CVS Caremark®
Value Formulary
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Value Formulary

INTRODUCTION

We are pleased to provide the 2026 **CVS Caremark Value Formulary** as a useful reference and informational tool. This document can assist practitioners in selecting clinically appropriate and cost-effective products for their patients.

The drugs represented have been reviewed by a National Pharmacy and Therapeutics (P&T) Committee and are approved for inclusion. The document is reflective of current medical practice as of the date of review.

The information contained in this document and its appendices is provided solely for the convenience of medical providers. We do not warrant or assure accuracy of such information nor is it intended to be comprehensive in nature. This document is not intended to be 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 the document is provided as a reference for drug therapy selection. Specific drug selection for an individual patient rests solely with the prescriber.

The document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands and mandatory generics whenever applicable.

We assume no responsibility for the actions or omissions of any medical provider based upon reliance, in whole or in part, on the information contained herein. The medical provider should consult the drug manufacturer's product literature or standard references for more detailed information.

PREFACE

The document is organized by sections. Each section is divided by therapeutic drug class primarily defined by mechanism of action. Drugs represented in this document may have varying cost to the plan member based on the plan's benefit structure. Some prescription benefit plan designs may alter coverage of certain products or vary copay amounts based on the condition being treated. Generic medications typically are available at the lower cost, brand-name medications on the document will generally cost more than generics. Generics should be considered the first line of prescribing subject to applicable rules.

PHARMACY AND THERAPEUTICS (P&T) COMMITTEE

The services of an independent National Pharmacy and Therapeutics Committee ("P&T Committee") are utilized to approve safe and clinically effective drug therapies. The P&T Committee is an external advisory body of clinical professionals from across the United States. The P&T Committee's voting members include physicians, pharmacists, a pharmacoeconomist and a medical ethicist, all of whom have a broad background of clinical and academic expertise regarding prescription drugs. Employees with significant clinical

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expertise are invited to meet with the P&T Committee, but no CVS Caremark employee may vote on issues before the P&T Committee. Voting members of the P&T Committee must disclose any financial relationship or conflicts of interest with any pharmaceutical manufacturers.

DRUG LIST PRODUCT DESCRIPTIONS

There are two ways to find your drug on this drug list:

1. Medical Conditions

The drugs on this drug list are grouped by the type of medical conditions they are used to treat. For example, drugs used to treat a heart condition are listed under Cardiovascular. If you know what your drug is used for, look for the category name in the list and then look under the category name for your drug.

2. Alphabetical Listing

If you are not sure what category to look under, look for your drug in the Index at the end of the drug list. The Index is an alphabetical list of all drugs in this document. Both brand-name drugs and generic drugs are in the Index.

- Look in the Index and find your drug.
- Next to your drug, see the page number where you can find the coverage information.
- Turn to the page listed in the Index and find the name of your drug in the first column of the list.

The first column of the chart lists the drug name. Brand-name drugs are capitalized (e.g., LIPITOR). Generic drugs are listed in the lower-case italics (e.g., *atorvastatin*).

The information in the Requirements/Limits column tells you if there are any special requirements for coverage of your drug. Their requirements and limits may include:

- **Prior Authorization**: Your plan needs you (or your doctor) to get prior approval or authorization for certain drugs. This means that you need to get approval from your plan before you fill your prescriptions.
- **Quantity Limits**: For certain drugs, your plan limits the amount of the drug that it will cover. Your plan may also limit the amount of drugs you may receive within a class of drugs. For example, for opioid-naïve members aged 19 or younger, certain drugs within the opioid class are limited to a three-day or less supply.
- **Step Therapy**: Your plan needs you to try certain drugs as the first step to treat your medical condition before covering another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, your plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, your plan will then cover Drug B. If you don't get approval, your plan may not cover the drug.

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LEGEND

Symbol	Name
AGE	Age Limit
OTC	Over the counter
PA	Prior Authorization
PA*	If Quantity Limit is exceeded, Prior Authorization may apply
PA**	If Step Therapy requirements are not met, Prior Authorization may apply
QL	Quantity Limit
SP	Drug subject to Specialty Guideline Management
ST	Step Therapy

GENERIC SUBSTITUTION

Generic substitution is a pharmacy action whereby a generic version is dispensed rather than a prescribed brand-name product. In most instances, a brand-name drug for which a generic product becomes available will become non-formulary, with the generic product covered in its place, upon release of the generic product to the market. However, the document is subject to state specific regulations and rules regarding generic substitution and mandatory generic rules apply where appropriate.

Generic drugs are usually priced lower than their brand-name equivalents. Prescription generic drugs are:

- Approved by the U.S. Food and Drug Administration for safety and effectiveness and are manufactured under the same strict standards that apply to brand-name drugs.
- Tested in humans to assure the generic is absorbed into the bloodstream in a similar rate and extent compared to the brand-name drug (bioequivalence). Generics may be different from the brand in size, color and inactive ingredients, but this does not alter their effectiveness or ability to be absorbed just like the brand-name drug.
- Manufactured in the same strength and dosage form as the brand-name drugs.

When a generic drug is substituted for a brand-name drug, you can expect the generic to produce the same clinical effect and safety profile as the brand-name drug (therapeutic equivalence).

SPECIALTY MEDICATIONS

A rapidly growing category of drugs, specialty medications are the result of continued advances in drug development technology and design. They are created to target and treat complex chronic or genetic medical conditions and include bioengineered proteins, blood-derived products and complex molecules.

Specialty Guideline Management (SGM)

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SGM is our utilization management program that helps ensure appropriate utilization for specialty medications based on currently accepted evidence-based medicine guidelines. SGM is designed to help ensure safety and efficacy while preventing off-guideline utilization. Medications which may be included in the SGM program are identified in the document as "SP" for your reference. For additional information, please refer to **CVSspecialty.com** or to submit a prior authorization, please call 1-866-814-5506.

PLAN DESIGN

Preferred brand-name medications are listed to help identify product that are clinically appropriate and cost-effective. Generics listed in therapeutic categories are for representational purposes only. Certain medications on the list are covered if utilization management criteria are met (i.e., Step Therapy, Prior Authorization, Quantity Limits, etc.); requests for use of such medications outside of their listed criteria will be reviewed for medical necessity. If a medication is not listed on the document, a formulary exception may be requested for coverage. Medical necessity or formulary exception requests will be reviewed based on drug-specific prior authorization criteria or standard non-formulary prescription request criteria.

Special note for opioid containing products: The quantity of opioid product prescribed (including those that are combined with acetaminophen, aspirin, or ibuprofen) will be limited to up to 90 morphine milligram equivalents (MME) per day based on a 30 day supply. Members who are opioid-naïve will be required to use an immediate-release (IR) formulation before moving to an extended-release (ER) formulation and will be subject to quantity limit restrictions.

Individual pharmacy benefit plans may impose restrictions or not reimburse some products. Your specific prescription benefit plan design may not cover certain medications, products, or categories, regardless of their appearance in this document. In addition, over-the-counter (OTC) products, with the exception of insulin and diabetes monitoring products, are usually not included in the pharmacy benefit. If covered in the pharmacy benefit, OTC products require a valid prescription.

Log in to **Caremark.com** to check coverage.

PREVENTIVE SERVICES

The U.S. Department of Health and Human Services (HHS) has adopted Guidelines for Preventive Services under the Affordable Care Act (ACA). Under the ACA, some pharmacy benefit plans may provide a range of preventive services for $0 member cost share. These items may include:

- Bowel Preparations for Colorectal Cancer Screening
- Fluoride Supplementation in Children
- Folic Acid Supplementation
- Tobacco Use Counseling and Cessation Intervention
- Immunizations

- Medications for Risk Reduction of Primary Breast Cancer
- Contraceptives
- Statin Use for the Primary Prevention of Cardiovascular Disease in Adults
- Antiretroviral therapy for preexposure prevention of human immunodeficiency virus (HIV) infection
- Diabetes Prevention Medicine for preventing or delaying diabetes for adults age 35 to 70 who have overweight or obesity

Items that may be covered as preventive services under this formulary will not be specifically noted since final coverage is determined by the plan sponsor.

NOTICE

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This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Caremark.

Please be advised that this document is updated periodically and changes may appear prior to their effective date to allow for client notification.

Drug Name	Requirements/Limits
ANALGESICS	
GOUT	
allopurinol tabs 100mg, 300mg	
colchicine caps .6mg; tabs .6mg	
probenecid tabs 500mg	
NSAIDS	
diclofenac potassium tabs 50mg	
diclofenac sodium delayed-rel tbec 25mg, 50mg, 75mg	
diclofenac sodium ext-rel tb24 100mg	
etodolac caps 200mg, 300mg; tabs 400mg, 500mg	
flurbiprofen tabs 50mg	
ibuprofen susp 100mg/5ml; tabs 400mg, 600mg, 800mg	
ketorolac tromethamine soln 15mg/ml, 30mg/ml, 60mg/2ml; tabs 10mg	
meloxicam tabs 7.5mg, 15mg	
nabumetone tabs 500mg, 750mg	
naproxen tabs 250mg, 375mg, 500mg	
naproxen tbec 375mg, 500mg	
naproxen sodium tabs 275mg, 550mg	
oxaprozin tabs 600mg	
piroxicam caps 10mg, 20mg	
sulindac tabs 150mg, 200mg	
OPIOID ANALGESICS	
acetaminophen w/ codeine soln 120-12 mg/5ml	QL
acetaminophen w/ codeine tab 300-15 mg	QL
acetaminophen w/ codeine tab 300-30 mg	QL
acetaminophen w/ codeine tab 300-60 mg	QL
codeine sulfate tabs 30mg	QL; PA*
fentanyl pt72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr	QL; PA*, Initial PA may apply to higher strengths
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	QL
hydrocodone-acetaminophen tab 5-325 mg	QL
hydrocodone-acetaminophen tab 7.5-325 mg	QL
hydrocodone-acetaminophen tab 10-325 mg	QL
hydromorphone hcl liqd 1mg/ml; tabs 2mg, 4mg, 8mg	QL; PA*
methadone hcl soln 5mg/5ml, 10mg/5ml; tabs 5mg, 10mg; tbso 40mg	QL; PA*
morphine sulfate cp24 10mg, 20mg, 30mg, 50mg, 60mg, 80mg, 100mg; tbcr 15mg, 30mg, 60mg, 100mg, 200mg	QL; PA*, Initial PA may apply to higher strengths

Drug Name	Requirements/Limits
morphine sulfate soln 10mg/5ml, 20mg/5ml, 100mg/5ml; tabs 15mg, 30mg	QL; PA*
oxycodone hcl conc 20mg/ml; soln 5mg/5ml; tabs 5mg, 10mg, 15mg, 20mg, 30mg	QL; PA*
oxycodone w/ acetaminophen tab 2.5-325 mg	QL
oxycodone w/ acetaminophen tab 5-325 mg	QL
oxycodone w/ acetaminophen tab 7.5-325 mg	QL
oxycodone w/ acetaminophen tab 10-325 mg	QL
tramadol hcl tabs 50mg	QL; PA*
tramadol hcl tb24 100mg, 200mg, 300mg	QL; PA*, Initial PA may apply to higher strengths
OPIOID PARTIAL AGONISTS	
BELBUCA FILM 75MCG, 150MCG, 300MCG, 450MCG, 600MCG, 750MCG, 900MCG	QL; PA*, Initial PA may apply to higher strengths
buprenorphine ptwk 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr	QL; PA*, Initial PA may apply to higher strengths
SALICYLATES	
diflunisal tabs 500mg	
VISCOSUPPLEMENTS	
DUROLANE PRSY 60MG/3ML	SP, PA
EUFLEXXA SOSY 20MG/2ML	SP, PA
GELSYN-3 SOSY 16.8MG/2ML	SP, PA
ORTHOVISC SOSY 30MG/2ML	SP, PA
ANTI-INFECTIVES	
ANTHELMINTICS	
EMVERM CHEW 100MG	QL; PA*
ivermectin tabs 3mg	
praziquantel tabs 600mg	QL; PA*
ANTI-BACTERIALS - MISCELLANEOUS	
ARIKAYCE SUSP 590MG/8.4ML	SP, PA
tinidazole tabs 250mg, 500mg	
ANTIFUNGALS	
fluconazole susr 10mg/ml, 40mg/ml; tabs 50mg, 100mg, 150mg, 200mg	
griseofulvin microsize susp 125mg/5ml; tabs 500mg	
itraconazole caps 100mg; soln 10mg/ml	
nystatin tabs 500000unit	
terbinafine hcl tabs 250mg	
voriconazole susr 40mg/ml; tabs 50mg, 200mg	
ANTIRETROVIRAL AGENTS	
abacavir sulfate soln 20mg/ml; tabs 300mg	QL; PA*

Drug Name	Requirements/Limits
APRETUDE SUER 600MG/3ML	QL
atazanavir sulfate caps 150mg, 200mg, 300mg	QL; PA*
darunavir tabs 600mg, 800mg	QL; PA*
efavirenz tabs 600mg	QL; PA*
emtricitabine caps 200mg	QL; PA*
EMTRIVA SOLN 10MG/ML	QL; PA*
etravirine tabs 100mg, 200mg	QL; PA*
fosamprenavir calcium tabs 700mg	QL; PA*
ISENTRESS CHEW 25MG, 100MG; PACK 100MG; TABS 400MG	QL; PA*
ISENTRESS HD TABS 600MG	QL; PA*
lamivudine soln 10mg/ml; tabs 150mg, 300mg	QL; PA*
maraviroc tabs 150mg, 300mg	QL; PA*
nevirapine susp 50mg/5ml; tabs 200mg; tb24 400mg	QL; PA*
NORVIR PACK 100MG	QL; PA*
REYATAZ PACK 50MG	QL; PA*
ritonavir tabs 100mg	QL; PA*
RUKOBIA TB12 600MG	QL; PA*
SUNLENCA SOLN 463.5MG/1.5ML; TABS 300MG; TBPK 300MG	QL
tenofovir disoproxil fumarate tabs 300mg	QL; PA*
TIVICAY TABS 50MG	QL; PA*
TIVICAY PD TBSO 5MG	QL; PA*
TROGARZO SOLN 200MG/1.33ML	
VIREAD POWD 40MG/GM; TABS 150MG, 200MG, 250MG	QL; PA*
YEZTUGO SOLN 463.5MG/1.5ML; TABS 300MG	QL; PA*
zidovudine caps 100mg; syrp 50mg/5ml; tabs 300mg	QL; PA*
ANTIRETROVIRAL COMBINATION AGENTS	
abacavir sulfate-lamivudine tab 600-300 mg	QL; PA*
BIKTARVY TAB	QL; PA*
CABENUVA SUS 400-600	SP, PA, QL
CABENUVA SUS 600-900	SP, PA, QL
CIMDUO TAB 300-300	QL; PA*
DESCOVY TAB 120-15MG	QL; PA*
DESCOVY TAB 200/25MG	QL; PA*
DOVATO TAB 50-300MG	QL; PA*
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	QL; PA*
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	QL; PA*
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	QL; PA*

