	1	
TRUSOPT SOLN 2%	4	
XALATAN SOLN 0.005%	4	
ZIOPTAN SOLN 0.015MG/ML	4	

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Drug Name	Drug Tier	Requirements/Limits
<b>EENT Drugs, Miscellaneous</b>		
<i>acetic acid/aluminum acetate soln 2%; 0</i>	1	
<i>acetic acid soln 2%</i>	1	
<i>apraclonidine soln 0.5%</i>	2	
CYSTARAN SOLN 0.44%	5	
IOPIDINE SOLN 0.5%	4	
IOPIDINE SOLN 1%	4	
LACRISERT INST 5MG	4	
LUCENTIS SOSY 0.5MG/0.05ML	5	*
<b>Local Anesthetics</b>		
ALCAINE SOLN 0.5%	4	
<i>lidocaine hcl soln 4%</i>	1	
<i>lidocaine viscous soln 2%</i>	1	
<i>proparacaine hcl soln 0.5%</i>	1	
<b>Mydriatics</b>		
<i>atropine sulfate soln 1%</i>	1	
CYCLOGYL SOLN 0.5%	3	
CYCLOGYL SOLN 1%	4	
CYCLOGYL SOLN 2%	4	
<i>cyclopentolate hcl soln 1%</i>	1	
<i>cyclopentolate hcl soln 2%</i>	1	
<i>cyclopentolate hydrochloride soln 0.5%</i>	1	
<b>Vasoconstrictors</b>		
<i>naphazoline hcl soln 0.1%</i>	1	
<i>phenylephrine hcl soln 10%</i>	1	
<i>phenylephrine hcl soln 2.5%</i>	1	
<b>Eye, Ear, Nose + Throat Preparations</b>		
<b>Anti-infectives</b>		
CETRAXAL SOLN 0.2%	4	
<b>Anti-inflammatory Agents</b>		
<i>bromfenac soln 0.09%</i>	2	
<i>prednisolone acetate p-f susp 1%</i>	1	
RESTASIS MULTIDOSE EMUL 0.05%	4	
XHANCE EXHU 93MCG/ACT	4	
<b>Antiallergic Agents</b>		
<i>olopatadine hydrochloride soln 0.2%</i>	2	
<b>Antiglaucoma Agents</b>		
<i>dorzolamide hydrochloride/timolol maleate pf soln 20mg/ml; 5mg/ml</i>	1	
VYZULTA SOLN 0.024%	4	
<b>EENT Drugs, Miscellaneous</b>		
LUCENTIS SOSY 0.3MG/0.05ML	5	
RHOPRESSA SOLN 0.02%	4	
<b>Gastrointestinal Drugs</b>		
<b>Anti-inflammatory Agents</b>		
ALOSETRON HYDROCHLORIDE TABS 0.5MG	5	
ALOSETRON HYDROCHLORIDE TABS 1MG	5	
APRISO CP24 0.375GM	3	

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Drug Name	Drug Tier	Requirements/Limits
ASACOL HD TBEC 800MG	3	
<i>balsalazide disodium caps 750mg</i>	1	
CANASA SUPP 1000MG	3	
COLAZAL CAPS 750MG	4	
DELZICOL CPDR 400MG	4	
DIPENTUM CAPS 250MG	5	
GIAZO TABS 1.1GM	4	
LIALDA TBEC 1.2GM	1	
LOTRONEX TABS 0.5MG	5	
LOTRONEX TABS 1MG	5	
<i>mesalamine dr tbec 1.2gm</i>	1	
<i>mesalamine dr tbec 800mg</i>	1	
<i>mesalamine enem 4gm</i>	1	
<i>mesalamine kit 4gm</i>	1	
PENTASA CPCR 250MG	3	
PENTASA CPCR 500MG	3	
ROWASA KIT 4GM	4	
SFROWASA ENEM 4GM/60ML	4	
<b>Antidiarrhea Agents</b>		
<i>diphenoxylate/atropine liqd 0.025mg/5ml; 2.5mg/5ml</i>	1	
<i>diphenoxylate/atropine tabs 0.025mg; 2.5mg</i>	1	
FULYZAQ TBEC 125MG	4	
LOMOTIL TABS 0.025MG; 2.5MG	4	
<i>loperamide hcl caps 2mg</i>	1	
MOTOFEN TABS 0.025MG; 1MG	4	
MYTESI TBEC 125MG	4	
<i>opium tincture tinc 1%</i>	1	
<i>opium tinc 1%</i>	1	
PAREGORIC TINC 2MG/5ML	4	
XERMELO TABS 250MG	5	
<b>Antiemetics</b>		
AKYNZEO CAPS 300MG; 0.5MG	4	B/D
AKYNZEO INJ 235MG; 0.25MG	4	
ALOXI INJ 0.25MG/5ML	4	*
ANZEMET INJ 20MG/ML	4	*
ANZEMET TABS 100MG	4	B/D
ANZEMET TABS 50MG	4	B/D
<i>aprepitant caps 0</i>	1	B/D
<i>aprepitant caps 125mg</i>	1	B/D
<i>aprepitant caps 40mg</i>	1	B/D
<i>aprepitant caps 80mg</i>	1	B/D
BONJESTA TBCR 20MG; 20MG	4	
CESAMET CAPS 1MG	4	B/D
CINVANTI INJ 130MG/18ML	4	
<i>dimenhydrinate inj 50mg/ml</i>	1	
<i>dronabinol caps 10mg</i>	1	B/D
<i>dronabinol caps 2.5mg</i>	1	B/D
<i>dronabinol caps 5mg</i>	1	B/D

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Drug Name	Drug Tier	Requirements/Limits
EMEND TRIPACK CAPS 0	4	B/D
EMEND CAPS 125MG	4	B/D
EMEND CAPS 40MG	4	B/D
EMEND CAPS 80MG	4	B/D
EMEND INJ 150MG	3	*
EMEND SUSR 125MG	3	B/D
<i>granisetron hcl inj 0.1mg/ml</i>	2	*
<i>granisetron hcl inj 1mg/ml</i>	2	*
<i>granisetron hcl inj 1mg/ml</i>	2	*
<i>granisetron hcl tabs 1mg</i>	2	B/D
MARINOL CAPS 10MG	4	B/D
MARINOL CAPS 2.5MG	4	B/D
MARINOL CAPS 5MG	4	B/D
<i>meclizine hcl tabs 12.5mg</i>	1	
<i>meclizine hcl tabs 25mg</i>	1	
<i>ondansetron hcl inj 40mg/20ml</i>	1	
<i>ondansetron hcl inj 4mg/2ml</i>	1	
<i>ondansetron hcl inj 4mg/2ml</i>	1	
<i>ondansetron hcl soln 4mg/5ml</i>	1	B/D
<i>ondansetron hcl tabs 24mg</i>	1	B/D
<i>ondansetron hcl tabs 4mg</i>	1	B/D
<i>ondansetron hcl tabs 8mg</i>	1	B/D
<i>ondansetron hydrochloride/sodium chloride inj 8mg/50ml; 0.9%</i>	1	
<i>ondansetron odt tbdp 4mg</i>	1	B/D
<i>ondansetron odt tbdp 8mg</i>	1	B/D
<i>palonosetron hydrochloride inj 0.25mg/2ml</i>	2	
<i>palonosetron hydrochloride inj 0.25mg/5ml</i>	2	
PALONOSETRON HYDROCHLORIDE INJ 0.25MG/5ML	4	
SANCUSO PTCH 3.1MG/24HR	4	
<i>scopolamine pt72 1mg/3days</i>	2	
SUSTOL INJ 10MG/0.4ML	4	
SYNDROS SOLN 5MG/ML	4	B/D
TIGAN CAPS 300MG	4	B/D
TIGAN INJ 100MG/ML	4	
TRANSDERM-SCOP PT72 1MG/3DAYS	4	
<i>trimethobenzamide hcl caps 300mg</i>	2	B/D
VARUBI INJ 166.5MG/92.5ML	4	B/D
VARUBI TABS 90MG	4	B/D
ZOFRAN ODT TBDP 4MG	4	B/D
ZOFRAN ODT TBDP 8MG	4	B/D
ZOFRAN SOLN 4MG/5ML	4	B/D
ZOFRAN TABS 4MG	4	B/D
ZOFRAN TABS 8MG	4	B/D
ZUPLENZ FILM 4MG	4	B/D
ZUPLENZ FILM 8MG	4	B/D
<b><i>Antiulcer Agents and Acid Suppressants</i></b>		
ACIPHEX SPRINKLE CPSP 10MG	4	

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Drug Name	Drug Tier	Requirements/Limits
ACIPHEX SPRINKLE CPSP 5MG	4	
ACIPHEX TBEC 20MG	4	
CARAFATE SUSP 1GM/10ML	3	
CARAFATE TABS 1GM	4	
<i>cimetidine hcl soln 300mg/5ml</i>	1	
<i>cimetidine tabs 200mg</i>	1	
<i>cimetidine tabs 300mg</i>	1	
<i>cimetidine tabs 400mg</i>	1	
<i>cimetidine tabs 800mg</i>	1	
CYTOTEC TABS 100MCG	4	
CYTOTEC TABS 200MCG	4	
DEXILANT CPDR 30MG	4	
DEXILANT CPDR 60MG	4	
<i>esomeprazole magnesium cpdr 20mg</i>	2	
<i>esomeprazole magnesium cpdr 40mg</i>	2	
<i>esomeprazole sodium inj 20mg</i>	2	HI; *
<i>esomeprazole sodium inj 40mg</i>	2	HI; *
<i>esomeprazole strontium cpdr 24.65mg</i>	2	
<i>esomeprazole strontium cpdr 49.3mg</i>	2	
<i>famotidine premixed inj 0.4mg/ml; 0.9%</i>	1	HI; *
<i>famotidine inj 200mg/20ml</i>	1	HI
<i>famotidine inj 20mg/2ml</i>	1	HI; *
<i>famotidine inj 40mg/4ml</i>	1	HI
<i>famotidine susr 40mg/5ml</i>	1	
<i>famotidine tabs 20mg</i>	1	
<i>famotidine tabs 40mg</i>	1	
<i>lansoprazole/amoxicillin/clarithromycin misc 500mg; 500mg; 30mg</i>	2	
<i>lansoprazole cpdr 15mg</i>	1	
<i>lansoprazole cpdr 30mg</i>	1	
<i>lansoprazole tbdp 15mg</i>	2	
<i>lansoprazole tbdp 30mg</i>	2	
<i>misoprostol tabs 100mcg</i>	1	
<i>misoprostol tabs 200mcg</i>	1	
NEXIUM I.V. INJ 40MG	4	HI; *
NEXIUM CPDR 20MG	4	
NEXIUM CPDR 40MG	4	
NEXIUM PACK 10MG	4	
NEXIUM PACK 2.5MG	4	
NEXIUM PACK 20MG	4	
NEXIUM PACK 40MG	4	
NEXIUM PACK 5MG	4	
<i>nizatidine caps 150mg</i>	2	
<i>nizatidine caps 300mg</i>	2	
<i>nizatidine soln 15mg/ml</i>	2	
OMECLAMOX-PAK MISC 500MG; 500MG; 20MG	4	
<i>omeprazole/sodium bicarbonate caps 20mg; 1100mg</i>	2	
<i>omeprazole/sodium bicarbonate caps 40mg; 1100mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>omeprazole/sodium bicarbonate pack 20mg; 1680mg</i>	2	
<i>omeprazole/sodium bicarbonate pack 40mg; 1680mg</i>	2	
<i>omeprazole cpdr 10mg</i>	1	
<i>omeprazole cpdr 20mg</i>	1	
<i>omeprazole cpdr 40mg</i>	1	
<i>pantoprazole sodium inj 40mg</i>	1	HI; *
<i>pantoprazole sodium tbec 20mg</i>	1	
<i>pantoprazole sodium tbec 40mg</i>	1	
PEPCID SUSR 40MG/5ML	4	
PEPCID TABS 20MG	4	
PEPCID TABS 40MG	4	
PREVACID SOLUTAB TBDP 15MG	4	
PREVACID SOLUTAB TBDP 30MG	4	
PREVACID CPDR 15MG	4	
PREVACID CPDR 30MG	4	
PREVPAC MISC 500MG; 500MG; 30MG	4	
PRILOSEC PACK 10MG	4	
PRILOSEC PACK 2.5MG	4	
PROTONIX INJ 40MG	4	HI; *
PROTONIX PACK 40MG	4	
PROTONIX TBEC 20MG	4	
PROTONIX TBEC 40MG	4	
PYLERA CAPS 140MG; 125MG; 125MG	3	
<i>rabeprazole sodium tbec 20mg</i>	2	
<i>ranitidine hcl caps 150mg</i>	1	
<i>ranitidine hcl caps 300mg</i>	1	
<i>ranitidine hcl inj 150mg/6ml</i>	1	HI
<i>ranitidine hcl inj 50mg/2ml</i>	1	HI
<i>ranitidine hcl syrp 75mg/5ml</i>	1	
<i>ranitidine hcl tabs 150mg</i>	1	
<i>ranitidine hcl tabs 300mg</i>	1	
<i>sucralfate tabs 1gm</i>	1	
ZANTAC INJ 25MG/ML	4	HI
ZANTAC INJ 25MG/ML	4	HI
ZANTAC INJ 50MG/2ML	4	HI
ZANTAC TABS 150MG	4	
ZANTAC TABS 300MG	4	
ZEGERID CAPS 20MG; 1100MG	4	
ZEGERID CAPS 40MG; 1100MG	4	
ZEGERID PACK 20MG; 1680MG	4	
ZEGERID PACK 40MG; 1680MG	4	
<b>Cathartics and Laxatives</b>		
CLENPIQ SOLN 12GM/160ML; 3.5GM/160ML; 10MG/160ML	4	
COLYTE-FLAVOR PACKS SOLR 240GM; 2.98GM; 6.72GM; 5.84GM; 22.72GM	4	
<i>gavilyte-c solr 240gm; 2.98gm; 6.72gm; 5.84gm; 22.72gm</i>	1	
<i>gavilyte-g solr 236gm; 2.97gm; 6.74gm; 5.86gm; 22.74gm</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>gavilyte-h kit 5mg; 210gm; 0.74gm; 2.86gm; 5.6gm</i>	2	
<i>gavilyte-n/flavor pack solr 420gm; 1.48gm; 5.72gm; 11.2gm</i>	1	
GOLYTELY SOLR 227.1GM; 2.82GM; 6.36GM; 5.53GM; 21.5GM	4	
GOLYTELY SOLR 236GM; 2.97GM; 6.74GM; 5.86GM; 22.74GM	4	
MOVIPREP SOLR 4.7GM; 100GM; 1.015GM; 5.9GM; 2.691GM; 7.5GM	4	
NULYTELY/FLAVOR PACKS SOLR 420GM; 1.48GM; 5.72GM; 11.2GM	4	
OSMOPREP TABS 0.398GM; 1.102GM	3	
<i>peg 3350/electrolytes solr 240gm; 2.98gm; 6.72gm; 5.84gm; 22.72gm</i>	1	
<i>peg-3350/electrolytes solr 236gm; 2.97gm; 6.74gm; 5.86gm; 22.74gm</i>	1	
<i>peg-3350/nacl/na bicarbonate/kcl solr 420gm; 1.48gm; 5.72gm; 11.2gm</i>	1	
PLENVU SOLR 7.54GM; 140GM; 2.2GM; 48.11GM; 5.2GM; 9GM	4	
<i>polyethylene glycol 3350 pack 0</i>	1	
<i>polyethylene glycol 3350 powd 0</i>	1	
PREPOPIK PACK 12GM; 3.5GM; 10MG	4	
SUPREP BOWEL PREP KIT SOLN 1.6GM/177ML; 3.13GM/177ML; 17.5GM/177ML	4	
<i>trilyte solr 420gm; 1.48gm; 5.72gm; 11.2gm</i>	1	
<b>Cholelitholytic Agents</b>		
ACTIGALL CAPS 300MG	4	
CHENODAL TABS 250MG	5	
URSO 250 TABS 250MG	4	
URSO FORTE TABS 500MG	4	
<i>ursodiol caps 300mg</i>	1	
<i>ursodiol tabs 250mg</i>	1	
<i>ursodiol tabs 500mg</i>	1	
<b>Digestants</b>		
CREON CPEP 120000UNIT; 24000UNIT; 76000UNIT	3	
CREON CPEP 15000UNIT; 3000UNIT; 9500UNIT	3	
CREON CPEP 180000UNIT; 36000UNIT; 114000UNIT	3	
CREON CPEP 30000UNIT; 6000UNIT; 19000UNIT	3	
CREON CPEP 60000UNIT; 12000UNIT; 38000UNIT	3	
FLOLIPID SUSP 20MG/5ML	4	
FLOLIPID SUSP 40MG/5ML	4	
PANCREAZE CPEP 10850UNIT; 2600UNIT; 6200UNIT	4	
PANCREAZE CPEP 24600UNIT; 4200UNIT; 14200UNIT	4	
PANCREAZE CPEP 61500UNIT; 10500UNIT; 35500UNIT	4	
PANCREAZE CPEP 83900UNIT; 21000UNIT; 54700UNIT	4	
PANCREAZE CPEP 98400UNIT; 16800UNIT; 56800UNIT	4	
PERTZYE CPEP 15125UNIT; 4000UNIT; 14375UNIT	4	
PERTZYE CPEP 30250UNIT; 8000UNIT; 28750UNIT	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
PERTZYE CPEP 60500UNIT; 16000UNIT; 57500UNIT	4	
PERTZYE CPEP 90750UNIT; 24000UNIT; 86250UNIT	4	
ULTRESA CPEP 27600UNIT; 13800UNIT; 27600UNIT	4	
ULTRESA CPEP 41400UNIT; 20700UNIT; 41400UNIT	4	
ULTRESA CPEP 46000UNIT; 23000UNIT; 46000UNIT	4	
VIOKACE TABS 39150UNIT; 10440UNIT; 39150UNIT	4	
VIOKACE TABS 78300UNIT; 20880UNIT; 78300UNIT	4	
ZENPEP CPEP 105000UNIT; 25000UNIT; 79000UNIT	3	
ZENPEP CPEP 14000UNIT; 3000UNIT; 10000UNIT	3	
ZENPEP CPEP 168000UNIT; 40000UNIT; 126000UNIT	3	
ZENPEP CPEP 24000UNIT; 5000UNIT; 17000UNIT	3	
ZENPEP CPEP 42000UNIT; 10000UNIT; 32000UNIT	3	
ZENPEP CPEP 63000UNIT; 15000UNIT; 47000UNIT	3	
ZENPEP CPEP 84000UNIT; 20000UNIT; 63000UNIT	3	
<b>GI Drugs, Miscellaneous</b>		
AMITIZA CAPS 24MCG	4	
AMITIZA CAPS 8MCG	4	
CHOLBAM CAPS 250MG	5	
CHOLBAM CAPS 50MG	5	
ENTYVIO INJ 300MG	5	*
GATTEX INJ 5MG	5	QL (30 EA per 30 days) PA
LINZESS CAPS 145MCG	3	
LINZESS CAPS 290MCG	3	
LINZESS CAPS 72MCG	3	
MOVANTIK TABS 12.5MG	4	
MOVANTIK TABS 25MG	4	
NUTRESTORE PACK 5GM	4	
OCALIVA TABS 10MG	5	
OCALIVA TABS 5MG	5	
RELISTOR INJ 12MG/0.6ML	4	
RELISTOR INJ 12MG/0.6ML	4	
RELISTOR INJ 8MG/0.4ML	4	
RELISTOR TABS 150MG	4	
STELARA INJ 130MG/26ML	5	PA
SYMPROIC TABS 0.2MG	4	
TRULANCE TABS 3MG	4	
VIBERZI TABS 100MG	5	
VIBERZI TABS 75MG	5	
<b>Prokinetic Agents</b>		
<i>metoclopramide hcl inj 5mg/ml</i>	2	
<i>metoclopramide hcl soln 5mg/5ml</i>	1	
<i>metoclopramide hcl tabs 10mg</i>	1	
<i>metoclopramide hcl tabs 5mg</i>	1	
<i>metoclopramide odt tbdp 10mg</i>	2	
<i>metoclopramide odt tbdp 5mg</i>	2	
METOSOLV ODT TBDP 5MG	4	
REGLAN TABS 10MG	4	
REGLAN TABS 5MG	4	

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Drug Name	Drug Tier	Requirements/Limits
<b>Gold Compounds</b>		
<i>Gold Compounds</i>		
RIDAURA CAPS 3MG	5	
<b>Heavy Metal Antagonists</b>		
<i>Heavy Metal Antagonists</i>		
CHEMET CAPS 100MG	4	
CUPRIMINE CAPS 250MG	5	
<i>deferoxamine mesylate inj 2gm</i>	1	B/D HI
<i>deferoxamine mesylate inj 500mg</i>	1	B/D HI
DEPEN TITRATABS TABS 250MG	5	
DESFERAL INJ 500MG	4	B/D HI
EXJADE TBSO 125MG	5	
EXJADE TBSO 250MG	5	
EXJADE TBSO 500MG	5	
FERRIPROX SOLN 100MG/ML	5	
FERRIPROX TABS 500MG	5	
JADENU SPRINKLE PACK 180MG	5	
JADENU SPRINKLE PACK 360MG	5	
JADENU SPRINKLE PACK 90MG	5	
JADENU TABS 180MG	5	
JADENU TABS 360MG	5	
JADENU TABS 90MG	5	
SYPRINE CAPS 250MG	5	
<i>trientine hydrochloride caps 250mg</i>	5	
<b>Hormones and Synthetic Substitutes</b>		
<i>Adrenals</i>		
A-METHAPRED INJ 40MG	4	B/D HI
AEROSPAN AERS 80MCG/ACT	4	
AIRDUO RESPICLICK 113/14 AEPB 113MCG/ACT; 14MCG/ACT	4	
AIRDUO RESPICLICK 232/14 AEPB 232MCG/ACT; 14MCG/ACT	4	
AIRDUO RESPICLICK 55/14 AEPB 55MCG/ACT; 14MCG/ACT	4	
ALVESCO AERS 160MCG/ACT	3	
ALVESCO AERS 80MCG/ACT	3	
ARMONAIR RESPICLICK 113 AEPB 113MCG/ACT	4	
ARMONAIR RESPICLICK 232 AEPB 232MCG/ACT	4	
ARMONAIR RESPICLICK 55 AEPB 55MCG/ACT	4	
ARNUITY ELLIPTA AEPB 100MCG/ACT	4	
ARNUITY ELLIPTA AEPB 200MCG/ACT	4	
ARNUITY ELLIPTA AEPB 50MCG/ACT	4	
ASMANEX HFA AERO 100MCG/ACT	3	
ASMANEX HFA AERO 200MCG/ACT	3	
ASMANEX TWISTHALER 120 METERED DOSES AEPB 220MCG/INH	4	
ASMANEX TWISTHALER 14 METERED DOSES AEPB 220MCG/INH	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
ASMANEX TWISTHALER 30 METERED DOSES AEPB 110MCG/INH	4	
ASMANEX TWISTHALER 30 METERED DOSES AEPB 220MCG/INH	4	
ASMANEX TWISTHALER 60 METERED DOSES AEPB 220MCG/INH	4	
ASMANEX TWISTHALER 7 METERED DOSES AEPB 110MCG/INH	4	
<i>betamethasone sodium phosphate/betamethasone acetate inj 3mg/ml; 3mg/ml</i>	1	B/D HI
BREO ELLIPTA AEPB 100MCG/INH; 25MCG/INH	4	
BREO ELLIPTA AEPB 200MCG/INH; 25MCG/INH	4	
<i>budesonide er tb24 9mg</i>	5	
<i>budesonide cpep 3mg</i>	2	
<i>budesonide susp 0.25mg/2ml</i>	1	B/D
<i>budesonide susp 0.5mg/2ml</i>	1	B/D
<i>budesonide susp 1mg/2ml</i>	1	B/D
CELESTONE-SOLUSPAN INJ 3MG/ML; 3MG/ML	4	B/D HI
CORTEF TABS 10MG	4	B/D
CORTEF TABS 20MG	4	B/D
CORTEF TABS 5MG	4	B/D
<i>cortisone acetate tabs 25mg</i>	1	B/D
<i>deltasone tabs 20mg</i>	1	
DEPO-MEDROL INJ 20MG/ML	3	B/D
DEPO-MEDROL INJ 40MG/ML	4	B/D
DEPO-MEDROL INJ 80MG/ML	4	B/D
<i>dexamethasone 10-day dose pack tbpk 1.5mg</i>	2	B/D
<i>dexamethasone 13-day dose pack tbpk 1.5mg</i>	2	
<i>dexamethasone 6-day dose pack tbpk 1.5mg</i>	2	B/D
DEXAMETHASONE INTENSOL CONC 1MG/ML	3	
<i>dexamethasone sodium phosphate inj 100mg/10ml</i>	1	B/D
<i>dexamethasone sodium phosphate inj 10mg/ml</i>	1	B/D
<i>dexamethasone sodium phosphate inj 10mg/ml</i>	1	B/D HI
<i>dexamethasone sodium phosphate inj 120mg/30ml</i>	1	B/D HI
<i>dexamethasone sodium phosphate inj 4mg/ml</i>	1	B/D HI
<i>dexamethasone elix 0.5mg/5ml</i>	1	B/D
<i>dexamethasone soln 0.5mg/5ml</i>	1	B/D
<i>dexamethasone tabs 0.5mg</i>	1	B/D
<i>dexamethasone tabs 0.75mg</i>	1	B/D
<i>dexamethasone tabs 1.5mg</i>	1	B/D
<i>dexamethasone tabs 1mg</i>	1	B/D
<i>dexamethasone tabs 2mg</i>	1	B/D
<i>dexamethasone tabs 4mg</i>	1	B/D
<i>dexamethasone tabs 6mg</i>	1	B/D
DEXONTO 0.4% SOLN 20MG/5ML	4	
DEXTAK 10 DAY TBPK 1.5MG	4	B/D
DEXTAK 13 DAY TBPK 1.5MG	4	
DEXTAK 6 DAY TBPK 1.5MG	4	B/D

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Drug Name	Drug Tier	Requirements/Limits
DULERA AERO 5MCG/ACT; 100MCG/ACT	4	
DULERA AERO 5MCG/ACT; 200MCG/ACT	4	
EMFLAZA SUSP 22.75MG/ML	5	
EMFLAZA TABS 18MG	5	
EMFLAZA TABS 30MG	5	
EMFLAZA TABS 36MG	5	
EMFLAZA TABS 6MG	5	
ENTOCORT EC CPEP 3MG	5	
FLOVENT DISKUS AEPB 100MCG/BLIST	4	
FLOVENT DISKUS AEPB 250MCG/BLIST	4	
FLOVENT DISKUS AEPB 50MCG/BLIST	3	
FLOVENT HFA AERO 110MCG/ACT	3	
FLOVENT HFA AERO 220MCG/ACT	3	
FLOVENT HFA AERO 44MCG/ACT	3	
<i>fludrocortisone acetate tabs 0.1mg</i>	1	
<i>fluticasone propionate/salmeterol aepb 113mcg/act; 14mcg/act</i>	4	
<i>fluticasone propionate/salmeterol aepb 232mcg/act; 14mcg/act</i>	4	
<i>fluticasone propionate/salmeterol aepb 55mcg/act; 14mcg/act</i>	4	
<i>hydrocortisone tabs 10mg</i>	1	B/D
<i>hydrocortisone tabs 20mg</i>	1	B/D
<i>hydrocortisone tabs 5mg</i>	1	B/D
INTRAROSA INST 6.5MG	4	PA
KENALOG-10 INJ 10MG/ML	4	
KENALOG-40 INJ 40MG/ML	4	
MEDROL DOSEPAK TBPK 4MG	4	B/D
MEDROL TABS 16MG	4	B/D
MEDROL TABS 2MG	3	B/D
MEDROL TABS 32MG	4	B/D
MEDROL TABS 4MG	4	B/D
MEDROL TABS 8MG	4	B/D
<i>methylprednisolone acetate inj 40mg/ml</i>	1	B/D
METHYLPREDNISOLONE ACETATE INJ 50MG/ML	4	B/D
<i>methylprednisolone acetate inj 80mg/ml</i>	1	B/D
<i>methylprednisolone dose pack tbpk 4mg</i>	1	B/D
<i>methylprednisolone sodiumsuccinate inj 1000mg</i>	1	B/D HI
<i>methylprednisolone sodiumsuccinate inj 125mg</i>	1	B/D HI
<i>methylprednisolone sodiumsuccinate inj 40mg</i>	1	B/D HI
<i>methylprednisolone tabs 16mg</i>	1	B/D
<i>methylprednisolone tabs 32mg</i>	1	B/D
<i>methylprednisolone tabs 4mg</i>	1	B/D
<i>methylprednisolone tabs 8mg</i>	1	B/D
MILLIPRED DP TBPK 5MG	4	B/D
MILLIPRED DP TBPK 5MG	4	B/D
MILLIPRED SOLN 10MG/5ML	4	B/D
MILLIPRED TABS 5MG	4	B/D
ORAPRED ODT TBDP 10MG	4	B/D

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Drug Name	Drug Tier	Requirements/Limits
ORAPRED ODT TBDP 15MG	4	B/D
ORAPRED ODT TBDP 30MG	4	B/D
PEDIAPRED SOLN 6.7MG/5ML	4	B/D
<i>prednisolone sodium phosphate odt tbdp 10mg</i>	2	B/D
<i>prednisolone sodium phosphate odt tbdp 15mg</i>	2	B/D
<i>prednisolone sodium phosphate odt tbdp 30mg</i>	2	B/D
<i>prednisolone sodium phosphate soln 10mg/5ml</i>	2	B/D
<i>prednisolone sodium phosphate soln 15mg/5ml</i>	1	B/D
<i>prednisolone sodium phosphate soln 20mg/5ml</i>	2	B/D
<i>prednisolone sodium phosphate soln 25mg/5ml</i>	1	B/D
<i>prednisolone sodium phosphate soln 5mg/5ml</i>	1	B/D
<i>prednisolone soln 15mg/5ml</i>	1	B/D
PREDNISONE INTENSOL CONC 5MG/ML	4	
<i>prednisone soln 5mg/5ml</i>	1	
<i>prednisone tabs 10mg</i>	1	
<i>prednisone tabs 1mg</i>	1	
<i>prednisone tabs 2.5mg</i>	1	
<i>prednisone tabs 20mg</i>	1	
<i>prednisone tabs 50mg</i>	1	
<i>prednisone tabs 5mg</i>	1	
<i>prednisone tbpk 10mg</i>	1	
<i>prednisone tbpk 10mg</i>	1	
<i>prednisone tbpk 5mg</i>	1	
<i>prednisone tbpk 5mg</i>	1	
PULMICORT FLEXHALER AEPB 180MCG/ACT	4	
PULMICORT FLEXHALER AEPB 90MCG/ACT	4	
PULMICORT SUSP 0.25MG/2ML	4	B/D
PULMICORT SUSP 0.5MG/2ML	4	B/D
PULMICORT SUSP 1MG/2ML	3	B/D
QVAR REDIHALER AERB 40MCG/ACT	3	
QVAR REDIHALER AERB 80MCG/ACT	3	
QVAR AERS 40MCG/ACT	3	
QVAR AERS 80MCG/ACT	3	
RAYOS TBEC 1MG	4	
RAYOS TBEC 2MG	4	
RAYOS TBEC 5MG	4	
SOLU-CORTEF INJ 1000MG	3	B/D HI
SOLU-CORTEF INJ 100MG	3	B/D HI
SOLU-CORTEF INJ 250MG	3	B/D HI
SOLU-CORTEF INJ 500MG	3	B/D HI
SOLU-MEDROL INJ 1000MG	4	B/D HI
SOLU-MEDROL INJ 125MG	4	B/D HI
SOLU-MEDROL INJ 2GM	4	B/D HI
SOLU-MEDROL INJ 40MG	4	B/D HI
SOLU-MEDROL INJ 500MG	4	B/D HI
SYMBICORT AERO 160MCG/ACT; 4.5MCG/ACT	4	
SYMBICORT AERO 80MCG/ACT; 4.5MCG/ACT	4	
TAPERDEX 12-DAY TBPK 1.5MG	4	B/D

