



Molina Healthcare of Ohio Medicaid

Utilization Management List

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Molina Healthcare of Ohio Utilization Management List

Drug Name Requirements/Limits ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS

AMPHETAMINES

ADDERALL XR CAP 5MG	QL (1 cap / 1 day); AGE (Min age 6 years and Max age 65 years)
ADDERALL XR CAP 10MG	QL (1 cap / 1 day); AGE (Min age 6 years and Max age 65 years)
ADDERALL XR CAP 15MG	QL (1 cap / 1 day); AGE (Min age 6 years and Max age 65 years)
ADDERALL XR CAP 20MG	QL (2 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
ADDERALL XR CAP 25MG	QL (2 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
ADDERALL XR CAP 30MG	QL (2 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg (generic of ADDERALL XR)</i>	QL (1 cap / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg (generic of ADDERALL XR)</i>	QL (1 cap / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg (generic of ADDERALL XR)</i>	QL (1 cap / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg (generic of ADDERALL XR)</i>	QL (2 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg (generic of ADDERALL XR)</i>	QL (2 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg (generic of ADDERALL XR)</i>	QL (2 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
DESOXYN TAB 5MG	AGE (Min age 6 years and Max age 65 years)
DEXEDRINE CAP 5MG CR	QL (4 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
DEXEDRINE CAP 10MG CR	QL (4 caps / 1 day); AGE (Min age 6 years and Max age 65 years)

Drug Name	Requirements/Limits
DEXEDRINE CAP 15MG CR	QL (2 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i> (generic of DEXEDRINE)	QL (4 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i> (generic of DEXEDRINE)	QL (4 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i> (generic of DEXEDRINE)	QL (2 caps / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	AGE (Min age 3 years and Max age 65 years)
<i>dextroamphetamine sulfate tab 15 mg</i>	QL (2 tabs / 1 day); AGE (Min age 3 years)
<i>dextroamphetamine sulfate tab 20 mg</i>	QL (2 tabs / 1 day); AGE (Min age 3 years)
<i>dextroamphetamine sulfate tab 30 mg</i>	QL (2 tabs / 1 day); AGE (Min age 3 years)
DYANAVEL XR SUS 2.5MG/ML	AGE (Min age 6 years)
<i>methamphetamine hcl tab 5 mg</i> (generic of DESOXYN)	AGE (Min age 6 years and Max age 65 years)
MYDAYIS CAP 12.5MG	AGE (Min age 13 years)
MYDAYIS CAP 25MG	AGE (Min age 13 years)
MYDAYIS CAP 37.5MG	AGE (Min age 13 years)
MYDAYIS CAP 50MG	AGE (Min age 13 years)
<i>procentra sol 5mg/5ml</i>	AGE (Min age 3 years and Max age 65 years)
VYVANSE CAP 10MG	AGE (Min age 6 years)
VYVANSE CAP 20MG	QL (1 cap / 1 day); AGE (Min age 6 years)
VYVANSE CAP 30MG	QL (1 cap / 1 day); AGE (Min age 6 years)
VYVANSE CAP 40MG	QL (1 cap / 1 day); AGE (Min age 6 years)
VYVANSE CAP 50MG	QL (1 cap / 1 day); AGE (Min age 6 years)
VYVANSE CAP 60MG	QL (1 cap / 1 day); AGE (Min age 6 years)
VYVANSE CAP 70MG	QL (1 cap / 1 day); AGE (Min age 6 years)
<i>zenzedi tab 2.5mg</i>	AGE (Min age 3 years)
<i>zenzedi tab 5mg</i>	AGE (Min age 3 years)
<i>zenzedi tab 7.5mg</i>	AGE (Min age 3 years)
<i>zenzedi tab 10mg</i>	AGE (Min age 3 years)
<i>zenzedi tab 15mg</i>	QL (2 tabs / 1 day); AGE (Min age 3 years)

Drug Name	Requirements/Limits
<i>zenzedi tab 20mg</i>	QL (2 tabs / 1 day); AGE (Min age 3 years)
<i>zenzedi tab 30mg</i>	AGE (Min age 3 years)

ANALEPTICS

<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	QL (40 vials / 30 days); AGE (Max age 1 year)
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ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS

<i>atomoxetine hcl cap 10 mg (base equiv) (generic of STRATTERA)</i>	AGE (Min age 6 years)
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<i>atomoxetine hcl cap 18 mg (base equiv) (generic of STRATTERA)</i>	AGE (Min age 6 years)
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<i>atomoxetine hcl cap 25 mg (base equiv) (generic of STRATTERA)</i>	AGE (Min age 6 years)
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<i>atomoxetine hcl cap 40 mg (base equiv) (generic of STRATTERA)</i>	AGE (Min age 6 years)
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<i>atomoxetine hcl cap 60 mg (base equiv) (generic of STRATTERA)</i>	AGE (Min age 6 years)
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<i>atomoxetine hcl cap 80 mg (base equiv) (generic of STRATTERA)</i>	AGE (Min age 6 years)
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<i>atomoxetine hcl cap 100 mg (base equiv) (generic of STRATTERA)</i>	AGE (Min age 6 years)
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<i>clonidine hcl tab er 12hr 0.1 mg (generic of KAPVAY)</i>	AGE (Min age 6 years)
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<i>guanfacine hcl tab er 24hr 1 mg (base equiv) (generic of INTUNIV)</i>	AGE (Min age 6 years)
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<i>guanfacine hcl tab er 24hr 2 mg (base equiv) (generic of INTUNIV)</i>	AGE (Min age 6 years)
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<i>guanfacine hcl tab er 24hr 3 mg (base equiv) (generic of INTUNIV)</i>	AGE (Min age 6 years)
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<i>guanfacine hcl tab er 24hr 4 mg (base equiv) (generic of INTUNIV)</i>	AGE (Min age 6 years)
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INTUNIV TAB 1MG	AGE (Min age 6 years)
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INTUNIV TAB 2MG	AGE (Min age 6 years)
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INTUNIV TAB 3MG	AGE (Min age 6 years)
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INTUNIV TAB 4MG	AGE (Min age 6 years)
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STRATTERA CAP 10MG	AGE (Min age 6 years)
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STRATTERA CAP 18MG	AGE (Min age 6 years)
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STRATTERA CAP 25MG	AGE (Min age 6 years)
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STRATTERA CAP 40MG	AGE (Min age 6 years)
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STRATTERA CAP 60MG	AGE (Min age 6 years)
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STRATTERA CAP 80MG	AGE (Min age 6 years)
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STRATTERA CAP 100MG	AGE (Min age 6 years)
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STIMULANTS - MISC.

CONCERTA TAB 18MG	AGE (Min age 6 years and Max age 65 years)
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Drug Name	Requirements/Limits
DAYTRANA DIS 10MG/9HR	QL (1 patch / 1 day); AGE (Min age 6 years and Max age 65 years)
DAYTRANA DIS 15MG/9HR	QL (1 patch / 1 day); AGE (Min age 6 years and Max age 65 years)
DAYTRANA DIS 20MG/9HR	QL (1 patch / 1 day); AGE (Min age 6 years and Max age 65 years)
DAYTRANA DIS 30MG/9HR	QL (1 patch / 1 day); AGE (Min age 6 years and Max age 65 years)
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i> (generic of FOCALIN XR)	AGE (Min age 6 years and Max age 65 years)
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i> (generic of FOCALIN XR)	AGE (Min age 6 years and Max age 65 years)
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i> (generic of FOCALIN XR)	AGE (Min age 6 years and Max age 65 years)
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i> (generic of FOCALIN XR)	AGE (Min age 6 years and Max age 65 years)
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i> (generic of FOCALIN XR)	AGE (Min age 6 years)
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i> (generic of FOCALIN XR)	AGE (Min age 6 years and Max age 65 years)
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i> (generic of FOCALIN XR)	AGE (Min age 6 years)
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i> (generic of FOCALIN XR)	AGE (Min age 6 years and Max age 65 years)
FOCALIN XR CAP 5MG	AGE (Min age 6 years and Max age 65 years)
FOCALIN XR CAP 10MG	AGE (Min age 6 years and Max age 65 years)
FOCALIN XR CAP 15MG	AGE (Min age 6 years and Max age 65 years)
FOCALIN XR CAP 20MG	AGE (Min age 6 years and Max age 65 years)
FOCALIN XR CAP 25MG	AGE (Min age 6 years)
FOCALIN XR CAP 30MG	AGE (Min age 6 years and Max age 65 years)
FOCALIN XR CAP 35MG	AGE (Min age 6 years)
FOCALIN XR CAP 40MG	AGE (Min age 6 years and Max age 65 years)
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i> (generic of RITALIN LA)	AGE (Min age 6 years and Max age 65 years)
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i> (generic of RITALIN LA)	AGE (Min age 6 years and Max age 65 years)
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i> (generic of RITALIN LA)	AGE (Min age 6 years and Max age 65 years)

Drug Name	Requirements/Limits
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i> (generic of RITALIN LA)	AGE (Min age 6 years and Max age 65 years)
<i>methylphenidate hcl tab er 24hr 18 mg</i>	AGE (Min age 6 years and Max age 18 years)
<i>methylphenidate hcl tab er osmotic release (osm)</i> <i>18 mg</i> (generic of CONCERTA)	AGE (Min age 6 years and Max age 65 years)
QUILLICHEW CHW 20MG ER	AGE (Min age 6 years)
QUILLICHEW CHW 30MG ER	AGE (Min age 6 years)
QUILLICHEW CHW 40MG ER	QL (240 tabs / 25 days); AGE (Min age 6 years)
QUILLIVANT SUS 25MG/5ML	AGE (Min age 6 years)
RITALIN LA CAP 10MG	AGE (Min age 6 years and Max age 65 years)
RITALIN LA CAP 20MG	AGE (Min age 6 years and Max age 65 years)
RITALIN LA CAP 30MG	AGE (Min age 6 years and Max age 65 years)
RITALIN LA CAP 40MG	AGE (Min age 6 years and Max age 65 years)

AMINOGLYCOSIDES

AMINOGLYCOSIDES

BETHKIS NEB 300/4ML	QL (8 each / 1 day)
<i>tobramycin nebu soln 300 mg/4ml</i> (generic of BETHKIS)	QL (8 each / 1 day)

ANALGESICS - ANTI-INFLAMMATORY

NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)

CELEBREX CAP 50MG	AGE (Min age 60 years)
CELEBREX CAP 100MG	AGE (Min age 60 years)
CELEBREX CAP 200MG	AGE (Min age 60 years)
CELEBREX CAP 400MG	AGE (Min age 60 years)
<i>celecoxib cap 50 mg</i> (generic of CELEBREX)	AGE (Min age 60 years)
<i>celecoxib cap 100 mg</i> (generic of CELEBREX)	AGE (Min age 60 years)
<i>celecoxib cap 200 mg</i> (generic of CELEBREX)	AGE (Min age 60 years)
<i>celecoxib cap 400 mg</i> (generic of CELEBREX)	AGE (Min age 60 years)
<i>naproxen susp 125 mg/5ml</i> (generic of NAPROSYN)	AGE (Max age 11 years)

ANALGESICS - NONNARCOTIC

ANALGESICS OTHER

<i>acetaminophen soln 160 mg/5ml</i>	QL (100 mL / 25 days)
<i>acetaminophen suppos 120 mg</i>	QL (100 supp / 25 days)
<i>acetaminophen suppos 650 mg</i>	QL (10 supp / 25 days)
<i>acetaminophen susp 160 mg/5ml</i>	QL (240 mL / 25 days)
FEVERALL INF SUP 80MG	QL (100 supp / 25 days)
FEVERALL SUP 325MG	QL (100 supp / 25 days)
TYLENOL CHLD SUS 160/5ML	QL (240 mL / 25 days)
TYLENOL INFA SUS 160/5ML	QL (240 mL / 25 days)

Drug Name	Requirements/Limits
TYLENOL SUS 160/5ML	QL (240 mL / 25 days)

ANALGESICS - OPIOID

OPIOID AGONISTS

<i>fentanyl td patch 72hr 12 mcg/hr</i>	QL (10 patches / 25 days)
<i>fentanyl td patch 72hr 25 mcg/hr</i>	QL (10 patches / 25 days)
<i>fentanyl td patch 72hr 75 mcg/hr</i>	QL (10 patches / 25 days)
<i>fentanyl td patch 72hr 100 mcg/hr</i>	QL (10 patches / 25 days)
<i>hydromorphone hcl tab er 24hr 8 mg</i>	QL (60 tabs / 25 days)
<i>hydromorphone hcl tab er 24hr 12 mg</i>	QL (60 tabs / 25 days)
<i>hydromorphone hcl tab er 24hr 16 mg</i>	QL (60 tabs / 25 days)
<i>morphine sulfate beads cap er 24hr 30 mg</i>	QL (120 caps / 25 days)
<i>morphine sulfate beads cap er 24hr 45 mg</i>	QL (120 caps / 25 days)
<i>morphine sulfate beads cap er 24hr 60 mg</i>	QL (120 caps / 25 days)
<i>morphine sulfate beads cap er 24hr 75 mg</i>	QL (120 caps / 25 days)
<i>morphine sulfate beads cap er 24hr 90 mg</i>	QL (120 caps / 25 days)
<i>morphine sulfate beads cap er 24hr 120 mg</i>	QL (120 caps / 25 days)
<i>morphine sulfate tab er 15 mg (generic of MS CONTIN)</i>	QL (3 tabs / 1 day)
<i>morphine sulfate tab er 30 mg (generic of MS CONTIN)</i>	QL (3 tabs / 1 day)
<i>morphine sulfate tab er 60 mg (generic of MS CONTIN)</i>	QL (3 tabs / 1 day)
<i>morphine sulfate tab er 100 mg (generic of MS CONTIN)</i>	QL (3 tabs / 1 day)
<i>morphine sulfate tab er 200 mg (generic of MS CONTIN)</i>	QL (3 tabs / 1 day)
MS CONTIN TAB 15MG ER	QL (3 tabs / 1 day)
MS CONTIN TAB 30MG ER	QL (3 tabs / 1 day)
MS CONTIN TAB 60MG ER	QL (3 tabs / 1 day)
MS CONTIN TAB 100MG ER	QL (3 tabs / 1 day)
MS CONTIN TAB 200MG ER	QL (3 tabs / 1 day)
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	QL (2 tabs / 1 day)
<i>oxycodone hcl tab er 12hr deter 15 mg</i>	QL (2 tabs / 1 day)
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	QL (2 tabs / 1 day)
<i>oxycodone hcl tab er 12hr deter 30 mg</i>	QL (2 tabs / 1 day)
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	QL (2 tabs / 1 day)
<i>oxycodone hcl tab er 12hr deter 60 mg</i>	QL (2 tabs / 1 day)
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	QL (2 tabs / 1 day)
OXYCONTIN TAB 10MG CR	QL (2 tabs / 1 day)
OXYCONTIN TAB 15MG CR	QL (2 tabs / 1 day)
OXYCONTIN TAB 20MG CR	QL (2 tabs / 1 day)
OXYCONTIN TAB 30MG CR	QL (2 tabs / 1 day)
OXYCONTIN TAB 40MG CR	QL (2 tabs / 1 day)
OXYCONTIN TAB 60MG CR	QL (2 tabs / 1 day)
OXYCONTIN TAB 80MG CR	QL (2 tabs / 1 day)
<i>oxymorphone hcl tab er 12hr 5 mg</i>	QL (2 tabs / 1 day)

Drug Name	Requirements/Limits
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	QL (2 tabs / 1 day)
<i>oxymorphone hcl tab er 12hr 10 mg</i>	QL (2 tabs / 1 day)
<i>oxymorphone hcl tab er 12hr 15 mg</i>	QL (2 tabs / 1 day)
<i>oxymorphone hcl tab er 12hr 20 mg</i>	QL (2 tabs / 1 day)
<i>oxymorphone hcl tab er 12hr 30 mg</i>	QL (2 tabs / 1 day)
<i>oxymorphone hcl tab er 12hr 40 mg</i>	QL (2 tabs / 1 day)

