

Fallon Health NaviCare[®] SCO and NaviCare[®] HMO SNP

2024 *List of Covered Drugs* (Formulary)

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

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Introduction

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

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

This formulary was updated on 09/30/2024. For more recent information or other questions, contact us at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week), or visit fallonhealth.org/navicare.

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

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

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A. Disclaimers

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

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

B. Frequently Asked Questions (FAQ)

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

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

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

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

(This section is continued on the next page).



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

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

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

B2. Does the Drug List ever change?

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

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

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

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

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

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

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

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

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

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

(This section is continued on the next page).



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

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

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

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

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

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

When these changes happen, we will:

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

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

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



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

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

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

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

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

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

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

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

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

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

There are two ways to find a drug:

(This section is continued on the next page).



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

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

To search **alphabetically**, look for your drug in the Index of Covered Drugs section. You can find it starting on page 99. The Index of Covered Drugs is an alphabetical list of all of the drugs included in the Drug List. Brand name drugs and generic drugs are listed in the index.

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

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

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

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

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

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

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

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

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

(This section is continued on the next page).



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

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

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

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

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

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

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

B11. How can I ask for an exception?

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

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

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

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



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

B13. What are generic drugs?

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

NaviCare covers both brand name drugs and generic drugs.

B14. What are OTC drugs?

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

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

B15. Does NaviCare cover non-drug OTC products?

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

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

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

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

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

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

B18. What is my copayment/copay?

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

All drugs on our Drug List have no copay.

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

(This section is continued on the next page).



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

OTCs have a \$0 copay.

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

C. Overview of the *List of Covered Drugs*

The *List of Covered Drugs* gives you information about the drugs covered by NaviCare. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins on page 99. The index alphabetically lists all drugs covered by NaviCare.



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

C1. List of Drugs by Medical Condition

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

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

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

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



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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Drug	Status	Requirements/Limits
<i>promethazine hcl injection solution</i>	Generic	
<i>promethazine hcl oral solution</i>	Generic	
<i>promethazine hcl oral tablet</i>	Generic	
<i>promethazine hcl rectal suppository 12.5 mg, 25 mg</i>	Generic	
PROMETHEGAN RECTAL SUPPOSITORY 25 MG	Generic	
PROMETHEGAN RECTAL SUPPOSITORY 50 MG	Brand	
<i>scopolamine transdermal patch 72 hour</i>	Generic	
Emetogenic Therapy Adjuncts		
<i>aprepitant oral capsule</i>	Generic	PA
<i>dronabinol oral capsule</i>	Generic	B/D
EMEND ORAL SUSPENSION RECONSTITUTED	Brand	PA
<i>granisetron hcl oral tablet</i>	Generic	B/D
<i>ondansetron hcl injection solution 4 mg/2ml</i>	Generic	
<i>ondansetron hcl oral solution</i>	Generic	B/D
<i>ondansetron hcl oral tablet</i>	Generic	B/D
<i>ondansetron oral tablet dispersible 4 mg, 8 mg</i>	Generic	B/D
SYNDROS ORAL SOLUTION	Brand	B/D; NEDS
Antifungals		
Antifungals		
ABELCET INTRAVENOUS SUSPENSION	Brand	B/D; HI
AMPHOTERICIN B INTRAVENOUS SOLUTION RECONSTITUTED	Generic	B/D; HI
<i>amphotericin b liposome intravenous suspension reconstituted</i>	Generic	B/D; HI
BREXAFEMME ORAL TABLET	Brand	PA; QL (4 EA per 1 day); NEDS
<i>caspofungin acetate intravenous solution reconstituted</i>	Generic	HI
CICLODAN EXTERNAL SOLUTION	Generic	
<i>ciclopirox external gel</i>	Generic	QL (100 GM per 30 days)
<i>ciclopirox external shampoo</i>	Generic	
<i>ciclopirox external solution</i>	Generic	
<i>ciclopirox olamine external cream</i>	Generic	QL (90 GM per 30 days)
<i>ciclopirox olamine external suspension</i>	Generic	QL (60 ML per 30 days)
<i>clotrimazole external cream</i>	Generic	
<i>clotrimazole external solution</i>	Generic	QL (30 ML per 30 days)

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

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

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

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

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

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

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

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

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

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

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

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

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

Drug	Status	Requirements/Limits
ALUNBRIG ORAL TABLET 30 MG	Brand	PA NS; QL (120 EA per 30 days); NEDS
ALUNBRIG ORAL TABLET THERAPY PACK	Brand	PA NS; QL (60 EA per 365 days); NEDS
AUGTYRO ORAL CAPSULE	Brand	PA NS; NEDS
AYVAKIT ORAL TABLET	Brand	PA NS; QL (1 EA per 1 day); NEDS
BALVERSA ORAL TABLET	Brand	PA NS; NEDS
BOSULIF ORAL CAPSULE	Brand	PA NS; NEDS
BOSULIF ORAL TABLET	Brand	PA NS; NEDS
BRAFTOVI ORAL CAPSULE 75 MG	Brand	PA NS; NEDS
BRUKINSA ORAL CAPSULE	Brand	PA NS; NEDS
CABOMETYX ORAL TABLET	Brand	PA NS; NEDS
CALQUENCE ORAL CAPSULE	Brand	PA NS; NEDS
CALQUENCE ORAL TABLET	Brand	PA NS; NEDS
CAPRELSA ORAL TABLET	Brand	PA NS; NEDS
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG	Brand	PA NS; NEDS
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG	Brand	PA NS; NEDS
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	Brand	PA NS; NEDS
DAURISMO ORAL TABLET	Brand	PA NS; NEDS
ERIVEDGE ORAL CAPSULE	Brand	PA NS; NEDS
<i>erlotinib hcl oral tablet 100 mg, 25 mg</i>	Generic	PA NS
<i>erlotinib hcl oral tablet 150 mg</i>	Generic	PA NS; NEDS
<i>everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	Generic	PA NS; NEDS
<i>everolimus oral tablet soluble</i>	Generic	PA NS; NEDS
EXKIVITY ORAL CAPSULE	Brand	PA NS; NEDS
FARYDAK ORAL CAPSULE	Brand	PA NS; NEDS
FOTIVDA ORAL CAPSULE	Brand	PA NS; NEDS
FRUZAQLA ORAL CAPSULE	Brand	PA NS; NEDS
<i>gefitinib oral tablet</i>	Generic	PA NS; NEDS
ICLUSIG ORAL TABLET	Brand	PA NS; QL (30 EA per 30 days); NEDS
<i>imatinib mesylate oral tablet</i>	Generic	
IMBRUVICA ORAL CAPSULE	Brand	PA NS; NEDS
IMBRUVICA ORAL SUSPENSION	Brand	PA NS; NEDS

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

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

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

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

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

Drug	Status	Requirements/Limits
TRUSELTIQ (50MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; QL (42 EA per 28 days); NEDS
TRUSELTIQ (75MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Brand	PA NS; QL (63 EA per 28 days); NEDS
TURALIO ORAL CAPSULE	Brand	PA NS; NEDS
UKONIQ ORAL TABLET	Brand	PA NS; NEDS
VANFLYTA ORAL TABLET	Brand	PA NS; NEDS
VIZIMPRO ORAL TABLET	Brand	PA NS; NEDS
VONJO ORAL CAPSULE	Brand	PA NS; QL (4 EA per 1 day); NEDS
VOTRIENT ORAL TABLET	Brand	PA NS; NEDS
XALKORI ORAL CAPSULE	Brand	PA NS; NEDS
XALKORI ORAL CAPSULE SPRINKLE	Brand	PA NS; NEDS
ZEJULA ORAL CAPSULE	Brand	PA NS; NEDS
ZEJULA ORAL TABLET	Brand	PA NS; NEDS
ZELBORAF ORAL TABLET	Brand	PA NS; NEDS
ZYKADIA ORAL TABLET	Brand	PA NS; NEDS
Retinoids		
<i>bexarotene external gel</i>	Generic	PA NS; NEDS
<i>bexarotene oral capsule</i>	Generic	NEDS
PANRETIN EXTERNAL GEL	Brand	NEDS
<i>tretinoin oral capsule</i>	Generic	NEDS
Treatment Adjuncts		
<i>leucovorin calcium injection solution</i>	Generic	
<i>leucovorin calcium oral tablet</i>	Generic	
MESNEX ORAL TABLET	Brand	NEDS
Antiparasitics		
Anthelmintics		
<i>albendazole oral tablet</i>	Generic	NEDS
<i>ivermectin oral tablet</i>	Generic	PA
<i>praziquantel oral tablet</i>	Generic	
Antiprotozoals		
ALINIA ORAL SUSPENSION RECONSTITUTED	Brand	NEDS
<i>atovaquone oral suspension</i>	Generic	
<i>atovaquone-proguanil hcl oral tablet</i>	Generic	
<i>chloroquine phosphate oral tablet</i>	Generic	MO
COARTEM ORAL TABLET	Brand	

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

Drug	Status	Requirements/Limits
<i>hydroxychloroquine sulfate oral tablet 100 mg, 300 mg, 400 mg</i>	Generic	
<i>hydroxychloroquine sulfate oral tablet 200 mg</i>	Generic	MO
IMPAVIDO ORAL CAPSULE	Brand	NEDS
KRINTAFEL ORAL TABLET	Brand	
<i>mefloquine hcl oral tablet</i>	Generic	MO
<i>nitazoxanide oral tablet</i>	Generic	NEDS
<i>pentamidine isethionate inhalation solution reconstituted</i>	Generic	B/D
<i>pentamidine isethionate injection solution reconstituted</i>	Generic	
<i>primaquine phosphate oral tablet 26.3 (15 base) mg</i>	Generic	
<i>pyrimethamine oral tablet</i>	Generic	NEDS
<i>quinine sulfate oral capsule</i>	Generic	PA
Pediculicides/Scabicides		
<i>lindane external shampoo</i>	Generic	
<i>malathion external lotion</i>	Generic	
<i>permethrin external cream</i>	Generic	
Antiparkinson Agents		
Anticholinergics		
<i>benztropine mesylate oral tablet</i>	Generic	MO
<i>trihexyphenidyl hcl oral solution</i>	Generic	MO
<i>trihexyphenidyl hcl oral tablet</i>	Generic	MO
Antiparkinson Agents, Other		
<i>entacapone oral tablet</i>	Generic	MO
<i>tolcapone oral tablet</i>	Generic	MO; NEDS
Dopamine Agonists		
<i>apomorphine hcl subcutaneous solution cartridge</i>	Generic	PA; NEDS
<i>bromocriptine mesylate oral capsule</i>	Generic	MO
<i>bromocriptine mesylate oral tablet</i>	Generic	MO
KYNMOBI SUBLINGUAL FILM	Brand	PA; NEDS
NEUPRO TRANSDERMAL PATCH 24 HOUR	Brand	MO
<i>pramipexole dihydrochloride oral tablet</i>	Generic	MO
<i>ropinirole hcl er oral tablet extended release 24 hour</i>	Generic	MO
<i>ropinirole hcl oral tablet</i>	Generic	MO

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

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

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

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

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

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

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

Drug	Status	Requirements/Limits
VERSACLOZ ORAL SUSPENSION	Brand	NEDS
Antispasticity Agents		
Antispasticity Agents		
<i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>	Generic	
<i>dantrolene sodium oral capsule</i>	Generic	
<i>tizanidine hcl oral tablet</i>	Generic	
Antivirals		
Anti-Cytomegalovirus (Cmv) Agents		
LIVTENCITY ORAL TABLET	Brand	NEDS
PREVYMIS ORAL TABLET	Brand	PA; MO; NEDS
<i>valganciclovir hcl oral solution reconstituted</i>	Generic	MO; NEDS
<i>valganciclovir hcl oral tablet</i>	Generic	MO
ZIRGAN OPHTHALMIC GEL	Brand	
Anti-Hepatitis B (Hbv) Agents		
<i>adefovir dipivoxil oral tablet</i>	Generic	PA; MO
BARACLUDE ORAL SOLUTION	Brand	MO
<i>entecavir oral tablet</i>	Generic	MO
EPIVIR HBV ORAL SOLUTION	Brand	MO
INTRON A INJECTION SOLUTION RECONSTITUTED	Brand	MO; NEDS
<i>lamivudine oral tablet 100 mg</i>	Generic	MO
Anti-Hepatitis C (Hcv) Agents		
EPCLUSA ORAL PACKET	Brand	PA; NEDS
EPCLUSA ORAL TABLET	Brand	PA; NEDS
HARVONI ORAL PACKET	Brand	PA; NEDS
HARVONI ORAL TABLET 90-400 MG	Brand	PA; NEDS
<i>ledipasvir-sofosbuvir oral tablet</i>	Generic	PA; NEDS
<i>sofosbuvir-velpatasvir oral tablet</i>	Generic	PA; NEDS
Anti-Hepatitis C (Hcv) Agents, Direct Acting		
MAVYRET ORAL PACKET	Brand	PA; NEDS
MAVYRET ORAL TABLET	Brand	PA; NEDS
VOSEVI ORAL TABLET	Brand	PA; NEDS
Anti-Hepatitis C (Hcv) Agents, Other		
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	Brand	NEDS

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

Drug	Status	Requirements/Limits
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	NEDS
<i>ribavirin inhalation solution reconstituted</i>	Generic	NEDS
<i>ribavirin oral capsule</i>	Generic	
<i>ribavirin oral tablet 200 mg</i>	Generic	
Antiherpetic Agents		
<i>acyclovir oral capsule</i>	Generic	
<i>acyclovir oral suspension</i>	Generic	
<i>acyclovir oral tablet</i>	Generic	
<i>acyclovir sodium intravenous solution</i>	Generic	B/D; HI
<i>famciclovir oral tablet</i>	Generic	
SITAVIG BUCCAL TABLET	Brand	NEDS
<i>trifluridine ophthalmic solution</i>	Generic	
<i>valacyclovir hcl oral tablet</i>	Generic	
Anti-Hiv Agents, Integrase Inhibitors (Insti)		
BIKTARVY ORAL TABLET 30-120-15 MG	Brand	NEDS
BIKTARVY ORAL TABLET 50-200-25 MG	Brand	MO; NEDS
GENVOYA ORAL TABLET	Brand	MO; NEDS
ISENTRESS HD ORAL TABLET	Brand	MO; NEDS
ISENTRESS ORAL PACKET	Brand	MO; NEDS
ISENTRESS ORAL TABLET	Brand	MO; NEDS
ISENTRESS ORAL TABLET CHEWABLE 100 MG	Brand	MO; NEDS
ISENTRESS ORAL TABLET CHEWABLE 25 MG	Brand	MO
STRIBILD ORAL TABLET	Brand	MO; NEDS
SYMTUZA ORAL TABLET	Brand	MO; NEDS
TIVICAY ORAL TABLET 10 MG	Brand	MO
TIVICAY ORAL TABLET 25 MG, 50 MG	Brand	MO; NEDS
TIVICAY PD ORAL TABLET SOLUBLE	Brand	MO; NEDS
Anti-Hiv Agents, Non-Nucleoside Reverse Transcriptase Inhibitors (Nnrti)		
COMPLERA ORAL TABLET	Brand	MO; NEDS
EDURANT ORAL TABLET	Brand	MO; NEDS
<i>efavirenz oral capsule</i>	Generic	MO
<i>efavirenz oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>efavirenz-emtricitab-tenofo df oral tablet</i>	Generic	MO
<i>etravirine oral tablet</i>	Generic	MO; NEDS
INTELENCE ORAL TABLET 25 MG	Brand	MO
<i>nevirapine er oral tablet extended release 24 hour</i>	Generic	MO
<i>nevirapine oral suspension</i>	Generic	MO
<i>nevirapine oral tablet</i>	Generic	MO
ODEFSEY ORAL TABLET	Brand	MO; NEDS
PIFELTRO ORAL TABLET	Brand	MO; NEDS
Anti-Hiv Agents, Nucleoside And Nucleotide Reverse Transcriptase Inhibitors (Nrti)		
<i>abacavir sulfate oral solution</i>	Generic	MO
<i>abacavir sulfate oral tablet</i>	Generic	MO
<i>abacavir sulfate-lamivudine oral tablet</i>	Generic	MO
CIMDUO ORAL TABLET	Brand	MO; NEDS
DELSTRIGO ORAL TABLET	Brand	MO; NEDS
DESCOVY ORAL TABLET 120-15 MG	Brand	NEDS
DESCOVY ORAL TABLET 200-25 MG	Brand	MO; NEDS
DOVATO ORAL TABLET	Brand	MO; NEDS
<i>efavirenz-lamivudine-tenofovir oral tablet</i>	Generic	MO; NEDS
<i>emtricitabine oral capsule</i>	Generic	MO
<i>emtricitabine-tenofovir df oral tablet 100-150 mg, 200-300 mg</i>	Generic	MO
<i>emtricitabine-tenofovir df oral tablet 133-200 mg, 167-250 mg</i>	Generic	MO; NEDS
EMTRIVA ORAL SOLUTION	Brand	MO
JULUCA ORAL TABLET	Brand	MO; NEDS
<i>lamivudine oral solution</i>	Generic	MO
<i>lamivudine oral tablet 150 mg, 300 mg</i>	Generic	MO
<i>lamivudine-zidovudine oral tablet</i>	Generic	MO
<i>stavudine oral capsule</i>	Generic	MO
<i>tenofovir disoproxil fumarate oral tablet</i>	Generic	MO
TRIUMEQ ORAL TABLET	Brand	MO; NEDS
TRIUMEQ PD ORAL TABLET SOLUBLE	Brand	
TRIZIVIR ORAL TABLET	Brand	MO; NEDS
VIREAD ORAL POWDER	Brand	MO; NEDS
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	Brand	MO; NEDS

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

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

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

Drug	Status	Requirements/Limits
<i>oseltamivir phosphate oral capsule 45 mg, 75 mg</i>	Generic	QL (2 EA per 1 day)
<i>oseltamivir phosphate oral suspension reconstituted</i>	Generic	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT	Brand	
<i>rimantadine hcl oral tablet</i>	Generic	
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	Brand	
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK	Brand	
Anxiolytics		
Anxiolytics, Other		
<i>bupirone hcl oral tablet</i>	Generic	
<i>doxepin hcl oral tablet</i>	Generic	QL (30 EA per 30 days)
<i>hydroxyzine hcl oral syrup</i>	Generic	
<i>hydroxyzine hcl oral tablet</i>	Generic	
Benzodiazepines		
<i>alprazolam er oral tablet extended release 24 hour 0.5 mg</i>	Generic	
<i>alprazolam oral tablet</i>	Generic	
<i>alprazolam xr oral tablet extended release 24 hour 0.5 mg</i>	Generic	
<i>chlordiazepoxide hcl oral capsule</i>	Generic	
<i>clorazepate dipotassium oral tablet</i>	Generic	
DIAZEPAM INTENSOL ORAL CONCENTRATE	Generic	QL (240 ML per 30 days)
<i>diazepam oral solution 5 mg/5ml</i>	Generic	QL (1200 ML per 30 days)
<i>diazepam oral tablet 10 mg</i>	Generic	QL (120 EA per 30 days)
<i>diazepam oral tablet 2 mg, 5 mg</i>	Generic	QL (90 EA per 30 days)
<i>estazolam oral tablet</i>	Generic	QL (1 EA per 1 day)
LIBERVANT BUCCAL FILM	Brand	QL (10 EA per 30 days)
<i>lorazepam injection solution</i>	Generic	
<i>lorazepam intensol oral concentrate</i>	Generic	QL (150 ML per 30 days)
<i>lorazepam oral concentrate</i>	Generic	QL (150 ML per 30 days)
<i>lorazepam oral tablet 0.5 mg, 1 mg</i>	Generic	QL (90 EA per 30 days)
<i>lorazepam oral tablet 2 mg</i>	Generic	QL (150 EA per 30 days)
<i>oxazepam oral capsule</i>	Generic	

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

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

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

Drug	Status	Requirements/Limits
<i>metformin hcl oral tablet 1000 mg, 500 mg, 850 mg</i>	Generic	MO
<i>migliol oral tablet</i>	Generic	MO
MOUNJARO SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; QL (2 ML per 28 days)
<i>nateglinide oral tablet</i>	Generic	MO
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	Brand	MO; QL (1.5 ML per 28 days)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	Brand	PA; MO; QL (1.5 ML per 28 days)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML	Brand	PA; MO; QL (3 ML per 28 days)
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	Brand	PA; QL (3 ML per 28 days)
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML, 4 MG/3ML	Brand	PA; MO; QL (3 ML per 28 days)
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; QL (3 ML per 28 days)
<i>pioglitazone hcl oral tablet</i>	Generic	MO
<i>repaglinide oral tablet 0.5 mg, 1 mg</i>	Generic	MO; QL (4 EA per 1 day)
<i>repaglinide oral tablet 2 mg</i>	Generic	MO; QL (8 EA per 1 day)
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; NEDS
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; NEDS
SYNJARDY ORAL TABLET	Brand	MO
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO
TRADJENTA ORAL TABLET	Brand	MO; QL (1 EA per 1 day)
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; QL (2 ML per 28 days)
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; QL (9 ML per 30 days)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO

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

Drug	Status	Requirements/Limits
Blood Glucose Regulators		
<i>glipizide-metformin hcl oral tablet</i>	Generic	MO
<i>glyburide-metformin oral tablet</i>	Generic	MO; QL (4 EA per 1 day)
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML	Brand	QL (0.4 ML per 1 day)
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML	Brand	QL (0.8 ML per 1 day)
GVOKE KIT SUBCUTANEOUS SOLUTION	Brand	QL (0.8 ML per 1 day)
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.5 MG/0.1ML	Brand	QL (0.4 ML per 1 day)
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 MG/0.2ML	Brand	QL (0.8 ML per 1 day)
JANUMET ORAL TABLET	Brand	MO; QL (2 EA per 1 day)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO; QL (2 EA per 1 day)
JENTADUETO ORAL TABLET	Brand	MO; QL (2 EA per 1 day)
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO; QL (2 EA per 1 day)
<i>pioglitazone hcl-glimepiride oral tablet</i>	Generic	MO
<i>pioglitazone hcl-metformin hcl oral tablet</i>	Generic	MO
Glycemic Agents		
<i>diazoxide oral suspension</i>	Generic	MO; NEDS
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	Brand	
<i>glucagon emergency injection kit</i>	Generic	
Insulins		
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML	Brand	
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.3 ML	Brand	
BD INSULIN SYRINGE HALF-UNIT	Brand	
BD INSULIN SYRINGE U/F 1/2UNIT	Brand	
BD INSULIN SYRINGE U/F 31G X 5/16" 0.3 ML	Brand	
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML	Brand	
BD VEO INSULIN SYRINGE U/F 31G X 15/64" 1 ML	Brand	

