Sentara® Health Plans

SENTARA COMMUNITY PLAN PRESCRIPTION DRUG FORMULARY

(11/01/2026 - 11/01/2026)

PLEASE READ: This document contains information about some of the drugs we cover in this plan.This Formulary is subject to change at any time. You will receive notice when necessary.

This formulary was updated on10/26/2026

INTRODUCTION

This is a drug list created by Sentara Health Plans as a guide for doctor, pharmacists, health care professionals, and members in the selection of cost-effective medication therapy. Sentara Health Plans recognizes that drug therapy is an important part of effective health management.

The drugs listed have been reviewed by Sentara Health Plans Pharmacy and Therapeutics committee (P&T committee) and are approved as preferred. This drug list is reflective of current medical practice as of the date of review.

The information contained in this drug list and its appendices is provided for doctors, pharmacists, health care professionals, and members. This drug list is not final and is subject to change. This drug list is not a substitute for the knowledge, expertise, skill, and judgment of the medical provider in his or her choice of prescription drugs. All the information in this drug list is provided as a reference for drug therapy treatment. Specific drug choice for an individual patient rests solely with the medical doctor. This document must follow state rules and laws, including rules about using generic drugs, controlled substances scheduled, choosing brand drugs, and when generic drugs must be used.

This drug list is continually reviewed and adjusted. This process does not allow this document to be completely correct at all times. To allow regular changes, an updated online version of this formulary is available online. Sentara Health Plans welcomes your input and feedback on the information provided in this document.

Virginia Medicaid Pharmacy and Therapeutics (P&T) Committee

The Medicaid Pharmacy and Therapeutics Committee (P&T Committee) reviews information about how medicines work and how much they cost.

The Committee's doctors and pharmacists advise DMAS (the Department of Medical Assistance Services) about the pharmacy program.

For the Preferred Drug List (PDL) program, the Committee chooses which medicines are "preferred." Preferred medicines must be safe, work well, and meet cost standards based on the data available. The Committee looks at cost only after the medicine is found to be safe and effective.

The Committee also helps decide the rules for when it is okay to approve a medicine that is *not* on the preferred list.

Some medicines on the PDL have extra rules or clinical criteria. Providers may need to give more information when asking for approval of these medicines.

The full list of PDL rules and criteria can be found at:
virginiamedicaidpharmacyservices.com/

DEFINITIONS

Brand Medication - A drug that is usually manufactured and sold under a name or trademark by a drug manufacturer, or a medication that Sentara Health Plans Pharmacy Benefits Manager (PBM) identified as a brand medication.

Formulary Drug List – A list of preferred drugs based on clinical effectiveness, relative safety, and cost in comparison to similar drugs within a therapeutic class. As new medications become available, they may be considered not covered until they have been reviewed by the P&T Committee.

Generic Medication - A drug that has the same active ingredient as a brand drug or is identified as a generic drug by Sentara Health Plans Pharmacy Benefits Manager. Generic drugs approved by the United States Food and Drug Administration (FDA) are just as safe and effective as brand-name drugs. They have the same active ingredients, the same use, the same quality standards, and the same strength and form as the brand name medications.

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

Prior Authorization (PA) - The process of obtaining approval for certain prescription drugs (prior to dispensing) according to Sentara Health Plans guidelines. The ordering doctor must obtain approval from Sentara Health Plans. The list of prescription drugs requiring prior authorization is subject to periodic review and modification by Sentara Health Plans.

Step Therapy (ST) - The process of getting approval for certain prescription drugs that based on Sentara Health Plans guidelines, requires members to try one or more first or second line medicines before they are covered. If, for medical reasons, you cannot use those first-or-second line medicines, the doctor should request a prior authorization as explained in the Prior Authorization Process section below.

Specialty Medication – A medication classified by Sentara Health Plans as a specialty drug. Specialty drugs have unique uses and are generally prescribed for people with complex or ongoing medical conditions. These medications must be prescribed by a medical provider and dispensed by a participating specialty pharmacy, depending on the medication. Specialty Medications are limited to a 30-day supply.

Quantity Limit (QL) - A maximum quantity per prescription and/or time period. Quantity limits are developed based on FDA-approved medication labeling and nationally recognized therapeutic clinical guidelines.

BENEFIT COVERAGE AND LIMITATIONS

This drug list is for reference purposes only and does not guarantee or define benefit coverage and limitations. You may contact Sentara Health Plans Member Services regarding any coverage questions by calling 1-800-881-2166 (TTY: 711), Monday through Friday, 8 a.m. to 8 p.m. Please note that the formulary process generally changes throughout the year. These changes typically occur due to, but are not limited to, the following reasons: approval of new medications, availability of newly approved generics, changes in clinical data, and medication

safety concerns. Sentara Health Plans is not responsible for payment if a medication was left out or listed in error.

The following topics may or may not apply to individual members depending on member-specific benefit parameters.

Coverage

Sentara Health Plans reserves the right to make changes in coverage criteria for covered products and services. Coverage criteria are medical and pharmaceutical protocols used to determine payment of products and services and are based on independent clinical practice guidelines and standards of care established by government agencies and medical and pharmaceutical societies.

Your retail prescription drug coverage includes up to a 34-day supply of a medication. In most cases, your prescription may be refilled after 75% of your previous supply. Select drugs may be available up to a 90-day supply if identified as a maintenance medication by Virginia Medicaid. The list of covered drugs for DMAS 90-day Medication Maintenance Management List can be viewed at sentaramedicaid.com/drugs.

Sentara Health Plans will cover up to a 12-month supply of contraceptives, including all oral tablets, patches, vaginal rings, and injections that are used on a routine basis when dispensed from a pharmacy.

Specialty Drugs are only available from a Plan Specialty Pharmacy and are limited to a 30-day supply unless limited by manufacturer packaging.

Prior Authorization Process

Some prescription drugs require approval from Sentara Health Plans before they can be filled. The ordering doctor must obtain approval from Sentara Health Plans. The prior authorization process requires the practitioner to provide information to support the clinical criteria that must be met for approval. The completed drug authorization request form and supporting clinical documentation must be submitted to Sentara Health Plans by fax to 1-800-750-9692. The pharmacy drug authorization request forms are available online. Providers have the option to submit an electronic prior authorization through Surescripts ePA.

Information needed to make coverage decisions of medications requiring prior authorization may include lab values, prescription history, a statement of medical necessity and any other pertinent information to satisfy the established coverage guideline for the requested medication. In most cases, coverage decisions will be made within 24 hours.

Member-Initiated Prior Authorization Process

Members can request a prior authorization by contacting the Sentara Health Plans Member Services at 1-800-881-2166 (TTY: 711), Monday through Friday, 8 a.m. to 8 p.m. When calling, the member should have the doctor's contact information (phone number) and any relevant information related to the request to provide to the Member Services representative. Members

may also initiate the prior authorization process by logging into the Member Portal and then clicking the link "Prior Authorization Pharmacy Request Form".

Quantity Limit Exception

Certain medications allow for a maximum quantity per prescription and/or time period. Medications with applicable quantity limits are noted on the drug list. If a prescription exceeds the quantity limit, the doctor should provide a statement of medical necessity and request a prior authorization for the quantity limit exception as described above.

Non-covered Drug Requests

A request for a non-covered drug requires documentation from the member's medical records and/or prescription claims history verifying the following:

- Statement of medical necessity; and
- Contraindications to ALL other formulary alternatives; or
- Therapeutic failure of adequate trials of one to three months of each and ALL other formulary alternatives.

Non-formulary requests may be requested by the doctor through the prior authorization process as described above.

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

What's Not Covered: Common Exclusions

Certain items may be excluded from your pharmacy benefit coverage. Prior authorization is generally not available for medications specifically excluded by benefit design. Commonly excluded products may include, but are not limited to:

- Drugs used for anorexia or weight gain.
- Drugs used to promote fertility.
- Medications whose primary purpose is cosmetic, including but not limited to hair growth. Agents used in the treatment of covered Gender Dysphoria services are not primarily cosmetic.
- Medications used for the treatment of sexual or erectile dysfunction, unless such agents are used to treat a condition other than sexual or erectile dysfunction, for which the agents have been approved by the FDA.
- All DESI (Drug Efficacy Study Implementation) drugs as defined by the FDA to be less than effective. Compound prescriptions, which include a DESI drug, are not covered.
- Drugs that have been recalled.
- Experimental drugs or non-FDA-approved drugs, except for children and youth covered under EPSDT.
- Any prescription drugs marketed by a manufacturer who does not participate in the Medicaid Drug Rebate Program.

Mandated Generic Substitution

Sentara Health Plans advocates the use of cost-effective generic medications where FDA-labeled brand-equivalent medications are available. A generic medication is approved by the FDA once the manufacturer has proven that it has the same active ingredient(s) as the brand-name medication. Generally, generic medications cost less than brand-name medications.

Virginia Medicaid requires that multiple-source drugs be filled with generics unless the doctor requests “Brand Medically Necessary” or if the brand-name drug is listed on the Virginia Medicaid Preferred Drug List as the preferred product.

NOTICE

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

These listings do not imply or constitute an endorsement, sponsorship, or recommendation by Sentara Health Plans or Express Scripts. When viewing this formulary via the Internet, please be advised that this formulary is updated periodically, and changes may appear prior to their effective date to allow for client notification.

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

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List of Abbreviations

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

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

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

ST: Step Therapy. In some cases, the Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
clotrimazole mucous membrane	Generic	
fluconazole	Generic	
griseofulvin microsize	Generic	
nystatin oral suspension	Generic	
nystatin oral tablet	Generic	
terbinafine hcl oral	Generic	
ANTIVIRALS		
abacavir oral solution	Generic	QL (30 ML per 1 day)
abacavir oral tablet	Generic	QL (2 EA per 1 day)
abacavir-lamivudine	Generic	QL (1 EA per 1 day)
acyclovir oral	Generic	
amantadine hcl	Generic	
APRETUDE	Brand	QL (1 ML per 28 days)
atazanavir oral capsule 150 mg, 200 mg	Generic	QL (2 EA per 1 day)
atazanavir oral capsule 300 mg	Generic	QL (1 EA per 1 day)
BIKTARVY ORAL TABLET 30-120-15 MG	Brand	PA for age less than 16 years; QL (1 EA per 1 day)
BIKTARVY ORAL TABLET 50-200-25 MG	Brand	QL (1 EA per 1 day)
CABENUVA INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 400 MG/2 ML- 600 MG/2 ML	Brand	QL (4 ML per 28 days)
CABENUVA INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 600 MG/3 ML- 900 MG/3 ML	Brand	QL (6 ML per 28 days)
CIMDUO	Brand	QL (1 EA per 1 day)
COMPLERA	Brand	QL (1 EA per 1 day)
darunavir oral tablet 600 mg	Generic	QL (2 EA per 1 day)
darunavir oral tablet 800 mg	Generic	QL (1 EA per 1 day)
DELSTRIGO	Brand	QL (1 EA per 1 day)
DESCOVY	Brand	QL (1 EA per 1 day)
DOVATO	Brand	QL (1 EA per 1 day)
EDURANT	Brand	QL (2 EA per 1 day)
EDURANT PED	Brand	QL (6 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
efavirenz oral tablet	Generic	QL (1 EA per 1 day)
efavirenz-emtricitabin-tenofov	Generic	QL (1 EA per 1 day)
emtricitabine	Generic	QL (1 EA per 1 day)
emtricitabine-tenofovir (tdf)	Generic	QL (1 EA per 1 day)
EMTRIVA ORAL CAPSULE	Brand	QL (1 EA per 1 day)
EMTRIVA ORAL SOLUTION	Brand	QL (24 ML per 1 day)
entecavir	Generic	PA for age less than 2 years; QL (1 EA per 1 day)
EPIVIR ORAL SOLUTION	Brand	QL (30 ML per 1 day)
etravirine	Generic	QL (2 EA per 1 day)
EVOTAZ	Brand	QL (1 EA per 1 day)
famciclovir	Generic	
fosamprenavir	Generic	QL (4 EA per 1 day)
GENVOYA	Brand	QL (1 EA per 1 day)
INTELENCE ORAL TABLET 100 MG, 200 MG	Brand	QL (2 EA per 1 day)
INTELENCE ORAL TABLET 25 MG	Brand	QL (4 EA per 1 day)
ISENTRESS HD	Brand	QL (2 EA per 1 day)
ISENTRESS ORAL POWDER IN PACKET	Brand	QL (2 EA per 1 day)
ISENTRESS ORAL TABLET	Brand	QL (2 EA per 1 day)
ISENTRESS ORAL TABLET,CHEWABLE	Brand	QL (6 EA per 1 day)
JULUCA	Brand	QL (1 EA per 1 day)
KALETRA ORAL SOLUTION	Brand	QL (10 ML per 1 day)
lamivudine oral solution	Generic	QL (30 ML per 1 day)
lamivudine oral tablet 150 mg	Generic	QL (2 EA per 1 day)
lamivudine oral tablet 300 mg	Generic	QL (1 EA per 1 day)
lamivudine-zidovudine	Generic	QL (2 EA per 1 day)
lopinavir-ritonavir oral tablet 100-25 mg	Generic	QL (10 EA per 1 day)
lopinavir-ritonavir oral tablet 200-50 mg	Generic	QL (4 EA per 1 day)
maraviroc oral tablet 150 mg	Generic	QL (2 EA per 1 day)
maraviroc oral tablet 300 mg	Generic	QL (4 EA per 1 day)
MAVYRET ORAL PELLETS IN PACKET	Brand	PA for age less than 3 years; 3 pellets per day; 56 days supply in 365 days
MAVYRET ORAL TABLET	Brand	PA for age less than 12 years; 3 tablets per day; 56 days supply in 365 days

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

Drug Name	Drug Tier	Requirements / Limits
nevirapine oral suspension	Generic	QL (40 ML per 1 day)
nevirapine oral tablet	Generic	QL (2 EA per 1 day)
nevirapine oral tablet extended release 24 hr	Generic	QL (1 EA per 1 day)
NORVIR ORAL POWDER IN PACKET	Brand	QL (12 EA per 1 day)
ODEFSEY	Brand	QL (1 EA per 1 day)
oseltamivir	Generic	
PAXLOVID ORAL TABLETS,DOSE PACK 150 MG (10)- 100 MG (10), 150 MG (6)- 100 MG (5)	Brand	PA for age less than 18 years; QL (40 EA per 365 days)
PAXLOVID ORAL TABLETS,DOSE PACK 300 MG (150 MG X 2)-100 MG	Brand	PA for age less than 18 years; QL (60 EA per 365 days)
PIFELTRO	Brand	QL (1 EA per 1 day)
PREZCOBIX	Brand	QL (1 EA per 1 day)
RETROVIR ORAL CAPSULE	Brand	QL (2 EA per 1 day)
REYATAZ ORAL POWDER IN PACKET	Brand	QL (6 EA per 1 day)
ribavirin oral capsule	Generic	
ribavirin oral tablet 200 mg	Generic	
ritonavir	Generic	QL (12 EA per 1 day)
RUKOBIA	Brand	QL (2 EA per 1 day)
SELZENTRY ORAL TABLET 150 MG	Brand	QL (2 EA per 1 day)
SELZENTRY ORAL TABLET 300 MG	Brand	QL (4 EA per 1 day)
STRIBILD	Brand	QL (1 EA per 1 day)
SUNLENCA	Brand	PA for age less than 18 years
SYMFI	Brand	QL (1 EA per 1 day)
SYMTUZA	Brand	QL (1 EA per 1 day)
tenofovir disoproxil fumarate	Generic	QL (1 EA per 1 day)
TIVICAY ORAL TABLET 50 MG	Brand	QL (6 EA per 1 day)
TIVICAY PD	Brand	QL (6 EA per 1 day)
TRIUMEQ	Brand	QL (1 EA per 1 day)
TRIUMEQ PD	Brand	QL (6 EA per 1 day)
TRUVADA	Brand	QL (1 EA per 1 day)
valacyclovir	Generic	
valganciclovir	Generic	
VIREAD ORAL POWDER	Brand	QL (8 GM per 1 day)
YEZTUGO ORAL	Brand	PA for age less than 10 years; QL (4 EA per 365 days)

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

Drug Name	Drug Tier	Requirements / Limits
YEZTUGO SUBCUTANEOUS	Brand	PA for age less than 10 years; QL (3 ML per 135 days)
ZIAGEN ORAL SOLUTION	Brand	QL (30 ML per 1 day)
zidovudine oral capsule	Generic	QL (2 EA per 1 day)
zidovudine oral syrup	Generic	QL (60 ML per 1 day)
zidovudine oral tablet	Generic	QL (2 EA per 1 day)
CEPHALOSPORINS		
cefaclor oral capsule	Generic	
cefadroxil oral capsule	Generic	
cefdinir	Generic	
cefprozil	Generic	
cefuroxime axetil oral tablet	Generic	
cephalexin oral capsule 250 mg, 500 mg	Generic	
cephalexin oral suspension for reconstitution	Generic	
ERYTHROMYCINS / OTHER MACROLIDES		
azithromycin oral suspension for reconstitution	Generic	
azithromycin oral tablet	Generic	
clarithromycin oral suspension for reconstitution	Generic	
clarithromycin oral tablet	Generic	
erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml	Generic	
erythromycin oral tablet,delayed release (dr/ec)	Generic	
MISCELLANEOUS ANTIINFECTIVES		
albendazole	Generic	QL (4 EA per 30 days)
amikacin injection solution 1,000 mg/4 ml, 500 mg/2 ml	Generic	
atovaquone	Generic	
atovaquone-proguanil	Generic	
BETHKIS	Brand	PA for age less than 6 years; QL (224 ML per 28 days)
chloroquine phosphate	Generic	
clindamycin hcl	Generic	
clindamycin pediatric	Generic	
dapsone oral	Generic	
EMVERM	Brand	PA; 2 tablets per fill

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

Drug Name	Drug Tier	Requirements / Limits
ethambutol	Generic	
HUMATIN	Brand	
hydroxychloroquine	Generic	
isoniazid oral	Generic	
ivermectin oral	Generic	QL (9 EA per 90 days)
KITABIS PAK	Brand	PA for age less than 6 years; QL (280 ML per 28 days)
mefloquine	Generic	
metronidazole oral tablet 250 mg, 500 mg	Generic	
pentamidine inhalation	Generic	PA
pinaway	Generic	OTC
pinworm treatment	Generic	OTC
primaquine	Generic	
pyrazinamide	Generic	
pyrimethamine	Generic	PA
quinine sulfate	Generic	
reese's pinworm medicine	Generic	OTC
rifabutin	Generic	
rifampin oral	Generic	
TOBI PODHALER	Brand	PA; PA for age less than 6 years; QL (224 EA per 28 days)
tobramycin in 0.225 % nacl	Generic	PA for age less than 6 years; QL (280 ML per 28 days)
PENICILLINS		
amoxicillin oral capsule	Generic	
amoxicillin oral suspension for reconstitution	Generic	
amoxicillin oral tablet	Generic	
amoxicillin oral tablet,chewable 125 mg, 250 mg	Generic	
amoxicillin-pot clavulanate oral suspension for reconstitution	Generic	
amoxicillin-pot clavulanate oral tablet	Generic	
amoxicillin-pot clavulanate oral tablet,chewable	Generic	
ampicillin oral capsule 500 mg	Generic	
dicloxacillin	Generic	
penicillin v potassium	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
QUINOLONES		
CIPRO ORAL SUSPENSION,MICROCAPSULE RECON	Brand	
ciprofloxacin	Generic	
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	Generic	
levofloxacin oral tablet	Generic	
moxifloxacin oral	Generic	
SULFA'S / RELATED AGENTS		
sulfadiazine	Generic	
sulfamethoxazole-trimethoprim oral	Generic	
sulfatrim	Generic	
TETRACYCLINES		
demeclocycline	Generic	
doxycycline hyclate oral capsule 100 mg, 50 mg	Generic	
doxycycline hyclate oral tablet 100 mg, 20 mg	Generic	
doxycycline monohydrate oral capsule 100 mg, 50 mg	Generic	
doxycycline monohydrate oral suspension for reconstitution	Generic	
doxycycline monohydrate oral tablet	Generic	
minocycline oral capsule	Generic	
mondoxyne nl oral capsule 100 mg	Generic	
tetracycline oral capsule	Generic	
URINARY TRACT AGENTS		
methenamine hippurate	Generic	
methenamine mandelate oral tablet	Generic	
nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg	Generic	
nitrofurantoin monohyd/m-cryst	Generic	
trimethoprim	Generic	
VANCOMYCIN		
vancomycin oral capsule	Generic	
VANCOMYCIN ORAL RECON SOLN 25 MG/ML	Brand	

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

Drug Name	Drug Tier	Requirements / Limits
vancomycin oral recon soln 50 mg/ml	Generic	
ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
leucovorin calcium oral	Generic	
mesna oral	Generic	
OSENVELT	Brand	PA; PA for age less than 12 years
WYOST	Brand	PA; PA for age less than 12 years
XTRENBO	Brand	PA; PA for age less than 12 years
ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS		
abiraterone oral tablet 250 mg	Generic	PA; QL (4 EA per 1 day)
abirtega	Generic	PA; QL (4 EA per 1 day)
AKEEGA	Brand	PA; QL (2 EA per 1 day)
ALECENSA	Brand	PA; QL (8 EA per 1 day)
ALUNBRIG ORAL TABLET 180 MG, 90 MG	Brand	PA; QL (1 EA per 1 day)
ALUNBRIG ORAL TABLET 30 MG	Brand	PA; QL (4 EA per 1 day)
ALUNBRIG ORAL TABLETS,DOSE PACK	Brand	PA; QL (30 EA per 365 days)
anastrozole	Generic	
AUGTYRO ORAL CAPSULE 160 MG	Brand	PA; QL (2 EA per 1 day)
AUGTYRO ORAL CAPSULE 40 MG	Brand	PA; QL (6 EA per 1 day)
AVMAPKI-FAKZYNJA	Brand	PA; QL (66 EA per 28 days)
AYVAKIT	Brand	PA; QL (1 EA per 1 day)
azathioprine oral tablet 50 mg	Generic	
BALVERSA ORAL TABLET 3 MG	Brand	PA; QL (3 EA per 1 day)
BALVERSA ORAL TABLET 4 MG	Brand	PA; QL (2 EA per 1 day)
BALVERSA ORAL TABLET 5 MG	Brand	PA; QL (1 EA per 1 day)
bexarotene	Generic	PA
bicalutamide	Generic	
BOSULIF ORAL CAPSULE 100 MG	Brand	PA; QL (3 EA per 1 day)
BOSULIF ORAL CAPSULE 50 MG	Brand	PA; QL (1 EA per 1 day)
BOSULIF ORAL TABLET 100 MG	Brand	PA; QL (3 EA per 1 day)
BOSULIF ORAL TABLET 400 MG, 500 MG	Brand	PA; QL (1 EA per 1 day)
bosutinib oral tablet 100 mg	Generic	PA; QL (3 EA per 1 day)
bosutinib oral tablet 400 mg, 500 mg	Generic	PA; QL (1 EA per 1 day)
BRAFTOVI	Brand	PA; QL (6 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
BRUKINSA ORAL TABLET	Brand	PA; QL (2 EA per 1 day)
CABOMETYX	Brand	PA; QL (1 EA per 1 day)
CALQUENCE (ACALABRUTINIB MAL)	Brand	PA; QL (2 EA per 1 day)
capecitabine oral tablet 150 mg	Generic	PA; QL (4 EA per 1 day)
capecitabine oral tablet 500 mg	Generic	PA; QL (10 EA per 1 day)
CAPRELSA ORAL TABLET 100 MG	Brand	PA; QL (2 EA per 1 day)
CAPRELSA ORAL TABLET 300 MG	Brand	PA; QL (1 EA per 1 day)
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1)	Brand	PA; QL (56 EA per 28 days)
COMETRIQ ORAL CAPSULE 140 MG/DAY(80 MG X1-20 MG X3)	Brand	PA; QL (112 EA per 28 days)
COMETRIQ ORAL CAPSULE 60 MG/DAY (20 MG X 3/DAY)	Brand	PA; QL (84 EA per 28 days)
COPIKTRA	Brand	PA; QL (2 EA per 1 day)
COTELLIC	Brand	PA; QL (3 EA per 1 day)
cyclophosphamide oral capsule	Generic	
CYCLOPHOSPHAMIDE ORAL TABLET 50 MG	Brand	
cyclosporine modified	Generic	
cyclosporine oral capsule	Generic	
DANZITEN	Brand	PA; QL (2 EA per 1 day)
dasatinib oral tablet 100 mg, 140 mg, 50 mg, 70 mg, 80 mg	Generic	PA; QL (1 EA per 1 day)
dasatinib oral tablet 20 mg	Generic	PA; QL (3 EA per 1 day)
DAURISMO ORAL TABLET 100 MG	Brand	PA; QL (1 EA per 1 day)
DAURISMO ORAL TABLET 25 MG	Brand	PA; QL (2 EA per 1 day)
DROXIA	Brand	PA for age less than 18 years
ELIGARD (3 MONTH)	Brand	PA; QL (1 EA per 63 days)
ELIGARD (4 MONTH)	Brand	PA; QL (1 EA per 112 days)
ELIGARD (6 MONTH)	Brand	PA; QL (1 EA per 126 days)
ENSACOVE	Brand	PA; QL (2 EA per 1 day)
ERIVEDGE	Brand	PA; QL (1 EA per 1 day)
ERLEADA ORAL TABLET 240 MG	Brand	PA; QL (1 EA per 1 day)
ERLEADA ORAL TABLET 60 MG	Brand	PA; QL (4 EA per 1 day)
erlotinib oral tablet 100 mg, 150 mg	Generic	PA; QL (1 EA per 1 day)
erlotinib oral tablet 25 mg	Generic	PA; QL (3 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
etoposide oral	Generic	PA
EULEXIN	Brand	PA
everolimus (antineoplastic) oral tablet	Generic	PA; QL (1 EA per 1 day)
everolimus (antineoplastic) oral tablet for suspension	Generic	PA
exemestane	Generic	
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 120 MG	Brand	PA; QL (2 EA per 365 days)
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 80 MG	Brand	PA; QL (1 EA per 28 days)
FOTIVDA	Brand	PA; QL (21 EA per 28 days)
FRUZAQLA ORAL CAPSULE 1 MG	Brand	PA; QL (84 EA per 28 days)
FRUZAQLA ORAL CAPSULE 5 MG	Brand	PA; QL (21 EA per 28 days)
GAVRETO	Brand	PA; QL (4 EA per 1 day)
gefitinib	Generic	PA; QL (1 EA per 1 day)
gengraf oral capsule	Generic	
GILOTRIF	Brand	PA; QL (1 EA per 1 day)
GOMEKLI ORAL CAPSULE 1 MG	Brand	PA; QL (126 EA per 28 days)
GOMEKLI ORAL CAPSULE 2 MG	Brand	PA; QL (84 EA per 28 days)
GOMEKLI ORAL TABLET FOR SUSPENSION	Brand	PA; QL (168 EA per 28 days)
HERNEXEOS	Brand	PA; QL (3 EA per 1 day)
HYCAMTIN ORAL	Brand	PA
hydroxyurea	Generic	
HYRNUO	Brand	PA; QL (4 EA per 1 day)
IBRANCE ORAL CAPSULE 125 MG	Brand	PA; QL (1 EA per 1 day)
IBRANCE ORAL TABLET	Brand	PA; QL (1 EA per 1 day)
IBTROZI	Brand	PA; QL (3 EA per 1 day)
ICLUSIG	Brand	PA; QL (1 EA per 1 day)
IDHIFA	Brand	PA; QL (1 EA per 1 day)
imatinib oral tablet 100 mg	Generic	PA; QL (3 EA per 1 day)
imatinib oral tablet 400 mg	Generic	PA; QL (2 EA per 1 day)
IMBRUVICA ORAL CAPSULE 140 MG	Brand	PA; QL (3 EA per 1 day)
IMBRUVICA ORAL CAPSULE 70 MG	Brand	PA; QL (1 EA per 1 day)
IMBRUVICA ORAL SUSPENSION	Brand	PA; QL (6 ML per 1 day)
IMBRUVICA ORAL TABLET	Brand	PA; QL (1 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
IMKELDI	Brand	PA; QL (280 ML per 28 days)
INLURIYO	Brand	PA; QL (2 EA per 1 day)
INLYTA ORAL TABLET 1 MG	Brand	PA; QL (6 EA per 1 day)
INLYTA ORAL TABLET 5 MG	Brand	PA; QL (4 EA per 1 day)
INQOVI	Brand	PA; QL (5 EA per 28 days)
INREBIC	Brand	PA; QL (4 EA per 1 day)
ITOVEBI ORAL TABLET 3 MG	Brand	PA; QL (2 EA per 1 day)
ITOVEBI ORAL TABLET 9 MG	Brand	PA; QL (1 EA per 1 day)
IWILFIN	Brand	PA; QL (8 EA per 1 day)
JAKAFI	Brand	PA; QL (2 EA per 1 day)
JAYPIRCA	Brand	PA; QL (2 EA per 1 day)
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1)	Brand	PA; QL (21 EA per 28 days)
KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2)	Brand	PA; QL (42 EA per 28 days)
KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3)	Brand	PA; QL (63 EA per 28 days)
KOMZIFTI	Brand	PA; QL (3 EA per 1 day)
KOSELUGO ORAL CAPSULE 10 MG	Brand	PA; QL (8 EA per 1 day)
KOSELUGO ORAL CAPSULE 25 MG	Brand	PA; QL (4 EA per 1 day)
KOSELUGO ORAL CAPSULE, SPRINKLE 5 MG	Brand	PA; QL (20 EA per 1 day)
KOSELUGO ORAL CAPSULE, SPRINKLE 7.5 MG	Brand	PA; QL (12 EA per 1 day)
KRAZATI	Brand	PA; QL (6 EA per 1 day)
lapatinib	Generic	PA; QL (6 EA per 1 day)
LAZCLUZE ORAL TABLET 240 MG	Brand	PA; QL (1 EA per 1 day)
LAZCLUZE ORAL TABLET 80 MG	Brand	PA; QL (2 EA per 1 day)
lenalidomide	Generic	PA; QL (1 EA per 1 day)
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 4 MG	Brand	PA; QL (30 EA per 30 days)
LENVIMA ORAL CAPSULE 12 MG/DAY (4 MG X 3), 18 MG/DAY (10 MG X 1-4 MG X2), 24 MG/DAY(10 MG X 2-4 MG X 1)	Brand	PA; QL (90 EA per 30 days)
LENVIMA ORAL CAPSULE 14 MG/DAY(10 MG X 1-4 MG X 1), 20 MG/DAY (10 MG X 2), 8 MG/DAY (4 MG X 2)	Brand	PA; QL (60 EA per 30 days)