Drug Name	Requirements/Limits
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg	QL; PA*
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg	QL; PA*
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg	QL; PA*
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg	QL; PA*
EVOTAZ TAB 300-150	QL; PA*
GENVOYA TAB	QL; PA*
JULUCA TAB 50-25MG	QL; PA*
KALETRA SOL	QL
lamivudine-zidovudine tab 150-300 mg	QL; PA*
lopinavir-ritonavir tab 100-25 mg	QL
lopinavir-ritonavir tab 200-50 mg	QL
ODEFSEY TAB	QL; PA*
PREZCOBIX TAB 675/150	QL; PA*
PREZCOBIX TAB 800-150	QL; PA*
SYMTUZA TAB	QL; PA*
TRIUMEQ PD TAB	QL; PA*
TRIUMEQ TAB	QL; PA*
ANTITUBERCULAR AGENTS	
cycloserine caps 250mg	
ethambutol hcl tabs 100mg, 400mg	
isoniazid syrp 50mg/5ml; tabs 100mg, 300mg	
PRIFTIN TABS 150MG	
pyrazinamide tabs 500mg	
rifabutin caps 150mg	
rifampin caps 150mg, 300mg	
streptomycin sulfate solr 1gm	
ANTIVIRALS	
acyclovir caps 200mg; susp 200mg/5ml; tabs 400mg, 800mg	
famciclovir tabs 125mg, 250mg, 500mg	
oseltamivir phosphate caps 30mg, 45mg, 75mg; susr 6mg/ml	QL; PA*
PAXLOVID PAK	QL
PAXLOVID TAB 150-100	QL
PAXLOVID TAB 300-100	QL
valacyclovir hcl tabs 1gm, 500mg	
valganciclovir hcl solr 50mg/ml; tabs 450mg	QL

Drug Name	Requirements/Limits
CEPHALOSPORINS	
cefadroxil caps 500mg; susr 250mg/5ml, 500mg/5ml; tabs 1gm	
cefdinir caps 300mg; susr 125mg/5ml, 250mg/5ml	
cefpodoxime proxetil susr 50mg/5ml, 100mg/5ml; tabs 100mg, 200mg	
cefprozil susr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg	
cefuroxime axetil tabs 250mg, 500mg	
cephalexin caps 250mg, 500mg, 750mg; susr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg	
ERYTHROMYCINS/MACROLIDES	
azithromycin susr 100mg/5ml, 200mg/5ml; tabs 250mg, 500mg, 600mg	
clarithromycin susr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg	
clarithromycin ext-rel tb24 500mg	
DIFICID SUSR 40MG/ML	PA
erythromycin susr 200mg/5ml; tabs 400mg	
erythromycin base tabs 500mg	
erythromycin delayed-rel cpep 250mg; tbec 250mg, 333mg, 500mg	
fidaxomicin tabs 200mg	
ZITHROMAX PACK 1GM	
FLUOROQUINOLONES	
CIPRO SUSR 5GM/100ML, 500MG/5ML	
ciprofloxacin hcl tabs 250mg, 500mg, 750mg	
levofloxacin soln 25mg/ml; tabs 250mg, 500mg, 750mg	
moxifloxacin hcl tabs 400mg	
HEPATITIS B	
entecavir tabs .5mg, 1mg	QL
lamivudine (hbv) tabs 100mg	
HEPATITIS C	
EPCLUSA PAK 150-37.5	SP, PA, QL; For genotypes 1, 2, 3, 4, 5, 6
EPCLUSA PAK 200-50MG	SP, PA, QL; For genotypes 1, 2, 3, 4, 5, 6
EPCLUSA TAB 200-50MG	SP, PA, QL; For genotypes 1, 2, 3, 4, 5, 6
EPCLUSA TAB 400-100	SP, PA, QL; For genotypes 1, 2, 3, 4, 5, 6

Drug Name	Requirements/Limits
HARVONI PAK	SP, PA, QL; Only for genotypes 1, 4, 5 and 6
HARVONI PAK 45-200MG	SP, PA, QL; Only for genotypes 1, 4, 5 and 6
HARVONI TAB 45-200MG	SP, PA, QL; Only for genotypes 1, 4, 5 and 6
HARVONI TAB 90-400MG	SP, PA, QL; Only for genotypes 1, 4, 5 and 6
ribavirin caps 200mg; tabs 200mg	
VOSEVI TAB	SP, PA, QL; For use in patients previously treated with an HCV regimen containing an NS5A inhibitor (for genotypes 1-6) or sofosbuvir without an NS5A inhibitor (for genotypes 1a or 3).
MISCELLANEOUS	
atovaquone susp 750mg/5ml	
clindamycin hcl caps 75mg, 150mg, 300mg	
dapsone tabs 25mg, 100mg	
linezolid susr 100mg/5ml; tabs 600mg	PA
linezolid inj soln 600mg/300ml	PA
metronidazole caps 375mg; tabs 250mg, 500mg	
nitrofurantoin ext-rel caps 100mg	
nitrofurantoin macrocrystals caps 25mg, 50mg, 100mg	
sulfamethoxazole/trimethoprim	
sulfamethoxazole/trimethoprim ds	
vancomycin hcl caps 125mg, 250mg	QL
XIFAXAN TABS 550MG	PA
PENICILLINS	
amoxicillin caps 250mg, 500mg; chew 125mg, 250mg; susr 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; tabs 500mg, 875mg	
amoxicillin & k clavulanate chew tab 400-57 mg	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	
amoxicillin & k clavulanate tab 250-125 mg	
amoxicillin & k clavulanate tab 500-125 mg	
amoxicillin & k clavulanate tab 875-125 mg	
amoxicillin & pot clavulanate ext-rel	

Drug Name	Requirements/Limits
ampicillin caps 500mg	
dicloxacillin sodium caps 250mg, 500mg	
penicillin v potassium solr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg	
TETRACYCLINES	
doxycycline hyclate caps 50mg, 100mg; tabs 20mg, 100mg	
doxycycline monohydrate susp susr 25mg/5ml	
minocycline hcl caps 50mg, 75mg, 100mg; tabs 50mg, 75mg, 100mg	
tetracycline hcl caps 250mg, 500mg	
ANTINEOPLASTIC AGENTS	
ALKYLATING AGENTS	
cyclophosphamide caps 25mg, 50mg	
CYCLOPHOSPHAMIDE TABS 25MG, 50MG	
LEUKERAN TABS 2MG	
MYLERAN TABS 2MG	
temozolomide caps 5mg, 20mg, 100mg, 140mg, 180mg, 250mg	SP, PA
ANTIMETABOLITES	
capecitabine tabs 150mg, 500mg	SP, PA
LONSURF TAB 15-6.14	SP, PA, QL
LONSURF TAB 20-8.19	SP, PA, QL
mercaptopurine tabs 50mg	
methotrexate sodium soln 1gm/40ml, 50mg/2ml, 250mg/10ml; solr 1gm	
ONUREG TABS 200MG, 300MG	SP, PA, QL
TABLOID TABS 40MG	
BIOLOGIC RESPONSE MODIFIERS	
ERIVEDGE CAPS 150MG	SP, PA, QL
lenalidomide caps 2.5mg, 5mg, 10mg, 15mg, 20mg, 25mg	SP, PA, QL
PADCEV SOLR 20MG, 30MG	SP, PA, QL
pomalidomide caps 1mg, 2mg, 3mg, 4mg	SP, PA, QL
THALOMID CAPS 50MG, 100MG	SP, PA, QL
BIOSIMILARS	
KANJINTI SOLR 150MG, 420MG	SP, PA
RUXIENCE SOLN 100MG/10ML, 500MG/50ML	SP, PA
TRAZIMERA SOLR 150MG, 420MG	SP, PA
ZIRABEV SOLN 100MG/4ML, 400MG/16ML	SP, PA

Drug Name	Requirements/Limits
HORMONAL ANTINEOPLASTIC AGENTS	
abiraterone acetate tabs 250mg	SP, PA, QL
anastrozole tabs 1mg	
bicalutamide tabs 50mg	
ELIGARD KIT 7.5MG, 22.5MG, 30MG, 45MG	SP, PA
ERLEADA TABS 60MG, 240MG	SP, PA, QL
exemestane tabs 25mg	
fulvestrant sosy 250mg/5ml	SP, PA
letrozole tabs 2.5mg	
LUPRON DEPOT (1-MONTH) KIT 3.75MG	SP, PA
LUPRON DEPOT (3-MONTH) KIT 11.25MG	SP, PA
LYSODREN TABS 500MG	
megestrol acetate tabs 20mg, 40mg	
nilutamide tabs 150mg	
NUBEQA TABS 300MG	SP, PA, QL
tamoxifen citrate tabs 10mg, 20mg	
toremifene citrate tabs 60mg	
XTANDI CAPS 40MG; TABS 40MG, 80MG	SP, PA, QL
YONSA TABS 125MG	SP, PA, QL
KINASE INHIBITORS	
ALECENSA CAPS 150MG	SP, PA, QL
ALUNBRIG TABS 30MG, 90MG, 180MG	SP, PA, QL
ALUNBRIG PAK	SP, PA, QL
AUGTYRO CAPS 40MG, 160MG	SP, PA, QL
BOSULIF CAPS 50MG, 100MG; TABS 100MG, 400MG, 500MG	SP, PA, QL
BRAFTOVI CAPS 75MG	SP, PA, QL
BRUKINSA CAPS 80MG; TABS 160MG	SP, PA, QL
CABOMETYX TABS 20MG, 40MG, 60MG	SP, PA, QL
CALQUENCE TABS 100MG	SP, PA, QL
CAPRELSA TABS 100MG, 300MG	SP, PA, QL
dasatinib tabs 20mg, 50mg, 70mg, 80mg, 100mg, 140mg	SP, PA, QL
erlotinib hcl tabs 25mg, 100mg, 150mg	SP, PA, QL
everolimus tabs 2.5mg, 5mg, 7.5mg, 10mg; tbso 2mg, 3mg, 5mg	SP, PA, QL
GAVRETO CAPS 100MG	SP, PA, QL
gefitinib tabs 250mg	SP, PA, QL
GILOTRIF TABS 20MG, 30MG, 40MG	SP, PA, QL
GOMEKLI CAPS 1MG, 2MG; TBSO 1MG	SP, PA, QL
IBRANCE CAPS 75MG, 100MG, 125MG; TABS 75MG, 100MG, 125MG	SP, PA, QL

Drug Name	Requirements/Limits
IBTROZI CAPS 200MG	SP, PA, QL
imatinib mesylate tabs 100mg, 400mg	SP, PA, QL
INLYTA TABS 1MG, 5MG	SP, PA, QL
ITOVEBI TABS 3MG, 9MG	SP, PA, QL
JAKAFI TABS 5MG, 10MG, 15MG, 20MG, 25MG	SP, PA, QL
JAKAFI XR TB24 11MG, 22MG, 33MG, 44MG, 55MG	SP, PA, QL
KISQALI TBPK 200MG	SP, PA, QL
KOSELUGO CAPS 10MG, 25MG; CPSP 5MG, 7.5MG	SP, PA, QL
lapatinib ditosylate tabs 250mg	SP, PA, QL
LENVIMA 4 MG DAILY DOSE CPPK 4MG	SP, PA, QL
LENVIMA 8 MG DAILY DOSE CPPK 4MG	SP, PA, QL
LENVIMA 10 MG DAILY DOSE CPPK 10MG	SP, PA, QL
LENVIMA 12MG DAILY DOSE CPPK 4MG	SP, PA, QL
LENVIMA 20 MG DAILY DOSE CPPK 10MG	SP, PA, QL
LENVIMA CAP 14 MG	SP, PA, QL
LENVIMA CAP 18 MG	SP, PA, QL
LENVIMA CAP 24 MG	SP, PA, QL
LORBRENA TABS 25MG, 100MG	SP, PA, QL
MEKINIST SOLR .05MG/ML; TABS .5MG, 2MG	SP, PA, QL
MEKTOVI TABS 15MG	SP, PA, QL
NERLYNX TABS 40MG	SP, PA, QL
nilotinib hcl caps 50mg, 150mg, 200mg	SP, PA, QL
pazopanib hcl tabs 200mg	SP, PA, QL
PIQRAY 200MG DAILY DOSE TBPK 200MG	SP, PA, QL
PIQRAY 250MG TAB DOSE	SP, PA, QL
PIQRAY 300MG DAILY DOSE TBPK 150MG	SP, PA, QL
RETEVMO TABS 40MG, 80MG, 120MG, 160MG	SP, PA, QL
ROZLYTREK CAPS 100MG, 200MG; PACK 50MG	SP, PA, QL
RYDAPT CAPS 25MG	SP, PA, QL
SCEMBLIX TABS 20MG, 40MG, 100MG	SP, PA, QL
sorafenib tosylate tabs 200mg	SP, PA, QL
STIVARGA TABS 40MG	SP, PA, QL
sunitinib malate caps 12.5mg, 25mg, 37.5mg, 50mg	SP, PA, QL
TAFINLAR CAPS 50MG, 75MG; TBSO 10MG	SP, PA, QL
TAGRISSO TABS 40MG, 80MG	SP, PA, QL
TRUQAP TABS 160MG, 200MG; TBPK 160MG, 200MG	SP, PA, QL
TUKYSA TABS 50MG, 150MG	SP, PA, QL
TURALIO CAPS 125MG	SP, PA, QL
VERZENIO TABS 50MG, 100MG, 150MG, 200MG	SP, PA, QL
VITRAKVI CAPS 25MG, 100MG; SOLN 20MG/ML	SP, PA, QL
XALKORI CPSP 20MG, 50MG, 150MG	SP, PA, QL
XOSPATA TABS 40MG	SP, PA, QL