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

Drug	Status	Requirements/Limits
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML	Brand	
CVS GAUZE STERILE PAD 2"X2"	Brand	
DROPLET INSULIN SYRINGE 31G X 15/64" 1 ML	Brand	
HUMALOG INJECTION SOLUTION	Brand	MO
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	Brand	MO
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	MO
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	Brand	MO
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	Brand	MO
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	Brand	MO
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	Brand	MO
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	Brand	MO
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	Brand	MO
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	Brand	MO
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Brand	MO
HUMULIN N SUBCUTANEOUS SUSPENSION	Brand	MO
HUMULIN R INJECTION SOLUTION	Brand	MO
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	Brand	MO
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	Brand	MO
<i>insulin lispro (1 unit dial) subcutaneous solution pen-injector</i>	Generic	MO
<i>insulin lispro injection solution</i>	Generic	MO
<i>insulin lispro junior kwikpen subcutaneous solution pen-injector</i>	Generic	MO

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

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

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

Drug	Status	Requirements/Limits
AGAMATRIX PRESTO TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE 3 TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE 4 TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE II CHECK IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE II IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE PLATINUM IN VITRO STRIP	Brand	PA
ASSURE PRISM MULTI TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ASSURE PRO TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
BIOSCANNER GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
BLOOD GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CAREONE BLOOD GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CARESENS N GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CARETOUCH TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHEK TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHOICE MICRO TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHOICE NO CODING IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CLEVER CHOICE TALK SYSTEM IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CONTOUR NEXT TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
CONTOUR TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
DEXCOM G6 RECEIVER DEVICE	Brand	PA
DEXCOM G6 SENSOR	Brand	PA
DEXCOM G6 TRANSMITTER	Brand	PA
DEXCOM G7 RECEIVER DEVICE	Brand	PA
DEXCOM G7 SENSOR	Brand	PA
EASY PLUS II GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)

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

Drug	Status	Requirements/Limits
EASY STEP TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
EASY TALK BLOOD GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
EASY TOUCH TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
EASY TRAK BLOOD GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
EASYGLUCO IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
EASYMAX 15 TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
ENLITE GLUCOSE SENSOR	Brand	PA
EVERSENSE E3 SENSOR/HOLDER	Brand	PA
EVERSENSE E3 SMART TRANSMITTER	Brand	PA
EVERSENSE SENSOR/HOLDER	Brand	PA
EVERSENSE SMART TRANSMITTER	Brand	PA
FREESTYLE INSULINX TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
FREESTYLE LIBRE 14 DAY READER DEVICE	Brand	PA
FREESTYLE LIBRE 14 DAY SENSOR	Brand	PA
FREESTYLE LIBRE 2 READER DEVICE	Brand	PA
FREESTYLE LIBRE 2 SENSOR	Brand	PA
FREESTYLE LIBRE 3 SENSOR	Brand	PA
FREESTYLE LIBRE READER DEVICE	Brand	PA
FREESTYLE LITE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
FREESTYLE PRECISION NEO TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
FREESTYLE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
GUARDIAN LINK 3 TRANSMITTER	Brand	PA
GUARDIAN REAL-TIME REPLACE PED DEVICE	Brand	PA
GUARDIAN SENSOR (3)	Brand	PA
ONETOUCH ULTRA 2 KIT	Brand	QL (1 EA per 365 days)
ONETOUCH ULTRA IN VITRO STRIP	Brand	QL (5 EA per 1 day)
ONETOUCH ULTRA MINI KIT	Brand	QL (1 EA per 365 days)
ONETOUCH ULTRA TEST IN VITRO STRIP	Brand	QL (5 EA per 1 day)
ONETOUCH VERIO FLEX SYSTEM KIT	Brand	QL (1 EA per 365 days)
ONETOUCH VERIO IN VITRO STRIP	Brand	QL (5 EA per 1 day)
ONETOUCH VERIO IQ SYSTEM KIT	Brand	QL (1 EA per 365 days)
ONETOUCH VERIO KIT	Brand	QL (1 EA per 365 days)

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

Drug	Status	Requirements/Limits
OPTIUMEZ TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
PTS PANELS GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
QUICKTEK TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
RELION BLOOD GLUCOSE TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
RELION CONFIRM/MICRO TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
RELION PRIME TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
RELION ULTIMA TEST IN VITRO STRIP	Brand	PA; QL (5 EA per 1 day)
Blood Products And Modifiers		
Anticoagulants		
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	Brand	
ELIQUIS ORAL TABLET	Brand	MO
<i>enoxaparin sodium injection solution 300 mg/3ml</i>	Generic	
<i>enoxaparin sodium injection solution prefilled syringe</i>	Generic	
XARELTO ORAL TABLET	Brand	MO
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	Brand	
Blood Products And Modifiers, Other		
FABHALTA ORAL CAPSULE	Brand	PA; QL (60 EA per 30 days); NEDS
PYRUKYND ORAL TABLET 20 MG, 5 MG	Brand	PA; QL (60 EA per 30 days); NEDS
PYRUKYND ORAL TABLET 50 MG	Brand	PA; QL (120 EA per 30 days); NEDS
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK	Brand	PA; QL (30 EA per 30 days); NEDS
XOLREMDI ORAL CAPSULE	Brand	PA; QL (120 EA per 30 days); NEDS
Platelet Modifying Agents		
DOPTELET ORAL TABLET	Brand	PA; NEDS
<i>prasugrel hcl oral tablet</i>	Generic	MO
TAVALISSE ORAL TABLET	Brand	PA; MO; NEDS

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

Drug	Status	Requirements/Limits
Blood Products/Modifiers/Volume Expanders		
Anticoagulants		
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	Generic	NEDS
<i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>	Generic	
FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	Brand	NEDS
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml</i>	Generic	
<i>heparin sodium (porcine) pf injection solution</i>	Generic	
JANTOVEN ORAL TABLET	Generic	MO
<i>warfarin sodium oral tablet</i>	Generic	MO
Blood Formation Modifiers		
<i>anagrelide hcl oral capsule</i>	Generic	MO
CABLIVI INJECTION KIT	Brand	PA; NEDS
LEUKINE INJECTION SOLUTION RECONSTITUTED	Brand	NEDS
MOZOBIL SUBCUTANEOUS SOLUTION	Brand	PA; NEDS
MULPLETA ORAL TABLET	Brand	PA; NEDS
OXBRYTA ORAL TABLET 300 MG	Brand	PA; QL (8 EA per 1 day); NEDS
OXBRYTA ORAL TABLET 500 MG	Brand	PA; MO; QL (5 EA per 1 day); NEDS
OXBRYTA ORAL TABLET SOLUBLE	Brand	PA; QL (8 EA per 1 day); NEDS
<i>plerixafor subcutaneous solution</i>	Generic	PA; NEDS
PROMACTA ORAL PACKET	Brand	PA; MO; NEDS
PROMACTA ORAL TABLET	Brand	PA; MO; NEDS
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 10000 UNIT/ML(1ML), 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	Brand	PA
RETACRIT INJECTION SOLUTION 40000 UNIT/ML	Brand	PA; NEDS
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	Brand	
Hemostasis Agents		
<i>tranexamic acid oral tablet</i>	Generic	

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

Drug	Status	Requirements/Limits
Platelet Modifying Agents		
<i>aspirin-dipyridamole er oral capsule extended release 12 hour</i>	Generic	MO
BRILINTA ORAL TABLET	Brand	MO
<i>cilostazol oral tablet</i>	Generic	MO
<i>clopidogrel bisulfate oral tablet 300 mg</i>	Generic	QL (1 EA per 30 days)
<i>clopidogrel bisulfate oral tablet 75 mg</i>	Generic	MO
<i>dipyridamole oral tablet</i>	Generic	MO
Cardiovascular Agents		
Alpha-Adrenergic Agonists		
<i>clonidine hcl oral tablet</i>	Generic	MO
<i>clonidine transdermal patch weekly</i>	Generic	MO
<i>guanfacine hcl oral tablet</i>	Generic	MO
<i>methyldopa oral tablet</i>	Generic	MO
<i>midodrine hcl oral tablet</i>	Generic	
Alpha-Adrenergic Blocking Agents		
<i>phenoxybenzamine hcl oral capsule</i>	Generic	NEDS
<i>prazosin hcl oral capsule</i>	Generic	MO
Angiotensin II Receptor Antagonists		
<i>amlodipine-olmesartan oral tablet</i>	Generic	MO
<i>candesartan cilexetil oral tablet</i>	Generic	MO
<i>candesartan cilexetil-hctz oral tablet</i>	Generic	MO
ENTRESTO ORAL CAPSULE SPRINKLE	Brand	MO
ENTRESTO ORAL TABLET	Brand	MO
<i>irbesartan oral tablet</i>	Generic	MO
<i>irbesartan-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>losartan potassium oral tablet</i>	Generic	MO
<i>losartan potassium-hctz oral tablet</i>	Generic	MO; QL (1 EA per 1 day)
<i>olmesartan medoxomil oral tablet</i>	Generic	MO
<i>olmesartan medoxomil-hctz oral tablet</i>	Generic	MO
<i>telmisartan oral tablet</i>	Generic	MO
<i>telmisartan-hctz oral tablet</i>	Generic	MO
<i>valsartan oral tablet</i>	Generic	MO
<i>valsartan-hydrochlorothiazide oral tablet</i>	Generic	MO
Angiotensin-Converting Enzyme (Ace) Inhibitors		
<i>benazepril hcl oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>benazepril-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>captopril oral tablet</i>	Generic	MO
<i>enalapril maleate oral tablet</i>	Generic	MO
<i>enalapril-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>fosinopril sodium oral tablet</i>	Generic	MO
<i>fosinopril sodium-hctz oral tablet</i>	Generic	MO
<i>lisinopril oral tablet</i>	Generic	MO
<i>lisinopril-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>moexipril hcl oral tablet</i>	Generic	MO
<i>perindopril erbumine oral tablet</i>	Generic	MO
<i>quinapril hcl oral tablet</i>	Generic	MO; QL (2 EA per 1 day)
<i>quinapril-hydrochlorothiazide oral tablet</i>	Generic	MO; QL (1 EA per 1 day)
<i>ramipril oral capsule</i>	Generic	MO
<i>trandolapril oral tablet</i>	Generic	MO
<i>trandolapril-verapamil hcl er oral tablet extended release</i>	Generic	MO
Antiarrhythmics		
<i>amiodarone hcl oral tablet</i>	Generic	MO
<i>disopyramide phosphate oral capsule</i>	Generic	MO
<i>dofetilide oral capsule</i>	Generic	MO
<i>flecainide acetate oral tablet</i>	Generic	MO
<i>mexiletine hcl oral capsule</i>	Generic	MO
MULTAQ ORAL TABLET	Brand	MO
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	Brand	MO
<i>propafenone hcl er oral capsule extended release 12 hour</i>	Generic	MO
<i>propafenone hcl oral tablet</i>	Generic	MO
<i>quinidine gluconate er oral tablet extended release</i>	Generic	MO
<i>quinidine sulfate oral tablet</i>	Generic	MO
<i>sorine oral tablet</i>	Generic	MO
<i>sotalol hcl (af) oral tablet</i>	Generic	MO
<i>sotalol hcl oral tablet</i>	Generic	MO
Beta-Adrenergic Blocking Agents		
<i>acebutolol hcl oral capsule</i>	Generic	MO
<i>atenolol oral tablet</i>	Generic	MO
<i>atenolol-chlorthalidone oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>betaxolol hcl oral tablet</i>	Generic	MO
<i>bisoprolol fumarate oral tablet</i>	Generic	MO
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>carvedilol oral tablet</i>	Generic	MO
<i>carvedilol phosphate er oral capsule extended release 24 hour</i>	Generic	MO
<i>labetalol hcl oral tablet</i>	Generic	MO
<i>metoprolol succinate er oral tablet extended release 24 hour</i>	Generic	MO
<i>metoprolol tartrate oral tablet</i>	Generic	MO
<i>metoprolol-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	Generic	MO
<i>pindolol oral tablet</i>	Generic	MO
<i>propranolol hcl er oral capsule extended release 24 hour</i>	Generic	MO
<i>propranolol hcl oral solution</i>	Generic	MO
<i>propranolol hcl oral tablet</i>	Generic	MO
Calcium Channel Blocking Agents		
<i>amlodipine besy-benazepril hcl oral capsule</i>	Generic	MO
<i>amlodipine besylate oral tablet</i>	Generic	MO
<i>amlodipine besylate-valsartan oral tablet</i>	Generic	MO; QL (1 EA per 1 day)
<i>cartia xt oral capsule extended release 24 hour</i>	Generic	MO
<i>diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 300 mg, 360 mg, 420 mg</i>	Generic	MO
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour</i>	Generic	MO
<i>diltiazem hcl er coated beads oral tablet extended release 24 hour 120 mg</i>	Generic	
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	Generic	MO
<i>diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>	Generic	MO
<i>diltiazem hcl er oral tablet extended release 24 hour</i>	Generic	MO
<i>diltiazem hcl oral tablet</i>	Generic	MO
<i>dilt-xr oral capsule extended release 24 hour</i>	Generic	MO
<i>felodipine er oral tablet extended release 24 hour</i>	Generic	MO
<i>isradipine oral capsule</i>	Generic	MO
<i>matzim la oral tablet extended release 24 hour</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>nicardipine hcl oral capsule</i>	Generic	MO
<i>nifedipine er oral tablet extended release 24 hour</i>	Generic	MO
<i>nifedipine er osmotic release oral tablet extended release 24 hour</i>	Generic	MO
<i>nifedipine oral capsule</i>	Generic	MO
<i>taztia xt oral capsule extended release 24 hour</i>	Generic	MO
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	Generic	MO
<i>tiadylt er oral capsule extended release 24 hour 420 mg</i>	Generic	MO
<i>verapamil hcl er oral capsule extended release 24 hour</i>	Generic	MO
<i>verapamil hcl er oral tablet extended release</i>	Generic	MO
<i>verapamil hcl oral tablet</i>	Generic	MO
Cardiovascular Agents, Other		
<i>aliskiren fumarate oral tablet</i>	Generic	MO
CAMZYOS ORAL CAPSULE	Brand	PA; QL (30 EA per 30 days); NEDS
CORLANOR ORAL SOLUTION	Brand	PA; MO
DIGITEK ORAL TABLET	Generic	MO
DIGOX ORAL TABLET 125 MCG	Generic	MO
<i>digox oral tablet 250 mcg</i>	Generic	MO
<i>digoxin oral solution</i>	Generic	MO
<i>digoxin oral tablet</i>	Generic	MO
<i>droxidopa oral capsule</i>	Generic	PA; NEDS
FILSPARI ORAL TABLET	Brand	PA; QL (30 EA per 30 days); NEDS
<i>ivabradine hcl oral tablet</i>	Generic	PA; MO
<i>metyrosine oral capsule</i>	Generic	NEDS
NEXLETOL ORAL TABLET	Brand	PA; MO; QL (1 EA per 1 day)
NEXLIZET ORAL TABLET	Brand	PA; MO; QL (1 EA per 1 day)
ORLADEYO ORAL CAPSULE	Brand	PA; MO; QL (1 EA per 1 day); NEDS
<i>pentoxifylline er oral tablet extended release</i>	Generic	MO
<i>ranolazine er oral tablet extended release 12 hour</i>	Generic	MO
<i>telmisartan-amlodipine oral tablet</i>	Generic	MO
VERQUVO ORAL TABLET	Brand	PA; MO; QL (1 EA per 1 day)

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

Drug	Status	Requirements/Limits
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.25 MG/0.5ML, 0.5 MG/0.5ML, 1 MG/0.5ML	Brand	PA; QL (2 ML per 28 days); NEDS
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1.7 MG/0.75ML, 2.4 MG/0.75ML	Brand	PA; QL (3 ML per 28 days); NEDS
Diuretics, Carbonic Anhydrase Inhibitors		
<i>acetazolamide oral tablet</i>	Generic	MO
<i>methazolamide oral tablet</i>	Generic	MO
Diuretics, Loop		
<i>bumetanide oral tablet</i>	Generic	MO
<i>ethacrynic acid oral tablet</i>	Generic	MO
<i>furosemide injection solution 10 mg/ml</i>	Generic	HI
<i>furosemide injection solution 10 mg/ml (4ml syringe)</i>	Generic	
<i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>	Generic	MO
<i>furosemide oral tablet</i>	Generic	MO
<i>torseamide oral tablet</i>	Generic	MO
Diuretics, Potassium-Sparing		
<i>amiloride hcl oral tablet</i>	Generic	MO
<i>amiloride-hydrochlorothiazide oral tablet</i>	Generic	MO
<i>eplerenone oral tablet</i>	Generic	MO
KERENDIA ORAL TABLET	Brand	PA; MO; QL (1 EA per 1 day)
<i>spironolactone oral tablet</i>	Generic	MO
<i>spironolactone-hctz oral tablet</i>	Generic	MO
<i>triamterene oral capsule</i>	Generic	
<i>triamterene-hctz oral capsule 37.5-25 mg</i>	Generic	MO
<i>triamterene-hctz oral tablet</i>	Generic	MO
Diuretics, Thiazide		
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	Generic	MO
<i>hydrochlorothiazide oral capsule</i>	Generic	MO
<i>hydrochlorothiazide oral tablet</i>	Generic	MO
<i>indapamide oral tablet</i>	Generic	MO
<i>metolazone oral tablet</i>	Generic	MO
Dyslipidemics, Fibric Acid Derivatives		
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg</i>	Generic	MO
<i>gemfibrozil oral tablet</i>	Generic	MO
Dyslipidemics, Hmg Coa Reductase Inhibitors		
<i>atorvastatin calcium oral tablet</i>	Generic	MO
<i>fluvastatin sodium er oral tablet extended release 24 hour</i>	Generic	MO
<i>fluvastatin sodium oral capsule</i>	Generic	MO
<i>lovastatin oral tablet</i>	Generic	MO
<i>pitavastatin calcium oral tablet</i>	Generic	MO
<i>pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg</i>	Generic	MO; QL (1.5 EA per 1 day)
<i>pravastatin sodium oral tablet 80 mg</i>	Generic	MO; QL (1 EA per 1 day)
<i>rosuvastatin calcium oral tablet</i>	Generic	MO
<i>simvastatin oral tablet</i>	Generic	MO; QL (1.5 EA per 1 day)
Dyslipidemics, Other		
<i>cholestyramine light oral packet</i>	Generic	MO
<i>cholestyramine light oral powder</i>	Generic	MO
<i>cholestyramine oral packet</i>	Generic	MO
<i>cholestyramine oral powder</i>	Generic	MO
<i>colesevelam hcl oral packet</i>	Generic	MO
<i>colesevelam hcl oral tablet</i>	Generic	MO
<i>colestipol hcl oral packet</i>	Generic	MO
<i>colestipol hcl oral tablet</i>	Generic	MO
<i>ezetimibe oral tablet</i>	Generic	MO
<i>ezetimibe-simvastatin oral tablet</i>	Generic	MO
<i>icosapent ethyl oral capsule</i>	Generic	MO
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG	Brand	PA; MO; NEDS
<i>niacin (antihyperlipidemic) oral tablet</i>	Generic	
<i>niacin er (antihyperlipidemic) oral tablet extended release</i>	Generic	MO
NIACOR ORAL TABLET	Brand	
<i>omega-3-acid ethyl esters oral capsule</i>	Generic	MO
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO
<i>prevalite oral packet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	Brand	PA; MO
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO
Vasodilators, Direct-Acting Arterial		
<i>hydralazine hcl oral tablet</i>	Generic	MO
<i>minoxidil oral tablet</i>	Generic	MO
Vasodilators, Direct-Acting Arterial/Venous		
<i>isosorbide dinitrate oral tablet</i>	Generic	MO
<i>isosorbide mononitrate er oral tablet extended release 24 hour</i>	Generic	MO
<i>isosorbide mononitrate oral tablet</i>	Generic	MO
NITRO-BID TRANSDERMAL OINTMENT	Brand	MO
<i>nitroglycerin rectal ointment</i>	Generic	
<i>nitroglycerin sublingual tablet sublingual</i>	Generic	MO
<i>nitroglycerin transdermal patch 24 hour</i>	Generic	MO
<i>nitroglycerin translingual solution</i>	Generic	MO
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
<i>amphetamine-dextroamphet er oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg</i>	Generic	MO; QL (30 EA per 30 days)
<i>amphetamine-dextroamphet er oral capsule extended release 24 hour 20 mg, 25 mg, 30 mg</i>	Generic	MO; QL (60 EA per 30 days)
<i>amphetamine-dextroamphetamine oral tablet</i>	Generic	MO; QL (60 EA per 30 days)
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour</i>	Generic	MO; QL (120 EA per 30 days)
<i>dextroamphetamine sulfate oral solution</i>	Generic	MO; QL (1800 ML per 30 days)
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i>	Generic	MO; QL (180 EA per 30 days)
<i>dextroamphetamine sulfate oral tablet 15 mg, 20 mg</i>	Generic	MO; QL (90 EA per 30 days)
<i>dextroamphetamine sulfate oral tablet 30 mg</i>	Generic	MO; QL (60 EA per 30 days)
Attention Deficit Hyperactivity Disorder Agents, Non-Amphetamines		
<i>atomoxetine hcl oral capsule</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>dexmethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 5 mg</i>	Generic	MO; QL (60 EA per 30 days)
<i>dexmethylphenidate hcl er oral capsule extended release 24 hour 25 mg, 30 mg, 35 mg, 40 mg</i>	Generic	MO; QL (30 EA per 30 days)
<i>dexmethylphenidate hcl oral tablet</i>	Generic	MO; QL (60 EA per 30 days)
<i>guanfacine hcl er oral tablet extended release 24 hour</i>	Generic	MO
<i>methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg, 40 mg</i>	Generic	MO; QL (60 EA per 30 days)
<i>methylphenidate hcl er (cd) oral capsule extended release 50 mg, 60 mg</i>	Generic	MO; QL (30 EA per 30 days)
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg</i>	Generic	MO; QL (60 EA per 30 days)
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 40 mg, 60 mg</i>	Generic	MO; QL (30 EA per 30 days)
<i>methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg, 72 mg</i>	Generic	MO; QL (30 EA per 30 days)
<i>methylphenidate hcl er (osm) oral tablet extended release 36 mg</i>	Generic	MO; QL (60 EA per 30 days)
<i>methylphenidate hcl er oral tablet extended release</i>	Generic	MO; QL (90 EA per 30 days)
<i>methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 54 mg</i>	Generic	MO; QL (30 EA per 30 days)
<i>methylphenidate hcl er oral tablet extended release 24 hour 36 mg</i>	Generic	MO; QL (60 EA per 30 days)
<i>methylphenidate hcl oral solution</i>	Generic	MO
<i>methylphenidate hcl oral tablet</i>	Generic	MO; QL (90 EA per 30 days)
<i>methylphenidate hcl oral tablet chewable 10 mg</i>	Generic	MO; QL (180 EA per 30 days)
<i>methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg</i>	Generic	MO; QL (90 EA per 30 days)
Central Nervous System, Other		
AUSTEDO ORAL TABLET	Brand	PA; MO; NEDS
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG	Brand	PA; NEDS
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 6 & 12 & 24 MG	Brand	PA; NEDS
EVRYSDI ORAL SOLUTION RECONSTITUTED	Brand	PA; MO; NEDS
EXSERVAN ORAL FILM	Brand	MO; QL (2 EA per 1 day); NEDS
FIRDAPSE ORAL TABLET	Brand	PA; NEDS