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

Drug Name	Drug Tier	Requirements / Limits
letrozole	Generic	
LEUKERAN	Brand	PA
LIFYORLI ORAL CAPSULE 125 MG/DAY(100 MG X1-25MG X1)	Brand	PA; QL (18 EA per 28 days)
LIFYORLI ORAL CAPSULE 150 MG/DAY(100 MG X1-25MG X2)	Brand	PA; QL (27 EA per 28 days)
lomustine	Generic	PA
LONSURF ORAL TABLET 15-6.14 MG	Brand	PA; QL (6 EA per 1 day)
LONSURF ORAL TABLET 20-8.19 MG	Brand	PA; QL (8 EA per 1 day)
LORBRENA ORAL TABLET 100 MG	Brand	PA; QL (1 EA per 1 day)
LORBRENA ORAL TABLET 25 MG	Brand	PA; QL (3 EA per 1 day)
LUMAKRAS ORAL TABLET 120 MG, 240 MG	Brand	PA; QL (2 EA per 1 day)
LUMAKRAS ORAL TABLET 320 MG	Brand	PA; QL (3 EA per 1 day)
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG	Brand	PA
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 22.5 MG	Brand	PA; QL (1 EA per 63 days)
LUPRON DEPOT (4 MONTH)	Brand	PA; QL (1 EA per 84 days)
LUPRON DEPOT (6 MONTH)	Brand	PA; QL (1 EA per 126 days)
LUPRON DEPOT-PED (3 MONTH)	Brand	PA
LUPRON DEPOT-PED INTRAMUSCULAR SYRINGE KIT	Brand	PA
LUTRATE DEPOT (3 MONTH)	Brand	PA; QL (1 EA per 84 days)
LYNPARZA	Brand	PA; QL (4 EA per 1 day)
LYSODREN	Brand	PA
LYTGOBI	Brand	PA; QL (4 EA per 28 days)
MATULANE	Brand	PA
megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml)	Generic	
megestrol oral tablet	Generic	
MEKINIST ORAL RECON SOLN	Brand	PA; QL (23 ML per 1 day)
MEKINIST ORAL TABLET 0.5 MG	Brand	PA; QL (3 EA per 1 day)
MEKINIST ORAL TABLET 2 MG	Brand	PA; QL (1 EA per 1 day)
MEKTOVI	Brand	PA; QL (6 EA per 1 day)
mercaptopurine oral tablet	Generic	
methotrexate sodium	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
methotrexate sodium (pf)	Generic	
MODEYSO	Brand	PA; QL (20 EA per 28 days)
mycophenolate mofetil oral capsule	Generic	
mycophenolate mofetil oral suspension for reconstitution	Generic	PA for age greater than or equal to 8 years
mycophenolate mofetil oral tablet	Generic	
mycophenolate sodium	Generic	
MYLERAN	Brand	PA
NERLYNX	Brand	PA; QL (6 EA per 1 day)
nilotinib hcl oral capsule 150 mg, 200 mg	Generic	PA; QL (4 EA per 1 day)
nilotinib hcl oral capsule 50 mg	Generic	PA; QL (2 EA per 1 day)
nilutamide	Generic	PA; QL (1 EA per 1 day)
NINLARO ORAL CAPSULE 2.3 MG	Brand	PA; QL (3 EA per 30 days)
NUBEQA	Brand	PA; QL (4 EA per 1 day)
ODOMZO	Brand	PA; QL (1 EA per 1 day)
OGSIVEO ORAL TABLET 100 MG, 150 MG	Brand	PA; QL (2 EA per 1 day)
OJEMDA ORAL SUSPENSION FOR RECONSTITUTION	Brand	PA; QL (96 ML per 28 days)
OJEMDA ORAL TABLET 400 MG/WEEK (100 MG X 4)	Brand	PA; QL (16 EA per 28 days)
OJEMDA ORAL TABLET 500 MG/WEEK (100 MG X 5)	Brand	PA; QL (20 EA per 28 days)
OJEMDA ORAL TABLET 600 MG/WEEK (100 MG X 6)	Brand	PA; QL (24 EA per 28 days)
OJJAARA	Brand	PA; QL (1 EA per 1 day)
ONUREG	Brand	PA; QL (14 EA per 28 days)
ORGOVYX	Brand	PA; QL (1 EA per 1 day)
ORSERDU ORAL TABLET 345 MG	Brand	PA; QL (1 EA per 1 day)
ORSERDU ORAL TABLET 86 MG	Brand	PA; QL (3 EA per 1 day)
pazopanib oral tablet 200 mg	Generic	PA; QL (4 EA per 1 day)
PAZOPANIB ORAL TABLET 400 MG	Brand	PA; QL (2 EA per 1 day)
PEMAZYRE	Brand	PA; QL (14 EA per 16 days)
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1)	Brand	PA; QL (28 EA per 28 days)
PIQRAY ORAL TABLET 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	Brand	PA; QL (56 EA per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
pomalidomide	Generic	PA; QL (1 EA per 1 day)
POMALYST	Brand	PA; QL (1 EA per 1 day)
QINLOCK	Brand	PA; QL (3 EA per 1 day)
RETEVMO ORAL TABLET 120 MG, 160 MG, 80 MG	Brand	PA; QL (2 EA per 1 day)
RETEVMO ORAL TABLET 40 MG	Brand	PA; QL (3 EA per 1 day)
REVUFORJ ORAL TABLET 110 MG	Brand	PA; QL (4 EA per 1 day)
REVUFORJ ORAL TABLET 160 MG	Brand	PA; QL (2 EA per 1 day)
REVUFORJ ORAL TABLET 25 MG	Brand	PA; QL (8 EA per 1 day)
REZLIDHIA	Brand	PA; QL (2 EA per 1 day)
ROMVIMZA	Brand	PA; QL (8 EA per 28 days)
ROZLYTREK ORAL CAPSULE 100 MG	Brand	PA; QL (1 EA per 1 day)
ROZLYTREK ORAL CAPSULE 200 MG	Brand	PA; QL (3 EA per 1 day)
ROZLYTREK ORAL PELLETS IN PACKET	Brand	PA; QL (12 EA per 1 day)
RUBRACA	Brand	PA; QL (4 EA per 1 day)
RYDAPT	Brand	PA; QL (8 EA per 1 day)
SCEMBLIX ORAL TABLET 100 MG	Brand	PA; QL (4 EA per 1 day)
SCEMBLIX ORAL TABLET 20 MG	Brand	PA; QL (2 EA per 1 day)
SCEMBLIX ORAL TABLET 40 MG	Brand	PA; QL (10 EA per 1 day)
SIKLOS	Brand	PA for age less than 2 years; PA for age greater than or equal to 17 years
sirolimus	Generic	
sorafenib	Generic	PA; QL (4 EA per 1 day)
SPRYCEL ORAL TABLET 100 MG, 140 MG, 50 MG, 70 MG, 80 MG	Brand	PA; QL (1 EA per 1 day)
SPRYCEL ORAL TABLET 20 MG	Brand	PA; QL (3 EA per 1 day)
STIVARGA	Brand	PA; QL (3 EA per 1 day)
sunitinib malate	Generic	PA; QL (1 EA per 1 day)
SUPPRELIN LA	Brand	PA
TABLOID	Brand	PA
TABRECTA ORAL TABLET 150 MG	Brand	PA; QL (3 EA per 1 day)
TABRECTA ORAL TABLET 200 MG	Brand	PA; QL (4 EA per 1 day)
tacrolimus oral capsule	Generic	
TAFINLAR ORAL CAPSULE	Brand	PA; QL (4 EA per 1 day)
TAFINLAR ORAL TABLET FOR SUSPENSION	Brand	PA; QL (30 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
TAGRISSO	Brand	PA; QL (1 EA per 1 day)
TALZENNA	Brand	PA; QL (1 EA per 1 day)
tamoxifen	Generic	
temozolomide	Generic	PA
TEPMETKO	Brand	PA; QL (2 EA per 1 day)
THALOMID ORAL CAPSULE 100 MG, 50 MG	Brand	PA; QL (1 EA per 1 day)
TIBSOVO	Brand	PA; QL (2 EA per 1 day)
toremifene	Generic	PA; QL (1 EA per 1 day)
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 11.25 MG	Brand	PA; QL (1 EA per 63 days)
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 22.5 MG	Brand	PA; QL (1 EA per 126 days)
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 3.75 MG	Brand	PA; QL (1 EA per 28 days)
tretinoin (antineoplastic)	Generic	PA
TRUQAP	Brand	PA; QL (64 EA per 28 days)
TUKYSA	Brand	PA; QL (4 EA per 1 day)
TURALIO	Brand	PA; QL (4 EA per 1 day)
VANFLYTA	Brand	PA; QL (2 EA per 1 day)
VENCLEXTA ORAL TABLET 10 MG	Brand	PA; QL (2 EA per 1 day)
VENCLEXTA ORAL TABLET 100 MG	Brand	PA; QL (6 EA per 1 day)
VENCLEXTA ORAL TABLET 50 MG	Brand	PA; QL (1 EA per 1 day)
VENCLEXTA STARTING PACK	Brand	PA; QL (42 EA per 365 days)
VERZENIO	Brand	PA; QL (2 EA per 1 day)
VITRAKVI ORAL CAPSULE 100 MG	Brand	PA; QL (2 EA per 1 day)
VITRAKVI ORAL CAPSULE 25 MG	Brand	PA; QL (6 EA per 1 day)
VITRAKVI ORAL SOLUTION	Brand	PA; QL (10 ML per 1 day)
VONJO	Brand	PA; QL (4 EA per 1 day)
VORANIGO ORAL TABLET 10 MG	Brand	PA; QL (2 EA per 1 day)
VORANIGO ORAL TABLET 40 MG	Brand	PA; QL (1 EA per 1 day)
WELIREG	Brand	PA; QL (3 EA per 1 day)
XALKORI ORAL CAPSULE	Brand	PA; QL (4 EA per 1 day)
XALKORI ORAL PELLET 150 MG	Brand	PA; QL (6 EA per 1 day)
XALKORI ORAL PELLET 20 MG, 50 MG	Brand	PA; QL (4 EA per 1 day)
XOSPATA	Brand	PA; QL (3 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
XPOVIO ORAL TABLET 100 MG/WEEK (50 MG X 2)	Brand	PA; XPOVIO 100 MG ONCE WEEKLY DOSE; QL (8 EA per 28 days)
XPOVIO ORAL TABLET 40 MG/WEEK (10 MG X 4)	Brand	PA; XPOVIO 40 MG ONCE WEEKLY DOSE; QL (16 EA per 28 days)
XPOVIO ORAL TABLET 40MG TWICE WEEK (40 MG X 2)	Brand	PA; XPOVIO 40 MG TWICE WEEKLY DOSE; QL (8 EA per 28 days)
XPOVIO ORAL TABLET 60 MG/WEEK (60 MG X 1)	Brand	PA; XPOVIO 60 MG ONCE WEEKLY DOSE; QL (4 EA per 28 days)
XPOVIO ORAL TABLET 60MG TWICE WEEK (120 MG/WEEK)	Brand	PA; XPOVIO 60 MG TWICE WEEKLY DOSE; QL (24 EA per 28 days)
XPOVIO ORAL TABLET 80 MG/WEEK (40 MG X 2)	Brand	PA; XPOVIO 80 MG ONCE WEEKLY DOSE; QL (8 EA per 28 days)
XPOVIO ORAL TABLET 80 MG/WEEK (80 MG X 1)	Brand	PA; QL (4 EA per 28 days)
XPOVIO ORAL TABLET 80MG TWICE WEEK (160 MG/WEEK)	Brand	PA; XPOVIO 80 MG TWICE WEEKLY DOSE; QL (32 EA per 28 days)
XROMI	Brand	PA; PA for age greater than or equal to 1 year
XTANDI ORAL CAPSULE	Brand	PA; QL (4 EA per 1 day)
XTANDI ORAL TABLET 40 MG	Brand	PA; QL (4 EA per 1 day)
XTANDI ORAL TABLET 80 MG	Brand	PA; QL (2 EA per 1 day)
YONSA	Brand	PA; QL (4 EA per 1 day)
ZEJULA	Brand	PA; QL (1 EA per 1 day)
ZELBORAF	Brand	PA; QL (8 EA per 1 day)
ZOLINZA	Brand	PA; QL (4 EA per 1 day)
ZYDELIG	Brand	PA; QL (2 EA per 1 day)
AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH		
ANTICONVULSANTS		
carbamazepine oral suspension	Generic	
carbamazepine oral tablet	Generic	
carbamazepine oral tablet extended release 12 hr	Generic	
carbamazepine oral tablet,chewable 100 mg	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
CARBATROL	Brand	
clobazam oral suspension	Generic	
clobazam oral tablet	Generic	
clonazepam oral tablet 0.5 mg, 1 mg, 2 mg	Generic	
DEPAKOTE SPRINKLES	Brand	
diazepam rectal	Generic	PA for age less than 2 years; QL (10 EA per 30 days)
DILANTIN ORAL	Brand	
divalproex oral tablet extended release 24 hr	Generic	
divalproex oral tablet,delayed release (dr/ec)	Generic	
EPIDIOLEX	Brand	PA; PA for age less than 1 year
ethosuximide	Generic	PA for age less than 3 years
gabapentin oral capsule 100 mg, 300 mg, 400 mg	Generic	PA for age less than 3 years
gabapentin oral solution	Generic	PA for age less than 3 years
gabapentin oral tablet 600 mg, 800 mg	Generic	PA for age less than 3 years
lacosamide oral solution	Generic	
lacosamide oral tablet	Generic	QL (2 EA per 1 day)
lamotrigine oral tablet	Generic	
lamotrigine oral tablet extended release 24hr	Generic	
lamotrigine oral tablet, chewable dispersible	Generic	
levetiracetam oral solution 100 mg/ml	Generic	QL (30 ML per 1 day)
levetiracetam oral solution 500 mg/5 ml (5 ml)	Generic	
levetiracetam oral tablet 1,000 mg	Generic	QL (3 EA per 1 day)
levetiracetam oral tablet 250 mg	Generic	QL (2 EA per 1 day)
levetiracetam oral tablet 500 mg	Generic	QL (6 EA per 1 day)
levetiracetam oral tablet 750 mg	Generic	QL (4 EA per 1 day)
levetiracetam oral tablet extended release 24 hr	Generic	
NAYZILAM	Brand	PA for age less than 12 years; QL (10 EA per 28 days)
oxcarbazepine oral tablet	Generic	
phenobarbital	Generic	
phenytoin oral suspension 125 mg/5 ml	Generic	
phenytoin oral tablet,chewable	Generic	
phenytoin sodium extended	Generic	
pregabalin oral capsule	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
PRIMIDONE ORAL TABLET 125 MG	Brand	
primidone oral tablet 250 mg, 50 mg	Generic	
roweepra	Generic	QL (6 EA per 1 day)
SEZABY	Brand	
subvenite oral tablet	Generic	
TEGRETOL XR	Brand	
topiramate oral capsule, sprinkle 15 mg, 25 mg	Generic	
topiramate oral tablet	Generic	
TRILEPTAL ORAL SUSPENSION	Brand	
valproic acid	Generic	
valproic acid (as sodium salt)	Generic	
VALTOCO	Brand	PA for age less than 2 years; QL (10 EA per 30 days)
zonisamide	Generic	
ANTIPARKINSONISM AGENTS		
benztropine oral	Generic	
bromocriptine	Generic	
carbidopa-levodopa oral tablet 10-100 mg, 25-250 mg	Generic	
carbidopa-levodopa oral tablet 25-100 mg	Generic	QL (8 EA per 1 day)
carbidopa-levodopa oral tablet extended release	Generic	
carbidopa-levodopa oral tablet,disintegrating	Generic	
carbidopa-levodopa-entacapone	Generic	
entacapone	Generic	
pramipexole oral tablet	Generic	
rasagiline	Generic	
ropinirole oral tablet	Generic	
selegiline hcl	Generic	
trihexyphenidyl	Generic	
MIGRAINE / CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR	Brand	PA; PA for age less than 18 years; QL (1 ML per 30 days)
AJOVY AUTOINJECTOR	Brand	PA; PA for age less than 18 years; QL (1.5 ML per 30 days)

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

Drug Name	Drug Tier	Requirements / Limits
AJOVY SYRINGE	Brand	PA; PA for age less than 18 years; QL (1.5 ML per 30 days)
dihydroergotamine injection	Generic	PA; QL (8 ML per 30 days)
dihydroergotamine nasal	Generic	PA; QL (8 ML per 28 days)
EMGALITY PEN	Brand	PA; PA for age less than 18 years; QL (1 ML per 30 days)
EMGALITY SUBCUTANEOUS SYRINGE 120 MG/ML	Brand	PA; PA for age less than 18 years; QL (1 ML per 30 days)
naratriptan oral tablet 2.5 mg	Generic	QL (9 EA per 30 days)
NURTEC ODT	Brand	ST; PA for age less than 18 years; QL (16 EA per 30 days)
QULIPTA	Brand	PA; PA for age less than 18 years; QL (1 EA per 1 day)
rizatriptan	Generic	QL (12 EA per 30 days)
sumatriptan nasal spray,non-aerosol 20 mg/actuation	Generic	QL (6 EA per 30 days)
sumatriptan nasal spray,non-aerosol 5 mg/actuation	Generic	QL (12 EA per 30 days)
sumatriptan succinate oral tablet 100 mg	Generic	QL (9 EA per 30 days)
sumatriptan succinate oral tablet 25 mg, 50 mg	Generic	QL (18 EA per 30 days)
sumatriptan succinate subcutaneous pen injector 6 mg/0.5 ml	Generic	QL (8 ML per 30 days)
sumatriptan succinate subcutaneous solution	Generic	QL (8 ML per 30 days)
UBRELVY	Brand	ST; PA for age less than 18 years; QL (16 EA per 30 days)
zolmitriptan oral tablet	Generic	QL (12 EA per 30 days)
MISCELLANEOUS NEUROLOGICAL THERAPY		
AUSTEDO	Brand	PA; PA for age less than 18 years; QL (4 EA per 1 day)
AUSTEDO XR	Brand	PA; PA for age less than 18 years; QL (1 EA per 1 day)
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG	Brand	PA; PA for age less than 18 years; QL (28 EA per 365 days)
COPAXONE SUBCUTANEOUS SYRINGE 20 MG/ML	Brand	PA; PA for age less than 18 years
dalfampridine	Generic	PA
dichlorphenamide	Generic	PA; QL (4 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
dimethyl fumarate	Generic	PA; PA for age less than 18 years
donepezil	Generic	
fingolimod	Generic	PA; PA for age less than 10 years
INGREZZA	Brand	PA; PA for age less than 18 years; QL (1 EA per 1 day)
INGREZZA INITIATION PK(TARDIV)	Brand	PA; PA for age less than 18 years; QL (1 EA per 1 day)
INGREZZA SPRINKLE	Brand	PA; PA for age less than 18 years; QL (1 EA per 1 day)
KESIMPTA PEN	Brand	PA; PA for age less than 18 years
memantine oral tablet	Generic	
rivastigmine	Generic	
teriflunomide	Generic	PA; PA for age less than 18 years
tetrabenazine	Generic	PA; PA for age less than 18 years; QL (4 EA per 1 day)
MUSCLE RELAXANTS / ANTISPASMODIC THERAPY		
baclofen oral tablet	Generic	PA for age less than 12 years
cyclobenzaprine oral tablet 10 mg	Generic	PA for age less than 15 years; QL (3 EA per 1 day)
cyclobenzaprine oral tablet 5 mg, 7.5 mg	Generic	PA for age less than 15 years
METHOCARBAMOL ORAL TABLET 1,000 MG	Brand	
methocarbamol oral tablet 500 mg, 750 mg	Generic	
pyridostigmine bromide oral syrup	Generic	
pyridostigmine bromide oral tablet 60 mg	Generic	
pyridostigmine bromide oral tablet extended release 180 mg	Generic	
tizanidine oral tablet	Generic	PA for age less than 18 years
NARCOTIC ANALGESICS		
acetaminophen-codeine oral solution	Generic	PA; PA for age less than 12 years; QL (150 ML per 1 day)
acetaminophen-codeine oral tablet	Generic	PA; PA for age less than 12 years; QL (10 EA per 1 day)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 128 MG/0.36 ML	Brand	ST; PA for age less than 18 years; QL (0.36 ML per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 16 MG/0.32 ML	Brand	ST; PA for age less than 18 years; QL (1.28 ML per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 24 MG/0.48 ML	Brand	ST; PA for age less than 18 years; QL (1.92 ML per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 32 MG/0.64 ML	Brand	ST; PA for age less than 18 years; QL (2.56 ML per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 64 MG/0.18 ML	Brand	ST; PA for age less than 18 years; QL (0.18 ML per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 8 MG/0.16 ML	Brand	ST; PA for age less than 18 years; QL (0.64 ML per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 96 MG/0.27 ML	Brand	ST; PA for age less than 18 years; QL (0.27 ML per 28 days)
buprenorphine hcl sublingual tablet 2 mg	Generic	PA; PA for age less than 16 years; QL (3 EA per 1 day)
buprenorphine hcl sublingual tablet 8 mg	Generic	PA; PA for age less than 16 years; QL (2 EA per 1 day)
buprenorphine transdermal patch weekly 10 mcg/hour, 5 mcg/hour, 7.5 mcg/hour	Generic	PA; QL (8 EA per 30 days)
buprenorphine transdermal patch weekly 15 mcg/hour, 20 mcg/hour	Generic	PA; QL (4 EA per 30 days)
butalbital-acetaminophen oral tablet 50-325 mg	Generic	QL (6 EA per 1 day)
butalbital-acetaminophen-caff oral tablet	Generic	QL (6 EA per 1 day)
butalbital-aspirin-caffeine oral capsule	Generic	
BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HOUR, 5 MCG/HOUR, 7.5 MCG/HOUR	Brand	PA; QL (8 EA per 30 days)
BUTRANS TRANSDERMAL PATCH WEEKLY 15 MCG/HOUR, 20 MCG/HOUR	Brand	PA; QL (4 EA per 30 days)
endocet oral tablet 10-325 mg	Generic	PA; QL (6 EA per 1 day)
endocet oral tablet 2.5-325 mg, 5-325 mg	Generic	PA; QL (12 EA per 1 day)
endocet oral tablet 7.5-325 mg	Generic	PA; QL (8 EA per 1 day)
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	Generic	PA; QL (10 EA per 34 days)
hydrocodone-acetaminophen oral solution 10-325 mg/15 ml, 10-325 mg/15 ml(15 ml)	Generic	PA; QL (135 ML per 1 day)
HYDROCODONE-ACETAMINOPHEN ORAL SOLUTION 7.5-325 MG/15 ML	Brand	PA; QL (180 ML per 1 day)
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg	Generic	PA; QL (9 EA per 1 day)
hydrocodone-acetaminophen oral tablet 2.5-325 mg	Generic	PA

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

Drug Name	Drug Tier	Requirements / Limits
hydrocodone-acetaminophen oral tablet 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg	Generic	PA; QL (12 EA per 1 day)
hydrocodone-ibuprofen	Generic	PA; QL (5 EA per 1 day)
hydromorphone oral tablet 2 mg	Generic	PA; QL (11.2 EA per 1 day)
hydromorphone oral tablet 4 mg	Generic	PA; QL (5.6 EA per 1 day)
hydromorphone oral tablet 8 mg	Generic	PA; QL (2.8 EA per 1 day)
morphine concentrate oral solution	Generic	PA; QL (4.5 ML per 1 day)
morphine oral solution 10 mg/5 ml (2 mg/ml)	Generic	PA; QL (45 ML per 1 day)
morphine oral solution 20 mg/5 ml (4 mg/ml)	Generic	PA; QL (22.5 ML per 1 day)
morphine oral tablet 15 mg	Generic	PA; QL (6 EA per 1 day)
morphine oral tablet 30 mg	Generic	PA; QL (3 EA per 1 day)
morphine oral tablet extended release 100 mg, 200 mg	Generic	PA; QL (1 EA per 1 day)
morphine oral tablet extended release 15 mg	Generic	PA; QL (4 EA per 1 day)
morphine oral tablet extended release 30 mg	Generic	PA; QL (3 EA per 1 day)
morphine oral tablet extended release 60 mg	Generic	PA; QL (2 EA per 1 day)
oxycodone oral capsule	Generic	PA; QL (12 EA per 1 day)
oxycodone oral solution	Generic	PA; QL (60 ML per 1 day)
oxycodone oral tablet 10 mg	Generic	PA; QL (6 EA per 1 day)
oxycodone oral tablet 15 mg	Generic	PA; QL (4 EA per 1 day)
oxycodone oral tablet 20 mg	Generic	PA; QL (3 EA per 1 day)
oxycodone oral tablet 30 mg	Generic	PA; QL (2 EA per 1 day)
oxycodone oral tablet 5 mg	Generic	PA; QL (12 EA per 1 day)
oxycodone-acetaminophen oral tablet 10-325 mg	Generic	PA; QL (6 EA per 1 day)
oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg	Generic	PA; QL (12 EA per 1 day)
oxycodone-acetaminophen oral tablet 7.5-325 mg	Generic	PA; QL (8 EA per 1 day)
SUBLOCADE	Brand	ST
NON-NARCOTIC ANALGESICS		
8 hour pain reliever	Generic	OTC
8hr muscle aches-pain	Generic	OTC
acetaminophen extra strength	Generic	OTC
acetaminophen oral liquid	Generic	OTC
acetaminophen oral solution	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
acetaminophen oral suspension 160 mg/5 ml, 160 mg/5 ml (5 ml)	Generic	OTC
ACETAMINOPHEN ORAL SUSPENSION 325 MG/10.15 ML, 650 MG/20.3 ML	Brand	OTC
acetaminophen oral tablet	Generic	OTC
acetaminophen oral tablet extended release	Generic	OTC
acetaminophen rectal suppository 650 mg	Generic	OTC
all day pain relief	Generic	OTC
all day relief	Generic	OTC
aminofen	Generic	OTC
arthritis pain (diclofenac)	Generic	OTC
arthritis pain relief (acetam)	Generic	OTC
arthritis pain reliever	Generic	OTC
aspirin childrens	Generic	OTC
aspirin oral tablet 325 mg	Generic	OTC
aspirin oral tablet,chewable	Generic	OTC
aspirin oral tablet,delayed release (dr/ec) 325 mg, 81 mg	Generic	OTC
bayer aspirin	Generic	OTC
bayer low dose aspirin	Generic	OTC
betatemp	Generic	OTC
buprenorphine-naloxone sublingual tablet	Generic	PA for age less than 16 years; QL (3 EA per 1 day)
celecoxib oral capsule 100 mg	Generic	ST; QL (4 EA per 1 day)
celecoxib oral capsule 200 mg	Generic	ST; QL (2 EA per 1 day)
child pain rel-fever reducer	Generic	OTC
children's acetaminophen oral liquid	Generic	OTC
children's acetaminophen oral suspension 160 mg/5 ml, 160 mg/5 ml (5 ml)	Generic	OTC
children's acetaminophen oral tablet,chewable	Generic	OTC
children's advil	Generic	OTC
children's aspirin	Generic	OTC
children's fever reducing	Generic	OTC
children's ibuprofen	Generic	OTC
children's mapap	Generic	OTC
CHILDREN'S MOTRIN	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
children's non-aspirin oral suspension	Generic	OTC
children's pain relief	Generic	OTC
children's pain reliever	Generic	OTC
children's pain-fever relief oral suspension	Generic	OTC
children's pain-fever relief oral tablet,chewable	Generic	OTC
children's profen ib	Generic	OTC
diclofenac sodium oral tablet,delayed release (dr/ec) 25 mg	Generic	QL (4 EA per 1 day)
diclofenac sodium oral tablet,delayed release (dr/ec) 50 mg, 75 mg	Generic	
diclofenac sodium topical gel 1 %	Generic	OTC
ecotrin low strength	Generic	OTC
ed-apap	Generic	OTC
etodolac oral capsule 200 mg	Generic	QL (4 EA per 1 day)
etodolac oral capsule 300 mg	Generic	QL (3 EA per 1 day)
etodolac oral tablet	Generic	
EUFLEXXA	Brand	PA
extra strength bayer	Generic	OTC
feverall rectal suppository 120 mg, 325 mg	Generic	OTC
headache relief (asa-acet-caf)	Generic	OTC
ibu	Generic	
ibu-200	Generic	OTC
ibuprofen ib oral tablet,chewable	Generic	OTC
ibuprofen jr strength	Generic	OTC
ibuprofen oral capsule	Generic	OTC
ibuprofen oral drops,suspension	Generic	OTC
ibuprofen oral suspension	Generic	OTC
ibuprofen oral tablet 200 mg	Generic	OTC
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	Generic	
ibuprofen oral tablet,chewable	Generic	OTC
indomethacin oral capsule	Generic	
indomethacin oral capsule, extended release	Generic	
infant's acetaminophen	Generic	OTC
infant's ibuprofen	Generic	OTC
infant's motrin	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
infants' pain and fever	Generic	OTC
infants' pain relief	Generic	OTC
infants profenib	Generic	OTC
ketorolac oral	Generic	QL (20 EA per 30 days)
KLOXXADO	Brand	
LIFEMS NALOXONE	Brand	
mapap (acetaminophen) oral capsule	Generic	OTC
mediproxen	Generic	OTC
meloxicam oral tablet	Generic	
migraine relief	Generic	OTC
m-pap	Generic	OTC
naloxone injection solution	Generic	
naloxone injection syringe	Generic	
naloxone nasal	Generic	OTC
naltrexone	Generic	
naproxen oral tablet 250 mg	Generic	QL (6 EA per 1 day)
naproxen oral tablet 375 mg	Generic	QL (4 EA per 1 day)
naproxen oral tablet 500 mg	Generic	QL (3 EA per 1 day)
naproxen oral tablet,delayed release (dr/ec) 375 mg	Generic	QL (2.67 EA per 1 day)
naproxen oral tablet,delayed release (dr/ec) 500 mg	Generic	QL (2 EA per 1 day)
naproxen sodium oral capsule	Generic	OTC
naproxen sodium oral tablet 220 mg	Generic	OTC
naproxen sodium oral tablet 275 mg, 550 mg	Generic	QL (2 EA per 1 day)
NARCAN	Brand	OTC
non-aspirin extra strength	Generic	OTC
non-aspirin oral tablet	Generic	OTC
non-aspirin oral tablet,chewable	Generic	OTC
non-aspirin pain relief	Generic	OTC
OPVEE	Brand	PA for age less than 12 years; QL (6 EA per 63 days)
oxaprozin oral tablet	Generic	QL (3 EA per 1 day)
pain relief (acetaminophen)	Generic	OTC
pain relief adult	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
pain relief es (acetaminophen)	Generic	OTC
pain reliever (acetaminophen) oral	Generic	OTC
pain reliever es(acetaminophn)	Generic	OTC
pain reliever plus	Generic	OTC
pharbetol	Generic	OTC
REXTOVY	Brand	
SUBOXONE SUBLINGUAL FILM 12-3 MG	Brand	PA for age less than 16 years; QL (2 EA per 1 day)
SUBOXONE SUBLINGUAL FILM 2-0.5 MG, 8-2 MG	Brand	PA for age less than 16 years; QL (3 EA per 1 day)
SUBOXONE SUBLINGUAL FILM 4-1 MG	Brand	PA for age less than 16 years; QL (1 EA per 1 day)
sulindac	Generic	
SYNVISC	Brand	PA
SYNVISC-ONE	Brand	PA
tramadol oral tablet 50 mg	Generic	PA; PA for age less than 12 years; QL (8 EA per 1 day)
tramadol-acetaminophen	Generic	PA; PA for age less than 12 years; QL (8 EA per 1 day)
tri-buffered aspirin	Generic	OTC
VIVITROL	Brand	QL (1 EA per 28 days)
wal-profen	Generic	OTC
wal-proxen	Generic	OTC
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 720 MG/2.4 ML	Brand	PA for age less than 18 years; QL (2.4 ML per 28 days)
ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 960 MG/3.2 ML	Brand	PA for age less than 18 years; QL (3.2 ML per 28 days)
ABILIFY MAINTENA	Brand	PA for age less than 18 years
alprazolam	Generic	
alprazolam intensol	Generic	
amitriptyline	Generic	
amoxapine oral tablet 150 mg	Generic	
aripiprazole oral tablet	Generic	PA for age less than 18 years; QL (1 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
ARISTADA	Brand	PA for age less than 18 years
ARISTADA INITIO	Brand	PA for age less than 18 years
armodafinil	Generic	PA; PA for age less than 18 years; QL (1 EA per 1 day)
atomoxetine oral capsule	Generic	QL (1 EA per 1 day)
bupropion hcl oral tablet 100 mg	Generic	QL (4.5 EA per 1 day)
bupropion hcl oral tablet 75 mg	Generic	QL (6 EA per 1 day)
bupropion hcl oral tablet extended release 24 hr 150 mg	Generic	QL (1 EA per 1 day)
bupropion hcl oral tablet extended release 24 hr 300 mg	Generic	QL (1.5 EA per 1 day)
bupropion hcl oral tablet sustained-release 12 hr 100 mg	Generic	QL (4.5 EA per 1 day)
bupropion hcl oral tablet sustained-release 12 hr 150 mg	Generic	QL (3 EA per 1 day)
bupropion hcl oral tablet sustained-release 12 hr 200 mg	Generic	QL (2.25 EA per 1 day)
buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	Generic	
chlordiazepoxide hcl	Generic	
chlorpromazine	Generic	PA for age less than 18 years
citalopram oral solution	Generic	QL (40 ML per 1 day)
citalopram oral tablet 10 mg	Generic	QL (4 EA per 1 day)
citalopram oral tablet 20 mg	Generic	QL (2 EA per 1 day)
citalopram oral tablet 40 mg	Generic	QL (1 EA per 1 day)
clomipramine	Generic	
clonidine hcl oral tablet extended release 12 hr	Generic	
clozapine oral tablet	Generic	PA for age less than 18 years
desipramine oral tablet 10 mg, 100 mg, 25 mg, 50 mg	Generic	
desvenlafaxine succinate	Generic	QL (1 EA per 1 day)
dexmethylphenidate oral capsule,er biphasic 50-50	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (1 EA per 1 day)
dexmethylphenidate oral tablet	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (2 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
dextroamphetamine sulfate oral capsule, extended release	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (1 EA per 1 day)
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	Generic	PA for age greater than or equal to 18 years; PA for age less than 4 years; QL (3 EA per 1 day)
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 7.5 mg	Generic	PA for age less than 4 years; PA for age greater than or equal to 18 years; QL (3 EA per 1 day)
dextroamphetamine sulfate oral tablet 30 mg	Generic	PA for age less than 4 years; PA for age greater than or equal to 18 years; QL (2 EA per 1 day)
dextroamphetamine-amphetamine oral capsule,extended release 24hr 10 mg, 15 mg	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (4 EA per 1 day)
dextroamphetamine-amphetamine oral capsule,extended release 24hr 20 mg, 25 mg, 30 mg	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (2 EA per 1 day)
dextroamphetamine-amphetamine oral capsule,extended release 24hr 5 mg	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (3 EA per 1 day)
dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg	Generic	PA for age greater than or equal to 18 years; PA for age less than 4 years; QL (3 EA per 1 day)
dextroamphetamine-amphetamine oral tablet 30 mg	Generic	PA for age greater than or equal to 18 years; PA for age less than 4 years; QL (2 EA per 1 day)
diazepam intensol	Generic	
diazepam oral	Generic	
doxepin oral capsule 10 mg	Generic	QL (4 EA per 1 day)
doxepin oral capsule 100 mg, 150 mg, 25 mg, 50 mg	Generic	
doxepin oral concentrate	Generic	
duloxetine oral capsule,delayed release(dr/ec) 20 mg	Generic	QL (6 EA per 1 day)
duloxetine oral capsule,delayed release(dr/ec) 30 mg	Generic	QL (4 EA per 1 day)
duloxetine oral capsule,delayed release(dr/ec) 60 mg	Generic	QL (2 EA per 1 day)
ergoloid	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
ERZOFRI INTRAMUSCULAR SYRINGE 117 MG/0.75 ML	Brand	PA for age less than 18 years; QL (0.75 ML per 28 days)
ERZOFRI INTRAMUSCULAR SYRINGE 156 MG/ML	Brand	PA for age less than 18 years; QL (1 ML per 28 days)
ERZOFRI INTRAMUSCULAR SYRINGE 234 MG/1.5 ML	Brand	PA for age less than 18 years; QL (1.5 ML per 28 days)
ERZOFRI INTRAMUSCULAR SYRINGE 351 MG/2.25 ML	Brand	PA for age less than 18 years; QL (2.25 ML per 365 days)
ERZOFRI INTRAMUSCULAR SYRINGE 39 MG/0.25 ML	Brand	PA for age less than 18 years; QL (0.25 ML per 28 days)
ERZOFRI INTRAMUSCULAR SYRINGE 78 MG/0.5 ML	Brand	PA for age less than 18 years; QL (0.5 ML per 28 days)
escitalopram oxalate oral tablet 10 mg	Generic	QL (2 EA per 1 day)
escitalopram oxalate oral tablet 20 mg	Generic	QL (1 EA per 1 day)
escitalopram oxalate oral tablet 5 mg	Generic	QL (4 EA per 1 day)
eszopiclone	Generic	PA for age less than 18 years; QL (1 EA per 1 day)
fluoxetine oral capsule 10 mg	Generic	QL (8 EA per 1 day)
fluoxetine oral capsule 20 mg	Generic	QL (4 EA per 1 day)
fluoxetine oral capsule 40 mg	Generic	QL (2 EA per 1 day)
fluoxetine oral solution	Generic	QL (20 ML per 1 day)
fluphenazine decanoate	Generic	PA for age less than 18 years
fluphenazine hcl	Generic	PA for age less than 18 years
fluvoxamine oral tablet 100 mg	Generic	QL (3 EA per 1 day)
fluvoxamine oral tablet 25 mg	Generic	QL (12 EA per 1 day)
fluvoxamine oral tablet 50 mg	Generic	QL (6 EA per 1 day)
guanfacine oral tablet extended release 24 hr	Generic	
haloperidol	Generic	PA for age less than 18 years
haloperidol decanoate	Generic	PA for age less than 18 years
haloperidol lactate injection	Generic	PA for age less than 18 years
haloperidol lactate oral	Generic	PA for age less than 18 years
imipramine hcl	Generic	
imipramine pamoate	Generic	
INVEGA HAFYERA	Brand	PA for age less than 18 years
INVEGA SUSTENNA	Brand	PA for age less than 18 years
INVEGA TRINZA	Brand	PA for age less than 18 years

