



**KANSAS ACA MEMBER –  
INDIVIDUAL AND SMALL GROUP (2-50)**

**2023**

# PRESCRIPTION DRUG LIST

Please see the benefit schedule in your member certificate for member cost sharing associated with Generic and Brand (Preferred and Non Preferred) drugs.

## List of Abbreviations for Prescription Drugs

### Drug Category:

<b>CM</b>	Oral Chemo Drug
<b>IN</b>	Infertility Drug
<b>LCG</b>	Low Cost Generic Drug
<b>1</b>	Generic Drug
<b>2</b>	Generic and Preferred Brand Drugs
<b>3</b>	Non-Preferred Drug
<b>4</b>	Generic and Preferred Brand Specialty Drugs
<b>5</b>	Non-Preferred Specialty Drug
<b>PV</b>	Affordable Care Act. These preventative drugs may be covered at no cost (check your benefits to confirm).
<b>PV*</b>	Available at \$0 if Health Care Reform copay waiver is approved.
<b>PA</b>	Prior Authorization. The Plan requires you or your physician to get your prior authorization for certain drugs. This means that you will need to get approval before you fill your prescription. If you don't get approval, your plan may not cover the drug.
<b>ST</b>	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.
<b>QL</b>	Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

\*Your plan has tobacco use coverage through the Routine Preventive Care benefit. Tobacco use includes two tobacco cessation attempts per year (both prescription and over-the-counter medications) for a 90-day treatment regimen when prescribed by an in-network health care provider without prior authorization.

# Blue Cross and Blue Shield of Kansas City

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Drug Name	Drug Category	Limits/ Required
<b>Analgesics</b>		
<b>Nonsteroidal Anti-inflammatory Drugs</b>		
adult aspirin regimen	1	PV
aspirin adult low dose	1	PV
aspirin adult low strength	1	PV
aspirin childrens	1	PV
aspirin ec low dose	1	PV
aspirin ec low strength	1	PV
aspirin ec oral tablet delayed release 325 mg	1	PV
aspirin low dose	1	PV
aspirin oral tablet	1	PV
aspirin oral tablet delayed release	1	PV
BAYER ASPIRIN	3	PV
BAYER ASPIRIN EC LOW DOSE	3	PV
celecoxib oral	1	QL (2 EA per 1 day)
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium er	3	
diclofenac sodium external gel 1 %	1	QL (33.33 GM per 1 day)
diclofenac sodium external solution 1.5 %	1	PA
diclofenac sodium oral	1	
diclofenac-misoprostol	3	
diflunisal oral	3	
ec-naproxen	1	
etodolac	1	
etodolac er	1	
flurbiprofen oral	1	
genuine aspirin	1	PV
goodsense aspirin adults	1	PV

Drug Name	Drug Category	Limits/ Required
goodsense aspirin low dose	1	PV
ibuprofen oral suspension 100 mg/5ml	1	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	LCG	
indomethacin er	1	
indomethacin oral capsule 25 mg	LCG	
indomethacin oral capsule 50 mg	1	
ketoprofen oral	1	
ketorolac tromethamine injection	1	
ketorolac tromethamine intramuscular	1	
ketorolac tromethamine oral	1	QL (20 EA per 5 days)
mefenamic acid oral	3	
meloxicam oral tablet	LCG	
nabumetone oral	1	
naproxen oral tablet 250 mg	1	
naproxen oral tablet 375 mg, 500 mg	LCG	
naproxen oral tablet delayed release	1	
naproxen sodium oral tablet 275 mg, 550 mg	1	
oxaprozin	1	
piroxicam oral	1	
ST JOSEPH LOW DOSE	3	PV
sulindac oral	1	
<b>Opioid Analgesics, Long-acting</b>		
buprenorphine	3	PA; QL (0.15 EA per 1 day)
fentanyl transdermal patch 72 hour 100 mcg/hr, 75 mcg/hr	3	PA; QL (1 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
fentanyl transdermal patch 72 hour 12 mcg/hr	3	PA; QL (0.5 EA per 1 day)
fentanyl transdermal patch 72 hour 25 mcg/hr, 50 mcg/hr	1	PA; QL (0.5 EA per 1 day)
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	3	PA; QL (1 EA per 1 day)
hydromorphone hcl er	3	PA; QL (2 EA per 1 day)
methadone hcl intensol	1	
methadone hcl oral concentrate	1	
methadone hcl oral solution	1	
methadone hcl oral tablet	1	PA
mitigo	3	
morphine sulfate er oral tablet extended release 100 mg, 200 mg, 60 mg	3	PA; QL (3 EA per 1 day)
morphine sulfate er oral tablet extended release 15 mg, 30 mg	1	PA; QL (3 EA per 1 day)
NUCYNTA ER	3	PA; QL (2 EA per 1 day)
OXYCONTIN	2	PA; QL (4 EA per 1 day)
oxymorphone hcl er	3	PA; QL (4 EA per 1 day)
tramadol hcl er (biphasic)	3	PA; QL (1 EA per 1 day)
tramadol hcl er oral tablet extended release 24 hour	3	PA; QL (1 EA per 1 day)
XTAMPZA ER	2	PA; QL (4 EA per 1 day)
<b>Opioid Analgesics, Short-acting</b>		
acetaminophen-codeine #2	1	QL (13 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
acetaminophen-codeine #3	1	QL (13 EA per 1 day)
acetaminophen-codeine #4	1	QL (10 EA per 1 day)
acetaminophen-codeine oral solution	1	QL (166.5 ML per 1 day)
acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg	1	QL (13 EA per 1 day)
acetaminophen-codeine oral tablet 300-60 mg	1	QL (10 EA per 1 day)
apap-caff-dihydrocodeine	3	PA; QL (12 EA per 1 day)
ascomp-codeine	3	
bac	1	
butalbital-acetaminophen oral tablet 50-325 mg	1	
butalbital-apap-caff-cod	3	
butalbital-apap-caffeine oral tablet	1	
butalbital-asa-caff-codeine	3	
butalbital-aspirin-caffeine	1	
butorphanol tartrate injection	1	
butorphanol tartrate nasal	3	QL (2.5 ML per 1 fill)
codeine sulfate oral tablet 15 mg	1	QL (40 EA per 1 day)
codeine sulfate oral tablet 30 mg	1	QL (20 EA per 1 day)
codeine sulfate oral tablet 60 mg	1	QL (10 EA per 1 day)
DURAMORPH INJECTION SOLUTION 0.5 MG/ML	3	
endocet oral tablet 10-325 mg	1	QL (6 EA per 1 day)
endocet oral tablet 2.5-325 mg, 5-325 mg	1	QL (12 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
endocet oral tablet 7.5-325 mg	1	QL (8 EA per 1 day)
fentanyl citrate buccal lozenge on a handle	3	PA; QL (4 EA per 1 day)
hydrocodone-acetaminophen oral solution	1	QL (180 ML per 1 day)
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg	1	QL (9 EA per 1 day)
hydrocodone-acetaminophen oral tablet 5-300 mg	1	QL (13 EA per 1 day)
hydrocodone-acetaminophen oral tablet 5-325 mg, 7.5-300 mg, 7.5-325 mg	1	QL (12 EA per 1 day)
hydrocodone-ibuprofen oral tablet 10-200 mg	3	QL (9 EA per 1 day)
hydrocodone-ibuprofen oral tablet 5-200 mg	1	QL (16 EA per 1 day)
hydrocodone-ibuprofen oral tablet 7.5-200 mg	1	QL (12 EA per 1 day)
hydromorphone hcl injection solution 1 mg/ml, 2 mg/ml, 4 mg/ml	3	
hydromorphone hcl oral liquid	3	QL (22.5 ML per 1 day)
hydromorphone hcl oral tablet 2 mg	1	QL (11 EA per 1 day)
hydromorphone hcl oral tablet 4 mg	1	QL (5 EA per 1 day)
hydromorphone hcl oral tablet 8 mg	1	QL (2 EA per 1 day)
hydromorphone hcl pf	3	
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	1	QL (4.5 ML per 1 day)

Drug Name	Drug Category	Limits/ Required
morphine sulfate (pf) injection solution 0.5 mg/ml, 2 mg/ml, 4 mg/ml, 5 mg/ml	3	
morphine sulfate (pf) injection solution 10 mg/ml, 8 mg/ml	1	
morphine sulfate injection solution 2 mg/ml, 4 mg/ml	3	
morphine sulfate oral solution 10 mg/5ml	1	QL (45 ML per 1 day)
morphine sulfate oral solution 20 mg/5ml	1	QL (22.5 ML per 1 day)
morphine sulfate oral tablet 15 mg	1	QL (6 EA per 1 day)
morphine sulfate oral tablet 30 mg	1	QL (3 EA per 1 day)
NUCYNTA ORAL TABLET 100 MG, 75 MG	3	PA; QL (1 EA per 1 day)
NUCYNTA ORAL TABLET 50 MG	3	PA; QL (2 EA per 1 day)
oxycodone hcl oral capsule	1	QL (12 EA per 1 day)
oxycodone hcl oral solution	1	QL (60 ML per 1 day)
oxycodone hcl oral tablet 10 mg	1	QL (6 EA per 1 day)
oxycodone hcl oral tablet 15 mg	1	QL (4 EA per 1 day)
oxycodone hcl oral tablet 20 mg	1	QL (3 EA per 1 day)
oxycodone hcl oral tablet 30 mg	1	QL (2 EA per 1 day)
oxycodone hcl oral tablet 5 mg	1	QL (12 EA per 1 day)
oxycodone-acetaminophen oral tablet 10-325 mg	1	QL (6 EA per 1 day)
oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg	1	QL (12 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
oxycodone-acetaminophen oral tablet 7.5-325 mg	1	QL (8 EA per 1 day)
oxymorphone hcl oral tablet 10 mg	1	QL (1 EA per 1 day)
oxymorphone hcl oral tablet 5 mg	1	QL (3 EA per 1 day)
pentazocine-naloxone hcl	3	QL (10 EA per 1 day)
tramadol hcl oral tablet 50 mg	1	QL (8 EA per 1 day)
tramadol-acetaminophen	1	QL (8 EA per 1 day)
<b>Anesthetics</b>		
<b>Local Anesthetics</b>		
glydo	1	
lidocaine external ointment 5 %	1	
lidocaine external patch 5 %	1	
lidocaine hcl urethral/mucosal external prefilled syringe	1	
lidocaine viscous hcl	LCG	
lidocaine-prilocaine external cream	1	
<b>Anti-Addiction/Substance Abuse Treatment Agents</b>		
<b>Alcohol Deterrents/Anti-craving</b>		
acamprosate calcium	3	
disulfiram oral	3	
naltrexone hcl oral	1	
VIVITROL	5	
<b>Opioid Dependence Treatments</b>		
buprenorphine hcl sublingual tablet sublingual 2 mg	1	QL (12 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
buprenorphine hcl sublingual tablet sublingual 8 mg	1	QL (3 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 12-3 mg	3	QL (2 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg	3	QL (12 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 4-1 mg	3	QL (6 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 8-2 mg	3	QL (3 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg	1	QL (12 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg	1	QL (3 EA per 1 day)
<b>Opioid Reversal Agents</b>		
KLOXXADO	2	
naloxone hcl injection	1	
naloxone hcl nasal	1	
NARCAN	2	
<b>Smoking Cessation Agents</b>		
bupropion hcl er (smoking det)	1	PV; QL (180 EA per 365 days)
goodsense nicotine mouth/throat lozenge 4 mg	1	PV; QL (180 EA per 365 days)
habitrol	1	PV; QL (180 EA per 365 days)
NICORETTE MOUTH/THROAT GUM 2 MG	3	PV; QL (180 EA per 365 days)

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Drug Name	Drug Category	Limits/ Required
NICORETTE MOUTH/THROAT LOZENGE 4 MG	3	PV; QL (180 EA per 365 days)
nicotine polacrilex mini	1	PV; QL (180 EA per 365 days)
nicotine polacrilex mouth/throat	1	PV; QL (180 EA per 365 days)
nicotine step 1	1	PV; QL (180 EA per 365 days)
nicotine step 2	1	PV; QL (180 EA per 365 days)
nicotine step 3	1	PV; QL (180 EA per 365 days)
nicotine transdermal kit	1	PV; QL (180 EA per 365 days)
NICOTROL	3	ST; PV; QL (180 EA per 365 days)
NICOTROL NS	3	ST; PV; QL (180 ML per 365 days)
varenicline tartrate	1	PV; QL (180 EA per 365 days)
<b>Antibacterials</b>		
<b>Aminoglycosides</b>		
gentamicin sulfate external	1	
neomycin sulfate oral	LCG	
paromomycin sulfate oral	1	
streptomycin sulfate intramuscular	3	
<b>Antibacterials, Other</b>		
aztreonam	1	
clindamycin hcl oral	1	

Drug Name	Drug Category	Limits/ Required
clindamycin palmitate hcl	1	
clindamycin phosphate injection	1	
clindamycin phosphate vaginal	1	
iodine tincture external tincture 2 %	1	
linezolid oral suspension reconstituted	3	QL (32.2 ML per 1 day)
linezolid oral tablet	3	QL (28 EA per 30 days)
mafenide acetate external	1	
methenamine hippurate	3	
metronidazole oral tablet	LCG	
metronidazole vaginal	1	
mupirocin external	1	
nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg	1	
nitrofurantoin monohydrate macrocrystals	1	
polymyxin b sulfate injection	1	
silver sulfadiazine external	1	
ssd	1	
trimethoprim oral	LCG	
vancomycin hcl oral capsule 125 mg	3	QL (4 EA per 1 day)
vancomycin hcl oral capsule 250 mg	3	QL (8 EA per 1 day)
vancomycin hcl oral solution reconstituted	3	QL (40 ML per 1 day)
VANDAZOLE	1	
XEPI	3	
XIFAXAN	3	PA



