

Fallon Health NaviCare® SCO and NaviCare® HMO SNP

2024 *List of Covered Drugs* (Formulary)

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

Formulary ID: 00024364, Version: 14

Introduction

This document is called the *List of Covered Drugs* (also known as the Drug List). It tells you which prescription drugs are covered by NaviCare. The Drug List also tells you if there are any special rules or restrictions on any drugs covered by NaviCare.

Our contact information, along with the date we last updated the Drug List, appears on the front and back cover pages. Key terms and their definitions appear in the last chapter of the *Evidence of Coverage*.

This formulary was updated on 04/25/2024. For more recent information or other questions, contact us at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week), or visit fallonhealth.org/navicare.

Important Message About What You Pay for Vaccines – Some vaccines are considered medical benefits. Other vaccines are considered Part D drugs. Our plan covers most Part D vaccines at no cost to you.

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 **If you have questions**, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. **For more information**, visit fallonhealth.org/navicare.

Table of Contents

A. Disclaimers.....	iv
B. Frequently Asked Questions (FAQ)	iv
B1. What prescription drugs are on the <i>List of Covered Drugs</i> ? (We call the <i>List of Covered Drugs</i> the “Drug List” for short.)	v
B2. Does the Drug List ever change?.....	v
B3. What happens when there is a change to the Drug List?	v
B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?	vi
B5. How will I know if the drug I want has limitations or if there are required actions to take to get the drug?	vii
B6. What happens if NaviCare changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?	vii
B7. How can I find a drug on the Drug List?	vii
B8. What if the drug I want to take is not on the Drug List?	viii
B9. What if I am a new NaviCare member and can’t find my drug on the Drug List or have a problem getting my drug?	viii
B10. Can I ask for an exception to cover my drug?	ix
B11. How can I ask for an exception?	ix
B12. How long does it take to get an exception?	ix
B13. What are generic drugs?	x
B14. What are OTC drugs?	x
B15. Does NaviCare cover non-drug OTC products?	x
B16. Does NaviCare cover long-term supplies of prescriptions?	x
B17. Can I get prescriptions delivered to my home from my local pharmacy?	x
B18. What is my copayment/copay?	x



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C. Overview of the <i>List of Covered Drugs</i>	xi
C1. List of Drugs by Medical Condition.....	xii
D. Index of Covered Drugs.....	xiii



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A. Disclaimers

This is a list of drugs that members can get in NaviCare.

- ❖ NaviCare is a voluntary program in association with MassHealth/EOHHS and CMS.
- ❖ MassOptions is a free resource that connects elders, individuals with disabilities and their caregivers with information on plan choices that can best meet their needs. You can call MassOptions at 1-800-243-4636 (TRS 711), 9 a.m.–5 p.m., Monday–Friday.
- ❖ You can always check NaviCare’s up-to-date *List of Covered Drugs* online at fallonhealth.org/navicare or by calling Enrollee Services at 1-877-700-6996 (TRS 711).
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call Enrollee Services at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free.
- ❖ This document is available for free in Spanish, other languages are available upon request.
- ❖ A member’s preferred language, both written and spoken, or request for information in an alternate format is requested by the Plan on each member’s enrollment form. The member’s language preference will be captured and stored in the Plan’s central operating system for all communications, so the member will not need to make a separate request each time.
- ❖ Enrolled members may change their preferred language or communications format by informing a member of their Care Team or by calling NaviCare Enrollee Services at 1-877-700-6996 (TRS 711).

B. Frequently Asked Questions (FAQ)

Find answers here to questions you have about this *List of Covered Drugs*. You can read all of the FAQ to learn more, or look for a question and answer.

B1. What prescription drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the “Drug List” for short.)

The drugs on the *List of Covered Drugs* that starts on page 3 are the drugs covered by NaviCare. The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.” The prescription drugs included on this *List of Covered Drugs* are covered by NaviCare.

- NaviCare will cover all medically necessary drugs on the Drug List if:
 - your doctor or other prescriber says you need them to get better or stay healthy,

(This section is continued on the next page).



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. For more information, visit fallonhealth.org/navicare.

- NaviCare agrees that the drug is medically necessary for you, **and** you fill the prescription at a NaviCare network pharmacy.
- In some cases, you have to do something before you can get a drug. Refer to question B4 for more information.

You can also find an up-to-date list of drugs that we cover on our website at fallonhealth.org/navicare or call Enrollee Services at 1-877-700-6996 (TRS 711).

B2. Does the Drug List ever change?

Yes, and NaviCare must follow Medicare and MassHealth rules when making changes. We may add or remove drugs on the Drug List during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior approval for a drug. (Prior authorization is permission from NaviCare before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we will cover another drug.)

For more information on these drug rules, refer to question B4.

If you are taking a drug that was covered at the **beginning** of the year, we will generally not remove or change coverage of that drug **during the rest of the year** unless:

- a new, cheaper drug comes on the market that works as well as a drug on the Drug List now, **or**
- we learn that a drug is not safe, **or**
- a drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the Drug List changes.

- You can always check NaviCare's up-to-date Drug List online at fallonhealth.org/navicare.
- You can also call Enrollee Services at 1-877-700-6996 (TRS 711) to check the current Drug List.

B3. What happens when there is a change to the Drug List?

- Some changes to the Drug List will happen **immediately**. For example:

(This section is continued on the next page).



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. For more information, visit fallonhealth.org/navicare.

A new generic drug becomes available. Sometimes, a new generic drug comes on the market that works as well as a brand name drug on the Drug List now. When that happens, we may remove the brand name drug, and add the new generic drug, but your cost for the new drug will remain \$0. When we add the new generic drug, we may also decide to keep the brand name drug on the list but change its coverage rules or limits.

- We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.
- You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please refer to questions B10-B12 for more information on exceptions.
- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or the drug's manufacturer takes a drug off the market, we will take it off the Drug List. If you are taking the drug, we will let you know.

If you still have medication that is not safe or has been taken off the market, please return it to the pharmacy that filled your prescription. If you received this medication through a mail-order pharmacy, please contact the pharmacy for instructions on how to return it. Also, please call your doctor. They will be able to suggest the appropriate alternative treatment for you, if necessary.

We may make other changes that affect the drugs you take. We will tell you in advance about these other changes to the Drug List. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We add a generic drug that is not new to the market **and**
 - Replace a brand name drug currently on the Drug List **or**
 - Change the coverage rules or limits for the brand name drug.

When these changes happen, we will:

- Tell you at least 30 days before we make the change to the Drug List **or**
- Let you know and give you a 30-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- If there is a similar drug on the Drug List you can take instead **or**
- Whether to ask for an exception from these changes. To learn more about exceptions, refer to questions B10-B12.



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. For more information, visit fallonhealth.org/navicare.

B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior authorization:** For some drugs, you or your doctor or other prescriber must get authorization from NaviCare before you fill your prescription. Prior authorization is different from a referral. NaviCare may not cover the drug if you don't get prior authorization.
- **Quantity limits:** Sometimes NaviCare limits the amount of a drug you can get.
- **Step therapy:** Sometimes NaviCare requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your doctor thinks the first drug doesn't work for you, then we will cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables beginning on page xii. You can also get more information by visiting our website at fallonhealth.org/navicare. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception. Refer to questions B10-B12 for more information about exceptions.

B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The table in the List of Drugs by Medical Condition on page xii has a column labeled "Necessary actions, restrictions, or limits on use."

B6. What happens if NaviCare changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?

In some cases, we will tell you in advance if we add or change prior authorization, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the Drug List change.

B7. How can I find a drug on the Drug List?

There are two ways to find a drug:

(This section is continued on the next page).



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. For more information, visit fallonhealth.org/navicare.

- You can search alphabetically, **or**
- You can search by medical condition.

To search **alphabetically**, look for your drug in the Index of Covered Drugs section. You can find it starting on page 97. The Index of Covered Drugs is an alphabetical list of all of the drugs included in the Drug List. Brand name drugs and generic drugs are listed in the index.

To search **by medical condition**, find the section labeled “List of Drugs by Medical Condition” on page xii. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category Cardiovascular Agents. That is where you will find drugs that treat heart conditions.

B8. What if the drug I want to take is not on the Drug List?

If you don't find your drug on the Drug List, call Enrollee Services at 1-877-700-6996 (TRS 711) and ask about it. If you learn that NaviCare will not cover the drug, you can do one of these things:

- Ask Enrollee Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the Drug List that is like the one you want to take. **Or**
- You can ask NaviCare to make an exception to cover your drug. Refer to questions B10-B12 for more information about exceptions.

B9. What if I am a new NaviCare member and can't find my drug on the Drug List or have a problem getting my drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you are a member of NaviCare. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we will allow multiple refills to provide up to a maximum of 30 days of medication.

We will cover a 30-day supply of your drug if:

- you are taking a drug that is not on our Drug List, **or**
- our plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior authorization by NaviCare **or**
- you are taking a drug that is part of a step therapy restriction

(This section is continued on the next page).



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. For more information, visit fallonhealth.org/navicare.

If you are in a nursing home or other long-term care facility and need a drug that is not on the Drug List or if you cannot easily get the drug you need, we can help. If you have been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We will cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new NaviCare member.
- This is in addition to the temporary supply during the first 90 days you are a member of NaviCare.

If you are a current member of NaviCare affected by a formulary change from one year to the next, we will provide you with a 30-day transition supply (unless the prescription is written for fewer days) during the first 90 days of the plan year. You should talk to your doctor about switching to a medication that we cover or requesting a formulary exception. You can get early refills if you are entering or leaving a long-term care facility. You can refer to the Evidence of Coverage or call our Enrollee Services team for more information about how to request a formulary exception.

B10. Can I ask for an exception to cover my drug?

Yes. You can ask NaviCare to make an exception to cover a drug that is not on the Drug List.

You can also ask us to change the rules on your drug.

- For example, NaviCare may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior authorization requirements.

B11. How can I ask for an exception?

To ask for an exception, call Enrollee Services. An Enrollee Services representative will work with you and your provider to help you ask for an exception. You can also read Chapter 8 of the Evidence of Coverage to learn more about exceptions.

B12. How long does it take to get an exception?

After we get a statement from your prescriber supporting your request for an exception, we will give you a decision within 72 hours. This may be sent to us by mail or fax. Send by mail to OptumRx, Prior Authorization Department, PO Box 2975, Mission, KS 66201 or fax to 1-844-403-1028.

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we will give you a decision within 24 hours of getting your prescriber's supporting statement.



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. **For more information**, visit fallonhealth.org/navicare.

B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA).

NaviCare covers both brand name drugs and generic drugs.

B14. What are OTC drugs?

OTC stands for "over-the-counter". NaviCare covers some OTC drugs when they are written as prescriptions by your provider.

You can read the NaviCare SCO and NaviCare HMO SNP Over-the-Counter Drug List to find out what OTC drugs are covered.

B15. Does NaviCare cover non-drug OTC products?

NaviCare covers some non-drug OTC products when they are written as prescriptions by your provider. Examples of non-drug OTC products include simple syrup and zinc oxide.

You can read the NaviCare SCO and NaviCare HMO SNP Over-the-Counter Drug List to find out what non-drug OTC products are covered.

B16. Does NaviCare cover long-term supplies of prescriptions?

- **Mail-Order Programs.** We offer a mail-order program that allows you to get up to a 100-day supply of your prescription drugs sent directly to your home.
- **100-Day Retail Pharmacy Programs.** Some retail pharmacies may also offer up to a 100-day supply of covered prescription drugs.

B17. Can I get prescriptions delivered to my home from my local pharmacy?

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery.

B18. What is my copayment/copay?

NaviCare members have no copays/copayments for prescription and (OTC) drugs and non-drug products as long as the member follows the plan's rules. Refer to questions B14 and B15 for more information about OTC drugs and non-drug products.

All drugs on our Drug List have no copay.

- Generic drugs have \$0 copay.
- Brand name drugs have \$0 copay.

(This section is continued on the next page).



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. For more information, visit fallonhealth.org/navicare.

OTCs have a \$0 copay.

If you have questions, call Enrollee Services at 1-877-700-6996 (TRS 711).

C. Overview of the *List of Covered Drugs*

The *List of Covered Drugs* gives you information about the drugs covered by NaviCare. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins on page 97. The index alphabetically lists all drugs covered by NaviCare.



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. **For more information**, visit fallonhealth.org/navicare.

C1. List of Drugs by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, Cardiovascular Agents. That is where you will find drugs that treat heart conditions.

Here are the meanings of the codes used in the “Necessary actions, restrictions, or limits on use” column:

Abbreviation	Explanation
B/D	This prescription drug has a Part B versus Part D administrative prior authorization requirement. This drug may be covered under Medicare Part B or Part D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination. (This applies to NaviCare HMO SNP only. Drugs for members of NaviCare SCO are covered under MassHealth.)
HI	Home Infusion. This prescription drug is covered under our medical benefit. For more information, call Enrollee Services at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week), or visit fallonhealth.org/navicare .
LA	Limited Access. This prescription may be available only at certain pharmacies. For more information consult your Provider and Pharmacy Directory or call Enrollee Services at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week).
MO	Mail-Order Drug. This prescription drug is available through our mail-order service.
NEDS	Non-Extended Day Supply. This drug is limited to a 30-day supply per prescription fill.
PA	Prior Authorization. NaviCare requires your provider to get prior authorization for certain drugs. This means that you will need to get approval from Fallon Health before you fill your prescriptions. If you don't get approval, NaviCare may not cover the drug.
PA NS	Prior Authorization for New Starts only. NaviCare requires a prior authorization for certain drugs for new prescriptions only. This means that if you are newly starting on this drug, you need to get approval from NaviCare before you fill your prescriptions. If you don't get approval, NaviCare may not cover the drug. Prior authorization is not required if you have been previously filling this drug with NaviCare.
QL	Quantity limit. For certain drugs, NaviCare limits the amount of the drug that NaviCare will cover. For example, only 30 each of LYBALVI per 30 days. This may be in addition to a standard one-month or three-month supply.
ST	Step Therapy. In some cases, NaviCare 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, NaviCare may not cover Drug B unless you try Drug A first. If Drug A does not work for you, NaviCare will then cover Drug B.

The first column of the table lists the name of the drug. Generic drugs are listed in lower-case italics (for example, *amoxicillin*) and brand name drugs are capitalized (for example, LYBALVI). The information in the “Necessary actions, restrictions, or limits on use” column tells you if NaviCare has any rules for covering your drug.



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. For more information, visit fallonhealth.org/navicare.

Table of Contents

Analgesics	3
Anesthetics	5
Anti-Addiction/Substance Abuse Treatment Agents	5
Antibacterials	6
Anticonvulsants	13
Antidementia Agents	16
Antidepressants	16
Antiemetics	18
Antifungals	19
Antigout Agents	21
Anti-Inflammatory Agents	21
Antimigraine Agents	21
Antimyasthenic Agents	22
Antimycobacterials	22
Antineoplastics	22
Antiparasitics	29
Antiparkinson Agents	30
Antipsychotics	31
Antispasticity Agents	33
Antivirals	34
Anxiolytics	38
Bipolar Agents	39
Blood Glucose Regulators	39
Blood Glucose Supplies	43
Blood Products And Modifiers	46
Blood Products/Modifiers/Volume Expanders	46
Cardiovascular Agents	47
Central Nervous System Agents	54
Dental And Oral Agents	56
Dermatological Agents	57
Electrolytes/Minerals/Metals/Vitamins	58
Gastrointestinal Agents	61
Genetic Or Enzyme Disorder: Replacement, Modifiers, Treatment	63
Genitourinary Agents	64
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)	66
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)	68
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)	69
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)	69
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)	75
Hormonal Agents, Suppressant (Adrenal)	75
Hormonal Agents, Suppressant (Pituitary)	75
Hormonal Agents, Suppressant (Thyroid)	76
Immunological Agents	76
Inflammatory Bowel Disease Agents	85
Metabolic Bone Disease Agents	85
Miscellaneous Therapeutic Agents	86
Ophthalmic Agents	87
Otic Agents	90
Respiratory Tract/Pulmonary Agents	90
Skeletal Muscle Relaxants	95

Sleep Disorder Agents	95
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Drug	Status	Requirements/Limits
Analgesics		
Nonsteroidal Anti-Inflammatory Drugs		
<i>celecoxib oral capsule</i>	Generic	MO
<i>diclofenac potassium oral tablet 25 mg</i>	Generic	NEDS
<i>diclofenac potassium oral tablet 50 mg</i>	Generic	MO
<i>diclofenac sodium er oral tablet extended release 24 hour</i>	Generic	MO
<i>diclofenac sodium oral tablet delayed release</i>	Generic	MO
<i>diclofenac-misoprostol oral tablet delayed release</i>	Generic	MO
<i>diflunisal oral tablet</i>	Generic	MO
<i>ec-naproxen oral tablet delayed release 500 mg</i>	Generic	MO
<i>etodolac er oral tablet extended release 24 hour</i>	Generic	MO
<i>etodolac oral capsule</i>	Generic	MO
<i>etodolac oral tablet</i>	Generic	MO
<i>fenoprofen calcium oral capsule 400 mg</i>	Generic	MO
<i>fenoprofen calcium oral tablet</i>	Generic	MO
<i>flurbiprofen oral tablet</i>	Generic	MO
IBU ORAL TABLET 600 MG, 800 MG	Generic	MO
<i>ibuprofen oral suspension</i>	Generic	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	Generic	MO
<i>indomethacin er oral capsule extended release</i>	Generic	MO
<i>indomethacin oral capsule 25 mg, 50 mg</i>	Generic	MO
<i>ketoprofen er oral capsule extended release 24 hour</i>	Generic	MO
<i>ketoprofen oral capsule 25 mg</i>	Generic	MO
<i>ketoprofen oral capsule 50 mg</i>	Generic	
<i>ketorolac tromethamine oral tablet</i>	Generic	
<i>meclofenamate sodium oral capsule</i>	Generic	MO
<i>meloxicam oral tablet</i>	Generic	MO
<i>nabumetone oral tablet</i>	Generic	MO
<i>naproxen oral suspension</i>	Generic	MO; NEDS
<i>naproxen oral tablet</i>	Generic	MO
<i>naproxen oral tablet delayed release 375 mg</i>	Generic	MO
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	Generic	MO
<i>oxaprozin oral tablet</i>	Generic	MO
<i>piroxicam oral capsule</i>	Generic	MO
<i>salsalate oral tablet</i>	Generic	MO
<i>sulindac oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
Opioid Analgesics, Long-Acting		
BELBUCA BUCCAL FILM	Brand	QL (60 EA per 30 days); NEDS
<i>buprenorphine transdermal patch weekly</i>	Generic	NEDS
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>	Generic	NEDS
<i>levorphanol tartrate oral tablet</i>	Generic	NEDS
<i>methadone hcl injection solution</i>	Generic	NEDS
<i>methadone hcl oral solution</i>	Generic	NEDS
<i>methadone hcl oral tablet</i>	Generic	NEDS
<i>morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg</i>	Generic	NEDS
<i>morphine sulfate er oral tablet extended release</i>	Generic	NEDS
<i>oxycodone hcl er oral tablet er 12 hour abuse-deterrent 10 mg, 20 mg, 40 mg, 80 mg</i>	Generic	QL (2 EA per 1 day); NEDS
Opioid Analgesics, Short-Acting		
<i>acetaminophen-codeine oral solution</i>	Generic	NEDS
<i>acetaminophen-codeine oral tablet</i>	Generic	NEDS
<i>butorphanol tartrate nasal solution</i>	Generic	NEDS
<i>codeine sulfate oral tablet 15 mg, 60 mg</i>	Generic	NEDS
<i>codeine sulfate oral tablet 30 mg</i>	Generic	
<i>duramorph injection solution 1 mg/ml</i>	Generic	NEDS
ENDOCET ORAL TABLET 10-325 MG, 7.5-325 MG	Generic	NEDS
<i>endocet oral tablet 2.5-325 mg</i>	Generic	
<i>endocet oral tablet 5-325 mg</i>	Generic	NEDS
<i>fentanyl citrate buccal lozenge on a handle</i>	Generic	PA; QL (4 EA per 1 day); NEDS
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml</i>	Generic	NEDS
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	Generic	NEDS
<i>hydrocodone-ibuprofen oral tablet 7.5-200 mg</i>	Generic	NEDS
<i>hydromorphone hcl oral liquid</i>	Generic	NEDS
<i>hydromorphone hcl oral tablet</i>	Generic	NEDS
<i>meperidine hcl injection solution 100 mg/ml, 25 mg/ml, 50 mg/ml</i>	Generic	PA; NEDS
<i>meperidine hcl oral solution</i>	Generic	NEDS
<i>meperidine hcl oral tablet 50 mg</i>	Generic	NEDS

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

Drug	Status	Requirements/Limits
<i>morphine sulfate (concentrate) oral solution 20 mg/ml</i>	Generic	NEDS
<i>morphine sulfate (pf) injection solution 0.5 mg/ml, 1 mg/ml</i>	Generic	NEDS
<i>morphine sulfate oral solution</i>	Generic	NEDS
<i>morphine sulfate oral tablet</i>	Generic	NEDS
<i>oxycodone hcl oral capsule</i>	Generic	NEDS
<i>oxycodone hcl oral concentrate 100 mg/5ml</i>	Generic	NEDS
<i>oxycodone hcl oral solution</i>	Generic	NEDS
<i>oxycodone hcl oral tablet</i>	Generic	NEDS
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	Generic	NEDS
<i>tramadol hcl oral tablet 50 mg</i>	Generic	NEDS
<i>tramadol-acetaminophen oral tablet</i>	Generic	NEDS
Anesthetics		
Local Anesthetics		
<i>lidocaine external ointment 5 %</i>	Generic	QL (200 GM per 30 days)
<i>lidocaine external patch 5 %</i>	Generic	PA
<i>lidocaine hcl (pf) injection solution 1 %</i>	Generic	
<i>lidocaine hcl external solution</i>	Generic	
<i>lidocaine hcl injection solution 1 %, 2 %</i>	Generic	
<i>lidocaine hcl urethral/mucosal external gel</i>	Generic	
<i>lidocaine viscous hcl mouth/throat solution</i>	Generic	
<i>lidocaine-prilocaine external cream</i>	Generic	QL (200 GM per 30 days)
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-Craving		
<i>acamprosate calcium oral tablet delayed release</i>	Generic	MO
<i>disulfiram oral tablet</i>	Generic	MO
Opioid Dependence Treatments		
<i>buprenorphine hcl injection solution</i>	Generic	
<i>buprenorphine hcl sublingual tablet sublingual</i>	Generic	
<i>buprenorphine hcl-naloxone hcl sublingual film</i>	Generic	
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual</i>	Generic	
LUCEMYRA ORAL TABLET	Brand	NEDS
<i>naltrexone hcl oral tablet</i>	Generic	

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

Drug	Status	Requirements/Limits
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	NEDS
Opioid Reversal Agents		
KLOXXADO NASAL LIQUID	Brand	
<i>naloxone hcl injection solution 0.4 mg/ml</i>	Generic	
<i>naloxone hcl injection solution cartridge</i>	Generic	
<i>naloxone hcl injection solution prefilled syringe</i>	Generic	
<i>naloxone hcl nasal liquid</i>	Generic	
Smoking Cessation Agents		
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour</i>	Generic	
NICOTROL INHALATION INHALER		
<i>varenicline tartrate (starter) oral tablet therapy pack</i>	Generic	QL (53 EA per 28 days)
<i>varenicline tartrate oral tablet</i>	Generic	QL (56 EA per 28 days)
Antibacterials		
Aminoglycosides		
<i>amikacin sulfate injection solution 500 mg/2ml</i>	Generic	HI
GENTAK OPHTHALMIC OINTMENT		
<i>gentamicin in saline intravenous solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.2-0.9 mg/ml-%, 1.6-0.9 mg/ml-%</i>	Generic	HI
<i>gentamicin sulfate external cream</i>	Generic	
<i>gentamicin sulfate external ointment</i>	Generic	
<i>gentamicin sulfate injection solution</i>	Generic	HI
<i>gentamicin sulfate ophthalmic solution</i>	Generic	
<i>neomycin sulfate oral tablet</i>	Generic	
<i>paromomycin sulfate oral capsule</i>	Generic	
<i>streptomycin sulfate intramuscular solution reconstituted</i>	Generic	NEDS
<i>tobramycin ophthalmic solution</i>	Generic	
<i>tobramycin sulfate injection solution 10 mg/ml, 80 mg/2ml</i>	Generic	HI
ZEMDRI INTRAVENOUS SOLUTION		
Antibacterials, Other		
<i>bacitracin ophthalmic ointment</i>	Generic	
CLEOCIN VAGINAL SUPPOSITORY		
<i>clindamycin hcl oral capsule</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>clindamycin palmitate hcl oral solution reconstituted</i>	Generic	
<i>clindamycin phosphate external gel</i>	Generic	QL (75 GM per 30 days)
<i>clindamycin phosphate external lotion</i>	Generic	QL (75 ML per 30 days)
<i>clindamycin phosphate external solution</i>	Generic	QL (60 ML per 30 days)
<i>clindamycin phosphate in d5w intravenous solution</i>	Generic	HI
<i>clindamycin phosphate injection solution 300 mg/2ml</i>	Generic	
<i>clindamycin phosphate injection solution 600 mg/4ml, 900 mg/6ml</i>	Generic	HI
<i>clindamycin phosphate vaginal cream</i>	Generic	
<i>colistimethate sodium (cba) injection solution reconstituted</i>	Generic	HI
DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
<i>daptomycin intravenous solution reconstituted</i>	Generic	HI
FIRVANQ ORAL SOLUTION RECONSTITUTED 25 MG/ML	Brand	
<i>fosfomycin tromethamine oral packet</i>	Generic	
GLOBAL ALCOHOL PREP EASE PAD	Brand	
<i>linezolid intravenous solution 600 mg/300ml</i>	Generic	HI
<i>linezolid oral suspension reconstituted</i>	Generic	NEDS
<i>linezolid oral tablet</i>	Generic	
<i>methenamine hippurate oral tablet</i>	Generic	
<i>metronidazole external cream</i>	Generic	
<i>metronidazole external gel</i>	Generic	
<i>metronidazole external lotion</i>	Generic	
<i>metronidazole intravenous solution 500 mg/100ml</i>	Generic	HI
<i>metronidazole oral tablet</i>	Generic	
<i>metronidazole vaginal gel</i>	Generic	
<i>mupirocin external ointment</i>	Generic	QL (220 GM per 30 days)
<i>neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1</i>	Generic	
<i>nitrofurantoin macrocrystal oral capsule 100 mg</i>	Generic	
<i>nitrofurantoin macrocrystal oral capsule 25 mg, 50 mg</i>	Generic	QL (56 EA per 14 days)
<i>nitrofurantoin monohyd macro oral capsule</i>	Generic	
<i>nitrofurantoin oral suspension 25 mg/5ml</i>	Generic	NEDS

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

Drug	Status	Requirements/Limits
<i>polymyxin b sulfate injection solution reconstituted</i>	Generic	HI
ROSADAN EXTERNAL CREAM	Generic	
ROSADAN EXTERNAL GEL	Generic	
<i>silver sulfadiazine external cream</i>	Generic	
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
SOLOSEC ORAL PACKET	Brand	
<i>ssd external cream</i>	Generic	
<i>tigecycline intravenous solution reconstituted</i>	Generic	HI
<i>tinidazole oral tablet</i>	Generic	
<i>trimethoprim oral tablet</i>	Generic	
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
<i>vancomycin hcl intravenous solution reconstituted 1 gm, 10 gm, 500 mg, 750 mg</i>	Generic	HI
<i>vancomycin hcl oral capsule 125 mg</i>	Generic	QL (120 EA per 30 days)
<i>vancomycin hcl oral capsule 250 mg</i>	Generic	QL (240 EA per 30 days)
<i>vancomycin hcl oral solution reconstituted 25 mg/ml, 250 mg/5ml</i>	Generic	
VANDAZOLE VAGINAL GEL	Generic	
XIFAXAN ORAL TABLET 550 MG	Brand	MO; QL (3 EA per 1 day); NEDS
Beta-Lactam, Cephalosporins		
AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
<i>cefaclor er oral tablet extended release 12 hour</i>	Generic	
<i>cefaclor oral capsule</i>	Generic	
<i>cefadroxil oral capsule</i>	Generic	
<i>cefadroxil oral suspension reconstituted</i>	Generic	
<i>cefadroxil oral tablet</i>	Generic	
<i>cefazolin sodium injection solution reconstituted 1 gm, 10 gm, 500 mg</i>	Generic	HI
<i>cefdinir oral capsule</i>	Generic	
<i>cefdinir oral suspension reconstituted</i>	Generic	
<i>cefepime hcl injection solution reconstituted 1 gm</i>	Generic	HI
<i>cefepime hcl intravenous solution reconstituted 2 gm</i>	Generic	HI
<i>cefixime oral capsule</i>	Generic	
<i>cefixime oral suspension reconstituted</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>cefotaxime sodium injection solution reconstituted 1 gm</i>	Generic	
<i>cefotetan disodium injection solution reconstituted 1 gm, 2 gm</i>	Generic	HI
<i>cefoxitin sodium intravenous solution reconstituted</i>	Generic	HI
<i>cefpodoxime proxetil oral suspension reconstituted</i>	Generic	
<i>cefpodoxime proxetil oral tablet</i>	Generic	
<i>cefprozil oral suspension reconstituted</i>	Generic	
<i>cefprozil oral tablet</i>	Generic	
<i>ceftazidime injection solution reconstituted 1 gm, 6 gm</i>	Generic	HI
<i>ceftazidime intravenous solution reconstituted</i>	Generic	HI
<i>ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg</i>	Generic	HI
<i>ceftriaxone sodium intravenous solution reconstituted 10 gm</i>	Generic	HI
<i>cefuroxime axetil oral tablet</i>	Generic	
<i>cefuroxime sodium injection solution reconstituted 750 mg</i>	Generic	HI
<i>cefuroxime sodium intravenous solution reconstituted 1.5 gm</i>	Generic	HI
<i>cephalexin oral capsule</i>	Generic	
<i>cephalexin oral suspension reconstituted</i>	Generic	
SUPRAX ORAL SUSPENSION RECONSTITUTED 500 MG/5ML	Brand	
TAZICEF INJECTION SOLUTION RECONSTITUTED 1 GM	Generic	HI
TAZICEF INTRAVENOUS SOLUTION RECONSTITUTED 2 GM, 6 GM	Generic	HI
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
Beta-Lactam, Other		
<i>aztreonam injection solution reconstituted</i>	Generic	HI
<i>ertapenem sodium injection solution reconstituted</i>	Generic	HI
<i>imipenem-cilastatin intravenous solution reconstituted</i>	Generic	HI

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

Drug	Status	Requirements/Limits
<i>meropenem intravenous solution reconstituted 1 gm, 500 mg</i>	Generic	HI
Beta-Lactam, Penicillins		
<i>amoxicillin oral capsule</i>	Generic	
<i>amoxicillin oral suspension reconstituted</i>	Generic	
<i>amoxicillin oral tablet</i>	Generic	
<i>amoxicillin oral tablet chewable 125 mg, 250 mg</i>	Generic	
<i>amoxicillin-pot clavulanate er oral tablet extended release 12 hour</i>	Generic	
<i>amoxicillin-pot clavulanate oral suspension reconstituted</i>	Generic	
<i>amoxicillin-pot clavulanate oral tablet</i>	Generic	
<i>amoxicillin-pot clavulanate oral tablet chewable</i>	Generic	
<i>ampicillin oral capsule 500 mg</i>	Generic	
<i>ampicillin sodium injection solution reconstituted 1 gm, 125 mg</i>	Generic	HI
<i>ampicillin sodium intravenous solution reconstituted 10 gm</i>	Generic	HI
<i>ampicillin-sulbactam sodium injection solution reconstituted 1.5 (1-0.5) gm, 3 (2-1) gm</i>	Generic	HI
<i>ampicillin-sulbactam sodium intravenous solution reconstituted 15 (10-5) gm</i>	Generic	HI
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML	Brand	
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	Brand	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	Brand	
<i>dicloxacillin sodium oral capsule</i>	Generic	
<i>nafcillin sodium injection solution reconstituted 1 gm, 2 gm</i>	Generic	HI
<i>nafcillin sodium intravenous solution reconstituted 10 gm</i>	Generic	HI
<i>oxacillin sodium in dextrose intravenous solution</i>	Generic	HI
<i>oxacillin sodium injection solution reconstituted 1 gm, 2 gm</i>	Generic	HI
<i>oxacillin sodium intravenous solution reconstituted</i>	Generic	HI
<i>penicillin g pot in dextrose intravenous solution 40000 unit/ml, 60000 unit/ml</i>	Generic	HI