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

Drug Name	Drug Tier	Requirements / Limits
lithium carbonate	Generic	
lorazepam intensol	Generic	
lorazepam oral	Generic	
loxapine succinate	Generic	PA for age less than 18 years
LUMRYZ	Brand	PA; QL (1 EA per 1 day)
LUMRYZ STARTER PACK	Brand	PA; QL (28 EA per 365 days)
lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg	Generic	PA for age less than 18 years; QL (1 EA per 1 day)
lurasidone oral tablet 80 mg	Generic	PA for age less than 18 years; QL (2 EA per 1 day)
methylphenidate hcl oral solution 10 mg/5 ml	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (30 ML per 1 day)
methylphenidate hcl oral solution 5 mg/5 ml	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (60 ML per 1 day)
methylphenidate hcl oral tablet	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (3 EA per 1 day)
methylphenidate hcl oral tablet extended release	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (1 EA per 1 day)
methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 54 mg	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (1 EA per 1 day)
methylphenidate hcl oral tablet extended release 24hr 36 mg	Generic	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (2 EA per 1 day)
midazolam oral	Generic	
mirtazapine oral tablet 15 mg	Generic	QL (3 EA per 1 day)
mirtazapine oral tablet 30 mg	Generic	QL (1.5 EA per 1 day)
mirtazapine oral tablet 45 mg	Generic	QL (1 EA per 1 day)
mirtazapine oral tablet 7.5 mg	Generic	QL (6 EA per 1 day)
mirtazapine oral tablet,disintegrating 15 mg	Generic	QL (3 EA per 1 day)
mirtazapine oral tablet,disintegrating 30 mg	Generic	QL (1.5 EA per 1 day)
mirtazapine oral tablet,disintegrating 45 mg	Generic	QL (1 EA per 1 day)
modafinil	Generic	PA; PA for age less than 18 years; QL (1 EA per 1 day)
nighttime sleep-aid (doxylamn)	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
nortriptyline oral capsule	Generic	
olanzapine	Generic	PA for age less than 18 years
oxazepam	Generic	
paliperidone	Generic	PA for age less than 18 years; QL (1 EA per 1 day)
paroxetine hcl oral tablet 10 mg	Generic	QL (6 EA per 1 day)
paroxetine hcl oral tablet 20 mg	Generic	QL (3 EA per 1 day)
paroxetine hcl oral tablet 30 mg	Generic	QL (2 EA per 1 day)
paroxetine hcl oral tablet 40 mg	Generic	QL (1.5 EA per 1 day)
perphenazine	Generic	PA for age less than 18 years
perphenazine-amitriptyline	Generic	PA for age less than 18 years
PERSERIS	Brand	PA for age less than 18 years
quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg	Generic	PA for age less than 18 years
QUETIAPINE ORAL TABLET 150 MG	Brand	PA for age less than 18 years
quetiapine oral tablet extended release 24 hr 150 mg, 200 mg	Generic	PA for age less than 18 years; QL (1 EA per 1 day)
quetiapine oral tablet extended release 24 hr 300 mg, 400 mg, 50 mg	Generic	PA for age less than 18 years; QL (2 EA per 1 day)
RISPERDAL CONSTA	Brand	PA for age less than 18 years; QL (2 EA per 28 days)
risperidone oral solution	Generic	PA for age less than 18 years; QL (2 ML per 1 day)
risperidone oral tablet	Generic	PA for age less than 18 years; QL (2 EA per 1 day)
risperidone oral tablet,disintegrating	Generic	PA for age less than 18 years; QL (2 EA per 1 day)
sertraline oral concentrate	Generic	QL (10 ML per 1 day)
sertraline oral tablet 100 mg	Generic	QL (2 EA per 1 day)
sertraline oral tablet 25 mg	Generic	QL (8 EA per 1 day)
sertraline oral tablet 50 mg	Generic	QL (4 EA per 1 day)
sleep aid (doxylamine)	Generic	OTC
sodium oxybate	Generic	PA; QL (18 ML per 1 day)
SUNOSI	Brand	PA; PA for age less than 18 years; QL (1 EA per 1 day)
temazepam oral capsule 15 mg	Generic	PA for age less than 18 years; QL (2 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
temazepam oral capsule 30 mg	Generic	PA for age less than 18 years; QL (1 EA per 1 day)
thioridazine	Generic	PA for age less than 18 years
thiothixene	Generic	PA for age less than 18 years
trazodone oral tablet 100 mg	Generic	QL (6 EA per 1 day)
trazodone oral tablet 150 mg	Generic	QL (4 EA per 1 day)
trazodone oral tablet 300 mg	Generic	QL (2 EA per 1 day)
trazodone oral tablet 50 mg	Generic	QL (12 EA per 1 day)
trifluoperazine	Generic	PA for age less than 18 years
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 100 MG/0.28 ML	Brand	PA for age less than 18 years; QL (0.28 ML per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 125 MG/0.35 ML	Brand	PA for age less than 18 years; QL (0.35 ML per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 150 MG/0.42 ML	Brand	PA for age less than 18 years; QL (0.42 ML per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 200 MG/0.56 ML	Brand	PA for age less than 18 years; QL (0.56 ML per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 250 MG/0.7 ML	Brand	PA for age less than 18 years; QL (0.7 ML per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 50 MG/0.14 ML	Brand	PA for age less than 18 years; QL (0.14 ML per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 75 MG/0.21 ML	Brand	PA for age less than 18 years; QL (0.21 ML per 28 days)
venlafaxine oral capsule,extended release 24hr 150 mg	Generic	QL (3 EA per 1 day)
venlafaxine oral capsule,extended release 24hr 37.5 mg	Generic	QL (12 EA per 1 day)
venlafaxine oral capsule,extended release 24hr 75 mg	Generic	QL (6 EA per 1 day)
venlafaxine oral tablet 100 mg	Generic	QL (4.5 EA per 1 day)
venlafaxine oral tablet 25 mg	Generic	QL (18 EA per 1 day)
venlafaxine oral tablet 37.5 mg	Generic	QL (12 EA per 1 day)

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

Drug Name	Drug Tier	Requirements / Limits
venlafaxine oral tablet 50 mg	Generic	QL (9 EA per 1 day)
venlafaxine oral tablet 75 mg	Generic	QL (6 EA per 1 day)
vilazodone	Generic	QL (1 EA per 1 day)
VRAYLAR	Brand	PA; PA for age less than 18 years; QL (1 EA per 1 day)
VYVANSE ORAL CAPSULE	Brand	PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (1 EA per 1 day)
wal-som (doxylamine)	Generic	OTC
XYWAV	Brand	PA; QL (18 ML per 1 day)
zaleplon	Generic	PA for age less than 18 years; QL (1 EA per 1 day)
ziprasidone hcl	Generic	PA for age less than 18 years
ziprasidone mesylate	Generic	PA for age less than 18 years
zolpidem oral tablet 10 mg	Generic	PA for age less than 18 years; QL (1 EA per 1 day)
zolpidem oral tablet 5 mg	Generic	PA for age less than 18 years; QL (2 EA per 1 day)
CARDIOVASCULAR, HYPERTENSION / LIPIDS		
ANTIARRHYTHMIC AGENTS		
amiodarone oral	Generic	
dofetilide	Generic	
flecainide	Generic	
mexiletine	Generic	
propafenone	Generic	
quinidine sulfate oral tablet	Generic	
sotalol af	Generic	
sotalol oral	Generic	
ANTIHYPERTENSIVE THERAPY		
amiloride	Generic	
amiloride-hydrochlorothiazide	Generic	
amlodipine	Generic	
amlodipine-benazepril	Generic	
amlodipine-olmesartan	Generic	
amlodipine-valsartan	Generic	
atenolol	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
atenolol-chlorthalidone	Generic	
benazepril	Generic	
benazepril-hydrochlorothiazide	Generic	
bisoprolol fumarate oral tablet 10 mg, 5 mg	Generic	
BISOPROLOL FUMARATE ORAL TABLET 2.5 MG	Brand	QL (1 EA per 1 day)
bisoprolol-hydrochlorothiazide	Generic	
bumetanide oral	Generic	
cartia xt	Generic	
carvedilol	Generic	
CATAPRES-TTS-1	Brand	
CATAPRES-TTS-2	Brand	
CATAPRES-TTS-3	Brand	
chlorthalidone oral tablet 25 mg, 50 mg	Generic	
clonidine	Generic	
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	Generic	
diltiazem hcl oral capsule,ext.rel 24h degradable	Generic	
diltiazem hcl oral capsule,extended release 12 hr	Generic	
diltiazem hcl oral capsule,extended release 24 hr	Generic	
diltiazem hcl oral capsule,extended release 24hr	Generic	
diltiazem hcl oral tablet	Generic	
dilt-xr	Generic	
doxazosin	Generic	
enalapril maleate oral tablet	Generic	
enalapril-hydrochlorothiazide	Generic	
eplerenone	Generic	
fosinopril	Generic	
furosemide oral solution 10 mg/ml	Generic	
furosemide oral tablet	Generic	
guanfacine oral tablet	Generic	
hydralazine oral	Generic	
hydrochlorothiazide	Generic	
indapamide	Generic	
irbesartan	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
irbesartan-hydrochlorothiazide	Generic	
labetalol oral	Generic	
lisinopril	Generic	
lisinopril-hydrochlorothiazide	Generic	
losartan	Generic	
losartan-hydrochlorothiazide	Generic	
methyldopa	Generic	
metolazone	Generic	
metoprolol succinate	Generic	
metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	Generic	
METOPROLOL TARTRATE ORAL TABLET 12.5 MG	Brand	QL (2 EA per 1 day)
metyrosine	Generic	PA; QL (16 EA per 1 day)
minoxidil oral	Generic	
nadolol	Generic	
nebivolol	Generic	
nifedipine oral capsule	Generic	
nifedipine oral tablet extended release 24hr	Generic	
nifedipine oral tablet extended release 30 mg, 60 mg	Generic	
nifedipine oral tablet extended release 90 mg	Generic	QL (1 EA per 1 day)
nimodipine oral capsule	Generic	
olmesartan	Generic	
olmesartan-hydrochlorothiazide	Generic	
phenoxybenzamine	Generic	PA
prazosin	Generic	
propranolol oral	Generic	
ramipril	Generic	
spironolactone oral tablet	Generic	
spironolacton-hydrochlorothiaz	Generic	
telmisartan	Generic	
telmisartan-hydrochlorothiazid	Generic	
terazosin	Generic	
tiadylt er	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
torsemide oral	Generic	
triamterene-hydrochlorothiazid	Generic	
valsartan oral tablet	Generic	
valsartan-hydrochlorothiazide	Generic	
verapamil oral tablet	Generic	
verapamil oral tablet extended release	Generic	
CARDIAC GLYCOSIDES		
digoxin oral solution	Generic	
digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)	Generic	
COAGULATION THERAPY		
ADVATE	Brand	
ADYNOVATE	Brand	
AFSTYLA	Brand	
ALHEMO PEN	Brand	PA for age less than 12 years
ALPHANATE	Brand	
ALPHANINE SD	Brand	
ALPROLIX	Brand	
ALTUVIIIO	Brand	
aminocaproic acid oral solution	Generic	
aminocaproic acid oral tablet 500 mg	Generic	
BALFAXAR	Brand	PA for age less than 18 years
BENEFIX	Brand	
cilostazol	Generic	
clopidogrel	Generic	
COAGADEX	Brand	
CORIFACT	Brand	
dabigatran etexilate	Generic	
dipyridamole oral	Generic	
ELIQUIS DVT-PE TREAT 30D START	Brand	
ELIQUIS ORAL TABLET	Brand	
ELIQUIS ORAL TABLET FOR SUSPENSION 0.5 MG	Brand	QL (112 EA per 28 days)
ELIQUIS ORAL TABLET FOR SUSPENSION 1.5 MG (0.5 MG X 3)	Brand	QL (336 EA per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
ELIQUIS ORAL TABLET FOR SUSPENSION 2 MG (0.5 MG X 4)	Brand	QL (448 EA per 28 days)
ELIQUIS SPRINKLE	Brand	QL (2 EA per 1 day)
ELOCTATE	Brand	
eltrombopag olamine oral powder in packet 12.5 mg	Generic	PA; QL (1 EA per 1 day)
eltrombopag olamine oral powder in packet 25 mg	Generic	PA; QL (3 EA per 1 day)
eltrombopag olamine oral tablet 12.5 mg, 25 mg	Generic	PA; QL (1 EA per 1 day)
eltrombopag olamine oral tablet 50 mg	Generic	PA; QL (3 EA per 1 day)
eltrombopag olamine oral tablet 75 mg	Generic	PA; QL (2 EA per 1 day)
enoxaparin	Generic	
ESPEROCT	Brand	
FEIBA NF	Brand	
HEMLIBRA	Brand	
HEMOFIL M HIGH	Brand	
HEMOFIL M LOW	Brand	
HEMOFIL M MID	Brand	
HEMOFIL M SUPER HIGH	Brand	
heparin (porcine) injection solution	Generic	
heparin (porcine) injection syringe 5,000 unit/ml	Generic	
heparin, porcine (pf) injection	Generic	
HUMATE-P	Brand	
HYMPAVZI PEN	Brand	PA for age less than 12 years; QL (4 ML per 28 days)
IDELVION	Brand	
IXINITY INTRAVENOUS RECON SOLN 1,000 UNIT, 1,500 UNIT, 3,000 UNIT, 500 UNIT	Brand	
JIVI	Brand	
KOATE	Brand	
KOVALTRY	Brand	
NOVOEIGHT	Brand	
NOVOSEVEN RT	Brand	
NUWIQ	Brand	
OBIZUR	Brand	
pentoxifylline	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
phytonadione (vitamin k1) oral tablet 5 mg	Generic	
prasugrel hcl	Generic	
PROFILNINE	Brand	
QFITLIA	Brand	PA for age less than 12 years
QFITLIA PEN	Brand	PA for age less than 12 years
REBINYN	Brand	
RECOMBINATE	Brand	
RIXUBIS	Brand	
SEVENFACT	Brand	
ticagrelor	Generic	
TRETTEN	Brand	
VONVENDI	Brand	
warfarin	Generic	
WILATE	Brand	
XARELTO	Brand	
XARELTO DVT-PE TREAT 30D START	Brand	
XYNTHA	Brand	
XYNTHA SOLOFUSE	Brand	
LIPID/CHOLESTEROL LOWERING AGENTS		
atorvastatin	Generic	
cholestyramine (with sugar)	Generic	
cholestyramine light	Generic	
colesevelam oral tablet	Generic	
colestipol oral tablet	Generic	
endur-acin	Generic	OTC
ezetimibe	Generic	
fenofibrate micronized oral capsule 134 mg, 67 mg	Generic	
fenofibrate nanocrystallized	Generic	
fenofibrate oral tablet 160 mg, 54 mg	Generic	
gemfibrozil	Generic	
icosapent ethyl	Generic	PA for age less than 18 years; QL (4 EA per 1 day)
lovastatin	Generic	
niacin (inositol niacinate) oral capsule 500 mg	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
niacin oral capsule, extended release 250 mg	Generic	OTC
niacin oral tablet	Generic	OTC
NIACIN ORAL TABLET EXTENDED RELEASE 1,000 MG	Brand	OTC
niacin oral tablet extended release 24 hr	Generic	
niacin oral tablet extended release 250 mg, 500 mg	Generic	OTC
niacinamide oral tablet 500 mg	Generic	OTC
omega-3 acid ethyl esters	Generic	ST; PA for age less than 18 years
omega-3 fatty acids	Generic	OTC
pravastatin	Generic	
rosuvastatin	Generic	
simvastatin	Generic	
slo-niacin oral tablet extended release 500 mg	Generic	OTC
super omega-3	Generic	OTC
MISCELLANEOUS CARDIOVASCULAR AGENTS		
ivabradine	Generic	PA; QL (2 EA per 1 day)
sacubitril-valsartan	Generic	QL (2 EA per 1 day)
NITRATES		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	Generic	
isosorbide mononitrate	Generic	
nitro-bid	Generic	
nitroglycerin sublingual	Generic	
nitroglycerin transdermal	Generic	
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
acitretin	Generic	
calcipotriene scalp	Generic	
calcipotriene topical cream	Generic	QL (120 GM per 30 days)
calcipotriene topical ointment	Generic	
PYZCHIVA INTRAVENOUS	Brand	PA; PA for age less than 6 years; QL (26 ML per 365 days)
PYZCHIVA SUBCUTANEOUS SOLUTION	Brand	PA; PA for age less than 6 years; QL (0.5 ML per 63 days)

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

Drug Name	Drug Tier	Requirements / Limits
PYZCHIVA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	Brand	PA; PA for age less than 6 years; QL (0.5 ML per 63 days)
PYZCHIVA SUBCUTANEOUS SYRINGE 90 MG/ML	Brand	PA; PA for age less than 6 years; QL (1 ML per 42 days)
selenium sulfide topical lotion	Generic	
STARJEMZA INTRAVENOUS	Brand	PA; PA for age less than 6 years; QL (26 ML per 365 days)
STARJEMZA SUBCUTANEOUS SOLUTION	Brand	PA; PA for age less than 6 years; QL (0.5 ML per 63 days)
STARJEMZA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	Brand	PA; PA for age less than 6 years; QL (0.5 ML per 63 days)
STARJEMZA SUBCUTANEOUS SYRINGE 90 MG/ML	Brand	PA; PA for age less than 6 years; QL (1 ML per 42 days)
thera-gel	Generic	OTC
VTAMA	Brand	PA; PA for age less than 2 years
BURN THERAPY		
silver sulfadiazine	Generic	
ssd	Generic	
KERATOLYTICS		
compound w topical liquid	Generic	OTC
dermarest psoriasis medicated topical shampoo	Generic	OTC
duofilm	Generic	OTC
liquid corn and callus remover	Generic	OTC
sebex	Generic	OTC; QL (120 ML per 30 days)
selsun blue (salicylic acid) topical shampoo 3 %	Generic	OTC
selsun blue naturals	Generic	OTC
therapeutic dandruff shampoo	Generic	OTC
wart remover topical liquid	Generic	OTC
MISCELLANEOUS DERMATOLOGICALS		
a and d (lanolin-petrolatum)	Generic	OTC
ADBRY	Brand	PA; PA for age less than 12 years; QL (4 ML per 28 days)
advanced healing (petrolatum)	Generic	OTC
ammonium lactate	Generic	OTC
anti-itch (menthol-camphor)	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
ARTHRITIS PAIN RELIEF(CAPSAIC) TOPICAL CREAM 0.075 %	Brand	OTC
arthritis pain relief(capsaic) topical cream 0.1 %	Generic	OTC
aspercreme	Generic	OTC
beta care topical cream	Generic	OTC
BOUDREAUXS BUTT PASTE	Brand	OTC
calmoseptine topical ointment	Generic	OTC
calprotect	Generic	OTC
CAPSAICIN TOPICAL ADHESIVE PATCH,MEDICATED 0.025 %	Brand	OTC
capsaicin topical cream	Generic	OTC
CAPSAICIN TOPICAL LIQUID	Brand	OTC
CAPZASIN TOPICAL LIQUID	Brand	OTC
capzasin-hp	Generic	OTC
capzix	Generic	OTC
CERAVE SA (WITH NIACINAMIDE) TOPICAL CREAM	Brand	OTC
CERAVE TOPICAL CREAM	Brand	OTC
cetaphil moisturizing topical cream	Generic	OTC
COCONUT OIL CREAM	Brand	OTC
cold and hot (menthol)	Generic	OTC
CUTTER BACKWOODS	Brand	1 bottle every 30 days; OTC
CUTTER BACKWOODS DRY	Brand	1 bottle every 30 days; OTC
CUTTER LEMON EUCALYPTUS	Brand	1 bottle every 30 days; OTC
CUTTER NATURAL INSECT REPELLNT	Brand	1 bottle every 30 days; OTC
CUTTER NATURAL REPELLENT2	Brand	1 bottle every 30 days; OTC
CUTTER SKINSATIONS TOPICAL SPRAY,NON-AEROSOL	Brand	1 bottle every 30 days; OTC
dermaphor topical ointment	Generic	OTC
diaper rash topical ointment	Generic	OTC
DRYSOL	Brand	
DRYSOL DAB-O-MATIC	Brand	
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML	Brand	PA; QL (2.28 ML per 28 days)
DUPIXENT SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	Brand	PA; QL (4 ML per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
DUPIXENT SUBCUTANEOUS SYRINGE 200 MG/1.14 ML	Brand	PA; QL (2.28 ML per 28 days)
DUPIXENT SUBCUTANEOUS SYRINGE 300 MG/2 ML	Brand	PA; QL (4 ML per 28 days)
EBGLYSS PEN	Brand	PA; PA for age less than 12 years; QL (2 ML per 28 days)
EBGLYSS SYRINGE	Brand	PA; PA for age less than 12 years; QL (2 ML per 28 days)
EUCERIN	Brand	OTC
eucerin original	Generic	OTC
EUCRISA	Brand	PA; QL (100 GM per 30 days)
FLANDERS BUTTOCKS	Brand	OTC
fluorouracil topical cream 5 %	Generic	QL (40 GM per 365 days)
fluorouracil topical solution	Generic	QL (10 ML per 365 days)
hydrolatum	Generic	OTC
imiquimod topical cream in packet 5 %	Generic	
INSECT REPELLENT (DEET)	Brand	1 bottle every 30 days; OTC
INSECT REPELLENT (PICARIDIN)	Brand	1 bottle every 30 days; OTC
MEDICATED HEAT PATCH	Brand	OTC
menthol-zinc oxide	Generic	OTC
minerin	Generic	OTC
minerin creme	Generic	OTC
moiturizing lotion	Generic	OTC
muscle rub	Generic	OTC
muscle rub ultra-strength	Generic	OTC
NATRAPEL TOPICAL AEROSOL,SPRAY	Brand	1 bottle every 30 days; OTC
OFF ACTIVE	Brand	1 bottle every 30 days; OTC
OFF DEEP WOODS DRY	Brand	1 bottle every 30 days; OTC
OFF DEEP WOODS SPORTSMEN	Brand	1 bottle every 30 days; OTC
OFF DEEP WOODS TOPICAL AEROSOL,SPRAY	Brand	1 bottle every 30 days; OTC
OFF DEEP WOODS TOPICAL SPRAY,NON-AEROSOL	Brand	1 bottle every 30 days; OTC
OFF FAMILYCARE (WITH DEET)	Brand	1 bottle every 30 days; OTC
OFF FAMILYCARE(WITH PICARIDIN)	Brand	1 bottle every 30 days; OTC
PANRETIN	Brand	PA