OPIOID PARTIAL AGONISTS

<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	AGE (Min age 16 years and Max age 44 years)
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	AGE (Min age 16 years and Max age 44 years)
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) (generic of SUBOXONE)</i>	AGE (Min age 16 years)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv) (generic of SUBOXONE)</i>	AGE (Min age 16 years)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) (generic of SUBOXONE)</i>	AGE (Min age 16 years)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv) (generic of SUBOXONE)</i>	AGE (Min age 16 years)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	AGE (Min age 16 years)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	AGE (Min age 16 years)
<i>buprenorphine td patch weekly 7.5 mcg/hr (generic of BUTRANS)</i>	QL (10 patches / 25 days)
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	QL (2 bottles / 25 days)
BUTRANS DIS 7.5/HR	QL (10 patches / 25 days)
SUBOXONE MIS 2-0.5MG	AGE (Min age 16 years)
SUBOXONE MIS 4-1MG	AGE (Min age 16 years)
SUBOXONE MIS 8-2MG	AGE (Min age 16 years)
SUBOXONE MIS 12-3MG	AGE (Min age 16 years)
ZUBSOLV SUB 0.7-0.18	AGE (Min age 16 years)
ZUBSOLV SUB 1.4-0.36	AGE (Min age 16 years)
ZUBSOLV SUB 2.9-0.71	AGE (Min age 16 years)
ZUBSOLV SUB 5.7-1.4	AGE (Min age 16 years)
ZUBSOLV SUB 8.6-2.1	AGE (Min age 16 years)
ZUBSOLV SUB 11.4-2.9	AGE (Min age 16 years)

ANDROGENS-ANABOLIC

ANABOLIC STEROIDS

<i>oxandrolone tab 2.5 mg</i>	AGE (Max age 65 years)
<i>oxandrolone tab 10 mg</i>	AGE (Max age 65 years)

ANDROGENS

METHITEST TAB 10MG	AGE (Max age 65 years)
<i>methyltestosterone cap 10 mg</i>	AGE (Max age 65 years)

Drug Name	Requirements/Limits
ANTI-INFECTIVE AGENTS - MISC.	
LINCOSAMIDES	
CLEOCIN CAP 75MG	QL (24 caps / 1 day)
CLEOCIN CAP 150MG	QL (12 caps / 1 day)
CLEOCIN CAP 300MG	QL (6 caps / 1 day)
<i>clindamycin hcl cap 75 mg</i> (generic of CLEOCIN)	QL (24 caps / 1 day)
<i>clindamycin hcl cap 150 mg</i> (generic of CLEOCIN)	QL (12 caps / 1 day)
<i>clindamycin hcl cap 300 mg</i> (generic of CLEOCIN)	QL (6 caps / 1 day)
OXAZOLIDINONES	
SIVEXTRO TAB 200MG	QL (1 tab / 1 day)
ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS	
BRONCHODILATORS - ANTICHOLINERGICS	
INCRUSE ELPT INH 62.5MCG	QL (1 blister / 1 day)
STEROID INHALANTS	
<i>budesonide inhalation susp 0.5 mg/2ml</i> (generic of AGE (Max age 6 years) PULMICORT)	
<i>budesonide inhalation susp 0.25 mg/2ml</i> (generic of AGE (Max age 6 years) of PULMICORT)	AGE (Max age 6 years)
<i>budesonide inhalation susp 1 mg/2ml</i> (generic of PULMICORT)	QL (60 mL / 23 days); AGE (Max age 6 years)
FLOVENT HFA AER 44MCG	QL (1 inhaler / 25 days)
FLOVENT HFA AER 110MCG	QL (1 inhaler / 25 days)
PULMICORT SUS 0.5MG/2	AGE (Max age 6 years)
PULMICORT SUS 0.25MG/2	AGE (Max age 6 years)
PULMICORT SUS 1MG/2ML	QL (60 mL / 23 days); AGE (Max age 6 years)
QVAR REDIHA AER 80MCG	QL (10.6 gm / 25 days)
QVAR REDIHAL AER 40MCG	QL (10.6 gm / 25 days)
SYMPATHOMIMETICS	
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	QL (1 inhaler / 25 days)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i> (generic of PROAIR HFA)	QL (1 inhaler / 25 days)
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	QL (2 inhalers / 25 days)
PROAIR HFA AER	QL (2 inhalers / 25 days)
SYMBICORT AER 80-4.5	QL (2 inhalers / 25 days)
VENTOLIN HFA AER	QL (1 inhaler / 23 days)
ANTICONVULSANTS	
ANTICONVULSANTS - MISC.	
BRIVIACT SOL 10MG/ML	QL (20 mL / 1 day)
<i>gabapentin cap 100 mg</i> (generic of NEURONTIN)	QL (1080 caps / 25 days)
<i>gabapentin cap 300 mg</i> (generic of NEURONTIN)	QL (360 caps / 25 days)
<i>gabapentin cap 400 mg</i> (generic of NEURONTIN)	QL (270 caps / 25 days)

Drug Name	Requirements/Limits
<i>gabapentin oral soln 250 mg/5ml (generic of NEURONTIN)</i>	QL (2100 mL / 25 days)
<i>gabapentin tab 600 mg (generic of NEURONTIN)</i>	QL (180 tabs / 25 days)
<i>gabapentin tab 800 mg (generic of NEURONTIN)</i>	QL (120 tabs / 25 days)
KEPPRA XR TAB 500MG	QL (6 tabs / 1 day)
KEPPRA XR TAB 750MG	QL (4 tabs / 1 day)
<i>levetiracetam tab er 24hr 500 mg (generic of KEPPRA XR)</i>	QL (6 tabs / 1 day)
<i>levetiracetam tab er 24hr 750 mg (generic of KEPPRA XR)</i>	QL (4 tabs / 1 day)
LYRICA CAP 25MG	QL (2 caps / 1 day)
LYRICA CAP 50MG	QL (2 caps / 1 day)
LYRICA CAP 75MG	QL (2 caps / 1 day)
LYRICA CAP 100MG	QL (2 caps / 1 day)
LYRICA CAP 150MG	QL (2 caps / 1 day)
LYRICA CAP 200MG	QL (2 caps / 1 day)
LYRICA CAP 225MG	QL (2 caps / 1 day)
LYRICA CAP 300MG	QL (2 caps / 1 day)
NEURONTIN CAP 100MG	QL (1080 caps / 25 days)
NEURONTIN CAP 300MG	QL (360 caps / 25 days)
NEURONTIN CAP 400MG	QL (270 caps / 25 days)
NEURONTIN SOL 250/5ML	QL (2100 mL / 25 days)
NEURONTIN TAB 600MG	QL (180 tabs / 25 days)
NEURONTIN TAB 800MG	QL (120 tabs / 25 days)
<i>pregabalin cap 25 mg (generic of LYRICA)</i>	QL (2 caps / 1 day)
<i>pregabalin cap 50 mg (generic of LYRICA)</i>	QL (2 caps / 1 day)
<i>pregabalin cap 50 mg (generic of LYRICA)</i>	QL (2 each / 1 day)
<i>pregabalin cap 75 mg (generic of LYRICA)</i>	QL (2 caps / 1 day)
<i>pregabalin cap 100 mg (generic of LYRICA)</i>	QL (2 caps / 1 day)
<i>pregabalin cap 150 mg (generic of LYRICA)</i>	QL (2 caps / 1 day)
<i>pregabalin cap 200 mg (generic of LYRICA)</i>	QL (2 caps / 1 day)
<i>pregabalin cap 225 mg (generic of LYRICA)</i>	QL (2 caps / 1 day)
<i>pregabalin cap 300 mg (generic of LYRICA)</i>	QL (2 caps / 1 day)
QUDEXY XR CAP 25/24HR	QL (8 caps / 1 day)
QUDEXY XR CAP 50/24HR	QL (8 caps / 1 day)
QUDEXY XR CAP 100/24HR	QL (4 caps / 1 day)
QUDEXY XR CAP 150/24HR	QL (4 caps / 1 day)
QUDEXY XR CAP 200/24HR	QL (2 caps / 1 day)
SPRITAM TAB 250MG	QL (2 tabs / 1 day)
SPRITAM TAB 500MG	QL (2 tabs / 1 day)
SPRITAM TAB 750MG	QL (4 tabs / 1 day)
SPRITAM TAB 1000MG	QL (2 tabs / 1 day)
<i>topiramate cap er 24hr sprinkle 25 mg (generic of QUDEXY XR)</i>	QL (8 caps / 1 day)
<i>topiramate cap er 24hr sprinkle 50 mg (generic of QUDEXY XR)</i>	QL (8 caps / 1 day)

Drug Name	Requirements/Limits
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<i>topiramate cap er 24hr sprinkle 100 mg (generic of QUDEXY XR)</i>	QL (4 caps / 1 day)
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<i>topiramate cap er 24hr sprinkle 150 mg (generic of QUDEXY XR)</i>	QL (4 caps / 1 day)
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<i>topiramate cap er 24hr sprinkle 200 mg (generic of QUDEXY XR)</i>	QL (2 caps / 1 day)
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GABA MODULATORS

SABRIL POW 500MG	AGE (Max age 1 year)
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<i>vigabatrin powd pack 500 mg (generic of SABRIL)</i>	AGE (Max age 1 year)
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<i>vigadrone pow 500mg (generic of SABRIL)</i>	AGE (Max age 1 year)
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ANTIDEPRESSANTS

SEROTONIN MODULATORS

TRINTELLIX TAB 5MG	QL (2 tabs / 1 day)
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TRINTELLIX TAB 10MG	QL (2 tabs / 1 day)
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TRINTELLIX TAB 20MG	QL (2 tabs / 1 day)
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ANTIDIABETICS

ANTIDIABETIC COMBINATIONS

INVOKAMET TAB 50-500MG	QL (2 tabs / 1 day)
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INVOKAMET TAB 50-1000	QL (2 tabs / 1 day)
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INVOKAMET TAB 150-500	QL (2 tabs / 1 day)
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INVOKAMET TAB 150-1000	QL (2 tabs / 1 day)
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DIABETIC OTHER

<i>glucagon (rdna) for inj kit 1 mg (generic of GLUCAGON EMERGENCY KIT)</i>	QL (2 kits / 25 days)
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GLUCAGON KIT 1MG	QL (2 kits / 25 days)
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INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)

TRULICITY INJ 0.75/0.5	QL (4 pens / 25 days)
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TRULICITY INJ 1.5/0.5	QL (4 pens / 25 days)
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TRULICITY INJ 3/0.5	QL (4 pens / 25 days)
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TRULICITY INJ 4.5/0.5	QL (4 pens / 25 days)
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INSULIN

ADMELOG INJ 100U/ML	QL (30 mL / 25 days)
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ADMELOG SOLO INJ 100U/ML	QL (10 pens / 25 days)
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HUMALOG KWIK INJ 200/ML	QL (10 pens / 25 days)
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TOUJEO MAX INJ 300IU/ML	QL (10 pens / 25 days)
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TOUJEO SOLO INJ 300IU/ML	QL (20 pens / 25 days)
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ANTIEMETICS

5-HT3 RECEPTOR ANTAGONISTS

<i>granisetron hcl inj 1 mg/ml</i>	QL (1 vial / 15 days)
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<i>ondansetron hcl oral soln 4 mg/5ml</i>	QL (200 mL / 15 days)
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ANTIHIISTAMINES

ANTIHIISTAMINES - NON-SEDATING

<i>cetirizine chw 10mg</i>	AGE (Max age 6 years)
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<i>cetirizine hcl chew tab 5 mg</i>	AGE (Max age 6 years)
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<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	AGE (Max age 6 years)
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Drug Name	Requirements/Limits
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	AGE (Max age 6 years)
<i>fexofenadine hcl tab 60 mg</i>	AGE (Min age 6 years)
<i>fexofenadine hcl tab 180 mg</i>	AGE (Min age 6 years)
<i>wal-zyr chw 5mg</i>	AGE (Max age 6 years)
<i>wal-zyr chw 10mg</i>	AGE (Max age 6 years)

ANTIHYPERLIPIDEMICS

FIBRIC ACID DERIVATIVES

<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv) (generic of TRILIPIX)</i>	QL (1 cap / 1 day)
<i>fenofibrate micronized cap 43 mg</i>	QL (1 cap / 1 day)
<i>fenofibrate tab 145 mg (generic of TRICOR)</i>	QL (1 tab / 1 day)
<i>fenofibrate tab 160 mg</i>	QL (1 tab / 1 day)
TRICOR TAB 145MG	QL (1 tab / 1 day)
TRILIPIX CAP 45MG	QL (1 cap / 1 day)

HMG COA REDUCTASE INHIBITORS

<i>atorvastatin calcium tab 80 mg (base equivalent) (generic of LIPITOR)</i>	QL (1 tab / 1 day)
LIPITOR TAB 80MG	QL (1 tab / 1 day)

PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS

REPATHA PUSH INJ 420/3.5	QL (1 cartridge / 25 days)
REPATHA SURE INJ 140MG/ML	QL (2 pens / 25 days)

ANTIHYPERTENSIVES

ACE INHIBITORS

QBRELIS SOL 1MG/ML	QL (80 mL / 1 day)
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ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS

INLYTA TAB 1MG	QL (6 tabs / 1 day)
INLYTA TAB 5MG	QL (4 tabs / 1 day)
LENVIMA CAP 4MG	QL (1 cap / 1 day)
LENVIMA CAP 8 MG	QL (2 caps / 1 day)
LENVIMA CAP 10 MG	QL (1 ea / 1 day)
LENVIMA CAP 12MG	QL (3 caps / 1 day)
LENVIMA CAP 14 MG	QL (2 ea / 1 day)
LENVIMA CAP 18 MG	QL (3 caps / 1 day)
LENVIMA CAP 20 MG	QL (2 caps / 1 day)
LENVIMA CAP 24 MG	QL (3 caps / 1 day)

ANTINEOPLASTIC - ANTIBODIES

PADCEV INJ 20MG	QL (2 vials / 6 days)
PADCEV INJ 30MG	QL (3 vials / 6 days)

ANTINEOPLASTIC - BCL-2 INHIBITORS

VENCLEXTA TAB 10MG	QL (4 tabs / 1 day)
VENCLEXTA TAB 50MG	QL (4 tabs / 1 day)
VENCLEXTA TAB 100MG	QL (6 tabs / 1 day)
VENCLEXTA TAB START PK	QL (1.5 tabs / 1 day)

Drug Name	Requirements/Limits
ANTINEOPLASTIC - EGFR INHIBITORS	
<i>erlotinib hcl tab 25 mg (base equivalent)</i> (generic of TARCEVA)	QL (3 tabs / 1 day)
<i>erlotinib hcl tab 100 mg (base equivalent)</i> (generic of TARCEVA)	QL (1 tab / 1 day)
<i>erlotinib hcl tab 150 mg (base equivalent)</i> (generic of TARCEVA)	QL (1 tab / 1 day)
GILOTRIF TAB 20MG	QL (1 tab / 1 day)
GILOTRIF TAB 30MG	QL (1 tab / 1 day)
GILOTRIF TAB 40MG	QL (1 tab / 1 day)
IRESSA TAB 250MG	QL (1 tab / 1 day)
TAGRISSE TAB 40MG	QL (1 tab / 1 day)
TAGRISSE TAB 80MG	QL (1 tab / 1 day)
TARCEVA TAB 25MG	QL (3 tabs / 1 day)
TARCEVA TAB 100MG	QL (1 tab / 1 day)
TARCEVA TAB 150MG	QL (1 tab / 1 day)
VIZIMPRO TAB 15MG	QL (1 tab / 1 day)
VIZIMPRO TAB 30MG	QL (1 tab / 1 day)
VIZIMPRO TAB 45MG	QL (1 tab / 1 day)
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS	
DAURISMO TAB 25MG	QL (2 tabs / 1 day)
DAURISMO TAB 100MG	QL (1 tab / 1 day)
ERIVEDGE CAP 150MG	QL (1 cap / 1 day)
ODOMZO CAP 200MG	QL (1 cap / 1 day)
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS	
<i>abiraterone acetate tab 500 mg</i> (generic of ZYTIGA)	QL (2 tabs / 1 day)
ERLEADA TAB 60MG	QL (4 tabs / 1 day)
NUBEQA TAB 300MG	QL (4 tabs / 1 day)
XTANDI CAP 40MG	QL (4 caps / 1 day)
YONSA TAB 125MG	QL (4 tabs / 1 day)
ZYTIGA TAB 500MG	QL (2 tabs / 1 day)
ANTINEOPLASTIC - IMMUNOMODULATORS	
POMALYST CAP 1MG	QL (1 cap / 1 day)
POMALYST CAP 2MG	QL (1 cap / 1 day)
POMALYST CAP 3MG	QL (1 cap / 1 day)
POMALYST CAP 4MG	QL (1 cap / 1 day)
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS	
AYVAKIT TAB 100MG	QL (1 tab / 1 day)
AYVAKIT TAB 200MG	QL (1 tab / 1 day)
AYVAKIT TAB 300MG	QL (1 tab / 1 day)
ANTINEOPLASTIC - XPO1 INHIBITORS	
XPOVIO PAK 80MG	QL (32 tabs / 24 days)
ANTINEOPLASTIC COMBINATIONS	
KISQALI 200 PAK FEMARA	QL (49 tabs / 24 days)