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

Drug	Status	Requirements/Limits
HETLIOZ LQ ORAL SUSPENSION	Brand	PA; MO; NEDS
INGREZZA ORAL CAPSULE	Brand	PA; MO; NEDS
INGREZZA ORAL CAPSULE SPRINKLE	Brand	PA; NEDS
INGREZZA ORAL CAPSULE THERAPY PACK	Brand	PA; NEDS
NUEDEXTA ORAL CAPSULE	Brand	PA; MO; NEDS
RELYVRIO ORAL PACKET	Brand	PA; QL (60 EA per 30 days); NEDS
<i>riluzole oral tablet</i>	Generic	MO; QL (2 EA per 1 day)
SKYCLARYS ORAL CAPSULE	Brand	PA; QL (90 EA per 30 days); NEDS
<i>tasimelteon oral capsule</i>	Generic	PA; MO; NEDS
TEGLUTIK ORAL SUSPENSION	Brand	MO; QL (20 ML per 1 day); NEDS
<i>tetrabenazine oral tablet</i>	Generic	PA; MO
Fibromyalgia Agents		
<i>pregabalin oral capsule</i>	Generic	MO
<i>pregabalin oral solution</i>	Generic	MO
SAVELLA ORAL TABLET	Brand	MO; QL (60 EA per 30 days)
SAVELLA TITRATION PACK ORAL	Brand	
Multiple Sclerosis Agents		
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	Brand	MO; NEDS
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	Brand	MO; NEDS
BETASERON SUBCUTANEOUS KIT	Brand	MO; NEDS
<i>dalfampridine er oral tablet extended release 12 hour</i>	Generic	PA; MO
<i>dimethyl fumarate oral capsule delayed release</i>	Generic	PA; MO
<i>dimethyl fumarate starter pack oral capsule delayed release therapy pack</i>	Generic	PA; NEDS
<i>fingolimod hcl oral capsule</i>	Generic	PA; NEDS
<i>glatiramer acetate subcutaneous solution prefilled syringe</i>	Generic	MO; NEDS
<i>glatopa subcutaneous solution prefilled syringe 20 mg/ml</i>	Generic	MO; NEDS
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	Generic	MO; NEDS
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (1.6 ML per 30 days); NEDS

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

Drug	Status	Requirements/Limits
<i>teriflunomide oral tablet</i>	Generic	PA
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	Brand	PA; QL (14 EA per 365 days); NEDS
ZEPOSIA ORAL CAPSULE	Brand	PA; MO; QL (30 EA per 30 days); NEDS
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG & 0.92MG	Brand	PA; QL (74 EA per 365 days); NEDS
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG 0.92MG(21)	Brand	PA; QL (56 EA per 365 days); NEDS

Dental And Oral Agents

Dental And Oral Agents

<i>cevimeline hcl oral capsule</i>	Generic	MO
<i>chlorhexidine gluconate mouth/throat solution</i>	Generic	
<i>kourzeq mouth/throat paste</i>	Generic	
PERIOGARD MOUTH/THROAT SOLUTION	Generic	
<i>pilocarpine hcl oral tablet</i>	Generic	MO
<i>triamcinolone acetonide mouth/throat paste</i>	Generic	

Dermatological Agents

Dermatological Agents

<i>acitretin oral capsule</i>	Generic	
<i>acyclovir external ointment</i>	Generic	QL (15 GM per 14 days)
<i>adapalene external gel 0.1 %</i>	Generic	
<i>adapalene external solution</i>	Generic	NEDS
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; QL (4 ML per 28 days); NEDS
<i>ammonium lactate external cream</i>	Generic	
<i>ammonium lactate external lotion</i>	Generic	
<i>azelaic acid external gel</i>	Generic	
<i>calcipotriene external cream</i>	Generic	QL (120 GM per 30 days)
<i>calcipotriene external ointment</i>	Generic	QL (120 GM per 30 days)
<i>calcipotriene external solution</i>	Generic	QL (120 ML per 30 days)
CLARAVIS ORAL CAPSULE 10 MG, 20 MG, 40 MG	Generic	
<i>clobetasol prop emollient base external cream</i>	Generic	QL (60 GM per 30 days)
<i>clobetasol propionate e external cream</i>	Generic	QL (60 GM per 30 days)
<i>clobetasol propionate emulsion external foam</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>clobetasol propionate external cream</i>	Generic	QL (60 GM per 30 days)
<i>clobetasol propionate external foam</i>	Generic	
<i>clobetasol propionate external gel</i>	Generic	QL (60 GM per 30 days)
<i>clobetasol propionate external lotion</i>	Generic	
<i>clobetasol propionate external ointment</i>	Generic	QL (60 GM per 30 days)
<i>clobetasol propionate external shampoo</i>	Generic	
<i>clobetasol propionate external solution</i>	Generic	QL (59 ML per 30 days)
<i>clocortolone pivalate external cream</i>	Generic	
CLODAN EXTERNAL SHAMPOO	Generic	
<i>clotrimazole-betamethasone external cream</i>	Generic	
<i>clotrimazole-betamethasone external lotion</i>	Generic	
<i>diclofenac sodium external gel 1 %</i>	Generic	QL (960 GM per 30 days)
<i>diclofenac sodium external gel 3 %</i>	Generic	QL (200 GM per 30 days)
<i>doxepin hcl external cream</i>	Generic	QL (90 GM per 30 days)
<i>doxycycline oral capsule delayed release</i>	Generic	
DUOBRII EXTERNAL LOTION	Brand	PA; NEDS
<i>erythromycin external gel</i>	Generic	
<i>erythromycin external solution</i>	Generic	
FILSUVEZ EXTERNAL GEL	Brand	PA; NEDS
<i>fluorouracil external cream 0.5 %</i>	Generic	NEDS
<i>fluorouracil external cream 5 %</i>	Generic	
<i>fluorouracil external solution</i>	Generic	
<i>hydrocortisone (perianal) external cream</i>	Generic	
<i>imiquimod external cream 5 %</i>	Generic	
LITFULO ORAL CAPSULE	Brand	PA; QL (30 EA per 30 days); NEDS
<i>methoxsalen rapid oral capsule</i>	Generic	NEDS
<i>mupirocin calcium external cream</i>	Generic	
OPZELURA EXTERNAL CREAM	Brand	PA; QL (240 GM per 30 days); NEDS
<i>pimecrolimus external cream</i>	Generic	
<i>podofilox external gel</i>	Generic	
<i>podofilox external solution</i>	Generic	
PROCTO-MED HC EXTERNAL CREAM	Generic	
PROCTO-PAK EXTERNAL CREAM	Generic	
PROCTOSOL HC EXTERNAL CREAM	Generic	
PROCTOZONE-HC EXTERNAL CREAM	Generic	
REGANEX EXTERNAL GEL	Brand	NEDS

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

Drug	Status	Requirements/Limits
SANTYL EXTERNAL OINTMENT	Brand	QL (100 GM per 30 days)
<i>selenium sulfide external lotion</i>	Generic	
<i>sulfacetamide sodium (acne) external lotion</i>	Generic	
<i>tacrolimus external ointment</i>	Generic	
<i>tazarotene external cream</i>	Generic	
<i>tazarotene external gel</i>	Generic	
TAZORAC EXTERNAL CREAM 0.05 %	Brand	
TOVET EXTERNAL FOAM	Generic	
<i>tretinoin external cream</i>	Generic	
<i>tretinoin external gel</i>	Generic	
VTAMA EXTERNAL CREAM	Brand	PA; QL (60 GM per 30 days); NEDS
Electrolytes/Minerals/Metals/Vitamins		
Electrolyte/Mineral Replacement		
AMINOSYN II INTRAVENOUS SOLUTION 15 %	Brand	B/D
<i>carglumic acid oral tablet soluble</i>	Generic	PA; NEDS
CLINISOL SF INTRAVENOUS SOLUTION	Generic	B/D; HI
ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION	Brand	HI
<i>kcl in dextrose-nacl intravenous solution 10-5-0.45 meq/l-%-%, 20-5-0.2 meq/l-%-%, 20-5-0.45 meq/l-%-%, 20-5-0.9 meq/l-%-%, 30-5-0.45 meq/l-%-%, 40-5-0.45 meq/l-%-%, 40-5-0.9 meq/l-%-%</i>	Generic	HI
<i>kcl-lactated ringers-d5w intravenous solution</i>	Generic	HI
<i>klor-con 10 oral tablet extended release</i>	Generic	MO
<i>klor-con m10 oral tablet extended release</i>	Generic	MO
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	Generic	MO
<i>klor-con m20 oral tablet extended release</i>	Generic	MO
<i>klor-con oral packet 20 meq</i>	Generic	MO
<i>klor-con oral tablet extended release</i>	Generic	MO
K-PHOS NO 2 ORAL TABLET	Brand	
<i>magnesium sulfate injection solution 50 %, 50 % (10ml syringe)</i>	Generic	HI
<i>multiple electro type 1 ph 5.5 intravenous solution</i>	Generic	HI
<i>na sulfate-k sulfate-mg sulf oral solution</i>	Generic	
ORACIT ORAL SOLUTION	Brand	

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

Drug	Status	Requirements/Limits
PLASMA-LYTE A INTRAVENOUS SOLUTION	Brand	HI
PLENAMINE INTRAVENOUS SOLUTION	Generic	B/D; HI
<i>potassium chloride crys er oral tablet extended release</i>	Generic	MO
<i>potassium chloride er oral capsule extended release</i>	Generic	MO
<i>potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq</i>	Generic	MO
<i>potassium chloride intravenous solution 2 meq/ml, 2 meq/ml (20 ml)</i>	Generic	HI
<i>potassium chloride oral packet</i>	Generic	MO
<i>potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)</i>	Generic	MO
<i>potassium citrate er oral tablet extended release</i>	Generic	
<i>potassium cl in dextrose 5% intravenous solution 20 meq/l</i>	Generic	HI
PREMASOL INTRAVENOUS SOLUTION 10 %	Brand	B/D; HI
PROSOL INTRAVENOUS SOLUTION	Brand	B/D; HI
<i>sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %</i>	Generic	HI
<i>sodium chloride irrigation solution 0.9 %</i>	Generic	
<i>sodium fluoride oral tablet 2.2 (1 f) mg</i>	Generic	MO
TRAVASOL INTRAVENOUS SOLUTION	Brand	B/D; HI
TROPHAMINE INTRAVENOUS SOLUTION 10 %	Brand	B/D; HI
Electrolyte/Mineral/Metal Modifiers		
<i>deferasirox oral tablet soluble 125 mg</i>	Generic	MO
<i>deferasirox oral tablet soluble 250 mg, 500 mg</i>	Generic	MO; NEDS
<i>deferiprone oral tablet</i>	Generic	PA; MO; NEDS
DOJOLVI ORAL LIQUID	Brand	PA; MO; NEDS
JYNARQUE ORAL TABLET	Brand	PA; NEDS
JYNARQUE ORAL TABLET THERAPY PACK	Brand	PA; NEDS
<i>kionex oral suspension</i>	Generic	
<i>penicillamine oral tablet</i>	Generic	NEDS
<i>sodium polystyrene sulfonate oral powder</i>	Generic	
<i>sps oral suspension</i>	Generic	
<i>tolvaptan oral tablet</i>	Generic	PA; NEDS

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

Drug	Status	Requirements/Limits
<i>trientine hcl oral capsule 250 mg</i>	Generic	NEDS
VELTASSA ORAL PACKET	Brand	MO
Electrolytes/Minerals/Metals/Vitamins		
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	Brand	B/D; HI
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	Brand	B/D; HI
<i>dextrose intravenous solution 10 %, 5 %</i>	Generic	HI
<i>dextrose-sodium chloride intravenous solution 10-0.2 %, 10-0.45 %, 5-0.2 %, 5-0.45 %, 5-0.9 %</i>	Generic	HI
INTRALIPID INTRAVENOUS EMULSION	Brand	B/D; HI
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	Brand	HI
NUTRILIPID INTRAVENOUS EMULSION	Brand	B/D; HI
PROCALAMINE INTRAVENOUS SOLUTION	Brand	B/D
TPN ELECTROLYTES INTRAVENOUS CONCENTRATE	Brand	HI
Vitamins		
<i>doxercalciferol oral capsule</i>	Generic	MO
<i>pnv-dha oral capsule</i>	Generic	
<i>prenatal oral tablet 27-1 mg</i>	Generic	
VP-PNV-DHA ORAL CAPSULE	Brand	
Gastrointestinal Agents		
Antispasmodics, Gastrointestinal		
<i>dicyclomine hcl oral capsule</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>dicyclomine hcl oral solution</i>	Generic	
<i>dicyclomine hcl oral tablet</i>	Generic	
<i>glycopyrrolate oral solution</i>	Generic	MO
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	Generic	
<i>methscopolamine bromide oral tablet</i>	Generic	
Gastrointestinal Agents		
VELSIPITY ORAL TABLET	Brand	PA; QL (30 EA per 30 days); NEDS
Gastrointestinal Agents, Other		
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	Brand	PA NS; MO; NEDS
BYLVAY ORAL CAPSULE	Brand	PA NS; MO; NEDS
CLENPIQ ORAL SOLUTION	Brand	
<i>diphenoxylate-atropine oral liquid</i>	Generic	
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	Generic	
GATTEX SUBCUTANEOUS KIT	Brand	PA; MO; NEDS
LIVMARLI ORAL SOLUTION 9.5 MG/ML	Brand	PA; QL (90 ML per 30 days); NEDS
<i>loperamide hcl oral capsule</i>	Generic	
<i>metoclopramide hcl injection solution</i>	Generic	
<i>metoclopramide hcl oral solution 5 mg/5ml</i>	Generic	
<i>metoclopramide hcl oral tablet</i>	Generic	
MOTOFEN ORAL TABLET	Brand	
MOVANTI K ORAL TABLET	Brand	
OICALIVA ORAL TABLET	Brand	PA; MO; QL (30 EA per 30 days); NEDS
OSMOPREP ORAL TABLET	Brand	
RELISTOR ORAL TABLET	Brand	NEDS
RELISTOR SUBCUTANEOUS SOLUTION	Brand	NEDS
REZDIFFRA ORAL TABLET	Brand	PA; QL (30 EA per 30 days); NEDS
<i>ursodiol oral capsule 300 mg</i>	Generic	MO
<i>ursodiol oral tablet</i>	Generic	MO
VOQUEZNA DUAL PAK ORAL THERAPY PACK	Brand	PA
VOQUEZNA ORAL TABLET 10 MG	Brand	PA; QL (30 EA per 30 days)
VOQUEZNA ORAL TABLET 20 MG	Brand	PA; QL (60 EA per 30 days)
VOQUEZNA TRIPLE PAK ORAL THERAPY PACK	Brand	PA

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

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

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

Drug	Status	Requirements/Limits
<i>esomeprazole magnesium oral capsule delayed release</i>	Generic	MO
<i>lansoprazole oral capsule delayed release</i>	Generic	MO
<i>omeprazole magnesium oral capsule delayed release</i>	Generic	MO; QL (2 EA per 1 day)
<i>omeprazole oral capsule delayed release 10 mg</i>	Generic	MO; QL (1 EA per 1 day)
<i>omeprazole oral capsule delayed release 20 mg, 40 mg</i>	Generic	MO; QL (2 EA per 1 day)
<i>pantoprazole sodium oral tablet delayed release</i>	Generic	MO; QL (2 EA per 1 day)

**Genetic Or Enzyme Disorder:
Replacement, Modifiers, Treatment**

**Genetic Or Enzyme Disorder:
Replacement, Modifiers, Treatment**

ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	Brand	PA; HI; LA
<i>betaine oral powder</i>	Generic	MO; NEDS
CERDELGA ORAL CAPSULE	Brand	PA; MO; NEDS
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	Brand	MO
CYSTAGON ORAL CAPSULE	Brand	MO
DAYBUE ORAL SOLUTION	Brand	PA; QL (3600 ML per 30 days); NEDS
GALAFOLD ORAL CAPSULE	Brand	PA; MO; NEDS
GLASSIA INTRAVENOUS SOLUTION	Brand	PA; HI
<i>l-glutamine oral packet</i>	Generic	PA; NEDS
<i>miglustat oral capsule</i>	Generic	PA; MO; NEDS
<i>nitisinone oral capsule 10 mg, 2 mg, 5 mg</i>	Generic	PA; MO; NEDS
<i>nitisinone oral capsule 20 mg</i>	Generic	PA; NEDS
OLPRUVA (2 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS
OLPRUVA (3 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS
OLPRUVA (4 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS
OLPRUVA (5 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS
OLPRUVA (6 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS
OLPRUVA (6.67 GM DOSE) ORAL THERAPY PACK	Brand	PA; NEDS

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

Drug	Status	Requirements/Limits
ORFADIN ORAL SUSPENSION	Brand	PA; MO; NEDS
PROLASTIN-C INTRAVENOUS SOLUTION	Brand	PA; HI
RAVICTI ORAL LIQUID	Brand	MO; NEDS
RUZURGI ORAL TABLET	Brand	PA; MO; NEDS
<i>sapropterin dihydrochloride oral packet</i>	Generic	PA; MO; NEDS
<i>sodium phenylbutyrate oral tablet</i>	Generic	MO; NEDS
SOHONOS ORAL CAPSULE 1 MG	Brand	PA; QL (560 EA per 28 days); NEDS
SOHONOS ORAL CAPSULE 1.5 MG	Brand	PA; QL (364 EA per 28 days); NEDS
SOHONOS ORAL CAPSULE 10 MG	Brand	PA; QL (56 EA per 28 days); NEDS
SOHONOS ORAL CAPSULE 2.5 MG	Brand	PA; QL (224 EA per 28 days); NEDS
SOHONOS ORAL CAPSULE 5 MG	Brand	PA; QL (112 EA per 28 days); NEDS
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
VIJOICE ORAL PACKET	Brand	PA; QL (28 EA per 28 days); NEDS
VIJOICE ORAL TABLET THERAPY PACK 125 MG, 50 MG	Brand	PA; QL (28 EA per 28 days); NEDS
VIJOICE ORAL TABLET THERAPY PACK 200 & 50 MG	Brand	PA; QL (56 EA per 28 days); NEDS
WAINUA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; QL (0.8 ML per 28 days); NEDS
<i>yargesa oral capsule</i>	Generic	PA; NEDS
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	Brand	PA; HI
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000- 79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT, 60000-189600 UNIT	Brand	MO
ZILBRYSQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; NEDS
ZOKINVY ORAL CAPSULE	Brand	PA; QL (120 EA per 30 days); NEDS

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

Drug	Status	Requirements/Limits
Genitourinary Agents		
Antispasmodics, Urinary		
<i>darifenacin hydrobromide er oral tablet extended release 24 hour</i>	Generic	MO
<i>flavoxate hcl oral tablet</i>	Generic	MO
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	Brand	MO
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO
<i>oxybutynin chloride er oral tablet extended release 24 hour</i>	Generic	MO
<i>oxybutynin chloride oral solution</i>	Generic	MO
<i>oxybutynin chloride oral tablet 5 mg</i>	Generic	MO
<i>solifenacin succinate oral tablet</i>	Generic	MO
<i>tolterodine tartrate er oral capsule extended release 24 hour</i>	Generic	MO
<i>tolterodine tartrate oral tablet</i>	Generic	MO
<i>trospium chloride er oral capsule extended release 24 hour</i>	Generic	MO
<i>trospium chloride oral tablet</i>	Generic	MO
Benign Prostatic Hypertrophy Agents		
<i>alfuzosin hcl er oral tablet extended release 24 hour</i>	Generic	MO; QL (1 EA per 1 day)
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	MO
<i>doxazosin mesylate oral tablet</i>	Generic	MO
<i>dutasteride oral capsule</i>	Generic	MO
<i>dutasteride-tamsulosin hcl oral capsule</i>	Generic	MO
<i>finasteride oral tablet 5 mg</i>	Generic	MO; QL (1 EA per 1 day)
<i>silodosin oral capsule</i>	Generic	MO
<i>tadalafil oral tablet 2.5 mg, 5 mg</i>	Generic	PA; MO; QL (30 EA per 30 days)
<i>tamsulosin hcl oral capsule</i>	Generic	MO
<i>terazosin hcl oral capsule</i>	Generic	MO
Genitourinary Agents, Other		
<i>bethanechol chloride oral tablet</i>	Generic	
CUVRIOR ORAL TABLET	Brand	PA; NEDS
ELMIRON ORAL CAPSULE	Brand	NEDS
RIVFLOZA SUBCUTANEOUS SOLUTION	Brand	PA; QL (1 ML per 28 days); NEDS