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Drug Name	Drug Tier	Requirements/Limits
TAPERDEX 6-DAY TBPk 1.5MG	4	B/D
TRELEGY ELLIPTA AEPB 100MCG/INH; 62.5MCG/INH; 25MCG/INH	4	
<i>triamcinolone acetonide inj 40mg/ml</i>	2	
UCERIS TB24 9MG	5	
VERIPRED 20 SOLN 20MG/5ML	4	B/D
ZILRETTA INJ 32MG	4	
ZODEX 12-DAY TBPk 1.5MG	4	B/D
ZODEX 6-DAY TBPk 1.5MG	4	B/D
ZONACORT 11 DAY TBPk 1.5MG	4	B/D
ZONACORT 7 DAY TBPk 1.5MG	4	B/D
<b>Androgens</b>		
ANADROL-50 TABS 50MG	5	
ANDRODERM PT24 2MG/24HR	4	
ANDRODERM PT24 4MG/24HR	4	
ANDROGEL PUMP GEL 1.62%	4	
ANDROGEL GEL 20.25MG/1.25GM	4	
ANDROGEL GEL 25MG/2.5GM	4	
ANDROGEL GEL 40.5MG/2.5GM	4	
ANDROGEL GEL 50MG/5GM	4	
ANDROID CAPS 10MG	5	
<i>androxy tabs 10mg</i>	2	
AVEED INJ 750MG/3ML	4	*
AXIRON SOLN 30MG/ACT	4	
<i>danazol caps 100mg</i>	1	
<i>danazol caps 200mg</i>	1	
<i>danazol caps 50mg</i>	1	
<i>depo-testosterone inj 100mg/ml</i>	1	
<i>depo-testosterone inj 200mg/ml</i>	1	
FORTESTA GEL 10MG/ACT	4	
<i>glycopyrrolate inj 0.2mg/ml</i>	1	
<i>glycopyrrolate inj 0.4mg/2ml</i>	1	
METHITEST TABS 10MG	4	
<i>methyltestosterone caps 10mg</i>	2	
NATESTO GEL 5.5MG/ACT	4	
<i>oxandrolone tabs 10mg</i>	1	
<i>oxandrolone tabs 2.5mg</i>	1	
STRIANT MISC 30MG	4	
TESTIM GEL 1%	4	
<i>testosterone cypionate inj 100mg/ml</i>	1	
<i>testosterone cypionate inj 200mg/ml</i>	1	
<i>testosterone enanthate inj 200mg/ml</i>	1	
<i>testosterone pump gel 1%</i>	1	
<i>testosterone topical solution soln 30mg/act</i>	1	
<i>testosterone gel 10mg/act</i>	2	
<i>testosterone gel 25mg/2.5gm</i>	1	
<i>testosterone gel 50mg/5gm</i>	1	
<i>testosterone soln 30mg/act</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
TESTRED CAPS 10MG	5	
VOGELXO PUMP GEL 1%	4	
VOGELXO GEL 50MG/5GM	4	
<b>Antidiabetic Agents</b>		
<i>acarbose tabs 100mg</i>	1	
<i>acarbose tabs 25mg</i>	1	
<i>acarbose tabs 50mg</i>	1	
ACTOPLUS MET XR TB24 1000MG; 15MG	4	
ACTOPLUS MET XR TB24 1000MG; 30MG	4	
ACTOPLUS MET TABS 500MG; 15MG	4	
ACTOPLUS MET TABS 850MG; 15MG	4	
ACTOS TABS 15MG	4	
ACTOS TABS 30MG	4	
ACTOS TABS 45MG	4	
ADLYXIN STARTER PACK INJ 0	4	
ADLYXIN INJ 20MCG/0.2ML	4	
ADMELOG SOLOSTAR INJ 100UNIT/ML	4	
ADMELOG INJ 100UNIT/ML	4	
AFREZZA POWD 0	4	
AFREZZA POWD 0	4	
AFREZZA POWD 0	4	
AFREZZA POWD 0	4	
AFREZZA POWD 0	4	
AFREZZA POWD 12UNIT	4	
AFREZZA POWD 4UNIT	4	
AFREZZA POWD 8UNIT	4	
ALOGLIPTIN/METFORMIN HCL TABS 12.5MG; 1000MG	4	ST
ALOGLIPTIN/METFORMIN HCL TABS 12.5MG; 500MG	4	ST
ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG; 15MG	4	ST
ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG; 30MG	4	ST
ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG; 45MG	4	ST
ALOGLIPTIN/PIOGLITAZONE TABS 25MG; 15MG	4	ST
ALOGLIPTIN/PIOGLITAZONE TABS 25MG; 30MG	4	ST
ALOGLIPTIN/PIOGLITAZONE TABS 25MG; 45MG	4	ST
ALOGLIPTIN TABS 12.5MG	4	ST
ALOGLIPTIN TABS 25MG	4	ST
ALOGLIPTIN TABS 6.25MG	4	ST
AMARYL TABS 1MG	4	
AMARYL TABS 2MG	4	
AMARYL TABS 4MG	4	
APIDRA SOLOSTAR INJ 100UNIT/ML	4	
APIDRA INJ 100UNIT/ML	4	
AVANDIA TABS 2MG	4	
AVANDIA TABS 4MG	4	
BASAGLAR KWIKPEN INJ 100UNIT/ML	4	
BYDUREON BCISE INJ 2MG/0.85ML	4	
BYDUREON PEN INJ 2MG	4	
BYDUREON INJ 2MG	4	

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Drug Name	Drug Tier	Requirements/Limits
BYETTA INJ 10MCG/0.04ML	4	
BYETTA INJ 5MCG/0.02ML	4	
<i>chlorpropamide tabs 100mg</i>	2	
<i>chlorpropamide tabs 250mg</i>	2	
CYCLOSET TABS 0.8MG	4	
DIABETA TABS 1.25MG	4	ST
DIABETA TABS 2.5MG	4	ST
DIABETA TABS 5MG	4	ST
DUETACT TABS 2MG; 30MG	4	
DUETACT TABS 4MG; 30MG	4	
FARXIGA TABS 10MG	4	ST
FARXIGA TABS 5MG	4	ST
FIASP FLEXTOUCH INJ 100UNIT/ML	4	
FIASP INJ 100UNIT/ML	4	
FORTAMET TB24 1000MG	4	
FORTAMET TB24 500MG	4	
<i>glimepiride tabs 1mg</i>	1	
<i>glimepiride tabs 2mg</i>	1	
<i>glimepiride tabs 4mg</i>	1	
<i>glipizide er tb24 10mg</i>	1	
<i>glipizide er tb24 2.5mg</i>	1	
<i>glipizide er tb24 5mg</i>	1	
<i>glipizide xl tb24 10mg</i>	1	
<i>glipizide xl tb24 2.5mg</i>	1	
<i>glipizide xl tb24 5mg</i>	1	
<i>glipizide/metformin hcl tabs 2.5mg; 250mg</i>	2	
<i>glipizide/metformin hcl tabs 2.5mg; 500mg</i>	2	
<i>glipizide/metformin hcl tabs 5mg; 500mg</i>	2	
<i>glipizide tabs 10mg</i>	1	
<i>glipizide tabs 5mg</i>	1	
GLUCOPHAGE XR TB24 500MG	4	
GLUCOPHAGE XR TB24 750MG	4	
GLUCOPHAGE TABS 1000MG	4	
GLUCOPHAGE TABS 500MG	4	
GLUCOPHAGE TABS 850MG	4	
GLUCOTROL XL TB24 10MG	4	
GLUCOTROL XL TB24 2.5MG	4	
GLUCOTROL XL TB24 5MG	4	
GLUCOTROL TABS 10MG	4	
GLUCOTROL TABS 5MG	4	
GLUCOVANCE TABS 2.5MG; 500MG	4	ST
GLUCOVANCE TABS 5MG; 500MG	4	ST
GLUMETZA TB24 1000MG	4	
GLUMETZA TB24 500MG	4	
<i>glyburide micronized tabs 1.5mg</i>	2	ST
<i>glyburide micronized tabs 3mg</i>	2	ST
<i>glyburide micronized tabs 6mg</i>	2	ST
<i>glyburide/metformin hcl tabs 1.25mg; 250mg</i>	2	ST

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>glyburide/metformin hcl tabs 2.5mg; 500mg</i>	2	ST
<i>glyburide/metformin hcl tabs 5mg; 500mg</i>	2	ST
<i>glyburide tabs 1.25mg</i>	2	ST
<i>glyburide tabs 2.5mg</i>	2	ST
<i>glyburide tabs 5mg</i>	2	ST
GLYNASE TABS 1.5MG	4	ST
GLYNASE TABS 3MG	4	ST
GLYNASE TABS 6MG	4	ST
GLYSET TABS 100MG	4	
GLYSET TABS 25MG	4	
GLYSET TABS 50MG	4	
GLYXAMBI TABS 10MG; 5MG	4	
GLYXAMBI TABS 25MG; 5MG	4	
HUMALOG JUNIOR KWIKPEN INJ 100UNIT/ML	4	
HUMALOG KWIKPEN INJ 100UNIT/ML	3	
HUMALOG KWIKPEN INJ 200UNIT/ML	4	
HUMALOG MIX 50/50 KWIKPEN INJ 50UNIT/ML; 50UNIT/ML	4	
HUMALOG MIX 50/50 INJ 50UNIT/ML; 50UNIT/ML	4	
HUMALOG MIX 75/25 KWIKPEN INJ 25UNIT/ML; 75UNIT/ML	4	
HUMALOG MIX 75/25 INJ 25UNIT/ML; 75UNIT/ML	4	
HUMALOG INJ 100UNIT/ML	3	
HUMALOG INJ 100UNIT/ML	3	
<i>humulin 70/30 kwikpen inj 30unit/ml; 70unit/ml</i>	1	
<i>humulin 70/30 inj 30unit/ml; 70unit/ml</i>	1	
<i>humulin n kwikpen inj 100unit/ml</i>	1	
<i>humulin n inj 100unit/ml</i>	1	
<i>humulin r u-500 (concentrated) inj 500unit/ml</i>	1	
<i>humulin r u-500 kwikpen inj 500unit/ml</i>	1	
<i>humulin r inj 100unit/ml</i>	1	
INVOKAMET XR TB24 150MG; 1000MG	4	ST
INVOKAMET XR TB24 150MG; 500MG	4	ST
INVOKAMET XR TB24 50MG; 1000MG	4	ST
INVOKAMET XR TB24 50MG; 500MG	4	ST
INVOKAMET TABS 150MG; 1000MG	4	ST
INVOKAMET TABS 150MG; 500MG	4	ST
INVOKAMET TABS 50MG; 1000MG	4	ST
INVOKAMET TABS 50MG; 500MG	4	ST
INVOKANA TABS 100MG	4	ST
INVOKANA TABS 300MG	4	ST
JANUMET XR TB24 1000MG; 100MG	4	ST
JANUMET XR TB24 1000MG; 50MG	4	ST
JANUMET XR TB24 500MG; 50MG	4	ST
JANUMET TABS 1000MG; 50MG	4	ST
JANUMET TABS 500MG; 50MG	4	ST
JANUVIA TABS 100MG	4	ST
JANUVIA TABS 25MG	4	ST

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
JANUVIA TABS 50MG	4	ST
JARDIANCE TABS 10MG	3	
JARDIANCE TABS 25MG	3	
JENTADUETO XR TB24 2.5MG; 1000MG	4	
JENTADUETO XR TB24 5MG; 1000MG	4	
JENTADUETO TABS 2.5MG; 1000MG	4	
JENTADUETO TABS 2.5MG; 500MG	4	
JENTADUETO TABS 2.5MG; 850MG	4	
KAZANO TABS 12.5MG; 1000MG	4	ST
KAZANO TABS 12.5MG; 500MG	4	ST
KOMBIGLYZE XR TB24 1000MG; 2.5MG	4	ST
KOMBIGLYZE XR TB24 1000MG; 5MG	4	ST
KOMBIGLYZE XR TB24 500MG; 5MG	4	ST
KORLYM TABS 300MG	5	QL (120 EA per 30 days) PA
LANTUS SOLOSTAR INJ 100UNIT/ML	3	
LANTUS INJ 100UNIT/ML	3	
LEVEMIR FLEXTOUCH INJ 100UNIT/ML	3	
LEVEMIR INJ 100UNIT/ML	3	
<i>metformin hcl er tb24 (osm)1000mg</i>	2	
<i>metformin hcl er tb24 (mod)1000mg</i>	2	
<i>metformin hcl er tb24 500mg</i>	1	
<i>metformin hcl er tb24 (osm) 500mg</i>	2	
<i>metformin hcl er tb24 (mod) 500mg</i>	2	
<i>metformin hcl er tb24 750mg</i>	1	
<i>metformin hcl tabs 1000mg</i>	1	
<i>metformin hcl tabs 850mg</i>	1	
<i>metformin hydrochloride tabs 500mg</i>	1	
<i>miglitol tabs 100mg</i>	2	
<i>miglitol tabs 25mg</i>	2	
<i>miglitol tabs 50mg</i>	2	
<i>nateglinide tabs 120mg</i>	2	
<i>nateglinide tabs 60mg</i>	2	
NESINA TABS 12.5MG	4	ST
NESINA TABS 25MG	4	ST
NESINA TABS 6.25MG	4	ST
NOVOLIN 70/30 RELION INJ 30UNIT/ML; 70UNIT/ML	4	
NOVOLIN 70/30 INJ 30UNIT/ML; 70UNIT/ML	4	
NOVOLIN N RELION INJ 100UNIT/ML	4	
NOVOLIN N INJ 100UNIT/ML	4	
NOVOLIN R RELION INJ 100UNIT/ML	4	
NOVOLIN R INJ 100UNIT/ML	4	
NOVOLOG FLEXPEN INJ 100UNIT/ML	4	
NOVOLOG MIX 70/30 PREFILLED FLEXPEN IFIRNJ 30UNIT/ML; 70UNIT/ML	4	
NOVOLOG MIX 70/30 INJ 30UNIT/ML; 70UNIT/ML	4	
NOVOLOG PENFILL INJ 100UNIT/ML	4	
NOVOLOG INJ 100UNIT/ML	4	
ONGLYZA TABS 2.5MG	4	ST

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Drug Name	Drug Tier	Requirements/Limits
ONGLYZA TABS 5MG	4	ST
OSENI TABS 12.5MG; 15MG	4	ST
OSENI TABS 12.5MG; 30MG	4	ST
OSENI TABS 12.5MG; 45MG	4	ST
OSENI TABS 25MG; 15MG	4	ST
OSENI TABS 25MG; 30MG	4	ST
OSENI TABS 25MG; 45MG	4	ST
OZEMPIC INJ 2MG/1.5ML	4	
OZEMPIC INJ 2MG/1.5ML	4	
<i>pioglitazone hcl-glimepiride tabs 2mg; 30mg</i>	2	
<i>pioglitazone hcl-glimepiride tabs 4mg; 30mg</i>	2	
<i>pioglitazone hcl/metformin hcl tabs 500mg; 15mg</i>	2	
<i>pioglitazone hcl/metformin hcl tabs 850mg; 15mg</i>	2	
<i>pioglitazone hcl tabs 15mg</i>	2	
<i>pioglitazone hcl tabs 30mg</i>	2	
<i>pioglitazone hcl tabs 45mg</i>	2	
PRANDIMET TABS 500MG; 1MG	4	
PRANDIMET TABS 500MG; 2MG	4	
PRANDIN TABS 0.5MG	4	
PRANDIN TABS 1MG	4	
PRANDIN TABS 2MG	4	
PRECOSE TABS 100MG	4	
PRECOSE TABS 25MG	4	
PRECOSE TABS 50MG	4	
QTERN TABS 10MG; 5MG	4	ST
<i>repaglinide/metformin hydrochloride tabs 500mg; 1mg</i>	2	
<i>repaglinide/metformin hydrochloride tabs 500mg; 2mg</i>	2	
<i>repaglinide tabs 0.5mg</i>	2	
<i>repaglinide tabs 1mg</i>	2	
<i>repaglinide tabs 2mg</i>	2	
RIOMET SOLN 500MG/5ML	4	
SEGLUROMET TABS 2.5MG; 1000MG	4	ST
SEGLUROMET TABS 2.5MG; 500MG	4	ST
SEGLUROMET TABS 7.5MG; 1000MG	4	ST
SEGLUROMET TABS 7.5MG; 500MG	4	ST
SOLIQUA 100/33 INJ 100UNIT/ML; 33MCG/ML	4	
STARLIX TABS 120MG	4	
STARLIX TABS 60MG	4	
STEGLATRO TABS 15MG	4	ST
STEGLATRO TABS 5MG	4	ST
STEGLUJAN TABS 15MG; 100MG	4	ST
STEGLUJAN TABS 5MG; 100MG	4	ST
SYMLINPEN 120 INJ 2700MCG/2.7ML	4	
SYMLINPEN 60 INJ 1500MCG/1.5ML	4	
SYNJARDY XR TB24 10MG; 1000MG	4	
SYNJARDY XR TB24 12.5MG; 1000MG	4	
SYNJARDY XR TB24 25MG; 1000MG	4	
SYNJARDY XR TB24 5MG; 1000MG	4	

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Drug Name	Drug Tier	Requirements/Limits
SYNJARDY TABS 12.5MG; 1000MG	4	
SYNJARDY TABS 12.5MG; 500MG	4	
SYNJARDY TABS 5MG; 1000MG	4	
SYNJARDY TABS 5MG; 500MG	4	
TANZEUM INJ 30MG	4	
TANZEUM INJ 50MG	4	
<i>tolazamide tabs 250mg</i>	1	
<i>tolazamide tabs 500mg</i>	1	
<i>tolbutamide tabs 500mg</i>	1	
TOUJEO MAX SOLOSTAR INJ 300UNIT/ML	4	
TOUJEO SOLOSTAR INJ 300UNIT/ML	4	
TRADJENTA TABS 5MG	4	
TRESIBA FLEXTOUCH INJ 100UNIT/ML	4	
TRESIBA FLEXTOUCH INJ 200UNIT/ML	4	
TRULICITY INJ 0.75MG/0.5ML	4	
TRULICITY INJ 1.5MG/0.5ML	4	
VICTOZA INJ 18MG/3ML	4	
XIGDUO XR TB24 10MG; 1000MG	4	ST
XIGDUO XR TB24 10MG; 500MG	4	ST
XIGDUO XR TB24 2.5MG; 1000MG	4	ST
XIGDUO XR TB24 5MG; 1000MG	4	ST
XIGDUO XR TB24 5MG; 500MG	4	ST
XULTOPHY 100/3.6 INJ 100UNIT/ML; 3.6MG/ML	4	
<b>Antihypoglycemic Agents</b>		
GLUCAGEN HYPOKIT INJ 1MG	3	
GLUCAGON EMERGENCY KIT INJ 1MG	3	
PROGLYCEM SUSP 50MG/ML	3	
<b>Contraceptives</b>		
<i>altavera tabs 30mcg; 0.15mg</i>	1	
<i>alyacen 1/35 tabs 35mcg; 1mg</i>	1	
<i>alyacen 7/7/7 tabs 0; 0</i>	1	
<i>amethia lo tabs 0; 0</i>	2	
<i>amethia tabs 0; 0</i>	2	
<i>amethyst tabs 20mcg; 90mcg</i>	2	
<i>apri tabs 0.15mg; 30mcg</i>	1	
<i>aranelle tabs 0; 0</i>	1	
<i>ashlyna tabs 0; 0</i>	2	
<i>aubra tabs 20mcg; 0.1mg</i>	1	
<i>aviane tabs 20mcg; 0.1mg</i>	1	
<i>azurette tabs 0; 0</i>	1	
BALCOLTRA TABS 20MCG; 36.5MG; 0.1MG	4	
<i>balziva tabs 35mcg; 0.4mg</i>	1	
<i>bekyree tabs 0; 0</i>	1	
BEYAZ TABS 3MG; 0.02MG; 0.451MG	4	
<i>blisovi 24 fe tabs 20mcg; 75mg; 1mg</i>	2	
<i>blisovi fe 1.5/30 tabs 30mcg; 75mg; 1.5mg</i>	1	
<i>blisovi fe 1/20 tabs 20mcg; 75mg; 1mg</i>	2	
BREVICON-28 TABS 35MCG; 0.5MG	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>briellyn tabs 35mcg; 0.4mg</i>	1	
<i>camila tabs 0.35mg</i>	1	
<i>camrese lo tabs 0; 0</i>	2	
<i>camrese tabs 0; 0</i>	2	
<i>caziant tabs 0; 0</i>	1	
<i>chateal tabs 0.03mg; 0.15mg</i>	1	
<i>cryselle-28 tabs 30mcg; 0.3mg</i>	1	
<i>cyclafem 1/35 tabs 35mcg; 1mg</i>	1	
<i>cyclafem 7/7/7 tabs 0; 0</i>	1	
CYCLESSA TABS 0; 0	4	
<i>cyred tabs 0.15mg; 30mcg</i>	1	
<i>dasetta 1/35 tabs 35mcg; 1mg</i>	1	
<i>dasetta 7/7/7 tabs 0; 0</i>	1	
<i>daysee tabs 0; 0</i>	2	
<i>deblitane tabs 0.35mg</i>	1	
<i>delyla tabs 20mcg; 0.1mg</i>	1	
DESOGEN TABS 0.15MG; 30MCG	4	
<i>desogestrel/ethinyl estradiol tabs 0.15mg; 30mcg</i>	1	
<i>desogestrel/ethinyl estradiol tabs 0; 0</i>	1	
<i>drospirenone/ethinyl estradiol/levomefolate calcium tabs 3mg; 2 0.02mg; 0.451mg</i>	2	
<i>drospirenone/ethinyl estradiol/levomefolate calcium tabs 3mg; 2 0.03mg; 0.451mg</i>	2	
<i>drospirenone/ethinyl estradiol tabs 3mg; 0.02mg</i>	2	
<i>drospirenone/ethinyl estradiol tabs 3mg; 0.03mg</i>	2	
<i>elinest tabs 30mcg; 0.3mg</i>	1	
ELLA TABS 30MG	3	
<i>emoquette tabs 0.15mg; 30mcg</i>	1	
<i>enpresse-28 tabs 0; 0</i>	1	
<i>enskyce tabs 0.15mg; 0.03mg</i>	1	
<i>errin tabs 0.35mg</i>	1	
<i>estarylla tabs 35mcg; 0.25mg</i>	1	
ESTROSTEP FE TABS 0; 75MG; 1MG	4	
<i>ethynodiol diacetate/ethinyl estradiol tabs 35mcg; 1mg</i>	1	
<i>ethynodiol diacetate/ethinyl estradiol tabs 50mcg; 1mg</i>	1	
<i>falmina tabs 20mcg; 0.1mg</i>	1	
<i>fayosim tabs 0; 0</i>	2	
FEMCON FE CHEW 35MCG; 0; 0.4MG	4	
<i>femynor tabs 35mcg; 0.25mg</i>	1	
GENERESS FE CHEW 25MCG; 75MG; 0.8MG	4	
<i>gianvi tabs 3mg; 0.02mg</i>	2	
<i>gildagia tabs 35mcg; 0.4mg</i>	1	
<i>gildagia tabs 35mcg; 0.4mg</i>	1	
<i>gildess 1.5/30 tabs 30mcg; 1.5mg</i>	1	
<i>gildess 1/20 tabs 20mcg; 1mg</i>	1	
<i>gildess 24 fe tabs 20mcg; 75mg; 1mg</i>	2	
<i>gildess fe 1.5/30 tabs 30mcg; 75mg; 1.5mg</i>	1	
<i>gildess fe 1/20 tabs 20mcg; 75mg; 1mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>heather tabs 0.35mg</i>	1	
<i>incassia tabs 0.35mg</i>	1	
<i>introvale tabs 0.03mg; 0.15mg</i>	2	
<i>isibloom tabs 0.15mg; 30mcg</i>	1	
<i>jencycla tabs 0.35mg</i>	1	
<i>jolessa tabs 0.03mg; 0.15mg</i>	2	
<i>jolivette tabs 0.35mg</i>	1	
<i>juleber tabs 0.15mg; 30mcg</i>	1	
<i>junel 1.5/30 tabs 30mcg; 1.5mg</i>	1	
<i>junel 1/20 tabs 20mcg; 1mg</i>	1	
<i>junel fe 1.5/30 tabs 30mcg; 75mg; 1.5mg</i>	1	
<i>junel fe 1/20 tabs 20mcg; 75mg; 1mg</i>	2	
<i>junel fe 24 tabs 20mcg; 75mg; 1mg</i>	2	
<i>kaitlib fe chew 25mcg; 75mg; 0.8mg</i>	2	
<i>kariva tabs 0; 0</i>	1	
<i>kelnor 1/35 tabs 35mcg; 1mg</i>	1	
<i>kelnor 1/50 tabs 50mcg; 1mg</i>	2	
<i>kimidess tabs 0; 0</i>	1	
<i>kurvelo tabs 0.03mg; 0.15mg</i>	1	
<b>KYLEENA IUD 19.5MG</b>	4	
<i>larin 1.5/30 tabs 30mcg; 1.5mg</i>	1	
<i>larin 1/20 tabs 20mcg; 1mg</i>	1	
<i>larin 24 fe tabs 20mcg; 75mg; 1mg</i>	2	
<i>larin fe 1.5/30 tabs 30mcg; 75mg; 1.5mg</i>	1	
<i>larin fe 1/20 tabs 20mcg; 75mg; 1mg</i>	2	
<i>larissia tabs 20mcg; 0.1mg</i>	1	
<b>LAYOLIS FE CHEW 25MCG; 75MG; 0.8MG</b>	4	
<i>leena tabs 0; 0</i>	1	
<i>lessina tabs 20mcg; 0.1mg</i>	1	
<i>levonest tabs 0; 0</i>	1	
<i>levonorgestrel and ethinyl estradiol tabs 0; 0</i>	2	
<i>levonorgestrel and ethinyl estradiol tabs 20mcg; 90mcg</i>	2	
<i>levonorgestrel/ethinyl estradiol tabs 0.03mg; 0.15mg</i>	1	
<i>levonorgestrel/ethinyl estradiol tabs 0.03mg; 0.15mg</i>	2	
<i>levonorgestrel/ethinyl estradiol tabs 0; 0</i>	2	
<i>levonorgestrel/ethinyl estradiol tabs 0; 0</i>	1	
<i>levonorgestrel/ethinyl estradiol tabs 0; 0</i>	2	
<i>levonorgestrel/ethinyl estradiol tabs 20mcg; 0.1mg</i>	1	
<i>levora 0.15/30-28 tabs 0.03mg; 0.15mg</i>	1	
<b>LILETTA IUD 19.5MCG/DAY</b>	4	
<i>lillow tabs 30mcg; 0.15mg</i>	1	
<b>LO LOESTRIN FE TABS 10MCG; 75MG; 1MG</b>	4	
<b>LOESTRIN 1.5/30-21 TABS 30MCG; 1.5MG</b>	4	
<b>LOESTRIN 1/20-21 TABS 20MCG; 1MG</b>	4	
<b>LOESTRIN FE 1.5/30 TABS 30MCG; 75MG; 1.5MG</b>	4	
<b>LOESTRIN FE 1/20 TABS 20MCG; 75MG; 1MG</b>	4	
<i>lomedica 24 fe tabs 20mcg; 75mg; 1mg</i>	2	
<i>loryna tabs 3mg; 0.02mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
LOSEASONIQUE TABS 0; 0	4	
<i>low-ogestrel tabs 30mcg; 0.3mg</i>	1	
<i>lutra tabs 20mcg; 0.1mg</i>	1	
<i>lyza tabs 0.35mg</i>	1	
<i>marlissa tabs 0.03mg; 0.15mg</i>	1	
<i>melodetta 24 fe chew 20mcg; 75mg; 1mg</i>	2	
<i>mibelas 24 fe chew 20mcg; 75mg; 1mg</i>	2	
<i>microgestin 1.5/30 tabs 30mcg; 1.5mg</i>	1	
<i>microgestin 1/20 tabs 20mcg; 1mg</i>	1	
<i>microgestin 24 fe tabs 20mcg; 75mg; 1mg</i>	2	
<i>microgestin fe 1.5/30 tabs 30mcg; 75mg; 1.5mg</i>	1	
<i>microgestin fe tabs 20mcg; 75mg; 1mg</i>	2	
<i>mili tabs 35mcg; 0.25mg</i>	1	
MINASTRIN 24 FE CHEW 20MCG; 75MG; 1MG	4	
MIRCETTE TABS 0; 0	4	
MIRENA IUD 20MCG/24HR	4	
MODICON TABS 35MCG; 0.5MG	4	
<i>mono-linyah tabs 35mcg; 0.25mg</i>	1	
<i>mononessa tabs 35mcg; 0.25mg</i>	1	
<i>myzilra tabs 0; 0</i>	1	
NATAZIA TABS 0; 0	4	
<i>necon 0.5/35-28 tabs 35mcg; 0.5mg</i>	1	
<i>necon 1/35 tabs 35mcg; 1mg</i>	1	
<i>necon 1/50-28 tabs 50mcg; 1mg</i>	1	
<i>necon 10/11-28 tabs 35mcg; 0</i>	1	
<i>necon 7/7/7 tabs 0; 0</i>	1	
NEXPLANON INJ 68MG	4	
<i>nikki tabs 3mg; 0.02mg</i>	2	
NOR-QD TABS 0.35MG	4	
<i>nora-be tabs 0.35mg</i>	1	
<i>norethindrone &amp; ethinyl estradiol ferrous fumarate chew 25mcg; 75mg; 0.8mg</i>	2	
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate chew 20mcg; 75mg; 1mg</i>	2	
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate tabs 20mcg; 75mg; 1mg</i>	2	
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate tabs 20mcg; 75mg; 1mg</i>	2	
<i>norethindrone acetate/ethinyl estradiol chew 20mcg; 75mg; 1mg</i>	2	
<i>norethindrone acetate/ethinyl estradiol tabs 20mcg; 1mg</i>	1	
<i>norethindrone/ethinyl estradiol/ferrous fumarate chew 35mcg; 0; 0.4mg</i>	2	
<i>norethindrone tabs 0.35mg</i>	1	
<i>norgestimate/ethinyl estradiol tabs 0; 0</i>	1	
<i>norgestimate/ethinyl estradiol tabs 0; 0</i>	1	
<i>norgestimate/ethinyl estradiol tabs 35mcg; 0.25mg</i>	1	
NORINYL 1+35 TABS 35MCG; 1MG	4	