Drug Name	Requirements/Limits
KISQALI 400 PAK FEMARA	QL (70 tabs / 24 days)
KISQALI 600 PAK FEMARA	QL (91 tabs / 24 days)
LONSURF TAB 15-6.14	QL (100 tabs / 24 days)
LONSURF TAB 20-8.19	QL (100 tabs / 24 days)

ANTINEOPLASTIC ENZYME INHIBITORS

AFINITOR DIS TAB 2MG	QL (2 tabs / 1 day)
AFINITOR DIS TAB 3MG	QL (3 tabs / 1 day)
AFINITOR DIS TAB 5MG	QL (2 tabs / 1 day)
AFINITOR TAB 2.5MG	QL (1 tab / 1 day)
AFINITOR TAB 5MG	QL (1 tab / 1 day)
AFINITOR TAB 7.5MG	QL (1 tab / 1 day)
AFINITOR TAB 10MG	QL (1 tab / 1 day)
ALECENSA CAP 150MG	QL (8 caps / 1 day)
ALUNBRIG PAK	QL (1 tab / 1 day)
ALUNBRIG TAB 30MG	QL (4 tabs / 1 day)
ALUNBRIG TAB 90MG	QL (1 tab / 1 day)
ALUNBRIG TAB 180MG	QL (1 tab / 1 day)
BALVERSA TAB 3MG	QL (3 tabs / 1 day)
BALVERSA TAB 4MG	QL (2 tabs / 1 day)
BALVERSA TAB 5MG	QL (1 tab / 1 day)
BRAFTOVI CAP 75MG	QL (6 caps / 1 day)
BRUKINSA CAP 80MG	QL (4 caps / 1 day)
CABOMETYX TAB 20MG	QL (1 tab / 1 day)
CABOMETYX TAB 40MG	QL (1 tab / 1 day)
CABOMETYX TAB 60MG	QL (1 tab / 1 day)
CALQUENCE CAP 100MG	QL (2 caps / 1 day)
COPIKTRA CAP 15MG	QL (2 caps / 1 day)
COPIKTRA CAP 25MG	QL (2 caps / 1 day)
<i>everolimus tab 2.5 mg (generic of AFINITOR)</i>	QL (1 tab / 1 day)
<i>everolimus tab 5 mg (generic of AFINITOR)</i>	QL (1 tab / 1 day)
<i>everolimus tab 7.5 mg (generic of AFINITOR)</i>	QL (1 tab / 1 day)
<i>everolimus tab 10 mg (generic of AFINITOR)</i>	QL (1 tab / 1 day)
<i>everolimus tab for oral susp 2 mg (generic of AFINITOR DISPERZ)</i>	QL (2 tabs / 1 day)
<i>everolimus tab for oral susp 3 mg (generic of AFINITOR DISPERZ)</i>	QL (3 tabs / 1 day)
<i>everolimus tab for oral susp 5 mg (generic of AFINITOR DISPERZ)</i>	QL (2 tabs / 1 day)
GLEEVEC TAB 100MG	QL (3 tabs / 1 day)
GLEEVEC TAB 400MG	QL (2 tabs / 1 day)
IBRANCE CAP 75MG	QL (1 cap / 1 day)
IBRANCE CAP 100MG	QL (1 cap / 1 day)
IBRANCE CAP 125MG	QL (1 cap / 1 day)
IBRANCE TAB 75MG	QL (1 tab / 1 day)
IBRANCE TAB 100MG	QL (1 tab / 1 day)
IBRANCE TAB 125MG	QL (1 tab / 1 day)

Drug Name	Requirements/Limits
IDHIFA TAB 50MG	QL (1 tab / 1 day)
IDHIFA TAB 100MG	QL (1 tab / 1 day)
<i>imatinib mesylate tab 100 mg (base equivalent)</i> (generic of GLEEVEC)	QL (3 tabs / 1 day)
<i>imatinib mesylate tab 400 mg (base equivalent)</i> (generic of GLEEVEC)	QL (2 each / 1 day)
<i>imatinib mesylate tab 400 mg (base equivalent)</i> (generic of GLEEVEC)	QL (2 tabs / 1 day)
IMBRUVICA CAP 70MG	QL (1 cap / 1 day)
IMBRUVICA CAP 140MG	QL (3 caps / 1 day)
IMBRUVICA TAB 140MG	QL (1 tab / 1 day)
IMBRUVICA TAB 280MG	QL (1 tab / 1 day)
IMBRUVICA TAB 420MG	QL (1 tab / 1 day)
IMBRUVICA TAB 560MG	QL (1 tab / 1 day)
INREBIC CAP 100MG	QL (4 caps / 1 day)
JAKAFI TAB 5MG	QL (2 tabs / 1 day)
JAKAFI TAB 10MG	QL (2 tabs / 1 day)
JAKAFI TAB 15MG	QL (2 tabs / 1 day)
JAKAFI TAB 20MG	QL (2 tabs / 1 day)
JAKAFI TAB 25MG	QL (2 tabs / 1 day)
KISQALI TAB 200DOSE	QL (1 tab / 1 day)
KISQALI TAB 400DOSE	QL (2 tabs / 1 day)
KISQALI TAB 600DOSE	QL (3 tabs / 1 day)
LORBRENA TAB 25MG	QL (3 tabs / 1 day)
LORBRENA TAB 100MG	QL (1 tab / 1 day)
LYNPARZA TAB 100MG	QL (4 tabs / 1 day)
LYNPARZA TAB 150MG	QL (4 tabs / 1 day)
MEKINIST TAB 0.5MG	QL (3 tabs / 1 day)
MEKINIST TAB 2MG	QL (1 tab / 1 day)
MEKTOVI TAB 15MG	QL (6 tabs / 1 day)
NERLYNX TAB 40MG	QL (6 tabs / 1 day)
NEXAVAR TAB 200MG	QL (4 tabs / 1 day)
NINLARO CAP 2.3MG	QL (3 caps / 17 days)
NINLARO CAP 3MG	QL (3 caps / 17 days)
NINLARO CAP 4MG	QL (3 caps / 17 days)
PIQRAY 200MG TAB DOSE	QL (1 tab / 1 day)
PIQRAY 250MG TAB DOSE	QL (2 tabs / 1 day)
PIQRAY 300MG TAB DOSE	QL (2 tabs / 1 day)
ROZLYTREK CAP 100MG	QL (1 cap / 1 day)
ROZLYTREK CAP 200MG	QL (3 caps / 1 day)
RUBRACA TAB 200MG	QL (4 tabs / 1 day)
RUBRACA TAB 250MG	QL (4 tabs / 1 day)
RUBRACA TAB 300MG	QL (4 tabs / 1 day)
RYDAPT CAP 25MG	QL (8 caps / 1 day)
SPRYCEL TAB 20MG	QL (3 tabs / 1 day)
SPRYCEL TAB 50MG	QL (1 tab / 1 day)

Drug Name	Requirements/Limits
SPRYCEL TAB 70MG	QL (1 tab / 1 day)
SPRYCEL TAB 80MG	QL (1 tab / 1 day)
SPRYCEL TAB 100MG	QL (1 tab / 1 day)
SPRYCEL TAB 140MG	QL (1 tab / 1 day)
STIVARGA TAB 40MG	QL (3 tabs / 1 day)
<i>sunitinib malate cap 12.5 mg (base equivalent)</i> (generic of SUTENT)	QL (4 caps / 1 day)
<i>sunitinib malate cap 25 mg (base equivalent)</i> (generic of SUTENT)	QL (2 caps / 1 day)
<i>sunitinib malate cap 37.5 mg (base equivalent)</i> (generic of SUTENT)	QL (1 cap / 1 day)
<i>sunitinib malate cap 50 mg (base equivalent)</i> (generic of SUTENT)	QL (1 cap / 1 day)
SUTENT CAP 12.5MG	QL (4 caps / 1 day)
SUTENT CAP 25MG	QL (2 caps / 1 day)
SUTENT CAP 37.5MG	QL (1 cap / 1 day)
SUTENT CAP 50MG	QL (1 cap / 1 day)
TAFINLAR CAP 50MG	QL (4 caps / 1 day)
TAFINLAR CAP 75MG	QL (4 caps / 1 day)
TALZENNA CAP 0.25MG	QL (3 caps / 1 day)
TALZENNA CAP 1MG	QL (1 cap / 1 day)
TASIGNA CAP 50MG	QL (4 caps / 1 day)
TASIGNA CAP 150MG	QL (4 caps / 1 day)
TASIGNA CAP 200MG	QL (4 caps / 1 day)
TAZVERIK TAB 200MG	QL (8 tabs / 1 day)
TIBSOVO TAB 250MG	QL (2 tabs / 1 day)
TURALIO CAP 200MG	QL (4 caps / 1 day)
VERZENIO TAB 50MG	QL (2 tabs / 1 day)
VERZENIO TAB 100MG	QL (2 tabs / 1 day)
VERZENIO TAB 150MG	QL (2 tabs / 1 day)
VERZENIO TAB 200MG	QL (2 tabs / 1 day)
VITRAKVI CAP 25MG	QL (6 caps / 1 day)
VITRAKVI CAP 100MG	QL (2 caps / 1 day)
VITRAKVI SOL 20MG/ML	QL (10 mL / 1 day)
XALKORI CAP 200MG	QL (2 caps / 1 day)
XALKORI CAP 250MG	QL (2 caps / 1 day)
XOSPATA TAB 40MG	QL (3 tabs / 1 day)
ZEJULA CAP 100MG	QL (3 caps / 1 day)
ZOLINZA CAP 100MG	QL (4 caps / 1 day)
ZYKADIA TAB 150MG	QL (3 tabs / 1 day)

ANTIPARKINSON AND RELATED THERAPY AGENTS

ANTIPARKINSON ANTICHOLINERGICS

<i>benztropine mesylate tab 0.5 mg</i>	AGE (Max age 65 years)
<i>benztropine mesylate tab 1 mg</i>	AGE (Max age 65 years)
<i>benztropine mesylate tab 2 mg</i>	AGE (Max age 65 years)
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	AGE (Max age 65 years)

Drug Name	Requirements/Limits
<i>trihexyphenidyl hcl tab 2 mg</i>	AGE (Max age 65 years)
<i>trihexyphenidyl hcl tab 5 mg</i>	AGE (Max age 65 years)

ANTIPSYCHOTICS/ANTIMANIC AGENTS

ANTIPSYCHOTICS - MISC.

GEODON CAP 20MG	AGE (Min age 18 years)
GEODON CAP 40MG	AGE (Min age 18 years)
GEODON CAP 60MG	AGE (Min age 18 years)
GEODON CAP 80MG	AGE (Min age 18 years)
GEODON INJ 20MG	AGE (Min age 18 years)
<i>ziprasidone hcl cap 20 mg (generic of GEODON)</i>	AGE (Min age 18 years)
<i>ziprasidone hcl cap 40 mg (generic of GEODON)</i>	AGE (Min age 18 years)
<i>ziprasidone hcl cap 60 mg (generic of GEODON)</i>	AGE (Min age 18 years)
<i>ziprasidone hcl cap 80 mg (generic of GEODON)</i>	AGE (Min age 18 years)
<i>ziprasidone mesylate for inj 20 mg (base equivalent) (generic of GEODON)</i>	AGE (Min age 18 years)

BENZISOXAZOLES

FANAPT PAK	AGE (Min age 18 years)
FANAPT TAB 1MG	AGE (Min age 18 years)
FANAPT TAB 2MG	AGE (Min age 18 years)
FANAPT TAB 4MG	AGE (Min age 18 years)
FANAPT TAB 6MG	AGE (Min age 18 years)
FANAPT TAB 8MG	AGE (Min age 18 years)
FANAPT TAB 10MG	AGE (Min age 18 years)
FANAPT TAB 12MG	AGE (Min age 18 years)
INVEGA SUST INJ 39/0.25	AGE (Min age 18 years)
INVEGA SUST INJ 78/0.5ML	AGE (Min age 18 years)
INVEGA SUST INJ 117/0.75	AGE (Min age 18 years)
INVEGA SUST INJ 156MG/ML	AGE (Min age 18 years)
INVEGA SUST INJ 234/1.5	AGE (Min age 18 years)

DIBENZAPINES

<i>olanzapine for im inj 10 mg (generic of ZYPREXA)</i>	AGE (Min age 18 years)
VERSACLOZ SUS 50MG/ML	AGE (Min age 18 years)
ZYPREXA INJ 10MG	AGE (Min age 18 years)
ZYPREXA RELP INJ 210MG	AGE (Min age 18 years)
ZYPREXA RELP INJ 300MG	AGE (Min age 18 years)
ZYPREXA RELP INJ 405MG	AGE (Min age 18 years)

QUINOLINONE DERIVATIVES

ABILIFY MAIN INJ 300MG	AGE (Min age 18 years)
ABILIFY MAIN INJ 400MG	AGE (Min age 18 years)
ARISTADA INJ 441MG/1.	AGE (Min age 18 years)
ARISTADA INJ 662MG/2	AGE (Min age 18 years)
ARISTADA INJ 882MG/3	AGE (Min age 18 years)
ARISTADA INJ 1064MG	AGE (Min age 18 years)
ARISTADA INJ INITIO	AGE (Min age 18 years)

Drug Name	Requirements/Limits
ANTIVIRALS	
ANTIRETROVIRALS	
CIMDUO TAB 300-300	QL (1 tab / 1 day)
DESCOVY TAB 200/25MG	QL (1 tab / 1 day)
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg (generic of SYMFI LO)</i>	QL (1 tab / 1 day)
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (generic of SYMFI)</i>	QL (1 tab / 1 day)
GENVOYA TAB	QL (2 tabs / 1 day)
ISENTRESS HD TAB 600MG	QL (2 tabs / 1 day)
JULUCA TAB 50-25MG	QL (1 tab / 1 day)
ODEFSEY TAB	QL (1 tab / 1 day)
SYMFI LO TAB	QL (1 tab / 1 day)
SYMFI TAB	QL (1 tab / 1 day)
TEMIXYS TAB 300-300	QL (1 tab / 1 day)
TRIUMEQ TAB	QL (1 tab / 1 day)
ANTIVIRAL COMBINATIONS	
PAXLOVID TAB	QL (30 tabs / 30 days); AGE (Min age 12 years)
HEPATITIS AGENTS	
EPCLUSA TAB 400-100	QL (1 tab / 1 day)
HARVONI TAB 90-400MG	QL (1 tab / 1 day)
LEDIP-SOFOSB TAB 90-400MG	QL (1 tab / 1 day)
<i>ribavirin cap 200 mg</i>	QL (28 caps / 25 days)
SOFOS/VELPAT TAB 400-100	QL (1 tab / 1 day)
SOVALDI TAB 400MG	QL (1 tab / 1 day)
VIEKIRA PAK TAB	QL (4 tabs / 1 day)
VOSEVI TAB	QL (1 tab / 1 day)
HERPES AGENTS	
SITAVIG TAB 50MG	QL (1 each / 1 day)
INFLUENZA AGENTS	
<i>oseltamivir phosphate cap 30 mg (base equiv) (generic of TAMIFLU)</i>	QL (20 each / 180 days)
<i>oseltamivir phosphate cap 45 mg (base equiv) (generic of TAMIFLU)</i>	QL (10 each / 180 days)
<i>oseltamivir phosphate cap 75 mg (base equiv) (generic of TAMIFLU)</i>	QL (10 each / 180 days)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv) (generic of TAMIFLU)</i>	QL (180 mL / 180 days)
TAMIFLU CAP 30MG	QL (20 caps / 180 days)
TAMIFLU CAP 45MG	QL (10 caps / 180 days)
TAMIFLU CAP 75MG	QL (10 caps / 180 days)
TAMIFLU SUS 6MG/ML	QL (180 mL / 180 days)
MISC. ANTIVIRALS	
MOLNUPIRAVIR CAP 200MG	QL (40 caps / 30 days); AGE (Min age 18 years)