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

Drug	Status	Requirements/Limits
<i>penicillin g potassium injection solution reconstituted</i>	Generic	HI
<i>penicillin g sodium injection solution reconstituted</i>	Generic	HI
<i>penicillin v potassium oral solution reconstituted</i>	Generic	
<i>penicillin v potassium oral tablet</i>	Generic	
<i>piperacillin sod-tazobactam so intravenous solution reconstituted 2.25 (2-0.25) gm, 3.375 (3-0.375) gm, 4.5 (4-0.5) gm, 40.5 (36-4.5) gm</i>	Generic	HI
ZOSYN INTRAVENOUS SOLUTION 2-0.25 GM/50ML	Brand	
ZOSYN INTRAVENOUS SOLUTION 3-0.375 GM/50ML	Brand	HI
Macrolides		
AZASITE OPHTHALMIC SOLUTION	Brand	
<i>azithromycin intravenous solution reconstituted</i>	Generic	HI
<i>azithromycin oral suspension reconstituted</i>	Generic	
<i>azithromycin oral tablet</i>	Generic	
<i>clarithromycin er oral tablet extended release 24 hour</i>	Generic	
<i>clarithromycin oral suspension reconstituted</i>	Generic	
<i>clarithromycin oral tablet</i>	Generic	
DIFICID ORAL SUSPENSION RECONSTITUTED	Brand	QL (136 ML per 10 days); NEDS
DIFICID ORAL TABLET	Brand	QL (20 EA per 10 days); NEDS
<i>erythromycin base oral capsule delayed release particles</i>	Generic	
<i>erythromycin base oral tablet</i>	Generic	
<i>erythromycin base oral tablet delayed release 333 mg, 500 mg</i>	Generic	
<i>erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml</i>	Generic	
<i>erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml</i>	Generic	NEDS
<i>erythromycin ethylsuccinate oral tablet</i>	Generic	
<i>erythromycin ophthalmic ointment</i>	Generic	
<i>erythromycin oral tablet delayed release</i>	Generic	
<i>erythromycin stearate oral tablet 250 mg</i>	Generic	

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

Drug	Status	Requirements/Limits
Quinolones		
BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
CILOXAN OPHTHALMIC OINTMENT	Brand	
<i>ciprofloxacin hcl ophthalmic solution</i>	Generic	
<i>ciprofloxacin hcl oral tablet</i>	Generic	
<i>ciprofloxacin in d5w intravenous solution 200 mg/100ml</i>	Generic	HI
<i>gatifloxacin ophthalmic solution</i>	Generic	
<i>levofloxacin in d5w intravenous solution 500 mg/100ml, 750 mg/150ml</i>	Generic	HI
<i>levofloxacin intravenous solution</i>	Generic	
<i>levofloxacin ophthalmic solution 0.5 %</i>	Generic	
<i>levofloxacin oral solution</i>	Generic	
<i>levofloxacin oral tablet</i>	Generic	
<i>moxifloxacin hcl in nacl intravenous solution</i>	Generic	HI
<i>moxifloxacin hcl ophthalmic solution</i>	Generic	
<i>moxifloxacin hcl oral tablet</i>	Generic	
<i>ofloxacin ophthalmic solution</i>	Generic	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	Generic	
<i>ofloxacin otic solution</i>	Generic	
Sulfonamides		
<i>sulfacetamide sodium ophthalmic ointment</i>	Generic	
<i>sulfacetamide sodium ophthalmic solution</i>	Generic	
<i>sulfadiazine oral tablet</i>	Generic	
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i>	Generic	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	Generic	
Tetracyclines		
<i>doxy 100 intravenous solution reconstituted</i>	Generic	HI
<i>doxycycline hyclate oral capsule</i>	Generic	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	Generic	
<i>doxycycline monohydrate oral capsule</i>	Generic	
<i>doxycycline monohydrate oral suspension reconstituted</i>	Generic	
<i>doxycycline monohydrate oral tablet</i>	Generic	
<i>minocycline hcl oral capsule</i>	Generic	
<i>minocycline hcl oral tablet</i>	Generic	

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

Drug	Status	Requirements/Limits
MONDOXYNE NL ORAL CAPSULE 100 MG	Generic	
NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
<i>tetracycline hcl oral capsule</i>	Generic	
Anticonvulsants		
Anticonvulsants, Other		
BRIVIACT ORAL SOLUTION	Brand	PA NS; MO; NEDS
BRIVIACT ORAL TABLET	Brand	PA NS; MO; NEDS
DIACOMIT ORAL CAPSULE	Brand	PA NS; MO; NEDS
DIACOMIT ORAL PACKET	Brand	PA NS; MO; NEDS
FINTEPLA ORAL SOLUTION	Brand	PA NS; MO; NEDS
<i>lamotrigine oral kit 21 x 25 mg & 7 x 50 mg, 25 & 50 & 100 mg, 42 x 50 mg & 14x100 mg</i>	Generic	
<i>lamotrigine oral tablet</i>	Generic	MO
<i>lamotrigine starter kit-blue oral kit</i>	Generic	
<i>lamotrigine starter kit-green oral kit</i>	Generic	NEDS
<i>lamotrigine starter kit-orange oral kit</i>	Generic	
<i>levetiracetam er oral tablet extended release 24 hour</i>	Generic	MO
<i>levetiracetam oral solution</i>	Generic	MO
<i>levetiracetam oral tablet</i>	Generic	MO
<i>roweepra oral tablet 500 mg</i>	Generic	MO
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	Brand	MO
<i>subvenite oral tablet</i>	Generic	MO
<i>subvenite starter kit-blue oral kit</i>	Generic	
<i>subvenite starter kit-green oral kit</i>	Generic	NEDS
<i>subvenite starter kit-orange oral kit</i>	Generic	
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 100 & 150 MG	Brand	MO; QL (56 EA per 28 days); NEDS
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Brand	MO; QL (56 EA per 28 days); NEDS
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG	Brand	MO; QL (60 EA per 30 days); NEDS
XCOPRI ORAL TABLET 50 MG	Brand	MO; QL (90 EA per 30 days); NEDS
XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG	Brand	QL (28 EA per 28 days)

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

Drug	Status	Requirements/Limits
XCOPRI ORAL TABLET THERAPY PACK 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG	Brand	QL (28 EA per 28 days); NEDS
Calcium Channel Modifying Agents		
<i>ethosuximide oral capsule</i>	Generic	MO
<i>ethosuximide oral solution</i>	Generic	MO
<i>methsuximide oral capsule</i>	Generic	
ZONISADE ORAL SUSPENSION	Brand	ST
<i>zonisamide oral capsule</i>	Generic	MO
Gamma-Aminobutyric Acid (Gaba) Augmenting Agents		
<i>clobazam oral suspension</i>	Generic	PA NS; MO
<i>clobazam oral tablet</i>	Generic	PA NS; MO
<i>clonazepam oral tablet</i>	Generic	
<i>clonazepam oral tablet dispersible</i>	Generic	
<i>diazepam rectal gel</i>	Generic	
<i>divalproex sodium oral capsule delayed release sprinkle</i>	Generic	MO
EPIDIOLEX ORAL SOLUTION	Brand	PA NS; MO; NEDS
<i>gabapentin oral capsule</i>	Generic	MO
<i>gabapentin oral solution 250 mg/5ml</i>	Generic	MO
<i>gabapentin oral tablet 600 mg, 800 mg</i>	Generic	MO
NAYZILAM NASAL SOLUTION	Brand	QL (10 EA per 30 days); NEDS
<i>phenobarbital oral elixir</i>	Generic	MO
<i>phenobarbital oral tablet</i>	Generic	MO
<i>primidone oral tablet 125 mg</i>	Generic	
<i>primidone oral tablet 250 mg, 50 mg</i>	Generic	MO
SYMPAZAN ORAL FILM 10 MG, 20 MG	Brand	PA NS; MO; NEDS
SYMPAZAN ORAL FILM 5 MG	Brand	PA NS; MO
<i>tiagabine hcl oral tablet</i>	Generic	MO
<i>valproic acid oral capsule</i>	Generic	MO
<i>valproic acid oral solution</i>	Generic	MO
VALTOCO 10 MG DOSE NASAL LIQUID	Brand	QL (10 EA per 30 days); NEDS
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK	Brand	QL (10 EA per 30 days); NEDS
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK	Brand	QL (10 EA per 30 days); NEDS
VALTOCO 5 MG DOSE NASAL LIQUID	Brand	QL (10 EA per 30 days); NEDS

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

Drug	Status	Requirements/Limits
<i>vigabatrin oral packet</i>	Generic	PA NS; MO; NEDS
<i>vigabatrin oral tablet</i>	Generic	PA NS; MO; NEDS
<i>vigadronе oral packet</i>	Generic	PA NS; MO; NEDS
VIGADRONE ORAL TABLET	Brand	PA NS; NEDS
<i>vigpoder oral packet</i>	Generic	PA NS; NEDS
ZTALMY ORAL SUSPENSION	Brand	PA NS; NEDS
Glutamate Reducing Agents		
EPRONTIA ORAL SOLUTION	Brand	
<i>felbamate oral suspension</i>	Generic	MO; NEDS
<i>felbamate oral tablet</i>	Generic	MO
FYCOMPA ORAL SUSPENSION	Brand	PA NS; MO; NEDS
FYCOMPA ORAL TABLET 10 MG, 12 MG, 4 MG, 6 MG, 8 MG	Brand	PA NS; MO; NEDS
FYCOMPA ORAL TABLET 2 MG	Brand	PA NS; MO
<i>topiramate er oral capsule er 24 hour sprinkle</i>	Generic	MO
<i>topiramate oral capsule sprinkle</i>	Generic	MO
<i>topiramate oral tablet</i>	Generic	MO
Sodium Channel Agents		
APTIOM ORAL TABLET	Brand	PA NS; MO; NEDS
<i>carbamazepine er oral capsule extended release 12 hour</i>	Generic	MO
<i>carbamazepine er oral tablet extended release 12 hour</i>	Generic	MO
<i>carbamazepine oral suspension</i>	Generic	MO
<i>carbamazepine oral tablet</i>	Generic	MO
<i>carbamazepine oral tablet chewable</i>	Generic	MO
DILANTIN ORAL CAPSULE 30 MG	Brand	MO
<i>epitol oral tablet</i>	Generic	MO
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	Brand	MO
<i>fosphenytoin sodium injection solution 100 mg pe/2ml</i>	Generic	
<i>lacosamide oral solution</i>	Generic	MO
<i>lacosamide oral tablet</i>	Generic	MO
<i>oxcarbazepine oral suspension</i>	Generic	MO
<i>oxcarbazepine oral tablet</i>	Generic	MO
<i>phenytak oral capsule</i>	Generic	MO
<i>phenytoin oral suspension 125 mg/5ml</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>phenytoin oral tablet chewable</i>	Generic	MO
<i>phenytoin sodium extended oral capsule</i>	Generic	MO
<i>rufinamide oral suspension</i>	Generic	PA NS; MO; NEDS
<i>rufinamide oral tablet 200 mg</i>	Generic	PA NS; MO
<i>rufinamide oral tablet 400 mg</i>	Generic	PA NS; MO; NEDS
Antidementia Agents		
Antidementia Agents, Other		
<i>ergoloid mesylates oral tablet</i>	Generic	MO
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	Brand	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Brand	MO
Cholinesterase Inhibitors		
<i>donepezil hcl oral tablet</i>	Generic	MO; QL (30 EA per 30 days)
<i>donepezil hcl oral tablet dispersible</i>	Generic	MO; QL (30 EA per 30 days)
<i>galantamine hydrobromide er oral capsule extended release 24 hour</i>	Generic	MO
<i>galantamine hydrobromide oral solution</i>	Generic	MO
<i>galantamine hydrobromide oral tablet</i>	Generic	MO
<i>rivastigmine tartrate oral capsule</i>	Generic	MO; QL (60 EA per 30 days)
<i>rivastigmine transdermal patch 24 hour</i>	Generic	MO; QL (1 EA per 1 day)
N-Methyl-D-Aspartate (Nmda) Receptor Antagonist		
<i>memantine hcl er oral capsule extended release 24 hour</i>	Generic	MO; QL (30 EA per 30 days)
<i>memantine hcl oral solution 2 mg/ml</i>	Generic	MO
<i>memantine hcl oral tablet 10 mg, 5 mg</i>	Generic	MO; QL (60 EA per 30 days)
<i>memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg</i>	Generic	
Antidepressants		
Antidepressants, Other		
AUVELITY ORAL TABLET EXTENDED RELEASE	Brand	ST; QL (60 EA per 30 days)
<i>bupropion hcl er (sr) oral tablet extended release 12 hour</i>	Generic	MO
<i>bupropion hcl er (xl) oral tablet extended release 24 hour</i>	Generic	MO
<i>bupropion hcl oral tablet</i>	Generic	MO
<i>mirtazapine oral tablet</i>	Generic	MO; QL (30 EA per 30 days)

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

Drug	Status	Requirements/Limits
<i>mirtazapine oral tablet dispersible</i>	Generic	MO; QL (30 EA per 30 days)
TRINTELLIX ORAL TABLET	Brand	MO; QL (30 EA per 30 days)
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG	Brand	PA NS; QL (28 EA per 14 days); NEDS
ZURZUVAE ORAL CAPSULE 30 MG	Brand	PA NS; QL (14 EA per 14 days); NEDS
Monoamine Oxidase Inhibitors		
EMSAM TRANSDERMAL PATCH 24 HOUR	Brand	PA NS; MO; QL (30 EA per 30 days); NEDS
MARPLAN ORAL TABLET	Brand	MO
<i>phenelzine sulfate oral tablet</i>	Generic	MO
<i>tranylcypromine sulfate oral tablet</i>	Generic	MO
Ssris/Snris (Selective Serotonin Reuptake Inhibitors/Serotonin And Norepinephrine Reuptake Inhibitor		
<i>citalopram hydrobromide oral solution</i>	Generic	MO
<i>citalopram hydrobromide oral tablet</i>	Generic	MO
<i>desvenlafaxine er oral tablet extended release 24 hour</i>	Generic	MO; QL (1 EA per 1 day)
<i>desvenlafaxine succinate er oral tablet extended release 24 hour</i>	Generic	MO
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 60 MG	Brand	MO; QL (60 EA per 30 days)
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 30 MG, 40 MG	Brand	MO; QL (90 EA per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg</i>	Generic	MO; QL (60 EA per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 40 mg</i>	Generic	MO; QL (90 EA per 30 days)
<i>escitalopram oxalate oral solution</i>	Generic	MO
<i>escitalopram oxalate oral tablet</i>	Generic	MO
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Brand	PA NS; MO; QL (30 EA per 30 days)
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	Brand	PA NS; QL (56 EA per 365 days)
<i>fluoxetine hcl (pmdd) oral tablet</i>	Generic	MO
<i>fluoxetine hcl oral capsule</i>	Generic	MO
<i>fluoxetine hcl oral capsule delayed release</i>	Generic	MO; QL (4 EA per 28 days)

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

Drug	Status	Requirements/Limits
<i>fluoxetine hcl oral solution</i>	Generic	MO
<i>fluoxetine hcl oral tablet 10 mg, 20 mg</i>	Generic	MO
<i>fluoxetine hcl oral tablet 60 mg</i>	Generic	
<i>fluvoxamine maleate er oral capsule extended release 24 hour</i>	Generic	MO
<i>fluvoxamine maleate oral tablet</i>	Generic	MO
<i>nefazodone hcl oral tablet</i>	Generic	MO
<i>paroxetine hcl er oral tablet extended release 24 hour</i>	Generic	MO
<i>paroxetine hcl oral suspension</i>	Generic	MO
<i>sertraline hcl oral capsule</i>	Generic	ST
<i>sertraline hcl oral concentrate</i>	Generic	MO
<i>sertraline hcl oral tablet</i>	Generic	MO
<i>trazodone hcl oral tablet</i>	Generic	MO
<i>venlafaxine hcl er oral capsule extended release 24 hour</i>	Generic	MO
<i>venlafaxine hcl er oral tablet extended release 24 hour</i>	Generic	MO
VIBRYD STARTER PACK ORAL KIT	Brand	PA NS
<i>vilazodone hcl oral tablet</i>	Generic	PA NS; MO
Tricyclics		
<i>amitriptyline hcl oral tablet</i>	Generic	MO
<i>amoxapine oral tablet</i>	Generic	MO
<i>chlordiazepoxide-amitriptyline oral tablet</i>	Generic	MO
<i>clomipramine hcl oral capsule</i>	Generic	MO
<i>desipramine hcl oral tablet</i>	Generic	MO
<i>doxepin hcl oral capsule</i>	Generic	MO
<i>doxepin hcl oral concentrate</i>	Generic	MO
<i>imipramine hcl oral tablet</i>	Generic	MO
<i>nortriptyline hcl oral capsule</i>	Generic	MO
<i>nortriptyline hcl oral solution</i>	Generic	MO
<i>perphenazine-amitriptyline oral tablet</i>	Generic	MO
<i>protriptyline hcl oral tablet</i>	Generic	MO
<i>trimipramine maleate oral capsule</i>	Generic	MO
Antiemetics		
Antiemetics, Other		
<i>doxylamine-pyridoxine oral tablet delayed release</i>	Generic	
<i>meclizine hcl oral tablet 12.5 mg, 25 mg</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>promethazine hcl injection solution</i>	Generic	
<i>promethazine hcl oral syrup</i>	Generic	
<i>promethazine hcl oral tablet</i>	Generic	
<i>promethazine hcl rectal suppository 12.5 mg, 25 mg</i>	Generic	
PROMETHEGAN RECTAL SUPPOSITORY 25 MG	Generic	
PROMETHEGAN RECTAL SUPPOSITORY 50 MG	Brand	
<i>scopolamine transdermal patch 72 hour</i>	Generic	
Emetogenic Therapy Adjuncts		
<i>aprepitant oral capsule</i>	Generic	PA
<i>dronabinol oral capsule</i>	Generic	B/D
EMEND ORAL SUSPENSION RECONSTITUTED	Brand	PA
<i>gransetron hcl oral tablet</i>	Generic	B/D
<i>ondansetron hcl injection solution 4 mg/2ml</i>	Generic	
<i>ondansetron hcl oral solution</i>	Generic	B/D
<i>ondansetron hcl oral tablet</i>	Generic	B/D
<i>ondansetron oral tablet dispersible</i>	Generic	B/D
SYNDROS ORAL SOLUTION	Brand	B/D; NEDS
Antifungals		
Antifungals		
ABELCET INTRAVENOUS SUSPENSION	Brand	B/D; HI
AMPHOTERICIN B INTRAVENOUS SOLUTION RECONSTITUTED	Generic	B/D; HI
<i>amphotericin b liposome intravenous suspension reconstituted</i>	Generic	B/D; HI
BREXAFEMME ORAL TABLET	Brand	PA; QL (4 EA per 1 day); NEDS
<i>caspofungin acetate intravenous solution reconstituted</i>	Generic	HI
CICLODAN EXTERNAL SOLUTION	Generic	
<i>ciclopirox external gel</i>	Generic	QL (100 GM per 30 days)
<i>ciclopirox external shampoo</i>	Generic	
<i>ciclopirox external solution</i>	Generic	
<i>ciclopirox olamine external cream</i>	Generic	QL (90 GM per 30 days)
<i>ciclopirox olamine external suspension</i>	Generic	QL (60 ML per 30 days)
<i>clotrimazole external cream</i>	Generic	
<i>clotrimazole external solution</i>	Generic	QL (30 ML per 30 days)

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

Drug	Status	Requirements/Limits
<i>clotrimazole mouth/throat troche</i>	Generic	
<i>econazole nitrate external cream</i>	Generic	QL (85 GM per 30 days)
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
EXELDERM EXTERNAL CREAM	Brand	
<i>fluconazole in sodium chloride intravenous solution 200-0.9 mg/100ml-%, 400-0.9 mg/200ml-%</i>	Generic	HI
<i>fluconazole oral suspension reconstituted</i>	Generic	
<i>fluconazole oral tablet</i>	Generic	
<i>flucytosine oral capsule</i>	Generic	NEDS
<i>griseofulvin microsize oral suspension</i>	Generic	
<i>griseofulvin microsize oral tablet</i>	Generic	
<i>griseofulvin ultramicrosize oral tablet</i>	Generic	
<i>itraconazole oral capsule</i>	Generic	
<i>itraconazole oral solution</i>	Generic	NEDS
<i>ketoconazole external cream</i>	Generic	QL (60 GM per 30 days)
<i>ketoconazole external shampoo 2 %</i>	Generic	
<i>ketoconazole oral tablet</i>	Generic	
<i>micafungin sodium intravenous solution reconstituted</i>	Generic	HI
<i>miconazole 3 vaginal suppository</i>	Generic	
NATACYN OPHTHALMIC SUSPENSION	Brand	
NYAMYC EXTERNAL POWDER	Generic	QL (60 GM per 30 days)
<i>nystatin external cream</i>	Generic	
<i>nystatin external ointment</i>	Generic	
<i>nystatin external powder</i>	Generic	QL (60 GM per 30 days)
<i>nystatin mouth/throat suspension</i>	Generic	
<i>nystatin oral tablet</i>	Generic	
<i>nystatin-triamcinolone external cream</i>	Generic	
<i>nystatin-triamcinolone external ointment</i>	Generic	
NYSTOP EXTERNAL POWDER	Generic	QL (60 GM per 30 days)
<i>posaconazole oral suspension</i>	Generic	PA; NEDS
<i>posaconazole oral tablet delayed release</i>	Generic	PA; MO; NEDS
<i>terbinafine hcl oral tablet</i>	Generic	QL (84 EA per 180 days)
<i>terconazole vaginal cream</i>	Generic	
<i>terconazole vaginal suppository</i>	Generic	
VIVJOA ORAL CAPSULE THERAPY PACK	Brand	PA; QL (18 EA per 90 days)

You can find information on what the symbols and abbreviations on this table mean by going to page xii.
20

Drug	Status	Requirements/Limits
<i>voriconazole intravenous solution reconstituted</i>	Generic	PA; HI
<i>voriconazole oral suspension reconstituted</i>	Generic	PA; NEDS
<i>voriconazole oral tablet</i>	Generic	PA
Antigout Agents		
Antigout Agents		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	Generic	MO
<i>colchicine oral capsule</i>	Generic	
<i>colchicine oral tablet</i>	Generic	
<i>colchicine-probenecid oral tablet</i>	Generic	MO
<i>febuxostat oral tablet</i>	Generic	MO
<i>probenecid oral tablet</i>	Generic	MO
Anti-Inflammatory Agents		
Glucocorticoids		
<i>methylprednisolone acetate injection suspension 40 mg/ml</i>	Generic	
Antimigraine Agents		
Antimigraine Agents		
ZAVZPRET NASAL SOLUTION	Brand	PA; QL (12 EA per 30 days); NEDS
Ergot Alkaloids		
<i>dihydroergotamine mesylate injection solution</i>	Generic	QL (8 ML per 30 days); NEDS
<i>dihydroergotamine mesylate nasal solution</i>	Generic	
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	Brand	NEDS
<i>ergotamine-caffeine oral tablet</i>	Generic	
Prophylactic		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (1 ML per 30 days)
<i>divalproex sodium er oral tablet extended release 24 hour</i>	Generic	MO
NURTEC ORAL TABLET DISPERSIBLE	Brand	PA; QL (18 EA per 30 days); NEDS
<i>timolol maleate oral tablet</i>	Generic	MO
UBRELVY ORAL TABLET	Brand	PA; QL (16 EA per 30 days); NEDS
Serotonin 5-HT-Receptor Agonists		
<i>rizatriptan benzoate oral tablet</i>	Generic	QL (36 EA per 30 days)
<i>rizatriptan benzoate oral tablet dispersible</i>	Generic	QL (36 EA per 30 days)

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

Drug	Status	Requirements/Limits
<i>sumatriptan succinate oral tablet</i>	Generic	QL (9 EA per 30 days)
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5ml</i>	Generic	QL (8 ML per 30 days)
Antimyasthenic Agents		
Parasympathomimetics		
<i>pyridostigmine bromide er oral tablet extended release</i>	Generic	
<i>pyridostigmine bromide oral solution</i>	Generic	
<i>pyridostigmine bromide oral tablet</i>	Generic	
Antimycobacterials		
Antimycobacterials, Other		
<i>dapsone oral tablet</i>	Generic	MO
<i>rifabutin oral capsule</i>	Generic	
Antituberculars		
<i>ethambutol hcl oral tablet</i>	Generic	
<i>isoniazid oral syrup</i>	Generic	MO
<i>isoniazid oral tablet</i>	Generic	MO
PASER ORAL PACKET	Brand	
<i>pretomanid oral tablet</i>	Generic	
PRIFTIN ORAL TABLET	Brand	
<i>pyrazinamide oral tablet</i>	Generic	
<i>rifampin intravenous solution reconstituted</i>	Generic	HI
<i>rifampin oral capsule</i>	Generic	
SIRTURO ORAL TABLET	Brand	PA; NEDS
TRECATOR ORAL TABLET	Brand	
Antineoplastics		
Alkylating Agents		
<i>cyclophosphamide oral capsule</i>	Generic	B/D
<i>cyclophosphamide oral tablet</i>	Generic	B/D
GLEOSTINE ORAL CAPSULE 10 MG, 40 MG	Brand	
GLEOSTINE ORAL CAPSULE 100 MG	Brand	NEDS
LEUKERAN ORAL TABLET	Brand	NEDS
MATULANE ORAL CAPSULE	Brand	NEDS
<i>thiotepa injection solution reconstituted 15 mg</i>	Generic	NEDS
VALCHLOR EXTERNAL GEL	Brand	PA NS; NEDS

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

Drug	Status	Requirements/Limits
Antiandrogens		
<i>abiraterone acetate oral tablet 250 mg</i>	Generic	PA NS
<i>abiraterone acetate oral tablet 500 mg</i>	Generic	PA NS; NEDS
<i>bicalutamide oral tablet</i>	Generic	
ERLEADA ORAL TABLET	Brand	PA NS; NEDS
<i>flutamide oral capsule</i>	Generic	
<i>nilutamide oral tablet</i>	Generic	NEDS
NUBEQA ORAL TABLET	Brand	PA NS; NEDS
XTANDI ORAL CAPSULE	Brand	PA NS; NEDS
XTANDI ORAL TABLET	Brand	PA NS; NEDS
YONSA ORAL TABLET	Brand	PA NS; NEDS
Antiangiogenic Agents		
<i>lenalidomide oral capsule</i>	Generic	PA NS; LA; NEDS
POMALYST ORAL CAPSULE	Brand	PA NS; NEDS
THALOMID ORAL CAPSULE	Brand	PA NS; MO; NEDS
Antiestrogens/Modifiers		
EMCYT ORAL CAPSULE	Brand	NEDS
<i>fulvestrant intramuscular solution</i>	Generic	NEDS
<i>fulvestrant intramuscular solution prefilled syringe</i>	Generic	NEDS
ORSERDU ORAL TABLET	Brand	PA NS; NEDS
SOLTAMOX ORAL SOLUTION	Brand	MO; NEDS
<i>tamoxifen citrate oral tablet</i>	Generic	MO
<i>toremifene citrate oral tablet</i>	Generic	MO; NEDS
Antimetabolites		
<i>hydroxyurea oral capsule</i>	Generic	
INQOVI ORAL TABLET	Brand	PA NS; QL (5 EA per 28 days); NEDS
LONSURF ORAL TABLET	Brand	PA NS; NEDS
<i>mercaptopurine oral tablet</i>	Generic	
ONUREG ORAL TABLET	Brand	PA NS; NEDS
PURIXAN ORAL SUSPENSION	Brand	NEDS
SIKLOS ORAL TABLET 1000 MG	Brand	NEDS
TABLOID ORAL TABLET	Brand	
Antineoplastics, Other		
<i>azacitidine injection suspension reconstituted</i>	Generic	PA NS; NEDS
<i>bleomycin sulfate injection solution reconstituted</i>	Generic	B/D

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

Drug	Status	Requirements/Limits
BORTEZOMIB INJECTION SOLUTION RECONSTITUTED 3.5 MG	Brand	NEDS
COTELLIC ORAL TABLET	Brand	PA NS; NEDS
GAVRETO ORAL CAPSULE	Brand	PA NS; NEDS
GILOTRIF ORAL TABLET	Brand	PA NS; QL (30 EA per 30 days); NEDS
IBRANCE ORAL CAPSULE	Brand	PA NS; NEDS
IBRANCE ORAL TABLET	Brand	PA NS; NEDS
IWLFIN ORAL TABLET	Brand	PA NS; NEDS
KISQALI FEMARA (200 MG DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
KRAZATI ORAL TABLET	Brand	PA NS; NEDS
<i>leucovorin calcium injection solution reconstituted 100 mg, 350 mg</i>	Generic	
LUMAKRAS ORAL TABLET	Brand	PA NS; QL (8 EA per 1 day); NEDS
NINLARO ORAL CAPSULE	Brand	PA NS; NEDS
ODOMZO ORAL CAPSULE	Brand	PA NS; NEDS
OJJAARA ORAL TABLET	Brand	PA NS; NEDS
ONCASPAR INJECTION SOLUTION	Brand	NEDS
ORGOVYX ORAL TABLET	Brand	PA NS; NEDS
RETEVMO ORAL CAPSULE	Brand	PA NS; NEDS
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA NS; NEDS
TAGRISSO ORAL TABLET	Brand	PA NS; QL (30 EA per 30 days); NEDS
TUKYSA ORAL TABLET	Brand	PA NS; NEDS
VENCLEXTA ORAL TABLET 10 MG	Brand	PA NS
VENCLEXTA ORAL TABLET 100 MG, 50 MG	Brand	PA NS; NEDS
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
WELIREG ORAL TABLET	Brand	PA NS; NEDS
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG	Brand	PA NS; NEDS
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	Brand	PA NS; NEDS

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

Drug	Status	Requirements/Limits
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	Brand	PA NS; NEDS
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG	Brand	PA NS; NEDS
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	Brand	PA NS; NEDS
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
ZOLINZA ORAL CAPSULE	Brand	PA NS; NEDS
Aromatase Inhibitors, 3Rd Generation		
<i>anastrozole oral tablet</i>	Generic	MO
<i>exemestane oral tablet</i>	Generic	MO
<i>letrozole oral tablet</i>	Generic	MO
Enzyme Inhibitors		
COPIKTRA ORAL CAPSULE	Brand	PA NS; NEDS
IDHIFA ORAL TABLET	Brand	PA NS; QL (30 EA per 30 days); NEDS
OGSIVEO ORAL TABLET	Brand	PA NS; NEDS
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
REZLIDHIA ORAL CAPSULE	Brand	PA NS; NEDS
TIBSOVO ORAL TABLET	Brand	PA NS; NEDS
VERZENIO ORAL TABLET	Brand	PA NS; NEDS
VITRAKVI ORAL CAPSULE	Brand	PA NS; NEDS
VITRAKVI ORAL SOLUTION	Brand	PA NS; NEDS
XOSPATA ORAL TABLET	Brand	PA NS; NEDS
ZYDELIG ORAL TABLET	Brand	PA NS; NEDS
Molecular Target Inhibitors		
AKEEGA ORAL TABLET	Brand	PA NS; NEDS
ALECensa ORAL CAPSULE	Brand	PA NS; NEDS
ALUNBRIG ORAL TABLET 180 MG, 90 MG	Brand	PA NS; QL (30 EA per 30 days); NEDS
ALUNBRIG ORAL TABLET 30 MG	Brand	PA NS; QL (120 EA per 30 days); NEDS

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

Drug	Status	Requirements/Limits
ALUNBRIG ORAL TABLET THERAPY PACK	Brand	PA NS; QL (60 EA per 365 days); NEDS
AUGTYRO ORAL CAPSULE	Brand	PA NS; NEDS
AYVAKIT ORAL TABLET	Brand	PA NS; QL (1 EA per 1 day); NEDS
BALVERSA ORAL TABLET	Brand	PA NS; NEDS
BOSULIF ORAL CAPSULE	Brand	PA NS; NEDS
BOSULIF ORAL TABLET	Brand	PA NS; NEDS
BRAFTOVI ORAL CAPSULE 75 MG	Brand	PA NS; NEDS
BRUKINSA ORAL CAPSULE	Brand	PA NS; NEDS
CABOMETYX ORAL TABLET	Brand	PA NS; NEDS
CALQUENCE ORAL CAPSULE	Brand	PA NS; NEDS
CALQUENCE ORAL TABLET	Brand	PA NS; NEDS
CAPRELSA ORAL TABLET	Brand	PA NS; NEDS
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG	Brand	PA NS; NEDS
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG	Brand	PA NS; NEDS
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	Brand	PA NS; NEDS
DAURISMO ORAL TABLET	Brand	PA NS; NEDS
ERIVEDGE ORAL CAPSULE	Brand	PA NS; NEDS
<i>erlotinib hcl oral tablet 100 mg, 25 mg</i>	Generic	PA NS
<i>erlotinib hcl oral tablet 150 mg</i>	Generic	PA NS; NEDS
<i>everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	Generic	PA NS; NEDS
<i>everolimus oral tablet soluble</i>	Generic	PA NS; NEDS
EXKIVITY ORAL CAPSULE	Brand	PA NS; NEDS
FARYDAK ORAL CAPSULE	Brand	PA NS; NEDS
FOTIVDA ORAL CAPSULE	Brand	PA NS; NEDS
FRUZAQLA ORAL CAPSULE	Brand	PA NS; NEDS
<i>gefitinib oral tablet</i>	Generic	PA NS; NEDS
ICLUSIG ORAL TABLET	Brand	PA NS; QL (30 EA per 30 days); NEDS
<i>imatinib mesylate oral tablet</i>	Generic	
IMBRUVICA ORAL CAPSULE	Brand	PA NS; NEDS
IMBRUVICA ORAL SUSPENSION	Brand	PA NS; NEDS
IMBRUVICA ORAL TABLET	Brand	PA NS; NEDS
INLYTA ORAL TABLET	Brand	PA NS; NEDS