Drug Name	Requirements/Limits
ZYKADIA TABS 150MG	SP, PA, QL
MISCELLANEOUS	
bexarotene caps 75mg	SP, PA
CRYSVITA SOLN 10MG/ML, 20MG/ML, 30MG/ML	SP, PA, QL
etoposide caps 50mg	
hydroxyurea caps 500mg	
KRAZATI TABS 200MG	SP, PA, QL
LUMAKRAS TABS 120MG, 240MG, 320MG	SP, PA, QL
LYNPARZA TABS 100MG, 150MG	SP, PA, QL
MATULANE CAPS 50MG	
ODOMZO CAPS 200MG	SP, PA, QL
POLIVY SOLR 30MG, 140MG	SP, PA
tretinoin (chemotherapy) caps 10mg	
VENCLEXTA TABS 10MG, 50MG, 100MG	SP, PA, QL
VENCLEXTA TAB START PK	SP, PA, QL
VISTOGARD PACK 10GM	QL
ZEJULA TABS 100MG, 200MG, 300MG	SP, PA, QL
ZOLINZA CAPS 100MG	SP, PA, QL
MONOCLONAL ANTIBODIES	
PHESGO SOL	SP, PA
POLYCYTHEMIA VERA	
BESREMI SOSY 500MCG/ML	SP, PA, QL
JAKAFI TABS 5MG, 10MG, 15MG, 20MG, 25MG	SP, PA, QL
JAKAFI XR TB24 11MG, 22MG, 33MG, 44MG, 55MG	SP, PA, QL
PROTEASOME INHIBITORS	
bortezomib solr 3.5mg	SP, PA, QL
NINLARO CAPS 2.3MG, 3MG, 4MG	SP, PA, QL
CARDIOVASCULAR	
ACE INHIBITOR COMBINATIONS	
amlodipine besylate-benazepril hcl cap 2.5-10 mg	
amlodipine besylate-benazepril hcl cap 5-10 mg	
amlodipine besylate-benazepril hcl cap 5-20 mg	
amlodipine besylate-benazepril hcl cap 5-40 mg	
amlodipine besylate-benazepril hcl cap 10-20 mg	
amlodipine besylate-benazepril hcl cap 10-40 mg	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	
enalapril maleate & hydrochlorothiazide tab 10-25 mg	
lisinopril & hydrochlorothiazide tab 10-12.5 mg	
lisinopril & hydrochlorothiazide tab 20-12.5 mg	
lisinopril & hydrochlorothiazide tab 20-25 mg	

Drug Name	Requirements/Limits
ACE INHIBITORS	
captopril tabs 12.5mg, 25mg, 50mg, 100mg	
enalapril maleate soln 1mg/ml; tabs 2.5mg, 5mg, 10mg, 20mg	
lisinopril tabs 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	
perindopril erbumine tabs 2mg, 4mg, 8mg	
ramipril caps 1.25mg, 2.5mg, 5mg, 10mg	
trandolapril tabs 1mg, 2mg, 4mg	
ALDOSTERONE RECEPTOR ANTAGONISTS	
eplerenone tabs 25mg, 50mg	
KERENDIA TABS 10MG, 20MG, 40MG	PA
spironolactone tabs 25mg, 50mg, 100mg	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS	
amlodipine besylate-olmesartan medoxomil tab 5-20 mg	
amlodipine besylate-olmesartan medoxomil tab 5-40 mg	
amlodipine besylate-olmesartan medoxomil tab 10-20 mg	
amlodipine besylate-olmesartan medoxomil tab 10-40 mg	
irbesartan-hydrochlorothiazide tab 150-12.5 mg	
irbesartan-hydrochlorothiazide tab 300-12.5 mg	
losartan potassium & hydrochlorothiazide tab 50-12.5 mg	
losartan potassium & hydrochlorothiazide tab 100-12.5 mg	
losartan potassium & hydrochlorothiazide tab 100-25 mg	
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg	
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg	
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg	
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg	
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg	
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg	

Drug Name	Requirements/Limits
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg	
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg	
valsartan-hydrochlorothiazide tab 80-12.5 mg	
valsartan-hydrochlorothiazide tab 160-12.5 mg	
valsartan-hydrochlorothiazide tab 160-25 mg	
valsartan-hydrochlorothiazide tab 320-12.5 mg	
valsartan-hydrochlorothiazide tab 320-25 mg	
ANGIOTENSIN II RECEPTOR ANTAGONISTS	
irbesartan tabs 75mg, 150mg, 300mg	
losartan potassium tabs 25mg, 50mg, 100mg	
olmesartan medoxomil tabs 5mg, 20mg, 40mg	
valsartan tabs 40mg, 80mg, 160mg, 320mg	
ANTIARRHYTHMICS	
amiodarone tabs 100mg, 200mg, 400mg	
disopyramide phosphate caps 100mg, 150mg	
dofetilide caps 125mcg, 250mcg, 500mcg	
flecainide acetate tabs 50mg, 100mg, 150mg	
ibutilide fumarate soln 1mg/10ml	
propafenone ext-rel cp12 225mg, 325mg, 425mg	
propafenone hcl tabs 150mg, 225mg, 300mg	
sotalol tabs 80mg, 120mg, 160mg	
sotalol hcl tabs 80mg, 120mg, 160mg, 240mg	
ANTILIPEMICS, BILE ACID RESINS	
cholestyramine powd 4gm/dose	
cholestyramine light powd 4gm/dose	
colestipol hcl gran 5gm; pack 5gm; tabs 1gm	
ANTILIPEMICS, CHOLESTEROL ABSORPTION INHIBITOR	
ezetimibe tabs 10mg	
ANTILIPEMICS, FIBRATES	
fenofibrate caps 67mg, 134mg, 200mg; tabs 48mg, 54mg, 145mg, 160mg	
gemfibrozil tabs 600mg	
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS	
atorvastatin calcium tabs 10mg, 20mg, 40mg, 80mg	
pravastatin sodium tabs 10mg, 20mg, 40mg, 80mg	
rosuvastatin calcium tabs 5mg, 10mg, 20mg, 40mg	
simvastatin tabs 5mg, 10mg, 20mg, 40mg, 80mg	
ANTILIPEMICS, MISCELLANEOUS	
niacin ext-rel tbcr 500mg, 750mg, 1000mg	

Drug Name	Requirements/Limits
ANTILIPEMICS, OMEGA-3 FATTY ACIDS	
VASCEPA CAPS .5GM, 1GM	
ANTILIPEMICS, PCSK9 INHIBITORS	
REPATHA SOSY 140MG/ML	QL
REPATHA PUSHTRONEX SYSTEM SOCT 420MG/3.5ML	QL
REPATHA SURECLICK SOAJ 140MG/ML	QL
BETA-BLOCKER/DIURETIC COMBINATIONS	
atenolol & chlorthalidone tab 50-25 mg	
atenolol & chlorthalidone tab 100-25 mg	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg	
bisoprolol & hydrochlorothiazide tab 5-6.25 mg	
bisoprolol & hydrochlorothiazide tab 10-6.25 mg	
metoprolol & hydrochlorothiazide tab 50-25 mg	
metoprolol & hydrochlorothiazide tab 100-25 mg	
metoprolol & hydrochlorothiazide tab 100-50 mg	
BETA-BLOCKERS	
acebutolol hcl caps 200mg, 400mg	
atenolol tabs 25mg, 50mg, 100mg	
bisoprolol fumarate tabs 5mg, 10mg	
carvedilol tabs 3.125mg, 6.25mg, 12.5mg, 25mg	
labetalol hcl tabs 100mg, 200mg, 300mg	
metoprolol succinate ext-rel tb24 25mg, 50mg, 100mg, 200mg	
metoprolol tartrate tabs 25mg, 50mg, 100mg	
nadolol tabs 20mg, 40mg, 80mg	
pindolol tabs 5mg, 10mg	
propranolol ext-rel cp24 60mg, 80mg, 120mg, 160mg	
propranolol hcl soln 20mg/5ml, 40mg/5ml; tabs 10mg, 20mg, 40mg, 60mg, 80mg	
CALCIUM CHANNEL BLOCKERS	
amlodipine besylate tabs 2.5mg, 5mg, 10mg	
diltiazem ext-rel cp24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg; tb24 180mg, 240mg, 300mg, 360mg, 420mg	
felodipine ext-rel tb24 2.5mg, 5mg, 10mg	
isradipine caps 2.5mg, 5mg	
nicardipine hcl caps 20mg, 30mg	
nifedipine ext-rel tb24 30mg, 60mg, 90mg	
verapamil ext-rel cp24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; tbcr 120mg, 180mg, 240mg	

Drug Name	Requirements/Limits
DIGITALIS GLYCOSIDES	
digoxin tabs 62.5mcg, 125mcg, 250mcg	
digoxin ped elixir soln .05mg/ml	
DIURETICS	
amiloride & hydrochlorothiazide tab 5-50 mg	
amiloride hcl tabs 5mg	
bumetanide tabs .5mg, 1mg, 2mg	
chlorthalidone tabs 25mg, 50mg	
ethacrynic acid tabs 25mg	
furosemide soln 10mg/ml, 40mg/5ml; tabs 20mg, 40mg, 80mg	
hydrochlorothiazide caps 12.5mg; tabs 12.5mg, 25mg, 50mg	
indapamide tabs 1.25mg, 2.5mg	
metolazone tabs 2.5mg, 5mg, 10mg	
spironolactone & hydrochlorothiazide tab 25-25 mg	
torsemide tabs 5mg, 10mg, 20mg, 100mg	
triamterene & hydrochlorothiazide cap 37.5-25 mg	
triamterene & hydrochlorothiazide tab 37.5-25 mg	
triamterene & hydrochlorothiazide tab 75-50 mg	
HEART FAILURE	
CORLANOR SOLN 5MG/5ML	
dapagliflozin tabs 5mg, 10mg	ST; PA**
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg	
ivabradine hcl tabs 5mg, 7.5mg	
JARDIANCE TABS 10MG, 25MG	ST; PA**
sacubitril-valsartan tab 24-26 mg	
sacubitril-valsartan tab 49-51 mg	
sacubitril-valsartan tab 97-103 mg	
MISCELLANEOUS	
CAMZYOS CAPS 2.5MG, 5MG, 10MG, 15MG	SP, PA, QL
clonidine ptwk .1mg/24hr, .2mg/24hr, .3mg/24hr	
clonidine hcl tabs .1mg, .2mg, .3mg	
hydralazine hcl tabs 10mg, 25mg, 50mg, 100mg	
midodrine hcl tabs 2.5mg, 5mg, 10mg	
ranolazine ext-rel tb12 500mg, 1000mg	
VYNDAMAX CAPS 61MG	SP, PA, QL
NITRATES	
isosorbide dinitrate tabs 5mg, 10mg, 20mg, 30mg	
isosorbide mononitrate ext-rel tb24 30mg, 60mg, 120mg	

Drug Name	Requirements/Limits
NITRO-DUR PT24 .3MG/HR, .8MG/HR	
nitroglycerin sublingual subl .3mg, .4mg, .6mg	
nitroglycerin transdermal pt24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	
PULMONARY ARTERIAL HYPERTENSION	
ADEMPAS TABS .5MG, 1MG, 1.5MG, 2MG, 2.5MG	SP, PA, QL
ambrisentan tabs 5mg, 10mg	SP, PA, QL
bosentan tabs 62.5mg, 125mg	SP, PA, QL
epoprostenol sodium solr .5mg, 1.5mg	SP, PA
OPSUMIT TABS 10MG	SP, PA, QL
OPSYNVI TAB 10-20MG	SP, PA, QL
OPSYNVI TAB 10-40MG	SP, PA, QL
ORENITRAM TBCR .125MG, .25MG, 1MG, 2.5MG, 5MG	SP, PA
ORENITRAM TAB MONTH 1	SP, PA
ORENITRAM TAB MONTH 2	SP, PA
ORENITRAM TAB MONTH 3	SP, PA
sildenafil citrate (pulmonary hypertension) susr 10mg/ml; tabs 20mg	SP, PA, QL
TADLIQ SUSP 20MG/5ML	SP, PA, QL
UPTRAVI SOLR 1800MCG; TABS 200MCG, 400MCG, 600MCG, 800MCG, 1000MCG, 1200MCG, 1400MCG, 1600MCG	SP, PA, QL
UPTRAVI PACK TAB 200/800	SP, PA, QL
YUTREPIA CAPS 26.5MCG, 53MCG, 79.5MCG, 106MCG	SP, PA, QL
CENTRAL NERVOUS SYSTEM	
AMYOTROPHIC LATERAL SCLEROSIS (ALS)	
RADICAVA ORS SUSP 105MG/5ML	SP, PA, QL
riluzole tabs 50mg	
ANTIANXIETY	
alprazolam tabs .25mg, .5mg, 1mg, 2mg	QL
ALPRAZOLAM INTENSOL CONC 1MG/ML	QL
alprazolam orally disintegrating tabs tbdp .25mg, .5mg, 1mg, 2mg	QL
buspirone hcl tabs 5mg, 7.5mg, 10mg, 15mg, 30mg	
fluvoxamine ext-rel cp24 100mg, 150mg	
fluvoxamine maleate tabs 25mg, 50mg, 100mg	
lorazepam tabs .5mg, 1mg, 2mg	QL
oxazepam caps 10mg, 15mg, 30mg	QL
ANTIDEMENTIA	
donepezil hydrochloride tabs 5mg, 10mg, 23mg; tbdp 5mg, 10mg	

Drug Name	Requirements/Limits
galantamine hydrobromide cp24 8mg, 16mg, 24mg; soln 4mg/ml; tabs 4mg, 8mg, 12mg	
memantine hcl soln 2mg/ml; tabs 5mg, 10mg	
rivastigmine pt24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr	
rivastigmine tartrate caps 1.5mg, 3mg, 4.5mg, 6mg	
ANTIDEPRESSANTS	
amitriptyline hcl tabs 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	
bupropion tabs 75mg, 100mg	
bupropion hcl tb12 100mg, 150mg, 200mg	
bupropion hcl ext-rel tb24 150mg, 300mg	
citalopram hydrobromide soln 10mg/5ml; tabs 10mg, 20mg, 40mg	
desipramine hcl tabs 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	
desvenlafaxine succinate ext-rel tb24 25mg, 50mg, 100mg	
doxepin caps 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; conc 10mg/ml	
duloxetine delayed-rel cpep 20mg, 30mg, 60mg	
escitalopram oxalate soln 5mg/5ml; tabs 5mg, 10mg, 20mg	
fluoxetine hcl caps 10mg, 20mg, 40mg; soln 20mg/5ml	
fluoxetine hcl tabs 10mg, 20mg	
imipramine hcl tabs 10mg, 25mg, 50mg	
mirtazapine tabs 7.5mg, 15mg, 30mg, 45mg	
mirtazapine orally disintegrating tabs tbdp 15mg, 30mg, 45mg	
nortriptyline hcl caps 10mg, 25mg, 50mg, 75mg; soln 10mg/5ml	
paroxetine hcl ext-rel tb24 12.5mg, 25mg, 37.5mg	Listing does not include certain NDCs
paroxetine hcl tabs tabs 10mg, 20mg, 30mg, 40mg	
phenelzine sulfate tabs 15mg	
sertraline hcl conc 20mg/ml; tabs 25mg, 50mg, 100mg	
SPRAVATO SOL 56MG DOS	SP, PA
SPRAVATO SOL 84MG DOS	SP, PA
tranylcypromine sulfate tabs 10mg	
trazodone hcl tabs 50mg, 100mg, 150mg, 300mg	
venlafaxine hcl tabs 25mg, 37.5mg, 50mg, 75mg, 100mg	