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

Drug Name	Drug Tier	Requirements / Limits
petrolatum	Generic	OTC
pimecrolimus	Generic	PA; PA for age less than 2 years; QL (30 GM per 30 days)
podofilox topical solution	Generic	
RANGER READY REPELLENT	Brand	1 bottle every 30 days; OTC
REPEL 100	Brand	1 bottle every 30 days; OTC
REPEL FAMILY	Brand	1 bottle every 30 days; OTC
REPEL HUNTER'S	Brand	1 bottle every 30 days; OTC
REPEL LEMON EUCALYPTUS	Brand	1 bottle every 30 days; OTC
REPEL SPORTSMEN	Brand	1 bottle every 30 days; OTC
REPEL SPORTSMEN DRY	Brand	1 bottle every 30 days; OTC
REPEL SPORTSMEN MAX	Brand	1 bottle every 30 days; OTC
REPEL TICK DEFENSE	Brand	1 bottle every 30 days; OTC
skin protectant a-d (pet, lan)	Generic	OTC
skin treatment	Generic	OTC
tacrolimus topical ointment 0.03 %	Generic	PA; PA for age less than 2 years; QL (30 GM per 30 days)
tacrolimus topical ointment 0.1 %	Generic	PA; PA for age less than 16 years; QL (30 GM per 30 days)
thera-derm	Generic	OTC
therapeutic moisturizing	Generic	OTC
THERAPEUTIC MOISTURIZING CREAM	Brand	OTC
TOTAL HOME INSECT REPELLENT	Brand	1 bottle every 30 days; OTC
TRIPLE HELIX COLLAGEN TOPICAL POWDER	Brand	OTC
TRIPLE HELIX COLLAGEN TOPICAL POWDER IN PACKET	Brand	OTC
ULTRATHON	Brand	1 bottle every 30 days; OTC
VALCHLOR	Brand	PA; QL (60 GM per 30 days)
vanicream	Generic	OTC
VIT E-WHEAT GERM-ALOE VERA	Brand	OTC
walgreens dry skin treatment	Generic	OTC
white petrolatum topical ointment	Generic	OTC
XERAC AC	Brand	OTC
zinc oxide topical ointment , 40 %	Generic	OTC
zostrix-hp	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
THERAPY FOR ACNE		
accutane	Generic	
acne cleansing bar	Generic	OTC
acne control(benzoyl peroxide)	Generic	PA for age greater than or equal to 18 years; OTC
acne foaming wash	Generic	PA for age greater than or equal to 18 years; OTC
acne medication topical gel 10 %	Generic	PA for age greater than or equal to 18 years; OTC
ACNE MEDICATION TOPICAL GEL 5 %	Brand	PA for age greater than or equal to 18 years; OTC
acne treatment (benzoyl perox) topical gel	Generic	PA for age greater than or equal to 18 years; OTC
acne-clear	Generic	PA for age greater than or equal to 18 years; OTC
adapalene topical gel 0.1 %	Generic	PA for age greater than or equal to 18 years; OTC
advanced exfoliating cleanser	Generic	PA for age greater than or equal to 18 years; OTC
amnesteem	Generic	
benzoyl peroxide topical cleanser 10 %, 5 %	Generic	PA for age greater than or equal to 18 years; OTC
benzoyl peroxide topical gel 10 %, 2.5 %, 5 %	Generic	PA for age greater than or equal to 18 years; OTC
bp wash topical cleanser 10 %, 5 %	Generic	PA for age greater than or equal to 18 years; OTC
CERAVE ACNE	Brand	OTC
claravis	Generic	
clearasil daily clear(benzoyl)	Generic	OTC
clindacin etz topical swab	Generic	PA for age greater than or equal to 18 years; QL (60 EA per 30 days)
clindacin p	Generic	QL (60 EA per 30 days)
clindamycin phosphate topical gel	Generic	QL (60 GM per 30 days)
clindamycin phosphate topical lotion	Generic	QL (60 ML per 30 days)
clindamycin phosphate topical solution	Generic	QL (60 ML per 30 days)
clindamycin phosphate topical swab	Generic	QL (60 EA per 30 days)

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

Drug Name	Drug Tier	Requirements / Limits
clindamycin-benzoyl peroxide topical gel 1.2 %(1 % base) -5 %	Generic	PA; PA for age greater than or equal to 18 years; PA for age greater than 18 years
creamy acne face	Generic	OTC
erythromycin with ethanol topical solution	Generic	PA; PA for age greater than or equal to 18 years; PA for age greater than 18 years
foaming acne face wash	Generic	PA for age greater than or equal to 18 years; OTC
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	Generic	
metronidazole topical cream	Generic	
metronidazole topical gel	Generic	
metronidazole topical lotion	Generic	
rosadan topical cream	Generic	
rosadan topical gel	Generic	
targeted acne spot treatment	Generic	OTC
tretinoin	Generic	PA; PA for age greater than 18 years
zenatane	Generic	
TOPICAL ANESTHETICS		
anecream	Generic	OTC
lidocaine hcl mucous membrane solution	Generic	
lidocaine hcl topical cream 3 %	Generic	
LIDOCAINE HCL TOPICAL CREAM 4 %	Brand	OTC
lidocaine topical adhesive patch,medicated 5 %	Generic	QL (3 EA per 1 day)
lidocaine topical ointment	Generic	
lidocaine-prilocaine topical cream	Generic	
lidocan iii	Generic	QL (3 EA per 1 day)
lidocan iv	Generic	QL (3 EA per 1 day)
lidocan v	Generic	QL (3 EA per 1 day)
pain relieving (benzocaine)	Generic	OTC
TOPICAL ANTIBACTERIALS		
antibiotic (neomy-bacit-polym)	Generic	OTC
bacitracin topical	Generic	OTC
bacitracin zinc topical ointment	Generic	OTC
bacitraycin plus topical ointment 500 unit/gram	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
FIRST AID ANTIBIOTIC	Brand	OTC
first aid antibiotic-pain rlf	Generic	OTC
gentamicin topical	Generic	
mupirocin	Generic	
triple antibiotic	Generic	OTC
triple antibiotic plus	Generic	OTC
triple antibiotic-pain relief	Generic	OTC
TOPICAL ANTIFUNGALS		
antifungal (clotrimazole)	Generic	OTC
antifungal (miconazole)	Generic	OTC
antifungal (tolnaftate) topical aerosol,spray	Generic	OTC
antifungal (tolnaftate) topical cream	Generic	OTC
athlete's foot (clotrimazole) topical cream	Generic	OTC
ATHLETE'S FOOT (TERBINAFINE)	Brand	OTC
athlete's foot (tolnaftate)	Generic	OTC
athlete's foot topical aerosol powder	Generic	OTC
athletic foot cream	Generic	OTC
blis-to-sol (tolnaftate)	Generic	OTC
butenafine	Generic	OTC
ciclodan topical solution	Generic	
ciclopirox topical cream	Generic	
ciclopirox topical gel	Generic	
ciclopirox topical shampoo	Generic	
ciclopirox topical solution	Generic	
clotrimazole topical cream	Generic	OTC
clotrimazole topical solution	Generic	
clotrimazole-betamethasone	Generic	
econazole nitrate topical cream	Generic	
foot and sneaker	Generic	OTC
formula 3	Generic	OTC
gentian violet topical solution 1 %	Generic	OTC
itch relief (clotrimazole)	Generic	OTC
jock itch	Generic	OTC
jock itch (clotrimazole)	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
jock itch (terbinafine)	Generic	OTC
ketoconazole topical cream	Generic	
ketoconazole topical shampoo	Generic	
klayesta	Generic	
lasolex ac	Generic	OTC
LOTRIMIN AF (CLOTRIMAZOLE) TOPICAL CREAM	Brand	OTC
miconazole nitrate topical cream	Generic	OTC
micotrin ac	Generic	OTC
micotrin al	Generic	OTC
mycozyl ac	Generic	OTC
nystatin topical	Generic	
nystatin-triamcinolone	Generic	QL (60 GM per 30 days)
nystop	Generic	
odor control foot-sneaker	Generic	OTC
ringworm	Generic	OTC
terbinafine hcl topical	Generic	OTC
tolnaftate topical aerosol powder	Generic	OTC
tolnaftate topical cream	Generic	OTC
tolnaftate topical powder	Generic	OTC
trimazole	Generic	OTC
TRITOLNACIDE C	Brand	OTC
zeasorb af	Generic	OTC
TOPICAL ANTIVIRALS		
acyclovir topical ointment	Generic	
docosanol	Generic	OTC
TOPICAL CORTICOSTEROIDS		
anti-itch (hc) topical cream	Generic	OTC
anti-itch (hc) topical ointment	Generic	OTC
betamethasone dipropionate topical cream	Generic	
betamethasone dipropionate topical lotion	Generic	
betamethasone valerate topical cream	Generic	
betamethasone valerate topical lotion	Generic	
betamethasone valerate topical ointment	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
clobetasol scalp	Generic	
clobetasol topical cream 0.05 %	Generic	
clobetasol topical gel	Generic	
clobetasol topical ointment	Generic	
clobetasol-emollient topical cream	Generic	
cortisone (hydrocortisone) topical cream	Generic	OTC
cortisone with aloe	Generic	OTC
cortizone-10 topical cream	Generic	OTC
dermarest eczema (hydrocort)	Generic	OTC
fluocinolone and shower cap	Generic	QL (119 ML per 30 days)
fluocinolone topical ointment	Generic	
fluticasone propionate topical cream	Generic	
fluticasone propionate topical ointment	Generic	
halobetasol propionate topical cream	Generic	
hydrocortisone acetate topical cream	Generic	OTC
hydrocortisone acetate topical ointment	Generic	OTC
hydrocortisone butyrate topical cream	Generic	
hydrocortisone butyrate topical ointment	Generic	
hydrocortisone butyrate topical solution	Generic	
hydrocortisone topical cream 0.5 %, 1 %	Generic	OTC
hydrocortisone topical cream 2.5 %	Generic	
hydrocortisone topical lotion 1 %	Generic	OTC
hydrocortisone topical lotion 2.5 %	Generic	
hydrocortisone topical ointment 0.5 %, 1 %	Generic	OTC
hydrocortisone topical ointment 2.5 %	Generic	
hydrocortisone-aloe vera	Generic	OTC
hydrocream	Generic	OTC
itch relief (hc)	Generic	OTC
itch relief (hc) with aloe	Generic	OTC
mometasone topical	Generic	
nizoral scalp itch	Generic	OTC
PROCTOCORT TOPICAL	Brand	
scalpicin anti-itch	Generic	OTC
triamcinolone acetonide topical cream	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
triamcinolone acetonide topical lotion	Generic	
triamcinolone acetonide topical ointment	Generic	
triderm topical cream 0.5 %	Generic	
TOPICAL SCABICIDES / PEDICULICIDES		
ivermectin topical lotion	Generic	OTC; QL (117 GM per 30 days)
lice killing	Generic	OTC
lice killing (permethrin)	Generic	OTC
lice solution	Generic	OTC
lice treatment (permethrin)	Generic	OTC
lice treatment topical liquid	Generic	OTC
malathion	Generic	QL (120 ML per 30 days)
permethrin	Generic	QL (120 GM per 30 days)
rid complete lice elim kit topical	Generic	OTC
DIAGNOSTICS / MISCELLANEOUS AGENTS		
ANOREXIANTS		
benzphetamine	Generic	PA; PA for age less than 17 years
diethylpropion	Generic	PA; PA for age less than 16 years
ORLISTAT	Brand	PA; PA for age less than 12 years
phendimetrazine tartrate	Generic	PA
phentermine oral capsule	Generic	PA; PA for age less than 17 years
phentermine oral tablet 37.5 mg	Generic	PA; PA for age less than 17 years
XENICAL	Brand	PA; PA for age less than 12 years
ENZYMES		
co q-10 oral capsule 100 mg, 200 mg, 50 mg	Generic	OTC
coenzyme q10 oral capsule 100 mg, 200 mg, 30 mg, 50 mg	Generic	OTC
q-sorb co q-10 oral capsule 100 mg, 200 mg	Generic	OTC
MISCELLANEOUS AGENTS		
acamprosate	Generic	
alpha lipoic acid oral capsule 600 mg	Generic	OTC
BIOTENE DRY MOUTH ORAL RINSE	Brand	OTC
caffeine citrate oral	Generic	
disulfiram	Generic	
ENDARI	Brand	PA for age less than 5 years

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

Drug Name	Drug Tier	Requirements / Limits
glucose gel	Generic	OTC
glucose oral tablet,chewable 3.75 gram, 4 gram	Generic	OTC
glutose-5	Generic	OTC
glycerol phenylbutyrate	Generic	PA; QL (17.5 ML per 1 day)
isopropyl alcohol solution 91 %, 99 %	Generic	OTC
ISOPROPYL ALCOHOL TOPICAL SPRAY,NON-AEROSOL	Brand	OTC
kionex oral suspension	Generic	
levocarnitine (with sugar)	Generic	
levocarnitine oral solution 100 mg/ml	Generic	
levocarnitine oral tablet	Generic	
melatonin oral liquid 5 mg/15 ml	Generic	OTC
melatonin oral tablet 1 mg, 10 mg, 3 mg, 5 mg	Generic	OTC
melatonin oral tablet extended release 1 mg, 3 mg	Generic	OTC
MELATONIN ORAL TABLET,CHEWABLE 2.5 MG	Brand	OTC
melatonin oral tablet,disintegrating 10 mg, 3 mg	Generic	OTC
MELATONIN ORAL TABLET,DISINTEGRATING 5 MG	Brand	OTC
melatonin-pyridoxine hcl (b6) oral tablet, ir and er, biphasic 3-10 mg	Generic	OTC
midodrine	Generic	
nitisinone	Generic	PA
pilocarpine hcl oral	Generic	
riluzole	Generic	
sevelamer carbonate oral tablet	Generic	QL (17 EA per 1 day)
sodium chloride irrigation	Generic	
sodium polystyrene sulfonate	Generic	
sps (with sorbitol)	Generic	
MISCELLANEOUS DEVICES		
INSTACLEAN	Brand	OTC
isopropyl alcohol solution 70 %	Generic	OTC
NEUTRACEUTICALS		
MELATONIN-LEMON BALM LEAF EXTR	Brand	OTC
melatonin-pyridoxine hcl (b6) oral tablet 3-10 mg	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
melatonin-pyridoxine hcl (b6) oral tablet extended release	Generic	OTC
melatonin-pyridoxine hcl (b6) oral tablet, ir and er, biphasic 5-10 mg	Generic	OTC
SMOKING DETERRENTS		
bupropion hcl (smoking deter)	Generic	QL (2 EA per 1 day)
CHANTIX	Brand	183 days supply in a rolling 365 days
CHANTIX CONTINUING MONTH BOX	Brand	183 days supply in a rolling 365 days
CHANTIX STARTING MONTH BOX	Brand	183 days supply in a rolling 365 days
nicotine	Generic	OTC; QL (1 EA per 1 day)
nicotine (polacrilex) buccal gum	Generic	OTC; QL (24 EA per 1 day)
nicotine (polacrilex) buccal lozenge	Generic	OTC; QL (20 EA per 1 day)
nicotine (polacrilex) buccal mini lozenge	Generic	OTC; QL (20 EA per 1 day)
quit 2 buccal gum	Generic	OTC; QL (24 EA per 1 day)
quit 2 buccal lozenge	Generic	OTC; QL (20 EA per 1 day)
quit 4 buccal gum	Generic	OTC; QL (24 EA per 1 day)
quit 4 buccal lozenge	Generic	OTC; QL (20 EA per 1 day)
stop smoking aid	Generic	OTC; QL (20 EA per 1 day)
varenicline tartrate	Generic	183 days supply in a rolling 365 days
EAR, NOSE / THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
altamist	Generic	OTC
ayr saline nasal aerosol,spray	Generic	OTC
ayr saline nasal drops	Generic	OTC
azelastine nasal spray,non-aerosol 137 mcg (0.1 %)	Generic	
baby ayr saline	Generic	OTC
BIOTENE MOISTURIZING MOUTH	Brand	OTC
children's saline nasal spray	Generic	OTC
chlorhexidine gluconate mucous membrane	Generic	
deep sea nasal	Generic	OTC
fluoride (sodium) dental cream	Generic	
fluoride (sodium) dental gel	Generic	
little remedies	Generic	OTC
little remedies saline	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
MOUTHKOTE	Brand	OTC
nasal moisturizing	Generic	OTC
nasal spray (sodium chloride)	Generic	OTC
neilmed pediat sinus rinse ref	Generic	OTC
neilmed sinus rinse refill	Generic	OTC
paroex oral rinse	Generic	
periogard	Generic	
saline mist	Generic	OTC
saline nasal	Generic	OTC
saline nasal mist nasal aerosol,spray 0.65 %	Generic	OTC
sf	Generic	
sf 5000 plus	Generic	
sinus rinse	Generic	OTC
sodium fluoride 5000 plus	Generic	
triamcinolone acetonide dental	Generic	
MISCELLANEOUS OTIC PREPARATIONS		
acetic acid otic (ear)	Generic	
ciprofloxacin hcl otic (ear)	Generic	
ear drops (carbamide peroxide)	Generic	OTC
ear wax removal drops	Generic	OTC
ear wax removal kit	Generic	OTC
flac otic oil	Generic	
fluocinolone acetonide oil	Generic	
hydrocortisone-acetic acid	Generic	
ofloxacin otic (ear)	Generic	
OTIC STEROID / ANTIBIOTIC		
ciprofloxacin-dexamethasone	Generic	
neomycin-polymyxin-hc otic (ear)	Generic	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
dexamethasone oral solution	Generic	
dexamethasone oral tablet	Generic	
EMFLAZA	Brand	PA; PA for age less than 2 years
fludrocortisone	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
hydrocortisone oral	Generic	
hydrocortisone sod succinate	Generic	QL (2 EA per 30 days)
methylprednisolone oral tablet 4 mg	Generic	
methylprednisolone oral tablets,dose pack	Generic	
prednisolone oral solution	Generic	
prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)	Generic	
prednisone oral solution	Generic	
prednisone oral tablet	Generic	
prednisone oral tablets,dose pack	Generic	
SOLU-CORTEF	Brand	QL (2 EA per 30 days)
SOLU-CORTEF ACT-O-VIAL (PF)	Brand	QL (2 EA per 30 days)
ANTITHYROID AGENTS		
methimazole oral tablet 10 mg, 5 mg	Generic	
propylthiouracil	Generic	
DIABETES THERAPY		
1ST TIER UNIFINE PENTIPS NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 32 GAUGE X 5/32"	Brand	OTC
1ST TIER UNIFINE PENTIPS PLUS NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 32 GAUGE X 5/32"	Brand	OTC
2-IN-1 LANCET DEVICE	Brand	OTC; QL (210 EA per 30 days)
acarbose	Generic	PA for age less than 18 years
ACCU-CHEK FASTCLIX LANCET DRUM	Brand	OTC; QL (210 EA per 30 days)
ACCU-CHEK FASTCLIX LANCING DEV	Brand	OTC
ACCU-CHEK SAFE-T-PRO PLUS	Brand	OTC; QL (210 EA per 30 days)
ACCU-CHEK SOFT DEV LANCETS	Brand	OTC
ACCU-CHEK SOFTCLIX LANCETS	Brand	OTC; QL (210 EA per 30 days)
acti-lance lancets 17 gauge, 28 gauge	Generic	OTC; QL (210 EA per 30 days)
ACTI-LANCE LANCETS 23 GAUGE	Brand	OTC; QL (210 EA per 30 days)
ADJUSTABLE LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
ADVANCED LANCING DEVICE	Brand	OTC
ADVANCED TRAVEL LANCETS	Brand	OTC; QL (210 EA per 30 days)
ADVANTAGE SAFETY LANCET	Brand	OTC; QL (210 EA per 30 days)

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

Drug Name	Drug Tier	Requirements / Limits
ADVOCATE LANCET	Brand	OTC; QL (210 EA per 30 days)
ADVOCATE LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
ADVOCATE PEN NEEDLE	Brand	OTC
ADVOCATE SYRINGES	Brand	
AEROCHAMBER MECHANICAL VENT	Brand	QL (2 EA per 365 days)
AEROCHAMBER MINI	Brand	QL (2 EA per 365 days)
AEROCHAMBER MV	Brand	QL (2 EA per 365 days)
AEROCHAMBER PLUS FLOW-VU	Brand	QL (2 EA per 365 days)
AEROCHAMBER PLUS FLOW-VU,L MSK	Brand	QL (2 EA per 365 days)
AEROCHAMBER PLUS FLOW-VU,M MSK	Brand	QL (2 EA per 365 days)
AEROCHAMBER PLUS FLOW-VU,S MSK	Brand	QL (2 EA per 365 days)
AEROCHAMBER PLUS Z STAT LG MSK	Brand	QL (2 EA per 365 days)
AEROCHAMBER PLUS Z STAT MD MSK	Brand	QL (2 EA per 365 days)
AEROCHAMBER PLUS Z STAT SM MSK	Brand	QL (2 EA per 365 days)
AEROCHAMBER Z-STAT PLUS-FLW SG	Brand	QL (2 EA per 365 days)
AEROCHAMBER2GO	Brand	QL (2 EA per 365 days)
AEROVENT PLUS	Brand	QL (2 EA per 365 days)
AGAMATRIX ULTRA-THIN LANCET	Brand	OTC; QL (210 EA per 30 days)
AIMSCO LATEX CONDOM	Brand	OTC
ALCOHOL PREP PADS	Brand	OTC
ALCOHOL SWABS	Brand	OTC
alcohol wipes	Generic	OTC
ALCOH-WIPE	Brand	OTC
ALLERGY SYRINGE 1 ML 27 X 1/2"	Brand	OTC
ALTERNATE SITE LANCET	Brand	OTC; QL (210 EA per 30 days)
ALTERNATE SITE LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
AQINJECT PEN NEEDLE	Brand	OTC
AQUA LANCE LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
ASSURE ID DUO PRO SFTY PEN NDL	Brand	OTC
ASSURE ID PEN NEEDLE	Brand	OTC
ASSURE ID PRO PEN NEEDLE	Brand	OTC
ASSURE LANCE	Brand	OTC; QL (210 EA per 30 days)
ASSURE LANCE PLUS	Brand	OTC; QL (210 EA per 30 days)
AUTOJECT 2 INJECTION DEVICE	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
AUTOLET IMPRESSION LANC DEV	Brand	OTC
AUTOLET LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
AUTOLET LITE	Brand	OTC; QL (2 EA per 365 days)
AUTOPEN 1 TO 21 UNITS	Brand	OTC
AUTOPEN 2 TO 42 UNITS	Brand	OTC
BAQSIMI	Brand	
BASAGLAR KWIKPEN U-100 INSULIN	Brand	
BD ECLIPSE LUER-LOK NEEDLE 25 GAUGE X 1 1/2"	Brand	
BD ECLIPSE LUER-LOK SYRINGE 3 ML 25 X 5/8"	Brand	OTC
BD ECLIPSE NEEDLE 25 GAUGE X 1"	Brand	
BD FILTER NEEDLE-5 MICRON	Brand	
BD INTERLINK SYRINGE	Brand	OTC
BD LUER-LOK SYRINGE SYRINGE 1 ML, 1 ML 20 GAUGE X 1", 10 ML 20 X 1 1/2", 10 ML 20 X 1", 10 ML 21 X 1 1/2", 20 ML, 3 ML, 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 1 1/2 ", 3 ML 25 X 5/8", 5 ML 20 X 1 1/2", 5 ML 20 X 1", 5 ML 21 GAUGE X 1 1/2", 5 ML 21 GAUGE X 1"	Brand	OTC
BD MICROTAINER LANCET 1.5 X 2 MM	Brand	OTC
BD MICROTAINER LANCET 21 GAUGE, 30 GAUGE	Brand	OTC; QL (210 EA per 30 days)
BD PRECISIONGLIDE	Brand	
BD REGULAR BEVEL NEEDLES	Brand	
BD SAFETYGLIDE ALLERGIST TRAY SYRINGE 1 ML 27 X 1/2"	Brand	
BD SAFETYGLIDE INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 1 ML 29 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64"	Brand	
BD SAFETYGLIDE NEEDLE NEEDLE 18 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 5/8"	Brand	
BD SAFETYGLIDE SHIELDING REG SYRINGE 1 ML 25 GAUGE X 5/8"	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
BD SAFETYGLIDE SYRINGE 1 ML 27 GAUGE X 5/8"	Brand	
BD SAFETYGLIDE SYRINGE SYRINGE 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 5/8"	Brand	OTC
BD SAFETYGLIDE TB REG BEVEL	Brand	OTC
BD SAFETYGLIDE TUBERCULIN SYRINGE 1 ML 27 GAUGE X 3/8"	Brand	
BD SLIP TIP SYRINGE 1 ML 26 GAUGE X 5/8", 3 ML	Brand	OTC
BD SPECIALTY USE NEEDLES NEEDLE 16 GAUGE X 1 1/2", 16 GAUGE X 1", 21 GAUGE X 2", 25 GAUGE X 7/8", 30 GAUGE X 1/2"	Brand	
BD SYRINGE-DUAL CANNULA	Brand	OTC
BD TUBERCULIN SLIP-TIP	Brand	OTC
BD TUBERCULIN SYRINGE 1 ML 21 GAUGE X 1", 1 ML 25 GAUGE X 5/8", 1 ML 26 GAUGE X 3/8"	Brand	OTC
BD TUBERCULIN SYRINGE 1 ML 27 X 1/2"	Brand	
BLUNT NEEDLE, DISPOSABLE NEEDLE 18 X 1 1/2 "	Brand	
BULLSEYE MINI SAFETY LANCETS	Brand	OTC; QL (210 EA per 30 days)
BUTTERFLY TOUCH LANCET	Brand	OTC; QL (210 EA per 30 days)
CAREFINE PEN NEEDLE	Brand	OTC
CAREONE LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
CAREONE ULTRA THIN LANCET	Brand	OTC; QL (210 EA per 30 days)
CAREPOINT LUER LOCK SYRINGE	Brand	OTC
CAREPOINT LUER LOCK SYR-NEEDLE SYRINGE 3 ML 20 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 3 ML 22 X 1 1/2", 3 ML 23 GAUGE X 1 1/2", 3 ML 25 GAUGE X 1", 3 ML 25 X 5/8"	Brand	OTC
CAREPOINT LUER LOCK SYR-NEEDLE SYRINGE 3 ML 22 GAUGE X 1", 3 ML 23 X 1"	Brand	
CAREPOINT LUER SLIP SYRINGE	Brand	OTC
CAREPOINT LUER SLIP SYRING-NDL	Brand	OTC
CAREPOINT PRECISION LUER LOCK	Brand	
CAREPOINT PRECISION SAFETY	Brand	
CARESENS LANCETS	Brand	OTC; QL (210 EA per 30 days)

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

Drug Name	Drug Tier	Requirements / Limits
CARETOUCH ALCOHOL PREP PAD	Brand	OTC
CARETOUCH HYPODERMIC NEEDLE	Brand	
CARETOUCH INSULIN SYRINGE	Brand	
CARETOUCH LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
CARETOUCH LUER LOCK SYRINGE	Brand	OTC
CARETOUCH LUER LOCK SYR-NEEDLE	Brand	OTC
CARETOUCH LUER SLIP SYRINGE 10 ML, 5 ML	Brand	OTC
CARETOUCH PEN NEEDLE	Brand	OTC
CARETOUCH SAFETY LANCETS	Brand	OTC; QL (210 EA per 30 days)
CARETOUCH TWIST LANCET	Brand	OTC; QL (210 EA per 30 days)
CAYA CONTOURED	Brand	
CHEK-STIX CONTROL	Brand	OTC
CHEMSTRIP 10 MD	Brand	OTC
CHEMSTRIP 10/SG	Brand	OTC
CHEMSTRIP 2 GP	Brand	OTC
CHEMSTRIP 50B	Brand	OTC
CHEMSTRIP 7	Brand	OTC
CHEMSTRIP 9	Brand	OTC
CHOSEN LANCET	Brand	OTC; QL (210 EA per 30 days)
CHOSEN LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
CHOSEN SAFETY LANCET	Brand	OTC; QL (210 EA per 30 days)
CLEVER CHEK LANCETS	Brand	OTC; QL (210 EA per 30 days)
CLEVER CHOICE CHAMBER-LRG MASK	Brand	QL (2 EA per 365 days)
CLEVER CHOICE CHAMBER-MED MASK	Brand	QL (2 EA per 365 days)
CLEVER CHOICE CHAMBER-SM MASK	Brand	QL (2 EA per 365 days)
CLICKFINE PEN NEEDLE NEEDLE 31 GAUGE X 1/4"	Brand	OTC
COAGUCHEK LANCETS	Brand	OTC; QL (210 EA per 30 days)
COMBISTIX REAGENT	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
COMFORT EZ INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 31 GAUGE X 15/64"	Brand	
COMFORT EZ LANCETS 23 GAUGE, 28 GAUGE	Brand	OTC; QL (210 EA per 30 days)
COMFORT EZ PEN NEEDLES	Brand	OTC
COMFORT EZ PLUS PEN NEEDLE	Brand	OTC
COMFORT EZ PRO SAFETY PEN NDL	Brand	OTC
COMFORT TOUCH PEN NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 31 GAUGE X 5/32", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32"	Brand	OTC
COMFORT TOUCH PLUS SAFETY LANC	Brand	OTC; QL (210 EA per 30 days)
COMFORT TOUCH ULT THIN LANCETS	Brand	OTC; QL (210 EA per 30 days)
COMFORTSEAL LARGE MASK	Brand	QL (2 EA per 365 days)
COMFORTSEAL MEDIUM MASK	Brand	QL (2 EA per 365 days)
COMFORTSEAL SMALL MASK	Brand	QL (2 EA per 365 days)
COMPACT SPACE CHAMBER	Brand	QL (2 EA per 365 days)
COMPACT SPACE CHAMBER-LRG MASK	Brand	QL (2 EA per 365 days)
COMPACT SPACE CHAMBER-MED MASK	Brand	QL (2 EA per 365 days)
COMPACT SPACE CHAMBER-SM MASK	Brand	QL (2 EA per 365 days)
CONTOUR CONTROL SOLUTION, HIGH	Brand	OTC; QL (1 EA per 30 days)
CONTOUR CONTROL SOLUTION, LOW	Brand	OTC; QL (1 EA per 30 days)
CONTOUR CONTROL SOLUTION, NML	Brand	OTC; QL (1 EA per 30 days)
CONTOUR NEXT EZ METER	Brand	OTC; QL (1 EA per 365 days)
CONTOUR NEXT GEN METER	Brand	OTC; QL (1 EA per 365 days)
CONTOUR NEXT GLUCOSE METER	Brand	OTC; QL (1 EA per 365 days)
CONTOUR NEXT LEV 1 CONTROL SOL	Brand	OTC; QL (1 EA per 30 days)
CONTOUR NEXT LEV 2 CONTROL SOL	Brand	OTC; QL (1 EA per 30 days)
CONTOUR NEXT LINK	Brand	OTC; QL (1 EA per 365 days)