Drug Name	Drug Category	Limits/ Required
<b>Beta-lactam, Cephalosporins</b>		
cefaclor	1	
cefadroxil oral capsule	1	
cefadroxil oral suspension reconstituted	3	
cefazolin sodium injection solution reconstituted 1 gm, 2 gm, 500 mg	1	
cefdinir	1	
cefepime hcl injection	3	
cefotaxime sodium	1	
cefotetan disodium	1	
cefopodoxime proxetil	3	
cefprozil	1	
ceftazidime injection	1	
ceftriaxone sodium injection	1	
cefuroxime axetil	1	
cephalexin oral capsule 250 mg, 500 mg	LCG	
cephalexin oral suspension reconstituted	1	
tazicef injection	1	
<b>Beta-lactam, Penicillins</b>		
amoxicillin	LCG	
amoxicillin-potassium clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml	1	
amoxicillin-potassium clavulanate oral suspension reconstituted 250-62.5 mg/5ml	3	

Drug Name	Drug Category	Limits/ Required
amoxicillin-potassium clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg	1	
amoxicillin-potassium clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg	1	
ampicillin	1	
ampicillin sodium injection	1	
ampicillin-sulbactam sodium injection	1	
BICILLIN L-A	3	
dicloxacillin sodium	LCG	
nafcillin sodium injection	1	
penicillin g potassium injection solution reconstituted 20000000 unit	1	
penicillin v potassium	LCG	
<b>Carbapenems</b>		
ertapenem sodium	3	
<b>Macrolides</b>		
azithromycin oral	LCG	
clarithromycin oral suspension reconstituted	3	
clarithromycin oral tablet	1	
DIFICID ORAL SUSPENSION RECONSTITUTED	3	
erythromycin base oral	3	
erythromycin ethylsuccinate oral	3	
erythromycin oral	3	
<b>Quinolones</b>		
BAXDELA ORAL	3	

Drug Name	Drug Category	Limits/ Required
CIPRO ORAL SUSPENSION RECONSTITUTED	3	
ciprofloxacin hcl oral tablet 250 mg, 500 mg	LCG	
ciprofloxacin hcl oral tablet 750 mg	1	
levofloxacin oral solution	3	
levofloxacin oral tablet	1	
moxifloxacin hcl oral	1	
ofloxacin oral	3	
<b>Sulfonamides</b>		
sulfadiazine oral	3	
sulfamethoxazole-trimethoprim oral	LCG	
sulfatrim pediatric	LCG	
<b>Tetracyclines</b>		
avidoxy	1	
demeclocycline hcl	3	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet 100 mg, 20 mg	1	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral suspension reconstituted	3	
doxycycline monohydrate oral tablet 100 mg, 50 mg, 75 mg	1	
minocycline hcl oral capsule	1	
mondoxyne nl	1	
tetracycline hcl oral	3	
<b>Anticonvulsants</b>		
<b>Anticonvulsants, Other</b>		
BRIVIACT ORAL	3	ST

Drug Name	Drug Category	Limits/ Required
EPIDIOLEX	5	PA
levetiracetam er	3	
levetiracetam oral	1	
roweepra	1	
<b>Calcium Channel Modifying Agents</b>		
CELONTIN	3	
ethosuximide oral capsule	1	
ethosuximide oral solution	3	
zonisamide oral	1	
<b>Gamma-aminobutyric Acid (GABA) Augmenting Agents</b>		
clobazam oral tablet	2	PA
DIACOMIT	5	PA
diazepam rectal	3	QL (2 EA per 1 fill)
gabapentin oral capsule	1	
gabapentin oral solution	1	
gabapentin oral tablet 600 mg, 800 mg	1	
NAYZILAM	3	
pentobarbital sodium injection	1	
phenobarbital oral	1	
phenobarbital sodium injection	1	
primidone oral	LCG	
tiagabine hcl	3	
valproic acid oral	LCG	
<b>Glutamate Reducing Agents</b>		
FYCOMPA	3	
lamotrigine er	3	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	

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Drug Name	Drug Category	Limits/ Required
lamotrigine oral tablet dispersible	3	
subvenite	1	
topiramate oral capsule sprinkle 15 mg	1	
topiramate oral capsule sprinkle 25 mg	3	
topiramate oral tablet	1	
<b>Sodium Channel Agents</b>		
carbamazepine er	3	
carbamazepine oral suspension	1	
carbamazepine oral tablet	LCG	
carbamazepine oral tablet chewable	1	
DILANTIN ORAL CAPSULE 30 MG	3	
epitol	LCG	
fosphenytoin sodium injection solution 500 mg pe/10ml	1	
lacosamide oral solution	1	
lacosamide oral tablet	3	
oxcarbazepine oral suspension	3	
oxcarbazepine oral tablet	1	
phenytoin infatabs	1	
phenytoin oral suspension 125 mg/5ml	1	
phenytoin oral tablet chewable	1	
phenytoin sodium extended oral capsule 100 mg	1	
phenytoin sodium extended oral capsule 200 mg, 300 mg	3	

Drug Name	Drug Category	Limits/ Required
phenytoin sodium injection	1	
rufinamide	3	PA
VIMPAT ORAL SOLUTION	3	
<b>Antidementia Agents</b>		
<b>Cholinesterase Inhibitors</b>		
donepezil hcl	1	
galantamine hydrobromide	1	
galantamine hydrobromide er	1	
rivastigmine	3	
rivastigmine tartrate	1	
<b>N-methyl-D-aspartate (NMDA) Receptor Antagonist</b>		
memantine hcl er	3	QL (1 EA per 1 day)
memantine hcl oral solution	3	
memantine hcl oral tablet	1	
<b>Antidepressants</b>		
<b>Antidepressants, Other</b>		
bupropion hcl er (sr)	1	QL (2 EA per 1 day)
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg	1	QL (3 EA per 1 day)
bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg	1	QL (1 EA per 1 day)
bupropion hcl oral	1	
chlordiazepoxide-amitriptyline	1	
mirtazapine oral tablet 15 mg, 30 mg, 45 mg	LCG	
perphenazine-amitriptyline	3	

Drug Name	Drug Category	Limits/ Required
<b>Monoamine Oxidase Inhibitors</b>		
EMSAM	3	ST; QL (1 EA per 1 day)
MARPLAN	3	
phenelzine sulfate oral	3	
tranylcypromine sulfate	3	
<b>SSRI/SNRI (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors)</b>		
citalopram hydrobromide oral tablet	LCG	
desvenlafaxine succinate er	3	QL (1 EA per 1 day)
duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg	1	QL (2 EA per 1 day)
duloxetine hcl oral capsule delayed release particles 30 mg	1	QL (3 EA per 1 day)
escitalopram oxalate oral tablet	1	
FETZIMA	3	ST; QL (1 EA per 1 day)
FETZIMA TITRATION	3	ST; QL (56 EA per 365 days)
fluoxetine hcl oral capsule	LCG	
fluvoxamine maleate	3	
fluvoxamine maleate er	3	QL (2 EA per 1 day)
paroxetine hcl oral tablet	LCG	
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
trazodone hcl oral tablet 100 mg, 150 mg, 50 mg	LCG	

Drug Name	Drug Category	Limits/ Required
TRINTELLIX	3	ST; QL (1 EA per 1 day)
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
VIIBRYD	3	PA; QL (1 EA per 1 day)
VIIBRYD STARTER PACK	3	PA; QL (30 EA per 1 fill)
vilazodone hcl	1	PA; QL (1 EA per 1 day)
<b>Tricyclics</b>		
amitriptyline hcl oral	3	
amoxapine	3	
clomipramine hcl oral	3	
desipramine hcl oral	3	
doxepin hcl oral capsule	3	
doxepin hcl oral concentrate	3	
imipramine hcl oral	1	
nortriptyline hcl oral capsule	LCG	
nortriptyline hcl oral solution	3	
trimipramine maleate oral	3	
<b>Antiemetics</b>		
<b>Antiemetics, Other</b>		
compro	3	
dimenhydrinate injection	1	
droperidol injection	1	
meclizine hcl oral tablet	LCG	
metoclopramide hcl injection	1	
metoclopramide hcl oral solution	LCG	
metoclopramide hcl oral tablet	LCG	

Drug Name	Drug Category	Limits/ Required
perphenazine oral	2	
prochlorperazine	3	
prochlorperazine maleate oral tablet 10 mg	LCG	
prochlorperazine maleate oral tablet 5 mg	1	
scopolamine	2	
<b>Emetogenic Therapy Adjuncts</b>		
ANZEMET	3	QL (0.07 EA per 1 day)
aprepitant oral capsule 125 mg	3	QL (2 EA per 30 days)
aprepitant oral capsule 40 mg	3	QL (1 EA per 30 days)
aprepitant oral capsule 80 mg	3	QL (4 EA per 30 days)
dronabinol	3	PA; QL (2 EA per 1 day)
granisetron hcl oral	1	QL (0.13 EA per 1 day)
ondansetron hcl injection	1	
ondansetron hcl oral solution	1	QL (4 ML per 1 day)
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ondansetron odt	1	
<b>Antifungals</b>		
ciclodan	1	
ciclopirox external	1	
ciclopirox olamine external	1	
clotrimazole external	LCG	
clotrimazole mouth/throat	1	
clotrimazole-betamethasone external cream	1	

Drug Name	Drug Category	Limits/ Required
clotrimazole-betamethasone external lotion	3	
econazole nitrate external	1	
ERTACZO	3	PA
fluconazole oral	LCG	
flucytosine oral	1	
griseofulvin microsize oral	3	
griseofulvin ultramicrosize	3	
GYNAZOLE-1	3	
itraconazole oral capsule	3	PA
ketoconazole external cream	1	
ketoconazole external shampoo	1	
ketoconazole oral	LCG	
LULICONAZOLE	3	PA
MENTAX	3	PA
miconazole 3	1	
nyamyc	1	
nystatin external cream	LCG	
nystatin external ointment	1	
nystatin external powder	1	
nystatin mouth/throat	1	
nystatin oral	3	
nystatin-triamcinolone	1	
nystop	1	
SULCONAZOLE NITRATE EXTERNAL CREAM	3	PA
terbinafine hcl oral	LCG	QL (84 EA per 180 days)
terconazole vaginal cream	1	
voriconazole oral tablet	3	PA

Drug Name	Drug Category	Limits/ Required
<b>Antigout Agents</b>		
allopurinol oral	LCG	
colchicine oral tablet	1	
colchicine-probenecid	2	
febuxostat	3	ST
probenecid	2	
<b>Antimigraine Agents</b>		
<b>Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonist</b>		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	2	PA; QL (0.04 ML per 1 day)
AIMOVIG	2	PA; QL (0.07 ML per 1 day)
AJOVY	2	PA; QL (0.06 ML per 1 day)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	2	PA; QL (0.1 ML per 1 day)
<b>Ergot Alkaloids</b>		
dihydroergotamine mesylate injection	3	PA; QL (0.86 ML per 1 day)
ergotamine-caffeine	3	PA; QL (0.86 EA per 1 day)
<b>Serotonin (5-HT) Receptor Agonists</b>		
almotriptan malate	3	QL (0.4 EA per 1 day)
eletriptan hydrobromide	3	QL (0.4 EA per 1 day)
naratriptan hcl	1	QL (0.3 EA per 1 day)
rizatriptan benzoate oral tablet 10 mg	1	QL (0.4 EA per 1 day)
rizatriptan benzoate oral tablet 5 mg	1	QL (0.6 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
rizatriptan benzoate oral tablet dispersible 10 mg	1	QL (0.4 EA per 1 day)
rizatriptan benzoate oral tablet dispersible 5 mg	1	QL (0.6 EA per 1 day)
sumatriptan nasal	3	QL (0.4 EA per 1 day)
sumatriptan succinate oral	1	QL (0.3 EA per 1 day)
sumatriptan succinate subcutaneous solution	1	QL (0.17 ML per 1 day)
sumatriptan succinate subcutaneous solution auto-injector	3	QL (0.17 ML per 1 day)
zolmitriptan oral tablet	1	QL (0.4 EA per 1 day)
zolmitriptan oral tablet dispersible	3	QL (0.4 EA per 1 day)
<b>Antimyasthenic Agents</b>		
<b>Parasympathomimetics</b>		
pyridostigmine bromide oral tablet	1	
<b>Antimycobacterials</b>		
<b>Antimycobacterials, Other</b>		
dapsone oral	3	
rifabutin	3	
<b>Antituberculars</b>		
cycloserine oral	1	
ethambutol hcl oral	3	
isoniazid injection	1	
isoniazid oral syrup	1	
isoniazid oral tablet 100 mg	1	
isoniazid oral tablet 300 mg	LCG	
PASER	3	
PRIFTIN	3	
pyrazinamide oral	1	

Drug Name	Drug Category	Limits/ Required
rifampin oral	2	
SIRTIURO	3	
TRECTOR	3	
<b>Antineoplastics</b>		
<b>Alkylating Agents</b>		
cyclophosphamide injection	4	
cyclophosphamide oral capsule	CM	
CYCLOPHOSPHAMID E ORAL TABLET	CM	
GLEOSTINE	CM	
LEUKERAN	CM	
MATULANE	CM	
melphalan	CM	
MYLERAN	CM	
temozolomide	CM	PA
<b>Antiandrogens</b>		
abiraterone acetate	CM	PA
bicalutamide	CM	
flutamide	CM	
ORGOVYX	CM	PA
XTANDI	CM	PA
<b>Antiangiogenic Agents</b>		
lenalidomide	CM	PA
POMALYST	CM	PA
REVLIMID ORAL CAPSULE 2.5 MG, 20 MG	CM	PA
THALOMID	CM	PA
<b>Antiestrogens/Modifiers</b>		
EMCYT	CM	
tamoxifen citrate oral tablet 10 mg	CM	
tamoxifen citrate oral tablet 20 mg	CM	PV*
toremifene citrate	CM	