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

Drug	Status	Requirements/Limits
INREBIC ORAL CAPSULE	Brand	PA NS; NEDS
JAKAFI ORAL TABLET	Brand	PA NS; QL (60 EA per 30 days); NEDS
JAYPIRCA ORAL TABLET	Brand	PA NS; NEDS
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
KOSELUGO ORAL CAPSULE 10 MG	Brand	PA NS; QL (8 EA per 1 day); NEDS
KOSELUGO ORAL CAPSULE 25 MG	Brand	PA NS; QL (4 EA per 1 day); NEDS
<i>lapatinib ditosylate oral tablet</i>	Generic	PA NS; LA; NEDS
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; NEDS
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; NEDS
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; NEDS
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; NEDS
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; NEDS
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; NEDS
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; NEDS
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; NEDS
LORBRENA ORAL TABLET	Brand	PA NS; NEDS
LYNPARZA ORAL TABLET	Brand	PA NS; NEDS
LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Brand	PA NS; NEDS
MEKINIST ORAL SOLUTION RECONSTITUTED	Brand	PA NS; NEDS
MEKINIST ORAL TABLET	Brand	PA NS; NEDS

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

Drug	Status	Requirements/Limits
MEKTOVI ORAL TABLET	Brand	PA NS; NEDS
NERLYNX ORAL TABLET	Brand	PA NS; NEDS
<i>pazopanib hcl oral tablet</i>	Generic	PA NS; NEDS
PEMAZYRE ORAL TABLET	Brand	PA NS; NEDS
QINLOCK ORAL TABLET	Brand	PA NS; NEDS
ROZLYTREK ORAL CAPSULE	Brand	PA NS; NEDS
ROZLYTREK ORAL PACKET	Brand	PA NS; NEDS
RUBRACA ORAL TABLET	Brand	PA NS; NEDS
RYDAPT ORAL CAPSULE	Brand	PA NS; NEDS
SCEMBLIX ORAL TABLET 20 MG	Brand	PA NS; QL (60 EA per 30 days); NEDS
SCEMBLIX ORAL TABLET 40 MG	Brand	PA NS; NEDS
<i>sorafenib tosylate oral tablet</i>	Generic	PA NS; NEDS
SPRYCEL ORAL TABLET	Brand	PA NS; NEDS
STIVARGA ORAL TABLET	Brand	PA NS; NEDS
<i>sunitinib malate oral capsule</i>	Generic	PA NS; NEDS
TABRECTA ORAL TABLET	Brand	PA NS; QL (120 EA per 30 days); NEDS
TAFINLAR ORAL CAPSULE	Brand	PA NS; NEDS
TAFINLAR ORAL TABLET SOLUBLE	Brand	PA NS; NEDS
TALZENNA ORAL CAPSULE	Brand	PA NS; NEDS
TASIGNA ORAL CAPSULE	Brand	PA NS; NEDS
TAZVERIK ORAL TABLET	Brand	PA NS; QL (8 EA per 1 day); NEDS
TEPMETKO ORAL TABLET	Brand	PA NS; NEDS
TRUQAP ORAL TABLET	Brand	PA NS; NEDS
TRUSELTIQ (100MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; QL (21 EA per 28 days); NEDS
TRUSELTIQ (125MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; QL (42 EA per 28 days); NEDS
TRUSELTIQ (50MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; QL (42 EA per 28 days); NEDS
TRUSELTIQ (75MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; QL (63 EA per 28 days); NEDS
TURALIO ORAL CAPSULE	Brand	PA NS; NEDS
UKONIQ ORAL TABLET	Brand	PA NS; NEDS
VANFLYTA ORAL TABLET	Brand	PA NS; NEDS
VIZIMPRO ORAL TABLET	Brand	PA NS; NEDS

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

Drug	Status	Requirements/Limits
VONJO ORAL CAPSULE	Brand	PA NS; QL (4 EA per 1 day); NEDS
VOTRIENT ORAL TABLET	Brand	PA NS; NEDS
XALKORI ORAL CAPSULE	Brand	PA NS; NEDS
XALKORI ORAL CAPSULE SPRINKLE	Brand	PA NS; NEDS
ZEJULA ORAL CAPSULE	Brand	PA NS; NEDS
ZEJULA ORAL TABLET	Brand	PA NS; NEDS
ZELBORAF ORAL TABLET	Brand	PA NS; NEDS
ZYKADIA ORAL TABLET	Brand	PA NS; NEDS
Retinoids		
<i>bexarotene external gel</i>	Generic	PA NS; NEDS
<i>bexarotene oral capsule</i>	Generic	NEDS
PANRETIN EXTERNAL GEL	Brand	NEDS
<i>tretinoin oral capsule</i>	Generic	NEDS
Treatment Adjuncts		
<i>leucovorin calcium injection solution</i>	Generic	
<i>leucovorin calcium oral tablet</i>	Generic	
MESNEX ORAL TABLET	Brand	NEDS
Antiparasitics		
Anthelmintics		
<i>albendazole oral tablet</i>	Generic	NEDS
<i>ivermectin oral tablet</i>	Generic	PA
<i>praziquantel oral tablet</i>	Generic	
Antiprotozoals		
ALINIA ORAL SUSPENSION RECONSTITUTED	Brand	NEDS
<i>atovaquone oral suspension</i>	Generic	
<i>atovaquone-proguanil hcl oral tablet</i>	Generic	
<i>chloroquine phosphate oral tablet</i>	Generic	MO
COARTEM ORAL TABLET	Brand	
<i>hydroxychloroquine sulfate oral tablet 100 mg, 300 mg, 400 mg</i>	Generic	
<i>hydroxychloroquine sulfate oral tablet 200 mg</i>	Generic	MO
IMPAVIDO ORAL CAPSULE	Brand	NEDS
KRINTAFEL ORAL TABLET	Brand	
<i>mefloquine hcl oral tablet</i>	Generic	MO
<i>nitazoxanide oral tablet</i>	Generic	NEDS

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

Drug	Status	Requirements/Limits
<i>pentamidine isethionate inhalation solution reconstituted</i>	Generic	B/D
<i>pentamidine isethionate injection solution reconstituted</i>	Generic	
<i>primaquine phosphate oral tablet 26.3 (15 base) mg</i>	Generic	
<i>pyrimethamine oral tablet</i>	Generic	NEDS
<i>quinine sulfate oral capsule</i>	Generic	PA
Pediculicides/Scabicides		
<i>lindane external shampoo</i>	Generic	
<i>malathion external lotion</i>	Generic	
<i>permethrin external cream</i>	Generic	
Antiparkinson Agents		
Anticholinergics		
<i>benztropine mesylate oral tablet</i>	Generic	MO
<i>trihexyphenidyl hcl oral solution</i>	Generic	MO
<i>trihexyphenidyl hcl oral tablet</i>	Generic	MO
Antiparkinson Agents, Other		
<i>entacapone oral tablet</i>	Generic	MO
<i>tolcapone oral tablet</i>	Generic	MO; NEDS
Dopamine Agonists		
<i>apomorphine hcl subcutaneous solution cartridge</i>	Generic	PA; NEDS
<i>bromocriptine mesylate oral capsule</i>	Generic	MO
<i>bromocriptine mesylate oral tablet</i>	Generic	MO
KYNMOBI SUBLINGUAL FILM	Brand	PA; NEDS
NEUPRO TRANSDERMAL PATCH 24 HOUR	Brand	MO
<i>pramipexole dihydrochloride oral tablet</i>	Generic	MO
<i>ropinirole hcl er oral tablet extended release 24 hour</i>	Generic	MO
<i>ropinirole hcl oral tablet</i>	Generic	MO
Dopamine Precursors/L- Amino Acid Decarboxylase Inhibitors		
<i>carbidopa oral tablet</i>	Generic	MO
<i>carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg</i>	Generic	MO
<i>carbidopa-levodopa oral tablet</i>	Generic	MO
<i>carbidopa-levodopa oral tablet dispersible</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i>	Generic	MO
INBRIJA INHALATION CAPSULE	Brand	PA; MO; QL (10 EA per 1 day); NEDS
RYTARY ORAL CAPSULE EXTENDED RELEASE	Brand	ST; MO
Monoamine Oxidase B (Mao-B) Inhibitors		
<i>rasagiline mesylate oral tablet</i>	Generic	MO
<i>selegiline hcl oral capsule</i>	Generic	MO
<i>selegiline hcl oral tablet</i>	Generic	MO
ZELAPAR ORAL TABLET DISPERSIBLE	Brand	MO; NEDS
Antipsychotics		
1St Generation/Typical		
<i>chlorpromazine hcl injection solution 50 mg/2ml</i>	Generic	
<i>chlorpromazine hcl oral concentrate</i>	Generic	MO
<i>chlorpromazine hcl oral tablet</i>	Generic	MO
<i>fluphenazine decanoate injection solution</i>	Generic	
<i>fluphenazine hcl injection solution</i>	Generic	
<i>fluphenazine hcl oral concentrate</i>	Generic	MO
<i>fluphenazine hcl oral elixir</i>	Generic	MO
<i>fluphenazine hcl oral tablet</i>	Generic	MO
<i>haloperidol decanoate intramuscular solution</i>	Generic	
<i>haloperidol lactate injection solution</i>	Generic	
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	Generic	MO
<i>haloperidol oral tablet</i>	Generic	MO
<i>lozapine succinate oral capsule</i>	Generic	MO
<i>molindone hcl oral tablet</i>	Generic	MO
<i>perphenazine oral tablet</i>	Generic	MO
<i>pimozide oral tablet</i>	Generic	MO
<i>prochlorperazine maleate oral tablet</i>	Generic	MO
<i>prochlorperazine rectal suppository</i>	Generic	
<i>thioridazine hcl oral tablet</i>	Generic	MO
<i>thiothixene oral capsule</i>	Generic	MO
<i>trifluoperazine hcl oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
2Nd Generation/Atypical		
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	Brand	MO; NEDS
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	Brand	MO; NEDS
<i>aripiprazole oral solution</i>	Generic	MO
<i>aripiprazole oral tablet</i>	Generic	MO
<i>aripiprazole oral tablet dispersible</i>	Generic	MO; NEDS
<i>asenapine maleate sublingual tablet sublingual</i>	Generic	MO
CAPLYTA ORAL CAPSULE	Brand	ST; MO; QL (30 EA per 30 days); NEDS
FANAPT ORAL TABLET	Brand	ST; NEDS
FANAPT TITRATION PACK ORAL TABLET	Brand	ST
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	NEDS
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 78 MG/0.5ML	Brand	NEDS
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML	Brand	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML, 410 MG/1.32ML, 546 MG/1.75ML	Brand	NEDS
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 819 MG/2.63ML	Brand	MO; NEDS
<i>lurasidone hcl oral tablet</i>	Generic	MO
LYBALVI ORAL TABLET	Brand	ST; QL (30 EA per 30 days); NEDS
NUPLAZID ORAL CAPSULE	Brand	PA NS; MO; QL (60 EA per 30 days); NEDS
NUPLAZID ORAL TABLET 10 MG	Brand	PA NS; MO; QL (60 EA per 30 days); NEDS
<i>olanzapine intramuscular solution reconstituted</i>	Generic	
<i>olanzapine oral tablet</i>	Generic	MO
<i>olanzapine oral tablet dispersible</i>	Generic	MO
<i>paliperidone er oral tablet extended release 24 hour</i>	Generic	MO

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

Drug	Status	Requirements/Limits
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	Brand	MO; NEDS
<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	Generic	MO
<i>quetiapine fumarate oral tablet 150 mg</i>	Generic	
REXULTI ORAL TABLET	Brand	MO; QL (30 EA per 30 days); NEDS
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 12.5 MG	Brand	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 25 MG, 37.5 MG, 50 MG	Brand	NEDS
<i>risperidone microspheres er intramuscular suspension reconstituted er 12.5 mg</i>	Generic	
<i>risperidone microspheres er intramuscular suspension reconstituted er 25 mg, 37.5 mg, 50 mg</i>	Generic	NEDS
<i>risperidone oral solution</i>	Generic	MO; QL (8 ML per 1 day)
<i>risperidone oral tablet</i>	Generic	MO; QL (2 EA per 1 day)
<i>risperidone oral tablet dispersible</i>	Generic	MO; QL (2 EA per 1 day)
SECUADO TRANSDERMAL PATCH 24 HOUR	Brand	ST; MO; QL (30 EA per 30 days); NEDS
VRAYLAR ORAL CAPSULE	Brand	ST; MO; QL (1 EA per 1 day); NEDS
VRAYLAR ORAL CAPSULE THERAPY PACK	Brand	ST
<i>ziprasidone mesylate intramuscular solution reconstituted</i>	Generic	
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG	Brand	
Treatment-Resistant		
<i>clozapine oral tablet</i>	Generic	
<i>clozapine oral tablet dispersible 100 mg, 12.5 mg, 150 mg, 25 mg</i>	Generic	
<i>clozapine oral tablet dispersible 200 mg</i>	Generic	NEDS
VERSACLOZ ORAL SUSPENSION	Brand	NEDS
Antispasticity Agents		
Antispasticity Agents		
<i>baclofen oral tablet</i>	Generic	
<i>dantrolene sodium oral capsule</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>tizanidine hcl oral tablet</i>	Generic	
Antivirals		
Anti-Cytomegalovirus (Cmv) Agents		
LIVTENCITY ORAL TABLET	Brand	NEDS
PREVYMIS ORAL TABLET	Brand	PA; MO; NEDS
<i>valganciclovir hcl oral solution reconstituted</i>	Generic	MO; NEDS
<i>valganciclovir hcl oral tablet</i>	Generic	MO
ZIRGAN OPHTHALMIC GEL	Brand	
Anti-Hepatitis B (Hbv) Agents		
<i>adefovir dipivoxil oral tablet</i>	Generic	PA; MO
BARACLUDE ORAL SOLUTION	Brand	MO
<i>entecavir oral tablet</i>	Generic	MO
EPIVIR HBV ORAL SOLUTION	Brand	MO
INTRON A INJECTION SOLUTION RECONSTITUTED	Brand	MO; NEDS
<i>lamivudine oral tablet 100 mg</i>	Generic	MO
Anti-Hepatitis C (Hcv) Agents		
EPCLUSIA ORAL PACKET	Brand	PA; NEDS
EPCLUSIA ORAL TABLET	Brand	PA; NEDS
HARVONI ORAL PACKET	Brand	PA; NEDS
HARVONI ORAL TABLET 90-400 MG	Brand	PA; NEDS
<i>ledipasvir-sofosbuvir oral tablet</i>	Generic	PA; NEDS
<i>sofosbuvir-velpatasvir oral tablet</i>	Generic	PA; NEDS
Anti-Hepatitis C (Hcv) Agents, Direct Acting		
Mavyret Oral Packet	Brand	PA; NEDS
Mavyret Oral Tablet	Brand	PA; NEDS
Vosevi Oral Tablet	Brand	PA; NEDS
Anti-Hepatitis C (Hcv) Agents, Other		
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	Brand	NEDS
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	NEDS
<i>ribavirin inhalation solution reconstituted</i>	Generic	NEDS
<i>ribavirin oral capsule</i>	Generic	
<i>ribavirin oral tablet 200 mg</i>	Generic	

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

Drug	Status	Requirements/Limits
Antiherpetic Agents		
<i>acyclovir oral capsule</i>	Generic	
<i>acyclovir oral suspension</i>	Generic	
<i>acyclovir oral tablet</i>	Generic	
<i>acyclovir sodium intravenous solution</i>	Generic	B/D; HI
<i>famciclovir oral tablet</i>	Generic	
SITAVIG BUCCAL TABLET	Brand	NEDS
<i>trifluridine ophthalmic solution</i>	Generic	
<i>valacyclovir hcl oral tablet</i>	Generic	
Anti-Hiv Agents, Integrase Inhibitors (Insti)		
BIKTARVY ORAL TABLET 30-120-15 MG	Brand	NEDS
BIKTARVY ORAL TABLET 50-200-25 MG	Brand	MO; NEDS
GENVOYA ORAL TABLET	Brand	MO; NEDS
ISENTRESS HD ORAL TABLET	Brand	MO; NEDS
ISENTRESS ORAL PACKET	Brand	MO; NEDS
ISENTRESS ORAL TABLET	Brand	MO; NEDS
ISENTRESS ORAL TABLET CHEWABLE 100 MG	Brand	MO; NEDS
ISENTRESS ORAL TABLET CHEWABLE 25 MG	Brand	MO
STRIBILD ORAL TABLET	Brand	MO; NEDS
SYMTUZA ORAL TABLET	Brand	MO; NEDS
TIVICAY ORAL TABLET 10 MG	Brand	MO
TIVICAY ORAL TABLET 25 MG, 50 MG	Brand	MO; NEDS
TIVICAY PD ORAL TABLET SOLUBLE	Brand	MO; NEDS
Anti-Hiv Agents, Non-Nucleoside Reverse Transcriptase Inhibitors (Nnrti)		
COMPLERA ORAL TABLET	Brand	MO; NEDS
EDURANT ORAL TABLET	Brand	MO; NEDS
<i>efavirenz oral capsule</i>	Generic	MO
<i>efavirenz oral tablet</i>	Generic	MO
<i>efavirenz-emtricitab-tenofo df oral tablet</i>	Generic	MO
<i>etravirine oral tablet</i>	Generic	MO; NEDS
INTELENCE ORAL TABLET 25 MG	Brand	MO
<i>nevirapine er oral tablet extended release 24 hour</i>	Generic	MO
<i>nevirapine oral suspension</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>nevirapine oral tablet</i>	Generic	MO
ODEFSEY ORAL TABLET	Brand	MO; NEDS
PIFELTRO ORAL TABLET	Brand	MO; NEDS
Anti-Hiv Agents, Nucleoside And Nucleotide Reverse Transcriptase Inhibitors (Nrti)		
<i>abacavir sulfate oral solution</i>	Generic	MO
<i>abacavir sulfate oral tablet</i>	Generic	MO
<i>abacavir sulfate-lamivudine oral tablet</i>	Generic	MO
CIMDUO ORAL TABLET	Brand	MO; NEDS
DELSTRIGO ORAL TABLET	Brand	MO; NEDS
DESCOVY ORAL TABLET 120-15 MG	Brand	NEDS
DESCOVY ORAL TABLET 200-25 MG	Brand	MO; NEDS
DOVATO ORAL TABLET	Brand	MO; NEDS
<i>efavirenz-lamivudine-tenofovir oral tablet</i>	Generic	MO; NEDS
<i>emtricitabine oral capsule</i>	Generic	MO
<i>emtricitabine-tenofovir df oral tablet 100-150 mg, 200-300 mg</i>	Generic	MO
<i>emtricitabine-tenofovir df oral tablet 133-200 mg, 167-250 mg</i>	Generic	MO; NEDS
EMTRIVA ORAL SOLUTION	Brand	MO
JULUCA ORAL TABLET	Brand	MO; NEDS
<i>lamivudine oral solution</i>	Generic	MO
<i>lamivudine oral tablet 150 mg, 300 mg</i>	Generic	MO
<i>lamivudine-zidovudine oral tablet</i>	Generic	MO
<i>stavudine oral capsule</i>	Generic	MO
<i>tenofovir disoproxil fumarate oral tablet</i>	Generic	MO
TRIUMEQ ORAL TABLET	Brand	MO; NEDS
TRIUMEQ PD ORAL TABLET SOLUBLE	Brand	
TRIZIVIR ORAL TABLET	Brand	MO; NEDS
VIREAD ORAL POWDER	Brand	MO; NEDS
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	Brand	MO; NEDS
<i>zidovudine oral capsule</i>	Generic	MO
<i>zidovudine oral syrup</i>	Generic	MO
<i>zidovudine oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
Anti-Hiv Agents, Other		
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	MO; NEDS
<i>maraviroc oral tablet</i>	Generic	MO; NEDS
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	Brand	MO; QL (2 EA per 1 day); NEDS
SELZENTRY ORAL SOLUTION	Brand	MO; NEDS
SELZENTRY ORAL TABLET 25 MG	Brand	MO
SELZENTRY ORAL TABLET 75 MG	Brand	MO; NEDS
SUNLENCA ORAL TABLET THERAPY PACK	Brand	NEDS
TYBOST ORAL TABLET	Brand	MO
Anti-Hiv Agents, Protease Inhibitors		
APTIVUS ORAL CAPSULE	Brand	MO; NEDS
<i>atazanavir sulfate oral capsule</i>	Generic	MO
<i>darunavir oral tablet</i>	Generic	NEDS
EVOTAZ ORAL TABLET	Brand	MO; NEDS
<i>fosamprenavir calcium oral tablet</i>	Generic	MO; NEDS
LEXIVA ORAL SUSPENSION	Brand	MO
<i>lopinavir-ritonavir oral solution</i>	Generic	MO
<i>lopinavir-ritonavir oral tablet</i>	Generic	MO
NORVIR ORAL PACKET	Brand	MO
NORVIR ORAL SOLUTION	Brand	MO
PREZCOBIX ORAL TABLET	Brand	MO; NEDS
PREZISTA ORAL SUSPENSION	Brand	NEDS
PREZISTA ORAL TABLET 150 MG	Brand	NEDS
PREZISTA ORAL TABLET 75 MG	Brand	
REYATAZ ORAL PACKET	Brand	MO; NEDS
<i>ritonavir oral tablet</i>	Generic	MO
VIRACEPT ORAL TABLET	Brand	MO; NEDS
Anti-Influenza Agents		
<i>amantadine hcl oral capsule</i>	Generic	MO
<i>amantadine hcl oral solution</i>	Generic	
<i>amantadine hcl oral tablet</i>	Generic	MO
<i>oseltamivir phosphate oral capsule 30 mg</i>	Generic	QL (4 EA per 1 day)
<i>oseltamivir phosphate oral capsule 45 mg, 75 mg</i>	Generic	QL (2 EA per 1 day)
<i>oseltamivir phosphate oral suspension reconstituted</i>	Generic	

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

Drug	Status	Requirements/Limits
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT	Brand	
<i>rimantadine hcl oral tablet</i>	Generic	
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	Brand	
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK	Brand	
Anxiolytics		
Anxiolytics, Other		
<i>buspirone hcl oral tablet</i>	Generic	
<i>doxepin hcl oral tablet</i>	Generic	QL (30 EA per 30 days)
<i>hydroxyzine hcl oral syrup</i>	Generic	
<i>hydroxyzine hcl oral tablet</i>	Generic	
Benzodiazepines		
<i>alprazolam er oral tablet extended release 24 hour 0.5 mg</i>	Generic	
<i>alprazolam oral tablet</i>	Generic	
<i>alprazolam xr oral tablet extended release 24 hour 0.5 mg</i>	Generic	
<i>chlordiazepoxide hcl oral capsule</i>	Generic	
<i>clorazepate dipotassium oral tablet</i>	Generic	
DIAZEPAM INTENSOL ORAL CONCENTRATE	Generic	QL (240 ML per 30 days)
<i>diazepam oral solution 5 mg/5ml</i>	Generic	QL (1200 ML per 30 days)
<i>diazepam oral tablet 10 mg</i>	Generic	QL (120 EA per 30 days)
<i>diazepam oral tablet 2 mg, 5 mg</i>	Generic	QL (90 EA per 30 days)
<i>estazolam oral tablet</i>	Generic	QL (1 EA per 1 day)
<i>lorazepam injection solution</i>	Generic	
<i>lorazepam intensol oral concentrate</i>	Generic	QL (150 ML per 30 days)
<i>lorazepam oral concentrate</i>	Generic	QL (150 ML per 30 days)
<i>lorazepam oral tablet 0.5 mg, 1 mg</i>	Generic	QL (90 EA per 30 days)
<i>lorazepam oral tablet 2 mg</i>	Generic	QL (150 EA per 30 days)
<i>oxazepam oral capsule</i>	Generic	
Ssris/Snris (Selective Serotonin Reuptake Inhibitors/Serotonin And Norepinephrine Reuptake Inhibitor		
<i>paroxetine hcl oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>venlafaxine besylate er oral tablet extended release 24 hour</i>	Generic	
<i>venlafaxine hcl oral tablet</i>	Generic	MO
Bipolar Agents		
Bipolar Agents, Other		
<i>olanzapine-fluoxetine hcl oral capsule</i>	Generic	MO
<i>ziprasidone hcl oral capsule</i>	Generic	MO
Mood Stabilizers		
<i>divalproex sodium oral tablet delayed release</i>	Generic	MO
<i>lamotrigine oral tablet chewable</i>	Generic	MO
<i>lithium carbonate er oral tablet extended release</i>	Generic	MO
<i>lithium carbonate oral capsule</i>	Generic	MO
<i>lithium carbonate oral tablet</i>	Generic	MO
<i>lithium oral solution</i>	Generic	MO
Blood Glucose Regulators		
Antidiabetic Agents		
<i>acarbose oral tablet</i>	Generic	MO; QL (3 EA per 1 day)
<i>alogliptin benzoate oral tablet</i>	Generic	MO
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	Brand	PA; MO; QL (3.4 ML per 28 days)
CYCLOSET ORAL TABLET	Brand	MO
FARXIGA ORAL TABLET	Brand	MO
<i>glimepiride oral tablet</i>	Generic	MO
<i>glipizide er oral tablet extended release 24 hour</i>	Generic	MO
<i>glipizide oral tablet</i>	Generic	MO
<i>glyburide micronized oral tablet</i>	Generic	MO
<i>glyburide oral tablet</i>	Generic	MO
GLYXAMBI ORAL TABLET	Brand	MO
JANUVIA ORAL TABLET	Brand	MO; QL (1 EA per 1 day)
JARDIANCE ORAL TABLET	Brand	MO
<i>metformin hcl er oral tablet extended release 24 hour</i>	Generic	MO
<i>metformin hcl oral solution</i>	Generic	MO
<i>metformin hcl oral tablet 1000 mg, 500 mg, 850 mg</i>	Generic	MO
<i>miglitol oral tablet</i>	Generic	MO
MOUNJARO SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; QL (2 ML per 28 days)

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

Drug	Status	Requirements/Limits
<i>nateglinide oral tablet</i>	Generic	MO
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN- INJECTOR 2 MG/1.5ML	Brand	MO; QL (1.5 ML per 28 days)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN- INJECTOR 2 MG/1.5ML	Brand	PA; MO; QL (1.5 ML per 28 days)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN- INJECTOR 2 MG/3ML	Brand	PA; QL (3 ML per 28 days)
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	Brand	PA; QL (3 ML per 28 days)
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML	Brand	PA; MO; QL (3 ML per 28 days)
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; QL (3 ML per 28 days)
<i>pioglitazone hcl oral tablet</i>	Generic	MO
<i>repaglinide oral tablet 0.5 mg, 1 mg</i>	Generic	MO; QL (4 EA per 1 day)
<i>repaglinide oral tablet 2 mg</i>	Generic	MO; QL (8 EA per 1 day)
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; NEDS
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; NEDS
SYNJARDY ORAL TABLET	Brand	MO
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO
TRADJENTA ORAL TABLET	Brand	MO; QL (1 EA per 1 day)
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; QL (2 ML per 28 days)
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; QL (9 ML per 30 days)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO
Blood Glucose Regulators		
<i>glipizide-metformin hcl oral tablet</i>	Generic	MO
<i>glyburide-metformin oral tablet</i>	Generic	MO; QL (4 EA per 1 day)
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO- INJECTOR 0.5 MG/0.1ML	Brand	QL (0.4 ML per 1 day)

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

Drug	Status	Requirements/Limits
GVOKE HYPOOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML	Brand	QL (0.8 ML per 1 day)
GVOKE KIT SUBCUTANEOUS SOLUTION	Brand	QL (0.8 ML per 1 day)
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.5 MG/0.1ML	Brand	QL (0.4 ML per 1 day)
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 MG/0.2ML	Brand	QL (0.8 ML per 1 day)
JANUMET ORAL TABLET	Brand	MO; QL (2 EA per 1 day)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO; QL (2 EA per 1 day)
JENTADUETO ORAL TABLET	Brand	MO; QL (2 EA per 1 day)
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO; QL (2 EA per 1 day)
<i>pioglitazone hcl-glimepiride oral tablet</i>	Generic	MO
<i>pioglitazone hcl-metformin hcl oral tablet</i>	Generic	MO
Glycemic Agents		
<i>diazoxide oral suspension</i>	Generic	MO; NEDS
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	Brand	
<i>glucagon emergency injection kit</i>	Generic	
Insulins		
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML	Brand	
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.3 ML	Brand	
BD INSULIN SYRINGE HALF-UNIT	Brand	
BD INSULIN SYRINGE U/F 1/2UNIT	Brand	
BD INSULIN SYRINGE U/F 31G X 5/16" 0.3 ML	Brand	
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML	Brand	
BD VEO INSULIN SYRINGE U/F 31G X 15/64" 1 ML	Brand	
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML	Brand	
CVS GAUZE STERILE PAD 2"X2"	Brand	
DROPLET INSULIN SYRINGE 31G X 15/64" 1 ML	Brand	
HUMALOG INJECTION SOLUTION	Brand	MO

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

Drug	Status	Requirements/Limits
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	Brand	MO
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	MO
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	Brand	MO
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	Brand	MO
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	Brand	MO
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	Brand	MO
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	Brand	MO
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	Brand	MO
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	Brand	MO
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Brand	MO
HUMULIN N SUBCUTANEOUS SUSPENSION	Brand	MO
HUMULIN R INJECTION SOLUTION	Brand	MO
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	Brand	MO
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	Brand	MO
<i>insulin lispro (1 unit dial) subcutaneous solution pen-injector</i>	Generic	MO
<i>insulin lispro injection solution</i>	Generic	MO
<i>insulin lispro junior kwikpen subcutaneous solution pen-injector</i>	Generic	MO
<i>insulin lispro prot & lispro subcutaneous suspension pen-injector</i>	Generic	MO
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	MO
LANTUS SUBCUTANEOUS SOLUTION	Brand	MO

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

Drug	Status	Requirements/Limits
MONOJECT INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML	Brand	
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML	Brand	
RELI-ON INSULIN SYRINGE 29G 0.3 ML	Brand	
RELION INSULIN SYRINGE 31G X 15/64" 1 ML	Brand	
TECHLITE INSULIN SYRINGE 31G X 15/64" 1 ML	Brand	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	MO
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	MO
Blood Glucose Supplies		
Glucose Monitoring Test Supplies		
ACCU-CHEK AVIVA PLUS IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ACCU-CHEK GUIDE IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ACCU-CHEK SMARTVIEW IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ACCUTREND GLUCOSE IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ADVANCE INTUITION TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ADVANCE MICRO-DRAW TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ADVOCATE REDI-CODE IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ADVOCATE REDI-CODE+ TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ADVOCATE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
AGAMATRIX AMP TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
AGAMATRIX JAZZ TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
AGAMATRIX KEYNOTE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
AGAMATRIX PRESTO TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE 3 TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE 4 TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE II CHECK IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)

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

Drug	Status	Requirements/Limits
ASSURE II IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE PLATINUM IN VITRO STRIP	Brand	PA
ASSURE PRISM MULTI TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE PRO TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
BIOSCANNER GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
<i>blood glucose test in vitro strip</i>	Generic	PA; QL (5 EA per 1 day)
CAREONE BLOOD GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CARESENS N GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CARETOUCH TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHEK TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHOICE MICRO TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHOICE NO CODING IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHOICE TALK SYSTEM IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CONTOUR NEXT TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CONTOUR TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
DEXCOM G6 RECEIVER DEVICE	Brand	PA
DEXCOM G6 SENSOR	Brand	PA
DEXCOM G6 TRANSMITTER	Brand	PA
DEXCOM G7 RECEIVER DEVICE	Brand	PA
DEXCOM G7 SENSOR	Brand	PA
EASY PLUS II GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
EASY STEP TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
EASY TALK BLOOD GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
EASY TOUCH TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
EASY TRAK BLOOD GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)