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

Drug	Status	Requirements/Limits
RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 128 MG/0.8ML	Brand	PA; QL (0.8 ML per 28 days); NEDS
RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML	Brand	PA; QL (1 ML per 28 days); NEDS
Phosphate Binders		
AURYXIA ORAL TABLET	Brand	PA; MO; NEDS
<i>calcium acetate (phos binder) oral capsule</i>	Generic	MO
<i>calcium acetate oral tablet 667 mg</i>	Generic	MO
<i>sevelamer carbonate oral packet</i>	Generic	MO
<i>sevelamer carbonate oral tablet</i>	Generic	MO
<i>sevelamer hcl oral tablet</i>	Generic	MO
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
ACTHAR GEL SUBCUTANEOUS AUTO- INJECTOR	Brand	PA; NEDS
ACTHAR INJECTION GEL	Brand	PA; NEDS
AGAMREE ORAL SUSPENSION	Brand	PA; QL (225 ML per 30 days); NEDS
<i>ala-cort external cream</i>	Generic	QL (240 GM per 30 days)
<i>alclometasone dipropionate external cream</i>	Generic	QL (240 GM per 30 days)
<i>alclometasone dipropionate external ointment</i>	Generic	QL (240 GM per 30 days)
<i>amcinonide external cream</i>	Generic	
<i>amcinonide external lotion</i>	Generic	
<i>amcinonide external ointment</i>	Generic	
<i>betamethasone dipropionate aug external cream</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone dipropionate aug external gel</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone dipropionate aug external lotion</i>	Generic	QL (180 ML per 30 days)
<i>betamethasone dipropionate aug external ointment</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone dipropionate external cream</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone dipropionate external lotion</i>	Generic	QL (150 ML per 30 days)
<i>betamethasone dipropionate external ointment</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone valerate external cream</i>	Generic	QL (150 GM per 30 days)
<i>betamethasone valerate external lotion</i>	Generic	QL (180 ML per 30 days)
<i>betamethasone valerate external ointment</i>	Generic	QL (150 GM per 30 days)

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

Drug	Status	Requirements/Limits
CAPEX EXTERNAL SHAMPOO	Brand	
CORTROPHIN INJECTION GEL	Brand	PA; NEDS
<i>deflazacort oral suspension</i>	Generic	PA; NEDS
<i>deflazacort oral tablet</i>	Generic	PA; NEDS
<i>desonide external cream</i>	Generic	QL (240 GM per 30 days)
<i>desonide external lotion</i>	Generic	QL (240 ML per 30 days)
<i>desonide external ointment</i>	Generic	QL (240 GM per 30 days)
<i>desoximetasone external cream</i>	Generic	QL (180 GM per 30 days)
<i>desoximetasone external gel</i>	Generic	QL (180 GM per 30 days)
<i>desoximetasone external ointment</i>	Generic	QL (180 GM per 30 days)
DEXAMETHASONE INTENSOL ORAL CONCENTRATE	Brand	
<i>dexamethasone oral elixir</i>	Generic	
<i>dexamethasone oral solution</i>	Generic	
<i>dexamethasone oral tablet</i>	Generic	
<i>dexamethasone oral tablet therapy pack</i>	Generic	
<i>dexamethasone sodium phosphate injection solution 120 mg/30ml</i>	Generic	
<i>diflorasone diacetate external cream</i>	Generic	QL (180 GM per 30 days)
<i>diflorasone diacetate external ointment</i>	Generic	QL (180 GM per 30 days); NEDS
<i>fludrocortisone acetate oral tablet</i>	Generic	MO
<i>fluocinolone acetonide body external oil</i>	Generic	
<i>fluocinolone acetonide external cream</i>	Generic	QL (240 GM per 30 days)
<i>fluocinolone acetonide external ointment</i>	Generic	QL (240 GM per 30 days)
<i>fluocinolone acetonide external solution</i>	Generic	QL (90 ML per 30 days)
<i>fluocinolone acetonide scalp external oil</i>	Generic	
<i>fluocinonide emulsified base external cream</i>	Generic	QL (120 GM per 30 days)
<i>fluocinonide external cream</i>	Generic	QL (60 GM per 30 days)
<i>fluocinonide external gel</i>	Generic	QL (60 GM per 30 days)
<i>fluocinonide external ointment</i>	Generic	QL (60 GM per 30 days)
<i>fluocinonide external solution</i>	Generic	QL (60 ML per 30 days)
<i>fluticasone propionate external cream</i>	Generic	QL (150 GM per 30 days)
<i>fluticasone propionate external lotion</i>	Generic	QL (240 ML per 30 days)
<i>fluticasone propionate external ointment</i>	Generic	QL (150 GM per 30 days)
<i>halcinonide external cream</i>	Generic	
<i>halobetasol propionate external cream</i>	Generic	QL (150 GM per 30 days)
<i>halobetasol propionate external ointment</i>	Generic	QL (150 GM per 30 days)
HALOG EXTERNAL OINTMENT	Brand	

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

Drug	Status	Requirements/Limits
<i>hydrocortisone butyrate external cream</i>	Generic	QL (180 GM per 30 days)
<i>hydrocortisone butyrate external ointment</i>	Generic	QL (180 GM per 30 days)
<i>hydrocortisone external cream 1 %, 2.5 %</i>	Generic	QL (240 GM per 30 days)
<i>hydrocortisone external lotion 2.5 %</i>	Generic	QL (240 ML per 30 days)
<i>hydrocortisone external ointment 1 %, 2.5 %</i>	Generic	QL (240 GM per 30 days)
<i>hydrocortisone max st external cream</i>	Generic	QL (240 GM per 30 days)
<i>hydrocortisone valerate external cream</i>	Generic	QL (180 GM per 30 days)
<i>hydrocortisone valerate external ointment</i>	Generic	QL (180 GM per 30 days)
MEDROL ORAL TABLET 2 MG	Brand	
<i>methylprednisolone oral tablet</i>	Generic	
<i>methylprednisolone oral tablet therapy pack</i>	Generic	
<i>methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mg, 40 mg, 500 mg</i>	Generic	
<i>mometasone furoate external cream</i>	Generic	QL (150 GM per 30 days)
<i>mometasone furoate external ointment</i>	Generic	QL (150 GM per 30 days)
<i>mometasone furoate external solution</i>	Generic	
<i>prednicarbate external ointment</i>	Generic	QL (180 GM per 30 days)
<i>prednisolone oral solution</i>	Generic	
<i>prednisolone sodium phosphate oral solution 25 mg/5ml, 6.7 (5 base) mg/5ml</i>	Generic	
<i>prednisolone sodium phosphate oral tablet dispersible</i>	Generic	
PREDNISON INTENSOL ORAL CONCENTRATE	Brand	
<i>prednisone oral solution</i>	Generic	
<i>prednisone oral tablet</i>	Generic	
<i>prednisone oral tablet therapy pack</i>	Generic	
RECORLEV ORAL TABLET	Brand	PA; QL (240 EA per 30 days); NEDS
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK 1.5 MG (27)	Brand	
TARPEYO ORAL CAPSULE DELAYED RELEASE	Brand	PA; QL (120 EA per 30 days); NEDS
TEXACORT EXTERNAL SOLUTION	Brand	QL (240 ML per 30 days)
<i>triamcinolone acetonide external aerosol solution</i>	Generic	
<i>triamcinolone acetonide external cream 0.025 %, 0.1 %</i>	Generic	QL (160 GM per 30 days)
<i>triamcinolone acetonide external cream 0.5 %</i>	Generic	QL (150 GM per 30 days)
<i>triamcinolone acetonide external lotion</i>	Generic	QL (180 ML per 30 days)

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

Drug	Status	Requirements/Limits
<i>triamcinolone acetonide external ointment 0.025 % , 0.1 %</i>	Generic	QL (160 GM per 30 days)
<i>triamcinolone acetonide external ointment 0.5 %</i>	Generic	QL (150 GM per 30 days)
TRIDERM EXTERNAL CREAM 0.1 %	Generic	QL (160 GM per 30 days)
TRIDERM EXTERNAL CREAM 0.5 %	Generic	QL (150 GM per 30 days)
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
<i>desmopressin ace spray refrig nasal solution</i>	Generic	MO
<i>desmopressin acetate injection solution</i>	Generic	NEDS
<i>desmopressin acetate oral tablet</i>	Generic	MO
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	Brand	PA; NEDS
GENOTROPIN SUBCUTANEOUS CARTRIDGE	Brand	PA; NEDS
INCRELEX SUBCUTANEOUS SOLUTION	Brand	PA; LA; MO; NEDS
<i>octreotide acetate subcutaneous solution prefilled syringe 100 mcg/ml, 50 mcg/ml</i>	Generic	
<i>octreotide acetate subcutaneous solution prefilled syringe 500 mcg/ml</i>	Generic	NEDS
STIMATE NASAL SOLUTION	Brand	MO; NEDS
VYNDAMAX ORAL CAPSULE	Brand	PA; MO; QL (1 EA per 1 day); NEDS
VYNDAQEL ORAL CAPSULE	Brand	PA; MO; QL (4 EA per 1 day); NEDS
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; MO; NEDS
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
<i>mifepristone oral tablet 300 mg</i>	Generic	PA; NEDS

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

Drug	Status	Requirements/Limits
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Anabolic Steroids		
<i>oxandrolone oral tablet</i>	Generic	PA
Androgens		
ANDRODERM TRANSDERMAL PATCH 24 HOUR	Brand	PA; MO
<i>danazol oral capsule</i>	Generic	
<i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml, 200 mg/ml (1 ml)</i>	Generic	MO
<i>testosterone enanthate intramuscular solution</i>	Generic	MO
<i>testosterone transdermal gel 1.62 %, 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)</i>	Generic	PA; MO
Estrogens		
ALORA TRANSDERMAL PATCH TWICE WEEKLY	Brand	MO; QL (8 EA per 28 days)
<i>altavera oral tablet</i>	Generic	MO
<i>alyacen 1/35 oral tablet</i>	Generic	MO
<i>amabelz oral tablet</i>	Generic	MO
<i>amethia oral tablet</i>	Generic	MO
<i>amethyst oral tablet</i>	Generic	MO
ANGELIQ ORAL TABLET	Brand	MO
<i>apri oral tablet</i>	Generic	MO
<i>aranelle oral tablet</i>	Generic	MO
<i>ashlyna oral tablet</i>	Generic	MO
<i>aubra eq oral tablet</i>	Generic	MO
<i>aviane oral tablet</i>	Generic	MO
<i>balziva oral tablet</i>	Generic	MO
<i>blisovi 24 fe oral tablet</i>	Generic	MO
<i>blisovi fe 1.5/30 oral tablet</i>	Generic	MO
<i>briellyn oral tablet</i>	Generic	MO
<i>caziant oral tablet</i>	Generic	MO
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	Brand	MO
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	Brand	MO

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

Drug	Status	Requirements/Limits
<i>cryselle-28 oral tablet</i>	Generic	MO
<i>cyred eq oral tablet</i>	Generic	MO
<i>desogestrel-ethinyl estradiol oral tablet</i>	Generic	MO
<i>dotti transdermal patch twice weekly</i>	Generic	MO; QL (8 EA per 28 days)
<i>drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg</i>	Generic	MO
<i>drospirenone-ethinyl estradiol oral tablet</i>	Generic	MO
<i>eluryng vaginal ring</i>	Generic	MO
<i>emoquette oral tablet</i>	Generic	MO
<i>enilloring vaginal ring</i>	Generic	MO
<i>enpresse-28 oral tablet</i>	Generic	MO
<i>enskyce oral tablet 0.15-30 mg-mcg</i>	Generic	MO
<i>estarylla oral tablet</i>	Generic	MO
<i>estradiol oral tablet</i>	Generic	MO
<i>estradiol transdermal patch twice weekly</i>	Generic	MO; QL (8 EA per 28 days)
<i>estradiol transdermal patch weekly</i>	Generic	MO
<i>estradiol vaginal cream</i>	Generic	MO
<i>estradiol vaginal tablet</i>	Generic	MO
<i>estradiol-norethindrone acet oral tablet</i>	Generic	MO
ESTRING VAGINAL RING 7.5 MCG/24HR	Brand	MO
<i>ethynodiol diac-eth estradiol oral tablet</i>	Generic	MO
<i>etonogestrel-ethinyl estradiol vaginal ring</i>	Generic	MO
<i>falmina oral tablet</i>	Generic	MO
FEMRING VAGINAL RING	Brand	MO
<i>femynor oral tablet</i>	Generic	MO
<i>finzala oral tablet chewable</i>	Generic	MO
FYAVOLV ORAL TABLET	Generic	MO
<i>gemmily oral capsule</i>	Generic	MO
<i>hailey 24 fe oral tablet</i>	Generic	MO
<i>haloette vaginal ring</i>	Generic	MO
<i>iclevia oral tablet</i>	Generic	MO
<i>introvale oral tablet</i>	Generic	MO
<i>isibloom oral tablet</i>	Generic	MO
<i>jasmiel oral tablet</i>	Generic	MO
<i>jinteli oral tablet</i>	Generic	MO
<i>juleber oral tablet</i>	Generic	MO
<i>junel 1.5/30 oral tablet</i>	Generic	MO
<i>junel 1/20 oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>junel fe 1.5/30 oral tablet</i>	Generic	MO
<i>junel fe 1/20 oral tablet</i>	Generic	MO
<i>junel fe 24 oral tablet</i>	Generic	MO
<i>kaitlib fe oral tablet chewable</i>	Generic	MO
<i>kariva oral tablet</i>	Generic	MO
<i>kelnor 1/35 oral tablet</i>	Generic	MO
KELNOR 1/50 ORAL TABLET	Generic	MO
<i>kurvelo oral tablet</i>	Generic	MO
<i>larin 1.5/30 oral tablet</i>	Generic	MO
<i>larin 1/20 oral tablet</i>	Generic	MO
<i>larin fe 1.5/30 oral tablet</i>	Generic	MO
<i>larin fe 1/20 oral tablet</i>	Generic	MO
<i>larissia oral tablet</i>	Generic	MO
<i>leena oral tablet</i>	Generic	MO
<i>lessina oral tablet</i>	Generic	MO
<i>levonest oral tablet</i>	Generic	MO
<i>levonorgest-eth est & eth est oral tablet</i>	Generic	MO
<i>levonorgest-eth estrad 91-day oral tablet</i>	Generic	MO
<i>levonorgestrel-ethinyl estrad oral tablet</i>	Generic	MO
<i>levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg</i>	Generic	MO
<i>levora 0.15/30 (28) oral tablet</i>	Generic	MO
<i>loryna oral tablet</i>	Generic	MO
<i>low-ogestrel oral tablet</i>	Generic	MO
<i>lutra oral tablet</i>	Generic	MO
<i>lyllana transdermal patch twice weekly</i>	Generic	MO; QL (8 EA per 28 days)
<i>marlissa oral tablet</i>	Generic	MO
MENEST ORAL TABLET	Brand	MO
MENOSTAR TRANSDERMAL PATCH WEEKLY	Brand	MO
<i>mibelas 24 fe oral tablet chewable</i>	Generic	MO
<i>microgestin 1.5/30 oral tablet</i>	Generic	MO
<i>microgestin 1/20 oral tablet</i>	Generic	MO
<i>microgestin 24 fe oral tablet</i>	Generic	MO
<i>microgestin fe 1.5/30 oral tablet</i>	Generic	MO
<i>microgestin fe 1/20 oral tablet</i>	Generic	MO
<i>mili oral tablet</i>	Generic	MO
<i>mimvey oral tablet</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>necon 0.5/35 (28) oral tablet</i>	Generic	MO
<i>necon 1/35 (28) oral tablet</i>	Generic	MO
<i>nikki oral tablet</i>	Generic	MO
<i>norethin ace-eth estrad-fe oral capsule</i>	Generic	MO
<i>norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg</i>	Generic	MO
<i>norethin ace-eth estrad-fe oral tablet chewable</i>	Generic	MO
<i>norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg</i>	Generic	MO
<i>norethindrone-eth estradiol oral tablet</i>	Generic	MO
<i>norethindron-ethinyl estrad-fe oral tablet</i>	Generic	MO
<i>norethin-eth estradiol-fe oral tablet chewable</i>	Generic	MO
<i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>	Generic	MO
<i>norgestim-eth estrad triphasic oral tablet</i>	Generic	MO
<i>nortrel 0.5/35 (28) oral tablet</i>	Generic	MO
<i>nortrel 1/35 (21) oral tablet</i>	Generic	MO
<i>nortrel 1/35 (28) oral tablet</i>	Generic	MO
<i>nortrel 7/7/7 oral tablet</i>	Generic	MO
<i>nylia 1/35 oral tablet</i>	Generic	MO
<i>nylia 7/7/7 oral tablet</i>	Generic	MO
<i>nymyo oral tablet</i>	Generic	MO
<i>ocella oral tablet</i>	Generic	MO
<i>orsythia oral tablet</i>	Generic	MO
<i>pimtrea oral tablet</i>	Generic	MO
<i>pirmella 1/35 oral tablet</i>	Generic	MO
<i>portia-28 oral tablet</i>	Generic	MO
PREFEST ORAL TABLET	Brand	MO
PREMARIN ORAL TABLET	Brand	MO
PREMARIN VAGINAL CREAM	Brand	MO
PREMPHASE ORAL TABLET	Brand	MO
PREMPRO ORAL TABLET	Brand	MO
<i>previfem oral tablet</i>	Generic	MO
<i>reclipsen oral tablet</i>	Generic	MO
<i>setlakin oral tablet</i>	Generic	MO
<i>sprintec 28 oral tablet</i>	Generic	MO
<i>sronyx oral tablet</i>	Generic	MO
SYEDA ORAL TABLET	Generic	MO

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

Drug	Status	Requirements/Limits
<i>tarina 24 fe oral tablet</i>	Generic	MO
<i>tarina fe 1/20 eq oral tablet</i>	Generic	MO
<i>taysofy oral capsule</i>	Generic	MO
<i>tilia fe oral tablet</i>	Generic	MO
<i>tri-estarylla oral tablet</i>	Generic	MO
<i>tri-legest fe oral tablet</i>	Generic	MO
<i>tri-lo-estarylla oral tablet</i>	Generic	MO
<i>tri-lo-sprintec oral tablet</i>	Generic	MO
<i>tri-mili oral tablet</i>	Generic	MO
<i>trinessa (28) oral tablet</i>	Generic	MO
<i>tri-nymyo oral tablet</i>	Generic	MO
<i>tri-sprintec oral tablet</i>	Generic	MO
<i>trivora (28) oral tablet</i>	Generic	MO
<i>tri-vylibra lo oral tablet</i>	Generic	MO
TRI-VYLIBRA ORAL TABLET	Generic	MO
<i>turqoz oral tablet</i>	Generic	MO
<i>tyblume oral tablet chewable</i>	Generic	MO
<i>tydemy oral tablet</i>	Generic	MO
<i>velivet oral tablet</i>	Generic	MO
<i>vienva oral tablet</i>	Generic	MO
<i>vyfemla oral tablet</i>	Generic	MO
VYLIBRA ORAL TABLET	Generic	MO
<i>wymzya fe oral tablet chewable</i>	Generic	MO
<i>yuvafem vaginal tablet</i>	Generic	MO
<i>zovia 1/35 (28) oral tablet</i>	Generic	MO
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
VEOZAH ORAL TABLET	Brand	PA; QL (30 EA per 30 days)
Progestins		
<i>camila oral tablet</i>	Generic	MO
CRINONE VAGINAL GEL	Brand	PA
<i>deblitane oral tablet</i>	Generic	MO
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	Brand	QL (0.65 ML per 90 days)
<i>errin oral tablet</i>	Generic	MO
HEATHER ORAL TABLET	Brand	

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

Drug	Status	Requirements/Limits
<i>hydroxyprogesterone caproate intramuscular solution</i>	Generic	NEDS
<i>incassia oral tablet</i>	Generic	MO
<i>lyleq oral tablet</i>	Generic	MO
<i>lyza oral tablet</i>	Generic	MO
<i>medroxyprogesterone acetate intramuscular suspension</i>	Generic	QL (1 ML per 90 days)
<i>medroxyprogesterone acetate oral tablet</i>	Generic	MO
<i>megestrol acetate oral suspension 40 mg/ml</i>	Generic	
<i>megestrol acetate oral suspension 625 mg/5ml</i>	Generic	MO
<i>megestrol acetate oral tablet</i>	Generic	
<i>nora-be oral tablet</i>	Generic	MO
<i>norethindrone acetate oral tablet</i>	Generic	MO
<i>norethindrone oral tablet</i>	Generic	MO
<i>sharobel oral tablet</i>	Generic	MO
Selective Estrogen Receptor Modifying Agents		
OSPHENA ORAL TABLET	Brand	PA; MO
<i>raloxifene hcl oral tablet</i>	Generic	MO; QL (1 EA per 1 day)
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
<i>euthyrox oral tablet</i>	Generic	MO
LEVO-T ORAL TABLET 100 MCG, 112 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	Generic	MO
<i>levo-t oral tablet 125 mcg</i>	Generic	MO
<i>levothyroxine sodium oral tablet</i>	Generic	MO
LEVOXYL ORAL TABLET	Generic	MO
<i>liothyronine sodium oral tablet</i>	Generic	MO
SYNTHROID ORAL TABLET	Brand	MO
UNITHROID ORAL TABLET	Generic	MO