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Drug Name	Drug Tier	Requirements/Limits
NORINYL 1+50 TABS 50MCG; 1MG	4	
<i>norlyroc tabs 0.35mg</i>	1	
<i>nortrel 0.5/35 (28) tabs 35mcg; 0.5mg</i>	1	
<i>nortrel 1/35 tabs 35mcg; 1mg</i>	1	
<i>nortrel 1/35 tabs 35mcg; 1mg</i>	1	
<i>nortrel 7/7/7 tabs 0; 0</i>	1	
NUVARING RING 0.015MG/24HR; 0.12MG/24HR	3	
<i>ocella tabs 3mg; 0.03mg</i>	2	
<i>ogestrel tabs 50mcg; 0.5mg</i>	1	
<i>orsythia tabs 20mcg; 0.1mg</i>	1	
ORTHO MICRONOR TABS 0.35MG	4	
ORTHO TRI-CYCLEN LO TABS 0; 0	4	
ORTHO TRI-CYCLEN TABS 0; 0	4	
ORTHO-CYCLEN TABS 35MCG; 0.25MG	4	
ORTHO-NOVUM 1/35 TABS 35MCG; 1MG	4	
ORTHO-NOVUM 7/7/7 TABS 0; 0	4	
OVCON-35 TABS 35MCG; 0.4MG	4	
<i>philith tabs 35mcg; 0.4mg</i>	1	
<i>pimtrea tabs 0; 0</i>	1	
<i>pirmella 1/35 tabs 35mcg; 1mg</i>	1	
<i>pirmella 7/7/7 tabs 0; 0</i>	1	
<i>portia-28 tabs 0.03mg; 0.15mg</i>	1	
<i>previfem tabs 35mcg; 0.25mg</i>	1	
QUARTETTE TABS 0; 0	4	
<i>quasense tabs 0.03mg; 0.15mg</i>	2	
<i>rajani tabs 3mg; 0.02mg; 0.451mg</i>	2	
<i>reclipsen tabs 0.15mg; 0.03mg</i>	1	
<i>rivelsa tabs 0; 0</i>	2	
SAFYRAL TABS 3MG; 0.03MG; 0.451MG	4	
SEASONIQUE TABS 0; 0	4	
<i>setlakin tabs 0.03mg; 0.15mg</i>	2	
<i>sharobel tabs 0.35mg</i>	1	
SKYLA IUD 13.5MG	4	
<i>sprintec 28 tabs 35mcg; 0.25mg</i>	1	
<i>sronyx tabs 20mcg; 0.1mg</i>	1	
<i>syeda tabs 3mg; 0.03mg</i>	2	
<i>tarina fe 1/20 tabs 20mcg; 75mg; 1mg</i>	2	
TAYTULLA CAPS 20MCG; 75MG; 1MG	4	
<i>tilia fe tabs 0; 75mg; 1mg</i>	2	
<i>tri-estarylla tabs 0; 0</i>	1	
<i>tri-legest fe tabs 0; 75mg; 1mg</i>	2	
<i>tri-linyah tabs 0; 0</i>	1	
<i>tri-lo-estarylla tabs 0; 0</i>	1	
<i>tri-lo-marzia tabs 0; 0</i>	1	
<i>tri-lo-sprintec tabs 0; 0</i>	1	
<i>tri-mili tabs 0; 0</i>	1	
TRI-NORINYL 28 TABS 0; 0	4	
<i>tri-previfem tabs 0; 0</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>tri-sprintec tabs 0; 0</i>	1	
<i>tri-vylibra tabs 0; 0</i>	1	
<i>trinessa lo tabs 0; 0</i>	1	
<i>trinessa tabs 0; 0</i>	1	
<i>trivora-28 tabs 0; 0</i>	1	
<i>tydemy tabs 3mg; 0.03mg; 0.451mg</i>	2	
<i>velivet tabs 0; 0</i>	1	
<i>vestura tabs 3mg; 0.02mg</i>	2	
<i>vienva tabs 20mcg; 0.1mg</i>	1	
<i>viorele tabs 0; 0</i>	1	
<i>vyfemla tabs 35mcg; 0.4mg</i>	1	
<i>vylibra tabs 35mcg; 0.25mg</i>	1	
<i>wera tabs 35mcg; 0.5mg</i>	1	
<i>wymzya fe chew 35mcg; 0; 0.4mg</i>	2	
<i>xulane ptwk 35mcg/24hr; 150mcg/24hr</i>	1	
YASMIN 28 TABS 3MG; 0.03MG	4	
YAZ TABS 3MG; 0.02MG	4	
<i>zarah tabs 3mg; 0.03mg</i>	2	
<i>zenchent fe chew 35mcg; 0; 0.4mg</i>	2	
<i>zenchent tabs 35mcg; 0.4mg</i>	1	
<i>zovia 1/35e tabs 35mcg; 1mg</i>	1	
<i>zovia 1/50e tabs 50mcg; 1mg</i>	1	
<b>Estrogens and Antiestrogens</b>		
ACTIVELLA TABS 0.5MG; 0.1MG	4	PA
ACTIVELLA TABS 1MG; 0.5MG	4	PA
ALORA PTTW 0.025MG/24HR	4	PA
ALORA PTTW 0.05MG/24HR	4	PA
ALORA PTTW 0.075MG/24HR	4	PA
ALORA PTTW 0.1MG/24HR	4	PA
<i>amabelz tabs 0.5mg; 0.1mg</i>	2	PA
<i>amabelz tabs 1mg; 0.5mg</i>	2	PA
ANGELIQ TABS 0.25MG; 0.5MG	4	PA
ANGELIQ TABS 0.5MG; 1MG	4	PA
CLIMARA PRO PTWK 0.045MG/DAY; 0.015MG/DAY	4	PA
<i>climara ptwk 0.025mg/24hr</i>	2	PA
<i>climara ptwk 0.05mg/24hr</i>	2	PA
<i>climara ptwk 0.06mg/24hr</i>	2	PA
<i>climara ptwk 0.075mg/24hr</i>	2	PA
<i>climara ptwk 0.1mg/24hr</i>	2	PA
<i>climara ptwk 37.5mcg/24hr</i>	2	PA
COMBIPATCH PTTW 0.05MG/DAY; 0.14MG/DAY	4	PA
COMBIPATCH PTTW 0.05MG/DAY; 0.25MG/DAY	4	PA
DELESTROGEN INJ 10MG/ML	4	
DELESTROGEN INJ 20MG/ML	4	
DELESTROGEN INJ 40MG/ML	4	
DEPO-ESTRADIOL INJ 5MG/ML	3	PA
DIVIGEL GEL 0.25MG/0.25GM	4	PA
DIVIGEL GEL 0.5MG/0.5GM	4	PA

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
DIVIGEL GEL 1MG/GM	4	PA
DUAVEE TABS 20MG; 0.45MG	4	PA
ELESTRIN GEL 0.06%	4	PA
ENJUVIA TABS 0.3MG	4	PA
ENJUVIA TABS 0.45MG	4	PA
ENJUVIA TABS 0.625MG	4	PA
ENJUVIA TABS 0.9MG	4	PA
ESTRACE CREA 0.1MG/GM	1	
ESTRACE TABS 0.5MG	4	PA
ESTRACE TABS 1MG	4	PA
ESTRACE TABS 2MG	4	PA
<i>estradiol valerate inj 20mg/ml</i>	1	
<i>estradiol valerate inj 40mg/ml</i>	1	
<i>estradiol/norethindrone acetate tabs 0.5mg; 0.1mg</i>	2	PA
<i>estradiol/norethindrone acetate tabs 1mg; 0.5mg</i>	2	PA
<i>estradiol crea 0.1mg/gm</i>	1	
<i>estradiol pttw 0.025mg/24hr</i>	2	PA
<i>estradiol pttw 0.0375mg/24hr</i>	2	PA
<i>estradiol pttw 0.05mg/24hr</i>	2	PA
<i>estradiol pttw 0.075mg/24hr</i>	2	PA
<i>estradiol pttw 0.1mg/24hr</i>	2	PA
<i>estradiol ptwk 0.025mg/24hr</i>	2	PA
<i>estradiol ptwk 0.05mg/24hr</i>	2	PA
<i>estradiol ptwk 0.06mg/24hr</i>	2	PA
<i>estradiol ptwk 0.075mg/24hr</i>	2	PA
<i>estradiol ptwk 0.1mg/24hr</i>	2	PA
<i>estradiol ptwk 37.5mcg/24hr</i>	2	PA
<i>estradiol tabs 0.5mg</i>	2	PA
<i>estradiol tabs 1mg</i>	2	PA
<i>estradiol tabs 2mg</i>	2	PA
<i>estradiol tabs 10mcg</i>	1	
ESTRING RING 2MG	3	
<i>estropipate tabs 0.75mg</i>	2	PA
<i>estropipate tabs 1.5mg</i>	2	PA
<i>estropipate tabs 3mg</i>	2	PA
EVAMIST SOLN 1.53MG/SPRAY	4	PA
EVISTA TABS 60MG	4	
FEMHRT LOW DOSE TABS 2.5MCG; 0.5MG	4	PA
FEMRING RING 0.05MG/24HR	3	
FEMRING RING 0.1MG/24HR	3	
<i>fyavolv tabs 2.5mcg; 0.5mg</i>	2	PA
<i>fyavolv tabs 5mcg; 1mg</i>	2	PA
IMVEXXY MAINTENANCE PACK INST 10MCG	4	
IMVEXXY MAINTENANCE PACK INST 4MCG	4	
<i>jevantique lo tabs 2.5mcg; 0.5mg</i>	2	PA
<i>jinteli tabs 5mcg; 1mg</i>	2	PA
<i>lopreeza tabs 0.5mg; 0.1mg</i>	2	PA
<i>lopreeza tabs 1mg; 0.5mg</i>	2	PA

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Drug Name	Drug Tier	Requirements/Limits
MENEST TABS 0.3MG	4	PA
MENEST TABS 0.625MG	4	PA
MENEST TABS 1.25MG	4	PA
MENEST TABS 2.5MG	4	PA
MENOSTAR PTWK 14MCG/24HR	4	PA
<i>mimvey lo tabs 0.5mg; 0.1mg</i>	2	PA
<i>mimvey tabs 1mg; 0.5mg</i>	2	PA
MINIVELLE PTTW 0.025MG/24HR	4	PA
MINIVELLE PTTW 0.0375MG/24HR	4	PA
MINIVELLE PTTW 0.05MG/24HR	4	PA
MINIVELLE PTTW 0.075MG/24HR	4	PA
MINIVELLE PTTW 0.1MG/24HR	4	PA
<i>norethindrone acetate/ethinyl estradiol tabs 2.5mcg; 0.5mg</i>	2	PA
<i>norethindrone acetate/ethinyl estradiol tabs 5mcg; 1mg</i>	2	PA
OSPHENA TABS 60MG	4	PA
PREFEST TABS 0; 0	4	PA
PREMARIN CREA 0.625MG/GM	3	
PREMARIN INJ 25MG	4	PA
PREMARIN TABS 0.3MG	4	PA
PREMARIN TABS 0.45MG	4	PA
PREMARIN TABS 0.625MG	4	PA
PREMARIN TABS 0.9MG	4	PA
PREMARIN TABS 1.25MG	4	PA
PREMPHASE TABS 0.625MG; 5MG	4	PA
PREMPRO TABS 0.3MG; 1.5MG	4	PA
PREMPRO TABS 0.45MG; 1.5MG	4	PA
PREMPRO TABS 0.625MG; 2.5MG	4	PA
PREMPRO TABS 0.625MG; 5MG	4	PA
<i>raloxifene hydrochloride tabs 60mg</i>	1	
VAGIFEM TABS 10MCG	4	
VIVELLE-DOT PTTW 0.025MG/24HR	4	PA
VIVELLE-DOT PTTW 0.0375MG/24HR	4	PA
VIVELLE-DOT PTTW 0.05MG/24HR	4	PA
VIVELLE-DOT PTTW 0.075MG/24HR	4	PA
VIVELLE-DOT PTTW 0.1MG/24HR	4	PA
<i>yuvafem tabs 10mcg</i>	1	
<b><i>Gonadotropins and Antigonadotropins</i></b>		
ORLISSA TABS 150MG	5	
ORLISSA TABS 200MG	5	
<b><i>Gonadotropins</i></b>		
CHORIONIC GONADOTROPIN INJ 10000UNIT	3	PA; *
NOVAREL INJ 10000UNIT	4	PA; *
NOVAREL INJ 5000UNIT	4	PA
PREGNYL W/DILUENT BENZYL ALCOHOL/NACL INJ 10000UNIT	4	PA; *
SYNAREL SOLN 2MG/ML	5	
TRIPTODUR INJ 22.5MG	5	
<b><i>Leptins</i></b>		

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
MYALEPT INJ 11.3MG	5	
<b>Parathyroid</b>		
<i>calcitonin-salmon soln 200unit/act</i>	1	
FORTEO INJ 600MCG/2.4ML	5	
FORTICAL SOLN 200UNIT/ACT	3	
MIACALCIN INJ 200UNIT/ML	3	
MIACALCIN SOLN 200UNIT/ACT	4	
NATPARA INJ 100MCG	5	PA
NATPARA INJ 25MCG	5	PA
NATPARA INJ 50MCG	5	PA
NATPARA INJ 75MCG	5	PA
TYMLOS INJ 3120MCG/1.56ML	5	
<b>Pituitary</b>		
DDAVP INJ 4MCG/ML	4	
DDAVP INJ 4MCG/ML	4	
DDAVP SOLN 0.01%	4	
DDAVP SOLN 0.01%	4	
DDAVP TABS 0.1MG	4	
DDAVP TABS 0.2MG	4	
<i>desmopressin acetate inj 4mcg/ml</i>	1	
<i>desmopressin acetate soln 0.01%</i>	1	
<i>desmopressin acetate soln 0.01%</i>	1	
<i>desmopressin acetate soln 0.01%</i>	1	
<i>desmopressin acetate tabs 0.1mg</i>	1	
<i>desmopressin acetate tabs 0.2mg</i>	1	
H.P. ACTHAR INJ 80UNIT/ML	5	PA; *
NOCTIVA EMUL 0.83MCG/0.1ML	4	
NOCTIVA EMUL 1.66MCG/0.1ML	4	
STIMATE SOLN 1.5MG/ML	3	
VASOSTRICT INJ 20UNIT/ML	4	*
<b>Progestins</b>		
AYGESTIN TABS 5MG	4	
CRINONE GEL 4%	4	PA
CRINONE GEL 8%	4	PA
DEPO-PROVERA CONTRACEPTIVE INJ 150MG/ML	4	
DEPO-PROVERA CONTRACEPTIVE INJ 150MG/ML	4	
DEPO-PROVERA INJ 400MG/ML	3	
DEPO-SUBQ PROVERA 104 INJ 104MG/0.65ML	3	
<i>hydroxyprogesterone caproate inj 1.25gm/5ml</i>	2	
<i>hydroxyprogesterone caproate inj 250mg/ml</i>	2	
MAKENA INJ 250MG/ML	5	
MAKENA INJ 275MG/1.1ML	5	
<i>medroxyprogesterone acetate inj 150mg/ml</i>	1	
<i>medroxyprogesterone acetate inj 150mg/ml</i>	1	
<i>medroxyprogesterone acetate tabs 10mg</i>	1	
<i>medroxyprogesterone acetate tabs 2.5mg</i>	1	
<i>medroxyprogesterone acetate tabs 5mg</i>	1	
MEGACE ES SUSP 625MG/5ML	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>megestrol acetate susp 625mg/5ml</i>	2	
<i>norethindrone acetate tabs 5mg</i>	1	
<i>progesterone caps 100mg</i>	1	
<i>progesterone caps 200mg</i>	1	
<i>progesterone inj 50mg/ml</i>	2	
PROMETRIUM CAPS 100MG	4	
PROMETRIUM CAPS 200MG	4	
PROVERA TABS 10MG	4	
PROVERA TABS 2.5MG	4	
PROVERA TABS 5MG	4	
<b>Somatostatin Agonists and Antagonists</b>		
<i>octreotide acetate inj 1000mcg/ml</i>	1	
<i>octreotide acetate inj 100mcg/ml</i>	1	
<i>octreotide acetate inj 200mcg/ml</i>	1	
<i>octreotide acetate inj 500mcg/ml</i>	1	
<i>octreotide acetate inj 50mcg/ml</i>	1	
SANDOSTATIN LAR DEPOT INJ 10MG	5	
SANDOSTATIN LAR DEPOT INJ 20MG	5	
SANDOSTATIN LAR DEPOT INJ 30MG	5	
SANDOSTATIN INJ 1000MCG/ML	4	
SANDOSTATIN INJ 100MCG/ML	4	
SANDOSTATIN INJ 200MCG/ML	4	
SANDOSTATIN INJ 500MCG/ML	4	
SANDOSTATIN INJ 50MCG/ML	4	
SIGNIFOR LAR INJ 10MG	5	
SIGNIFOR LAR INJ 20MG	5	
SIGNIFOR LAR INJ 30MG	5	
SIGNIFOR LAR INJ 40MG	5	
SIGNIFOR LAR INJ 60MG	5	
SIGNIFOR INJ 0.3MG/ML	5	QL (60 ML per 30 days)
SIGNIFOR INJ 0.6MG/ML	5	QL (60 ML per 30 days)
SIGNIFOR INJ 0.9MG/ML	5	QL (60 ML per 30 days)
SOMATULINE DEPOT INJ 120MG/0.5ML	5	
SOMATULINE DEPOT INJ 60MG/0.2ML	5	
SOMATULINE DEPOT INJ 90MG/0.3ML	5	
<b>Somatotropin Agonists and Antagonists</b>		
EGRIFTA INJ 1MG	5	
EGRIFTA INJ 2MG	5	
GENOTROPIN MINIQUICK INJ 0.2MG	4	PA
GENOTROPIN MINIQUICK INJ 0.4MG	5	PA
GENOTROPIN MINIQUICK INJ 0.6MG	5	PA
GENOTROPIN MINIQUICK INJ 0.8MG	5	PA
GENOTROPIN MINIQUICK INJ 1.2MG	5	PA
GENOTROPIN MINIQUICK INJ 1.4MG	5	PA
GENOTROPIN MINIQUICK INJ 1.6MG	5	PA
GENOTROPIN MINIQUICK INJ 1.8MG	5	PA
GENOTROPIN MINIQUICK INJ 1MG	5	PA
GENOTROPIN MINIQUICK INJ 2MG	5	PA

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Drug Name	Drug Tier	Requirements/Limits
GENOTROPIN INJ 12MG	5	PA
GENOTROPIN INJ 5MG	5	PA
HUMATROPE COMBO PACK INJ 5MG	5	PA
HUMATROPE INJ 12MG	5	PA
HUMATROPE INJ 24MG	5	PA
HUMATROPE INJ 6MG	5	PA
INCRELEX INJ 40MG/4ML	5	
NORDITROPIN FLEXPRO INJ 10MG/1.5ML	5	PA
NORDITROPIN FLEXPRO INJ 15MG/1.5ML	5	PA
NORDITROPIN FLEXPRO INJ 30MG/3ML	5	PA
NORDITROPIN FLEXPRO INJ 5MG/1.5ML	5	PA
NUTROPIN AQ NUSPIN 10 INJ 10MG/2ML	5	PA
NUTROPIN AQ NUSPIN 20 INJ 20MG/2ML	5	PA
NUTROPIN AQ NUSPIN 5 INJ 5MG/2ML	5	PA
NUTROPIN AQ PEN INJ 20MG/2ML	5	PA
OMNITROPE INJ 10MG/1.5ML	5	PA
OMNITROPE INJ 5.8MG	5	PA
OMNITROPE INJ 5MG/1.5ML	5	PA
SAIZEN CLICK.EASY INJ 8.8MG	5	PA
SAIZEN INJ 5MG	5	PA
SAIZEN INJ 8.8MG	5	PA
SAIZENPREP RECONSTITUTIONKIT INJ 8.8MG	5	PA
SEROSTIM INJ 4MG	5	PA
SEROSTIM INJ 5MG	5	PA
SEROSTIM INJ 6MG	5	PA
SOMAVERT INJ 10MG	5	
SOMAVERT INJ 15MG	5	
SOMAVERT INJ 20MG	5	
SOMAVERT INJ 25MG	5	
SOMAVERT INJ 30MG	5	
ZOMACTON INJ 10MG	5	PA
ZOMACTON INJ 5MG	4	PA
ZORBTIVE INJ 8.8MG	5	PA
<b><i>Thyroid and Antithyroid Agents</i></b>		
ARMOUR THYROID TABS 120MG	4	
ARMOUR THYROID TABS 15MG	4	
ARMOUR THYROID TABS 180MG	4	
ARMOUR THYROID TABS 240MG	4	
ARMOUR THYROID TABS 300MG	4	
ARMOUR THYROID TABS 30MG	4	
ARMOUR THYROID TABS 60MG	4	
ARMOUR THYROID TABS 90MG	4	
CYTOMEL TABS 25MCG	4	
CYTOMEL TABS 50MCG	4	
CYTOMEL TABS 5MCG	4	
<i>levo-t tabs 100mcg</i>	1	
<i>levo-t tabs 112mcg</i>	1	
<i>levo-t tabs 125mcg</i>	1	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>levo-t tabs 137mcg</i>	1	
<i>levo-t tabs 150mcg</i>	1	
<i>levo-t tabs 175mcg</i>	1	
<i>levo-t tabs 200mcg</i>	1	
<i>levo-t tabs 25mcg</i>	1	
<i>levo-t tabs 300mcg</i>	1	
<i>levo-t tabs 50mcg</i>	1	
<i>levo-t tabs 75mcg</i>	1	
<i>levo-t tabs 88mcg</i>	1	
<i>levothyroxine sodium inj 100mcg</i>	1	*
<i>levothyroxine sodium inj 200mcg</i>	1	*
<i>levothyroxine sodium inj 500mcg</i>	1	*
<i>levothyroxine sodium tabs 100mcg</i>	1	
<i>levothyroxine sodium tabs 112mcg</i>	1	
<i>levothyroxine sodium tabs 125mcg</i>	1	
<i>levothyroxine sodium tabs 137mcg</i>	1	
<i>levothyroxine sodium tabs 150mcg</i>	1	
<i>levothyroxine sodium tabs 175mcg</i>	1	
<i>levothyroxine sodium tabs 200mcg</i>	1	
<i>levothyroxine sodium tabs 25mcg</i>	1	
<i>levothyroxine sodium tabs 300mcg</i>	1	
<i>levothyroxine sodium tabs 50mcg</i>	1	
<i>levothyroxine sodium tabs 75mcg</i>	1	
<i>levothyroxine sodium tabs 88mcg</i>	1	
<i>levothyroxine/liothyronine tabs 120mg</i>	2	
<i>levothyroxine/liothyronine tabs 15mg</i>	2	
<i>levothyroxine/liothyronine tabs 30mg</i>	2	
<i>levothyroxine/liothyronine tabs 60mg</i>	2	
<i>levothyroxine/liothyronine tabs 90mg</i>	2	
LEVOXYL TABS 100MCG	4	
LEVOXYL TABS 112MCG	4	
LEVOXYL TABS 125MCG	4	
LEVOXYL TABS 137MCG	4	
LEVOXYL TABS 150MCG	4	
LEVOXYL TABS 175MCG	4	
LEVOXYL TABS 200MCG	4	
LEVOXYL TABS 25MCG	4	
LEVOXYL TABS 50MCG	4	
LEVOXYL TABS 75MCG	4	
LEVOXYL TABS 88MCG	4	
<i>liothyronine sodium inj 10mcg/ml</i>	1	*
<i>liothyronine sodium tabs 25mcg</i>	1	
<i>liothyronine sodium tabs 50mcg</i>	1	
<i>liothyronine sodium tabs 5mcg</i>	1	
<i>methimazole tabs 10mg</i>	1	
<i>methimazole tabs 5mg</i>	1	
<i>np thyroid 120 tabs 120mg</i>	2	
<i>np thyroid 15 tabs 15mg</i>	2	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>np thyroid 30 tabs 30mg</i>	2	
<i>np thyroid 60 tabs 60mg</i>	2	
<i>np thyroid 90 tabs 90mg</i>	2	
<i>propylthiouracil tabs 50mg</i>	1	
SYNTHROID TABS 100MCG	4	
SYNTHROID TABS 112MCG	4	
SYNTHROID TABS 125MCG	4	
SYNTHROID TABS 137MCG	4	
SYNTHROID TABS 150MCG	4	
SYNTHROID TABS 175MCG	4	
SYNTHROID TABS 200MCG	4	
SYNTHROID TABS 25MCG	4	
SYNTHROID TABS 300MCG	4	
SYNTHROID TABS 50MCG	4	
SYNTHROID TABS 75MCG	4	
SYNTHROID TABS 88MCG	4	
TAPAZOLE TABS 10MG	4	
TAPAZOLE TABS 5MG	4	
THYROLAR-1/2 TABS 30MG	4	
THYROLAR-1/4 TABS 15MG	4	
THYROLAR-1 TABS 60MG	4	
THYROLAR-2 TABS 120MG	4	
THYROLAR-3 TABS 0; 180MG	4	
TIROSINT CAPS 100MCG	4	
TIROSINT CAPS 112MCG	4	
TIROSINT CAPS 125MCG	4	
TIROSINT CAPS 137MCG	4	
TIROSINT CAPS 13MCG	4	
TIROSINT CAPS 150MCG	4	
TIROSINT CAPS 25MCG	4	
TIROSINT CAPS 50MCG	4	
TIROSINT CAPS 75MCG	4	
TIROSINT CAPS 88MCG	4	
TRIOSTAT INJ 10MCG/ML	4	*
<i>unithroid direct tabs 100mcg</i>	1	
<i>unithroid direct tabs 112mcg</i>	1	
<i>unithroid direct tabs 125mcg</i>	1	
<i>unithroid direct tabs 150mcg</i>	1	
<i>unithroid direct tabs 175mcg</i>	1	
<i>unithroid direct tabs 200mcg</i>	1	
<i>unithroid direct tabs 25mcg</i>	1	
<i>unithroid direct tabs 300mcg</i>	1	
<i>unithroid direct tabs 50mcg</i>	1	
<i>unithroid direct tabs 75mcg</i>	1	
<i>unithroid direct tabs 88mcg</i>	1	
UNITHROID TABS 100MCG	4	
UNITHROID TABS 112MCG	4	
UNITHROID TABS 125MCG	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
UNITHROID TABS 137MCG	4	
UNITHROID TABS 150MCG	4	
UNITHROID TABS 175MCG	4	
UNITHROID TABS 200MCG	4	
UNITHROID TABS 25MCG	4	
UNITHROID TABS 300MCG	4	
UNITHROID TABS 50MCG	4	
UNITHROID TABS 75MCG	4	
UNITHROID TABS 88MCG	4	

### Local Anesthetics

#### Local Anesthetics

<i>articadent dental inj 4%; 1:100000</i>	2	
<i>articadent dental inj 4%; 1:200000</i>	2	
<i>lidocaine hcl/dextrose soln 7.5%; 5%</i>	1	*
<i>lidocaine hcl inj 0.5%</i>	1	
<i>lidocaine hcl inj 0.5%</i>	1	
<i>lidocaine hcl inj 1%</i>	1	
<i>lidocaine hcl inj 1%</i>	1	
<i>lidocaine hcl inj 1.5%</i>	1	
<i>lidocaine hcl inj 2%</i>	1	
<i>lidocaine hcl inj 2%</i>	1	
<i>lidocaine hcl inj 4%</i>	1	
<i>moxifloxacin hydrochloride soln 0.5%</i>	1	
<i>orabloc inj 4%; 1:100000</i>	2	
<i>orabloc inj 4%; 1:200000</i>	2	
XYLOCAINE-MPF INJ 0.5%	4	
XYLOCAINE-MPF INJ 1%	4	
XYLOCAINE-MPF INJ 1.5%	4	
XYLOCAINE-MPF INJ 2%	4	
XYLOCAINE-MPF INJ 4%	4	
XYLOCAINE INJ 0.5%	4	
XYLOCAINE INJ 1%	4	
XYLOCAINE INJ 2%	4	
ZTLIDO PTCH 1.8%	4	PA

### Miscellaneous Therapeutic Agents

#### 5-alpha-Reductase Inhibitors

AVODART CAPS 0.5MG	4	
<i>dutasteride/tamsulosin hydrochloride caps 0.5mg; 0.4mg</i>	2	
<i>dutasteride caps 0.5mg</i>	2	
<i>finasteride tabs 5mg</i>	1	
JALYN CAPS 0.5MG; 0.4MG	4	
PROSCAR TABS 5MG	4	

#### Alcohol Deterrents

ANTABUSE TABS 250MG	4	
ANTABUSE TABS 500MG	4	
<i>disulfiram tabs 250mg</i>	1	
<i>disulfiram tabs 500mg</i>	1	

#### Antidotes

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
<i>acetylcysteine inj 200mg/ml</i>	1	*
<i>acetylcysteine soln 10%</i>	1	B/D
<i>acetylcysteine soln 20%</i>	1	B/D
CETYLEV TBEF 2.5GM	4	
CETYLEV TBEF 500MG	4	
<i>fomepizole inj 1.5gm/1.5ml</i>	2	*
FUSILEV INJ 50MG	5	*
<i>leucovorin calcium inj 100mg</i>	1	
<i>leucovorin calcium inj 200mg</i>	1	
<i>leucovorin calcium inj 350mg</i>	1	
<i>leucovorin calcium inj 500mg</i>	1	
<i>leucovorin calcium inj 50mg</i>	1	
<i>leucovorin calcium tabs 10mg</i>	1	
<i>leucovorin calcium tabs 15mg</i>	1	
<i>leucovorin calcium tabs 25mg</i>	1	
<i>leucovorin calcium tabs 5mg</i>	1	
<i>levoleucovorin calcium inj 175mg/17.5ml</i>	5	HI; *
<i>levoleucovorin inj 175mg/17.5ml</i>	5	HI; *
<i>levoleucovorin inj 250mg/25ml</i>	5	HI; *
<i>levoleucovorin inj 50mg</i>	5	
PROTOPAM CHLORIDE INJ 1GM	4	*
VISTOGARD PACK 10GM	5	
<b>Antigout Agents</b>		
<i>allopurinol sodium inj 500mg</i>	1	*
<i>allopurinol tabs 100mg</i>	1	
<i>allopurinol tabs 300mg</i>	1	
ALOPRIM INJ 500MG	4	*
<i>colchicine caps 0.6mg</i>	2	
<i>colchicine tabs 0.6mg</i>	2	
COLCRYS TABS 0.6MG	4	
MITIGARE CAPS 0.6MG	4	
ULORIC TABS 40MG	4	
ULORIC TABS 80MG	4	
ZYLOPRIM TABS 100MG	4	
ZYLOPRIM TABS 300MG	4	
<b>Bone Resorption Inhibitors</b>		
ACTONEL TABS 150MG	4	
ACTONEL TABS 30MG	4	
ACTONEL TABS 35MG	4	
ACTONEL TABS 5MG	4	
<i>alendronate sodium soln 70mg/75ml</i>	1	
<i>alendronate sodium tabs 10mg</i>	1	
<i>alendronate sodium tabs 35mg</i>	1	
<i>alendronate sodium tabs 40mg</i>	1	
<i>alendronate sodium tabs 5mg</i>	1	
<i>alendronate sodium tabs 70mg</i>	1	
AELVIA TBEC 35MG	4	
BINOSTO TBEF 70MG	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
BONIVA INJ 3MG/3ML	4	*
BONIVA TABS 150MG	4	
<i>etidronate disodium tabs 200mg</i>	1	
<i>etidronate disodium tabs 400mg</i>	1	
FOSAMAX PLUS D TABS 70MG; 2800UNIT	4	
FOSAMAX PLUS D TABS 70MG; 5600UNIT	4	
FOSAMAX TABS 70MG	4	
<i>ibandronate sodium inj 3mg/3ml</i>	2	*
<i>ibandronate sodium tabs 150mg</i>	2	
<i>pamidronate disodium inj 30mg/10ml</i>	1	HI; *
<i>pamidronate disodium inj 6mg/ml</i>	1	HI; *
<i>pamidronate disodium inj 90mg/10ml</i>	1	HI; *
PROLIA INJ 60MG/ML	4	*
RECLAST INJ 5MG/100ML	4	HI; *
<i>risedronate sodium dr tbec 35mg</i>	2	
<i>risedronate sodium tabs 150mg</i>	1	
<i>risedronate sodium tabs 30mg</i>	1	
<i>risedronate sodium tabs 35mg</i>	1	
<i>risedronate sodium tabs 35mg</i>	1	
<i>risedronate sodium tabs 35mg</i>	1	
<i>risedronate sodium tabs 5mg</i>	1	
XGEVA INJ 120MG/1.7ML	5	*
<i>zoledronic acid inj 4mg/5ml</i>	1	HI; *
<i>zoledronic acid inj 4mg</i>	1	HI; *
<i>zoledronic acid inj 5mg/100ml</i>	1	HI; *
ZOMETA INJ 4MG/100ML	3	HI; *
ZOMETA INJ 4MG/5ML	4	HI; *
<b>Carbonic Anhydrase Inhibitors</b>		
KEVEYIS TABS 50MG	5	QL (120 EA per 30 days) PA
<b>Cariostatic Agents</b>		
FLUOR-A-DAY SOLN 0.125MG/DROP	4	
<i>fluoride chew 1.1mg</i>	2	
<i>fluoride chew 2.2mg</i>	2	
<i>fluoritab chew 0.5mg</i>	2	
<i>fluoritab chew 1mg</i>	2	
FLUORITAB SOLN 0.125MG/DROP	4	
<i>ludent chew 0.5mg</i>	2	
<i>ludent chew 1mg</i>	2	
<i>sodium fluoride chew 0.5mg</i>	2	
<i>sodium fluoride chew 1mg</i>	2	
<i>sodium fluoride soln 0.5mg/ml</i>	2	
<i>sodium fluoride tabs 1mg</i>	2	
<b>Complement Inhibitors</b>		
BERINERT INJ 500UNIT	5	*
CINRYZE INJ 500UNIT	5	
FIRAZYR INJ 30MG/3ML	5	*
HAEGARDA INJ 2000UNIT	5	
HAEGARDA INJ 3000UNIT	5	

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Drug Name	Drug Tier	Requirements/Limits
KALBITOR INJ 10MG/ML	5	*
RUCONEST INJ 2100UNIT	5	*
SOLIRIS INJ 300MG/30ML	5	*
TAKHZYRO INJ 300MG/2ML	5	
<b><i>Disease-modifying Antirheumatic Drugs</i></b>		
ACTEMRA INJ 162MG/0.9ML	5	PA
ACTEMRA INJ 200MG/10ML	5	PA
ACTEMRA INJ 400MG/20ML	5	PA
ACTEMRA INJ 80MG/4ML	5	PA
ARA VA TABS 10MG	4	
ARA VA TABS 20MG	4	
CIMZIA INJ 200MG/ML	5	PA
CIMZIA INJ 200MG	5	PA
ENBREL MINI INJ 50MG/ML	5	
ENBREL SURECLICK INJ 50MG/ML	5	
ENBREL INJ 25MG/0.5ML	5	
ENBREL INJ 25MG	5	
ENBREL INJ 50MG/ML	5	
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJ 0	5	
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJ 40MG/0.8ML	5	
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJ 40MG/0.8ML	5	
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJ 80MG/0.8ML	5	
HUMIRA PEN-CD/UC/HS STARTER INJ 40MG/0.8ML	5	
HUMIRA PEN-CD/UC/HS STARTER INJ 80MG/0.8ML	5	
HUMIRA PEN-PS/UV STARTER INJ 0	5	
HUMIRA PEN-PS/UV STARTER INJ 40MG/0.8ML	5	
HUMIRA PEN INJ 40MG/0.4ML	5	
HUMIRA PEN INJ 40MG/0.8ML	5	
HUMIRA INJ 10MG/0.1ML	5	
HUMIRA INJ 10MG/0.2ML	5	
HUMIRA INJ 20MG/0.2ML	5	
HUMIRA INJ 20MG/0.4ML	5	
HUMIRA INJ 40MG/0.4ML	5	
HUMIRA INJ 40MG/0.8ML	5	
INFLECTRA INJ 100MG	5	*
KEVZARA INJ 150MG/1.14ML	5	PA
KEVZARA INJ 150MG/1.14ML	5	PA
KEVZARA INJ 200MG/1.14ML	5	PA
KEVZARA INJ 200MG/1.14ML	5	PA
KINERET INJ 100MG/0.67ML	5	PA
<i>leflunomide tabs 10mg</i>	1	
<i>leflunomide tabs 20mg</i>	1	
OLUMIANT TABS 2MG	5	
ORENCIA CLICKJECT INJ 125MG/ML	5	