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

Drug	Status	Requirements/Limits
EASYGLUCO IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
EASymax 15 TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ENLITE GLUCOSE SENSOR	Brand	PA
EVERSENSE E3 SENSOR/HOLDER	Brand	PA
EVERSENSE E3 SMART TRANSMITTER	Brand	PA
EVERSENSE SENSOR/HOLDER	Brand	PA
EVERSENSE SMART TRANSMITTER	Brand	PA
FREESTYLE INSULINX TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
FREESTYLE LIBRE 14 DAY READER DEVICE	Brand	PA
FREESTYLE LIBRE 14 DAY SENSOR	Brand	PA
FREESTYLE LIBRE 2 READER DEVICE	Brand	PA
FREESTYLE LIBRE 2 SENSOR	Brand	PA
FREESTYLE LIBRE 3 SENSOR	Brand	PA
FREESTYLE LIBRE READER DEVICE	Brand	PA
FREESTYLE LITE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
FREESTYLE PRECISION NEO TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
FREESTYLE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
GUARDIAN LINK 3 TRANSMITTER	Brand	PA
GUARDIAN REAL-TIME REPLACE PED DEVICE	Brand	PA
GUARDIAN SENSOR (3)	Brand	PA
ONETOUCH ULTRA 2 KIT	Brand	QL (1 EA per 365 days)
ONETOUCH ULTRA MINI KIT	Brand	QL (1 EA per 365 days)
ONETOUCH VERIO FLEX SYSTEM KIT	Brand	QL (1 EA per 365 days)
ONETOUCH VERIO IN VITRO STRIP	Brand	QL (5 EA per 1 day)
ONETOUCH VERIO IQ SYSTEM KIT	Brand	QL (1 EA per 365 days)
ONETOUCH VERIO KIT	Brand	QL (1 EA per 365 days)
OPTIUMEZ TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
PTS PANELS GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
QUICKTEK TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)

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

Drug	Status	Requirements/Limits
RELION BLOOD GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
RELION CONFIRM/MICRO TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
RELION PRIME TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
RELION ULTIMA TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
Blood Products And Modifiers		
Anticoagulants		
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	Brand	
ELIQUIS ORAL TABLET	Brand	MO
<i>enoxaparin sodium injection solution 300 mg/3ml</i>	Generic	
<i>enoxaparin sodium injection solution prefilled syringe</i>	Generic	
XARELTO ORAL TABLET	Brand	MO
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	Brand	
Blood Products And Modifiers, Other		
PYRUKYND ORAL TABLET 20 MG, 5 MG	Brand	PA; QL (60 EA per 30 days); NEDS
PYRUKYND ORAL TABLET 50 MG	Brand	PA; QL (120 EA per 30 days); NEDS
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK	Brand	PA; QL (30 EA per 30 days); NEDS
Platelet Modifying Agents		
DOPTELET ORAL TABLET	Brand	PA; NEDS
<i>prasugrel hcl oral tablet</i>	Generic	MO
TAVALISSE ORAL TABLET	Brand	PA; MO; NEDS
Blood Products/Modifiers/Volume Expanders		
Anticoagulants		
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	Generic	NEDS
<i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>	Generic	
FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	Brand	NEDS
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>heparin sodium (porcine) pf injection solution</i>	Generic	
JANTOVEN ORAL TABLET	Generic	MO
<i>warfarin sodium oral tablet</i>	Generic	MO
Blood Formation Modifiers		
<i>anagrelide hcl oral capsule</i>	Generic	MO
CABLIVI INJECTION KIT	Brand	PA; NEDS
LEUKINE INJECTION SOLUTION RECONSTITUTED	Brand	NEDS
MOZOBIL SUBCUTANEOUS SOLUTION	Brand	PA; NEDS
MULPLETA ORAL TABLET	Brand	PA; NEDS
OXBRYTA ORAL TABLET 300 MG	Brand	PA; QL (8 EA per 1 day); NEDS
OXBRYTA ORAL TABLET 500 MG	Brand	PA; MO; QL (5 EA per 1 day); NEDS
OXBRYTA ORAL TABLET SOLUBLE	Brand	PA; QL (8 EA per 1 day); NEDS
<i>plerixafor subcutaneous solution</i>	Generic	PA; NEDS
PROMACTA ORAL PACKET	Brand	PA; MO; NEDS
PROMACTA ORAL TABLET	Brand	PA; MO; NEDS
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 10000 UNIT/ML(1ML), 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	Brand	PA
RETACRIT INJECTION SOLUTION 40000 UNIT/ML	Brand	PA; NEDS
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	Brand	
Hemostasis Agents		
<i>tranexamic acid oral tablet</i>	Generic	
Platelet Modifying Agents		
<i>aspirin-dipyridamole er oral capsule extended release 12 hour</i>	Generic	MO
BRILINTA ORAL TABLET	Brand	MO
<i>cilostazol oral tablet</i>	Generic	MO
<i>clopidogrel bisulfate oral tablet 300 mg</i>	Generic	QL (1 EA per 30 days)
<i>clopidogrel bisulfate oral tablet 75 mg</i>	Generic	MO
<i>dipyridamole oral tablet</i>	Generic	MO
Cardiovascular Agents		
Alpha-Adrenergic Agonists		
<i>clonidine hcl oral tablet</i>	Generic	MO
<i>clonidine transdermal patch weekly</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>guanfacine hcl oral tablet</i>	Generic	MO
<i>methyldopa oral tablet</i>	Generic	MO
<i>midodrine hcl oral tablet</i>	Generic	
Alpha-Adrenergic Blocking Agents		
<i>phenoxybenzamine hcl oral capsule</i>	Generic	NEDS
<i>prazosin hcl oral capsule</i>	Generic	MO
Angiotensin II Receptor Antagonists		
<i>amlodipine-olmesartan oral tablet</i>	Generic	MO
<i>candesartan cilexetil oral tablet</i>	Generic	MO
<i>candesartan cilexetil-hctz oral tablet</i>	Generic	MO
ENTRESTO ORAL TABLET	Brand	MO
<i>irbesartan oral tablet</i>	Generic	MO
<i>irbesartan-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>losartan potassium oral tablet</i>	Generic	MO
<i>losartan potassium-hctz oral tablet</i>	Generic	MO; QL (1 EA per 1 day)
<i>olmesartan medoxomil oral tablet</i>	Generic	MO
<i>olmesartan medoxomil-hctz oral tablet</i>	Generic	MO
<i>telmisartan oral tablet</i>	Generic	MO
<i>telmisartan-hctz oral tablet</i>	Generic	MO
<i>valsartan oral tablet</i>	Generic	MO
<i>valsartan-hydrochlorothiazide oral tablet</i>	Generic	MO
Angiotensin-Converting Enzyme (ACE) Inhibitors		
<i>benazepril hcl oral tablet</i>	Generic	MO
<i>benazepril-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>captopril oral tablet</i>	Generic	MO
<i>enalapril maleate oral tablet</i>	Generic	MO
<i>enalapril-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>fosinopril sodium oral tablet</i>	Generic	MO
<i>fosinopril sodium-hctz oral tablet</i>	Generic	MO
<i>lisinopril oral tablet</i>	Generic	MO
<i>lisinopril-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>moexipril hcl oral tablet</i>	Generic	MO
<i>perindopril erbumine oral tablet</i>	Generic	MO
<i>quinapril hcl oral tablet</i>	Generic	MO; QL (2 EA per 1 day)
<i>quinapril-hydrochlorothiazide oral tablet</i>	Generic	MO; QL (1 EA per 1 day)
<i>ramipril oral capsule</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>trandolapril oral tablet</i>	Generic	MO
<i>trandolapril-verapamil hcl er oral tablet extended release</i>	Generic	MO
Antiarrhythmics		
<i>amiodarone hcl oral tablet</i>	Generic	MO
<i>disopyramide phosphate oral capsule</i>	Generic	MO
<i>dofetilide oral capsule</i>	Generic	MO
<i>flecainide acetate oral tablet</i>	Generic	MO
<i>mexiletine hcl oral capsule</i>	Generic	MO
MULTAQ ORAL TABLET	Brand	MO
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	Brand	MO
<i>propafenone hcl er oral capsule extended release 12 hour</i>	Generic	MO
<i>propafenone hcl oral tablet</i>	Generic	MO
<i>quinidine gluconate er oral tablet extended release</i>	Generic	MO
<i>quinidine sulfate oral tablet</i>	Generic	MO
<i>sorine oral tablet</i>	Generic	MO
<i>sotalol hcl (af) oral tablet</i>	Generic	MO
<i>sotalol hcl oral tablet</i>	Generic	MO
Beta-Adrenergic Blocking Agents		
<i>acebutolol hcl oral capsule</i>	Generic	MO
<i>atenolol oral tablet</i>	Generic	MO
<i>atenolol-chlorthalidone oral tablet</i>	Generic	MO
<i>betaxolol hcl oral tablet</i>	Generic	MO
<i>bisoprolol fumarate oral tablet</i>	Generic	MO
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>carvedilol oral tablet</i>	Generic	MO
<i>carvedilol phosphate er oral capsule extended release 24 hour</i>	Generic	MO
<i>labetalol hcl oral tablet</i>	Generic	MO
<i>metoprolol succinate er oral tablet extended release 24 hour</i>	Generic	MO
<i>metoprolol tartrate oral tablet</i>	Generic	MO
<i>metoprolol-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	Generic	MO
<i>pindolol oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>propranolol hcl er oral capsule extended release 24 hour</i>	Generic	MO
<i>propranolol hcl oral solution</i>	Generic	MO
<i>propranolol hcl oral tablet</i>	Generic	MO
Calcium Channel Blocking Agents		
<i>amlodipine besy-benazepril hcl oral capsule</i>	Generic	MO
<i>amlodipine besylate oral tablet</i>	Generic	MO
<i>amlodipine besylate-valsartan oral tablet</i>	Generic	MO; QL (1 EA per 1 day)
<i>cartia xt oral capsule extended release 24 hour</i>	Generic	MO
<i>diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 300 mg, 360 mg, 420 mg</i>	Generic	MO
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour</i>	Generic	MO
<i>diltiazem hcl er coated beads oral tablet extended release 24 hour 120 mg</i>	Generic	
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	Generic	MO
<i>diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>	Generic	MO
<i>diltiazem hcl er oral tablet extended release 24 hour</i>	Generic	MO
<i>diltiazem hcl oral tablet</i>	Generic	MO
<i>dilt-xr oral capsule extended release 24 hour</i>	Generic	MO
<i>felodipine er oral tablet extended release 24 hour</i>	Generic	MO
<i>isradipine oral capsule</i>	Generic	MO
<i>matzim la oral tablet extended release 24 hour</i>	Generic	MO
<i>nicardipine hcl oral capsule</i>	Generic	MO
<i>nifedipine er oral tablet extended release 24 hour</i>	Generic	MO
<i>nifedipine er osmotic release oral tablet extended release 24 hour</i>	Generic	MO
<i>nifedipine oral capsule</i>	Generic	MO
<i>taztia xt oral capsule extended release 24 hour</i>	Generic	MO
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	Generic	MO
<i>tiadylt er oral capsule extended release 24 hour 420 mg</i>	Generic	MO
<i>verapamil hcl er oral capsule extended release 24 hour</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>verapamil hcl er oral tablet extended release</i>	Generic	MO
<i>verapamil hcl oral tablet</i>	Generic	MO
Cardiovascular Agents, Other		
<i>aliskiren fumarate oral tablet</i>	Generic	MO
CAMZYOS ORAL CAPSULE	Brand	PA; QL (30 EA per 30 days); NEDS
CORLANOR ORAL SOLUTION	Brand	PA; MO
CORLANOR ORAL TABLET	Brand	PA; MO
DIGITEK ORAL TABLET	Generic	MO
DIGOX ORAL TABLET 125 MCG	Generic	MO
<i>digox oral tablet 250 mcg</i>	Generic	MO
<i>digoxin oral solution</i>	Generic	MO
<i>digoxin oral tablet</i>	Generic	MO
<i>droxidopa oral capsule</i>	Generic	PA; NEDS
FILSPARI ORAL TABLET	Brand	PA; QL (30 EA per 30 days); NEDS
<i>metyrosine oral capsule</i>	Generic	NEDS
NEXLETOL ORAL TABLET	Brand	PA; MO; QL (1 EA per 1 day)
NEXLIZET ORAL TABLET	Brand	PA; MO; QL (1 EA per 1 day)
ORLADEYO ORAL CAPSULE	Brand	PA; MO; QL (1 EA per 1 day); NEDS
<i>pentoxifylline er oral tablet extended release</i>	Generic	MO
<i>ranolazine er oral tablet extended release 12 hour</i>	Generic	MO
<i>telmisartan-amlodipine oral tablet</i>	Generic	MO
VERQUVO ORAL TABLET	Brand	PA; MO; QL (1 EA per 1 day)
Diuretics, Carbonic Anhydrase Inhibitors		
<i>acetazolamide oral tablet</i>	Generic	MO
<i>methazolamide oral tablet</i>	Generic	MO
Diuretics, Loop		
<i>bumetanide oral tablet</i>	Generic	MO
<i>ethacrynic acid oral tablet</i>	Generic	MO
<i>furosemide injection solution 10 mg/ml</i>	Generic	HI
<i>furosemide injection solution 10 mg/ml (4ml syringe)</i>	Generic	
<i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>	Generic	MO
<i>furosemide oral tablet</i>	Generic	MO
<i>torsemide oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
Diuretics, Potassium-Sparing		
<i>amiloride hcl oral tablet</i>	Generic	MO
<i>amiloride-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>eplerenone oral tablet</i>	Generic	MO
KERENDIA ORAL TABLET	Brand	PA; MO; QL (1 EA per 1 day)
<i>spironolactone oral tablet</i>	Generic	MO
<i>spironolactone-hctz oral tablet</i>	Generic	MO
<i>triamterene oral capsule</i>	Generic	
<i>triamterene-hctz oral capsule 37.5-25 mg</i>	Generic	MO
<i>triamterene-hctz oral tablet</i>	Generic	MO
Diuretics, Thiazide		
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	Generic	MO
<i>hydrochlorothiazide oral capsule</i>	Generic	MO
<i>hydrochlorothiazide oral tablet</i>	Generic	MO
<i>indapamide oral tablet</i>	Generic	MO
<i>metolazone oral tablet</i>	Generic	MO
Dyslipidemics, Fibric Acid Derivatives		
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>	Generic	MO
<i>fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg</i>	Generic	MO
<i>gemfibrozil oral tablet</i>	Generic	MO
Dyslipidemics, Hmg Coa Reductase Inhibitors		
<i>atorvastatin calcium oral tablet</i>	Generic	MO
<i>fluvastatin sodium er oral tablet extended release 24 hour</i>	Generic	MO
<i>fluvastatin sodium oral capsule</i>	Generic	MO
<i>lovastatin oral tablet</i>	Generic	MO
<i>pitavastatin calcium oral tablet</i>	Generic	MO
<i>pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg</i>	Generic	MO; QL (1.5 EA per 1 day)
<i>pravastatin sodium oral tablet 80 mg</i>	Generic	MO; QL (1 EA per 1 day)
<i>rosuvastatin calcium oral tablet</i>	Generic	MO
<i>simvastatin oral tablet</i>	Generic	MO; QL (1.5 EA per 1 day)
Dyslipidemics, Other		
<i>cholestyramine light oral packet</i>	Generic	MO
<i>cholestyramine light oral powder</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>cholestyramine oral packet</i>	Generic	MO
<i>cholestyramine oral powder</i>	Generic	MO
<i>colesevelam hcl oral packet</i>	Generic	MO
<i>colesevelam hcl oral tablet</i>	Generic	MO
<i>colestipol hcl oral packet</i>	Generic	MO
<i>colestipol hcl oral tablet</i>	Generic	MO
<i>ezetimibe oral tablet</i>	Generic	MO
<i>ezetimibe-simvastatin oral tablet</i>	Generic	MO
<i>icosapent ethyl oral capsule</i>	Generic	MO
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG	Brand	PA; MO; NEDS
<i>niacin (antihyperlipidemic) oral tablet</i>	Generic	
<i>niacin er (antihyperlipidemic) oral tablet extended release</i>	Generic	MO
NIACOR ORAL TABLET	Brand	
<i>omega-3-acid ethyl esters oral capsule</i>	Generic	MO
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO
<i>prevalite oral packet</i>	Generic	MO
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	Brand	PA; MO
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO
Vasodilators, Direct-Acting Arterial		
<i>hydralazine hcl oral tablet</i>	Generic	MO
<i>minoxidil oral tablet</i>	Generic	MO
Vasodilators, Direct-Acting Arterial/Venous		
<i>isosorbide dinitrate oral tablet</i>	Generic	MO
<i>isosorbide mononitrate er oral tablet extended release 24 hour</i>	Generic	MO
<i>isosorbide mononitrate oral tablet</i>	Generic	MO
NITRO-BID TRANSDERMAL OINTMENT	Brand	MO
<i>nitroglycerin rectal ointment</i>	Generic	
<i>nitroglycerin sublingual tablet sublingual</i>	Generic	MO
<i>nitroglycerin transdermal patch 24 hour</i>	Generic	MO
<i>nitroglycerin translingual solution</i>	Generic	MO

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

Drug	Status	Requirements/Limits
RECTIV RECTAL OINTMENT	Brand	
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
amphetamine-dextroamphetamine oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg	Generic	MO; QL (30 EA per 30 days)
amphetamine-dextroamphetamine oral capsule extended release 24 hour 20 mg, 25 mg, 30 mg	Generic	MO; QL (60 EA per 30 days)
amphetamine-dextroamphetamine oral tablet	Generic	MO; QL (60 EA per 30 days)
dextroamphetamine sulfate oral capsule extended release 24 hour	Generic	MO; QL (120 EA per 30 days)
dextroamphetamine sulfate oral solution	Generic	MO; QL (1800 ML per 30 days)
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	Generic	MO; QL (180 EA per 30 days)
dextroamphetamine sulfate oral tablet 15 mg, 20 mg	Generic	MO; QL (90 EA per 30 days)
dextroamphetamine sulfate oral tablet 30 mg	Generic	MO; QL (60 EA per 30 days)
Attention Deficit Hyperactivity Disorder Agents, Non-Amphetamines		
atomoxetine hcl oral capsule	Generic	MO
dexmethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 5 mg	Generic	MO; QL (60 EA per 30 days)
dexmethylphenidate hcl er oral capsule extended release 24 hour 25 mg, 30 mg, 35 mg, 40 mg	Generic	MO; QL (30 EA per 30 days)
dexmethylphenidate hcl oral tablet	Generic	MO; QL (60 EA per 30 days)
guanfacine hcl er oral tablet extended release 24 hour	Generic	MO
methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg, 40 mg	Generic	MO; QL (60 EA per 30 days)
methylphenidate hcl er (cd) oral capsule extended release 50 mg, 60 mg	Generic	MO; QL (30 EA per 30 days)
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg	Generic	MO; QL (60 EA per 30 days)
methylphenidate hcl er (la) oral capsule extended release 24 hour 40 mg, 60 mg	Generic	MO; QL (30 EA per 30 days)
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg, 72 mg	Generic	MO; QL (30 EA per 30 days)
methylphenidate hcl er (osm) oral tablet extended release 36 mg	Generic	MO; QL (60 EA per 30 days)
methylphenidate hcl er oral tablet extended release	Generic	MO; QL (90 EA per 30 days)

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

Drug	Status	Requirements/Limits
<i>methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 54 mg</i>	Generic	MO; QL (30 EA per 30 days)
<i>methylphenidate hcl er oral tablet extended release 24 hour 36 mg</i>	Generic	MO; QL (60 EA per 30 days)
<i>methylphenidate hcl oral solution</i>	Generic	MO
<i>methylphenidate hcl oral tablet</i>	Generic	MO; QL (90 EA per 30 days)
<i>methylphenidate hcl oral tablet chewable 10 mg</i>	Generic	MO; QL (180 EA per 30 days)
<i>methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg</i>	Generic	MO; QL (90 EA per 30 days)
Central Nervous System, Other		
AUSTEDO ORAL TABLET	Brand	PA; MO; NEDS
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	PA; NEDS
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK	Brand	PA; NEDS
EVRYSDI ORAL SOLUTION RECONSTITUTED	Brand	PA; MO; NEDS
EXSERVAN ORAL FILM	Brand	MO; QL (2 EA per 1 day); NEDS
FIRDAPSE ORAL TABLET	Brand	PA; NEDS
HETLIOZ LQ ORAL SUSPENSION	Brand	PA; MO; NEDS
INGREZZA ORAL CAPSULE	Brand	PA; MO; NEDS
INGREZZA ORAL CAPSULE THERAPY PACK	Brand	PA; NEDS
NUEDEXTA ORAL CAPSULE	Brand	PA; MO; NEDS
RELYVRIO ORAL PACKET	Brand	PA; QL (60 EA per 30 days); NEDS
<i>riluzole oral tablet</i>	Generic	MO; QL (2 EA per 1 day)
SKYCLARYS ORAL CAPSULE	Brand	PA; QL (90 EA per 30 days); NEDS
<i>tasimelteon oral capsule</i>	Generic	PA; MO; NEDS
TEGLUTIK ORAL SUSPENSION	Brand	MO; QL (20 ML per 1 day); NEDS
<i>tetrabenazine oral tablet</i>	Generic	PA; MO
Fibromyalgia Agents		
<i>pregabalin oral capsule</i>	Generic	MO
<i>pregabalin oral solution</i>	Generic	MO
SAVELLA ORAL TABLET	Brand	MO; QL (60 EA per 30 days)
SAVELLA TITRATION PACK ORAL	Brand	

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

Drug	Status	Requirements/Limits
Multiple Sclerosis Agents		
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	Brand	MO; NEDS
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	Brand	MO; NEDS
BETASERON SUBCUTANEOUS KIT	Brand	MO; NEDS
<i>dalfampridine er oral tablet extended release 12 hour</i>	Generic	PA; MO
<i>dimethyl fumarate oral capsule delayed release</i>	Generic	PA; MO
<i>dimethyl fumarate starter pack oral capsule delayed release therapy pack</i>	Generic	PA; NEDS
<i>fingolimod hcl oral capsule</i>	Generic	PA; NEDS
<i>glatiramer acetate subcutaneous solution prefilled syringe</i>	Generic	MO; NEDS
<i>glatopa subcutaneous solution prefilled syringe 20 mg/ml</i>	Generic	MO; NEDS
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	Generic	MO; NEDS
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (1.6 ML per 30 days); NEDS
<i>teriflunomide oral tablet</i>	Generic	PA
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	Brand	PA; QL (14 EA per 365 days); NEDS
ZEPOSIA ORAL CAPSULE	Brand	PA; MO; QL (30 EA per 30 days); NEDS
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG & 0.92MG	Brand	PA; QL (74 EA per 365 days); NEDS
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG 0.92MG(21)	Brand	PA; QL (56 EA per 365 days); NEDS
Dental And Oral Agents		
Dental And Oral Agents		
<i>cevimeline hcl oral capsule</i>	Generic	MO
<i>chlorhexidine gluconate mouth/throat solution</i>	Generic	
<i>kourzeq mouth/throat paste</i>	Generic	
PERIOGARD MOUTH/THROAT SOLUTION	Generic	
<i>pilocarpine hcl oral tablet</i>	Generic	MO
<i>triamcinolone acetonide mouth/throat paste</i>	Generic	

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

Drug	Status	Requirements/Limits
Dermatological Agents		
Dermatological Agents		
<i>acitretin oral capsule</i>	Generic	
<i>acyclovir external ointment</i>	Generic	QL (15 GM per 14 days)
<i>adapalene external gel 0.1 %</i>	Generic	
<i>adapalene external solution</i>	Generic	NEDS
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; QL (4 ML per 28 days); NEDS
<i>ammonium lactate external cream</i>	Generic	
<i>ammonium lactate external lotion</i>	Generic	
<i>azelaic acid external gel</i>	Generic	
<i>calcipotriene external cream</i>	Generic	QL (120 GM per 30 days)
<i>calcipotriene external ointment</i>	Generic	QL (120 GM per 30 days)
<i>calcipotriene external solution</i>	Generic	QL (120 ML per 30 days)
CLARAVIS ORAL CAPSULE 10 MG, 20 MG, 40 MG	Generic	
<i>clobetasol prop emollient base external cream</i>	Generic	QL (60 GM per 30 days)
<i>clobetasol propionate e external cream</i>	Generic	QL (60 GM per 30 days)
<i>clobetasol propionate emulsion external foam</i>	Generic	
<i>clobetasol propionate external cream</i>	Generic	QL (60 GM per 30 days)
<i>clobetasol propionate external foam</i>	Generic	
<i>clobetasol propionate external gel</i>	Generic	QL (60 GM per 30 days)
<i>clobetasol propionate external lotion</i>	Generic	
<i>clobetasol propionate external ointment</i>	Generic	QL (60 GM per 30 days)
<i>clobetasol propionate external shampoo</i>	Generic	
<i>clobetasol propionate external solution</i>	Generic	QL (59 ML per 30 days)
<i>clocortolone pivalate external cream</i>	Generic	
CLODAN EXTERNAL SHAMPOO	Generic	
<i>clotrimazole-betamethasone external cream</i>	Generic	
<i>clotrimazole-betamethasone external lotion</i>	Generic	
<i>diclofenac sodium external gel 1 %</i>	Generic	QL (960 GM per 30 days)
<i>diclofenac sodium external gel 3 %</i>	Generic	QL (200 GM per 30 days)
<i>doxepin hcl external cream</i>	Generic	QL (90 GM per 30 days)
<i>doxycycline oral capsule delayed release</i>	Generic	
DUOBRII EXTERNAL LOTION	Brand	PA; NEDS
<i>erythromycin external gel</i>	Generic	
<i>erythromycin external solution</i>	Generic	
<i>fluorouracil external cream 0.5 %</i>	Generic	NEDS

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

Drug	Status	Requirements/Limits
<i>fluorouracil external cream 5 %</i>	Generic	
<i>fluorouracil external solution</i>	Generic	
<i>hydrocortisone (perianal) external cream</i>	Generic	
<i>imiquimod external cream 5 %</i>	Generic	
LITFULO ORAL CAPSULE	Brand	PA; QL (30 EA per 30 days); NEDS
<i>methoxsalen rapid oral capsule</i>	Generic	NEDS
<i>mupirocin calcium external cream</i>	Generic	
OPZELURA EXTERNAL CREAM	Brand	PA; QL (240 GM per 30 days); NEDS
<i>pimecrolimus external cream</i>	Generic	
<i>podofilox external gel</i>	Generic	
<i>podofilox external solution</i>	Generic	
PROCTO-MED HC EXTERNAL CREAM	Generic	
PROCTO-PAK EXTERNAL CREAM	Generic	
PROCTOSOL HC EXTERNAL CREAM	Generic	
PROCTOZONE-HC EXTERNAL CREAM	Generic	
REGRANEX EXTERNAL GEL	Brand	NEDS
SANTYL EXTERNAL OINTMENT	Brand	QL (100 GM per 30 days)
<i>selenium sulfide external lotion</i>	Generic	
<i>sulfacetamide sodium (acne) external lotion</i>	Generic	
<i>tacrolimus external ointment</i>	Generic	
<i>tazarotene external cream</i>	Generic	
<i>tazarotene external gel</i>	Generic	
TAZORAC EXTERNAL CREAM 0.05 %	Brand	
TOVET EXTERNAL FOAM	Generic	
<i>tretinoin external cream</i>	Generic	
<i>tretinoin external gel</i>	Generic	
VTAMA EXTERNAL CREAM	Brand	PA; QL (60 GM per 30 days); NEDS

Electrolytes/Minerals/Metals/Vitamins

Electrolyte/Mineral Replacement

AMINOSYN II INTRAVENOUS SOLUTION 15 %	Brand	B/D
<i>carglumic acid oral tablet soluble</i>	Generic	PA; NEDS
CLINISOL SF INTRAVENOUS SOLUTION	Generic	B/D; HI
ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION	Brand	HI

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

Drug	Status	Requirements/Limits
<i>kcl in dextrose-nacl intravenous solution 10-5-0.45 meq/l-%-%, 20-5-0.2 meq/l-%-%, 20-5-0.45 meq/l-%-%, 20-5-0.9 meq/l-%-%, 30-5-0.45 meq/l-%-%, 40-5-0.45 meq/l-%-%, 40-5-0.9 meq/l-%-%</i>	Generic	HI
<i>kcl-lactated ringers-d5w intravenous solution</i>	Generic	HI
<i>klor-con 10 oral tablet extended release</i>	Generic	MO
<i>klor-con m10 oral tablet extended release</i>	Generic	MO
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	Generic	MO
<i>klor-con m20 oral tablet extended release</i>	Generic	MO
<i>klor-con oral packet 20 meq</i>	Generic	MO
<i>klor-con oral tablet extended release</i>	Generic	MO
K-PHOS NO 2 ORAL TABLET	Brand	
<i>magnesium sulfate injection solution 50 %, 50 % (10ml syringe)</i>	Generic	HI
<i>multiple electro type 1 ph 5.5 intravenous solution</i>	Generic	HI
<i>na sulfate-k sulfate-mg sulf oral solution</i>	Generic	
ORACIT ORAL SOLUTION	Brand	
PLASMA-LYTE A INTRAVENOUS SOLUTION	Brand	HI
PLENAMINE INTRAVENOUS SOLUTION	Generic	B/D; HI
<i>potassium chloride crys er oral tablet extended release</i>	Generic	MO
<i>potassium chloride er oral capsule extended release</i>	Generic	MO
<i>potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq</i>	Generic	MO
<i>potassium chloride intravenous solution 2 meq/ml, 2 meq/ml (20 ml)</i>	Generic	HI
<i>potassium chloride oral packet</i>	Generic	MO
<i>potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)</i>	Generic	MO
<i>potassium citrate er oral tablet extended release</i>	Generic	
<i>potassium cl in dextrose 5% intravenous solution 20 meq/l</i>	Generic	HI
PREMASOL INTRAVENOUS SOLUTION 10 %	Brand	B/D; HI
PROSOL INTRAVENOUS SOLUTION	Brand	B/D; HI
<i>sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %</i>	Generic	HI

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

Drug	Status	Requirements/Limits
sodium chloride irrigation solution 0.9 %	Generic	
sodium fluoride oral tablet 2.2 (1 f) mg	Generic	MO
TRAVASOL INTRAVENOUS SOLUTION	Brand	B/D; HI
TROPHAMINE INTRAVENOUS SOLUTION 10 %	Brand	B/D; HI
Electrolyte/Mineral/Metal Modifiers		
deferasirox oral tablet soluble 125 mg	Generic	MO
deferasirox oral tablet soluble 250 mg, 500 mg	Generic	MO; NEDS
deferiprone oral tablet	Generic	PA; MO; NEDS
DOJOLVI ORAL LIQUID	Brand	PA; MO; NEDS
JYNARQUE ORAL TABLET	Brand	PA; NEDS
JYNARQUE ORAL TABLET THERAPY PACK	Brand	PA; NEDS
penicillamine oral tablet	Generic	NEDS
sodium polystyrene sulfonate oral powder	Generic	
sps oral suspension	Generic	
tolvaptan oral tablet	Generic	PA; NEDS
trientine hcl oral capsule 250 mg	Generic	NEDS
VELTASSA ORAL PACKET	Brand	MO
Electrolytes/Minerals/Metals/Vitamins		
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	Brand	B/D; HI
dextrose intravenous solution 10 %, 5 %	Generic	HI

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

Drug	Status	Requirements/Limits
<i>dextrose-nacl intravenous solution 10-0.2 %, 10-0.45 %, 5-0.2 %, 5-0.45 %, 5-0.9 %</i>	Generic	HI
INTRALIPID INTRAVENOUS EMULSION	Brand	B/D; HI
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	Brand	HI
NUTRILIPID INTRAVENOUS EMULSION	Brand	B/D; HI
PROCALAMINE INTRAVENOUS SOLUTION	Brand	B/D
TPN ELECTROLYTES INTRAVENOUS CONCENTRATE	Brand	HI
Vitamins		
<i>doxercalciferol oral capsule</i>	Generic	MO
<i>pnv-dha oral capsule</i>	Generic	
<i>prenatal oral tablet 27-1 mg</i>	Generic	
VP-PNV-DHA ORAL CAPSULE	Brand	
Gastrointestinal Agents		
Antispasmodics, Gastrointestinal		
<i>dicyclomine hcl oral capsule</i>	Generic	
<i>dicyclomine hcl oral solution</i>	Generic	
<i>dicyclomine hcl oral tablet</i>	Generic	
<i>glycopyrrolate oral solution</i>	Generic	MO
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	Generic	
<i>methscopolamine bromide oral tablet</i>	Generic	
Gastrointestinal Agents, Other		
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	Brand	PA NS; MO; NEDS
BYLVAY ORAL CAPSULE	Brand	PA NS; MO; NEDS
CLENPIQ ORAL SOLUTION	Brand	
<i>diphenoxylate-atropine oral liquid</i>	Generic	
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	Generic	
GATTEX SUBCUTANEOUS KIT	Brand	PA; MO; NEDS
LIVMARLI ORAL SOLUTION	Brand	PA; QL (90 ML per 30 days); NEDS
<i>loperamide hcl oral capsule</i>	Generic	
<i>metoclopramide hcl injection solution</i>	Generic	
<i>metoclopramide hcl oral solution 5 mg/5ml</i>	Generic	
<i>metoclopramide hcl oral tablet</i>	Generic	
MOTOFEN ORAL TABLET	Brand	