Drug Name	Requirements/Limits
CARDIOTONICS	
CARDIAC GLYCOSIDES	
<i>digoxin oral soln 0.05 mg/ml</i>	AGE (Max age 12 years)
CARDIOVASCULAR AGENTS - MISC.	
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS	
<i>ambrisentan tab 5 mg (generic of LETAIRIS)</i>	QL (1 tab / 1 day)
<i>ambrisentan tab 10 mg (generic of LETAIRIS)</i>	QL (1 tab / 1 day)
LETAIRIS TAB 5MG	QL (1 tab / 1 day)
LETAIRIS TAB 10MG	QL (1 tab / 1 day)
OPSUMIT TAB 10MG	QL (1 tab / 1 day)
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST	
UPTRAVI TAB 200MCG	QL (2 tabs / 1 day)
UPTRAVI TAB 400MCG	QL (2 tabs / 1 day)
UPTRAVI TAB 600MCG	QL (2 tabs / 1 day)
UPTRAVI TAB 800MCG	QL (2 tabs / 1 day)
UPTRAVI TAB 1000MCG	QL (2 tabs / 1 day)
UPTRAVI TAB 1200MCG	QL (2 tabs / 1 day)
UPTRAVI TAB 1400MCG	QL (2 tabs / 1 day)
UPTRAVI TAB 1600MCG	QL (2 tabs / 1 day)
CEPHALOSPORINS	
CEPHALOSPORINS - 2ND GENERATION	
<i>cefaclor for susp 125 mg/5ml</i>	AGE (Max age 12 years)
<i>cefaclor for susp 250 mg/5ml</i>	AGE (Max age 12 years)
<i>cefaclor for susp 375 mg/5ml</i>	AGE (Max age 12 years)
<i>cefprozil tab 250 mg</i>	AGE (Max age 12 years)
<i>cefprozil tab 500 mg</i>	AGE (Max age 12 years)
CHEMICALS	
BULK CHEMICALS - E'S	
ESTRADIOL POW	AGE (Max age 65 years)
ESTRADIOL POW MICRONIZ	AGE (Max age 65 years)
ESTRIOL POW	AGE (Max age 65 years)
ESTRIOL POW MICRONIZ	AGE (Max age 65 years)
BULK CHEMICALS - H'S	
HYDROXYPROG POW CAPROATE	AGE (Min age 16 years and Max age 60 years)
LIQUIDS	
BENZYL BENZO LIQ	AGE (Min age 16 years and Max age 60 years)
CONTRACEPTIVES	
COMBINATION CONTRACEPTIVES - ORAL	
<i>alyacen tab 7/7/7</i>	QL (28 tabs / 25 days)
<i>amethia tab (generic of SEASONIQUE)</i>	QL (1 tab / 1 day)
<i>ashlyna tab (generic of SEASONIQUE)</i>	QL (1 tab / 1 day)

Drug Name	Requirements/Limits
<i>azurette tab</i> (generic of MIRCETTE)	QL (28 tabs / 25 days)
<i>azurette tab 28 day</i> (generic of MIRCETTE)	QL (28 tabs / 25 days)
<i>camrese lo tab</i> (generic of LOSEASONIQUE)	QL (1 tab / 1 day)
<i>camrese tab</i> (generic of SEASONIQUE)	QL (1 tab / 1 day)
<i>cyclafem tab 7/7/7</i>	QL (28 tabs / 25 days)
<i>dasetta tab 7/7/7</i>	QL (28 tabs / 25 days)
<i>daysee tab</i> (generic of SEASONIQUE)	QL (1 tab / 1 day)
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> (generic of MIRCETTE)	QL (28 tabs / 25 days)
<i>iclevia tab</i>	QL (1 tab / 1 day)
<i>introvale tab</i>	QL (1 tab / 1 day)
<i>jaimiess tab</i> (generic of SEASONIQUE)	QL (1 tab / 1 day)
<i>jolessa tab</i>	QL (1 tab / 1 day)
<i>kariva tab 28 day</i> (generic of MIRCETTE)	QL (28 tabs / 25 days)
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i> (generic of LOSEASONIQUE)	QL (1 tab / 1 day)
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i> (generic of SEASONIQUE)	QL (1 tab / 1 day)
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	QL (1 tab / 1 day)
<i>lojaimiess tab</i> (generic of LOSEASONIQUE)	QL (1 tab / 1 day)
LOSEASONIQUE TAB	QL (1 tab / 1 day)
MIRCETTE TAB 28 DAY	QL (28 tabs / 25 days)
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i> (generic of ORTHO TRI-CYCLEN LO)	QL (28 tabs / 25 days)
<i>nortrel tab 7/7/7</i>	QL (28 tabs / 25 days)
<i>nylia tab 7/7/7</i>	QL (28 tabs / 25 days)
<i>pimtrea tab</i> (generic of MIRCETTE)	QL (28 tabs / 25 days)
<i>pirmella tab 7/7/7</i>	QL (28 tabs / 25 days)
SEASONIQUE TAB	QL (1 tab / 1 day)
<i>setlakin tab</i>	QL (1 tab / 1 day)
<i>simliya tab 28 day</i> (generic of MIRCETTE)	QL (28 tabs / 25 days)
<i>simpesse tab</i> (generic of SEASONIQUE)	QL (1 tab / 1 day)
<i>tri-lo tab estaryl</i> (generic of ORTHO TRI-CYCLEN LO)	QL (28 tabs / 25 days)
<i>tri-lo- tab marzia</i> (generic of ORTHO TRI-CYCLEN LO)	QL (28 tabs / 25 days)
<i>tri-lo- tab sprintec</i> (generic of ORTHO TRI-CYCLEN LO)	QL (28 tabs / 25 days)
<i>tri-lo-mili tab</i> (generic of ORTHO TRI-CYCLEN LO)	QL (28 tabs / 25 days)
<i>tri-vylibra tab lo</i> (generic of ORTHO TRI-CYCLEN LO)	QL (28 tabs / 25 days)
<i>viorele tab</i> (generic of MIRCETTE)	QL (28 tabs / 25 days)
<i>volnea tab</i> (generic of MIRCETTE)	QL (28 tabs / 25 days)
COMBINATION CONTRACEPTIVES - TRANSDERMAL	
<i>xulane dis 150-35</i>	QL (3 patches / 25 days)

Drug Name	Requirements/Limits
<i>zafemy dis 150/35</i>	QL (3 patches / 25 days)

EMERGENCY CONTRACEPTIVES

<i>levonorgestrel tab 1.5 mg</i>	QL (2 tabs / year)
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PROGESTIN CONTRACEPTIVES - IUD

KYLEENA IUD 19.5MG	QL (1 IUD in lifetime)
LILETTA IUD 52MG	QL (1 IUD in lifetime)
MIRENA IUD SYSTEM	QL (1 IUD in lifetime)
SKYLA IUD 13.5MG	QL (1 IUD in lifetime)

COUGH/COLD/ALLERGY

COUGH/COLD/ALLERGY COMBINATIONS

<i>allergy mult tab daytime</i>	AGE (Min age 2 years)
<i>allergy tab multi-sy</i>	AGE (Min age 2 years)
<i>aprodine tab 2.5-60mg</i>	AGE (Min age 2 years)
<i>cetirizine-pseudoephedrine tab er 12hr 5-120 mg</i>	AGE (Min age 2 years)
<i>chest conges tab 20-400mg</i>	AGE (Min age 2 years)
<i>chest conges tab relf dm</i>	AGE (Min age 2 years)
<i>chlorpheniramine & phenylephrine tab 4-10 mg</i>	AGE (Min age 2 years)
<i>cold & flu tab daytime</i>	AGE (Min age 2 years)
<i>cold & flu tab severe</i>	AGE (Min age 2 years)
COMTREX COLD TAB /CGH MAX	AGE (Min age 2 years)
<i>coricidin d tab</i>	AGE (Min age 2 years)
<i>dextromethorphan-guaifenesin tab 20-400 mg</i>	AGE (Min age 2 years)
<i>dextromethorphan-guaifenesin tab er 12hr 30-600 mg</i>	AGE (Min age 2 years)
<i>dextromethorphan-guaifenesin tab er 12hr 60-1200 mg</i>	AGE (Min age 2 years)
<i>dextromethorphan-phenylephrine-apap tab 10-5-325 mg</i>	AGE (Min age 2 years)
<i>eq mucus dm tab 60-1200</i>	AGE (Min age 2 years)
<i>fenesis dm tab 20-400</i>	AGE (Min age 2 years)
<i>gnp allergy tab relief</i>	AGE (Min age 2 years)
<i>gnp sinus tab 5-325mg</i>	AGE (Min age 2 years)
<i>hm daytime tab cld/flu</i>	AGE (Min age 2 years)
<i>hm mucus dm tab 60-1200</i>	AGE (Min age 2 years)
<i>hm severe tab cold/flu</i>	AGE (Min age 2 years)
<i>loratadine & pseudoephedrine tab er 12hr 5-120 mg</i>	AGE (Min age 2 years)
<i>loratadine & pseudoephedrine tab er 24hr 10-240 mg</i>	AGE (Min age 2 years)
<i>medicidin-d tab</i>	AGE (Min age 2 years)
MUCINEX D TAB 60-600MG	AGE (Min age 2 years)
MUCINEX D TAB 120-1200	AGE (Min age 2 years)
MUCINEX DM TAB 30-600ER	AGE (Min age 2 years)
MUCINEX DM TAB 60-1200	AGE (Min age 2 years)
<i>mucinex max tab sinus</i>	AGE (Min age 2 years)
<i>mucinex tab cold/flu</i>	AGE (Min age 2 years)

Drug Name	Requirements/Limits
<i>mucus dm max tab 60-1200</i>	AGE (Min age 2 years)
<i>mucus dm tab 60-1200</i>	AGE (Min age 2 years)
<i>mucus relief tab 20-400mg</i>	AGE (Min age 2 years)
<i>mucus relief tab 60-1200</i>	AGE (Min age 2 years)
<i>mucus relief tab dm</i>	AGE (Min age 2 years)
<i>mucus relief tab dm cough</i>	AGE (Min age 2 years)
<i>mucus rlf dm tab 20-400mg</i>	AGE (Min age 2 years)
<i>mucus-dm max tab 60-1200</i>	AGE (Min age 2 years)
<i>panadol tab cld/flu</i>	AGE (Min age 2 years)
<i>pharbinex-dm tab 20-400mg</i>	AGE (Min age 2 years)
<i>pressur/pain tab 325-5mg</i>	AGE (Min age 2 years)
<i>pseudoephedrine-guaifenesin tab er 12hr 60-600 mg</i>	AGE (Min age 2 years)
<i>pseudoephedrine-guaifenesin tab er 12hr 120-1200 mg</i>	AGE (Min age 2 years)
<i>px allergy tab sinus pe</i>	AGE (Min age 2 years)
<i>qc medifin tab dm</i>	AGE (Min age 2 years)
<i>qc sinus pai tab relief</i>	AGE (Min age 2 years)
<i>refenesen dm tab 400-20mg</i>	AGE (Min age 2 years)
<i>sb allergy tab multi-sy</i>	AGE (Min age 2 years)
<i>sb sinus cng tab /pain</i>	AGE (Min age 2 years)
<i>sb sinus cng tab /pain dt</i>	AGE (Min age 2 years)
<i>sinus cng/pn tab 5-325mg</i>	AGE (Min age 2 years)
<i>sinus congst tab 5-325mg</i>	AGE (Min age 2 years)
<i>sinus congst tab daytime</i>	AGE (Min age 2 years)
<i>sinus congst tab night</i>	AGE (Min age 2 years)
<i>sinus headch tab pe 5-325</i>	AGE (Min age 2 years)
<i>sinus pain tab daytime</i>	AGE (Min age 2 years)
<i>sinus relief tab 5-325mg</i>	AGE (Min age 2 years)
<i>sinus+headac tab 5-325mg</i>	AGE (Min age 2 years)
<i>sudafed pe tab 5-325mg</i>	AGE (Min age 2 years)
<i>sudogest tab 4-60mg</i>	AGE (Min age 2 years)
<i>suphedrine tab pe</i>	AGE (Min age 2 years)
<i>tab tussin tab 20-400mg</i>	AGE (Min age 2 years)
<i>tab tussin tab dm</i>	AGE (Min age 2 years)
<i>tylenol sinu tab 5-325mg</i>	AGE (Min age 2 years)
<i>valihist tab</i>	AGE (Min age 2 years)

DERMATOLOGICALS

ACNE PRODUCTS

ABSORICA CAP 10MG	AGE (Min age 12 years and Max age 25 years)
ABSORICA CAP 20MG	AGE (Min age 12 years and Max age 25 years)
ABSORICA CAP 30MG	AGE (Min age 12 years and Max age 25 years)

Drug Name	Requirements/Limits
ABSORICA CAP 40MG	AGE (Min age 12 years and Max age 25 years)
<i>acne medicat gel 2.5%</i>	AGE (Min age 10 years and Max age 35 years)
ACNE MEDICAT LOT 10%	AGE (Min age 10 years and Max age 35 years)
<i>adapalene gel 0.1%</i>	QL (45 gm / 25 days); AGE (Min age 10 years and Max age 35 years)
<i>adapalene tr gel 0.1%</i>	QL (45 gm / 25 days); AGE (Min age 10 years and Max age 35 years)
<i>avita cre 0.025%</i> (generic of RETIN-A)	AGE (Min age 12 years and Max age 25 years)
<i>avita gel 0.025%</i>	AGE (Min age 12 years and Max age 25 years)
<i>benzoyl peroxide gel 2.5%</i>	AGE (Min age 10 years and Max age 35 years)
<i>benzoyl peroxide gel 5%</i>	AGE (Min age 10 years and Max age 35 years)
<i>benzoyl peroxide gel 10%</i>	AGE (Min age 10 years and Max age 35 years)
<i>benzoyl peroxide liq 5%</i>	AGE (Min age 10 years and Max age 35 years)
<i>benzoyl peroxide liq 10%</i>	AGE (Min age 10 years and Max age 35 years)
BENZOYL PEROXIDE LOTION 5%	AGE (Min age 10 years and Max age 35 years)
<i>clindamycin phosphate soln 1%</i>	AGE (Min age 10 years and Max age 35 years)
DIFFERIN GEL 0.1%	QL (45 gm / 25 days); AGE (Min age 10 years and Max age 35 years)
<i>erythromycin soln 2%</i>	AGE (Min age 10 years and Max age 35 years)
<i>isotretinoin cap 10 mg</i>	AGE (Min age 12 years and Max age 25 years)
<i>isotretinoin cap 20 mg</i>	AGE (Min age 12 years and Max age 25 years)
<i>isotretinoin cap 30 mg</i>	AGE (Min age 12 years and Max age 25 years)
<i>isotretinoin cap 30 mg</i> (generic of ISOTRETINOIN CAP 30 MG)	AGE (Min age 12 years and Max age 25 years)
<i>isotretinoin cap 40 mg</i>	AGE (Min age 12 years and Max age 25 years)
RETIN-A CRE 0.1%	AGE (Min age 12 years and Max age 25 years)
RETIN-A CRE 0.05%	AGE (Min age 12 years and Max age 25 years)