Drug Name	Requirements/Limits
venlafaxine hcl ext-rel cp24 37.5mg, 75mg, 150mg	
vilazodone hcl tabs 10mg, 20mg, 40mg	
ZURZUVAE CAPS 20MG, 25MG, 30MG	SP, PA, QL
ANTIPARKINSONIAN AGENTS	
amantadine hcl caps 100mg; soln 50mg/5ml; tabs 100mg	
benztropine mesylate tabs .5mg, 1mg, 2mg	
bromocriptine mesylate caps 5mg; tabs 2.5mg	
carbidopa & levodopa tab 10-100 mg	
carbidopa & levodopa tab 25-100 mg	
carbidopa & levodopa tab 25-250 mg	
carbidopa & levodopa tab er 25-100 mg	
carbidopa & levodopa tab er 50-200 mg	
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	
carbidopa-levodopa-entacapone tabs 25-100-200 mg	
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	
carbidopa-levodopa-entacapone tabs 50-200-200 mg	
entacapone tabs 200mg	
INBRIJA CAPS 42MG	SP, PA, QL
pramipexole dihydrochloride tabs .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg	
rasagiline mesylate tabs .5mg, 1mg	
ropinirole hydrochloride tabs .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg	
selegiline hcl caps 5mg; tabs 5mg	
trihexyphenidyl hcl soln .4mg/ml; tabs 2mg, 5mg	
ANTIPSYCHOTICS	
ABILIFY MAINTENA PRSY 300MG, 400MG; SRER 300MG, 400MG	
aripiprazole soln 1mg/ml; tabs 2mg, 5mg, 10mg, 15mg, 20mg, 30mg	
ARISTADA PRSY 441MG/1.6ML, 662MG/2.4ML, 882MG/3.2ML, 1064MG/3.9ML	
ARISTADA INITIO PRSY 675MG/2.4ML	
asenapine maleate subl 2.5mg, 5mg, 10mg	
chlorpromazine hcl tabs 10mg, 25mg, 50mg, 100mg, 200mg	
clozapine tabs 25mg, 50mg, 100mg, 200mg; tbdp 12.5mg, 25mg, 100mg, 150mg, 200mg	
COBENFY CAP 50-20MG	

Drug Name	Requirements/Limits
COBENFY CAP 100-20MG	
COBENFY CAP 125-30MG	
COBENFY STRT CAP PACK	
fluphenazine hcl conc 5mg/ml; elix 2.5mg/5ml; tabs 1mg, 2.5mg, 5mg, 10mg	
haloperidol tabs .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	
INVEGA HAFYERA SUSY 1092MG/3.5ML, 1560MG/5ML	
INVEGA SUSTENNA SUSY 39MG/0.25ML, 78MG/0.5ML, 117MG/0.75ML, 156MG/ML, 234MG/1.5ML	
INVEGA TRINZA SUSY 273MG/0.88ML, 410MG/1.32ML, 546MG/1.75ML, 819MG/2.63ML	
LYBALVI TAB 5-10MG	
LYBALVI TAB 10-10MG	
LYBALVI TAB 15-10MG	
LYBALVI TAB 20-10MG	
NUPLAZID CAPS 34MG; TABS 10MG	SP, PA, QL
olanzapine tabs 2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg	
paliperidone tb24 1.5mg, 3mg, 6mg, 9mg	
quetiapine fumarate tabs 25mg, 50mg, 100mg, 200mg, 300mg, 400mg	
risperidone soln 1mg/ml; tabs .25mg, .5mg, 1mg, 2mg, 3mg, 4mg; tbdp .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	
risperidone microspheres srer 12.5mg, 25mg, 37.5mg, 50mg	
trifluoperazine hcl tabs 1mg, 2mg, 5mg, 10mg	
VRAYLAR CAPS .5MG, .75MG, 1.5MG, 3MG, 4.5MG, 6MG	
ziprasidone hcl caps 20mg, 40mg, 60mg, 80mg	
ANTISEIZURE AGENTS	
carbamazepine chew 100mg, 200mg; susp 100mg/5ml; tabs 200mg; tb12 100mg, 200mg, 400mg	
clobazam susp 2.5mg/ml; tabs 10mg, 20mg	PA
clonazepam tabs .5mg, 1mg, 2mg	QL
clorazepate dipotassium tabs 3.75mg, 7.5mg, 15mg	QL
diazepam tabs 2mg, 5mg, 10mg	QL
diazepam (anticonvulsant) gel 2.5mg, 10mg, 20mg	
divalproex sodium csdr 125mg; tb24 250mg, 500mg; tbec 125mg, 250mg, 500mg	
eslicarbazepine acetate tabs 200mg, 400mg, 600mg, 800mg	
ethosuximide caps 250mg; soln 250mg/5ml	

Drug Name	Requirements/Limits
felbamate susp 600mg/5ml; tabs 400mg, 600mg	
gabapentin caps 100mg, 300mg, 400mg; tabs 600mg, 800mg	
lamotrigine tabs 25mg, 100mg, 150mg, 200mg; tb24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	
levetiracetam soln 100mg/ml; tabs 250mg, 500mg, 750mg, 1000mg; tb24 500mg, 750mg	
oxcarbazepine susp 300mg/5ml; tabs 150mg, 300mg, 600mg	
phenobarbital elix 20mg/5ml; tabs 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	
phenytoin chew 50mg; susp 125mg/5ml	
phenytoin sodium extended caps 100mg	
primidone tabs 50mg, 250mg	
tiagabine hcl tabs 2mg, 4mg, 12mg, 16mg	
topiramate cpsp 15mg, 25mg, 50mg; tabs 25mg, 50mg, 100mg, 200mg	
valproic acid caps 250mg	
vigabatrin pack 500mg; tabs 500mg	SP, PA, QL
zonisamide caps 25mg, 50mg, 100mg	
ATTENTION DEFICIT HYPERACTIVITY DISORDER	
amphetamine-dextroamphetamine cap er 24hr 5 mg	QL; PA*
amphetamine-dextroamphetamine cap er 24hr 10 mg	QL; PA*
amphetamine-dextroamphetamine cap er 24hr 15 mg	QL; PA*
amphetamine-dextroamphetamine cap er 24hr 20 mg	QL; PA*
amphetamine-dextroamphetamine cap er 24hr 25 mg	QL; PA*
amphetamine-dextroamphetamine cap er 24hr 30 mg	QL; PA*
amphetamine-dextroamphetamine tab 5 mg	QL; PA*
amphetamine-dextroamphetamine tab 7.5 mg	QL; PA*
amphetamine-dextroamphetamine tab 10 mg	QL; PA*
amphetamine-dextroamphetamine tab 12.5 mg	QL; PA*
amphetamine-dextroamphetamine tab 15 mg	QL; PA*
amphetamine-dextroamphetamine tab 20 mg	QL; PA*
amphetamine-dextroamphetamine tab 30 mg	QL; PA*
atomoxetine hcl caps 10mg, 18mg, 25mg, 40mg, 60mg, 80mg, 100mg	QL
dexmethylphenidate hcl tabs 2.5mg, 5mg, 10mg	QL; PA*
dextroamphetamine sulfate cp24 5mg, 10mg, 15mg; soln 5mg/5ml; tabs 5mg, 10mg	QL; PA*
lisdexamfetamine dimesylate caps 10mg, 20mg, 30mg, 40mg, 50mg, 60mg, 70mg; chew 10mg, 20mg, 30mg, 40mg, 50mg, 60mg	QL; PA*

Drug Name	Requirements/Limits
methylphenidate hcl cp24 10mg, 20mg, 30mg, 40mg, 60mg; cpcr 10mg, 20mg, 30mg, 40mg, 50mg, 60mg; soln 5mg/5ml, 10mg/5ml; tabs 5mg, 10mg, 20mg; tbcr 10mg, 18mg, 20mg, 27mg, 36mg, 54mg	QL; PA*
BOTULINUM TOXINS	
DAXXIFY SOLR 100UNIT	SP, PA
DYSPORT SOLR 300UNIT, 500UNIT	SP, PA
XEOMIN SOLR 50UNIT, 100UNIT, 200UNIT	SP, PA
FIBROMYALGIA	
milnacipran hcl tabs 12.5mg, 25mg, 50mg, 100mg	PA
milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	PA
HYPNOTICS	
BELSOMRA TABS 5MG, 10MG, 15MG, 20MG	
doxepin hcl (sleep) tabs 3mg, 6mg	
ramelteon tabs 8mg	QL; PA*
temazepam caps 7.5mg, 15mg, 22.5mg, 30mg	QL
zaleplon caps 5mg, 10mg	QL; PA*
zolpidem tartrate tabs 5mg, 10mg	QL; PA*
zolpidem tartrate ext-rel tbcr 6.25mg, 12.5mg	QL; PA*
MIGRAINE - MISCELLANEOUS	
UBRELVY TABS 50MG, 100MG	ST, QL; PA**
MIGRAINE - MONOCLONAL ANTIBODIES	
AJOVY SOAJ 225MG/1.5ML; SOSY 225MG/1.5ML	ST, QL; PA**
EMGALITY SOAJ 120MG/ML; SOSY 100MG/ML, 120MG/ML	ST, QL; PA**
MIGRAINE - TRIPTANS AND COMBINATIONS	
naratriptan hcl tabs 1mg, 2.5mg	QL; PA*
rizatriptan benzoate tabs 5mg, 10mg	QL; PA*
rizatriptan orally disintegrating tabs tbdp 5mg, 10mg	QL; PA*
sumatriptan soln 5mg/act, 20mg/act	QL; PA*
sumatriptan succinate soaj 6mg/0.5ml; soln 6mg/0.5ml; tabs 25mg, 50mg, 100mg	QL; PA*
zolmitriptan soln 5mg; tabs 2.5mg, 5mg	QL; PA*
zolmitriptan orally disintegrating tabs tbdp 2.5mg, 5mg	QL; PA*
MISCELLANEOUS	
ENSPRYNG SOSY 120MG/ML	SP, PA, QL
EVRYSDI SOLR .75MG/ML; TABS 5MG	SP, PA, QL
MOOD STABILIZERS	
lithium carbonate caps 150mg, 300mg, 600mg; tabs 300mg; tbcr 300mg, 450mg	

Drug Name	Requirements/Limits
MOVEMENT DISORDERS	
AUSTEDO TABS 6MG, 9MG, 12MG	SP, PA, QL
INGREZZA CAPS 40MG, 60MG, 80MG; CPSP 40MG, 60MG, 80MG	SP, PA, QL
INGREZZA CAP 40-80MG	SP, PA, QL
tetrabenazine tabs 12.5mg, 25mg	SP, PA, QL
MULTIPLE SCLEROSIS AGENTS	
AVONEX AJKT 30MCG/0.5ML; PSKT 30MCG/0.5ML	SP, PA, QL
BETASERON KIT .3MG	SP, PA, QL
BRIUMVI SOLN 150MG/6ML	SP, PA, QL
dimethyl fumarate delayed-rel cpdr 120mg, 240mg	SP, PA, QL
fingolimod hcl caps .5mg	SP, PA, QL
glatiramer acetate sosy 20mg/ml, 40mg/ml	SP, PA, QL
KESIMPTA SOAJ 20MG/0.4ML	SP, PA, QL
MAYZENT TABS .25MG, 1MG, 2MG; TBPK .25MG	SP, PA, QL
MAYZENT STARTER PACK TBPK .25MG	SP, PA, QL
OCREVUS SOLN 300MG/10ML	SP, PA, QL
REBIF SOAJ 22MCG/0.5ML, 44MCG/0.5ML; SOSY 22MCG/0.5ML, 44MCG/0.5ML	SP, PA, QL
teriflunomide tabs 7mg, 14mg	SP, PA, QL
TYRUKO CONC 300MG/15ML	SP, PA, QL
ZEPOSIA CAPS .92MG	SP, PA, QL
ZEPOSIA CAP STR KIT	SP, PA, QL
MUSCULOSKELETAL THERAPY AGENTS	
baclofen tabs 5mg, 10mg, 20mg	
cyclobenzaprine hcl tabs 5mg, 10mg	
dantrolene sodium caps 25mg, 50mg, 100mg	
methocarbamol tabs 500mg, 750mg	
tizanidine hcl tabs 2mg, 4mg	
MYASTHENIA GRAVIS	
EPYSQLI SOLN 300MG/30ML	SP, PA, QL
pyridostigmine bromide soln 60mg/5ml; tabs 60mg	
RYSTIGGO SOLN 280MG/2ML, 420MG/3ML, 560MG/4ML, 840MG/6ML	SP, PA, QL
VYVGART SOLN 400MG/20ML	SP, PA, QL
VYVGART INJ HYTRULO	SP, PA, QL
NARCOLEPSY/CATAPLEXY	
armodafinil tabs 50mg, 150mg, 200mg, 250mg	PA, QL
LUMRYZ PACK 4.5GM, 6GM, 7.5GM, 9GM	SP, PA, QL
LUMRYZ PAK STARTER	SP, PA, QL
modafinil tabs 100mg, 200mg	PA, QL

Drug Name	Requirements/Limits
WAKIX TABS 4.45MG, 17.8MG	SP, PA, QL
XYWAV SOL 0.5GM/ML	SP, PA, QL
OPIOID AGONIST/ANTAGONIST	
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)	QL
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	QL
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	QL
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	QL
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	QL
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	QL
OPIOID ANTAGONIST	
naloxone hcl liqd 4mg/0.1ml	QL; PA*
naloxone hcl soct .4mg/ml; soln .4mg/ml, 4mg/10ml; sosy 2mg/2ml	
naltrexone hcl tabs 50mg	
VIVITROL SUSR 380MG	SP, PA, QL
OPIOID PARTIAL AGONISTS	
buprenorphine hcl subl 2mg, 8mg	PA, QL
SMOKING DETERRENTS	
bupropion hcl (smoking deterrent) tb12 150mg	
varenicline tartrate tabs .5mg, 1mg	
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	
ENDOCRINE AND METABOLIC	
ACROMEGALY	
octreotide acetate kit 20mg, 30mg; soln 50mcg/ml, 100mcg/ml, 200mcg/ml, 500mcg/ml, 1000mcg/ml; sosy 50mcg/ml, 100mcg/ml, 500mcg/ml	SP, PA, QL
SOMATULINE DEPOT SOLN 60MG/0.2ML, 90MG/0.3ML, 120MG/0.5ML	SP, PA, QL
ANDROGENS	
NATESTO GEL 5.5MG/ACT	
testosterone gel 10mg/act, 25mg/2.5gm	
testosterone cypionate soln 100mg/ml, 200mg/ml	
testosterone enanthate soln 200mg/ml	