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

Drug	Status	Requirements/Limits
MOVANTIK ORAL TABLET	Brand	
OCALIVA ORAL TABLET	Brand	PA; MO; QL (30 EA per 30 days); NEDS
OSMOPREP ORAL TABLET	Brand	
RELISTOR ORAL TABLET	Brand	NEDS
RELISTOR SUBCUTANEOUS SOLUTION	Brand	NEDS
<i>ursodiol oral capsule 300 mg</i>	Generic	MO
<i>ursodiol oral tablet</i>	Generic	MO
VOWST ORAL CAPSULE	Brand	PA; NEDS
XERMELO ORAL TABLET	Brand	PA; MO; QL (90 EA per 30 days); NEDS
Histamine2 (H2) Receptor Antagonists		
<i>cimetidine hcl oral solution 300 mg/5ml</i>	Generic	MO
<i>cimetidine oral tablet 200 mg</i>	Generic	
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>	Generic	MO
<i>famotidine oral suspension reconstituted</i>	Generic	MO
<i>famotidine oral tablet 20 mg, 40 mg</i>	Generic	MO
Irritable Bowel Syndrome Agents		
<i>alosetron hcl oral tablet 0.5 mg</i>	Generic	PA; MO; QL (2 EA per 1 day)
<i>alosetron hcl oral tablet 1 mg</i>	Generic	PA; MO; QL (2 EA per 1 day); NEDS
LINZESS ORAL CAPSULE	Brand	MO
<i>lubiprostone oral capsule</i>	Generic	MO
Laxatives		
<i>constulose oral solution</i>	Generic	MO
<i>enulose oral solution</i>	Generic	MO
GAVILYTE-C ORAL SOLUTION RECONSTITUTED	Brand	
<i>gavilyte-g oral solution reconstituted</i>	Generic	
<i>gavilyte-n with flavor pack oral solution reconstituted</i>	Generic	
<i>generlac oral solution</i>	Generic	MO
<i>lactulose oral solution 10 gm/15ml</i>	Generic	MO
<i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted</i>	Generic	
<i>peg-3350/electrolytes oral solution reconstituted</i>	Generic	
<i>peg-3350/electrolytes/ascorbat oral solution reconstituted</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted</i>	Generic	
Protectants		
<i>misoprostol oral tablet</i>	Generic	MO
<i>sucralfate oral suspension</i>	Generic	MO
<i>sucralfate oral tablet</i>	Generic	MO
Proton Pump Inhibitors		
<i>dexlansoprazole oral capsule delayed release</i>	Generic	MO
<i>esomeprazole magnesium oral capsule delayed release</i>	Generic	MO
<i>lansoprazole oral capsule delayed release</i>	Generic	MO
<i>omeprazole magnesium oral capsule delayed release</i>	Generic	MO; QL (2 EA per 1 day)
<i>omeprazole oral capsule delayed release 10 mg</i>	Generic	MO; QL (1 EA per 1 day)
<i>omeprazole oral capsule delayed release 20 mg, 40 mg</i>	Generic	MO; QL (2 EA per 1 day)
<i>pantoprazole sodium oral tablet delayed release</i>	Generic	MO; QL (2 EA per 1 day)
Genetic Or Enzyme Disorder: Replacement, Modifiers, Treatment		
Genetic Or Enzyme Disorder: Replacement, Modifiers, Treatment		
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	Brand	PA; HI; LA
<i>betaine oral powder</i>	Generic	MO; NEDS
CERDELGA ORAL CAPSULE	Brand	PA; MO; NEDS
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	Brand	MO
CYSTAGON ORAL CAPSULE	Brand	MO
DAYBUE ORAL SOLUTION	Brand	PA; QL (3600 ML per 30 days); NEDS
ENDARI ORAL PACKET	Brand	PA; NEDS
GALAFOLD ORAL CAPSULE	Brand	PA; MO; NEDS
GLASSIA INTRAVENOUS SOLUTION	Brand	PA; HI
<i> miglustat oral capsule</i>	Generic	PA; MO; NEDS
<i> nitisinone oral capsule 10 mg, 2 mg, 5 mg</i>	Generic	PA; MO; NEDS
<i> nitisinone oral capsule 20 mg</i>	Generic	PA; NEDS
OLPRUVA (2 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS

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

Drug	Status	Requirements/Limits
OLPRUVA (3 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS
OLPRUVA (4 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS
OLPRUVA (5 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS
OLPRUVA (6 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS
OLPRUVA (6.67 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS
ORFADIN ORAL SUSPENSION	Brand	PA; MO; NEDS
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED	Brand	PA; HI
RAVICTI ORAL LIQUID	Brand	MO; NEDS
RUZURGI ORAL TABLET	Brand	PA; MO; NEDS
<i>sapropterin dihydrochloride oral packet</i>	Generic	PA; MO; NEDS
<i>sodium phenylbutyrate oral tablet</i>	Generic	MO; NEDS
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
VIJOICE ORAL TABLET THERAPY PACK 125 MG, 50 MG	Brand	PA; QL (28 EA per 28 days); NEDS
VIJOICE ORAL TABLET THERAPY PACK 200 & 50 MG	Brand	PA; QL (56 EA per 28 days); NEDS
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	Brand	PA; HI
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT, 60000-189600 UNIT	Brand	MO
ZOKINVY ORAL CAPSULE	Brand	PA; QL (120 EA per 30 days); NEDS
Genitourinary Agents		
Antispasmodics, Urinary		
<i>darifenacin hydrobromide er oral tablet extended release 24 hour</i>	Generic	MO
<i>flavoxate hcl oral tablet</i>	Generic	MO
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	Brand	MO
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO

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

Drug	Status	Requirements/Limits
<i>oxybutynin chloride er oral tablet extended release 24 hour</i>	Generic	MO
<i>oxybutynin chloride oral solution</i>	Generic	MO
<i>oxybutynin chloride oral tablet 5 mg</i>	Generic	MO
<i>solifenacin succinate oral tablet</i>	Generic	MO
<i>tolterodine tartrate er oral capsule extended release 24 hour</i>	Generic	MO
<i>tolterodine tartrate oral tablet</i>	Generic	MO
<i>trospium chloride er oral capsule extended release 24 hour</i>	Generic	MO
<i>trospium chloride oral tablet</i>	Generic	MO
Benign Prostatic Hypertrophy Agents		
<i>alfuzosin hcl er oral tablet extended release 24 hour</i>	Generic	MO; QL (1 EA per 1 day)
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO
<i>doxazosin mesylate oral tablet</i>	Generic	MO
<i>dutasteride oral capsule</i>	Generic	MO
<i>dutasteride-tamsulosin hcl oral capsule</i>	Generic	MO
<i>finasteride oral tablet 5 mg</i>	Generic	MO; QL (1 EA per 1 day)
<i>silodosin oral capsule</i>	Generic	MO
<i>tadalafil oral tablet 2.5 mg, 5 mg</i>	Generic	PA; MO; QL (30 EA per 30 days)
<i>tamsulosin hcl oral capsule</i>	Generic	MO
<i>terazosin hcl oral capsule</i>	Generic	MO
Genitourinary Agents, Other		
<i>bethanechol chloride oral tablet</i>	Generic	
CUVRIOR ORAL TABLET	Brand	PA; NEDS
ELMIRON ORAL CAPSULE	Brand	NEDS
Phosphate Binders		
AURYXIA ORAL TABLET	Brand	PA; MO; NEDS
<i>calcium acetate (phos binder) oral capsule</i>	Generic	MO
<i>calcium acetate oral tablet 667 mg</i>	Generic	MO
<i>sevelamer carbonate oral packet</i>	Generic	MO
<i>sevelamer carbonate oral tablet</i>	Generic	MO
<i>sevelamer hcl oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
ACTHAR INJECTION GEL	Brand	PA; NEDS
<i>ala-cort external cream</i>	Generic	QL (240 GM per 30 days)
<i>alclometasone dipropionate external cream</i>	Generic	QL (240 GM per 30 days)
<i>alclometasone dipropionate external ointment</i>	Generic	QL (240 GM per 30 days)
<i>amcinonide external cream</i>	Generic	
<i>amcinonide external lotion</i>	Generic	
<i>amcinonide external ointment</i>	Generic	
<i>betamethasone dipropionate aug external cream</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone dipropionate aug external gel</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone dipropionate aug external lotion</i>	Generic	QL (180 ML per 30 days)
<i>betamethasone dipropionate aug external ointment</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone dipropionate external cream</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone dipropionate external lotion</i>	Generic	QL (150 ML per 30 days)
<i>betamethasone dipropionate external ointment</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone valerate external cream</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone valerate external lotion</i>	Generic	QL (180 ML per 30 days)
<i>betamethasone valerate external ointment</i>	Generic	QL (150 GM per 30 days)
CAPEX EXTERNAL SHAMPOO	Brand	
CORTROPHIN INJECTION GEL	Brand	PA; NEDS
<i>deflazacort oral tablet</i>	Generic	PA; NEDS
<i>desonide external cream</i>	Generic	QL (240 GM per 30 days)
<i>desonide external lotion</i>	Generic	QL (240 ML per 30 days)
<i>desonide external ointment</i>	Generic	QL (240 GM per 30 days)
<i>desoximetasone external cream</i>	Generic	QL (180 GM per 30 days)
<i>desoximetasone external gel</i>	Generic	QL (180 GM per 30 days)
<i>desoximetasone external ointment</i>	Generic	QL (180 GM per 30 days)
DEXAMETHASONE INTENSOL ORAL CONCENTRATE	Brand	
<i>dexamethasone oral elixir</i>	Generic	
<i>dexamethasone oral solution</i>	Generic	
<i>dexamethasone oral tablet</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>dexamethasone oral tablet therapy pack</i>	Generic	
<i>dexamethasone sodium phosphate injection solution 120 mg/30ml</i>	Generic	
<i>diflorasone diacetate external cream</i>	Generic	QL (180 GM per 30 days)
<i>diflorasone diacetate external ointment</i>	Generic	QL (180 GM per 30 days); NEDS
EMFLAZA ORAL SUSPENSION	Brand	PA; NEDS
<i>fludrocortisone acetate oral tablet</i>	Generic	MO
<i>fluocinolone acetonide body external oil</i>	Generic	
<i>fluocinolone acetonide external cream</i>	Generic	QL (240 GM per 30 days)
<i>fluocinolone acetonide external ointment</i>	Generic	QL (240 GM per 30 days)
<i>fluocinolone acetonide external solution</i>	Generic	QL (90 ML per 30 days)
<i>fluocinolone acetonide scalp external oil</i>	Generic	
<i>fluocinonide emulsified base external cream</i>	Generic	QL (120 GM per 30 days)
<i>fluocinonide external cream</i>	Generic	QL (60 GM per 30 days)
<i>fluocinonide external gel</i>	Generic	QL (60 GM per 30 days)
<i>fluocinonide external ointment</i>	Generic	QL (60 GM per 30 days)
<i>fluocinonide external solution</i>	Generic	QL (60 ML per 30 days)
<i>fluticasone propionate external cream</i>	Generic	QL (150 GM per 30 days)
<i>fluticasone propionate external lotion</i>	Generic	QL (240 ML per 30 days)
<i>fluticasone propionate external ointment</i>	Generic	QL (150 GM per 30 days)
<i>halcinonide external cream</i>	Generic	
<i>halobetasol propionate external cream</i>	Generic	QL (150 GM per 30 days)
<i>halobetasol propionate external ointment</i>	Generic	QL (150 GM per 30 days)
HALOG EXTERNAL OINTMENT	Brand	
<i>hydrocortisone butyrate external cream</i>	Generic	QL (180 GM per 30 days)
<i>hydrocortisone butyrate external ointment</i>	Generic	QL (180 GM per 30 days)
<i>hydrocortisone external cream 1 %, 2.5 %</i>	Generic	QL (240 GM per 30 days)
<i>hydrocortisone external lotion 2.5 %</i>	Generic	QL (240 ML per 30 days)
<i>hydrocortisone external ointment 1 %, 2.5 %</i>	Generic	QL (240 GM per 30 days)
<i>hydrocortisone max st external cream</i>	Generic	QL (240 GM per 30 days)
<i>hydrocortisone valerate external cream</i>	Generic	QL (180 GM per 30 days)
<i>hydrocortisone valerate external ointment</i>	Generic	QL (180 GM per 30 days)
MEDROL ORAL TABLET 2 MG	Brand	
<i>methylprednisolone oral tablet</i>	Generic	
<i>methylprednisolone oral tablet therapy pack</i>	Generic	
<i>methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mg, 40 mg, 500 mg</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>mometasone furoate external cream</i>	Generic	QL (150 GM per 30 days)
<i>mometasone furoate external ointment</i>	Generic	QL (150 GM per 30 days)
<i>mometasone furoate external solution</i>	Generic	
<i>prednicarbate external ointment</i>	Generic	QL (180 GM per 30 days)
<i>prednisolone oral solution</i>	Generic	
<i>prednisolone sodium phosphate oral solution 25 mg/5ml, 6.7 (5 base) mg/5ml</i>	Generic	
<i>prednisolone sodium phosphate oral tablet dispersible</i>	Generic	
PREDNISONE INTENSOL ORAL CONCENTRATE	Brand	
<i>prednisone oral solution</i>	Generic	
<i>prednisone oral tablet</i>	Generic	
<i>prednisone oral tablet therapy pack</i>	Generic	
RECORLEV ORAL TABLET	Brand	PA; QL (240 EA per 30 days); NEDS
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK 1.5 MG (27)	Brand	
TARPEYO ORAL CAPSULE DELAYED RELEASE	Brand	PA; QL (120 EA per 30 days); NEDS
TEXACORT EXTERNAL SOLUTION	Brand	QL (240 ML per 30 days)
<i>triamcinolone acetonide external aerosol solution</i>	Generic	
<i>triamcinolone acetonide external cream 0.025 %, 0.1 %</i>	Generic	QL (160 GM per 30 days)
<i>triamcinolone acetonide external cream 0.5 %</i>	Generic	QL (150 GM per 30 days)
<i>triamcinolone acetonide external lotion</i>	Generic	QL (180 ML per 30 days)
<i>triamcinolone acetonide external ointment 0.025 %, 0.1 %</i>	Generic	QL (160 GM per 30 days)
<i>triamcinolone acetonide external ointment 0.5 %</i>	Generic	QL (150 GM per 30 days)
TRIDERM EXTERNAL CREAM 0.1 %	Generic	QL (160 GM per 30 days)
TRIDERM EXTERNAL CREAM 0.5 %	Generic	QL (150 GM per 30 days)
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
<i>desmopressin ace spray refrig nasal solution</i>	Generic	MO
<i>desmopressin acetate injection solution</i>	Generic	NEDS
<i>desmopressin acetate oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	Brand	PA; NEDS
GENOTROPIN SUBCUTANEOUS CARTRIDGE	Brand	PA; NEDS
INCRELEX SUBCUTANEOUS SOLUTION	Brand	PA; LA; MO; NEDS
<i>octreotide acetate subcutaneous solution prefilled syringe 100 mcg/ml, 50 mcg/ml</i>	Generic	
<i>octreotide acetate subcutaneous solution prefilled syringe 500 mcg/ml</i>	Generic	NEDS
STIMATE NASAL SOLUTION	Brand	MO; NEDS
VYNDAMAX ORAL CAPSULE	Brand	PA; MO; QL (1 EA per 1 day); NEDS
VYNDAQEL ORAL CAPSULE	Brand	PA; MO; QL (4 EA per 1 day); NEDS
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; MO; NEDS
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
<i>mifepristone oral tablet 300 mg</i>	Generic	PA; NEDS
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Anabolic Steroids		
<i>oxandrolone oral tablet</i>	Generic	PA
Androgens		
ANDRODERM TRANSDERMAL PATCH 24 HOUR	Brand	PA; MO
<i>danazol oral capsule</i>	Generic	
<i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml, 200 mg/ml (1 ml)</i>	Generic	MO
<i>testosterone enanthate intramuscular solution</i>	Generic	MO
<i>testosterone transdermal gel 1.62 %, 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)</i>	Generic	PA; MO

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

Drug	Status	Requirements/Limits
Estrogens		
ALORA TRANSDERMAL PATCH TWICE WEEKLY	Brand	MO; QL (8 EA per 28 days)
<i>altavera oral tablet</i>	Generic	MO
<i>alyacen 1/35 oral tablet</i>	Generic	MO
<i>amabelz oral tablet</i>	Generic	MO
<i>amethia oral tablet</i>	Generic	MO
<i>amethyst oral tablet</i>	Generic	MO
ANGELIQ ORAL TABLET	Brand	MO
<i>apri oral tablet</i>	Generic	MO
<i>aranelle oral tablet</i>	Generic	MO
<i>ashlyna oral tablet</i>	Generic	MO
<i>aubra eq oral tablet</i>	Generic	MO
<i>aviane oral tablet</i>	Generic	MO
<i>balziva oral tablet</i>	Generic	MO
<i>blisovi 24 fe oral tablet</i>	Generic	MO
<i>blisovi fe 1.5/30 oral tablet</i>	Generic	MO
<i>briellyn oral tablet</i>	Generic	MO
<i>caziant oral tablet</i>	Generic	MO
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	Brand	MO
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	Brand	MO
<i>cryselle-28 oral tablet</i>	Generic	MO
<i>cyred eq oral tablet</i>	Generic	MO
<i>desogestrel-ethinyl estradiol oral tablet</i>	Generic	MO
<i>dotti transdermal patch twice weekly</i>	Generic	MO; QL (8 EA per 28 days)
<i>drospirenen-eth estrad-levomefol oral tablet 3-0.02-0.451 mg</i>	Generic	MO
<i>drospirenone-ethinyl estradiol oral tablet</i>	Generic	MO
<i>eluryng vaginal ring</i>	Generic	MO
<i>emoquette oral tablet</i>	Generic	MO
<i>enilloring vaginal ring</i>	Generic	MO
<i>enpresse-28 oral tablet</i>	Generic	MO
<i>enskyce oral tablet 0.15-30 mg-mcg</i>	Generic	MO
<i>estarrylla oral tablet</i>	Generic	MO
<i>estradiol oral tablet</i>	Generic	MO
<i>estradiol transdermal patch twice weekly</i>	Generic	MO; QL (8 EA per 28 days)

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

Drug	Status	Requirements/Limits
<i>estradiol transdermal patch weekly</i>	Generic	MO
<i>estradiol vaginal cream</i>	Generic	MO
<i>estradiol vaginal tablet</i>	Generic	MO
<i>estradiol-norethindrone acet oral tablet</i>	Generic	MO
ESTRING VAGINAL RING 7.5 MCG/24HR	Brand	MO
<i>ethynodiol diac-eth estradiol oral tablet</i>	Generic	MO
<i>etonogestrel-ethinyl estradiol vaginal ring</i>	Generic	MO
<i>falmina oral tablet</i>	Generic	MO
FEMRING VAGINAL RING	Brand	MO
<i>femynor oral tablet</i>	Generic	MO
<i>finzala oral tablet chewable</i>	Generic	MO
FYAVOLV ORAL TABLET	Generic	MO
<i>gemma oral capsule</i>	Generic	MO
<i>hailey 24 fe oral tablet</i>	Generic	MO
<i>haloette vaginal ring</i>	Generic	MO
<i>iclevia oral tablet</i>	Generic	MO
<i>introvale oral tablet</i>	Generic	MO
<i>isibloom oral tablet</i>	Generic	MO
<i>jasmiel oral tablet</i>	Generic	MO
<i>jinteli oral tablet</i>	Generic	MO
<i>juleber oral tablet</i>	Generic	MO
<i>junel 1.5/30 oral tablet</i>	Generic	MO
<i>junel 1/20 oral tablet</i>	Generic	MO
<i>junel fe 1.5/30 oral tablet</i>	Generic	MO
<i>junel fe 1/20 oral tablet</i>	Generic	MO
<i>junel fe 24 oral tablet</i>	Generic	MO
<i>kaitlib fe oral tablet chewable</i>	Generic	MO
<i>kariva oral tablet</i>	Generic	MO
<i>kelnor 1/35 oral tablet</i>	Generic	MO
KELNOR 1/50 ORAL TABLET	Generic	MO
<i>kurvelo oral tablet</i>	Generic	MO
<i>larin 1.5/30 oral tablet</i>	Generic	MO
<i>larin 1/20 oral tablet</i>	Generic	MO
<i>larin fe 1.5/30 oral tablet</i>	Generic	MO
<i>larin fe 1/20 oral tablet</i>	Generic	MO
<i>larissia oral tablet</i>	Generic	MO
<i>leena oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>lessina oral tablet</i>	Generic	MO
<i>levonest oral tablet</i>	Generic	MO
<i>levonorgest-eth est & eth est oral tablet</i>	Generic	MO
<i>levonorgest-eth estrad 91-day oral tablet</i>	Generic	MO
<i>levonorgestrel-ethynodiol dihydrogen oral tablet</i>	Generic	MO
<i>levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg</i>	Generic	MO
<i>levora 0.15/30 (28) oral tablet</i>	Generic	MO
<i>loryna oral tablet</i>	Generic	MO
<i>low-ogestrel oral tablet</i>	Generic	MO
<i>lutera oral tablet</i>	Generic	MO
<i>lyllana transdermal patch twice weekly</i>	Generic	MO; QL (8 EA per 28 days)
<i>marlissa oral tablet</i>	Generic	MO
MENEST ORAL TABLET	Brand	MO
MENOSTAR TRANSDERMAL PATCH WEEKLY	Brand	MO
<i>mibelas 24 fe oral tablet chewable</i>	Generic	MO
<i>microgestin 1.5/30 oral tablet</i>	Generic	MO
<i>microgestin 1/20 oral tablet</i>	Generic	MO
<i>microgestin 24 fe oral tablet</i>	Generic	MO
<i>microgestin fe 1.5/30 oral tablet</i>	Generic	MO
<i>microgestin fe 1/20 oral tablet</i>	Generic	MO
<i>mili oral tablet</i>	Generic	MO
<i>mimvey oral tablet</i>	Generic	MO
<i>necon 0.5/35 (28) oral tablet</i>	Generic	MO
<i>necon 1/35 (28) oral tablet</i>	Generic	MO
<i>nikki oral tablet</i>	Generic	MO
<i>norethin ace-eth estrad-fe oral capsule</i>	Generic	MO
<i>norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg</i>	Generic	MO
<i>norethin ace-eth estrad-fe oral tablet chewable</i>	Generic	MO
<i>norethindrone acet-ethynodiol dihydrogen oral tablet 1-20 mg-mcg</i>	Generic	MO
<i>norethindrone-eth estradiol oral tablet</i>	Generic	MO
<i>norethindron-ethynodiol dihydrogen oral tablet</i>	Generic	MO
<i>norethin-eth estradiol-fe oral tablet chewable</i>	Generic	MO
<i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>	Generic	MO
<i>norgestim-eth estrad triphasic oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>nortrel 0.5/35 (28) oral tablet</i>	Generic	MO
<i>nortrel 1/35 (21) oral tablet</i>	Generic	MO
<i>nortrel 1/35 (28) oral tablet</i>	Generic	MO
<i>nortrel 7/7/7 oral tablet</i>	Generic	MO
<i>nylia 1/35 oral tablet</i>	Generic	MO
<i>nylia 7/7/7 oral tablet</i>	Generic	MO
<i>nymyo oral tablet</i>	Generic	MO
<i>ocella oral tablet</i>	Generic	MO
<i>orsythia oral tablet</i>	Generic	MO
<i>pimtrea oral tablet</i>	Generic	MO
<i>pirmella 1/35 oral tablet</i>	Generic	MO
<i>portia-28 oral tablet</i>	Generic	MO
PREFEST ORAL TABLET	Brand	MO
PREMARIN ORAL TABLET	Brand	MO
PREMARIN VAGINAL CREAM	Brand	MO
PREMPHASE ORAL TABLET	Brand	MO
PREMPRO ORAL TABLET	Brand	MO
<i>previfem oral tablet</i>	Generic	MO
<i>reclipsen oral tablet</i>	Generic	MO
<i>setlakin oral tablet</i>	Generic	MO
<i>sprintec 28 oral tablet</i>	Generic	MO
<i>sronyx oral tablet</i>	Generic	MO
SYEDA ORAL TABLET	Generic	MO
<i>tarina 24 fe oral tablet</i>	Generic	MO
<i>tarina fe 1/20 eq oral tablet</i>	Generic	MO
<i>taysofy oral capsule</i>	Generic	MO
<i>tilia fe oral tablet</i>	Generic	MO
<i>tri-estarrylla oral tablet</i>	Generic	MO
<i>tri-legest fe oral tablet</i>	Generic	MO
<i>tri-lo-estarrylla oral tablet</i>	Generic	MO
<i>tri-lo-sprintec oral tablet</i>	Generic	MO
<i>tri-mili oral tablet</i>	Generic	MO
<i>trinessa (28) oral tablet</i>	Generic	MO
<i>tri-nymyo oral tablet</i>	Generic	MO
<i>tri-sprintec oral tablet</i>	Generic	MO
<i>trivora (28) oral tablet</i>	Generic	MO
<i>tri-vylibra lo oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
TRI-VYLIBRA ORAL TABLET	Generic	MO
<i>turqoz oral tablet</i>	Generic	MO
<i>tyblume oral tablet chewable</i>	Generic	MO
<i>tydemy oral tablet</i>	Generic	MO
<i>velivet oral tablet</i>	Generic	MO
<i>vienva oral tablet</i>	Generic	MO
<i>vyfemla oral tablet</i>	Generic	MO
VYLIBRA ORAL TABLET	Generic	MO
<i>wymzya fe oral tablet chewable</i>	Generic	MO
<i>yuvafem vaginal tablet</i>	Generic	MO
<i>zovia 1/35 (28) oral tablet</i>	Generic	MO

**Hormonal Agents,
Stimulant/Replacement/Modifying (Sex
Hormones/Modifiers)**

VEOZAH ORAL TABLET	Brand	PA; QL (30 EA per 30 days)
Progestins		
<i>camila oral tablet</i>	Generic	MO
CRINONE VAGINAL GEL	Brand	PA
<i>deblitane oral tablet</i>	Generic	MO
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	Brand	QL (0.65 ML per 90 days)
<i>errin oral tablet</i>	Generic	MO
HEATHER ORAL TABLET	Brand	
<i>hydroxyprogesterone caproate intramuscular solution</i>	Generic	NEDS
<i>incassia oral tablet</i>	Generic	MO
<i>lyleq oral tablet</i>	Generic	MO
<i>lyza oral tablet</i>	Generic	MO
<i>medroxyprogesterone acetate intramuscular suspension</i>	Generic	QL (1 ML per 90 days)
<i>medroxyprogesterone acetate oral tablet</i>	Generic	MO
<i>megestrol acetate oral suspension 40 mg/ml</i>	Generic	
<i>megestrol acetate oral suspension 625 mg/5ml</i>	Generic	MO
<i>megestrol acetate oral tablet</i>	Generic	
<i>nora-be oral tablet</i>	Generic	MO
<i>norethindrone acetate oral tablet</i>	Generic	MO
<i>norethindrone oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>sharobel oral tablet</i>	Generic	MO
Selective Estrogen Receptor Modifying Agents		
OSPHENA ORAL TABLET	Brand	PA; MO
<i>raloxifene hcl oral tablet</i>	Generic	MO; QL (1 EA per 1 day)
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
<i>euthyrox oral tablet</i>	Generic	MO
LEVO-T ORAL TABLET 100 MCG, 112 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	Generic	MO
<i>levo-t oral tablet 125 mcg</i>	Generic	MO
<i>levothyroxine sodium oral tablet</i>	Generic	MO
LEVOXYL ORAL TABLET	Generic	MO
<i>liothyronine sodium oral tablet</i>	Generic	MO
SYNTHROID ORAL TABLET	Brand	MO
UNITHROID ORAL TABLET	Generic	MO
Hormonal Agents, Suppressant (Adrenal)		
Hormonal Agents, Suppressant (Adrenal)		
ISTURISA ORAL TABLET	Brand	PA; MO; NEDS
LYSODREN ORAL TABLET	Brand	NEDS
Hormonal Agents, Suppressant (Pituitary)		
Hormonal Agents, Suppressant (Pituitary)		
<i>cabergoline oral tablet</i>	Generic	
ELIGARD SUBCUTANEOUS KIT	Brand	
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA NS; QL (4 EA per 365 days); NEDS
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG	Brand	PA NS; QL (1 EA per 28 days)

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

Drug	Status	Requirements/Limits
<i>lanreotide acetate subcutaneous solution</i>	Generic	PA NS; NEDS
LEUPROLIDE ACETATE (3 MONTH) INTRAMUSCULAR INJECTABLE	Generic	
<i>leuprolide acetate injection kit</i>	Generic	NEDS
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	Brand	NEDS
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	Brand	NEDS
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	Brand	NEDS
<i>octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml</i>	Generic	MO
<i>octreotide acetate injection solution 1000 mcg/ml, 500 mcg/ml</i>	Generic	MO; NEDS
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 20 MG, 40 MG, 60 MG	Brand	MO; NEDS
SIGNIFOR SUBCUTANEOUS SOLUTION	Brand	PA; MO; NEDS
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION	Brand	PA NS; NEDS
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	LA; MO; NEDS
SYNAREL NASAL SOLUTION	Brand	NEDS
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
<i>methimazole oral tablet</i>	Generic	MO
<i>propylthiouracil oral tablet</i>	Generic	MO
Immunological Agents		
Angioedema Agents		
BERINERT INTRAVENOUS KIT	Brand	PA; HI
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	Brand	PA; HI
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; NEDS
<i>icatibant acetate subcutaneous solution prefilled syringe</i>	Generic	PA; NEDS
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
<i>sazazir subcutaneous solution prefilled syringe</i>	Generic	PA; NEDS

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

Drug	Status	Requirements/Limits
TAKHZYRO SUBCUTANEOUS SOLUTION	Brand	PA; MO; QL (4 ML per 28 days); NEDS
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; QL (4 ML per 28 days); NEDS
Antiangiogenic Agents		
EMPAVELI SUBCUTANEOUS SOLUTION	Brand	PA; QL (200 ML per 28 days); NEDS
Immune Suppressants		
<i>azathioprine sodium injection solution reconstituted</i>	Generic	B/D; NEDS
Immunoglobulins		
BIVIGAM INTRAVENOUS SOLUTION 5 GM/50ML	Brand	PA; NEDS
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 5 GM/50ML	Brand	PA; NEDS
GAMMAGARD INJECTION SOLUTION 2.5 GM/25ML	Brand	PA; NEDS
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	Brand	PA; NEDS
GAMMAKED INJECTION SOLUTION 1 GM/10ML	Brand	PA; NEDS
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 5 GM/50ML	Brand	PA; NEDS
GAMUNEX-C INJECTION SOLUTION 1 GM/10ML	Brand	PA; NEDS
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 2 GM/20ML	Brand	PA; NEDS
PANZYGA INTRAVENOUS SOLUTION	Brand	PA; NEDS
PRIVIGEN INTRAVENOUS SOLUTION 20 GM/200ML	Brand	PA; NEDS
Immunological Agents, Other		
ACTIMMUNE SUBCUTANEOUS SOLUTION	Brand	PA NS; LA; MO; NEDS
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; MO; NEDS
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA NS; NEDS
CIBINQO ORAL TABLET	Brand	PA; QL (30 EA per 30 days); NEDS

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

Drug	Status	Requirements/Limits
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (10 ML per 28 days); NEDS
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO- INJECTOR	Brand	PA; MO; QL (10 ML per 28 days); NEDS
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO- INJECTOR	Brand	PA; MO; QL (10 ML per 28 days); NEDS
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (10 ML per 28 days); NEDS
COSENTYX UNOREADY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; QL (10 ML per 28 days); NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML	Brand	PA; MO; QL (4.56 ML per 28 days); NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML	Brand	PA; MO; QL (8 ML per 28 days); NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	Brand	PA; QL (1.34 ML per 28 days); NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	Brand	PA; MO; QL (4.56 ML per 28 days); NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	Brand	PA; MO; QL (8 ML per 28 days); NEDS
LAGEVRIO ORAL CAPSULE	Brand	QL (40 EA per 5 days)
<i>leflunomide oral tablet</i>	Generic	MO
OLUMIANT ORAL TABLET 1 MG, 2 MG	Brand	PA; MO; NEDS
OLUMIANT ORAL TABLET 4 MG	Brand	PA
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (4 ML per 28 days); NEDS
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	Brand	PA; MO; QL (4 ML per 28 days); NEDS
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML	Brand	PA; MO; QL (1.6 ML per 28 days); NEDS
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 87.5 MG/0.7ML	Brand	PA; MO; QL (2.8 ML per 28 days); NEDS
PAXLOVID (150/100) ORAL TABLET THERAPY PACK	Brand	QL (20 EA per 5 days)
PAXLOVID (300/100) ORAL TABLET THERAPY PACK	Brand	QL (30 EA per 5 days)
RIDAURA ORAL CAPSULE	Brand	MO; NEDS
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG	Brand	PA; MO; QL (1 EA per 1 day); NEDS