Drug Name	Requirements/Limits
RETIN-A CRE 0.025%	AGE (Min age 12 years and Max age 25 years)
RETIN-A GEL 0.01%	AGE (Min age 12 years and Max age 25 years)
RETIN-A GEL 0.025%	AGE (Min age 12 years and Max age 25 years)
RETIN-A MICR GEL 0.1%	AGE (Min age 12 years and Max age 25 years)
RETIN-A MICR GEL 0.1%PUMP	AGE (Min age 12 years and Max age 25 years)
RETIN-A MICR GEL 0.04%	AGE (Min age 12 years and Max age 25 years)
RETIN-A MICR GEL 0.04%PMP	AGE (Min age 12 years and Max age 25 years)
RETIN-A MICR GEL 0.08%	AGE (Min age 10 years and Max age 35 years)
<i>tretinoin cream 0.1%</i> (generic of RETIN-A)	AGE (Min age 12 years and Max age 25 years)
<i>tretinoin cream 0.05%</i> (generic of RETIN-A)	AGE (Min age 12 years and Max age 25 years)
<i>tretinoin cream 0.025%</i> (generic of RETIN-A)	AGE (Min age 12 years and Max age 25 years)
<i>tretinoin gel 0.01%</i> (generic of RETIN-A)	AGE (Min age 12 years and Max age 25 years)
<i>tretinoin gel 0.025%</i> (generic of RETIN-A)	AGE (Min age 12 years and Max age 25 years)
<i>tretinoin microsphere gel 0.1%</i>	AGE (Min age 12 years and Max age 25 years)
<i>tretinoin microsphere gel 0.04%</i>	AGE (Min age 12 years and Max age 25 years)
ANTI-INFLAMMATORY AGENTS - TOPICAL	
<i>diclofenac sodium gel 1%</i> (generic of VOLTAREN)	QL (1000 gm / 25 days)
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL	
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	QL (100 gm / 25 days)
ANTIPRURITICS - TOPICAL	
<i>doxepin hcl cream 5%</i>	QL (90 gm / 25 days)
PRUDOXIN CRE 5%	QL (90 gm / 25 days)
ZONALON CRE 5%	QL (90 gm / 25 days)
CORTICOSTEROIDS - TOPICAL	
<i>betamethasone dipropionate oint 0.05%</i>	QL (210 gm / 25 days)
<i>desonide cream 0.05%</i> (generic of DESOWEN)	QL (60 gm / 25 days)
<i>desonide oint 0.05%</i>	QL (60 gm / 25 days)
<i>fluocinonide cream 0.05%</i>	QL (150 gm / 25 days)
IMMUNOSUPPRESSIVE AGENTS - TOPICAL	
ELIDEL CRE 1%	AGE (Min age 2 years)
<i>pimecrolimus cream 1%</i> (generic of ELIDEL)	AGE (Min age 2 years)
PROTOPIC OIN 0.1%	AGE (Min age 18 years)

Drug Name	Requirements/Limits
PROTOPIC OIN 0.03%	AGE (Min age 2 years)
<i>tacrolimus oint 0.1%</i> (generic of PROTOPIC)	AGE (Min age 18 years)
<i>tacrolimus oint 0.03%</i> (generic of PROTOPIC)	AGE (Min age 2 years)
LOCAL ANESTHETICS - TOPICAL	
<i>lidocaine oint 5%</i>	QL (100 gm / 25 days)
SCABICIDES & PEDICULICIDES	
<i>crotan lot 10%</i>	AGE (Min age 18 years)
<i>malathion lotion 0.5%</i>	AGE (Min age 6 years)
OVIDE LOT 0.5%	AGE (Min age 6 years)
DIGESTIVE AIDS	
DIGESTIVE ENZYMES	
ZENPEP CAP 3000UNIT	QL (6 caps / 1 day)
ENDOCRINE AND METABOLIC AGENTS - MISC.	
GROWTH HORMONE RECEPTOR ANTAGONISTS	
SOMAVERT INJ 25MG	QL (2 vials / 1 day)
SOMAVERT INJ 30MG	QL (2 vials / 1 day)
ESTROGENS	
ESTROGEN COMBINATIONS	
DUAVEE TAB 0.45-20	QL (1 tab / 1 day)
ESTROGENS	
ALORA DIS 0.1MG	AGE (Max age 65 years)
ALORA DIS 0.05MG	AGE (Max age 65 years)
ALORA DIS 0.075MG	AGE (Max age 65 years)
DIVIGEL GEL 0.5MG	AGE (Max age 65 years)
DIVIGEL GEL 0.25MG	AGE (Max age 65 years)
DIVIGEL GEL 1MG/GM	AGE (Max age 65 years)
<i>dotti dis 0.1mg</i>	AGE (Max age 65 years)
<i>dotti dis 0.05mg</i>	AGE (Max age 65 years)
<i>dotti dis 0.075mg</i>	AGE (Max age 65 years)
<i>dotti dis 0.0375mg</i>	AGE (Max age 65 years)
ELESTRIN GEL 0.06%	AGE (Max age 65 years)
<i>estradiol td patch twice weekly 0.1 mg/24hr</i> (generic of MINIVELLE)	AGE (Max age 65 years)
<i>estradiol td patch twice weekly 0.05 mg/24hr</i> (generic of MINIVELLE)	AGE (Max age 65 years)
<i>estradiol td patch twice weekly 0.075 mg/24hr</i> (generic of MINIVELLE)	AGE (Max age 65 years)
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i> (generic of VIVELLE-DOT)	AGE (Max age 65 years)
EVAMIST SPR 1.53MG	AGE (Max age 65 years)
<i>lyllana dis 0.1mg</i> (generic of MINIVELLE)	AGE (Max age 65 years)
<i>lyllana dis 0.05mg</i> (generic of MINIVELLE)	AGE (Max age 65 years)
<i>lyllana dis 0.075mg</i> (generic of MINIVELLE)	AGE (Max age 65 years)
<i>lyllana dis 0.0375mg</i> (generic of MINIVELLE)	AGE (Max age 65 years)
MENEST TAB 0.3MG	AGE (Max age 65 years)

Drug Name	Requirements/Limits
MENEST TAB 0.625MG	AGE (Max age 65 years)
MENEST TAB 1.25MG	AGE (Max age 65 years)
MINIVELLE DIS 0.1MG	AGE (Max age 65 years)
MINIVELLE DIS 0.05MG	AGE (Max age 65 years)
MINIVELLE DIS 0.075MG	AGE (Max age 65 years)
MINIVELLE DIS 0.0375MG	AGE (Max age 65 years)
VIVELLE-DOT DIS 0.1MG	AGE (Max age 65 years)
VIVELLE-DOT DIS 0.05MG	AGE (Max age 65 years)
VIVELLE-DOT DIS 0.075MG	AGE (Max age 65 years)
VIVELLE-DOT DIS 0.0375MG	AGE (Max age 65 years)

FLUOROQUINOLONES

FLUOROQUINOLONES

CIPRO (5%) SUS 250MG/5	AGE (Max age 12 years)
CIPRO (10%) SUS 500MG/5	AGE (Max age 12 years)

GOUT AGENTS

GOUT AGENTS

<i>colchicine tab 0.6 mg</i> (generic of COLCRYS)	QL (30 tabs / 90 days)
COLCRYS TAB 0.6MG	QL (30 tabs / 90 days)

HEMATOLOGICAL AGENTS - MISC.

PLATELET AGGREGATION INHIBITORS

ZONTIVITY TAB 2.08MG	QL (1 tab / 1 day)
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HEMATOPOIETIC AGENTS

AGENTS FOR GAUCHER DISEASE

CERDELGA CAP 84MG	QL (2 caps / 1 day)
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HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS

NON-BARBITURATE HYPNOTICS

HALCION TAB 0.25MG	QL (2 tabs / 1 day)
<i>midazolam hcl inj pf 5 mg/ml</i> (base equivalent)	AGE (Max age 11 years)
<i>triazolam tab 0.25 mg</i> (generic of HALCION)	QL (2 tabs / 1 day)
<i>triazolam tab 0.125 mg</i>	QL (1 tab / 1 day)

MEDICAL DEVICES AND SUPPLIES

BLOOD PRESSURE DEVICES

ADVOCATE ARM MIS BPM LRG	QL (1 each in lifetime)
ADVOCATE ARM MIS BPM S/M	QL (1 each in lifetime)
ADVOCATE MIS ARM BPM	QL (1 each in lifetime)
BD ASSURE MIS BPM/AUTO	QL (1 box in lifetime)
BD ASSURE MIS BPM/MAN	QL (1 box in lifetime)
BD ASSURE MIS BPM/PORT	QL (1 box in lifetime)
BD ASSURE MIS DELUXE	QL (1 box in lifetime)
BD ASSURE MIS WRIST CU	QL (1 box in lifetime)
BLOOD PRESS KIT 3 SERIES	QL (1 each in lifetime)
BLOOD PRESS KIT #100-019	QL (1 kit in lifetime)
BLOOD PRESS KIT #100-021	QL (1 kit in lifetime)
BLOOD PRESS KIT ADLT/LRG	QL (1 kit in lifetime)

Drug Name	Requirements/Limits
BLOOD PRESS KIT CMPT/DIG	QL (1 kit in lifetime)
BLOOD PRESS KIT COMPACT	QL (1 kit in lifetime)
BLOOD PRESS KIT FINGER	QL (1 kit in lifetime)
BLOOD PRESS KIT MANUAL	QL (1 kit in lifetime)
BLOOD PRESS KIT MONITOR	QL (1 kit in lifetime)
BLOOD PRESS KIT OSCILLAT	QL (1 kit in lifetime)
BLOOD PRESS MIS MONITOR	QL (1 box in lifetime)
BLOOD PRESS MIS MONITOR	QL (1 each in lifetime)
BLOOD PRESS MIS PREM ARM	QL (1 box in lifetime)
BLOOD PRESS MIS WRIST	QL (1 each in lifetime)
BLOOD PRESS MIS WRIST CF	QL (1 box in lifetime)
BLOOD PRESSR KIT TRAVEL	QL (1 kit in lifetime)
BLOOD PRESSU KIT DELUXE	QL (1 kit in lifetime)
BLOOD PRESSU KIT MANUAL	QL (1 kit in lifetime)
BLOOD PRESSU MIS	QL (1 box in lifetime)
BLOOD PRESSU MIS /MANUAL	QL (1 box in lifetime)
BLOOD PRESSU MIS MANUAL	QL (1 each in lifetime)
BLOOD PRESSU MIS MONITOR	QL (1 each in lifetime)
BLOOD PRESSU MIS VERSATII	QL (1 box in lifetime)
BLOOD PRESSU MIS WRIST	QL (1 box in lifetime)
BLOOD PRSSRE KIT MONITOR	QL (1 kit in lifetime)
BP CUFF MNTR MIS AUTOMATC	QL (1 each in lifetime)
BP MONITOR KIT ARM	QL (1 kit in lifetime)
BP MONITOR KIT DELUXE	QL (1 kit in lifetime)
BP MONITOR KIT MANUAL	QL (1 kit in lifetime)
BP MONITOR KIT WRIST	QL (1 kit in lifetime)
BP MONITOR MIS /WRIST	QL (1 each in lifetime)
BP MONITOR MIS ADV AUTO	QL (1 each in lifetime)
BP MONITOR MIS ADVANCED	QL (1 each in lifetime)
BP MONITOR MIS ARM	QL (1 each in lifetime)
BP MONITOR MIS ARM PREM	QL (1 each in lifetime)
BP MONITOR MIS AUTO	QL (1 each in lifetime)
BP MONITOR MIS AUTO ARM	QL (1 box in lifetime)
BP MONITOR MIS AUTOMAT	QL (1 each in lifetime)
BP MONITOR MIS AUTOMATI	QL (1 box in lifetime)
BP MONITOR MIS DIGITAL	QL (1 box in lifetime)
BP MONITOR MIS DLUX ARM	QL (1 each in lifetime)
BP MONITOR MIS MANUAL	QL (1 each in lifetime)
BP MONITOR MIS OMRON 10	QL (1 each in lifetime)
BP MONITOR MIS PREM/ARM	QL (1 each in lifetime)
BP MONITOR MIS WRIST	QL (1 each in lifetime)
BP MONITOR MIS WRST CUF	QL (1 box in lifetime)
BP PREMIUM KIT WRIST	QL (1 kit in lifetime)
CARETOUCH BP MIS MONITOR	QL (1 each in lifetime)
EQ BP MONITO MIS WRIST	QL (1 each in lifetime)
FORA P20 MIS BP	QL (1 each in lifetime)

Drug Name	Requirements/Limits
FORA TEST N' MIS GO BP	QL (1 each in lifetime)
GOJJI BP KIT MONITOR	QL (1 kit in lifetime)
HEALTH SENSE MIS BLOOD PR	QL (1 each in lifetime)
HEART CHECK MIS BP WRIST	QL (1 each in lifetime)
HM BP MONITO MIS ADVANCED	QL (1 each in lifetime)
HM BP MONITO MIS AUTOMATI	QL (1 each in lifetime)
HM BP MONITO MIS DELUXE	QL (1 each in lifetime)
HM BP MONITO MIS MANUAL	QL (1 each in lifetime)
HM BP MONITO MIS SER 200	QL (1 each in lifetime)
HM BP MONITO MIS WRIST	QL (1 each in lifetime)
INCONTROL KIT BP MONIT	QL (1 kit in lifetime)
INCONTROL MIS BP MONIT	QL (1 box in lifetime)
INCONTROL MIS DELUXE	QL (1 each in lifetime)
INCONTROL MIS PREMIUM	QL (1 each in lifetime)
MICROLIFE BP KIT MONITOR	QL (1 kit in lifetime)
MICROLIFE BP MIS DELUXE	QL (1 each in lifetime)
MICROLIFE BP MIS WRIST	QL (1 each in lifetime)
MICROLIFE KIT BPM1	QL (1 kit in lifetime)
MICROLIFE KIT BPM2	QL (1 kit in lifetime)
MICROLIFE KIT BPM3	QL (1 kit in lifetime)
MICROLIFE MIS BPM6	QL (1 each in lifetime)
OMRON 3 SERI MIS BP MONIT	QL (1 each in lifetime)
OMRON 5 SERI MIS BP MONIT	QL (1 each in lifetime)
OMRON 7 SERI MIS BP MONIT	QL (1 each in lifetime)
OMRON 10 SER MIS BP MONIT	QL (1 each in lifetime)
PROCARE ARM MIS BP MONIT	QL (1 each in lifetime)
PROCARE WRST MIS BP MONIT	QL (1 each in lifetime)
RA BLOOD MIS PRESSURE	QL (1 box in lifetime)
RELION PREM MIS MONITOR	QL (1 each in lifetime)
SERIES 100 MIS BLOOD PR	QL (1 each in lifetime)
SERIES 400 MIS BLOOD PR	QL (1 each in lifetime)
SERIES 600 MIS BLOOD PR	QL (1 each in lifetime)
SERIES 800 MIS BLOOD PR	QL (1 each in lifetime)
3 SERIES BP MIS MONITOR	QL (1 each in lifetime)
SLIM BP MIS MONITOR	QL (1 each in lifetime)
SM BLOOD PRE MIS SER 200	QL (1 each in lifetime)
SM BLOOD PRE MIS SER 600	QL (1 each in lifetime)
SPHYGMOMANOM MIS ANEROID	QL (1 box in lifetime)
TALKING SENS MIS BLOOD PR	QL (1 each in lifetime)
VERSA BP MIS MONITOR	QL (1 each in lifetime)