Drug Name	Drug Category	Limits/ Required
<b>Antimetabolites</b>		
capecitabine	CM	PA
DROXIA	3	
hydroxyurea oral	CM	
mercaptopurine oral	CM	
<b>Antineoplastics, Other</b>		
AMELUZ	3	
diclofenac sodium external gel 3 %	1	ST; QL (10 GM per 1 day)
fluorouracil external cream 5 %	1	
fluorouracil external solution	1	
leucovorin calcium injection solution reconstituted	1	
leucovorin calcium oral	CM	
NINLARO	CM	PA
ONUREG	CM	PA
PIQRAY	CM	PA
ROZLYTREK	CM	PA
SYNRIBO	5	PA
ZOLINZA	CM	PA
<b>Aromatase Inhibitors, 3rd Generation</b>		
anastrozole oral	CM	PV*
exemestane	CM	PV*
letrozole oral	CM	
<b>Enzyme Inhibitors</b>		
etoposide oral	CM	
HYCAMTIN ORAL	CM	
RUBRACA	CM	PA
<b>Molecular Target Inhibitors</b>		
ALECENSA	CM	PA
BOSULIF	CM	PA
CABOMETYX	CM	PA
CAPRELSA ORAL TABLET 100 MG	CM	PA; QL (2 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
CAPRELSA ORAL TABLET 300 MG	CM	PA
COMETRIQ	CM	PA
COTELLIC	CM	PA
ERIVEDGE	CM	PA
erlotinib hcl oral tablet 100 mg, 150 mg	CM	PA
erlotinib hcl oral tablet 25 mg	CM	PA; QL (3 EA per 1 day)
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	CM	PA; QL (1 EA per 1 day)
everolimus oral tablet soluble	CM	PA
GILOTRIF	CM	PA; QL (1 EA per 1 day)
IBRANCE	CM	PA
ICLUSIG ORAL TABLET 10 MG, 15 MG	CM	PA; QL (1 EA per 1 day)
ICLUSIG ORAL TABLET 30 MG, 45 MG	CM	PA
imatinib mesylate	CM	PA
IMBRUVICA ORAL CAPSULE 140 MG	CM	PA; QL (3 EA per 1 day)
IMBRUVICA ORAL CAPSULE 70 MG	CM	PA; QL (1 EA per 1 day)
IMBRUVICA ORAL TABLET	CM	PA; QL (1 EA per 1 day)
INLYTA	CM	PA
JAKAFI ORAL TABLET 10 MG, 5 MG	CM	PA; QL (2 EA per 1 day)
JAKAFI ORAL TABLET 15 MG, 20 MG, 25 MG	CM	PA
KOSELUGO	CM	PA
lapatinib ditosylate	CM	PA

Drug Name	Drug Category	Limits/ Required
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	CM	PA
LYNPARZA	CM	PA
MEKINIST	CM	PA
NEXAVAR	CM	PA
QINLOCK	CM	PA
RETEVMO	CM	PA
RYDAPT	CM	PA
sorafenib tosylate	CM	PA
SPRYCEL	CM	PA
STIVARGA	CM	PA
sunitinib malate	CM	PA
TABRECTA	CM	PA
TAFINLAR	CM	PA
TAGRISSE ORAL TABLET 40 MG	CM	PA; QL (1 EA per 1 day)
TAGRISSE ORAL TABLET 80 MG	CM	PA
TASIGNA	CM	PA
TUKYSA	CM	PA
TURALIO	CM	PA
VENCLEXTA	CM	PA
VENCLEXTA STARTING PACK	CM	PA
VOTRIENT	CM	PA
XALKORI	CM	PA
ZELBORAF	CM	PA
ZYDELIG	CM	PA
ZYKADIA	CM	PA
<b>Monoclonal Antibody/Antibody-Drug Conjugate</b>		
RITUXAN HYCELA	5	PA
<b>Retinoids</b>		
bexarotene external	4	PA



Drug Name	Drug Category	Limits/ Required
bexarotene oral	CM	PA
TARGRETIN EXTERNAL	5	PA
tretinoin oral	CM	
<b>Treatment Adjuncts</b>		
MESNEX ORAL	CM	
<b>Antiparasitics</b>		
<b>Anthelmintics</b>		
albendazole oral	3	PA
EMVERM	2	
ivermectin external lotion	1	
ivermectin oral	3	PA; QL (20 EA per 1 fill)
praziquantel oral	3	
<b>Antiprotozoals</b>		
ALINIA ORAL SUSPENSION RECONSTITUTED	3	
atovaquone	3	
atovaquone-proguanil hcl oral tablet 250-100 mg	3	
atovaquone-proguanil hcl oral tablet 62.5-25 mg	1	
BENZNIDAZOLE	3	
chloroquine phosphate oral	3	
hydroxychloroquine sulfate oral tablet 100 mg, 300 mg, 400 mg	1	
hydroxychloroquine sulfate oral tablet 200 mg	LCG	
IMPAVIDO	3	
mefloquine hcl	1	
nitazoxanide oral	3	
primaquine phosphate	1	
pyrimethamine oral	4	PA

Drug Name	Drug Category	Limits/ Required
<b>Pediculicides/Scabicides</b>		
CROTAN	3	
lindane	3	
malathion	3	
permethrin external	1	
spinosad	3	
sulfurated lime	1	
<b>Antiparkinson Agents</b>		
<b>Anticholinergics</b>		
benztropine mesylate injection	1	
benztropine mesylate oral	LCG	
trihexyphenidyl hcl oral solution	1	
trihexyphenidyl hcl oral tablet 2 mg	LCG	
trihexyphenidyl hcl oral tablet 5 mg	1	
<b>Antiparkinson Agents, Other</b>		
amantadine hcl oral capsule	1	
amantadine hcl oral solution	1	
entacapone	3	
tolcapone	1	
<b>Dopamine Agonists</b>		
apomorphine hcl subcutaneous	4	PA; QL (3 ML per 1 day)
bromocriptine mesylate oral	3	
NEUPRO	3	ST
pramipexole dihydrochloride	1	
ropinirole hcl	1	
ropinirole hcl er	3	

Drug Name	Drug Category	Limits/ Required
<b>Dopamine Precursors/L-Amino Acid Decarboxylase Inhibitors</b>		
carbidopa oral	3	
carbidopa-levodopa	1	
carbidopa-levodopa er	1	
<b>Monoamine Oxidase B (MAO-B) Inhibitors</b>		
rasagiline mesylate oral	3	
selegiline hcl oral	1	
<b>Antipsychotics</b>		
<b>1st Generation/Typical</b>		
chlorpromazine hcl oral tablet	3	
fluphenazine hcl oral tablet	3	
haloperidol decanoate intramuscular	1	
haloperidol lactate	1	
haloperidol oral tablet 0.5 mg, 1 mg, 2 mg, 5 mg	LCG	
haloperidol oral tablet 10 mg, 20 mg	1	
loxapine succinate	3	
pimozide	3	
thioridazine hcl oral	1	
thiothixene	3	
trifluoperazine hcl	3	
<b>2nd Generation/Atypical</b>		
ABILIFY MAINTENA	3	
aripiprazole oral tablet	1	QL (1 EA per 1 day)
asenapine maleate	3	QL (2 EA per 1 day)
FANAPT	3	ST; QL (2 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
FANAPT TITRATION PACK	3	ST; QL (8 EA per 180 days)
INVEGA SUSTENNA	3	
INVEGA TRINZA	3	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	3	PA; QL (1 EA per 1 day)
LATUDA ORAL TABLET 80 MG	3	PA; QL (2 EA per 1 day)
olanzapine oral tablet	1	QL (1 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg	3	QL (1 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 6 mg	3	QL (2 EA per 1 day)
quetiapine fumarate er	1	QL (2 EA per 1 day)
quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	1	QL (3 EA per 1 day)
quetiapine fumarate oral tablet 300 mg, 400 mg	1	QL (2 EA per 1 day)
REXULTI	3	QL (1 EA per 1 day)
RISPERDAL CONSTA	3	
risperidone oral tablet	1	QL (2 EA per 1 day)
ziprasidone hcl	3	QL (2 EA per 1 day)
<b>Treatment-Resistant</b>		
clozapine oral tablet 100 mg, 25 mg	3	QL (9 EA per 1 day)
clozapine oral tablet 200 mg	3	QL (4 EA per 1 day)
clozapine oral tablet 50 mg	3	QL (6 EA per 1 day)
<b>Antivirals</b>		
LAGEVRIO	3	QL (8 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
PAXLOVID (150/100)	3	QL (4 EA per 1 day)
PAXLOVID (300/100)	3	QL (6 EA per 1 day)
<b>Anti-cytomegalovirus (CMV) Agents</b>		
valganciclovir hcl	3	
<b>Anti-hepatitis B (HBV) Agents</b>		
adefovir dipivoxil	3	
BARACLUDE ORAL SOLUTION	3	QL (21 ML per 1 day)
entecavir	1	QL (1 EA per 1 day)
EPIVIR HBV ORAL SOLUTION	3	
lamivudine oral tablet 100 mg	1	
<b>Anti-hepatitis C (HCV) Agents</b>		
EPCLUSA ORAL PACKET 150-37.5 MG	4	PA; QL (1 EA per 1 day)
EPCLUSA ORAL PACKET 200-50 MG	4	PA; QL (2 EA per 1 day)
EPCLUSA ORAL TABLET	4	PA; QL (1 EA per 1 day)
HARVONI ORAL PACKET 33.75-150 MG	4	PA; QL (1 EA per 1 day)
HARVONI ORAL PACKET 45-200 MG	4	PA; QL (2 EA per 1 day)
HARVONI ORAL TABLET 45-200 MG	4	PA; QL (2 EA per 1 day)
HARVONI ORAL TABLET 90-400 MG	4	PA; QL (1 EA per 1 day)
MAVYRET ORAL PACKET	4	PA; QL (5 EA per 1 day)
MAVYRET ORAL TABLET	4	PA; QL (3 EA per 1 day)
PEGASYS	4	PA
ribavirin oral	4	

Drug Name	Drug Category	Limits/ Required
ZEPATIER	5	PA; QL (1 EA per 1 day)
<b>Anti-hepatitis C (HCV) Agents, Other</b>		
INTRON A	5	PA
<b>Antitherpetic Agents</b>		
acyclovir external ointment	1	
acyclovir oral capsule	LCG	
acyclovir oral suspension	3	
acyclovir oral tablet	LCG	
famciclovir oral	1	
valacyclovir hcl oral	1	QL (4 EA per 1 day)
<b>Anti-HIV Agents, Integrase Inhibitors (INSTI)</b>		
BIKTARVY	3	QL (1 EA per 1 day)
DOVATO	2	QL (1 EA per 1 day)
ISENTRESS	2	
ISENTRESS HD	2	
JULUCA	2	QL (1 EA per 1 day)
TIVICAY	2	
TIVICAY PD	2	
<b>Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)</b>		
COMPLERA	3	QL (1 EA per 1 day)
EDURANT	3	
efavirenz	3	
efavirenz-emtricitab-tenofovir	3	QL (1 EA per 1 day)
efavirenz-lamivudine-tenofovir	3	QL (1 EA per 1 day)
etravirine	3	

Drug Name	Drug Category	Limits/ Required
INTELENCE ORAL TABLET 25 MG	3	
nevirapine	3	
nevirapine er	3	
PIFELTRO	3	
<b>Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)</b>		
abacavir sulfate oral solution	3	
abacavir sulfate oral tablet	1	
abacavir sulfate-lamivudine	3	QL (1 EA per 1 day)
CIMDUO	2	QL (1 EA per 1 day)
emtricitabine	3	
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	3	QL (1 EA per 1 day)
emtricitabine-tenofovir df oral tablet 200-300 mg	3	PV*; QL (1 EA per 1 day)
EMTRIVA ORAL SOLUTION	2	
lamivudine oral solution	3	
lamivudine oral tablet 150 mg, 300 mg	1	
lamivudine-zidovudine	3	QL (1 EA per 1 day)
ODEFSEY	3	QL (1 EA per 1 day)
tenofovir disoproxil fumarate	1	PV*
TRIUMEQ	2	QL (1 EA per 1 day)
VIREAD ORAL POWDER	2	
VIREAD ORAL TABLET 150 MG	3	

Drug Name	Drug Category	Limits/ Required
VIREAD ORAL TABLET 200 MG, 250 MG	2	
zidovudine	3	
<b>Anti-HIV Agents, Other</b>		
FUZEON	2	
maraviroc	1	PA
RUKOBIA	2	
SELZENTRY ORAL SOLUTION	2	PA
SELZENTRY ORAL TABLET 25 MG, 75 MG	2	PA
<b>Anti-HIV Agents, Protease Inhibitors</b>		
atazanavir sulfate	3	
EVOTAZ	2	QL (1 EA per 1 day)
fosamprenavir calcium	3	
lopinavir-ritonavir oral solution	3	
lopinavir-ritonavir oral tablet 100-25 mg	1	
lopinavir-ritonavir oral tablet 200-50 mg	3	
NORVIR ORAL PACKET	2	
NORVIR ORAL SOLUTION	2	
PREZCOBIX	2	QL (1 EA per 1 day)
PREZISTA	2	
REYATAZ ORAL PACKET	2	
ritonavir	3	
SYMTUZA	3	QL (1 EA per 1 day)
<b>Anti-influenza Agents</b>		
oseltamivir phosphate oral capsule 30 mg	3	QL (40 EA per 365 days)

Drug Name	Drug Category	Limits/ Required
oseltamivir phosphate oral capsule 45 mg, 75 mg	3	QL (20 EA per 365 days)
oseltamivir phosphate oral suspension reconstituted	3	QL (360 ML per 365 days)
RELENZA DISKHALER	3	QL (40 EA per 365 days)
rimantadine hcl	1	
<b>Anxiolytics</b>		
<b>Anxiolytics, Other</b>		
bupirone hcl oral tablet 10 mg, 5 mg	LCG	
bupirone hcl oral tablet 15 mg, 30 mg	1	
hydroxyzine hcl oral	LCG	
hydroxyzine pamoate oral capsule 100 mg	3	
hydroxyzine pamoate oral capsule 25 mg, 50 mg	LCG	
meprobamate	3	
<b>Benzodiazepines</b>		
alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg	2	QL (1 EA per 1 day)
alprazolam er oral tablet extended release 24 hour 2 mg	2	QL (5 EA per 1 day)
alprazolam er oral tablet extended release 24 hour 3 mg	2	QL (3 EA per 1 day)
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg	1	QL (4 EA per 1 day)
alprazolam oral tablet 2 mg	1	QL (5 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg	2	QL (1 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 2 mg	2	QL (5 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
alprazolam xr oral tablet extended release 24 hour 3 mg	2	QL (3 EA per 1 day)
chlordiazepoxide hcl oral capsule 10 mg	1	QL (30 EA per 1 day)
chlordiazepoxide hcl oral capsule 25 mg	1	QL (12 EA per 1 day)
chlordiazepoxide hcl oral capsule 5 mg	1	QL (4 EA per 1 day)
clonazepam oral tablet 0.5 mg, 1 mg	1	QL (3 EA per 1 day)
clonazepam oral tablet 2 mg	1	QL (10 EA per 1 day)
clorazepate dipotassium oral tablet 15 mg	3	QL (6 EA per 1 day)
clorazepate dipotassium oral tablet 3.75 mg	3	QL (24 EA per 1 day)
clorazepate dipotassium oral tablet 7.5 mg	3	QL (12 EA per 1 day)
diazepam intensol	2	
diazepam oral concentrate	2	
diazepam oral solution	2	
diazepam oral tablet	1	
lorazepam injection	1	
lorazepam intensol	3	QL (5 ML per 1 day)
lorazepam oral concentrate 2 mg/ml	3	QL (5 ML per 1 day)
lorazepam oral tablet 0.5 mg, 1 mg	1	QL (3 EA per 1 day)
lorazepam oral tablet 2 mg	1	QL (5 EA per 1 day)
oxazepam	3	QL (4 EA per 1 day)
<b>Bipolar Agents</b>		
<b>Mood Stabilizers</b>		
divalproex sodium er	1	