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

Drug	Status	Requirements/Limits
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 45 MG	Brand	PA; QL (1 EA per 1 day); NEDS
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	Brand	PA; MO; QL (2 EA per 28 days); NEDS
SKYRIZI INTRAVENOUS SOLUTION	Brand	PA; QL (10 ML per 28 days); NEDS
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (1 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML	Brand	PA; QL (1.2 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 360 MG/2.4ML	Brand	PA; QL (2.4 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (1 ML per 28 days); NEDS
SOTYKTU ORAL TABLET	Brand	PA; NEDS
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	Brand	PA; MO; QL (0.5 ML per 28 days); NEDS
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	Brand	PA; MO; QL (0.5 ML per 28 days); NEDS
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	Brand	PA; MO; QL (1 ML per 28 days); NEDS
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (3 ML per 28 days); NEDS
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (3 ML per 28 days); NEDS
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; NEDS
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
XELJANZ ORAL SOLUTION	Brand	PA; MO; QL (300 ML per 30 days); NEDS
XELJANZ ORAL TABLET	Brand	PA; MO; QL (60 EA per 30 days); NEDS
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	PA; MO; QL (30 EA per 30 days); NEDS
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; NEDS
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; NEDS

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

Drug	Status	Requirements/Limits
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; NEDS
Immunomodulators		
ILARIS SUBCUTANEOUS SOLUTION	Brand	PA; QL (2 ML per 28 days); NEDS
SYNAGIS INTRAMUSCULAR SOLUTION	Brand	PA; NEDS
Immunosuppressants		
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; NEDS
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Brand	B/D
<i>azathioprine oral tablet</i>	Generic	B/D; MO
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; NEDS
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
CIMZIA STARTER KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	Brand	PA; NEDS
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	Brand	PA; NEDS
CIMZIA SUBCUTANEOUS PREFILLED SYRINGE KIT	Brand	PA; NEDS
<i>cyclosporine modified oral capsule</i>	Generic	B/D; MO
<i>cyclosporine modified oral solution</i>	Generic	B/D; MO
<i>cyclosporine oral capsule</i>	Generic	B/D; MO
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	Brand	PA; MO; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	Brand	PA; MO; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; MO; QL (8 EA per 28 days); NEDS
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (8 ML per 28 days); NEDS
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (3 ML per 30 days); NEDS
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.75 MG, 1 MG	Brand	B/D

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

Drug	Status	Requirements/Limits
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG	Brand	B/D; NEDS
<i>everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</i>	Generic	B/D; MO; NEDS
<i>gengraf oral capsule 100 mg, 25 mg</i>	Generic	B/D; MO
<i>gengraf oral solution</i>	Generic	B/D; MO
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML	Brand	PA; MO; QL (6 EA per 28 days); NEDS
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML, 80 MG/0.8ML	Brand	PA; MO; QL (2 EA per 28 days); NEDS
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML	Brand	PA; MO; QL (2 EA per 28 days); NEDS
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML	Brand	PA; MO; QL (6 EA per 28 days); NEDS
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	Brand	PA; MO; QL (4 EA per 28 days); NEDS
HUMIRA-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	Brand	PA; MO; QL (6 EA per 28 days); NEDS
HUMIRA-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	Brand	PA; MO; QL (3 EA per 28 days); NEDS
HUMIRA-PED<40KG CROHNS STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT	Brand	PA; MO; QL (2 EA per 28 days); NEDS
HUMIRA-PED>/=40KG CROHNS STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT	Brand	PA; MO; QL (3 EA per 28 days); NEDS
HUMIRA-PED>/=40KG UC STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Brand	PA; MO; QL (4 EA per 28 days); NEDS
HUMIRA-PS/UV/ADOL HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Brand	PA; MO; QL (4 EA per 28 days); NEDS
HUMIRA-PSORIASIS/UVEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Brand	PA; MO; QL (3 EA per 28 days); NEDS
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; NEDS
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS

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

Drug	Status	Requirements/Limits
LUPKYNIS ORAL CAPSULE	Brand	PA; MO; QL (6 EA per 1 day); NEDS
<i>methotrexate oral tablet</i>	Generic	
<i>methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml</i>	Generic	
<i>methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml</i>	Generic	
<i>methotrexate sodium injection solution reconstituted</i>	Generic	
<i>methotrexate sodium oral tablet</i>	Generic	
<i>mycophenolate mofetil oral capsule</i>	Generic	B/D; MO
<i>mycophenolate mofetil oral suspension reconstituted</i>	Generic	B/D; MO; NEDS
<i>mycophenolate mofetil oral tablet</i>	Generic	B/D; MO
<i>mycophenolate sodium oral tablet delayed release</i>	Generic	B/D; MO
OTEZLA ORAL TABLET	Brand	PA; MO; QL (60 EA per 30 days); NEDS
OTEZLA ORAL TABLET THERAPY PACK	Brand	PA; QL (110 EA per 365 days); NEDS
PROGRAF ORAL PACKET	Brand	B/D; MO
REZUROCK ORAL TABLET	Brand	PA; QL (60 EA per 30 days); NEDS
SANDIMMUNE ORAL SOLUTION	Brand	B/D; MO
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; NEDS
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
<i>sirolimus oral solution</i>	Generic	B/D; MO
<i>sirolimus oral tablet</i>	Generic	B/D; MO
<i>tacrolimus oral capsule</i>	Generic	B/D; MO
TAVNEOS ORAL CAPSULE	Brand	PA; QL (180 EA per 30 days); NEDS
TREXALL ORAL TABLET	Brand	
XATMEP ORAL SOLUTION	Brand	
Vaccines		
ABRYSVO INTRAMUSCULAR SOLUTION RECONSTITUTED	Brand	
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	Brand	
ADACEL INTRAMUSCULAR SUSPENSION	Brand	

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

Drug	Status	Requirements/Limits
AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	Brand	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	Brand	
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
DAPTACEL INTRAMUSCULAR SUSPENSION 23-15-5	Brand	
<i>diphtheria-tetanus toxoids dt intramuscular suspension</i>	Generic	
ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	Brand	B/D
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	Brand	B/D
GARDASIL 9 INTRAMUSCULAR SUSPENSION	Brand	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
HAVRIX INTRAMUSCULAR SUSPENSION	Brand	
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	Generic	B/D
HIBERIX INJECTION SOLUTION RECONSTITUTED	Brand	
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	
INFANRIX INTRAMUSCULAR SUSPENSION	Brand	
IPOL INJECTION INJECTABLE	Brand	
IXCHIQ INTRAMUSCULAR SOLUTION RECONSTITUTED	Brand	
IXIARO INTRAMUSCULAR SUSPENSION	Brand	
JYNNEOS SUBCUTANEOUS SUSPENSION	Brand	
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
MENACTRA INTRAMUSCULAR SOLUTION	Brand	
MENQUADFI INTRAMUSCULAR SOLUTION	Brand	

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

Drug	Status	Requirements/Limits
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	Brand	
M-M-R II INJECTION SOLUTION RECONSTITUTED	Brand	
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	Brand	
PENBRAYA INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	
PREHEVBRIOS INTRAMUSCULAR SUSPENSION	Brand	B/D
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	Brand	
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	Brand	
QUADRACEL INTRAMUSCULAR SUSPENSION	Brand	
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	
RECOMBIVAX HB INJECTION SUSPENSION	Brand	B/D
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	Brand	B/D
ROTARIX ORAL SUSPENSION	Brand	
ROTARIX ORAL SUSPENSION RECONSTITUTED	Brand	
ROTAQUE ORAL SOLUTION	Brand	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	Brand	QL (2 EA per 999 days)
STAMARIL INJECTION SUSPENSION RECONSTITUTED	Brand	
TDVAX INTRAMUSCULAR SUSPENSION	Brand	
TENIVAC INTRAMUSCULAR INJECTABLE	Brand	
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	

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

Drug	Status	Requirements/Limits
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
TYPHIM VI INTRAMUSCULAR SOLUTION	Brand	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	Brand	
VAQTA INTRAMUSCULAR SUSPENSION	Brand	
VARIVAX SUBCUTANEOUS INJECTABLE	Brand	
VARIZIG INTRAMUSCULAR SOLUTION	Brand	
YF-VAX SUBCUTANEOUS INJECTABLE	Brand	
Inflammatory Bowel Disease Agents		
Aminosalicylates		
<i>balsalazide disodium oral capsule</i>	Generic	
DIPENTUM ORAL CAPSULE	Brand	MO; NEDS
<i>mesalamine oral tablet delayed release 1.2 gm</i>	Generic	MO
<i>mesalamine oral tablet delayed release 800 mg</i>	Generic	
<i>mesalamine rectal enema</i>	Generic	
<i>mesalamine rectal suppository</i>	Generic	
<i>mesalamine-cleanser rectal kit</i>	Generic	
<i>sulfasalazine oral tablet</i>	Generic	MO
<i>sulfasalazine oral tablet delayed release</i>	Generic	MO
Glucocorticoids		
<i>budesonide er oral tablet extended release 24 hour</i>	Generic	NEDS
<i>budesonide oral capsule delayed release particles</i>	Generic	
<i>hydrocortisone oral tablet</i>	Generic	
<i>hydrocortisone rectal enema</i>	Generic	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
<i>alendronate sodium oral tablet 10 mg, 5 mg</i>	Generic	MO; QL (1 EA per 1 day)
<i>alendronate sodium oral tablet 35 mg, 70 mg</i>	Generic	MO; QL (4 EA per 28 days)
<i>calcitonin (salmon) injection solution</i>	Generic	NEDS
<i>calcitonin (salmon) nasal solution</i>	Generic	MO
<i>calcitriol oral capsule</i>	Generic	MO
<i>calcitriol oral solution</i>	Generic	MO
<i>cinacalcet hcl oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 600 MCG/2.4ML	Brand	PA; NEDS
FOSAMAX PLUS D ORAL TABLET	Brand	MO
<i>ibandronate sodium oral tablet</i>	Generic	MO; QL (1 EA per 28 days)
<i>paricalcitol oral capsule</i>	Generic	PA; MO
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA
<i>risedronate sodium oral tablet 150 mg</i>	Generic	MO; QL (1 EA per 28 days)
<i>risedronate sodium oral tablet 30 mg</i>	Generic	QL (1 EA per 1 day)
<i>risedronate sodium oral tablet 35 mg, 35 mg (12 pack), 35 mg (4 pack)</i>	Generic	MO; QL (4 EA per 28 days)
<i>risedronate sodium oral tablet 5 mg</i>	Generic	MO; QL (1 EA per 1 day)
<i>teriparatide (recombinant) subcutaneous solution pen-injector 600 mcg/2.4ml</i>	Generic	PA; NEDS
<i>teriparatide (recombinant) subcutaneous solution pen-injector 620 mcg/2.48ml</i>	Generic	PA; MO; NEDS
<i>teriparatide subcutaneous solution pen-injector</i>	Generic	PA; NEDS
XGEVA SUBCUTANEOUS SOLUTION	Brand	PA; NEDS

Miscellaneous Therapeutic Agents

Miscellaneous Therapeutic Agents

1ST TIER UNIFINE PENTIPS 31G X 6 MM	Brand	
1ST TIER UNIFINE PENTIPS PLUS 31G X 6 MM	Brand	
ADVOCATE INSULIN PEN NEEDLES 29G X 12.7MM	Brand	
BD DISP NEEDLES 25G X 7/8" , 30G X 1/2"	Brand	
BD PEN	Brand	
BD PEN MINI	Brand	
BD PEN NEEDLE MICRO U/F	Brand	
BD PEN NEEDLE MINI U/F	Brand	
BD PEN NEEDLE NANO 2ND GEN	Brand	
BD PEN NEEDLE NANO U/F	Brand	
BD PEN NEEDLE ORIGINAL U/F	Brand	
BD PEN NEEDLE SHORT U/F	Brand	
BD SYRINGE LUER-LOK 1 ML	Brand	
COMFORT EZ PEN NEEDLES 32G X 8 MM	Brand	
CRYSVITA SUBCUTANEOUS SOLUTION	Brand	PA; MO; NEDS
<i>dichlorphenamide oral tablet</i>	Generic	PA; NEDS
DROPLET PEN NEEDLES 32G X 8 MM	Brand	

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

Drug	Status	Requirements/Limits
EASY TOUCH HYPODERMIC NEEDLE 26G X 3/8" , 26G X 5/8"	Brand	
EXEL COMFORT POINT PEN NEEDLE 29G X 12MM	Brand	
HYPODERMIC NEEDLE 25G X 3/4" , 26G X 3/8" , 26G X 5/8"	Brand	
INSUPEN SENSITIVE 32G X 8 MM	Brand	
<i>levocarnitine oral solution</i>	Generic	MO
<i>levocarnitine oral tablet</i>	Generic	MO
LITETOUCH PEN NEEDLES 29G X 12.7MM	Brand	
<i>methylergonovine maleate oral tablet</i>	Generic	NEDS
MONOJECT HYPODERMIC NEEDLE 18G X 1-1/2" , 20G X 1" , 21G X 1" , 22G X 1" , 23G X 1" , 23G X 3/4" , 25G X 1" , 25G X 1- 1/4" , 25G X 5/8" , 26G X 1/2" , 27G X 1/2" , 30G X 3/4"	Brand	
MONOJECT INSULIN SYRINGE U-100 1 ML	Brand	
NATPARA SUBCUTANEOUS CARTRIDGE	Brand	PA; MO; NEDS
PEN NEEDLES 30G X 8 MM	Brand	
PURE COMFORT PEN NEEDLE 32G X 8 MM	Brand	
SURE COMFORT PEN NEEDLES 29G X 12.7MM	Brand	
TECHLITE PEN NEEDLES 32G X 8 MM	Brand	
TRUEPLUS 5-BEVEL PEN NEEDLES 29G X 12.7MM	Brand	
ULTICARE PEN NEEDLES 29G X 12.7MM	Brand	
ULTILET PEN NEEDLE 29G X 12.7MM	Brand	
ULTRA-THIN II PEN NEEDLES	Brand	
Ophthalmic Agents		
Ophthalmic Prostaglandin And Prostamide Analogs		
<i>brimonidine tartrate-timolol ophthalmic solution</i>	Generic	MO
<i>latanoprost ophthalmic solution</i>	Generic	MO
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	Brand	MO
RHOPRESSA OPHTHALMIC SOLUTION	Brand	MO
<i>travoprost (bak free) ophthalmic solution</i>	Generic	MO

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

Drug	Status	Requirements/Limits
Ophthalmic Agents, Other		
<i>ak-poly-bac ophthalmic ointment</i>	Generic	
<i>atropine sulfate ophthalmic ointment</i>	Generic	MO
<i>atropine sulfate ophthalmic solution 1 %</i>	Generic	MO
<i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>	Generic	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i>	Generic	
<i>cyclopentolate hcl ophthalmic solution 1 %</i>	Generic	MO
CYSTADROPS OPHTHALMIC SOLUTION	Brand	PA; MO; NEDS
CYSTARAN OPHTHALMIC SOLUTION	Brand	PA; MO; NEDS
MIEBO OPHTHALMIC SOLUTION	Brand	PA; QL (12 ML per 30 days); NEDS
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000</i>	Generic	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>	Generic	
<i>neo-polycin hc ophthalmic ointment</i>	Generic	
<i>neo-polycin ophthalmic ointment</i>	Generic	
<i>polycin ophthalmic ointment</i>	Generic	
<i>polymyxin b-trimethoprim ophthalmic solution</i>	Generic	
<i>proparacaine hcl ophthalmic solution</i>	Generic	
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	Brand	MO
RESTASIS OPHTHALMIC EMULSION	Brand	MO
ROCKLATAN OPHTHALMIC SOLUTION	Brand	MO
Ophthalmic Anti-Allergy Agents		
ALOCRIL OPHTHALMIC SOLUTION	Brand	
<i>azelastine hcl ophthalmic solution</i>	Generic	
<i>cromolyn sodium ophthalmic solution</i>	Generic	
<i>epinastine hcl ophthalmic solution</i>	Generic	
<i>olopatadine hcl ophthalmic solution 0.1 %</i>	Generic	
Ophthalmic Antiglaucoma Agents		
<i>acetazolamide er oral capsule extended release 12 hour</i>	Generic	MO
<i>apraclonidine hcl ophthalmic solution</i>	Generic	
<i>betaxolol hcl ophthalmic solution</i>	Generic	MO
BETOPTIC-S OPHTHALMIC SUSPENSION	Brand	MO
<i>brimonidine tartrate ophthalmic solution</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>brinzolamide ophthalmic suspension</i>	Generic	MO
<i>carteolol hcl ophthalmic solution</i>	Generic	MO
<i>dorzolamide hcl ophthalmic solution</i>	Generic	MO
<i>dorzolamide hcl-timolol mal ophthalmic solution</i>	Generic	MO
<i>dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 %</i>	Generic	MO
IOPIDINE OPHTHALMIC SOLUTION 1 %	Brand	
<i>levobunolol hcl ophthalmic solution 0.5 %</i>	Generic	MO
<i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>	Generic	MO
SIMBRINZA OPHTHALMIC SUSPENSION	Brand	MO
<i>timolol maleate (once-daily) ophthalmic solution</i>	Generic	MO
<i>timolol maleate ophthalmic gel forming solution</i>	Generic	MO
<i>timolol maleate ophthalmic solution</i>	Generic	MO
<i>timolol maleate pf ophthalmic solution 0.5 %</i>	Generic	MO
Ophthalmic Anti-Inflammatories		
ALOMIDE OPHTHALMIC SOLUTION	Brand	
ALREX OPHTHALMIC SUSPENSION	Brand	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	Brand	
<i>bromfenac sodium (once-daily) ophthalmic solution</i>	Generic	
<i>bromfenac sodium ophthalmic solution 0.07 %</i>	Generic	
<i>dexamethasone sodium phosphate ophthalmic solution</i>	Generic	
<i>diclofenac sodium ophthalmic solution</i>	Generic	
<i>difluprednate ophthalmic emulsion</i>	Generic	
EYSUVIS OPHTHALMIC SUSPENSION	Brand	QL (16.6 ML per 30 days)
<i>fluorometholone ophthalmic suspension</i>	Generic	
<i>flurbiprofen sodium ophthalmic solution</i>	Generic	
FML FORTE OPHTHALMIC SUSPENSION	Brand	
FML OPHTHALMIC OINTMENT	Brand	
INVELTYS OPHTHALMIC SUSPENSION	Brand	
<i>ketorolac tromethamine ophthalmic solution</i>	Generic	
<i>loteprednol etabonate ophthalmic suspension</i>	Generic	
MAXIDEX OPHTHALMIC SUSPENSION	Brand	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	Generic	
NEVANAC OPHTHALMIC SUSPENSION	Brand	
PRED MILD OPHTHALMIC SUSPENSION	Brand	
PRED-G OPHTHALMIC SUSPENSION	Brand	
PRED-G S.O.P. OPHTHALMIC OINTMENT	Brand	
<i>prednisolone acetate ophthalmic suspension</i>	Generic	
<i>prednisolone sodium phosphate ophthalmic solution</i>	Generic	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	Generic	
TOBRADEX OPHTHALMIC OINTMENT	Brand	
<i>tobramycin-dexamethasone ophthalmic suspension</i>	Generic	

Otic Agents

Otic Agents		
<i>acetasol hc otic solution</i>	Generic	
<i>acetic acid otic solution</i>	Generic	
<i>ciprofloxacin-dexamethasone otic suspension</i>	Generic	
FLAC OTIC OIL	Generic	
<i>fluocinolone acetonide otic oil</i>	Generic	
<i>hydrocortisone-acetic acid otic solution</i>	Generic	
<i>neomycin-polymyxin-hc otic solution 1 %</i>	Generic	
<i>neomycin-polymyxin-hc otic suspension</i>	Generic	

Respiratory Tract/Pulmonary Agents

Antihistamines		
<i>azelastine hcl nasal solution 0.1 %, 0.15 %</i>	Generic	
<i>cyproheptadine hcl oral tablet</i>	Generic	
<i>diphenhydramine hcl injection solution</i>	Generic	
<i>hydroxyzine pamoate oral capsule</i>	Generic	
<i>levocetirizine dihydrochloride oral tablet</i>	Generic	QL (1 EA per 1 day)
<i>olopatadine hcl nasal solution</i>	Generic	

Anti-Inflammatories, Inhaled

Corticosteroids

ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Brand	MO
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT	Brand	MO

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

Drug	Status	Requirements/Limits
<i>budesonide inhalation suspension</i>	Generic	B/D; MO
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT	Brand	MO
FLOVENT HFA INHALATION AEROSOL	Brand	MO
<i>flunisolide nasal solution 25 mcg/act (0.025%)</i>	Generic	
<i>fluticasone propionate diskus inhalation aerosol powder breath activated 100 mcg/act</i>	Generic	
<i>fluticasone propionate diskus inhalation aerosol powder breath activated 250 mcg/act, 50 mcg/act</i>	Generic	MO
<i>fluticasone propionate hfa inhalation aerosol</i>	Generic	MO
<i>fluticasone propionate nasal suspension</i>	Generic	
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	Brand	MO
Antileukotrienes		
<i>montelukast sodium oral packet</i>	Generic	MO
<i>montelukast sodium oral tablet</i>	Generic	MO
<i>montelukast sodium oral tablet chewable</i>	Generic	MO
<i>zafirlukast oral tablet</i>	Generic	MO; QL (2 EA per 1 day)
<i>zileuton er oral tablet extended release 12 hour</i>	Generic	MO; QL (4 EA per 1 day); NEDS
Bronchodilators, Anticholinergic		
ATROVENT HFA INHALATION AEROSOL SOLUTION	Brand	MO
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	Brand	MO
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT	Brand	MO
<i>ipratropium bromide inhalation solution</i>	Generic	B/D; MO
<i>ipratropium bromide nasal solution</i>	Generic	MO
<i>ipratropium-albuterol inhalation solution</i>	Generic	B/D; MO
SPIRIVA HANDIHALER INHALATION CAPSULE	Brand	MO
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	Brand	MO
<i>tiotropium bromide monohydrate inhalation capsule</i>	Generic	

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

Drug	Status	Requirements/Limits
Bronchodilators, Sympathomimetic		
<i>albuterol sulfate hfa inhalation aerosol solution</i>	Generic	MO
<i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml</i>	Generic	B/D; MO
<i>albuterol sulfate oral syrup</i>	Generic	MO
<i>albuterol sulfate oral tablet</i>	Generic	MO
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 50-25 MCG/INH	Brand	MO
<i>epinephrine injection solution 0.3 mg/0.3ml</i>	Generic	
<i>epinephrine injection solution auto-injector 0.15 mg/0.3ml, 0.3 mg/0.3ml</i>	Generic	
<i>levalbuterol hcl inhalation nebulization solution</i>	Generic	B/D; MO
<i>levalbuterol tartrate inhalation aerosol</i>	Generic	MO
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	Brand	MO
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	Brand	MO
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE	Brand	QL (2 EA per 1 day)
<i>terbutaline sulfate oral tablet</i>	Generic	MO
Cystic Fibrosis Agents		
BRONCHITOL INHALATION CAPSULE	Brand	PA; MO; NEDS
CAYSTON INHALATION SOLUTION RECONSTITUTED	Brand	PA; NEDS
KALYDECO ORAL PACKET 13.4 MG, 5.8 MG	Brand	PA; NEDS
KALYDECO ORAL PACKET 25 MG, 50 MG, 75 MG	Brand	PA; MO; NEDS
KALYDECO ORAL TABLET	Brand	PA; MO; NEDS
ORKAMBI ORAL PACKET	Brand	PA; MO; NEDS
ORKAMBI ORAL TABLET	Brand	PA; MO; NEDS
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	Brand	B/D; MO; NEDS
SYMDEKO ORAL TABLET THERAPY PACK	Brand	PA; MO; QL (2 EA per 1 day); NEDS
TOBI PODHALER INHALATION CAPSULE	Brand	MO; NEDS

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

Drug	Status	Requirements/Limits
<i>tobramycin inhalation nebulization solution 300 mg/5ml</i>	Generic	B/D; MO; NEDS
TRIKAFTA ORAL TABLET THERAPY PACK	Brand	PA; MO; QL (3 EA per 1 day); NEDS
TRIKAFTA ORAL THERAPY PACK	Brand	PA; QL (56 EA per 28 days); NEDS
Mast Cell Stabilizers		
<i>cromolyn sodium inhalation nebulization solution</i>	Generic	B/D; MO; NEDS
<i>cromolyn sodium oral concentrate</i>	Generic	MO
Phosphodiesterase Inhibitors, Airways Disease		
ELIXOPHYLLIN ORAL ELIXIR	Brand	MO
<i>roflumilast oral tablet</i>	Generic	MO; QL (30 EA per 30 days)
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Brand	MO
<i>theophylline er oral tablet extended release 12 hour 300 mg, 450 mg</i>	Generic	MO
<i>theophylline er oral tablet extended release 24 hour</i>	Generic	MO
<i>theophylline oral elixir</i>	Brand	
Pulmonary Antihypertensives		
ADEMPAS ORAL TABLET	Brand	PA; MO; NEDS
ALYQ ORAL TABLET	Generic	PA; MO
<i>ambrisentan oral tablet</i>	Generic	PA; MO; NEDS
<i>bosentan oral tablet</i>	Generic	PA; MO; NEDS
LIQREV ORAL SUSPENSION	Brand	PA; NEDS
OPSUMIT ORAL TABLET	Brand	PA; MO; NEDS
ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK	Brand	PA; NEDS
ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK	Brand	PA; NEDS
ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK	Brand	PA; NEDS
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG	Brand	PA; MO
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.25 MG, 1 MG, 2.5 MG, 5 MG	Brand	PA; MO; NEDS
<i>sildenafil citrate oral suspension reconstituted</i>	Generic	PA; MO
<i>sildenafil citrate oral tablet 20 mg</i>	Generic	PA; MO
<i>tadalafil (pah) oral tablet</i>	Generic	PA; MO

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

Drug	Status	Requirements/Limits
TRACLEER ORAL TABLET SOLUBLE	Brand	PA; MO; NEDS
UPTRAVI ORAL TABLET	Brand	PA; MO; NEDS
UPTRAVI TITRATION ORAL TABLET THERAPY PACK	Brand	PA; NEDS
VENTAVIS INHALATION SOLUTION	Brand	PA; MO; NEDS
Pulmonary Fibrosis Agents		
OFEV ORAL CAPSULE	Brand	PA; MO; NEDS
<i>pirfenidone oral capsule</i>	Generic	PA; MO; NEDS
<i>pirfenidone oral tablet</i>	Generic	PA; MO; NEDS
Respiratory Tract Agents, Other		
<i>acetylcysteine inhalation solution</i>	Generic	B/D
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT	Brand	MO
BEVESPI AEROSPHERE INHALATION AEROSOL	Brand	MO
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION	Brand	MO
SYMBICORT INHALATION AEROSOL	Brand	MO
Respiratory Tract/Pulmonary Agents		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	Brand	MO
ADVAIR HFA INHALATION AEROSOL	Brand	MO
BREZTRI AEROSPHERE INHALATION AEROSOL	Brand	MO
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; NEDS
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
<i>mometasone furoate nasal suspension</i>	Generic	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (3 ML per 28 days); NEDS
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	Brand	PA; MO; QL (3 ML per 28 days); NEDS
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	Brand	PA; QL (0.4 ML per 28 days); NEDS
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; MO; QL (3 EA per 28 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xii.
94

Drug	Status	Requirements/Limits
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	Brand	MO
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
<i>carisoprodol oral tablet</i>	Generic	PA
<i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</i>	Generic	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	Generic	
<i>orphenadrine citrate er oral tablet extended release 12 hour</i>	Generic	
Sleep Disorder Agents		
Gaba Receptor Modulators		
<i>eszopiclone oral tablet</i>	Generic	QL (30 EA per 30 days)
<i>flurazepam hcl oral capsule</i>	Generic	QL (30 EA per 30 days)
<i>temazepam oral capsule</i>	Generic	QL (30 EA per 30 days)
<i>zaleplon oral capsule</i>	Generic	QL (1 EA per 1 day)
<i>zolpidem tartrate er oral tablet extended release</i>	Generic	QL (30 EA per 30 days)
<i>zolpidem tartrate oral tablet</i>	Generic	QL (30 EA per 30 days)
<i>zolpidem tartrate sublingual tablet sublingual</i>	Generic	
Sleep Disorders, Other		
<i>doxepin hcl oral tablet</i>	Generic	QL (30 EA per 30 days)
LUMRYZ ORAL PACKET	Brand	PA; NEDS
<i>modafinil oral tablet</i>	Generic	PA; MO; QL (1 EA per 1 day)
<i>ramelteon oral tablet</i>	Generic	QL (30 EA per 30 days)
<i>sodium oxybate oral solution</i>	Generic	PA; LA; NEDS
<i>triazolam oral tablet</i>	Generic	QL (60 EA per 30 days)
XYREM ORAL SOLUTION	Brand	PA; LA; NEDS
XYWAV ORAL SOLUTION	Brand	PA; NEDS
Sleep Promoting Agents		
BELSOMRA ORAL TABLET	Brand	QL (30 EA per 30 days)

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

D. Index of Covered Drugs

In this section, you can find a drug by searching for its name alphabetically. This will tell you the page number where you can find additional coverage information for your drug.



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. **For more information**, visit fallonhealth.org/navicare.