CONTRACEPTIVES

AIMSCO MIS LUBRICAT	QL (24 boxes / 25 days)
COLOR CONDOM MIS + LUBE	QL (24 boxes / 25 days)
CONDOMS - FEMALE	QL (24 boxes / 25 days)
CONDOMS - MALE	QL (24 boxes / 25 days)
CONDOMS LATEX NON-LUBRICATED	QL (24 boxes / 25 days)

Drug Name	Requirements/Limits
CONDOMS MIS LUBRICAT	QL (24 boxes / 25 days)
DUREX EXTRA MIS SENSITIV	QL (24 each / 25 days)
FANTASY LUBR MIS	QL (24 boxes / 25 days)
FANTASY LUBR MIS COLORS	QL (24 boxes / 25 days)
FANTASY LUBR MIS SPERMICI	QL (24 boxes / 25 days)
FANTASY MIS LUBRICAT	QL (24 boxes / 25 days)
K-Y ME & YOU MIS EX LUBRI	QL (24 each / 25 days)
K-Y ME & YOU MIS INTENSE	QL (24 each / 25 days)
KAMELEON LUB MIS COLORS	QL (24 boxes / 25 days)
KAMELEON MIS TRI-COLR	QL (24 boxes / 25 days)
KIMONO COLOR MIS	QL (24 each / 25 days)
KIMONO MICRO MIS THIN +	QL (24 boxes / 25 days)
KIMONO MICRO MIS THIN PLS	QL (24 each / 25 days)
KIMONO MIS LUBRICAT	QL (24 boxes / 25 days)
KIMONO MIS SENSATIO	QL (24 boxes / 25 days)
KIMONO PLUS MIS LUBRICAT	QL (24 boxes / 25 days)
KIMONO PLUS MIS SPERMICI	QL (24 boxes / 25 days)
KIMONO PS MIS LUBRICAT	QL (24 each / 25 days)
KIMONO PS MIS PLUS	QL (24 each / 25 days)
KIMONO SENA MIS PLUS	QL (24 each / 25 days)
KIMONO SPEC MIS	QL (24 each / 25 days)
MAXX MIS LUBRICAT	QL (24 boxes / 25 days)
MAXX PLUS MIS SPERMICI	QL (24 each / 25 days)
NATURAL COND MIS + LUBE	QL (24 boxes / 25 days)
REALITY MIS LUBRICAT	QL (24 boxes / 25 days)
REALITY ULTR MIS TEXTURED	QL (24 each / 25 days)
REALITY ULTR MIS THIN	QL (24 each / 25 days)
TRUSTEX LUBR MIS ASSORTED	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS BANANA	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS CHOC	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS COLA	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS COLORS	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS EX LARGE	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS EX STR	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS GRAPE	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS MINT	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS RIB/STUD	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS SPERMICI	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS STRWBRY	QL (24 boxes / 25 days)
TRUSTEX LUBR MIS VANILLA	QL (24 boxes / 25 days)
TRUSTEX/RIA MIS LUBRICAT	QL (24 boxes / 25 days)
TRUSTEX/RIA MIS SPERMICI	QL (24 boxes / 25 days)
TRUSTX NON-9 MIS RIB/STUD	QL (24 boxes / 25 days)
DIABETIC SUPPLIES	
DEXCOM G6 MIS RECEIVER	QL (1 each / 930 days)
DEXCOM G6 MIS SENSOR	QL (3 boxes / 25 days)

Drug Name	Requirements/Limits
DEXCOM G6 MIS TRANSMIT	QL (1 box / 76 days)
FREESTY LIBR KIT 2 SENSOR	QL (3 boxes / 25 days)
FREESTY LIBR MIS 2 READER	QL (1 each / 930 days)
FREESTYLE KIT SENSOR	QL (2 boxes / 23 days)
FREESTYLE MIS READER	QL (1 each / 930 days)
ONE TOUCH KIT VERIO FL	QL (1 kit / 612 days)
ONETOUCH KIT ULT MINI	QL (1 kit / 612 days)
ONETOUCH KIT ULTRA 2	QL (1 kit / 612 days)
ONETOUCH KIT VERIO	QL (1 kit / 612 days)
ONETOUCH KIT VERIO FL	QL (1 kit / 612 days)
ONETOUCH KIT VERIO IQ	QL (1 kit / 612 days)
ONETOUCH KIT VERIO RE	QL (1 kit / 612 days)
RELION TRUE KIT MET AIR	QL (1 kit / 612 days)
TRUE METRIX KIT AIR	QL (1 kit / 612 days)
TRUE METRIX KIT METER	QL (1 kit / 612 days)

MISC. DEVICES

ALCOH-WIPE MIS 12"X12"	QL (400 sheets / 25 days)
ALCOHOL SWABS	QL (10 pads / 1 day)
ALCOHOL SWABS- RX	QL (10 pads / 1 day)
ESSENTRA MIS 9X9"	QL (400 sheets / 25 days)

PARENTERAL THERAPY SUPPLIES

INSULIN SYRINGE/NEEDLE	QL (7 syringes / 1 day)
PEN NEEDLES MIS 29GX10MM	QL (7 needles / 1 day)
PEN NEEDLES MIS 29GX12.7	QL (7 needles / 1 day)
PEN NEEDLES MIS 29GX12MM	QL (7 needles / 1 day)
PEN NEEDLES MIS 31GX5MM	QL (7 needles / 1 day)
PEN NEEDLES MIS 31GX6MM	QL (7 needles / 1 day)
PEN NEEDLES MIS 31GX8MM	QL (7 pen needles / 1 day)
PEN NEEDLES MIS 32GX4MM	QL (7 needles / 1 day)
PEN NEEDLES MIS 32GX6MM	QL (7 needles / 1 day)
PEN NEEDLES MIS 32GX8MM	QL (7 needles / 1 day)

RESPIRATORY THERAPY SUPPLIES

SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE	QL (2 spacers / year)
SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE- RX	QL (2 spacers / year)

MIGRAINE PRODUCTS

MIGRAINE PRODUCTS

<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i> (generic of MIGRANAL)	QL (8 mL / 25 days)
MIGRANAL SPR 4MG/ML	QL (8 mL / 25 days)

SEROTONIN AGONISTS

AMERGE TAB 1MG	QL (9 tabs / 25 days)
AMERGE TAB 2.5MG	QL (9 tabs / 25 days)
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i> (generic of RELPAX)	QL (9 each / 25 days)

Drug Name	Requirements/Limits
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i> (generic of RELPAX)	QL (9 tabs / 25 days)
IMITREX SPR 5MG/ACT	QL (6 inhalers / 25 days)
IMITREX SPR 20MG/ACT	QL (6 inhalers / 25 days)
IMITREX TAB 25MG	QL (9 tabs / 25 days)
IMITREX TAB 50MG	QL (9 tabs / 25 days)
IMITREX TAB 100MG	QL (9 tabs / 25 days)
MAXALT TAB 10MG	QL (12 tabs / 25 days)
MAXALT-MLT TAB 10MG	QL (12 tabs / 25 days)
<i>naratriptan hcl tab 1 mg (base equiv)</i> (generic of AMERGE)	QL (9 tabs / 25 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i> (generic of AMERGE)	QL (9 tabs / 25 days)
ONZETRA XSAI MIS 11MG	QL (16 nosepieces / 25 days)
RELPAX TAB 20MG	QL (9 each / 25 days)
RELPAX TAB 40MG	QL (9 tabs / 25 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	QL (12 tabs / 25 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i> (generic of MAXALT-MLT)	QL (12 tabs / 25 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	QL (12 tabs / 25 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i> (generic of MAXALT)	QL (12 tabs / 25 days)
<i>sumatriptan nasal spray 5 mg/act</i> (generic of IMITREX)	QL (6 inhalers / 25 days)
<i>sumatriptan nasal spray 20 mg/act</i> (generic of IMITREX)	QL (6 inhalers / 25 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	QL (10 injections / 25 days)
<i>sumatriptan succinate tab 25 mg</i> (generic of IMITREX)	QL (9 tabs / 25 days)
<i>sumatriptan succinate tab 50 mg</i> (generic of IMITREX)	QL (9 tabs / 25 days)
<i>sumatriptan succinate tab 100 mg</i> (generic of IMITREX)	QL (9 tabs / 25 days)
<i>zolmitriptan nasal spray 5 mg/spray unit</i> (generic of ZOMIG)	QL (9 bottles / 25 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	QL (9 tabs / 25 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	QL (9 tabs / 25 days)
<i>zolmitriptan tab 5 mg</i> (generic of ZOMIG)	QL (9 tabs / 25 days)
ZOMIG SPR 5MG	QL (9 bottles / 25 days)
ZOMIG TAB 5MG	QL (9 tabs / 25 days)

MISCELLANEOUS THERAPEUTIC CLASSES

POTASSIUM REMOVING AGENTS

<i>sps sus 15gm/60</i>	QL (120 mL / 25 days)
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Drug Name	Requirements/Limits
MULTIVITAMINS	
B-COMPLEX W/ FOLIC ACID	
<i>b-complex w/ c & folic acid cap 1 mg</i>	QL (2 caps / 1 day)
<i>b-complex w/ c & folic acid cap 1 mg- rx</i>	QL (2 caps / 1 day)
PED MV W/ FLUORIDE	
FLORIVA DRO PLUS	QL (50 mL / 43 days)
<i>pediatric multiple vitamins w/ fluoride soln 0.5 mg/ml</i>	QL (50 mL / 43 days)
<i>pediatric multiple vitamins w/ fluoride soln 0.25 mg/ml</i>	QL (50 mL / 43 days)
QUFLORA PED DRO 0.5MG/ML	QL (50 mL / 43 days)
QUFLORA PED DRO 0.25MG	QL (50 mL / 43 days)
PRENATAL VITAMINS	
BRAINSTRONG MIS PRENATAL	QL (1 box / 1 day)
COMPLETE NAT PAK DHA	QL (1 box / 1 day)
COMPLETENATE CHW	QL (1 tab / 1 day)
FOLIVANE-OB CAP	QL (1 cap / 1 day)
OB COMPLETE TAB PREMIER	QL (1 tab / 1 day)
PNV TABS TAB 29-1MG	QL (1 tab / 1 day)
<i>pnv-dha cap</i>	QL (1 cap / 1 day)
PNV-OMEGA CAP	QL (1 cap / 1 day)
<i>pnv-select tab</i>	QL (1 tab / 1 day)
PRENATAL FRM TAB A-FREE	QL (1 tab / 1 day)
<i>prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg-rx</i>	QL (1 tab / 1 day)
PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG	QL (1 tab / 1 day)
PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG-RX	QL (1 tab / 1 day)
PRENATE CAP PIXIE	QL (2 caps / 1 day)
SE-NATAL 19 CHW	QL (1 tab / 1 day)
SE-NATAL 19 TAB	QL (1 tab / 1 day)
SELECT-OB CHW	QL (2 tabs / 1 day)
SELECT-OB+ PAK DHA	QL (1 box / 1 day)
TARON-C DHA CAP	QL (1 cap / 1 day)
THRIVITE RX TAB 29-1MG	QL (1 tab / 1 day)
VIRT-C DHA CAP	QL (1 cap / 1 day)
VIRT-PN DHA CAP	QL (1 cap / 1 day)
VIRT-PN PLUS CAP	QL (1 cap / 1 day)
VITAFOL-OB TAB 65-1MG	QL (1 tab / 1 day)
ZATEAN-PN CAP DHA	QL (1 cap / 1 day)
ZATEAN-PN CAP PLUS	QL (1 cap / 1 day)
MUSCULOSKELETAL THERAPY AGENTS	
CENTRAL MUSCLE RELAXANTS	
<i>carisoprodol tab 250 mg (generic of SOMA)</i>	AGE (Max age 65 years)
<i>carisoprodol tab 350 mg (generic of SOMA)</i>	QL (120 tabs / 25 days); AGE (Max age 65 years)

Drug Name	Requirements/Limits
SOMA TAB 250MG	AGE (Max age 65 years)
SOMA TAB 350MG	QL (120 tabs / 25 days); AGE (Max age 65 years)
<i>tizanidine hcl cap 2 mg (base equivalent)</i> (generic of ZANAFLEX)	AGE (Max age 65 years)
<i>tizanidine hcl cap 4 mg (base equivalent)</i> (generic of ZANAFLEX)	AGE (Max age 65 years)
<i>tizanidine hcl cap 6 mg (base equivalent)</i> (generic of ZANAFLEX)	AGE (Max age 65 years)
ZANAFLEX CAP 2MG	AGE (Max age 65 years)
ZANAFLEX CAP 4MG	AGE (Max age 65 years)
ZANAFLEX CAP 6MG	AGE (Max age 65 years)

MUSCLE RELAXANT COMBINATIONS

<i>carisoprodol w/ aspirin & codeine tab 200-325-16 mg</i>	AGE (Max age 65 years)
NORGESIC TAB FORTE	AGE (Max age 65 years)

NASAL AGENTS - SYSTEMIC AND TOPICAL

NASAL AGENTS - MISC.

NOZIN NASAL KIT SANITIZE	QL (400 mL / 25 days)
NOZIN NASAL MIS SANITIZE	QL (400 ea / 25 days)

NASAL STEROIDS

<i>aller-flo spr 50mcg</i>	QL (0.879 bottles / 25 days)
<i>allergy nasa spr 50mcg</i>	QL (1.013 bottles / 25 days)
<i>allergy relf spr 50mcg</i>	QL (1.013 bottles / 25 days)
<i>allergy relf spr 50mcg</i>	QL (1.441 bottles / 25 days)
<i>allgy relief spr 50mcg</i>	QL (1.013 bottles / 25 days)
<i>clarispray spr 50mcg</i>	QL (1.013 bottles / 25 days)
<i>fluticasone spr 50mcg</i>	QL (1.013 bottles / 25 days)
<i>fluticasone sus 50mcg</i>	QL (1.441 bottles / 25 days)

NUTRIENTS

MISC. NUTRITIONAL SUBSTANCES

<i>docosahexaenoic acid cap 200 mg</i>	QL (1 cap / 1 day)
<i>omega-3 fatty acids cap 1000 mg</i>	QL (6 caps / 1 day)

PHARMACEUTICAL ADJUVANTS

ANTIMICROBIAL AGENTS

BENZYL ALC LIQ	AGE (Min age 16 years and Max age 60 years)
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RESPIRATORY AGENTS - MISC.