Drug Name	Drug Category	Limits/ Required
divalproex sodium oral capsule delayed release sprinkle	3	
divalproex sodium oral tablet delayed release	1	
lithium carbonate er	LCG	
lithium carbonate oral	LCG	
<b>Blood Glucose Monitoring</b>		
CEQR SIMPLICITY STARTER KIT	2	
CHEMSTRIP 10 MD	3	
CHEMSTRIP 10/SG	3	
CHEMSTRIP 2 GP	3	
CHEMSTRIP 5 OB	3	
CHEMSTRIP 7	3	
CHEMSTRIP 9	3	
CHEMSTRIP K	3	
CHEMSTRIP UGK	3	
CONTOUR MONITOR KIT W/DEVICE	2	
CONTOUR NEXT EZ KIT W/DEVICE	2	
CONTOUR NEXT GEN MONITOR	2	
CONTOUR NEXT LINK KIT W/DEVICE	2	
CONTOUR NEXT MONITOR KIT W/DEVICE	2	
CONTOUR NEXT TEST STRIPS	2	QL (10 EA per 1 day)
CONTOUR TEST STRIPS	2	QL (10 EA per 1 day)
CVS KETONE CARE	3	
KETO-DIASTIX	3	
KETONE TEST	3	
KETOSTIX	3	

Drug Name	Drug Category	Limits/ Required
<b>Blood Glucose Regulators</b>		
<b>Antidiabetic Agents</b>		
acarbose oral	3	
BYDUREON BCISE AUTOINJECTOR	2	ST; QL (0.15 ML per 1 day)
BYETTA 10 MCG PEN	2	ST; QL (0.08 ML per 1 day)
BYETTA 5 MCG PEN	2	ST; QL (0.04 ML per 1 day)
FARXIGA	2	ST
glimepiride	LCG	
glipizide er	LCG	
glipizide ir	LCG	
glipizide xl	LCG	
glipizide-metformin hcl	3	
glyburide micronized	LCG	
glyburide oral	LCG	
glyburide-metformin	3	
GLYXAMBI	2	ST
JANUMET	2	ST
JANUMET XR	2	ST
JANUVIA	2	ST
JARDIANCE	2	ST
JENTADUETO	2	ST
JENTADUETO XR	2	ST
metformin hcl er oral tablet extended release 24 hour 500 mg	LCG	
metformin hcl er oral tablet extended release 24 hour 750 mg	1	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	LCG	
nateglinide	3	
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	2	ST; QL (0.06 ML per 1 day)

Drug Name	Drug Category	Limits/ Required
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML, 8 MG/3ML	2	ST; QL (0.11 ML per 1 day)
pioglitazone hcl	1	
repaglinide	3	
RYBELSUS ORAL TABLET 14 MG, 7 MG	2	ST; QL (1 EA per 1 day)
RYBELSUS ORAL TABLET 3 MG	2	ST; QL (60 EA per 365 days)
SOLIQUA	2	ST; QL (0.6 ML per 1 day)
SYNJARDY	2	ST
SYNJARDY XR	2	ST
TRADJENTA	2	ST
TRULICITY	2	ST; QL (0.08 ML per 1 day)
VICTOZA	2	ST; QL (0.3 ML per 1 day)
XIGDUO XR	2	ST
XULTOPHY	2	ST; QL (0.5 ML per 1 day)
<b>Glycemic Agents</b>		
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	
diazoxide oral	1	
glucagon emergency kit	1	
GLUCAGON EMERGENCY KIT	2	
<b>Insulins</b>		
HUMALOG	2	
HUMALOG KWIKPEN	2	
HUMALOG MIX 50/50 KWIKPEN	2	
HUMALOG MIX 50/50 VIAL	2	
HUMALOG MIX 75/25 KWIKPEN	2	
HUMALOG MIX 75/25 VIAL	2	

Drug Name	Drug Category	Limits/ Required
HUMALOG U-100 JUNIOR KWIKPEN	2	
HUMULIN 70/30 KWIKPEN	2	
HUMULIN 70/30 VIAL	2	
HUMULIN N KWIKPEN	2	
HUMULIN N VIAL	2	
HUMULIN R U-500 KWIKPEN	2	
HUMULIN R U-500 VIAL	2	
HUMULIN R VIAL	2	
LANTUS SOLOSTAR	2	
LANTUS U-100 VIAL	2	
LEVEMIR U-100 FLEXTOUCH	3	PA
LEVEMIR U-100 VIAL	3	PA
TOUJEO MAX SOLOSTAR	2	
TOUJEO SOLOSTAR	2	
TRESIBA	3	PA
TRESIBA FLEXTOUCH	3	PA
<b>Blood Products and Modifiers</b>		
<b>Anticoagulants</b>		
dabigatran etexilate mesylate	1	QL (2 EA per 1 day)
ELIQUIS DVT/PE STARTER PACK	2	QL (148 EA per 365 days)
ELIQUIS ORAL TABLET 2.5 MG	2	QL (2 EA per 1 day)
ELIQUIS ORAL TABLET 5 MG	2	QL (3 EA per 1 day)
enoxaparin sodium	3	QL (35 ML per 180 days)
fondaparinux sodium	3	QL (35 ML per 180 days)
heparin sodium (porcine) injection solution prefilled syringe	1	

Last Updated 08/11/2022

Drug Name	Drug Category	Limits/ Required
heparin sodium (porcine) pf injection solution 5000 unit/ml	3	
jantoven	LCG	
PRADAXA	2	QL (2 EA per 1 day)
warfarin sodium oral	LCG	
XARELTO ORAL SUSPENSION RECONSTITUTED	2	QL (20 ML per 1 day)
XARELTO ORAL TABLET 10 MG, 20 MG	2	QL (1 EA per 1 day)
XARELTO ORAL TABLET 15 MG, 2.5 MG	2	QL (2 EA per 1 day)
XARELTO STARTER PACK	2	QL (102 EA per 365 days)
<b>Blood Formation Modifiers</b>		
anagrelide hcl	3	
ARANESP (ALBUMIN FREE)	4	PA
MOZOBIL	4	PA; QL (9.6 ML per 365 days)
NEULASTA	5	PA
NEULASTA ONPRO	5	PA
NIVESTYM	4	PA
PROMACTA	5	PA
PYRUKYND	5	PA; QL (2 EA per 1 day)
PYRUKYND TAPER PACK	5	PA; QL (1 EA per 1 day)
REBLOZYL	5	PA
RETACRIT	4	PA
<b>Hemostasis Agents</b>		
aminocaproic acid oral tablet	3	
HEMLIBRA	5	

Drug Name	Drug Category	Limits/ Required
<b>Platelet Modifying Agents</b>		
aspirin-dipyridamole er	3	
BRILINTA	2	
CABLIVI	5	PA; QL (1 EA per 1 day)
cilostazol	1	
clopidogrel bisulfate oral	1	
dipyridamole oral	2	
prasugrel hcl	3	
<b>Cardiovascular Agents</b>		
<b>Alpha-adrenergic Agonists</b>		
clonidine hcl oral tablet 0.1 mg, 0.2 mg	LCG	
clonidine hcl oral tablet 0.3 mg	1	
guanfacine hcl	LCG	
methyldopa	LCG	
midodrine hcl	1	
<b>Alpha-adrenergic Blocking Agents</b>		
doxazosin mesylate oral	LCG	
phenoxybenzamine hcl oral	3	PA
prazosin hcl oral	LCG	
<b>Angiotensin II Receptor Antagonists</b>		
irbesartan	1	
losartan potassium oral	LCG	
olmesartan medoxomil oral	1	
telmisartan oral tablet 20 mg	1	
telmisartan oral tablet 40 mg, 80 mg	2	
valsartan oral tablet	1	



Drug Name	Drug Category	Limits/ Required
<b>Angiotensin-converting Enzyme (ACE) Inhibitors</b>		
benazepril hcl oral	LCG	
enalapril maleate oral tablet	LCG	
fosinopril sodium	LCG	
lisinopril oral	LCG	
quinapril hcl	LCG	
ramipril	LCG	
trandolapril	LCG	
<b>Antiarrhythmics</b>		
amiodarone hcl oral tablet 200 mg	1	
disopyramide phosphate	3	
dofetilide	3	
flecainide acetate	1	
mexiletine hcl oral	3	
procainamide hcl injection solution 100 mg/ml	3	
propafenone hcl	1	
quinidine sulfate	1	
sorine oral tablet 120 mg, 160 mg, 240 mg	1	
sorine oral tablet 80 mg	LCG	
sotalol hcl (af)	1	
sotalol hcl oral tablet 120 mg, 160 mg, 240 mg	1	
sotalol hcl oral tablet 80 mg	LCG	
<b>Beta-adrenergic Blocking Agents</b>		
acebutolol hcl oral	2	
atenolol oral	LCG	
betaxolol hcl oral	1	
bisoprolol fumarate oral	LCG	
carvedilol	LCG	

Drug Name	Drug Category	Limits/ Required
labetalol hcl oral	1	
metoprolol succinate er	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	LCG	
nebivolol hcl	3	
pindolol	3	
propranolol hcl er	3	
propranolol hcl oral solution	1	
propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 80 mg	LCG	
propranolol hcl oral tablet 60 mg	1	
<b>Calcium Channel Blocking Agents</b>		
amlodipine besylate oral	LCG	
cartia xt	1	
diltiazem hcl er beads	1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	1	
diltiazem hcl er oral capsule extended release 24 hour	1	
diltiazem hcl oral	1	
dilt-xr	1	
felodipine er	1	
nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg	1	
nifedipine er oral tablet extended release 24 hour 90 mg	3	
nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg	1	

Drug Name	Drug Category	Limits/ Required
nifedipine er osmotic release oral tablet extended release 24 hour 90 mg	3	
nimodipine oral	3	
taztia xt	1	
tiadyt er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	1	
verapamil hcl er oral tablet extended release	1	
verapamil hcl oral tablet 120 mg, 80 mg	LCG	
verapamil hcl oral tablet 40 mg	1	
<b>Cardiovascular Agents, Other</b>		
amiloride-hydrochlorothiazide	LCG	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	3	
amlodipine-olmesartan	3	
atenolol-chlorthalidone	LCG	
bisoprolol-hydrochlorothiazide	LCG	
digitek	LCG	
digoxin oral solution	3	
digoxin oral tablet 125 mcg, 250 mcg	LCG	
enalapril-hydrochlorothiazide oral tablet 10-25 mg	1	
enalapril-hydrochlorothiazide oral tablet 5-12.5 mg	LCG	
ENTRESTO	2	QL (2 EA per 1 day)
epinephrine injection solution	1	

Drug Name	Drug Category	Limits/ Required
epinephrine pf	1	
irbesartan-hydrochlorothiazide	1	
lisinopril-hydrochlorothiazide	LCG	
losartan potassium-hctz	LCG	
metyrosine	1	PA; QL (16 EA per 1 day)
olmesartan medoxomil-hctz	1	
pentoxifylline er	1	
quinapril-hydrochlorothiazide	1	
ranolazine er	3	
spironolactone-hctz	LCG	
triamterene-hctz	LCG	
valsartan-hydrochlorothiazide	1	
VYNDAMAX	5	PA; QL (1 EA per 1 day)
<b>Diuretics, Carbonic Anhydrase Inhibitors</b>		
acetazolamide er	3	
acetazolamide oral	3	
<b>Diuretics, Loop</b>		
bumetanide oral	1	
ethacrynic acid	3	
furosemide injection	1	
furosemide oral solution 10 mg/ml	LCG	
furosemide oral solution 8 mg/ml	1	
furosemide oral tablet	LCG	
toremide	LCG	
<b>Diuretics, Potassium-sparing</b>		
amiloride hcl oral	1	
eplerenone	3	
spironolactone oral	LCG	

Drug Name	Drug Category	Limits/ Required
<b>Diuretics, Thiazide</b>		
chlorthalidone	LCG	
hydrochlorothiazide oral	LCG	
indapamide	LCG	
metolazone	3	
<b>Dyslipidemics, Fibric Acid Derivatives</b>		
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg	3	
fenofibrate micronized oral capsule 67 mg	1	
fenofibrate oral capsule 134 mg, 200 mg	3	
fenofibrate oral capsule 67 mg	1	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	1	
fenofibric acid oral capsule delayed release	3	
gemfibrozil oral	LCG	
<b>Dyslipidemics, HMG CoA Reductase Inhibitors</b>		
atorvastatin calcium oral tablet 10 mg, 20 mg	LCG	PV*
atorvastatin calcium oral tablet 40 mg, 80 mg	LCG	
fluvastatin sodium	3	
lovastatin oral	1	PV
pravastatin sodium	1	
rosuvastatin calcium	1	
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	LCG	PV*
simvastatin oral tablet 80 mg	LCG	