Drug Name	Requirements/Limits
ANTIDIABETICS, BIGUANIDE	
metformin ext-rel tb24 500mg, 750mg	Listing does not include generics for FORTAMET and GLUMETZA
metformin hcl soln 500mg/5ml; tabs 500mg, 850mg, 1000mg	
ANTIDIABETICS, BIGUANIDE/ SULFONYLUREA COMBINATIONS	
glipizide-metformin hcl tab 2.5-250 mg	
glipizide-metformin hcl tab 2.5-500 mg	
glipizide-metformin hcl tab 5-500 mg	
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR COMBINATIONS	
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg	ST; PA**
saxagliptin-metformin hcl tab er 24hr 5-500 mg	ST; PA**
saxagliptin-metformin hcl tab er 24hr 5-1000 mg	ST; PA**
TRIJARDY XR TAB	ST; PA**
ZITUVIMET TAB 50-500MG	ST; PA**
ZITUVIMET TAB 50-1000	ST; PA**
ZITUVIMET XR TAB 50-500MG	ST; PA**
ZITUVIMET XR TAB 50-1000	ST; PA**
ZITUVIMET XR TAB 100-1000	ST; PA**
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS	
saxagliptin hcl tabs 2.5mg, 5mg	ST; PA**
ZITUVIO TABS 25MG, 50MG, 100MG	ST; PA**
ANTIDIABETICS, INCRETIN MIMETIC AGENTS	
liraglutide sopn 18mg/3ml	ST, QL; PA**
MOUNJARO SOAJ 2.5MG/0.5ML, 5MG/0.5ML, 7.5MG/0.5ML, 10MG/0.5ML, 12.5MG/0.5ML, 15MG/0.5ML	ST, QL; PA**
OZEMPIC SOPN 2MG/3ML, 4MG/3ML, 8MG/3ML; TABS 1.5MG, 4MG, 9MG	ST, QL; PA**
RYBELSUS TABS 1.5MG, 3MG, 4MG, 7MG, 9MG, 14MG	ST, QL; PA**
TRULICITY SOAJ .75MG/0.5ML, 1.5MG/0.5ML, 3MG/0.5ML, 4.5MG/0.5ML	ST, QL; PA**
ANTIDIABETICS, INCRETIN MIMETIC COMBINATION AGENTS	
SOLIQUA	ST; PA**
ANTIDIABETICS, INSULIN	
FIASP SOCT 100UNIT/ML; SOLN 100UNIT/ML; SOPN 100UNIT/ML	
HUMULIN R U-500 SOPN 500UNIT/ML	

Drug Name	Requirements/Limits
INSULIN GLARGINE-YFGN SOLN 100UNIT/ML; SOPN 100UNIT/ML	
LANTUS SOLN 100UNIT/ML	
LANTUS SOLOSTAR SOPN 100UNIT/ML	
NOVOLIN MIX	OTC
NOVOLIN N SUPN 100UNIT/ML; SUSP 100UNIT/ML	OTC
NOVOLIN R SOLN 100UNIT/ML; SOPN 100UNIT/ML	OTC
NOVOLOG SOCT 100UNIT/ML; SOLN 100UNIT/ML; SOPN 100UNIT/ML	
NOVOLOG MIX	
TRESIBA SOLN 100UNIT/ML; SOPN 100UNIT/ML, 200UNIT/ML	
ANTIDIABETICS, INSULIN SENSITIZER	
pioglitazone hcl tabs 15mg, 30mg, 45mg	
ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATION	
pioglitazone hcl-metformin hcl tab 15-500 mg	
pioglitazone hcl-metformin hcl tab 15-850 mg	
ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATION	
pioglitazone hcl-glimepiride tab 30-2 mg	
pioglitazone hcl-glimepiride tab 30-4 mg	
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITOR COMBINATIONS	
dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg	ST; PA**
dapagliflozin free base-metformin hcl tab er 24hr 5-1000 mg	ST; PA**
dapagliflozin free base-metformin hcl tab er 24hr 10-500 mg	ST; PA**
dapagliflozin free base-metformin hcl tab er 24hr 10-1000 mg	ST; PA**
SYNJARDY TAB	ST; PA**
SYNJARDY TAB 5-500MG	ST; PA**
SYNJARDY TAB 5-1000MG	ST; PA**
SYNJARDY TAB 12.5-500	ST; PA**
SYNJARDY XR TAB	ST; PA**
SYNJARDY XR TAB 5-1000MG	ST; PA**
SYNJARDY XR TAB 10-1000	ST; PA**
SYNJARDY XR TAB 25-1000	ST; PA**
XIGDUO XR TAB 2.5-1000	ST; PA**

Drug Name	Requirements/Limits
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITOR/DPP-4 INHIBITOR COMBINATIONS	
GLYXAMBI TAB 10-5 MG	ST; PA**
GLYXAMBI TAB 25-5 MG	ST; PA**
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITORS	
dapagliflozin tabs 5mg, 10mg	ST; PA**
JARDIANCE TABS 10MG, 25MG	ST; PA**
ANTIDIABETICS, SULFONYLUREA	
glimepiride tabs 1mg, 2mg, 4mg	
glipizide tabs 5mg, 10mg	
glipizide ext-rel tb24 2.5mg, 5mg, 10mg	
glipizide xl tb24 2.5mg, 5mg, 10mg	
ANTIOBESITY	
FOUNDAYO TABS .8MG, 2.5MG, 5.5MG, 9MG, 14.5MG, 17.2MG	
liraglutide (weight management) sopn 18mg/3ml	
orlistat caps 120mg	
phentermine hcl-topiramate cap er 24hr 3.75-23 mg	
phentermine hcl-topiramate cap er 24hr 7.5-46 mg	
phentermine hcl-topiramate cap er 24hr 11.25-69 mg	
phentermine hcl-topiramate cap er 24hr 15-92 mg	
WEGOVY SOAJ .25MG/0.5ML, .5MG/0.5ML, 1MG/0.5ML, 1.7MG/0.75ML, 2.4MG/0.75ML; TABS 1.5MG, 4MG, 9MG, 25MG	
WEGOVY HD SOAJ 7.2MG/0.75ML	
ZEPBOUND SOAJ 2.5MG/0.5ML, 5MG/0.5ML, 7.5MG/0.5ML, 10MG/0.5ML, 12.5MG/0.5ML, 15MG/0.5ML	
CALCIUM RECEPTOR AGONISTS	
cinacalcet hcl tabs 30mg, 60mg, 90mg	SP, PA, QL
CALCIUM REGULATORS, BISPHOSPHONATES	
alendronate sodium soln 70mg/75ml; tabs 10mg, 35mg, 70mg	
ibandronate sodium tabs 150mg	
risedronate sodium tabs 5mg, 30mg, 35mg, 150mg	
zoledronic acid soln 5mg/100ml	
CALCIUM REGULATORS, MISCELLANEOUS	
OSENVELT SOLN 120MG/1.7ML	SP, PA, QL
OSPOMYV SOSY 60MG/ML	SP, PA, QL
STOBOCLO SOSY 60MG/ML	SP, PA, QL

Drug Name	Requirements/Limits
CALCIUM REGULATORS, PARATHYROID HORMONES	
BONSITY SOPN 560MCG/2.24ML	SP, PA, QL
teriparatide sopn 560mcg/2.24ml	SP, PA, QL
TERIPARATIDE SOPN 560MCG/2.24ML	SP, PA, QL
TYMLOS SOPN 3120MCG/1.56ML	SP, PA, QL
CENTRAL PRECOCIOUS PUBERTY	
FENSOLVI KIT 45MG	SP, PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5MG, 11.25MG, 15MG	SP, PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25MG, 30MG	SP, PA
LUPRON DEPOT-PED (6-MONTH KIT 45MG	SP, PA
SUPPRELIN LA KIT 50MG	SP, PA
TRIPTODUR SRER 22.5MG	SP, PA
CHELATING AGENTS	
deferasirox pack 90mg, 180mg, 360mg; tabs 90mg, 180mg, 360mg; tbso 125mg, 250mg, 500mg	SP, PA
deferiprone tabs 500mg	SP, PA
deferoxamine mesylate solr 2gm, 500mg	SP, PA
penicillamine tabs 250mg	
CONTRACEPTIVES	
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	
desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	
drospirenone-ethinyl estradiol tab 3-0.02 mg	
drospirenone-ethinyl estradiol tab 3-0.03 mg	
ELLA TABS 30MG	
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	
KYLEENA IUD 19.5MG	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	
LO LOESTRIN TAB 1-10-10	
medroxyprogesterone acetate 150 mg/ml susp 150mg/ml; susy 150mg/ml	

Drug Name	Requirements/Limits
MIRENA IUD 21MCG/DAY	
NEXPLANON IMPL 68MG	
norelgestromin/ethinyl estradiol - xulane	
norethindrone tabs .35mg	
norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg	
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)	
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	
norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	
PARAGARD IUD T380A	
SKYLA IUD 13.5MG	
DIABETIC SUPPLIES	
ACCU-CHEK AVIVA PLUS STRIPS AND KITS	OTC
ACCU-CHEK GUIDE STRIPS AND KITS	OTC
ACCU-CHEK LANCETS / LANCING DEVICE	OTC
ACCU-CHEK SMARTVIEW STRIPS AND KITS	OTC
BD INSULIN SYRINGES AND NEEDLES	
BD INSULIN SYRINGES AND NEEDLES	OTC
DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM	
DEXCOM G7 MIS SNSR 15D	

Drug Name	Requirements/Limits
EMBECTA ULTRAFINE INSULIN SYRINGES (EXCEPT CERTAIN NDCS)	OTC
EMBECTA ULTRAFINE NEEDLES (EXCEPT CERTAIN NDCS)	OTC
KETO-DIASTIX TES	OTC
KETONE TEST TES	OTC
MULTISTIX 10 TES SG	OTC
OMNIPOD 5 INSULIN INFUSION PUMP	
OMNIPOD DASH INSULIN INFUSION PUMP	
TRUE METRIX STRIPS AND KITS	OTC
TRUEPLUS LANCETS	OTC
TWIIST KIT STARTER	
TWIIST REFIL KIT INFUSION	
ENDOMETRIOSIS	
danazol caps 50mg, 100mg, 200mg	
ORILISSA TABS 150MG, 200MG	PA
FERTILITY REGULATORS	
cetrorelix acetate kit .25mg	SP, PA
clomiphene citrate tabs 50mg	
FOLLISTIM AQ SOLN 300UNT/0.36ML, 600UNT/0.72ML, 900UNT/1.08ML	SP, PA, QL
GANIRELIX ACETATE SOSY 250MCG/0.5ML	SP, PA
MENOPUR SOLR 75UNIT	SP, PA
PREGNYL SOLR 10000UNIT	SP, PA
GLUCOCORTICOIDS	
dexamethasone elix .5mg/5ml; soln .5mg/5ml; tabs .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg; tbpk 1.5mg	
fludrocortisone acetate tabs .1mg	
hydrocortisone tabs 5mg, 10mg, 20mg	
MEDROL TABS 2MG	
methylprednisolone tabs 4mg, 8mg, 16mg, 32mg	
prednisolone soln 15mg/5ml	
prednisolone sodium phosphate soln 15mg/5ml, 25mg/5ml	
prednisone soln 5mg/5ml; tabs 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg; tbpk 5mg, 10mg	
GLUCOSE ELEVATING AGENTS	
BAQSIMI ONE PACK POWD 3MG/DOSE	
BAQSIMI TWO PACK POWD 3MG/DOSE	
glucagon solr 1mg	
GVOKE HYPOPEN 1-PACK SOAJ .5MG/0.1ML, 1MG/0.2ML	

Drug Name	Requirements/Limits
GVOKE HYPOPEN 2-PACK SOAJ .5MG/0.1ML, 1MG/0.2ML	
GVOKE KIT SOLN 1MG/0.2ML	
GVOKE PFS SOSY 1MG/0.2ML	
HEREDITARY TYROSINEMIA TYPE 1 AGENTS	
nitisinone caps 2mg, 5mg, 10mg, 20mg	SP, PA
ORFADIN CAPS 20MG; SUSP 4MG/ML	SP, PA
HUMAN GROWTH HORMONES	
HUMATROPE CART 6MG, 12MG, 24MG	SP, PA
NORDITROPIN SOPN 5MG/1.5ML, 10MG/1.5ML, 15MG/1.5ML, 30MG/3ML	SP, PA
SOGROYA SOPN 5MG/1.5ML, 10MG/1.5ML, 15MG/1.5ML	SP, PA, QL
LYSOSOMAL STORAGE DISORDERS	
NEXVIAZYME SOLR 100MG	SP, PA
LYSOSOMAL STORAGE DISORDERS - FABRY DISEASE	
ELFABRIO SOLN 5MG/2.5ML, 20MG/10ML	SP, PA
FABRAZYME SOLR 5MG, 35MG	SP, PA
GALAFOLD CAPS 123MG	SP, PA
LYSOSOMAL STORAGE DISORDERS - GAUCHER DISEASE	
CERDELGA CAPS 84MG	SP, PA, QL
CEREZYME SOLR 400UNIT	SP, PA, QL
MENOPAUSAL SYMPTOM AGENTS	
COMBIPATCH DIS	
estradiol ptwk .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr; tabs .5mg, 1mg, 2mg	
estradiol vaginal crm crea .1mg/gm	
estradiol/norethindrone	
IMVEXXY INST 4MCG, 10MCG	
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg	
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	
VAGIFEM TABS 10MCG	
MISCELLANEOUS	
betaine powder for oral solution	SP, PA
cabergoline tabs .5mg	
CYSTAGON CAPS 50MG, 150MG	SP, PA
raloxifene hcl tabs 60mg	
sapropterin dihydrochloride pack 100mg, 500mg; tabs 100mg	SP, PA