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

Drug Name	Drug Tier	Requirements / Limits
CONTOUR NEXT LINK 2.4	Brand	OTC; QL (1 EA per 365 days)
CONTOUR NEXT METER	Brand	OTC; QL (1 EA per 365 days)
CONTOUR NEXT ONE METER	Brand	OTC; QL (1 EA per 365 days)
CONTOUR NEXT TEST STRIPS	Brand	test strip quantity depends on age and insulin use; OTC
CONTOUR PLUS BLUE METER	Brand	OTC; QL (1 EA per 365 days)
CONTOUR PLUS TEST STRIP	Brand	test strip quantity depends on age and insulin use; OTC
CONTOUR TEST STRIPS	Brand	test strip quantity depends on age and insulin use; OTC
CURITY ALCOHOL SWABS	Brand	OTC
dapagliflozin	Generic	PA for age less than 18 years; QL (1 EA per 1 day)
DAVOL IRRIGATION SYRINGE	Brand	OTC
DAVOL PISTON IRRIGATION	Brand	OTC
DEXCOM G6 RECEIVER	Brand	PA; 1 unit per lifetime
DEXCOM G6 SENSOR	Brand	PA; QL (3 EA per 30 days)
DEXCOM G6 TRANSMITTER	Brand	PA; QL (1 EA per 84 days)
DEXCOM G7 15 DAY SENSOR	Brand	PA; QL (2 EA per 30 days)
DEXCOM G7 RECEIVER	Brand	PA; 1 unit per lifetime
DEXCOM G7 SENSOR	Brand	PA; QL (3 EA per 30 days)
DIASTIX	Brand	OTC
DROPLET GENTEEL LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
DROPLET INSULIN SYR(HALF UNIT) SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 15/64", 0.5 ML 31 GAUGE X 5/16"	Brand	

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

Drug Name	Drug Tier	Requirements / Limits
DROPLET INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 31 GAUGE X 15/64"	Brand	
DROPLET LANCETS	Brand	OTC; QL (210 EA per 30 days)
DROPLET LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
DROPLET MICRON PEN NEEDLE	Brand	OTC
DROPLET PEN NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32"	Brand	OTC
DROPSAFE ACTI-LANCE 23 GAUGE	Brand	OTC; QL (210 EA per 30 days)
DROPSAFE ALCOHOL PREP PADS	Brand	OTC
DROPSAFE MEDLANCE PLUS	Brand	OTC; QL (210 EA per 30 days)
DROPSAFE PEN NEEDLE	Brand	OTC
DROPSAFE SICURA SAFETY NEEDLE NEEDLE 25 GAUGE X 1"	Brand	
DUREX AVANTI BARE REAL FEEL	Brand	OTC
DUREX EXTRA SENSITIVE CONDOM	Brand	OTC
DUREX TROPICAL CONDOM	Brand	OTC
EASIVENT HOLDING CHAMBER	Brand	QL (2 EA per 365 days)
EASIVENT MASK LARGE	Brand	QL (2 EA per 365 days)
EASIVENT MASK MEDIUM	Brand	QL (2 EA per 365 days)
EASIVENT MASK SMALL	Brand	QL (2 EA per 365 days)
EASY COMFORT INSULIN SYRINGE SYRINGE 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 29 GAUGE X 5/16, 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1 ML 32 GAUGE X 5/16", 1/2 ML 29 X5/16 ", 1/2 ML 32 GAUGE X 5/16"	Brand	
EASY COMFORT LANCETS	Brand	OTC; QL (210 EA per 30 days)
EASY COMFORT PEN NEEDLES	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
EASY COMFORT SAFETY LANCET	Brand	OTC; QL (210 EA per 30 days)
EASY COMFORT SAFETY PEN NEEDLE	Brand	OTC
EASY GLIDE CATHETER TIP SYRING	Brand	OTC
EASY GLIDE INSULIN SYRINGE	Brand	
EASY GLIDE LUER LOCK SYRINGE	Brand	OTC
EASY GLIDE LUER SLIP TB SYRING	Brand	OTC
EASY GLIDE PEN NEEDLE	Brand	OTC
EASY MINI EJECT LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
EASY TOUCH	Brand	OTC
EASY TOUCH ALCOHOL PREP PADS	Brand	OTC
EASY TOUCH FLIPLOCK INSULIN	Brand	
EASY TOUCH FLIPLOCK NEEDLE NEEDLE 18 GAUGE X 1 1/2", 18 GAUGE X 1", 19 GAUGE X 1 1/2", 19 GAUGE X 1", 20 GAUGE X 1 1/2", 20 GAUGE X 1", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 22 GAUGE X 1 1/2", 22 GAUGE X 1", 22 GAUGE X 3/4", 23 GAUGE X 1 1/2", 23 GAUGE X 1", 23 GAUGE X 5/8", 25 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 5/8", 26 GAUGE X 1", 26 GAUGE X 1/2", 27 GAUGE X 1/2", 30 X 1/2 ", 31 GAUGE X 5/16"	Brand	
EASY TOUCH FLIPLOCK SYRINGE SYRINGE 1 ML 25 GAUGE X 1", 1 ML 26 GAUGE X 3/8", 1 ML 27 GAUGE X 1/2", 10 ML 18 GAUGE X 1 1/2", 10 ML 18 GAUGE X 1", 10 ML 20 GAUGE X 1 1/2", 10 ML 20 GAUGE X 1", 10 ML 21 GAUGE X 1 1/2", 10 ML 22 GAUGE X 1 1/2", 10 ML 25 GAUGE X 1", 3 ML 18 GAUGE X 1", 3 ML 19 GAUGE X 1 1/2", 3 ML 19 GAUGE X 1", 3 ML 20 GAUGE X 1 1/2", 3 ML 20 GAUGE X 1", 3 ML 21 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 3 ML 22 GAUGE X 1 1/2", 3 ML 22 GAUGE X 1", 3 ML 23 GAUGE X 1 1/2", 3 ML 23 GAUGE X 1", 3 ML 25 GAUGE X 1", 3 ML 25 GAUGE X 5/8", 5 ML 18 GAUGE X 1", 5 ML 20 GAUGE X 1 1/2", 5 ML 20 GAUGE X 1", 5 ML 21 GAUGE X 1 1/2", 5 ML 21 GAUGE X 1", 5 ML 22 GAUGE X 1 1/2", 5 ML 25 GAUGE X 1", 5 ML 25 GAUGE X 5/8"	Brand	OTC
EASY TOUCH FLURINGE	Brand	OTC
EASY TOUCH FLURINGE FLIPLOCK SYRINGE 1 ML 25 GAUGE X 1"	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
EASY TOUCH FLURINGE FLIPLOCK SYRINGE 1 ML 25 GAUGE X 5/8"	Brand	
EASY TOUCH FLURINGE FLU TRAY	Brand	OTC
EASY TOUCH FLURINGE SHEATHLOCK	Brand	OTC
EASY TOUCH HYPODERMIC NEEDLE NEEDLE 16 GAUGE X 1 1/2", 16 GAUGE X 1", 18 GAUGE X 1 1/2", 18 GAUGE X 1 1/4", 18 GAUGE X 1", 19 GAUGE X 1 1/2", 19 GAUGE X 1", 20 GAUGE X 1 1/2", 20 GAUGE X 1", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 22 GAUGE X 1 1/2", 22 GAUGE X 1", 23 GAUGE X 1 1/2", 23 GAUGE X 1 1/4", 23 GAUGE X 1", 23 GAUGE X 3/4", 24 GAUGE X 1 1/4", 24 GAUGE X 1", 25 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 5/8", 26 GAUGE X 1/2", 26 GAUGE X 3/8", 26 GAUGE X 5/8", 27 GAUGE X 1 1/2", 27 GAUGE X 1 1/4", 27 GAUGE X 1/2", 30 GAUGE X 1", 30 GAUGE X 1/2", 31 GAUGE X 5/16", 32 GAUGE X 5/16"	Brand	
EASY TOUCH INSULIN SAFETY SYR	Brand	
EASY TOUCH INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 1 ML 27 GAUGE X 1/2", 1 ML 27 GAUGE X 5/8", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2"	Brand	
EASY TOUCH LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
EASY TOUCH LUER LOCK SYRINGE	Brand	OTC
EASY TOUCH PEN NEEDLE	Brand	OTC
EASY TOUCH SAFETY LANCETS	Brand	OTC; QL (210 EA per 30 days)
EASY TOUCH SAFETY PEN NEEDLE	Brand	OTC
EASY TOUCH SHEATHLOCK INSULIN	Brand	
EASY TOUCH SYR ALLERGY TRAY	Brand	OTC
EASY TOUCH TUBERCULIN FLIPLOCK	Brand	OTC
EASY TOUCH TWIST LANCETS	Brand	OTC; QL (210 EA per 30 days)
EASY TOUCH UNI-SLIP SYRINGE 10 ML, 3 ML, 5 ML	Brand	OTC
EASY TWIST AND CAP LANCETS	Brand	OTC; QL (210 EA per 30 days)

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

Drug Name	Drug Tier	Requirements / Limits
EASYPOINT NEEDLE	Brand	
ECLIPSE SYRINGE 1 ML 25 GAUGE X 5/8"	Brand	OTC
ECLIPSE SYRINGE 3 ML 25 GAUGE X 1"	Brand	
EMBRACE LANCETS	Brand	OTC; QL (210 EA per 30 days)
EMBRACE LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
EMBRACE SAFETY LANCET	Brand	OTC; QL (210 EA per 30 days)
EXCEL SYRINGE	Brand	OTC
EXEL HYPODERMIC NEEDLES NEEDLE 18 GAUGE X 1 1/2", 19 GAUGE X 1", 20 GAUGE X 1 1/2", 20 GAUGE X 1", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 22 GAUGE X 1 1/2", 22 GAUGE X 1", 22 GAUGE X 3/4", 23 GAUGE X 3/4", 25 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 5/8", 26 GAUGE X 1 1/2", 26 GAUGE X 1/2", 26 GAUGE X 3/8", 26 GAUGE X 5/8", 27 GAUGE X 1/2", 30 GAUGE X 1/2"	Brand	
EXEL SYRINGE 30 ML, 50 ML	Brand	OTC
EZ SMART LANCETS	Brand	OTC; QL (210 EA per 30 days)
FANTASY CONDOM	Brand	OTC
FC2 FEMALE CONDOM	Brand	OTC; QL (12 EA per 30 days)
FINGERSTIX LANCETS	Brand	OTC; QL (210 EA per 30 days)
FLEXICHAMBER	Brand	QL (2 EA per 365 days)
FONDCIRCLE LANCET	Brand	OTC; QL (210 EA per 30 days)
FONDCIRCLE LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
FORA LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
FORACARE LANCETS	Brand	OTC; QL (210 EA per 30 days)
FREESTYLE LANCETS	Brand	OTC; QL (210 EA per 30 days)
FREESTYLE LIBRE 14 DAY READER	Brand	PA; 1 unit per lifetime
FREESTYLE LIBRE 14 DAY SENSOR	Brand	PA; QL (2 EA per 28 days)
FREESTYLE LIBRE 2 PLUS SENSOR	Brand	PA; QL (2 EA per 30 days)
FREESTYLE LIBRE 2 READER	Brand	PA; 1 unit per lifetime
FREESTYLE LIBRE 2 SENSOR	Brand	PA; QL (3 EA per 30 days)
FREESTYLE LIBRE 3 PLUS SENSOR	Brand	PA; QL (2 EA per 30 days)
FREESTYLE LIBRE 3 READER	Brand	PA; 1 unit per lifetime
FREESTYLE LIBRE 3 SENSOR	Brand	PA; QL (2 EA per 28 days)
GENTEEL VACUUM LANCING DEVICE	Brand	OTC
glimepiride oral tablet 1 mg, 2 mg, 4 mg	Generic	PA for age less than 18 years

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

Drug Name	Drug Tier	Requirements / Limits
glipizide oral tablet 10 mg, 5 mg	Generic	PA for age less than 18 years
GLIPIZIDE ORAL TABLET 2.5 MG	Brand	PA for age less than 18 years; QL (2 EA per 1 day)
glipizide oral tablet extended release 24hr	Generic	PA for age less than 18 years
GLUCOCOM LANCETS	Brand	OTC; QL (210 EA per 30 days)
glyburide	Generic	PA for age less than 18 years
glyburide-metformin	Generic	PA for age less than 18 years
GLYXAMBI	Brand	PA for age less than 18 years
GOJJI LANCETS	Brand	OTC; QL (210 EA per 30 days)
GOJJI LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
GVOKE	Brand	
GVOKE HYPOPEN 1-PACK	Brand	
GVOKE HYPOPEN 2-PACK	Brand	
GVOKE PFS 1-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	Brand	
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	Brand	
HEALTHWISE INSULIN SYRINGE	Brand	
HEALTHWISE PEN NEEDLE	Brand	OTC
HEMA-COMBISTIX	Brand	OTC
huber safety needles (disp.)	Generic	
HUMULIN 70/30 U-100 INSULIN	Brand	
HUMULIN 70/30 U-100 KWIKPEN	Brand	
HUMULIN N NPH INSULIN KWIKPEN	Brand	
HUMULIN N NPH U-100 INSULIN	Brand	
HUMULIN R REGULAR U-100 INSULN	Brand	
HUMULIN R U-500 (CONC) KWIKPEN	Brand	
HYPODERMIC NEEDLES NEEDLE 23 GAUGE X 1 1/2"	Brand	
HYPOLANCE AST LANCING	Brand	OTC
INCONTROL ALCOHOL PADS	Brand	OTC
INCONTROL LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
INCONTROL PEN NEEDLE	Brand	OTC
INCONTROL SUPER THIN LANCETS	Brand	OTC; QL (210 EA per 30 days)
INCONTROL ULTRA THIN LANCETS	Brand	OTC; QL (210 EA per 30 days)

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

Drug Name	Drug Tier	Requirements / Limits
INJECT EASE LANCETS	Brand	OTC; QL (210 EA per 30 days)
INJECT-EASE	Brand	OTC
INSULIN GLARGINE U-300 CONC SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML)	Brand	
INSULIN GLARGINE-YFGN	Brand	
INSULIN LISPRO	Brand	
INSULIN LISPRO PROTAMIN-LISPRO	Brand	
INSULIN SYR/NDL U100 HALF MARK	Brand	
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.3 ML 29 GAUGE, 0.3 ML 31 GAUGE X 1/4", 0.3 ML 31 GAUGE X 15/64", 0.5 ML 29 GAUGE X 1/2", 1 ML 27 GAUGE X 1/2", 1 ML 29 GAUGE X 7/16", 1 ML 31 GAUGE X 1/4", 1 ML 31 GAUGE X 15/64", 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2", 1/2 ML 31 GAUGE X 1/4", 1/2 ML 31 GAUGE X 15/64"	Brand	
INSULIN U-500 SYRINGE-NEEDLE	Brand	
INSUPEN PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	Brand	OTC
INVACARE LANCETS	Brand	OTC; QL (210 EA per 30 days)
JANUMET	Brand	PA for age less than 18 years; QL (2 EA per 1 day)
JANUVIA	Brand	PA for age less than 18 years; QL (1 EA per 1 day)
JARDIANCE	Brand	PA for age less than 10 years; QL (1 EA per 1 day)
JENTADUETO	Brand	PA for age less than 18 years
JENTADUETO XR	Brand	PA for age less than 18 years
KETO-DIASTIX	Brand	OTC
KIMONO MICROTHIN AQUA LUBE CON	Brand	OTC
KIMONO MICROTHIN CONDOMS	Brand	OTC
KIMONO MICROTHIN LARGE CONDOMS	Brand	OTC
KIMONO TEXTURED CONDOMS	Brand	OTC
LABSTIX REAGENT	Brand	OTC
LANCETS	Brand	OTC; QL (210 EA per 30 days)
LANCETS,THIN	Brand	OTC; QL (210 EA per 30 days)
LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)

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

Drug Name	Drug Tier	Requirements / Limits
LANCING DEVICE WITH LANCETS KIT	Brand	OTC
LANCING SYSTEM	Brand	OTC; QL (2 EA per 365 days)
LANTUS SOLOSTAR U-100 INSULIN	Brand	
LANTUS U-100 INSULIN	Brand	
LANZO LANCING DEVICE	Brand	OTC
LIFESHIELD BLUNT CANNULA SYRINGE 3 ML 18 X 1"	Brand	OTC
LUER LOCK SYRINGE 30 ML	Brand	OTC
LUER SLIP TIP SYRINGE TRAY	Brand	OTC
MAGELLAN INSULIN SAFETY SYRNG SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	Brand	
MAGELLAN SAFETY SYRINGE	Brand	
MAGELLAN SYRINGE	Brand	
MAGELLAN TUBERCULIN SAFETY SYR	Brand	
MAXICOMFORT II PEN NEEDLE	Brand	OTC
MAXICOMFORT INSULIN SYRINGE	Brand	
MAXI-COMFORT INSULIN SYRINGE	Brand	
MAXICOMFORT SAFETY PEN NEEDLE	Brand	OTC
MEDLANCE PLUS LANCETS	Brand	OTC; QL (210 EA per 30 days)
MEDLANCE PLUS SPECIAL BLADE	Brand	OTC
metformin oral tablet 1,000 mg, 500 mg, 850 mg	Generic	PA for age less than 10 years
metformin oral tablet extended release 24 hr	Generic	PA for age less than 10 years
MICRO THIN LANCETS	Brand	OTC; QL (210 EA per 30 days)
MICROCHAMBER	Brand	QL (2 EA per 365 days)
MICROLET 2 LANCING DEVICE	Brand	OTC
MICROLET LANCET	Brand	OTC; QL (210 EA per 30 days)
MICROLET NEXT LANCET	Brand	OTC; QL (210 EA per 30 days)
MICROLET NEXT LANCING DEVICE	Brand	OTC
MINI LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
MINI ULTRA-THIN II	Brand	OTC
MOBI BLOOD GLUCOSE LANCING DEV	Brand	OTC; QL (2 EA per 365 days)
MONOJECT 140CC PISTON SYRINGE	Brand	OTC
MONOJECT 3CC SYR 25GX1"	Brand	OTC
MONOJECT CONTROL SYRINGE LUER	Brand	

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

Drug Name	Drug Tier	Requirements / Limits
MONOJECT DISPOSABLE SYRINGE	Brand	OTC
MONOJECT ECCENTRIC NON-STERILE SYRINGE 35 ML	Brand	OTC
MONOJECT FILTER ASPIRATOR	Brand	
MONOJECT HYPODERMIC NEEDLES NEEDLE 18 GAUGE X 1 1/2", 18 GAUGE X 1", 19 GAUGE X 1 1/2", 19 GAUGE X 1", 20 GAUGE X 1 1/2", 20 GAUGE X 1", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 22 GAUGE X 1 1/2", 22 GAUGE X 1", 23 GAUGE X 1", 25 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 5/8", 26 GAUGE X 1 1/2", 27 GAUGE X 1 1/2", 27 GAUGE X 1/2", 30 GAUGE X 3/4"	Brand	
MONOJECT HYPODERMIC POLYPROPYL NEEDLE 18 GAUGE X 1 1/2"	Brand	
MONOJECT INSULIN SAFETY SYRING	Brand	
MONOJECT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML , 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2"	Brand	
MONOJECT MAGELLAN SAFETY SYRNG SYRINGE 1 ML 23 GAUGE X 1", 3 ML 20 GAUGE X 1"	Brand	
MONOJECT PHARMACY TRAY LUER SYRINGE 20 ML, 35 ML, 6 ML	Brand	OTC
MONOJECT PHARMACY TRAY REG TIP	Brand	
MONOJECT REG TIP NON-STERILE SYRINGE 20 ML, 6 ML	Brand	OTC
MONOJECT REGULAR LUER SYRINGE 3 ML	Brand	
MONOJECT REGULAR LUER SYRINGE 35 ML, 6 ML	Brand	OTC
MONOJECT SYRINGE LUER LOK SYRINGE 35 ML	Brand	OTC
MONOJECT SYRINGE 1/2 ML 28 GAUGE, 3 ML, 6 ML, 6 ML 20 X 1 1/2", 6 ML 21 X 1 1/2", 6 ML 21 X 1", 6 ML 22 X 1 1/2"	Brand	

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

Drug Name	Drug Tier	Requirements / Limits
MONOJECT SYRINGE SYRINGE 12 ML 20 X 1 1/2", 140 ML, 3 ML 20 GAUGE X 1 1/2", 3 ML 20 GAUGE X 1", 3 ML 20 X 3/4", 3 ML 21 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 3 ML 22 GAUGE X 1", 3 ML 22 X 1 1/2", 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 1 1/4", 3 ML 25 X 5/8", 3 ML 27 GAUGE X 1 1/4"	Brand	OTC
MONOJECT TB	Brand	OTC
MONOJECT TB LUER LOK	Brand	
MONOJECT TB SAFETY SYRINGE	Brand	
MONOJECT TUBERCULIN SYRINGE	Brand	OTC
MONOLET LANCETS	Brand	OTC; QL (210 EA per 30 days)
MONOLET THIN LANCETS	Brand	OTC; QL (210 EA per 30 days)
MULTI-LANCET DEVICE 2	Brand	OTC
MULTISTIX	Brand	OTC
MULTISTIX 10 SG	Brand	OTC
MULTISTIX 5	Brand	OTC
MULTISTIX 7	Brand	OTC
MULTISTIX 8 SG	Brand	OTC
MULTISTIX 9	Brand	OTC
MULTISTIX 9 SG	Brand	OTC
MYGLUCOHEALTH LANCETS	Brand	OTC; QL (210 EA per 30 days)
NANO 2ND GEN PEN NEEDLE	Brand	OTC
NANO PEN NEEDLE	Brand	OTC
nateglinide	Generic	PA for age less than 18 years
NEEDLE (DISP) 18 G	Brand	
NEEDLE (DISP) 19 G	Brand	
NEEDLE (DISP) 23 GAUGE	Brand	
NEEDLE (DISP) 25 GAUGE	Brand	
NEEDLE (DISP) 27 GAUGE	Brand	
NEEDLES, HUBER DISPOSABLE	Brand	
NORM-JECT	Brand	
NORM-JECT TUBERKULIN	Brand	
NOVA SAFETY LANCETS	Brand	OTC; QL (210 EA per 30 days)
NOVA SUREFLEX LANCETS	Brand	OTC; QL (210 EA per 30 days)
NOVOFINE 32	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
NOVOFINE PLUS	Brand	OTC
NOVOLOG FLEXPEN U-100 INSULIN	Brand	
NOVOLOG PENFILL U-100 INSULIN	Brand	
NOVOLOG U-100 INSULIN ASPART	Brand	
NOVOPEN ECHO	Brand	
OMNIPOD 5 (LIBRE 2/3 PLUS)	Brand	QL (10 EA per 30 days)
OMNIPOD 5 G6-G7 INTRO KT(GEN5)	Brand	1 kit per lifetime
OMNIPOD 5 G6-G7 PODS (GEN 5)	Brand	QL (10 EA per 30 days)
OMNIPOD 5 INTRO (LIBRE2/3PLUS)	Brand	1 kit per lifetime
OMNIPOD DASH INTRO KIT (GEN 4)	Brand	1 unit per lifetime
OMNIPOD DASH PODS (GEN 4)	Brand	QL (10 EA per 30 days)
ON CALL LANCET	Brand	OTC; QL (210 EA per 30 days)
ON CALL LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
ONETOUCH DELICA PLUS LANC DEV	Brand	OTC
ONETOUCH DELICA PLUS LANCET	Brand	OTC; QL (210 EA per 30 days)
ONETOUCH DELICA SAFETY LANCET	Brand	OTC; QL (210 EA per 30 days)
ONETOUCH ULTRA CONTROL	Brand	OTC
ONETOUCH ULTRA TEST	Brand	test strip quantity depends on age and insulin use; OTC
ONETOUCH ULTRA2 METER	Brand	OTC; QL (1 EA per 365 days)
ONETOUCH ULTRASOFT 2 LANCET	Brand	OTC; QL (210 EA per 30 days)
ONETOUCH VERIO FLEX METER	Brand	OTC; QL (1 EA per 365 days)
ONETOUCH VERIO HIGH CONTROL	Brand	OTC
ONETOUCH VERIO MID CONTROL	Brand	OTC
ONETOUCH VERIO REFLECT METER	Brand	OTC; QL (1 EA per 365 days)
ONETOUCH VERIO TEST STRIPS	Brand	test strip quantity depends on age and insulin use; OTC
ON-THE-GO LANCETS	Brand	OTC; QL (210 EA per 30 days)
OPTICHAMBER DIAMOND LG MASK	Brand	QL (2 EA per 365 days)
OPTICHAMBER DIAMOND VHC	Brand	QL (2 EA per 365 days)
OPTICHAMBER DIAMOND-MED MSK	Brand	QL (2 EA per 365 days)
OPTICHAMBER DIAMOND-SML MASK	Brand	QL (2 EA per 365 days)
PEN NEEDLE 31 GAUGE X 3/16", 32 GAUGE X 5/32"	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
PEN NEEDLE, DIABETIC NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/3", 31 GAUGE X 1/4", 31 GAUGE X 1/6", 31 GAUGE X 15/64", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 1/4", 33 GAUGE X 3/16", 33 GAUGE X 5/32"	Brand	OTC
PEN NEEDLE, DIABETIC, SAFETY	Brand	OTC
PENTIPS PEN NEEDLE	Brand	OTC
PERFECT POINT SAFETY NEEDLE	Brand	
PERSONAL BEST FULL RANGE	Brand	OTC
pioglitazone	Generic	PA for age less than 18 years
PIP LANCET	Brand	OTC; QL (210 EA per 30 days)
POCKET CHAMBER	Brand	QL (2 EA per 365 days)
POLY HUB NEEDLE	Brand	
PRESSURE ACTIVATED LANCETS	Brand	OTC; QL (210 EA per 30 days)
PREVENT DROPSAFE PEN NEEDLE	Brand	OTC
PRO COMFORT INSULIN SYRINGE	Brand	
PRO COMFORT LANCET	Brand	OTC; QL (210 EA per 30 days)
PRO COMFORT PEN NEEDLE	Brand	OTC
PRO COMFORT SPACER-ADULT MASK	Brand	OTC; QL (2 EA per 365 days)
PROCARE SPACER WITH ADULT MASK	Brand	QL (2 EA per 365 days)
PROCARE SPACER WITH CHILD MASK	Brand	QL (2 EA per 365 days)
PRODIGY INSULIN SYRINGE	Brand	
PRODIGY LANCETS	Brand	OTC; QL (210 EA per 30 days)
PRODIGY LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
PRODIGY TWIST TOP LANCET	Brand	OTC; QL (210 EA per 30 days)
PROGLYCEM	Brand	
PURE COMFORT LANCETS	Brand	OTC; QL (210 EA per 30 days)
PURE COMFORT PEN NEEDLE	Brand	OTC
PURE COMFORT SAFETY LANCETS	Brand	OTC; QL (210 EA per 30 days)
PUSH BUTTON SAFETY LANCETS 28 GAUGE	Brand	OTC; QL (210 EA per 30 days)
RELIAMED LANCET 28 GAUGE, 30 GAUGE	Brand	OTC; QL (210 EA per 30 days)
RELIAMED MINI LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
RELIAMED SAFETY SEAL LANCETS	Brand	OTC; QL (210 EA per 30 days)

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

Drug Name	Drug Tier	Requirements / Limits
relion glucose	Generic	OTC
repaglinide	Generic	PA for age less than 18 years
RIGHTEST GD500 LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
RIGHTEST GL300 LANCETS	Brand	OTC; QL (210 EA per 30 days)
RITEFLO AEROCHAMBER	Brand	QL (2 EA per 365 days)
SAFETY LANCETS	Brand	OTC; QL (210 EA per 30 days)
SAFETY PEN NEEDLE	Brand	OTC
SAFETY SEAL LANCETS	Brand	OTC; QL (210 EA per 30 days)
SAFETY-LET LANCETS	Brand	OTC; QL (210 EA per 30 days)
SECURESAFE PEN NEEDLE	Brand	OTC
SEMGLEE(INSULIN GLARGINE-YFGN)	Brand	
SEMGLEE(INSULIN GLARG-YFGN)PEN	Brand	
SENSILANCE	Brand	OTC; QL (210 EA per 30 days)
SIMPLI PEN NEEDLE	Brand	OTC
SINGLE-LET	Brand	OTC; QL (210 EA per 30 days)
SMARTDIABETES VANTAGE	Brand	OTC; QL (2 EA per 365 days)
SMARTEST LANCET	Brand	OTC; QL (210 EA per 30 days)
SOLUS V2 LANCETS	Brand	OTC; QL (210 EA per 30 days)
SOLUS V2 LANCING DEVICE	Brand	OTC
SPACE CHAMBER	Brand	QL (2 EA per 365 days)
SPACE CHAMBER WITH LARGE MASK	Brand	QL (2 EA per 365 days)
SPACE CHAMBER WITH MEDIUM MASK	Brand	QL (2 EA per 365 days)
SPACE CHAMBER WITH SMALL MASK	Brand	QL (2 EA per 365 days)
STERILANCE TL	Brand	OTC; QL (210 EA per 30 days)
SUPER THIN LANCETS	Brand	OTC; QL (210 EA per 30 days)
SURE COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 1/4", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 1/4", 1/2 ML 31 GAUGE X 1/4"	Brand	
SURE COMFORT LANCETS	Brand	OTC; QL (210 EA per 30 days)
SURE COMFORT LANCING PEN	Brand	OTC; QL (2 EA per 365 days)
SURE COMFORT PEN NEEDLE	Brand	OTC
SUREFLEX DEVICE WITH LANCETS	Brand	OTC
SURE-LANCE	Brand	OTC; QL (210 EA per 30 days)