Drug Name	Drug Category	Limits/ Required
<b>Dyslipidemics, Other</b>		
cholestyramine light	3	
cholestyramine oral	3	
colesevelam hcl oral tablet	3	
colestipol hcl	3	
ezetimibe	1	
ezetimibe-simvastatin	3	
NEXLETOL	2	PA; QL (1 EA per 1 day)
NEXLIZET	2	PA; QL (1 EA per 1 day)
niacin er (antihyperlipidemic)	3	
omega-3-acid ethyl esters	3	
prevalite	3	
REPATHA	2	PA; QL (0.11 ML per 1 day)
REPATHA PUSHTRONEX SYSTEM	2	PA; QL (0.13 ML per 1 day)
REPATHA SURECLICK	2	PA; QL (0.11 ML per 1 day)
<b>Vasodilators, Direct-acting Arterial</b>		
hydralazine hcl oral	LCG	
minoxidil oral	1	
<b>Vasodilators, Direct-acting Arterial/Venous</b>		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	
isosorbide mononitrate	1	
isosorbide mononitrate er oral tablet extended release 24 hour 120 mg	1	
isosorbide mononitrate er oral tablet extended release 24 hour 30 mg, 60 mg	LCG	

Drug Name	Drug Category	Limits/ Required
nitroglycerin sublingual	1	
nitroglycerin transdermal	1	
nitroglycerin translingual	3	
RECTIV	3	
<b>Central Nervous System Agents</b>		
<b>Attention Deficit Hyperactivity Disorder Agents, Amphetamines</b>		
amphetamine sulfate	3	QL (6 EA per 1 day)
amphetamine-dextroamphetamine er	1	QL (2 EA per 1 day)
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg	1	QL (3 EA per 1 day)
amphetamine-dextroamphetamine oral tablet 30 mg	1	QL (2 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg	3	QL (6 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	3	QL (4 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	3	QL (3 EA per 1 day)
dextroamphetamine sulfate oral solution	3	QL (60 ML per 1 day)
dextroamphetamine sulfate oral tablet 10 mg	1	QL (6 EA per 1 day)
dextroamphetamine sulfate oral tablet 5 mg	1	QL (3 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
VYVANSE	2	QL (1 EA per 1 day)
<b>Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines</b>		
atomoxetine hcl	3	QL (1 EA per 1 day)
clonidine hcl er	1	
dexmethylphenidate hcl	1	QL (2 EA per 1 day)
dexmethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg	3	QL (1 EA per 1 day)
dexmethylphenidate hcl er oral capsule extended release 24 hour 20 mg	3	QL (2 EA per 1 day)
guanfacine hcl er	3	
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg	3	QL (1 EA per 1 day)
methylphenidate hcl er (osm) oral tablet extended release 36 mg	3	QL (2 EA per 1 day)
methylphenidate hcl er oral tablet extended release 10 mg	3	QL (2 EA per 1 day)
methylphenidate hcl er oral tablet extended release 20 mg	3	QL (3 EA per 1 day)
methylphenidate hcl oral solution 10 mg/5ml	3	QL (30 ML per 1 day)
methylphenidate hcl oral solution 5 mg/5ml	3	QL (60 ML per 1 day)
methylphenidate hcl oral tablet	1	QL (3 EA per 1 day)
methylphenidate hcl oral tablet chewable 10 mg	3	QL (6 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg	3	QL (3 EA per 1 day)
<b>Central Nervous System, Other</b>		
tetrabenazine	4	PA
<b>Fibromyalgia Agents</b>		
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 50 mg, 75 mg	1	QL (3 EA per 1 day)
pregabalin oral capsule 300 mg	1	QL (2 EA per 1 day)
pregabalin oral solution	3	QL (30 ML per 1 day)
SAVELLA	3	ST; QL (2 EA per 1 day)
SAVELLA TITRATION PACK	3	ST; QL (110 EA per 365 days)
<b>Multiple Sclerosis Agents</b>		
AVONEX PEN	4	PA; QL (0.04 EA per 1 day)
AVONEX PREFILLED	4	PA; QL (0.04 EA per 1 day)
BAFIERTAM	4	PA; QL (4 EA per 1 day)
BETASERON	4	PA; QL (0.5 EA per 1 day)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	4	PA; QL (1 ML per 1 day)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	4	PA; QL (0.43 ML per 1 day)
dalfampridine er	4	PA; QL (2 EA per 1 day)
dimethyl fumarate oral	4	PA; QL (2 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
dimethyl fumarate starter pack	4	PA; QL (120 EA per 365 days)
GILENYA	5	PA; QL (1 EA per 1 day)
glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml	4	PA; QL (1 ML per 1 day)
glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml	4	PA; QL (0.43 ML per 1 day)
glatopa subcutaneous solution prefilled syringe 20 mg/ml	4	PA; QL (1 ML per 1 day)
glatopa subcutaneous solution prefilled syringe 40 mg/ml	4	PA; QL (0.43 ML per 1 day)
MAYZENT ORAL TABLET 0.25 MG	5	PA; QL (4 EA per 1 day)
MAYZENT ORAL TABLET 1 MG, 2 MG	5	PA; QL (1 EA per 1 day)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 0.25 MG	5	PA; QL (14 EA per 365 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	5	PA; QL (24 EA per 365 days)
<b>Dental and Oral Agents</b>		
cavarest	1	
cevimeline hcl	3	
chlorhexidine gluconate mouth/throat	LCG	
DEBACTEROL	3	
easygel	1	
fluoridex daily renewal	1	
oralone	1	
periogard	LCG	

Drug Name	Drug Category	Limits/ Required
pilocarpine hcl oral tablet 5 mg	2	
pilocarpine hcl oral tablet 7.5 mg	3	
PREVIDENT MOUTH/THROAT	3	
sodium fluoride 5000 plus	1	
sodium fluoride 5000 ppm dental cream	1	
sodium fluoride 5000 ppm dental gel	1	
sodium fluoride dental	1	
sodium fluoride mouth/throat	1	
triamcinolone acetonide mouth/throat	1	
<b>Dermatological Agents</b>		
acutane	3	PA
acitretin	3	
adapalene external cream	3	PA
adapalene external gel 0.1 %	1	PA
adapalene external gel 0.3 %	3	PA
adapalene-benzoyl peroxide external gel 0.1-2.5 %	1	
adapalene-benzoyl peroxide external gel 0.3-2.5 %	3	
ammonium lactate external	1	
amnestem	3	PA
benzoyl peroxide-erythromycin	3	
calcipotriene external cream	3	
calcipotriene external ointment	3	

Drug Name	Drug Category	Limits/ Required
calcipotriene external solution	3	
calcitriol external	3	
CIBINQO	4	PA; QL (1 EA per 1 day)
claravis	3	PA
clindacin etz external swab	1	
clindacin-p	1	
clindamycin phos-benzoyl perox external gel 1.2-5 %	1	
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %	3	
clindamycin phosphate external gel	1	
clindamycin phosphate external lotion	3	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
coal tar external	1	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML	4	PA; QL (0.17 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML	4	PA; QL (0.29 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	4	PA; QL (0.05 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	4	PA; QL (0.17 ML per 1 day)

Drug Name	Drug Category	Limits/ Required
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	4	PA; QL (0.29 ML per 1 day)
ery	3	
erythromycin external	1	
imiquimod external cream 5 %	1	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	3	PA
lactic acid e	1	
lactic acid external	1	
metronidazole external cream	1	
metronidazole external gel 0.75 %	1	
myorisan	3	PA
neuac external gel	1	
pimecrolimus	3	ST; QL (2 GM per 1 day)
podofilox external	1	
REGRANEX	3	PA
rosadan external cream	1	
rosadan external gel	1	
SANTYL	3	QL (2 GM per 1 day)
selenium sulfide external lotion	1	
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	4	
STELARA SUBCUTANEOUS SOLUTION	4	PA; QL (0.009 ML per 1 day)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	4	PA; QL (0.009 ML per 1 day)

Drug Name	Drug Category	Limits/ Required
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	4	PA; QL (0.02 ML per 1 day)
sulfacetamide sodium (acne)	3	
tacrolimus external	3	QL (2 GM per 1 day)
TALTZ	5	PA
tazarotene external cream	3	PA
TREMFYA	4	PA
tretinoin external cream 0.025 %, 0.05 %	2	PA
tretinoin external cream 0.1 %	3	PA
tretinoin external gel 0.01 %, 0.025 %	3	PA
zenatane	3	PA
<b>Electrolytes/Minerals/ Metals/Vitamins</b>		
<b>Electrolyte/Mineral Replacement</b>		
carglumic acid	4	PA
corvita 150	1	
ferocon	1	
ferottrinsic	1	
ferrocite plus	1	
fluoritab	1	PV
foltrin	1	
hemocyte-f	1	
iodine strong oral	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
klor-con oral packet	3	
klor-con oral tablet extended release	1	
k-tan plus	1	

Drug Name	Drug Category	Limits/ Required
levocarnitine oral solution	1	
levocarnitine oral tablet	1	
levocarnitine sf	1	
nafrinse	1	PV
nafrinse drops	1	PV
polysaccharide iron forte	1	
potassium chloride cryser	1	
potassium chloride er	1	
potassium chloride oral packet	3	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	1	
potassium citrate er	2	
purevit dualfe plus	1	
se-tan plus	1	
sod citrate-citric acid	1	
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	1	PV
sodium fluoride oral tablet	1	PV
sodium fluoride oral tablet chewable	1	PV
trigels-f forte	1	
<b>Electrolyte/Mineral/Metal Modifiers</b>		
CHEMET	3	
deferasirox oral tablet soluble	3	PA
deferiprone	3	PA
sodium polystyrene sulfonate	1	
sps	3	
trientine hcl	4	PA
VELTASSA	3	

Drug Name	Drug Category	Limits/ Required
<b>Phosphate Binders</b>		
calcium acetate (phos binder)	1	
calcium acetate oral tablet 667 mg	1	
FOSRENOL ORAL PACKET	3	
PHOSLYRA	3	
sevelamer carbonate oral tablet	3	
VELPHORO	3	
<b>Vitamins</b>		
adc/f (0.5mg/ml)	1	
biocel	1	
bp vit 3	1	
b-plex	1	
b-plex plus	1	
cyanocobalamin injection solution 1000 mcg/ml	1	
ergocalciferol oral capsule	1	
fabb	1	
fa-vitamin b-6-vitamin b-12	1	
folate	1	PV
folbee plus	1	
folic acid oral tablet 1 mg	1	
folic acid oral tablet 400 mcg, 800 mcg	1	PV
folplex 2.2	1	
hydroxocobalamin acetate	1	
lysiplex plus oral tablet	1	
MASONATAL	3	PV
multi-vitamin/fluoride	1	
multivitamin/fluoride oral tablet chewable	1	
multi-vitamin/fluoride/iron	1	



Drug Name	Drug Category	Limits/ Required
NASCOBAL	3	
nephronex oral tablet	1	
nutrifac zx	1	
ONE VITE WOMENS	3	PV
ONE-A-DAY WOMENS PRENATAL 1	3	PV
phytonadione injection	1	
phytonadione oral	3	
prenatal multi +dha	1	PV
prenatal oral tablet 27-0.8 mg	1	PV
prenatal oral tablet 27-1 mg	LCG	
prenatal plus vitamin/mineral	LCG	
prenatal vitamin plus low iron	LCG	
prenatal/folic acid+dha	1	PV
pyridoxine hcl injection	1	
thiamine hcl injection	1	
triphrocaps	1	
tri-vite/fluoride	1	
v-c forte	1	
virt-caps	1	
virt-gard	1	
vita s forte	1	
vitacel	1	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
vitamin k1 injection	1	
vitamins acd-fluoride	1	
vp-vite rx	1	
wescaps	1	
westab mini	1	
yl folic acid	1	PV

Drug Name	Drug Category	Limits/ Required
<b>Gastrointestinal Agents</b>		
<b>Antispasmodics, Gastrointestinal</b>		
dicyclomine hcl oral capsule	LCG	
dicyclomine hcl oral solution	1	
dicyclomine hcl oral tablet	LCG	
glycopyrrolate injection solution 0.2 mg/ml, 0.4 mg/2ml	1	
glycopyrrolate oral solution	1	PA
glycopyrrolate oral tablet 1 mg, 2 mg	1	QL (4 EA per 1 day)
glycopyrrolate pf injection solution prefilled syringe 0.2 mg/ml	1	
hyoscyamine sulfate oral	1	
hyoscyamine sulfate sl	1	
hyoscyamine sulfate sublingual	1	
methscopolamine bromide oral	3	
<b>Gastrointestinal Agents, Other</b>		
alvimopan	1	
amoxicill-clarithro-lansopraz	3	
cromolyn sodium oral	3	
diphenoxylate-atropine oral tablet	1	
GATTEX	5	PA
loperamide hcl oral capsule	1	
MOTTEGRITY	3	ST; QL (1 EA per 1 day)
MOTOFEN	3	PA

Drug Name	Drug Category	Limits/ Required
OMECLAMOX-PAK	2	
PYLERA	2	
SYMPROIC	2	ST; QL (1 EA per 1 day)
ursodiol oral capsule 300 mg	3	
ursodiol oral tablet	3	
<b>Histamine2 (H2) Receptor Antagonists</b>		
cimetidine hcl	1	
cimetidine oral	1	
famotidine oral suspension reconstituted	3	
famotidine oral tablet 20 mg	LCG	
famotidine oral tablet 40 mg	1	
nizatidine	1	
<b>Irritable Bowel Syndrome Agents</b>		
alosetron hcl	3	PA
LINZESS	2	ST; QL (1 EA per 1 day)
<b>Laxatives</b>		
bisacodyl ec	1	PV; QL (2 fill per 365 days)
caspara sagrada oral fluid extract	1	
citroma	1	PV; QL (2 fill per 365 days)
clearlax	1	PV; QL (2 fill per 365 days)
CLENPIQ	3	
constulose	LCG	
enulose	1	
gavilax oral powder	1	PV; QL (2 fill per 365 days)
gavilyte-g	1	PV; QL (8000 ML per 365 days)