Drug Name	Requirements/Limits
STRENSIQ SOLN 18MG/0.45ML, 28MG/0.7ML, 40MG/ML, 80MG/0.8ML	SP, PA
XIAFLEX SOLR .9MG	SP, PA
PHOSPHATE BINDER AGENTS	
calcium acetate caps caps 667mg	
sevelamer carbonate pack .8gm, 2.4gm; tabs 800mg	
POTASSIUM-REMOVING AGENTS	
sodium polystyrene sulfonate susp 15gm/60ml	
PROGESTINS	
CRINONE GEL 4%, 8%	
medroxyprogesterone acetate tabs 2.5mg, 5mg, 10mg	
megestrol acetate susp 400mg/10ml	
norethindrone acetate tabs 5mg	
progesterone, micronized caps 100mg, 200mg	
THYROID AGENTS	
levothyroxine sodium tabs 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	
liothyronine sodium tabs 5mcg, 25mcg, 50mcg	
methimazole tabs 5mg, 10mg	
propylthiouracil tabs 50mg	
UREA CYCLE DISORDER	
carglumic acid tbso 200mg	SP, PA
PHEBURANE PLLT 483MG/GM	SP, PA, QL
sodium phenylbutyrate powd 3gm/tsp; tabs 500mg	SP, PA, QL
UTERINE FIBROIDS	
MYFEMBREE TAB	
ORIAHNN CAP	
VASOPRESSINS	
desmopressin acetate tabs .1mg, .2mg	
desmopressin acetate spray soln .01%	
desmopressin acetate spray refrigerated soln .01%	
VITAMIN D ANALOGS	
calcitriol caps .25mcg, .5mcg; soln 1mcg/ml	
doxercalciferol caps .5mcg, 1mcg, 2.5mcg	
paricalcitol caps 1mcg, 2mcg, 4mcg	
GASTROINTESTINAL	
ANTICHOLINERGICS	
dicyclomine hcl caps 10mg; soln 10mg/5ml; tabs 20mg	
glycopyrrolate soln 1mg/5ml	AGE

Drug Name	Requirements/Limits
hyoscyamine sulfate elix .125mg/5ml; soln .125mg/ml; tabs .125mg; tbdp .125mg	
ANTIDIARRHEALS	
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	
diphenoxylate w/ atropine tab 2.5-0.025 mg	
loperamide hcl caps 2mg	
ANTIEMETICS	
aprepitant caps 40mg, 80mg, 125mg	QL; PA*
aprepitant capsule therapy pack 80 & 125 mg	QL; PA*
dronabinol caps 2.5mg, 5mg, 10mg	
granisetron hcl tabs 1mg	
meclizine hcl tabs 12.5mg, 25mg, 50mg	
metoclopramide hcl tabs 5mg, 10mg	
ondansetron tbdp 4mg, 8mg	
ondansetron hcl soln 4mg/5ml; tabs 4mg, 8mg, 24mg	
prochlorperazine maleate tabs 5mg, 10mg	
promethazine hcl soln 6.25mg/5ml; tabs 12.5mg, 25mg, 50mg	
trimethobenzamide hcl caps 300mg	
H2-RECEPTOR ANTAGONISTS	
cimetidine soln 300mg/5ml; tabs 200mg, 300mg, 400mg, 800mg	
famotidine susr 40mg/5ml; tabs 20mg, 40mg	
INFLAMMATORY BOWEL DISEASE	
balsalazide disodium caps 750mg	
budesonide cpep 3mg	
budesonide (intrarectal) foam 2mg	
hydrocortisone (intrarectal) enem 100mg/60ml	
mesalamine cp24 .375gm; enem 4gm; supp 1000mg; tbec 1.2gm, 800mg	
sulfasalazine tabs 500mg; tbec 500mg	
UCERIS TB24 9MG	
IRRITABLE BOWEL SYNDROME WITH CONSTIPATION	
LINZESS CAPS 72MCG, 145MCG, 290MCG	PA
lubiprostone caps 8mcg, 24mcg	
IRRITABLE BOWEL SYNDROME WITH DIARRHEA	
alosetron hcl tabs .5mg, 1mg	
LAXATIVES	
CLENPIQ SOL	
lactulose soln 10gm/15ml	

Drug Name	Requirements/Limits
peg-3350/electrolytes	Listing does not include generics for MOVIPREP
MISCELLANEOUS	
IQIRVO TABS 80MG	SP, PA, QL
misoprostol tabs 100mcg, 200mcg	
SUCRAID SOLN 8500UNIT/ML	PA, QL
SYMPROIC TABS .2MG	
ursodiol caps 300mg; tabs 250mg, 500mg	
PANCREATIC ENZYMES	
PANCREAZE CAP 2600UNIT	
PANCREAZE CAP 4200UNIT	
PANCREAZE CAP 10500UNT	
PANCREAZE CAP 16800UNT	
PANCREAZE CAP 21000UNT	
PANCREAZE CAP 37000	
ZENPEP CAP 3000UNIT	
ZENPEP CAP 5000UNIT	
ZENPEP CAP 10000UNT	
ZENPEP CAP 15000UNT	
ZENPEP CAP 20000UNT	
ZENPEP CAP 25000UNT	
ZENPEP CAP 40000UNT	
ZENPEP CAP 60000UNT	
PROTON PUMP INHIBITORS	
lansoprazole delayed-rel cpdr 15mg, 30mg	
omeprazole delayed-rel cpdr 10mg, 20mg, 40mg	
pantoprazole delayed-rel tabs tbec 20mg, 40mg	
RECTAL, CORTICOSTEROIDS	
hydrocortisone (rectal) crea 2.5%	
GENITOURINARY	
BENIGN PROSTATIC HYPERPLASIA	
alfuzosin ext-rel tb24 10mg	
doxazosin mesylate tabs 1mg, 2mg, 4mg, 8mg	
finasteride tabs 5mg	
tamsulosin hcl caps .4mg	
terazosin hcl caps 1mg, 2mg, 5mg, 10mg	
CONTRACEPTIVES	
PHEXXI GEL	
MISCELLANEOUS	
bethanechol chloride tabs 5mg, 10mg, 25mg, 50mg	
FILSPARI TABS 200MG, 400MG	SP, PA, QL

Drug Name	Requirements/Limits
potassium citrate (alkalinizer) tbcr 10meq, 15meq, 540mg	
VANRAFIA TABS .75MG	SP, PA, QL
URINARY ANTISPASMODICS	
mirabegron tb24 25mg, 50mg	
oxybutynin chloride soln 5mg/5ml; tabs 5mg	
oxybutynin ext-rel tb24 5mg, 10mg, 15mg	
tolterodine tartrate tabs 1mg, 2mg	
trospium tabs 20mg	
VAGINAL ANTI-INFECTIVES	
clindamycin cream crea 2%	
metronidazole vaginal gel gel .75%	
terconazole vaginal crea .4%, .8%; supp 80mg	
HEMATOLOGIC	
ANTICOAGULANTS	
dabigatran etexilate mesylate caps 75mg, 110mg, 150mg	
ELIQUIS CPSP .15MG; TABS 2.5MG, 5MG; TBSO .5MG	
ELIQUIS STARTER PACK TBPK 5MG	
enoxaparin sodium soln 300mg/3ml; sosy 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	
fondaparinux sodium soln 2.5mg/0.5ml, 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	
rivaroxaban susr 1mg/ml; tabs 2.5mg	
warfarin sodium tabs 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	
XARELTO TABS 10MG, 15MG, 20MG	
XARELTO STAR TAB 15/20MG	
BLEEDING DISORDERS AGENTS	
SEVENFACT SOLR 1MG, 2MG, 5MG	SP, PA
WILATE INJ	SP, PA
HEMATOPOIETIC GROWTH FACTORS	
ARANESP ALBUMIN FREE SOLN 25MCG/ML, 40MCG/ML, 60MCG/ML, 100MCG/ML, 200MCG/ML; SOSY 10MCG/0.4ML, 25MCG/0.42ML, 40MCG/0.4ML, 60MCG/0.3ML, 100MCG/0.5ML, 150MCG/0.3ML, 200MCG/0.4ML, 300MCG/0.6ML, 500MCG/ML	SP, PA
FULPHILA SOSY 6MG/0.6ML	SP, PA, QL
NIVESTYM SOLN 300MCG/ML, 480MCG/1.6ML; SOSY 300MCG/0.5ML, 480MCG/0.8ML	SP, PA
NYVEPRIA SOSY 6MG/0.6ML	SP, PA, QL

Drug Name	Requirements/Limits
PROCRIT SOLN 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML, 10000UNIT/ML, 20000UNIT/ML, 40000UNIT/ML	SP, PA
RETACRIT SOLN 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML, 10000UNIT/ML, 20000UNIT/ML, 40000UNIT/ML	SP, PA
HEMOPHILIA A AGENTS	
ADYNOVATE SOLR 250UNIT, 500UNIT, 750UNIT, 1000UNIT, 1500UNIT, 2000UNIT, 3000UNIT	SP, PA
AFSTYLA KIT 250UNIT, 500UNIT, 1000UNIT, 1500UNIT, 2000UNIT, 2500UNIT, 3000UNIT	SP, PA
ALTUVIIIO SOLR 250UNIT, 500UNIT, 1000UNIT, 2000UNIT, 3000UNIT, 4000UNIT	SP, PA
ELOCTATE SOLR 250UNIT, 500UNIT, 750UNIT, 1000UNIT, 1500UNIT, 2000UNIT, 3000UNIT, 4000UNIT, 5000UNIT, 6000UNIT	SP, PA
ESPEROCT SOLR 500UNIT, 1000UNIT, 1500UNIT, 2000UNIT, 3000UNIT, 4000UNIT	SP, PA
HEMLIBRA SOLN 12MG/0.4ML, 30MG/ML, 60MG/0.4ML, 105MG/0.7ML, 150MG/ML, 300MG/2ML	SP, PA
JIVI SOLR 500UNIT, 1000UNIT, 2000UNIT, 3000UNIT, 4000UNIT	SP, PA
NUWIQ KIT 250UNIT, 500UNIT, 1000UNIT, 1500UNIT, 2000UNIT, 2500UNIT, 3000UNIT, 4000UNIT; SOLR 250UNIT, 500UNIT, 1000UNIT, 1500UNIT, 2000UNIT, 2500UNIT, 3000UNIT, 4000UNIT	SP, PA
XYNTHA KIT 250UNIT, 500UNIT, 1000UNIT, 2000UNIT	SP, PA
XYNTHA SOLOFUSE KIT 3000UNIT	SP, PA
HEMOPHILIA B AGENTS	
BENEFIX KIT 250UNIT, 500UNIT, 1000UNIT, 2000UNIT, 3000UNIT	SP, PA
IDELVION SOLR 250UNIT, 500UNIT, 1000UNIT, 2000UNIT, 3500UNIT	SP, PA
REBINYN SOLR 500UNIT, 1000UNIT, 2000UNIT, 3000UNIT	SP, PA
MISCELLANEOUS	
anagrelide hcl caps .5mg, 1mg	
cilostazol tabs 50mg, 100mg	
PAROXYSMAL NOCTURNAL HEMOGLOBINURIA (PNH) AGENTS	
EMPAVELI SOLN 1080MG/20ML	SP, PA, QL
EPYSQLI SOLN 300MG/30ML	SP, PA, QL

Drug Name	Requirements/Limits
PLATELET AGGREGATION INHIBITORS	
clopidogrel bisulfate tabs 75mg, 300mg	
dipyridamole tabs 25mg, 50mg, 75mg	
dipyridamole ext-rel/aspirin	
prasugrel hcl tabs 5mg, 10mg	
ticagrelor tabs 60mg, 90mg	
SICKLE CELL DISEASE	
ADAKVEO SOLN 100MG/10ML	SP, PA
glutamine (sickle cell) pack 5gm	SP, PA, QL
SIKLOS TABS 100MG, 1000MG	
THROMBOCYTOPENIA AGENTS	
ALVAIZ TABS 9MG, 18MG, 36MG, 54MG	SP, PA, QL
DOPTELET TABS 20MG	SP, PA, QL
DOPTELET SPRINKLE CPSP 10MG	SP, PA, QL
IMMUNOLOGIC AGENTS	
ALLERGENIC EXTRACTS	
ORALAIR SUB 300 IR	PA
ALOPECIA AREATA	
LITFULO CAPS 50MG	SP, PA, QL
OLUMIANT TABS 1MG, 2MG, 4MG	SP, PA, QL
AUTOIMMUNE AGENTS (PHYSICIAN-ADMINISTERED)	
AVSOLA SOLR 100MG	SP, PA, QL
ENTYVIO INTRAVENOUS SOLR 300MG	SP, PA, QL
ILUMYA SOSY 100MG/ML	SP, PA, QL
PYZCHIVA INTRAVENOUS SOLN 130MG/26ML	SP, PA, QL
REMICADE SOLR 100MG	SP, PA, QL
SIMPONI ARIA SOLN 50MG/4ML	SP, PA, QL
SKYRIZI INTRAVENOUS SOLN 600MG/10ML	SP, PA, QL
STELARA INTRAVENOUS SOLN 130MG/26ML	SP, PA, QL
TREMFYA INTRAVENOUS SOLN 200MG/20ML	SP, PA, QL
YESINTEK INTRAVENOUS SOLN 130MG/26ML	SP, PA, QL
AUTOIMMUNE AGENTS (SELF-ADMINISTERED), ALL OTHER CONDITIONS	
ADALIMUMAB-ADAZ SOAJ 40MG/0.4ML, 80MG/0.8ML; SOSY 10MG/0.1ML, 20MG/0.2ML, 40MG/0.4ML	SP, PA, QL
ENBREL SOAJ 50MG/ML; SOCT 50MG/ML; SOLN 25MG/0.5ML; SOSY 25MG/0.5ML, 50MG/ML	SP, PA, QL
HADLIMA SOSY 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HADLIMA PUSHTOUCH SOAJ 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL

Drug Name	Requirements/Limits
HYRIMOZ (EXCEPT NDCS 61314-XXXX-XX) SOAJ 40MG/0.4ML, 40MG/0.8ML, 80MG/0.8ML; SOSY 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
AUTOIMMUNE AGENTS (SELF-ADMINISTERED), ANKYLOSING SPONDYLITIS	
ADALIMUMAB-ADAZ SOAJ 40MG/0.4ML; SOSY 10MG/0.1ML, 20MG/0.2ML, 40MG/0.4ML	SP, PA, QL
COSENTYX SUBCUTANEOUS SOAJ 150MG/ML, 300MG/2ML; SOSY 75MG/0.5ML, 150MG/ML	SP, PA, QL
ENBREL SOAJ 50MG/ML; SOCT 50MG/ML; SOLN 25MG/0.5ML; SOSY 25MG/0.5ML, 50MG/ML	SP, PA, QL
HADLIMA SOSY 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HADLIMA PUSHTOUCH SOAJ 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HYRIMOZ (EXCEPT NDCS 61314-XXXX-XX) SOAJ 40MG/0.4ML, 40MG/0.8ML; SOSY 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
RINVOQ TB24 15MG	SP, PA, QL
tofacitinib citrate tabs 5mg; tb24 11mg	SP, PA, QL
AUTOIMMUNE AGENTS (SELF-ADMINISTERED), CROHN'S DISEASE	
ADALIMUMAB-ADAZ SOAJ 40MG/0.4ML, 80MG/0.8ML; SOSY 10MG/0.1ML, 20MG/0.2ML, 40MG/0.4ML	SP, PA, QL
ENTYVIO PEN SOAJ 108MG/0.68ML	SP, PA, QL
HADLIMA SOSY 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HADLIMA PUSHTOUCH SOAJ 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HYRIMOZ (EXCEPT NDCS 61314-XXXX-XX) SOAJ 40MG/0.4ML, 40MG/0.8ML, 80MG/0.8ML; SOSY 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
PYZCHIVA (EXCEPT NDCS 61314-XXXX-XX) SOAJ 45MG/0.5ML, 90MG/ML; SOSY 45MG/0.5ML, 90MG/ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
RINVOQ TB24 15MG, 30MG, 45MG	SP, PA, QL
SKYRIZI SOCT 180MG/1.2ML, 360MG/2.4ML	SP, PA, QL

Drug Name	Requirements/Limits
TREMFYA SOAJ 200MG/2ML; SOPN 100MG/ML; SOSY 100MG/ML, 200MG/2ML	SP, PA, QL
TREMFYA PEN SOAJ 100MG/ML	SP, PA, QL
YESINTEK SOLN 45MG/0.5ML; SOSY 45MG/0.5ML, 90MG/ML	SP, PA, QL
AUTOIMMUNE AGENTS (SELF-ADMINISTERED), HIDRADENITIS SUPPURATIVA	
ADALIMUMAB-ADAZ SOAJ 40MG/0.4ML, 80MG/0.8ML; SOSY 10MG/0.1ML, 20MG/0.2ML, 40MG/0.4ML	SP, PA, QL
COSENTYX SUBCUTANEOUS SOAJ 150MG/ML, 300MG/2ML; SOSY 75MG/0.5ML, 150MG/ML	SP, PA, QL
HADLIMA SOSY 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HADLIMA PUSHTOUCH SOAJ 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HYRIMOZ (EXCEPT NDCS 61314-XXXX-XX) SOAJ 40MG/0.4ML, 40MG/0.8ML, 80MG/0.8ML; SOSY 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
AUTOIMMUNE AGENTS (SELF-ADMINISTERED), NON-RADIOGRAPHIC AXIAL SPONDYLOARTHRITIS	
CIMZIA PSKT 200MG/ML	SP, PA, QL
COSENTYX SUBCUTANEOUS SOAJ 150MG/ML, 300MG/2ML; SOSY 75MG/0.5ML, 150MG/ML	SP, PA, QL
RINVOQ TB24 15MG	SP, PA, QL
AUTOIMMUNE AGENTS (SELF-ADMINISTERED), PSORIASIS	
ADALIMUMAB-ADAZ SOAJ 40MG/0.4ML, 80MG/0.8ML; SOSY 10MG/0.1ML, 20MG/0.2ML, 40MG/0.4ML	SP, PA, QL
BIMZELX SOAJ 160MG/ML, 320MG/2ML; SOSY 160MG/ML, 320MG/2ML	SP, PA, QL
HADLIMA SOSY 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HADLIMA PUSHTOUCH SOAJ 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HYRIMOZ (EXCEPT NDCS 61314-XXXX-XX) SOAJ 40MG/0.4ML, 40MG/0.8ML, 80MG/0.8ML; SOSY 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
OTEZLA TABS 20MG, 30MG	SP, PA, QL
OTEZLA TAB 10/20	SP, PA, QL
OTEZLA TAB 10/20/30	SP, PA, QL

Drug Name	Requirements/Limits
OTEZLA XR TB24 75MG	SP, PA, QL
OTEZLA/XR TAB 28 DAY	SP, PA, QL
PYZCHIVA (EXCEPT NDCS 61314-XXXX-XX) SOAJ 45MG/0.5ML, 90MG/ML; SOSY 45MG/0.5ML, 90MG/ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
SKYRIZI SOAJ 150MG/ML; SOSY 150MG/ML	SP, PA, QL
SOTYKTU TABS 6MG	SP, PA, QL
TREMFYA SOPN 100MG/ML; SOSY 100MG/ML	SP, PA, QL
TREMFYA PEN SOAJ 100MG/ML	SP, PA, QL
YESINTEK SOLN 45MG/0.5ML; SOSY 45MG/0.5ML, 90MG/ML	SP, PA, QL
AUTOIMMUNE AGENTS (SELF-ADMINISTERED), PSORIATIC ARTHRITIS	
ADALIMUMAB-ADAZ SOAJ 40MG/0.4ML; SOSY 10MG/0.1ML, 20MG/0.2ML, 40MG/0.4ML	SP, PA, QL
COSENTYX SUBCUTANEOUS SOAJ 150MG/ML, 300MG/2ML; SOSY 75MG/0.5ML, 150MG/ML	SP, PA, QL
ENBREL SOAJ 50MG/ML; SOCT 50MG/ML; SOLN 25MG/0.5ML; SOSY 25MG/0.5ML, 50MG/ML	SP, PA, QL
HADLIMA SOSY 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HADLIMA PUSHTOUCH SOAJ 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HYRIMOZ (EXCEPT NDCS 61314-XXXX-XX) SOAJ 40MG/0.4ML, 40MG/0.8ML; SOSY 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
OTEZLA TABS 20MG, 30MG	SP, PA, QL
OTEZLA TAB 10/20	SP, PA, QL
OTEZLA TAB 10/20/30	SP, PA, QL
OTEZLA XR TB24 75MG	SP, PA, QL
OTEZLA/XR TAB 28 DAY	SP, PA, QL
PYZCHIVA (EXCEPT NDCS 61314-XXXX-XX) SOAJ 45MG/0.5ML, 90MG/ML; SOSY 45MG/0.5ML, 90MG/ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
RINVOQ SOLN 1MG/ML; TB24 15MG	SP, PA, QL
SKYRIZI SOAJ 150MG/ML; SOSY 150MG/ML	SP, PA, QL
tofacitinib citrate soln 1mg/ml; tabs 5mg; tb24 11mg	SP, PA, QL
TREMFYA SOPN 100MG/ML; SOSY 100MG/ML	SP, PA, QL
TREMFYA PEN SOAJ 100MG/ML	SP, PA, QL

Drug Name	Requirements/Limits
YESINTEK SOLN 45MG/0.5ML; SOSY 45MG/0.5ML, 90MG/ML	SP, PA, QL
AUTOIMMUNE AGENTS (SELF-ADMINISTERED), RHEUMATOID ARTHRITIS	
ADALIMUMAB-ADAZ SOAJ 40MG/0.4ML, 80MG/0.8ML; SOSY 10MG/0.1ML, 20MG/0.2ML, 40MG/0.4ML	SP, PA, QL
ENBREL SOAJ 50MG/ML; SOCT 50MG/ML; SOLN 25MG/0.5ML; SOSY 25MG/0.5ML, 50MG/ML	SP, PA, QL
HADLIMA SOSY 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HADLIMA PUSHTOUCH SOAJ 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HYRIMOZ (EXCEPT NDCS 61314-XXXX-XX) SOAJ 40MG/0.4ML, 40MG/0.8ML, 80MG/0.8ML; SOSY 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
KEVZARA SOAJ 150MG/1.14ML, 200MG/1.14ML; SOSY 150MG/1.14ML, 200MG/1.14ML	SP, PA, QL
ORENCIA CLICKJECT SOAJ 125MG/ML	SP, PA, QL
ORENCIA SUBCUTANEOUS SOSY 125MG/ML	SP, PA, QL
RINVOQ TB24 15MG	SP, PA, QL
tofacitinib citrate tabs 5mg; tb24 11mg	SP, PA, QL
AUTOIMMUNE AGENTS (SELF-ADMINISTERED), ULCERATIVE COLITIS	
ADALIMUMAB-ADAZ SOAJ 40MG/0.4ML, 80MG/0.8ML; SOSY 10MG/0.1ML, 20MG/0.2ML, 40MG/0.4ML	SP, PA, QL
ENTYVIO PEN SOAJ 108MG/0.68ML	SP, PA, QL
HADLIMA SOSY 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HADLIMA PUSHTOUCH SOAJ 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL
HYRIMOZ (EXCEPT NDCS 61314-XXXX-XX) SOAJ 40MG/0.4ML, 40MG/0.8ML, 80MG/0.8ML; SOSY 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
PYZCHIVA (EXCEPT NDCS 61314-XXXX-XX) SOAJ 45MG/0.5ML, 90MG/ML; SOSY 45MG/0.5ML, 90MG/ML	SP, PA, QL; Sandoz manufactured NDCs (61314-XXXX-XX) are excluded. Cordavis manufactured NDCs are preferred.
RINVOQ TB24 15MG, 30MG, 45MG	SP, PA, QL
SKYRIZI SOCT 180MG/1.2ML, 360MG/2.4ML	SP, PA, QL
tofacitinib citrate tabs 5mg, 10mg; tb24 11mg, 22mg	SP, PA, QL

Drug Name	Requirements/Limits
TREMFYA SOAJ 200MG/2ML; SOPN 100MG/ML; SOSY 100MG/ML, 200MG/2ML	SP, PA, QL
TREMFYA PEN SOAJ 100MG/ML	SP, PA, QL
VELSIPITY TABS 2MG	SP, PA, QL
YESINTEK SOLN 45MG/0.5ML; SOSY 45MG/0.5ML, 90MG/ML	SP, PA, QL
ZEPOSIA CAPS .92MG	SP, PA, QL
ZEPOSIA CAP STR KIT	SP, PA, QL
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)	
hydroxychloroquine sulfate tabs 200mg	
leflunomide tabs 10mg, 20mg	
methotrexate sodium tabs 2.5mg	
RASUVO SOAJ 7.5MG/0.15ML, 10MG/0.2ML, 12.5MG/0.25ML, 15MG/0.3ML, 17.5MG/0.35ML, 20MG/0.4ML, 22.5MG/0.45ML, 25MG/0.5ML, 30MG/0.6ML	SP, PA, QL
HEREDITARY ANGIOEDEMA	
icatibant acetate sosy 30mg/3ml	SP, PA, QL
ORLADEYO CAPS 110MG, 150MG; PACK 72MG, 96MG, 108MG, 132MG	SP, PA, QL
RUCONEST SOLR 2100UNIT	SP, PA, QL
TAKHZYRO SOLN 300MG/2ML; SOSY 150MG/ML, 300MG/2ML	SP, PA, QL
IMMUNOGLOBULIN	
CUTAQUIG SOLN 1GM/6ML, 1.65GM/10ML, 2GM/12ML, 3.3GM/20ML, 4GM/24ML, 8GM/48ML	SP, PA
GAMMAGARD LIQUID SOLN 1GM/10ML, 2.5GM/25ML, 5GM/50ML, 10GM/100ML, 20GM/200ML, 30GM/300ML	SP, PA
GAMUNEX-C SOLN 1GM/10ML, 2.5GM/25ML, 5GM/50ML, 10GM/100ML, 20GM/200ML, 40GM/400ML	SP, PA
HIZENTRA SOLN 1GM/5ML, 2GM/10ML, 4GM/20ML, 10GM/50ML; SOSY 1GM/5ML, 2GM/10ML, 4GM/20ML	SP, PA
PRIVIGEN SOLN 5GM/50ML, 10GM/100ML, 20GM/200ML, 40GM/400ML	SP, PA
XEMBIFY SOLN 1GM/5ML, 2GM/10ML, 4GM/20ML, 10GM/50ML	SP, PA
IMMUNOSUPPRESSANTS	
ASTAGRAF XL CP24 .5MG, 1MG, 5MG	
azathioprine tabs 50mg	

Drug Name	Requirements/Limits
BENLYSTA SOAJ 200MG/ML; SOLR 120MG, 400MG; SOSY 200MG/ML	SP, PA, QL
CELLCEPT CAPS 250MG; SUSR 200MG/ML; TABS 500MG	
CELLCEPT INTRAVENOUS SOLR 500MG	
cyclosporine caps 25mg, 100mg	
cyclosporine modified (for microemulsion) caps 25mg, 100mg; soln 100mg/ml	
ENVARSUS XR TB24 .75MG, 1MG, 4MG	
everolimus (immunosuppressant) tabs .25mg, .5mg, .75mg, 1mg	
mycophenolate mofetil caps 250mg; susr 200mg/ml; tabs 500mg	
mycophenolate sodium tbec 180mg, 360mg	
MYFORTIC TBEC 180MG, 360MG	
NEORAL CAPS 25MG, 100MG; SOLN 100MG/ML	
NULOJIX SOLR 250MG	
PROGRAF CAPS .5MG, 1MG, 5MG; PACK .2MG, 1MG	
SANDIMMUNE CAPS 25MG, 100MG; SOLN 50MG/ML	
sirolimus soln 1mg/ml; tabs .5mg, 1mg, 2mg	
tacrolimus caps .5mg, 1mg, 5mg	
ZORTRESS TABS .25MG, .5MG, .75MG, 1MG	
MISCELLANEOUS	
BEYFORTUS SOSY 50MG/0.5ML, 100MG/ML	
ILARIS SOLN 150MG/ML	SP, PA
NUTRITIONAL/SUPPLEMENTS	
ELECTROLYTES	
potassium chloride cpcr 8meq, 10meq; soln 10%, 20%; tbcr 8meq, 10meq, 20meq	
sodium fluoride soln .5mg/ml; tabs .5mg, 1mg	
PRENATAL VITAMINS	
prenat w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	
prenatal vit w/ fe fum-methylfolate-fa tab 27-0.6-0.4 mg	
prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg	
VITAMINS	
cyanocobalamin soln 1000mcg/ml	
ergocalciferol caps 1.25mg	
folic acid tabs 1mg	
pediatric multiple vitamin w/ fluoride susp 0.25 mg/ml	
pediatric multiple vitamins w/ fl-fe drops 0.25-10 mg/ml	
pediatric multiple vitamins w/ fluoride chew tab 0.5 mg	