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Drug Name	Drug Tier	Requirements/Limits
ORENCIA INJ 125MG/ML	5	
ORENCIA INJ 250MG	5	
OTEZLA TABS 30MG	5	PA
OTEZLA TBPK 0	5	PA
OTREXUP INJ 10MG/0.4ML	4	
OTREXUP INJ 12.5MG/0.4ML	4	
OTREXUP INJ 15MG/0.4ML	4	
OTREXUP INJ 17.5MG/0.4ML	4	
OTREXUP INJ 20MG/0.4ML	4	
OTREXUP INJ 22.5MG/0.4ML	4	
OTREXUP INJ 25MG/0.4ML	4	
OTREXUP INJ 7.5MG/0.4ML	4	
RASUVO INJ 10MG/0.2ML	3	
RASUVO INJ 12.5MG/0.25ML	3	
RASUVO INJ 15MG/0.3ML	3	
RASUVO INJ 17.5MG/0.35ML	3	
RASUVO INJ 20MG/0.4ML	3	
RASUVO INJ 22.5MG/0.45ML	3	
RASUVO INJ 25MG/0.5ML	3	
RASUVO INJ 27.5MG/0.55ML	3	
RASUVO INJ 30MG/0.6ML	3	
RASUVO INJ 7.5MG/0.15ML	3	
REMICADE INJ 100MG	5	*
RENFLEXIS INJ 100MG	5	
SIMPONI ARIA INJ 50MG/4ML	5	PA
SIMPONI INJ 100MG/ML	5	PA
SIMPONI INJ 100MG/ML	5	PA
SIMPONI INJ 50MG/0.5ML	5	PA
SIMPONI INJ 50MG/0.5ML	5	PA
XELJANZ XR TB24 11MG	5	QL (30 EA per 30 days) PA
XELJANZ TABS 10MG	5	QL (60 EA per 30 days) PA
XELJANZ TABS 5MG	5	QL (60 EA per 30 days) PA
<b>Immunomodulatory Agents</b>		
ACTIMMUNE INJ 2000000UNIT/0.5ML	5	
AUBAGIO TABS 14MG	5	QL (28 EA per 28 days)
AUBAGIO TABS 7MG	5	QL (28 EA per 28 days)
AVONEX PEN INJ 30MCG/0.5ML	5	QL (4 EA per 28 days) PA
AVONEX INJ 30MCG/0.5ML	5	QL (4 EA per 28 days) PA
AVONEX INJ 30MCG/VIAL	5	QL (4 EA per 28 days) PA
BETASERON INJ 0.3MG	5	QL (14 EA per 28 days) PA
COPAXONE INJ 20MG/ML	5	PA
COPAXONE INJ 40MG/ML	5	PA
EXTAVIA INJ 0.3MG	5	QL (15 EA per 30 days)
GILENYA CAPS 0.25MG	5	QL (30 EA per 30 days)
GILENYA CAPS 0.5MG	5	QL (30 EA per 30 days)
<i>glatiramer acetate inj 20mg/ml</i>	5	
GLATIRAMER ACETATE INJ 40MG/ML	5	
<i>glatopa inj 20mg/ml</i>	5	

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Drug Name	Drug Tier	Requirements/Limits
<i>glatopa inj 40mg/ml</i>	5	
LEMTRADA INJ 12MG/1.2ML	5	*
OCREVUS INJ 300MG/10ML	5	
REBIF REBIDOSE TITRATION PACK INJ 0	5	QL (12 ML per 28 days)
REBIF REBIDOSE INJ 22MCG/0.5ML	5	QL (12 ML per 28 days)
REBIF REBIDOSE INJ 44MCG/0.5ML	5	QL (12 ML per 28 days)
REBIF TITRATION PACK INJ 0	5	QL (12 ML per 28 days)
REBIF INJ 22MCG/0.5ML	5	QL (12 ML per 28 days)
REBIF INJ 44MCG/0.5ML	5	QL (12 ML per 28 days)
TECFIDERA STARTER PACK MISC 0	5	QL (60 EA per 30 days)
TECFIDERA CPDR 120MG	5	QL (14 EA per 7 days)
TECFIDERA CPDR 240MG	5	QL (60 EA per 30 days)
THALOMID CAPS 100MG	5	
THALOMID CAPS 150MG	5	
THALOMID CAPS 200MG	5	
THALOMID CAPS 50MG	5	
TYSABRI INJ 300MG/15ML	5	PA; *
ZINBRYTA INJ 150MG/ML	5	QL (1 ML per 30 days)
<b>Immunosuppressive Agents</b>		
ASTAGRAF XL CP24 0.5MG	4	B/D
ASTAGRAF XL CP24 1MG	4	B/D
ASTAGRAF XL CP24 5MG	5	B/D
ATGAM INJ 50MG/ML	4	*
AZASAN TABS 100MG	4	B/D
AZASAN TABS 75MG	4	B/D
<i>azathioprine inj 100mg</i>	1	B/D; *
<i>azathioprine tabs 50mg</i>	1	B/D
BENLYSTA INJ 120MG	5	*
BENLYSTA INJ 200MG/ML	5	
BENLYSTA INJ 200MG/ML	5	
BENLYSTA INJ 400MG	5	*
CELLCEPT INTRAVENOUS INJ 500MG	4	B/D; *
CELLCEPT CAPS 250MG	4	B/D
CELLCEPT SUSR 200MG/ML	4	B/D
CELLCEPT TABS 500MG	4	B/D
<i>cyclosporine modified caps 100mg</i>	1	B/D
<i>cyclosporine modified caps 25mg</i>	1	B/D
<i>cyclosporine modified caps 50mg</i>	1	B/D
<i>cyclosporine modified soln 100mg/ml</i>	1	B/D
<i>cyclosporine caps 100mg</i>	1	B/D
<i>cyclosporine caps 25mg</i>	1	B/D
<i>cyclosporine inj 50mg/ml</i>	1	B/D; *
ENVARUSUS XR TB24 0.75MG	4	B/D
ENVARUSUS XR TB24 1MG	4	B/D
ENVARUSUS XR TB24 4MG	4	B/D
<i>gengraf caps 100mg</i>	1	B/D
<i>gengraf caps 25mg</i>	1	B/D
<i>gengraf caps 50mg</i>	1	B/D

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Drug Name	Drug Tier	Requirements/Limits
<i>gengraf soln 100mg/ml</i>	1	B/D
IMURAN TABS 50MG	4	B/D
<i>mycophenolate mofetil caps 250mg</i>	1	B/D
<i>mycophenolate mofetil inj 500mg</i>	2	B/D; *
<i>mycophenolate mofetil susr 200mg/ml</i>	2	B/D
<i>mycophenolate mofetil tabs 500mg</i>	1	B/D
<i>mycophenolic acid dr tbec 180mg</i>	1	B/D
<i>mycophenolic acid dr tbec 360mg</i>	1	B/D
MYFORTIC TBEC 180MG	4	B/D
MYFORTIC TBEC 360MG	4	B/D
NEORAL CAPS 100MG	4	B/D
NEORAL CAPS 25MG	4	B/D
NEORAL SOLN 100MG/ML	4	B/D
NULOJIX INJ 250MG	5	B/D; *
PROGRAF CAPS 0.5MG	4	B/D
PROGRAF CAPS 1MG	4	B/D
PROGRAF CAPS 5MG	4	B/D
PROGRAF INJ 5MG/ML	4	B/D; *
RAPAMUNE SOLN 1MG/ML	4	B/D
RAPAMUNE TABS 0.5MG	4	B/D
RAPAMUNE TABS 1MG	4	B/D
RAPAMUNE TABS 2MG	4	B/D
SANDIMMUNE CAPS 100MG	4	B/D
SANDIMMUNE CAPS 25MG	4	B/D
SANDIMMUNE INJ 50MG/ML	4	B/D; *
SANDIMMUNE SOLN 100MG/ML	4	B/D
SIMULECT INJ 10MG	4	B/D; *
SIMULECT INJ 20MG	4	B/D; *
<i>sirolimus tabs 0.5mg</i>	1	B/D
<i>sirolimus tabs 1mg</i>	1	B/D
<i>sirolimus tabs 2mg</i>	1	B/D
<i>tacrolimus caps 0.5mg</i>	1	B/D
<i>tacrolimus caps 1mg</i>	1	B/D
<i>tacrolimus caps 5mg</i>	1	B/D
THYMOGLOBULIN INJ 25MG	4	*
ZORTRESS TABS 0.25MG	4	B/D
ZORTRESS TABS 0.5MG	5	B/D
ZORTRESS TABS 0.75MG	5	B/D
<b>Other Miscellaneous Therapeutic Agents</b>		
AMPYRA TB12 10MG	5	PA
ARCALYST INJ 220MG	5	
BOTOX INJ 100UNIT	3	PA; *
BOTOX INJ 200UNIT	3	PA; *
CARNITOR SF SOLN 1GM/10ML	4	
CARNITOR INJ 200MG/ML	4	HI; *
CARNITOR SOLN 1GM/10ML	4	
CARNITOR TABS 330MG	4	
CERDELGA CAPS 84MG	5	

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Drug Name	Drug Tier	Requirements/Limits
CYSTADANE POWD 0	5	
CYSTAGON CAPS 150MG	3	
CYSTAGON CAPS 50MG	3	
<i>dalfampridine er tb12 10mg</i>	5	PA
DEMSER CAPS 250MG	4	
DYSPORT INJ 300UNIT	4	PA; *
DYSPORT INJ 500UNIT	4	PA; *
ELMIRON CAPS 100MG	3	
ENDARI PACK 5GM	5	
EXONDYS 51 INJ 100MG/2ML	5	PA; *
EXONDYS 51 INJ 500MG/10ML	5	PA; *
GALAFOLD CAPS 123MG	5	
KUVAN PACK 100MG	5	
KUVAN PACK 500MG	5	
KUVAN TBSO 100MG	5	
<i>levocarnitine soln 1gm/10ml</i>	1	
<i>levocarnitine tabs 330mg</i>	1	
MIGLUSTAT CAPS 100MG	5	
MYOBLOC INJ 10000UNIT/2ML	5	PA
MYOBLOC INJ 2500UNIT/0.5ML	5	PA
MYOBLOC INJ 5000UNIT/ML	4	PA
NITYR TABS 10MG	5	
NITYR TABS 2MG	5	
NITYR TABS 5MG	5	
ONPATTRO INJ 10MG/5ML	5	
ORFADIN CAPS 10MG	5	
ORFADIN CAPS 20MG	5	
ORFADIN CAPS 2MG	5	
ORFADIN CAPS 5MG	5	
ORFADIN SUSP 4MG/ML	5	
PROCYSBI CPDR 25MG	5	PA
PROCYSBI CPDR 75MG	5	PA
RIMSO-50 INJ 50%	3	*
SENSIPAR TABS 30MG	5	
SENSIPAR TABS 60MG	5	
SENSIPAR TABS 90MG	5	
THIOLA TABS 100MG	5	
TYBOST TABS 150MG	3	
XEOMIN INJ 100UNIT	3	PA; *
XEOMIN INJ 200UNIT	3	PA; *
XEOMIN INJ 50UNIT	3	PA; *
XURIDEN PACK 2GM	4	
ZAVESCA CAPS 100MG	5	
<b>Protective Agents</b>		
<i>amifostine inj 500mg</i>	1	*
<i>dexrazoxane inj 250mg</i>	1	*
<i>dexrazoxane inj 500mg</i>	1	*
<i>mesna inj 100mg/ml</i>	1	*

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Drug Name	Drug Tier	Requirements/Limits
MESNEX INJ 100MG/ML	4	*
MESNEX TABS 400MG	3	
ZINECARD INJ 250MG	4	*
ZINECARD INJ 500MG	4	*
<b>Oxytocics</b>		
<i>Oxytocics</i>		
CERVIDIL INST 10MG	4	
<i>methergine tabs 0.2mg</i>	2	
<i>methylergonovine maleate inj 0.2mg/ml</i>	1	
<i>methylergonovine maleate tabs 0.2mg</i>	1	
PROSTIN E2 SUPP 20MG	3	
<b>Pharmaceutical Aids</b>		
<i>Pharmaceutical Aids</i>		
<i>sterile water for injection inj 0</i>	2	HI
<b>Respiratory Tract Agents</b>		
<i>Anti-inflammatory Agents</i>		
ACCOLATE TABS 10MG	4	
ACCOLATE TABS 20MG	4	
CINQAIR INJ 100MG/10ML	5	*
<i>cromolyn sodium conc 100mg/5ml</i>	2	
<i>cromolyn sodium nebu 20mg/2ml</i>	1	B/D
FASENRA INJ 30MG/ML	5	
GASTROCROM CONC 100MG/5ML	4	
<i>montelukast sodium chew 4mg</i>	1	
<i>montelukast sodium chew 5mg</i>	1	
<i>montelukast sodium pack 4mg</i>	1	
<i>montelukast sodium tabs 10mg</i>	1	
NUCALA INJ 100MG	5	*
SINGULAIR CHEW 4MG	4	
SINGULAIR CHEW 5MG	4	
SINGULAIR PACK 4MG	4	
SINGULAIR TABS 10MG	4	
<i>zafirlukast tabs 10mg</i>	2	
<i>zafirlukast tabs 20mg</i>	2	
<i>zileuton er tb12 600mg</i>	5	
ZYFLO CR TB12 600MG	5	
ZYFLO TABS 600MG	5	
<i>Antifibrotic Agents</i>		
ESBRIET CAPS 267MG	5	PA
ESBRIET TABS 267MG	5	PA
ESBRIET TABS 801MG	5	PA
OFEV CAPS 100MG	5	PA
OFEV CAPS 150MG	5	PA
<i>Cystic Fibrosis Transmembrane Conductance Regulator Modulators</i>		
KALYDECO PACK 50MG	5	QL (60 EA per 30 days) PA
KALYDECO PACK 75MG	5	QL (60 EA per 30 days) PA
KALYDECO TABS 150MG	5	QL (60 EA per 30 days) PA

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ORKAMBI PACK 125MG; 100MG	5	QL (120 EA per 30 days) PA
ORKAMBI PACK 188MG; 150MG	5	QL (120 EA per 30 days) PA
ORKAMBI TABS 125MG; 100MG	5	QL (120 EA per 30 days) PA
ORKAMBI TABS 125MG; 200MG	5	QL (120 EA per 30 days) PA
SYMDEKO TBPK 150MG; 100MG	5	PA
<b>Mucolytic Agents</b>		
HYPER-SAL NEBU 7%	4	B/D
HYPERSAL NEBU 7%	4	B/D
<i>nebusal nebu 3%</i>	1	B/D
<i>pulmosal nebu 7%</i>	1	B/D
PULMOZYME SOLN 1MG/ML	5	B/D
<i>sodium chloride nebu 0.9%</i>	1	B/D
<i>sodium chloride nebu 10%</i>	1	B/D
<i>sodium chloride nebu 3%</i>	1	B/D
<i>sodium chloride nebu 7%</i>	1	B/D
<b>Phosphodiesterase Type 4 Inhibitors</b>		
DALIRESP TABS 250MCG	4	
DALIRESP TABS 500MCG	4	
<b>Respiratory Tract Agents, Miscellaneous</b>		
ARALAST NP INJ 1000MG	5	HI; *
ARALAST NP INJ 500MG	5	HI; *
GLASSIA INJ 1000MG/50ML	5	HI; *
PROLASTIN-C INJ 1000MG/20ML	5	HI
PROLASTIN-C INJ 1000MG	5	HI; *
XOLAIR INJ 150MG	5	*
ZEMAIRA INJ 1000MG	5	HI; *
<b>Vasodilating Agents</b>		
ADEMPAS TABS 0.5MG	5	PA
ADEMPAS TABS 1.5MG	5	PA
ADEMPAS TABS 1MG	5	PA
ADEMPAS TABS 2.5MG	5	PA
ADEMPAS TABS 2MG	5	PA
<i>epoprostenol sodium inj 0.5mg</i>	1	HI; *
<i>epoprostenol sodium inj 1.5mg</i>	1	HI; *
FLOLAN INJ 0.5MG	4	HI; *
FLOLAN INJ 1.5MG	4	HI; *
LETAIRIS TABS 10MG	5	
LETAIRIS TABS 5MG	5	
OPSUMIT TABS 10MG	5	PA
ORENITRAM TBCR 0.125MG	4	
ORENITRAM TBCR 0.25MG	5	
ORENITRAM TBCR 1MG	5	
ORENITRAM TBCR 2.5MG	5	
ORENITRAM TBCR 5MG	5	
REMODULIN INJ 10MG/ML	5	B/D HI; *
REMODULIN INJ 1MG/ML	5	B/D HI; *
REMODULIN INJ 2.5MG/ML	5	B/D HI; *
REMODULIN INJ 5MG/ML	5	B/D HI; *

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Drug Name	Drug Tier	Requirements/Limits
TRACLEER TABS 125MG	5	
TRACLEER TABS 62.5MG	5	
TRACLEER TBSO 32MG	5	
TYVASO REFILL SOLN 0.6MG/ML	5	B/D
TYVASO STARTER SOLN 0.6MG/ML	5	B/D
TYVASO SOLN 0.6MG/ML	5	B/D
UPTRAVI TABS 1000MCG	5	
UPTRAVI TABS 1200MCG	5	
UPTRAVI TABS 1400MCG	5	
UPTRAVI TABS 1600MCG	5	
UPTRAVI TABS 200MCG	5	
UPTRAVI TABS 400MCG	5	
UPTRAVI TABS 600MCG	5	
UPTRAVI TABS 800MCG	5	
UPTRAVI TBPk 0	5	
VELETRI INJ 0.5MG	3	HI; *
VELETRI INJ 1.5MG	3	HI; *
VENTAVIS SOLN 10MCG/ML	5	B/D
VENTAVIS SOLN 20MCG/ML	5	B/D

### Skin and Mucous Membrane Preparations

#### Anti-infectives

ACANYA GEL 2.5%; 1.2%	4	
<i>acyclovir oint 5%</i>	2	
AKTIPAK PACK 5%; 3%	4	
ALTABAX OINT 1%	4	
AVC CREA 15%	4	
BACTROBAN NASAL OINT 2%	4	
BACTROBAN CREA 2%	4	
BACTROBAN OINT 2%	4	
BENZACLIN WITH PUMP GEL 5%; 1%	4	
BENZACLIN GEL 5%; 1%	4	
BENZAMYCIN GEL 5%; 3%	4	
<i>benzepro short contact foam 9.8%</i>	2	
<i>benzepro foam 5.3%</i>	2	
<i>benzoyl peroxide foam 9.8%</i>	2	
<i>benzoyl peroxide gel 5%</i>	1	
BENZOYL PEROXIDE GEL 6.5%	4	
<i>bp foam foam 5.3%</i>	2	
<i>bp foam foam 9.8%</i>	2	
<i>bp wash liqd 2.5%</i>	2	
<i>bp wash liqd 7%</i>	2	
CENTANY OINT 2%	4	
<i>ciclodan crea 0.77%</i>	2	
<i>ciclodan soln 8%</i>	2	
<i>ciclopirox nail lacquer soln 8%</i>	1	
<i>ciclopirox olamine crea 0.77%</i>	2	
<i>ciclopirox gel 0.77%</i>	2	
<i>ciclopirox sham 1%</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>ciclopirox susp 0.77%</i>	2	
CLEOCIN-T GEL 1%	4	
CLEOCIN-T LOTN 1%	4	
CLEOCIN-T SOLN 1%	4	
CLEOCIN-T SWAB 1%	4	
CLEOCIN CREA 2%	4	
CLEOCIN SUPP 100MG	3	
<i>clindacin etz pledgets swab 1%</i>	2	
CLINDACIN PAC KIT 0; 1%	4	
CLINDACIN-P SWAB 1%	4	
CLINDAGEL GEL 1%	4	
<i>clindamax gel 1%</i>	2	
<i>clindamycin phosphate crea 2%</i>	1	
<i>clindamycin phosphate foam 1%</i>	2	
<i>clindamycin phosphate gel 1%</i>	1	
<i>clindamycin phosphate lotn 1%</i>	1	
<i>clindamycin phosphate soln 1%</i>	1	
<i>clindamycin phosphate swab 1%</i>	1	
<i>clindamycin/benzoyl peroxide gel 5%; 1%</i>	2	
<i>clindamycin/benzoyl peroxide gel 5%; 1.2%</i>	1	
CLINDESSE CREA 2%	4	
<i>clotrimazole/betamethasone dipropionate crea 0.05%; 1%</i>	1	
<i>clotrimazole/betamethasone dipropionate lotn 0.05%; 1%</i>	1	
<i>clotrimazole crea 1%</i>	1	
<i>clotrimazole lozg 10mg</i>	1	
<i>clotrimazole soln 1%</i>	1	
<i>crotan lotn 10%</i>	2	
DENAVIR CREA 1%	4	
DUAC GEL 5%; 1.2%	4	
<i>econazole nitrate crea 1%</i>	2	
ELIMITE CREA 5%	4	
ERTACZO CREA 2%	4	
ERYGEL GEL 2%	4	
<i>ery pads 2%</i>	1	
<i>erythromycin/benzoyl peroxide gel 5%; 3%</i>	1	
<i>erythromycin gel 2%</i>	1	
<i>erythromycin pads 2%</i>	1	
<i>erythromycin soln 2%</i>	1	
EURAX CREA 10%	3	
EURAX LOTN 10%	3	
EVOCLIN FOAM 1%	4	
EXELDERM CREA 1%	4	
EXELDERM SOLN 1%	4	
EXTINA FOAM 2%	4	
<i>gentamicin sulfate crea 0.1%</i>	1	
<i>gentamicin sulfate oint 0.1%</i>	1	
GYNAZOLE-1 CREA 2%	4	
JUBLIA SOLN 10%	4	

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Drug Name	Drug Tier	Requirements/Limits
KERYDIN SOLN 5%	4	
<i>ketoconazole crea 2%</i>	1	
<i>ketoconazole foam 2%</i>	2	
<i>ketoconazole sham 2%</i>	1	
<i>ketodan foam 2%</i>	2	
KLARON LOTN 10%	4	
<i>lindane lotn 1%</i>	2	
<i>lindane sham 1%</i>	2	
LOPROX SHAMPOO SHAM 1%	4	
LOPROX CREA 0.77%	4	
LOPROX SUSP 0.77%	4	
LOTRISONE CREA 0.05%; 1%	4	
LUZU CREA 1%	4	
<i>mafenide acetate pack 5%</i>	2	
<i>mafenide acetate pack 5%</i>	2	
<i>malathion lotn 0.5%</i>	2	
MENTAX CREA 1%	4	
METROCREAM CREA 0.75%	4	
METROGEL-VAGINAL GEL 0.75%	4	
METROGEL GEL 1%	4	
METROLOTION LOTN 0.75%	4	
<i>metronidazole vaginal gel 0.75%</i>	1	
<i>metronidazole crea 0.75%</i>	1	
<i>metronidazole gel 0.75%</i>	1	
<i>metronidazole gel 1%</i>	1	
<i>metronidazole lotn 0.75%</i>	1	
<i>miconazole 3 supp 200mg</i>	1	
<i>mupirocin calcium crea 2%</i>	1	
<i>mupirocin crea 2%</i>	1	
<i>mupirocin oint 2%</i>	1	
<i>naftifine hcl crea 1%</i>	2	
<i>naftifine hydrochloride crea 2%</i>	2	
NAFTIN CREA 2%	4	
NAFTIN GEL 1%	4	
NAFTIN GEL 2%	4	
NATROBA SUSP 0.9%	4	
<i>neomycin/polymyxin b sulfates soln 40mg/ml; 200000unit/ml</i>	1	
NEOSPORIN GU IRRIGANT SOLN 40MG/ML; 200000UNIT/ML	4	
<i>neuac gel 5%; 1.2%</i>	2	
NIZORAL SHAM 2%	4	
NORITATE CREA 1%	4	
NUVESSA GEL 1.3%	4	
<i>nyamyc powd 100000unit/gm</i>	1	
<i>nyata powd 100000unit/gm</i>	1	
<i>nystatin crea 100000unit/gm</i>	1	
<i>nystatin oint 100000unit/gm</i>	1	
<i>nystatin powd 100000unit/gm</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>nystop powd 100000unit/gm</i>	1	
ONEXTON GEL 3.75%; 1.2%	4	
ORAVIG TABS 50MG	4	
OVIDE LOTN 0.5%	4	
<i>oxiconazole nitrate crea 1%</i>	2	
OXISTAT CREA 1%	4	
OXISTAT LOTN 1%	4	
PENLAC NAIL LACQUER SOLN 8%	4	
<i>permethrin crea 5%</i>	1	
RIAX FOAM 5.5%	4	
RIAX FOAM 9.5%	4	
<i>rosadan crea 0.75%</i>	2	
<i>rosadan gel 0.75%</i>	2	
<i>selenium sulfide shampoo sham 2.25%</i>	1	
<i>selenium sulfide lotn 2.5%</i>	1	
<i>selenium sulfide sham 2.25%</i>	1	
<i>selenium sulfide sham 2.3%</i>	2	
SILVADENE CREA 1%	4	
<i>silver sulfadiazine crea 1%</i>	1	
SKLICE LOTN 0.5%	4	
<i>sodium sulfacetamide lotn 10%</i>	1	
SOOLANTRA CREA 1%	4	
<i>ssd crea 1%</i>	1	
<i>sulfacetamide sodium lotn 10%</i>	1	
SULFAMYLON CREA 85MG/GM	4	
SULFAMYLON PACK 5%	4	
TERAZOL 3 CREA 0.8%	4	
TERAZOL 7 CREA 0.4%	4	
<i>terconazole crea 0.4%</i>	2	
<i>terconazole crea 0.8%</i>	2	
<i>terconazole supp 80mg</i>	2	
<i>vandazole gel 0.75%</i>	1	
VUSION OINT 0.25%; 81.35%; 15%	4	
XERESE CREA 5%; 1%	4	
<i>zazole crea 0.8%</i>	2	
ZAZOLE SUPP 80MG	4	
ZOVIRAX CREA 5%	4	
ZOVIRAX OINT 5%	4	
<b>Anti-inflammatory Agents</b>		
ACLOVATE CREA 0.05%	4	
ALA SCALP LOTN 2%	4	
<i>ala-cort crea 1%</i>	1	
<i>ala-cort crea 2.5%</i>	1	
<i>alclometasone dipropionate crea 0.05%</i>	2	
<i>alclometasone dipropionate oint 0.05%</i>	2	
<i>amcinonide crea 0.1%</i>	2	
<i>amcinonide lotn 0.1%</i>	2	
<i>amcinonide oint 0.1%</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
ANUSOL-HC CREA 2.5%	4	
<i>apexicon e crea 0.05%</i>	2	
<i>augmented betamethasone dipropionate crea 0.05%</i>	1	
<i>augmented betamethasone dipropionate gel 0.05%</i>	1	
<i>augmented betamethasone dipropionate lotn 0.05%</i>	1	
<i>augmented betamethasone dipropionate oint 0.05%</i>	1	
BENZOLYL PEROXIDE FORTE- HC LOTN 7.5%; 1%	4	
<i>betamethasone dipropionate crea 0.05%</i>	1	
<i>betamethasone dipropionate lotn 0.05%</i>	1	
<i>betamethasone dipropionate oint 0.05%</i>	1	
<i>betamethasone valerate crea 0.1%</i>	1	
<i>betamethasone valerate foam 0.12%</i>	2	
<i>betamethasone valerate lotn 0.1%</i>	1	
<i>betamethasone valerate oint 0.1%</i>	1	
<i>calcipotriene/betamethasone dipropionate oint 0.064%; 0.005%</i>	2	
CAPEX SHAM 0.01%	3	
<i>clobetasol propionate e crea 0.05%</i>	2	
<i>clobetasol propionate emollient crea 0.05%</i>	2	
<i>clobetasol propionate emollient foam 0.05%</i>	2	
<i>clobetasol propionate crea 0.05%</i>	2	
<i>clobetasol propionate foam 0.05%</i>	2	
<i>clobetasol propionate foam 0.05%</i>	2	
<i>clobetasol propionate gel 0.05%</i>	1	
<i>clobetasol propionate liqd 0.05%</i>	2	
<i>clobetasol propionate lotn 0.05%</i>	2	
<i>clobetasol propionate oint 0.05%</i>	2	
<i>clobetasol propionate sham 0.05%</i>	2	
<i>clobetasol propionate soln 0.05%</i>	1	
CLOBEX LIQD 0.05%	4	
CLOBEX LOTN 0.05%	4	
CLOBEX SHAM 0.05%	4	
<i>clocortolone pivalate pump crea 0.1%</i>	2	
<i>clocortolone pivalate crea 0.1%</i>	2	
<i>clodan sham 0.05%</i>	2	
CLODERM PUMP CREA 0.1%	4	
CLODERM CREA 0.1%	4	
<i>colocort enem 100mg/60ml</i>	1	
CORDRAN TAPE TAPE 4MCG/SQCM	3	
CORDRAN TAPE 4MCG/SQCM	3	
CORMAX SCALP APPLICATION SOLN 0.05%	4	
CORTENEMA ENEM 100MG/60ML	4	
CORTIFOAM FOAM 10%	3	
CORTISPORIN CREA 0.5%; 3.5MG/GM; 10000UNIT/GM	4	
CORTISPORIN OINT 400UNIT/GM; 1%; 0.5%; 5000UNIT/GM	3	
CUTIVATE CREA 0.05%	4	
CUTIVATE LOTN 0.05%	4	

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Drug Name	Drug Tier	Requirements/Limits
DERMA-SMOOTH/FS BODY OIL 0.01%	4	
DERMA-SMOOTH/FS SCALP OIL 0.01%	4	
DERMATOP CREA 0.1%	4	
DERMATOP OINT 0.1%	4	
DESONATE GEL 0.05%	4	
<i>desonide crea 0.05%</i>	1	
<i>desonide lotn 0.05%</i>	1	
<i>desonide oint 0.05%</i>	1	
<i>desowen crea 0.05%</i>	1	
<i>desowen lotn 0.05%</i>	1	
<i>desoximetasone crea 0.05%</i>	1	
<i>desoximetasone crea 0.25%</i>	1	
<i>desoximetasone gel 0.05%</i>	1	
<i>desoximetasone liqd 0.25%</i>	2	
<i>desoximetasone oint 0.05%</i>	1	
<i>desoximetasone oint 0.25%</i>	1	
<i>diflorasone diacetate crea 0.05%</i>	2	
<i>diflorasone diacetate oint 0.05%</i>	2	
DIPROLENE AF CREA 0.05%	4	
DIPROLENE LOTN 0.05%	4	
DIPROLENE OINT 0.05%	4	
ELOCON CREA 0.1%	4	
ELOCON LOTN 0.1%	4	
ELOCON OINT 0.1%	4	
ENSTILAR FOAM 0.064%; 0.005%	4	
EPIFOAM FOAM 1%; 1%	4	
EUCRISA OINT 2%	4	
<i>fluocinolone acetonide body oil 0.01%</i>	1	
<i>fluocinolone acetonide scalp oil 0.01%</i>	1	
<i>fluocinolone acetonide crea 0.01%</i>	1	
<i>fluocinolone acetonide crea 0.025%</i>	1	
<i>fluocinolone acetonide oint 0.025%</i>	1	
<i>fluocinolone acetonide soln 0.01%</i>	1	
<i>fluocinonide emulsified base crea 0.05%</i>	1	
<i>fluocinonide crea 0.05%</i>	1	
<i>fluocinonide crea 0.1%</i>	2	
<i>fluocinonide gel 0.05%</i>	1	
<i>fluocinonide oint 0.05%</i>	1	
<i>fluocinonide soln 0.05%</i>	1	
<i>flurandrenolide crea 0.05%</i>	1	
<i>flurandrenolide lotn 0.05%</i>	2	
<i>flurandrenolide oint 0.05%</i>	1	
<i>fluticasone propionate crea 0.05%</i>	2	
<i>fluticasone propionate lotn 0.05%</i>	2	
<i>fluticasone propionate oint 0.005%</i>	2	
<i>halobetasol propionate crea 0.05%</i>	1	
<i>halobetasol propionate oint 0.05%</i>	1	
HALOG CREA 0.1%	4	