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

Drug	Status	Requirements/Limits
Hormonal Agents, Suppressant (Adrenal)		
Hormonal Agents, Suppressant (Adrenal)		
ISTURISA ORAL TABLET	Brand	PA; MO; NEDS
LYSODREN ORAL TABLET	Brand	NEDS
Hormonal Agents, Suppressant (Pituitary)		
Hormonal Agents, Suppressant (Pituitary)		
<i>cabergoline oral tablet</i>	Generic	
ELIGARD SUBCUTANEOUS KIT	Brand	
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA NS; QL (4 EA per 365 days); NEDS
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG	Brand	PA NS; QL (1 EA per 28 days)
<i>lanreotide acetate subcutaneous solution</i>	Generic	PA NS; NEDS
LEUPROLIDE ACETATE (3 MONTH) INTRAMUSCULAR INJECTABLE	Generic	
<i>leuprolide acetate injection kit</i>	Generic	NEDS
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	Brand	NEDS
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	Brand	NEDS
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	Brand	NEDS
<i>octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml</i>	Generic	MO
<i>octreotide acetate injection solution 1000 mcg/ml, 500 mcg/ml</i>	Generic	MO; NEDS
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 20 MG, 40 MG, 60 MG	Brand	MO; NEDS
SIGNIFOR SUBCUTANEOUS SOLUTION	Brand	PA; MO; NEDS
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION	Brand	PA NS; NEDS
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	LA; MO; NEDS
SYNAREL NASAL SOLUTION	Brand	NEDS

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

Drug	Status	Requirements/Limits
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
<i>methimazole oral tablet</i>	Generic	MO
<i>propylthiouracil oral tablet</i>	Generic	MO
Immunological Agents		
Angioedema Agents		
BERINERT INTRAVENOUS KIT	Brand	PA; HI
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	Brand	PA; HI
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; NEDS
<i>icatibant acetate subcutaneous solution prefilled syringe</i>	Generic	PA; NEDS
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	Brand	HI
<i>sajazir subcutaneous solution prefilled syringe</i>	Generic	PA; NEDS
TAKHZYRO SUBCUTANEOUS SOLUTION	Brand	PA; MO; QL (4 ML per 28 days); NEDS
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; QL (4 ML per 28 days); NEDS
Antiangiogenic Agents		
EMPAVELI SUBCUTANEOUS SOLUTION	Brand	PA; QL (200 ML per 28 days); NEDS
Immune Suppressants		
<i>azathioprine sodium injection solution reconstituted</i>	Generic	B/D; NEDS
Immunoglobulins		
BIVIGAM INTRAVENOUS SOLUTION 5 GM/50ML	Brand	PA; NEDS
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 5 GM/50ML	Brand	PA; NEDS
GAMMAGARD INJECTION SOLUTION 2.5 GM/25ML	Brand	PA; NEDS
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	Brand	PA; NEDS
GAMMAKED INJECTION SOLUTION 1 GM/10ML	Brand	PA; NEDS

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

Drug	Status	Requirements/Limits
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 5 GM/50ML	Brand	PA; NEDS
GAMUNEX-C INJECTION SOLUTION 1 GM/10ML	Brand	PA; NEDS
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 2 GM/20ML	Brand	PA; NEDS
PANZYGA INTRAVENOUS SOLUTION	Brand	PA; NEDS
PRIVIGEN INTRAVENOUS SOLUTION 20 GM/200ML	Brand	PA; NEDS
Immunological Agents, Other		
ACTIMMUNE SUBCUTANEOUS SOLUTION	Brand	PA NS; LA; MO; NEDS
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; MO; NEDS
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA NS; NEDS
BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; QL (2 ML per 28 days); NEDS
BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; QL (2 ML per 28 days); NEDS
CIBINQO ORAL TABLET	Brand	PA; QL (30 EA per 30 days); NEDS
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (10 ML per 28 days); NEDS
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (10 ML per 28 days); NEDS
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (10 ML per 28 days); NEDS
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (10 ML per 28 days); NEDS
COSENTYX UNOREADY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; QL (10 ML per 28 days); NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML	Brand	PA; MO; QL (4.56 ML per 28 days); NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML	Brand	PA; MO; QL (8 ML per 28 days); NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	Brand	PA; QL (1.34 ML per 28 days); NEDS

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

Drug	Status	Requirements/Limits
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	Brand	PA; MO; QL (4.56 ML per 28 days); NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	Brand	PA; MO; QL (8 ML per 28 days); NEDS
LAGEVRIO ORAL CAPSULE	Brand	QL (40 EA per 5 days)
<i>leflunomide oral tablet</i>	Generic	MO
OLUMIANT ORAL TABLET 1 MG, 2 MG	Brand	PA; MO; NEDS
OLUMIANT ORAL TABLET 4 MG	Brand	PA
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (4 ML per 28 days); NEDS
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	Brand	PA; MO; QL (4 ML per 28 days); NEDS
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML	Brand	PA; MO; QL (1.6 ML per 28 days); NEDS
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 87.5 MG/0.7ML	Brand	PA; MO; QL (2.8 ML per 28 days); NEDS
PAXLOVID (150/100) ORAL TABLET THERAPY PACK	Brand	QL (20 EA per 5 days)
PAXLOVID (300/100) ORAL TABLET THERAPY PACK	Brand	QL (30 EA per 5 days)
RIDAURA ORAL CAPSULE	Brand	MO; NEDS
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG	Brand	PA; MO; QL (1 EA per 1 day); NEDS
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 45 MG	Brand	PA; QL (1 EA per 1 day); NEDS
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	Brand	PA; MO; QL (2 EA per 28 days); NEDS
SKYRIZI INTRAVENOUS SOLUTION	Brand	PA; QL (10 ML per 28 days); NEDS
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (1 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML	Brand	PA; QL (1.2 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 360 MG/2.4ML	Brand	PA; QL (2.4 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (1 ML per 28 days); NEDS
SOTYKTU ORAL TABLET	Brand	PA; NEDS
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	Brand	PA; MO; QL (0.5 ML per 28 days); NEDS

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

Drug	Status	Requirements/Limits
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	Brand	PA; MO; QL (0.5 ML per 28 days); NEDS
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	Brand	PA; MO; QL (1 ML per 28 days); NEDS
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (3 ML per 28 days); NEDS
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/ML	Brand	PA; MO; QL (3 ML per 28 days); NEDS
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Brand	PA; MO; NEDS
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
XELJANZ ORAL SOLUTION	Brand	PA; MO; QL (300 ML per 30 days); NEDS
XELJANZ ORAL TABLET	Brand	PA; MO; QL (60 EA per 30 days); NEDS
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Brand	PA; MO; QL (30 EA per 30 days); NEDS
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; NEDS
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; NEDS
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; NEDS
Immunomodulators		
ILARIS SUBCUTANEOUS SOLUTION	Brand	PA; QL (2 ML per 28 days); NEDS
SYNAGIS INTRAMUSCULAR SOLUTION	Brand	PA; NEDS
Immunosuppressants		
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; NEDS
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Brand	B/D
<i>azathioprine oral tablet</i>	Generic	B/D; MO
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; NEDS
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
CIMZIA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	Brand	PA; NEDS

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

Drug	Status	Requirements/Limits
CIMZIA STARTER KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	Brand	PA; NEDS
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	Brand	PA; NEDS
<i>cyclosporine modified oral capsule</i>	Generic	B/D; MO
<i>cyclosporine modified oral solution</i>	Generic	B/D; MO
<i>cyclosporine oral capsule</i>	Generic	B/D; MO
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	Brand	PA; MO; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	Brand	PA; MO; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; MO; QL (8 EA per 28 days); NEDS
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (8 ML per 28 days); NEDS
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; QL (3 ML per 30 days); NEDS
ENVARUSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.75 MG, 1 MG	Brand	B/D
ENVARUSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG	Brand	B/D; NEDS
<i>everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</i>	Generic	B/D; MO; NEDS
<i>gengraf oral capsule 100 mg, 25 mg</i>	Generic	B/D; MO
<i>gengraf oral solution</i>	Generic	B/D; MO
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML	Brand	PA; MO; QL (6 EA per 28 days); NEDS
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML, 80 MG/0.8ML	Brand	PA; MO; QL (2 EA per 28 days); NEDS
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML	Brand	PA; MO; QL (2 EA per 28 days); NEDS
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML	Brand	PA; MO; QL (6 EA per 28 days); NEDS
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	Brand	PA; MO; QL (4 EA per 28 days); NEDS
HUMIRA-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	Brand	PA; MO; QL (6 EA per 28 days); NEDS

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

Drug	Status	Requirements/Limits
HUMIRA-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	Brand	PA; MO; QL (3 EA per 28 days); NEDS
HUMIRA-PED<40KG CROHNS STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT	Brand	PA; MO; QL (2 EA per 28 days); NEDS
HUMIRA-PED>=40KG CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT	Brand	PA; MO; QL (3 EA per 28 days); NEDS
HUMIRA-PED>=40KG UC STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Brand	PA; MO; QL (4 EA per 28 days); NEDS
HUMIRA-PS/UV/ADOL HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Brand	PA; MO; QL (4 EA per 28 days); NEDS
HUMIRA-PSORIASIS/UEVIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Brand	PA; MO; QL (3 EA per 28 days); NEDS
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; NEDS
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
LUPKYNIS ORAL CAPSULE	Brand	PA; MO; QL (6 EA per 1 day); NEDS
<i>methotrexate oral tablet</i>	Generic	
<i>methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml</i>	Generic	
<i>methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml</i>	Generic	
<i>methotrexate sodium injection solution reconstituted</i>	Generic	
<i>methotrexate sodium oral tablet</i>	Generic	
<i>mycophenolate mofetil oral capsule</i>	Generic	B/D; MO
<i>mycophenolate mofetil oral suspension reconstituted</i>	Generic	B/D; MO; NEDS
<i>mycophenolate mofetil oral tablet</i>	Generic	B/D; MO
<i>mycophenolate sodium oral tablet delayed release</i>	Generic	B/D; MO
OTEZLA ORAL TABLET 30 MG	Brand	PA; MO; QL (60 EA per 30 days); NEDS
OTEZLA ORAL TABLET THERAPY PACK 10 & 20 & 30 MG	Brand	PA; QL (110 EA per 365 days); NEDS
PROGRAF ORAL PACKET	Brand	B/D; MO

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

Drug	Status	Requirements/Limits
REZUROCK ORAL TABLET	Brand	PA; QL (60 EA per 30 days); NEDS
SANDIMMUNE ORAL SOLUTION	Brand	B/D; MO
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; NEDS
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA; MO; NEDS
<i>sirolimus oral solution</i>	Generic	B/D; MO
<i>sirolimus oral tablet</i>	Generic	B/D; MO
<i>tacrolimus oral capsule</i>	Generic	B/D; MO
TAVNEOS ORAL CAPSULE	Brand	PA; QL (180 EA per 30 days); NEDS
TREXALL ORAL TABLET	Brand	
XATMEP ORAL SOLUTION	Brand	
Vaccines		
ABRYSVO INTRAMUSCULAR SOLUTION RECONSTITUTED	Brand	
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	Brand	
ADACEL INTRAMUSCULAR SUSPENSION	Brand	
AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	Brand	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	Brand	
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
DAPTACEL INTRAMUSCULAR SUSPENSION 23-15-5	Brand	
<i>diphtheria-tetanus toxoids dt intramuscular suspension</i>	Generic	
ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	Brand	B/D
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	Brand	B/D
GARDASIL 9 INTRAMUSCULAR SUSPENSION	Brand	

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

Drug	Status	Requirements/Limits
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
HAVRIX INTRAMUSCULAR SUSPENSION	Brand	
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	Generic	B/D
HIBERIX INJECTION SOLUTION RECONSTITUTED	Brand	
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	
INFANRIX INTRAMUSCULAR SUSPENSION	Brand	
IPOL INJECTION INJECTABLE	Brand	
IXCHIQ INTRAMUSCULAR SOLUTION RECONSTITUTED	Brand	
IXIARO INTRAMUSCULAR SUSPENSION	Brand	
JYNNEOS SUBCUTANEOUS SUSPENSION	Brand	
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
MENACTRA INTRAMUSCULAR SOLUTION	Brand	
MENQUADFI INTRAMUSCULAR SOLUTION	Brand	
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	Brand	
M-M-R II INJECTION SOLUTION RECONSTITUTED	Brand	
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	Brand	
PENBRAYA INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	
PREHEVBRIO INTRAMUSCULAR SUSPENSION	Brand	B/D
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	Brand	
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	Brand	
QUADRACEL INTRAMUSCULAR SUSPENSION	Brand	

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

Drug	Status	Requirements/Limits
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	Brand	
RECOMBIVAX HB INJECTION SUSPENSION	Brand	B/D
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	Brand	B/D
ROTARIX ORAL SUSPENSION	Brand	
ROTARIX ORAL SUSPENSION RECONSTITUTED	Brand	
ROTATEQ ORAL SOLUTION	Brand	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	Brand	QL (2 EA per 999 days)
STAMARIL INJECTION SUSPENSION RECONSTITUTED	Brand	
TDVAX INTRAMUSCULAR SUSPENSION	Brand	
TENIVAC INTRAMUSCULAR INJECTABLE	Brand	
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Brand	
TYPHIM VI INTRAMUSCULAR SOLUTION	Brand	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	Brand	
VAQTA INTRAMUSCULAR SUSPENSION	Brand	
VARIVAX SUBCUTANEOUS INJECTABLE	Brand	
VARIZIG INTRAMUSCULAR SOLUTION	Brand	
YF-VAX SUBCUTANEOUS INJECTABLE	Brand	

Inflammatory Bowel Disease Agents

Aminosalicylates

<i>balsalazide disodium oral capsule</i>	Generic	
DIPENTUM ORAL CAPSULE	Brand	MO; NEDS
<i>mesalamine oral tablet delayed release 1.2 gm</i>	Generic	MO
<i>mesalamine oral tablet delayed release 800 mg</i>	Generic	
<i>mesalamine rectal enema</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>mesalamine rectal suppository</i>	Generic	
<i>mesalamine-cleanser rectal kit</i>	Generic	
<i>sulfasalazine oral tablet</i>	Generic	MO
<i>sulfasalazine oral tablet delayed release</i>	Generic	MO
Glucocorticoids		
<i>budesonide er oral tablet extended release 24 hour</i>	Generic	NEDS
<i>budesonide oral capsule delayed release particles</i>	Generic	
<i>hydrocortisone oral tablet</i>	Generic	
<i>hydrocortisone rectal enema</i>	Generic	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
<i>alendronate sodium oral tablet 10 mg, 5 mg</i>	Generic	MO; QL (1 EA per 1 day)
<i>alendronate sodium oral tablet 35 mg, 70 mg</i>	Generic	MO; QL (4 EA per 28 days)
<i>calcitonin (salmon) injection solution</i>	Generic	NEDS
<i>calcitonin (salmon) nasal solution</i>	Generic	MO
<i>calcitriol oral capsule</i>	Generic	MO
<i>calcitriol oral solution</i>	Generic	MO
<i>cinacalcet hcl oral tablet</i>	Generic	MO
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 600 MCG/2.4ML	Brand	PA; NEDS
FOSAMAX PLUS D ORAL TABLET	Brand	MO
<i>ibandronate sodium oral tablet</i>	Generic	MO; QL (1 EA per 28 days)
<i>paricalcitol oral capsule</i>	Generic	PA; MO
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Brand	PA
<i>risedronate sodium oral tablet 150 mg</i>	Generic	MO; QL (1 EA per 28 days)
<i>risedronate sodium oral tablet 30 mg</i>	Generic	QL (1 EA per 1 day)
<i>risedronate sodium oral tablet 35 mg, 35 mg (12 pack), 35 mg (4 pack)</i>	Generic	MO; QL (4 EA per 28 days)
<i>risedronate sodium oral tablet 5 mg</i>	Generic	MO; QL (1 EA per 1 day)
<i>teriparatide (recombinant) subcutaneous solution pen-injector 600 mcg/2.4ml</i>	Generic	PA; NEDS
<i>teriparatide (recombinant) subcutaneous solution pen-injector 620 mcg/2.48ml</i>	Generic	PA; MO; NEDS
<i>teriparatide subcutaneous solution pen-injector</i>	Generic	PA; NEDS
XGEVA SUBCUTANEOUS SOLUTION	Brand	PA; NEDS

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

Drug	Status	Requirements/Limits
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
1ST TIER UNIFINE PENTIPS 31G X 6 MM	Brand	
1ST TIER UNIFINE PENTIPS PLUS 31G X 6 MM	Brand	
ADVOCATE INSULIN PEN NEEDLES 29G X 12.7MM	Brand	
BD DISP NEEDLES 25G X 7/8" , 30G X 1/2"	Brand	
BD PEN	Brand	
BD PEN MINI	Brand	
BD PEN NEEDLE MICRO U/F	Brand	
BD PEN NEEDLE MINI U/F	Brand	
BD PEN NEEDLE NANO 2ND GEN	Brand	
BD PEN NEEDLE NANO U/F	Brand	
BD PEN NEEDLE ORIGINAL U/F	Brand	
BD PEN NEEDLE SHORT U/F	Brand	
BD SYRINGE LUER-LOK 1 ML	Brand	
COMFORT EZ PEN NEEDLES 32G X 8 MM	Brand	
CRYSVITA SUBCUTANEOUS SOLUTION	Brand	PA; MO; NEDS
<i>dichlorphenamide oral tablet</i>	Generic	PA; NEDS
DROPLET PEN NEEDLES 32G X 8 MM	Brand	
EASY TOUCH HYPODERMIC NEEDLE 26G X 3/8" , 26G X 5/8"	Brand	
EXEL COMFORT POINT PEN NEEDLE 29G X 12MM	Brand	
HYPODERMIC NEEDLE 25G X 3/4" , 26G X 3/8" , 26G X 5/8"	Brand	
INSUPEN SENSITIVE 32G X 8 MM	Brand	
<i>levocarnitine oral solution</i>	Generic	MO
<i>levocarnitine oral tablet</i>	Generic	MO
LITETOUCH PEN NEEDLES 29G X 12.7MM	Brand	
<i>methylergonovine maleate oral tablet</i>	Generic	NEDS
MONOJECT HYPODERMIC NEEDLE 18G X 1-1/2" , 20G X 1" , 21G X 1" , 22G X 1" , 23G X 1" , 23G X 3/4" , 25G X 1" , 25G X 1-1/4" , 25G X 5/8" , 26G X 1/2" , 27G X 1/2" , 30G X 3/4"	Brand	
MONOJECT INSULIN SYRINGE U-100 1 ML	Brand	
NATPARA SUBCUTANEOUS CARTRIDGE	Brand	PA; MO; NEDS

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

Drug	Status	Requirements/Limits
PEN NEEDLES 30G X 8 MM	Brand	
PURE COMFORT PEN NEEDLE 32G X 8 MM	Brand	
SURE COMFORT PEN NEEDLES 29G X 12.7MM	Brand	
TECHLITE PEN NEEDLES 32G X 8 MM	Brand	
TRUEPLUS 5-BEVEL PEN NEEDLES 29G X 12.7MM	Brand	
ULTICARE PEN NEEDLES 29G X 12.7MM	Brand	
ULTILET PEN NEEDLE 29G X 12.7MM	Brand	
ULTRA-THIN II PEN NEEDLES	Brand	
Ophthalmic Agents		
Ophthalmic Prostaglandin And Prostanamide Analogs		
<i>brimonidine tartrate-timolol ophthalmic solution</i>	Generic	MO
<i>latanoprost ophthalmic solution</i>	Generic	MO
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	Brand	MO
RHOPRESSA OPHTHALMIC SOLUTION	Brand	MO
<i>travoprost (bak free) ophthalmic solution</i>	Generic	MO
Ophthalmic Agents, Other		
<i>ak-poly-bac ophthalmic ointment</i>	Generic	
<i>atropine sulfate ophthalmic ointment</i>	Generic	MO
<i>atropine sulfate ophthalmic solution 1 %</i>	Generic	MO
<i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>	Generic	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i>	Generic	
<i>cyclopentolate hcl ophthalmic solution 1 %</i>	Generic	MO
CYSTADROPS OPHTHALMIC SOLUTION	Brand	PA; MO; NEDS
CYSTARAN OPHTHALMIC SOLUTION	Brand	PA; MO; NEDS
MIEBO OPHTHALMIC SOLUTION	Brand	PA; QL (12 ML per 30 days); NEDS
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000</i>	Generic	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>	Generic	
<i>neo-polycin hc ophthalmic ointment</i>	Generic	
<i>neo-polycin ophthalmic ointment</i>	Generic	

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

Drug	Status	Requirements/Limits
<i>polycin ophthalmic ointment</i>	Generic	
<i>polymyxin b-trimethoprim ophthalmic solution</i>	Generic	
<i>proparacaine hcl ophthalmic solution</i>	Generic	
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	Brand	MO
RESTASIS OPHTHALMIC EMULSION	Brand	MO
ROCKLATAN OPHTHALMIC SOLUTION	Brand	MO
Ophthalmic Anti-Allergy Agents		
ALOCRILOPHTHALMIC SOLUTION	Brand	
<i>azelastine hcl ophthalmic solution</i>	Generic	
<i>cromolyn sodium ophthalmic solution</i>	Generic	
<i>epinastine hcl ophthalmic solution</i>	Generic	
<i>olopatadine hcl ophthalmic solution 0.1 %</i>	Generic	
Ophthalmic Antiglaucoma Agents		
<i>acetazolamide er oral capsule extended release 12 hour</i>	Generic	MO
<i>apraclonidine hcl ophthalmic solution</i>	Generic	
<i>betaxolol hcl ophthalmic solution</i>	Generic	MO
BETOPTIC-S OPHTHALMIC SUSPENSION	Brand	MO
<i>brimonidine tartrate ophthalmic solution</i>	Generic	MO
<i>brinzolamide ophthalmic suspension</i>	Generic	MO
<i>carteolol hcl ophthalmic solution</i>	Generic	MO
<i>dorzolamide hcl ophthalmic solution</i>	Generic	MO
<i>dorzolamide hcl-timolol mal ophthalmic solution</i>	Generic	MO
<i>dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 %</i>	Generic	MO
IOPIDINE OPHTHALMIC SOLUTION 1 %	Brand	
<i>levobunolol hcl ophthalmic solution 0.5 %</i>	Generic	MO
<i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>	Generic	MO
SIMBRINZA OPHTHALMIC SUSPENSION	Brand	MO
<i>timolol maleate (once-daily) ophthalmic solution</i>	Generic	MO
<i>timolol maleate ophthalmic gel forming solution</i>	Generic	MO
<i>timolol maleate ophthalmic solution</i>	Generic	MO
<i>timolol maleate pf ophthalmic solution 0.5 %</i>	Generic	MO
Ophthalmic Anti-Inflammatories		
ALOMIDE OPHTHALMIC SOLUTION	Brand	
ALREX OPHTHALMIC SUSPENSION	Brand	