CYSTIC FIBROSIS AGENTS

ORKAMBI TAB 200-125	QL (4 tabs / 1 day)
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ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS

PROTON PUMP INHIBITORS

ACIPHEX SPR CAP 5MG	QL (4 caps / 1 day)
ACIPHEX SPR CAP 10MG	QL (4 caps / 1 day)

Drug Name	Requirements/Limits
<i>lansoprazole tab delayed release orally disintegrating 15 mg (generic of PREVACID SOLUTAB)</i>	AGE (Max age 7 years)
<i>lansoprazole tab delayed release orally disintegrating 30 mg (generic of PREVACID SOLUTAB)</i>	AGE (Max age 7 years)
<i>pantoprazole sodium for delayed release susp packet 40 mg (generic of PROTONIX)</i>	AGE (Max age 6 years)
PREVACID TAB 15MG STB	AGE (Max age 7 years)
PREVACID TAB 30MG STB	AGE (Max age 7 years)
PROTONIX PAK 40MG	AGE (Max age 6 years)

VASOPRESSORS

ANAPHYLAXIS THERAPY AGENTS

<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (generic of EPIPEN 2-PAK)</i>	QL (2 pens / 25 days)
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NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS

<i>droxidopa cap 100 mg (generic of NORTHERA)</i>	QL (3 caps / 1 day)
<i>droxidopa cap 200 mg (generic of NORTHERA)</i>	QL (3 caps / 1 day)
<i>droxidopa cap 300 mg (generic of NORTHERA)</i>	QL (3 caps / 1 day)
NORTHERA CAP 100MG	QL (3 caps / 1 day)
NORTHERA CAP 200MG	QL (3 caps / 1 day)
NORTHERA CAP 300MG	QL (3 caps / 1 day)

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<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	15
<i>avita cre 0.025%</i>	26
<i>avita gel 0.025%</i>	26
AYVAKIT TAB 100MG	16
AYVAKIT TAB 200MG	16
AYVAKIT TAB 300MG	16
<i>azurette tab</i>	23
<i>azurette tab 28 day</i>	23
B	
BALVERSA TAB 3MG	17
BALVERSA TAB 4MG	17
BALVERSA TAB 5MG	17
<i>b-complex w/ c & folic acid cap 1 mg</i> 35	
<i>b-complex w/ c & folic acid cap 1 mg-rx</i>	35
BD ASSURE MIS BPM/AUTO.....	29
BD ASSURE MIS BPM/MAN	29
BD ASSURE MIS BPM/PORT	29
BD ASSURE MIS DELUXE.....	29
BD ASSURE MIS WRIST CU	29
<i>benzoyl peroxide gel 10%</i>	26
<i>benzoyl peroxide gel 2.5%</i>	26
<i>benzoyl peroxide gel 5%</i>	26
<i>benzoyl peroxide liq 10%</i>	26
<i>benzoyl peroxide liq 5%</i>	26
BENZOYL PEROXIDE LOTION 5%	26
<i>benztropine mesylate tab 0.5 mg</i>	19
<i>benztropine mesylate tab 1 mg</i>	19
<i>benztropine mesylate tab 2 mg</i>	19
BENZYL ALC LIQ	36
BENZYL BENZO LIQ.....	22
<i>betamethasone dipropionate oint 0.05%</i>	27
BETHKIS	
<i>see tobramycin nebu soln 300 mg/4ml</i>	9
BETHKIS NEB 300/4ML.....	9
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BLOOD PRESS KIT ADLT/LRG	29
BLOOD PRESS KIT CMPT/DIG	30
BLOOD PRESS KIT COMPACT	30
BLOOD PRESS KIT FINGER	30
BLOOD PRESS KIT MANUAL.....	30
BLOOD PRESS KIT MONITOR	30
BLOOD PRESS KIT OSCILLAT	30
BLOOD PRESS MIS MONITOR	30
BLOOD PRESS MIS PREM ARM	30
BLOOD PRESS MIS WRIST.....	30
BLOOD PRESS MIS WRIST CF	30
BLOOD PRESSR KIT TRAVEL	30

BLOOD PRESSU KIT DELUXE	30	<i>buprenorphine hcl-naloxone hcl sl film</i>	
BLOOD PRESSU KIT MANUAL.....	30	4-1 mg (base equiv)	11
BLOOD PRESSU MIS	30	<i>buprenorphine hcl-naloxone hcl sl film</i>	
BLOOD PRESSU MIS /MANUAL	30	8-2 mg (base equiv)	11
BLOOD PRESSU MIS MANUAL	30	<i>buprenorphine hcl-naloxone hcl sl tab</i>	
BLOOD PRESSU MIS MONITOR	30	2-0.5 mg (base equiv)	11
BLOOD PRESSU MIS VERSATII.....	30	<i>buprenorphine hcl-naloxone hcl sl tab</i>	
BLOOD PRESSU MIS WRIST.....	30	8-2 mg (base equiv)	11
BLOOD PRSSRE KIT MONITOR	30	<i>buprenorphine hcl sl tab 2 mg (base</i>	
BP CUFF MNTR MIS AUTOMATC.....	30	equiv).....	11
BP MONITOR KIT ARM	30	<i>buprenorphine hcl sl tab 8 mg (base</i>	
BP MONITOR KIT DELUXE	30	equiv).....	11
BP MONITOR KIT MANUAL.....	30	<i>buprenorphine td patch weekly 7.5</i>	
BP MONITOR KIT WRIST	30	mcg/hr	11
BP MONITOR MIS /WRIST	30	<i>butorphanol tartrate nasal soln 10</i>	
BP MONITOR MIS ADVANCED	30	mg/ml	11
BP MONITOR MIS ADV AUTO	30	BUTRANS	
BP MONITOR MIS ARM.....	30	see <i>buprenorphine td patch weekly</i>	
BP MONITOR MIS ARM PREM	30	7.5 mcg/hr	11
BP MONITOR MIS AUTO	30	BUTRANS DIS 7.5/HR.....	11
BP MONITOR MIS AUTO ARM	30	C	
BP MONITOR MIS AUTOMAT	30	CABOMETRYX TAB 20MG.....	17
BP MONITOR MIS AUTOMATI	30	CABOMETRYX TAB 40MG.....	17
BP MONITOR MIS DIGITAL	30	CABOMETRYX TAB 60MG.....	17
BP MONITOR MIS DLUX ARM	30	<i>caffeine citrate oral soln 60 mg/3ml</i>	
BP MONITOR MIS MANUAL	30	(10 mg/ml base equiv)	7
BP MONITOR MIS OMRON 10.....	30	CALQUENCE CAP 100MG	17
BP MONITOR MIS PREM/ARM.....	30	<i>camrese lo tab.....</i>	23
BP MONITOR MIS WRIST	30	<i>camrese tab</i>	23
BP MONITOR MIS WRST CUF	30	CARETOUCH BP MIS MONITOR.....	30
BP PREMIUM KIT WRIST	30	<i>carisoprodol tab 250 mg</i>	35
BRAFTOVI CAP 75MG.....	17	<i>carisoprodol tab 350 mg</i>	35
BRAINSTRONG MIS PRENATAL.....	35	<i>carisoprodol w/ aspirin & codeine tab</i>	
BRIVIACT SOL 10MG/ML	12	200-325-16 mg.....	36
BRUKINSA CAP 80MG	17	<i>cefaclor for susp 125 mg/5ml</i>	22
<i>budesonide-formoterol fumarate dihyd</i>		<i>cefaclor for susp 250 mg/5ml</i>	22
<i>aerosol 80-4.5 mcg/act</i>	12	<i>cefaclor for susp 375 mg/5ml</i>	22
<i>budesonide inhalation susp 0.25</i>		<i>cefprozil tab 250 mg.....</i>	22
<i>mg/2ml.....</i>	12	<i>cefprozil tab 500 mg.....</i>	22
<i>budesonide inhalation susp 0.5 mg/2ml</i>		CELEBREX	
.....	12	see <i>celecoxib cap 100 mg</i>	9
<i>budesonide inhalation susp 1 mg/2ml</i>		see <i>celecoxib cap 200 mg</i>	9
.....	12	see <i>celecoxib cap 400 mg</i>	9
<i>buprenorphine hcl-naloxone hcl sl film</i>		see <i>celecoxib cap 50 mg</i>	9
12-3 mg (base equiv)	11	CELEBREX CAP 100MG	9
<i>buprenorphine hcl-naloxone hcl sl film</i>		CELEBREX CAP 200MG	9
2-0.5 mg (base equiv)	11	CELEBREX CAP 400MG	9

CELEBREX CAP 50MG	9	CONCERTA TAB 18MG	7
<i>celecoxib cap 100 mg</i>	9	CONDOMS - FEMALE.....	31
<i>celecoxib cap 200 mg</i>	9	CONDOMS LATEX NON-LUBRICATED	31
<i>celecoxib cap 400 mg</i>	9	CONDOMS - MALE	31
<i>celecoxib cap 50 mg</i>	9	CONDOMS MIS LUBRICAT	32
CERDELGA CAP 84MG.....	29	COPIKTRA CAP 15MG	17
<i>cetirizine chw 10mg</i>	14	COPIKTRA CAP 25MG	17
<i>cetirizine hcl chew tab 5 mg</i>	14	<i>coricidin d tab</i>	24
<i>cetirizine hcl oral soln 1 mg/ml (5</i> <i>mg/5ml)</i>	14, 15	<i>croton lot 10%</i>	28
<i>cetirizine-pseudoephedrine tab er 12hr</i> <i>5-120 mg</i>	24	<i>cyclafem tab 7/7/7</i>	23
<i>chest conges tab 20-400mg</i>	24	D	
<i>chest conges tab relf dm</i>	24	<i>dasetta tab 7/7/7</i>	23
<i>chlorpheniramine & phenylephrine tab</i> <i>4-10 mg</i>	24	DAURISMO TAB 100MG.....	16
<i>choline fenofibrate cap dr 45 mg</i> <i>(fenofibric acid equiv)</i>	15	DAURISMO TAB 25MG	16
CIMDUO TAB 300-300	21	<i>daysee tab</i>	23
CIPRO (10%) SUS 500MG/5	29	DAYTRANA DIS 10MG/9HR.....	8
CIPRO (5%) SUS 250MG/5.....	29	DAYTRANA DIS 15MG/9HR.....	8
<i>clarispray spr 50mcg</i>	36	DAYTRANA DIS 20MG/9HR.....	8
CLEOCIN		DAYTRANA DIS 30MG/9HR.....	8
<i>see clindamycin hcl cap 150 mg</i>	12	DESCOVY TAB 200/25MG.....	21
<i>see clindamycin hcl cap 300 mg</i>	12	<i>desogest-eth estrad & eth estrad tab</i> <i>0.15-0.02/0.01 mg(21/5)</i>	23
<i>see clindamycin hcl cap 75 mg</i>	12	<i>desonide cream 0.05%</i>	27
CLEOCIN CAP 150MG.....	12	<i>desonide oint 0.05%</i>	27
CLEOCIN CAP 300MG.....	12	DESOWEN	
CLEOCIN CAP 75MG	12	<i>see desonide cream 0.05%</i>	27
<i>clindamycin hcl cap 150 mg</i>	12	DESOXYN	
<i>clindamycin hcl cap 300 mg</i>	12	<i>see methamphetamine hcl tab 5 mg</i> 6	
<i>clindamycin hcl cap 75 mg</i>	12	DESOXYN TAB 5MG.....	5
<i>clindamycin phosphate soln 1%</i>	26	DEXCOM G6 MIS RECEIVER.....	32
<i>clonidine hcl tab er 12hr 0.1 mg</i>	7	DEXCOM G6 MIS SENSOR	32
<i>colchicine tab 0.6 mg</i>	29	DEXCOM G6 MIS TRANSMIT	33
COLCRYS		DEXEDRINE	
<i>see colchicine tab 0.6 mg</i>	29	<i>see dextroamphetamine sulfate cap</i> <i>er 24hr 10 mg</i>	6
COLCRYS TAB 0.6MG.....	29	<i>see dextroamphetamine sulfate cap</i> <i>er 24hr 15 mg</i>	6
<i>cold & flu tab daytime</i>	24	<i>see dextroamphetamine sulfate cap</i> <i>er 24hr 5 mg</i>	6
<i>cold & flu tab severe</i>	24	DEXEDRINE CAP 10MG CR	5
COLOR CONDOM MIS + LUBE	31	DEXEDRINE CAP 15MG CR	6
COMPLETENATE CHW	35	DEXEDRINE CAP 5MG CR	5
COMPLETE NAT PAK DHA	35	<i>dexmethylphenidate hcl cap er 24 hr</i> <i>10 mg</i>	8
COMTREX COLD TAB /CGH MAX	24	<i>dexmethylphenidate hcl cap er 24 hr</i> <i>15 mg</i>	8
CONCERTA			
<i>see methylphenidate hcl tab er</i> <i>osmotic release (osm) 18 mg</i>	9		

<i>dexmethylphenidate hcl cap er 24 hr</i>		<i>droxidopa cap 100 mg</i>	37
20 mg	8	<i>droxidopa cap 200 mg</i>	37
<i>dexmethylphenidate hcl cap er 24 hr</i>		<i>droxidopa cap 300 mg</i>	37
25 mg	8	DUAVEE TAB 0.45-20	28
<i>dexmethylphenidate hcl cap er 24 hr</i>		DUREX EXTRA MIS SENSITIV.....	32
30 mg	8	DYANAVEL XR SUS 2.5MG/ML.....	6
<i>dexmethylphenidate hcl cap er 24 hr</i>		E	
35 mg	8	<i>efavirenz-lamivudine-tenofovir df tab</i>	
<i>dexmethylphenidate hcl cap er 24 hr</i>		400-300-300 mg	21
40 mg	8	<i>efavirenz-lamivudine-tenofovir df tab</i>	
<i>dexmethylphenidate hcl cap er 24 hr 5</i>		600-300-300 mg	21
mg	8	ELESTRIN GEL 0.06%	28
<i>dextroamphetamine sulfate cap er 24hr</i>		<i>eletriptan hydrobromide tab 20 mg</i>	
10 mg	6	(base equivalent)	33
<i>dextroamphetamine sulfate cap er 24hr</i>		<i>eletriptan hydrobromide tab 40 mg</i>	
15 mg	6	(base equivalent)	34
<i>dextroamphetamine sulfate cap er 24hr</i>		ELIDEL	
5 mg	6	see <i>pimecrolimus cream 1%</i>	27
<i>dextroamphetamine sulfate oral</i>		ELIDEL CRE 1%	27
<i>solution 5 mg/5ml</i>	6	EPCLUSA TAB 400-100	21
<i>dextroamphetamine sulfate tab 15 mg</i>	6	<i>epinephrine solution auto-injector 0.3</i>	
<i>dextroamphetamine sulfate tab 20 mg</i>	6	mg/0.3ml (1:1000)	37
<i>dextroamphetamine sulfate tab 30 mg</i>	6	EPIPEN 2-PAK	
<i>dextromethorphan-guaifenesin tab 20-</i>		see <i>epinephrine solution auto-</i>	
400 mg	24	<i>injector 0.3 mg/0.3ml (1:1000)</i> ..	37
<i>dextromethorphan-guaifenesin tab er</i>		EQ BP MONITO MIS WRIST.....	30
12hr 30-600 mg.....	24	<i>eq mucus dm tab 60-1200</i>	24
<i>dextromethorphan-guaifenesin tab er</i>		ERIVEDGE CAP 150MG.....	16
12hr 60-1200 mg	24	ERLEADA TAB 60MG	16
<i>dextromethorphan-phenylephrine-apap</i>		<i>erlotinib hcl tab 100 mg (base</i>	
<i>tab 10-5-325 mg</i>	24	equivalent).....	16
<i>diclofenac sodium (actinic keratoses)</i>		<i>erlotinib hcl tab 150 mg (base</i>	
<i>gel 3%</i>	27	equivalent).....	16
<i>diclofenac sodium gel 1%</i>	27	<i>erlotinib hcl tab 25 mg (base</i>	
DIFFERIN GEL 0.1%	26	equivalent).....	16
<i>digoxin oral soln 0.05 mg/ml</i>	22	<i>erythromycin soln 2%</i>	26
<i>dihydroergotamine mesylate nasal</i>		ESSENTRA MIS 9X9.....	33
<i>spray 4 mg/ml</i>	33	ESTRADIOL POW.....	22
DIVIGEL GEL 0.25MG	28	ESTRADIOL POW MICRONIZ	22
DIVIGEL GEL 0.5MG	28	<i>estradiol td patch twice weekly 0.0375</i>	
DIVIGEL GEL 1MG/GM	28	mg/24hr	28
<i>docosahexaenoic acid cap 200 mg</i>	36	<i>estradiol td patch twice weekly 0.05</i>	
<i>dotti dis 0.0375mg</i>	28	mg/24hr	28
<i>dotti dis 0.05mg</i>	28	<i>estradiol td patch twice weekly 0.075</i>	
<i>dotti dis 0.075mg</i>	28	mg/24hr	28
<i>dotti dis 0.1mg</i>	28	<i>estradiol td patch twice weekly 0.1</i>	
<i>doxepin hcl cream 5%</i>	27	mg/24hr	28