Index

1ST TIER UNIFINE PENTIPS	86	AGAMATRIX KEYNOTE TEST	43	<i>amoxicillin-pot clavulanate</i> 10 <i>amoxicillin-pot clavulanate er</i> 10 <i>amphetamine-dextroamphetamine er</i> 54 <i>amphetamine-dextroamphetamine</i> 54
1ST TIER UNIFINE PENTIPS PLUS	86	AGAMATRIX PRESTO TEST	43	AMPHOTERICIN B 19 <i>amphotericin b liposome</i> 19 <i>ampicillin</i> 10 <i>ampicillin sodium</i> 10 <i>ampicillin-sulbactam sodium</i> 10 <i>anagrelide hcl</i> 47 <i>anastrozole</i> 25
<i>abacavir sulfate</i> 36		AIMOVIG	21	ANDRODERM 69
<i>abacavir sulfate-lamivudine</i> 36		AKEEGA	25	ANGELIQ 70
ABELCET	19	<i>ak-poly-bac</i> 88		ANORO ELLIPTA 94
ABILIFY MAINTENA	32	<i>ala-cort</i> 66		<i>apomorphine hcl</i> 30
<i>abiraterone acetate</i> 23		<i>albendazole</i> 29		<i>apractolinidine hcl</i> 88
ABRYSVO	82	<i>albuterol sulfate</i> 92		<i>aprepitant</i> 19
<i>acamprosate calcium</i> 5		<i>albuterol sulfate hfa</i> 92		<i>apri</i> 70
<i>acarbose</i> 39		<i>alclometasone dipropionate</i> 66		APTIOM 15
ACCU-CHEK AVIVA PLUS	43	ALECENSA	25	APTIVUS 37
ACCU-CHEK GUIDE	43	<i>alendronate sodium</i> 85		ARALAST NP 63
ACCU-CHEK SMARTVIEW	43	<i>alfuzosin hcl er</i> 65		<i>aranelle</i> 70
ACCUTREND GLUCOSE	43	ALINIA	29	ARCALYST 77
<i>acebutolol hcl</i> 49		<i>aliskiren fumarate</i> 51		AREXVY 83
<i>acetaminophen-codeine</i> 4		<i>allopurinol</i> 21		<i>ariPIPRAZOLE</i> 32
<i>acetosal hc</i> 90		ALOCRIL	88	ARNUITY ELLIPTA 90
<i>acetazolamide</i> 51		<i>alogliptin benzoate</i> 39		<i>asenapine maleate</i> 32
<i>acetazolamide er</i> 88		ALOMIDE	89	<i>ashlyna</i> 70
<i>acetic acid</i> 90		ALORA	70	<i>aspirin-dipyridamole er</i> 47
<i>acetylcysteine</i> 94		<i>alosetron hcl</i> 62		ASSURE 3 TEST 43
<i>acitretin</i> 57		<i>alprazolam</i> 38		ASSURE 4 TEST 43
ACTEMRA	80	<i>alprazolam er</i> 38		ASSURE ID INSULIN SAFETY SYR 41
ACTEMRA ACTPEN	80	<i>alprazolam xr</i> 38		ASSURE II 44
ACTHAR	66	ALREX	89	ASSURE II CHECK 43
ACTHIB	82	<i>altavera</i> 70		ASSURE PLATINUM 44
ACTIMMUNE	77	ALUNBRIG	25, 26	ASSURE PRISM MULTI TEST 44
<i>acyclovir</i> 35, 57		<i>alyacen 1/35</i> 70		ASSURE PRO TEST 44
<i>acyclovir sodium</i> 35		ALYQ	93	ASTAGRAF XL 80
ADACEL	82	<i>amabelz</i> 70		<i>atazanavir sulfate</i> 37
<i>adapalene</i> 57		<i>amantadine hcl</i> 37		<i>atenolol</i> 49
ADBRY	57	<i>ambrisentan</i> 93		<i>atenolol-chlorthalidone</i> 49
<i>adefovir dipivoxil</i> 34		<i>amcinonide</i> 66		<i>atomoxetine hcl</i> 54
ADEMPAS	93	<i>amethia</i> 70		<i>atorvastatin calcium</i> 52
ADVAIR DISKUS	94	<i>amethyst</i> 70		<i>atovaquone</i> 29
ADVAIR HFA	94	<i>amikacin sulfate</i> 6		<i>atovaquone-proguanil hcl</i> 29
ADVANCE INTUITION TEST	43	<i>amiloride hcl</i> 52		<i>atropine sulfate</i> 88
ADVANCE MICRO-DRAW TEST	43	<i>amiloride-hydrochlorothiazide</i> 52		ATROVENT HFA 91
ADVOCATE INSULIN PEN NEEDLES	86	AMINOSYN II	58	
ADVOCATE REDI-CODE	43	<i>amiodarone hcl</i> 49		
ADVOCATE REDI-CODE+ TEST	43	<i>amitriptyline hcl</i> 18		
ADVOCATE TEST	43	<i>amlodipine besy-benazepril hcl</i> 50		
AGAMATRIX AMP TEST	43	<i>amlodipine besylate</i> 50		
AGAMATRIX JAZZ TEST	43	<i>amlodipine besylate-valsartan</i> 50		

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

<i>aubra eq</i>	70	BD PEN NEEDLE SHORT	<i>brimonidine tartrate</i>	88
AUGMENTIN	10	U/F	<i>brimonidine tartrate-timolol</i>	87
AUGTYRO	26	BD SAFETYGLIDE	<i>brinzolamide</i>	89
AURYXIA	65	INSULIN SYRINGE	BRIVIACT	13
AUSTEDO	55	BD SYRINGE LUER-LOK	<i>bromfenac sodium</i>	89
AUSTEDO XR	55	BD VEO INSULIN SYRINGE	<i>bromfenac sodium (once-daily)</i>	89
AUSTEDO XR PATIENT TITRATION	55	U/F	<i>bromocriptine mesylate</i>	30
AUVELITY	16	BELBUCA	BRONCHITOL	92
<i>aviane</i>	70	BELSOMRA	BRUKINSA	26
AVONEX PEN	56	<i>benazepril hcl</i>	<i>budesonide</i>	85, 91
AVONEX PREFILLED	56	BENLYSTA	<i>budesonide er</i>	85
AVYCAZ	8	<i>benazepril-hydrochlorothiazide</i>	<i>bumetanide</i>	51
AYVAKIT	26	BERINERT	<i>buprenorphine</i>	4
<i>azacitidine</i>	23	BESREMI	<i>buprenorphine hcl</i>	5
AZASITE	11	<i>betaine</i>	<i>buprenorphine hcl-naloxone hcl</i>	5
<i>azathioprine</i>	80	<i>betamethasone dipropionate</i>	<i>bupropion hcl</i>	16
<i>azathioprine sodium</i>	77	<i>betamethasone dipropionate</i>	<i>bupropion hcl er (smoking det)</i>	6
<i>azelaic acid</i>	57	<i>aug</i>	<i>bupropion hcl er (sr)</i>	16
<i>azelastine hcl</i>	88, 90	<i>betamethasone valerate</i>	<i>bupropion hcl er (xl)</i>	16
<i>azithromycin</i>	11	BETASERON	<i>buspirone hcl</i>	38
<i>aztreonam</i>	9	<i>betaxolol hcl</i>	<i>butorphanol tartrate</i>	4
<i>bacitracin</i>	6	<i>bethanechol chloride</i>	BYDUREON BCISE	39
<i>bacitracin-polymyxin b</i>	88	BETOPTIC-S	BYLVAY	61
<i>bacitra-neomycin-polymyxin-hc</i>	88	BEVESPI AEROSPHERE	BYLVAY (PELLETS)	61
<i>baclofen</i>	33	<i>bexarotene</i>	<i>cabergoline</i>	75
<i>balsalazide disodium</i>	85	BEXSERO	CABLIVI	47
BALVERSA	26	<i>bicalutamide</i>	CABOMETYX	26
<i>balziva</i>	70	BICILLIN C-R	<i>calcipotriene</i>	57
BARACLUIDE	34	BICILLIN C-R 900/300	<i>calcitonin (salmon)</i>	85
BAXDELA	12	BIKTARVY	<i>calcitriol</i>	85
BCG VACCINE	83	BIOSANNER GLUCOSE TEST	<i>calcium acetate</i>	65
BD DISP NEEDLES	86	<i>bisoprolol fumarate</i>	<i>calcium acetate (phos binder)</i>	65
BD INSULIN SYR		<i>bisoprolol-hydrochlorothiazide</i>	CALQUENCE	26
ULTRAFINE II	41	BIVIGAM	<i>camila</i>	74
BD INSULIN SYRINGE		<i>bleomycin sulfate</i>	CAMZYOS	51
HALF-UNIT	41	BLEPHAMIDE S.O.P.	<i>candesartan cilexetil</i>	48
BD INSULIN SYRINGE U/F..	41	<i>blisovi 24 fe</i>	<i>candesartan cilexetil-hctz</i>	48
BD INSULIN SYRINGE U/F		<i>blisovi fe 1.5/30</i>	CAPEX	66
1/2UNIT	41	<i>blood glucose test</i>	CAPLYTA	32
BD PEN	86	BOOSTRIX	CAPRELSA	26
BD PEN MINI	86	BORTEZOMIB	<i>captopril</i>	48
BD PEN NEEDLE MICRO U/F	86	<i>bosentan</i>	<i>carbamazepine</i>	15
BD PEN NEEDLE MINI U/F..	86	BOSULIF	<i>carbamazepine er</i>	15
BD PEN NEEDLE NANO		BRAFTOVI	<i>carbidopa</i>	30
2ND GEN	86	BREO ELLIPTA	<i>carbidopa-levodopa</i>	30
BD PEN NEEDLE NANO U/F	86	BREXAFAEMME	<i>carbidopa-levodopa er</i>	30
BD PEN NEEDLE ORIGINAL U/F	86	BREZTRI AEROSPHERE	<i>carbidopa-levodopa-entacapone</i>	31
		<i>briellyn</i>	CARDURA XL	65
		BRILINTA	CAREONE BLOOD GLUCOSE TEST	44
		<i>47</i>		

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

CARESENS N GLUCOSE TEST	44	<i>cinacalcet hcl</i>85	<i>clobetasol propionate e</i>57
CARETOUCH TEST	44	CINRYZE76	<i>clobetasol propionate emulsion</i> ..57
<i>carglumic acid</i>58		<i>ciprofloxacin hcl</i>12	<i>clocortolone pivalate</i>57
<i>carisoprodol</i>95		<i>ciprofloxacin in d5w</i>12	CLODAN57
<i>carteolol hcl</i>89		<i>ciprofloxacin-dexamethasone</i>90	<i>clomipramine hcl</i>18
<i>cartia xt</i>50		<i>citalopram hydrobromide</i>17	<i>clonazepam</i>14
<i>carvedilol</i>49		CLARAVIS57	<i>clonidine</i>47
<i>carvedilol phosphate er</i>49		<i>clarithromycin</i>11	<i>clonidine hcl</i>47
<i>caspofungin acetate</i>19		<i>clarithromycin er</i>11	<i>clopidogrel bisulfate</i>47
CAYSTON92		CLENPIQ61	<i>clorazepate dipotassium</i>38
<i>caziant</i>70		CLEOCIN6	<i>clotrimazole</i>19, 20
<i>cefaclor</i>8		CLEVER CHEK AUTO-CODE TEST44	<i>clotrimazole-betamethasone</i>57
<i>cefaclor er</i>8		CLEVER CHEK AUTO-CODE VOICE44	<i>clozapine</i>33
<i>cefadroxil</i>8		CLEVER CHEK TEST44	COARTEM29
<i>cefazolin sodium</i>8		CLEVER CHOICE AUTO-CODE TEST44	<i>codeine sulfate</i>4
<i>cefdinir</i>8		CLEVER CHOICE MICRO TEST44	<i>colchicine</i>21
<i>cefpeme hcl</i>8		CLEVER CHOICE NO CODING44	<i>colchicine-probenecid</i>21
<i>cefixime</i>8		CLEVER CHOICE TALK SYSTEM44	<i>colesevelam hcl</i>53
<i>cefotaxime sodium</i>9		CLIMARA PRO70	<i>colestipol hcl</i>53
<i>cefotetan disodium</i>9		<i>clindamycin hcl</i>6	<i>colistimethate sodium (cba)</i>7
<i>cefoxitin sodium</i>9		<i>clindamycin palmitate hcl</i>7	COMBIPATCH70
<i>cefpodoxime proxetil</i>9		<i>clindamycin phosphate</i>7	COMBIVENT RESPIMAT91
<i>cefprozil</i>9		<i>clindamycin phosphate in d5w</i>7	COMETRIQ (100 MG DAILY DOSE)26
<i>ceftazidime</i>9		CLINIMIX E/DEXTROSE (2.75/5)60	COMETRIQ (140 MG DAILY DOSE)26
<i>ceftriaxone sodium</i>9		CLINIMIX E/DEXTROSE (4.25/10)60	COMETRIQ (60 MG DAILY DOSE)26
<i>cefuroxime axetil</i>9		CLINIMIX E/DEXTROSE (4.25/5)60	COMFORT ASSIST INSULIN SYRINGE41
<i>cefuroxime sodium</i>9		CLINIMIX E/DEXTROSE (5/15)60	COMFORT EZ PEN NEEDLES86
<i>celecoxib</i>3		CLINIMIX E/DEXTROSE (5/20)60	COMPLERA35
<i>cephalexin</i>9		CLINIMIX/DEXTROSE (4.25/10)60	<i>constulose</i>62
CERDELGA63		CLINIMIX/DEXTROSE (4.25/5)60	CONTOUR NEXT TEST44
<i>cevimeline hcl</i>56		CLINIMIX/DEXTROSE (5/15)60	CONTOUR TEST44
<i>chlordiazepoxide hcl</i>38		CLINIMIX/DEXTROSE (5/20)60	COPIKTRA25
<i>chlordiazepoxide-amitriptyline</i> ...18		CLINIMIX/DEXTROSE (5/15)60	CORLANOR51
<i>chlorhexidine gluconate</i>56		CLINISOL SF58	CORTROPHIN66
<i>chloroquine phosphate</i>29		<i>clobazam</i>14	COSENTYX78
<i>chlorpromazine hcl</i>31		<i>clobetasol prop emollient base</i> ...57	COSENTYX (300 MG DOSE) .78
<i>chlorthalidone</i>52		<i>clobetasol propionate</i>57	COSENTYX SENSOREADY (300 MG)78
<i>cholestyramine</i>53			COSENTYX SENSOREADY PEN78
<i>cholestyramine light</i>52			COSENTYX UNOREADY78
CIBINQO77			COTELLIC24
CICLODAN19			CREON63
<i>ciclopirox</i>19			CRINONE74
<i>ciclopirox olamine</i>19			<i>cromolyn sodium</i>88, 93
<i>cilstazol</i>47			<i>cryselle-28</i>70
CILOXAN12			
CIMDUO36			
<i>cimetidine</i>62			
<i>cimetidine hcl</i>62			
CIMZIA80			
CIMZIA STARTER KIT80			

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

CRYSVITA	86	<i>dexlansoprazole</i>	63	<i>dotti</i>	70
CUVRIOR	65	<i>dexamethylphenidate hcl</i>	54	DOVATO	36
CVS GAUZE STERILE	41	<i>dexamethylphenidate hcl er</i>	54	<i>doxazosin mesylate</i>	65
<i>cyclobenzaprine hcl</i>	95	<i>dextroamphetamine sulfate</i>	54	<i>doxepin hcl</i>	18, 38, 57, 95
<i>cyclopentolate hcl</i>	88	<i>dextroamphetamine sulfate er</i>	54	<i>doxercalciferol</i>	61
<i>cyclophosphamide</i>	22	<i>dextrose</i>	60	<i>doxy 100</i>	12
CYCLOSET	39	<i>dextrose-nacl</i>	61	<i>doxycycline</i>	57
<i>cyclosporine</i>	80	DIACOMIT	13	<i>doxycycline hyclate</i>	12
<i>cyclosporine modified</i>	80	<i>diazepam</i>	14, 38	<i>doxycycline monohydrate</i>	12
<i>cyproheptadine hcl</i>	90	DIAZEPAM INTENSOL	38	<i>doxylamine-pyridoxine</i>	18
<i>cyred eq</i>	70	<i>diazoxide</i>	41	DRIZALMA SPRINKLE	17
CYSTADROPS	88	<i>dichlorphenamide</i>	86	<i>dronabinol</i>	19
CYSTAGON	63	<i>diclofenac potassium</i>	3	DROPLET INSULIN	
CYSTARAN	88	<i>diclofenac sodium</i>	3, 57, 89	SYRINGE	41
<i>dalfampridine er</i>	56	<i>diclofenac sodium er</i>	3	DROPLET PEN NEEDLES	86
DALVANCE	7	<i>diclofenac-misoprostol</i>	3	<i>drospirenen-eth estrad-levomefol</i>	70
<i>danazol</i>	69	<i>dicloxacillin sodium</i>	10	<i>drospirenone-ethinyl estradiol</i>	70
<i>dantrolene sodium</i>	33	<i>dicyclomine hcl</i>	61	<i>droxidopa</i>	51
<i>dapsone</i>	22	DIFICID	11	<i>duloxetine hcl</i>	17
DAPTACEL	83	<i>diflorasone diacetate</i>	67	DUOBRII	57
<i>daptomycin</i>	7	<i>diflunisal</i>	3	DUPIXENT	78
<i>darifenacin hydrobromide er</i>	64	<i>dilfluprednate</i>	89	<i>duramorph</i>	4
<i>darunavir</i>	37	DIGITEK	51	<i>dutasteride</i>	65
DAURISMO	26	DIGOX	51	<i>dutasteride-tamsulosin hcl</i>	65
DAYBUE	63	<i>digox</i>	51	EASY PLUS II GLUCOSE TEST	44
<i>deblitane</i>	74	<i>digoxin</i>	51	EASY STEP TEST	44
<i>deferasirox</i>	60	<i>dihydroergotamine mesylate</i>	21	EASY TALK BLOOD GLUCOSE TEST	44
<i>deferiprone</i>	60	DILANTIN	15	EASY TOUCH	
<i>deflazacort</i>	66	<i>diltiazem hcl</i>	50	HYPODERMIC NEEDLE	87
DELSTRIGO	36	<i>diltiazem hcl er</i>	50	EASY TOUCH TEST	44
DEPO-SUBQ PROVERA 104	74	<i>diltiazem hcl er beads</i>	50	EASY TRAK BLOOD GLUCOSE TEST	44
DESCOVY	36	<i>diltiazem hcl er coated beads</i>	50	EASYGLUCO	45
<i>desipramine hcl</i>	18	<i>dilt-xr</i>	50	EASymax 15 TEST	45
<i>desmopressin ace spray refrig</i>	68	<i>dimethyl fumarate</i>	56	<i>ec-naproxen</i>	3
<i>desmopressin acetate</i>	68	<i>dimethyl fumarate starter pack</i>	56	<i>econazole nitrate</i>	20
<i>desogestrel-ethinyl estradiol</i>	70	DIPENTUM	85	EDURANT	35
<i>desonide</i>	66	<i>diphenhydramine hcl</i>	90	<i>efavirenz</i>	35
<i>desoximetasone</i>	66	<i>diphenoxylate-atropine</i>	61	<i>efavirenz-emtricitab-tenofo df</i>	35
<i>desvenlafaxine er</i>	17	<i>diphtheria-tetanus toxoids dt</i>	83	<i>efavirenz-lamivudine-tenofovir</i>	36
<i>desvenlafaxine succinate er</i>	17	<i>dipyridamole</i>	47	ELIGARD	75
<i>dexamethasone</i>	66, 67	<i>disopyramide phosphate</i>	49	ELIQUIS	46
DEXAMETHASONE INTENSOL	66	<i>disulfiram</i>	5	ELIQUIS DVT/PE STARTER PACK	46
<i>dexamethasone sodium phosphate</i>	67, 89	<i>divalproex sodium</i>	14, 39	ELIXOPHYLLIN	93
DEXCOM G6 RECEIVER	44	<i>divalproex sodium er</i>	21	ELMIRON	65
DEXCOM G6 SENSOR	44	<i>dofetilide</i>	49	<i>eluryng</i>	70
DEXCOM G6 TRANSMITTER	44	DOJOLVI	60	EMCYT	23
DEXCOM G7 RECEIVER	44	<i>donepezil hcl</i>	16	EMEND	19
DEXCOM G7 SENSOR	44	DOPTELET	46		
		<i>dorzolamide hcl</i>	89		
		<i>dorzolamide hcl-timolol mal</i>	89		
		<i>dorzolamide hcl-timolol mal pf</i>	89		

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

EMFLAZA	67	<i>esomeprazole magnesium</i>	63	<i>fenofibrate</i>	52
<i>emoquette</i>	70	<i>estarrylla</i>	70	<i>fenofibrate micronized</i>	52
EMPAVELI	77	<i>estazolam</i>	38	<i>fenoprofen calcium</i>	3
EMSAM	17	<i>estradiol</i>	70, 71	<i>fentanyl</i>	4
<i>emtricitabine</i>	36	<i>estradiol-norethindrone acet</i>	71	<i>fentanyl citrate</i>	4
<i>emtricitabine-tenofovir df</i>	36	ESTRING	71	FETZIMA	17
EMTRIVA	36	<i>eszopiclone</i>	95	FETZIMA TITRATION	17
<i>enalapril maleate</i>	48	<i>ethacrynic acid</i>	51	FILSPARI	51
<i>enalapril-hydrochlorothiazide</i>	48	<i>ethambutol hcl</i>	22	<i>finasteride</i>	65
ENBREL	80	<i>ethosuximide</i>	14	<i> fingolimod hcl</i>	56
ENBREL MINI	80	<i>ethynodiol diac-eth estradiol</i>	71	FINTEPLA	13
ENBREL SURECLICK	80	<i>etodolac</i>	3	<i>finzala</i>	71
ENDARI	63	<i>etodolac er</i>	3	FIRDAPSE	55
ENDOCET	4	<i>etonogestrel-ethinyl estradiol</i>	71	FIRMAGON	75
<i>endocet</i>	4	<i>etravirine</i>	35	FIRMAGON (240 MG DOSE)	75
ENGERIX-B	83	<i>euthyrox</i>	75	FIRVANQ	7
<i>enilloring</i>	70	<i>everolimus</i>	26, 81	FLAC	90
ENLITE GLUCOSE SENSOR	45	EVERSENSE E3		<i>flavoxate hcl</i>	64
<i>enoxaparin sodium</i>	46	SENSOR/HOLDER	45	FLEBOGAMMA DIF	77
<i>enpresse-28</i>	70	EVERSENSE E3 SMART		<i>flecainide acetate</i>	49
<i>enskyce</i>	70	TRANSMITTER	45	FLOVENT DISKUS	91
ENSPRYNG	80	EVERSENSE		FLOVENT HFA	91
<i>entacapone</i>	30	SENSOR/HOLDER	45	<i>fluconazole</i>	20
<i>entecavir</i>	34	EVERSENSE SMART		<i>fluconazole in sodium chloride</i>	20
ENTRESTO	48	TRANSMITTER	45	<i>flucytosine</i>	20
<i>enulose</i>	62	EVOTAZ	37	<i>fludrocortisone acetate</i>	67
ENVARSUS XR	80, 81	EVRYSDI	55	<i>flunisolide</i>	91
EPCLUSA	34	EXEL COMFORT POINT		<i>fluocinolone acetonide</i>	67, 90
EPIDIOLEX	14	PEN NEEDLE	87	<i>fluocinolone acetonide body</i>	67
<i>epinastine hcl</i>	88	EXELDERM	20	<i>fluocinolone acetonide scalp</i>	67
<i>epinephrine</i>	92	<i>exemestane</i>	25	<i>fluocinonide</i>	67
<i>epitol</i>	15	EXKIVITY	26	<i>fluocinonide emulsified base</i>	67
EPIVIR HBV	34	EXSERVAN	55	<i>fluorometholone</i>	89
<i>eplerenone</i>	52	EYSUVIS	89	<i>fluorouracil</i>	57, 58
EPRONTIA	15	<i>ezetimibe</i>	53	<i>fluoxetine hcl</i>	17, 18
EQUETRO	15	<i>ezetimibe-simvastatin</i>	53	<i>fluoxetine hcl (pmdd)</i>	17
ERAXIS	20	<i>falmina</i>	71	<i>fluphenazine decanoate</i>	31
<i>ergoloid mesylates</i>	16	<i>famciclovir</i>	35	<i>fluphenazine hcl</i>	31
ERGOMAR	21	<i>famotidine</i>	62	<i>flurazepam hcl</i>	95
<i>ergotamine-caffeine</i>	21	FANAPT	32	<i>flurbiprofen</i>	3
ERIVEDGE	26	FANAPT TITRATION		<i>flurbiprofen sodium</i>	89
ERLEADA	23	PACK	32	<i>flutamide</i>	23
<i>erlotinib hcl</i>	26	FARXIGA	39	<i>fluticasone propionate</i>	67, 91
<i>errin</i>	74	FARYDAK	26	<i>fluticasone propionate diskus</i>	91
<i>ertapenem sodium</i>	9	FASENRA	94	<i>fluticasone propionate hfa</i>	91
<i>erythromycin</i>	11, 57	FASENRA PEN	94	<i>fluvastatin sodium</i>	52
<i>erythromycin base</i>	11	<i>febuxostat</i>	21	<i>fluvastatin sodium er</i>	52
<i>erythromycin ethylsuccinate</i>	11	<i>felbamate</i>	15	<i>fluvoxamine maleate</i>	18
<i>erythromycin stearate</i>	11	<i>felodipine er</i>	50	<i>fluvoxamine maleate er</i>	18
<i>escitalopram oxalate</i>	17	FEMRING	71	FML	89
		<i>femynor</i>	71	FML FORTE	89

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

<i>fondaparinux sodium</i>	46	<i>gefitinib</i>	26	<i>haloperidol decanoate</i>	31
FORTEO	86	<i>gemfibrozil</i>	52	<i>haloperidol lactate</i>	31
FOSAMAX PLUS D	86	<i>gemmily</i>	71	HARVONI	34
<i>fosamprenavir calcium</i>	37	<i>generlac</i>	62	HAVRIX	83
<i>fosfomycin tromethamine</i>	7	<i>gengraf</i>	81	HEATHER	74
<i>fosinopril sodium</i>	48	GENOTROPIN	69	<i>heparin sodium (porcine)</i>	46
<i>fosinopril sodium-hctz</i>	48	GENOTROPIN MINIQUICK	69	<i>heparin sodium (porcine) pf</i>	47
<i>fosphenytoin sodium</i>	15	GENTAK	6	HEPLISAV-B	83
FOTIVDA	26	<i>gentamicin in saline</i>	6	HETLIOZ LQ	55
FRAGMIN	46	<i>gentamicin sulfate</i>	6	HIBERIX	83
FREESTYLE INSULINX TEST	45	GENVOYA	35	HUMALOG	41, 42
FREESTYLE LIBRE 14 DAY READER	45	GILOTrif	24	HUMALOG JUNIOR KWIKPEN	42
FREESTYLE LIBRE 14 DAY SENSOR	45	GLASSIA	63	HUMALOG KWIKPEN	42
FREESTYLE LIBRE 2 READER	45	<i>glatiramer acetate</i>	56	HUMALOG MIX 50/50	42
FREESTYLE LIBRE 2 SENSOR	45	<i>glatopa</i>	56	HUMALOG MIX 50/50 KWIKPEN	42
FREESTYLE LIBRE 3 SENSOR	45	GLATOPA	56	HUMALOG MIX 75/25	42
FREESTYLE LIBRE READER	45	GLEOSTINE	22	HUMALOG MIX 75/25 KWIKPEN	42
FREESTYLE LITE TEST	45	<i>glimepiride</i>	39	HUMIRA (2 PEN)	81
FREESTYLE PRECISION NEO TEST	45	<i>glipizide</i>	39	HUMIRA (2 SYRINGE)	81
FREESTYLE TEST	45	<i>glipizide er</i>	39	HUMIRA-CD/UC/HS STARTER	81
FRUZAQLA	26	<i>glipizide-metformin hcl</i>	40	HUMIRA-PED	81
<i>fulvestrant</i>	23	GLOBAL ALCOHOL PREP EASE	7	HUMIRA-PED>/=40KG CROHNS START	81
<i>furosemide</i>	51	GLUCAGEN HYPOKIT	41	HUMIRA-PED>/=40KG UC STARTER	81
FUZEON	37	<i>glucagon emergency</i>	41	HUMIRA-PS/UV/ADOL HS STARTER	81
FYAVOLV	71	<i>glyburide</i>	39	HUMIRA- PSORIASIS/UVEIT STARTER	81
FYCOMPA	15	<i>glyburide micronized</i>	39	HUMULIN 70/30	42
<i> gabapentin</i>	14	<i>glyburide-metformin</i>	40	HUMULIN 70/30 KWIKPEN	42
GALAFOLD	63	<i>glycopyrrolate</i>	61	HUMULIN N	42
<i> galantamine hydrobromide</i>	16	GLYXAMBI	39	HUMULIN N KWIKPEN	42
<i> galantamine hydrobromide er</i>	16	<i>granisetron hcl</i>	19	HUMULIN R	42
GAMMAGARD	77	<i>griseofulvin microsize</i>	20	HUMULIN R U-500 (CONCENTRATED)	42
GAMMAGARD S/D LESS IGA	77	<i>griseofulvin ultramicrosize</i>	20	HUMULIN R U-500 KWIKPEN	42
GAMMAKED	77	<i>guanfacine hcl</i>	48	<i>hydralazine hcl</i>	53
GAMMAPLEX	77	<i>guanfacine hcl er</i>	54	<i>hydrochlorothiazide</i>	52
GAMUNEX-C	77	GUARDIAN LINK 3 TRANSMITTER	45	<i>hydrocodone-acetaminophen</i>	4
GARDASIL 9	83	GUARDIAN REAL-TIME REPLACE PED	45	<i>hydrocodone-ibuprofen</i>	4
<i> gatifloxacin</i>	12	GUARDIAN SENSOR (3)	45	<i>hydrocortisone</i>	67, 85
GATTEX	61	GVOKE HYPOOPEN 2-PACK	40, 41	<i>hydrocortisone (perianal)</i>	58
GAVILYTE-C	62	GVOKE KIT	41	<i>hydrocortisone butyrate</i>	67
<i> gavilyte-g</i>	62	GVOKE PFS	41	<i>hydrocortisone max st</i>	67
<i> gavilyte-n with flavor pack</i>	62	HAEGARDA	76		
GAVRETO	24	<i>hailey 24 fe</i>	71		
		<i>halcinonide</i>	67		
		<i>halobetasol propionate</i>	67		
		<i>haloette</i>	71		
		HALOG	67		
		<i>haloperidol</i>	31		

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

hydrocortisone valerate	67	IOPIDINE	89	KESIMPTA	56
hydrocortisone-acetic acid	90	IPOL	83	ketoconazole	20
hydromorphone hcl	4	ipratropium bromide	91	ketoprofen	3
hydroxychloroquine sulfate	29	ipratropium-albuterol	91	ketoprofen er	3
hydroxyprogesterone caproate ..	74	irbesartan	48	ketorolac tromethamine	3, 89
hydroxyurea	23	irbesartan-hydrochlorothiazide ..	48	KEVZARA	81
hydroxyzine hcl	38	ISENTRESS	35	KINERET	81
hydroxyzine pamoate	90	ISENTRESS HD	35	KINRIX	83
HYPODERMIC NEEDLE	87	isibloom	71	KISQALI (200 MG DOSE)	27
ibandronate sodium	86	ISOLYTE-P IN D5W	61	KISQALI (400 MG DOSE)	27
IBRANCE	24	ISOLYTE-S PH 7.4	58	KISQALI (600 MG DOSE)	27
IBU	3	isoniazid	22	KISQALI FEMARA (200 MG DOSE)	24
ibuprofen	3	isosorbide dinitrate	53	KISQALI FEMARA (400 MG DOSE)	24
icatibant acetate	76	isosorbide mononitrate	53	KISQALI FEMARA (600 MG DOSE)	24
iclevia	71	isosorbide mononitrate er	53		
ICLUSIG	26	isradipine	50		
icosapent ethyl	53	ISTURISA	75		
IDHIFA	25	itraconazole	20	klor-con	59
ILARIS	80	ivermectin	29	klor-con 10	59
imatinib mesylate	26	IWILFIN	24	klor-con m10	59
IMBRUVICA	26	IXCHIQ	83	KLOR-CON M15	59
imipenem-cilastatin	9	IXIARO	83	klor-con m20	59
imipramine hcl	18	JAKAFI	27	KLOXXADO	6
imiquimod	58	JANTOVEN	47	KOSELUGO	27
IMOVAZ RABIES	83	JANUMET	41	kourzeq	56
IMPAVIDO	29	JANUMET XR	41	K-PHOS NO 2	59
INBRIJA	31	JANUVIA	39	KRAZATI	24
incassia	74	JARDIANCE	39	KRINTAFEL	29
INCRELEX	69	jasmiel	71	kurvelo	71
INCRUSE ELLIPTA	91	JAYPIRCA	27	KYNMOBI	30
indapamide	52	JENTADUETO	41	labetalol hcl	49
indomethacin	3	JENTADUETO XR	41	lacosamide	15
indomethacin er	3	jinteli	71	lactulose	62
INFANRIX	83	juleber	71	LAGEVRIO	78
INGREZZA	55	JULUCA	36	lamivudine	34, 36
INLYTA	26	junel 1.5/30	71	lamivudine-zidovudine	36
INQOVI	23	junel 1/20	71	lamotrigine	13, 39
INREBIC	27	junel fe 1.5/30	71	lamotrigine starter kit-blue	13
insulin lispro	42	junel fe 1/20	71	lamotrigine starter kit-green	13
insulin lispro (1 unit dial)	42	junel fe 24	71	lamotrigine starter kit-orange	13
insulin lispro junior kwikpen	42	JUXTAPID	53	lanreotide acetate	76
insulin lispro prot & lispro	42	JYNARQUE	60	lansoprazole	63
INSUPEN SENSITIVE	87	JYNNEOS	83	LANTUS	42
INTELENCE	35	kaitlib fe	71	LANTUS SOLOSTAR	42
INTRALIPID	61	KALYDECO	92	lapatinib ditosylate	27
INTRON A	34	kariva	71	larin 1.5/30	71
introvale	71	kcl in dextrose-nacl	59	larin 1/20	71
INVEGA HAFYERA	32	kcl-lactated ringers-d5w	59	larin fe 1.5/30	71
INVEGA SUSTENNA	32	kelnor 1/35	71	larin fe 1/20	71
INVEGA TRINZA	32	KELNOR 1/50	71	larissia	71
INVELTYS	89	KERENDIA	52	latanoprost	87