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

Drug Name	Drug Tier	Requirements / Limits
SURE-LANCE ULTRA THIN	Brand	OTC; QL (210 EA per 30 days)
SURE-PEN LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
SURE-TOUCH LANCET	Brand	OTC; QL (210 EA per 30 days)
SYNJARDY	Brand	PA for age less than 18 years
SYNJARDY XR	Brand	PA for age less than 18 years
SYRINGE (DISPOSABLE) SYRINGE 3 ML, 5 ML	Brand	OTC
SYRINGE 3CC/20GX1"	Brand	OTC
SYRINGE 3CC/21GX1"	Brand	OTC
SYRINGE 3CC/21GX1-1/2"	Brand	OTC
SYRINGE 3CC/22GX1"	Brand	OTC
SYRINGE 3CC/22GX3/4"	Brand	OTC
SYRINGE 3CC/25GX1"	Brand	OTC
SYRINGE WITH NEEDLE SYRINGE 10 ML 20 X 1", 3 ML 23 X 1"	Brand	
SYRINGE WITH NEEDLE 3 ML 20 GAUGE X 1 1/2", 3 ML 22 X 1 1/2"	Brand	OTC
TECHLITE INSULIN SYRINGE SYRINGE 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16	Brand	
TECHLITE INSULN SYR(HALF UNIT) SYRINGE 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 15/64", 0.5 ML 31 GAUGE X 5/16"	Brand	
TECHLITE LANCETS	Brand	OTC; QL (210 EA per 30 days)
TECHLITE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32"	Brand	OTC
TECHLITE PLUS PEN NEEDLE	Brand	OTC
TELCARE LANCETS	Brand	OTC; QL (210 EA per 30 days)
THIN LANCETS	Brand	OTC; QL (210 EA per 30 days)
TOPFINE INSULIN PEN NEEDLE	Brand	
TOUJEO SOLOSTAR U-300 INSULIN	Brand	PA
TRADJENTA	Brand	PA for age less than 18 years; QL (1 EA per 1 day)
TRIJARDY XR	Brand	PA for age less than 18 years
TROJAN-ENZ (NON-LUB) CONDOMS	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
TRUE COMFORT INSULIN SYRINGE	Brand	
TRUE COMFORT LANCET	Brand	OTC; QL (210 EA per 30 days)
TRUE COMFORT PEN NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 3/16", 32 GAUGE X 5/32"	Brand	OTC
TRUE COMFORT PRO INS SYRINGE	Brand	
TRUE COVER CONDOM	Brand	OTC
TRUEDRAW LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
TRUEPLUS INSULIN	Brand	
TRUEPLUS LANCETS	Brand	OTC; QL (210 EA per 30 days)
TRUEPLUS PEN NEEDLE 31 GAUGE X 1/4", 32 GAUGE X 5/32"	Brand	OTC
TRULICITY	Brand	PA; PA for age less than 10 years; QL (2 ML per 28 days)
TRUSTEX LATEX CONDOM	Brand	OTC
TRUSTEX LUBRICATED CONDOMS	Brand	OTC
TRUSTEX NON-LUB CONDOMS	Brand	OTC
TRUSTEX-RIA LUB/SPERMICIDE	Brand	OTC
TRUSTEX-RIA NON-LUB CONDOMS	Brand	OTC
TUBERCULIN SYRINGE 1 ML 25 GAUGE X 1"	Brand	
TUBERCULIN SYRINGE 1 ML, 1 ML 25 GAUGE X 5/8", 1 ML 27 X 1/2"	Brand	OTC
TUBERCULIN-ALLERGY SYRINGES	Brand	OTC
TWIST LANCETS	Brand	OTC; QL (210 EA per 30 days)
ULTICARE	Brand	
ULTICARE INSULIN SYRINGE	Brand	
ULTICARE INSULN SYR(HALF UNIT)	Brand	
ULTICARE LOW DEAD SPACE SYRING	Brand	OTC
ULTICARE PEN NEEDLE	Brand	OTC
ULTICARE SAFETY PEN NEEDLE	Brand	OTC
ULTICARE SAFETY SYRINGE	Brand	OTC
ULTICARE TB SAFETY SYRINGE 1 ML 27 GAUGE X 1/2", 1 ML 27 GAUGE X 5/8"	Brand	OTC
ULTIGUARD SAFEPACK-INSULIN SYR	Brand	
ULTIGUARD SAFEPACK-PEN NEEDLE	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
ULTI-LANCE	Brand	OTC; QL (2 EA per 365 days)
ULTI-LANCE KIT	Brand	OTC
ULTILET ALCOHOL SWAB	Brand	OTC
ULTILET BASIC LANCETS	Brand	OTC; QL (210 EA per 30 days)
ULTILET CLASSIC LANCETS	Brand	OTC; QL (210 EA per 30 days)
ULTILET LANCETS	Brand	OTC; QL (210 EA per 30 days)
ULTILET PEN NEEDLE 32 GAUGE X 5/32"	Brand	OTC
ULTILET SAFETY LANCETS	Brand	OTC; QL (210 EA per 30 days)
ULTRA FLO INSUL SYR(HALF UNIT)	Brand	
ULTRA FLO INSULIN SYRINGE	Brand	
ULTRA FLO PEN NEEDLE	Brand	OTC
ULTRA THIN II LANCETS	Brand	OTC; QL (210 EA per 30 days)
ULTRA THIN LANCETS	Brand	OTC; QL (210 EA per 30 days)
ULTRA THIN PEN NEEDLE	Brand	OTC
ULTRACARE INSULIN SYRINGE	Brand	
ULTRA-CARE LANCETS	Brand	OTC; QL (210 EA per 30 days)
ULTRACARE PEN NEEDLE	Brand	OTC
ULTRA-FINE INS SYR (HALF UNIT)	Brand	
ULTRA-FINE INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 15/64", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 31 GAUGE X 15/64"	Brand	
ULTRA-FINE PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/16"	Brand	OTC
ULTRA-FINE SAFETY INSULIN SYRN	Brand	
ULTRALANCE LANCETS	Brand	OTC; QL (210 EA per 30 days)
ULTRA-THIN II (SHORT) INS SYR	Brand	
ULTRA-THIN II (SHORT) PEN NDL	Brand	OTC
ULTRA-THIN II INS PEN NEEDLES	Brand	OTC
ULTRA-THIN II INSULIN SYRINGE	Brand	
ULTRA-THIN II LANCETS	Brand	OTC; QL (210 EA per 30 days)
UNIFINE PENTIPS MAXFLOW	Brand	OTC
UNIFINE PENTIPS NEEDLE 31 GAUGE X 3/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32", 33 GAUGE X 5/32"	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
UNIFINE PENTIPS PLUS MAXFLOW	Brand	OTC
UNIFINE PENTIPS PLUS NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 32 GAUGE X 5/32", 33 GAUGE X 5/32"	Brand	OTC
UNIFINE PROTECT	Brand	OTC
UNIFINE SAFECONTROL PEN NEEDLE	Brand	OTC
UNIFINE ULTRA PEN NEEDLE	Brand	OTC
UNILET COMFORTOUCH LANCET	Brand	OTC; QL (210 EA per 30 days)
UNILET GP LANCET	Brand	OTC; QL (210 EA per 30 days)
UNILET LANCET	Brand	OTC; QL (210 EA per 30 days)
UNILET LANCETS	Brand	OTC; QL (210 EA per 30 days)
UNILET SUPER THIN LANCETS	Brand	OTC; QL (210 EA per 30 days)
UNISTIK 2 DEVICE	Brand	OTC
UNISTIK 3 COMFORT LANCET	Brand	OTC; QL (210 EA per 30 days)
UNISTIK 3 DUAL LANCET	Brand	OTC; QL (210 EA per 30 days)
UNISTIK 3 EXTRA LANCET	Brand	OTC; QL (210 EA per 30 days)
UNISTIK 3 GENTLE	Brand	OTC; QL (210 EA per 30 days)
UNISTIK 3 NORMAL LANCET	Brand	OTC; QL (210 EA per 30 days)
UNISTIK COMFORT LANCETS	Brand	OTC; QL (210 EA per 30 days)
UNISTIK CZT LANCET	Brand	OTC; QL (210 EA per 30 days)
UNISTIK EXTRA LANCETS	Brand	OTC; QL (210 EA per 30 days)
UNISTIK NORMAL LANCETS	Brand	OTC; QL (210 EA per 30 days)
UNISTIK PRO LANCET	Brand	OTC; QL (210 EA per 30 days)
UNISTIK SAFETY	Brand	OTC; QL (210 EA per 30 days)
UNISTIK TOUCH LANCETS	Brand	OTC; QL (210 EA per 30 days)
UNIVERSAL 1 LANCETS	Brand	OTC; QL (210 EA per 30 days)
URISTIX 4	Brand	OTC
URISTIX REAGENT	Brand	OTC
VANISHPOINT SYRINGE 0.5 ML 30 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	Brand	

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

Drug Name	Drug Tier	Requirements / Limits
VANISHPOINT SYRINGE SYRINGE 1 ML 25 GAUGE X 1", 10 ML 21 GAUGE X 1 1/2", 3 ML 20 GAUGE X 1", 3 ML 21 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 3 ML 22 GAUGE X 1", 3 ML 22 X 1 1/2", 3 ML 23 GAUGE X 1 1/2", 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 5/8", 5 ML 21 GAUGE X 1 1/2", 5 ML 21 GAUGE X 1", 5 ML 22 GAUGE X 1 1/2"	Brand	OTC
VANISHPOINT TUBERCULIN SYRINGE	Brand	OTC
VERIFINE PLUS PEN NEEDLE	Brand	OTC
VERIFINE PLUS PEN NEEDLE-SHARP	Brand	OTC
VERIFINE SAFETY LANCET MINI	Brand	OTC; QL (210 EA per 30 days)
V-GO 20	Brand	
V-GO 30	Brand	
V-GO 40	Brand	
VICTOZA 2-PAK	Brand	PA; PA for age less than 10 years; QL (9 ML per 28 days)
VICTOZA 3-PAK	Brand	PA; PA for age less than 10 years; QL (9 ML per 28 days)
VIVAGUARD LANCET	Brand	OTC; QL (210 EA per 30 days)
VIVAGUARD LANCING DEVICE	Brand	OTC; QL (2 EA per 365 days)
VIVAGUARD SAFETY LANCET	Brand	OTC; QL (210 EA per 30 days)
VORTEX HOLDING CHAMBER	Brand	QL (2 EA per 365 days)
VORTEX VHC PEDIATRIC MASK	Brand	QL (2 EA per 365 days)
WEBCOL	Brand	OTC
XIGDUO XR	Brand	PA for age less than 18 years
YALE DISPOSABLE NEEDLES	Brand	
MISCELLANEOUS HORMONES		
cabergoline	Generic	
calcitonin (salmon) nasal	Generic	
calcitriol oral	Generic	
cinacalcet	Generic	
danazol	Generic	
desmopressin nasal spray with pump	Generic	
desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
DESMOPRESSIN NASAL SPRAY,NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	Brand	
desmopressin oral	Generic	
KUVAN ORAL POWDER IN PACKET	Brand	PA
methyltestosterone oral capsule	Generic	QL (5 EA per 1 day)
testosterone cypionate intramuscular oil 100 mg/ml	Generic	
testosterone cypionate intramuscular oil 200 mg/ml	Generic	PA
testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)	Generic	PA for age less than 18 years
TESTOSTERONE TRANSDERMAL GEL IN PACKET 1 % (50 MG/5 GRAM)	Brand	PA for age less than 18 years
THYROID HORMONES		
ARMOUR THYROID	Brand	
levo-t	Generic	
levothyroxine oral tablet	Generic	
liomny	Generic	
liothyronine oral	Generic	
GASTROENTEROLOGY		
ANTIDIARRHEALS / ANTISPASMODICS		
acidophilus-pectin	Generic	OTC
anti-diarrheal (loperamide) oral capsule	Generic	OTC
ANTI-DIARRHEAL (LOPERAMIDE) ORAL LIQUID	Brand	OTC
anti-diarrheal (loperamide) oral tablet	Generic	OTC
bismuth subsalicylate	Generic	OTC
daily probiotic (s. boulardii)	Generic	OTC
diamode	Generic	OTC
dicyclomine oral capsule	Generic	
dicyclomine oral solution	Generic	
dicyclomine oral tablet 20 mg	Generic	
digenyx	Generic	
digest probiotic (s.boulardii)	Generic	OTC
diphenoxylate-atropine oral tablet	Generic	
florastor	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
glycopyrrolate oral tablet 1 mg, 2 mg	Generic	
hyoscyamine sulfate oral elixir	Generic	
hyoscyamine sulfate oral tablet	Generic	
hyoscyamine sulfate oral tablet extended release 12 hr	Generic	
l.acidophilus-bifido.longum oral capsule,delayed release(dr/ec) 16 mg	Generic	OTC
lactobac acidoph-fructooligos	Generic	OTC
loperamide oral capsule	Generic	
loperamide oral liquid	Generic	OTC
loperamide oral tablet	Generic	OTC
loperamide-simethicone	Generic	OTC
pepto-bismol oral tablet,chewable	Generic	OTC
pepto-bismol to-go	Generic	OTC
pink bismuth oral tablet,chewable	Generic	OTC
probiotic (s.boulardii)	Generic	OTC
probiotic colon support oral capsule 1.5 billion cell	Generic	OTC
probiotic oral capsule 20 billion cell, 3 billion cell	Generic	OTC
probiotic oral capsule, sprinkle 20 billion cell	Generic	OTC
risaquad	Generic	OTC
risaquad-2	Generic	OTC
saccharomyces boulardii	Generic	OTC
soothe (bismuth subsalicylate) oral tablet,chewable	Generic	OTC
stomach relief oral suspension 262 mg/15 ml	Generic	OTC
stomach relief oral tablet	Generic	OTC
stomach relief oral tablet,chewable	Generic	OTC
stomach relief original	Generic	OTC
super probiotic	Generic	OTC
MISCELLANEOUS GASTROINTESTINAL AGENTS		
acid gone antacid	Generic	OTC
advanced antacid-antigas oral suspension 200-200-20 mg/5 ml	Generic	OTC
almacone-2	Generic	OTC
antacid	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
antacid anti-gas oral suspension 400-400-40 mg/5 ml	Generic	OTC
antacid plus anti-gas oral suspension 400-400-40 mg/5 ml	Generic	OTC
antacid regular strength	Generic	OTC
antacid-antigas	Generic	OTC
anti-gas ultra strength	Generic	OTC
balsalazide	Generic	
best fiber oral powder 3 gram/3.5 gram	Generic	OTC
bisacodyl	Generic	OTC
budesonide oral capsule,delayed,extend.release	Generic	
children's pepto	Generic	OTC
chocolate laxative	Generic	OTC
citroma	Generic	OTC
citrucel	Generic	OTC
clearlax	Generic	OTC
comfort gel extra strength	Generic	OTC
constulose	Generic	
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 36,000-114,000-180,000 UNIT	Brand	PA; QL (25 EA per 1 day)
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 3,000-9,500- 15,000 UNIT, 6,000-19,000 -30,000 UNIT	Brand	PA
cromolyn oral	Generic	
DAILY FIBER (PSYLLIUM-SUCROSE) ORAL POWDER 3 GRAM/7 GRAM, 3.4 GRAM/7 GRAM	Brand	OTC
daily fiber oral capsule 0.52 gram	Generic	OTC
DICLEGIS	Brand	PA; PA for age less than 18 years
docusate calcium	Generic	OTC
docusate sodium oral capsule	Generic	OTC
docusate sodium oral liquid	Generic	OTC
docusate sodium oral tablet	Generic	OTC
docuzen	Generic	OTC
dok	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
doxylamine-pyridoxine (vit b6)	Generic	PA; PA for age less than 18 years
dronabinol oral capsule	Generic	PA
dulcolax (magnesium hydroxide) oral suspension	Generic	OTC
enema	Generic	OTC
enema disposable	Generic	OTC
enulose	Generic	
fiber (calcium polycarbophil)	Generic	OTC
fiber (dextrin) oral powder	Generic	OTC
fiber (psyllium husk) oral capsule 0.52 gram	Generic	OTC
FIBER (PSYLLIUM HUSK-SUGAR) ORAL POWDER 3.4 GRAM/7 GRAM	Brand	OTC
FIBER (WITH ASPARTAME) ORAL POWDER 3 GRAM/5.8 GRAM	Brand	OTC
fiber laxative (ca polycarbo)	Generic	OTC
fiber laxative (psyllium husk)	Generic	OTC
fiber therapy (ca polycarboph)	Generic	OTC
fiber therapy (m-cell/sugar)	Generic	OTC
fiber therapy (m-cellulose)	Generic	OTC
FIBER THERAPY (PSYLLIUM-SUCRO) ORAL POWDER 3 GRAM/12 GRAM	Brand	OTC
fiber therapy laxative (husk)	Generic	OTC
fiber-lax	Generic	OTC
fiber-tabs	Generic	OTC
fleet bisacodyl oral	Generic	OTC
fleet docusate	Generic	OTC
fleet enema	Generic	OTC
FLEET ENEMA EXTRA	Brand	OTC
fleet glycerin (adult)	Generic	OTC
gas relief (simethicone) oral capsule 125 mg, 180 mg	Generic	OTC
gas relief (simethicone) oral tablet,chewable 80 mg	Generic	OTC
gas relief 80 (simethicone)	Generic	OTC
gas relief extra strength	Generic	OTC
gas relief ultra strength	Generic	OTC
gavilax oral powder	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
gavilyte-c	Generic	
gavilyte-g	Generic	
gavilyte-n	Generic	
generlac	Generic	
gentle laxative (bisacodyl)	Generic	OTC
gentlelax	Generic	OTC
geri-kot	Generic	OTC
geri-lanta oral suspension 200-200-20 mg/5 ml	Generic	OTC
glycerin (adult)	Generic	OTC
glycerin (child)	Generic	OTC
healthylax	Generic	OTC
hydrocortisone rectal	Generic	
hydrocortisone topical cream with perineal applicator	Generic	
infants gas relief oral drops,suspension	Generic	OTC
infants' mylicon	Generic	OTC
infants simethicone oral drops,suspension	Generic	OTC
instalax	Generic	OTC
lactulose oral solution	Generic	
laxacin	Generic	OTC
laxaclear	Generic	OTC
laxative (bisacodyl)	Generic	OTC
laxative (sennosides) oral tablet 15 mg	Generic	OTC
laxative peg 3350	Generic	OTC
laxative pills regular	Generic	OTC
LINZESS ORAL CAPSULE 145 MCG, 290 MCG	Brand	PA; PA for age less than 18 years; QL (1 EA per 1 day)
LINZESS ORAL CAPSULE 72 MCG	Brand	PA; PA for age less than 6 years; PA for age greater than or equal to 18 years; QL (1 EA per 1 day)
little tummys gas relief	Generic	OTC
lubiprostone	Generic	PA; PA for age less than 18 years
magnesium citrate oral solution	Generic	OTC
meclizine oral tablet 12.5 mg	Generic	OTC
meclizine oral tablet 25 mg, 50 mg	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
meclizine oral tablet,chewable	Generic	OTC
mesalamine oral capsule (with del rel tablets)	Generic	
mesalamine oral capsule, extended release 500 mg	Generic	
mesalamine oral capsule,extended release 24hr	Generic	
mesalamine oral tablet,delayed release (dr/ec) 1.2 gram	Generic	
mesalamine rectal	Generic	
metamucil fiber (aspartame)	Generic	OTC
metoclopramide hcl injection solution	Generic	
metoclopramide hcl oral solution	Generic	
metoclopramide hcl oral tablet	Generic	
milk of magnesia	Generic	OTC
milk of magnesia concentrated	Generic	OTC
mineral oil heavy oral	Generic	OTC
mineral oil oral	Generic	OTC
mineral oil rectal	Generic	OTC
mintox maximum strength	Generic	OTC
mix-in laxative	Generic	OTC
motion sickness	Generic	PA; OTC
motion sickness (meclizine)	Generic	OTC
motion sickness relief(mecliz)	Generic	OTC
motion-time	Generic	OTC
MOVANTIK	Brand	PA; PA for age less than 18 years
mylanta maximum strength	Generic	OTC
NATURAL DAILY FIBER	Brand	OTC
natural fiber laxative	Generic	OTC
natural fiber laxative (sugar)	Generic	OTC
NATURAL FIBER SUPPLEMENT	Brand	OTC
natural veg laxative(sennosid)	Generic	OTC
ondansetron hcl oral solution	Generic	
ondansetron hcl oral tablet 4 mg, 8 mg	Generic	
ondansetron oral tablet,disintegrating 4 mg, 8 mg	Generic	
onelax bisacodyl	Generic	OTC
onelax magnesium citrate	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
peg 3350-electrolytes	Generic	
peg-electrolyte soln	Generic	
PENTASA	Brand	
polyethylene glycol 3350 oral powder	Generic	OTC
polyethylene glycol 3350 oral powder in packet 17 gram	Generic	OTC
pramoxine topical lotion	Generic	OTC
prochlorperazine maleate	Generic	
procto-med hc	Generic	
proctosol hc topical	Generic	
proctozone-hc	Generic	
psyllium husk (with sugar) oral powder 3 gram/7 gram	Generic	OTC
psyllium husk oral capsule 0.52 gram	Generic	OTC
purelax	Generic	OTC
ready-to-use enema	Generic	OTC
REGULOID (ASPARTAME)	Brand	OTC
REGULOID (PSYLLIUM HUSK) ORAL POWDER	Brand	OTC
REGULOID (PSYLLIUM HUSK-SUCRO)	Brand	OTC
senexon-s	Generic	OTC
senna lax	Generic	OTC
senna laxative	Generic	OTC
senna oral syrup 8.8 mg/5 ml	Generic	OTC
senna oral tablet	Generic	OTC
senna plus oral tablet	Generic	OTC
senna-s	Generic	OTC
senna-time s	Generic	OTC
sennosides oral syrup	Generic	OTC
sennosides-docusate sodium	Generic	OTC
simethicone oral capsule	Generic	OTC
simethicone oral tablet,chewable	Generic	OTC
smoothlax	Generic	OTC
sodium bicarbonate oral	Generic	OTC
stimulant laxative plus	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
stool softener (docusate cal)	Generic	OTC
stool softener oral capsule 100 mg, 250 mg	Generic	OTC
stool softener oral tablet	Generic	OTC
stool softener-laxative	Generic	OTC
stool softener-stimulant laxat oral tablet	Generic	OTC
sulfasalazine	Generic	
the magic bullet	Generic	OTC
travel-ease (meclizine)	Generic	OTC
ursodiol oral capsule 300 mg	Generic	
ursodiol oral tablet	Generic	
vegetable laxative	Generic	OTC
vegetable lax-stool softener	Generic	OTC
wal-mucil fiber	Generic	OTC
wal-mucil fiber (aspartame)	Generic	OTC
wal-mucil fiber (sugar)	Generic	OTC
wal-mucil natural fiber lax	Generic	OTC
woman's laxative (bisacodyl)	Generic	OTC
women's gentle laxative(bisac)	Generic	OTC
women's laxative (bisacodyl)	Generic	OTC
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000-84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT	Brand	PA
ULCER THERAPY		
acid controller	Generic	OTC
acid controller complete	Generic	OTC
acid reducer (famotidine)	Generic	OTC
acid reducer (omeprazole)	Generic	OTC
acid reducer complete (famot)	Generic	OTC
acid-pep	Generic	OTC
bismuth subcit k-metronidz-tcn	Generic	
complete	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
esomeprazole magnesium oral capsule,delayed release(dr/ec) 20 mg	Generic	OTC; QL (2 EA per 1 day)
esomeprazole magnesium oral capsule,delayed release(dr/ec) 40 mg	Generic	QL (2 EA per 1 day)
famotidine oral suspension for reconstitution	Generic	
famotidine oral tablet 10 mg, 20 mg	Generic	OTC
famotidine oral tablet 40 mg	Generic	
heartburn prevention oral tablet 20 mg	Generic	OTC
heartburn relief (famotidine)	Generic	OTC
lansoprazole oral capsule,delayed release(dr/ec) 15 mg	Generic	OTC; QL (2 EA per 1 day)
lansoprazole oral capsule,delayed release(dr/ec) 30 mg	Generic	QL (2 EA per 1 day)
lansoprazole oral tablet,disintegrat, delay rel 15 mg	Generic	OTC; QL (2 EA per 1 day)
misoprostol	Generic	
omeprazole magnesium	Generic	OTC; QL (4 EA per 1 day)
omeprazole oral capsule,delayed release(dr/ec) 10 mg, 40 mg	Generic	QL (2 EA per 1 day)
omeprazole oral capsule,delayed release(dr/ec) 20 mg	Generic	QL (4 EA per 1 day)
omeprazole oral tablet,delayed release (dr/ec)	Generic	OTC; QL (4 EA per 1 day)
omeprazole oral tablet,disintegrat, delay rel	Generic	OTC; QL (4 EA per 1 day)
pantoprazole oral	Generic	QL (2 EA per 1 day)
PROTONIX ORAL GRANULES DR FOR SUSP IN PACKET	Brand	QL (2 EA per 1 day)
PYLERA	Brand	
ranitidine hcl oral tablet 150 mg	Generic	
sucralfate	Generic	
IMMUNOLOGY, VACCINES / BIOTECHNOLOGY		
BIOTECHNOLOGY DRUGS		
ACTIMMUNE	Brand	PA
ALFERON N	Brand	
ARANESP (IN POLYSORBATE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	Brand	

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

Drug Name	Drug Tier	Requirements / Limits
ARANESP (IN POLYSORBATE) INJECTION SYRINGE	Brand	
AVONEX INTRAMUSCULAR PEN INJECTOR KIT	Brand	PA; PA for age less than 18 years
AVONEX INTRAMUSCULAR SYRINGE KIT	Brand	PA; PA for age less than 18 years
BESREMI	Brand	PA; QL (2 ML per 28 days)
BESREMI PEN	Brand	PA; QL (1 ML per 28 days)
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	Brand	
FULPHILA	Brand	QL (1 ML per 11 days)
GENOTROPIN	Brand	PA
GENOTROPIN MINIQUICK	Brand	PA
NEUPOGEN	Brand	QL (90 ML per 30 days)
NORDITROPIN FLEXPRO SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	Brand	PA
RETACRIT	Brand	
VACCINES / MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO (PF)	Brand	PA for age less than or equal to 49 years; 1 vial per lifetime; covered for age 19 and up
ACTHIB (PF)	Brand	covered for age 19 and up
ADACEL(TDAP ADOLESN/ADULT)(PF)	Brand	covered for age 19 and up
AREXVY (PF)	Brand	covered for age 19 and up; PA for age less than or equal to 49 years; 1 kit per lifetime
BEXSERO	Brand	covered for age 19 and up
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE	Brand	covered for age 19 and up
CAPVAXIVE (PF)	Brand	covered for age 19 and up
COMIRNATY 2026-2027(5-11Y)(PF)	Brand	
COMIRNATY 2026-27 (12Y UP)(PF)	Brand	
DAPTACEL (DTAP PEDIATRIC) (PF)	Brand	covered for age 19 and up
ENGERIX-B (PF)	Brand	covered for age 19 and up
ENGERIX-B PEDIATRIC (PF)	Brand	covered for age 19 and up

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

Drug Name	Drug Tier	Requirements / Limits
FLUAD 2026-2027 (65 YR UP)(PF)	Brand	covered for age 19 and up
FLUARIX 2026-2027 (PF)	Brand	covered for age 19 and up
FLUBLOK 2026-2027 (PF)	Brand	covered for age 19 and up
FLUCELVAX 2026-2027 (PF)	Brand	covered for age 19 and up
FLULAVAL 2026-2027 (PF)	Brand	covered for age 19 and up
FLUMIST 2026-2027	Brand	covered for age 19 and up
FLUMIST HOME 2026-2027	Brand	covered for age 19 and up
FLUZONE 2026-2027	Brand	covered for age 19 and up
FLUZONE 2026-2027 (PF)	Brand	covered for age 19 and up
FLUZONE HIGH-DOSE 2026-27 (PF)	Brand	covered for age 19 and up
GARDASIL 9 (PF)	Brand	covered for age 19 and up
HAVRIX (PF)	Brand	covered for age 19 and up
HEPLISAV-B (PF)	Brand	covered for age 19 and up
HIBERIX (PF)	Brand	covered for age 19 and up
INFANRIX (DTAP) (PF)	Brand	covered for age 19 and up
IPOL	Brand	covered for age 19 and up
JYNNEOS (PF)	Brand	covered for age 19 and up
KINRIX (PF)	Brand	covered for age 19 and up
MENQUADFI (PF)	Brand	covered for age 19 and up
MENVEO A-C-Y-W-135-DIP (PF)	Brand	covered for age 19 and up
M-M-R II (PF)	Brand	covered for age 19 and up
MNEXSPIKE 2026-2027 (PF)	Brand	
MRESVIA (PF)	Brand	covered for age 19 and up; PA for age less than or equal to 49 years; 1 unit per lifetime
NUVAXOVID 2026-2027 (PF)	Brand	
PEDIARIX (PF)	Brand	covered for age 19 and up
PEDVAX HIB (PF)	Brand	covered for age 19 and up
PENBRAYA (PF)	Brand	covered for age 19 and up
PENMENVY MEN A-B-C-W-Y (PF)	Brand	covered for age 19 and up
PENTACEL (PF)	Brand	covered for age 19 and up
PNEUMOVAX-23 INJECTION SYRINGE	Brand	covered for age 19 and up
PREVNAR 20 (PF)	Brand	covered for age 19 and up
PRIORIX (PF)	Brand	covered for age 19 and up
PROQUAD (PF)	Brand	covered for age 19 and up