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Drug Name	Drug Tier	Requirements/Limits
HALOG OINT 0.1%	4	
<i>hydrocortisone acetate/lidocaine hydrochloride crea 1%; 1%</i>	2	
<i>hydrocortisone acetate/lidocaine hydrochloride crea 1%; 1%</i>	2	
<i>hydrocortisone butyrate (lipid) crea 0.1%</i>	1	
<i>hydrocortisone butyrate (lipophilic) crea 0.1%</i>	1	
<i>hydrocortisone butyrate crea 0.1%</i>	1	
<i>hydrocortisone butyrate lotn 0.1%</i>	2	
<i>hydrocortisone butyrate oint 0.1%</i>	1	
<i>hydrocortisone butyrate soln 0.1%</i>	1	
<i>hydrocortisone in absorbase oint 1%</i>	1	
<i>hydrocortisone valerate crea 0.2%</i>	1	
<i>hydrocortisone valerate oint 0.2%</i>	1	
<i>hydrocortisone crea 1%</i>	1	
<i>hydrocortisone crea 2.5%</i>	1	
<i>hydrocortisone crea 1%</i>	1	
<i>hydrocortisone crea 2.5%</i>	1	
<i>hydrocortisone enem 100mg/60ml</i>	1	
<i>hydrocortisone lotn 2.5%</i>	1	
<i>hydrocortisone oint 1%</i>	1	
<i>hydrocortisone oint 2.5%</i>	1	
IMPOYZ CREA 0.025%	4	
KENALOG AERS 0.147MG/GM	4	
LAC-HYDRIN CREA 12%	4	
LOCOID LIPOCREAM CREA 0.1%	4	
LOCOID CREA 0.1%	4	
LOCOID LOTN 0.1%	4	
LOCOID OINT 0.1%	4	
LOCOID SOLN 0.1%	4	
<i>lokara lotn 0.05%</i>	1	
LUXIQ FOAM 0.12%	4	
MICORT-HC CREA 2.5%	4	
<i>mometasone furoate crea 0.1%</i>	1	
<i>mometasone furoate oint 0.1%</i>	1	
<i>mometasone furoate soln 0.1%</i>	1	
NEO-SYNALAR CREA 0.025%; 0.5%	4	
NOLIX CREA 0.05%	4	
NOLIX LOTN 0.05%	4	
<i>nystatin/triamcinolone acetonide crea 100000unit/gm; 1mg/gm</i>	1	
<i>nystatin/triamcinolone acetonide crea 100000unit/gm; 1mg/gm</i>	1	
<i>nystatin/triamcinolone acetonide crea 100000unit/gm; 1mg/gm</i>	1	
<i>nystatin/triamcinolone crea 100000unit/gm; 1mg/gm</i>	1	
<i>nystatin/triamcinolone oint 100000unit/gm; 0.1%</i>	1	
OLUX-E FOAM 0.05%	4	
OLUX FOAM 0.05%	4	
<i>oralone dental paste pste 0.1%</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
PANDEL CREA 0.1%	4	
PRAMOSONE CREA 1%; 1%	4	
PRAMOSONE LOTN 1%; 1%	4	
PRAMOSONE LOTN 2.5%; 1%	4	
<i>prednicarbate crea 0.1%</i>	2	
<i>prednicarbate oint 0.1%</i>	2	
<i>procto-med hc crea 2.5%</i>	1	
<i>procto-pak crea 1%</i>	1	
PROCTOCORT CREA 1%	4	
<i>proctosol hc crea 2.5%</i>	1	
<i>proctozone-hc crea 2.5%</i>	1	
PSORCON CREA 0.05%	4	
SERNIVO EMUL 0.05%	4	
SYNALAR CREAM KIT KIT 0.025%	4	
SYNALAR OINTMENT KIT KIT 0.025%	4	
SYNALAR TS KIT 0.01%	4	
SYNALAR CREA 0.025%	4	
SYNALAR OINT 0.025%	4	
SYNALAR SOLN 0.01%	4	
TACLONEX OINT 0.064%; 0.005%	5	
TACLONEX SUSP 0.064%; 0.005%	4	
TEMOVATE E CREA 0.05%	4	
TEMOVATE CREA 0.05%	4	
TEMOVATE GEL 0.05%	4	
TEMOVATE OINT 0.05%	4	
TEMOVATE SOLN 0.05%	4	
TEXACORT SOLN 2.5%	3	
TOPICORT CREA 0.05%	4	
TOPICORT CREA 0.25%	4	
TOPICORT GEL 0.05%	4	
TOPICORT LIQD 0.25%	4	
TOPICORT OINT 0.05%	4	
TOPICORT OINT 0.25%	4	
<i>triamcinolone acetamide dental paste pste 0.1%</i>	1	
<i>triamcinolone acetamide aers 0.147mg/gm</i>	2	
<i>triamcinolone acetamide crea 0.025%</i>	1	
<i>triamcinolone acetamide crea 0.1%</i>	1	
<i>triamcinolone acetamide crea 0.5%</i>	1	
<i>triamcinolone acetamide lotn 0.025%</i>	1	
<i>triamcinolone acetamide lotn 0.1%</i>	1	
<i>triamcinolone acetamide oint 0.025%</i>	1	
<i>triamcinolone acetamide oint 0.1%</i>	1	
<i>triamcinolone acetamide oint 0.5%</i>	1	
TRIANEX OINT 0.05%	3	
<i>triderm crea 0.1%</i>	1	
<i>triderm crea 0.5%</i>	2	
TRIDESILON CREA 0.05%	4	
UCERIS FOAM 2MG/ACT	4	

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Drug Name	Drug Tier	Requirements/Limits
ULTRAVATE CREA 0.05%	4	
ULTRAVATE LOTN 0.05%	5	
ULTRAVATE OINT 0.05%	4	
VANOS CREA 0.1%	4	
WESTCORT OINT 0.2%	4	
<b>Antipruritics and Local Anesthetics</b>		
ANALPRAM-HC CREA 1%; 1%	4	
ANALPRAM-HC LOTN 2.5%; 1%	4	
<i>doxepin hydrochloride crea 5%</i>	2	
EMLA CREA 2.5%; 2.5%	4	
<i>flexin ptch 0.038%; 5%</i>	2	
<i>glydo gel 2%</i>	1	
<i>hydrocortisone acetate/pramoxine crea 1%; 1%</i>	2	
<i>lido-k lotn 3%</i>	2	
<i>lidocaine hcl jelly gel 2%</i>	1	
<i>lidocaine hcl gel 2%</i>	1	
<i>lidocaine hcl lotn 3%</i>	2	
<i>lidocaine hcl soln 4%</i>	1	
<i>lidocaine hydrochloride lotn 3%</i>	2	
<i>lidocaine-prilocaine-cream base crea 2.5%; 2.5%</i>	1	
<i>lidocaine/prilocaine crea 2.5%; 2.5%</i>	1	
<i>lidocaine oint 5%</i>	1	
<i>lidocaine ptch 5%</i>	1	PA
LIDODERM PTCH 5%	4	PA
LIDOTREX GEL 2%	4	PA
<i>phenazopyridine hcl tabs 100mg</i>	2	
<i>phenazopyridine hcl tabs 200mg</i>	2	
<i>phenazo tabs 200mg</i>	2	
PLIAGLIS CREA 7%; 7%	4	
PROCTOFOAM HC FOAM 1%; 1%	4	
PRUDOXIN CREA 5%	4	
PYRIDIUM TABS 100MG	4	
PYRIDIUM TABS 200MG	4	
SYNERA PTCH 70MG; 70MG	4	
XYLOCAINE SOLN 4%	4	
ZONALON CREA 5%	4	
<b>Astringents</b>		
METOPIRONE CAPS 250MG	4	
<b>Cell Stimulants and Proliferants</b>		
ATRALIN GEL 0.05%	4	
<i>avita crea 0.025%</i>	1	
<i>avita gel 0.025%</i>	1	
KEPIVANCE INJ 6.25MG	5	*
RETIN-A MICRO PUMP GEL 0.04%	1	
RETIN-A MICRO PUMP GEL 0.08%	4	
RETIN-A MICRO PUMP GEL 0.1%	1	
RETIN-A MICRO GEL 0.04%	1	
RETIN-A MICRO GEL 0.06%	4	

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Drug Name	Drug Tier	Requirements/Limits
RETIN-A MICRO GEL 0.1%	1	
RETIN-A CREA 0.025%	1	
RETIN-A CREA 0.05%	1	
RETIN-A CREA 0.1%	1	
RETIN-A GEL 0.01%	1	
RETIN-A GEL 0.025%	1	
TRETIN-X CREA 0.038%	4	
TRETIN-X CREA 0.075%	4	
<i>tretinoin microsphere pump gel 0.04%</i>	1	
<i>tretinoin microsphere pump gel 0.1%</i>	1	
<i>tretinoin microsphere gel 0.04%</i>	1	
<i>tretinoin microsphere gel 0.1%</i>	1	
<i>tretinoin crea 0.025%</i>	1	
<i>tretinoin crea 0.05%</i>	1	
<i>tretinoin crea 0.1%</i>	1	
<i>tretinoin gel 0.01%</i>	1	
<i>tretinoin gel 0.025%</i>	1	
<i>tretinoin gel 0.05%</i>	1	
<b>Depigmenting and Pigmenting Agents</b>		
8-MOP CAPS 10MG	5	
<i>methoxsalen caps 10mg</i>	5	
OXSORALEN ULTRA CAPS 10MG	5	
UVADEX INJ 20MCG/ML	3	
<b>Emollients, Demulcents, and Protectants</b>		
<i>ammonium lactate crea 12%</i>	1	
<i>ammonium lactate lotn 12%</i>	1	
LAC-HYDRIN LOTN 12%	4	
<b>Keratolytic Agents</b>		
SALITECH LOTN 5%	4	
<b>Skin and Mucous Membrane Agents, Misc</b>		
ABSORICA CAPS 10MG	4	*
ABSORICA CAPS 20MG	4	*
ABSORICA CAPS 25MG	4	*
ABSORICA CAPS 30MG	4	*
ABSORICA CAPS 35MG	4	*
ABSORICA CAPS 40MG	4	*
<i>acitretin caps 10mg</i>	1	
<i>acitretin caps 17.5mg</i>	1	
<i>acitretin caps 25mg</i>	1	
ACZONE GEL 5%	4	
ACZONE GEL 7.5%	4	
<i>adapalene/benzoyl peroxide gel 0.1%; 2.5%</i>	2	
<i>adapalene crea 0.1%</i>	1	
<i>adapalene gel 0.1%</i>	1	
<i>adapalene gel 0.3%</i>	2	
ADAPALENE SOLN 0.1%	5	
ALDARA CREA 5%	4	
<i>amnestem caps 10mg</i>	1	*

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document



Drug Name	Drug Tier	Requirements/Limits
<i>amneestem caps 20mg</i>	1	*
<i>amneestem caps 40mg</i>	1	*
AZELEX CREA 20%	3	
<i>calcipotriene crea 0.005%</i>	1	
<i>calcipotriene oint 0.005%</i>	1	
<i>calcipotriene soln 0.005%</i>	1	
<i>calcitrene oint 0.005%</i>	1	
<i>calcitriol oint 3mcg/gm</i>	2	
CARAC CREA 0.5%	3	
<i>claravis caps 10mg</i>	1	*
<i>claravis caps 20mg</i>	1	*
<i>claravis caps 30mg</i>	1	*
<i>claravis caps 40mg</i>	1	*
<i>clindamycin phosphate/tretinoin gel 1.2%; 0.025%</i>	2	
CONDYLOX GEL 0.5%	3	
CONDYLOX SOLN 0.5%	4	
COSENTYX SENSOREADY PEN INJ 150MG/ML	5	PA
COSENTYX INJ 150MG/ML	5	PA
<i>dapsone gel 5%</i>	2	
<i>diclofenac sodium gel 1%</i>	2	
<i>diclofenac sodium gel 3%</i>	2	
<i>diclofenac sodium soln 1.5%</i>	2	
<i>differin crea 0.1%</i>	1	
DIFFERIN GEL 0.1%	4	
DIFFERIN GEL 0.3%	4	
DIFFERIN LOTN 0.1%	3	
DOVONEX CREA 0.005%	4	
<i>doxycycline cpdr 40mg</i>	4	
DUPIXENT INJ 300MG/2ML	5	
EFUDEX CREA 5%	4	
ELIDEL CREA 1%	3	
EPIDUO FORTE GEL 0.3%; 2.5%	4	
EPIDUO GEL 0.1%; 2.5%	4	
FABIOR FOAM 0.1%	4	
FINACEA FOAM 15%	3	
FINACEA GEL 15%	4	
FLECTOR PTCH 1.3%	4	PA
<i>fluorouracil crea 0.5%</i>	2	
<i>fluorouracil crea 5%</i>	1	
<i>fluorouracil soln 2%</i>	1	
<i>fluorouracil soln 5%</i>	1	
ILUMYA INJ 100MG/ML	5	
<i>imiquimod crea 5%</i>	1	
<i>isotretinoin caps 10mg</i>	1	
<i>isotretinoin caps 20mg</i>	1	
<i>isotretinoin caps 30mg</i>	1	
<i>isotretinoin caps 40mg</i>	1	
<i>klofensaid ii soln 1.5%</i>	2	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
LEVULAN KERASTICK SOLR 20%	4	
<i>minocycline hcl er tb24 135mg</i>	2	
<i>minocycline hcl er tb24 45mg</i>	2	
<i>minocycline hcl er tb24 90mg</i>	2	
<i>minocycline hydrochlorideer tb24 115mg</i>	2	
<i>minocycline hydrochlorideer tb24 65mg</i>	2	
MIRVASO GEL 0.33%	4	
<i>myorisan caps 10mg</i>	1	*
<i>myorisan caps 20mg</i>	1	*
<i>myorisan caps 30mg</i>	1	*
<i>myorisan caps 40mg</i>	1	*
ORACEA CPDR 40MG	4	
PANRETIN GEL 0.1%	5	
PENNSAID SOLN 2%	4	
PICATO GEL 0.015%	3	
PICATO GEL 0.05%	3	
PLIXDA PADS 0.1%	4	
<i>podofilox soln 0.5%</i>	1	
PROTOPIC OINT 0.03%	4	
PROTOPIC OINT 0.1%	4	
QBREXZA PADS 2.4%	4	
RECTIV OINT 0.4%	3	
REGRANEX GEL 0.01%	5	
RHOFADE CREA 1%	4	
SANTYL OINT 250UNIT/GM	3	
SILIQ INJ 210MG/1.5ML	5	
SOLARAZE GEL 3%	4	
SOLODYN TB24 105MG	4	
SOLODYN TB24 115MG	4	
SOLODYN TB24 55MG	4	
SOLODYN TB24 65MG	4	
SOLODYN TB24 80MG	4	
SORIATANE CAPS 10MG	5	
SORIATANE CAPS 17.5MG	5	
SORIATANE CAPS 25MG	5	
SORILUX FOAM 0.005%	4	
STELARA INJ 45MG/0.5ML	5	PA
STELARA INJ 45MG/0.5ML	5	PA
STELARA INJ 90MG/ML	5	PA
<i>tacrolimus oint 0.03%</i>	1	
<i>tacrolimus oint 0.1%</i>	1	
TALTZ INJ 80MG/ML	5	PA
TALTZ INJ 80MG/ML	5	PA
TARGRETIN GEL 1%	5	
<i>tazarotene crea 0.1%</i>	4	
TAZORAC CREA 0.05%	1	
TAZORAC CREA 0.1%	4	
TAZORAC GEL 0.05%	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
TAZORAC GEL 0.1%	4	
TOLAK CREA 4%	4	
TREMFYA INJ 100MG/ML	5	PA
VALCHLOR GEL 0.016%	5	
VECTICAL OINT 3MCG/GM	4	
VELTIN GEL 1.2%; 0.025%	4	
VEREGEN OINT 15%	4	
VOLTAREN GEL 1%	4	
XIMINO CP24 135MG	4	
XIMINO CP24 45MG	4	
XIMINO CP24 90MG	4	
<i>zenatane caps 10mg</i>	1	*
<i>zenatane caps 20mg</i>	1	*
<i>zenatane caps 30mg</i>	1	*
<i>zenatane caps 40mg</i>	1	*
ZIANA GEL 1.2%; 0.025%	4	
ZYCLARA PUMP CREA 2.5%	4	
ZYCLARA PUMP CREA 3.75%	4	
ZYCLARA CREA 3.75%	4	

### Smooth Muscle Relaxants

#### *Genitourinary Smooth Muscle Relaxants*

<i>darifenacin hydrobromide er tb24 15mg</i>	2	ST
<i>darifenacin hydrobromide er tb24 7.5mg</i>	2	ST
DETROL LA CP24 2MG	4	ST
DETROL LA CP24 4MG	4	ST
DETROL TABS 1MG	4	ST
DETROL TABS 2MG	4	ST
DITROPAN XL TB24 10MG	4	ST
DITROPAN XL TB24 15MG	4	ST
DITROPAN XL TB24 5MG	4	ST
ENABLEX TB24 15MG	4	ST
ENABLEX TB24 7.5MG	4	ST
<i>flavoxate hcl tabs 100mg</i>	1	
GELNIQUE GEL 10%	4	ST
GELNIQUE GEL 3%	4	ST
MYRBETRIQ TB24 25MG	4	ST
MYRBETRIQ TB24 50MG	4	ST
<i>oxybutynin chloride er tb24 10mg</i>	1	
<i>oxybutynin chloride er tb24 15mg</i>	1	
<i>oxybutynin chloride er tb24 5mg</i>	1	
<i>oxybutynin chloride syrup 5mg/5ml</i>	1	
<i>oxybutynin chloride tabs 5mg</i>	1	
OXYTROL PTTW 3.9MG/24HR	4	ST
<i>tolterodine tartrate er cp24 2mg</i>	1	
<i>tolterodine tartrate er cp24 4mg</i>	1	
<i>tolterodine tartrate tabs 1mg</i>	1	
<i>tolterodine tartrate tabs 2mg</i>	1	
TOVIAZ TB24 4MG	4	ST

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
TOVIAZ TB24 8MG	4	ST
<i>trosipium chloride er cp24 60mg</i>	1	
<i>trosipium chloride tabs 20mg</i>	1	
VESICARE TABS 10MG	4	ST
VESICARE TABS 5MG	4	ST
<b>Respiratory Smooth Muscle Relaxants</b>		
<i>aminophylline inj 25mg/ml</i>	1	HI; *
ELIXOPHYLLIN ELIX 80MG/15ML	3	
THEO-24 CP24 0; 100MG	4	
THEO-24 CP24 200MG	4	
THEO-24 CP24 300MG	4	
THEO-24 CP24 400MG	4	
<i>theochron tb12 100mg</i>	1	
<i>theochron tb12 200mg</i>	1	
<i>theochron tb12 300mg</i>	1	
<i>theophylline cr tb12 100mg</i>	1	
<i>theophylline cr tb12 200mg</i>	1	
<i>theophylline er tb12 300mg</i>	1	
<i>theophylline er tb12 450mg</i>	1	
<i>theophylline er tb24 400mg</i>	1	
<i>theophylline er tb24 600mg</i>	1	
<i>theophylline/d5w inj 5%; 0.8mg/ml</i>	1	HI; *
<i>theophylline soln 80mg/15ml</i>	1	
<b>Vitamins</b>		
<b>Multivitamin Preparations</b>		
<i>fluoride chew 0.25mg</i>	2	
<i>ludent chew 0.25mg</i>	2	
<i>multivitamin with fluoride soln 35mg/ml; 400unit/ml; 2mcg/ml; 8mg/ml; 0.4mg/ml; 0.6mg/ml; 0.25mg/ml; 0.5mg/ml; 5unit/ml; 1500unit/ml</i>	2	
MULTIVITAMIN/FLUORIDE CHEW 60MG; 400UNIT; 4.5MCG; 0.3MG; 13.5MG; 1.05MG; 1.2MG; 0; 0.25MG; 1.05MG; 2500UNIT; 15UNIT	4	
MULTIVITAMIN/FLUORIDE CHEW 60MG; 400UNIT; 4.5MCG; 0.3MG; 13.5MG; 1.05MG; 1.2MG; 0; 0.5MG; 1.05MG; 2500UNIT; 15UNIT	4	
MULTIVITAMIN/FLUORIDE CHEW 60MG; 400UNIT; 4.5MCG; 0.3MG; 13.5MG; 1.05MG; 1.2MG; 0; 1MG; 1.05MG; 2500UNIT; 15UNIT	4	
POLY-VI-FLOR/IRON CHEW 0; 10MG; 200MCG; 0; 0; 0; 0.5MG; 0; 0; 0; 0	4	
POLY-VI-FLOR/IRON SUSP 0; 7MG/ML; 200MCG/ML; 0; 0; 0; 0.25MG/ML; 0; 0; 0; 0	4	
POLY-VI-FLOR CHEW 0; 200MCG; 0; 0; 0; 0.25MG; 0; 0; 0; 0	4	
POLY-VI-FLOR CHEW 0; 200MCG; 0; 0; 0; 0.5MG; 0; 0; 0; 0	4	
POLY-VI-FLOR CHEW 0; 200MCG; 0; 0; 0; 1MG; 0; 0; 0; 0	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements/Limits
POLY-VI-FLOR SUSP 0; 200MCG/ML; 0; 0; 0; 0.25MG/ML; 0; 0; 0; 0	4	
PRENATAL + DHA THPK 120MG; 0; 200MG; 10.3MCG; 55MG; 8MCG; 250MG; 27MG; 1MG; 20MG; 150MCG; 50MG; 3MG; 3MG; 27MG; 15MG	3	
TL-FLUORIVITE CHEW 100MG; 45MCG; 400UNIT; 1MG; 49MCG; 0.25MG; 400MCG; 7.5MG; 60MG; 20MG; 10MG; 2MG; 1.7MG; 1.5MG; 1000UNIT; 30UNIT; 7.5MG	4	
TRI-VI-FLOR SUSP 25MG/ML; 300UNIT/ML; 200MCG/ML; 0.25MG/ML; 1125UNIT/ML	4	
TRI-VI-FLOR SUSP 25MG/ML; 300UNIT/ML; 200MCG/ML; 0.5MG/ML; 1125UNIT/ML	4	
<i>vitamins a/c/d/fluoride soln 35mg/ml; 400unit/ml; 0.25mg/ml; 21500unit/ml</i>	2	
VP-PNV-DHA CAPS 80MG; 50MG; 400UNIT; 1MG; 12MCG; 200MG; 15.8MG; 28MG; 1MG; 30MG; 20MG; 16MG; 2.2MG; 6MG; 30UNIT; 2500UNIT; 20MG	3	
<b>Vitamin B Complex</b>		
<i>niacor tabs 500mg</i>	2	
<b>Vitamin D</b>		
<i>calcitriol caps 0.25mcg</i>	1	
<i>calcitriol caps 0.5mcg</i>	1	
<i>calcitriol inj 1mcg/ml</i>	1	*
<i>calcitriol soln 1mcg/ml</i>	1	
<i>doxercalciferol caps 0.5mcg</i>	2	
<i>doxercalciferol caps 1mcg</i>	2	
<i>doxercalciferol caps 2.5mcg</i>	2	
<i>doxercalciferol inj 4mcg/2ml</i>	2	*
HECTOROL CAPS 0.5MCG	4	
HECTOROL CAPS 1MCG	4	
HECTOROL CAPS 2.5MCG	4	
HECTOROL INJ 2MCG/ML	4	*
HECTOROL INJ 4MCG/2ML	4	*
<i>paricalcitol caps 1mcg</i>	2	
<i>paricalcitol caps 2mcg</i>	2	
<i>paricalcitol caps 4mcg</i>	2	
PARICALCITOL INJ 2MCG/ML	4	*
PARICALCITOL INJ 5MCG/ML	4	*
RAYALDEE CPCR 30MCG	4	
ROCALTROL CAPS 0.25MCG	4	
ROCALTROL CAPS 0.5MCG	4	
ROCALTROL SOLN 1MCG/ML	4	
ZEMPLAR CAPS 1MCG	4	
ZEMPLAR CAPS 2MCG	4	
ZEMPLAR INJ 2MCG/ML	4	*
ZEMPLAR INJ 5MCG/ML	4	*

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<i>amabelz</i>	150	<i>ampicillin</i>	2
<i>amantadine hcl</i>	89	<i>ampicillin sodium</i>	1
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ARISTADA	97	<i>atropine sulfate</i>	35
ARISTADA INITIO	97	<i>atropine sulfate</i>	128
ARIXTRA	41	ATROVENT	35
<i>armodafinil</i>	78	ATROVENT HFA	35
ARMONAIR RESPICLICK 113	135	AUBAGIO	162

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Drug Name	Page #	Drug Name	Page #
<i>aubra</i>	145	<i>baclofen</i>	37
<i>augmented betamethasone dipropionate</i>	172	BACTOCILL IN DEXTROSE	2
AUGMENTIN	2	BACTRIM	2
AUGMENTIN ES-600	2	BACTRIM DS	2
AUGMENTIN XR	2	BACTROBAN	168
AURYXIA	119	BACTROBAN NASAL	168
AUSTEDO	95	BALCOLTRA	145
<i>autopen</i>	107	<i>balsalazide disodium</i>	129
AUVI-Q	39	<i>balziva</i>	145
AVALIDE	60	BANZEL	81
AVANDIA	140	BARACLUDE	15
AVAPRO	60	BASAGLAR KWIKPEN	140
AVASTIN	22	BAVENCIO	22
AVC	168	BAXDELA	2
AVEED	139	BCG VACCINE	34
AVELOX	2	<i>bd eclipse syringe/1ml/30gx1/2"</i>	107
AVELOX ABC PACK	2	<i>bd insulin syringe safetyglide/1ml/29g x 1/2"</i>	107
<i>aviane</i>	145	<i>bd insulin syringe ultrafine/0.3ml/31g x 5/16"</i>	107
<i>avidoxy</i>	2	<i>bd insulin syringe ultrafine/0.5ml/30g x 1/2"</i>	107
<i>avita</i>	176	<i>bd insulin syringe ultrafine/1ml/31g x 5/16"</i>	107
AVODART	158	<i>bd pen</i>	107
AVONEX	162	<i>bd pen mini</i>	107
AVONEX PEN	162	<i>bd pen needle/ultrafine/29g x 12.7mm</i>	107
<i>av-phos 250 neutral</i>	120	BECONASE AQ	124
AVYCAZ	2	<i>bekyree</i>	145
AXERT	88	BELBUCA	65
AXIRON	139	BELEODAQ	22
AYGESTIN	153	BELSOMRA	92
<i>azacitidine</i>	22	<i>benazepril hcl</i>	60
AZACTAM	2	<i>benazepril hcl/hydrochlorothiazide</i>	60
AZACTAM IN ISO-OSMOTIC	2	<i>bendamustine hydrochloride</i>	22
DEXTROSE		BENDEKA	22
AZASAN	163	BENICAR	60
AZASITE	123	BENICAR HCT	60
<i>azathioprine</i>	163	BENLYSTA	163
<i>azelastine hcl</i>	126	BENTYL	35
AZELEX	178	BENZAACLIN	168
AZILECT	89	BENZAACLIN WITH PUMP	168
<i>azithromycin</i>	2	BENZAMYCIN	168
AZOPT	126	<i>benzebro</i>	168
AZOR	52	<i>benzebro short contact</i>	168
<i>aztreonam</i>	2	BENZNIDAZOLE	14
AZULFIDINE	2	BENZOLYL PEROXIDE FORTE- HC	172
AZULFIDINE EN-TABS	2	<i>benzoyl peroxide</i>	168
<i>azurette</i>	145	<i>benztropine mesylate</i>	89
<i>baciim</i>	2	BEPREVE	126
<i>bacitracin</i>	2	BERINERT	160
<i>bacitracin</i>	123		
<i>bacitracin/polymyxin b</i>	123		

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BESIVANCE	123	<i>bp foam</i>	168
BESPONSA	31	<i>bp wash</i>	168
BETAGAN	127	BRAFTOVI	22
<i>betamethasone dipropionate</i>	172	BREO ELLIPTA	136
<i>betamethasone sodium</i>	136	BREVIBLOC	49
<i>phosphate/betamethasone acetate</i>		BREVIBLOC PREMIXED	49
<i>betamethasone valerate</i>	172	BREVIBLOC PREMIXED	49
BETAPACE	48	DOUBLESTRENGTH	
BETAPACE AF	48	BREVICON-28	145
BETASERON	162	<i>briellyn</i>	146
<i>betaxolol hcl</i>	48	BRILINTA	41
<i>betaxolol hcl</i>	127	<i>brimonidine tartrate</i>	127
<i>bethanechol chloride</i>	36	BRINTELLIX	97
BETHKIS	2	BRISDELLE	97
BETIMOL	127	BRIVIACT	82
BETOPTIC-S	127	<i>bromfenac</i>	124
BEVESPI AEROSPHERE	35	<i>bromfenac</i>	128
BEVYXXA	44	<i>bromocriptine mesylate</i>	89
<i>bexarotene</i>	22	BROMSITE	124
BEXSERO	34	BROVANA	39
BEYAZ	145	<i>budesonide</i>	136
BIAXIN	2	<i>budesonide er</i>	136
<i>bicalutamide</i>	22	<i>budesonide nasal spray</i>	124
BICILLIN C-R	2	<i>bumetanide</i>	116
BICILLIN L-A	3	BUNAVAIL	65
BICNU	22	BUPAP	66
BIDIL	63	BUPHENYL	108
BIKTARVY	15	BUPRENEX	66
BILTRICIDE	1	<i>buprenorphine</i>	66
<i>bimatoprost</i>	127	<i>buprenorphine hcl</i>	66
BINOSTO	159	<i>buprenorphine hcl/naloxone hcl</i>	66
BIOTHRAX	34	<i>buprenorphine hydrochloride/naloxone</i>	66
<i>bisoprolol fumarate</i>	49	<i>hydrochloride</i>	
<i>bisoprolol fumarate/hydrochlorothiazide</i>	48	<i>buproban</i>	97
BIVIGAM	31	<i>bupropion hcl</i>	98
<i>bleomycin sulfate</i>	22	<i>bupropion hcl sr</i>	97
BLEPH-10	123	<i>bupropion hcl xl</i>	98
BLEPHAMIDE	124	<i>bupropion hydrochloride</i>	98
BLEPHAMIDE S.O.P.	124	<i>buspironone hcl</i>	92
BLINCYTO	22	BUSULFAN	22
<i>blisovi 24 fe</i>	145	BUSULFEX	22
<i>blisovi fe 1.5/30</i>	145	BUTALBITAL/ACETAMINOPHEN	66
<i>blisovi fe 1/20</i>	145	<i>butalbital/acetaminophen/caffeine</i>	66
BONIVA	160	<i>butalbital/acetaminophen/caffeine/codeine</i>	66
BONJESTA	129	<i>butalbital/aspirin/caffeine</i>	66
BOOSTRIX	33	<i>butalbital/aspirin/caffeine/codeine</i>	66
BORTEZOMIB	22	BUTISOL SODIUM	92
BOSULIF	22	<i>butorphanol tartrate</i>	66
BOTOX	164	BUTRANS	66