Drug Name	Drug Category	Limits/ Required
gavilyte-n with flavor pack	1	PV; QL (8000 ML per 365 days)
generlac	1	
gentle laxative oral	1	PV; QL (2 fill per 365 days)
gentlelax	1	PV; QL (2 fill per 365 days)
glycolax	1	PV; QL (2 fill per 365 days)
lactulose encephalopathy	1	
lactulose oral solution	LCG	
magnesium citrate oral solution	1	PV; QL (2 fill per 365 days)
mineral oil heavy oral	1	
mm clearlax	1	PV; QL (2 fill per 365 days)
NA SULFATE-K SULFATE-MG SULF	3	
peg 3350-kcl-na bicarb-nacl	1	PV; QL (8000 ML per 365 days)
peg-3350/electrolytes	1	PV; QL (8000 ML per 365 days)
peg-3350/electrolytes/ascorbic acid	1	
peg-kcl-nacl-nasulf-naasc-c	1	
PLENVU	3	ST
polyethylene glycol 3350 oral powder	1	PV; QL (2 fill per 365 days)
qc magnesium citrate	1	PV; QL (2 fill per 365 days)
SUPREP BOWEL PREP KIT	3	
<b>Protectants</b>		
misoprostol oral	1	
sucralfate oral tablet	LCG	

Drug Name	Drug Category	Limits/ Required
<b>Proton Pump Inhibitors</b>		
esomeprazole magnesium oral capsule delayed release 40 mg	1	
lansoprazole oral capsule delayed release	1	QL (1 EA per 1 day)
omeprazole oral capsule delayed release	LCG	QL (1 EA per 1 day)
pantoprazole sodium oral tablet delayed release	LCG	QL (1 EA per 1 day)
rabeprazole sodium oral tablet delayed release	2	QL (1 EA per 1 day)
<b>Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment</b>		
CERDELGA	5	PA
CHOLBAM	5	PA
CREON	2	
CYSTAGON	5	
EVRYSDI	5	PA; QL (8 ML per 1 day)
GALAFOLD	5	PA; QL (0.5 EA per 1 day)
miglustat	4	PA
MYALEPT	5	PA
nitisinone	4	PA
ORFADIN ORAL CAPSULE 20 MG	5	PA
ORFADIN ORAL SUSPENSION	5	PA
REVCovi	5	PA
sapropterin dihydrochloride	4	PA
sodium phenylbutyrate oral tablet	4	
STRENSIQ	4	PA

Drug Name	Drug Category	Limits/ Required
SUCRAID	5	
TEGSEDI	5	PA
ZENPEP	2	
<b>Genitourinary Agents</b>		
<b>Antispasmodics, Urinary</b>		
darifenacin hydrobromide er	3	
fesoterodine fumarate er	1	
flavoxate hcl	1	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
oxybutynin chloride er	1	
oxybutynin chloride oral	1	
solifenacin succinate	1	
tolterodine tartrate	2	
tolterodine tartrate er	2	
TOVIAZ	3	
tropium chloride	1	
tropium chloride er	3	
<b>Benign Prostatic Hypertrophy Agents</b>		
alfuzosin hcl er	1	
dutasteride oral	1	
finasteride oral tablet 5 mg	LCG	
silodosin	2	
tamsulosin hcl	LCG	
terazosin hcl	LCG	
<b>Genitourinary Agents, Other</b>		
bethanechol chloride oral	1	
ENCARE	3	PV
OPTIONS GYNOL II CONTRACEPTIVE	3	PV
penicillamine oral tablet	4	

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Drug Name	Drug Category	Limits/ Required
phenazo oral tablet 200 mg	LCG	
phenazopyridine hcl oral tablet 100 mg, 200 mg	LCG	
TODAY SPONGE	3	PV
VCF VAGINAL CONTRACEPTIVE VAGINAL FILM	3	PV
VCF VAGINAL CONTRACEPTIVE VAGINAL FOAM	3	PV
vcf vaginal contraceptive vaginal gel	1	PV
<b>Hormonal Agents, Stimulant/Replaceme nt/Modifying (Adrenal)</b>		
ala-cort external cream 1 %	1	
ala-cort external cream 2.5 %	LCG	
alclometasone dipropionate	1	
amcinonide external lotion	1	
betamethasone dipropionate aug external cream	1	
betamethasone dipropionate aug external gel	3	
betamethasone dipropionate aug external lotion	3	
betamethasone dipropionate aug external ointment	3	
betamethasone dipropionate external cream	1	

Drug Name	Drug Category	Limits/ Required
betamethasone dipropionate external lotion	1	
betamethasone dipropionate external ointment	3	
betamethasone valerate external cream	1	
betamethasone valerate external lotion	1	
betamethasone valerate external ointment	1	
clobetasol propionate external cream	3	
clobetasol propionate external gel	3	
clobetasol propionate external lotion	3	
clobetasol propionate external ointment	3	
clobetasol propionate external shampoo	3	
clobetasol propionate external solution	3	
clodan external shampoo	3	
DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	3	
desonide external cream	3	
desonide external lotion	3	
desonide external ointment	3	
desoximetasone external cream 0.25 %	1	
desoximetasone external gel	3	
desoximetasone external liquid	3	

Drug Name	Drug Category	Limits/ Required
desoximetasone external ointment 0.25 %	3	
dexamethasone intensol	LCG	
dexamethasone oral elixir	3	
dexamethasone oral solution	LCG	
dexamethasone oral tablet	LCG	
dexamethasone sod phosphate pf	1	
dexamethasone sodium phosphate injection	1	
diflorasone diacetate external cream	3	
fludrocortisone acetate oral	1	
fluocinolone acetonide body	1	
fluocinolone acetonide external cream	3	
fluocinolone acetonide external ointment	3	
fluocinolone acetonide external solution	1	
fluocinolone acetonide scalp	1	
fluocinonide emulsified base	3	
fluocinonide external	1	
flurandrenolide external cream	3	
fluticasone propionate external cream	1	
fluticasone propionate external ointment	1	
halcinonide	3	ST
halobetasol propionate external cream	3	

Drug Name	Drug Category	Limits/ Required
halobetasol propionate external ointment	3	
hydrocortisone butyrate external solution	1	
hydrocortisone external cream 1 %	1	
hydrocortisone external cream 2.5 %	LCG	
hydrocortisone external lotion 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
hydrocortisone oral	LCG	
hydrocortisone valerate external cream	1	
KENALOG INJECTION SUSPENSION 10 MG/ML	3	
KENALOG-80	3	
methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml	1	
methylprednisolone oral	LCG	
mometasone furoate external	1	
prednicarbate	1	
prednisolone oral	LCG	
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml	LCG	QL (16 ML per 1 day)
prednisone oral tablet	LCG	
prednisone oral tablet therapy pack	LCG	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 1000 MG	3	
triamcinolone acetonide external cream	LCG	

Drug Name	Drug Category	Limits/ Required
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.5 %	1	
triamcinolone acetonide external ointment 0.1 %	LCG	
triamcinolone acetonide injection suspension 40 mg/ml	1	
triderm	LCG	
<b>Hormonal Agents, Stimulant/Replaceme nt/Modifying (Pituitary)</b>		
cabergoline	1	
CHORIONIC GONADOTROPIN INTRAMUSCULAR	5	PA
desmopressin ace spray refrig	3	
desmopressin acetate oral	3	
desmopressin acetate spray	3	
FOLLISTIM AQ	IN	
GONAL-F	IN	
GONAL-F RFF	IN	
GONAL-F RFF REDIJECT	IN	
INCRELEX	4	PA
MENOPUR	IN	
NORDITROPIN FLEXPRO	4	PA
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 10000 UNIT	5	PA

Drug Name	Drug Category	Limits/ Required
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 5000 UNIT	IN	PA
NUTROPIN AQ NUSPIN 10	4	PA
NUTROPIN AQ NUSPIN 20	4	PA
NUTROPIN AQ NUSPIN 5	4	PA
OVIDREL	IN	
oxytocin injection	1	
PREGNYL	5	PA
<b>Selective Estrogen Receptor Modifying Agents</b>		
clomiphene citrate oral	IN	
<b>Hormonal Agents, Stimulant/Replaceme nt/Modifying (Prostaglandins)</b>		
mifepristone	1	
<b>Hormonal Agents, Stimulant/Replaceme nt/Modifying (Sex Hormones/Modifiers)</b>		
<b>Androgens</b>		
danazol oral	3	
INTRAROSA	3	ST
oxandrolone oral tablet 10 mg	1	PA; QL (2 EA per 1 day)
oxandrolone oral tablet 2.5 mg	1	PA; QL (8 EA per 1 day)
testosterone cypionate intramuscular	1	PA
testosterone enanthate intramuscular	1	PA

Drug Name	Drug Category	Limits/ Required
testosterone transdermal gel 1.62 %, 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	3	PA
testosterone transdermal solution	3	PA
<b>Estrogens</b>		
afirmelle	1	PV
altavera	1	PV
alyacen 1/35	1	PV
alyacen 7/7/7	1	PV
amabelz	1	
amethia	1	PV; QL (1 EA per 1 day)
amethyst	1	PV
ANNOVERA	3	PV; QL (1 EA per 350 days)
apri	1	PV
aranelle	1	PV
ashlyna	1	PV; QL (1 EA per 1 day)
aubra	1	PV
aubra eq	1	PV
aurovela 1.5/30	1	PV
aurovela 1/20	1	PV
aurovela 24 fe	1	PV
aurovela fe 1.5/30	1	PV
aurovela fe 1/20	1	PV
aviane	1	PV
ayuna	1	PV
azurette	1	PV
balziva	1	PV
BIJUVA	3	
blisovi 24 fe	1	PV
blisovi fe 1.5/30	1	PV

Drug Name	Drug Category	Limits/ Required
blisovi fe 1/20	1	PV
briellyn	1	PV
camrese	1	PV; QL (1 EA per 1 day)
camrese lo	1	PV; QL (1 EA per 1 day)
caziant	1	PV
charlotte 24 fe	1	PV
chateal	1	PV
chateal eq	1	PV
COMBIPATCH	3	
cryselle-28	1	PV
cyred	1	PV
cyred eq	1	PV
dasetta 1/35	1	PV
dasetta 7/7/7	1	PV
daysee	1	PV; QL (1 EA per 1 day)
delyla	1	PV
desogestrel-ethinyl estradiol	1	PV
DIVIGEL	3	
dolishale	1	PV
dotti	1	
drospiren-eth estrad-levomefol	1	PV
drospirenone-ethinyl estradiol	1	PV
elinest	1	PV
eluryng	1	PV
emoquette	1	PV
enpresse-28	1	PV
enskyce	1	PV
estarylla	1	PV
estradiol oral	LCG	
estradiol transdermal	1	
estradiol vaginal cream	1	
estradiol vaginal tablet	3	

Drug Name	Drug Category	Limits/ Required
estradiol-norethindrone acet	1	
ethynodiol diac-eth estradiol	1	PV
etonogestrel-ethinyl estradiol	1	PV
falmina	1	PV
fayosim	1	PV; QL (1 EA per 1 day)
femynor	1	PV
finzala	1	PV
fyavolv	2	
gemmily	1	PV
hailey 1.5/30	1	PV
hailey 24 fe	1	PV
hailey fe 1.5/30	1	PV
hailey fe 1/20	1	PV
iclevia	1	PV; QL (1 EA per 1 day)
introvale	1	PV; QL (1 EA per 1 day)
isibloom	1	PV
jaimiess	1	PV; QL (1 EA per 1 day)
jasmiel	1	PV
jinteli	2	
jolessa	1	PV; QL (1 EA per 1 day)
juleber	1	PV
junel 1.5/30	1	PV
junel 1/20	1	PV
junel fe 1.5/30	1	PV
junel fe 1/20	1	PV
junel fe 24	1	PV
kaitlib fe	1	PV
kalliga	1	PV
kariva	1	PV
kelnor 1/35	1	PV
kelnor 1/50	1	PV

Drug Name	Drug Category	Limits/ Required
kurvelo	1	PV
larin 1.5/30	1	PV
larin 1/20	1	PV
larin 24 fe	1	PV
larin fe 1.5/30	1	PV
larin fe 1/20	1	PV
larissia	1	PV
layolis fe	1	PV
leena	1	PV
lessina	1	PV
levonest	1	PV
levonorgest-eth est & eth est	1	PV; QL (1 EA per 1 day)
levonorgest-eth estrad 91-day	1	PV; QL (1 EA per 1 day)
levonorgestrel-ethinyl estrad	1	PV
levonorg-eth estrad triphasic	1	PV
levora 0.15/30 (28)	1	PV
lojaimiess	1	PV; QL (1 EA per 1 day)
loryna	1	PV
low-ogestrel	1	PV
lo-zumandimine	1	PV
lutera	1	PV
lyllana	1	
marlissa	1	PV
MENEST	2	
merzee	1	PV
microgestin 1.5/30	1	PV
microgestin 1/20	1	PV
microgestin 24 fe	1	PV
microgestin fe 1.5/30	1	PV
microgestin fe 1/20	1	PV
mili	1	PV
mimvey	1	
mono-linyah	1	PV
NATAZIA	2	PV

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Drug Name	Drug Category	Limits/ Required
necon 0.5/35 (28)	1	PV
nikki	1	PV
norethin ace-eth estrad-fe	1	PV
norethindrone acet-ethinyl est	1	PV
norethindrone-eth estradiol	2	
norethindron-ethinyl estrad-fe	1	PV
norethin-eth estradiol-fe	1	PV
norgestimate-eth estradiol	1	PV
norgestimate-ethinyl estradiol triphasic	1	PV
nortrel 0.5/35 (28)	1	PV
nortrel 1/35 (21)	1	PV
nortrel 1/35 (28)	1	PV
nortrel 7/7/7	1	PV
nylia 1/35	1	PV
nylia 7/7/7	1	PV
nymyo	1	PV
ocella	1	PV
philith	1	PV
pimtrea	1	PV
pirmella 1/35	1	PV
pirmella 7/7/7	1	PV
portia-28	1	PV
PREMARIN ORAL	2	
PREMARIN VAGINAL	2	
PREMPHASE	2	
PREMPRO	2	
reclipsen	1	PV
rivelsa	1	PV; QL (1 EA per 1 day)
setlakin	1	PV; QL (1 EA per 1 day)
simliya	1	PV
simpesse	1	PV; QL (1 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
sprintec 28	1	PV
sronyx	1	PV
syeda	1	PV
tarina 24 fe	1	PV
tarina fe 1/20	1	PV
tarina fe 1/20 eq	1	PV
taysofy	1	PV
tilia fe	1	PV
tri femynor	1	PV
tri-estarylla	1	PV
tri-legest fe	1	PV
tri-linyah	1	PV
tri-lo-estarylla	1	PV
tri-lo-marzia	1	PV
tri-lo-mili	1	PV
tri-lo-sprintec	1	PV
tri-mili	1	PV
tri-nymyo	1	PV
tri-sprintec	1	PV
trivora (28)	1	PV
tri-vylibra	1	PV
tri-vylibra lo	1	PV
tyblume	1	PV
tydemy	1	PV
velivet	1	PV
vestura	1	PV
vienva	1	PV
viorele	1	PV
volnea	1	PV
vyfemla	1	PV
vylibra	1	PV
wera	1	PV
wymzya fe	1	PV
xulane	1	PV
yuvaferm	3	
zafemy	1	PV
zovia 1/35 (28)	1	PV