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

Drug Name	Drug Tier	Requirements / Limits
QUADRACEL (PF)	Brand	covered for age 19 and up
RECOMBIVAX HB (PF)	Brand	covered for age 19 and up
SHINGRIX (PF) INTRAMUSCULAR SYRINGE	Brand	covered for age 19 and up
SPIKEVAX 2026-2027(12Y UP)(PF)	Brand	
SPIKEVAX 2026-27 (6M-11Y) (PF)	Brand	
TENIVAC (PF)	Brand	covered for age 19 and up
TRUMENBA	Brand	covered for age 19 and up
VAQTA (PF)	Brand	covered for age 19 and up
VARIVAX (PF)	Brand	covered for age 19 and up
VAXELIS (PF) INTRAMUSCULAR SYRINGE	Brand	covered for age 19 and up
VAXNEUVANCE (PF)	Brand	covered for age 19 and up
MUSCULOSKELETAL / RHEUMATOLOGY		
GOUT THERAPY		
allopurinol oral tablet 100 mg, 300 mg	Generic	
colchicine oral tablet	Generic	
probenecid	Generic	
probenecid-colchicine	Generic	
OSTEOPOROSIS THERAPY		
alendronate oral tablet 10 mg, 35 mg, 70 mg	Generic	
ENOBY	Brand	PA; PA for age less than 18 years
ibandronate oral	Generic	
JUBBONTI	Brand	PA; PA for age less than 18 years
raloxifene	Generic	
STOBOCLO	Brand	PA; PA for age less than 18 years
OTHER RHEUMATOLOGICALS		
ADALIMUMAB-ADBM	Brand	PA; PA for age less than 2 years; Mfg BOEHRINGER ING. Preferred; QL (2 EA per 28 days)
ENBREL MINI	Brand	PA; PA for age less than 2 years; QL (4 ML per 28 days)
ENBREL SUBCUTANEOUS SOLUTION	Brand	PA; PA for age less than 2 years; QL (4 ML per 28 days)
ENBREL SUBCUTANEOUS SYRINGE	Brand	PA; PA for age less than 2 years; QL (4 ML per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
ENBREL SURECLICK	Brand	PA; PA for age less than 2 years; QL (4 ML per 28 days)
HADLIMA	Brand	PA; PA for age less than 2 years; QL (1.6 ML per 28 days)
HADLIMA PUSHTOUCH	Brand	PA; PA for age less than 2 years; QL (1.6 ML per 28 days)
HADLIMA(CF)	Brand	PA; PA for age less than 2 years; QL (0.8 ML per 28 days)
HADLIMA(CF) PUSHTOUCH	Brand	PA; PA for age less than 2 years; QL (0.8 ML per 28 days)
leflunomide	Generic	
penicillamine oral capsule	Generic	
penicillamine oral tablet	Generic	QL (32 EA per 1 day)
OBSTETRICS / GYNECOLOGY		
ESTROGENS / PROGESTINS		
abigale	Generic	
abigale lo	Generic	
camila	Generic	
CLIMARA	Brand	PA for age less than 18 years
deblitane	Generic	
DEPO-SUBQ PROVERA 104	Brand	
DIVIGEL	Brand	PA for age less than 18 years
ELESTRIN	Brand	PA for age less than 18 years
emzahh	Generic	
errin	Generic	
estradiol oral	Generic	PA for age less than 18 years
estradiol vaginal cream	Generic	
estradiol vaginal tablet	Generic	PA for age less than 18 years
estradiol-norethindrone acet	Generic	
EVAMIST	Brand	PA for age less than 18 years
fyavolv oral tablet 1-5 mg-mcg	Generic	
gallifrey	Generic	
heather	Generic	
incassia	Generic	
jencycla	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
lyleq	Generic	
lyza	Generic	
medroxyprogesterone	Generic	
meleya	Generic	
mimvey	Generic	
nora-be	Generic	
norethindrone (contraceptive)	Generic	
norethindrone acetate	Generic	
OPILL	Brand	OTC
orquidea	Generic	
PREMARIN ORAL	Brand	PA for age less than 18 years
PREMARIN VAGINAL	Brand	
PREMPHASE	Brand	
PREMPRO	Brand	
progesterone	Generic	
progesterone micronized oral	Generic	
sharobel	Generic	
tulana	Generic	
VAGIFEM	Brand	PA for age less than 18 years
VIVELLE-DOT	Brand	PA for age less than 18 years
yuvafem	Generic	PA for age less than 18 years
MISCELLANEOUS OB/GYN		
3-day vaginal	Generic	OTC
CLEOCIN VAGINAL SUPPOSITORY	Brand	
clindamycin phosphate vaginal	Generic	
CLINDESSE	Brand	
clotrimazole 3 day	Generic	OTC
clotrimazole vaginal	Generic	OTC
clotrimazole-3	Generic	OTC
clotrimazole-7	Generic	OTC
eluryng	Generic	
enilloring	Generic	
etonogestrel-ethinyl estradiol	Generic	
KYLEENA	Brand	

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

Drug Name	Drug Tier	Requirements / Limits
LILETTA	Brand	
LYNKUET	Brand	PA; PA for age less than 18 years; QL (2 EA per 1 day)
metronidazole vaginal gel 0.75 % (37.5mg/5 gram)	Generic	
miconazole nitrate vaginal comb pack,prefill appl, cream	Generic	OTC
miconazole nitrate vaginal cream	Generic	OTC
MICONAZOLE NITRATE VAGINAL KIT 1,200-2 MG-%	Brand	OTC
MICONAZOLE-3 PREFIL,CREAM,WIPE	Brand	OTC
miconazole-3 vaginal comb pack,prefill appl, cream	Generic	OTC
miconazole-3 vaginal kit	Generic	OTC
miconazole-7 vaginal cream	Generic	OTC
miconazole-skin clnsr17	Generic	OTC
MIRENA	Brand	
NEXPLANON	Brand	
norelgestromin-ethin.estradiol	Generic	
NUVESSA	Brand	
PARAGARD T 380A	Brand	
PARAGARD T380A (SINGLE HAND)	Brand	
SKYLA	Brand	
terconazole	Generic	
tranexamic acid oral	Generic	
VAGINAL CONTRACEPTIVE FILM	Brand	OTC
VCF CONTRACEPTIVE GEL	Brand	OTC
xulane	Generic	
zafemy	Generic	
ORAL CONTRACEPTIVES / RELATED AGENTS		
afirmelle	Generic	
after pill	Generic	OTC
AFTERA	Brand	OTC
altavera (28)	Generic	
alyacen 1/35 (28)	Generic	
alyacen 7/7/7 (28)	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
amethia	Generic	
apri	Generic	
aranelle (28)	Generic	
ashlyna	Generic	
aubra	Generic	
aubra eq	Generic	
aurovela 1.5/30 (21)	Generic	
aurovela 1/20 (21)	Generic	
aurovela fe 1.5/30 (28)	Generic	
aurovela fe 1-20 (28)	Generic	
aviane	Generic	
ayuna	Generic	
azurette (28)	Generic	
balziva (28)	Generic	
blisovi 24 fe	Generic	
blisovi fe 1.5/30 (28)	Generic	
blisovi fe 1/20 (28)	Generic	
briellyn	Generic	
camrese	Generic	
camrese lo	Generic	
caziant (28)	Generic	
chateal eq (28)	Generic	
cryselle (28)	Generic	
cyred	Generic	
cyred eq	Generic	
dasetta 1/35 (28)	Generic	
dasetta 7/7/7 (28)	Generic	
daysee	Generic	
drospirenone-ethinyl estradiol	Generic	
econtra ez	Generic	OTC
econtra one-step	Generic	OTC
elinest	Generic	
ELLA	Brand	
enpresse	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
enskyce	Generic	
estarylla	Generic	
falmina (28)	Generic	
feirza	Generic	
hailey	Generic	
hailey fe 1.5/30 (28)	Generic	
hailey fe 1/20 (28)	Generic	
iclevia	Generic	
introvale	Generic	
isibloom	Generic	
jaimiess	Generic	
jasmiel (28)	Generic	
jolessa	Generic	
juleber	Generic	
junel 1.5/30 (21)	Generic	
junel 1/20 (21)	Generic	
junel fe 1.5/30 (28)	Generic	
junel fe 1/20 (28)	Generic	
junel fe 24	Generic	
kalliga	Generic	
kariva (28)	Generic	
kelnor 1/35 (28)	Generic	
kurvelo (28)	Generic	
larin 1.5/30 (21)	Generic	
larin 1/20 (21)	Generic	
larin fe 1.5/30 (28)	Generic	
larin fe 1/20 (28)	Generic	
lessina	Generic	
levonest (28)	Generic	
levonorgestrel	Generic	OTC
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg	Generic	
levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month	Generic	
levonorg-eth estrad triphasic	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
lojaimiess	Generic	
loryna (28)	Generic	
low-ogestrel (28)	Generic	
lo-zumandimine (28)	Generic	
luizza	Generic	
lutera (28)	Generic	
marlissa (28)	Generic	
mibelas 24 fe	Generic	
microgestin 1.5/30 (21)	Generic	
microgestin 1/20 (21)	Generic	
microgestin fe 1.5/30 (28)	Generic	
microgestin fe 1/20 (28)	Generic	
mili	Generic	
mono-linyah	Generic	
my choice	Generic	OTC
my way	Generic	OTC
necon 0.5/35 (28)	Generic	
new day	Generic	OTC
nikki (28)	Generic	
norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg	Generic	
norgestimate-ethinyl estradiol	Generic	
nortrel 0.5/35 (28)	Generic	
nortrel 1/35 (21)	Generic	
nortrel 1/35 (28)	Generic	
nortrel 7/7/7 (28)	Generic	
nylia 1/35 (28)	Generic	
nylia 7/7/7 (28)	Generic	
opcicon one-step	Generic	OTC
option-2	Generic	OTC
philith	Generic	
pimtrea (28)	Generic	
portia 28	Generic	
reclipsen (28)	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
setlakin	Generic	
shewise	Generic	OTC
simliya (28)	Generic	
simpesse	Generic	
sprintec (28)	Generic	
syeda	Generic	
TAKE ACTION	Brand	OTC
tarina fe 1/20 (28)	Generic	
tarina fe 1-20 eq (28)	Generic	
tri-estarylla	Generic	
tri-linyah	Generic	
tri-lo-estarylla	Generic	
tri-lo-marzia	Generic	
tri-lo-mili	Generic	
tri-lo-sprintec	Generic	
tri-mili	Generic	
tri-sprintec (28)	Generic	
tri-vylibra	Generic	
tri-vylibra lo	Generic	
turqoz (28)	Generic	
valtya	Generic	
velivet triphasic regimen (28)	Generic	
vestura (28)	Generic	
vienva	Generic	
viorele (28)	Generic	
vyfemla (28)	Generic	
vylibra	Generic	
wera (28)	Generic	
your choice	Generic	OTC
zarah	Generic	
zovia 1-35 (28)	Generic	
zumandimine (28)	Generic	

OPHTHALMOLOGY

ANTIBIOTICS

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

Drug Name	Drug Tier	Requirements / Limits
bacitracin-polymyxin b	Generic	
ciprofloxacin hcl ophthalmic (eye)	Generic	
erythromycin ophthalmic (eye)	Generic	
gentamicin ophthalmic (eye) drops	Generic	
moxifloxacin ophthalmic (eye) drops	Generic	
ofloxacin ophthalmic (eye)	Generic	
polymyxin b sulf-trimethoprim	Generic	
tobramycin ophthalmic (eye)	Generic	
ANTIVIRALS		
trifluridine	Generic	
BETA-BLOCKERS		
carteolol	Generic	
levobunolol ophthalmic (eye) drops 0.5 %	Generic	
timolol maleate ophthalmic (eye)	Generic	
CYCLOPLEGIC MYDRIATICS		
atropine ophthalmic (eye) drops 1 %	Generic	
cyclopentolate	Generic	
homatropaire	Generic	
tropicamide ophthalmic (eye) drops 1 %	Generic	
DIRECT ACTING MIOTICS		
pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %	Generic	
MISCELLANEOUS OPHTHALMOLOGICS		
alaway	Generic	OTC
allergy eye (ketotifen)	Generic	OTC
artificial tears (pf) ophthalmic (eye) dropperette	Generic	OTC
artificial tears(dext70-hypro)	Generic	OTC
artificial tears(glycerin-peg)	Generic	OTC
artificial tears(pvalch-povid)	Generic	OTC
azelastine ophthalmic (eye)	Generic	
BLINK GEL TEARS	Brand	OTC
BLINK TEARS	Brand	OTC
children's alaway	Generic	OTC
cleansing eyelid	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
CLEANSING EYELID MOIST PADS	Brand	OTC
CLEANSING EYELID WIPES EXT STR	Brand	OTC
cromolyn ophthalmic (eye)	Generic	
eye allergy itch relief	Generic	OTC
eye allergy itch-redness rlf	Generic	OTC
eye itch relief	Generic	OTC
EYELID WIPES (WITH CHAMOMILE)	Brand	OTC
ketotifen fumarate	Generic	OTC
lubricant eye (pg-peg 400)	Generic	OTC
lubricant eye drops ophthalmic (eye) dropperette	Generic	OTC
lubricating plus	Generic	OTC
lubrifresh pm	Generic	OTC
olopatadine ophthalmic (eye)	Generic	OTC
polyvinyl alcohol	Generic	OTC
REFRESH CLASSIC (PF)	Brand	OTC
RESTASIS	Brand	QL (2 EA per 1 day)
SYSTANE (PROPYLENE GLYCOL)	Brand	OTC
ultra lubricant eye	Generic	OTC
XDEMVY	Brand	PA; QL (10 ML per 365 days)
XIIDRA	Brand	QL (2 EA per 1 day)
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
diclofenac sodium ophthalmic (eye)	Generic	
flurbiprofen sodium	Generic	
ketorolac ophthalmic (eye) drops 0.5 %	Generic	
ORAL DRUGS FOR GLAUCOMA		
acetazolamide oral capsule, extended release	Generic	
acetazolamide oral tablet 250 mg	Generic	
methazolamide	Generic	
OTHER GLAUCOMA DRUGS		
AZOPT	Brand	
brimonidine-timolol	Generic	
COMBIGAN	Brand	
dorzolamide	Generic	
dorzolamide-timolol	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
latanoprost	Generic	
RHOPRESSA	Brand	
ROCKLATAN	Brand	
TRAVATAN Z	Brand	
travoprost	Generic	
STEROID-ANTIBIOTIC COMBINATIONS		
neomycin-polymyxin b-dexameth	Generic	
TOBRADEX	Brand	
tobramycin-dexamethasone	Generic	
STEROIDS		
difluprednate	Generic	
DUREZOL	Brand	
prednisolone acetate	Generic	
prednisolone sodium phosphate ophthalmic (eye)	Generic	
STEROID-SULFONAMIDE COMBINATIONS		
sulfacetamide-prednisolone	Generic	
SULFONAMIDES		
sulfacetamide sodium ophthalmic (eye) drops	Generic	
SYMPATHOMIMETICS		
ALPHAGAN P	Brand	
apraclonidine	Generic	
brimonidine ophthalmic (eye)	Generic	
VASOCONSTRICTOR DECONGESTANTS		
phenylephrine hcl ophthalmic (eye) drops 2.5 %	Generic	
redness reliever eye drops	Generic	OTC
RESPIRATORY AND ALLERGY		
ANTIHISTAMINE / ANTIALLERGENIC AGENTS		
12 hour decongestant	Generic	OTC
12 hour nasal decongest (pse)	Generic	OTC
24hour allergy	Generic	OTC
24hr allergy relief	Generic	OTC
actidom dmx	Generic	OTC
adult tussin cf	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
adult tussin chest congestion	Generic	OTC
adult wal-tussin	Generic	OTC
aler-cap	Generic	OTC
all day allergy (cetirizine) oral tablet	Generic	OTC
all day allergy-d	Generic	OTC
aller-chlor	Generic	OTC
allerclear	Generic	OTC
allergy (chlorpheniramine)	Generic	OTC
allergy (diphenhydramine)	Generic	OTC
allergy and congestion relief oral tablet extended release 24 hr	Generic	OTC
allergy medicine	Generic	OTC
allergy oral liquid	Generic	OTC
allergy relief (cetirizine)	Generic	OTC
allergy relief (levocetirizin)	Generic	OTC
allergy relief (loratadine) oral solution	Generic	PA for age less than 2 years; OTC
allergy relief (loratadine) oral tablet	Generic	OTC
allergy relief (loratadine) oral tablet,disintegrating 10 mg	Generic	OTC
allergy relief d12	Generic	OTC
allergy relief d-24hr	Generic	OTC
allergy relief(chlorpheniramn)	Generic	OTC
allergy relief(diphenhydramin) oral capsule	Generic	OTC
allergy relief(diphenhydramin) oral liquid	Generic	OTC
allergy relief(diphenhydramin) oral tablet	Generic	OTC
allergy relief-d (cetirizine)	Generic	OTC
allergy relief-d (loratadine)	Generic	OTC
allergy-congest relief-d(fexo)	Generic	OTC
aller-tec	Generic	OTC
banophen oral tablet	Generic	OTC
BENADRYL ALLERGY ORAL LIQUID	Brand	OTC
BENADRYL ORAL	Brand	OTC
benzonatate	Generic	
biocotron	Generic	OTC
brompheniramine-pseudoeph-dm	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
cetirizine oral solution 1 mg/ml	Generic	
cetirizine oral tablet 10 mg	Generic	OTC
CETIRIZINE ORAL TABLET 5 MG	Brand	OTC
cetirizine-pseudoephedrine	Generic	OTC
chest congestion relief dm	Generic	OTC
CHEST CONGESTION RELIEF ORAL LIQUID	Brand	OTC
chest congestion relief oral tablet	Generic	OTC
child allergy relf(cetirizine)	Generic	OTC
child chest congestion-cough	Generic	OTC
child delsym cough-chest dm	Generic	OTC
children's allergy (diphenhyd)	Generic	OTC
children's allergy relief(lor) oral solution	Generic	PA for age less than 2 years; OTC
children's allergy(cetirizine)	Generic	OTC
children's benadryl allergy	Generic	OTC
children's cetirizine oral solution 1 mg/ml	Generic	OTC
children's cetirizine oral tablet,chewable 10 mg	Generic	OTC
children's chest congestion	Generic	OTC
children's cold and cough (pe)	Generic	OTC
CHILDREN'S COUGH DM ER	Brand	OTC
children's mucinex cough oral liquid	Generic	OTC
children's wal-dryl allergy	Generic	OTC
children's wal-zyr oral solution	Generic	OTC
child's all day allergy(cetir)	Generic	OTC
chld robitussin cough-chest dm	Generic	OTC
chlorpheniramine maleate oral tablet	Generic	OTC
chlortabs	Generic	OTC
codeine-guaifenesin	Generic	PA for age less than 18 years
complete allergy	Generic	OTC
COUGH DM ER	Brand	OTC
cyproheptadine oral syrup	Generic	
cyproheptadine oral tablet	Generic	
delsym cough-chest congest dm	Generic	OTC
dextromethorphan hbr	Generic	OTC
dextromethorphan polistirex	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
dextromethorphan-guaifenesin oral liquid	Generic	OTC
dextromethorphan-guaifenesin oral syrup	Generic	OTC
diabetic tussin dm	Generic	OTC
dimetapp dm cold-cough (pe)	Generic	OTC
diphedryl	Generic	OTC
diphenhydramine hcl oral capsule	Generic	OTC
diphenhydramine hcl oral elixir	Generic	
diphenhydramine hcl oral liquid	Generic	OTC
diphenhydramine hcl oral tablet	Generic	OTC
dometuss-dmx	Generic	OTC
epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml	Generic	QL (12 EA per 365 days)
EPIPEN	Brand	QL (12 EA per 365 days)
EPIPEN 2-PAK	Brand	QL (12 EA per 365 days)
EPIPEN JR	Brand	QL (12 EA per 365 days)
EPIPEN JR 2-PAK	Brand	QL (12 EA per 365 days)
g tussin ac	Generic	PA for age less than 6 years
geri-dryl	Generic	OTC
geri-tussin	Generic	OTC
geri-tussin dm	Generic	OTC
giltuss cough-congestion	Generic	OTC
giltuss diabetic	Generic	OTC
giltuss hbp	Generic	OTC
guaiasorb dm	Generic	OTC
guaifenesin oral liquid	Generic	OTC
guaifenesin oral tablet	Generic	OTC
guaifenesin oral tablet extended release 12hr 600 mg	Generic	OTC
hydroxyzine hcl oral solution 10 mg/5 ml	Generic	
hydroxyzine hcl oral tablet	Generic	
hydroxyzine pamoate	Generic	
levocetirizine oral tablet	Generic	
lohist-dm	Generic	OTC
loradamed	Generic	OTC
loratadine oral solution	Generic	PA for age less than 2 years; OTC

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

Drug Name	Drug Tier	Requirements / Limits
loratadine oral tablet	Generic	OTC
loratadine oral tablet,disintegrating	Generic	OTC
loratadine-d	Generic	OTC
maxallergy kids	Generic	OTC
maxi-tuss ac	Generic	PA for age less than 6 years
maxi-tuss g	Generic	OTC
m-dryl	Generic	OTC
mucinex fast-max dm max	Generic	OTC
mucosa	Generic	OTC
mucus dm	Generic	OTC
mucus dm max er	Generic	OTC
mucus relief	Generic	OTC
mucus relief dm max	Generic	OTC
mucus relief er oral tablet extended release 12hr 600 mg	Generic	OTC
MUCUS-CHEST CONGESTION	Brand	OTC
NARAMIN	Brand	OTC
nasal decongestant (pe)	Generic	OTC
nasal decongestant (pseudoeph) oral tablet	Generic	OTC
nasal decongestant (pseudoeph) oral tablet extended release	Generic	OTC
NIGHTTIME SLEEP AID (DIPHEN) ORAL CAPSULE 25 MG	Brand	OTC
nighttime sleep aid (diphen) oral capsule 50 mg	Generic	OTC
nighttime sleep aid (diphen) oral tablet	Generic	OTC
pharbechlor	Generic	OTC
pharbedryl	Generic	OTC
promethazine oral	Generic	PA for age less than 2 years
promethazine rectal	Generic	PA for age less than 2 years
promethazine-codeine	Generic	PA for age less than 18 years; QL (30 ML per 1 day)
promethazine-dm	Generic	
promethazine-phenylephrine	Generic	
promethegan rectal suppository 12.5 mg, 25 mg	Generic	PA for age less than 2 years
pseudoephedrine hcl oral tablet	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
pseudoephedrine hcl oral tablet extended release	Generic	OTC
refenesen	Generic	OTC
robafen cf (phenylephrine)	Generic	OTC
robitussin cough and cold cf	Generic	OTC
robitussin cough-chest cong dm oral liquid 5-100 mg/5 ml	Generic	OTC
SCOT-TUSSIN EXPECTORANT	Brand	OTC
sinus 12 hour	Generic	OTC
SLEEP AID (DIPHENHYDRAMINE) ORAL CAPSULE 25 MG	Brand	OTC
sleep aid (diphenhydramine) oral capsule 50 mg	Generic	OTC
sleep-tabs	Generic	OTC
sorbugen nr	Generic	OTC
sudogest	Generic	OTC
sudogest 12-hour	Generic	OTC
suphedrine 12 hour	Generic	OTC
tusnel diabetic	Generic	OTC
TUSNEL PEDIATRIC	Brand	OTC
tussin	Generic	OTC
tussin cf (pe-dm-guaif)	Generic	OTC
tussin cf cough-cold	Generic	OTC
tussin chest congestion	Generic	OTC
tussin dm cough and chest oral liquid 5-100 mg/5 ml	Generic	OTC
tussin dm cough and chest oral syrup	Generic	OTC
tussin dm max oral liquid 5-100 mg/5 ml	Generic	OTC
tussin dm oral liquid	Generic	OTC
tussin dm oral syrup	Generic	OTC
tussin mucus-chest congestion	Generic	OTC
wal-dryl allergy	Generic	OTC
wal-finate	Generic	OTC
wal-itin d	Generic	OTC
wal-itin d 12 hour	Generic	OTC
wal-itin oral solution	Generic	PA for age less than 2 years; OTC
wal-itin oral tablet	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
wal-phed 12 hour	Generic	OTC
wal-phed d	Generic	OTC
wal-phed oral tablet 30 mg	Generic	OTC
WAL-SLEEP Z ORAL CAPSULE	Brand	OTC
wal-som (diphenhydramine)	Generic	OTC
wal-tussin dm	Generic	OTC
wal-zyr (cetirizine)	Generic	OTC
ZZZQUIL ORAL CAPSULE	Brand	OTC
PULMONARY AGENTS		
24 hour allergy relief	Generic	OTC
24 HOUR NASAL ALLERGY	Brand	OTC
acetylcysteine	Generic	
ADVAIR DISKUS	Brand	
ADVAIR HFA	Brand	
ALBUTEROL SULFATE INHALATION HFA AEROSOL INHALER	Brand	
albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml	Generic	
albuterol sulfate oral syrup	Generic	
albuterol sulfate oral tablet	Generic	
aller-flo	Generic	OTC
allergy relief (fluticasone)	Generic	OTC
ALYFTREK ORAL TABLET 10-50-125 MG	Brand	PA; QL (2 EA per 1 day)
ALYFTREK ORAL TABLET 4-20-50 MG	Brand	PA; QL (3 EA per 1 day)
alyq	Generic	PA; PA for age less than 18 years
ambrisentan	Generic	PA for age less than 18 years; QL (1 EA per 1 day)
ANORO ELLIPTA	Brand	
arformoterol	Generic	
ARNUITY ELLIPTA	Brand	
ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION	Brand	
ASMANEX HFA INHALATION HFA AEROSOL INHALER 50 MCG/ACTUATION	Brand	PA for age greater than 12 years

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

Drug Name	Drug Tier	Requirements / Limits
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	Brand	
ATROVENT HFA	Brand	
azelastine-fluticasone	Generic	PA for age less than 6 years
BERINERT INTRAVENOUS KIT	Brand	PA; PA for age less than 6 years; QL (4 EA per 2 days)
bosentan oral tablet	Generic	QL (2 EA per 1 day)
BREZTRI AEROSPHERE	Brand	PA
budesonide inhalation	Generic	PA for age less than 1 year; PA for age greater than 8 years
budesonide nasal	Generic	OTC
children's fluticasone	Generic	OTC
COMBIVENT RESPIMAT	Brand	
cromolyn inhalation	Generic	
DULERA	Brand	
FASENRA	Brand	PA; PA for age less than 6 years; QL (1 ML per 42 days)
FASENRA PEN	Brand	PA; PA for age less than 6 years; QL (1 ML per 42 days)
fluticasone propionate nasal	Generic	OTC
formoterol fumarate	Generic	
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT	Brand	PA; PA for age less than 12 years; QL (16 EA per 28 days)
HAEGARDA SUBCUTANEOUS RECON SOLN 3,000 UNIT	Brand	PA; PA for age less than 12 years; QL (8 EA per 28 days)
icatibant	Generic	PA; PA for age less than 18 years; QL (9 ML per 28 days)
ipratropium bromide inhalation solution	Generic	
ipratropium-albuterol	Generic	
KALBITOR	Brand	PA; PA for age less than 12 years; QL (6 ML per 2 days)
KALYDECO	Brand	PA; QL (2 EA per 1 day)
montelukast oral tablet	Generic	
montelukast oral tablet,chewable	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
nasal allergy	Generic	OTC
ORKAMBI ORAL GRANULES IN PACKET	Brand	PA; QL (2 EA per 1 day)
ORKAMBI ORAL TABLET	Brand	PA; QL (4 EA per 1 day)
pirfenidone oral capsule	Generic	PA; QL (3 EA per 1 day)
pirfenidone oral tablet 267 mg, 801 mg	Generic	PA; QL (3 EA per 1 day)
PIRFENIDONE ORAL TABLET 534 MG	Brand	PA; QL (3 EA per 1 day)
PULMICORT FLEXHALER	Brand	
PULMOZYME	Brand	PA; QL (150 ML per 30 days)
QVAR REDIHALER	Brand	
roflumilast	Generic	PA; PA for age less than 18 years; QL (1 EA per 1 day)
SEREVENT DISKUS	Brand	
sildenafil (pulm.hypertension) oral suspension for reconstitution	Generic	PA; PA for age less than 1 year
sildenafil (pulm.hypertension) oral tablet	Generic	PA; PA for age less than 18 years
sodium chloride inhalation solution for nebulization 0.9 %, 3 %, 7 %	Generic	
SPIRIVA RESPIMAT	Brand	
SPIRIVA WITH HANDIHALER	Brand	
STIOLTO RESPIMAT	Brand	
SYMBICORT	Brand	
SYMDEKO	Brand	PA; QL (2 EA per 1 day)
tadalafil (pulm. hypertension)	Generic	PA; PA for age less than 18 years
terbutaline oral	Generic	
TEZSPIRE	Brand	PA; PA for age less than 12 years; QL (1.91 ML per 28 days)
theophylline oral elixir	Generic	
theophylline oral solution	Generic	
theophylline oral tablet extended release 12 hr	Generic	
theophylline oral tablet extended release 24 hr 400 mg	Generic	
triamcinolone acetonide nasal	Generic	OTC
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL	Brand	PA; QL (2 EA per 1 day)
TRIKAFTA ORAL TABLETS, SEQUENTIAL	Brand	PA; QL (3 EA per 1 day)
VENTOLIN HFA	Brand	

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

Drug Name	Drug Tier	Requirements / Limits
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 150 MG/ML	Brand	PA; PA for age less than 1 year; QL (1 ML per 28 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 300 MG/2 ML	Brand	PA; PA for age less than 1 year; QL (2 ML per 28 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 75 MG/0.5 ML	Brand	PA; PA for age less than 1 year; QL (0.5 ML per 28 days)
XOLAIR SUBCUTANEOUS RECON SOLN	Brand	PA; PA for age less than 1 year; QL (1 EA per 28 days)
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML	Brand	PA; PA for age less than 1 year; QL (1 ML per 28 days)
XOLAIR SUBCUTANEOUS SYRINGE 300 MG/2 ML	Brand	PA; PA for age less than 1 year; QL (2 ML per 28 days)
XOLAIR SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	Brand	PA; PA for age less than 1 year; QL (0.5 ML per 28 days)
UROLOGICALS		
ANTICHOLINERGICS / ANTISPASMODICS		
fesoterodine	Generic	QL (1 EA per 1 day)
mirabegron oral tablet extended release 24 hr	Generic	QL (1 EA per 1 day)
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR	Brand	
oxybutynin chloride	Generic	
solifenacin	Generic	
tolterodine oral tablet	Generic	
BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY		
alfuzosin	Generic	
dutasteride	Generic	
finasteride oral tablet 5 mg	Generic	
tamsulosin	Generic	
CHOLINERGIC STIMULANTS		
bethanechol chloride	Generic	
MISCELLANEOUS UROLOGICALS		
pot,sodium citrate-citric acid	Generic	OTC
potassium citrate oral tablet extended release 10 meq (1,080 mg), 5 meq (540 mg)	Generic	
potassium citrate-citric acid	Generic	OTC
sodium citrate-citric acid oral solution 500-334 mg/5 ml	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
tricitrates	Generic	OTC
URINARY ANESTHETICS		
phenazopyridine oral tablet 100 mg, 200 mg	Generic	
VITAMINS, HEMATINICS / ELECTROLYTES		
ELECTROLYTES		
antacid (calcium carbonate) oral tablet,chewable 200 mg calcium (500 mg)	Generic	OTC
antacid ext str (calcium carb)	Generic	OTC
antacid ultra strength oral tablet,chewable 400 mg calcium (1,000 mg)	Generic	OTC
calcium 500 + d oral tablet 500 mg-5 mcg (200 unit)	Generic	OTC
calcium 500 + d oral tablet,chewable	Generic	OTC
calcium 500 with d	Generic	OTC
calcium 600 + d(3) oral capsule	Generic	OTC
calcium 600 + d(3) oral tablet 600 mg-10 mcg (400 unit)	Generic	OTC
calcium 600 with vitamin d3 oral tablet,chewable	Generic	OTC
CALCIUM ACETATE ORAL TABLET 668 MG (169 MG CALCIUM)	Brand	OTC
calcium acetate(phosphat bind) oral capsule	Generic	QL (12 EA per 1 day)
calcium antacid oral tablet,chewable 200 mg calcium (500 mg), 300 mg (750 mg), 320 mg calcium (750 mg)	Generic	OTC
calcium carbonate oral suspension	Generic	OTC
calcium carbonate oral tablet	Generic	OTC
calcium carbonate oral tablet,chewable 200 mg calcium (500 mg), 400 mg calcium (1,000 mg), 500 mg calcium (1,250 mg)	Generic	OTC
calcium carbonate-vitamin d3 oral tablet 250 mg-3 mcg (120 unit), 250 mg-3.125 mcg (125 unit), 500 mg-10 mcg (400 unit), 500 mg-15 mcg (600 unit), 500 mg-3.125 mcg (125 unit), 600 mg-10 mcg (400 unit), 600 mg-20 mcg (800 unit), 600 mg-5 mcg (200 unit)	Generic	OTC
calcium carbonate-vitamin d3 oral tablet,chewable 500 mg-10 mcg (400 unit)	Generic	OTC
calcium citrate + d	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
calcium citrate oral tablet	Generic	OTC
calcium citrate-vitamin d3 oral tablet 315 mg-5 mcg (200 unit), 315 mg-6.25 mcg (250 unit)	Generic	OTC
calcium-d3-zinc-copper-mangan	Generic	OTC
calcium-magnesium-zinc oral tablet 333-133-5 mg	Generic	OTC
cal-gest antacid	Generic	OTC
effer-k oral tablet, effervescent 25 meq	Generic	
flavor chews antacid	Generic	OTC
klor-con	Generic	
klor-con 10	Generic	
klor-con 8	Generic	
klor-con m10	Generic	
klor-con m20	Generic	
mag 64	Generic	OTC
mag-g	Generic	OTC
magnesium gluconate oral tablet 27 mg magnesium (500 mg)	Generic	OTC
magnesium oral tablet 200 mg	Generic	OTC
magnesium oxide oral capsule 500 mg	Generic	OTC
magnesium oxide oral tablet 250 mg magnesium, 400 mg (241.3 mg magnesium), 400 mg magnesium, 420 mg, 500 mg magnesium	Generic	OTC
mgo	Generic	OTC
MOI-STIR	Brand	OTC
oysco 500/d	Generic	OTC
oyster shell + d3	Generic	OTC
oyster shell calcium 500	Generic	OTC
oyster shell calcium-vit d3	Generic	OTC
phosphorous	Generic	OTC
phospho-trin 250 neutral	Generic	OTC
potassium chloride oral capsule, extended release	Generic	
potassium chloride oral liquid	Generic	
potassium chloride oral packet 20 meq	Generic	
potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq	Generic	