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Drug Name	Page #	Drug Name	Page #
BYDUREON	140	CARBATROL	82
BYDUREON BCISE	140	<i>carbidopa</i>	90
BYDUREON PEN	140	<i>carbidopa/levodopa</i>	89
BYETTA	141	<i>carbidopa/levodopa er</i>	89
BYSTOLIC	49	<i>carbidopa/levodopa odt</i>	89
BYVALSON	49	<i>carbidopa/levodopa/entacapone</i>	89
<i>cabergoline</i>	89	<i>carbinoxamine maleate</i>	20
CABOMETYX	22	<i>carboplatin</i>	22
CADUET	52	CARDENE IV	53
CAFECIT	78	CARDIZEM	53
CAFERGOT	88	CARDIZEM CD	53
<i>caffeine citrate</i>	78	CARDIZEM LA	53
CALAN	53	CARDURA	45
CALAN SR	53	CARDURA XL	45
<i>calcipotriene</i>	178	CARIMUNE NANOFILTERED	31
<i>calcipotriene/betamethasone dipropionate</i>	172	<i>carisoprodol</i>	37
<i>calcitonin-salmon</i>	153	<i>carisoprodol/aspirin</i>	37
<i>calcitrene</i>	178	<i>carisoprodol/aspirin/codeine</i>	37
<i>calcitriol</i>	178	<i>carmustine</i>	22
<i>calcitriol</i>	182	CARNITOR	164
<i>calcium acetate</i>	120	CARNITOR SF	164
<i>calcium chloride</i>	120	CAROSPIR	60
<i>calcium gluconate</i>	120	<i>carteolol hcl</i>	127
CALCIUM GLUCONATE/DEXTROSE	116	<i>cartia xt</i>	53
CALCIUM GLUCONATE/SODIUM	116	<i>carvedilol</i>	49
CHLORIDE		<i>carvedilol phosphate</i>	49
CALQUENCE	22	CASODEX	22
CAMBIA	66	<i>caspofungin acetate</i>	12
<i>camila</i>	146	CATAPRES	58
CAMPTOSAR	22	CATAPRES-TTS-1	58
<i>camrese</i>	146	CATAPRES-TTS-2	58
<i>camrese lo</i>	146	CATAPRES-TTS-3	58
CANASA	129	CAYSTON	3
CANCIDAS	12	<i>caziant</i>	146
<i>candesartan cilexetil</i>	60	CEDAX	3
<i>candesartan cilexetil/hydrochlorothiazide</i>	60	<i>cefaclor</i>	3
CANTIL	35	<i>cefaclor er</i>	3
<i>capacet</i>	66	<i>cefadroxil</i>	3
CAPASTAT SULFATE	13	<i>cefazolin</i>	3
CAPEX	172	<i>cefazolin sodium</i>	3
CAPITAL/CODEINE	66	<i>cefazolin sodium/dextrose</i>	3
CAPRELSA	22	<i>cefdinir</i>	3
<i>captopril</i>	60	<i>cefepime</i>	3
<i>captopril/hydrochlorothiazide</i>	60	<i>cefepime/dextrose</i>	3
CARAC	178	<i>cefixime</i>	3
CARAFATE	131	CEFOTAN	3
CARBAGLU	108	<i>cefotaxime sodium</i>	3
<i>carbamazepine</i>	82	<i>cefotetan</i>	3
<i>carbamazepine er</i>	82	<i>cefotetan/dextrose</i>	3

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Drug Name	Page #	Drug Name	Page #
<i>cefoxitin sodium</i>	3	CHOLBAM	134
<i>cefpodoxime proxetil</i>	4	<i>cholestyramine</i>	45
<i>cefprozil</i>	4	<i>cholestyramine light</i>	45
<i>ceftazidime</i>	4	CHORIONIC GONADOTROPIN	152
<i>ceftazidime/dextrose</i>	4	CIALIS	63
<i>ceftibuten</i>	4	<i>ciclodan</i>	168
CEFTIN	4	<i>ciclopirox</i>	168
<i>ceftriaxone in iso-osmotic dextrose</i>	4	<i>ciclopirox nail lacquer</i>	168
<i>ceftriaxone sodium</i>	4	<i>ciclopirox olamine</i>	168
<i>ceftriaxone/dextrose</i>	4	<i>cidofovir</i>	15
<i>cefuroxime axetil</i>	4	<i>cilostazol</i>	41
<i>cefuroxime sodium</i>	4	CILOXAN	123
CELEBREX	66	CIMDUO	15
<i>celecoxib</i>	66	<i>cimetidine</i>	131
CELESTONE-SOLUSPAN	136	<i>cimetidine hcl</i>	131
CELEXA	98	CIMZIA	161
CELLCEPT	163	CINQAIR	166
CELLCEPT INTRAVENOUS	163	CINRYZE	160
CELONTIN	82	CINVANTI	129
CENTANY	168	CIPRO	5
<i>cephalexin</i>	4	CIPRO HC	124
CERDELGA	164	CIPRO I.V.-IN D5W	4
CEREBYX	82	CIPRO XR	5
CEREZYME	123	CIPRODEX	124
CERVARIX	34	<i>ciprofloxacin</i>	5
CERVIDIL	166	<i>ciprofloxacin</i>	123
CESAMET	129	<i>ciprofloxacin er</i>	5
<i>cetirizine hcl</i>	21	<i>ciprofloxacin hcl</i>	5
CETRAXAL	128	<i>ciprofloxacin hcl</i>	123
CETYLEV	159	<i>ciprofloxacin hydrochloride</i>	5
<i>cevimeline hcl</i>	36	<i>ciprofloxacin i.v.-in d5w</i>	5
CHANTIX	36	<i>cisplatin</i>	22
CHANTIX CONTINUING MONTH PAK	36	<i>citalopram hydrobromide</i>	98
CHANTIX STARTING MONTH PAK	36	<i>cladribine</i>	23
<i>chateal</i>	146	CLAFORAN	5
CHEMET	135	CLAFORAN/D5W	5
CHENODAL	133	<i>claravis</i>	178
<i>chloramphenicol sodium succinate</i>	4	CLARINEX	21
<i>chlordiazepoxide hcl</i>	92	CLARINEX-D 12 HOUR	21
<i>chlordiazepoxide/amitriptyline</i>	98	<i>clarithromycin</i>	5
<i>chlorhexidine gluconate</i>	123	<i>clarithromycin er</i>	5
<i>chlorhexidine gluconate oral rinse</i>	123	<i>clemastine fumarate</i>	20
<i>chloroquine phosphate</i>	14	CLENPIQ	132
<i>chlorothiazide</i>	116	CLEOCIN	5
<i>chlorothiazide sodium</i>	116	CLEOCIN	169
<i>chlorpromazine hcl</i>	98	CLEOCIN IN D5W	5
<i>chlorpropamide</i>	141	CLEOCIN PEDIATRIC GRANULES	5
<i>chlorthalidone</i>	116	CLEOCIN PHOSPHATE	5
<i>chlorzoxazone</i>	37	CLEOCIN-T	169

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<i>climara</i>	150	<i>clomipramine hcl</i>	98
CLIMARA PRO	150	<i>clonazepam</i>	82
<i>clindacin etz pledgets</i>	169	<i>clonazepam odt</i>	82
CLINDACIN PAC	169	<i>clonidine hcl</i>	58
CLINDACIN-P	169	<i>clonidine hcl er</i>	58
CLINDAGEL	169	<i>clonidine hydrochloride er</i>	59
<i>clindamax</i>	169	<i>clopidogrel</i>	41
<i>clindamycin</i>	6	<i>clorazepate dipotassium</i>	92
<i>clindamycin hcl</i>	5	CLORPRES	59
<i>clindamycin hydrochloride</i>	6	<i>clotrimazole</i>	169
<i>clindamycin palmitate hcl</i>	6	<i>clotrimazole/betamethasone dipropionate</i>	169
<i>clindamycin phosphate</i>	6	<i>clozapine</i>	98
<i>clindamycin phosphate</i>	169	<i>clozapine odt</i>	98
<i>clindamycin phosphate add-vantage</i>	6	CLOZARIL	98
<i>clindamycin phosphate in d5w</i>	6	COARTEM	14
<i>clindamycin phosphate/tretinoin</i>	178	<i>codeine sulfate</i>	67
<i>clindamycin/benzoyl peroxide</i>	169	COGENTIN	90
CLINDAMYCIN/SODIUM CHLORIDE	6	COLAZAL	129
CLINDESSE	169	<i>colchicine</i>	159
CLINIMIX 2.75%/DEXTROSE 5%	110	COLCRYS	159
CLINIMIX 4.25%/DEXTROSE 10%	111	<i>colesevelam hydrochloride</i>	45
CLINIMIX 4.25%/DEXTROSE 20%	111	COLESTID	45
CLINIMIX 4.25%/DEXTROSE 25%	111	COLESTID FLAVORED	45
CLINIMIX 4.25%/DEXTROSE 5%	111	<i>colestipol hcl</i>	46
CLINIMIX 5%/DEXTROSE 15%	111	<i>colistimethate sodium</i>	6
CLINIMIX 5%/DEXTROSE 20%	111	<i>colocort</i>	172
CLINIMIX 5%/DEXTROSE 25%	112	COLY-MYCIN M	6
CLINIMIX E 2.75%/DEXTROSE 10%	112	COLY-MYCIN S	124
CLINIMIX E 2.75%/DEXTROSE 5%	112	COLYTE-FLAVOR PACKS	132
CLINIMIX E 4.25%/DEXTROSE 10%	112	COMBIGAN	127
CLINIMIX E 4.25%/DEXTROSE 25%	112	COMBIPATCH	150
CLINIMIX E 4.25%/DEXTROSE 5%	112	COMBIVENT RESPIMAT	39
CLINIMIX E 5%/DEXTROSE 15%	113	COMBIVIR	15
CLINIMIX E 5%/DEXTROSE 20%	113	COMETRIQ	23
CLINIMIX E 5%/DEXTROSE 25%	113	COMPLERA	15
CLINIMIX N14G30E	113	<i>compro</i>	98
CLINIMIX N9G15E	113	COMTAN	90
<i>clinisol sf 15%</i>	113	COMVAX	34
<i>clobetasol propionate</i>	172	<i>concerta</i>	78
<i>clobetasol propionate e</i>	172	CONDYLOX	178
<i>clobetasol propionate emollient</i>	172	<i>constulose</i>	108
CLOBEX	172	CONZIP	67
<i>clocortolone pivalate</i>	172	COPAXONE	162
<i>clocortolone pivalate pump</i>	172	COPEGUS	15
<i>clodan</i>	172	CORDRAN	172
CLODERM	172	CORDRAN TAPE	172
CLODERM PUMP	172	COREG	49
<i>clofarabine</i>	23	COREG CR	49
CLOLAR	23	CORGARD	49

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CORLANOR	57	CYRAMZA	23
CORMAX SCALP APPLICATION	172	<i>cyred</i>	146
CORTEF	136	CYSTADANE	165
CORTENEMA	172	CYSTAGON	165
CORTIFOAM	172	CYSTARAN	128
<i>cortisone acetate</i>	136	<i>cytarabine aqueous</i>	23
CORTISPORIN	172	CYTOGAM	31
CORTISPORIN-TC	125	CYTOMEL	155
CORZIDE	49	CYTOTEC	131
COSENTYX	178	CYTOVENE	15
COSENTYX SENSOREADY PEN	178	D.H.E. 45	38
COSMEGEN	23	<i>dacarbazine</i>	23
COSOPT	127	DACOGEN	23
COSOPT PF	127	<i>dactinomycin</i>	23
COTELLIC	23	DAKLINZA	15
COTEMPLA XR-ODT	79	<i>dalfampridine er</i>	165
COUMADIN	41	DALIRESP	167
COZAAR	60	DALVANCE	6
CREON	133	<i>danazol</i>	139
CRESEMBA	12	DANTRIUM	37
CRESTOR	46	<i>dantrolene sodium</i>	37
CRINONE	153	<i>dapsone</i>	13
CRIXIVAN	15	<i>dapsone</i>	178
<i>cromolyn sodium</i>	126	DAPTACEL	33
<i>cromolyn sodium</i>	166	DAPTOMYCIN	6
<i>crotan</i>	169	DARAPRIM	14
<i>cryselle-28</i>	146	<i>darifenacin hydrobromide er</i>	180
CRYSVITA	119	DARZALEX	23
CUBICIN	6	<i>dasetta 1/35</i>	146
CUPRIMINE	135	<i>dasetta 7/7/7</i>	146
<i>curity gauze pads 2"x2"</i>	107	<i>daunorubicin hcl</i>	23
CUTIVATE	172	<i>daunorubicin hydrochloride</i>	23
CUVITRU	31	DAXBIA	6
CUVPOSA	35	DAYPRO	67
<i>cyclafem 1/35</i>	146	<i>daysee</i>	146
<i>cyclafem 7/7/7</i>	146	DAYTRANA	79
CYCLESSA	146	DDAVP	153
<i>cyclobenzaprine hcl</i>	37	<i>deblitane</i>	146
CYCLOGYL	128	<i>decitabine</i>	23
<i>cyclopentolate hcl</i>	128	<i>deferoxamine mesylate</i>	135
<i>cyclopentolate hydrochloride</i>	128	DELESTROGEN	150
<i>cyclophosphamide</i>	23	DELSTRIGO	15
<i>cycloserine</i>	13	<i>deltasone</i>	136
CYCLOSET	141	<i>delyla</i>	146
<i>cyclosporine</i>	163	DELZICOL	129
<i>cyclosporine modified</i>	163	DEMADEX	116
CYKLOKAPRON	41	<i>demeclocycline hcl</i>	6
CYMBALTA	98	DEMEROL	67
<i>cyproheptadine hcl</i>	20	DEMSER	165

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DENAVIR	169	<i>dexrazoxane</i>	165
DEPACON	82	<i>dextroamphetamine sulfate</i>	79
DEPAKENE	82	<i>dextroamphetamine sulfate er</i>	79
DEPAKOTE	82	<i>dextrose 10%/nacl 0.45%</i>	120
DEPAKOTE ER	82	<i>dextrose 5% /electrolyte #48 viaflex</i>	120
DEPAKOTE SPRINKLES	82	<i>dextrose 10%</i>	113
DEPEN TITRATABS	135	<i>dextrose 10%/nacl 0.2%</i>	120
DEPOCYT	23	DEXTROSE 10%/NACL 0.225%	116
DEPO-ESTRADIOL	150	<i>dextrose 2.5%/nacl 0.45%</i>	120
DEPO-MEDROL	136	<i>dextrose 20%</i>	113
DEPO-PROVERA	153	<i>dextrose 25%</i>	113
DEPO-PROVERA CONTRACEPTIVE	153	<i>dextrose 30%</i>	114
DEPO-SUBQ PROVERA 104	153	<i>dextrose 40%</i>	114
<i>depo-testosterone</i>	139	<i>dextrose 5%</i>	114
DERMA-SMOOTHIE/FS BODY	173	<i>dextrose 5%/lactated ringers</i>	120
DERMA-SMOOTHIE/FS SCALP	173	<i>dextrose 5%/nacl 0.2%</i>	120
DERMATOP	173	<i>dextrose 5%/nacl 0.225%</i>	120
DERMOTIC	125	<i>dextrose 5%/nacl 0.3%</i>	120
DESCOVY	15	<i>dextrose 5%/nacl 0.33%</i>	120
DESFERAL	135	<i>dextrose 5%/nacl 0.45%</i>	120
<i>desipramine hcl</i>	98	<i>dextrose 5%/nacl 0.9%</i>	120
<i>desloratadine</i>	21	<i>dextrose 50%</i>	120
<i>desloratadine odt</i>	21	<i>dextrose 70%</i>	114
<i>desmopressin acetate</i>	153	DIABETA	141
DESOGEN	146	DIAMOX	127
<i>desogestrel/ethinyl estradiol</i>	146	DIASTAT ACUDIAL	92
DESONATE	173	DIASTAT PEDIATRIC	93
<i>desonide</i>	173	<i>diazepam</i>	93
<i>desowen</i>	173	<i>diazepam intensol</i>	93
<i>desoximetasone</i>	173	<i>diazepam rectal gel</i>	93
DESOXYN	79	DIBENZYLINE	38
DESVENLAFAXINE ER	98	<i>diclofenac potassium</i>	67
DETROL	180	<i>diclofenac sodium</i>	125
DETROL LA	180	<i>diclofenac sodium</i>	178
<i>dexamethasone</i>	136	<i>diclofenac sodium dr</i>	67
<i>dexamethasone 10-day dose pack</i>	136	<i>diclofenac sodium er</i>	67
<i>dexamethasone 13-day dose pack</i>	136	<i>diclofenac sodium/misoprostol</i>	67
<i>dexamethasone 6-day dose pack</i>	136	<i>dicloxacin sodium</i>	6
DEXAMETHASONE INTENSOL	136	<i>dicyclomine hcl</i>	35
<i>dexamethasone sodium phosphate</i>	125	<i>dicyclomine hydrochloride</i>	35
<i>dexamethasone sodium phosphate</i>	136	<i>didanosine</i>	15
DEXEDRINE	79	<i>differin</i>	178
DEXILANT	131	DIFICID	6
<i>dexmethylphenidate hcl</i>	79	<i>diflorasone diacetate</i>	173
<i>dexmethylphenidate hcl er</i>	79	DIFLUCAN	12
DEXONTO 0.4%	136	<i>diflunisal</i>	67
DEXPAK 10 DAY	136	<i>digitek</i>	57
DEXPAK 13 DAY	136	<i>digox</i>	57
DEXPAK 6 DAY	136	<i>digoxin</i>	57

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<i>dihydroergotamine mesylate</i>	38	<i>dorzolamide hcl</i>	127
DILANTIN	82	<i>dorzolamide hcl/timolol maleate</i>	127
DILANTIN INFATABS	82	<i>dorzolamide hydrochloride/timolol maleate</i>	128
DILANTIN-125	82	<i>pf</i>	
DILATRATE SR	63	DOVONEX	178
DILAUDID	67	<i>doxazosin mesylate</i>	45
<i>diltiazem cd</i>	53	<i>doxepin hcl</i>	99
<i>diltiazem hcl</i>	54	<i>doxepin hydrochloride</i>	176
<i>diltiazem hcl cd</i>	53	<i>doxercalciferol</i>	182
<i>diltiazem hcl er</i>	53	DOXIL	23
<i>dilt-xr</i>	53	<i>doxorubicin hcl</i>	23
<i>dimenhydrinate</i>	129	<i>doxorubicin hcl liposome</i>	23
DIOVAN	60	<i>doxy 100</i>	6
DIOVAN HCT	60	<i>doxycycline</i>	7
DIPENTUM	129	<i>doxycycline</i>	178
<i>diphenhydramine hcl</i>	20	<i>doxycycline hyclate</i>	6
<i>diphenoxylate/atropine</i>	129	<i>doxycycline hyclate dr</i>	6
DIPHThERIA/TETANUS TOXOIDS	33	<i>doxycycline monohydrate</i>	7
ADSORBED PEDIATRIC		<i>dronabinol</i>	129
DIPROLENE	173	<i>droperidol</i>	93
DIPROLENE AF	173	<i>drospirenone/ethinyl estradiol</i>	146
<i>dipyridamole</i>	64	<i>drospirenone/ethinyl estradiol/levomefolate</i>	146
DISALCID	67	<i>calcium</i>	
<i>disopyramide phosphate</i>	57	DROXIA	23
<i>disulfiram</i>	158	DUAC	169
DITROPAN XL	180	DUAVEE	151
DIURIL	116	DUETACT	141
<i>divalproex sodium</i>	83	DUEXIS	67
<i>divalproex sodium dr</i>	82	DULERA	137
<i>divalproex sodium er</i>	82	<i>duloxetine hcl</i>	99
DIVIGEL	150	<i>duloxetine hydrochloride</i>	99
<i>dobutamine hcl</i>	39	DUOPA	90
<i>dobutamine hcl/d5w</i>	39	DUPIXENT	178
<i>dobutamine hydrochloride/dextrose</i>	39	DURAGESIC	67
<i>dobutamine/dextrose 5%</i>	39	DURAMORPH	67
DOCEFREZ	23	DUREZOL	125
<i>docetaxel</i>	23	DURLAZA	41
<i>dofetilide</i>	57	<i>dutasteride</i>	158
DOLOPHINE	67	<i>dutasteride/tamsulosin hydrochloride</i>	158
<i>donepezil hcl</i>	36	DUTOPROL	49
<i>dopamine hcl</i>	39	DUZALLO	122
<i>dopamine hydrochloride/dextrose</i>	39	DYANAVEL XR	79
<i>dopamine/d5w</i>	39	DYAZIDE	116
DOPTLET	44	DYLOJECT	67
DORAL	93	DYMISTA	126
DORIBAX	6	DYRENIUM	116
<i>doripenem</i>	6	DYSPORT	165
DORYX	6	<i>e.e.s. 400</i>	7
DORYX MPC	6	E.E.S. GRANULES	7

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EC-NAPROSYN	67	ENBREL MINI	161
<i>econazole nitrate</i>	169	ENBREL SURECLICK	161
EDARBI	61	ENDARI	165
EDARBYCLOR	61	<i>endocet</i>	68
EDECRIN	116	ENGERIX-B	34
EDLUAR	93	ENJUVIA	151
EDURANT	15	<i>enoxaparin sodium</i>	41
<i>efavirenz</i>	15	<i>enpresse-28</i>	146
EFFEXOR XR	99	<i>enskyce</i>	146
EFFIENT	41	ENSTILAR	173
EFUDEX	178	<i>entacapone</i>	90
EGRIFTA	154	<i>entecavir</i>	15
ELAPRASE	123	ENTOCORT EC	137
ELAVIL	99	ENTRESTO	61
ELDEPRYL	90	ENTYVIO	134
ELELYSO	123	<i>enulose</i>	108
ELESTAT	126	ENVARBUS XR	163
ELESTRIN	151	EPANED	61
<i>eletriptan hydrobromide</i>	88	EPCLUSA	15
ELIDEL	178	EPIDUO	178
ELIGARD	23	EPIDUO FORTE	178
ELIMITE	169	EPIFOAM	173
<i>elinest</i>	146	<i>epinastine hcl</i>	126
ELIPHOS	120	<i>epinephrine</i>	39
ELIQUIS	41	EPIPEN 2-PAK	39
ELIQUIS STARTER PACK	44	EPIPEN-JR 2-PAK	40
ELITEK	123	<i>epirubicin hcl</i>	24
ELIXOPHYLLIN	181	<i>epitol</i>	83
ELLA	146	EPIVIR	16
ELLENCE	24	EPIVIR HBV	16
ELMIRON	165	<i>eplerenone</i>	61
ELOCON	173	EPOGEN	43
EMADINE	126	<i>epoprostenol sodium</i>	167
EMBEDA	68	<i>eprosartan mesylate</i>	61
EMCYT	24	<i>eptifibatide</i>	41
EMEND	130	EPZICOM	16
EMEND TRIPACK	130	EQUETRO	83
EMFLAZA	137	ERAXIS	12
EMLA	176	ERBITUX	24
<i>emoquette</i>	146	<i>ergoloid mesylates</i>	38
EMPLICITI	24	ERGOMAR	38
EMSAM	90	<i>ergotamine tartrate/caffeine</i>	88
EMTRIVA	15	ERIVEDGE	24
EMVERM	1	ERLEADA	24
ENABLEX	180	<i>errin</i>	146
<i>enalapril maleate</i>	61	ERTACZO	169
<i>enalapril maleate/hydrochlorothiazide</i>	61	<i>ertapenem</i>	7
<i>enalaprilat</i>	61	ERWINAZE	24
ENBREL	161	<i>ery</i>	169

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ERYGEL	169	EVOMELA	24
ERYPED 200	7	EVOTAZ	16
ERYPED 400	7	EVOXAC	36
ERY-TAB	7	EVZIO	96
ERYTHROCIN LACTOBIONATE	7	EXALGO	68
ERYTHROCIN STEARATE	7	EXELDERM	169
<i>erythromycin</i>	7	EXELON	36
<i>erythromycin</i>	123	<i>exemestane</i>	24
<i>erythromycin</i>	169	EXFORGE	54
<i>erythromycin base</i>	7	EXFORGE HCT	54
<i>erythromycin ethylsuccinate</i>	7	EXJADE	135
<i>erythromycin/benzoyl peroxide</i>	169	EXONDYS 51	165
ESBRIET	166	EXTAVIA	162
<i>escitalopram oxalate</i>	99	EXTINA	169
<i>esgic</i>	68	<i>ezetimibe</i>	46
<i>esmolol hcl</i>	49	<i>ezetimibe/simvastatin</i>	46
<i>esmolol hydrochloride in water</i>	49	FABIOR	178
<i>esmolol hydrochloride in water double strength</i>	49	FABRAZYME	123
<i>esmolol hydrochloride/sodium chloride</i>	49	<i>falmina</i>	146
<i>esomeprazole magnesium</i>	131	<i>famciclovir</i>	16
<i>esomeprazole sodium</i>	131	<i>famotidine</i>	131
<i>esomeprazole strontium</i>	131	<i>famotidine premixed</i>	131
<i>estarylla</i>	146	FAMVIR	16
<i>estazolam</i>	93	FANAPT	99
ESTRACE	151	FANAPT TITRATION PACK	99
<i>estradiol</i>	151	FARESTON	24
<i>estradiol valerate</i>	151	FARXIGA	141
<i>estradiol/norethindrone acetate</i>	151	FARYDAK	24
ESTRING	151	FASENRA	166
<i>estropipate</i>	151	FASLODEX	24
ESTROSTEP FE	146	<i>fayosim</i>	146
<i>eszopiclone</i>	93	FAZACLO	99
<i>ethacrynate sodium</i>	116	<i>felbamate</i>	83
<i>ethacrynic acid</i>	117	FELBATOL	83
<i>ethambutol hcl</i>	13	FELDENE	68
<i>ethosuximide</i>	83	<i>felodipine er</i>	54
<i>ethynodiol diacetate/ethinyl estradiol</i>	146	FEMARA	24
<i>etidronate disodium</i>	160	FEMCON FE	146
<i>etodolac</i>	68	FEMHRT LOW DOSE	151
<i>etodolac er</i>	68	FEMRING	151
ETOPOPHOS	24	<i>femynor</i>	146
<i>etoposide</i>	24	<i>fenofibrate</i>	46
EUCRISA	173	<i>fenofibrate micronized</i>	46
EURAX	169	<i>fenofibric acid</i>	46
EVAMIST	151	<i>fenofibric acid dr</i>	46
EVEKEO	79	FENOGLIDE	46
EVISTA	151	FENOPROFEN CALCIUM	68
EVOCLIN	169	<i>fentanyl</i>	68
		<i>fentanyl citrate oral transmucosal</i>	68

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FENTORA	68	<i>fluorometholone</i>	125
FERRIPROX	135	<i>fluorouracil</i>	24
FETZIMA	99	<i>fluorouracil</i>	178
FETZIMA TITRATION PACK	99	<i>fluoxetine</i>	100
FEXMID	37	<i>fluoxetine dr</i>	99
FIASP	141	<i>fluoxetine hcl</i>	99
FIASP FLEXTOUCH	141	<i>fluoxetine hydrochloride</i>	100
FIBRICOR	46	<i>fluphenazine decanoate</i>	100
FINACEA	178	<i>fluphenazine hcl</i>	100
<i>finasteride</i>	158	<i>flurandrenolide</i>	173
FIORICET	68	<i>flurazepam hcl</i>	93
FIORICET/CODEINE	68	<i>flurbiprofen</i>	69
FIORINAL	69	<i>flurbiprofen sodium</i>	125
FIORINAL/CODEINE #3	69	<i>flutamide</i>	24
FIRAZYR	160	<i>fluticasone propionate</i>	125
FIRMAGON	24	<i>fluticasone propionate</i>	173
		<i>fluticasone propionate/salmeterol</i>	137
FLAGYL	14	<i>fluvastatin</i>	46
FLAREX	125	<i>fluvastatin sodium er</i>	46
<i>flavoxate hcl</i>	180	<i>fluvoxamine maleate</i>	100
FLEBOGAMMA DIF	31	<i>fluvoxamine maleate er</i>	100
<i>flecainide acetate</i>	57	FML	125
FLECTOR	178	FML FORTE	125
<i>flexin</i>	176	FML LIQUIFILM	125
FLOLAN	167	FOCALIN	79
FLOLIPID	133	FOCALIN XR	79
FLOMAX	38	FOLOTYN	24
FLOVENT DISKUS	137	<i>fomepizole</i>	159
FLOVENT HFA	137	<i>fondaparinux sodium</i>	42
FLOXIN OTIC	123	FORFIVO XL	100
<i>floxuridine</i>	24	FORTAMET	141
<i>fluconazole</i>	12	FORTAZ	7
<i>fluconazole in dextrose</i>	12	FORTEO	153
<i>fluconazole in nacl</i>	12	FORTESTA	139
<i>flucytosine</i>	12	FORTICAL	153
<i>fludarabine phosphate</i>	24	FOSAMAX	160
<i>fludrocortisone acetate</i>	137	FOSAMAX PLUS D	160
FLUMADINE	16	<i>fosamprenavir calcium</i>	16
<i>flunisolide</i>	125	FOSCAVIR	16
<i>fluocinolone acetonide</i>	125	<i>fosinopril sodium</i>	61
<i>fluocinolone acetonide</i>	173	<i>fosinopril sodium/hydrochlorothiazide</i>	61
<i>fluocinolone acetonide body</i>	173	<i>fosphenytoin sodium</i>	83
<i>fluocinolone acetonide scalp</i>	173	FOSRENOL	119
<i>fluocinonide</i>	173	FRAGMIN	42
<i>fluocinonide emulsified base</i>	173	FREAMINE HBC 6.9%	114
FLUOR-A-DAY	160	FREAMINE III	114
<i>fluoride</i>	160	FROVA	88
<i>fluoride</i>	181	<i>frovatriptan succinate</i>	88
<i>fluoritab</i>	160	FULPHILA	45

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FULYZAQ	129	GENVOYA	16
FURADANTIN	20	GEODON	100
<i>furosemide</i>	117	<i>gianvi</i>	146
FUROSEMIDE/SODIUM CHLORIDE	117	GIAZO	129
FUSILEV	159	<i>gildagia</i>	146
FUZEON	16	<i>gildess 1.5/30</i>	146
<i>fyavolv</i>	151	<i>gildess 1/20</i>	146
FYCOMPA	83	<i>gildess 24 fe</i>	146
<i>gabapentin</i>	83	<i>gildess fe 1.5/30</i>	146
GABITRIL	83	<i>gildess fe 1/20</i>	146
GABLOFEN	37	GILENYA	162
GALAFOLD	165	GILOTRIF	25
<i>galantamine hydrobromide</i>	36	GLASSIA	167
<i>galantamine hydrobromide er</i>	36	<i>glatiramer acetate</i>	162
GAMASTAN S/D	32	<i>glatopa</i>	162
GAMMAGARD LIQUID	32	GLEEVEC	25
GAMMAGARD S/D IGA LESS THAN	32	GLEOSTINE	25
1MCG/ML		<i>glimepiride</i>	141
GAMMAKED	32	<i>glipizide</i>	141
GAMMAPLEX	32	<i>glipizide er</i>	141
GAMUNEX-C	32	<i>glipizide xl</i>	141
<i>ganciclovir</i>	16	<i>glipizide/metformin hcl</i>	141
GARDASIL	34	GLUCAGEN HYPOKIT	145
GARDASIL 9	34	GLUCAGON EMERGENCY KIT	145
GASTROCROM	166	GLUCOPHAGE	141
<i>gatifloxacin</i>	123	GLUCOPHAGE XR	141
GATTEX	134	GLUCOTROL	141
<i>gavilyte-c</i>	132	GLUCOTROL XL	141
<i>gavilyte-g</i>	132	GLUCOVANCE	141
<i>gavilyte-h</i>	133	GLUMETZA	141
<i>gavilyte-n/fluor pack</i>	133	<i>glyburide</i>	142
GAZYVA	24	<i>glyburide micronized</i>	141
GELNIQUE	180	<i>glyburide/metformin hcl</i>	141
<i>gemcitabine</i>	25	<i>glycopyrrolate</i>	35
<i>gemcitabine hcl</i>	24	<i>glycopyrrolate</i>	139
GEMCITABINE HYDROCHLORIDE	24	<i>glydo</i>	176
<i>gemfibrozil</i>	46	GLYNASE	142
GEMZAR	25	GLYRX-PF	35
GENERESS FE	146	GLYSET	142
<i>generlac</i>	108	GLYXAMBI	142
<i>gengraf</i>	163	GOCOVRI	90
GENOTROPIN	155	GOLYTELY	133
GENOTROPIN MINIQUICK	154	GONITRO	64
<i>gentak</i>	123	GRALISE	69
<i>gentamicin sulfate</i>	7	GRALISE STARTER	69
<i>gentamicin sulfate</i>	123	<i>granisetron hcl</i>	130
<i>gentamicin sulfate</i>	169	GRANIX	43
<i>gentamicin sulfate pediatric</i>	7	GRASTEK	31
<i>gentamicin sulfate/0.9% sodium chloride</i>	7	<i>griseofulvin microsize</i>	12