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

Drug	Status	Requirements/Limits
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	Brand	
<i>bromfenac sodium (once-daily) ophthalmic solution</i>	Generic	
<i>bromfenac sodium ophthalmic solution 0.07 %</i>	Generic	
<i>dexamethasone sodium phosphate ophthalmic solution</i>	Generic	
<i>diclofenac sodium ophthalmic solution</i>	Generic	
<i>difluprednate ophthalmic emulsion</i>	Generic	
EYSUVIS OPHTHALMIC SUSPENSION	Brand	QL (16.6 ML per 30 days)
<i>fluorometholone ophthalmic suspension</i>	Generic	
<i>flurbiprofen sodium ophthalmic solution</i>	Generic	
FML FORTE OPHTHALMIC SUSPENSION	Brand	
FML OPHTHALMIC OINTMENT	Brand	
INVELTYS OPHTHALMIC SUSPENSION	Brand	
<i>ketorolac tromethamine ophthalmic solution</i>	Generic	
<i>loteprednol etabonate ophthalmic suspension</i>	Generic	
MAXIDEX OPHTHALMIC SUSPENSION	Brand	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	Generic	
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	Generic	
NEVANAC OPHTHALMIC SUSPENSION	Brand	
PRED MILD OPHTHALMIC SUSPENSION	Brand	
PRED-G OPHTHALMIC SUSPENSION	Brand	
PRED-G S.O.P. OPHTHALMIC OINTMENT	Brand	
<i>prednisolone acetate ophthalmic suspension</i>	Generic	
<i>prednisolone sodium phosphate ophthalmic solution</i>	Generic	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	Generic	
TOBRADEX OPHTHALMIC OINTMENT	Brand	
<i>tobramycin-dexamethasone ophthalmic suspension</i>	Generic	
Otic Agents		
Otic Agents		
<i>acetazol hc otic solution</i>	Generic	
<i>acetic acid otic solution</i>	Generic	
<i>ciprofloxacin-dexamethasone otic suspension</i>	Generic	
FLAC OTIC OIL	Generic	

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

Drug	Status	Requirements/Limits
<i>fluocinolone acetonide otic oil</i>	Generic	
<i>hydrocortisone-acetic acid otic solution</i>	Generic	
<i>neomycin-polymyxin-hc otic solution 1 %</i>	Generic	
<i>neomycin-polymyxin-hc otic suspension</i>	Generic	
Respiratory Tract/Pulmonary Agents		
Antihistamines		
<i>azelastine hcl nasal solution 0.1 %, 0.15 %</i>	Generic	
<i>cyproheptadine hcl oral tablet</i>	Generic	
<i>diphenhydramine hcl injection solution</i>	Generic	
<i>hydroxyzine pamoate oral capsule</i>	Generic	
<i>levocetirizine dihydrochloride oral tablet</i>	Generic	QL (1 EA per 1 day)
<i>olopatadine hcl nasal solution</i>	Generic	
Anti-Inflammatories, Inhaled Corticosteroids		
ARNUTY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Brand	MO
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT	Brand	MO
<i>budesonide inhalation suspension</i>	Generic	B/D; MO
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT	Brand	MO
FLOVENT HFA INHALATION AEROSOL	Brand	MO
<i>flunisolide nasal solution 25 mcg/act (0.025%)</i>	Generic	
<i>fluticasone propionate diskus inhalation aerosol powder breath activated 100 mcg/act</i>	Generic	
<i>fluticasone propionate diskus inhalation aerosol powder breath activated 250 mcg/act, 50 mcg/act</i>	Generic	MO
<i>fluticasone propionate hfa inhalation aerosol</i>	Generic	MO
<i>fluticasone propionate nasal suspension</i>	Generic	
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	Brand	MO
Antileukotrienes		
<i>montelukast sodium oral packet</i>	Generic	MO
<i>montelukast sodium oral tablet</i>	Generic	MO
<i>montelukast sodium oral tablet chewable</i>	Generic	MO

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

Drug	Status	Requirements/Limits
<i>zafirlukast oral tablet</i>	Generic	MO; QL (2 EA per 1 day)
<i>zileuton er oral tablet extended release 12 hour</i>	Generic	MO; QL (4 EA per 1 day); NEDS
Bronchodilators, Anticholinergic		
ATROVENT HFA INHALATION AEROSOL SOLUTION	Brand	MO
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	Brand	MO
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT	Brand	MO
<i>ipratropium bromide inhalation solution</i>	Generic	B/D; MO
<i>ipratropium bromide nasal solution</i>	Generic	MO
<i>ipratropium-albuterol inhalation solution</i>	Generic	B/D; MO
SPIRIVA HANDHALER INHALATION CAPSULE	Brand	MO
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	Brand	MO
<i>tiotropium bromide monohydrate inhalation capsule</i>	Generic	
Bronchodilators, Sympathomimetic		
<i>albuterol sulfate hfa inhalation aerosol solution</i>	Generic	MO
<i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml</i>	Generic	B/D; MO
<i>albuterol sulfate oral syrup</i>	Generic	MO
<i>albuterol sulfate oral tablet</i>	Generic	MO
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 50-25 MCG/INH	Brand	MO
<i>epinephrine injection solution 0.3 mg/0.3ml</i>	Generic	
<i>epinephrine injection solution auto-injector 0.15 mg/0.3ml, 0.3 mg/0.3ml</i>	Generic	
<i>levalbuterol hcl inhalation nebulization solution</i>	Generic	B/D; MO
<i>levalbuterol tartrate inhalation aerosol</i>	Generic	MO
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	Brand	MO
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	Brand	MO

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

Drug	Status	Requirements/Limits
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE	Brand	QL (2 EA per 1 day)
<i>terbutaline sulfate oral tablet</i>	Generic	MO
Cystic Fibrosis Agents		
BRONCHITOL INHALATION CAPSULE	Brand	PA; MO; NEDS
CAYSTON INHALATION SOLUTION RECONSTITUTED	Brand	PA; NEDS
KALYDECO ORAL PACKET 13.4 MG, 5.8 MG	Brand	PA; NEDS
KALYDECO ORAL PACKET 25 MG, 50 MG, 75 MG	Brand	PA; MO; NEDS
KALYDECO ORAL TABLET	Brand	PA; MO; NEDS
ORKAMBI ORAL PACKET	Brand	PA; MO; NEDS
ORKAMBI ORAL TABLET	Brand	PA; MO; NEDS
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	Brand	B/D; MO; NEDS
SYMDEKO ORAL TABLET THERAPY PACK	Brand	PA; MO; QL (2 EA per 1 day); NEDS
TOBI PODHALER INHALATION CAPSULE	Brand	MO; NEDS
<i>tobramycin inhalation nebulization solution 300 mg/5ml</i>	Generic	B/D; MO; NEDS
TRIKAFTA ORAL TABLET THERAPY PACK	Brand	PA; MO; QL (3 EA per 1 day); NEDS
TRIKAFTA ORAL THERAPY PACK	Brand	PA; QL (56 EA per 28 days); NEDS
Mast Cell Stabilizers		
<i>cromolyn sodium inhalation nebulization solution</i>	Generic	B/D; MO; NEDS
<i>cromolyn sodium oral concentrate</i>	Generic	MO
Phosphodiesterase Inhibitors, Airways Disease		
ELIXOPHYLLIN ORAL ELIXIR	Brand	MO
<i>roflumilast oral tablet</i>	Generic	MO; QL (30 EA per 30 days)
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Brand	MO
<i>theophylline er oral tablet extended release 12 hour 300 mg, 450 mg</i>	Generic	MO
<i>theophylline er oral tablet extended release 24 hour</i>	Generic	MO
<i>theophylline oral elixir</i>	Brand	

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

Drug	Status	Requirements/Limits
Pulmonary Antihypertensives		
ADEMPAS ORAL TABLET	Brand	PA; MO; NEDS
ALYQ ORAL TABLET	Generic	PA; MO
<i>ambrisentan oral tablet</i>	Generic	PA; MO; NEDS
<i>bosentan oral tablet</i>	Generic	PA; MO; NEDS
LIQREV ORAL SUSPENSION	Brand	PA; NEDS
OPSUMIT ORAL TABLET	Brand	PA; MO; NEDS
ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK	Brand	PA; NEDS
ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK	Brand	PA; NEDS
ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK	Brand	PA; NEDS
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG	Brand	PA; MO
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.25 MG, 1 MG, 2.5 MG, 5 MG	Brand	PA; MO; NEDS
<i>sildenafil citrate oral suspension reconstituted</i>	Generic	PA; MO
<i>sildenafil citrate oral tablet 20 mg</i>	Generic	PA; MO
<i>tadalafil (pah) oral tablet</i>	Generic	PA; MO
TRACLEER ORAL TABLET SOLUBLE	Brand	PA; MO; NEDS
UPTRAVI ORAL TABLET	Brand	PA; MO; NEDS
UPTRAVI TITRATION ORAL TABLET THERAPY PACK	Brand	PA; NEDS
VENTAVIS INHALATION SOLUTION	Brand	PA; MO; NEDS
WINREVAIR SUBCUTANEOUS KIT	Brand	PA; QL (1 EA per 21 days); NEDS
Pulmonary Fibrosis Agents		
OFEV ORAL CAPSULE	Brand	PA; MO; NEDS
<i>pirfenidone oral capsule</i>	Generic	PA; MO; NEDS
<i>pirfenidone oral tablet</i>	Generic	PA; MO; NEDS
Respiratory Tract Agents, Other		
<i>acetylcysteine inhalation solution</i>	Generic	B/D
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT	Brand	MO
BEVESPI AEROSPHERE INHALATION AEROSOL	Brand	MO
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION	Brand	MO

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

Drug	Status	Requirements/Limits
SYMBICORT INHALATION AEROSOL	Brand	MO
Respiratory Tract/Pulmonary Agents		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	Brand	MO
ADVAIR HFA INHALATION AEROSOL	Brand	MO
BREZTRI AEROSPHERE INHALATION AEROSOL	Brand	MO
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; NEDS
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML	Brand	PA
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML	Brand	PA; MO; NEDS
<i>mometasone furoate nasal suspension</i>	Generic	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Brand	PA; MO; QL (3 ML per 28 days); NEDS
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	Brand	PA; MO; QL (3 ML per 28 days); NEDS
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	Brand	PA; QL (0.4 ML per 28 days); NEDS
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	Brand	PA; MO; QL (3 EA per 28 days); NEDS
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	Brand	MO
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
<i>carisoprodol oral tablet</i>	Generic	PA
<i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</i>	Generic	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	Generic	
<i>orphenadrine citrate er oral tablet extended release 12 hour</i>	Generic	
Sleep Disorder Agents		
Gaba Receptor Modulators		
<i>eszopiclone oral tablet</i>	Generic	QL (30 EA per 30 days)
<i>flurazepam hcl oral capsule</i>	Generic	QL (30 EA per 30 days)
<i>temazepam oral capsule</i>	Generic	QL (30 EA per 30 days)

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

Drug	Status	Requirements/Limits
<i>zaleplon oral capsule</i>	Generic	QL (1 EA per 1 day)
<i>zolpidem tartrate er oral tablet extended release</i>	Generic	QL (30 EA per 30 days)
<i>zolpidem tartrate oral tablet</i>	Generic	QL (30 EA per 30 days)
<i>zolpidem tartrate sublingual tablet sublingual</i>	Generic	
Sleep Disorders, Other		
<i>doxepin hcl oral tablet</i>	Generic	QL (30 EA per 30 days)
LUMRYZ ORAL PACKET	Brand	PA; NEDS
<i>modafinil oral tablet</i>	Generic	PA; MO; QL (1 EA per 1 day)
<i>ramelteon oral tablet</i>	Generic	QL (30 EA per 30 days)
<i>sodium oxybate oral solution</i>	Generic	PA; LA; NEDS
<i>triazolam oral tablet</i>	Generic	QL (60 EA per 30 days)
XYREM ORAL SOLUTION	Brand	PA; LA; NEDS
XYWAV ORAL SOLUTION	Brand	PA; NEDS
Sleep Promoting Agents		
BELSOMRA ORAL TABLET	Brand	QL (30 EA per 30 days)

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

D. Index of Covered Drugs

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



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

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<i>carisoprodol</i>	96	<i>ciprofloxacin hcl</i>	12
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<i>carvedilol</i>	50	<i>citalopram hydrobromide</i>	17
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<i>caspofungin acetate</i>	19	<i>clarithromycin</i>	11
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<i>cephalexin</i>	9	<i>clindamycin phosphate</i>	7
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<i>cevimeline hcl</i>	57	CLINIMIX E/DEXTROSE	
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<i>chloroquine phosphate</i>	29	CLINIMIX E/DEXTROSE	
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<i>cholestyramine</i>	53	(5/15)	61
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CRYSVITA	88	DEXCOM G7 SENSOR	44	<i>dorzolamide hcl-timolol mal pf..</i>	90
CUVRIOR	66	<i>dexlansoprazole</i>	63	<i>dotti</i>	72
CVS GAUZE STERILE	42	<i>dexmethylphenidate hcl</i>	55	DOVATO	36
<i>cyclobenzaprine hcl</i>	96	<i>dexmethylphenidate hcl er</i>	55	<i>doxazosin mesylate</i>	66
<i>cyclopentolate hcl</i>	89	<i>dextroamphetamine sulfate</i>	54	<i>doxepin hcl</i>	18, 38, 58, 97
<i>cyclophosphamide</i>	22	<i>dextroamphetamine sulfate er</i>	54	<i>doxercalciferol</i>	61
CYCLOSET	39	<i>dextrose</i>	61	<i>doxy 100</i>	12
<i>cyclosporine</i>	82	<i>dextrose-sodium chloride</i>	61	<i>doxycycline</i>	58
<i>cyclosporine modified</i>	82	DIACOMIT	13	<i>doxycycline hyclate</i>	12
<i>cyproheptadine hcl</i>	92	<i>diazepam</i>	14, 38	<i>doxycycline monohydrate</i>	12
<i>cyred eq</i>	72	DIAZEPAM INTENSOL	38	<i>doxylamine-pyridoxine</i>	18
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CYSTAGON	64	<i>dichlorphenamide</i>	88	<i>dronabinol</i>	19
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<i>deferasirox</i>	60	<i>digoxin</i>	51	TEST	44
<i>deferiprone</i>	60	<i>dihydroergotamine mesylate</i>	21	EASY STEP TEST	45
<i>deflazacort</i>	68	DILANTIN	15	EASY TALK BLOOD	
DELSTRIGO	36	<i>diltiazem hcl</i>	50	GLUCOSE TEST	45
DEPO-SUBQ PROVERA 104	75	<i>diltiazem hcl er</i>	50	EASY TOUCH	
DESCOVY	36	<i>diltiazem hcl er beads</i>	50	HYPODERMIC NEEDLE	88
<i>desipramine hcl</i>	18	<i>diltiazem hcl er coated beads</i>	50	EASY TOUCH TEST	45
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EMEND	19	<i>estarylla</i>	72	<i>fenofibrate</i>	53
<i>emoquette</i>	72	<i>estazolam</i>	38	<i>fenofibrate micronized</i>	52
EMPAVELI	78	<i>estradiol</i>	72	<i>fenoprofen calcium</i>	3
EMSAM	17	<i>estradiol-norethindrone acet</i>	72	<i>fentanyl</i>	4
<i>emtricitabine</i>	36	ESTRING	72	<i>fentanyl citrate</i>	4
<i>emtricitabine-tenofovir df</i>	36	<i>eszopiclone</i>	96	FETZIMA	17
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<i>enalapril maleate</i>	49	<i>ethambutol hcl</i>	22	FILSPARI	51
<i>enalapril-hydrochlorothiazide</i>	49	<i>ethosuximide</i>	14	FILSUVEZ	58
ENBREL	82	<i>ethynodiol diac-eth estradiol</i>	72	<i>finasteride</i>	66
ENBREL MINI	82	<i>etodolac</i>	3	<i>finzala</i>	72
ENBREL SURECLICK	82	<i>etodolac er</i>	3	FINTEPLA	13
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<i>endocet</i>	4	<i>etravirine</i>	36	FIRDAPSE	55
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<i>enilloring</i>	72	<i>everolimus</i>	26, 82	FIRMAGON (240 MG DOSE)	77
ENLITE GLUCOSE		EVERSENSE E3		FIRVANQ	7
SENSOR	45	SENSOR/HOLDER	45	FLAC	91
<i>enoxaparin sodium</i>	46	EVERSENSE E3 SMART		<i>flavoxate hcl</i>	66
<i>enpresse-28</i>	72	TRANSMITTER	45	FLEBOGAMMA DIF	78
<i>enskyce</i>	72	EVERSENSE		<i>flecainide acetate</i>	49
ENSPRYNG	82	SENSOR/HOLDER	45	FLOVENT DISKUS	92
<i>entacapone</i>	30	EVERSENSE SMART		FLOVENT HFA	92
<i>entecavir</i>	34	TRANSMITTER	45	<i>fluconazole</i>	20
ENTRESTO	48	EVOTAZ	37	<i>fluconazole in sodium chloride</i> ...20	
<i>enulose</i>	63	EVRYSDI	55	<i>flucytosine</i>	20
ENVARUSUS XR	82	EXEL COMFORT POINT		<i>fludrocortisone acetate</i>	68
EPCLUSA	34	PEN NEEDLE	88	<i>flunisolide</i>	92
EPIDIOLEX	14	EXELDERM	20	<i>fluocinolone acetonide</i>	68, 92
<i>epinastine hcl</i>	90	<i>exemestane</i>	25	<i>fluocinolone acetonide body</i>	68
<i>epinephrine</i>	93	EXKIVITY	26	<i>fluocinolone acetonide scalp</i>	68
<i>epitol</i>	15	EXSERVAN	55	<i>fluocinonide</i>	68
EPIVIR HBV	34	EYSUVIS	91	<i>fluocinonide emulsified base</i>	68
<i>eplerenone</i>	52	<i>ezetimibe</i>	53	<i>fluorometholone</i>	91
EPRONTIA	15	<i>ezetimibe-simvastatin</i>	53	<i>flurouracil</i>	58
EQUETRO	15	FABHALTA	46	<i>fluoxetine hcl</i>	17, 18
ERAXIS	20	<i>falmina</i>	72	<i>fluoxetine hcl (pmdd)</i>	17
<i>ergoloid mesylates</i>	16	<i>famciclovir</i>	35	<i>fluphenazine decanoate</i>	31
ERGOMAR	21	<i>famotidine</i>	63	<i>fluphenazine hcl</i>	31
<i>ergotamine-caffeine</i>	21	FANAPT	32	<i>flurazepam hcl</i>	96
ERIVEDGE	26	FANAPT TITRATION		<i>flurbiprofen</i>	3
ERLEADA	23	PACK	32	<i>flurbiprofen sodium</i>	91
<i>erlotinib hcl</i>	26	FARXIGA	39	<i>flutamide</i>	23
<i>errin</i>	75	FARYDAK	26	<i>fluticasone propionate</i>	68, 92
<i>ertapenem sodium</i>	9	FASENRA	96	<i>fluticasone propionate diskus</i>	92
<i>erythromycin</i>	11, 58	FASENRA PEN	96	<i>fluticasone propionate hfa</i>	92
<i>erythromycin base</i>	11	<i>febuxostat</i>	21	<i>fluvastatin sodium</i>	53
<i>erythromycin ethylsuccinate</i>	11	<i>felbamate</i>	15	<i>fluvastatin sodium er</i>	53
<i>erythromycin stearate</i>	11	<i>felodipine er</i>	50	<i>fluvoxamine maleate</i>	18