Drug Name	Requirements/Limits
pediatric multiple vitamins w/ fluoride chew tab 0.25 mg	
pediatric multiple vitamins w/ fluoride chew tab 1 mg	
pediatric multiple vitamins w/ fluoride susp 0.5 mg/ml	
pediatric vitamins acd w/ fluoride soln 0.5 mg/ml	
phytonadione tabs 5mg	
OPHTHALMIC	
ANTI-INFECTIVE/ANTI-INFLAMMATORY	
bacitracin-polymyxin-neomycin-hc ophth oint 1%	
neomycin-polymyxin-dexamethasone ophth oint 0.1%	
neomycin-polymyxin-dexamethasone ophth susp 0.1%	
neomycin-polymyxin-hc ophth susp	
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	
tobramycin-dexamethasone ophth susp 0.3-0.1%	
ANTI-INFECTIVES	
bacitracin (ophthalmic) oint 500unit/gm	
bacitracin-polymyxin b ophth oint	
ciprofloxacin hcl (ophth) soln .3%	
erythromycin (ophth) oint 5mg/gm	
gentamicin sulfate (ophth) soln .3%	
moxifloxacin hcl (ophth) soln .5%	
NATACYN SUSP 5%	
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	
ofloxacin (ophth) soln .3%	
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	
sulfacetamide sodium (ophth) soln 10%	
tobramycin (ophth) soln .3%	
trifluridine soln 1%	
XDEMVY SOLN .25%	PA, QL
ANTI-INFLAMMATORIES	
dexamethasone sodium phosphate (ophth) soln .1%	
diclofenac sodium (ophth) soln .1%	
fluorometholone (ophth) susp .1%	
ketorolac tromethamine (ophth) soln .5%	
loteprednol etabonate susp .5%	
prednisolone acetate (ophth) susp 1%	
PREDNISOLONE SODIUM PHOSP SOLN 1%	
ANTIALLERGICS	
azelastine hcl (ophth) soln .05%	

Drug Name	Requirements/Limits
cromolyn sodium (ophth) soln 4%	
ANTIGLAUCOMA BETA-BLOCKERS	
betaxolol hcl (ophth) soln .5%	
timolol maleate (ophth) solg .25%, .5%; soln .25%, .5%	
ANTIGLAUCOMA COMBINATION AGENTS	
dorzolamide hcl-timolol maleate ophth soln 2-0.5%	
CARBONIC ANHYDRASE INHIBITORS	
dorzolamide hcl soln 2%	
DRY EYE DISEASE	
RESTASIS EMUL .05%	PA, QL
VEVYE SOLN .1%	PA, QL
PROSTAGLANDINS	
bimatoprost soln .03%	
latanoprost soln .005%	
RETINAL DISORDERS	
BYOOVIZ SOLN .5MG/0.05ML	SP, PA
SYMPATHOMIMETICS	
brimonidine tartrate soln .15%, .2%	
RESPIRATORY	
ALPHA-1 ANTITRYPSIN DEFICIENCY AGENTS	
ARALAST NP SOLR 500MG, 1000MG	SP, PA
GLASSIA SOLN 4GM/200ML, 5GM/250ML, 1000MG/50ML	SP, PA
ZEMAIRA SOLR 1000MG, 4000MG, 5000MG	SP, PA
ANAPHYLAXIS TREATMENT AGENTS	
epinephrine (anaphylaxis) soaj .15mg/0.15ml, .3mg/0.3ml	QL; PA*, Listing does not include certain NDCs
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS	
ANORO ELLIPT AER 62.5-25	QL
BEVESPI AER 9-4.8MCG	QL
ipratropium/albuterol inhalation soln	QL
ANTICHOLINERGIC/BETA AGONIST/STEROID COMBINATIONS	
TRELEGY AER 100MCG	QL
TRELEGY AER 200MCG	QL
ANTICHOLINERGICS	
ipratropium bromide (nasal) soln .03%, .06%	
ipratropium inhalation solution soln .02%	QL
SPIRIVA AERS 1.25MCG/ACT, 2.5MCG/ACT	QL
SPIRIVA HANDIHALER CAPS 18MCG	QL
YUPELRI NEBU 175MCG/3ML	QL

Drug Name	Requirements/Limits
ANTIHISTAMINES	
azelastine hcl soln .15%, 137mcg/spray	
cyproheptadine hcl syrp 2mg/5ml; tabs 4mg	
hydroxyzine hcl syrp 10mg/5ml; tabs 10mg, 25mg, 50mg	
BETA AGONISTS	
albuterol inhalation soln nebu .083%, .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	QL
albuterol sulfate, cfc-free aerosol aers 108mcg/act	QL; Listing does not include certain NDCs
formoterol inhalation solution nebu 20mcg/2ml	QL
levalbuterol nebulizer soln concentrate nebu .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	QL
levalbuterol, cfc-free aerosol aero 45mcg/act	QL
STRIVERDI RESPIMAT AERS 2.5MCG/ACT	QL
CHRONIC OBSTRUCTIVE PULMONARY DISEASE	
DUPIXENT SOAJ 300MG/2ML; SOSY 300MG/2ML	SP, PA, QL
NUCALA SOAJ 100MG/ML; SOSY 40MG/0.4ML, 100MG/ML	SP, PA, QL
CHRONIC RHINOSINUSITIS WITH NASAL POLYPS	
DUPIXENT SOAJ 300MG/2ML; SOSY 300MG/2ML	SP, PA, QL
NUCALA SOAJ 100MG/ML; SOSY 40MG/0.4ML, 100MG/ML	SP, PA, QL
XOLAIR SOAJ 75MG/0.5ML, 150MG/ML, 300MG/2ML; SOLR 150MG; SOSY 75MG/0.5ML, 150MG/ML, 300MG/2ML	SP, PA, QL
CHRONIC SPONTANEOUS URTICARIA	
DUPIXENT SOAJ 200MG/1.14ML, 300MG/2ML; SOSY 200MG/1.14ML, 300MG/2ML	SP, PA, QL
XOLAIR SOAJ 150MG/ML, 300MG/2ML; SOLR 150MG; SOSY 150MG/ML, 300MG/2ML	SP, PA, QL
COLD/COUGH	
benzonatate caps 100mg, 200mg	Listing does not include certain NDCs.
hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg	QL; PA*
promethazine w/ codeine syrup 6.25-10 mg/5ml	QL; PA*
promethazine-dm syrup 6.25-15 mg/5ml	
CYSTIC FIBROSIS	
ALYFTREK TAB	SP, PA, QL
ALYFTREK TAB 4-20-50	SP, PA, QL

Drug Name	Requirements/Limits
KALYDECO PACK 5.8MG, 13.4MG, 25MG, 50MG, 75MG; TABS 150MG	SP, PA, QL
PULMOZYME SOLN 2.5MG/2.5ML	SP, PA, QL
SYMDEKO TAB 50-75MG	SP, PA, QL
SYMDEKO TAB 100-150	SP, PA, QL
tobramycin nebu 300mg/4ml, 300mg/5ml	SP, PA, QL
TRIKAFTA PAK 59.5MG	SP, PA, QL
TRIKAFTA PAK 75MG	SP, PA, QL
TRIKAFTA TAB	SP, PA, QL
EOSINOPHILIC ESOPHAGITIS	
DUPIXENT SOAJ 200MG/1.14ML, 300MG/2ML; SOSY 200MG/1.14ML, 300MG/2ML	SP, PA, QL
LEUKOTRIENE RECEPTOR ANTAGONISTS	
montelukast sodium chew 4mg, 5mg; pack 4mg; tabs 10mg	
NASAL STEROIDS	
flunisolide spray soln .025%	
fluticasone spray susp 50mcg/act	
PULMONARY FIBROSIS AGENTS	
nintedanib esylate caps 100mg, 150mg	SP, PA, QL
pirfenidone caps 267mg; tabs 267mg, 801mg	SP, PA, QL
SEVERE ASTHMA AGENTS	
DUPIXENT SOAJ 200MG/1.14ML, 300MG/2ML; SOSY 200MG/1.14ML, 300MG/2ML	SP, PA, QL
FASENRA SOSY 10MG/0.5ML, 30MG/ML	SP, PA, QL
FASENRA PEN SOAJ 30MG/ML	SP, PA, QL
NUCALA SOAJ 100MG/ML; SOSY 40MG/0.4ML, 100MG/ML	SP, PA, QL
TEZSPIRE SOAJ 210MG/1.91ML; SOSY 210MG/1.91ML	SP, PA, QL
XOLAIR SOAJ 75MG/0.5ML, 150MG/ML, 300MG/2ML; SOLR 150MG; SOSY 75MG/0.5ML, 150MG/ML, 300MG/2ML	SP, PA, QL
STEROID INHALANTS	
ASMANEX HFA AERO 50MCG/ACT, 100MCG/ACT, 200MCG/ACT	QL
budesonide inh susp susp .25mg/2ml, .5mg/2ml, 1mg/2ml	QL; PA*
PULMICORT FLEXHALER AEPB 90MCG/ACT, 180MCG/ACT	QL
STEROID/BETA-AGONIST COMBINATIONS	
AIRSUPRA AER 90-80MCG	QL

Drug Name	Requirements/Limits
breyna 80-4.5 mcg/act	QL
breyna 160-4.5 mcg/act	QL
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act	QL
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act	QL
fluticasone-salmeterol aer powder ba 100-50 mcg/act	QL; Listing does not include certain NDCs
fluticasone-salmeterol aer powder ba 250-50 mcg/act	QL; Listing does not include certain NDCs
fluticasone-salmeterol aer powder ba 500-50 mcg/act	QL; Listing does not include certain NDCs
wixela inhub 100-50 mcg/act	QL
wixela inhub 250-50 mcg/act	QL
wixela inhub 500-50 mcg/act	QL
XANTHINES	
theophylline tb12 300mg, 450mg; tb24 400mg, 600mg	
TOPICAL	
DERMATOLOGY, ACNE	
clindamycin gel gel 1%	QL; PA*, Listing does not include certain NDCs
clindamycin lotion lotn 1%	QL; PA*
clindamycin solution soln 1%	QL; PA*
erythromycin gel 2% gel 2%	QL; PA*
erythromycin soln soln 2%	QL; PA*
erythromycin/benzoyl peroxide	QL; PA*
isotretinoin caps 10mg, 20mg, 30mg, 40mg	
sulfacetamide lotion 10% lotn 10%	
tretinoin crea .025%, .05%, .1%; gel .01%, .025%	
DERMATOLOGY, ACTINIC KERATOSIS	
fluorouracil (topical) crea 5%; soln 2%, 5%	
imiquimod crea 5%	
DERMATOLOGY, ANTIBIOTICS	
gentamicin sulfate (topical) crea .1%; oint .1%	
mupirocin oint 2%	QL; PA*
silver sulfadiazine crea 1%	
DERMATOLOGY, ANTIFUNGALS	
ciclopirox gel .77%; sham 1%	QL; PA*
ciclopirox olamine crea .77%; susp .77%	QL; PA*
clotrimazole (topical) crea 1%; soln 1%	QL; PA*
econazole nitrate crea 1%	QL; PA*

Drug Name	Requirements/Limits
ketoconazole (topical) crea 2%	QL; PA*
nystatin (topical) crea 100000unit/gm; oint 100000unit/gm; powd 100000unit/gm	QL; PA*
DERMATOLOGY, ANTIPSORIATICS	
calcipotriene oint .005%; soln .005%	
ENSTILAR AER	
DERMATOLOGY, ANTISEBORRHEICS	
ketoconazole (topical) sham 2%	QL; PA*
selenium sulfide lotn 2.5%	
DERMATOLOGY, ATOPIC DERMATITIS	
CIBINQO TABS 50MG, 100MG, 200MG	SP, PA, QL
DUPIXENT SOAJ 200MG/1.14ML, 300MG/2ML; SOSY 200MG/1.14ML, 300MG/2ML	SP, PA, QL
EBGLYSS SOAJ 250MG/2ML; SOSY 250MG/2ML	SP, PA, QL
NEMLUVIO AUIJ 30MG	SP, PA, QL
pimecrolimus crea 1%	
RINVOQ TB24 15MG, 30MG	SP, PA, QL
tacrolimus (topical) oint .03%, .1%	
DERMATOLOGY, CORTICOSTEROIDS	
alclometasone dipropionate crea .05%; oint .05%	QL; PA*
betamethasone dipropionate (topical) crea .05%; lotn .05%	QL; PA*
betamethasone dipropionate augmented crea .05%; gel .05%; lotn .05%; oint .05%	QL; PA*
betamethasone valerate crea .1%; lotn .1%; oint .1%	QL; PA*
clobetasol propionate crea .05%; foam .05%; gel .05%; lotn .05%; oint .05%	QL; PA*
desonide crea .05%; lotn .05%; oint .05%	QL; PA*
desoximetasone crea .05%, .25%; gel .05%; oint .25%	QL; PA*
fluocinolone acetonide crea .025%; oint .025%; soln .01%	QL; PA*
fluocinonide crea .05%; gel .05%; oint .05%; soln .05%	QL; PA*
fluticasone propionate crea .05%; oint .005%	QL; PA*
halobetasol propionate crea .05%; oint .05%	QL; PA*
hydrocortisone (topical) crea 2.5%	QL; PA*
hydrocortisone butyrate crea .1%; oint .1%; soln .1%	QL; PA*
hydrocortisone valerate crea .2%; oint .2%	QL; PA*
mometasone furoate crea .1%; oint .1%; soln .1%	QL; PA*
triamcinolone acetonide (topical) crea .025%, .1%, .5%; lotn .025%, .1%; oint .1%	QL; PA*
DERMATOLOGY, LOCAL ANESTHETICS	
lidocaine ptch 5%	PA, QL

Drug Name	Requirements/Limits
lidocaine-prilocaine cream 2.5-2.5%	
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE	
bexarotene (topical) gel 1%	SP, PA
lactic acid (ammonium lactate) crea 12%; lotn 12%	
DERMATOLOGY, PRURIGO NODULARIS	
DUPIXENT SOAJ 300MG/2ML; SOSY 300MG/2ML	SP, PA, QL
NEMLUVIO AUIJ 30MG	SP, PA, QL
DERMATOLOGY, ROSACEA	
azelaic acid gel 15%	
brimonidine tartrate (topical) gel .33%	
ivermectin (rosacea) crea 1%	
metronidazole (topical) crea .75%; gel .75%; lotn .75%	QL; PA*
ORACEA CPDR 40MG	
DERMATOLOGY, SCABICIDES AND PEDICULICIDES	
malathion lotn .5%	
permethrin crea 5%	
MOUTH/THROAT/DENTAL AGENTS	
clotrimazole troches troc 10mg	
lidocaine hcl (mouth-throat) soln 2%	
MUGARD LIQ	
pilocarpine hcl (oral) tabs 5mg, 7.5mg	
triamcinolone acetonide (mouth) pste .1%	
OTIC	
acetic acid (otic) soln 2%	
ciprofloxacin-dexamethasone otic susp 0.3-0.1%	
neomycin-polymyxin-hc otic soln 1%	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	
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