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

Drug Name	Drug Tier	Requirements / Limits
potassium chloride oral tablet,er particles/crystals 10 meq, 20 meq	Generic	
smooth antacid	Generic	OTC
tums ultra oral tablet,chewable 400 mg calcium (1,000 mg)	Generic	OTC
ultra strength antacid	Generic	OTC
MISCELLANEOUS NUTRITION PRODUCTS		
co q-10 (with vit e)	Generic	OTC
coenzyme q10-vitamin e	Generic	OTC
ensure clear	Generic	OTC
ensure compact	Generic	OTC
fish oil extra strength	Generic	OTC
fish oil oral capsule 1,000 (120-180) mg, 120-180 mg, 300-1,000 mg, 360-1,200 mg	Generic	OTC
FISH OIL ORAL CAPSULE 900 MG-360 MG-455 MG-1,000 MG	Brand	OTC
fish oil oral capsule,delayed release(dr/ec) 300-1,000 mg	Generic	OTC
FISH OIL ORAL CAPSULE,DELAYED RELEASE(DR/EC) 900-1,400 MG	Brand	OTC
floranex	Generic	OTC
IMMUNE SUPPORT ORAL TABLET,CHEWABLE	Brand	OTC
lactobacillus acidophilus oral capsule 500 million cell	Generic	OTC
lactobacillus acidophilus oral tablet 0.5 mg (100 million cell)	Generic	OTC
LACTOBACILLUS ACIDOPH-L.BULGAR ORAL GRANULES IN PACKET	Brand	OTC
MELATONIN (WITH B6)	Brand	OTC
MELATONIN-PYRIDOXINE (VIT B6)	Brand	OTC
niacin flush free oral capsule 400 mg niacin (500 mg)	Generic	OTC
omega 3-dha-epa-fish oil oral capsule 1,000 (120-180) mg, 300-1,000 mg	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
OMEGA 3-DHA-EPA-FISH OIL ORAL CAPSULE 1,200 (144-216) MG, 200-300-1,000 MG, 300 MG (120 MG- 180MG)-1,000 MG, 60-90-500 MG	Brand	OTC
omega 3-dha-epa-fish oil oral capsule,delayed release(dr/ec) 300 mg (120 mg- 180mg)-1,000 mg, 300-1,000 mg, 450 mg (128 mg- 322 mg)-650 mg	Generic	OTC
omega-3 fatty acids-fish oil oral capsule 300-1,000 mg, 360-1,200 mg	Generic	OTC
OMEGA-3 FISH OIL	Brand	OTC
OMEGA-3S-DHA-EPA-FISH OIL ORAL CAPSULE 300-250-1,000 MG	Brand	OTC
OMEGA-3S-DHA-EPA-FISH OIL ORAL CAPSULE,DELAYED RELEASE(DR/EC) 1,000-1,400 MG, 300-1,000 MG, 980-253-647 MG	Brand	OTC
probiotic oral capsule 10 billion cell	Generic	OTC
prosource no carb oral liquid in packet	Generic	OTC
SALMON OIL-OMEGA-3 FATTY ACIDS	Brand	OTC
smart heart omega-3	Generic	OTC
ultra omega-3	Generic	OTC
VITAMINS / HEMATINICS		
50 PLUS ADULT EYE HEALTH	Brand	OTC
a thru z select oral tablet 500-300-250 mcg	Generic	OTC
ADULT 50 PLUS EYE HEALTH	Brand	OTC
ADULT MULTIVITAMIN GUMMIES ORAL TABLET,CHEWABLE 200 MCG	Brand	OTC
ADULT ONE DAILY GUMMIES	Brand	OTC
adults 50 plus	Generic	OTC
AIRBORNE (ASCORBIC ACID) ORAL TABLET,CHEWABLE	Brand	OTC
AIRSHIELD	Brand	OTC
ALIVE WOMEN 50 PLS ULT POTENCY	Brand	OTC
ALIVE WOMEN'S ENERGY	Brand	OTC
ALIVE WOMEN'S ULTRA POTENCY	Brand	OTC
animal chews	Generic	OTC
antioxidant a/c/e/selenium	Generic	OTC
ascorbate calcium (vitamin c)	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
ascorbic acid (vitamin c) oral capsule, extended release	Generic	OTC
ascorbic acid (vitamin c) oral tablet	Generic	OTC
ascorbic acid (vitamin c) oral tablet,chewable 500 mg	Generic	OTC
ascorbic acid-ascorbate sodium oral tablet,chewable 500 mg	Generic	OTC
b complex-vitamin c-folic acid oral tablet	Generic	OTC
B12	Brand	OTC
B-12 PLUS	Brand	OTC
BARIATRIC MULTIVITAMINS ORAL CAPSULE 45 MG IRON- 800 MCG-120 MCG	Brand	OTC
b-complex with vitamin c oral tablet	Generic	OTC
BIO-35, GLUTEN FREE	Brand	OTC
BIOCAL	Brand	OTC
biotin oral capsule 5 mg	Generic	OTC
biotin oral tablet 1 mg	Generic	OTC
BODY, HAIR, SKIN AND NAILS	Brand	OTC
c-1000 oral tablet	Generic	OTC
c-1000 with rose hips	Generic	OTC
c-500 oral tablet	Generic	OTC
CADEAU DHA	Brand	OTC
calcidol	Generic	OTC
calcium 600-d3 plus (mag-zinc)	Generic	OTC
calcium-vitamin d3-vitamin k oral tablet,chewable 500 mg-500 unit -40 mcg	Generic	OTC
CENTRUM MEN	Brand	OTC
CENTRUM SILVER MEN	Brand	OTC
CENTRUM SILVER ORAL TABLET	Brand	OTC
CENTRUM SILVER WOMEN	Brand	OTC
centrum women	Generic	OTC
cerovite jr	Generic	OTC
cerovite senior	Generic	OTC
certavite senior	Generic	OTC
certavite-antioxidant	Generic	OTC
children's chew multivitamin	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
children's chewable multivitmn	Generic	OTC
CHILDREN'S CHEWABLE VITAMIN	Brand	OTC
children's chewables	Generic	OTC
children's chewables extra c	Generic	OTC
children's multivitamin	Generic	OTC
CHILD'S OMEGA-3 DHA MULTIVITAM	Brand	OTC
cholecalciferol (vitamin d3) oral capsule 1,250 mcg (50,000 unit), 10 mcg (400 unit), 125 mcg (5,000 unit), 25 mcg (1,000 unit), 250 mcg (10,000 unit), 50 mcg (2,000 unit)	Generic	OTC
cholecalciferol (vitamin d3) oral drops 10 mcg/ml (400 unit/ml), 125 mcg/ml (5,000 unit/ml)	Generic	OTC
cholecalciferol (vitamin d3) oral tablet 10 mcg (400 unit), 125 mcg (5,000 unit), 25 mcg (1,000 unit), 50 mcg (2,000 unit)	Generic	OTC
cholecalciferol (vitamin d3) oral tablet,chewable 10 mcg (400 unit), 25 mcg (1,000 unit)	Generic	OTC
classic prenatal	Generic	OTC
cod liver oil oral capsule	Generic	OTC
complete mv adult 50 plus	Generic	OTC
completenate	Generic	OTC
CONCEPT DHA	Brand	
CONCEPT OB	Brand	
CULTURELLE KIDS PROBIOTIC-MV	Brand	OTC
cyanocobalamin (vitamin b-12) injection	Generic	
CYANOCOBALAMIN (VITAMIN B-12) ORAL CAPSULE	Brand	OTC
cyanocobalamin (vitamin b-12) oral tablet 1,000 mcg, 250 mcg, 500 mcg	Generic	OTC
CYANOCOBALAMIN (VITAMIN B-12) ORAL TABLET 2,500 MCG	Brand	OTC
cyanocobalamin (vitamin b-12) oral tablet extended release	Generic	OTC
CYANOCOBALAMIN (VITAMIN B-12) ORAL TABLET,CHEWABLE 2,500 MCG	Brand	OTC
CYANOCOBALAMIN (VITAMIN B-12) ORAL TABLET,DISINTEGRATING	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
cyanocobalamin (vitamin b-12) sublingual drops 3,000 mcg/ml	Generic	OTC
cyanocobalamin (vitamin b-12) sublingual lozenge 2,500 mcg	Generic	OTC
CYANOCOBALAMIN (VITAMIN B-12) SUBLINGUAL LOZENGE 3,000 MCG	Brand	OTC
cyanocobalamin (vitamin b-12) sublingual tablet 1,000 mcg, 2,500 mcg	Generic	OTC
CYANOCOBALAMIN (VITAMIN B-12) SUBLINGUAL TABLET 3,000 MCG, 5,000 MCG	Brand	OTC
CYANOCOBALAMIN-COBAMAMIDE	Brand	OTC
d3-2000	Generic	OTC
DAILY GUMMIES	Brand	OTC
DAILY MULTIVITAMIN	Brand	OTC
daily multi-vitamin	Generic	OTC
daily multivitamin with iron	Generic	OTC
daily value	Generic	OTC
daily vitamin formula-iron	Generic	OTC
daily vitamin formula-minerals	Generic	OTC
daily vitamin with iron	Generic	OTC
daily vites/iron	Generic	OTC
daily-vite	Generic	OTC
daily-vite (with folic acid)	Generic	OTC
DECUBI VITE	Brand	OTC
DEKAS PLUS (FOLIC ACID)	Brand	OTC
delta d3	Generic	OTC
dialyvite	Generic	OTC
dialyvite 800 oral tablet	Generic	OTC
DRY EYE FORMULA	Brand	OTC
d-vi-sol oral drops	Generic	OTC
e-400 c-500 and beta carotene	Generic	OTC
ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)	Generic	
ergocalciferol (vitamin d2) oral drops	Generic	OTC
essentia	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
eye health areds-2	Generic	OTC
ezfe 200	Generic	OTC
fe c plus	Generic	OTC
ferate	Generic	OTC
ferosul	Generic	OTC
ferretts	Generic	OTC
ferrex 150	Generic	OTC
ferrex 150 forte plus	Generic	OTC
ferrocite	Generic	OTC
ferro-time	Generic	OTC
ferrous fumarate oral tablet 324 mg (106 mg iron)	Generic	OTC
ferrous gluconate oral tablet 240 mg (27 mg iron), 324 mg (37.5 mg iron), 324 mg (38 mg iron)	Generic	OTC
ferrous sulfate oral drops	Generic	OTC
ferrous sulfate oral elixir	Generic	OTC
ferrous sulfate oral solution	Generic	OTC
ferrous sulfate oral tablet	Generic	OTC
ferrous sulfate oral tablet,delayed release (dr/ec)	Generic	OTC
FLINTSTONES COMPLETE	Brand	OTC
FLINTSTONES GUMMIES	Brand	OTC
FLINTSTONES GUMMIES OMEGA-3	Brand	OTC
FLINTSTONES MULTI-VIT GUMMIES	Brand	OTC
FLINTSTONES MULTIVITAMIN	Brand	OTC
FLINTSTONES PLUS CALCIUM	Brand	OTC
FLINTSTONES SOUR GUMMIES	Brand	OTC
FLINTSTONES TAB CHEW	Brand	OTC
FLINTSTONES/EXTRA C ORAL TABLET,CHEWABLE 100 MCG	Brand	OTC
FLORIVA PLUS	Brand	OTC
flotrex	Generic	OTC
fluoride (sodium) oral drops	Generic	OTC
fluoride (sodium) oral tablet,chewable	Generic	OTC
folbee	Generic	OTC
FOLIC ACID ORAL CAPSULE 20 MG, 5 MG	Brand	OTC
folic acid oral tablet	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
folitab	Generic	OTC
folivane-f	Generic	OTC
folplex 2.2	Generic	OTC
foltabs 800	Generic	OTC
gummi bear multivitamin	Generic	OTC
HAIR, SKIN AND NAILS ADVANCED	Brand	OTC
hair,skin and nails oral tablet	Generic	OTC
HAIR,SKIN AND NAILS(FA-BIOTIN) ORAL CAPSULE	Brand	OTC
HAIR-SKIN-NAIL(VIT A,C-BIOTIN)	Brand	OTC
HAIR-SKIN-NAILS (MV-FA-BIOTIN)	Brand	OTC
healthy eyes supervision	Generic	OTC
HEALTHY EYES SUPERVISION2	Brand	OTC
hematinic plus vit/minerals	Generic	OTC
hematinic/folic acid	Generic	OTC
HEMOCYTE-PLUS	Brand	OTC
high potency multivit (w-iron) oral tablet 18-400 mg-mcg	Generic	OTC
iferex 150	Generic	OTC
iferex 150 forte	Generic	OTC
iron (ferrous sulfate)	Generic	OTC
iron 100 plus	Generic	OTC
iron oral tablet	Generic	OTC
iron,carbonyl-vitamin c oral tablet 100-250 mg	Generic	OTC
K-PAX IMMUNE SUPPORT	Brand	OTC
liquid b-12	Generic	OTC
MACULAR HEALTH FORMULA	Brand	OTC
mega multi for women	Generic	OTC
mega multivitamin for men	Generic	OTC
MEN'S DAILY GUMMIES	Brand	OTC
MEN'S MULTIVITAMIN GUMMIES ORAL TABLET,CHEWABLE 200 MCG	Brand	OTC
multi complete with iron	Generic	OTC
MULTI FOR HER 50 PLUS ORAL CAPSULE	Brand	OTC
multi for her 50 plus oral tablet	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
MULTI FOR HER ORAL CAPSULE	Brand	OTC
multi for her oral tablet	Generic	OTC
multigen	Generic	OTC
multigen plus	Generic	OTC
multiple vitamin-minerals	Generic	OTC
multiple vitamins	Generic	OTC
multi-vit with fluoride-iron	Generic	OTC
multivit with min-folic acid oral tablet	Generic	OTC
multivitamin	Generic	OTC
multi-vitamin hp/minerals	Generic	OTC
multi-vitamin with fluoride	Generic	OTC
multivitamin with iron	Generic	OTC
multivitamin women 50 plus	Generic	OTC
multivit-fluoride (metafolin) oral tablet,chewable 0.5 mg fluoride	Generic	OTC
MULTIVIT-MIN-FOLIC ACID-LUTEIN	Brand	OTC
multivit-min-iron fum-folic ac	Generic	OTC
MVW COMPLETE FORMUL MULTIVIT	Brand	OTC
MVW COMPLETE FORMUL PEDIATRIC	Brand	OTC
MVW COMPLETE FORMULATION D3000 ORAL CAPSULE	Brand	OTC
MVW COMPLETE FORMULATION D5000 ORAL CAPSULE	Brand	OTC
NANO VM 1-3	Brand	OTC
NANO VM 4-8	Brand	OTC
NANOVM 9-18	Brand	OTC
NANOVM T-F	Brand	OTC
nephro vitamins	Generic	OTC
nephronex	Generic	OTC
obstetrix dha prenatal duo	Generic	OTC
OCUVITE ADULT 50 PLUS	Brand	OTC
OCUVITE EYE PLUS MULTI	Brand	OTC
OCUVITE LUTEIN AND ZEAXANTHIN	Brand	OTC
OCUVITE WITH LUTEIN	Brand	OTC
ONCOVITE	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
one daily	Generic	OTC
one daily essential oral tablet , 400 mcg	Generic	OTC
ONE DAILY ESSENTIAL ORAL TABLET 0.5 MG	Brand	OTC
one daily men's 50 plus memory	Generic	OTC
one daily multi-vit w-mineral	Generic	OTC
one daily multivitamin	Generic	OTC
ONE DAILY MULTIVITAMIN-IRON	Brand	OTC
one daily multivit-iron(folic)	Generic	OTC
ONE-A-DAY ENERGY	Brand	OTC
ONE-A-DAY KID'S	Brand	OTC
ONE-A-DAY MENOPAUSE FORMULA	Brand	OTC
ONE-A-DAY MEN'S 50 PLUS	Brand	OTC
ONE-A-DAY MEN'S 50PLUS(GINKGO)	Brand	OTC
ONE-A-DAY MEN'S COMPLETE	Brand	OTC
ONE-A-DAY MEN'S MULTIVITAMIN	Brand	OTC
ONE-A-DAY PROACTIVE 65 PLUS	Brand	OTC
one-a-day teen advantage	Generic	OTC
ONE-A-DAY VITACRAVES OMEGA-3	Brand	OTC
ONE-A-DAY WEIGHTSMART	Brand	OTC
ONE-A-DAY WOMEN'S 50 PLUS	Brand	OTC
ONE-A-DAY WOMEN'S ACTIVE	Brand	OTC
ONE-A-DAY WOMENS FORMULA	Brand	OTC
ONE-A-DAY WOMEN'S HEALTHY SKIN	Brand	OTC
ONE-A-DAY WOMEN'S PETITES	Brand	OTC
ONE-DAILY MULTI	Brand	OTC
PEDI MULTIVIT NO.194-IRON SULF	Brand	OTC
pedia d-vite oral drops	Generic	OTC
pedia iron oral drops	Generic	OTC
PEDIA POLY-VITE WITH IRON ORAL DROPS	Brand	OTC
PEDIA TRI-VITE	Brand	OTC
pediatric d-vite	Generic	OTC
PEDIATRIC MULTIVITAMIN NO.171	Brand	OTC
PHYTOMULTI	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
pnv-dha	Generic	
pnv-select	Generic	
poly-iron	Generic	OTC
poly-iron 150 forte	Generic	OTC
polysaccharide iron complex	Generic	OTC
POLY-VI-SOL ORAL DROPS	Brand	OTC
POLY-VITA DROPS	Brand	OTC
POLY-VITA WITH IRON	Brand	OTC
prenatal + dha oral combo pack 28 mg iron- 975 mcg-200 mg	Generic	OTC
PRENATAL + DHA ORAL COMBO PACK 28 MG IRON-800 MCG-200 MG	Brand	OTC
prenatal 19 oral tablet	Generic	OTC
prenatal complete	Generic	OTC
prenatal dha	Generic	OTC
PRENATAL FORMULA-DHA	Brand	OTC
PRENATAL MULTI	Brand	OTC
prenatal multi-dha (algal oil)	Generic	OTC
PRENATAL MULTIVITAMINS	Brand	OTC
prenatal one daily	Generic	OTC
prenatal oral tablet 28 mg iron- 800 mcg	Generic	OTC
PRENATAL ORAL TABLET 28-800 MG-MCG	Brand	OTC
prenatal vit no.179-iron-folic	Generic	OTC
prenatal vitamin oral tablet 27 mg iron- 0.8 mg	Generic	OTC
PRENATAL VITAMIN ORAL TABLET 27 MG IRON- 800 MCG	Brand	OTC
prenatal vitamin plus low iron	Generic	OTC
prenatal vit-iron fum-folic ac	Generic	OTC
PRESERVISION AREDS	Brand	OTC
PRESERVISION AREDS-2 ORAL CAPSULE	Brand	OTC
PRESERVISION LUTEIN	Brand	OTC
PRO-CAL	Brand	OTC
PROCERV HP	Brand	OTC
PRORENAL	Brand	OTC
PRORENAL QD	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
PROTECT CARDIO AF	Brand	OTC
PROTECT PLUS SO	Brand	OTC
purevit dualfe plus	Generic	OTC
purevita folic acid oral tablet	Generic	OTC
pyridoxine (vitamin b6) oral tablet 100 mg, 25 mg, 50 mg	Generic	OTC
renal caps	Generic	OTC
renal vitamin	Generic	OTC
renal-vite	Generic	OTC
RENAPLEX	Brand	OTC
RENAPLEX-D	Brand	OTC
rena-vite	Generic	OTC
rena-vite rx	Generic	OTC
reno caps	Generic	OTC
replesta	Generic	OTC
riboflavin (vitamin b2) oral tablet 100 mg	Generic	OTC
SCOOBY-DOO ONE A DAY KIDS	Brand	OTC
senior tabs	Generic	OTC
sentry	Generic	OTC
sentry senior	Generic	OTC
SIMILAC PRENATAL	Brand	OTC
slow release iron oral tablet extended release 143 mg (45 mg iron), 160 mg (50 mg iron)	Generic	OTC
soluvita a,c,d with fluoride	Generic	OTC
spectravite adult	Generic	OTC
spectravite adult 50 plus	Generic	OTC
SPECTRAVITE ADULT 50 PLUS(LUT)	Brand	OTC
spectravite men's	Generic	OTC
spectravite women	Generic	OTC
spectravite women 50 plus	Generic	OTC
stress formula	Generic	OTC
STUART ONE	Brand	OTC
super thera vite m	Generic	OTC
tab-a-vite	Generic	OTC
TAB-A-VITE MULTIVITAMIN W-IRON	Brand	OTC

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

Drug Name	Drug Tier	Requirements / Limits
taron forte	Generic	OTC
thera	Generic	OTC
THERAGRAN-M PREMIER 50 PLUS	Brand	OTC
thera-m (with vitamin k)	Generic	OTC
thera-m oral tablet 27-0.4 mg	Generic	OTC
THERAMILL FORTE	Brand	OTC
THERANATAL COMPLETE	Brand	OTC
therapeutic-m	Generic	OTC
thera-tabs	Generic	OTC
therems multivitamin	Generic	OTC
triphrocaps	Generic	OTC
tri-vitamin with fluoride	Generic	OTC
tri-vite with fluoride	Generic	OTC
v-c forte	Generic	OTC
VISION HEALTH	Brand	OTC
VISTA ADVANCED AREDS2	Brand	OTC
VISTA ADVANCED DRY EYE	Brand	OTC
VITABEX PLUS	Brand	OTC
vitajoy daily d	Generic	OTC
vitalee	Generic	OTC
vitamin a	Generic	OTC
vitamin b complex oral capsule	Generic	OTC
vitamin b complex oral tablet	Generic	OTC
vitamin b-12 oral tablet 1,000 mcg, 100 mcg, 50 mcg, 500 mcg	Generic	OTC
vitamin b-12 oral tablet extended release	Generic	OTC
vitamin b-12 sublingual tablet	Generic	OTC
vitamin b-2 oral tablet 100 mg	Generic	OTC
vitamin b-6 oral tablet 100 mg, 25 mg, 250 mg	Generic	OTC
vitamin c oral tablet 1,000 mg, 250 mg, 500 mg	Generic	OTC
vitamin c oral tablet,chewable 250 mg, 500 mg	Generic	OTC
vitamin c with rose hips oral tablet	Generic	OTC
vitamin c with rose hips oral tablet extended release 1,000 mg	Generic	OTC
vitamin d3 oral capsule	Generic	OTC

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

Drug Name	Drug Tier	Requirements / Limits
vitamin d3 oral tablet	Generic	OTC
vitamin d3 oral tablet,chewable 25 mcg (1,000 unit)	Generic	OTC
vitamins b complex	Generic	OTC
wescaps	Generic	OTC
westab one	Generic	OTC
WOMENS DAILY GUMMIES	Brand	OTC
WOMEN'S MULTIVITAMIN GUMMIES ORAL TABLET,CHEWABLE 200 MCG	Brand	OTC

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

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200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD).

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

If you are visually impaired and need large print or other assistance to view this document, please contact us at 1-855-687-6260.

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Sentara Health Plans

Alternative Language Options for Notices and other Written Information

Amharic:
ማሳሰቢያ፡
አማርኛ ቋንቋ የሚናገሩ ከሆነ፣ ከክፍያ ነጻ የሆነ የቋንቋ እገዛ አገልግሎት ይቀርብልዎታል። በዚህ ስልክ ይደውሉ 1-855-687-6260 (TTY: 711) ።

Arabic:
تنبيه: إذا كنت تتحدث باللغة العربية، فإنه تتوفر خدمات المساعدة اللغوية لك مجانًا. اتصل بالرقم 1-855-687-6260 (TTY: 711).

Bengali/Bangla:
লক্ষ্য করবেনঃ যদি আপনি বাংলা ভাষায় কথা বলেন, তাহলে বিনামূল্যে ভাষা সহায়ক পরিষেবাও পাবেন। ফোন করুন– 1-855-687-6260 (TTY: 711) ।

Chinese (Mandarin):
注意：如果您讲中文普通话，可以免费获得语言协助服务。请拨打电话 1-855-687-6260 (TTY: 711)。

French:
ATTENTION : Si vous parlez français, les services d'assistance linguistique sont à votre disposition sans aucun frais. Appelez le 1-855-687-6260 (TTY: 711).

German:
ACHTUNG: Wenn Sie deutsch sprechen, stehen Ihnen Sprachhilfsdienste kostenlos unter der Rufnummer 1-855-687-6260 (TTY: 711) zur Verfügung.

Gujarati:
ધ્યાન આપો : જો તમે ગુજરાતી બોલી છો તો ભાષા સહાયક સેવાઓ તમારા માટે વિના મૂલ્યે ઉપલબ્ધ છે. 1-855-687-6260 (TTY: 711) પર કૉલ કરો.

Hindi:
ध्यान दें: यदि आप हिंदी भाषा बोलते हैं, तो आपके लिए भाषा सहायता सेवाएं नि:शुल्क उपलब्ध हैं। 1-855-687-6260 (TTY: 711) पर कॉल करें।

Hmong:
CIM CIA: Yog tias koj hais lus Hmoob, kev pab cuam txais lus tau muaj rau koj ua tsis them nqi. Hu rau 1-855-687-6260 (TTY: 711).

Igbo:
GEE NT Ị: ọbụrụ na ị na-asụ Igbo, ị ga-enweta enyemaka n'efu site n'aka ndị ga-enyere gi aka inweta ya. Kpọọ 1-855-687-6260 (TTY: 711)

Japanese:
重要：日本語を話される場合、無料の言語支援サービスがご利用いただけます。1-855-687-6260 (TTY: 711) までお電話ください。

Korean:
주의: 한국어를 사용하실 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-855-687-6260 (TTY: 711) 번으로 전화해 주십시오.

Kru/Bassa:
YI LE: I bale u mpot Bassa, bot ba kobol mahop ngui nsaa wogui wo ba ye ha I nyuu hola we. Sebel: 1-855- 687-6260 (TTY: 711).

Laotian:
ເອົາໃຈໃສ່: ຖ້າທ່ານເວົ້າພາສາລາວ, ມີການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໃຫ້ນ້ໍາໃຊ້ໂດຍບໍ່ເສຍຄ່າ. ໂທ 1-855-687-6260 (TTY: 711).

Mon-Khmer, Cambodian:
កំណត់សំគាល់៖ ប្រសិនបើអ្នកនិយាយ ភាសាខ្មែរ, សេវាកម្មផ្នែកជំនួយការភាសា
មានសម្រាប់អ្នកដោយមិនគិតថ្លៃ។ ចូរហៅទូរស័ព្ទទៅកាន់ 1-855-687-6260 (TTY: 711) ។

Navajo:
SHOOH: Diné Bizaad bee yáníłti'go doo bą́ą́h ílínígóó t'áá nizaad k'ehjí níká a'doowołgo bee haz'á. Kojį' hólne' 1-855-687-6260 (TTY: 711).

Persian/Farsi:

توجه:

اگر به زبان فارسی صحبت می‌کنید، خدمات رایگان پشتیبانی زبان در دسترس شماست. با شماره 1-855-687-6260 (TTY: 711) تماس بگیرید.

Portuguese:
ATENÇÃO: Se você fala português, há serviços de assistência em idiomas disponíveis para você gratuitamente. Ligue para 1-855-687-6260 (TTY: 711).

Russian:
ВНИМАНИЕ! Если вы говорите на русском языке, позвоните по телефону 1-855-687-6260 (TTY: 711), и наша служба языковой поддержки окажет вам бесплатную помощь.

Spanish:
ATENCIÓN: Si habla español, existen servicios de asistencia de idiomas disponibles para usted sin cargo. Llame al 1-855-687-6260 (TTY: 711).

Tagalog:
PAUNAWA: Kung nagsasalita ka ng Tagalog, may maaari kang kuning mga libreng serbisyo ng tulong sa wika. Tumawag sa 1-855-687-6260 (TTY: 711).

Turkish:
DİKKAT: Eğer Türk konuşuyorsanız, dil asistanı servislerini ücretsiz olarak kullanabilirsiniz. 1-855-687-6260 (TTY: 711) numaralı telefonu arayın.

Urdu:

توجہ دیں:

اگر آپ اُردو زبان بولتے ہیں تو، زبان کی معاونتی خدمات، بغیر کسی خرچ کے، آپ کے لئے دستیاب ہیں۔ 1-855-687-6260 (TTY: 711) کال کریں۔

Vietnamese:
CHÚ Ý: Nếu quý vị nói Tiếng Việt, dịch vụ hỗ trợ ngôn ngữ miễn phí có sẵn dành cho quý vị. Hãy gọi 1-855-687-6260 (TTY: 711).

Yoruba:
KÉÉRE: Ti o bá ń sọ èdè Yorùbá, iṣẹ́ ìrànlọ́wọ́ èdè wà fún ọ lọ́fẹ̀ẹ́. Pe 1-855-687-6260 (TTY: 711)

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