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

<i>fluvoxamine maleate er</i>	18	<i>gavilyte-g</i>	63	HALOG	68
FML	91	<i>gavilyte-n with flavor pack</i>	63	<i>haloperidol</i>	31
FML FORTE	91	GAVRETO	24	<i>haloperidol decanoate</i>	31
<i>fondaparinux sodium</i>	47	<i>gefitinib</i>	26	<i>haloperidol lactate</i>	31
FORTEO	87	<i>gemfibrozil</i>	53	HARVONI	34
FOSAMAX PLUS D	87	<i>gemmily</i>	72	HAVRIX	85
<i>fosamprenavir calcium</i>	37	<i>generlac</i>	63	HEATHER	75
<i>fosfomycin tromethamine</i>	7	<i>gengraf</i>	82	<i>heparin sodium (porcine)</i>	47
<i>fosinopril sodium</i>	49	GENOTROPIN	70	<i>heparin sodium (porcine) pf</i>	47
<i>fosinopril sodium-hctz</i>	49	GENOTROPIN MINIQUICK	70	HEPLISAV-B	85
<i>fosphenytoin sodium</i>	15	GENTAK	6	HETLIOZ LQ	56
FOTIVDA	26	<i>gentamicin in saline</i>	6	HIBERIX	85
FRAGMIN	47	<i>gentamicin sulfate</i>	6	HUMALOG	42
FREESTYLE INSULINX		GENVOYA	35	HUMALOG JUNIOR	
TEST	45	GILOTRIF	24	KWIKPEN	42
FREESTYLE LIBRE 14 DAY		GLASSIA	64	HUMALOG KWIKPEN	42
READER	45	<i>glatiramer acetate</i>	56	HUMALOG MIX 50/50	42
FREESTYLE LIBRE 14 DAY		<i>glatopa</i>	56	HUMALOG MIX 50/50	
SENSOR	45	GLATOPA	56	KWIKPEN	42
FREESTYLE LIBRE 2		GLEOSTINE	22	HUMALOG MIX 75/25	42
READER	45	<i>glimepiride</i>	39	HUMALOG MIX 75/25	
FREESTYLE LIBRE 2		<i>glipizide</i>	39	KWIKPEN	42
SENSOR	45	<i>glipizide er</i>	39	HUMIRA (2 PEN)	82
FREESTYLE LIBRE 3		<i>glipizide-metformin hcl</i>	41	HUMIRA (2 SYRINGE)	82
SENSOR	45	GLOBAL ALCOHOL PREP		HUMIRA-CD/UC/HS	
FREESTYLE LIBRE		EASE	7	STARTER	82, 83
READER	45	GLUCAGEN HYPOKIT	41	HUMIRA-PED<40KG	
FREESTYLE LITE TEST	45	<i>glucagon emergency</i>	41	CROHNS STARTER	83
FREESTYLE PRECISION		<i>glyburide</i>	39	HUMIRA-PED>/=40KG	
NEO TEST	45	<i>glyburide micronized</i>	39	CROHNS START	83
FREESTYLE TEST	45	<i>glyburide-metformin</i>	41	HUMIRA-PED>/=40KG UC	
FRUZAQLA	26	<i>glycopyrrolate</i>	62	STARTER	83
<i>fulvestrant</i>	23	GLYXAMBI	39	HUMIRA-PS/UV/ADOL HS	
<i>furosemide</i>	52	<i>granisetron hcl</i>	19	STARTER	83
FUZEON	37	<i>griseofulvin microsize</i>	20	HUMIRA-	
FYAVOLV	72	<i>griseofulvin ultramicrosize</i>	20	PSORIASIS/UEVIT	
FYCOMPA	15	<i>guanfacine hcl</i>	48	STARTER	83
<i>gabapentin</i>	14	<i>guanfacine hcl er</i>	55	HUMULIN 70/30	42
GALAFOLD	64	GUARDIAN LINK 3		HUMULIN 70/30 KWIKPEN	42
<i>galantamine hydrobromide</i>	16	TRANSMITTER	45	HUMULIN N	42
<i>galantamine hydrobromide er</i>	16	GUARDIAN REAL-TIME		HUMULIN N KWIKPEN	42
GAMMAGARD	78	REPLACE PED	45	HUMULIN R	42
GAMMAGARD S/D LESS		GUARDIAN SENSOR (3)	45	HUMULIN R U-500	
IGA	78	GVOKE HYPOPEN 2-PACK	41	(CONCENTRATED)	42
GAMMAKED	78	GVOKE KIT	41	HUMULIN R U-500	
GAMMAPLEX	79	GVOKE PFS	41	KWIKPEN	42
GAMUNEX-C	79	HAEGARDA	78	<i>hydralazine hcl</i>	54
GARDASIL 9	84, 85	<i>hailey 24 fe</i>	72	<i>hydrochlorothiazide</i>	52
<i>gatifloxacin</i>	12	<i>halcinonide</i>	68	<i>hydrocodone-acetaminophen</i>	4
GATTEX	62	<i>halobetasol propionate</i>	68	<i>hydrocodone-ibuprofen</i>	4
GAVILYTE-C	63	<i>haloette</i>	72	<i>hydrocortisone</i>	69, 87

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

<i>hydrocortisone (perianal)</i>	58	INVEGA SUSTENNA	32	<i>kcl in dextrose-nacl</i>	59
<i>hydrocortisone butyrate</i>	69	INVEGA TRINZA	32	<i>kcl-lactated ringers-d5w</i>	59
<i>hydrocortisone max st</i>	69	INVELTYS	91	<i>kelnor 1/35</i>	73
<i>hydrocortisone valerate</i>	69	IOPIDINE	90	KELNOR 1/50	73
<i>hydrocortisone-acetic acid</i>	92	IPOL	85	KERENDIA	52
<i>hydromorphone hcl</i>	4	<i>ipratropium bromide</i>	93	KESIMPTA	56
<i>hydroxychloroquine sulfate</i>	30	<i>ipratropium-albuterol</i>	93	<i>ketoconazole</i>	20
<i>hydroxyprogesterone caproate</i> ...	76	<i>irbesartan</i>	48	<i>ketoprofen</i>	3
<i>hydroxyurea</i>	23	<i>irbesartan-hydrochlorothiazide</i> ..	48	<i>ketoprofen er</i>	3
<i>hydroxyzine hcl</i>	38	ISENTRESS	35	<i>ketorolac tromethamine</i>	3, 91
<i>hydroxyzine pamoate</i>	92	ISENTRESS HD	35	KEVZARA	83
HYPODERMIC NEEDLE	88	<i>isibloom</i>	72	KINERET	83
<i>ibandronate sodium</i>	87	ISOLYTE-P IN D5W	61	KINRIX	85
IBRANCE	24	ISOLYTE-S PH 7.4	59	<i>kionex</i>	60
IBU	3	<i>isoniazid</i>	22	KISQALI (200 MG DOSE)	27
<i>ibuprofen</i>	3	<i>isosorbide dinitrate</i>	54	KISQALI (400 MG DOSE)	27
<i>icatibant acetate</i>	78	<i>isosorbide mononitrate</i>	54	KISQALI (600 MG DOSE)	27
<i>iclevia</i>	72	<i>isosorbide mononitrate er</i>	54	KISQALI FEMARA (200 MG DOSE)	24
ICLUSIG	26	<i>isradipine</i>	50	KISQALI FEMARA (400 MG DOSE)	24
<i>icosapent ethyl</i>	53	ISTURISA	77	KISQALI FEMARA (600 MG DOSE)	24
IDHIFA	25	<i>itraconazole</i>	20	<i>klor-con</i>	59
ILARIS	81	<i>ivabradine hcl</i>	51	<i>klor-con 10</i>	59
<i>imatinib mesylate</i>	26	<i>ivermectin</i>	29	<i>klor-con m10</i>	59
IMBRUVICA	26, 27	IWILFIN	24	KLOR-CON M15	59
<i>imipenem-cilastatin</i>	9	IXCHIQ	85	<i>klor-con m20</i>	59
<i>imipramine hcl</i>	18	IXIARO	85	KLOXXADO	6
<i>imiquimod</i>	58	JAKAFI	27	KOSELUGO	27
IMOVAX RABIES	85	JANTOVEN	47	<i>kourzeq</i>	57
IMPAVIDO	30	JANUMET	41	K-PHOS NO 2	59
INBRIJA	31	JANUMET XR	41	KRAZATI	24
<i>incassia</i>	76	JANUVIA	39	KRINTAFEL	30
INCRELEX	70	JARDIANCE	39	<i>kurvelo</i>	73
INCRUSE ELLIPTA	93	<i>jasmiel</i>	72	KYNMOBI	30
<i>indapamide</i>	52	JAYPIRCA	27	<i>labetalol hcl</i>	50
<i>indomethacin</i>	3	JENTADUETO	41	<i>lacosamide</i>	15
<i>indomethacin er</i>	3	JENTADUETO XR	41	<i>lactulose</i>	63
INFANRIX	85	<i>jinteli</i>	72	LAGEVRIO	80
INGREZZA	56	<i>juleber</i>	72	<i>lamivudine</i>	34, 36
INLYTA	27	JULUCA	36	<i>lamivudine-zidovudine</i>	36
INQOVI	23	<i>junel 1.5/30</i>	72	<i>lamotrigine</i>	13, 39
INREBIC	27	<i>junel 1/20</i>	72	<i>lamotrigine starter kit-blue</i>	13
<i>insulin lispro</i>	42	<i>junel fe 1.5/30</i>	73	<i>lamotrigine starter kit-green</i>	13
<i>insulin lispro (1 unit dial)</i>	42	<i>junel fe 1/20</i>	73	<i>lamotrigine starter kit-orange</i> ...	13
<i>insulin lispro junior kwikpen</i>	42	<i>junel fe 24</i>	73	<i>lanreotide acetate</i>	77
<i>insulin lispro prot & lispro</i>	43	JUXTAPID	53	<i>lansoprazole</i>	64
INSUPEN SENSITIVE	88	JYLAMVO	24	LANTUS	43
INTELENCE	36	JYNARQUE	60	LANTUS SOLOSTAR	43
INTRALIPID	61	JYNNEOS	85	<i>lapatinib ditosylate</i>	27
INTRON A	34	<i>kaitlib fe</i>	73		
<i>introvale</i>	72	KALYDECO	94		
INVEGA HAFYERA	32	<i>kariva</i>	73		

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

<i>larin 1.5/30</i>	73	<i>levo-t</i>	76	LUPRON DEPOT (4-	
<i>larin 1/20</i>	73	<i>levothyroxine sodium</i>	76	MONTH)	77
<i>larin fe 1.5/30</i>	73	LEVOXYL	76	<i>lurasidone hcl</i>	32
<i>larin fe 1/20</i>	73	LEXIVA	37	<i>lutera</i>	73
<i>larissia</i>	73	<i>l-glutamine</i>	64	LYBALVI	32
<i>latanoprost</i>	89	LIBERVANT	38	<i>lyleq</i>	76
<i>ledipasvir-sofosbuvir</i>	34	<i>lidocaine</i>	5	<i>lyllana</i>	73
<i>leena</i>	73	<i>lidocaine hcl</i>	5	LYNPARZA	27
<i>leflunomide</i>	80	<i>lidocaine hcl (pf)</i>	5	LYSODREN	77
<i>lenalidomide</i>	23	<i>lidocaine hcl urethral/mucosal</i>	5	LYTGOBI (12 MG DAILY	
LENVIMA (10 MG DAILY		<i>lidocaine viscous hcl</i>	5	DOSE)	27
DOSE)	27	<i>lidocaine-prilocaine</i>	5	LYTGOBI (16 MG DAILY	
LENVIMA (12 MG DAILY		<i>lindane</i>	30	DOSE)	27
DOSE)	27	<i>linezolid</i>	7	LYTGOBI (20 MG DAILY	
LENVIMA (14 MG DAILY		LINZESS	63	DOSE)	27
DOSE)	27	<i>liothyronine sodium</i>	76	<i>lyza</i>	76
LENVIMA (18 MG DAILY		LIQREV	95	<i>magnesium sulfate</i>	59
DOSE)	27	<i>lisinopril</i>	49	<i>malathion</i>	30
LENVIMA (20 MG DAILY		<i>lisinopril-hydrochlorothiazide</i>	49	<i>maraviroc</i>	37
DOSE)	27	LITETOUCH PEN		<i>marlissa</i>	73
LENVIMA (24 MG DAILY		NEEDLES	88	MARPLAN	17
DOSE)	27	LITFULO	58	MATULANE	22
LENVIMA (4 MG DAILY		<i>lithium</i>	39	<i>matzim la</i>	50
DOSE)	27	<i>lithium carbonate</i>	39	MAVYRET	34
LENVIMA (8 MG DAILY		<i>lithium carbonate er</i>	39	MAXIDEX	91
DOSE)	27	LIVMARLI	62	<i>meclizine hcl</i>	18
<i>lessina</i>	73	LIVTENCITY	34	<i>meclofenamate sodium</i>	3
<i>letrozole</i>	25	LONSURF	23	MEDROL	69
<i>leucovorin calcium</i>	24, 29	<i>loperamide hcl</i>	62	<i>medroxyprogesterone acetate</i>	76
LEUKERAN	22	<i>lopinavir-ritonavir</i>	37	<i>mefloquine hcl</i>	30
LEUKINE	47	<i>lorazepam</i>	38	<i>megestrol acetate</i>	76
<i>leuprolide acetate</i>	77	<i>lorazepam intensol</i>	38	MEKINIST	28
LEUPROLIDE ACETATE (3		LORBRENA	27	MEKTOVI	28
MONTH)	77	<i>loryna</i>	73	<i>meloxicam</i>	3
<i>levalbuterol hcl</i>	93	<i>losartan potassium</i>	48	<i>memantine hcl</i>	16
<i>levalbuterol tartrate</i>	93	<i>losartan potassium-hctz</i>	48	<i>memantine hcl er</i>	16
<i>levetiracetam</i>	13	<i>loteprednol etabonate</i>	91	MENACTRA	85
<i>levetiracetam er</i>	13	<i>lovastatin</i>	53	MENEST	73
<i>levobunolol hcl</i>	90	<i>low-ogestrel</i>	73	MENOSTAR	73
<i>levocarnitine</i>	88	<i>loxapine succinate</i>	31	MENQUADFI	85
<i>levocetirizine dihydrochloride</i>	92	<i>lubiprostone</i>	63	MENVEO	85
<i>levofloxacin</i>	12	LUCEMYRA	5	<i>meperidine hcl</i>	4
<i>levofloxacin in d5w</i>	12	LUMAKRAS	24	<i>mercaptopurine</i>	23
<i>levonest</i>	73	LUMIGAN	89	<i>meropenem</i>	10
<i>levonorgest-eth est & eth est</i>	73	LUMRYZ	97	<i>mesalamine</i>	86, 87
<i>levonorgest-eth estrad 91-day</i>	73	LUPKYNIS	83	<i>mesalamine-cleanser</i>	87
<i>levonorgestrel-ethinyl estrad</i>	73	LUPRON DEPOT (1-		MESNEX	29
<i>levonorg-eth estrad triphasic</i>	73	MONTH)	77	<i>metformin hcl</i>	39, 40
<i>levora 0.15/30 (28)</i>	73	LUPRON DEPOT (3-		<i>metformin hcl er</i>	39
<i>levorphanol tartrate</i>	4	MONTH)	77	<i>methadone hcl</i>	4
LEVO-T	76			<i>methazolamide</i>	52

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

<i>methenamine hippurate</i>	7	MONDOXYNE NL	13	NEVANAC	91
<i>methimazole</i>	78	MONOJECT		<i>nevirapine</i>	36
<i>methocarbamol</i>	96	HYPODERMIC NEEDLE	88	<i>nevirapine er</i>	36
<i>methotrexate</i>	83	MONOJECT INSULIN		NEXLETOL	51
<i>methotrexate sodium</i>	83	SYRINGE	43, 88	NEXLIZET	51
<i>methotrexate sodium (pf)</i>	83	<i>montelukast sodium</i>	92	<i>niacin (antihyperlipidemic)</i>	53
<i>methoxsalen rapid</i>	58	<i>morphine sulfate</i>	5	<i>niacin er (antihyperlipidemic)</i>	53
<i>methscopolamine bromide</i>	62	<i>morphine sulfate (concentrate)</i>	5	NIACOR	53
<i>methsuximide</i>	14	<i>morphine sulfate (pf)</i>	5	<i>nicardipine hcl</i>	51
<i>methyl dopa</i>	48	<i>morphine sulfate er</i>	4	NICOTROL	6
<i>methylergonovine maleate</i>	88	MOTOFEN	62	<i>nifedipine</i>	51
<i>methylphenidate hcl</i>	55	MOUNJARO	40	<i>nifedipine er</i>	51
<i>methylphenidate hcl er</i>	55	MOVANTIK	62	<i>nifedipine er osmotic release</i>	51
<i>methylphenidate hcl er (cd)</i>	55	<i>moxifloxacin hcl</i>	12	<i>nikki</i>	74
<i>methylphenidate hcl er (la)</i>	55	<i>moxifloxacin hcl in nacl</i>	12	<i>nilutamide</i>	23
<i>methylphenidate hcl er (osm)</i>	55	MOZOBIL	47	NINLARO	24
<i>methylprednisolone</i>	69	MULPLETA	47	<i>nitazoxanide</i>	30
<i>methylprednisolone acetate</i>	21	MULTAQ	49	<i>nitisinone</i>	64
<i>methylprednisolone sodium succ</i>	69	<i>multiple electro type 1 ph 5.5</i>	59	NITRO-BID	54
<i>metoclopramide hcl</i>	62	<i>mupirocin</i>	7	<i>nitrofurantoin</i>	7
<i>metolazone</i>	52	<i>mupirocin calcium</i>	58	<i>nitrofurantoin macrocrystal</i>	7
<i>metoprolol succinate er</i>	50	<i>mycophenolate mofetil</i>	83	<i>nitrofurantoin monohyd macro</i>	7
<i>metoprolol tartrate</i>	50	<i>mycophenolate sodium</i>	83	<i>nitroglycerin</i>	54
<i>metoprolol-hydrochlorothiazide</i>	50	MYRBETRIQ	66	<i>nora-be</i>	76
<i>metronidazole</i>	7	<i>na sulfate-k sulfate-mg sulf</i>	59	<i>norethin ace-eth estrad-fe</i>	74
<i>metyrosine</i>	51	<i>nabumetone</i>	3	<i>norethindrone</i>	76
<i>mexiletine hcl</i>	49	<i>nadolol</i>	50	<i>norethindrone acetate</i>	76
<i>mibelas 24 fe</i>	73	<i>nafcillin sodium</i>	10	<i>norethindrone acet-ethinyl est</i> ...	74
<i>micafungin sodium</i>	20	<i>naloxone hcl</i>	6	<i>norethindrone-eth estradiol</i>	74
<i>miconazole 3</i>	20	<i>naltrexone hcl</i>	5	<i>norethindron-ethinyl estrad-fe</i>	74
<i>microgestin 1.5/30</i>	73	NAMZARIC	16	<i>norethin-eth estradiol-fe</i>	74
<i>microgestin 1/20</i>	73	<i>naproxen</i>	3	<i>norgestimate-eth estradiol</i>	74
<i>microgestin 24 fe</i>	73	<i>naproxen dr</i>	3	<i>norgestim-eth estrad triphasic</i> ...	74
<i>microgestin fe 1.5/30</i>	73	<i>naproxen sodium</i>	3	NORPACE CR	49
<i>microgestin fe 1/20</i>	73	NATACYN	20	<i>nortrel 0.5/35 (28)</i>	74
<i>midodrine hcl</i>	48	<i>nateglinide</i>	40	<i>nortrel 1/35 (21)</i>	74
MIEBO	89	NATPARA	88	<i>nortrel 1/35 (28)</i>	74
<i>mifepristone</i>	70	NAYZILAM	14	<i>nortrel 7/7/7</i>	74
<i>miglitol</i>	40	<i>necon 0.5/35 (28)</i>	74	<i>nortriptyline hcl</i>	18
<i>miglustat</i>	64	<i>necon 1/35 (28)</i>	74	NORVIR	37
<i>mili</i>	73	<i>nefazodone hcl</i>	18	NUBEQA	23
<i>mimvey</i>	73	<i>neomycin sulfate</i>	6	NUCALA	96
<i>minocycline hcl</i>	12	<i>neomycin-bacitracin zn-</i>		NUDEXTA	56
<i>minoxidil</i>	54	<i>polymyx</i>	89	NUPLAZID	32
<i>mirtazapine</i>	16, 17	<i>neomycin-polymyxin-dexameth</i> ...	91	NURTEC	21
<i>misoprostol</i>	63	<i>neomycin-polymyxin-gramicidin</i>	89	NUTRILIPID	61
M-M-R II	85	<i>neomycin-polymyxin-hc</i>	7, 92	NUZYRA	13
<i>modafinil</i>	97	<i>neo-polycin</i>	89	NYAMYC	20
<i>moexipril hcl</i>	49	<i>neo-polycin hc</i>	89	<i>nylia 1/35</i>	74
<i>molindone hcl</i>	31	NERLYNX	28	<i>nylia 7/7/7</i>	74
<i>mometasone furoate</i>	69, 96	NEUPRO	30	<i>nymyo</i>	74