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Drug Name	Drug Category	Limits/ Required
zumandimine	1	PV
<b>Progestins</b>		
aftera	1	PV
camila	1	PV
CRINONE VAGINAL GEL 8 %	IN	QL (0.6 GM per 1 day)
deblitane	1	PV
DEPO-SUBQ PROVERA 104	3	QL (0.02 ML per 1 day)
econtra ez	1	PV
econtra one-step	1	PV
ELLA	3	PV
ENDOMETRIN	IN	
errin	1	PV
heather	1	PV
hydroxyprogesterone caproate intramuscular oil	4	PA
incassia	1	PV
jencycla	1	PV
KYLEENA	3	PV
levonorgestrel	1	PV
LILETTA (52 MG)	3	PV
lyleq	1	PV
lyza	1	PV
MAKENA SUBCUTANEOUS	4	PA
medroxyprogesterone acetate intramuscular	1	PV; QL (0.02 ML per 1 day)
medroxyprogesterone acetate oral	LCG	
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml	CM	
megestrol acetate oral suspension 625 mg/5ml	3	
megestrol acetate oral tablet	CM	
MIRENA (52 MG)	3	PV
my choice	1	PV

Drug Name	Drug Category	Limits/ Required
my way	1	PV
new day	1	PV
NEXPLANON	3	PV
nora-be	1	PV
norethindrone acetate oral	1	
norethindrone oral	1	PV
norlyroc	1	PV
opcicon one-step	1	PV
option 2	1	PV
progesterone intramuscular	1	
progesterone oral	1	
react	1	PV
sharobel	1	PV
SKYLA	3	PV
take action	1	PV
<b>Selective Estrogen Receptor Modifying Agents</b>		
OSPHENA	3	
raloxifene hcl	1	PV*
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)</b>		
euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 88 mcg	LCG	
levo-t oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 88 mcg	LCG	
levo-t oral tablet 300 mcg	1	

Drug Name	Drug Category	Limits/ Required
levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 88 mcg	LCG	
levothyroxine sodium oral tablet 300 mcg	1	
levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 88 mcg	LCG	
liothyronine sodium oral	1	
np thyroid	1	
unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 88 mcg	LCG	
unithroid oral tablet 300 mcg	1	
<b>Hormonal Agents, Suppressant (Adrenal)</b>		
LYSODREN	CM	
<b>Hormonal Agents, Suppressant (Pituitary)</b>		
CETROTIDE	IN	
fyremadel	IN	
ganirelix acetate	IN	
leuprolide acetate injection	4	PA
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG	5	PA
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	4	PA

Drug Name	Drug Category	Limits/ Required
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG	5	PA
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	4	PA
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	4	PA
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	4	PA
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG	5	PA
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 15 MG, 7.5 MG	4	PA
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG (PED)	5	PA
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 30 MG (PED)	4	PA
octreotide acetate	4	PA
SIGNIFOR	5	PA; QL (2 ML per 1 day)
SOMATULINE DEPOT	5	PA
SOMAVERT	5	PA
<b>Hormonal Agents, Suppressant (Thyroid)</b>		
<b>Antithyroid Agents</b>		
methimazole oral	1	
propylthiouracil oral	2	

Drug Name	Drug Category	Limits/ Required
<b>Immunological Agents</b>		
<b>Angioedema Agents</b>		
icatibant acetate	4	PA; QL (0.6 ML per 1 day)
sajazir	4	PA; QL (0.6 ML per 1 day)
<b>Immune Suppressants</b>		
azathioprine oral tablet 100 mg	3	
azathioprine oral tablet 50 mg, 75 mg	1	
azathioprine sodium	1	
CIMZIA	4	PA
CIMZIA PREFILLED KIT	4	PA
CIMZIA STARTER KIT	4	PA
cyclosporine modified	1	
cyclosporine oral	1	
ENBREL	4	PA
ENBREL MINI	4	PA
ENBREL SURECLICK	4	PA
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	3	
gengraf	1	
HUMIRA	4	PA
HUMIRA PEDIATRIC CROHNS START	4	PA
HUMIRA PEN	4	PA
HUMIRA PEN-CD/UC/HS STARTER	4	PA
HUMIRA PEN-PEDIATRIC UC START	4	PA
HUMIRA PEN-PS/UV/ADOL HS START	4	PA
HUMIRA PEN-PSOR/UEIT STARTER	4	PA

Drug Name	Drug Category	Limits/ Required
KINERET	5	PA
methotrexate oral	CM	
methotrexate sodium (pf)	1	
methotrexate sodium injection	1	
methotrexate sodium oral	CM	
mycophenolate mofetil oral capsule	1	
mycophenolate mofetil oral suspension reconstituted	3	
mycophenolate mofetil oral tablet	1	
mycophenolate sodium	1	
ORENCIA CLICKJECT	5	PA
ORENCIA SUBCUTANEOUS	5	PA
SANDIMMUNE ORAL SOLUTION	2	
SIMPONI	4	PA
sirolimus oral	3	
SKYRIZI (150 MG DOSE)	4	PA
SKYRIZI PEN	4	PA; QL (84 day supply per 1 fill)
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL (84 day supply per 1 fill)
tacrolimus oral	1	
XELJANZ ORAL SOLUTION	4	PA
XELJANZ ORAL TABLET	4	PA; QL (2 EA per 1 day)
XELJANZ XR	4	PA; QL (1 EA per 1 day)
<b>Immunoglobulins</b>		
CUVITRU	5	PA
GAMASTAN	4	PA

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Drug Name	Drug Category	Limits/ Required
GAMMAGARD	5	PA
GAMMAKED	5	PA
GAMUNEX-C	5	PA
HEPAGAM B	5	
HIZENTRA	5	PA
HYPERHEP B	5	
HYPERRHO S/D	4	
HYQVIA	5	PA
MICRHOGAM ULTRA-FILTERED PLUS	4	
NABI-HB	5	
RHOGAM ULTRA-FILTERED PLUS	4	
RHOPHYLAC	4	
<b>Immunomodulators</b>		
ACTEMRA ACTPEN	5	PA
ACTEMRA SUBCUTANEOUS	5	PA
ACTIMMUNE	4	PA
BENLYSTA SUBCUTANEOUS	5	PA
ILARIS	4	PA; QL (0.08 ML per 1 day)
leflunomide oral	1	
OTEZLA	4	PA
RINVOQ	4	PA; QL (1 EA per 1 day)
SYNAGIS	4	PA
XOLAIR	4	PA
<b>Vaccines</b>		
ACTHIB	2	PV
ADACEL	2	PV
AFLURIA QUADRIVALENT	2	PV
BEXSERO	2	PV
BOOSTRIX	2	PV
COMIRNATY	2	PV
DAPTACEL	2	PV

Drug Name	Drug Category	Limits/ Required
DIPHTHERIA-TETANUS TOXOIDS DT	2	PV
ENGERIX-B	2	PV
FLUAD QUADRIVALENT	2	PV
FLUARIX QUADRIVALENT	2	PV
FLUBLOK QUADRIVALENT	2	PV
FLUCELVAX QUADRIVALENT	2	PV
FLULAVAL QUADRIVALENT	2	PV
FLUMIST QUADRIVALENT	2	PV
FLUZONE HIGH-DOSE QUADRIVALENT	2	PV
FLUZONE QUADRIVALENT	2	PV
GARDASIL 9	2	PV
HAVRIX	2	PV
HEPLISAV-B	2	PV
HIBERIX	2	PV
INFANRIX	2	PV
IPOL	2	PV
JANSSEN COVID-19 VACCINE	2	PV
KINRIX	2	PV
MENACTRA	2	PV
MENQUADFI	2	PV
MENVEO	2	PV
M-M-R II	2	PV
MODERNA COVID-19 VACCINE	2	PV
PEDIARIX	2	PV
PEDVAX HIB	2	PV
PENTACEL	2	PV
PFIZER COVID-19 VAC-TRIS 5-11Y	2	PV

Drug Name	Drug Category	Limits/ Required
PFIZER-BIONT COVID-19 VAC-TRIS	2	PV
PFIZER-BIONTECH COVID-19 VACC	2	PV
PNEUMOVAX 23	2	PV
PREHEVBRIO	2	PV
PREVNAR 13	2	PV
PREVNAR 20	2	PV
PROQUAD	2	PV
QUADRACEL	2	PV
RECOMBIVAX HB	2	PV
ROTARIX	2	PV
ROTATEQ	2	PV
SHINGRIX	2	PV
SPIKEVAX COVID-19 VACCINE	2	PV
TDVAX	2	PV
TENIVAC	2	PV
TETANUS-DIPHTHERIA TOXOIDS TD	2	PV
TRUMENBA	2	PV
TWINRIX	2	PV
VAQTA	2	PV
VARIVAX	2	PV
VAXELIS	2	PV
VAXNEUVANCE	2	PV
<b>Inflammatory Bowel Disease Agents</b>		
<b>Aminosalicylates</b>		
balsalazide disodium	3	
DIPENTUM	3	
mesalamine er oral capsule extended release 24 hour	3	
mesalamine oral capsule delayed release 400 mg	3	
mesalamine oral tablet delayed release 1.2 gm	3	

Drug Name	Drug Category	Limits/ Required
mesalamine rectal	3	
SFROWASA	3	
<b>Glucocorticoids</b>		
budesonide er	3	
budesonide oral	3	
CORTIFOAM	3	
hydrocortisone (perianal)	1	
hydrocortisone ace-pramoxine external cream 1-1 %	1	
hydrocortisone rectal	3	
procto-med hc	1	
procto-pak	1	
proctosol hc	1	
proctozone-hc	1	
<b>Sulfonamides</b>		
sulfasalazine oral	1	
<b>Metabolic Bone Disease Agents</b>		
alendronate sodium oral solution	1	
alendronate sodium oral tablet 10 mg, 5 mg	1	
alendronate sodium oral tablet 35 mg, 70 mg	LCG	QL (0.15 EA per 1 day)
calcitonin (salmon) injection	1	
calcitonin (salmon) nasal	1	QL (0.13 ML per 1 day)
calcitriol oral	1	
cinacalcet hcl	3	PA
ibandronate sodium oral	1	QL (0.04 EA per 1 day)
paricalcitol oral	1	
PROLIA	4	PA; QL (2 ML per 250 days)
risedronate sodium oral tablet 150 mg	3	QL (0.04 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
risedronate sodium oral tablet 30 mg	3	
risedronate sodium oral tablet 35 mg	1	QL (0.15 EA per 1 day)
risedronate sodium oral tablet 5 mg	1	
risedronate sodium oral tablet delayed release	3	QL (0.15 EA per 1 day)
TERIPARATIDE (RECOMBINANT)	4	PA
XGEVA	4	PA
<b>Miscellaneous Therapeutic Agents</b>		
AEROCHAMBER MINI CHAMBER	2	
AEROCHAMBER MV	2	
AEROCHAMBER PLUS FLO-VU	2	
AEROCHAMBER PLUS FLOW VU	2	
AEROCHAMBER W/FLOWSIGNAL	2	
ALCOHOL PREP PADS PAD , 70 %	3	
benzalkonium chloride external solution	1	
BOTOX	3	PA
BREATHE COMFORT CHAMBER/ADULT	2	
BREATHE COMFORT CHAMBER/CHILD	2	
BREATHE EASE LARGE	2	
BREATHE EASE MEDIUM	2	
BREATHE EASE SMALL	2	
CAYA	3	PV
CLEVER CHOICE HOLDING CHAMBER	2	
COMPACT SPACE CHAMBER	2	

Drug Name	Drug Category	Limits/ Required
COMPACT SPACE CHAMBER/LG MASK	2	
COMPACT SPACE CHAMBER/MED MASK	2	
COMPACT SPACE CHAMBER/SM MASK	2	
deferoxamine mesylate	1	
DROPLET MICRON	3	
DROPSAFE ALCOHOL PREP	3	
EASIVENT	2	
ergoloid mesylates oral	3	
FC2 FEMALE CONDOM	3	PV
FEMCAP	3	PV
FLEXICHAMBER	2	
FLEXICHAMBER ADULT MASK/SMALL	2	
FLEXICHAMBER CHILD MASK/LARGE	2	
FLEXICHAMBER CHILD MASK/SMALL	2	
INSPIREASE RESERVOIR BAGS	2	
INSULIN PEN NEEDLES 30G X 6 MM	3	
methergine	3	QL (28 EA per 1 fill)
methylergonovine maleate oral	3	QL (28 EA per 1 fill)
MICROCHAMBER	2	
OMNIPOD 5 G6 INTRO (GEN 5)	2	
OMNIPOD 5 G6 POD (GEN 5)	2	
OMNIPOD CLASSIC PDM (GEN 3)	2	
OMNIPOD CLASSIC PODS (GEN 3)	2	
OMNIPOD DASH INTRO (GEN 4)	2	

Drug Name	Drug Category	Limits/ Required
OMNIPOD DASH PDM (GEN 4)	2	
OMNIPOD DASH PODS (GEN 4)	2	
OPTICHAMBER DIAMOND	2	
OPTICHAMBER DIAMOND-LG MASK	2	
OPTICHAMBER DIAMOND-MD MASK	2	
OPTICHAMBER DIAMOND-SM MASK	2	
PANDA MASK LARGE	2	
PANDA MASK MEDIUM	2	
PANDA MASK SMALL	2	
PARAGARD INTRAUTERINE COPPER	3	PV
PEDIATRIC PANDA MASK	2	
POCKET SPACER	2	
PRO COMFORT SPACER ADULT	2	
PRO COMFORT SPACER CHILD	2	
PRO COMFORT SPACER INFANT	2	
PROCARE SPACER/ADULT MASK	2	
PROCARE SPACER/CHILD MASK	2	
VISTOGARD	3	
VORTEX VALVED HOLDING CHAMBER	2	
WIDE-SEAL DIAPHRAGM 60	3	PV
WIDE-SEAL DIAPHRAGM 65	3	PV
WIDE-SEAL DIAPHRAGM 70	3	PV