ESTRIOL POW.....	22		
ESTRIOL POW MICRONIZ	22		
EVAMIST SPR 1.53MG	28		
everolimus tab 10 mg.....	17		
everolimus tab 2.5 mg.....	17		
everolimus tab 5 mg.....	17		
everolimus tab 7.5 mg.....	17		
everolimus tab for oral susp 2 mg	17		
everolimus tab for oral susp 3 mg	17		
everolimus tab for oral susp 5 mg	17		
F			
FANAPT PAK	20		
FANAPT TAB 10MG	20		
FANAPT TAB 12MG	20		
FANAPT TAB 1MG.....	20		
FANAPT TAB 2MG	20		
FANAPT TAB 4MG.....	20		
FANAPT TAB 6MG	20		
FANAPT TAB 8MG.....	20		
FANTASY LUBR MIS.....	32		
FANTASY LUBR MIS COLORS	32		
FANTASY LUBR MIS SPERMICI	32		
FANTASY MIS LUBRICAT	32		
<i>fenestin dm tab 20-400</i>	24		
<i>fenofibrate micronized cap 43 mg</i>	15		
<i>fenofibrate tab 145 mg</i>	15		
<i>fenofibrate tab 160 mg</i>	15		
<i>fantanyl td patch 72hr 100 mcg/hr</i> ...	10		
<i>fantanyl td patch 72hr 12 mcg/hr</i>	10		
<i>fantanyl td patch 72hr 25 mcg/hr</i>	10		
<i>fantanyl td patch 72hr 75 mcg/hr</i>	10		
FEVERALL INF SUP 80MG.....	9		
FEVERALL SUP 325MG.....	9		
<i>fexofenadine hcl tab 180 mg</i>	15		
<i>fexofenadine hcl tab 60 mg</i>	15		
FLORIVA DRO PLUS.....	35		
FLOVENT HFA AER 110MCG.....	12		
FLOVENT HFA AER 44MCG.....	12		
<i>fluocinonide cream 0.05%</i>	27		
<i>fluticasone spr 50mcg</i>	36		
<i>fluticasone sus 50mcg</i>	36		
FOCALIN XR			
<i>see dexmethylphenidate hcl cap er</i>			
24 hr 10 mg	8		
<i>see dexmethylphenidate hcl cap er</i>			
24 hr 15 mg	8		
<i>see dexmethylphenidate hcl cap er</i>			
24 hr 20 mg	8		
<i>see dexmethylphenidate hcl cap er</i>			
24 hr 25 mg	8		
<i>see dexmethylphenidate hcl cap er</i>			
24 hr 30 mg	8		
<i>see dexmethylphenidate hcl cap er</i>			
24 hr 35 mg	8		
<i>see dexmethylphenidate hcl cap er</i>			
24 hr 40 mg	8		
<i>see dexmethylphenidate hcl cap er</i>			
24 hr 5 mg	8		
FOCALIN XR CAP 10MG	8		
FOCALIN XR CAP 15MG	8		
FOCALIN XR CAP 20MG	8		
FOCALIN XR CAP 25MG	8		
FOCALIN XR CAP 30MG	8		
FOCALIN XR CAP 35MG	8		
FOCALIN XR CAP 40MG	8		
FOCALIN XR CAP 5MG	8		
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FREESTYLE KIT SENSOR	33		
FREESTYLE MIS READER.....	33		
FREESTY LIBR KIT 2 SENSOR	33		
FREESTY LIBR MIS 2 READER	33		
G			
<i>gabapentin cap 100 mg</i>	12		
<i>gabapentin cap 300 mg</i>	12		
<i>gabapentin cap 400 mg</i>	12		
<i>gabapentin oral soln 250 mg/5ml</i>	13		
<i>gabapentin tab 600 mg</i>	13		
<i>gabapentin tab 800 mg</i>	13		
GENVOYA TAB	21		
GEODON			
<i>see ziprasidone hcl cap 20 mg</i>	20		
<i>see ziprasidone hcl cap 40 mg</i>	20		
<i>see ziprasidone hcl cap 60 mg</i>	20		
<i>see ziprasidone hcl cap 80 mg</i>	20		
<i>see ziprasidone mesylate for inj 20</i>			
mg (base equivalent)	20		
GEODON CAP 20MG	20		
GEODON CAP 40MG	20		
GEODON CAP 60MG	20		
GEODON CAP 80MG	20		
GEODON INJ 20MG	20		

GILOTRIF TAB 20MG	16
GILOTRIF TAB 30MG	16
GILOTRIF TAB 40MG	16
GLEEVEC	
<i>see imatinib mesylate tab 100 mg</i>	
<i>(base equivalent)</i>	18
<i>see imatinib mesylate tab 400 mg</i>	
<i>(base equivalent)</i>	18
GLEEVEC TAB 100MG	17
GLEEVEC TAB 400MG	17
<i>glucagon (rdna) for inj kit 1 mg</i>	14
GLUCAGON EMERGENCY KIT	
<i>see glucagon (rdna) for inj kit 1 mg</i>	
.....	14
GLUCAGON KIT 1MG	14
<i>gnp allergy tab relief</i>	24
<i>gnp sinus tab 5-325mg</i>	24
GOJJI BP KIT MONITOR	31
<i>granisetron hcl inj 1 mg/ml</i>	14
<i>guanfacine hcl tab er 24hr 1 mg (base</i>	
<i>equiv)</i>	7
<i>guanfacine hcl tab er 24hr 2 mg (base</i>	
<i>equiv)</i>	7
<i>guanfacine hcl tab er 24hr 3 mg (base</i>	
<i>equiv)</i>	7
<i>guanfacine hcl tab er 24hr 4 mg (base</i>	
<i>equiv)</i>	7
H	
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<i>see triazolam tab 0.25 mg</i>	29
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HEART CHECK MIS BP WRIST	31
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HM BP MONITO MIS AUTOMATI.....	31
HM BP MONITO MIS DELUXE	31
HM BP MONITO MIS MANUAL.....	31
HM BP MONITO MIS SER 200.....	31
HM BP MONITO MIS WRIST	31
<i>hm daytime tab cld/flu</i>	24
<i>hm mucus dm tab 60-1200</i>	24
<i>hm severe tab cold/flu</i>	24
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<i>hydromorphone hcl tab er 24hr 12 mg</i>	
.....	10

<i>hydromorphone hcl tab er 24hr 16 mg</i>	
.....	10
<i>hydromorphone hcl tab er 24hr 8 mg</i>	10
HYDROXYPROG POW CAPROATE	22
I	
IBRANCE CAP 100MG	17
IBRANCE CAP 125MG	17
IBRANCE CAP 75MG	17
IBRANCE TAB 100MG	17
IBRANCE TAB 125MG	17
IBRANCE TAB 75MG	17
<i>iclevia tab</i>	23
IDHIFA TAB 100MG	18
IDHIFA TAB 50MG	18
<i>imatinib mesylate tab 100 mg (base</i>	
<i>equivalent)</i>	18
<i>imatinib mesylate tab 400 mg (base</i>	
<i>equivalent)</i>	18
IMBRUVICA CAP 140MG	18
IMBRUVICA CAP 70MG.....	18
IMBRUVICA TAB 140MG	18
IMBRUVICA TAB 280MG	18
IMBRUVICA TAB 420MG	18
IMBRUVICA TAB 560MG	18
IMITREX	
<i>see sumatriptan nasal spray 20</i>	
<i>mg/act</i>	34
<i>see sumatriptan nasal spray 5</i>	
<i>mg/act</i>	34
<i>see sumatriptan succinate tab 100</i>	
<i>mg</i>	34
<i>see sumatriptan succinate tab 25 mg</i>	
.....	34
<i>see sumatriptan succinate tab 50 mg</i>	
.....	34
IMITREX SPR 20MG/ACT	34
IMITREX SPR 5MG/ACT	34
IMITREX TAB 100MG	34
IMITREX TAB 25MG	34
IMITREX TAB 50MG	34
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INCONTROL MIS DELUXE	31
INCONTROL MIS PREMIUM	31
INCRUSE ELPT INH 62.5MCG	12
INLYTA TAB 1MG.....	15
INLYTA TAB 5MG.....	15

INREBIC CAP 100MG	18
INSULIN SYRINGE/NEEDLE.....	33
<i>introvale tab</i>	23
INTUNIV	
<i>see guanfacine hcl tab er 24hr 1 mg</i>	
<i>(base equiv)</i>	7
<i>see guanfacine hcl tab er 24hr 2 mg</i>	
<i>(base equiv)</i>	7
<i>see guanfacine hcl tab er 24hr 3 mg</i>	
<i>(base equiv)</i>	7
<i>see guanfacine hcl tab er 24hr 4 mg</i>	
<i>(base equiv)</i>	7
INTUNIV TAB 1MG	7
INTUNIV TAB 2MG	7
INTUNIV TAB 3MG	7
INTUNIV TAB 4MG	7
INVEGA SUST INJ 117/0.75.....	20
INVEGA SUST INJ 156MG/ML.....	20
INVEGA SUST INJ 234/1.5	20
INVEGA SUST INJ 39/0.25	20
INVEGA SUST INJ 78/0.5ML	20
INVOKAMET TAB 150-1000	14
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IRESSA TAB 250MG.....	16
ISENTRESS HD TAB 600MG	21
<i>isotretinoin cap 10 mg</i>	26
<i>isotretinoin cap 20 mg</i>	26
<i>isotretinoin cap 30 mg</i>	26
ISOTRETINOIN CAP 30 MG	
<i>see isotretinoin cap 30 mg</i>	26
<i>isotretinoin cap 40 mg</i>	26
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<i>jaimiess tab</i>	23
JAKAFI TAB 10MG	18
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<i>see clonidine hcl tab er 12hr 0.1 mg</i> 7	

<i>kariva tab 28 day</i>	23
KEPPRA XR	
<i>see levetiracetam tab er 24hr 500</i>	
<i>mg</i>	13
<i>see levetiracetam tab er 24hr 750</i>	
<i>mg</i>	13
KEPPRA XR TAB 500MG.....	13
KEPPRA XR TAB 750MG.....	13
KIMONO COLOR MIS	32
KIMONO MICRO MIS THIN +	32
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SUBOXONE MIS 2-0.5MG	11
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sudogest tab 4-60mg	25
sumatriptan nasal spray 20 mg/act ..	34
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sumatriptan succinate inj 6 mg/0.5ml	34
sumatriptan succinate tab 100 mg....	34
sumatriptan succinate tab 25 mg	34
sumatriptan succinate tab 50 mg	34
sunitinib malate cap 12.5 mg (base equivalent)	19
sunitinib malate cap 25 mg (base equivalent)	19
sunitinib malate cap 37.5 mg (base equivalent)	19
sunitinib malate cap 50 mg (base equivalent)	19
suphedrine tab pe	25
SUTENT	
see sunitinib malate cap 12.5 mg (base equivalent)	19
see sunitinib malate cap 25 mg (base equivalent)	19
see sunitinib malate cap 37.5 mg (base equivalent)	19
see sunitinib malate cap 50 mg (base equivalent)	19
SUTENT CAP 12.5MG	19
SUTENT CAP 25MG	19
SUTENT CAP 37.5MG	19
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tab tussin tab 20-400mg	25
tab tussin tab dm	25
tacrolimus oint 0.03%	28
tacrolimus oint 0.1%	28
TAFINLAR CAP 50MG	19
TAFINLAR CAP 75MG	19
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TAMIFLU CAP 45MG	21
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TARCEVA TAB 100MG	16
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<i>tizanidine hcl cap 4 mg (base equivalent)</i>	36	TRUE METRIX KIT AIR	33
<i>tizanidine hcl cap 6 mg (base equivalent)</i>	36	TRUE METRIX KIT METER	33
<i>tobramycin nebu soln 300 mg/4ml</i>	9	TRULICITY INJ 0.75/0.5	14
<i>topiramate cap er 24hr sprinkle 100 mg</i>	14	TRULICITY INJ 1.5/0.5.....	14
<i>topiramate cap er 24hr sprinkle 150 mg</i>	14	TRULICITY INJ 3/0.5	14
<i>topiramate cap er 24hr sprinkle 200 mg</i>	14	TRULICITY INJ 4.5/0.5.....	14
<i>topiramate cap er 24hr sprinkle 25 mg</i>	13	TRUSTEX/RIA MIS LUBRICAT	32
<i>topiramate cap er 24hr sprinkle 50 mg</i>	13	TRUSTEX/RIA MIS SPERMICI	32
TOUJEO MAX INJ 300IU/ML	14	TRUSTEX LUBR MIS ASSORTED	32
TOUJEO SOLO INJ 300IU/ML	14	TRUSTEX LUBR MIS BANANA	32
<i>tretinoin cream 0.025%</i>	27	TRUSTEX LUBR MIS CHOC.....	32
<i>tretinoin cream 0.05%</i>	27	TRUSTEX LUBR MIS COLA	32
<i>tretinoin cream 0.1%</i>	27	TRUSTEX LUBR MIS COLORS	32
<i>tretinoin gel 0.01%</i>	27	TRUSTEX LUBR MIS EX LARGE	32
<i>tretinoin gel 0.025%</i>	27	TRUSTEX LUBR MIS EX STR.....	32
<i>tretinoin microsphere gel 0.04%</i>	27	TRUSTEX LUBR MIS GRAPE	32
<i>tretinoin microsphere gel 0.1%</i>	27	TRUSTEX LUBR MIS MINT	32
<i>triazolam tab 0.125 mg</i>	29	TRUSTEX LUBR MIS RIB/STUD.....	32
<i>triazolam tab 0.25 mg</i>	29	TRUSTEX LUBR MIS SPERMICI	32
TRICOR		TRUSTEX LUBR MIS STRWBRY	32
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<i>trihexyphenidyl hcl tab 2 mg</i>	20	TYLENOL CHLD SUS 160/5ML.....	9
<i>trihexyphenidyl hcl tab 5 mg</i>	20	TYLENOL INFA SUS 160/5ML.....	9
TRILIPIX		<i>tylenol sinu tab 5-325mg</i>	25
<i>see choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	15	TYLENOL SUS 160/5ML	10
TRILIPIX CAP 45MG.....	15	U	
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<i>tri-lo tab estaryl</i>	23	UPTRAVI TAB 1200MCG	22
<i>tri-lo- tab marzia</i>	23	UPTRAVI TAB 1400MCG	22
<i>tri-lo- tab sprintec</i>	23	UPTRAVI TAB 1600MCG	22
TRINTELLIX TAB 10MG	14	UPTRAVI TAB 200MCG	22
		UPTRAVI TAB 400MCG	22
		UPTRAVI TAB 600MCG	22
		UPTRAVI TAB 800MCG	22
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<i>vigabatrin powd pack 500 mg</i>	14	<i>equivalent)</i>	36
<i>vigadrone pow 500mg</i>	14	<i>see tizanidine hcl cap 4 mg (base</i>	
<i>viorele tab</i>	23	<i>equivalent)</i>	36
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VIVELLE-DOT DIS 0.0375MG	29	<i>zenzedi tab 15mg</i>	6
VIVELLE-DOT DIS 0.05MG.....	29	<i>zenzedi tab 2.5mg</i>	6
VIVELLE-DOT DIS 0.075MG.....	29	<i>zenzedi tab 20mg</i>	7
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VIZIMPRO TAB 30MG.....	16	<i>zenzedi tab 7.5mg</i>	6
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<i>volnea tab</i>	23	<i>ziprasidone hcl cap 40 mg</i>	20
VOLTAREN		<i>ziprasidone hcl cap 60 mg</i>	20
<i>see diclofenac sodium gel 1%</i>	27	<i>ziprasidone hcl cap 80 mg</i>	20
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VYVANSE CAP 10MG.....	6	<i>(base equivalent)</i>	20
VYVANSE CAP 20MG.....	6	ZOLINZA CAP 100MG	19
VYVANSE CAP 30MG.....	6	<i>zolmitriptan nasal spray 5 mg/spray</i>	
VYVANSE CAP 40MG.....	6	<i>unit</i>	34
VYVANSE CAP 50MG.....	6	<i>zolmitriptan orally disintegrating tab</i>	
VYVANSE CAP 60MG.....	6	<i>2.5 mg</i>	34
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W		<i>mg</i>	34
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<i>wal-zyr chw 5mg</i>	15	ZOMIG	
X		<i>see zolmitriptan nasal spray 5</i>	
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