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

<i>nystatin</i>	20	ORENITRAM MONTH 3	95	<i>penicillin g pot in dextrose</i>	10
<i>nystatin-triamcinolone</i>	20	ORFADIN	65	<i>penicillin g potassium</i>	11
NYSTOP	20	ORGOVYX	24	<i>penicillin g sodium</i>	11
OALIVA	62	ORKAMBI	94	<i>penicillin v potassium</i>	11
<i>ocella</i>	74	ORLADEYO	51	PENTACEL	85
OCTAGAM	79	<i>orphenadrine citrate er</i>	96	<i>pentamidine isethionate</i>	30
<i>octreotide acetate</i>	70, 77	ORSERDU	23	<i>pentoxifylline er</i>	51
ODEFSEY	36	<i>orsythia</i>	74	<i>perindopril erbumine</i>	49
ODOMZO	24	<i>oseltamivir phosphate</i>	37, 38	PERIOGARD	57
OFEV	95	OSMOPREP	62	<i>permethrin</i>	30
<i>ofloxacin</i>	12	OSPHENA	76	<i>perphenazine</i>	31
OGSIVEO	25	OTEZLA	83	<i>perphenazine-amitriptyline</i>	18
OJEMDA	28	<i>oxacillin sodium</i>	10	PERSERIS	33
OJJAARA	24	<i>oxacillin sodium in dextrose</i>	10	<i>phenelzine sulfate</i>	17
<i>olanzapine</i>	33	<i>oxandrolone</i>	71	<i>phenobarbital</i>	14
<i>olanzapine-fluoxetine hcl</i>	39	<i>oxaprozin</i>	3	<i>phenoxybenzamine hcl</i>	48
<i>olmesartan medoxomil</i>	48	<i>oxazepam</i>	38	<i>phenytek</i>	15
<i>olmesartan medoxomil-hctz</i>	48	OXBRYTA	47	<i>phenytoin</i>	15, 16
<i>olopatadine hcl</i>	90, 92	<i>oxcarbazepine</i>	15	<i>phenytoin sodium extended</i>	16
OLPRUVA (2 GM DOSE)	64	<i>oxybutynin chloride</i>	66	PIFELTRO	36
OLPRUVA (3 GM DOSE)	64	<i>oxybutynin chloride er</i>	66	<i>pilocarpine hcl</i>	57, 90
OLPRUVA (4 GM DOSE)	64	<i>oxycodone hcl</i>	5	<i>pimecrolimus</i>	58
OLPRUVA (5 GM DOSE)	64	<i>oxycodone hcl er</i>	4	<i>pimozide</i>	31
OLPRUVA (6 GM DOSE)	64	<i>oxycodone-acetaminophen</i>	5	<i>pimtreea</i>	74
OLPRUVA (6.67 GM DOSE) ..	64	OZEMPIC (0.25 OR 0.5		<i>pindolol</i>	50
OLUMIANT	80	MG/DOSE)	40	<i>pioglitazone hcl</i>	40
<i>omega-3-acid ethyl esters</i>	53	OZEMPIC (1 MG/DOSE)	40	<i>pioglitazone hcl-glimepiride</i>	41
<i>omeprazole</i>	64	OZEMPIC (2 MG/DOSE)	40	<i>pioglitazone hcl-metformin hcl</i> ...	41
<i>omeprazole magnesium</i>	64	<i>paliperidone er</i>	33	<i>piperacillin sod-tazobactam so</i> ...	11
ONCASPAR	24	PANRETIN	29	PIQRAY (200 MG DAILY	
<i>ondansetron</i>	19	<i>pantoprazole sodium</i>	64	DOSE)	25
<i>ondansetron hcl</i>	19	PANZYGA	79	PIQRAY (250 MG DAILY	
ONETOUCH ULTRA	45	<i>paricalcitol</i>	87	DOSE)	25
ONETOUCH ULTRA 2	45	<i>paromomycin sulfate</i>	6	PIQRAY (300 MG DAILY	
ONETOUCH ULTRA MINI ..	45	<i>paroxetine hcl</i>	18, 39	DOSE)	25
ONETOUCH ULTRA TEST ..	45	<i>paroxetine hcl er</i>	18	<i>pirfenidone</i>	95
ONETOUCH VERIO	45	PASER	22	<i>pirmella 1/35</i>	74
ONETOUCH VERIO FLEX		PAXLOVID (150/100)	80	<i>piroxicam</i>	3
SYSTEM	45	PAXLOVID (300/100)	80	<i>pitavastatin calcium</i>	53
ONETOUCH VERIO IQ		<i>pazopanib hcl</i>	28	PLASMA-LYTE A	60
SYSTEM	45	PEDIARIX	85	PLENAMINE	60
ONUREG	23	PEDVAX HIB	85	<i>plerixafor</i>	47
OPSUMIT	95	<i>peg 3350-kcl-na bicarb-nacl</i>	63	<i>pnv-dha</i>	61
OPTIUMEZ TEST	46	<i>peg-3350/electrolytes</i>	63	<i>podofilox</i>	58
OPZELURA	58	<i>peg-3350/electrolytes/ascorbat</i> ...	63	<i>polycin</i>	90
ORACIT	59	PEGASYS	34, 35	<i>polymyxin b sulfate</i>	8
ORENCIA	80	<i>peg-kcl-nacl-nasulf-na asc-c</i>	63	<i>polymyxin b-trimethoprim</i>	90
ORENCIA CLICKJECT	80	PEMAZYRE	28	POMALYST	23
ORENITRAM	95	PEN NEEDLES	89	<i>portia-28</i>	74
ORENITRAM MONTH 1	95	PENBRAYA	85	<i>posaconazole</i>	20
ORENITRAM MONTH 2	95	<i>penicillamine</i>	60	<i>potassium chloride</i>	60

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

<i>potassium chloride crys er</i>	60	PROCTOZONE-HC	58	RELENZA DISKHALER	38
<i>potassium chloride er</i>	60	PRODIGY NO CODING		RELION BLOOD GLUCOSE	
<i>potassium citrate er</i>	60	BLOOD GLUC	46	TEST	46
<i>potassium cl in dextrose 5%</i>	60	PROGRAF	83	RELION CONFIRM/MICRO	
PRALUENT	53	PROLASTIN-C	65	TEST	46
<i>pramipexole dihydrochloride</i>	30	PROLIA	87	RELION INSULIN	
<i>prasugrel hcl</i>	46	PROMACTA	47	SYRINGE	43
<i>pravastatin sodium</i>	53	<i>promethazine hcl</i>	19	RELI-ON INSULIN	
<i>praziquantel</i>	29	PROMETHEGAN	19	SYRINGE	43
<i>prazosin hcl</i>	48	<i>propafenone hcl</i>	49	RELION PRIME TEST	46
PRECISION XTRA BLOOD		<i>propafenone hcl er</i>	49	RELION ULTIMA TEST	46
GLUCOSE	46	<i>proparacaine hcl</i>	90	RELISTOR	62
PRED MILD	91	<i>propranolol hcl</i>	50	RELYVRIO	56
PRED-G	91	<i>propranolol hcl er</i>	50	<i>repaglinide</i>	40
PRED-G S.O.P.	91	<i>propylthiouracil</i>	78	REPATHA	54
<i>prednicarbate</i>	69	PROQUAD	85	REPATHA PUSHTRONEX	
<i>prednisolone</i>	69	PROSOL	60	SYSTEM	54
<i>prednisolone acetate</i>	91	<i>protriptyline hcl</i>	18	REPATHA SURECLICK	54
<i>prednisolone sodium phosphate</i>		PTS PANELS GLUCOSE		RESTASIS	90
.....	69, 91	TEST	46	RESTASIS MULTIDOSE	90
<i>prednisone</i>	69	PULMICORT FLEXHALER	92	RETACRIT	47
PREDNISONONE INTENSOL	69	PULMOZYME	94	RETEVMO	24
PREFERRED PLUS		PURE COMFORT PEN		REXULTI	33
INSULIN SYRINGE	43	NEEDLE	89	REYATAZ	37
PREFEST	74	PURIXAN	23	REZDIFFRA	62
<i>pregabalin</i>	56	<i>pyrazinamide</i>	22	REZLIDHIA	25
PREHEVBRIO	85	<i>pyridostigmine bromide</i>	22	REZUROCK	84
PREMARIN	74	<i>pyridostigmine bromide er</i>	22	RHOPRESSA	89
PREMASOL	60	<i>pyrimethamine</i>	30	<i>ribavirin</i>	35
PREMPHASE	74	PYRUKYND	46	RIDAURA	80
PREMPRO	74	PYRUKYND TAPER PACK	46	<i>rifabutin</i>	22
<i>prenatal</i>	61	QINLOCK	28	<i>rifampin</i>	22
<i>pretomanid</i>	22	QUADRACEL	85, 86	<i>riluzole</i>	56
<i>prevalite</i>	53	<i>quetiapine fumarate</i>	33	<i>rimantadine hcl</i>	38
<i>previfem</i>	74	QUICKTEK TEST	46	RINVOQ	80
PREVYMIS	34	<i>quinapril hcl</i>	49	<i>risedronate sodium</i>	87
PREZCOBIX	37	<i>quinapril-hydrochlorothiazide</i> ...49		RISPERDAL CONSTA	33
PREZISTA	37	<i>quinidine gluconate er</i>	49	<i>risperidone</i>	33
PRIFTIN	22	<i>quinidine sulfate</i>	49	<i>risperidone microspheres er</i>	33
<i>primaquine phosphate</i>	30	<i>quinine sulfate</i>	30	<i>ritonavir</i>	37
<i>primidone</i>	14	RABAVERT	86	<i>rivastigmine</i>	16
PRIORIX	85	<i>raloxifene hcl</i>	76	<i>rivastigmine tartrate</i>	16
PRIVIGEN	79	<i>ramelteon</i>	97	RIVFLOZA	66, 67
PROAIR RESPICLICK	93	<i>ramipril</i>	49	<i>rizatriptan benzoate</i>	21
<i>probenecid</i>	21	<i>ranolazine er</i>	51	ROCKLATAN	90
PROCALAMINE	61	<i>rasagiline mesylate</i>	31	<i>roflumilast</i>	94
<i>prochlorperazine</i>	32	RAVICTI	65	<i>ropinirole hcl</i>	30
<i>prochlorperazine maleate</i>	32	<i>reclipsen</i>	74	<i>ropinirole hcl er</i>	30
PROCTO-MED HC	58	RECOMBIVAX HB	86	ROSADAN	8
PROCTO-PAK	58	RECORLEV	69	<i>rosuvastatin calcium</i>	53
PROCTOSOL HC	58	REGRANEX	58	ROTARIX	86

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

ROTATEQ	86	<i>sodium oxybate</i>	97	SYEDA	74
<i>roweepra</i>	13	<i>sodium phenylbutyrate</i>	65	SYMBICORT	96
ROZLYTREK	28	<i>sodium polystyrene sulfonate</i>	60	SYMDEKO	94
RUBRACA	28	<i>sofosbuvir-velpatasvir</i>	34	SYMJEPI	94
RUCONEST	78	SOHONOS	65	SYMLINPEN 120	40
<i>rufinamide</i>	16	<i>solifenacin succinate</i>	66	SYMLINPEN 60	40
RUKOBIA	37	SOLOSEC	8	SYMPAZAN	14
RUZURGI	65	SOLTAMOX	23	SYMTUZA	35
RYDAPT	28	SOMATULINE DEPOT	77	SYNAGIS	81
RYTARY	31	SOMAVERT	77	SYNAREL	77
<i>sajazir</i>	78	<i>sorafenib tosylate</i>	28	SYNDROS	19
<i>salsalate</i>	3	<i>sorine</i>	49	SYNJARDY	40
SANDIMMUNE	84	<i>sotalol hcl</i>	49	SYNJARDY XR	40
SANTYL	59	<i>sotalol hcl (af)</i>	49	SYNRIBO	24
<i>sapropterin dihydrochloride</i>	65	SOTYKTU	80	SYNTHROID	76
SAVELLA	56	SPIRIVA HANDIHALER	93	TABLOID	23
SAVELLA TITRATION		SPIRIVA RESPIMAT	93	TABRECTA	28
PACK	56	<i>spironolactone</i>	52	<i>tacrolimus</i>	59, 84
SCSEMBLIX	28	<i>spironolactone-hctz</i>	52	<i>tadalafil</i>	66
<i>scopolamine</i>	19	<i>sprintec 28</i>	74	<i>tadalafil (pah)</i>	95
SECUADO	33	SPRITAM	13	TAFINLAR	28
<i>selegiline hcl</i>	31	SPRYCEL	28	TAGRISO	24
<i>selenium sulfide</i>	59	<i>sps</i>	60	TAKHZYRO	78
SELZENTRY	37	<i>sronyx</i>	74	TALTZ	81
SEREVENT DISKUS	93	<i>ssd</i>	8	TALZENNA	28
<i>sertraline hcl</i>	18	STAMARIL	86	<i>tamoxifen citrate</i>	23
<i>setlakin</i>	74	<i>stavudine</i>	36	<i>tamsulosin hcl</i>	66
<i>sevelamer carbonate</i>	67	STELARA	80, 81	TAPERDEX 7-DAY	69
<i>sevelamer hcl</i>	67	STIMATE	70	<i>tarina 24 fe</i>	75
<i>sharobel</i>	76	STIOLTO RESPIMAT	95	<i>tarina fe 1/20 eq</i>	75
SHINGRIX	86	STIVARGA	28	TARPEYO	69
SIGNIFOR	77	<i>streptomycin sulfate</i>	6	TASIGNA	28
SIGNIFOR LAR	77	STRIBILD	35	<i>tasimelteon</i>	56
SIKLOS	23	<i>subvenite</i>	13	TAVALISSE	46
<i>sildenafil citrate</i>	95	<i>subvenite starter kit-blue</i>	13	TAVNEOS	84
SILIQ	80	<i>subvenite starter kit-green</i>	13	<i>taysofy</i>	75
<i>silodosin</i>	66	<i>subvenite starter kit-orange</i>	13	<i>tazarotene</i>	59
<i>silver sulfadiazine</i>	8	<i>sucralfate</i>	63	TAZICEF	9
SIMBRINZA	90	<i>sulfacetamide sodium</i>	12	TAZORAC	59
SIMPONI	84	<i>sulfacetamide sodium (acne)</i>	59	<i>taztia xt</i>	51
<i>simvastatin</i>	53	<i>sulfacetamide-prednisolone</i>	91	TAZVERIK	28
<i>sirolimus</i>	84	<i>sulfadiazine</i>	12	TDVAX	86
SIRTURO	22	<i>sulfamethoxazole-trimethoprim</i> ..	12	TECHLITE INSULIN	
SITAVIG	35	<i>sulfasalazine</i>	87	SYRINGE	43
SIVEXTRO	8	<i>sulindac</i>	3	TECHLITE PEN NEEDLES ...	89
SKYCLARYS	56	<i>sumatriptan succinate</i>	22	TEFLARO	9
SKYRIZI	80	<i>sunitinib malate</i>	28	TEGLUTIK	56
SKYRIZI (150 MG DOSE)	80	SUNLENCA	37	TEGSEDI	65
SKYRIZI PEN	80	SUPRAX	9	<i>telmisartan</i>	48
<i>sodium chloride</i>	60	SURE COMFORT PEN		<i>telmisartan-amlodipine</i>	51
<i>sodium fluoride</i>	60	NEEDLES	89	<i>telmisartan-hctz</i>	48

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

<i>temazepam</i>	96	<i>toremifene citrate</i>	23	TROPHAMINE	60
TENIVAC	86	<i>torpenz</i>	28	<i>tropium chloride</i>	66
<i>tenofovir disoproxil fumarate</i>	36	<i>torse mide</i>	52	<i>tropium chloride er</i>	66
TEPMETKO	28	TOUJEO MAX SOLOSTAR	43	TRUEPLUS 5-BEVEL PEN	
<i>terazosin hcl</i>	66	TOUJEO SOLOSTAR	43	NEEDLES	89
<i>terbinafine hcl</i>	20	TOVET	59	TRULICITY	40
<i>terbutaline sulfate</i>	94	TPN ELECTROLYTES	61	TRUMENBA	86
<i>terconazole</i>	20	TRACLEER	95	TRUQAP	28
<i>teriflunomide</i>	57	TRADJENTA	40	TRUSELTIQ (100MG	
<i>teriparatide</i>	87	<i>tramadol hcl</i>	5	DAILY DOSE)	28
<i>teriparatide (recombinant)</i>	87	<i>tramadol-acetaminophen</i>	5	TRUSELTIQ (125MG	
<i>testosterone</i>	71	<i>trandolapril</i>	49	DAILY DOSE)	28
<i>testosterone cypionate</i>	71	<i>trandolapril-verapamil hcl er</i>	49	TRUSELTIQ (50MG DAILY	
<i>testosterone enanthate</i>	71	<i>tranexamic acid</i>	47	DOSE)	29
<i>tetrabenazine</i>	56	<i>tranylcypromine sulfate</i>	17	TRUSELTIQ (75MG DAILY	
<i>tetracycline hcl</i>	13	TRAVASOL	60	DOSE)	29
TEXACORT	69	<i>travoprost (bak free)</i>	89	TUKYSA	24
THALOMID	23	<i>trazodone hcl</i>	18	TURALIO	29
THEO-24	94	TRECTOR	22	<i>turqoz</i>	75
<i>theophylline</i>	94	TRELEGY ELLIPTA	96	TWINRIX	86
<i>theophylline er</i>	94	TREMFYA	81	<i>tyblume</i>	75
<i>thioridazine hcl</i>	32	<i>tretinoin</i>	29, 59	TYBOST	37
<i>thiotepa</i>	22	TREXALL	84	<i>tydemy</i>	75
<i>thiothixene</i>	32	<i>triamcinolone acetonide</i>	57, 69, 70	TYPHIM VI	86
TIADYLT ER	51	<i>triamterene</i>	52	UBRELVY	21
<i>tiadylt er</i>	51	<i>triamterene-hctz</i>	52	UKONIQ	29
<i>tiagabine hcl</i>	14	<i>triazolam</i>	97	ULTICARE PEN NEEDLES	89
TIBSOVO	25	TRIDERM	70	ULTILET PEN NEEDLE	89
TICOVAC	86	<i>trientine hcl</i>	61	ULTRA-THIN II PEN	
<i>tigecycline</i>	8	<i>tri-estarylla</i>	75	NEEDLES	89
<i>tilia fe</i>	75	<i>trifluoperazine hcl</i>	32	UNITHROID	76
<i>timolol maleate</i>	21, 90	<i>trifluridine</i>	35	UPTRAVI	95
<i>timolol maleate (once-daily)</i>	90	<i>trihexyphenidyl hcl</i>	30	UPTRAVI TITRATION	95
<i>timolol maleate pf</i>	90	TRIJARDY XR	40	<i>ursodiol</i>	62
<i>tinidazole</i>	8	TRIKAFTA	94	VABOMERE	8
<i>tiotropium bromide</i>		<i>tri-legest fe</i>	75	<i>valacyclovir hcl</i>	35
<i>monohydrate</i>	93	<i>tri-lo-estarylla</i>	75	VALCHLOR	22
TIVICAY	35	<i>tri-lo-sprintec</i>	75	<i>valganciclovir hcl</i>	34
TIVICAY PD	35	<i>trimethoprim</i>	8	<i>valproic acid</i>	14
<i>tizanidine hcl</i>	34	<i>tri-mili</i>	75	<i>valsartan</i>	48
TOBI PODHALER	94	<i>trimipramine maleate</i>	18	<i>valsartan-hydrochlorothiazide</i>	48
TOBRADEX	91	<i>trinessa (28)</i>	75	VALTOCO 10 MG DOSE	14
<i>tobramycin</i>	6, 94	TRINTELLIX	17	VALTOCO 15 MG DOSE	14
<i>tobramycin sulfate</i>	6	<i>tri-nymyo</i>	75	VALTOCO 20 MG DOSE	14
<i>tobramycin-dexamethasone</i>	91	<i>tri-sprintec</i>	75	VALTOCO 5 MG DOSE	14
<i>tolcapone</i>	30	TRIUMEQ	36	<i>vancomycin hcl</i>	8
<i>tolterodine tartrate</i>	66	TRIUMEQ PD	36	VANDAZOLE	8
<i>tolterodine tartrate er</i>	66	<i>trivora (28)</i>	75	VANFLYTA	29
<i>tolvaptan</i>	60	TRI-VYLIBRA	75	VAQTA	86
<i>topiramate</i>	15	<i>tri-vylibra lo</i>	75	<i>varenicline tartrate</i>	6
<i>topiramate er</i>	15	TRIZIVIR	36	<i>varenicline tartrate (starter)</i>	6

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

VARIVAX	86	WELIREG	24	ZEMAIRA	65
VARIZIG	86	WINREVAIR	95	ZEMDRI	6
<i>velivet</i>	75	<i>wymzya fe</i>	75	ZENPEP	65
VELSIPITY	62	XALKORI	29	ZEPOSIA	57
VELTASSA	61	XARELTO	46	ZEPOSIA 7-DAY STARTER	
VENCLEXTA	24	XARELTO STARTER PACK	46	PACK	57
VENCLEXTA STARTING		XATMEP	84	ZEPOSIA STARTER KIT	57
PACK	24	XCOPRI	13, 14	ZERBAXA	9
<i>venlafaxine besylate er</i>	39	XCOPRI (250 MG DAILY		<i>zidovudine</i>	37
<i>venlafaxine hcl</i>	39	DOSE)	13	ZILBRYSQ	65
<i>venlafaxine hcl er</i>	18	XCOPRI (350 MG DAILY		<i>zileuton er</i>	93
VENTAVIS	95	DOSE)	13	<i>ziprasidone hcl</i>	39
VEOZAH	75	XELJANZ	81	<i>ziprasidone mesylate</i>	33
<i>verapamil hcl</i>	51	XELJANZ XR	81	ZIRGAN	34
<i>verapamil hcl er</i>	51	XERMELO	63	ZOKINVY	65
VERQUVO	51	XGEVA	87	ZOLINZA	25
VERSACLOZ	34	XIFAXAN	8	<i>zolpidem tartrate</i>	97
VERZENIO	25	XIGDUO XR	40	<i>zolpidem tartrate er</i>	97
VICTOZA	40	XOFLUZA (40 MG DOSE)	38	ZONISADE	14
<i>vienna</i>	75	XOFLUZA (80 MG DOSE)	38	<i>zonisamide</i>	14
<i>vigabatrin</i>	15	XOLAIR	81	ZORBTIVE	70
<i>vigadrone</i>	15	XOLREMDI	46	ZOSYN	11
VIGADRONE	15	XOSPATA	25	<i>zovia 1/35 (28)</i>	75
<i>vigpoder</i>	15	XPOVIO (100 MG ONCE		ZTALMY	15
VIIBRYD STARTER PACK ...	18	WEEKLY)	24	ZURZUVAE	17
VIJOICE	65	XPOVIO (40 MG ONCE		ZYDELIG	25
<i>vilazodone hcl</i>	18	WEEKLY)	25	ZYKADIA	29
VIRACEPT	37	XPOVIO (40 MG TWICE		ZYPREXA RELPREVV	33
VIREAD	36	WEEKLY)	25		
VITRAKVI	25	XPOVIO (60 MG ONCE			
VIVITROL	6	WEEKLY)	25		
VIVJOA	20	XPOVIO (60 MG TWICE			
VIZIMPRO	29	WEEKLY)	25		
VONJO	29	XPOVIO (80 MG ONCE			
VOQUEZNA	62	WEEKLY)	25		
VOQUEZNA DUAL PAK	62	XPOVIO (80 MG TWICE			
VOQUEZNA TRIPLE PAK	62	WEEKLY)	25		
<i>voriconazole</i>	21	XTANDI	23		
VOSEVI	34	XYREM	97		
VOTRIENT	29	XYWAV	97		
VOWST	63	<i>yargesa</i>	65		
VP-PNV-DHA	61	YF-VAX	86		
VRAYLAR	33	YONSA	23		
VTAMA	59	<i>yuvafem</i>	75		
<i>vyfemla</i>	75	<i>zafirlukast</i>	93		
VYLIBRA	75	<i>zaleplon</i>	97		
VYNDAMAX	70	ZARXIO	47		
VYNDAQEL	70	ZAVZPRET	21		
WAINUA	65	ZEJULA	29		
<i>warfarin sodium</i>	47	ZELAPAR	31		
WEGOVY	52	ZELBORAF	29		

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



fallonhealth.org/navicare

This formulary was updated on 09/30/2024. For more recent information or other questions, contact us at 1-877-700-6996 (TRS 711), 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week), or visit fallonhealth.org/navicare.

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



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