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GRIS-PEG	12	HUMALOG MIX 50/50 KWIKPEN	142
<i>guanfacine er</i>	95	HUMALOG MIX 75/25 HUMALOG	142
<i>guanfacine hcl</i>	59	MIX 75/25 KWIKPEN	142
<i>guanidine hcl</i>	36		
GYNAZOLE-1	169	HUMATROPE	155
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HAEGARDA	160	HUMIRA	161
HALAVEN	25	HUMIRA PEDIATRIC CROHNS	161
HALCION	93	DISEASE STARTER PACK	
HALDOL	100	HUMIRA PEN	161
HALDOL DECANOATE 100	100	HUMIRA PEN-CD/UC/HS STARTER	161
HALDOL DECANOATE 50	100	HUMIRA PEN-PS/UV STARTER	161
<i>halobetasol propionate</i>	173	<i>humulin 70/30</i>	142
HALOG	173	<i>humulin 70/30 kwikpen</i>	142
<i>haloperidol</i>	100	<i>humulin n</i>	142
<i>haloperidol decanoate</i>	100	<i>humulin n kwikpen</i>	142
<i>haloperidol lactate</i>	100	<i>humulin r</i>	142
HARVONI	16	<i>humulin r u-500 (concentrated)</i>	142
HAVRIX	34	<i>humulin r u-500 kwikpen</i>	142
<i>heather</i>	147	HYCAMTIN	142
HECTOROL	182	HYCET	25
HEMANGEOL	49	<i>hydralazine hcl</i>	69
HEPAGAM B	32	HYDREA	59
<i>heparin sodium</i>	42	<i>hydrochlorothiazide</i>	25
<i>heparin sodium dcu</i>	42	<i>hydrocodone bitartrate/acetaminophen</i>	117
<i>heparin sodium/d5w</i>	42	<i>hydrocodone/acetaminophen</i>	69
<i>heparin sodium/nacl 0.45%</i>	42	<i>hydrocodone/ibuprofen hydrocortisone</i>	69
<i>heparin sodium/nacl 0.9%</i>	42	<i>hydrocortisone</i>	69
HEPARIN SODIUM/SODIUM	42	<i>hydrocortisone acetate/lidocaine</i>	137
CHLORIDE		<i>hydrochloride</i>	174
<i>heparin sodium/sodium chloride 0.9%</i>	42	<i>hydrocortisone acetate/pramoxine</i>	174
<i>heparin sodium/sodium chloride 0.9%</i>	42	<i>hydrocortisone butyrate</i>	
<i>premix</i>		<i>hydrocortisone butyrate (lipid)</i>	176
HEPATAMINE	114	<i>hydrocortisone butyrate (lipophilic)</i>	174
HEPLISAV-B	34	<i>hydrocortisone in absorbase</i>	174
HEPSERA	16	<i>hydrocortisone valerate</i>	174
HERCEPTIN	25	<i>hydrocortisone/acetic acid</i>	174
<i>hetastarch 6%/nacl</i>	120	<i>hydromorphone hcl</i>	174
HETLIOZ	93	<i>hydromorphone hcl er</i>	125
HEXALEN	25	HYDROMORPHONE HCL/SODIUM	69
HEXTEND	117	CHLORIDE	69
HIBERIX	34	HYDROMORPHONE HCL/SODIUM	69
HIPREX	20	CHLORIDE	
HIZENTRA	32	<i>hydromorphone hydrochloride er</i>	117
HORIZANT	83	HYDROMORPHONE	
HUMALOG	142	HYDROCHLORIDE/ SODIUM	69
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HYDROCHLORIDE/SODIUM CHLORIDE		IMOGAM RABIES-HT	32
HYDROMORPHONE	117	IMOVAX RABIES (H.D.C.V.)	34
HYDROCHLORIDE/SODIUM CHLORIDE		IMPOYZ	174
<i>hydroxychloroquine sulfate</i>	14	IMURAN	164
<i>hydroxyprogesterone caproate</i>	153	IMVEXXY MAINTENANCE PACK	151
<i>hydroxyurea</i>	25	<i>incassia</i>	147
<i>hydroxyzine hcl</i>	93	INCRELEX	155
<i>hydroxyzine hydrochloride</i>	93	INCRUSE ELLIPTA	35
<i>hydroxyzine pamoate</i>	93	<i>indapamide</i>	118
HYPERHEP B S/D	32	INDERAL LA	49
HYPERRAB	32	INDOCIN	71
HYPERRAB S/D	32	<i>indomethacin</i>	71
HYPERRHO S/D	32	<i>indomethacin er</i>	71
HYPERRHO S/D MINI-DOSE	32	INFANRIX	33
HYPERSAL	167	INFLECTRA	161
HYPER-SAL	167	INFUMORPH 200	71
HYQVIA	32	INFUMORPH 500	71
HYSINGLA ER	70	INGREZZA	95
HYZAAR	61	INLYTA	26
<i>ibandronate sodium</i>	160	INNOPRAN XL	50
IBRANCE	25	<i>inpen 100/blue/lilly</i>	107
<i>ibu</i>	71	<i>inpen 100/blue/novo</i>	107
IBUDONE	71	<i>inpen 100/gray/lilly</i>	107
<i>ibuprofen</i>	71	<i>inpen 100/grey/novo</i>	107
<i>ibuprofen lysine</i>	71	<i>inpen 100/pink/lilly</i>	107
ICLUSIG	25	<i>inpen 100/pink/novo</i>	107
IDAMYCIN PFS	25	INSPIRA	61
<i>idarubicin hcl</i>	25	INTELENCE	16
<i>idarubicin hydrochloride</i>	25	INTERMEZZO	93
IDHIFA	25	INTRALIPID	114
IFEX	25	INTRAROSA	137
<i>ifosfamide</i>	25	INTRON A	26
ILARIS	71	INTRON A W/DILUENT	26
ILEVRO	125	<i>introvale</i>	147
<i>ilotycin</i>	123	INTUNIV	95
ILUMYA	178	INVANZ	8
<i>imatinib mesylate</i>	25	INVEGA	101
IMBRUVICA	25	INVEGA SUSTENNA	101
IMFINZI	26	INVEGA TRINZA	101
<i>imipenem/cilastatin</i>	8	INVIRASE	16
<i>imipramine hcl</i>	100	INVOKAMET	142
<i>imipramine hydrochloride</i>	100	INVOKAMET XR	142
<i>imipramine pamoate</i>	100	INVOKANA	142
<i>imiquimod</i>	178	IONOSOL-B/DEXTROSE 5%	120
IMITREX	88	IONOSOL-MB/DEXTROSE 5%	120
IMITREX STATDOSE REFILL	88	IOPIDINE	128
		IPOL INACTIVATED IPV	34
		<i>ipratropium bromide</i>	35

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<i>ipratropium bromide/albuterol sulfate</i>	40	<i>jolivette</i>	147
IPRIVASK	42	JUBLIA	169
<i>irbesartan</i>	61	<i>juleber</i>	147
<i>irbesartan/hydrochlorothiazide</i>	61	JULUCA	16
IRESSA	26	<i>junel 1.5/30</i>	147
<i>irinotecan</i>	26	<i>junel 1/20</i>	147
<i>irinotecan hcl</i>	26	<i>junel fe 1.5/30</i>	147
<i>irinotecan hydrochloride</i>	26	<i>junel fe 1/20</i>	147
ISENTRESS	16	<i>junel fe 24</i>	147
ISENTRESS HD	16	JUXTAPID	46
<i>isibloom</i>	147	JYNARQUE	118
ISOLYTE-P/DEXTROSE 5%	120	KABIVEN	114
ISOLYTE-S	120	KADCYLA	26
ISOLYTE-S PH 7.4	120	KADIAN	71
<i>isoniazid</i>	13	<i>kaitlib fe</i>	147
<i>isoproterenol hydrochloride</i>	40	KALBITOR	161
ISOPTO CARPINE	127	KALETRA	16
ISORDIL TITRADOSE	64	KALYDECO	166
<i>isosorbide dinitrate</i>	64	KANUMA	123
<i>isosorbide dinitrate er</i>	64	KAPSPARGO SPRINKLE	50
<i>isosorbide mononitrate</i>	64	KAPVAY	59
<i>isosorbide mononitrate er</i>	64	KARBINAL ER	20
<i>isotonic gentamicin</i>	8	<i>kariva</i>	147
<i>isotretinoin</i>	178	KAYEXALATE	119
<i>isradipine</i>	54	KAZANO	143
ISTALOL	127	<i>kcl 0.075%/d5w/nacl 0.45%</i>	121
ISTODAX	26	<i>kcl 0.15%/d5w/nacl 0.2%</i>	121
ISTODAX (OVERFILL)	26	<i>kcl 0.15%/d5w/nacl 0.225%</i>	121
ISUPREL	40	<i>kcl 0.15%/d5w/nacl 0.45%</i>	121
<i>itraconazole</i>	13	<i>kcl 0.15%/d5w/nacl 0.9%</i>	121
<i>ivermectin</i>	1	<i>kcl 0.3%/d5w/nacl 0.45%</i>	121
IXEMPRA KIT	26	<i>kcl 0.3%/d5w/nacl 0.9%</i>	121
IXIARO	34	KEDRAB	32
JADENU	135	KEFLEX	8
JADENU SPRINKLE	135	<i>kelnor 1/35</i>	147
JAKAFI	26	<i>kelnor 1/50</i>	147
JALYN	158	KENALOG	174
<i>jantoven</i>	42	KENALOG-10	137
JANUMET	142	KENALOG-40	137
JANUMET XR	142	KEPIVANCE	176
JANUVIA	142	KEPPRA	83
JARDIANCE	143	KEPPRA XR	83
<i>jencycla</i>	147	KERYDIN	170
JENTADUETO	143	<i>ketoconazole</i>	13
JENTADUETO XR	143	<i>ketoconazole</i>	170
<i>jevantique lo</i>	151	<i>ketodan</i>	170
JEVTANA	26	<i>ketoprofen</i>	71
<i>jinteli</i>	151	<i>ketoprofen er</i>	71
<i>jolessa</i>	147	<i>ketorolac tromethamine</i>	71

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<i>ketorolac tromethamine</i>	125	LAMICTAL STARTER/TAKING	84
KEVEYIS	160	CARBAMAZEPINE/NOT TAKING	
KEVZARA	161	VALPROATE	
KEYTRUDA	26	LAMICTAL STARTER/TAKING	84
KHEDEZLA	101	VALPROATE	
<i>kimidess</i>	147	LAMICTAL XR	84
KINERET	161	LAMISIL	13
KINRIX	33	<i>lamivudine</i>	16
<i>kionex</i>	119	<i>lamivudine/zidovudine</i>	16
KISQALI	26	<i>lamotrigine</i>	84
KISQALI FEMARA 200 DOSE	26	<i>lamotrigine er</i>	84
KISQALI FEMARA 400 DOSE	26	<i>lamotrigine odt</i>	84
KISQALI FEMARA 600 DOSE	26	<i>lamotrigine starter kit/blue</i>	84
<i>kitabisk pak</i>	8	<i>lamotrigine starter kit/green</i>	84
KLARON	170	<i>lamotrigine starter kit/orange</i>	84
<i>klofensaid ii</i>	178	<i>lamotrigine titration</i>	84
KLONOPIN	83	LANOXIN	57
<i>klor-con</i>	121	LANOXIN PEDIATRIC	57
<i>klor-con 10</i>	121	<i>lansoprazole</i>	131
<i>klor-con 8</i>	121	<i>lansoprazole/amoxicillin/clarithromycin</i>	131
<i>klor-con m10</i>	121	<i>lanthanum carbonate</i>	119
<i>klor-con m15</i>	121	LANTUS	143
<i>klor-con m20</i>	121	LANTUS SOLOSTAR	143
<i>klor-con sprinkle</i>	121	<i>larin 1.5/30</i>	147
KOMBIGLYZE XR	143	<i>larin 1/20</i>	147
KORLYM	143	<i>larin 24 fe</i>	147
K-PHOS NEUTRAL	120	<i>larin fe 1.5/30</i>	147
KRISTALOSE	108	<i>larin fe 1/20</i>	147
<i>k-tab</i>	121	<i>larissia</i>	147
<i>kurvelo</i>	147	LARTRUVO	26
KUVAN	165	LASIX	118
KYLEENA	147	LASTACAFT	126
KYNAMRO	46	<i>latanoprost</i>	127
KYPROLIS	26	LATUDA	101
<i>labetalol hcl</i>	50	LAYOLIS FE	147
LABETALOL HYDROCHLORIDE	50	LAZANDA	71
LAC-HYDRIN	174	<i>leena</i>	147
LAC-HYDRIN	177	<i>leflunomide</i>	161
LACRISERT	128	LEMTRADA	163
LACTATED RINGERS IRRIGATION	119	LENVIMA 10 MG DAILY DOSE	26
LACTATED RINGERS VIAFLEX	121	LENVIMA 12MG DAILY DOSE	26
<i>lactulose</i>	108	LENVIMA 14 MG DAILY DOSE	26
LAMICTAL	84	LENVIMA 18 MG DAILY DOSE	26
LAMICTAL CHEWABLE DISPERSIBLE	83	LENVIMA 20 MG DAILY DOSE	26
LAMICTAL ODT	83	LENVIMA 24 MG DAILY DOSE	27
LAMICTAL STARTER/NOT TAKING	84	LENVIMA 4 MG DAILY DOSE	27
CARBAMAZEPINE		LENVIMA 8 MG DAILY DOSE	27
		LESCOL XL	46
		<i>lessina</i>	147

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LETAIRIS	167	LIDODERM	176
<i>letrozole</i>	27	<i>lido-k</i>	176
<i>leucovorin calcium</i>	159	LIDOTREX	176
LEUKERAN	27	LILETTA	147
LEUKINE	44	<i>lillow</i>	147
<i>leuprolide acetate</i>	27	LINCOCIN	8
<i>levabuterol</i>	40	<i>lincomycin hcl</i>	8
<i>levabuterol hcl</i>	40	<i>lindane</i>	170
<i>levabuterol tartrate hfa</i>	40	<i>linezolid</i>	8
LEVAQUIN	8	LINZESS	134
LEVEMIR	143	LIORESAL INTRATHECAL	38
LEVEMIR FLEXTOUCH	143	<i>liothyronine sodium</i>	156
<i>levetiracetam</i>	85	LIPITOR	46
<i>levetiracetam er</i>	84	<i>lipodox 50</i>	27
<i>levobunolol hcl</i>	127	LIPOFEN	47
<i>levocarnitine</i>	165	<i>lisinopril</i>	61
<i>levocetirizine dihydrochloride</i>	21	<i>lisinopril/hydrochlorothiazide</i>	61
<i>levofloxacin</i>	8	<i>lithium</i>	87
<i>levofloxacin</i>	123	<i>lithium carbonate</i>	87
<i>levofloxacin in d5w</i>	8	<i>lithium carbonate er</i>	87
<i>levoleuovorin</i>	159	LITHOBID	87
<i>levoleuovorin calcium</i>	159	LITHOSTAT	108
<i>levonest</i>	147	LIVALO	47
<i>levonorgestrel and ethinyl estradiol</i>	147	LMD 10% DEXTROSE 5%	118
<i>levonorgestrel/ethinyl estradiol</i>	147	LMD 10% SODIUM CHLORIDE 0.9%	118
LEVOPHED	40	LO LOESTRIN FE	147
<i>levora 0.15/30-28</i>	147	LOCOID	174
<i>levorphanol tartrate</i>	71	LOCOID LIPOCREAM	174
<i>levo-t</i>	155	LOCORT 11-DAY	33
<i>levothyroxine sodium</i>	156	LOCORT 7-DAY	33
<i>levothyroxine/liothyronine</i>	156	LODINE	71
LEVOXYL	156	LODOSYN	90
LEVULAN KERASTICK	179	LOESTRIN 1.5/30-21	147
LEXAPRO	101	LOESTRIN 1/20-21	147
LEXIVA	16	LOESTRIN FE 1.5/30	147
LIALDA	129	LOESTRIN FE 1/20	147
<i>lidocaine</i>	176	LOFIBRA	47
<i>lidocaine hcl</i>	57	<i>lokara</i>	174
<i>lidocaine hcl</i>	128	LOKELMA	119
<i>lidocaine hcl</i>	158	<i>lomedia 24 fe</i>	147
<i>lidocaine hcl</i>	176	LOMOTIL	129
<i>lidocaine hcl in d5w</i>	57	LONHALA MAGNAIR REFILL KIT	35
<i>lidocaine hcl jelly</i>	176	LONHALA MAGNAIR STARTER KIT	35
<i>lidocaine hcl/dextrose</i>	57	LONSURF	27
<i>lidocaine hcl/dextrose</i>	158	<i>loperamide hcl</i>	129
<i>lidocaine hydrochloride</i>	176	LOPID	47
<i>lidocaine viscous</i>	128	<i>lopinavir/ritonavir</i>	16
<i>lidocaine/prilocaine</i>	176	<i>lopreeza</i>	151
<i>lidocaine-prilocaine-cream base</i>	176	LOPRESSOR	50

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LOPRESSOR HCT	50	LYSTEDA	41
LOPROX	170	<i>lyza</i>	148
LOPROX SHAMPOO	170	MACROBID	20
<i>lorazepam</i>	93	MACRODANTIN	20
<i>lorazepam intensol</i>	93	<i>mafenide acetate</i>	170
<i>lorcet</i>	71	<i>magnesium sulfate</i>	85
<i>lorcet hd</i>	71	<i>magnesium sulfate in d5w</i>	121
<i>lorcet plus</i>	71	MAKENA	153
LORTAB	71	MALARONE	14
<i>loryna</i>	147	<i>malathion</i>	170
LORZONE	38	MANGANESE TRACE METAL	118
<i>losartan potassium</i>	62	<i>mannitol</i>	118
<i>losartan potassium/hydrochlorothiazide</i>	61	<i>maprotiline hcl</i>	101
LOSEASONIQUE	148	<i>margesic</i>	72
LOTEMAX	125	MARINOL	130
LOTENSIN	62	<i>marlissa</i>	148
LOTENSIN HCT	62	MARPLAN	101
LOTREL	54	MARQIBO	27
LOTRISONE	170	<i>marten-tab</i>	72
LOTRONEX	129	MATULANE	27
<i>lovastatin</i>	47	<i>matzim la</i>	54
LOVAZA	47	MAVIK	62
<i>lovenox</i>	42	MAVYRET	16
<i>low-ogestrel</i>	148	MAXALT	88
<i>loxapine</i>	101	MAXALT-MLT	88
<i>loxapine succinate</i>	101	MAXIDEX	125
LUCEMYRA	40	MAXIPIME	8
LUCENTIS	128	MAXITROL	125
LUCENTIS	128	MAXZIDE	118
<i>ludent</i>	160	MAXZIDE-25	118
<i>ludent</i>	181	<i>meclizine hcl</i>	130
LUMIGAN	127	<i>meclofenamate sodium</i>	72
LUMIZYME	123	MEDROL	137
LUNESTA	93	MEDROL DOSEPAK	137
LUPANETA PACK	27	<i>medroxyprogesterone acetate</i>	153
LUPRON DEPOT (1-MONTH)	27	<i>mefenamic acid</i>	72
LUPRON DEPOT (3-MONTH)	27	<i>mefloquine hcl</i>	14
LUPRON DEPOT (4-MONTH)	27	MEGACE ES	153
LUPRON DEPOT (6-MONTH)	27	MEGACE ORAL	27
LUPRON DEPOT-PED (1-MONTH)	27	<i>megestrol acetate</i>	27
LUPRON DEPOT-PED (3-MONTH)	27	<i>megestrol acetate</i>	154
<i>lutera</i>	148	MEKINIST	27
LUXIQ	174	MEKTOVI	27
LUZU	170	<i>melodetta 24 fe</i>	148
LYNPARZA	27	<i>meloxicam</i>	72
LYNPARZA	31	<i>melphalan hydrochloride</i>	27
LYRICA	85	<i>memantine hcl</i>	95
LYRICA CR	72	<i>memantine hcl titration pak</i>	95
LYSODREN	27	<i>memantine hydrochloride</i>	96

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<i>memantine hydrochloride er</i>	95	METHYLIN	80
MENACTRA	34	<i>methylphenidate hcl sr</i>	80
MENEST	152	<i>methylphenidate hydrochloride</i>	80
MENHIBRIX	34	<i>methylphenidate hydrochloride cd</i>	80
MENOMUNE-A/C/Y/W-135	34	<i>methylphenidate hydrochloride er</i>	80
MENOSTAR	152	<i>methylphenidate hydrochloride er (la)</i>	80
MENTAX	170	<i>methylprednisolone</i>	137
MENVEO	34	<i>methylprednisolone acetate</i>	137
<i>meperidine hcl</i>	72	<i>methylprednisolone dose pack</i>	137
<i>meprobamate</i>	93	<i>methylprednisolone sodiumsuccinate</i>	137
MEPRON	14	<i>methyltestosterone</i>	139
<i>mercaptopurine</i>	27	<i>metipranolol</i>	127
<i>meropenem</i>	8	<i>metoclopramide hcl</i>	134
<i>meropenem/sodium chloride</i>	8	<i>metoclopramide odt</i>	134
MERREM	8	<i>metolazone</i>	118
<i>mesalamine</i>	129	METOPIRONE	176
<i>mesalamine dr</i>	129	<i>metoprolol succinate er</i>	50
<i>mesna</i>	165	<i>metoprolol tartrate</i>	50
MESNEX	166	<i>metoprolol/hydrochlorothiazide</i>	50
MESTINON	36	METOZOLV ODT	134
MESTINON TIMESPAN	36	METROCREAM	170
METADATE CD	79	METROGEL	170
<i>metadate er</i>	80	METROGEL-VAGINAL	170
<i>metaproterenol sulfate</i>	40	METROLOTION	170
<i>metaxall</i>	38	<i>metronidazole</i>	14
<i>metaxalone</i>	38	<i>metronidazole</i>	170
<i>metformin hcl</i>	143	<i>metronidazole in nacl 0.79%</i>	14
<i>metformin hcl er</i>	143	<i>metronidazole vaginal</i>	170
<i>metformin hydrochloride</i>	143	<i>mexiletine hcl</i>	57
<i>methadone hcl</i>	72	MIACALCIN	153
<i>methadone hcl intensol</i>	72	<i>mibelas 24 fe</i>	148
METHADOSE	72	MICARDIS	62
METHADOSE SUGAR-FREE	72	MICARDIS HCT	62
<i>methamphetamine hcl</i>	80	<i>miconazole 3</i>	170
<i>methazolamide</i>	127	MICORT-HC	174
<i>methenamine hippurate</i>	20	MICRHOGAM ULTRA-FILTERED PLUS	33
<i>methergine</i>	166	<i>microgestin 1.5/30</i>	148
<i>methimazole</i>	156	<i>microgestin 1/20</i>	148
METHITEST	139	<i>microgestin 24 fe</i>	148
<i>methocarbamol</i>	38	<i>microgestin fe</i>	148
<i>methotrexate</i>	27	<i>microgestin fe 1.5/30</i>	148
<i>methotrexate sodium</i>	27	MICRO-K	121
<i>methoxsalen</i>	177	MICROZIDE	118
<i>methscopolamine bromide</i>	35	<i>midazolam hcl</i>	94
<i>methyclothiazide</i>	118	<i>midazolam hydrochloride</i>	94
<i>methyl dopa</i>	59	<i>midodrine hcl</i>	40
<i>methyl dopa/hydrochlorothiazide</i>	59	MIGERGOT	88
<i>methyl dopate hcl</i>	59	<i>miglitol</i>	143
<i>methylergonovine maleate</i>	166	MIGLUSTAT	165

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<i>mili</i>	148	MORPHABOND ER	72
MILLIPRED	137	<i>morphine sulfate</i>	73
MILLIPRED DP	137	MORPHINE SULFATE	118
<i>milrinone in dextrose</i>	57	<i>morphine sulfate er</i>	72
<i>milrinone lactate</i>	57	<i>morphine sulfate/sodium chloride</i>	73
<i>mimvey</i>	152	MOTOFEN	129
<i>mimvey lo</i>	152	MOVANTIK	134
MINASTRIN 24 FE	148	MOVIPREP	133
MINIPRESS	45	MOXATAG	9
<i>minitran</i>	64	MOXEZA	124
MINIVELLE	152	<i>moxifloxacin hydrochloride/sodium</i>	9
MINOCIN	8	<i>hydrochloride</i>	
<i>minocycline hcl</i>	8	<i>moxifloxacin hcl</i>	9
<i>minocycline hcl er</i>	179	<i>moxifloxacin hydrochloride</i>	158
<i>minocycline hydrochloride er</i>	179	MOZOBIL	44
<i>minoxidil</i>	59	MS CONTIN	73
MIRAPEX	90	MULPLETA	45
MIRAPEX ER	90	MULTAQ	58
MIRCERA	44	<i>multivitamin with fluoride</i>	181
MIRCETTE	148	MULTIVITAMIN/FLUORIDE	181
MIRENA	148	<i>mupirocin</i>	170
<i>mirtazapine</i>	101	<i>mupirocin calcium</i>	170
<i>mirtazapine odt</i>	101	MUSTARGEN	28
MIRVASO	179	MYALEPT	153
<i>misoprostol</i>	131	MYAMBUTOL	13
MITIGARE	159	MYCAMINE	13
<i>mitigo</i>	72	MYCOBUTIN	13
<i>mitomycin</i>	27	<i>mycophenolate mofetil</i>	164
<i>mitoxantrone hcl</i>	27	<i>mycophenolic acid dr</i>	164
M-M-R II	34	MYDAYIS	80
MOBIC	72	MYFORTIC	164
<i>modafinil</i>	80	MYLOTARG	28
<i>moderiba</i>	17	MYOBLOC	165
<i>moderiba 1200 dose pack</i>	16	<i>myorisan</i>	179
<i>moderiba 800 dose pack</i>	16	MYRBETRIQ	180
MODICON	148	MYSOLINE	85
<i>moexipril hcl</i>	62	MYTESI	129
<i>moexipril/hydrochlorothiazide</i>	62	<i>myzilra</i>	148
<i>molindone hydrochloride</i>	101	NABI-HB	33
<i>mometasone furoate</i>	125	<i>nabumetone</i>	73
<i>mometasone furoate</i>	174	<i>nadolol</i>	50
<i>mondoxyne nl</i>	9	<i>nadolol/bendroflumethiazide</i>	50
<i>mono-lynyah</i>	148	NAFCILLIN	9
<i>mononessa</i>	148	<i>nafcillin sodium</i>	9
<i>montelukast sodium</i>	166	<i>naftifine hcl</i>	170
MONUROL	20	<i>naftifine hydrochloride</i>	170
<i>morgidox 1x100mg</i>	9	NAFTIN	170
<i>morgidox 1x50mg</i>	9	NAGLAZYME	123

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<i>naloxone hcl</i>	96	NEOSPORIN	124
<i>naltrexone hcl</i>	96	NEOSPORIN GU IRRIGANT	170
NAMENDA	96	NEO-SYNALAR	174
NAMENDA TITRATION PAK	96	NEPHRAMINE	114
NAMENDA XR	96	NEPTAZANE	127
NAMENDA XR TITRATION PACK	96	NERLYNX	28
NAMZARIC	96	NESINA	143
<i>naphazoline hcl</i>	128	<i>neuac</i>	170
NAPRELAN	73	NEULASTA	44
NAPROSYN	73	NEULASTA ONPRO KIT	44
<i>naproxen</i>	74	NEUPOGEN	44
<i>naproxen dr</i>	73	NEUPRO	90
<i>naproxen sodium</i>	74	NEURONTIN	85
<i>naproxen sodium cr</i>	73	NEUT	118
<i>naproxen sodium er</i>	73	NEVANAC	125
<i>naratriptan hcl</i>	88	<i>nevirapine</i>	17
NARCAN	97	<i>nevirapine er</i>	17
NARDIL	101	NEXAVAR	28
NASONEX	125	NEXIUM	131
NATACYN	124	NEXIUM I.V.	131
NATAZIA	148	NEXPLANON	148
<i>nateglinide</i>	143	NEXTERONE	58
NATESTO	139	<i>niacin er</i>	47
NATPARA	153	<i>niacor</i>	182
NATROBA	170	NIASPAN	47
NEBUPENT	14	<i>nicardipine hcl</i>	54
<i>nebusal</i>	167	NICARDIPINE	55
<i>necon 0.5/35-28</i>	148	HYDROCHLORIDE/DEXTROSE	
<i>necon 1/35</i>	148	NICOTROL INHALER	36
<i>necon 1/50-28</i>	148	NICOTROL NS	36
<i>necon 10/11-28</i>	148	<i>nifedical xl</i>	55
<i>necon 7/7/7</i>	148	<i>nifedipine</i>	55
<i>nefazodone hcl</i>	101	<i>nifedipine er</i>	55
<i>nefazodone hydrochloride</i>	101	<i>nikki</i>	148
NEMBUTAL SODIUM	94	NILANDRON	28
<i>neomycin sulfate</i>	9	NILUTAMIDE	28
<i>neomycin/bacitracin/polymyxin</i>	124	<i>nimodipine</i>	55
<i>neomycin/polymyxin b sulfates</i>	170	NINLARO	28
<i>neomycin/polymyxin/bacitracin zinc</i>	124	NIPENT	28
<i>neomycin/polymyxin/bacitracin/hydrocortisone</i>	125	<i>nisoldipine er</i>	55
<i>neomycin/polymyxin/dexamethasone</i>	125	NITRO-BID	64
<i>neomycin/polymyxin/gramicidin</i>	124	NITRO-DUR	64
<i>neomycin/polymyxin/hc</i>	125	<i>nitrofurantoin</i>	20
<i>neomycin/polymyxin/hydrocortisone</i>	125	<i>nitrofurantoin macrocrystals</i>	20
<i>neo-polycin</i>	124	<i>nitrofurantoin monohydrate</i>	20
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<i>nitroglycerin in dextrose 5%</i>	64	NOVOLIN N	143
<i>nitroglycerin lingual</i>	64	NOVOLIN N RELION	143
<i>nitroglycerin transdermal</i>	64	NOVOLIN R	143
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NITROSTAT	64	NOVOLOG FLEXPEN	143
NITYR	165	NOVOLOG MIX 70/30	143
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<i>nizatidine</i>	131	FLEXPEN	
NIZORAL	170	NOVOLOG PENFILL	143
NOCTIVA	153		
NOLIX	174	NOXAFIL	13
<i>nora-be</i>	148	<i>np thyroid 120</i>	156
NORCO	74	<i>np thyroid 15</i>	156
NORDITROPIN FLEXPEN	155	<i>np thyroid 30</i>	157
<i>norepinephrine bitartrate</i>	40	<i>np thyroid 60</i>	157
<i>norethindrone</i>	148	<i>np thyroid 90</i>	157
<i>norethindrone &amp; ethinyl estradiol ferrous fumarate</i>	148	NPLATE	44
<i>norethindrone acetate</i>	154	NUCALA	166
<i>norethindrone acetate/ethinyl estradiol</i>	148	NUCYNTA	74
<i>norethindrone acetate/ethinyl estradiol</i>	152	NUCYNTA ER	74
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate</i>	148	NUDEXTA	96
<i>norethindrone/ethinyl estradiol/ferrous fumarate</i>	148	NULOJIX	164
<i>norgestimate/ethinyl estradiol</i>	148	NULYTELY/FLAVOR PACKS	133
NORINYL 1+35	148	NUPLAZID	102
NORINYL 1+50	149	NUTRESTORE	134
NORITATE	170	NUTRILIPID	114
<i>norlyroc</i>	149	NUTROPIN AQ NUSPIN 10	155
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NORMOSOL-M IN D5W	121	NUTROPIN AQ NUSPIN 5	155
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NORPACE	58	NUVESSA	170
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NORPRAMIN	102	<i>nyamyc</i>	170
NOR-QD	148	<i>nyata</i>	170
NORTHERA	40	NYMALIZE	55
<i>nortrel 0.5/35 (28)</i>	149	<i>nystatin</i>	13
<i>nortrel 1/35</i>	149	<i>nystatin</i>	170
<i>nortrel 7/7/7</i>	149	<i>nystatin/triamcinolone</i>	174
<i>nortriptyline hcl</i>	102	<i>nystatin/triamcinolone acetate</i>	174
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NORVIR	17	OICALIVA	134
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ODOMZO	28	STARTER PACK	
OFEV	166	<i>oralone dental paste</i>	174
<i>ofloxacin</i>	9	ORAP	102
<i>ofloxacin</i>	124	ORAPRED ODT	137
<i>ogestrel</i>	149	ORAVIG	171
<i>okebo</i>	9	ORBACTIV	9
<i>olanzapine</i>	102	ORENCIA	96
<i>olanzapine odt</i>	102	ORENCIA	162
<i>olanzapine/fluoxetine</i>	102	ORENCIA CLICKJECT	161
<i>olmesartan medoxomil</i>	62	ORENITRAM	167
<i>olmesartan</i>	55	ORFADIN	165
<i>medoxomil/amlodipine/hydrochlorothiazide</i>		ORLISSA	152
<i>olmesartan medoxomil/hydrochlorothiazide</i>	62	ORKAMBI	167
<i>olopatadine hcl</i>	126	<i>orphenadrine citrate</i>	38
<i>olopatadine hydrochloride</i>	128	<i>orphenadrine citrate er</i>	38
OLUMIANT	161	<i>orsythia</i>	149
OLUX	174	ORTHO MICRONOR	149
OLUX-E	174	ORTHO TRI-CYCLEN	149
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OMECLAMOX-PAK	131	ORTHO-CYCLEN	149
<i>omega-3-acid ethyl esters</i>	47	ORTHO-NOVUM 1/35	149
<i>omeprazole</i>	132	ORTHO-NOVUM 7/7/7	149
<i>omeprazole/sodium bicarbonate</i>	131	<i>oseltamivir phosphate</i>	17
OMNARIS	125	OSENI	144
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OMNIPOD 5 PACK	107	OSMOLEX ER	90
OMNIPOD STARTER KIT	108	OSMOPREP	133
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<i>ondansetron hydrochloride/sodium chloride</i>	130	OVCON-35	149
<i>ondansetron odt</i>	130	OVIDE	171
ONEXTON	171	<i>oxacillin sodium</i>	9
ONFI	85	<i>oxaliplatin</i>	28
ONGLYZA	143	<i>oxandrolone</i>	139
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ONPATTRO	165	OXAYDO	74
ONZETRA XSAIL	88	<i>oxazepam</i>	94
OPANA	74	<i>oxcarbazepine</i>	85
OPANA ER (CRUSH RESISTANT)	74	<i>oxiconazole nitrate</i>	171
OPDIVO	28	OXISTAT	171
<i>opium</i>	129	OXSORALEN ULTRA	177
<i>opium tincture</i>	129	OXTELLAR XR	85
OPSUMIT	167	<i>oxybutynin chloride</i>	180