Drug Name	Drug Category	Limits/ Required
WIDE-SEAL DIAPHRAGM 75	3	PV
WIDE-SEAL DIAPHRAGM 80	3	PV
WIDE-SEAL DIAPHRAGM 85	3	PV
WIDE-SEAL DIAPHRAGM 90	3	PV
WIDE-SEAL DIAPHRAGM 95	3	PV
XIAFLEX	4	PA
ZOKINVY	5	PA; QL (4 EA per 1 day)
<b>Ophthalmic Agents</b>		
<b>Aminoglycosides</b>		
gentak	1	
gentamicin sulfate ophthalmic	1	
neomycin-polymyxin-gramicidin	1	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX ST	3	
tobramycin ophthalmic	LCG	
tobramycin-dexamethasone	1	
TOBREX	3	
<b>Antibacterials, Other</b>		
ak-poly-bac	1	
bacitracin ophthalmic	3	
bacitracin-polymyxin b ophthalmic	1	
bacitra-neomycin-polymyxin-hc	1	
neomycin-bacitracin zn-polymyx	1	
neomycin-polymyxin-dexameth ophthalmic ointment	LCG	



Drug Name	Drug Category	Limits/ Required
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	LCG	
neomycin-polymyxin-hc ophthalmic	1	
neo-polycin	1	
neo-polycin hc	1	
polycin	1	
polymyxin b-trimethoprim	LCG	
<b>Anti-cytomegalovirus (CMV) Agents</b>		
ZIRGAN	3	
<b>Antifungals</b>		
NATACYN	2	
<b>Antitherpetic Agents</b>		
trifluridine	3	
<b>Macrolides</b>		
AZASITE	3	
erythromycin ophthalmic	1	
<b>Ophthalmic Agents, Other</b>		
atropine sulfate ophthalmic ointment	1	
atropine sulfate ophthalmic solution 1 %	LCG	
cyclopentolate hcl ophthalmic	1	
cyclosporine ophthalmic	1	PA
CYSTADROPS	5	PA; QL (0.72 ML per 1 day)
CYSTARAN	5	PA; QL (2.15 ML per 1 day)
homatropaire	1	
PRED-G S.O.P.	3	
RESTASIS	2	PA
RESTASIS MULTIDOSE	2	PA

Drug Name	Drug Category	Limits/ Required
sulfacetamide-prednisolone	1	
XIIDRA	2	PA
ZYLET	3	
<b>Ophthalmic Anti-allergy Agents</b>		
ALOCRIAL	3	PA
ALOMIDE	3	
altafrin	1	
azelastine hcl ophthalmic	1	
cromolyn sodium ophthalmic	1	
epinastine hcl	3	
olopatadine hcl ophthalmic	1	
phenylephrine hcl ophthalmic	1	
ZERVIAE	3	ST
<b>Ophthalmic Antiglaucoma Agents</b>		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	2	
apraclonidine hcl	1	
betaxolol hcl ophthalmic	1	
BETIMOL	3	
brimonidine tartrate ophthalmic solution 0.2 %	1	
brimonidine tartrate-timolol	1	
brinzolamide	3	
carteolol hcl	1	
dorzolamide hcl ophthalmic	1	
dorzolamide hcl-timolol mal	1	
levobunolol hcl	1	

Drug Name	Drug Category	Limits/ Required
PHOSPHOLINE IODIDE	3	
pilocarpine hcl ophthalmic	1	
RHOPRESSA	3	QL (0.1 ML per 1 day)
ROCKLATAN	3	QL (0.1 ML per 1 day)
SIMBRINZA	2	
timolol maleate ophthalmic solution	LCG	
<b>Ophthalmic Anti-inflammatory</b>		
bromfenac sodium (once-daily)	3	QL (6.8 ML per 365 days)
dexamethasone sodium phosphate ophthalmic	1	
diclofenac sodium ophthalmic	1	
difluprednate	3	
FLAREX	3	
fluorometholone	1	
flurbiprofen sodium	1	
FML	2	
ketorolac tromethamine ophthalmic	1	
loteprednol etabonate ophthalmic suspension	3	
prednisolone acetate ophthalmic	1	
prednisolone sodium phosphate ophthalmic	1	
PROLENSA	2	QL (12 ML per 365 days)
<b>Ophthalmic Prostaglandin and Prostanoid Analogs</b>		
bimatoprost ophthalmic	3	QL (0.1 ML per 1 day)
latanoprost ophthalmic	1	

Drug Name	Drug Category	Limits/ Required
LUMIGAN	2	QL (0.1 ML per 1 day)
travoprost (bak free)	3	QL (0.12 ML per 1 day)
ZIOPTAN	3	QL (1 EA per 1 day)
<b>Quinolones</b>		
BESIVANCE	3	
ciprofloxacin hcl ophthalmic	1	
gatifloxacin ophthalmic	1	
levofloxacin ophthalmic	3	
moxifloxacin hcl (2x day)	3	
moxifloxacin hcl ophthalmic solution	1	
ofloxacin ophthalmic	1	
<b>Sulfonamides</b>		
sulfacetamide sodium ophthalmic	1	
<b>Otic Agents</b>		
acetic acid otic	1	
CIPRO HC	3	
ciprofloxacin hcl otic	3	ST
ciprofloxacin-dexamethasone	3	
CORTISPORIN-TC	3	
flac	1	
fluocinolone acetonide otic	1	
hydrocortisone-acetic acid	3	
neomycin-polymyxin-hc otic	3	
ofloxacin otic	1	

Drug Name	Drug Category	Limits/ Required
<b>Respiratory Tract/Pulmonary Agents</b>		
<b>Antihistamines</b>		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	1	QL (2 ML per 1 day)
carbinoxamine maleate oral solution	1	
carbinoxamine maleate oral tablet 4 mg	1	
cetirizine hcl oral solution 1 mg/ml	1	
clemastine fumarate oral tablet 2.68 mg	1	
cyproheptadine hcl oral	1	
desloratadine oral tablet	3	
diphenhydramine hcl injection	1	
levocetirizine dihydrochloride oral	1	
olopatadine hcl nasal	3	QL (1.02 GM per 1 day)
promethazine hcl oral solution	LCG	
promethazine hcl oral syrup	LCG	
promethazine hcl oral tablet 12.5 mg, 50 mg	1	
promethazine hcl oral tablet 25 mg	LCG	
promethazine hcl rectal	3	
promethegan rectal suppository 12.5 mg, 25 mg	3	
<b>Anti-inflammatories, Inhaled Corticosteroids</b>		
ADVAIR HFA	2	QL (0.4 GM per 1 day)
ARNUIITY ELLIPTA	2	QL (1 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
BREO ELLIPTA	2	QL (2 EA per 1 day)
budesonide inhalation	3	QL (4 ML per 1 day)
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/BLIST, 50 MCG/BLIST	2	QL (2 EA per 1 day)
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 250 MCG/BLIST	2	QL (8 EA per 1 day)
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	2	QL (0.8 GM per 1 day)
FLOVENT HFA INHALATION AEROSOL 44 MCG/ACT	2	QL (0.71 GM per 1 day)
flunisolide nasal	2	QL (0.84 ML per 1 day)
fluticasone propionate nasal	1	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	QL (2 EA per 1 day)
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	QL (0.04 EA per 1 day)
PULMICORT FLEXHALER	2	QL (0.07 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
QVAR REDHALER	2	QL (0.71 GM per 1 day)
SYMBICORT	2	QL (0.34 GM per 1 day)
wixela inhub	1	QL (2 EA per 1 day)
<b>Antileukotrienes</b>		
montelukast sodium oral tablet	LCG	
montelukast sodium oral tablet chewable	LCG	
zafirlukast	3	
zileuton er	3	ST
<b>Bronchodilators, Anticholinergic</b>		
ATROVENT HFA	3	QL (0.86 GM per 1 day)
ipratropium bromide inhalation	LCG	QL (10.42 ML per 1 day)
ipratropium bromide nasal	LCG	
SPIRIVA HANDIHALER	2	QL (1 EA per 1 day)
SPIRIVA RESPIMAT	2	QL (0.14 GM per 1 day)
<b>Bronchodilators, Sympathomimetic</b>		
albuterol sulfate hfa	1	QL (1.2 GM per 1 day)
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%	1	QL (18 ML per 1 day)
albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%	LCG	QL (5 ML per 1 day)
albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml	1	QL (12.5 ML per 1 day)
albuterol sulfate inhalation nebulization solution 2.5 mg/0.5ml	LCG	QL (5 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
arformoterol tartrate	3	QL (4 ML per 1 day)
epinephrine (anaphylaxis)	1	
epinephrine injection solution auto-injector	1	
formoterol fumarate inhalation	3	QL (4 ML per 1 day)
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml	3	QL (18 ML per 1 day)
levalbuterol hcl inhalation nebulization solution 1.25 mg/0.5ml	3	QL (3 EA per 1 day)
levalbuterol hcl inhalation nebulization solution 1.25 mg/3ml	3	QL (9 ML per 1 day)
SEREVENT DISKUS	2	QL (2 EA per 1 day)
STRIVERDI RESPIMAT	2	QL (0.14 GM per 1 day)
<b>Cystic Fibrosis Agents</b>		
KALYDECO ORAL TABLET	5	PA
ORKAMBI ORAL TABLET	5	PA; QL (112 EA per 28 days)
PULMOZYME	4	PA
tobramycin nebulization solution 300 mg/5ml inhalation	4	
<b>Phosphodiesterase Inhibitors, Airways Disease</b>		
DALIRESP ORAL TABLET 500 MCG	3	PA
theophylline er	3	
<b>Pulmonary Antihypertensives</b>		
ADEMPAS	4	PA; QL (3 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
alyq	4	PA; QL (2 EA per 1 day)
ambrisentan	4	PA; QL (1 EA per 1 day)
bosentan	4	PA; QL (2 EA per 1 day)
OPSUMIT	4	PA; QL (1 EA per 1 day)
sildenafil citrate oral suspension reconstituted	4	PA; QL (7.5 ML per 1 day)
sildenafil citrate oral tablet 20 mg	4	PA; QL (3 EA per 1 day)
tadalafil (pah)	4	PA; QL (2 EA per 1 day)
TRACLEER 32 MG	5	PA; QL (4 EA per 1 day)
treprostinil	4	PA
TYVASO	5	PA; QL (2.9 ML per 1 day)
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 112 X 32MCG & 112 X48MCG	5	PA; QL (8 EA per 1 day)
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG	5	PA; QL (4 EA per 1 day)
TYVASO DPI TITRATION KIT	5	PA; QL (2 EA per 365 days)
TYVASO REFILL	5	PA; QL (2.9 ML per 1 day)
TYVASO STARTER	5	PA; QL (2.9 ML per 1 day)
VENTAVIS	5	PA; QL (9 ML per 1 day)
<b>Pulmonary Fibrosis Agents</b>		
OFEV	5	PA

Drug Name	Drug Category	Limits/ Required
<b>Respiratory Tract Agents, Other</b>		
acetylcysteine inhalation	3	
ANORO ELLIPTA	2	QL (2 EA per 1 day)
benzonatate oral capsule 100 mg, 200 mg	LCG	
benzonatate oral capsule 150 mg	1	
BREZTRI AEROSPHERE	2	QL (0.36 GM per 1 day)
COMBIVENT RESPIMAT	2	QL (0.27 GM per 1 day)
hydrocodone bit-homatrop mbr oral solution	1	PA; QL (240 ML per 1 fill)
hydrocodone bit-homatrop mbr oral tablet	1	PA; QL (6 EA per 1 day)
hydromet	1	PA; QL (240 ML per 1 fill)
ipratropium-albuterol	1	QL (18 ML per 1 day)
mometasone furoate nasal	3	QL (1.14 GM per 1 day)
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; QL (0.11 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	4	PA; QL (0.11 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	4	PA; QL (0.02 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; QL (0.11 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
sodium chloride inhalation	1	
STIOLTO RESPIMAT	2	QL (0.14 GM per 1 day)
TRELEGY ELLIPTA	2	QL (2 EA per 1 day)
TUZISTRA XR	3	PA; QL (240 ML per 1 fill)
<b>Skeletal Muscle Relaxants</b>		
baclofen oral tablet 10 mg	LCG	
baclofen oral tablet 20 mg	1	
carisoprodol oral tablet 350 mg	1	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	LCG	
methocarbamol injection	1	
methocarbamol oral	LCG	
orphenadrine citrate er	1	QL (4 EA per 1 day)
orphenadrine-aspirin-caffeine	3	QL (4 EA per 1 day)
tizanidine hcl oral tablet	1	
<b>Sleep Disorder Agents</b>		
<b>GABA Receptor Modulators</b>		
eszopiclone	1	QL (1 EA per 1 day)
temazepam oral capsule 15 mg, 30 mg	1	QL (1 EA per 1 day)
zaleplon oral capsule 10 mg	1	QL (2 EA per 1 day)
zaleplon oral capsule 5 mg	1	QL (1 EA per 1 day)
zolpidem tartrate er	2	QL (1 EA per 1 day)
zolpidem tartrate oral	1	QL (1 EA per 1 day)

Drug Name	Drug Category	Limits/ Required
<b>Sleep Disorders, Other</b>		
BELSOMRA	3	ST; QL (1 EA per 1 day)
ramelteon	3	QL (1 EA per 1 day)
<b>Wakefulness Promoting Agents</b>		
armodafinil oral tablet 150 mg, 200 mg, 250 mg	3	PA; QL (1 EA per 1 day)
armodafinil oral tablet 50 mg	3	PA; QL (2 EA per 1 day)
modafinil	1	PA; QL (1 EA per 1 day)
SUNOSI	3	PA; QL (1 EA per 1 day)

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