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

<i>ledipasvir-sofosbuvir</i>	34	<i>lidocaine hcl (pf)</i>	5	LYTGOBI (12 MG DAILY DOSE)	27
<i>leena</i>	71	<i>lidocaine hcl urethral/mucosal</i>	5	LYTGOBI (16 MG DAILY DOSE)	27
<i>leflunomide</i>	78	<i>lidocaine viscous hcl</i>	5	LYTGOBI (20 MG DAILY DOSE)	27
<i>lenalidomide</i>	23	<i>lidocaine-prilocaine</i>	5	<i>lyza</i>	74
LENVIMA (10 MG DAILY DOSE)	27	<i>lindane</i>	30	<i>magnesium sulfate</i>	59
LENVIMA (12 MG DAILY DOSE)	27	<i>linezolid</i>	7	<i>malathion</i>	30
LENVIMA (14 MG DAILY DOSE)	27	LINZESS	62	<i>maraviroc</i>	37
LENVIMA (18 MG DAILY DOSE)	27	<i>liothyronine sodium</i>	75	<i>marlissa</i>	72
LENVIMA (20 MG DAILY DOSE)	27	LIQREV	93	MARPLAN	17
LENVIMA (24 MG DAILY DOSE)	27	<i>lisinopril</i>	48	MATULANE	22
LENVIMA (4 MG DAILY DOSE)	27	<i>lisinopril-hydrochlorothiazide</i>	48	<i>matzim la</i>	50
LENVIMA (8 MG DAILY DOSE)	27	LITETOUCH PEN NEEDLES	87	MAVYRET	34
<i>lessina</i>	72	LITFULO	58	MAXIDEX	89
<i>letrozole</i>	25	<i>lithium</i>	39	<i>meclizine hcl</i>	18
<i>leucovorin calcium</i>	24, 29	<i>lithium carbonate</i>	39	<i>meclofenamate sodium</i>	3
LEUKERAN	22	<i>lithium carbonate er</i>	39	MEDROL	67
LEUKINE	47	LIVMARLI	61	<i>medroxyprogesterone acetate</i>	74
<i>leuprolide acetate</i>	76	LIVTENCITY	34	<i>mefloquine hcl</i>	29
LEUPROLIDE ACETATE (3 MONTH)	76	LONSURF	23	<i>megestrol acetate</i>	74
<i>levalbuterol hcl</i>	92	<i>loperamide hcl</i>	61	MEKINIST	27
<i>levalbuterol tartrate</i>	92	<i>lopinavir-ritonavir</i>	37	MEKTOVI	28
<i>levetiracetam</i>	13	<i>lorazepam</i>	38	<i>meloxicam</i>	3
<i>levetiracetam er</i>	13	<i>lorazepam intensol</i>	38	<i>memantine hcl</i>	16
<i>levobunolol hcl</i>	89	LORBRENA	27	<i>memantine hcl er</i>	16
<i>levocarnitine</i>	87	<i>loryna</i>	72	MENACTRA	83
<i>levocetirizine dihydrochloride</i>	90	<i>losartan potassium</i>	48	MENEST	72
<i>levofloxacin</i>	12	<i>losartan potassium-hctz</i>	48	MENOSTAR	72
<i>levofloxacin in d5w</i>	12	<i>loteprednol etabonate</i>	89	MENQUADFI	83
<i>levonest</i>	72	<i>lovastatin</i>	52	MENVEO	84
<i>levonorgest-eth est & eth est</i>	72	<i>low-ogestrel</i>	72	<i>meperidine hcl</i>	4
<i>levonorgest-eth estrad 91-day</i>	72	<i>loxapine succinate</i>	31	<i>mercaptopurine</i>	23
<i>levonorgestrel-ethynodiol estrad</i>	72	<i>lubiprostone</i>	62	<i>meropenem</i>	10
<i>levonorg-eth estrad triphasic</i>	72	LUCEMYRA	5	<i>mesalamine</i>	85
<i>levora 0.15/30 (28)</i>	72	LUMAKRAS	24	<i>mesalamine-cleanser</i>	85
<i>levorphanol tartrate</i>	4	LUMIGAN	87	MESNEX	29
LEVO-T	75	LUMRYZ	95	<i>metformin hcl</i>	39
<i>levo-t</i>	75	LUPKYNIS	82	<i>metformin hcl er</i>	39
<i>levothyroxine sodium</i>	75	LUPRON DEPOT (1-MONTH)	76	<i>methadone hcl</i>	4
LEVOXYL	75	LUPRON DEPOT (3-MONTH)	76	<i>methazolamide</i>	51
LEXIVA	37	LUPRON DEPOT (4-MONTH)	76	<i>methenamine hippurate</i>	7
<i>lidocaine</i>	5	LYBALVI	32	<i>methimazole</i>	76
<i>lidocaine hcl</i>	5	<i>lurasidone hcl</i>	32	<i>methocarbamol</i>	95
		<i>lutera</i>	72	<i>methotrexate</i>	82
		LYSODREN	75	<i>methotrexate sodium</i>	82
		<i>lyleq</i>	74	<i>methotrexate sodium (pf)</i>	82
		<i>lyllana</i>	72	<i>methoxsalen rapid</i>	58
		LYNPARZA	27	<i>methscopolamine bromide</i>	61
				<i>methsuximide</i>	14

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

<i>methyldopa</i>	48	<i>morphine sulfate er</i>	4	NICOTROL	6
<i>methylergonovine maleate</i>	87	MOTOFEN	61	<i>nifedipine</i>	50
<i>methylphenidate hcl</i>	55	MOUNJARO	39	<i>nifedipine er</i>	50
<i>methylphenidate hcl er</i>	54, 55	MOVANTIK	62	<i>nifedipine er osmotic release</i>	50
<i>methylphenidate hcl er (cd)</i>	54	<i>moxifloxacin hcl</i>	12	<i>nikki</i>	72
<i>methylphenidate hcl er (la)</i>	54	<i>moxifloxacin hcl in nacl</i>	12	<i>nilutamide</i>	23
<i>methylphenidate hcl er (osm)</i>	54	MOZOBIL	47	NINLARO	24
<i>methylprednisolone</i>	67	MULPLETA	47	<i>nitazoxanide</i>	29
<i>methylprednisolone acetate</i>	21	MULTAQ	49	<i>nitisinone</i>	63
<i>methylprednisolone sodium succ</i>	67	<i>multiple electro type 1 ph 5.5</i>	59	NITRO-BID	53
<i>metoclopramide hcl</i>	61	<i>mupirocin</i>	7	<i>nitrofurantoin</i>	7
<i>metolazone</i>	52	<i>mupirocin calcium</i>	58	<i>nitrofurantoin macrocrystal</i>	7
<i>metoprolol succinate er</i>	49	<i>mycophenolate mofetil</i>	82	<i>nitrofurantoin monohyd macro</i>	7
<i>metoprolol tartrate</i>	49	<i>mycophenolate sodium</i>	82	<i>nitroglycerin</i>	53
<i>metoprolol-hydrochlorothiazide</i>	49	MYRBETRIQ	64	<i>nora-be</i>	74
<i>metronidazole</i>	7	<i>na sulfate-k sulfate-mg sulf</i>	59	<i>norethin ace-eth estrad-fe</i>	72
<i>metyrosine</i>	51	<i>nabumetone</i>	3	<i>norethindrone</i>	74
<i>mexiletine hcl</i>	49	<i>nadolol</i>	49	<i>norethindrone acetate</i>	74
<i>mibelas 24 fe</i>	72	<i>nafcillin sodium</i>	10	<i>norethindrone acet-ethinyl est</i>	72
<i>micafungin sodium</i>	20	<i>naloxone hcl</i>	6	<i>norethindrone-eth estradiol</i>	72
<i>miconazole 3</i>	20	<i>naltrexone hcl</i>	5	<i>norethindron-ethinyl estrad-fe</i>	72
<i>microgestin 1.5/30</i>	72	NAMZARIC	16	<i>norethin-eth estradiol-fe</i>	72
<i>microgestin 1/20</i>	72	<i>naproxen</i>	3	<i>norgestimate-eth estradiol</i>	72
<i>microgestin 24 fe</i>	72	<i>naproxen sodium</i>	3	<i>norgestim-eth estrad triphasic</i>	72
<i>microgestin fe 1.5/30</i>	72	NATACYN	20	NORPACE CR	49
<i>microgestin fe 1/20</i>	72	<i>nateglinide</i>	40	<i>nortrel 0.5/35 (28)</i>	73
<i>midodrine hcl</i>	48	NATPARA	87	<i>nortrel 1/35 (21)</i>	73
MIEBO	88	NAYZILAM	14	<i>nortrel 1/35 (28)</i>	73
<i>mifepristone</i>	69	<i>necon 0.5/35 (28)</i>	72	<i>nortrel 7/7/7</i>	73
<i>miglitol</i>	39	<i>necon 1/35 (28)</i>	72	<i>nortriptyline hcl</i>	18
<i>miglustat</i>	63	<i>nefazodone hcl</i>	18	NORVIR	37
<i>ili</i>	72	<i>neomycin sulfate</i>	6	NUBEQA	23
<i>mimvey</i>	72	<i>neomycin-bacitracin zn-</i>		NUCALA	94
<i>minocycline hcl</i>	12	<i>polymyx</i>	88	NUEDEXTA	55
<i>minoxidil</i>	53	<i>neomycin-polymyxin-dexameth</i>		NUPLAZID	32
<i>mirtazapine</i>	16, 17	<i>.....</i>	89, 90	NURTEC	21
<i>misoprostol</i>	63	<i>neomycin-polymyxin-gramicidin</i>	88	NUTRILIPID	61
M-M-R II	84	<i>neomycin-polymyxin-hc</i>	7, 90	NUZYRA	13
<i>modafinil</i>	95	<i>neo-polycin</i>	88	NYAMYC	20
<i>moexipril hcl</i>	48	<i>neo-polycin hc</i>	88	<i>nylia 1/35</i>	73
<i>molindone hcl</i>	31	NERLYNX	28	<i>nylia 7/7/7</i>	73
<i>mometasone furoate</i>	68, 94	NEUPRO	30	<i>nymyo</i>	73
MONDOXYNE NL	13	NEVANAC	90	<i>nystatin</i>	20
MONOJECT		<i>nevirapine</i>	35, 36	<i>nystatin-triamcinolone</i>	20
HYPODERMIC NEEDLE	87	<i>nevirapine er</i>	35	NYSTOP	20
MONOJECT INSULIN		NEXLETOL	51	OCALIVA	62
SYRINGE	43, 87	NEXLIZET	51	<i>ocella</i>	73
<i>montelukast sodium</i>	91	<i>niacin (antihyperlipidemic)</i>	53	OCTAGAM	77
<i>morphine sulfate</i>	5	<i>niacin er (antihyperlipidemic)</i>	53	<i>octreotide acetate</i>	69, 76
<i>morphine sulfate (concentrate)</i>	5	NIACOR	53	ODEFSEY	36
<i>morphine sulfate (pf)</i>	5	<i>nicardipine hcl</i>	50	ODOMZO	24

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

OFEV	94	<i>oxacillin sodium</i>	10	PERSERIS	33
<i>ofloxacin</i>	12	<i>oxacillin sodium in dextrose</i>	10	<i>phenelzine sulfate</i>	17
OGSIVEO	25	<i>oxandrolone</i>	69	<i>phenobarbital</i>	14
OJJAARA	24	<i>oxaprozin</i>	3	<i>phenoxybenzamine hcl</i>	48
<i>olanzapine</i>	32	<i>oxazepam</i>	38	<i>phenytek</i>	15
<i>olanzapine-fluoxetine hcl</i>	39	OXBRYTA	47	<i>phenytoin</i>	15, 16
<i>olmesartan medoxomil</i>	48	<i>oxcarbazepine</i>	15	<i>phenytoin sodium extended</i>	16
<i>olmesartan medoxomil-hctz</i>	48	<i>oxybutynin chloride</i>	65	PIFELTRO	36
<i>olopatadine hcl</i>	88, 90	<i>oxybutynin chloride er</i>	65	<i>pilocarpine hcl</i>	56, 89
OLPRUVA (2 GM DOSE)	63	<i>oxycodone hcl</i>	5	<i>pimecrolimus</i>	58
OLPRUVA (3 GM DOSE)	64	<i>oxycodone hcl er</i>	4	<i>pimozide</i>	31
OLPRUVA (4 GM DOSE)	64	<i>oxycodone-acetaminophen</i>	5	<i>pimtrea</i>	73
OLPRUVA (5 GM DOSE)	64	OZEMPIC (0.25 OR 0.5 MG/DOSE)	40	<i>pindolol</i>	49
OLPRUVA (6 GM DOSE)	64	OZEMPIC (1 MG/DOSE)	40	<i>pioglitazone hcl</i>	40
OLPRUVA (6.67 GM DOSE)	64	OZEMPIC (2 MG/DOSE)	40	<i>pioglitazone hcl-glimepiride</i>	41
OLUMIANT	78	<i>paliperidone er</i>	32	<i>pioglitazone hcl-metformin hcl</i>	41
<i>omega-3-acid ethyl esters</i>	53	PANRETIN	29	<i>piperacillin sod-tazobactam so</i>	11
<i>omeprazole</i>	63	<i>pantoprazole sodium</i>	63	PIQRAY (200 MG DAILY DOSE)	25
<i>omeprazole magnesium</i>	63	PANZYGA	77	PIQRAY (250 MG DAILY DOSE)	25
ONCASPAR	24	<i>paricalcitol</i>	86	PIQRAY (300 MG DAILY DOSE)	25
<i>ondansetron</i>	19	<i>paromomycin sulfate</i>	6	<i>pirfenidone</i>	94
<i>ondansetron hcl</i>	19	<i>paroxetine hcl</i>	18, 38	<i>permella 1/35</i>	73
ONETOUCH ULTRA 2	45	<i>paroxetine hcl er</i>	18	<i>piroxicam</i>	3
ONETOUCH ULTRA MINI	45	PASER	22	<i>pitavastatin calcium</i>	52
ONETOUCH VERIO	45	PAXLOVID (150/100)	78	PLASMA-LYTE A	59
ONETOUCH VERIO FLEX SYSTEM	45	PAXLOVID (300/100)	78	PLENAMINE	59
ONETOUCH VERIO IQ SYSTEM	45	<i>pazopanib hcl</i>	28	<i>plerixafor</i>	47
ONUREG	23	PEDIARIX	84	<i>pnv-dha</i>	61
OPSUMIT	93	PEDVAX HIB	84	<i>podofilox</i>	58
OPTIUMEZ TEST	45	<i>peg 3350-kcl-na bicarb-nacl</i>	62	<i>polycin</i>	88
OPZELURA	58	<i>peg-3350/electrolytes</i>	62	<i>polymyxin b sulfate</i>	8
ORACIT	59	<i>peg-3350/electrolytes/ascorbat</i>	62	<i>polymyxin b-trimethoprim</i>	88
ORENCIA	78	PEGASYS	34	POMALYST	23
ORENCIA CLICKJECT	78	<i>peg-kcl-nacl-nasulf-na asc-c</i>	63	<i>portia-28</i>	73
ORENITRAM	93	PEMAZYRE	28	<i>posaconazole</i>	20
ORENITRAM MONTH 1	93	PEN NEEDLES	87	<i>potassium chloride</i>	59
ORENITRAM MONTH 2	93	PENBRAYA	84	<i>potassium chloride crys er</i>	59
ORENITRAM MONTH 3	93	<i>penicillamine</i>	60	<i>potassium chloride er</i>	59
ORFADIN	64	<i>penicillin g pot in dextrose</i>	10	<i>potassium citrate er</i>	59
ORGOVYX	24	<i>penicillin g potassium</i>	11	<i>potassium cl in dextrose 5%</i>	59
ORKAMBI	92	<i>penicillin g sodium</i>	11	PRALUENT	53
ORLADEYO	51	<i>penicillin v potassium</i>	11	<i>pramipexole dihydrochloride</i>	30
<i>orphenadrine citrate er</i>	95	PENTACEL	84	<i>prasugrel hcl</i>	46
ORSERDU	23	<i>pentamidine isethionate</i>	30	<i>pravastatin sodium</i>	52
<i>orsythia</i>	73	<i>pentoxifylline er</i>	51	<i>praziquantel</i>	29
<i>oseltamivir phosphate</i>	37	<i>perindopril erbumine</i>	48	<i>prazosin hcl</i>	48
OSMOPREP	62	PERIOGARD	56	PRECISION XTRA BLOOD GLUCOSE	45
OSPHENA	75	<i>permethrin</i>	30		
OTEZLA	82	<i>perphenazine</i>	31		
		<i>perphenazine-amitriptyline</i>	18		

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

PRED MILD	90	<i>propranolol hcl</i>	50	RELISTOR	62
PRED-G	90	<i>propranolol hcl er</i>	50	RELYVRIO	55
PRED-G S.O.P.	90	<i>propylthiouracil</i>	76	<i>repaglinide</i>	40
<i>prednicarbate</i>	68	PROQUAD	84	REPATHA	53
<i>prednisolone</i>	68	PROSOL	59	REPATHA PUSHTRONEX	
<i>prednisolone acetate</i>	90	<i>protriptyline hcl</i>	18	SYSTEM	53
<i>prednisolone sodium phosphate</i>	68, 90	PTS PANELS GLUCOSE		REPATHA SURECLICK	53
<i>prednisone</i>	68	TEST	45	RESTASIS	88
PREDNISONE INTENSOL	68	PULMICORT FLEXHALER	91	RESTASIS MULTIDOSE	88
PREFERRED PLUS		PULMOZYME	92	RETACRIT	47
INSULIN SYRINGE	43	PURE COMFORT PEN		RETEVMO	24
PREFEST	73	NEEDLE	87	REXULTI	33
<i>pregabalin</i>	55	PURIXAN	23	REYATAZ	37
PREHEVBRIOTM	84	<i>pyrazinamide</i>	22	REZLIDHIA	25
PREMARIN	73	<i>pyridostigmine bromide</i>	22	REZUROCK	82
PREMASOL	59	<i>pyridostigmine bromide er</i>	22	RHOPRESSA	87
PREMPHASE	73	<i>pyrimethamine</i>	30	<i>ribavirin</i>	34
PREMPRO	73	PYRUKYND	46	RIDAURA	78
<i>prenatal</i>	61	PYRUKYND TAPER PACK	46	<i>rifabutin</i>	22
<i>pretomanid</i>	22	QINLOCK	28	<i>rifampin</i>	22
<i>prevalite</i>	53	QUADRACEL	84	<i>riluzole</i>	55
<i>previfem</i>	73	<i>quetiapine fumarate</i>	33	<i>rimantadine hcl</i>	38
PREVYMIS	34	QUICKTEK TEST	45	RINVOQ	78, 79
PREZCOBIX	37	<i>quinapril hcl</i>	48	<i>risedronate sodium</i>	86
PREZISTA	37	<i>quinapril-hydrochlorothiazide</i>	48	RISPERDAL CONSTA	33
PRIFTIN	22	<i>quinidine gluconate er</i>	49	<i>risperidone</i>	33
<i>primaquine phosphate</i>	30	<i>quinidine sulfate</i>	49	<i>risperidone microspheres er</i>	33
<i>primidone</i>	14	<i>quinine sulfate</i>	30	<i>ritonavir</i>	37
PRIORIX	84	RABAVERT	84	<i>rivastigmine</i>	16
PRIVIGEN	77	<i>raloxifene hcl</i>	75	<i>rivastigmine tartrate</i>	16
PROAIR RESPICLICK	92	<i>ramelteon</i>	95	<i>rizatriptan benzoate</i>	21
<i>probenecid</i>	21	<i>ramipril</i>	48	ROCKLATAN	88
PROCALAMINE	61	<i>ranolazine er</i>	51	<i>roflumilast</i>	93
<i>procyclizine</i>	31	<i>rasagiline mesylate</i>	31	<i>ropinirole hcl</i>	30
<i>procyclizine maleate</i>	31	RAVICTI	64	<i>ropinirole hcl er</i>	30
PROCTO-MED HC	58	<i>reclipsen</i>	73	ROSADAN	8
PROCTO-PAK	58	RECOMBIVAX HB	84	<i>rosuvastatin calcium</i>	52
PROCTOSOL HC	58	RECORLEV	68	ROTARIX	84
PROCTOZONE-HC	58	RECTIV	54	ROTATEQ	84
PRODIGY NO CODING		REGRANEX	58	<i>roweepra</i>	13
BLOOD GLUC	45	RELENZA DISKHALER	38	ROZLYTREK	28
PROGRAF	82	RELION BLOOD GLUCOSE		RUBRACA	28
PROLASTIN-C	64	TEST	46	RUCONEST	76
PROLIA	86	RELION CONFIRM/MICRO		<i>rufinamide</i>	16
PROMACTA	47	TEST	46	RUKOBIA	37
<i>promethazine hcl</i>	19	RELION INSULIN		RUZURGI	64
PROMETHEGAN	19	SYRINGE	43	RYDAPT	28
<i>propafenone hcl</i>	49	RELI-ON INSULIN		RYTARY	31
<i>propafenone hcl er</i>	49	SYRINGE	43	<i>sajazir</i>	76
<i>proparacaine hcl</i>	88	RELION PRIME TEST	46	<i>salsalate</i>	3
		RELION ULTIMA TEST	46	SANDIMMUNE	82

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

SANTYL	58	SOTYKTU	79	SYNTROID	75
<i>sapropterin dihydrochloride</i>	64	SPIRIVA HANDIHALER	91	TABLOID	23
SAVELLA	55	SPIRIVA RESPIMAT	91	TABRECTA	28
SAVELLA TITRATION		<i>spironolactone</i>	52	<i>tacrolimus</i>	58, 82
PACK	55	<i>spironolactone-hctz</i>	52	<i>tadalafil</i>	65
SCEMBLIX	28	<i>sprintec 28</i>	73	<i>tadalafil (pah)</i>	93
<i>scopolamine</i>	19	SPRITAM	13	TAFINLAR	28
SECUADO	33	SPRYCEL	28	TAGRISSO	24
<i>selegiline hcl</i>	31	<i>sps</i>	60	TAKHYRO	77
<i>selenium sulfide</i>	58	<i>sronyx</i>	73	TALTZ	79
SELZENTRY	37	<i>ssd</i>	8	TALZENNA	28
SEREVENT DISKUS	92	STAMARIL	84	<i>tamoxifen citrate</i>	23
<i>sertraline hcl</i>	18	<i>stavudine</i>	36	<i>tamsulosin hcl</i>	65
<i>setlakin</i>	73	STELARA	79	TAPERDEX 7-DAY	68
<i>sevelamer carbonate</i>	65	STIMATE	69	<i>tarina 24 fe</i>	73
<i>sevelamer hcl</i>	65	STIOLTO RESPIMAT	94	<i>tarina fe 1/20 eq</i>	73
<i>sharobel</i>	75	STIVARGA	28	TARPEYO	68
SHINGRIX	84	<i>streptomycin sulfate</i>	6	TASIGNA	28
SIGNIFOR	76	STRIBILD	35	<i>tasimelteon</i>	55
SIGNIFOR LAR	76	<i>subvenite</i>	13	TAVALISSE	46
SIKLOS	23	<i>subvenite starter kit-blue</i>	13	TAVNEOS	82
<i>sildenafil citrate</i>	93	<i>subvenite starter kit-green</i>	13	<i>taysofy</i>	73
SILIQ	79	<i>subvenite starter kit-orange</i>	13	<i>tazarotene</i>	58
<i>silodosin</i>	65	<i>sucralfate</i>	63	TAZICEF	9
<i>silver sulfadiazine</i>	8	<i>sulfacetamide sodium</i>	12	TAZORAC	58
SIMBRINZA	89	<i>sulfacetamide sodium (acne)</i>	58	<i>taztia xt</i>	50
SIMPONI	82	<i>sulfacetamide-prednisolone</i>	90	TAZVERIK	28
<i>simvastatin</i>	52	<i>sulfadiazine</i>	12	TDVAX	84
<i>sirolimus</i>	82	<i>sulfamethoxazole-trimethoprim</i>	12	TECHLITE INSULIN	
SIRTURO	22	<i>sulfasalazine</i>	85	SYRINGE	43
SITAVIG	35	<i>sulindac</i>	3	TECHLITE PEN NEEDLES	87
SIVEXTRO	8	<i>sumatriptan succinate</i>	22	TEFLARO	9
SKYCLARYS	55	<i>sunitinib malate</i>	28	TEGLUTIK	55
SKYRIZI	79	SUNLENCA	37	TEGSEDI	64
SKYRIZI (150 MG DOSE)	79	SUPRAX	9	<i>telmisartan</i>	48
SKYRIZI PEN	79	SURE COMFORT PEN		<i>telmisartan-amlodipine</i>	51
<i>sodium chloride</i>	59, 60	NEEDLES	87	<i>telmisartan-hctz</i>	48
<i>sodium fluoride</i>	60	SYEDA	73	<i>temazepam</i>	95
<i>sodium oxybate</i>	95	SYMBICORT	94	TENIVAC	84
<i>sodium phenylbutyrate</i>	64	SYMDEKO	92	<i>tenofovir disoproxil fumarate</i>	36
<i>sodium polystyrene sulfonate</i>	60	SYMJEPI	92	TEPMETKO	28
<i>sofosbuvir-velpatasvir</i>	34	SYMLINPEN 120	40	<i>terazosin hcl</i>	65
<i>solifenacin succinate</i>	65	SYMLINPEN 60	40	<i>terbinafine hcl</i>	20
SOLOSEC	8	SYMPAZAN	14	<i>terbutaline sulfate</i>	92
SOLTAMOX	23	SYMTUZA	35	<i>terconazole</i>	20
SOMATULINE DEPOT	76	SYNAGIS	80	<i>teriflunomide</i>	56
SOMAVERT	76	SYNAREL	76	<i>teriparatide</i>	86
<i>sorafenib tosylate</i>	28	SYNDROS	19	<i>teriparatide (recombinant)</i>	86
<i>sorine</i>	49	SYNJARDY	40	<i>testosterone</i>	69
<i>sotalol hcl</i>	49	SYNJARDY XR	40	<i>testosterone cypionate</i>	69
<i>sotalol hcl (af)</i>	49	SYNRIBO	24	<i>testosterone enanthate</i>	69

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

tetrabenazine	55	TRAVASOL	60	TRUSELTIQ (75MG DAILY DOSE)	28
<i>tetracycline hcl</i>	13	<i>travoprost (bak free)</i>	87	TUKYSA	24
TEXACORT	68	<i>trazodone hcl</i>	18	TURALIO	28
THALOMID	23	TRECATOR	22	<i>turqoz</i>	74
THEO-24	93	TRELEGY ELLIPTA	95	TWINRIX	85
<i>theophylline</i>	93	TREMFYA	79	<i>tyblume</i>	74
<i>theophylline er</i>	93	<i>tretinoin</i>	29, 58	TYBOST	37
<i>thioridazine hcl</i>	31	TREXALL	82	<i>tydemy</i>	74
<i>thiotepa</i>	22	<i>triamicinolone acetonide</i>	56, 68	TYPHIM VI	85
<i>thiothixene</i>	31	<i>triamterene</i>	52	UBRELVY	21
TIADYLT ER	50	<i>triamterene-hctz</i>	52	UKONIQ	28
<i>tiadylt er</i>	50	<i>triazolam</i>	95	ULTICARE PEN NEEDLES	87
<i>tiagabine hcl</i>	14	TRIDERM	68	ULTILET PEN NEEDLE	87
TIBSOVO	25	<i>trientine hcl</i>	60	ULTRA-THIN II PEN NEEDLES	87
TICOVAC	84	<i>tri-estarrylla</i>	73	UNITHROID	75
<i>tigecycline</i>	8	<i>trifluoperazine hcl</i>	31	UPTRAVI	94
<i>tilia fe</i>	73	<i>trifluridine</i>	35	UPTRAVI TITRATION	94
<i>timolol maleate</i>	21, 89	<i>trihexyphenidyl hcl</i>	30	<i>ursodiol</i>	62
<i>timolol maleate (once-daily)</i>	89	TRIJARDY XR	40	VABOMERE	8
<i>timolol maleate pf</i>	89	TRIKAFTA	93	<i>valacyclovir hcl</i>	35
<i>tinidazole</i>	8	<i>tri-legest fe</i>	73	VALCHLOR	22
<i>tiotropium bromide monohydrate</i>	91	<i>tri-lo-estarrylla</i>	73	<i>valganciclovir hcl</i>	34
TIVICAY	35	<i>tri-lo-sprintec</i>	73	<i>valproic acid</i>	14
TIVICAY PD	35	<i>trimethoprim</i>	8	<i>valsartan</i>	48
<i>tizanidine hcl</i>	34	<i>tri-mili</i>	73	<i>valsartan-hydrochlorothiazide</i>	48
TOBI PODHALER	92	<i>trimipramine maleate</i>	18	VALTOCO 10 MG DOSE	14
TOBRADEX	90	<i>trinessa (28)</i>	73	VALTOCO 15 MG DOSE	14
<i>tobramycin</i>	6, 93	TRINTELLIX	17	VALTOCO 20 MG DOSE	14
<i>tobramycin sulfate</i>	6	<i>tri-nymyo</i>	73	VALTOCO 5 MG DOSE	14
<i>tobramycin-dexamethasone</i>	90	<i>tri-sprintec</i>	73	<i>vancomycin hcl</i>	8
<i>tolcapone</i>	30	TRIUMEQ	36	VANDAZOLE	8
<i>tolterodine tartrate</i>	65	TRIUMEQ PD	36	VANFLYTA	28
<i>tolterodine tartrate er</i>	65	<i>trivora (28)</i>	73	VAQTA	85
<i>tolvaptan</i>	60	TRI-VYLIBRA	74	<i>varenicline tartrate</i>	6
<i>topiramate</i>	15	<i>tri-vylibra lo</i>	73	<i>varenicline tartrate (starter)</i>	6
<i>topiramate er</i>	15	TRIZIVIR	36	VARIVAX	85
<i>toremifene citrate</i>	23	TROPHAMINE	60	VARIZIG	85
<i>torsemide</i>	51	<i>trospium chloride</i>	65	<i>velivet</i>	74
TOUJEO MAX SOLOSTAR	43	<i>trospium chloride er</i>	65	VELTASSA	60
TOUJEO SOLOSTAR	43	TRUEPLUS 5-BEVEL PEN NEEDLES	87	VENCLEXTA	24
TOVET	58	TRULICITY	40	VENCLEXTA STARTING PACK	24
TPN ELECTROLYTES	61	TRUMENBA	85	<i>venlafaxine besylate er</i>	39
TRACLEER	94	TRUQAP	28	<i>venlafaxine hcl</i>	39
TRADJENTA	40	TRUSELTIQ (100MG DAILY DOSE)	28	<i>venlafaxine hcl er</i>	18
<i>tramadol hcl</i>	5	TRUSELTIQ (125MG DAILY DOSE)	28	VENTAVIS	94
<i>tramadol-acetaminophen</i>	5	TRUSELTIQ (50MG DAILY DOSE)	28	VEOZAH	74
<i>trandolapril</i>	49			<i>verapamil hcl</i>	51
<i>trandolapril-verapamil hcl er</i>	49			<i>verapamil hcl er</i>	50, 51
<i>tranexamic acid</i>	47				
<i>tranylcypromine sulfate</i>	17				

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

VERQUVO	51	XOSPATA	25	ZURZUVAE	17
VERSACLOZ	33	XPOVIO (100 MG ONCE		ZYDELIG	25
VERZENIO	25	WEEKLY)	24	ZYKADIA	29
VICTOZA	40	XPOVIO (40 MG ONCE		ZYPREXA RELPREVV	33
<i>vienna</i>	74	WEEKLY)	24		
<i>vigabatrin</i>	15	XPOVIO (40 MG TWICE			
<i>vigadrone</i>	15	WEEKLY)	25		
VIGADRONE	15	XPOVIO (60 MG ONCE			
<i>vigpoder</i>	15	WEEKLY)	25		
VIIBRYD STARTER PACK	18	XPOVIO (60 MG TWICE			
VIJOICE	64	WEEKLY)	25		
<i>vilazodone hcl</i>	18	XPOVIO (80 MG ONCE			
VIRACEPT	37	WEEKLY)	25		
VIREAD	36	XPOVIO (80 MG TWICE			
VITRAKVI	25	WEEKLY)	25		
VIVITROL	6	XTANDI	23		
VIVJOA	20	XYREM	95		
VIZIMPRO	28	XYWAV	95		
VONJO	29	YF-VAX	85		
<i>voriconazole</i>	21	YONSA	23		
VOSEVI	34	<i>yuvafem</i>	74		
VOTRIENT	29	<i>zafirlukast</i>	91		
VOWST	62	<i>zaleplon</i>	95		
VP-PNV-DHA	61	ZARXIO	47		
VRAYLAR	33	ZAVZPRET	21		
VTAMA	58	ZEJULA	29		
<i>vyfemla</i>	74	ZELAPAR	31		
VYLIBRA	74	ZELBORAF	29		
VYNDAMAX	69	ZEMAIRA	64		
VYNDAQEL	69	ZEMDRI	6		
<i>warfarin sodium</i>	47	ZENPEP	64		
WELIREG	24	ZEPOSIA	56		
<i>wymzya fe</i>	74	ZEPOSIA 7-DAY STARTER			
XALKORI	29	PACK	56		
XARELTO	46	ZEPOSIA STARTER KIT	56		
XARELTO STARTER PACK	46	ZERBAXA	9		
XATMEP	82	<i>zidovudine</i>	36		
XCOPRI	13, 14	<i>zileuton er</i>	91		
XCOPRI (250 MG DAILY DOSE)	13	<i>ziprasidone hcl</i>	39		
XCOPRI (350 MG DAILY DOSE)	13	<i>ziprasidone mesylate</i>	33		
XELJANZ	79	ZIRGAN	34		
XELJANZ XR	79	ZOKINVY	64		
XERMELO	62	ZOLINZA	25		
XGEVA	86	<i>zolpidem tartrate</i>	95		
XIFAXAN	8	<i>zolpidem tartrate er</i>	95		
XIGDUO XR	40	ZONISADE	14		
XOFLUZA (40 MG DOSE)	38	<i>zonisamide</i>	14		
XOFLUZA (80 MG DOSE)	38	ZORBTIVE	69		
XOLAIR	79, 80	ZOSYN	11		
		<i>zovia 1/35 (28)</i>	74		
		ZTALMY	15		

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



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This formulary was updated on 04/25/2024. For more recent information or other questions, contact us at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week), or visit fallonhealth.org/navicare.

Important Message About What You Pay for Vaccines – Some vaccines are considered medical benefits. Other vaccines are considered Part D drugs. Our plan covers most Part D vaccines at no cost to you.



If you have questions, please call NaviCare at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week). The call is free. For more information, visit fallonhealth.org/navicare.