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<i>oxycodone hcl er</i>	74	PEGASYS PROCLICK	17
<i>oxycodone/acetaminophen</i>	75	PEGINTRON	17
<i>oxycodone/aspirin</i>	75	PEG-INTRON	17
<i>oxycodone/ibuprofen</i>	75	PEG-INTRON REDIPEN	17
OXYCONTIN	75	PEG-INTRON REDIPEN PAK 4	17
<i>oxymorphone hydrochloride</i>	75	<i>penicillin g potassium</i>	9
<i>oxymorphone hydrochloride er</i>	75	<i>penicillin g potassium in iso-osmotic dextrose</i>	9
OXYTROL	180	<i>penicillin g procaine</i>	9
OZEMPIC	144	<i>penicillin g sodium</i>	9
<i>pacerone</i>	58	<i>penicillin v potassium</i>	9
<i>paclitaxel</i>	28	PENLAC NAIL LACQUER	171
<i>paliperidone er</i>	102	PENNSAID	179
<i>palonosetron hydrochloride</i>	130	PENTACEL	34
PALYNZIQ	123	PENTAM 300	14
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PAMINE FORTE	35	<i>pentoxifylline er</i>	44
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PANDEL	175	PERCOCET	75
<i>panlor</i>	75	PERFOROMIST	40
PANRETIN	179	PERIKABIVEN	114
<i>pantoprazole sodium</i>	132	<i>perindopril erbumine</i>	62
PARAFON FORTE DSC	38	<i>periogard</i>	124
PAREGORIC	129	PERJETA	28
<i>paricalcitol</i>	182	<i>permethrin</i>	171
PARLODEL	90	<i>perphenazine</i>	103
PARNATE	102	<i>perphenazine/amitriptyline</i>	103
<i>paroex</i>	124	PERSANTINE	64
<i>paromomycin sulfate</i>	14	PERSERIS	103
<i>paroxetine</i>	103	PERTZYE	133
<i>paroxetine hcl</i>	102	PEXEVA	103
<i>paroxetine hcl er</i>	102	<i>pfizerpen</i>	9
PASER	13	<i>phenadoz</i>	20
PATADAY	126	<i>phenazo</i>	176
PATANASE	126	<i>phenazopyridine hcl</i>	176
PATANOL	126	<i>phenelzine sulfate</i>	103
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PAXIL CR	103	<i>phenobarbital</i>	94
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<i>phospha 250 neutral</i>	121
PHOSPHOLINE IODIDE	127
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<i>phrenilin forte</i>	75
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<i>pilocarpine hcl</i>	37
<i>pilocarpine hcl</i>	127
<i>pilocarpine hydrochloride</i>	37
<i>pimozide</i>	103
<i>pimtreea</i>	149
<i>pindolol</i>	50
<i>pioglitazone hcl</i>	144
<i>pioglitazone hcl/metformin hcl</i>	144
<i>pioglitazone hcl-glimepiride</i>	144
<i>piperacillin sodium/ tazobactam sodium</i>	9
<i>piperacillin sodium/tazobactam sodium</i>	9
<i>piperacillin/tazobactam</i>	10
<i>pirmella 1/35</i>	149
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<i>polymyxin b sulfate</i>	10
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<i>praziquantel</i>	1
<i>prazosin hcl</i>	45
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<i>prednisolone</i>	138
<i>prednisolone acetate</i>	126
<i>prednisolone acetate p-f</i>	128
<i>prednisolone sodium phosphate</i>	126
<i>prednisolone sodium phosphate</i>	138
<i>prednisolone sodium phosphate odt</i>	138
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PRIALT	75	<i>propafenone hydrochloride er</i>	58
PRIFTIN	13	<i>propantheline bromide</i>	35
PRILOSEC	132	<i>proparacaine hcl</i>	128
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PRIMAXIN IV	10	<i>propranolol hcl er</i>	50
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<i>primidone</i>	86	<i>propranolol/hydrochlorothiazide</i>	51
PRIMLEV	75	<i>propylthiouracil</i>	157
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<i>probenecid</i>	122	PROTOPIC	179
<i>probenecid/colchicine</i>	122	<i>protriptyline hcl</i>	103
<i>procainamide hcl</i>	58	PROVENTIL HFA	40
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<i>prochlorperazine edisylate</i>	103	PSORCON	175
<i>prochlorperazine maleate</i>	103	PULMICORT	138
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<i>procto-med hc</i>	175	PURIXAN	28
<i>procto-pak</i>	175	PYLERA	132
<i>proctosol hc</i>	175	<i>pyrazinamide</i>	13
<i>proctozone-hc</i>	175	PYRIDIUM	176
PROCYSBI	165	<i>pyridostigmine bromide</i>	37
PROFENO	75	<i>pyridostigmine bromide er</i>	37
<i>progesterone</i>	154	QBRELIS	62
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QUILLICHEW ER	81	RENACIDIN	120
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<i>quinapril hcl</i>	62	RENFLEXIS	162
<i>quinapril/hydrochlorothiazide</i>	62	REVELA	119
<i>quinidine gluconate</i>	58	<i>repaglinide</i>	144
<i>quinidine gluconate cr</i>	58	<i>repaglinide/metformin hydrochloride</i>	144
<i>quinidine gluconate er</i>	58	REPATHA	47
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<i>quinine sulfate</i>	14	REPATHA SURECLICK	47
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RABAVERT	34	REQUIP XL	91
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<i>rajani</i>	149	RESTASIS MULTIDOSE	128
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<i>ramipril</i>	62	RETACRIT	44
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<i>rasagiline mesylate</i>	91	REVATIO	65
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<i>ringers irrigation</i>	120	SALAGEN	37
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<i>risperidone</i>	104	SANDOSTATIN LAR DEPOT	154
<i>risperidone m-tab</i>	104	SANTYL	179
<i>risperidone odt</i>	104	SAPHRIS	105
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RITALIN LA	81	SAVAYSA	43
<i>ritonavir</i>	18	SAVELLA	96
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<i>rivastigmine transdermal system</i>	37	SECONAL	94
<i>rivelsa</i>	149	SECONAL SODIUM	94
<i>rizatriptan benzoate</i>	88	SECTRAL	51
<i>rizatriptan benzoate odt</i>	88	SEEBRI NEOHALER	36
ROBAXIN	38	SEGLUROMET	144
ROBAXIN-750	38	<i>selegiline hcl</i>	91
ROBINUL	35	<i>selenium sulfide</i>	171
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<i>ropinirole hcl</i>	91	SEMPREX-D	21
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<i>rosuvastatin calcium</i>	47	SEREVENT DISKUS	40
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<i>roweepra xr</i>	86	<i>sertraline hcl</i>	105
ROXICODONE	75	<i>setlakin</i>	149
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ROZEREM	94	SFROWASA	129
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RUCONEST	161	SHINGRIX	34
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SIGNIFOR LAR	154	SOLU-MEDROL	138
SIKLOS	29	SOMA	38
<i>sildenafil</i>	65	SOMATULINE DEPOT	154
SILENOR	105	SOMAVERT	155
SILIQ	179	SONATA	94
SILVADENE	171	SOOLANTRA	171
<i>silver sulfadiazine</i>	171	SORIATANE	179
SIMBRINZA	127	SORILUX	179
SIMCOR	47	<i>sorine</i>	51
SIMPONI	162	<i>sotalol hcl</i>	51
SIMPONI ARIA	162	<i>sotalol hcl (af)</i>	51
SIMULECT	164	<i>sotalol hcl af</i>	51
<i>simvastatin</i>	48	SOTALOL HYDROCHLORIDE	51
SINEMET	91	<i>sotalol hydrochloride (af)</i>	51
SINEMET CR	91	<i>sotalol hydrochloride af</i>	51
SINGULAIR	166	SOTYLIZE	51
<i>sirolimus</i>	164	SOVALDI	18
SIRTURO	14	SPIRIVA HANDIHALER	36
SIVEXTRO	10	SPIRIVA RESPIMAT	36
SKELAXIN	38	<i>spironolactone</i>	63
SKLICE	171	<i>spironolactone/hydrochlorothiazide</i>	63
SKYLA	149	SPORANOX	13
SMOFLIPID	115	SPORANOX PULSEPAK	13
<i>sodium acetate</i>	108	<i>sprintec 28</i>	149
<i>sodium bicarbonate</i>	108	SPRITAM	86
<i>sodium bicarbonate/dextrose</i>	108	SPRIX	76
<i>sodium chloride</i>	122	SPRYCEL	29
<i>sodium chloride</i>	167	<i>sps</i>	119
<i>sodium chloride 0.9%</i>	120	<i>sronyx</i>	149
<i>sodium chloride 0.45%</i>	122	<i>ssd</i>	171
<i>sodium chloride 0.9%</i>	120	STALEVO 100	91
SODIUM DIURIL	118	STALEVO 125	91
SODIUM EDECRIN	118	STALEVO 150	91
<i>sodium ferric gluconate complex/sucrose</i>	40	STALEVO 200	91
<i>sodium fluoride</i>	160	STALEVO 50	91
<i>sodium lactate</i>	108	STALEVO 75	91
<i>sodium phenylacetate/sodium benzoate</i>	108	STAMARIL	34
<i>sodium phenylbutyrate</i>	108	STARLIX	144
<i>sodium phosphate</i>	122	<i>stavudine</i>	18
<i>sodium polystyrene sulfonate</i>	119	STEGLATRO	144
<i>sodium sulfacetamide</i>	124	STEGLUJAN	144
<i>sodium sulfacetamide</i>	171	STELARA	134
SOLARAZE	179	STELARA	179
SOLQUA 100/33	144	<i>sterile water for injection</i>	166
SOLIRIS	161	<i>sterile water irrigation</i>	120
SOLODYN	179	<i>sterile water irrigation plastic bottle</i>	120
SOLOSEC	14	STIMATE	153
SOLTAMOX	29	STIOLTO RESPIMAT	36
SOLU-CORTEF	138	STIVARGA	29

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STRATTERA	96	SYMPROIC	134
STRENSIQ	123	SYMTUZA	18
<i>streptomycin sulfate</i>	10	SYNAGIS	18
STRIANT	139	SYNALAR	175
STRIBILD	18	SYNALAR CREAM KIT	175
STRIVERDI RESPIMAT	40	SYNALAR OINTMENT KIT	175
STROMEKTOL	1	SYNALAR TS	175
SUBOXONE	76	SYNALGOS-DC	76
SUBSYS	76	SYNAREL	152
<i>subvenite</i>	86	SYNDROS	130
<i>subvenite starter kit/blue</i>	86	SYNERA	176
<i>subvenite starter kit/green</i>	86	SYNERCID	10
<i>subvenite starter kit/orange</i>	86	SYNJARDY	145
<i>succinylcholine chloride</i>	38	SYNJARDY XR	144
SUCRAID	123	SYNRIBO	29
<i>sucralfate</i>	132	SYNTHROID	157
SULAR	55	SYPRINE	135
<i>sulfacetamide sodium</i>	124	TABLOID	29
<i>sulfacetamide sodium</i>	171	TACLONEX	175
<i>sulfacetamide sodium/prednisolone sodium</i>	126	<i>tacrolimus</i>	164
<i>phosphate</i>		<i>tacrolimus</i>	179
<i>sulfadiazine</i>	10	<i>tadalafil</i>	65
<i>sulfamethoxazole/trimethoprim</i>	10	TAFINLAR	29
<i>sulfamethoxazole/trimethoprim ds</i>	10	TAGRISSE	29
SULFAMYLON	171	TAKHZYRO	161
<i>sulfasalazine</i>	10	TALTZ	179
<i>sulfatrim pediatric</i>	10	TALWIN	76
<i>sulindac</i>	76	TAMIFLU	18
<i>sumatriptan</i>	89	<i>tamoxifen citrate</i>	29
<i>sumatriptan succinate</i>	88	<i>tamsulosin hcl</i>	38
<i>sumatriptan succinate refill</i>	88	TANZEUM	145
<i>sumatriptan/naproxen sodium</i>	89	TAPAZOLE	157
SUMAVEL DOSEPRO	89	TAPERDEX 12-DAY	138
SUPRAX	10	TAPERDEX 6-DAY	139
SUPREP BOWEL PREP KIT	133	TARCEVA	29
SURMONTIL	105	TARGADOX	10
SUSTIVA	18	TARGRETIN	29
SUSTOL	130	TARGRETIN	179
SUTENT	29	<i>tarina fe 1/20</i>	149
<i>syeda</i>	149	TARKA	55
SYLATRON	29	TASIGNA	29
SYLVANT	29	TASMAR	91
SYMBICORT	138	TAVALISSE	44
SYMBYAX	105	TAXOTERE	29
SYMDEKO	167	TAYTULLA	149
<i>symfi</i>	18	<i>tazarotene</i>	179
<i>symfi lo</i>	18	<i>tazicef</i>	10
SYMLINPEN 120	144	TAZORAC	179
SYMLINPEN 60	144	<i>taztia xt</i>	55

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TECFIDERA STARTER PACK	163	THERACYS	34
TECHNIVIE	19	THIOLA	165
TEFLARO	10	<i>thioridazine hcl</i>	105
TEGRETOL	86	<i>thiotepa</i>	29
TEGRETOL-XR	86	<i>thiothixene</i>	105
TEKTURNA	63	THYMOGLOBULIN	164
TEKTURNA HCT	63	THYROLAR-1	157
<i>telmisartan</i>	63	THYROLAR-1/2	157
<i>telmisartan/amlodipine</i>	56	THYROLAR-1/4	157
<i>telmisartan/hydrochlorothiazide</i>	63	THYROLAR-2	157
<i>temazepam</i>	94	THYROLAR-3	157
TEMODAR	29	<i>tiagabine hydrochloride</i>	86
TEMOVATE	175	TIAZAC	56
TEMOVATE E	175	TIBSOVO	29
TEMSIROLIMUS	29	TICE BCG	34
<i>tencon</i>	76	TIGAN	130
TENEX	59	<i>tigecycline</i>	10
TENIVAC	33	TIKOSYN	58
<i>tenofovir disoproxil fumarate</i>	19	<i>tilia fe</i>	149
TENORETIC 100	51	<i>timolol maleate</i>	51
TENORETIC 50	51	<i>timolol maleate</i>	127
TENORMIN	51	<i>timolol maleate ophthalmic gel forming</i>	127
TEPADINA	29	TIMOPTIC	127
TERAZOL 3	171	TIMOPTIC OCUDOSE	127
TERAZOL 7	171	TIMOPTIC-XE	127
<i>terazosin hcl</i>	45	TINDAMAX	14
<i>terbinafine hcl</i>	13	<i>tinidazole</i>	14
<i>terbutaline sulfate</i>	40	TIROSINT	157
<i>terconazole</i>	171	<i>tis-u-sol</i>	120
TESTIM	139	TIVICAY	19
<i>testosterone</i>	139	TIVORBEX	76
<i>testosterone cypionate</i>	139	<i>tizanidine hcl</i>	38
<i>testosterone enanthate</i>	139	TL-FLUORIVITE	182
<i>testosterone pump</i>	139	TOBI	10
<i>testosterone topical solution</i>	139	TOBI PODHALER	10
TESTRED	140	TOBRADEX	126
TETANUS/DIPHThERIA TOXOIDS- ADSORBED	33	TOBRADEX ST	126
<i>tetrabenazine</i>	96	<i>tobramycin</i>	10
<i>tetracycline hcl</i>	10	<i>tobramycin sulfate</i>	10
<i>tetracycline hydrochloride</i>	10	<i>tobramycin sulfate</i>	124
TEXACORT	175	<i>tobramycin/dexamethasone</i>	126
THALOMID	163	TOBREX	124
THEO-24	181	TOFRANIL	105
<i>theochron</i>	181	TOLAK	180
<i>theophylline</i>	181	<i>tolazamide</i>	145
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<i>tolmetin sodium</i>	76	<i>triamcinolone acetonide dental paste</i>	175
<i>tolterodine tartrate</i>	180	<i>triamterene/hydrochlorothiazide</i>	119
<i>tolterodine tartrate er</i>	180	TRIANEX	175
TOPAMAX	86	<i>triazolam</i>	94
TOPAMAX SPRINKLE	86	TRIBENZOR	56
TOPICORT	175	TRICOR	48
<i>topiramate</i>	87	<i>triderm</i>	175
<i>topiramate er</i>	87	TRIDESILON	175
<i>toposar</i>	29	<i>trientine hydrochloride</i>	135
<i>topotecan hcl</i>	29	<i>tri-estarylla</i>	149
TOPROL XL	51	<i>trifluoperazine hcl</i>	106
TORISEL	30	<i>trifluridine</i>	124
<i>torseamide</i>	118	TRIGLIDE	48
TOUJEO MAX SOLOSTAR	145	<i>trihexyphenidyl hcl</i>	91
TOUJEO SOLOSTAR	145	<i>triklo</i>	48
TOVIAZ	180	<i>tri-legest fe</i>	149
TPN ELECTROLYTES	122	TRILEPTAL	87
TRACLEER	168	<i>tri-linyah</i>	149
TRADJENTA	145	TRILIPIX	48
<i>tramadol hcl</i>	76	<i>tri-lo-estarylla</i>	149
<i>tramadol hcl er</i>	76	<i>tri-lo-marzia</i>	149
<i>tramadol hydrochloride/acetaminophen</i>	76	<i>tri-lo-sprintec</i>	149
<i>trandolapril</i>	63	<i>trilyte</i>	133
<i>trandolapril/verapamil hcl er</i>	56	<i>trimethobenzamide hcl</i>	130
<i>tranexamic acid</i>	41	<i>trimethoprim</i>	20
TRANSDERM-SCOP	130	<i>tri-mili</i>	149
TRANXENE T	94	<i>trimipramine maleate</i>	106
<i>tranylcypromine sulfate</i>	105	<i>trinessa</i>	150
TRAVASOL	115	<i>trinessa lo</i>	150
TRAVATAN Z	127	TRI-NORINYL 28	149
<i>travoprost</i>	127	TRINTELLIX	106
<i>trazodone hydrochloride</i>	105	TRIOSTAT	157
TREANDA	30	<i>tri-previfem</i>	149
TRECTOR	14	TRIPTODUR	152
TRELEGY ELLIPTA	139	TRISENOX	30
TRELSTAR MIXJECT	30	<i>tri-sprintec</i>	150
TREMFYA	180	TRIUMEQ	19
TRESIBA FLEXTOUCH	145	TRI-VI-FLOR	182
<i>tretinoin</i>	30	<i>trivora-28</i>	150
<i>tretinoin</i>	177	<i>tri-vylibra</i>	150
<i>tretinoin microsphere</i>	177	TRIZIVIR	19
<i>tretinoin microsphere pump</i>	177	TROGARZO	19
TRETIN-X	177	TROKENDI XR	87
TREXALL	30	TROPHAMINE	115
TREXIMET	89	<i>trospium chloride</i>	181
TREZIX	76	<i>trospium chloride er</i>	181
<i>triamcinolone acetonide</i>	126	TRULANCE	134
<i>triamcinolone acetonide</i>	139	TRULICITY	145
<i>triamcinolone acetonide</i>	175	TRUMENBA	34

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TRUSOPT	127	<i>valganciclovir hydrochloride</i>	19
TRUVADA	19	VALIUM	94
TUDORZA PRESSAIR	36	<i>valproate sodium</i>	87
TWINRIX	34	<i>valproic acid</i>	87
TWYNSTA	56	<i>valsartan</i>	63
TYBOST	165	<i>valsartan/hydrochlorothiazide</i>	63
<i>tydemy</i>	150	VALSTAR	30
TYGACIL	11	VALTREX	19
TYKERB	30	<i>vanatol lq</i>	76
TYLENOL/CODEINE #3	76	VANCOCIN HCL	11
TYLENOL/CODEINE #4	76	<i>vancomycin</i>	11
TYMLOS	153	<i>vancomycin hcl</i>	11
TYPHIM VI	34	<i>vancomycin hcl in dextrose</i>	11
TYSABRI	163	VANCOMYCIN HYDROCHLORIDE	11
TYVASO	168	<i>vancomycin hydrochloride/sodium chloride</i>	11
TYVASO REFILL	168	<i>vandazole</i>	171
TYVASO STARTER	168	VANOS	176
TYZEKA	19	VANTAS	30
UCERIS	139	VAQTA	35
UCERIS	175	VARIVAX	35
ULORIC	159	VARIZIG	33
ULTRACET	76	VARUBI	130
ULTRAM	76	VASCEPA	48
ULTRAM ER	76	VASERETIC	63
ULTRAVATE	176	VASOSTRICT	153
ULTRESA	134	VASOTEC	63
UNASYN	11	VAZCULEP	40
UNASYN BULK PACK	11	VECAMEYL	59
UNITHROID	157	VECTIBIX	30
<i>unithroid direct</i>	157	VECTICAL	180
UNITUXIN	30	VELCADE	30
UPTRAVI	168	VELETRI	168
URECHOLINE	37	<i>velivet</i>	150
UROCIT-K 10	108	VELPHORO	119
UROCIT-K 15	108	VELTASSA	119
UROCIT-K 5	108	VELTIN	180
UROXATRAL	38	VEMLIDY	19
URSO 250	133	VENCLEXTA	30
URSO FORTE	133	VENCLEXTA STARTING PACK	30
<i>ursodiol</i>	133	<i>venlafaxine hcl</i>	106
UTIBRON NEOHALER	40	<i>venlafaxine hcl er</i>	106
UVADEX	177	<i>venlafaxine hydrochloride er</i>	106
VABOMERE	11	VENTAVIS	168
VAGIFEM	152	VENTOLIN HFA	40
<i>valacyclovir hcl</i>	19	VERAMYST	126
<i>valacyclovir hydrochloride</i>	19	<i>verapamil hcl</i>	56
VALCHLOR	180	<i>verapamil hcl er</i>	56
VALCYTE	19	<i>verapamil hcl sr</i>	56
<i>valganciclovir</i>	19	<i>verdrocet</i>	76

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VERELAN	56	VISTARIL	95
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VERIPRED 20	139	<i>vitamins a/c/d/fluoride</i>	182
VERSACLOZ	106	VITEKTA	19
VERZENIO	30	VIVELLE-DOT	152
VESICARE	181	VIVITROL	97
<i>vestura</i>	150	VIVLODEX	77
VEXOL	126	VOGELXO	140
VFEND	13	VOGELXO PUMP	140
VFEND IV	13	VOLTAREN	180
<i>v-go 20</i>	108	<i>voriconazole</i>	13
<i>v-go 30</i>	108	VOSEVI	19
<i>v-go 40</i>	108	VOSPIRE ER	40
VIBATIV	11	VOTRIENT	30
VIBERZI	134	VP-PNV-DHA	182
VIBRAMYCIN	11	VPRIV	123
<i>vicodin</i>	76	VRAYLAR	106
<i>vicodin es</i>	76	VUSION	171
<i>vicodin hp</i>	76	<i>vyfemla</i>	150
VICOPROFEN	76	<i>vylibra</i>	150
VICTOZA	145	VYTORIN	48
VICTRELIS	19	VYVANSE	81
VIDAZA	30	VYXEOS	30
VIDEX EC	19	VYZULTA	128
VIDEX PEDIATRIC	19	<i>warfarin sodium</i>	43
VIEKIRA PAK	19	WELCHOL	48
VIEKIRA XR	19	WELLBUTRIN	106
<i>vienva</i>	150	WELLBUTRIN SR	106
<i>vigabatrin</i>	87	WELLBUTRIN XL	106
VIGADRONE	87	<i>wera</i>	150
VIGAMOX	124	WESTCORT	176
VIIBRYD	106	WINRHO SDF	33
VIIBRYD STARTER PACK	106	<i>wymzya fe</i>	150
VIMIZIM	123	XADAGO	92
VIMOVO	77	XALATAN	127
VIMPAT	87	XALKORI	30
<i>vinblastine sulfate</i>	30	XANAX	95
<i>vincasar pfs</i>	30	XANAX XR	95
<i>vincristine sulfate</i>	30	XARELTO	43
<i>vinorelbine tartrate</i>	30	XARELTO STARTER PACK	43
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<i>viorele</i>	150	XATMEP	30
VIRACEPT	19	XELJANZ	162
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XIAFLEX	123	ZEMBRACE SYMTOUCH	89
XIFAXAN	11	ZEMDRI	11
XIGDUO XR	145	ZEMPLAR	182
XIIDRA	126	<i>zenatane</i>	180
XIMINO	180	<i>zenchent</i>	150
XODOL	77	<i>zenchent fe</i>	150
XOLAIR	167	ZENPEP	134
XOPENEX	40	<i>zenzedi</i>	81
XOPENEX CONCENTRATE	40	ZEPATIER	19
XOPENEX HFA	40	ZERBAXA	11
XTAMPZA ER	77	ZERIT	20
XTANDI	30	ZESTORETIC	63
<i>xulane</i>	150	ZESTRIL	63
XULTOPHY 100/3.6	145	ZETIA	48
XURIDEN	165	ZETONNA	126
XYLOCAINE	58	ZIAC	51
XYLOCAINE	158	ZIAGEN	20
XYLOCAINE	176	ZIANA	180
XYLOCAINE-MPF	158	<i>zidovudine</i>	20
<i>xylon</i>	77	<i>zileuton er</i>	166
XYREM	96	ZILRETTA	139
XYZAL	21	ZINACEF	11
YASMIN 28	150	ZINBRYTA	163
YAZ	150	ZINC SULFATE	119
YERVOY	30	ZINC TRACE METAL	119
YF-VAX	35	ZINECARD	166
YONDELIS	30	ZINPLAVA	33
YONSA	30	ZIOPTAN	127
YOSPRALA	43	<i>ziprasidone hcl</i>	106
<i>yuvafem</i>	152	ZIPSOR	77
<i>zafirlukast</i>	166	ZIRGAN	124
<i>zaleplon</i>	95	ZITHROMAX	11
ZALTRAP	30	ZITHROMAX TRI-PAK	11
ZAMICET	77	ZITHROMAX Z-PAK	11
ZANAFLEX	38	ZMAX	11
ZANOSAR	31	ZOCOR	48
ZANTAC	132	ZODEX 12-DAY	139
<i>zarah</i>	150	ZODEX 6-DAY	139
ZARONTIN	87	ZOFRAN	130
ZARXIO	44	ZOFRAN ODT	130
ZAVESCA	165	ZOHYDRO ER	77
<i>zazole</i>	171	ZOLADEX	31
ZEBETA	51	<i>zoledronic acid</i>	160
<i>zebutal</i>	77	ZOLINZA	31
ZEGERID	132	<i>zolmitriptan</i>	89
ZEJULA	31	<i>zolmitriptan odt</i>	89
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ZORTRESS	164
ZORVOLEX	77
ZOSTAVAX	35
ZOSYN	12
<i>zovia 1/35e</i>	150
<i>zovia 1/50e</i>	150
ZOVIRAX	20
ZOVIRAX	171
ZTLIDO	158
ZUBSOLV	77
ZUPLENZ	130
ZURAMPIC	122
ZYBAN	107
ZYCLARA	180
ZYCLARA PUMP	180
ZYDELIG	31
ZYFLO	166
ZYFLO CR	166
ZYKADIA	31
ZYLET	126
ZYLOPRIM	159
ZYMAXID	124
ZYPITAMAG	48
ZYPREXA	107
ZYPREXA RELPREVV	107
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- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, contact Kaiser Permanente Member Services.

If you believe that Kaiser Permanente has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity, you can file a grievance by phone, mail, fax, or email. If you need help filing a grievance, a Kaiser Permanente Member Services Representative is available to help you. Language assistance is provided free of charge. The Kaiser Permanente Civil Rights Coordinator will be notified of all grievances related to discrimination on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

Phone: 206-630-4636

Toll-free: 1-888-901-4636

TTY Washington Relay Service: 1-800-833-6388 or 711

TTY Idaho Relay Service: 1-800-377-3529 or 711

Fax: 206-901-6205 or toll-free 1-888-874-1765

Address: Kaiser Foundation Health Plan of Washington

Civil Rights Coordinator, Quality GNE-D1E-07

P.O. Box 9812

Renton, WA 98057-9054

Email: [csforms@ghc.org](mailto:csforms@ghc.org)

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue SW., Room 509F

HHH Building

Washington, DC 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

For Medicare Advantage Plans Only: Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal.

## LANGUAGE ACCESS SERVICES

**English: ATTENTION:** If you speak English, language assistance services, free of charge, are available to you. Call 1-888-901-4636 (TTY: 1-800-833-6388 or 711).

**Español (Spanish): ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-901-4636 (TTY: 1-800-833-6388 / 711).

**中文 (Chinese): 注意:** 如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電 1-888-901-4636 (TTY: 1-800-833-6388 / 711)。

**Tiếng Việt (Vietnamese): CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-901-4636 (TTY: 1-800-833-6388 / 711).

**한국어(Korean): 주의:** 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-901-4636 (TTY: 1-800-833-6388 / 711) 번으로 전화해 주십시오.

**Русский (Russian): ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-901-4636 (телетайп: 1-800-833-6388 / 711).

**Filipino (Tagalog): PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-888-901-4636 (TTY: 1-800-833-6388 / 711).

**Українська (Ukrainian): УВАГА!** Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-888-901-4636 (телетайп: 1-800-833-6388 / 711).

**ភាសាខ្មែរ (Khmer): វេប៊ីស៊ីតេ រដ្ឋបាល កម្ពុជា ផ្តល់ជូនសេវាបំប្លែងភាសា ឥតគិតថ្លៃ។** ចូរទូរស័ព្ទ 1-888-901-4636 (TTY: 1-800-833-6388 / 711)។

**日本語 (Japanese): 注意事項:** 日本語を話される場合、無料の言語支援をご利用いただけます。1-888-901-4636 (TTY: 1-800-833-6388 / 711) まで、お電話にてご連絡ください。

**አማርኛ (Amharic): ማሳሰቢያ:** የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዙዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ 1-888-901-4636 (መስማት ለተሳናቸው: 1-800-833-6388 / 711)።

**Oromiffa (Oromo): XIYYEEFFANNAA:** Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-888-901-4636 (TTY: 1-800-833-6388 / 711).

**العربية (Arabic):** لديكم حق الحصول على مساعدة ومعلومات في ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-888-901-4636 (رقم هاتف الصم والبكم: 1-800-833-6388 / 711).

**ਪੰਜਾਬੀ (Punjabi): ਧਿਆਨ ਦਿਓ:** ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-888-901-4636 (TTY: 1-800-833-6388 / 711) 'ਤੇ ਕਾਲ ਕਰੋ।

**Deutsch (German): ACHTUNG:** Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-888-901-4636 (TTY: 1-800-833-6388 / 711).

**ພາສາລາວ (Lao): ໂປດຊາບ:** ຖ້າວ່າ ທ່ານເວົ້າພາສາລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-888-901-4636 (TTY: 1-800-833-6388 / 711).

**Srpsko-hrvatski (Serbo-Croatian): OBAVJEŠTENJE:** Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-888-901-4636 (TTY- Telefon za osobe sa oštećenim govorom ili sluhom: 1-800-833-6388 / 711).

**Français (French): ATTENTION :** Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-888-901-4636 (ATS: 1-800-833-6388 / 711).

**Română (Romanian): ATENȚIE:** Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 1-888-901-4636 (TTY: 1-800-833-6388 / 711).

**Adamawa (Fulfulde): MAANDO:** To a waawi Adamawa, e woodi ballooji-ma to ekkitaaki wolde caahu. Noddu 1-888-901-4636 (TTY: 1-800-833-6388 / 711).

**فارسی (Farsi): توجه:** اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-888-901-4636 (TTY: 1-800-833-6388 / 711) تماس بگیرید.